



CCHN/CHAMPS Health Equity Learning Series Strategies for Building Cultural Competency Wednesday, August 9, 2023

PARTICIPANT HANDOUTS

Strategies for Building Cultural Competency and Addressing Bias within Ourselves and Our Systems

Thank you for attending today's training. By doing so you are strengthening the ability of your community-based and patient-directed health center to deliver comprehensive, culturally competent, high-quality primary health care services.

Presented by:

Jason Vitello, Denver Public Health, Colorado Criminal Justice Reform Coalition (CCJRC)

Live Broadcast Date/Time:

Wednesday, August 9, 2023

11:00-12:15PM Mountain Time / 12:00-1:15PM Central Time

Target Audience:

The presentations in the series are intended for health center and PCA staff from various positions including clinical and non-clinical. Please see the registration information sent out prior to each training for more information about learning objectives and other details.

Event Overview:

This session will examine concepts of cultural competency and bias as a continual process that individual health centers can work towards. This webinar will offer insight into the structures and systems that cause health disparities and provide strategies and conversation points to address cultural responsiveness, cultural humility, and cultural representation within health centers.

Learning Objectives:

Though this session, participants will:

- Define bias and cultural competence through the lens of healthcare.
- Identify elements of structural inequality and systemic oppression in the field of healthcare.
- Develop strategies to challenge biases and build cultural competency in your health center.

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CCHN/CHAMPS ARCHIVES

This event will be archived online. This online version will be posted within two weeks of the live event and will be available for at least one year from the live presentation date.

For information about all CCHN archives, please visit: www.CCHN.org/webinar-archive.

For information about all CHAMPS archives, please visit: www.CHAMPSonline.org/events-trainings/distance-learning.

DESCRIPTION OF CCHN

The Colorado Community Health Network (CCHN) represents the 20 Colorado Community Health Centers that together are the backbone of the primary health care safety-net in Colorado. For more information about CCHN, please visit www.CCHN.org.

DESCRIPTION OF CHAMPS

Community Health Association of Mountain/Plains States (CHAMPS) is a non-profit organization dedicated to supporting all Region VIII (CO, MT, ND, SD, UT, and WY) federally funded Community, Migrant, and Homeless Health Centers they can better serve our patients and communities. Currently, CHAMPS programs and services focus on education and training, collaboration and networking, workforce development, and the collection and dissemination of regional data. For more information about CHAMPS, and the benefits of CHAMPS Organizational Membership, please visit www.CHAMPSonline.org-

SPEAKER BIOGRAPHY



Jason Vitello is the Equity and Community Development Manager at the CCJRC, Past President of the Colorado Public Health Association, a practitioner at the Public Health Institute at Denver Health, and an Adjunct Professor at the Graduate School of Social Work at the University of Denver. He is also a national speaker, consultant, educator, and activist committed to the advancement of justice, equity, and healing in our communities, and in the systems that serve them. Formerly, Jason was a social worker and therapist who provided advocacy and clinical services to individuals from systemically excluded communities. It should be noted that before he was ever a provider of human services or family assistance - he was a recipient of them. His ultimate

interest is in collective liberation and the betterment of the human condition through fierce compassion, unity across struggles, the peaceful obliteration of structural inequalities, and comprehensive paradigm transformation.

How Implicit Biases (Which We All Have) Reinforces Structural Inequality and Systemic Oppression

CCHN/CHAMPS Health Equity Learning Series August 9, 2023, 11:00 – 12:15 MT

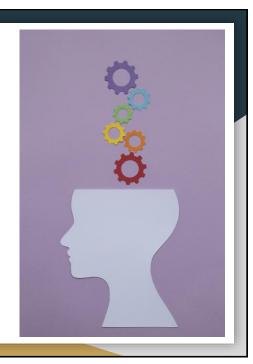
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OBJECTIVES:

- Define bias and cultural competence through the lens of healthcare.
- Identify structural inequality and systemic oppression in the field of healthcare.
- Develop strategies to challenge biases and build cultural competency in your health center.

Poll Question

 How many people, including yourself are viewing this event today?



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A father and his son are in a car accident. The father dies at the scene and the son, badly injured, is rushed to the hospital. In the operating room, the surgeon refuses to operate, saying, "I can't operate on this boy. He is my son."

Who is the surgeon?



Implicit Bias



Implicit bias is "a positive or negative mental attitude towards a person, thing, or group that a person holds at an unconscious level".

