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Managing Implicit Bias for Healthcare Excellence

Presented by: Katrinna Matthews and Anna Smith

Contributors: Carolyn Smaka and Joanne Slater



Presenters' Bio



Dr. Katrinna Matthews earned a Doctor of Social Work from the University of St. Thomas in St. Paul MN, a Master of Science in Social Work from the University of Tennessee in Knoxville, TN, and a Master of Education in Counselor Education from the University of Mississippi in Oxford, MS. Dr. Matthews earned a certificate in Diversity and Inclusion from Cornell University, and is a Licensed Advanced Practice Social Worker (LAPSW) in the state of Tennessee, with over 15 years of social work experience. Dr. Matthews has worked with diverse patient populations in a variety of settings, ranging from child welfare to in-center hemodialysis. Her passion is social work education, trauma, and medical social work, especially as it relates to bringing awareness to health disparities and ultimately closing the health gap.



Anna Smith earned a Masters of Audiology at Rush University in Chicago, IL and a Bachelors of Science in Communication Sciences and Disorders from Western Michigan University in Kalamazoo, MI. Anna has 6 years of experience working in the field of Audiology, primarily working in Intra-Operative Monitoring. She currently is an Continuing Education Manager at Continued and has spent the last 15 years working in the field of education with Allied Health Professionals. She earned an additional certificate in 2022 to explore her passion with Diversity, Equity, and Inclusion work.

Disclosures

- **Presenter Disclosure:** Financial disclosures: Dr. Katrinna Matthews and Anna Smith are employees of Continued. Non-financial disclosures: Katrinna Matthews and Anna Smith have no relevant non-financial relationships to disclose.
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Learning Outcomes

After this presentation participants will be able to:

- Define unconscious/implicit bias
- Explain how unconscious/implicit bias develop
- Discuss how unconscious/implicit bias influence our interactions and work
- Identify interventions that aid in dismantling unconscious/implicit bias

How Would You Explain This?

“A father and son were involved in a car accident in which the father was killed and the son was seriously injured. The father was pronounced dead at the scene of the accident and his body was taken to a local morgue. The son was taken by ambulance to a nearby hospital and was immediately wheeled into an emergency operating room. A surgeon was called. Upon arrival and seeing the patient, the attending surgeon exclaimed **‘Oh my no, it’s my son!’** ”

How Would You Explain This?



The surgeon is the boy's mother.



Around 40% of participants who are faced with this challenge do not think of the most plausible answer—being the surgeon is the boy's mother.

What is Implicit Bias?



- AKA - Unconscious bias
- “...the preference for or against a person, thing, or group held at an **unconscious** level.”
- “...the attitudes or stereotypes that affect our understanding, actions, and decisions in an **unconscious** manner.”

State of MI Implicit Bias Definition

“**Implicit bias**” means an attitude or internalized stereotype that affects an individual’s perception, action, or decision making in an unconscious manner and often contributes to unequal treatment of people based on race, ethnicity, nationality, gender, gender identity, sexual orientation, religion, socioeconomic status, age, disability, and other characteristics.



Implicit Bias Types

- Affinity Bias
- Attribution Bias
- Beauty Bias/Weight Bias
- Conformity Bias
- Confirmation Bias
- Contrast Effect
- Racial Bias
- Gender Bias
- Name Bias
- Horns/Halo Effect



