

Improving the Virtual Interview Process

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TO THE EDITOR:

We were pleased to read the article entitled “The Impact of Virtual Interviews on Recruitment and Implicit Bias” by Keister et al. In it, the authors describe a national survey of family medicine program directors (PDs) regarding their use of virtual interviewing in residency recruitment.¹ The authors found that the PDs who integrated discussion of their residency culture and values were more satisfied with match results than the general respondent population. We appreciate the importance of communicating values and seeking residency candidates who share them. Yet, it is necessary to consider the ways in which said culture and values are likely steeped in bias and may actually undermine goals of diversity and inclusion. Bias is an affliction from which we all suffer. There is a legacy of racism, discrimination, and oppression embedded in medicine, thus when we discuss the culture of medicine, we are also discussing of this legacy. Furthermore, the authors acknowledge that while virtual interviews offer an opportunity to mitigate bias, the process also invites new risks such as the eradication of audition rotations that provide networking opportunities. Additionally, virtual interviews run the risk of showing an applicants’ environment that may not be conducive to professional interviews and may increase interruptions caused by technical difficulties.²

Thus, we suggest some specific bias mitigation strategies to bolster the virtual interviewing process. First, for applicants who may not have a suitable physical space to interview, partnering with home institutions to have a designated space on campus for them to use can help address this barrier. An alternative to this is for the home institution or the interviewing institution to provide a standard virtual background that each applicant can use. Additionally, residents from minoritized backgrounds specifically looking for mentors or to see some of the diversity work in the program, it

is important to highlight faculty, patient populations, and programming that focus on diversity without exploiting the participants. Lastly, being proactive in contingency planning for applicant technical issues can allow for flexibility without penalty to the applicant. Ultimately, as residency programs continue to prioritize diversity and inclusion, it is important to also uphold equity and accessibility. The virtual interview process introduces new areas for biases from the selecting of the interviewees, to the actual interview, and then the ranking process. However, we cannot overlook the fact that it offers a cost-effective benefit for minoritized resident applicants.

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