Source:

http://med.stanford.edu/diversity/FAQ_REDE.html

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The Human Brain and Bias

- the human mind takes in 11 million bits of information every second but is consciously aware of only 4
- Only <u>2%</u> of emotional cognition is available to us consciously

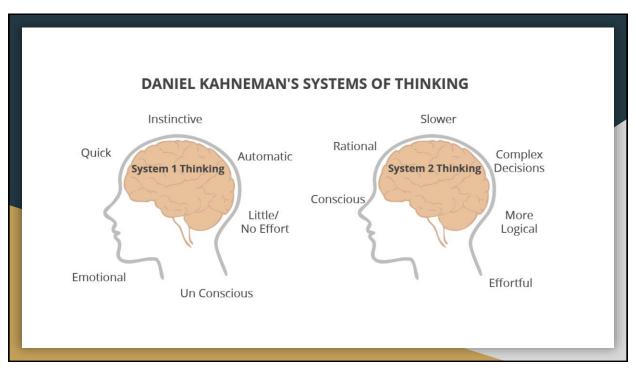
Timothy Wilson, University of Virginia



Additional Characteristics of Implicit Bias

- Implicit biases are pervasive. Everyone possesses them, even people with avowed commitments to impartiality such as judges.
- The implicit associations we hold do not necessarily align with our declared beliefs or even reflect stances we would explicitly endorse.
- We generally tend to hold implicit biases that favor our own in group, though research has shown that we can still hold implicit biases against our in-group.
- Implicit biases are malleable. Our brains are incredibly complex, and the implicit associations that we have formed can be gradually unlearned through a variety of de-biasing techniques.

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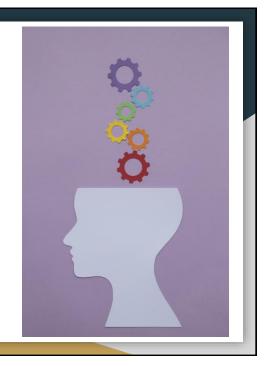




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Poll Question

 Which of the two systems do we utilize the most?



red blue orange purple
orange blue green red
blue purple green red
orange blue red green
purple orange red blue
green red blue purple

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1. Anchoring bias.

People are over-reliant on the first piece of information they hear. In a salary negotiation, whoever makes the first offer establishes a range of reasonable possibilities in each person's mind.



5. Choice-supportive bias.

When you choose something, you rend to feel positive about it, even if that choice has flaws. Like how you think your dog is awesome — even if it bites people every once in a while.



2. Availability heuristic.

People overestimate the importance of information that is available to them. A person might argue that smoking is not unhealthy because they know someone who lived to 100 and smoked three packs a day.



6. Clustering illusion.

This is the tendency to see patterns in random events. It is key to various gambling fallacies, like the idea that red is more or less likely to turn up on a roulette table after a string of reds.



3. Bandwagon effect.

The probability of one person adopting a belief increases based on the number of people who hold that belief. This is a powerful form of groupthink and is reason why meetings are often unproductive.



7. Confirmation bias.

We tend to listen only to information that confirms our preconceptions — one of the many reasons it's so hard to have an intelligent conversation about climate change.



4. Blind-spot bias.

Failing to recognize your own cognitive biases is a bias in itself. People notice cognitive and motivational biases much more in others than in themselves.



8. Conservatism bias.

Where people favor prior evidence over new evidence or information that has emerged. People were slow to accept that the Earth was round because they maintained their earlier understanding that the planet was flat.



9. Information bias.

The tendency to seek information when it does not affect action. More information is not always better. With less information, people can often make more accurate predictions.



13. Placebo effect.

When simply believing that something will have a certain effect on you causes it to have that effect, in medicine, people given fake pills often experience the same physiological effects as people given the real thing.



17. Selective perception.

Allowing our expectations to influence how we perceive the world. An experiment involving a football game between students from two universities showed that one team saw the opposing team commit more infractions.



10. Ostrich effect.

The decision to ignore dangerous or negative information by "burying" one's head in the sand, like an ostrich. Research suggests that investors check the value of their holdings significantly less often during bad markets.



14 Pro-innovation bias

When a proponent of an innovation tends to overvalue its usefulness and undervalue its limitations. Sound familiar, Silicon Valley?



18. Stereotyping.

Expecting a group or person to have certain qualities without having real information about the person. It allows us to quickly identify strangers as friends or enemies, but people tend to overuse and abuse it.



11. Outcome bias.

Judging a decision based on the outcome — rather than how exactly the decision was made in the moment. Just because you won a lot in Vegas doesn't mean gambling your money was a smart decision.



