

IMPLICIT BIAS

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LEARNING OBJECTIVES

- Recognize at least one difference between implicit and explicit biases
- Explain a minimum of 2 dangers associated with stereotypes and stereotype threat
- Discuss 2 ways in which implicit bias can influence health outcomes
- Explain a minimum of one tool used to mitigate implicit biases

DISCLOSURE

- I have no relevant financial disclosures.

WHO DO YOU SEE?



As you look at each person, note your initial feelings, thoughts and reactions that emerge.



Who is this person? (in your mind)



What do they do for a job? Where do they live?



**Do not take time to reflect...initial reactions only (put in chat box).
NO JUDGEMENT ZONE.**









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NOW LET'S SEE WHO THESE
PEOPLE REALLY ARE.



Vladimír Franz

- Czech composer, painter, professor, playwright and journalist
- Composer of over 150 theater performances
 - Won multiple national-level prizes
- Professor at Prague's Faculty of Theater
- 2013 Czech presidential candidate



Dr.Yi So-Yeon

- Astronaut and Biochemist
- First Korean to fly into space
- Youngest female astronaut (age 29)
- PhD in Biotech systems
- Quit space travel to pursue MBA



Joshua Beckford

- Child prodigy in neuroscience
- Studied Philosophy and History at Oxford University @ age 6
- Advocate for autism awareness and environmental conservation
- Low Income Families Education (L.I.F.E) Support Ambassador
- Renowned speaker for various fundraising events and TedX talks



Dean Corll

- Notorious serial killer (Candy Man)
- Murdered a minimum of 28 teenage boys and young men between 1970 and 1973 in Houston and Pasadena, Texas
- Became known as Houston Mass Murders





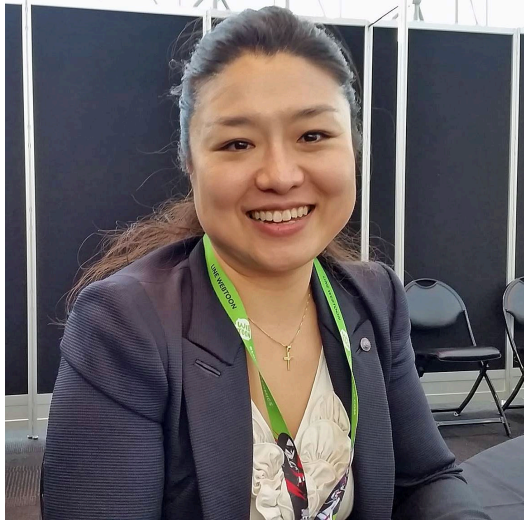
Aydian Dowling

- Transgender male model, activist and entrepreneur
- 1st trans male to be on the cover of Men's Health magazine
- Devoted husband and father
- Vocal advocate for transgender community (CEO of Point of Pride)



