

Implicit Bias in Health



Stan Hudson



Health Literacy Director
Wisconsin Health Literacy

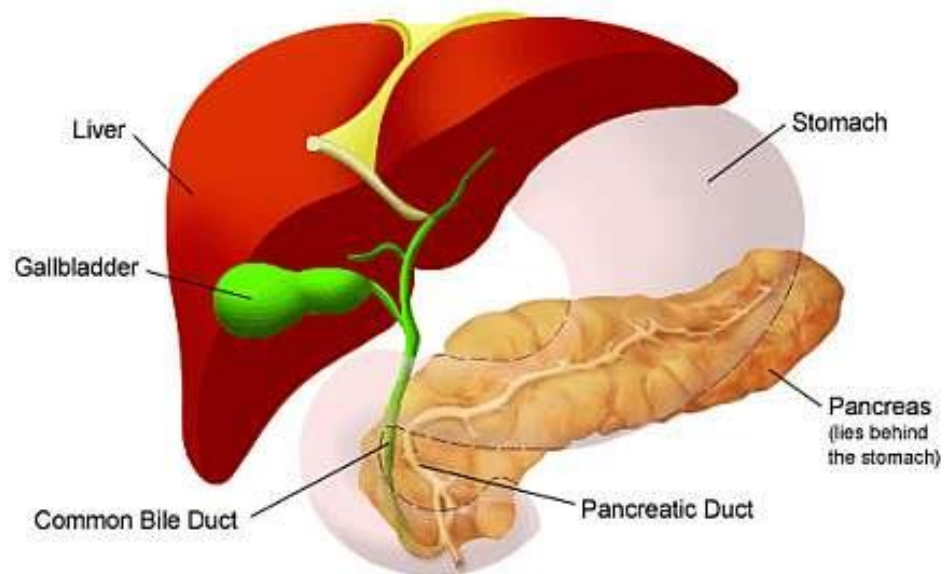


Which are more deadly, male or female named hurricanes?



Jung K, Shavitt S, Viswanathan M, Hilbe JM (2014). Proc Natl Acad Sci USA
111(24):8782–8787

