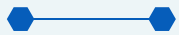
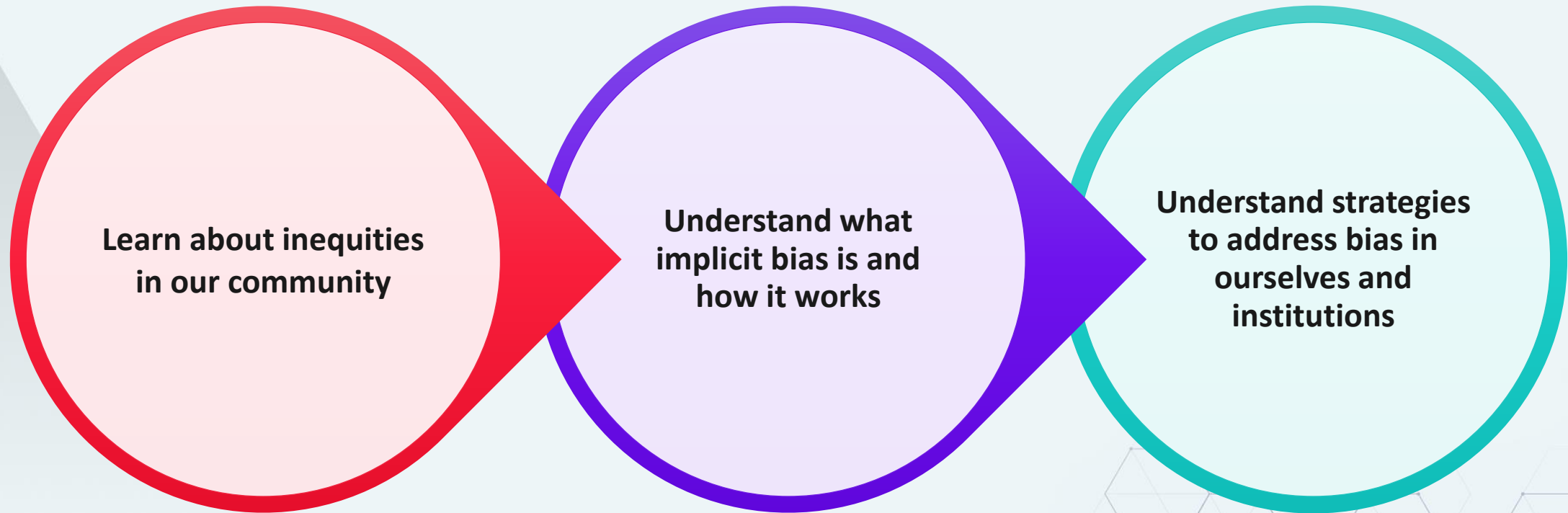