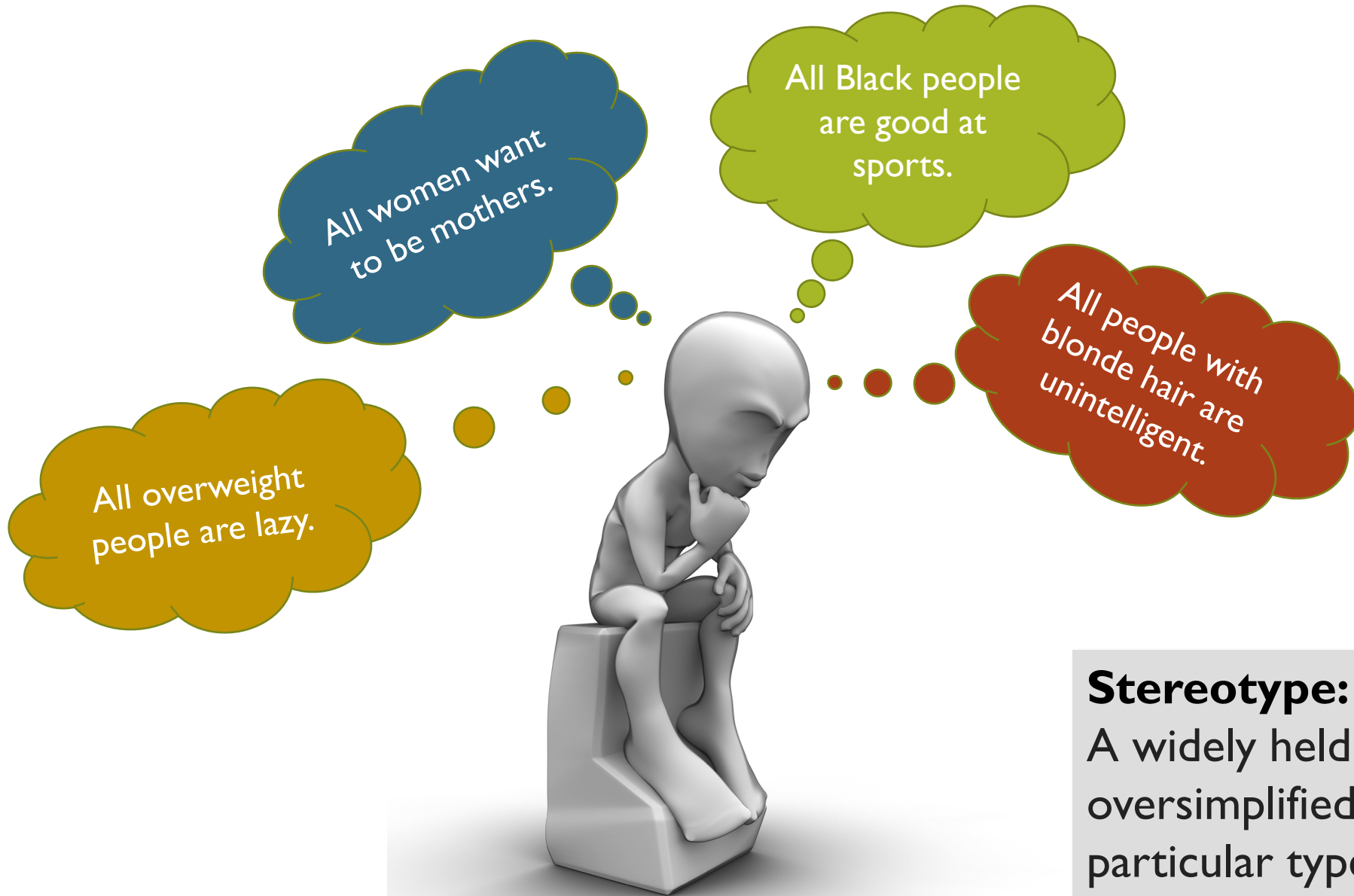
Food for thought...

Under certain state propositions for “bathroom bill” legislation, Aydian would be forced to use the women’s restroom because his sex assigned at birth was female.



WHAT IS IMPLICIT BIAS AND WHERE DOES IT COME FROM?

- Attitudes or stereotypes that affect our understanding, actions, and decisions in an **unconscious manner**.
- “Hidden” preferences (or aversions) to a person or group of persons
- An initial “fight or flight” response to a person, persons or situation
- Does not necessarily align with declared beliefs, attitudes, or stances
- Are formed by past experiences, exposures, familial beliefs, learned behavior or attitudes
- Often predicts and dictates behavior more than explicit biases.
- **Every single person has implicit biases.**

**Stereotype:**

A widely held but fixed and oversimplified image or idea of a particular type of person or thing.

IMPLICIT BIAS COMES IN MANY FORMS

Race /
Ethnicity

Gender /
Gender
Identity

Immigration
Status

Age

Physical
Appearance

Ability

Political
Affiliation

Sexual
Orientation

Education

Income /
Employment

Place of
Residence /
Origin

Religion /
Culture

and more...



WE ARE NOT BAD.
WE ARE HUMAN.

"We all want to think that we are good. Recognizing that we have automatic negative thoughts about certain groups of people does not fit with that belief. That's why it can be so hard to recognize and accept this within ourselves."

~ Christina Girgis, MD (founder, Psychiatry Network)

EXAMPLES OF IMPLICIT BIAS IN ACTION

“Automatically categorizing people according to cultural stereotypes.”