Anatomy of the Pancreas



If you have a brain you are biased



Male

Female

Male

Female

Husband

Male

Female

Uncle

Male

Female

Grandpa

Male

Female

Son

Male

Female

Boy

Male

Female

Girl

Male

Female

Mother

Male

Female

Daughter

Male

Female

Grandma

Male

Female

Wife

Arts

Science

Arts

Science

Engineering

Arts

Science

Biology

Arts

Science

Music

Arts

Science

Chemistry

Arts

Science

Literature

Arts

Science

Geology

Arts

Science

English

Arts

Science

Humanities

Arts

Science

Physics

Arts

Science

Math

Female

or

Arts

Male

or

Science

Female

**or
Arts**

Male

**or
Science**

Music

Female
or
Arts

Male
or
Science

Mother

Female

**or
Arts**

Male

**or
Science**

Philosophy

Female

**or
Arts**

Male

**or
Science**

Father

Female

**or
Arts**

Male

**or
Science**

History

Female
or
Arts

Male
or
Science

Wife

Female

**or
Arts**

Male

**or
Science**

Engineering

Female
or
Arts

Male
or
Science

Son

Female

**or
Arts**

Male

**or
Science**

Chemistry

Female

**or
Arts**

Male

**or
Science**

Physics

Male

or

Arts

Female

or

Science

Male
or
Arts

Female
or
Science

Father

Male

or

Arts

Female

or

Science

Engineering

Male

or

Arts

Female

or

Science

Music

Male
or
Arts

Female
or
Science

Daughter

Male
or
Arts

Female
or
Science

Uncle

Male

or

Arts

Female

or

Science

Math

Male
or
Arts

Female
or
Science

Girl

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or

Arts

Female

or

Science

Literature

Male
or
Arts

Female
or
Science

Husband

Male

or

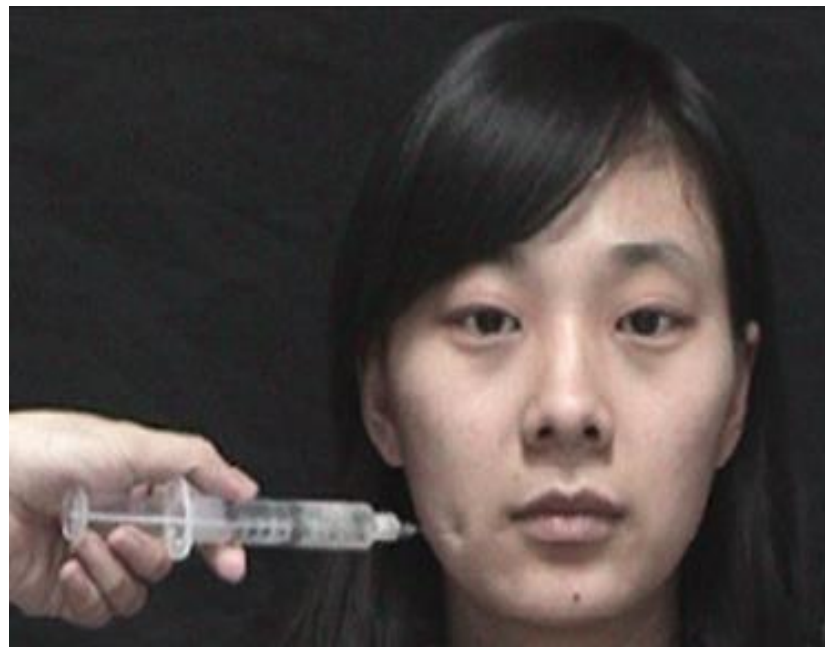
Arts

Female

or

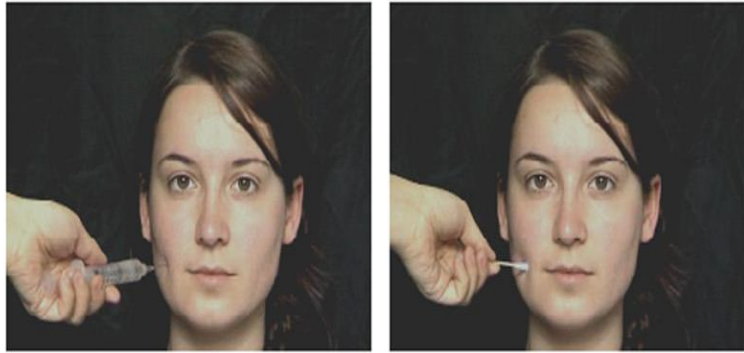
Science

Physics



a

Caucasian faces

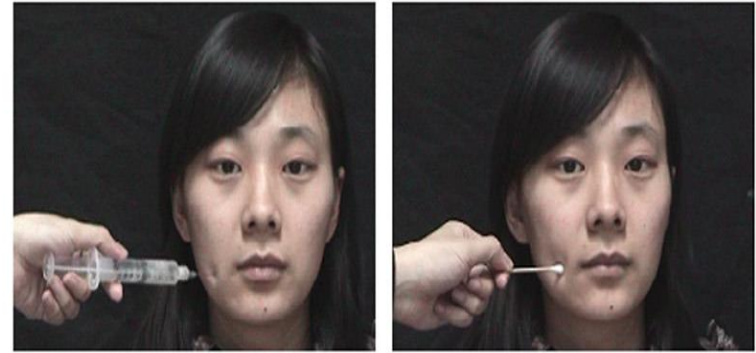


painful

non-painful

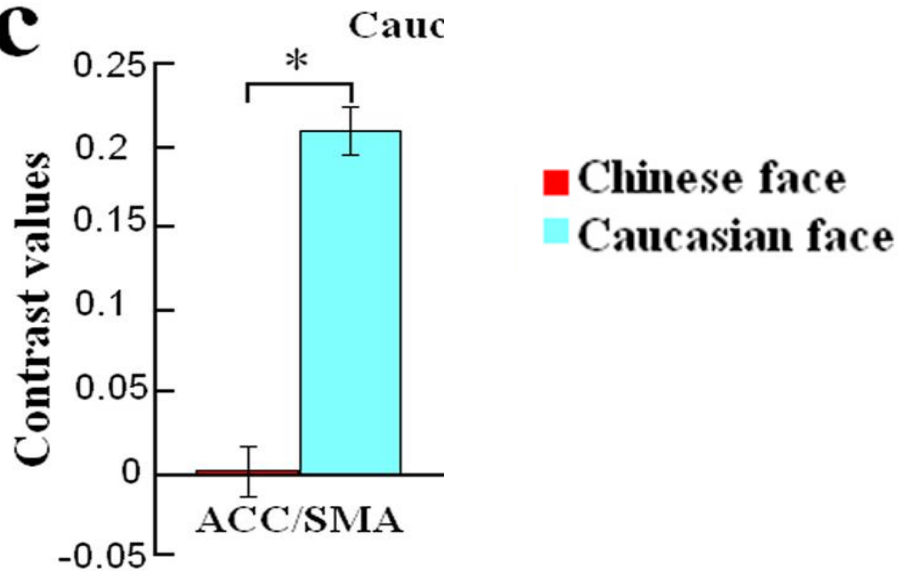
b

Chinese faces

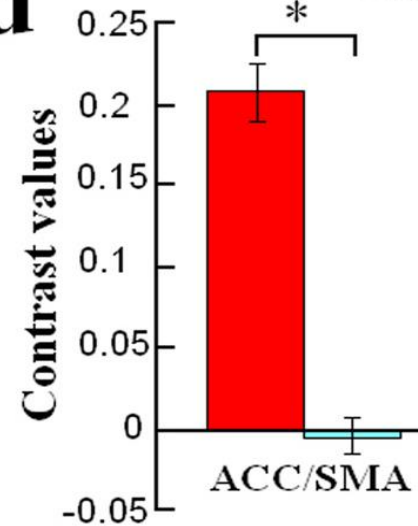


painful

non-painful

c**d**

Chin



A racquet and ball together cost \$1.10



The racquet is \$1 more. How much is the ball?

What answer popped into your brain?