# Addressing Bias in Healthcare

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2020



# Session Flow:



# Race to Equity Report 2013: Tale of Two Counties

## RACE TO EQUITY

A Baseline Report on the  
State of Racial Disparities in Dane County



## County A

Unemployment = 5%

Child poverty rate = 5%

Median Income = \$63,673

3<sup>rd</sup> Grade Not Proficient = 11%

Suspended/Expulsion = 2%

Not Graduating = 16%

Juvenile Detention = 7/1000

Foster Care = .7/1000

Adult Arrests = 36/1000

## County B

Unemployment = 25%

Child poverty Rate = 56%

Median Income = \$20,664

3<sup>rd</sup> Grade Not Proficient = 48%

Suspended/Expulsion = 21%

Not Graduating = 50%

Juvenile Detention = 103/1000

Foster Care = 11/1000

Adult Arrests = 295/1000

# CHNA 2019: Tale of Two Counties

## White

Unemployment = 2.6%

Child poverty rate = 4.7%

Median Income = \$68,981

Very Low Birthweight = 6.2%

Infant Mortality (1,000 births) = 4.3

Breastfeeding at Discharge = 84.4%

## African American/Black

Unemployment = 7.4%

Child poverty Rate = 45.6%

Median Income = \$30,404

Very Low Birthweight = 15.6%

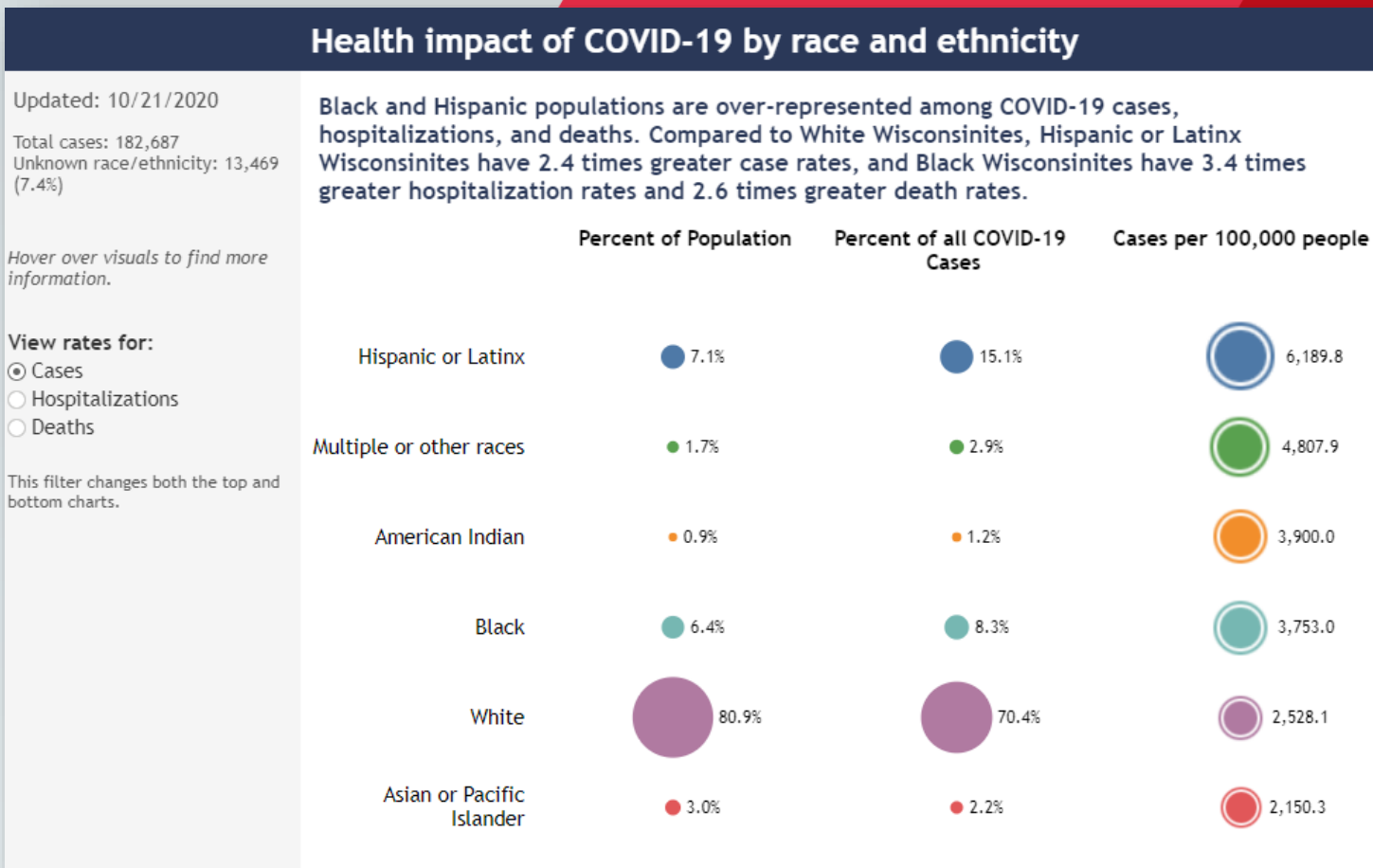
Infant Mortality (1,000 births) = 13

Breastfeeding at Discharge = 57.7%

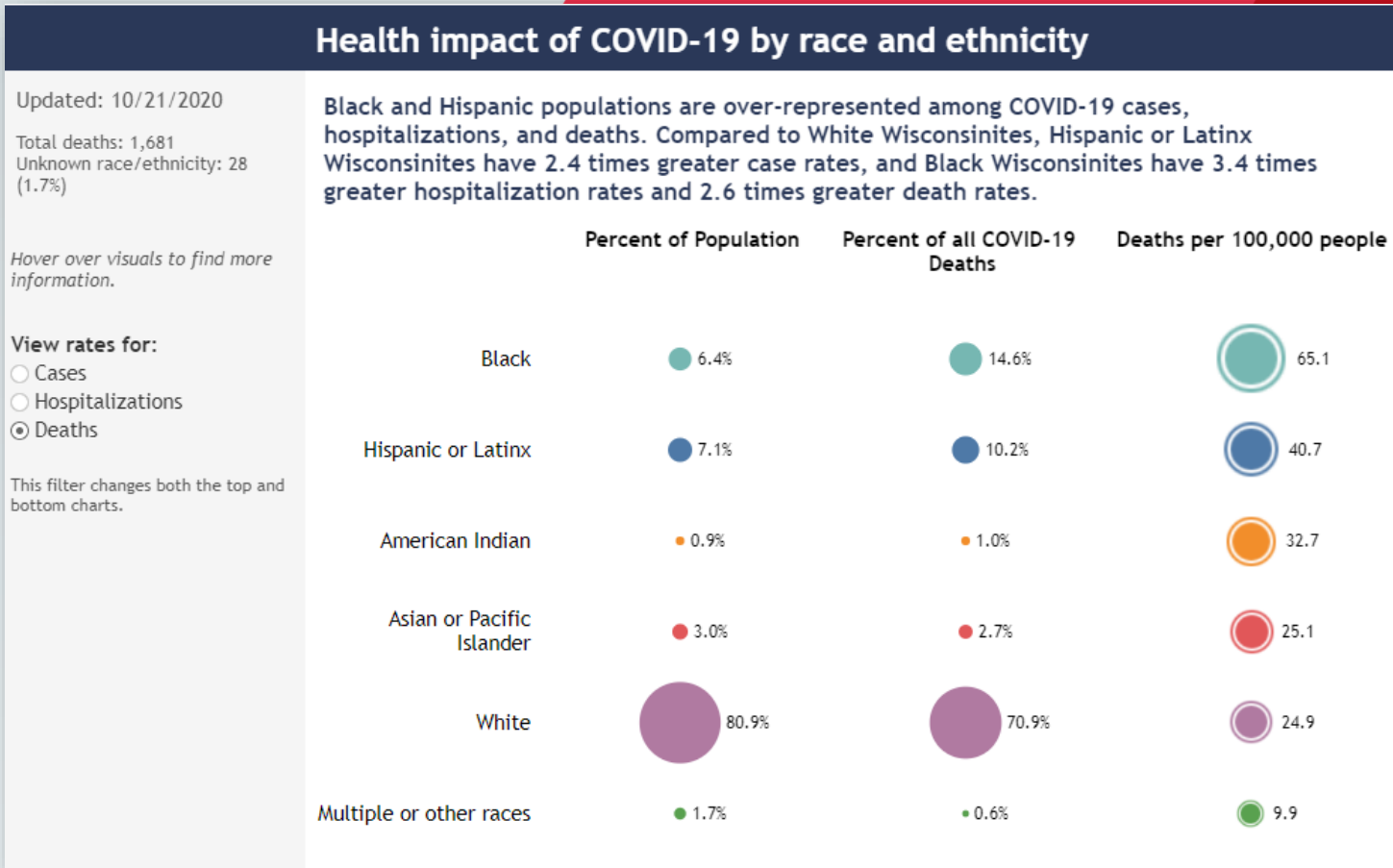
Data Sources:

1. Local Area Unemployment Statistics (LAUS). Retrieved from <https://jobcenterofwisconsin.com/wisconomy/pub/laus.htm#Viz>
2. Briefing Paper #393. Economic Policy Institute. Retrieved from <http://www.epi.org>
3. Wisconsin Department of Health Services. (2015) Retrieved from: <http://healthydane.org>
4. Addressing Sexual and Reproductive Health Disparities. Planned Parenthood. (2015) Retrieved from: [https://www.plannedparenthood.org/files/3614/2773/6927/AA\\_Disparities.pdf](https://www.plannedparenthood.org/files/3614/2773/6927/AA_Disparities.pdf)
5. Lifecourse Initiative for Healthy Families. <https://lhf.wisc.edu/about-us/our-approach/>