Examples

Gender Bias

- Associating girls with language
- Associating males with math

Racial Bias

- Black individuals are violent/dangerous
- Angry Black Woman



Examples

Healthcare Bias

- Less accurate diagnosis
- Less pain management
- Worse clinical outcomes

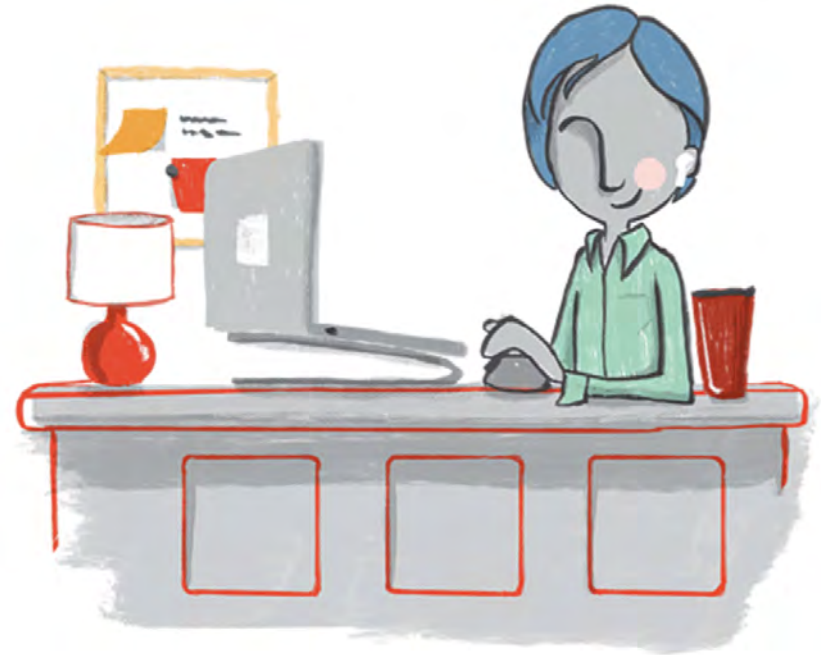
Legal System Bias

- Shooter bias
- Disproportionally high rates of arrest & harsher sentencing for Blacks
- Black juveniles are tried as adults more often than their White peers



How Are Implicit Biases Formed?

- Brain Structure/Neural Connections
- Early Socialization & Environmental Cues/ Historical Basis
- Media & Advertising



Knowledge Check

An Implicit Bias is:

- A. A conscious bias
- B. Only related to race
- C. An attitude or internalized stereotype that affects someone's perceptions
- D. Not involved in healthcare



Knowledge Check

An Implicit Bias is:

- A. A conscious bias
- B. Only related to race
- C. An attitude or internalized stereotype that affects someone's perceptions (correct)**
- D. Not involved in healthcare



Moving from What Implicit Bias Is to How it Impacts Healthcare



Impact On Healthcare Access, Services, & Outcomes

- Passing Judgement/Labeling
- Lack of empathy
- Ambivalence
- Social Determinants of Health
- Lack of interest in patient's success
- Dismissive of patient's needs
- Poor health outcomes



Impact On Healthcare Access, Services, & Outcomes

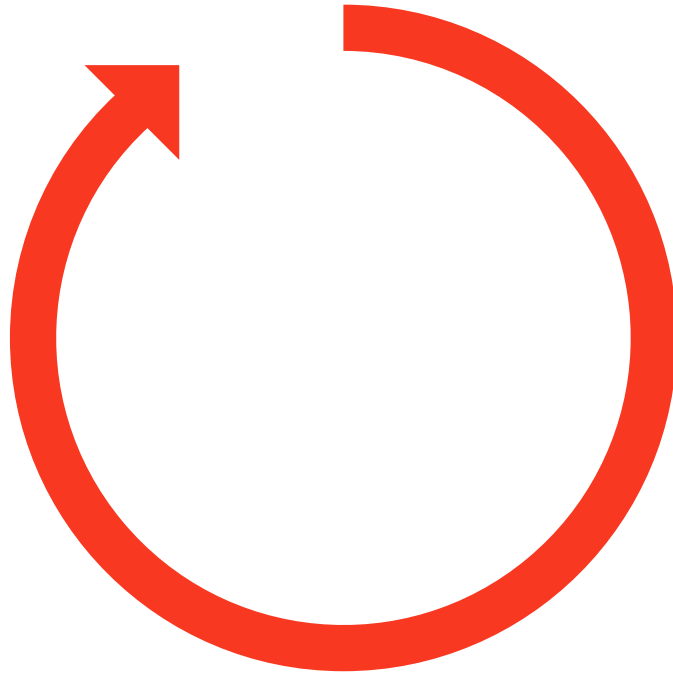
- Black women are more likely than White women to receive general anesthesia for cesarean delivery and to receive no analgesia for vaginal delivery (Tangel, Matthews, Abramovitz, & White, 2020)
- Black and Latinx healthcare users have lower rates of admission to the cardiology service compared to White patients (Eberly, Richterman, Beckett, Wispelwey, Marsh, Cleveland Manchanda, et al, 2019)
- Hispanics and Blacks have the highest risk of stroke in the population but are less likely to be prescribed anticoagulant medications than Whites (Waddy, Solomon, Becerra, Ward, Chan, Fwu, et al, 2020)
- Black healthcare users receive more burdensome end of life care in comparison to White healthcare users (Perry, Walsh, Horswell, Miele, Chu, Melancon, et al, 2021)
- Implicit racial bias is associated with less serious diagnosis in regards to Black and Hispanic healthcare users when the emergency unit is crowded (Stepanikova, 2012)
- White male physicians prescribe less pain medications to Black healthcare users compared to White users (Burgess, Phelan, Workman, Hagel, Nelson, Fu, et al., 2014)

