



# Unconscious Bias

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# Who Am I?

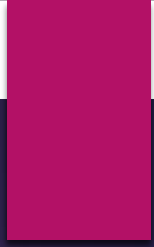
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# Financial Disclosures

# Learning Objectives

- ▶ Define and understand the causes of implicit bias
- ▶ Discuss the influence of stereotypes on implicit bias
- ▶ Explore the real world and health care implications of implicit bias
- ▶ Define and explore the terms belonging, breaking, bridging, and othering
- ▶ Explore how bias leads to health care disparities
- ▶ Discuss ways to address implicit bias and health care disparities

## What I Need From You...

- ▶ Be Open Minded
- ▶ Get **Comfortable** with Being **Uncomfortable**
- ▶ Be Honest
- ▶ Commit to Learning and Healing
- ▶ Be Respectful

# Listening Exercise



# Unconscious Bias

- ▶ Unintentional
- ▶ Unconscious
- ▶ Attitude towards a group of people based on stereotypes, assumptions or underlying factors
- ▶ Can be based on any number of characteristics

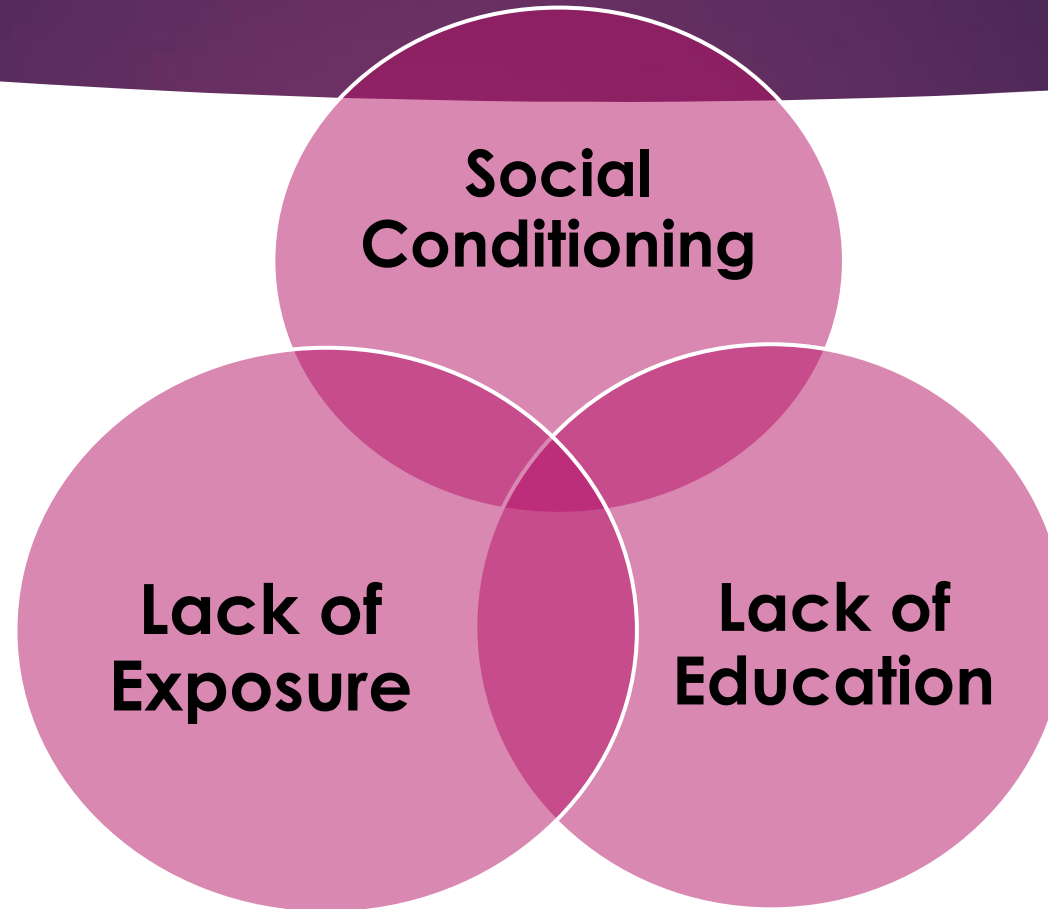
# Understanding and Acknowledging Our Bias

- ▶ Race
- ▶ Age
- ▶ Sex/Gender (Or Lack Thereof)
- ▶ Sexual Orientation
- ▶ Class/Socioeconomic Status
- ▶ Diagnosis
- ▶ Country of Origin

