



What do Medical Students Know...

An interview with J. Wesley Boyd, lead author of the study, "U.S. Medical Students' Knowledge About the Military Draft, the Geneva Conventions, and Military Medical Ethics," *International Journal of Health Services*, Volume 37, Number 4

(ON-SCREEN TEXT)

**Would medical students obey an order to commit torture?
Do they even know what torture is?**

Dr. Boyd: I'm not sure whether or not the students in our survey specifically knew what constituted torture, I *can* tell you that when we asked them whether or not the Geneva Conventions permitted certain behaviors on the part of captors to prisoners, that roughly a third of the time they were unable to answer correctly.

Researchers from Harvard Medical School were curious about medical students' understanding of torture, military medical ethics, and the Geneva Conventions.

5,000 students at eight U.S. medical schools were asked to fill out an Internet based questionnaire.

Dr. Boyd: We found that 94% of medical students who we surveyed — and we surveyed medical students at 8 different medical schools, received over 1700 responses from medical students — we found that 94% of them had had less than one hour of teaching about physicians duties during times of war. We didn't even ask specifically about Geneva in that question, we asked more generally, and 94% had had less than one hour.

We developed these hypothetical scenario questions about what the duties of physicians in times of war would be according to the Geneva Conventions. One of the hypothetical scenarios, for example, asks when it would be required, ethically speaking, to *disobey* the order of a superior in the military. And we had several hypothetical...answers, one of which was:

- When ordered to inject a harmless bolus of saline into a patient or into a prisoner, but the prisoner feels like or thinks that this is a lethal dose of medicine...
- when ordered to threaten a prisoner with such an injection...

- or when ordered to actually inject a lethal dose of something into a prisoner.

We were startled to find that roughly a third of the respondents in our study — because we ended up asking medical students these questions — roughly a third did not know when they should disobey an order from a superior.

And in particular 6% of our respondents were actually willing to inject prisoners with a lethal dose of some kind of toxin if they were so ordered by a superior. Absolutely shocking.

The correct answer: The Geneva Conventions and medical ethics both require a doctor to disobey ALL of these orders. A third of medical students in this study did not know the correct answer.

Dr. Boyd: All of us, as physicians, regardless of whether we serve in the military or not, are going to find ourselves being asked by our superiors in some form or other to engage in behaviors or at least do things that might be contrary to the health needs of our patients. Whether its an HMO telling me that I can only see this patient three times before I have to push them out the door, or it's a commander at Guantanamo saying, you know, we need help in extracting information from this person.

I feel there are so many scenarios more generally where physicians are going to be asked essentially to decide between the health needs and the well-being of their patients and the needs of the organization in which they are employed. So I feel like even instruction ahead of time before we find ourselves in those scenarios would probably go a long way in helping people have the nerve later on to do what they feel in their gut is right before they do it so many times that the initial feeling they had that this is immoral or unjust or against my principles as a physician — before that is gone by the wayside and they are just inured to doing these immoral and unethical things. I also feel like exposure to people who have been tortured would go quite a long way also.

Dr. Boyd: Well, obviously the study was a downer to a certain extent, given that we saw so many medical students who were ill informed about the Geneva Conventions and the duties of physicians. The good news was that roughly two thirds of the medical students were able to answer at least the hypothetical scenarios correctly. And another very good thing to come out of this study was the fact that we did generate interest in these issues. We heard back from a number of students after they had taken the survey that they wanted to know where to go for more information about all of the issues that we asked about in the survey.

For information about treatment programs for torture survivors, and about other ways healthcare and social service professionals and students can get involved, contact THE REFUGE MEDIA PROJECT.

Dr. Boyd: This is one of the issues that's going to define our era. You know, if you have even reasonable, decent, humane people trying to make a case for why it is okay for us to torture people, something is wrong.

This is going to be one of the issues that is going to define our era. And I feel like we all need to get on the right side and do what we can

Based on the study, “U.S. Medical Students’ Knowledge About the Military Draft, the Geneva Conventions, and Military Medical Ethics”

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