
Religiosity Predicts Discrimination, Accommodation, and Career Outcomes for Muslim Physicians in Academic Medicine

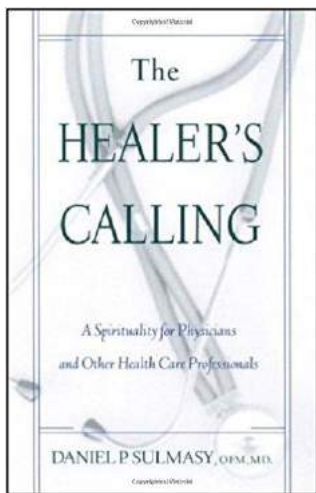
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Background Contexts



- Workforce diversity offers multiple pt-level and societal benefits
 - Yet, significant numbers of physicians from minority backgrounds encounter workplace discrimination
 - leads to job turnover & career dissatisfaction



- Religion strongly influences the practices of ~50% of US physicians
 - DEI efforts often overlook the religious identities of physicians
 - Religion-related discrimination & strategies for accommodation are understudied and less well known

Study Aims & Methods

- Examine relationships between physician religiosity, perceived discrimination and accommodation, sociodemographic characteristics and job-related outcomes
- Recruited from 3 national Muslim clinician organizations for survey +/- interviews
- Inclusion Criteria:
 - English-speaking, self-identify as Muslim, and work(ed) at university-affiliated hospital in the US within the past 20 years.



American Muslim physicians



SEPTEMBER 2012
REPORT

ISPU

A Window Into American Muslim Physicians:

CIVIC ENGAGEMENT AND COMMUNITY PARTICIPATION

THEIR DIVERSITY, CONTRIBUTIONS & CHALLENGES

W. Abu-Ras, L.D. Laird & F. Senzai
ISPU Fellows



- Comprise over 5% of the physician workforce (>50,000)
 - A significant source are IMGs [25% of US docs]
 - Pakistan 5% of IMG pool (#4)
 - Egypt 2% (#8)
 - Iran 2% (#12)
 - Syria 1.5% (#16)
 - India 20% (#1- significant percentage are Muslim)
- Social Characteristics
 - Very socially active and highly religious
 - “High value” profession
 - More civically active post-9/11

Survey Measures

- Religiosity
 - DUREL
 - Religious importance
- Perceived discrimination
 - Discrimination over career & current
 - Refusal of care
- Religious accommodation
 - Prayer and general identity
- Outcomes
 - Job turnover
 - Depression screen (well-being)

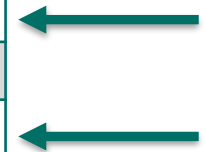


Sociodemographic Profile (n=264)

CHARACTERISTIC	N	%	Mean (SD)
Age	N=227		39.5 (10.03)
Sex	N=246		
Male	160	65%	←
Female	86	35%	
Race/Ethnicity	N=247		
South Asian	82	33%	
Arab Or Middle Eastern	55	22%	
White/Caucasian	70	28%	
Black/African American	40	16%	
Residency Status	N=247		
Born In U.S.	146	59%	←
Immigrated To U.S as a Child	57	23%	
Immigrated To U.S as an Adult	41	17%	
Years Practicing Medicine	N=205		11.21 (11.44)
Hijab/Beard	N=235		
Yes	135	57.5%	←
Religious Affiliation	N=243		
Sunni	284	75.7%	←
Shi'ite	59	24.3%	

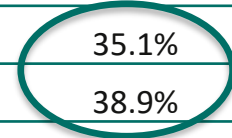
Sociodemographic Profile

CHARACTERISTIC	N	%
Practice Type	N=236	
Teaching Hospital	72	30.5%
Physician Office/Solo Practice	48	20.3%
Physician Office or Single-Specialty Group	93	39.4%
Non-Teaching Hospital	23	9.8%
U.S. Medical School Graduate	N=243	
Yes	190	78.2%
Primary Language	N=246	
English	180	73.2%
Urdu	41	16.7%
Arabic	25	10.1%
Most Targeted Social Identity	N=244	
Religion	119	48.8%
Race	52	21.3%
Ethnicity	40	16.4%
Sex	23	9.4%



Religiosity Profile

CHARACTERISTIC	N	%
Religious Importance	N=254	
Low importance (“Not at all important” or “Fairly important”)	68	26.3%
High importance (“Very important” or “The most important”)	191	73.8%
I try to carry Islam into all dealings in life (part of DUREL; intrinsic religiosity)	N=262	
Definitely not true	4	1%
Tends not to be true	20	7.7%
Unsure	44	16.8%
Tends to be true	92	35.1%
Definitely true of me	102	38.9%

