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Standing Out or Fitting In: A Latent-Pattern Content Analysis of Discrimination of Women and 2SLGBTQ+ Anesthesiologists

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Introduction:

Despite growing evidence that women and two-spirit, lesbian, gay, bisexual, transgender, and queer (2SLGBTQ+) physicians are mistreated in anesthesiology,[1] how anesthesiologists experience individual discrimination on the grounds of gender and/or sexuality remains unclear. We sought to provide a thick description of how women and 2SLGBTQ+ anesthesiologists and anesthesiology trainees experience discrimination, harassment, bullying, and mistreatment within a Canadian context.

Methods:

With institutional research ethics board approval, we conducted an internet-based, open, cross-sectional survey. The survey was distributed to resident, fellow, and staff-level anesthesiologists across Canada. Survey questions were developed to characterize the intersection between respondent gender and sexuality with experiences of discrimination in the workplace. Informed consent was obtained.

Quantitative analysis of survey responses has been previously published.[1] This abstract focuses on a qualitative analysis of narrative, "free-text" responses using a latent-type content analysis sensitized by Judith Butler's *theory of performativity*. According to Butler, gender is defined by behaviours that people emulate from people of the same gender. Gender is therefore made through recurrent political, cultural, and social practices established over time.[2] Two members of the team (GRL and JC) immersed themselves within the data, subsequently performed line-by-line coding, condensed these codes into categories followed by thematic analysis. All data were uploaded to NVivo 12 for the final coding structure. To enhance rigor, we followed Lincoln and Guba's criteria for trustworthiness.

Results:

165 free-text responses were analyzed by gender, sexuality, and level of training/staff; subsequently, the results were triangulated. The two emergent themes include: i) *fitting in: performativity reinforcing the status quo*; and ii) *standing out: performativity as a means of disruptive social change*. The categories that led to the theme, fitting in: performativity reinforcing the status quo, included: discriminatory and unprofessional behaviours; privileging power and patriarchy resulting in toxic hegemonic masculinity; power and privilege as blind spots; bias in advancement structures; and performativity as confining discourses. The categories that led

to the theme: standing out: performativity as a means of disruptive social change, included: beyond performative allyship; and performativity and rights. Representative quotes will be presented.

Discussion:

Through Butler's performativity lens, sociopolitical and sociocultural expectations of gendered behaviour may contribute to hegemonic power structures that facilitate discrimination.[2] Women and 2SLGBTQ+ anesthesiologists and trainees who do not conform to the normative performances of gender and sexuality do not fit in and stand out, enduring discriminatory and unprofessional behaviours.

References:

1. Peel, J.K., et al., *Gender and Sexuality-Based Discrimination in Anesthesiology Within Canada: A Prospective, Cross-Sectional Survey*. Canadian Journal of Anesthesia, 2021.
2. Butler, J., *Gender Trouble*. 1st Edition ed. 2011, London: Routledge.