

Overcoming Implicit Bias in Treatment Relationships

Presenter: James Rodriguez, LCSW, PhD

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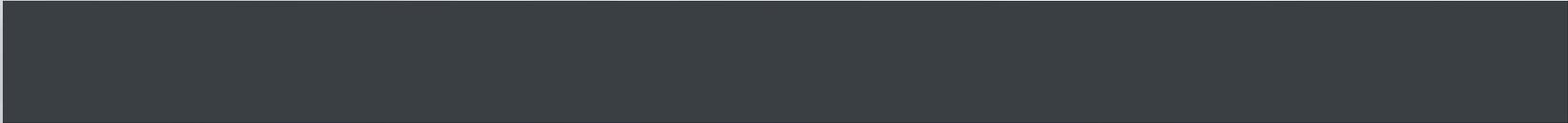
Agenda

- 1. Set the social context for implicit bias**
- 2. Explicit vs. Implicit Bias**
- 3. How Implicit Bias effects MH services**
- 4. Suggestions for overcoming IB in treatment relationships**

Requests

- **Be Brave - participate**
- **Be Humble – it's okay to be wrong**
- **Be patient – with me**
- **Take care of yourself**

Father and Son



The Challenge

“I have a dream that my four little children will one day live in a nation where they will not be judged by the color of their skin, but by the content of their character.”

Martin Luther King Jr. 1963

The Imaginary Line of Social Justice

Unearned Privilege

- Believed, worthy of responsibility, trustworthy, nice, safe

Agents: White, Male, Heterosexual, Middle-class, Euro, Christian, US Born

Social
Justice

**All things
Equal -
The level
playing
field**

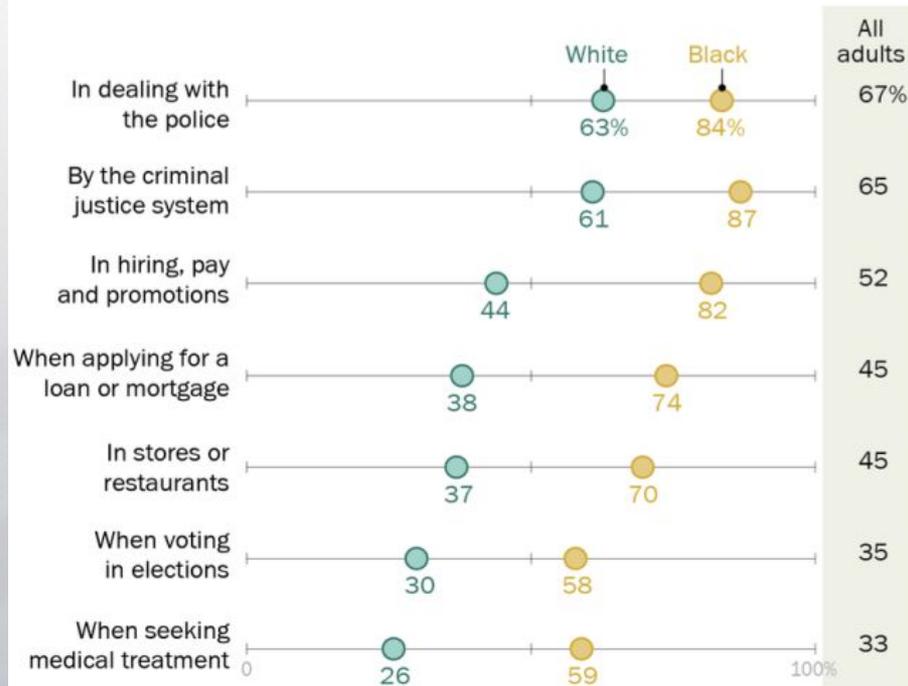
Unearned Disadvantage

- Blamed/scapegoated, feared/mistrusted, irresponsible, unfamiliar, unsafe

Targets: Persons of Color, Female, LGBT, Poor, non-Christian, Less-abled, Immigrant