Implicit Bias & Healthcare: Historical Basis



- BIPOC patients seen as biologically different
- Assumptions that BIPOC patients are less sick
- Mistrust (Tuskegee Experiment, H. Lacks...)
- Funding of healthcare services

Activity: Healthcare Circle of Trust



Knowledge Check

An Implicit Bias impacts healthcare by causing:

- A. Lack of empathy
- B. Ambivalence
- C. Passing of judgement
- D. All of the above



Knowledge Check

An Implicit Bias impacts healthcare by causing:

- A. Lack of empathy
- B. Ambivalence
- C. Passing of judgement
- D. **All of the above (correct)**



Moving from the Impact of Implicit Bias in Healthcare to Interventions to Tackle Implicit Bias



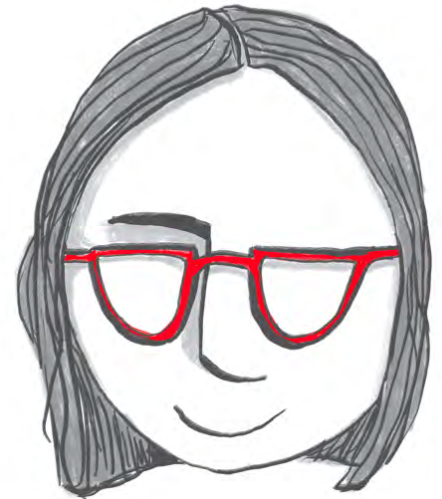
6 Interventions to Tackle Implicit Bias

- Self-Reflection and Self-Assessment
- Acknowledge and Accept Implicit Biases
- Individual Responsibility
- Use Neuroscience
- Practice Self-Monitoring and Mindfulness
- Cultural and Linguistic Competence



Self-Reflection and Self-Assessment

- Take an Implicit Association Test (IAT), developed by a team of leading cognitive scientists and rigorously researched.
 - <https://implicit.harvard.edu/implicit/>
- Remember, It measures **unconscious bias**.



Acknowledge and Accept Implicit Biases

- These issues are emotionally charged and difficult to face and admit.
- Bias on the part of healthcare providers contributes to differences in health outcomes.



Individual Responsibility

It is incumbent upon each health care professional to assume individual responsibility to better understand and address his or her own biases.



Using Neuroscience

- The brain has a unique ability to differentiate between those who are “like-us” from those who are “not like us”.
- Emotional Reaction to Perceived Threat, when “the other” is perceived as dangerous
- Under Pressure, Stereotyping is Easier
- Controlling the actions from Implicit Biases will require abstract thought and the activation of the anterior prefrontal cortex (PFC).



Practice Self-Monitoring and Mindfulness

- Self-Monitoring:
 - Monitor yourself and your thoughts and how to relate to your experiences
- Mindfulness:
 - Adopt an orientation toward one's experiences in the present moment
 - It's characterized by curiosity, openness, and acceptance

Both are essential, since the literature emphasizes that stigmatizing bias rather than acknowledging its existence is counterproductive.

Cultural and Linguistic Competence

- Cultural Competence: “Cultural competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency or among professionals and enable that system, agency or those professions to work effectively in cross-cultural situations.” Cross et al, 1989
- Linguistic Competence: The capacity of an organization and its personnel to convey information in a manner that is easily understood by diverse groups including persons of limited English proficiency, those who have low literacy skills or are not literate, individuals with disabilities, and those who are deaf or hard of hearing.



