

# MOVING BEYOND PERSONAL BIAS

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## AMAT Conference

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# Bias and Stereotypes

- We talk often about the use of stereotypes in everyday life
- The reality is that we use stereotypes (generalizations) as a way of “knowing” what others are like
- DEF: “Stereotypes are well-learned sets of associations between some trait and a social group” (Chapman, et al, 2013)
  - A stereotype may be accurate at a group level, but doesn’t account for variance at the individual level
  - Can also be detrimental when they are the only source of knowledge we seek about a culture/group or individual
  - And when we use them as a crutch
  - Instead of experiencing groups/individuals personally

# IB & Stereotypes

## EXAMPLE OF IMPLICIT BIAS:

- Assuming that the woman coming into the hospital room is a nurse instead of a doctor because of her gender expression.
- Assuming that you have to teach an older adult how to use a tech product.
- A store associate following a young person in a store because they are concerned about shoplifting.



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# Defining Implicit Bias

- Bias is the “implicit” aspect of prejudice (Devine, 1989)
- **Unconscious stereotypes toward a group of people that affect our understanding, actions, judgments**
- *Unconscious activation of prejudiced notions of race, gender, ethnicity, age and other stereotypes that influences our judgment and decision-making capacity (from early work by Devine, 1989).*
  - The alarming reality is that bias “can be automatically activated in ways that bypass deliberate thought” **similar to a stereotype** (Chapman, et. al, 2013, p. 1501).
  - Bias influences our judgment in unintended and unacknowledged ways

# Defining Implicit Bias (2)

- Implicit bias **develops early in life from repeated reinforcement of social stereotypes**
- In a 2006 study by Baron & Aanaaji, on adolescent development of IB into adulthood, researchers **found *explicit* beliefs about race became more egalitarian with age, but *implicit* beliefs about race remained unchanged.**
- What does this mean?
  - While our explicit beliefs may evolve over time, **we must contend with enduring implicit bias that significantly influences our interactions** with people from stereotyped groups.

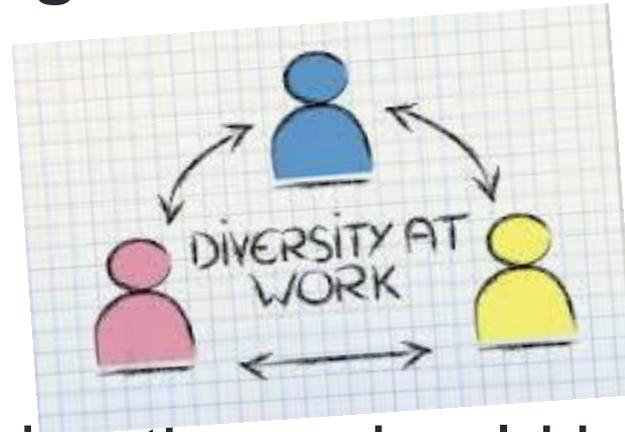
# Testing Bias

- Anthony Greenwald, now a psychology professor at the University of Washington, came up with the Implicit Association Test (IAT) – (1998)
  - According to Greenwald, the test is not designed to show whether a person is racist
  - It doesn't look at unexpressed bigotry, but rather the unconscious ways bias is expressed [in our behavior, decision-making] (The Economist, 2012)
  - Premise: **Implicit attitudes can't be measured using introspection**; rather, we needed a mechanism for people to respond more quickly to concepts that are closely associated in their minds

# Bias in different arenas:

## Hiring practices

- Hiring is critical to any organization
- Important for hiring managers to identify potential candidates **who are skilled and who can complement the organization's culture**



- With so much at stake, there should be incentives to ensure that the process is efficient and gives each candidate a fair appraisal

# What studies say...

- Many studies have looked at bias in the job screening process
  - One study showed that when evaluating identical resumes, participants were more likely to interview a candidate with a name more often identified with Caucasian-Americans than with African Americans (Richards-Yellen, 2013)
  - Mock jurors were more likely to associate Caucasian-American males than Asian-American males with traits identified with being a litigator



# Let's look at cases...

- Issue of unconscious bias came to the fore in 2010/11 during an **attempt by a group of female Walmart employees who alleged they had been discriminated against**
- The case went all the way to the Supreme Court, but was shot down on the bases that 1.6 women did not have enough in common to constitute a *class action* suit
- This case came to the limelight because Walmart did not have the objective criteria for determining promotion
  - Instead, as the Supreme Court Justice stated, the company relied on “the subjective judgment of supervisors” (The Economist, 2012)

