

Supplemental Online Content

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eAppendix. Relevant items from 2019 ABSITE survey

eTable. Sources of mistreatment for individual behaviors

This supplementary material has been provided by the authors to give readers additional information about their work.

eAppendix. Relevant items from 2019 ABSITE survey

(Paper format shown here, but the survey is delivered on an electronic platform)

Survey Preamble

Please complete the following survey to share your thoughts about your residency experience. The information will be used to inform future research and policy decisions to improve the learning environment and culture of residency. It is estimated that it will take approximately 5 to 8 minutes to complete the questions. **The survey responses are never associated with your personal identity. All data are de-identified for analyses and reporting. Your program will not have access to your individual responses.**

1. Are you currently enrolled in a clinically active year of your residency? This is defined as the PGY1-5 years that count toward your board eligibility.

Yes
No, I am currently working on research (full time), obtaining an additional degree (full time), or otherwise taking a break from my clinical years of training.

2. The following describes me: (most applicable)

a. Married	<input type="checkbox"/>
b. Not married but in a relationship	<input type="checkbox"/>
c. Not married and not in a relationship (single)	<input type="checkbox"/>
d. Divorced/Separated	<input type="checkbox"/>
e. Widowed	<input type="checkbox"/>

3. As of July 2018, how many children (under 18) do you have?

a. 0	<input type="checkbox"/>
b. 1	<input type="checkbox"/>
c. 2	<input type="checkbox"/>
d. 3	<input type="checkbox"/>
e. 4	<input type="checkbox"/>
f. 5+	<input type="checkbox"/>

4. During this academic year (July 2018 to present), were you or your partner pregnant/adopting/expecting a child?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

5. I identify my race as: (select all that apply)

a. American Indian or Alaska Native	<input type="checkbox"/>
b. Asian	<input type="checkbox"/>
c. Black or African American	<input type="checkbox"/>
d. Native Hawaiian or Other Pacific Islander	<input type="checkbox"/>
e. White	<input type="checkbox"/>
f. Other	<input type="checkbox"/>
g. Prefer not to say	<input type="checkbox"/>

6. I identify my ethnicity as:

a. Hispanic or Latino	<input type="checkbox"/>
b. Not Hispanic or Latino	<input type="checkbox"/>
c. Prefer not to say	<input type="checkbox"/>

7. I identify my gender/sexual orientation as (select all that apply):

a. Straight	<input type="checkbox"/>
b. Gay or lesbian	<input type="checkbox"/>
c. Bisexual	<input type="checkbox"/>
d. Other orientation	<input type="checkbox"/>
e. Transgender	<input type="checkbox"/>
f. Other gender identity	<input type="checkbox"/>
g. Prefer not to answer	<input type="checkbox"/>

9. Please indicate the extent to which you agree with the following statements:					
Item	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
a. My work is appreciated by my co-residents.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My work is appreciated by my attendings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The residents in my program cooperate with one another.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Favoritism determines how decisions are made during residency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I have a mentor within the department of surgery who genuinely cares about me and my career.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I consider my co-residents to be among my closest friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Thinking back on this academic year (July 2018 to present), how satisfied were <u>you</u> with the following?					
Item	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
a. Your decision to become a surgeon.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Using the scale below, indicate the frequency with which you've experienced the following in your general surgery residency during this academic year (July 2018 to present).					
Item	Never	Now and then	Monthly	Weekly	Daily
a. Someone withholding information which affects your performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Spreading of gossip and rumors about you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Being ignored or excluded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Having insulting or offensive remarks made about your person, attitudes, or your private life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Being shouted at or being the target of spontaneous anger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Repeated reminders of your errors or mistakes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Being ignored or facing a hostile reaction when you approach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Persistent criticism of your work and effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Practical jokes carried about by people you don't get along with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Being cursed or sworn at	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. (only populate rows with #11 answers > "Never" to "a-j") During this academic year (July 2018 to present), from whom did you experience these behaviors noted in the prior question (spreading gossip/rumors about you, being shouted at, repeated reminders of your errors or mistakes, being cursed or sworn at, etc.)? (Select all that apply)				
Patient(s) (includes patient's family members)	Attending(s)	Administrator(s)	Colleagues (other resident(s) and fellow(s))	Nurse(s)/ Support staff (e.g., radiology technicians, IT personnel, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Please indicate the extent to which you agree with the following statement:

Item	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I have considered leaving my residency program during the current academic year (July 2018 to present).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. During the past 12 months:

	No	Yes
Have you had thoughts of taking your own life?	<input type="checkbox"/>	<input type="checkbox"/>

14a. (only if answered “Yes” to “14”)

Suicidal ideation should be taken seriously, and we urge you to seek medical attention. You can start by reaching out to your program director for help or calling the toll-free National Suicide Prevention Lifeline (1-800-273-8255), available 24 hours a day, 7 days a week. The service is available to anyone. All calls are confidential.
<http://www.suicidepreventionlifeline.org>