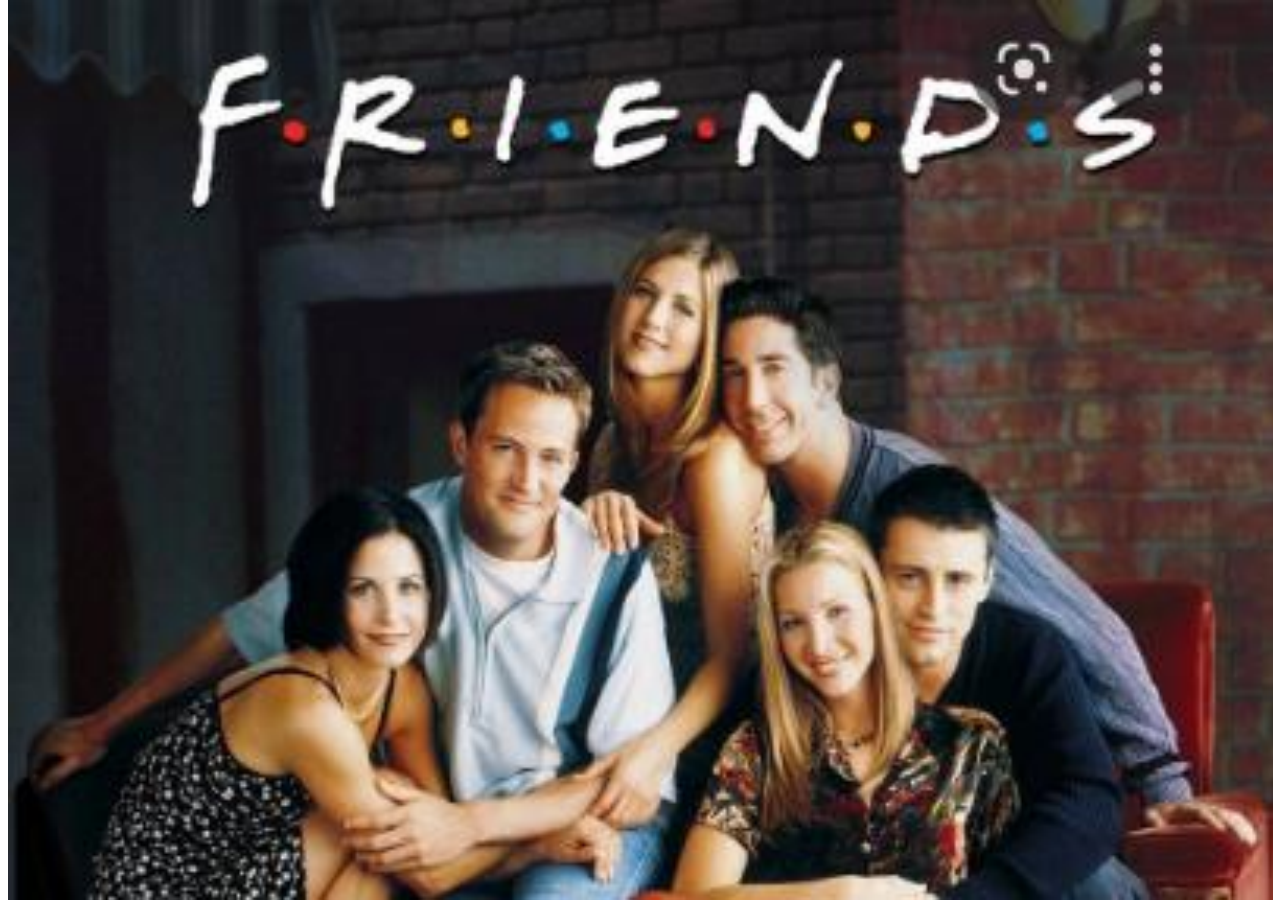




# Where Does Bias Come From?







# The Danger of Stereotypes

- ▶ Fosters Othering/Breaking
- ▶ Breeds Hate and Intolerance
- ▶ Us versus Them
- ▶ Basis of the “isms”



