

IMPLICIT BIAS

Racial Disparities in Healthcare

Black women in the United States are four times more likely to die of a pregnancy related death than white women and on average white men live four and half years longer than black men. Black people do not receive the same quality of care as their white counterparts even when insurance status, income, age and severity of conditions are comparable.

So why do black people receive inferior care? Implicit bias plays a huge role. According to the National Academy of Medicine, minority persons are less likely than white persons to be given appropriate cardiac care, to receive kidney dialysis or transplants, and to receive the best treatments for stroke, cancer, or AIDS.

Regardless of background, ethnicity or socioeconomic status, we all have attitudes or internalized stereotypes that affect our perceptions, actions, and decisions in an unconscious manner.

Experts say it's our brain's way of trying to find patterns and organize in a way that makes sense to us. But experts also say that when addressed, our brain becomes more aware of perceptions that can lead to implicit bias, or unequal treatment of people. So simply being aware of subconscious perceptions can help prevent them.

This is key because implicit bias is especially harmful when it comes to providing quality healthcare to all. Populations most vulnerable to implicit bias in health care include racial and ethnic minorities, LGBTQ individuals, children, women, individuals who are overweight or disabled, and those experiencing behavioral health issues. Currently medical doctors, nurses and other healthcare workers are offered implicit bias training. The problem is that most people, including doctors and lawmakers, don't believe they exhibit implicit bias at all, so the issue remains unaddressed.

That is why the Illinois Association of Medicaid Health Plans (IAMHP) is once again lobbying for HB 5522 to be reconsidered at the fall session. IAMHP realizes that not only is implicit bias far from being a non-issue, it is a public health problem that's been begging for our attention long before the current climate to support blacks in this country ensued.

HB 5522, sponsored by House Representative Emanuel Chris Welch, amends the Medical Practice Act of 1987, the Nurse Practice Act, and the Physician Assistant Practice Act of 1987 to require persons licensed under the Acts take a licensed continuing education course that includes implicit bias training. To satisfy the requirements of this subsection, continuing education courses shall address at least one of the following:

1. examples of how implicit bias affects perceptions and treatment decisions, leading to disparities in health outcomes; or
2. strategies to address how unintended biases in decision making may contribute to health care disparities by shaping behavior and producing differences in medical treatment along lines of race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, physical, intellectual or developmental disabilities or other characteristics.

At this time, IAMHP has lobbied and secured three chief co-sponsors, numerous legislative supporters from across the state of Illinois, and a diverse coalition of advocacy groups including, the American Cancer Society, Equality Illinois, Heartland Alliance, the Aids Foundation of Chicago, Access Living, 360 Youth Services, Ever Thrive Illinois, Healthy Illinois, Planned Parenthood of Illinois, Pride Action Tank, Sargent Shriver National Center on Poverty Law, and SEIU Healthcare.

IAMHP is urging lawmakers in Springfield to recognize that implicit bias is a public health crisis that affects Medicaid members every day, putting their very lives at risk for something we can address and change.

HB 5522 would be a huge step toward ensuring that quality healthcare will never again be subject to a person's zip code, race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, physical, intellectual or developmental disabilities or other characteristics. We can no longer justify ignoring this public health crisis.

Regardless of socioeconomic status, **African Americans do not receive the same level of care as their white counterparts.**

Source: *National Academy of Medicine*