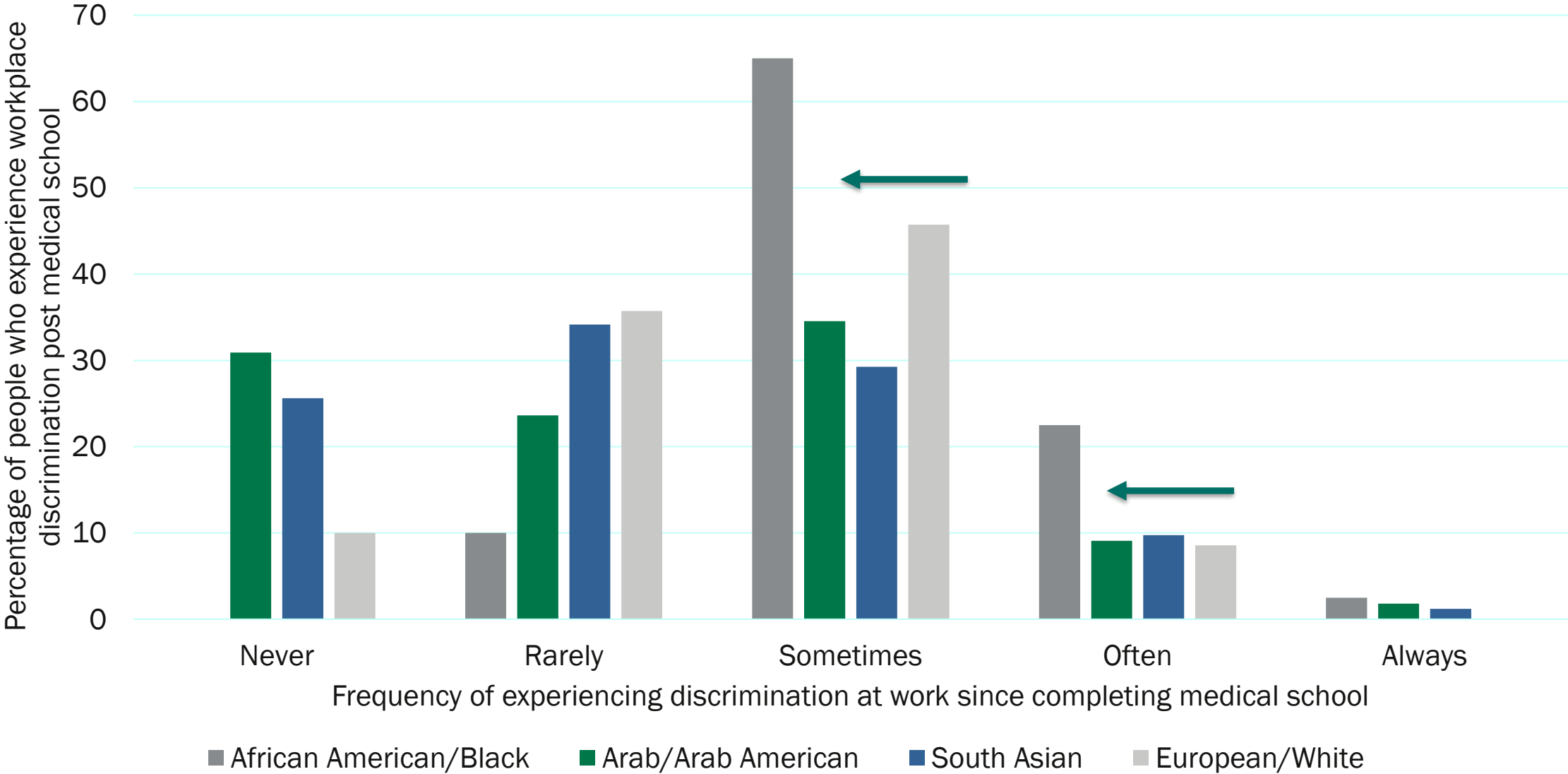


Frequency Of Experiencing Religious Discrimination at Workplace Over Career Course	2013 N=251		2021 N=258		<0.01	
Often/Always	12	5%		31	12%	
Sometimes	48	19%		105	41%	
Rarely	112	45%		76	30%	
Never	79	32%		46	18%	
Experience Religious Discrimination at Their Current Workplace	N=250		N=256		<0.01	
Agree	36	14%		91	36%	
Disagree	214	86%		165	64%	
Believe They Have Been Passed Over for Professional Advancement Because Of Their Religion	N=254		N=254		<0.01	
Yes/Probably	30	12%		59	23%	
Possibly	31	12%		86	34%	
Not To My Knowledge	107	42%		58	23%	
No	86	34%		51	20%	
Left A Job Due to Discrimination at Workplace	N=253		N=254		<0.01	
Agree	17	7%		81	32%	
Disagree	236	93%		173	68%	
Their Religious Identity Places Them Under Greater Scrutiny at Work	N=249		N=255		0.13	
Agree	117	47%	137	54%		
Disagree	132	53%	118	46%		
Report Struggling to Find Time for Prayer at Work	N=248		N=254		0.19	
Agree	125	50%	143	56%		
Disagree	123	50%	111	44%		
Patients Have Refused My Care Because Of My Religious Identity	N=249		N=255		<0.01	
Agree	22	9%		84	33%	
Disagree	227	91%		171	67%	