Cultural Competence

Individual Level Interventions

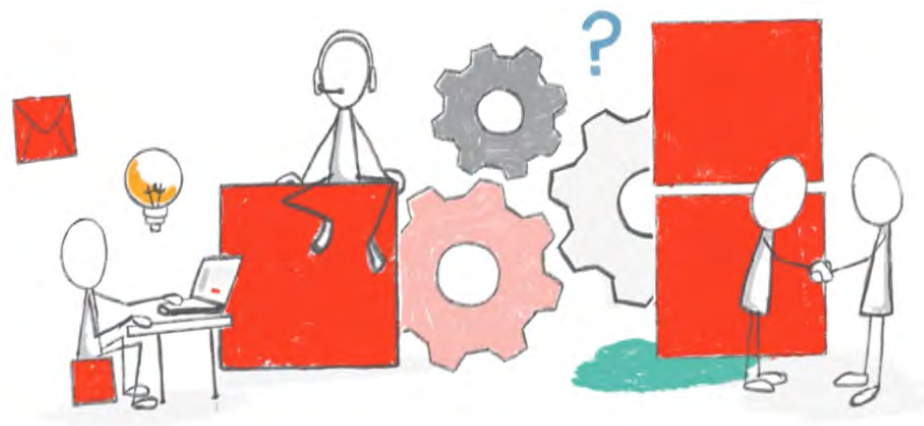
- 5 Essential elements or practices of cultural competence

Institutional or System Level Interventions

- 5 essential elements or practice of cultural competence

Cultural Humility

The ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the person.



Linguistic Competence

- Poor communication
- Incomplete and inaccurate health history
- Misdiagnosis of health and mental health conditions
- Misuse of medications
- Patients' lack of understanding of their health condition and recommended treatment
- Repeat visits to physician offices or emergency room
- Lack of informed consent

Using Interpreters for Linguistic Competence

- Look for certified medical interpreters
- NOT – family and friends of the client/patient
- Discuss terms with the interpreter that may be difficult to translate
- Think about where the interpreter is sitting



Reflection Activity

- Start using Self Monitoring by watching the local News and noting how many diverse people you see.
- Using the commenting tool below, reflect on the amount of diverse representation you see.



Knowledge Check

What is the easiest intervention an individual can do to access their own Implicit Biases?

- A. Take an Implicit Bias test to understand what their biases are
- B. Avoid seeing patients that are different from yourself
- C. Get an advanced degree in Diversity, Equity, and Inclusion
- D. There are no interventions for Implicit Biases, it is what it is



Knowledge Check

What is the easiest intervention an individual can do to access their own Implicit Biases?

- A. Take an Implicit Bias test to understand what their biases are (correct)**
- B. Avoid seeing patients that are different from yourself
- C. Get an advanced degree in Diversity, Equity, and Inclusion
- D. There are no interventions for Implicit Biases, it is what it is



Moving from Interventions to the Goal of Implicit Bias Training



What is the Goal of Implicit Bias Training?

Diversity?

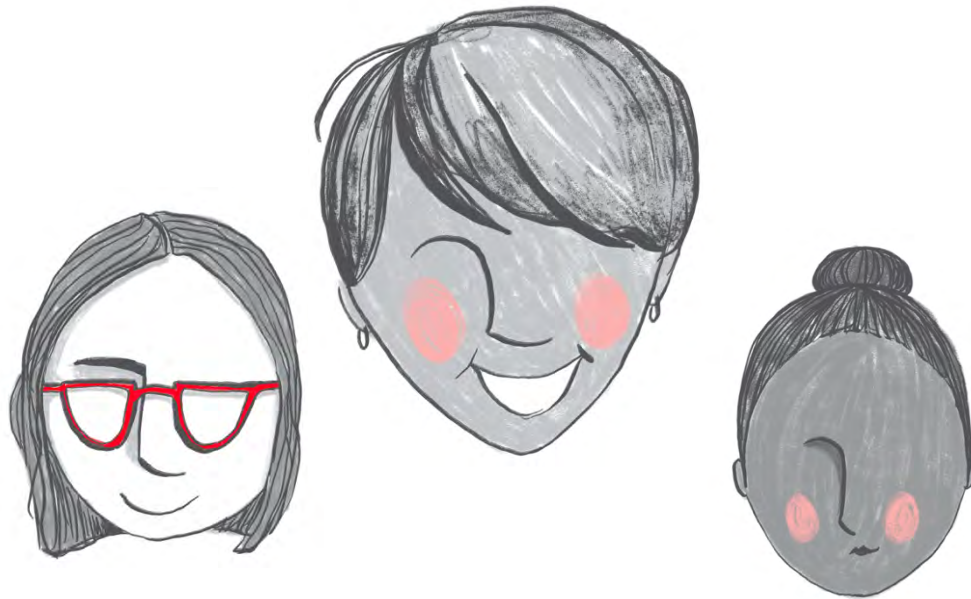
Equity?

