

## **Unconscious Bias in DC Medicine Survey Summary**

### **Background**

In February 2020, MSDC created its Task Force on Unconscious Bias, approved by the MSDC Board of Directors, to examine the state of unconscious bias in medicine in Washington, DC. The Task Force was comprised of both physicians and non-physicians. In August 2020, the task force circulated a survey to gauge DC healthcare professionals' experiences with unconscious bias in their career.

### **Unconscious bias: what it is and what it isn't**

Simply put, unconscious bias is prejudice that we do not know that we have.

It exists outside our awareness but can “affect our understanding, our interactions, and our decisions, both positive and negative, based on characteristics such as race, ethnicity, gender, age, social class and appearance.”

It is not based on facts, but rather on stereotyping, and it is exacerbated by high stress work environments such as medicine.

### **Methodology**

The study population included medical trainees, physicians, allied health providers, and administrators. Responses were collected via a Likert Scale.

### **Findings**

- Over 70% of those in training (both students and GME) strongly agreed/agreed that their programs were providing education on unconscious bias
- In contrast, only 40% of independent providers strongly agreed/agreed that their programs had provided education on unconscious bias.
- Among independent healthcare providers in Washington, D.C.,
  - 67% strongly agree/agree that unconscious bias impacts their practice
  - 65% have observed unconscious bias in their practice
  - 70% have experienced unconscious bias in clinical practice
- Although the next generation of physicians is aware of unconscious bias, they feel vulnerable to its impact on their career. Among medical trainees, almost 75% were preoccupied or worried that unconscious bias will impact their career.

### **Strategies/Recommendations**

Data shows that unconscious bias must be addressed head on; one strategy is to openly discuss it.

The Task Force recommendations include more research on how unconscious bias impacts clinical practice for independent providers and toolkits on unconscious bias to improve the discussion of unconscious bias.