16. Using the scale below, indicate the frequency with which you've experienced the following in your general surgery residency during this academic year (July 2018 to present).							
Item	Never	A few times a year	Once a month or less	A few times a month	Once a week	A few times a week	Every Day
a. Crude/sexually demeaning or explicit remarks, stories, or jokes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Unwanted sexual imagery or materials sent or shown to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Unwanted verbal sexual attention (e.g., comments, flirtations, sexual advances)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Offensive body language (e.g., leering, standing too close)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Unwanted physical sexual attention (e.g., inappropriate or uncomfortable touching; attempts to touch, fondle or kiss)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Sexual coercion (e.g., bribed or threatened to engage in sexual behavior; suggestion of better treatment if sexually cooperative)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Using the scale below, indicate from whom you've experienced the following in your general surgery residency during this academic year (July 2018 to present). (Select all that apply)						
Item	Never Experienced It	Patient(s) (includes patient's family members)	Attending(s)	Administrator(s)	Colleagues (other resident(s) and fellow(s))	Nurse(s)/ Support staff (e.g., radiology technicians, IT personnel, etc.)
a. Crude/sexually demeaning or explicit remarks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Unwanted sexual imagery sent or shown to you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Unwanted verbal sexual attention (e.g., flirtations, sexual advances)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Offensive body language (e.g., leering, standing too close)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Unwanted physical sexual attention (e.g., inappropriate touching)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Sexual coercion (e.g., bribed or threatened to engage in sexual behavior; suggestion of better treatment if sexually cooperative)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Using the scale below, indicate the frequency with which you've experienced the following based on your GENDER/GENDER IDENTITY/SEXUAL ORIENTATION in your general surgery residency during this academic year (July 2018 to present). These questions are NOT related to race/ethnicity/religion.

Item	Never	A few times a year	Once a month or less	A few times a month	Once a week	A few times a week	Every Day
a. Different standards of evaluation (e.g., lowered expectations, need to work harder to achieve the same success as others, unfair punishment, less respect for my opinion)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Denied opportunities (e.g., OR cases, attendance at conferences, career options, opportunities for advancements, mentorship)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mistaken for a non-physician based on your <u>gender/gender identity/sexual orientation</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Slurs and/or hurtful/humiliating/negative/uncomfortable comments even when purported as jokes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Socially isolated (e.g., excluded from social events, malicious gossip)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Was advised against having children during residency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt like my/my partner's pregnancy or our childcare needs led to negative reactions from my coworkers/program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Using the scale below, indicate from whom you've experienced the following based on your GENDER/GENDER IDENTITY/SEXUAL ORIENTATION in your general surgery residency during this academic year (July 2018 to present). These questions are NOT related to race/ethnicity/religion. (Select all that apply)

Item	Never Experienced It	Patient(s) (includes patient's family members)	Attending (s)	Administrator (s)	Colleagues (other resident(s) and fellow(s))	Nurse(s)/ Support staff (e.g., radiology technicians, IT personnel, etc.)
a. Different standards of evaluation (e.g., lowered expectations, need to work harder to achieve the same success as others, unfair punishment, less respect for my opinion)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Denied opportunities (e.g., OR cases, attendance at conferences, career options, opportunities for advancements, mentorship)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Mistaken for a non-physician based on your <u>gender/gender identity/sexual orientation</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Slurs and/or hurtful/humiliating/negative/uncomfortable comments even when purported as jokes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Socially isolated (e.g., excluded from social events, malicious gossip)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Was advised against having children during residency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt like my pregnancy/childcare needs led to negative reactions from my coworkers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

