



How to Navigate Learner Mistreatment → Primer for teachers



Who is this for?

Frontline learner-facing teachers (faculty, senior medical students, residents, and fellows teaching or supervising a medical learner in various environments) when they witness mistreatment or are approached by a learner with a disclosure about mistreatment.



Why is this important?

Around 40% of undergraduate and postgraduate learners report that they have experienced discrimination or harassment at least once in the prior academic year.



How can we create a space that is safe for learners to seek or receive support from frontline faculty and learner-facing teachers in instances where they experience mistreatment?

1. Proactively discussing learner experience and mistreatment as part of learner orientation
2. Proactively reaching out to learners to change structures to better support them
3. Be aware of scenarios that constitute learner mistreatment
4. Scheduling check-ins to allow learners to provide feedback and being prepared to receive constructive feedback on the conduct of colleagues and self in this regard

What do we mean when we say Learner Mistreatment?

Learner mistreatment refers to intentional or unintentional behaviours that show disrespect for the dignity of others. This can be further categorized as:

- Unprofessional Behaviour
- Discrimination and Discriminatory Harassment
- Sexual Harassment or Violence

For a list of examples that are by no means exhaustive, please see the [learner mistreatment webpages](#). However the bottom line is, if you feel unsettled by something you witnessed or something a learner told you, please don't hesitate to reach out to the [Learner Experience Team](#) in the Office of Learner Affairs.

What can I do to support a learner?

This primer covers **two common situations** experienced by frontline faculty and learner facing teachers:

1. When you witness learner mistreatment

If appropriate, end the encounter where learner mistreatment is occurring (for e.g., if learner mistreatment by patient or family in clinical encounter), or if it is safer for the learner, wait and check-in afterwards with the learner.

2. When a learner comes to you wishing to discuss a mistreatment incident

It was likely a difficult decision for the learner to bring this up to you.

It is important to actively listen, acknowledge, and validate.

Possible steps you may consider

Assess which elements may align with the context within which you are working with the learner. Keep the encounters education centred with the goal of building an educational alliance.

Ask permission to explore the learners' experience

Helpful phrases might include:

“You can share none, some or all of what happened – and whatever you are comfortable with, and whatever will help me to know how best to support you”

Support the learner by validating their experiences

The focus is on support, not investigating at this stage. Other questions/statements might include:

“How can I best support you? I’m really sorry you had to experience that. That sounds very difficult/hard/challenging.”
“You have a right to be safe and respected.”
“You deserve to learn and train in a safe and supportive environment.”
“Mistreatment is never ok.”

Avoid phrases that relate to investigating and adjudicating:

“Who else was there?”; “Has this happened before?”;
“I’m sure they did not mean it in this way.”

Consider the importance of transparency

Inform the learner how you can help, and who you can refer them to. Maintain boundaries and avoid a clinician therapy centred approach – you are there to support, not to treat.

“I am able to help by doing x, y, z but for more support I would need to recommend other resources or support from other individuals in our program who are trained and better equipped to assist you more, if that is what you would wish.”

Reassure learner about ensuring privacy

Unless concerned about safety or there is a mandatory reporting requirement, let them know that you will take direction from them and can share options of what they can do.

“I understand the importance of respect and ensuring your privacy in this matter and I would like to assure you that I will uphold this. I will take my direction from you and we can discuss options of what you can do. However, I have a responsibility to bring this forward if there are concerns about your safety or if there are institutional requirements to report.”

Ask for permission at the end of the meeting to follow up

If permitted, check-in to ensure they have been connected with appropriate resources. Following up with a learner who has experienced mistreatment can have a positive impact in the aftermath.

At any time before, during, or after the interaction

- **If emergent** (imminent risk of harm to self or others, or significant change in learner’s wellness or function) – **call 911** or refer to local Emergency Department
 - **Reach out for support for yourself:** If you are not sure if you are facing a mandatory reporting requirement or if this is a high-risk situation, you should immediately contact the Director of Learner Experience
 - **If needed,** recommend resources or sources of additional support (see below)
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Resources (links) and Next Steps

- [Learner Experience Team, Office of Learner Affairs](#) (if looking for direction on how to proceed)
- [Office of Learner Affairs](#) (for additional supports around wellness, accommodations, leaves of absence)
- [MD Learner Mistreatment Protocol and PGME Guidelines for Managing Disclosures Link](#)
- [To disclose or report learner mistreatment](#)
- [Office of Inclusion and Diversity | Temerty Faculty of Medicine \(utoronto.ca\)](#)
- [Gerstein Centre](#) (24-hr crisis phone service) 416-929-5200; gersteincentre.org
- [Health & Wellness Centre \(St. George\):](#)
214 College St., 2nd Floor, Suite #232 – 416 978 8030; studentlife.utoronto.ca/hwc
- [Health & Wellness Centre \(UTM\):](#)
1123A-3359 Mississauga Rd., Davis Bldg. (around the corner from the Bookstore)
905-828-5255; utm.utoronto.ca/health/wellness
- [What’s Up Walk-in Clinic](#) (for urgent but not emergent psychotherapy needs):
416-395-0660 (downtown) 416-394-2424 (west) whatsupwalkin.ca