15. Recency.

The tendency to weigh the latest information more heavily than older data. Investors often think the market will always look the way it looks today and make unwise decisions.



19. Survivorship bias.

An error that comes from focusing only on surviving examples, causing us to misjudge a situation. For instance, we might think that being an entrepreneur is easy because we haven't heard of all those who failed.



12. Overconfidence.

Some of us are too confident about our ablittles, and this causes us to take greater risks in our daily lives. Experts are more prone to this bias than laypeople, since they are more convinced that they are right.



16. Salience.

Our tendency to focus on the most easily recognizable the most easily recognizable the state of the state of



20. Zero-risk bias.

Sociologists have found that we love certainty — even if it's counterproductive. Eliminating risk entirely means there is no chance of harm being caused.



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Implicit Bias, Peanut Butter and Jelly, and RACISM



https://www.youtube.com/watch?v=1JVN2qWSJF4

Implicit Bias and Automatic Associations

- Gender Listening
- The Name Game



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REFLECTION – ASSESSING IMPLICIT BIAS

- Question: What are people's first impressions (or stereotypes) of you when they first meet or interact with you?
- What's the truth about who you are?
- Sample script -- When people first meet or interact with me, I think they believe that ______.
 But the truth is ______.

What Causes Implicit Bias?

- We tend to seek out patterns and familiarity
- We like to take shortcuts
- Familial, Social, and Cultural influences



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What Can Trigger Our Unconscious Bias?

- Ambiguous evidence;
- Emotional overload: stress, anger, frustration;
- Cognitive overload: complex decision;
- Fear of threat;
- Emotional and cognitive resources are depleted: tired, low blood sugar ("Hangry");
- Short on time.

Explicit Bias

Explicit bias refers to the attitudes and beliefs we have about a person or group on a conscious level



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Implicit Bias can become Explicit Bias

...when you become consciously aware of the prejudices and beliefs you possess. When they surface in your conscious mind, you can choose whether to act on or against them.



Potential Impacts of Implicit Bias on Ourselves

- Failing to respond to real threats or weaknesses;
- Seeing threats or weaknesses when none are really there;
- Overlooking the right person for recruitment, promotion, reward, or development;
- Passing up a professional opportunity that would have brought real benefits;
- Entering into professional relationships that turn out to be very disadvantageous.

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How our Implicit Biases can Impact Others

Micro-aggressions are defined as "the brief and commonplace daily verbal, behavioral, and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial, gender, sexual-orientation, and religious slights and insults."

RACIAL MICROAGGRESSIONS What are you? Where are you from? Where are you really from? ou speak No, where are you English really really from? so well What do your people think about that? OAGGRESS pretty, for someone You don't act like a normal Your name Black person is too hard to pronounce, ® TURNER CONSULTING GROUP INC.







Project Implicit®

The study will begin in a separate window when you click below.

- For best results, minimize distractions and close other programs.
- 2. The study uses a pop-up window and a temporary cookie. JavaScript must be enabled for the pop-up window to appear.
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http://www.projectimplicit.net/index.html

https://implicit.harvard.edu/implicit/

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IAT General Findings

- 75% have an implicit preference for white people over black people
- o 76% more readily associate "males" with "career" and "females" with "family"
- o 70% more readily associate "male" with "science" and "female" "with the arts"
- o 76% have a preference for people without a disability.

https://implicit.harvard.edu/implicit/selectatest.html

Implicit Bias in Healthcare:

- Non-white patients receive fewer cardiovascular interventions and fewer renal transplants
- Black women are more likely to die after being diagnosed with breast cancer
- Women are less likely to receive life-saving cardiac arrest treatments than men
- Non-white patients are less likely to be prescribed pain medications (non-narcotic and narcotic)
- Black men are less likely to receive chemotherapy and radiation therapy for prostate cancer and more likely to have testicle(s) removed
- Patients of color are more likely to be blamed for being too passive about their health care

https://www.jointcommission.org/resources/news-and-multimedia/newsletters/newsletters/quick-safety/quick-safety-issue-23-implicit-bias-in-health-care/implicit-bi

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Implicit Bias in the Criminal Justice System:

- Imprisonment rates for African Americans are 5.9 times the rates of white Americans due to astronomical arrest rates and longer sentences for similar crimes (Sentencing Project).
- African Americans were arrested 3.7x more often than white Americans for marijuana use even though drug use is consistent between races (ACLU)
- A Black male born in 1991 has a 29% chance of spending time in prison
- Black people, Latinx people, and communities of color are more likely to be stopped, searched, and suspected of a crime — even when no crime has occurred. (Innocence Project)