# WI COVID-19 Data by Race & Ethnicity: Cases

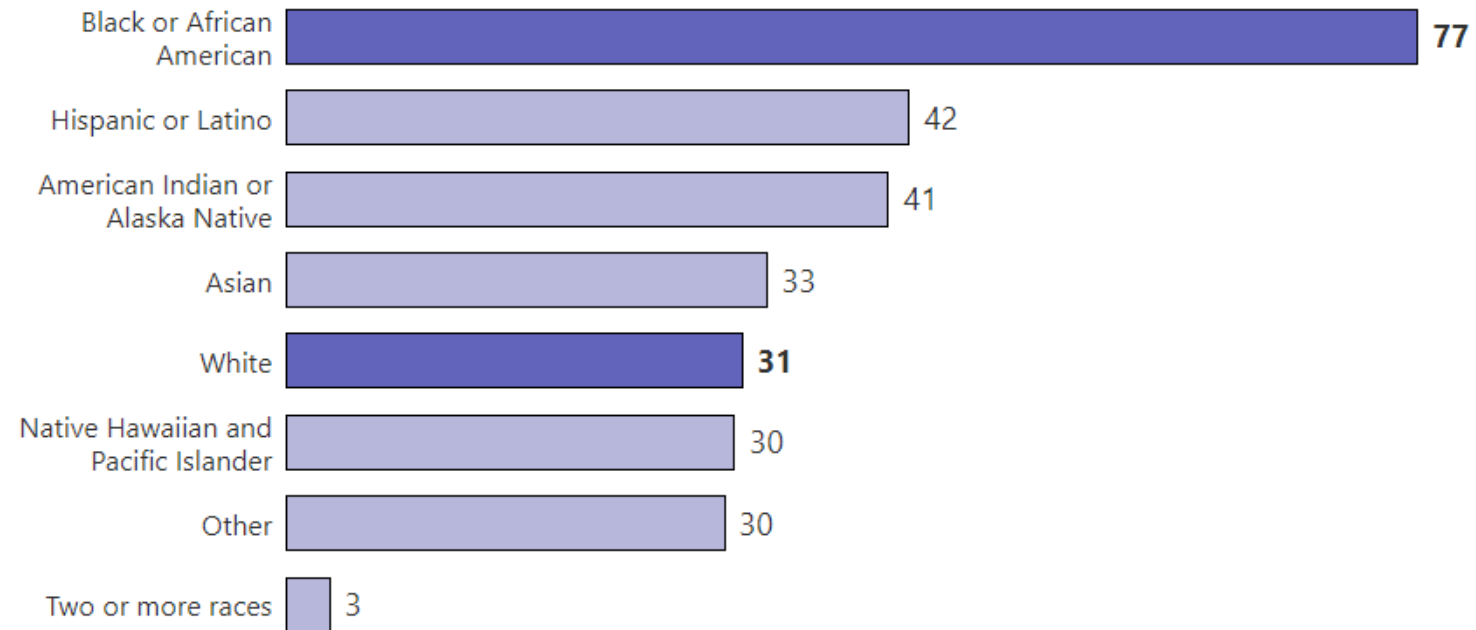


# WI COVID-19 Data by Race & Ethnicity: Deaths



**Nationwide,  
Black people are  
dying at 2.5 times  
the rate of white  
people**

Deaths per 100,000 people by race or ethnicity



[Notes ↓](#)

We've lost at least 31,602 Black lives to COVID-19 to date. Black people account for 22% of COVID-19 deaths where race is known.