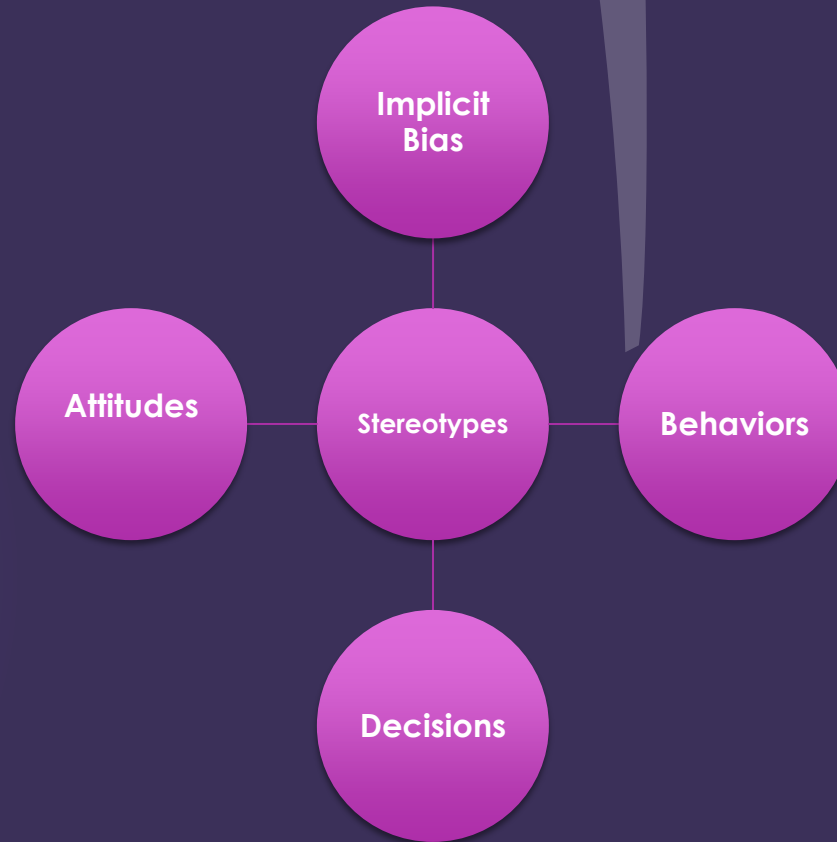


Cousin Chin-Kee sings "She Bangs" recalling one-time "American Idol" William Hung. Art by Gene Luen Yang. Image provided by First Second Books

# Common Stereotypes

- ▶ Girls should play with dolls and boys should play with trucks
- ▶ Mexican women are usually domestics, and the men are associated with the cartel
- ▶ Jews make great lawyers and shrewd business-people
- ▶ Black people are lazy criminals
- ▶ Muslims are a threat to the US and wish us harm
- ▶ Asians are good at math
- ▶ Gay people are just following a trend

# The Evolution of Stereotypes





# What are the “Isms”?

- ▶ Systemic Racism/Privilege
- ▶ Sexism
- ▶ Ageism
- ▶ Classism
- ▶ Ableism
- ▶ Homophobia/Transphobia
- ▶ Xenophobia



# How violence against Asian Americans has grown and how to stop it, according to activists

[Nation](#) Apr 11, 2022 10:37 AM EDT

**Antisemitic incidents hit a record high in 2021. What's behind the rise in hate?**

Apr 29, 2022 6:39 PM EDT

NEWS

## Marisela Castro Is Lost to Anti-Trans Violence Just Shy of Her 40th Birthday

She was described as “bright and sunny” even in the face of workplace discrimination.



BY JAMES FACTORA

August 1, 2022

< NEWS

## HRC Remembers Hayden Davis, 28-year-old Transgender Woman Killed in Detroit

by [Jared Todd](#) • August 9, 2022

# Starbucks to Close All Stores Nationwide for Racial-Bias Education on May 29

April 17, 2018 · 2 min read



## A white woman called police on black people barbecuing. This is how the community responded

By Gianluca Mezzofiore, CNN

Updated 3:25 PM EDT, Tue May 22, 2018

## *How 2 Lives Collided in Central Park, Rattling the Nation*

The inside story of the Black birder and the white woman who called the police on him. Their encounter stirred wrenching conversations about racism and white privilege.

## *A Woman Said She Saw Burglars. They Were Just Black Airbnb Guests.*



The police were called after a woman didn't recognize a group of Airbnb guests. Kelly Fyffe-Marshall, via Instagram

# “AirBNBing While Black”

[HTTPS://WWW.YOUTUBE.COM/WATCH?V=1H8-BGZLESA](https://www.youtube.com/watch?v=1H8-BGZLESA)

# Characterization of Behaviors

Belonging

Breaking

Bridging

Othering



# Belonging

- ▶ Acknowledgement that we all have a right to co-exist and co-create
- ▶ Every human being adds value
- ▶ We all belong here; there is no hierarchy or standard

# Breaking

- ▶ Tendency to see others as a threat
- ▶ It is the practice of acknowledging and respecting who and what you know
- ▶ Leads to intolerance and isolation

# Bridging

- ▶ The practice of turning inward to connect with others
- ▶ A willingness to learn about others
- ▶ Seeks to build a common ground
- ▶ Operates in empathy

# Othering

- ▶ The process of demonizing those that present as other than the “gold standard”
- ▶ Laced in supremacy
- ▶ Treats the “othered” group as if they are alien/foreign
- ▶ “You don’t fit in here”



**So...What Does This Have  
to Do With Medicine?**

# How Does Bias Impact Health Care?

- ▶ Mistrust/Non-Compliance
- ▶ Poor Patient Outcomes
- ▶ Incongruent Care
- ▶ **Healthcare Disparities**
- ▶ **↑ Healthcare Costs**