eTable. Sources of mistreatment for individual behaviors

Sources of Mistreatment for LGBTQ+ and Non-LGBTQ+ Residents												
	Non-LGBTQ+						LGBTQ+					
	n (%)						n (%)					
	Not Identified	Patients/ Families	Attendings	Admin*	Colleagues	Nurses/ Support Staff	Not Identified	Patients/ Families	Attendings	Admin*	Colleagues	Nurses/ Support Staff
Discrimination based upon Gender/Gender Identity/Sexual Orientation												
Different Standards of Evaluation	196 (16.3)	84 (7.0)	674 (56.2)	18 (1.5)	92 (7.7)	135 (11.3)	12 (17.9)	5 (7.5)	40 (59.7)	<i>Withheld</i>	5 (7.5)	<i>Withheld</i>
Denied Opportunities	148 (23.5)	10 (1.6)	345 (54.8)	21 (3.3)	94 (14.9)	12 (1.9)	<i>Withheld</i>	<i>Withheld</i>	23 (69.7)	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>
Mistaken for a Non-Physician	127 (7.3)	1391 (79.4)	19 (1.1)	<i>Withheld</i>	7 (0.4)	204 (11.7)	8 (6.2)	93 (71.5)	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	22 (16.9)
Slurs or Negative Comments	241 (38.6)	110 (17.6)	112 (17.9)	<i>Withheld</i>	117 (18.7)	41 (6.6)	23 (29.9)	9 (11.7)	19 (24.7)	<i>Withheld</i>	19 (24.7)	7 (9.1)
Socially Isolated	118 (28.7)	5 (1.2)	57 (13.9)	6 (1.5)	213 (51.8)	12 (2.9)	10 (32.3)	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	15 (48.4)	<i>Withheld</i>
Advised not to have Children	121 (16.3)	17 (2.3)	357 (48.0)	27 (3.6)	190 (25.5)	32 (4.3)	<i>Withheld</i>	<i>Withheld</i>	21 (53.8)	<i>Withheld</i>	9 (23.1)	<i>Withheld</i>
Negative Reactions to Pregnancy/Childcare Needs	24 (11.0)	<i>Withheld</i>	69 (31.5)	11 (5.0)	111 (50.7)	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>
Sexual Harassment												
Crude, Demeaning, or Explicit Comments	252 (18.3)	285 (20.7)	294 (21.3)	<i>Withheld</i>	402 (29.2)	142 (10.3)	13 (11.1)	25 (21.4)	41 (35.0)	<i>Withheld</i>	25 (21.4)	12 (10.3)
Unwanted Sexual Imagery	88 (39.8)	18 (8.1)	20 (9.0)	<i>Withheld</i>	73 (33.0)	21 (9.5)	9 (37.5)	<i>Withheld</i>	5 (20.8)	<i>Withheld</i>	7 (29.2)	<i>Withheld</i>
Unwanted Verbal Sexual Attention	123 (18.4)	280 (41.9)	68 (10.2)	6 (0.9)	48 (7.2)	144 (21.5)	10 (21.7)	15 (32.6)	7 (15.2)	<i>Withheld</i>	6 (13.0)	8 (17.4)
Offensive Body Language	146 (27.2)	124 (23.1)	114 (21.3)	<i>Withheld</i>	58 (10.8)	93 (17.4)	11 (23.9)	10 (21.7)	14 (30.4)	<i>Withheld</i>	7 (15.2)	<i>Withheld</i>
Unwanted Physical Sexual Attention	72 (33.2)	37 (17.1)	35 (16.1)	<i>Withheld</i>	22 (10.1)	50 (23.0)	8 (40.0)	<i>Withheld</i>	5 (25.0)	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>
Sexual Coercion	39 (66.1)	7 (11.9)	6 (10.2)	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>	<i>Withheld</i>
Bullying												
Someone Withholding Information	400 (23.0)	210 (12.1)	444 (25.5)	55 (3.2)	351 (20.2)	281 (16.1)	18 (18.0)	10 (10.0)	30 (30.0)	<i>Withheld</i>	24 (24.0)	14 (14.0)
Spreading Gossip/Rumors	484 (27.1)	15 (0.8)	236 (13.2)	19 (1.1)	819 (45.8)	216 (12.1)	22 (21.0)	<i>Withheld</i>	9 (8.6)	<i>Withheld</i>	57 (54.3)	14 (13.3)
Being Ignored/Excluded	483 (28.3)	32 (1.9)	445 (26.0)	36 (2.1)	610 (35.7)	103 (6.0)	17 (18.1)	<i>Withheld</i>	30 (31.9)	<i>Withheld</i>	40 (42.6)	5 (5.3)
Offensive or Insulting Remarks	365 (28.6)	71 (5.6)	368 (28.8)	7 (0.5)	370 (29.0)	95 (7.4)	13 (18.8)	<i>Withheld</i>	22 (31.9)	<i>Withheld</i>	25 (36.2)	7 (10.1)
Being Shouted At	447 (20.7)	231 (10.7)	1127 (52.2)	12 (0.6)	270 (12.5)	72 (3.3)	22 (16.7)	11 (8.3)	78 (59.1)	<i>Withheld</i>	17 (12.9)	<i>Withheld</i>
Being Reminded of Errors or Mistakes	659 (28.3)	25 (1.1)	1076 (46.3)	28 (1.2)	500 (21.5)	38 (1.6)	28 (20.6)	<i>Withheld</i>	75 (55.1)	<i>Withheld</i>	31 (22.8)	<i>Withheld</i>
Being Ignored/Hostile Reactions	390 (29.5)	46 (3.5)	505 (38.2)	22 (1.7)	248 (18.8)	111 (8.4)	20 (24.4)	<i>Withheld</i>	35 (42.7)	<i>Withheld</i>	15 (18.3)	12 (14.6)
Persistent Criticism of your Work/Effort	493 (29.8)	22 (1.3)	758 (45.8)	26 (1.6)	319 (19.3)	37 (2.2)	23 (21.5)	<i>Withheld</i>	56 (52.3)	<i>Withheld</i>	24 (22.4)	<i>Withheld</i>
Practical Jokes by People you do not Get Along With	228 (46.8)	5 (1.0)	39 (8.0)	<i>Withheld</i>	167 (34.3)	45 (9.2)	6 (22.2)	<i>Withheld</i>	6 (22.2)	<i>Withheld</i>	11 (40.7)	<i>Withheld</i>
Being Cursed or Sworn At	266 (21.2)	148 (11.8)	656 (52.3)	6 (0.5)	159 (12.7)	20 (1.6)	9 (13.4)	9 (13.4)	43 (64.2)	<i>Withheld</i>	5 (7.5)	<i>Withheld</i>

*Admin=administrators