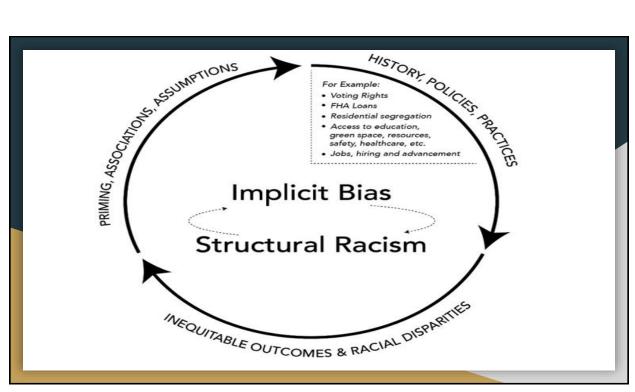
How might Implicit Bias Impact or Effect Public Health? Maternal Child Health?

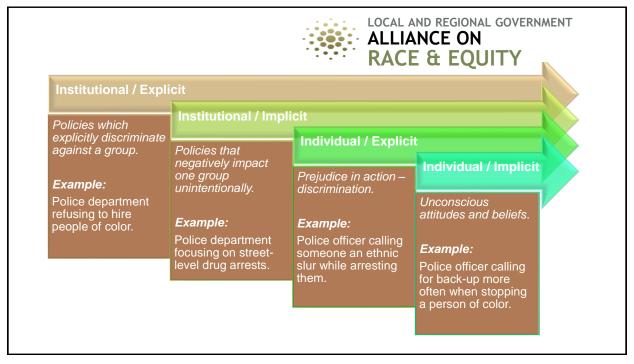
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Implicit Bias Research Summary

Evidence from hundreds of thousands of individuals shows that:

- (1) the magnitude of implicit bias toward members of outgroups is large;
- (2) implicit bias often conflicts with conscious attitudes and intentional behavior;
- (3) implicit bias influences behavior toward those who are the subject of the bias.
- Fair Measures, California Law Review, Kang and Banaji





Charles Hamilton Houston

INSTITUTE FOR RACE & JUSTICE

HARVARD LAW SCHOOL

- I. Bias fuels major social problems
- II. Biases shape our recognition of 'social problems' as such
- III. Biases influence our diagnoses and the solutions we propose

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The Good News

- Self, situational, or broader cultural interventions can correct systematic and consensually shared implicit bias. (Fair Measures, California Law Review, Jerry Kang and Banaji)
- The best candidates for non-prejudiced reactions are a group who are called "chronic egalitarians" - people who monitor their own reactions and behavior in an effort to root out stereotypes and feelings of which they don't approve. (Sheri Lynn Johnson)

How Do We De-Bias?

- Do Not Suppress, Rather Openly Acknowledge and Confront One's Biases
- Intention: Motivation to Change
- Attention: To When Stereotypical Responses or Assumptions are Activated
- <u>Time</u> To Practice New Strategies

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Devine Intervention



"Our data provide evidence demonstrating the power of the conscious mind to intentionally deploy strategies to overcome implicit bias"

Patricia Devine, "Long-term Reduction in Implicit Race Bias: A Prejudice Habit-breaking Intervention"

What Are These Strategies?

- Individuation
- Stereotype Replacement
- Counter-Stereotypic Imaging
- · Perspective Taking
- Increasing Opportunities for Contact

Patricia Devine, "Long-term Reduction in Implicit Race Bias: A Prejudice Habit-breaking Intervention"

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Individuation? (vs. Generalization)

- Moving beyond racial categories by gathering specific information about an individual. This allows you make judgments on the basis of his or her personal, rather than group, characteristics.
- Individuating involves recognizing that race is just one facet of other people that makes each person unique.

Stereotype Replacement

This strategy can be used when you detect stereotypic portrayals of racial minorities in your environment and when you detect a stereotypic response within yourself. Steps:

- 1. Label the response or portrayal as stereotypical
- 2. Evaluate the situation to determine how the response or portrayal occurred and how it might be prevented in the future, and
- 3. Replace the stereotypical response or portrayal with one that is nonstereotypical.

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Counter-Stereotypic Imaging

After you detect a stereotyped response:

- Think of examples of either famous or personally known people that contradict that response.
- Thinking of counter-stereotypic people provides concrete examples that demonstrate the inaccuracy of stereotypes.