Inclusion?



Diversity

The inclusion of people of different races, cultures, etc. in a group or organization.



Equity

According to the World Health Organization (WHO), **equity** is defined as “the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically or geographically.”



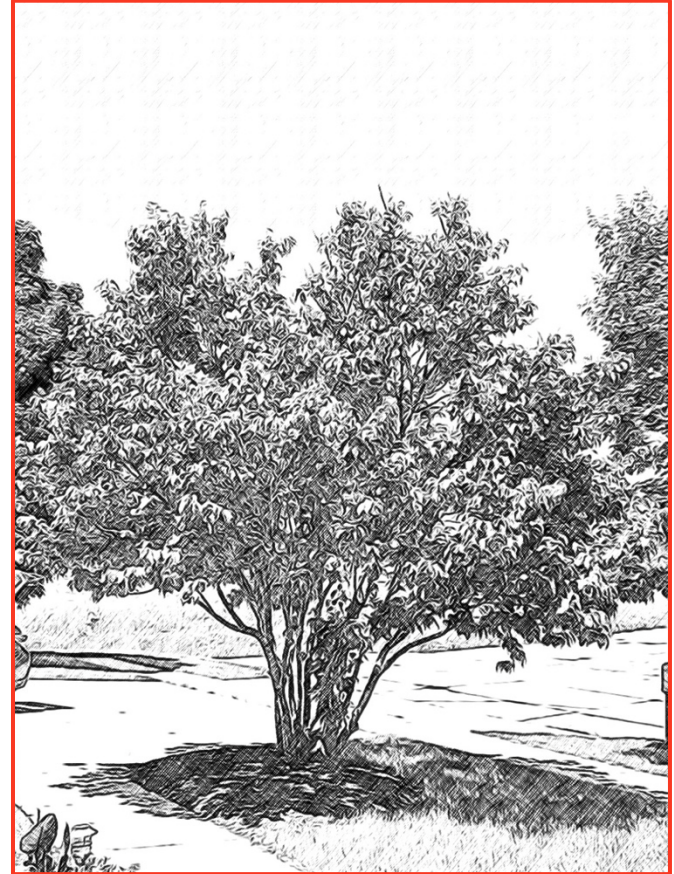
The National Equity Project states:

“To lead to meaningful change, an exploration of implicit bias must be situated as part of a much larger conversation about how current **inequities** in our institutions came to be, how they are held in place, and what our role is as leaders in perpetuating **inequities** despite our good intentions.”