$$\text{Racquet} + \text{Ball} = \$1.10$$

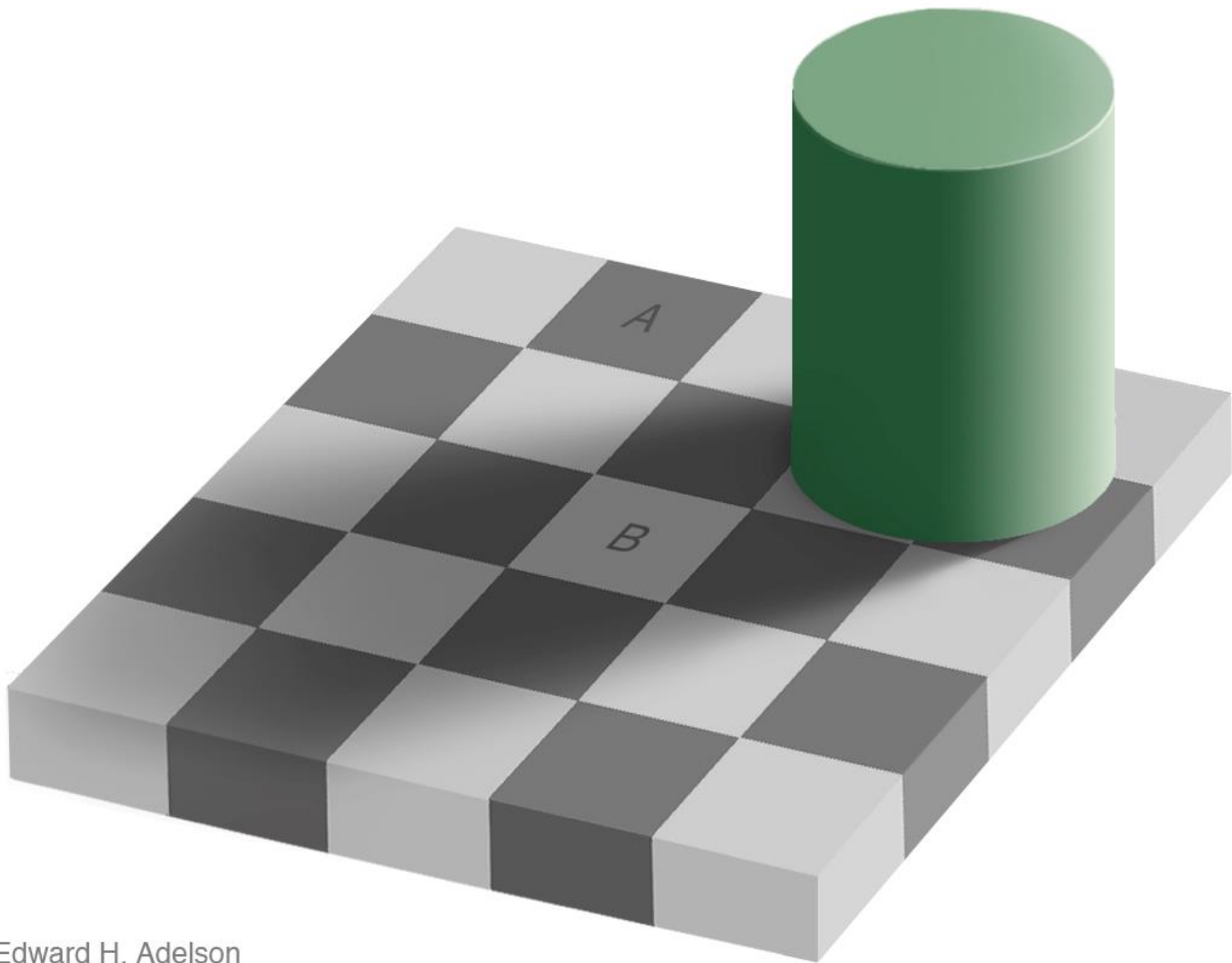
Racquet is a dollar more, so...

10 cents!