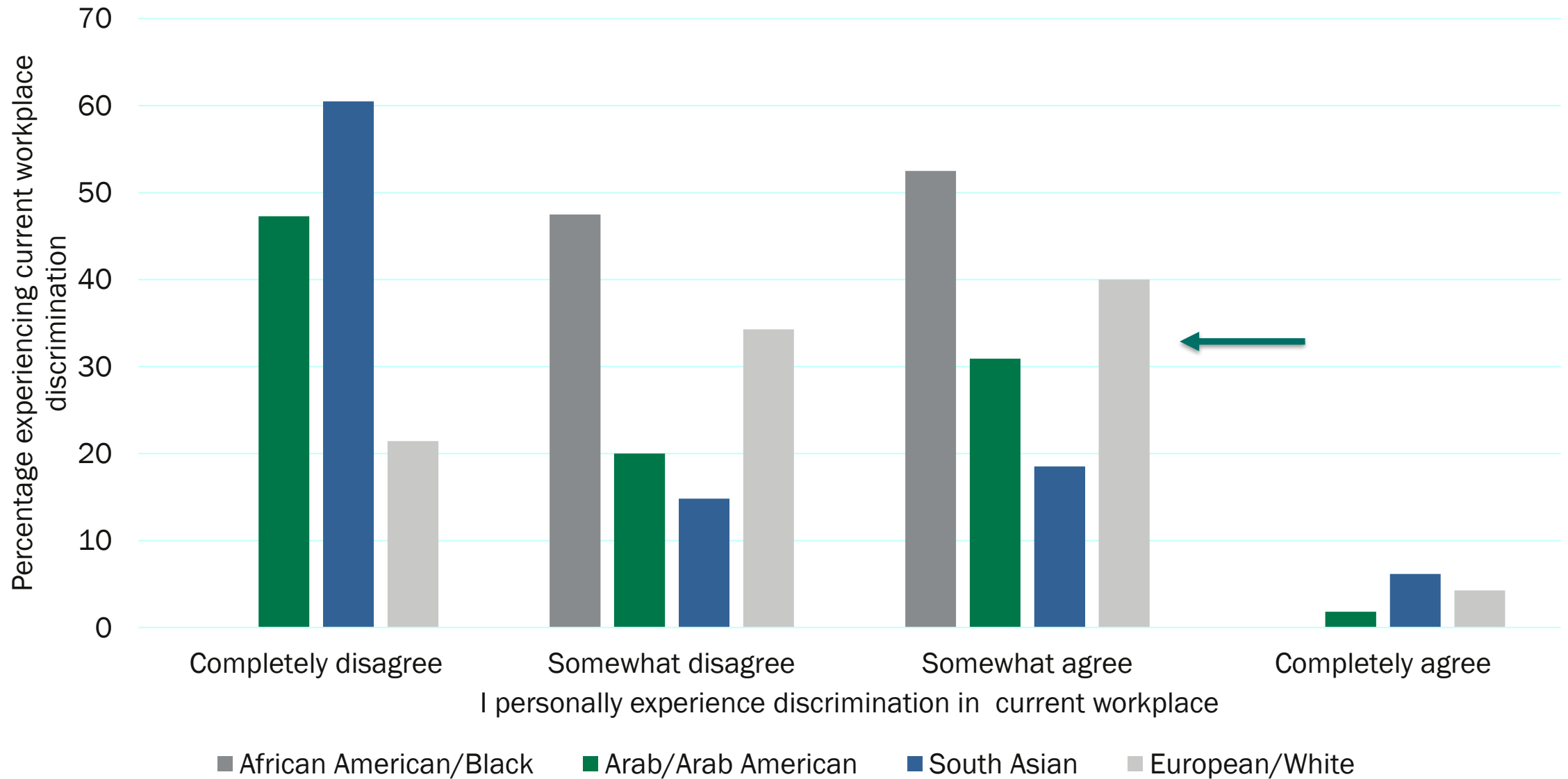
Religious Discrimination

Outcome		Experience religious discrimination over career (N=258, 53% sometimes to always)		Currently experiencing discrimination (N= 256, 36% somewhat/completely agree)		Patients refusal of care (N = 255, 33% somewhat/completely agree)	
Predictor		Bivariate Models OR (95%)	Multivariate Model 1: adjusted OR (95%CI)	Bivariate Models OR (95%)	Multivariate Model 2: adjusted OR (95%CI)	Bivariate Models OR (95%)	Multivariate Model 3: adjusted OR (95%CI)
Congregational Religious Activity	Less to more congregational religious activities	.89 (.75, 1.06)	---	.67 (.55, .81)***	.89 (.67, 1.21)	.65 (.54, .79)***	.64 (.47, .88)**
Private Religious Activity	Less to more private religious activities	.99 (.86, 1.14)	---	.73 (.62, .85)***	.76 (.58, .98)*	.77 (.66, .89)***	.94 (.72, 1.23)
Intrinsic Religiosity	Less to more religious practice/carryover	.90 (.83, .98)**	.98 (.87, 1.1)	.88 (.81, .95)**	1.05 (.92, 1.20)	.82 (.76, .90)***	.89 (.73, 1.08)
Religious Importance	Low to high importance	.72 (.43, 1.20)	---	.85 (.53, 1.36)	---	.66 (.41, 1.07) [†]	3.78 (1.25, 11.43)*
Race	African American	Reference	Reference	Reference	Reference	Reference	Reference
	Arab/Arab American	.16 (.07, .35)***	.19 (.07, .50)***	.28 (.14, .59)***	.42 (.16, 1.05) [†]	.25 (.12, .54)***	.54 (.19, 1.56)
	South Asian	.15 (.07, .32)***	.25 (.09, .71)**	.17 (.08, .34)***	.22 (.07, .66)**	.24 (.11, .48)***	1.58 (.48, 5.25)
	European/White	.27 (.13, .55)***	.25 (.09, .66)**	.65 (.33, 1.28)	.51 (.19, 1.39)	1.46 (.74, 2.87)	2.91 (1.02, 8.28)*

Experiences Of Religious Discrimination Over Career By Race



Experiences Of Current Workplace Discrimination By Race



Outcomes

Outcome		Left a job due to discrimination at workplace (N = 254, 32% left job)			Depression (N = 247, 47% depressed several days to everyday in past 2 weeks)	