- Immediately classifying an overweight child as lazy as opposed to child of normal weight.
- Judging identical resumes differently based solely on a candidate's name. (Bertrand, 2004)
- Assuming someone speaking Spanish is intellectually inferior to people speaking English.
- Crossing the street if a black man approaches you as opposed to a white man in the same clothing.
- Assigning more complex surgeries to male residents over female residents.
- Asking a female if she has a boyfriend or husband rather than asking about a partner.

WHY DOES IT MATTER?

Implicit bias can...

- influence how people behave toward members of certain social groups
- dictate how people are treated in professional and personal settings
- influence hiring decisions and promotions within a workplace
- affect how patients are treated in a clinical setting
- result in unfair and unjust treatment in legal matters
- contribute to ***stereotypes and stereotype threat***

STEREOTYPE THREAT



CONSEQUENCES OF STEREOTYPE THREAT

- ✓ Low self-esteem
- ✓ Lack of confidence
- ✓ Loss of interest
- ✓ Heightened anxiety
- ✓ Change in behavior
- ✓ “Fitting the narrative”
- ✓ Underperformance
- ✓ “Dumbing yourself down”
- ✓ Criminal behavior



HOW CAN IMPLICIT BIAS AFFECT HEALTHCARE PROVIDERS?

Can influence:

- ✓ Communication
- ✓ Understanding
- ✓ Empathy
- ✓ Patient's perception of provider (or vice versa)
- ✓ Willingness to comply with treatment recommendations
- ✓ **Trust**

IMPLICIT BIAS IN HEALTHCARE

ESTIMATING IMPLICIT AND EXPLICIT GENDER BIAS AMONG HEALTH CARE PROFESSIONALS AND SURGEONS

(SALLES ET AL, 2019)

Research goal: To estimate of the extent of implicit gender bias within health professions using the Harvard Gender-Career Implicit Association Test (IAT)

42,991 healthcare professionals
(82% female; 18% male)

Implicit Biases:

Males = career

Females = family

131 surgeons
(35% female; 65% male)

Implicit Biases:

Males = surgery

Females = family practice

Results suggest that:

- biases linking surgery with men and family medicine with women may be widespread across the U.S. among surgeons.
- men and women in health care strongly implicitly associate men with career and women with family

“AFRAID OF BEING WITCHY WITH A ‘B’”: A
QUALITATIVE STUDY OF HOW GENDER INFLUENCES
RESIDENTS’ EXPERIENCES LEADING
CARDIOPULMONARY RESUSCITATION

(KOLEHMAINEN *ET AL*, 2014)

Research goal: To explore internal medicine residents’ experiences leading codes, with a particular focus on how gender influences the code leadership experience

Methods: Semi-structured interviews with 25 residents around the U.S. (64% female; 36% male)

Results: Although equally able to lead codes as their male colleagues, female participants described feeling stress from having to violate gender behavioral norms in the role of code leader. In response, some female participants adopted rituals to signal the suspension of gender norms while leading a code. Others apologized afterwards for their counter normative behavior.

Results suggest that:

- residency training should acknowledge how female gender stereotypes may conflict with the behaviors required to enact code leadership

FEEDBACK FROM LMU-DCOM STUDENT SURVEY

Please briefly describe a **general** experience when you observed or were a victim of implicit bias.

In school, I was frequently falsely accused of violating rules/used a scapegoat and was punished by teachers because I "looked like the type"

People express surprise when I tell them I emigrated from India at age 10 because my English is very fluent. They usually ask me if I had difficulty learning English once I moved to the US and if my parents knew how to speak English. They look shocked when I tell them I learnt English from my parents when I was a very little kid.

Just last week walking into a store I could feel the owner stopped mid task to "observe me" as I browsed the store.

When I go out to eat with my same sex partner, my wait staff will assume we are friends and would like to split the check...our staff will often comment on how nice it is to pick up the other person's check. I have never had this experience in any of my previous heterosexual relationships or when dining out with heterosexual couple friends.

FEEDBACK FROM LMU-DCOM STUDENT SURVEY

Please briefly describe an experience in **health care** when you observed or were a victim of implicit bias.

