



Building a Culture of Learning and Humility in Healthcare Practice

Medical errors are estimated to be the third leading cause of death in the United States (Makary & Daniel, 2016). Scholars have made many efforts to examine their sources in order to generate insights to reduce their occurrences in healthcare practice. On the one hand, some scholars have advocated that errors resulted from institutional malfunctions such as understaffing of nurses or healthcare professionals being overworked, stressed, or fatigue (Blendon et al., 2002). On the other hand, other scholars have attributed errors to physicians' bias in diagnosis (Hashem, Chi, & Friedman, 2003) and failures to care for patients in attentive, empathetic, and hence effective, ways (Chochinov, 2010; Coulehan, 2011; Tervalon & Murray-García, 1998). However, to date there is limited empirical evidence to show that either improving institutional functions or integrating virtues such as humility and compassion into the training curriculum could indeed help healthcare professionals become less susceptible to errors in their work. Without quantifiable and generalizable evidence of effective practices, we are left with a void in preventing medical errors in an increasingly complex and vulnerable world. In this project, we aim to empirically test the propositions that humility helps healthcare professionals be more effective and less error-prone; and that building a culture of humility helps healthcare institutions not only reduce their error rates but also develop competent professionals. Students will be expected to participate in the design of the study, develop and administer the survey, and analyze survey data.

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