$$\text{Racquet} + \text{Ball} = \$1.10$$

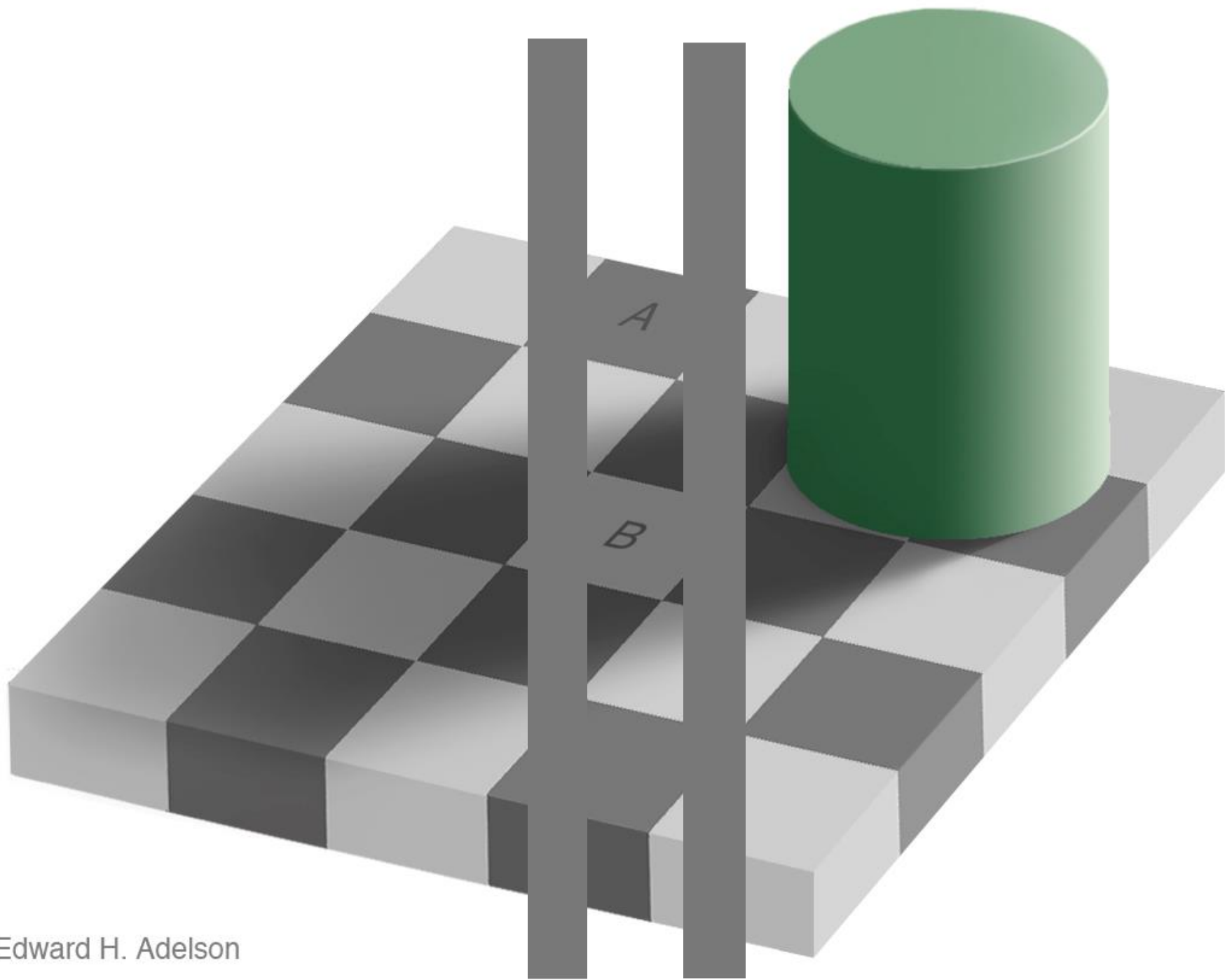
$$\text{Racquet} = \$1.05$$

$$\text{Ball} = \$0.05$$



Edward H. Adelson





Edward H. Adelson

Types of Bias

Explicit Bias: conscious preference (positive or negative) for a social category.

Implicit Bias: preference for a social category that operates outside of awareness.

- Often these explicit and implicit biases are informed by stereotypes and prejudices.

Implicit Bias

Research Indicates:

- Implicit biases are pervasive
- People are often unaware of their implicit biases
- Ordinary people harbor negative and positive associations in relation to various groups
- Implicit biases predict behavior

Relationship between Stereotyping and Bias in Healthcare

- Often two types of stereotypes are observed in clinical interactions
 - Automatic Stereotyping: stereotyping without being consciously aware of it (implicit bias)
 - Goal Modified Stereotyping: done with a specific goal in mind (filling in gaps on patient's information to make complex decisions)

Implicit Biases in Healthcare

- ▶ White children with appendicitis were almost three times as likely as black children to receive opioids in the emergency room.¹
- ▶ A 2012 meta-analysis² of 20 years of published research found that blacks were:
 - ▶ 34 percent less likely than whites to be prescribed opioids for conditions such as backaches, abdominal pain, and migraines
 - ▶ 14 percent less likely to receive opioids for pain caused by traumatic injuries or surgery

1. Goyal MK, et. al. Racial Disparities in Pain Management of Children with Appendicitis in Emergency Departments. JAMA Pediatr 2015; 169(11): 996-1002.

2. Meghani SH, et. al. Time to Take Stock: A Meta-Analysis and Systematic Review of Analgesic Treatment Disparities for Pain in the United States. Pain Medicine 2012; 13(2): 150-174.

Activity 1

Who has what?



David
Bill



Pete



Steve



Dan

Sarah



Jennifer

Melissa
Amara

- Who has high blood pressure?
- Who is uninsured?
- Who is clinically depressed?