Whites and blacks differ widely in views of how blacks are treated

% of **whites** and **blacks** saying, in general in our country these days, blacks are treated less fairly than whites in each of the following situations



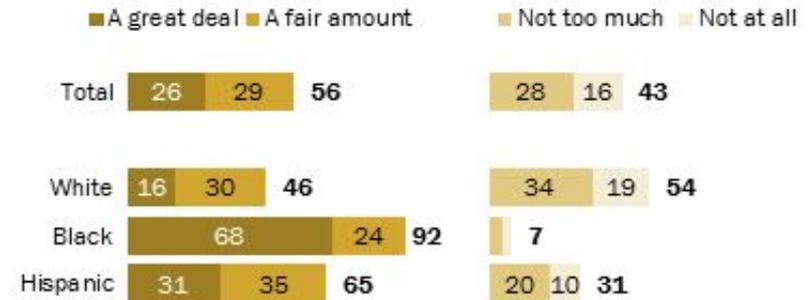
Note: Whites and blacks include those who report being only one race and are non-Hispanic. "In dealing with the police" and "By the criminal justice system" were asked of separate random subsamples of respondents.

Source: Survey of U.S. adults conducted Jan. 22-Feb. 5, 2019. "Race in America 2019"

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Most whites think white people get little or no advantage from their race

% who say white people benefit ___ from advantages in society that black people do not have



Note: Whites and blacks include only those who are not Hispanic; Hispanics are of any race. Don't know responses not shown.

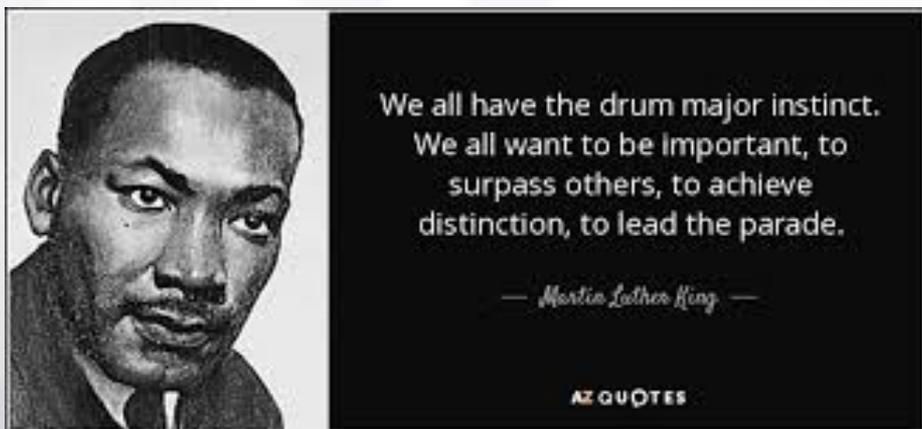
Source: Survey conducted Aug. 8-21, 2017.

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Criticisms of Implicit Bias

- **Not seen as distinct from explicit bias**
- **Difference between lab and reality**
- **Response: People in the majority and in the minority see two different realities.**
 - **People in the majority ONLY see intentional acts as racism**
 - **People in the minority see both intention and unintentional acts of discrimination**

Dr. King Also Said



“Do you know that a lot of the race problem grows out of the drum major instinct? A need that some people have

to feel superior. A need that some people have to feel that they are first, and to feel that their white skin ordained them to be first. And they have said over and over again in ways that we see with our own eyes.” —

Dr. Martin Luther King, 1968

Explicit Biases – Self Care Alert

- **Explicit Biases**
 - Covert bias
 - Prejudice
 - Known to the individual
 - “Old school” racism and discrimination?
 - “What can I do to change?”

Implicit Attitudes

Thoughts and feelings that often exist outside of conscious awareness and are difficult to consciously acknowledge or control.