COVID-19 may not discriminate based  
on race -- but U.S. health care does

**PBS**   
**NEWS  
HOUR**



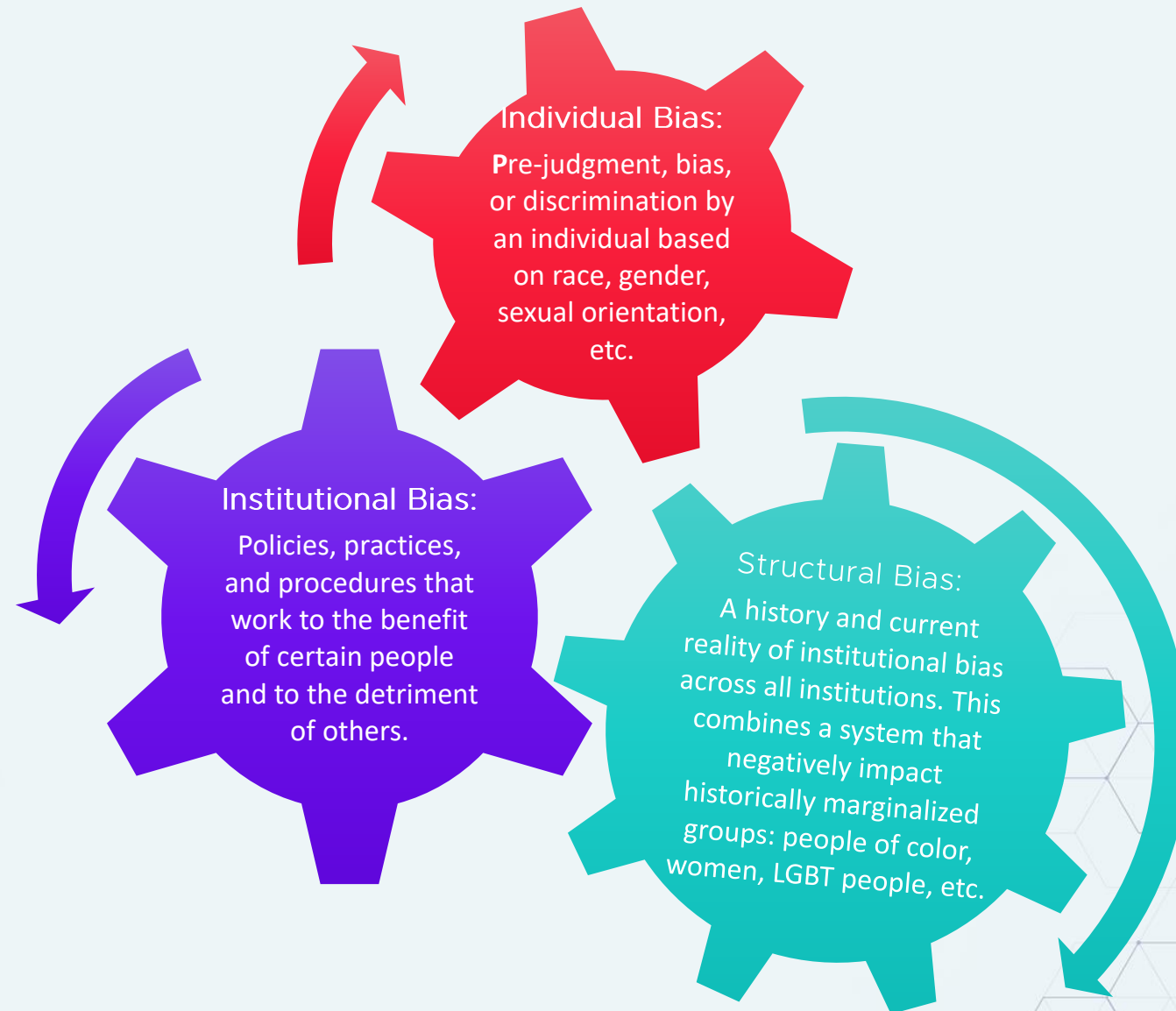
## Why These Inequities?

One of the factors is known to be

*Implicit bias within our healthcare system and other institutions*



# Layers of Bias: Individual - Institutional - Structural



# Biases are Simply...

What we make  
up about  
people before  
we know who  
they are.

