



What You Don't Know CAN Hurt You...And Your Patients: The Role of Implicit Bias in Birthing and Breastfeeding Support

Nekisha Killings, MPH, IBCLC

May 21, 2019

- 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.
-

**Interested in viewing this webinar, other past webinars, and much more?
Visit www.mibreastfeeding.org/webinars.**