What You Don’t Know CAN Hurt You...And Your Patients:
The Role of Implicit Bias in Birthing and Breastfeeding Support
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- Implicit bias refers to inherent prejudices and attitudes that unconsciously impact one’s decision making.
- Because implicit bias is not something a person is consciously aware of, it often goes unaddressed and unresolved and affects the way a person perceives and treats others.
- Implicit bias exists at both the individual and organizational levels.
- The Implicit Associations Test (IAT) exposes hidden biases that are affecting interactions and attitudes.
- The IAT reveals that Anti-Black bias ranks highest, followed by gender, ethnicity, nationality, sexual orientation, and name bias.
- Factors that influence bias include lived experiences; media; history/information available; lack of meaningful interactions; policies; and peer groups.
- Implicit bias is often presented as “definitive” information about a certain group of people even though the information presented includes stereotypes of behavior and beliefs.
- For example, the Cultural Sensitivity Guide for Health Care Professionals lists biased information based on assumptions made about people from different ethnic groups.
- Implicit bias affects the caregiver’s ability to provide accurate, culturally sensitive care to all patients and has proven to endanger lives.
- The black maternal and infant health crisis facing the U.S. medical establishment is influenced by implicit bias among caregivers and racism at the institutional level.
- Bias in birthing affects diagnosis and treatment decisions in addition to the level of care received and prevents timely, competent, critical care.
- There are many ways to respect parents’ wishes and needs during the birthing process: listen; treat each family as new and unique; recognize that bias exists; check assumptions; believe families when they share their experiences and concerns; be an advocate.
- A 2007 study by Green, Carney, and Pallin, demonstrated that racial implicit bias in physicians uncovered a direct correlation between the level of care provided and the perceptions of the patients.
- A 2003 study (Beal, Kuhlthau, Perrin) study revealed that being African American was associated with less likelihood of receiving breastfeeding information and a greater likelihood of receiving bottle feeding information from a nutrition counselor.
- A literature review further revealed that the quality of human milk information given to African American families was inadequate or inaccurate.
- At the individual level, dismantling bias requires acknowledgment, continual learning, shared decision making, and exposure to cultural humility practices.
At the organizational level, dismantling bias requires policy and practice change, continuous learning, engaging multiple viewpoints, and shared decision making model to work collaboratively in a medical setting to give the patient agency.

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