# What are Health Disparities?

- ▶ differences and/or gaps in the quality of health and healthcare across racial, ethnic, and socio-economic groups
- ▶ population-specific differences in the presence of disease, health outcomes, or access to healthcare (social determinants of medicine)

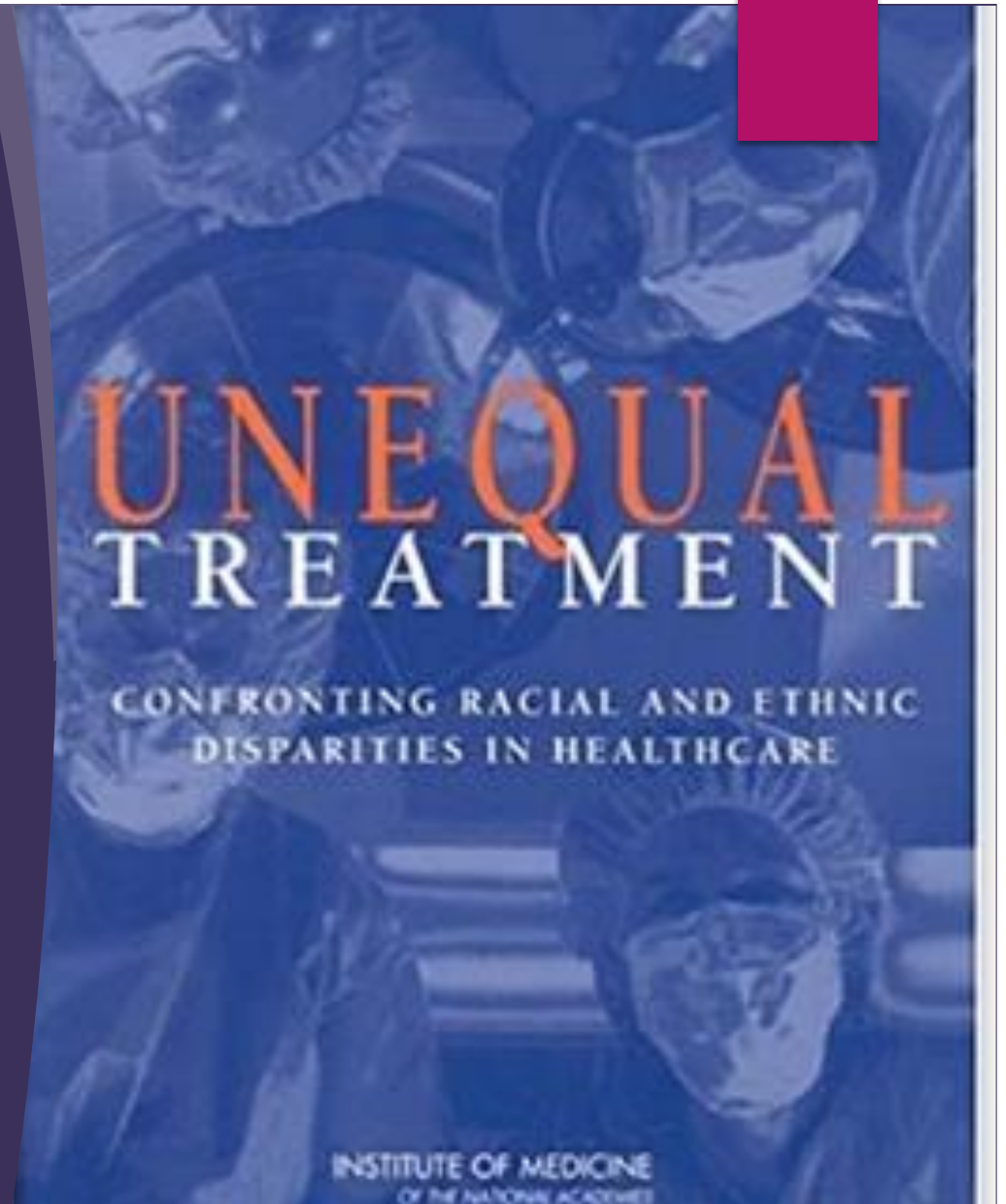
# Social Determinants of Health

- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Access to nutritious foods and physical activity opportunities
- Access to affordable, health care
- Polluted air and water
- Language and literacy skills



# Health Disparities

- ▶ Review of ~600 articles published in the medical literature over 30 years that addressed racial and ethnic disparities in healthcare
- ▶ a specific focus on 100 of the highest-quality studies covering cancer, cerebrovascular disease, renal transplantation, HIV/AIDS, asthma, diabetes, analgesia, and cardiovascular care



