#### `Results

#### Gender of Healthcare Provider vs. Likelihood of Choosing

To test the hypothesis that female healthcare providers would have a higher likelihood of being chosen for care over male healthcare providers, an independent t-test was run. There was a significant difference between the groups, t(54) = 2.03, SE = 0.24, p < .05 (two-tailed), 95% CI [.01, .98], d = 0.5. Female healthcare providers had higher likelihood ratings (M = 3.72, SD = .84) than male healthcare providers (M = 3.23, SD = .96). These results support the hypothesis that female healthcare providers would be more likely to be chosen for care.

### Age of Doctor vs. Patient Comfortability

To test the second hypothesis, younger doctors will be rated higher on patient comfortability compared to older practitioners, an independent t-test was run. There was not a significant statistical difference between the groups, t(54) = -1.22, SE = 0.60, p = .23 (two-tailed), 95% CI [-1.94, .47], d = 0.33. While younger doctors (M = 10.33, SD = 2.20) had slightly lower comfort levels than older doctors (M = 11.07, SD = 2.30), the difference is not statistically significant enough. These results do not support the hypothesis that younger doctors will have higher perceived patient comfortability compared to older practitioners.

#### **Comfortability Ratings Amongst Female and Male Providers**

The third hypothesis tested was that participants would feel more comfortable with a female provider rather than a male provider. An independent samples t-test was conducted as there were multiple independent and dependent variables being run simultaneously. There was not a significant difference statistically between the two groups, t(54) = 1.97, SE = 0.59, p = .054 (two-tailed), 95% CI [-.02, 2.35], d = 0.53. According to the data analysis, male provider comfortability levels (M = 10.19, SD = 2.26) did not differ much from female provider comfortability levels (M = 11.36, SD = 2.14). These results do not support the hypothesis that

participants felt more comfortable with a female healthcare provider instead of a male healthcare provider.

# **Perceived Competence Based on Age of Doctor**

The fourth hypothesis examined whether the age of a particular doctor affected how competent they were perceived to be by patients. An independent-samples t-test was conducted to compare perceived competence ratings between younger and older doctors. Our results showed a significant difference between the two groups, t(54) = -2.92, SE = 0.46, p < .05 (two-tailed), 95% CI [-2.27, -.42], d = 0.78. Overall, participants rated older doctors (M = 11.83, SD = 1.71) as more competent than younger doctors (M = 10.48, SD = 1.74). These findings support the hypothesis that a doctor's age influences perceived confidence ratings in this study.

# **Table and Graph**

Table 1

Likelihood of choosing Doctor based on gender

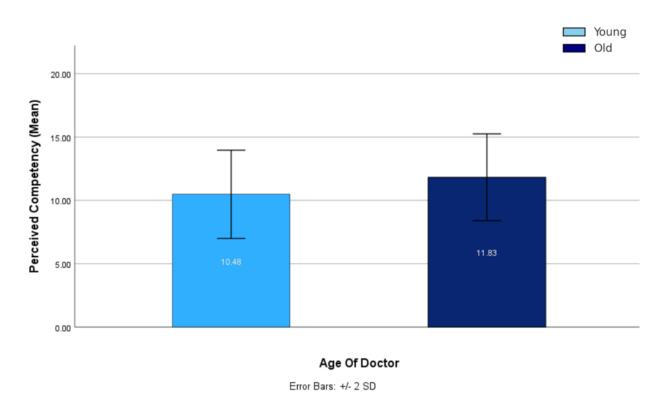
Measure	Group	М	SD
Likelihood of Choosing Doctor	Female	3.72	0.84
	Male	3.23	0.96

**Note:** M = mean;  $SD = standard\ deviation$ . The likelihood of choosing a doctor was rated on a 5-point scale (1 = very unlikely, 5 = very likely), with higher scores indicating greater likelihood. Values representing the scores.

# Graph based on one IV:

Figure 1

Mean Perceived Competence by Doctor Age Group



Note. The graph above represents the competency measure that the participants rated based on age of the doctor. Error bars represent ±2 SD. "Young" and "Old" panels correspond to the Age of the doctor.

Competence (Mean) scale represents; higher scores = greater perceived competence.