## Let's look at cases -2

- In another case out of Iowa, 6,000 African American state employees alleged in a class action suit they were passed over for state jobs and promotions and that the behavior had gone on for several years
  - What is interesting about this case is that even though they sued for monetary damages, the real goal was not financial
  - The lawyers in this case used allegations of bias to petition the judge to order changes in how the state trained managers, screened candidates and tracked hiring disparities (The Economist, 2012)
  - Majority of supervisors who work for the state are white in a state with a population that is over 90 percent white

# Bias and healthcare disparities

- Medical professionals strive for equality in treating patients, but disparities are still prevalent
- The existence of cultural stereotypes influences how information about a patient is processed
- Can lead to unintended bias in treatment



# Bias and healthcare disparities-2

- One study used the Implicit Association Test (IAT) to measure IB among internal medicine and emergency medicine residents (Green, et al, 2007).
  - Found significant pro-White bias despite no “explicit” preference for Whites over Blacks
  - Participants implicitly associated Blacks with uncooperativeness, particularly regarding procedures
  - Another study generated findings that linked compliance with White patients (Sabin, et al, 2008).

# Bias and healthcare disparities -3

- In fact, there is much work being done on the link between implicit bias and health disparities among underrepresented groups
  - Can stem from uncertainty, time pressure around the diagnostic process
  - But much work takes a **critical look at the communication styles of doctors and passive versus active patient participation**
  - Previous work has characterized these populations as passive, without realizing that these patients are in fact, active participants in their care and enact resistance in subtle, often unrecognized ways

# Implicit Bias and Organ Donation

- Research shows that overall, individuals favor and see the need for organ donation
- However, the disconnect is in the realm of ACTION
- Numerous studies and recommendations have been put forth to influence public behavior
  - One study showed that while individuals think organ donation is a good thing to do, on a large scale, we fail to actually register to donate
  - Some research has also chronicled the **“ick” factor associated with organ donation. Speaks to negative stigmas and fears** attached to these procedures
  - There is a definite underuse of transplantation among blacks and an overuse of it among whites (Epstein, et. al, 2000)

# Relevant Cultural Issues

- One study, (Joshi, 2011), explored reasons for differences in donation rates between ethnic groups. Found:
  - In some cultures it may be emotionally distressing to even discuss organ donation
  - Gender was also a factor (more women than men hold organ donation cards)
  - Some felt organ donation was in violation of their religious beliefs
  - Other residual issues included fear of death, and body image

# A case on transplantation

- In a study from 2000, researchers found **black patients were less likely than white patients to be rated as appropriate candidates for transplantation** and were more likely to have had incomplete evaluations
- This same study found that among patients considered to be “appropriate” for transplantation, blacks were less likely than whites to be referred [to transplant center] for evaluation (90 percent versus 98 percent), less likely to be placed on a waiting list (71 percent versus 86 percent), and less likely to undergo transplantation (17 percent versus 56 percent)
  - Notice the dramatic gap in that last finding
  - Epstein, et. al, 2000

# Bias and healthcare disparities -3

- **Beginning to break new ground in understanding how culture influences the doctor-patient relationship**
  - Recent study by one of our doctoral students found evidence that many patients engage in power negotiations in order to have a voice in their own care (J. Hudson, 2015)
  - Recommends a deeper-level of study among doctors of the various cultures they will serve
  - Use proactive strategies to foster more patient participation instead of relying on stereotypes of these groups
  - Particularly related to organ transplantation, studies recommend medical professional modify the criteria used to qualify patients for transplantation (Klonoff, 2009)

# Strategies for combating bias

- **Increase the level of diversity in our organizations, professional associations, teams, etc.**
  - The multiplicity of diversity begins to reduce bias
- **Individuating**
  - Conscious effort to focus on specific information about an individual
  - So that “information” becomes more salient than messages about a person’s social category
  - Understand the complexity of organ donation decisions and the centrality of culture in these decisions
- **Perspective-taking**
  - Conscious attempt to envision another person’s viewpoint
  - Can reduce bias in social interactions

# Where we go from here...

- We need to begin to think of implicit bias as a “habit of mind”
- This approach allows us to focus on conscious and deliberate behavioral change
- Especially important considering the basis of implicit bias is not intentional; deliberate, but subliminal
- Lot of work right now looking at implicit bias, profiling and stereotyping in many of the shooting incidents getting national media attention
  - Much of this debate started with Trayvon Martin’s death in 2012
  - Good article in UCLA Law Review  
<http://www.uclalawreview.org/defusing-implicit-bias-2/>

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