# Deep Dive: Disparities in Cardiac Care

- ▶ In 2002, The American College of Cardiology and the Henry J. Kaiser Family Foundation jointly undertook an analysis of the cardiac services
- ▶ Extensive review of 81 of 158 studies on cardiology
- ▶ Based on the analysis, African Americans were less likely than whites to receive diagnostic and revascularization procedures and thrombolytic therapy even when patient characteristics were similar
- ▶ One key study included in the analysis of a retrospective study of cardiovascular procedures among black and white Veterans (Whittle et al)
  - ▶ There was a clear discrepancy in cardiac catheterization rates, angioplasty, and coronary artery bypass grafting in the absence of financial barriers
  - ▶ Blacks were less likely to undergo invasive cardiac procedures in the Veterans healthcare system
  - ▶ Another study (Schulman et al) also found racial and sex differences in recommendations for cardiac catheterization
  - ▶ Another study (Chen et al) showed similar differences in the utilization of catheterization after acute myocardial infarction

# Health Disparities: The Impact of Bias in Medicine

- ▶ Infant mortality for black babies remains nearly **2.5 times higher** than for white babies
- ▶ Black women are **3 times more** likely to die during pregnancy than white women
- ▶ Life expectancy for black men/women remains at nearly **10 fewer years** of life compared with their white counterparts
- ▶ Diabetes incidence is **more than 30% higher** among Native Americans and Latinos than among whites
- ▶ Death rates attributable to heart disease, stroke, and prostate and breast cancers remain much higher in black populations
- ▶ Minorities remain grossly under-represented in the health profession's workforce relative to their proportions in the population (**ex. AA comprise 13% of the population, but are 4% of the work force**)

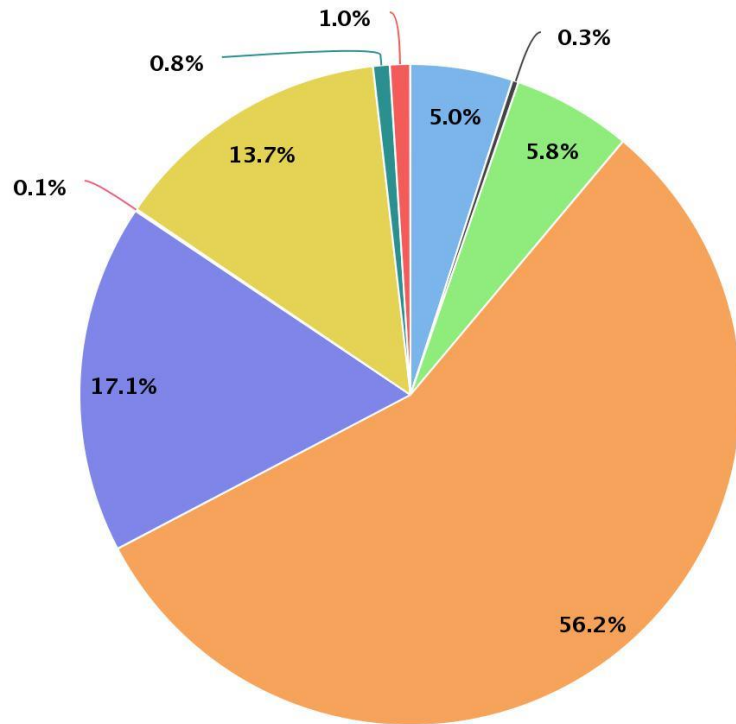
# Disparities are Expensive

- ▶ Joint Center for Political and Economic Studies and Johns Hopkins University evaluated the economic implications of health inequity in the United States and discovered there is a significant financial burden
- ▶ Addressing health disparities for people of color was estimated to result in a reduction of total costs by approximately **\$1.5 trillion over a 3-year period**

What Can Be Done?

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Figure 18. Percentage of all active physicians by race/ethnicity, 2018.