Implicit on Unconscious Bias

- **Implicit biases are pervasive**
- **It is possible for us to hold unconscious biases that we consciously oppose.**
- **We may believe we are acting in accordance with beliefs but may not be**
- **Biases often favor our in-group**



Implicit Attitudes

How do you tap the unconscious?

1

Green

Red

Purple

Green

2

Blue

Yellow

Blue

Red

3

Green

Yellow

Red

Purple

1

RED

BLUE

RED

BROWN

2

GREEN

GREEN

YELLOW

BROWN

3

YELLOW

BROWN

BLUE

BLUE

TERRORIST?



Immigrant



Trustworthy?



Implicit Attitudes – **Self Care** **Alert**



Implicit bias seems to predict (to a small degree)

- **Call backs from resumes** (Rooth, 2007)
- **Awkward body language** (McConnell & Liebold, 2001)
- **Hiring men over women** (Rudman & Glick, 2001)
- **Cutting minority student org. budgets** (Rudman et al., 2007)
- **Treatment for heart attacks** (Green et al., 2007)
- **Speed of shooting Blacks** (Glaser & Knowles, 2008)
- **Cops' use of force in the field** (Goff et al., 2014)

Direct and Indirect Impacts in MH Care

- **People of color have less access to MH services than do whites**
- **POC more likely to delay or fail to seek MH services**
- **Systematic Review (Hall et al., 2015)**
 - **14 of 15 studies – evidence of low to moderate IB against people of color**
 - **13 of 15 studies – health care professionals had more negative associations of Blacks**