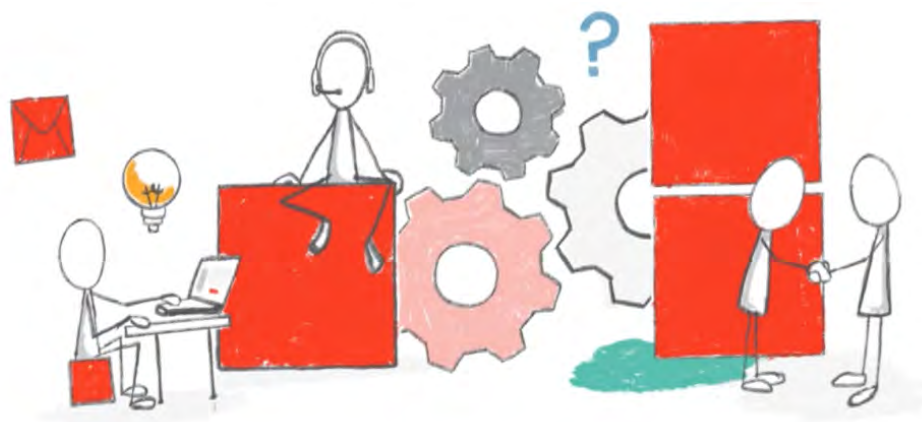
Equality vs Equity

- Equality: Each individual or group of people is given the same resources or opportunities.
- Equity: Each person has different circumstances and allocates the exact resources and opportunities needed to reach an equal outcome.



Health Equity

Health equity is achieved when every person has the opportunity to “attain his or her full health potential” and no one is “disadvantaged from achieving this potential because of social position or other socially determined circumstances.”



Inclusion

The act of including. The act or practice of including and accommodating people who have historically been excluded (as because of their race, gender, sexuality, or ability).



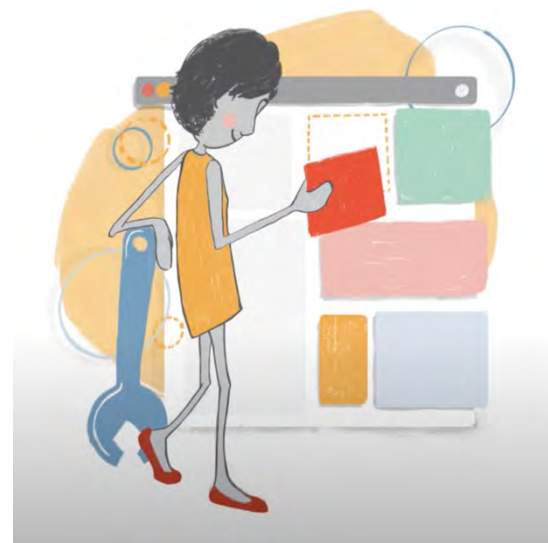
Inclusive Healthcare

- Accepts, values, and views as strength the difference we all bring to the table.
- Respect for diverse cultures, communication styles, languages, customs, beliefs, values, traditions, experiences, and other ways in which people identify themselves is the expectation.



Equitable and Inclusive Healthcare

- Is the care easily accessible?
- How will I feel when I go to receive care?
- Are patients/clients receiving quality care?
- Would I recommend the care to others?



What is the Goal ?

Diversity+Equity+Inclusion =
Belonging



Reflection Activity

- 5-year-old female
- Scheduling surgery for Tonsil and Adenoidectomy
- What questions were asked?



Knowledge Check

What is the definition of Equity?

- A. The absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically
- B. The state of being equal
- C. The action or state of being included within a group or structure
- D. Including people that have historically been excluded



Knowledge Check

What is the definition of Equity?

- A. **The absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically (correct)**
- B. The state of being equal
- C. The action or state of being included within a group or structure
- D. Including people that have historically been excluded



Resources

American Academy of Family Physicians - The EveryONE Project

<https://www.aafp.org/family-physician/patient-care/the-everyone-project.html>

Project Implicit <https://implicit.harvard.edu/implicit/takeatest.html>

Videos:

[How to Outsmart Your Own Unconscious Bias](#), Valerie Alexander at TEDxPasadena

[We all have implicit biases. So what can we do about it?](#), Dushaw Hockett at TEDxMidAtlanticSalon

Books:

Diversity: Beyond Lip Service: A Coaching Guide for Challenging Bias by La'Wana Harris

Blind Spot – Hidden Biases of Good People, by Mahzarin Banaji and Anthony Greenwald

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Risks/Limitations

- Implicit biases may contribute to unequal treatment of people, and to disparities in healthcare access, services, and outcomes.
- Research shared in this presentation may be limited to specific populations and not necessarily broadly applicable to all populations.
- Statistics shared in this presentation are subject to change over time - please note the dates and reference list if quoting or citing these data.
- While individuals may work to manage their own implicit biases, meaningful change must include addressing structural and institutional inequities and biases that contribute to healthcare disparities.