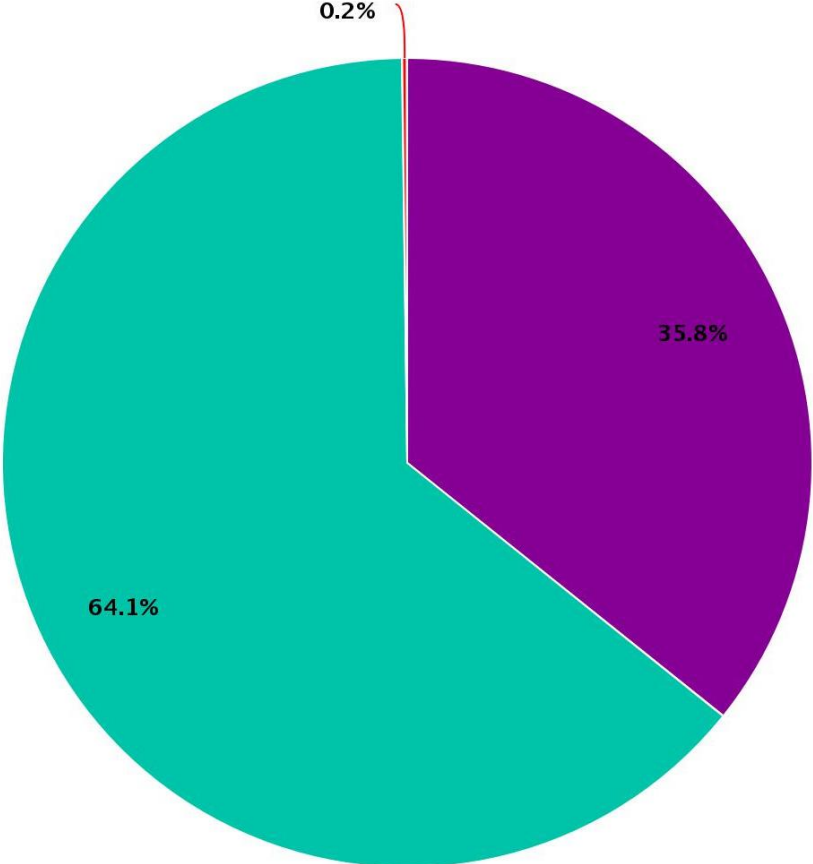
Click on legend item below to add or remove a section from the report.

- American Indian or Alaska Native (2,570)
- Asian (157,025)
- Black or African American (45,534)
- Hispanic (53,526)
- Multiple Race, Non-Hispanic (8,932)
- Native Hawaiian or Other Pacific Islander (941)
- Other (7,571)
- Unknown (126,144)
- White (516,304)

Note: Figure 18 shows the percentage of active physicians by race and ethnicity as of July 1, 2019.

# Representation Matters

Figure 19. Percentage of physicians by sex, 2018.



Click on legend item below to add or remove a section from the report.

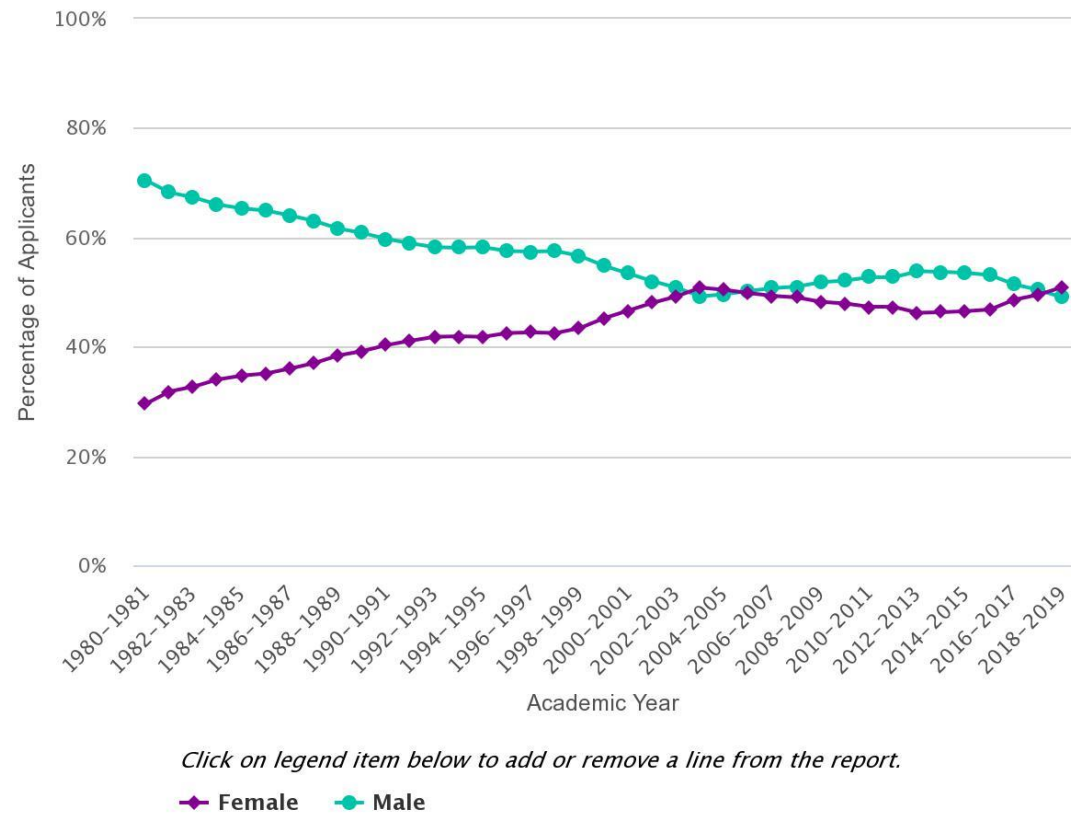
- Female (328,463)
- Male (588,649)
- Unknown (1,435)

Source: Physician characteristics (sex) are from the AMA Physician Masterfile, Dec. 31, 2018.

