# Study Reveals Power Dynamics Impacting Medical Treatment in U.S. Military Hospitals



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In a comprehensive study published on May 16, 2024, in the journal Science, researchers examined 1.5 million emergency room visits at U.S. military hospitals and revealed significant disparities in medical treatment based on the rank, race, and gender of patients.

**Key Findings:**- **Rank Influence:** Doctors invested 3.6% more effort and resources, such as clinical tests, scans, and procedures, in treating high-ranking patients compared to low-ranking ones. High-ranking patients were 15% less likely to be hospitalized within 30 days. - **Race and Gender:** White doctors showed more effort towards white patients generally, but exerted additional effort for high-power patients regardless of race. Black doctors, however, significantly increased their effort for high-ranking Black patients. - **Resource Allocation:** The study found that the extra resources deployed for high-ranking patients came at the expense of lower-ranking patients, who experienced a 1.9% decrease in effort and a 3.4% higher risk of needing further medical attention within 30 days.

**Methodology:**- The data were drawn from across 51 U.S. military hospitals, focusing on emergency departments where patient-doctor assignments are random. This setup helped isolate the impact of rank, race, and gender. - Researchers compared patients treated within a year of a promotion to ensure their findings were robust.

**Implications:**- The study, conducted by Manasvini Singh from Carnegie Mellon University and Stephen D. Schwab from the University of Texas at San Antonio, highlighted systemic disparities that extend beyond the military, influencing broader societal sectors like education and the judiciary. - The findings suggest that status and shared identity significantly affect healthcare delivery, raising concerns about inherent biases within the medical field.

### Conclusion

The results stress that power dynamics within institutions can lead to unequal treatment, posing serious implications for healthcare and other institutional services. The study underscores the need for a deeper understanding of how societal disparities translate into real-world consequences.