# We React Before We Realize It

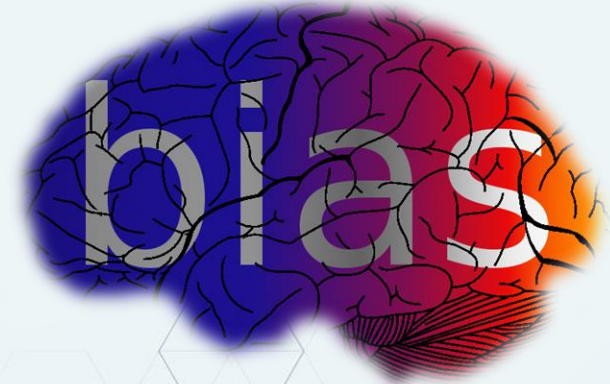
11 million bits  
of information  
every second

SORT INTO  
CATEGORIES

CREATE  
ASSOCIATIONS  
based on  
PRIMING from  
previous  
experiences

FILL IN GAPS  
Unconsciously

CREATE  
SCHEMAS  
based on  
STEREOTYPES



Only 40 bits of  
information  
get absorbed

The disturbing reason  
why African American  
patients may be  
undertreated for pain

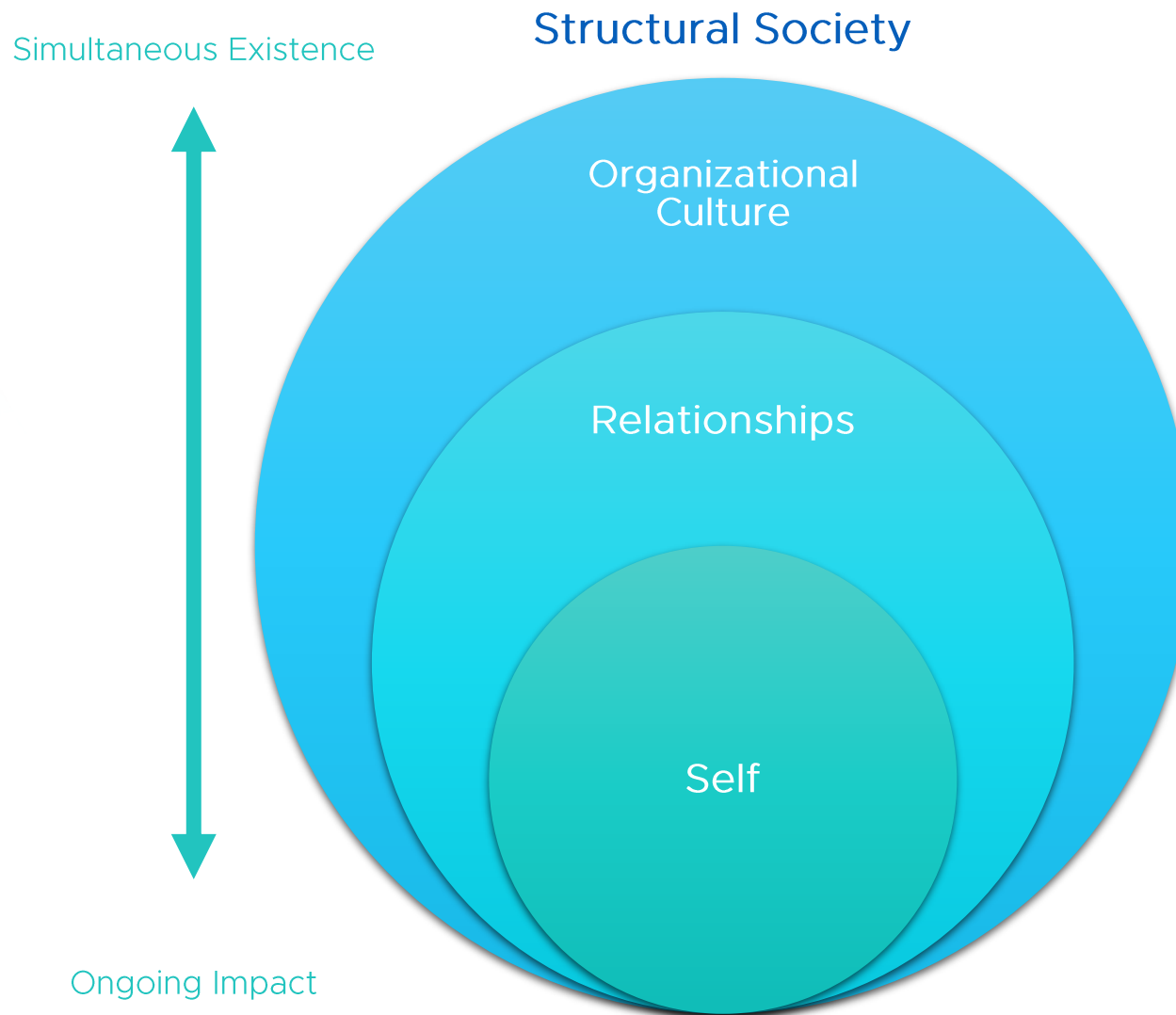
**List of False Beliefs about Biological Differences from  
the study:**

