

Ethics Education in Family Medicine Training in the United States:

A National Survey

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BACKGROUND AND OBJECTIVES: Although professional organizations endorse ethics education in family medicine training, there is little published evidence that ethics teaching occurs. This survey collated data on the aims, content, pedagogical methods, assessment, and barriers relating to formal ethics education in family medicine residency programs in the United States.

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METHODS: A questionnaire surveyed all 445 family medicine residency programs in the United States.

RESULTS: Forty percent of programs responded (178/445). Of these, 95% formally teach at least one ethics topic, 68.2% teach six or more topics, and 7.1% teach all 13 core topics specified in the questionnaire. Programs show variation, providing between zero to 100 hours' ethics education over the 3 years of residency training. Of the responding programs, 3.5% specify well-defined aims for ethics teaching, 25.9% designate overall responsibility for the ethics curriculum to one individual, and 33.5% formally assess ethics competencies. The most frequent barriers to ethics education are finding time in residents' schedules (59.4%) and educator expertise (21.8%).

CONCLUSIONS: Considerable variation in ethics education is apparent in both curricular content and delivery among family medicine residency programs in the United States. Additional findings included a lack of specification of explicit curricular aims for ethics teaching allied to ACGME or AAFP competencies, a tendency not to designate one faculty member with lead responsibility for ethics teaching in the residency program, and a lack of formal assessment of ethics competencies. This has occurred in the context of an absence of robust assessment of ethics competencies at board certification level.