# Representation Matters

## ▶ Representation Matters

Figure 1. Percentage of applicants to U.S. medical schools by sex, academic years 1980–1981 through 2018–2019.

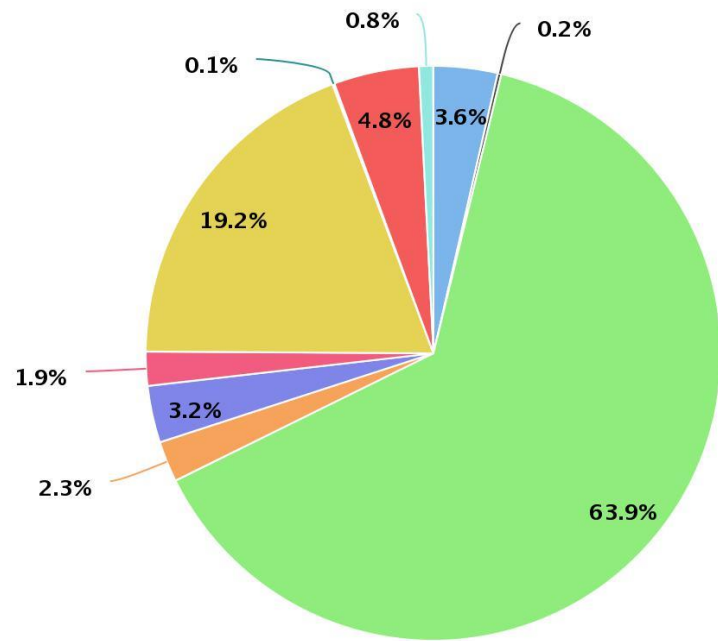


Note: Figure excludes applicants who did not report sex.

Source: AAMC Applicant Matriculant Data File as of March 21, 2019.



Figure 15. Percentage of full-time U.S. medical school faculty by race/ethnicity, 2018.



Click on legend item below to add or remove a section from the report.

- American Indian or Alaska Native (274)
- Asian (34,015)
- Black or African American (6,288)
- Hispanic, Latino, or of Spanish Origin (5,734)
- Multiple Race - Hispanic (3,978)
- Multiple Race - Non-Hispanic (3,441)
- Native Hawaiian or Other Pacific Islander (141)
- Other (1,456)
- White (112,894)
- Unknown (8,511)

Note: To allow for unduplicated counts of faculty, "Multiple Race - Hispanic" includes all faculty who were reported as Hispanic and at least one other race/ethnicity. "Multiple Race - Non-Hispanic" includes all faculty who were reported as more than one race/ethnicity but who were not reported as Hispanic.

# Representation Matters

# Acknowledge The Elephant in the Room (Absolute Truths)

- ▶ Systemic Racism/Privilege
- ▶ Sexism
- ▶ Ageism
- ▶ Classism
- ▶ Ableism
- ▶ Homophobia/Transphobia
- ▶ Xenophobia



# Expectations For Physicians

- ▶ First, Do No Harm
- ▶ Get Comfortable Being Uncomfortable
- ▶ Commit to Understanding and Addressing Your Bias(es)
- ▶ Change takes time; Be Patient as you do your work
- ▶ Aim to Create an Inclusive Practice
- ▶ Be Empathetic
- ▶ Be an Advocate

# Be A Better Advocate

- ▶ Read/Explore to gain perspective (It's OK to not to have all the answers)
- ▶ Ask questions without judgment
- ▶ Engage in meaningful conversation with trusted colleagues/friends
- ▶ Empathize with others and **validate their experience**
- ▶ Acknowledge your privilege
- ▶ Use your voice when appropriate
- ▶ Utilize the principle of Bridging

## Question #1

- ▶ Which of the following is the basis for implicit bias?
- ▶ A. Life Experience
- ▶ B. Social Media/Mass Media
- ▶ C. Learned Behavior
- ▶ D. Isolation
- ▶ E. All of the above

## Question #1

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- ▶ C. Learned Behavior
- ▶ D. Isolation
- ▶ **E. All of the above**

## Question #2

- ▶ MaryAnn Frost is the CFO at ABC Health Care System in Baltimore, Maryland. Her hospital is building a new 30,000 square foot facility that will house ambulatory, rehabilitation and psychiatric services. Maryann is an integral part of the planning committee and the project is scheduled to break ground in the next 3 months. The hospital has just hired its first Chief Diversity Officer who has asked that a consultant be hired to review the hospital's plan and meet specifically with the architect to ensure that all members of the community are considered in the current plan. During the last committee meeting MaryAnn expressed concerns about the necessity of a consultant as well as the expense. She has made it clear that she is against this suggestion. MaryAnn is exhibiting which of the following behaviors?