A doctor I scribed for interviewed a female Hispanic patient who presented with a very poorly defined neck pain. The patient was there with her mother and was making a very large show of being in pain but was unable to give any useful description of the pain. As he was putting his orders in, the doctor speculated that he doubted he would find anything and expected a result consistent with the phenomenon of "**hispanicus dramaticus**." Once the patient's CT scan resulted she was found to have an unstable C2 and immediately placed in a neck brace and sent to nearest trauma center.

An oncology patient came in with some perineal and scrotal issues. He looked at the male doctor, the female nurse, and female clinical coordinator and had us ushered out the door because it was "**nothing we needed to be a part of/no business in involvement**" even though that was our jobs.

When I was working at a psychiatric treatment center, I was a staff member, and me and my other female colleagues were often overlooked when it came to physically holding a patient down. We were frequently perceived as **being less capable at physical restraints**.

FEEDBACK FROM LMU-DCOM STUDENT SURVEY

Please briefly describe when you feel your own implicit biases may have influenced your decision making or treatment of a particular person or group of people.

As a scribe in a rural [county], I occasionally found myself **assuming drug-seeking behaviors** in some patients that came into the ER before taking a full history based off their chief complaint.

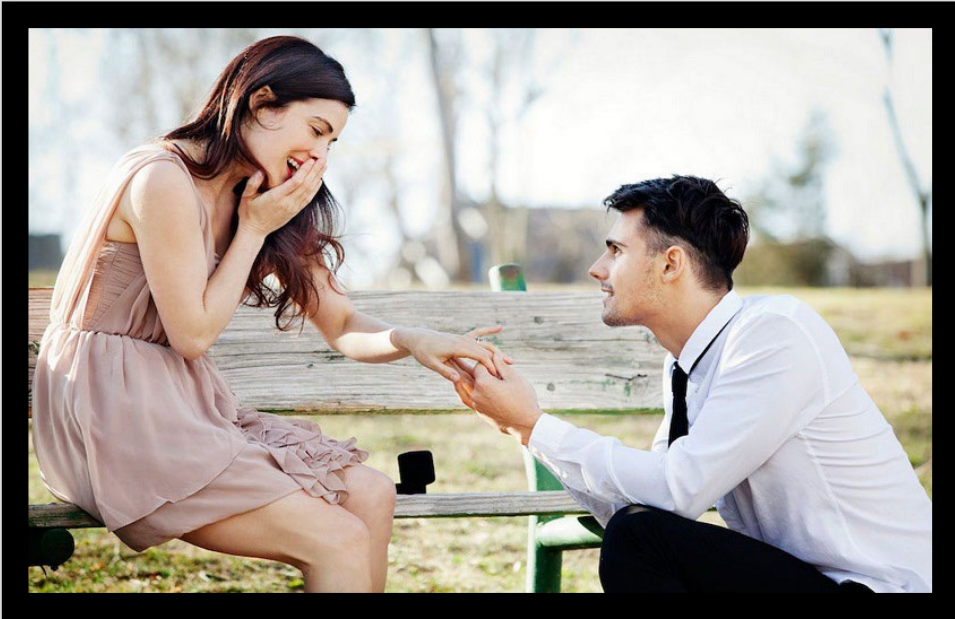
I believe if I judge someone to be of lesser intelligence based on their appearance, I may choose to **oversimplify or not fully explain an answer** to a question or a topic I'm discussing with that person instead of giving a full, more complicated answer that a more educated person understands.

I crossed to the other side of the street **because someone was walking slowly**, or immediately having 911 ready to call on my phone as I left the hospital at night and saw someone that may have been even the slightest suspicious.

ANOTHER QUICK EXERCISE...

SCENARIOS

A newly engaged couple.



or



SCENARIOS

A CEO of a hospital.