- Blacks age more slowly than whites
- Blacks' nerve endings are less sensitive than whites'
- Black people's blood coagulates more quickly than whites
- Whites have larger brains than black
- Whites have a better sense of hearing than blacks
- Blacks' skin is thicker than whites
- Blacks have a more sensitive sense of smell than whites
- Whites have a more efficient respiratory system than blacks
- Black couples are significantly more fertile than white couples
- Blacks are better at detecting movement than whites
- Blacks have stronger immune systems than whites

**SO...**

**HOW DO WE ADDRESS BIAS?**

# Spheres of Influence



## **Structural Society:**

Think of the institutions and systems such as governance, education, healthcare, economy, etc. needed to impact structures in society.

## **Organizational Culture:**

Think of the personal and professional relationships and culturally normalized and institutional values, beliefs, behaviors, mindsets, practices, policies, emotions that you have influence over.

## **Relationships:**

Identify practices and patterns that you can directly encourage/interrupt in your relationships with colleagues, family, friends, neighbors, etc.

## **Self:**

Identify practices and patterns in your emotions, mind, spirit, and body, that you can directly encourage/interrupt in yourself.

# Strategies to Counter your Biases

Accept that the brain is biased. We all internalize unconscious assumptions, and this can lead us to overlook certain information. One way to find out more is to take the Implicit Association Test, found <https://implicit.harvard.edu/implicit/selecttest.html> and by selecting the RACE IAT.

Practice “Constructive Uncertainty”. I don’t know what I don’t know. I don’t know what it’s like to be you.

Explore your awkwardness and discomfort. Where do you notice discomfort? With whom are you interacting? What spaces are you in? This is a good way to gather data about areas where bias may be creeping into your interactions.

Amplify Marginalized Voices and Perspectives and expose yourself to positive role models.

Get feedback from someone who has agreed to do that labor for you. Additionally, seek out anecdotes and feedback from employees and patients to investigate how implicit biases affect staff experience and care delivery.

Analyze data by race and ethnicity to identify disparities and look for situations where bias might be impacting care.

Label biases as they occur to acknowledge that they’re there and decide the most effective strategy to mitigate that type of bias.

Use an Equity Impact Assessment tool to bypass bias and make more informed decisions.

One size does NOT fit all. Remember that each person is different and may need something different; equity *not* equality.

Stereotype Replacement. What images or stories can you replace with those that run counter to the stereotype?

Act. Saying you care about diversity is not enough. We know that training works best when people participate and address their biases in everyday situations. So do something!



# Use an Equity Tool

Equity Tools guide leaders through a process of reflection and evaluation to improve workplace culture and mitigate unintended consequences of bias in decision-making in daily tasks, project implementation, policy creation and strategic planning.

1. Who is this policy/practice/decision going to help the most, who will it help the least and who not at all?
2. Are all racial and ethnic groups that are impacted by the policy, practice or decision at the table?
3. How might our unconscious attitudes and assumptions be playing out as we evaluate this policy/practice/decision?
4. Does the data being used detail race, ethnicity, socioeconomic information?
5. Are there ways we can mitigate harm to/unintended consequences on staff, patients and communities of color?
6. How does this proposal support our vision dismantling racism in ourselves, in our system and in our community?
7. Does the policy, practice or decision worsen or ignore existing disparities?
8. Based on the above responses, what revisions are needed in the policy, practice or decision under discussion?

Contact [ntakahashi@uwhealth.org](mailto:ntakahashi@uwhealth.org) with questions

# Thank You