## Question #2

- ▶ A. Ageism
- ▶ B. Racism
- ▶ C. Unconscious Bias
- ▶ D. Privilege
- ▶ E. Elitism



## Question #2

- ▶ A. Ageism
- ▶ B. Racism
- ▶ C. Unconscious Bias
- ▶ **D. Privilege**
- ▶ E. Elitism

## Question #3

- ▶ Dr. Scott arrives to his office to find that his longtime patient, Marsha Jones, is on the schedule. He makes a comment to his medical assistant that he “hates fibromyalgia patients.” He goes further to say “all they do is complain and nothing ever helps.” What behavior is Dr. Scott modeling?
- ▶ A. Declaration
- ▶ B. Bridging
- ▶ C. Breaking
- ▶ D. Othering
- ▶ E. Bias

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- ▶ B. Bridging
- ▶ C. Breaking
- ▶ D. Othering
- ▶ **E. Bias**

## Question #4

- ▶ Which of the following examples of bias discussed during this lecture is also an example of othering?
- ▶ A. The incident at the AirBNB
- ▶ B. Bird Watching in Central Park
- ▶ C. The increase in violence against Asian Americans during the pandemic
- ▶ D. The family having a BBQ in the park in Oakland, California

## Question #4

- ▶ Which of the following examples of bias discussed during this lecture is also an example of othering?
- ▶ **A. The incident at the AirBNB**
- ▶ B. Bird Watching in Central Park
- ▶ C. The increase in violence against Asian Americans during the pandemic
- ▶ D. The family having a BBQ in the park in Oakland, California

## Question #5

- ▶ Dr. Ben Still has been a physician for 44 years. He has watched his hometown grow from 2,500 residents into a thriving, diverse suburban area of over 50,000 people. While he has enjoyed practicing medicine over the years, he is strongly considering retirement. He supports diversity, but he feels that things are “going too far.” Recently his scheduler advised him that she received a call from a transgender female who wanted to establish care with him. She had been referred by her neighbor who has been his patient for several years. Dr. Still advised his scheduler to tell the patient that he was not taking new patients at this time and considering retirement. He later admitted to his scheduler that he honestly did not want “those kind of patients in his practice” because he did not agree with their lifestyle.

## Question #5

- ▶ Dr. Still's attitude can best be described as
- ▶ A. Homophobia
- ▶ B. Bias
- ▶ C. Transphobia
- ▶ D. Xenophobia
- ▶ E. Both A and B
- ▶ F. Both B and C

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- ▶ D. Xenophobia
- ▶ E. Both A and B
- ▶ **F. Both B and C**



# Final Thought

Knowing is not enough; we  
must apply. Willing is not  
enough; we must DO!

- Goethe

# Suggested Reading List

- ▶ Unequal Treatment: Confronting Racial and Ethnic Disparities in Healthcare. Smedley, B., Stith, A., Nelson, A, editors; Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care, Board on Health Sciences Policy, Institute of Medicine, 2003.
- ▶ Subtle Acts of Exclusion: How to Understand, Identify, and Stop Microaggressions. Jana, Tiffany and Baran, Michael. 2020.
- ▶ Just Medicine: A Cure For Racial Inequality in American Health Care. Matthew, Dayna Bowen. 2015.
- ▶ Millennials' Guide To Diversity, Equity & Inclusion: What No One Ever Told You about the Importance of Diversity, Equity & Inclusion. 2021.

# References

- ▶ Whittle J, Conigliaro J, Good CB, Lofgren RP. Racial differences in the use of invasive cardiovascular procedures in the Department of Veterans Affairs Medical System. *N Engl J Med.* 1993;329:621–7.
- ▶ Schulman KA, Berlin JA, Harless W, et al. The effect of race and sex on physicians' recommendations for cardiac catheterization. *N Engl J Med.* 1999;340:618–26.
- ▶ Chen J, Rathore SS, Radford MJ, Wang Y, Krumholz HM. Racial differences in the use of cardiac catheterization after acute myocardial infarction. *N Engl J Med.* 2001;344:1443–9.
- ▶ Henry J. Kaiser Family Foundation and the American College of Cardiology. Report on Racial/Ethnic Differences in Cardiac Care: The Weight of the Evidence, October 2002

# References

- ▶ LaVeist T, Gaskin DJ, Richard P. The Economic Burden of Health Inequalities in the United States, Joint Center for Political and Economic Studies, Fact Sheet, September 2011

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Questions?



**thank  
you!**