		Bivariate Models OR (95%)	Multivariate Model 6: adjusted OR (95%CI)	Bivariate Models OR (95%)	Multivariate Model 7: adjusted OR (95%CI)	
Predictor						
Congregational Religious Activity	Less to more congregational religious activities	.82	.63 (.43, .92)*	.94 (.78, 1.12)	---	
Private Religious Activity	Less to more private religious activities	1.12 (.94, 1.33)	---	.97 (.84, 1.13)	---	
Intrinsic Religiosity	Less to more religious practice/carryover	.80 (.72, .88)***	.88 (.67, 1.15)	.79 (.72, .87)***	.69 (.57, .84)***	
Religious Importance	Low to high importance	.27 (.15, .49)***	.48 (.10, 2.25)	.35 (.20, .61)***	5.36 (1.84, 15.58)**	
Race	African American	Reference	Reference	Reference	Reference	
	Arab/Arab American	.08 (.02, .26)***	.08 (.01, .45)**	.12 (.06, .27)***	.29 (.11, .79)*	
	South Asian	.02 (.01, .06)***	.02 (.003, .15)***	.05 (.02, .12)***	.15 (.05, .44)***	
	European/White	.02 (.005, .06)***	.012 (.002, .07)***	.09 (.04, .19)***	.08 (.03, .24)***	

Findings & Implications

- Religious Identity
 - “Calling” → Attracts discrimination
 - Importance → inc. perceptions of discrimination from pts & inc. risk of depression
 - Prayer activities → buffering effect
 - African Americans >> Arabs & S. Asians
- If some types of physicians face discrimination or disincentives to work in certain environments →
 - (-) High-quality patient care
 - (-) Social equity
- Diversity & Inclusion programming must extend programs and policies to cover religious identity accommodation



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Anti-Muslim sentiment is alive & well in medicine

Meaningful action needs to be taken to dismantle Islamophobia at the 'CMAJ' and beyond

December 28, 2021 | Imaan Javeed