

1 **HBPC: Implicit Racial Bias**
2 **Resident 9 Reflections and Commitment to Change**
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5

6 **Q1:** What was it like to see your result on your implicit bias test? How did
7 that affect your patient encounter? After completing these home visits,
8 what are you noticing in your mind, in your gut or in your heart? What
9 barriers did you face in applying some of these strategies during your
10 home visit? How could you overcome these barriers? What strategies will
11 you try to implement in your clinical practice in the future?
12

13
14 **Resident 9:**
15

16 To be honest, when discussing the implicit bias test, I don't think it is very
17 accurate. And I don't say that to try to deny that I and everyone else likely
18 has some racial bias. I say it because of the way the test is structured. It
19 always starts by having bad and african americans associated with the
20 same key. I have taken this test multiple times and it is always structured
21 that way. It seems to be teaching you to link the two, so it's no surprise
22 when you don't perform as well when they switch the key association. This
23 may also explain why a lot of African Americans even have a slight bias
24 against their own race. I just think I would trust the test a lot more if it was
25 random which order the keys were associated first. This particular patient
26 encounter was unique because it was a phone encounter. I know I've met
27 thesee patients before but I honestly don't remember what their race is. I
28 obviously couldn't see it through the phone, so there was virtually no way
29 racial bias could play a role in our visit. This is one huge advantage to
30 phone encounter (although their are a lot of negatives which make make
31 them not ideal in general). It has also been discussed that it may be a

inaccurate -
Dabot
Critical 7 IAT

less surprising / consistent

Patient race
Unknown

↳ Advantage 7
phone visit
↳ Fall under
Telemedicine

Phone ideal for transgender pt. 32

Strategy? (phone visits) 33

Self aware? 36

Bias against pt with poor health - 38

Bad word - unhealthy, poor compliance, lack of self control - 39

Bias common among doctors 40

Barrier: Judgemental 43

Surprised by severity 49

self awareness 51

strategy: asking questions 53

32 good platform for transgender care. The patient may feel more relaxed
 33 and open to discuss their care if they don't feel judged by being physically
 34 present in the office. As discussed with Dr Goroncy prior to our visits, I
 35 think another form of bias that is huge in the medical field, that I personally
 36 struggle with and is not discussed enough, is bias against the very
 37 unhealthy population. I'm talking about the severely obese, uncontrolled
 38 diabetic, heavy smoker, heavy drinker, drug addict, etc. Most of look at
 39 this type of patient and our first thought is, they did it to themselves, or
 40 even worse, they deserve it. No one talks about it, but I would be willing to
 41 bet nearly every doctor does it to some degree. I personally think this
 42 needs to be discussed, maybe even more so than racial bias, because
 43 these patients often get suboptimal care because of this notion that they
 44 did it to themselves, but these are the patients that need medical care the
 45 most. We are ignoring our most vulnerable and sick population. If we
 46 could change this, we could change the face of medicine.

48 **Resident 10:**

49 I was very surprised to see that I had a moderate bias. I expected to have
 50 some bias, but the severity was more than I anticipated. I am trying to be
 51 more cognizant of my bias in patient encounters, especially in home visits.
 52 In my patient encounter I tried to make less assumptions and follow up
 53 areas I did not understand with questions. I felt that my bias and
 54 assumptions could mislead me in understanding my patient's wants and

Self awareness

55 needs better. Awareness that bias exists, and awareness that if I carefully
56 ask more questions, I can learn where some biases may lie.

57

58 **Q2:** From 1 (minimal commitment) to 10 (maximal commitment), how
59 committed are you to making this change?

60 **R9:** 5

61 **R10:** 97

62 **Q3:** As a result of completing this home visit experience, I commit to:

Honesty

63 **R9:** Be open about bias with my future learners to create an environment
64 where this can be discussed openly.

Safe space -

65 **R10:** having an open dialogue with patients who are from a different

Support/Instructor

66 background than my own about what experiences they may have had that
67 differ from my own.