David

Sasha

Larry Who suffers from PTSD?

- Who has an eating disorder?

Kelly

Amber

Steve

Small Group Discussion

- Discuss who you matched with which medical conditions and why
- Discuss the types of information you drew upon to make these decisions (past experience? physical appearance?)

Origins of Bias

Think about things you learned growing up:

- Messages from family and friends
- Institutional messages (church, school, health and medicine, etc.)
- Media messages (tv, radio, magazines, social media, etc.)
- Experiences you have had

Implicit bias and health equity

1. Interpersonal Interactions



- Diagnoses
- Pain management

2. Internal Dynamics



- Communication
- Collaboration
- Performance reviews
- Compensation/Promotion

3. Costs/Waste



- \$310 billion per year

<https://www.ncbi.nlm.nih.gov/pubmed/21563622>

**CONFRONTING
IMPLICIT
DIAS
DIAS**

Mitigation Strategies

- Understand and respect the tremendous power of unconscious bias – Frequent self-monitoring can be helpful.
- Increasing opportunities for contact with individuals from different groups – Actively seek to make new friendships/relationships with folks from different social identities.
- Counter stereotype imaging – Actively thinking about examples that counter known/potential stereotypes []
- Perspective Taking – Placing yourself in your patient's shoes and trying to understand their perspective

Mitigation Strategies

- Stereotype replacement – Constantly self-monitoring your speech and behavior to offset implicit stereotyping. – For example, use person first language. Research shows that patients prefer when health professional refer to their “weight” rather than using words like “obesity” or “fatness”.
- Individuation – Consciously focusing on specific information or unique traits about an individual rather than the social categories to which they belong. For example, instead of using traditional patient classifications to identify patients, focus on a common identity that you have with that person.
- Partnership Building – Reframing the client/therapist to a collaborative partnership rather than one between someone with high-status based on knowledge and one of low status.

The LEARN Communication Model

1. Listen
2. Explain
3. Acknowledge
4. Recommend
5. Negotiate

Adapted from Blueprint for Teaching Cultural Competence in Physical Therapy Education. Accessed at:
<https://www.apta.org/Educators/Curriculum/APTA/CulturalCompetence/>

The RESPECT Communication Model

1. RAPPORT
2. EMPATHY
3. SUPPORT
4. PARTNERSHIP
5. EXPLANATIONS
6. CULTURAL CONSCIOUSNESS
7. TRUST

Adapted from Blueprint for Teaching Cultural Competence in Physical Therapy Education. Accessed at:
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The RESPECT Communication Model

1. RAPPORT

- Connect on a social level
- Seek the patient's point of view
- Consciously attempt to suspend judgment
- Recognize and avoid making assumptions

2. EMPATHY

- Remember that the patient has come to you for help
- Seek out and understand the patient's rationale for his or her behaviors or illness
- Verbally acknowledge and legitimize the patient's feelings

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The RESPECT Communication Model

3. SUPPORT

- Ask about and try to understand barriers to care and compliance
- Help the patient overcome barriers o Involve family members if appropriate
- Reassure the patient you are and will be available to help

4. PARTNERSHIP

- Be flexible with regard to issues of control
- Negotiate roles when necessary
- Stress that you will be working together to address medical problems

The RESPECT Communication Model

5. EXPLANATIONS

- Check often for understanding
- Use verbal clarification techniques

6. CULTURAL CONSCIOUSNESS

- Respect the patient and his or her culture and beliefs
- Understand that the patient's view of you may be identified by ethnic or cultural stereotypes
- Be aware of your own biases and preconceptions
- Know your limitations in addressing medical issues across cultures
- Understand your personal style and recognize when it may not be working with a given patient

The RESPECT Communication Model

7. TRUST

- Self-disclosure may be an issue for some patients who are not accustomed to Western medical approaches
- Take the necessary time and consciously work to establish trust

Always check you blind spots!



Questions?

For more information please contact:

Stan Hudson
Health Literacy Director
stan@wisconsinliteracy.org
(608) 257-1655 Ext. 2



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