or

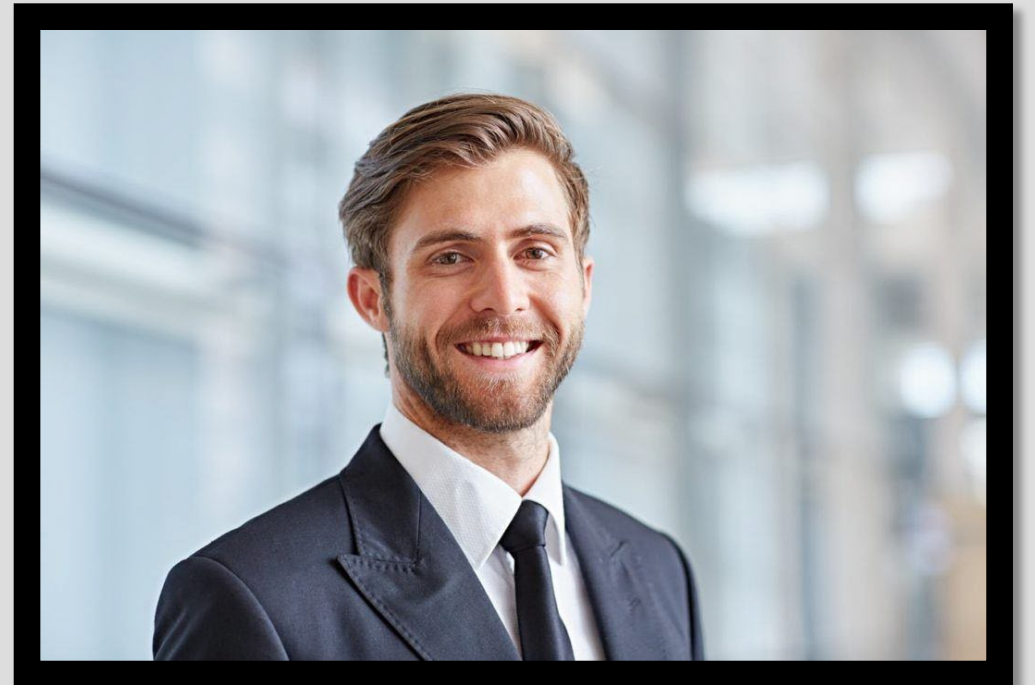


SCENARIOS

A drug addict.



or

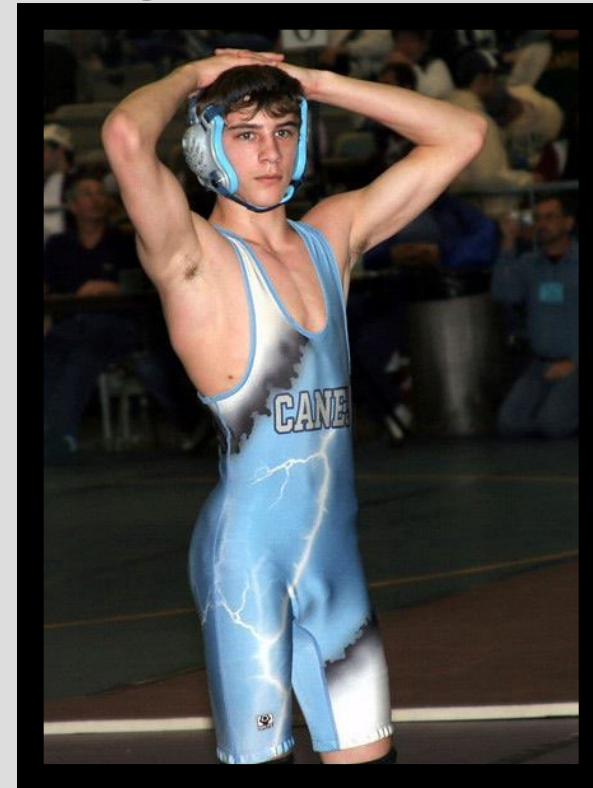


SCENARIOS

A teenager with an eating disorder.



or





BLIND SPOTS

We are so used to something that we cannot see what is actually going on.



