

10 tips on how to combat your unconscious bias

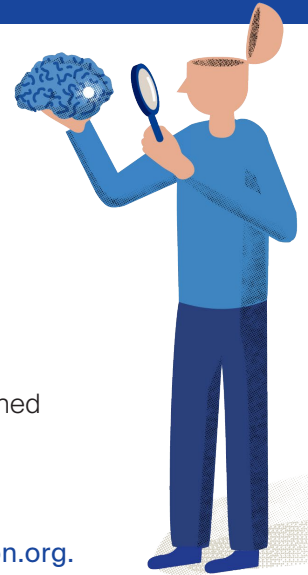
The term unconscious bias (UB) refers to the feelings and attitudes we have—but are not aware of—toward certain people or groups. While UB is not intentional and is not the result of malicious intent, it can lead us to judge, show prejudice, or stereotype people without realizing it. When UB, also called implicit bias, is uncontrolled, it can negatively influence behavior of an individual toward patients and/or learners.

A systematic review of 42 articles published in BMC Medical Ethics in 2017 indicates that health care professionals exhibit the same levels of implicit bias as the wider population (FitzGerald, C. and Hurst, S., 2017).

The AO is aware that individual actions are not enough and is in the process of creating and implementing processes and programs to make the organization more diverse and to create a culture of inclusion. These go hand in hand with combatting unconscious bias in a systematic way on an organizational level. For regular

updates, consult the newly launched AO Access website here at www.aofoundation.org, or for questions, please contact diversity.inclusion@aofoundation.org.

Research suggests that realizing one's own implicit biases is more effective than explicit bias training when it comes to combating one's own implicit biases. With that in mind, the AO Access working group shares the following strategies.



1 Learn about UB; everyone has it.

Some video suggestions to get you started with your reflection process.

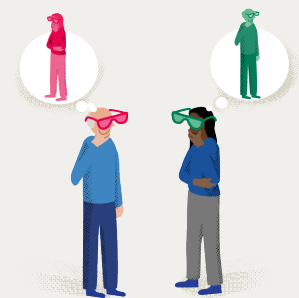
Association of American Medical Colleges: Exploring Unconscious Bias in Academic Medicine: <https://www.youtube.com/watch?v=eadpfj3Br4c>

Association of American Medical Colleges (Washington, DC): AAMC Chief Diversity Officer Marc A Nivet Ed D. interviews Howard Ross, Founder & Chief Learning Officer of Cook Ross and author of Reinventing Diversity: Transforming Organizational Community to Strengthen People, Purpose and Performance.

Institute for Healthcare Improvement: How Can Providers Reduce Unconscious Bias?

<http://www.ihl.org/education/IHIOpenSchool/resources/Pages/AudioandVideo/David-Williams-Don-Berwick-How-Can-Providers-Reduce-Unconscious-Bias.aspx>

David R Williams, Professor of Public Health at the Harvard T.H. Chan School of Public Health, has been researching health inequities in the United States for two decades. In this video, he sits down with Don Berwick, MD, President Emeritus and Senior Fellow at IHI, to describe three promising strategies to reduce implicit bias.



2 Self-identify possible areas of UB: Take the anonymous Implicit Association Test (IAT) at implicit.harvard.edu

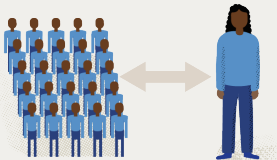
- Promote diversity, inclusion, and equity at both the individual and organizational level.
- Assessment tools provide impetus to recognize and reveal deficiencies to implement change.

3 Be honest to yourself and acknowledge your UBs

- Ask for candid feedback.
- Examine your own possible biases to understand the roots of stereotypes and prejudice.
- Practice self-monitoring and self-regulation.
- Interrupt biased thinking to generate non-discriminatory behavior.



4 Interact with your patients/learners, considering them as an individual rather than (stereotyped) members of a group

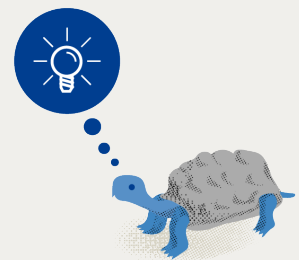


- Stereotypes may be harmful to your patients' health.
- Read about the 'Healthcare Stereotype Threat' here: www.ncbi.nlm.nih.gov/pmc/articles/PMC4755717/
- Strengthen counter-stereotype associations as a strategy to reduce and overcome stereotyping.

5 Slow down where you can: Research suggests that under stress, individuals tend to resort to biases when making decisions

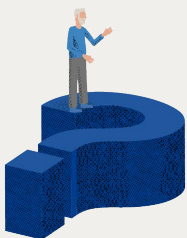
www.qualityinteractions.com/blog/unconscious-bias-in-healthcare

- Consider where biases may influence your thoughts and behavior.
- Examples of UB leading to health disparities include:
 - i. White male physicians are less likely to prescribe pain medication to black patients than to white patients.
 - ii. Doctors assume their black or low-income patients are less intelligent, more likely to engage in risky behaviors, and less likely to adhere to medical advice.
 - iii. Pregnant women face discrimination from health care providers on the basis of their ethnicity and socioeconomic background (www.mhtf.org/2015/04/10/addressing-disparities-in-the-u-s-for-maternal-health-and-rights).
 - iv. Women presenting with cardiac heart disease (CHD) symptoms are significantly less likely than men to receive diagnosis, referral and treatment, due to misdiagnosis of stress/anxiety (www.eurekalert.org/pub_releases/2008-10/crf-srt101008.php).



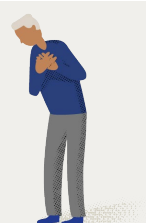
6 Expand your comfort zone

- Be curious and make a conscious effort to interact with individuals and/or groups unfamiliar to you.
- Get to know people on an individual level; biases are usually derived stereotypes and generalizations.



7 Be humble, recognize and apologize if you messed up

- Acknowledge and apologize for mistakes.
- Use mistakes as an opportunity to do things differently next time.
- This process can strengthen your relationships with others.



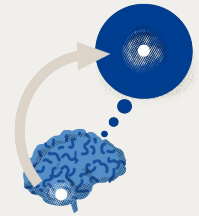


8 Don't be a silent bystander when observing UB in the workplace

- Identify when bias is emerging and take a decision to address the situation, to act while continuing the conversation.
- Use questions to invite a discussion.
- State your unease using 'I' statements.

9 Talk about UB

- Encourage conversations around biases.
- Model ideal behaviors.
- Discuss the importance of UB with your learners and teams.



10 Use inclusive language—and check out our 10 tips on how to enhance opportunity, diversity and inclusion in your institution: the faculty support packages facultyfocus.aeducation.org/2020-01/assets/tips-and-tricks-for-opportunity-diversity-inclusion_01.pdf

- It's chairperson (not chairmen).
- Use neutral pronouns if possible; and use female (not just male pronouns)
- Use the word folks instead of guys.

Reference

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Ten tips on how to enhance opportunity, diversity, and inclusion in your institution. Available at: <https://images.aofoundation.org/CIP/asset/download/Gallery/10322>

Kirwan Institute approach to countering unconscious bias as an active bystander. Available at: <https://bit.ly/2JNP0mM>

*** Disclaimer: we herein acknowledge that most of the data referred to in this article are based on research conducted in North America. We recognize and regret not being able to include more global data at this point and intend to be more inclusive in the future.