Perspective Taking

- Imagining in the first person what it feels like to be in another person's situation. Think about how you would feel to have your abilities questioned, or to be viewed as lazy and potentially violent on the basis of your appearance.
- This strategy can be used either proactively, without any prompting from outside sources, or reactively, after a stereotypic response or portrayal has been detected.
- Perspective taking, especially after the detection of a stereotypic response or portrayal, is very useful in assessing the emotional damage caused by stereotyping others.

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Increasing Opportunities for Contact

- Using the power of positive, sustained dialogue across different identity groups to support individuation, perspective taking and group recategorization.
- Actively seek out situations where you are likely to have positive interactions with stereotyped groups.
- In addition to seeking personal contact, you can modify your visual environment by watching movies, TV, and news that portray stereotyped groups in non-stereotypical ways.

REFLECTION EXERCISE — IMPROVED DECISION-MAKING

- Interrupting/reducing bias requires that we learn how to pause, slow down or be more mindful in how we make decisions and relate to others (or those that we perceive to be "the other").
- Question: What's one thing you're willing to take off of your plate — or do differently — in your personal and/or work life in order to slow down and be more mindful of how you make decisions and interact with others?

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REFLECTION EXERCISE – INDIVIDUATION

- Question Think of 3 to 5 people (in your work or personal circles) who don't look like you (race/ethnicity), think like you (worldview) and haven't lived like you (lived experience) how might you be willing to engage with them with as a way of practicing individuation.
- Remember, individuation is about learning to see people for their individual qualities versus as a stereotypic group.

REFLECTION EXERCISE — COUNTER-STEREOTYPIC IMAGING

 Question: If you could redesign your office, program or common space, what is one specific picture or image you would display to counter negative stereotypes about women, people of color and/or others who may feel negatively stereotyped or marginalized within the larger society?

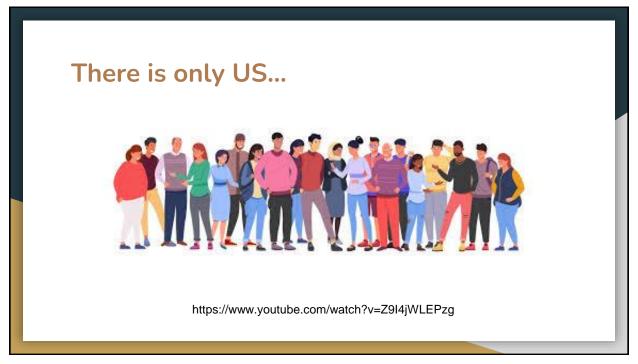
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Other Strategies to Avoid Unconscious Bias

- Recognize we all have bias
- Stop and think! Learn to mistrust your first impressions
- Don't ignore difference be curious
- Challenge negative assumptions and stereotypes
- Don't consciously try to suppress bias
- Don't be too hard on yourself the emotional impact makes bias more likely
- Seek positive examples and role models
- Have fun!
- Keep processes simple
- Schedule demanding cognitive or emotional work away from people decisions
- EAT!
- Measure levels of trust, openness and honesty

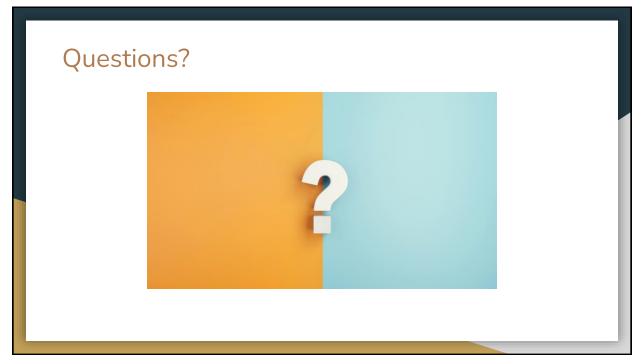




Recommended Reading

- Biased: Uncovering the Hidden Prejudice That Shapes What We See Think and Do by Jennifer Eberhardt
- Blindspot by Anthony Greenwald and Mahzarin Banaji
- Implicit Racial Bias Across the Law by Justin Levinson and Robert Smith

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Join us for our next event!

Individual Perspectives on Health Equity: A Panel Discussion

Wednesday, August 23; 11:00-12:15 MT | 12:00-1:15 CT;

Join us for a moderated panel discussion with past Health Equity Learning Series speakers to highlight the importance of including special population groups in your health equity programming. The topics discussed will allow healthcare workers to better understand the challenges faced by patients who are Indigenous, fat, and/or disabled patients, and to obtain ideas, tools, and strategies to prepare them to offer culturally appropriate and sensitive care to their patients.