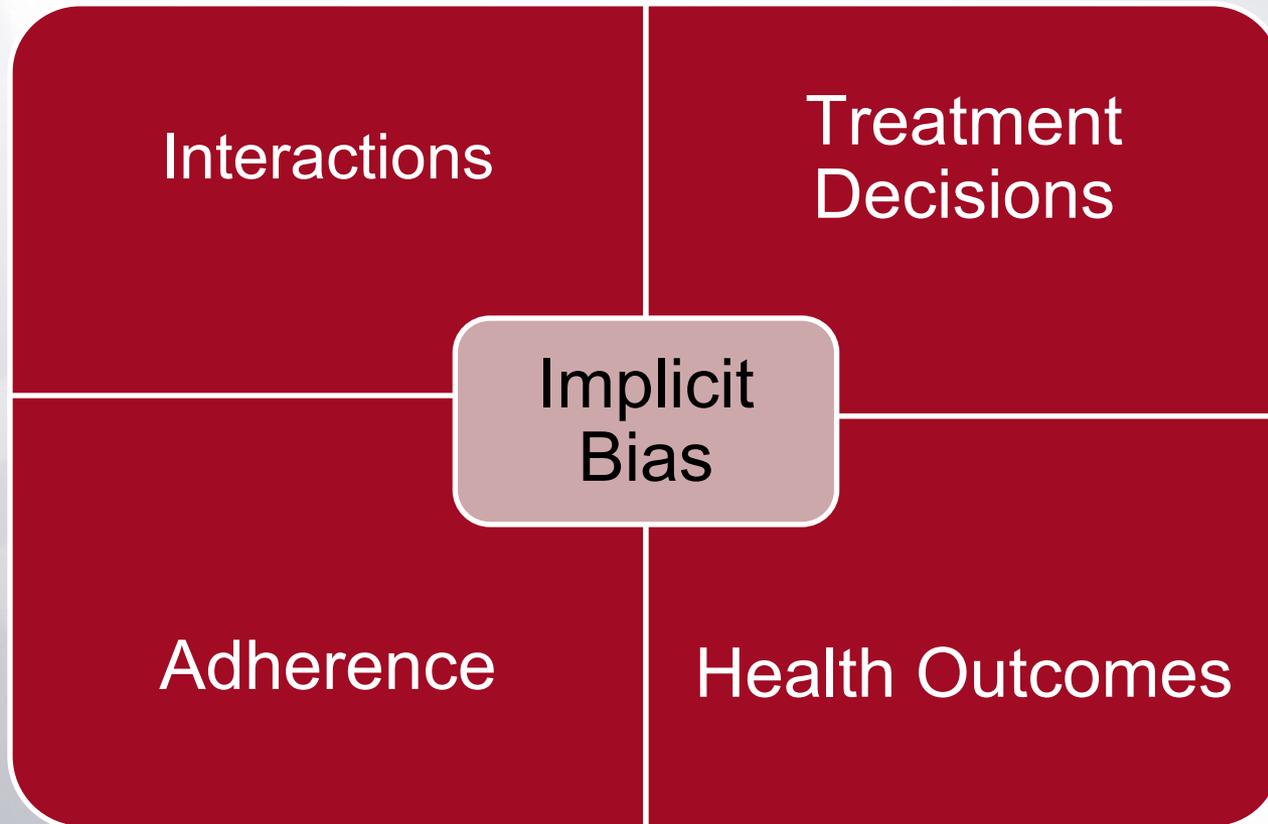
Implicit Bias: The Invisible Backpack



Patient Centered

- Respect
- Collaboration
- Empowerment
- Egalitarian Relationships

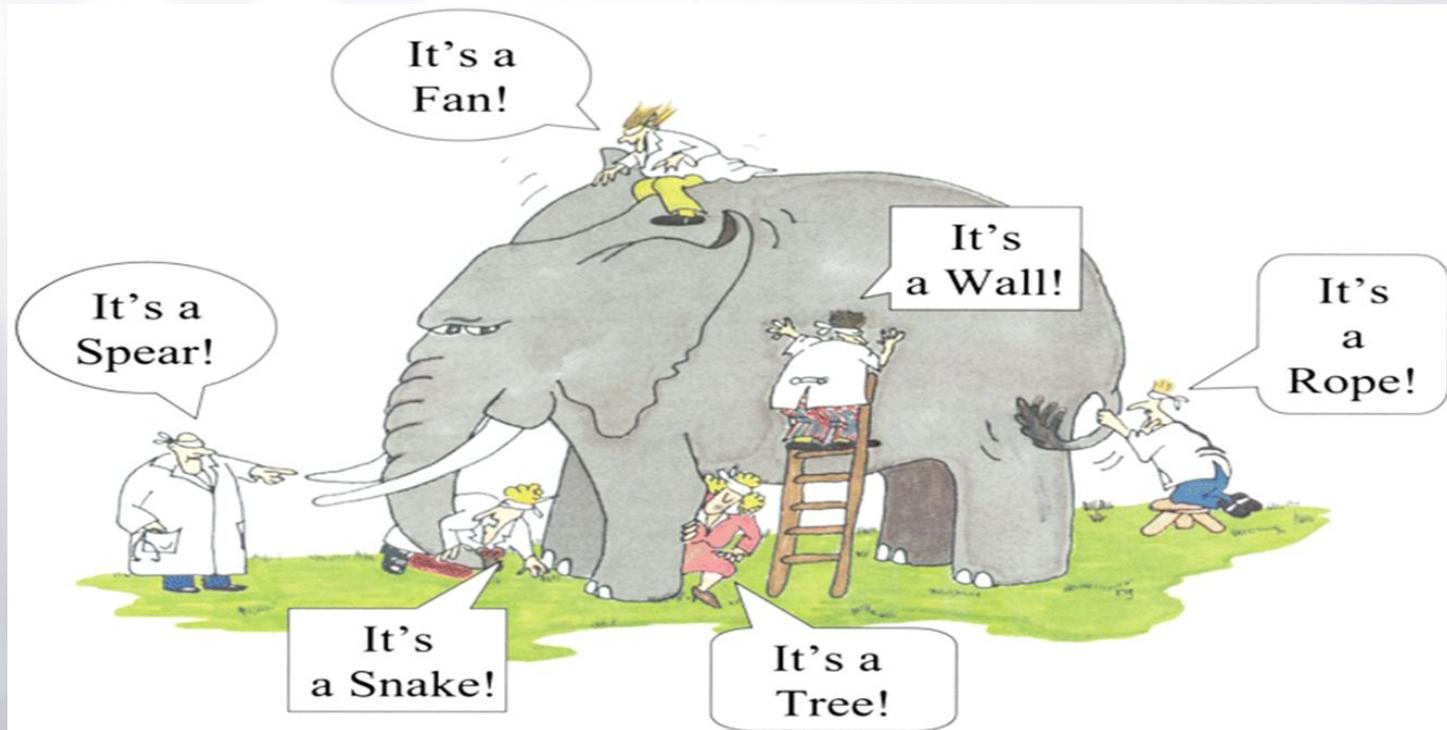
Mechanisms



Addressing Bias

Normal But Not Acceptable

We Only “See” a part of the Whole



SOMETIMES WE ARE NOT EVEN AWARE OF OUR BIASES.

Paranoia or Prejudice or Microaggression?

“People at my job are racist. I often feel like no body respects me. I can say something and nobody listens, then a white person will say the same thing and it’s like the best idea anybody’s ever heard of.”

How to Change Biases

- **Be aware of it**
 - Take the IAT - [Project Implicit](#)
 - Believe they exist
 - Check yourself
- **Be motivated to change**
- **Have a strategy for replacing them**

Replacement Strategies

- **Perspective taking**
- **Look for situational reasons for a person's behavior, rather than personality traits or stereotypes about that person's group.**
 - **Beware of other biases (Actor-Observer)**
 - **Play the "What if" game..**
- **Seek out people who belong to groups unlike your own.**
- **Seek out alternative media**
- **Expose yourself – get comfortable with being in the minority****

**** Especially for this in privileged positions: Whites, Males, Heterosexuals, Christian, Citizens , etc.**

Contact

- **The Contact Hypothesis – under certain conditions, direct contact between members of hostile groups will reduce stereotyping, prejudice and discrimination**
 1. **The contact must be between two equal status groups**
 2. **The contact involves personal contact between the two groups**
 3. **The contact situation must provide opportunities for mutual cooperative activity to achieve a joint goal**
 4. **The social norms in the contact situation must favor and encourage cooperation, group equality and intergroup contact.**
- **Research supports the contact hypothesis**

Reasons Diversity is not Discussed in Treatment