Saying	Origin
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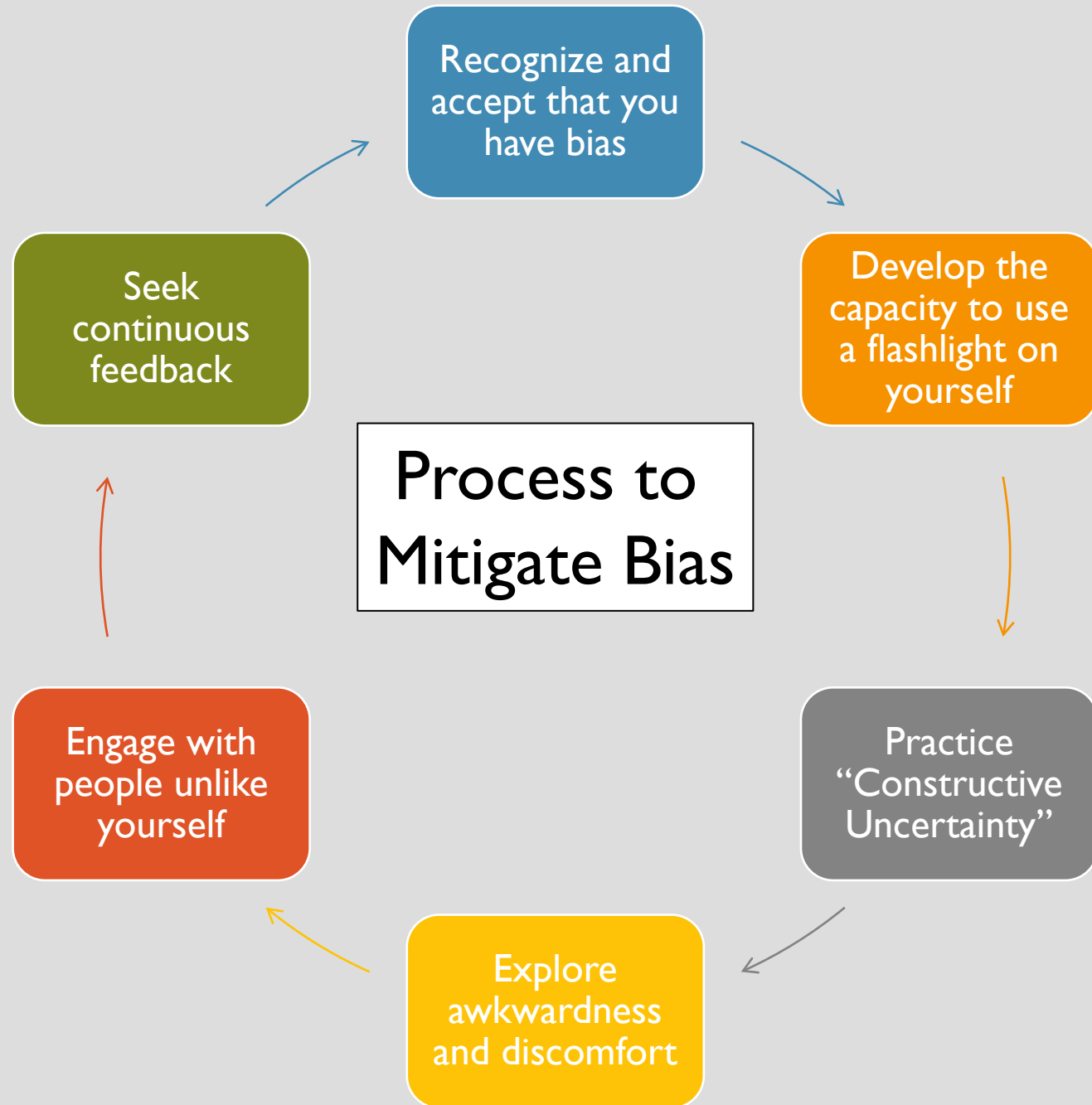
WHAT BLIND SPOTS ARE EVIDENT IN THESE SENTENCES?

- May I speak to Mr. or Mrs. Williams?
- Fashion tights are available in black, suntan, and flesh color.
- I completely forgot where I put my car keys. I must be having a senior moment.
- Juan and Mr. Robertson arrived at the meeting together.
- Prizes include a day at the spa for her and a relaxing game of golf for him.
- It must be difficult for hearing impaired people to manage such a disability

WHAT CAN WE DO TO MITIGATE
IMPLICIT BIAS?



**EXPECT
THE
UNEXPECTED**



MORE TOOLS TO MITIGATE IMPLICIT BIAS

Individuating

- Conscious effort to focus on specific information about an individual
- Focuses less on the person's social category
- Prevents filling in partial information with stereotype-based assumptions.

Perspective-taking

- Conscious attempt to envision another person's viewpoint
- Actively attempting to take a person's perspective
- Read or watch content that discusses people's experiences or directly interact with people from varying social groups

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QUESTIONS?

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