www.TheNationalCouncil.org

- People from targeted groups may be reluctant to share about discrimination for fear that their provider will not understand
- Exposure to “isms” may be seen by participants and providers as a social rather than mental health problem
- Providers often feel that they don’t have the tools to have conversations about diversity

Failure to speak about issues of diversity can lead to ruptures in the relationships that can lead to poor engagement or early drop out

Bottom line: It is up to the provider (the person with power) to provide space for discussions about diversity

Benefits of Talking about Diversity

www.TheNationalCouncil.org

- **Builds Trust**
- **Builds individual coping with stress**
- **Can help build racial identity and protect against race-related stress**
- **Contribute to self-efficacy and esteem**
- **Can contribute to the perceived sensitivity and honesty of the provider**
- **Clears space to discuss other issues**

Greene and Blitz, 2012

Tip: Explore Social Identities

www.TheNationalCouncil.org

You can say:

“Aspects of a person’s background or identity can be very important to know about in our work together. By background or identity, I mean, for example, your race, the communities or groups that you belong to, the languages you speak, where you or your family are from, your gender or sexual orientation or your faith or religion.”

Exploring Social Identity

www.TheNationalCouncil.org

You can ask

“Is this something you feel comfortable talking about?”

“What do you think?”

“For you, what are the most important aspects of your background or identity?”

Drum Major



Thank you!

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Let's Talk!

What is one takeaway that you have from this training?

How do implicit biases affect the way you interact with your colleagues and clients?

What are some strategies you have found helpful in your settings to overcome biases?