

UTAH SOCIETY OF HEALTH-SYSTEM PHARMACISTS

Annual Meeting September 18, 2021

It's Just Culture: Leading with Diversity, Equity, and Inclusion

Kimberly Terry, PharmD, BCPS, BCCCP Drug Information Specialist University of Utah Health



USHP

1

Disclosure

- ☐ I have no relevant financial disclosures
- ☐ This presentation will not include off-label uses of medications



Learning Objectives

At the conclusion of this activity, *pharmacists and pharmacy technicians* should be able to successfully:

- 1. Define common terms used in diversity, equity, and inclusion initiatives.
- 2. Identify areas for improved recruitment in hiring and promotional practices.
- 3. Assess current diversity, equity, and inclusion initiatives in your work environments.
- Create an ally action plan to increase diversity in your work culture.

3

4

Introduction: Polling

Does your school or work environment have a DEI program?

- A) Yes
- B) No
- C) Yes, but it isn't directly involved with my area or practice
- D) Yes, but it is done through a third party
- E) None of the above

J

Do you feel your workplace is diverse?

A) Yes
B) No
C) Not sure

6

8

Just "Culture"

MEDICATION SAFETY

· Enhance error reporting

- Have a process for shared accountability
- Improve system processes and design
- Proactively monitor and screen for potential errors
- Enhance patient safety



DIVERSITY, EQUITY, AND INCLUSION

Common Language

Implicit Bias

Bias that results from the tendency to process information based on unconscious associations and feeling, even when these are contrary to an individuals conscious or declared beliefs.



Santee J, Barnes K, Borja-Hart N, et al. Am J Pharm Educ. 2021 Jul 22:8587.

9

Intersectionality

Intersectionality is the nature of social categorizations such as race, class, and gender as they apply to a given group or individual, regarded as creating overlapping and interdependent systems of discrimination or disadvantage.

Harari L, Lee C. Soc Sci Med. 2021 May;277:113876

11

Microaggressions

Words or actions commonly used that subtly and often unconsciously or unintentionally express a prejudice attitude toward a member of a marginalized group.

10

Positionality

Positionality is the way social, political, or personal worldview influences understanding and outlook in various contexts.

Cultural Humility

A process of inquisitiveness, self-reflection, critiquing, and lifelong learning. In contrast to the idea of cultural competence, cultural humility is never masteredit's an ongoing process, shaped by every encounter we have with every person.

13 14

Question 1: True or False

Implicit bias is a conscious association and are reflective of the individuals declared beliefs.

- A) True
- B) False

Implicit Bias

Microaggressions

Intersectionality

Positionality

Cultural Humility

Question 2:

Having multiple systems that may place a person at a disadvantage is an example of ______.

- A) Bias
- B) Positionality
- C) Intersectionality
- D) Cultural humility

☐ Hall, et al. Systematic review examining influence of bias on Bias – healthcare outcomes · Providers appear to have bias, with positive attitudes Patient Care towards White identifying patients · Negative attitudes towards people of color Needed more rigorous approach to examine the relationship between attitudes and outcomes ☐ FitzGerald and Hurst. Systematic review examining bias in healthcare professionals · Healthcare professionals exhibit some level of implicit Complex patient and provider interaction Chapman and Carnes. Perpetuation of health care disparities · Identifying bias · Bias reducing strategies (perspective - talking)

Bias —
Hiring Practices

Consul, et al.

Lack of outreach of diverse backgrounds and educational experiences

Application of the 'Rooney Rule' as a minimum

Subjective interview processes insert prime opportunities for implicit bias

Similarity – Attraction paradigm

Erkmen, et al.

Underrepresentation of the applicant pool

Environment known for discrimination or harassment

Lack of mentorship

17 18

· Increasing minority identifying physicians

Pharmacy Applicant Pool (2018 – 2019) Total by Race/Ethnicity - n (%) Race/Ethnicity Male White 6,927 12,056 14,983 (37.4) Black/African American 4.400 6,844 (13.5) 2.444 Hispanic/Latino 1,846 2,822 4,668 (9.2) 9,375 Asian 5,184 14,559 (28.6) Native Hawaiian/PI 26 33 59 (0.1) Native American or 27 48 75 (0.1) Alaska Native Two or more races 601 974 1,575 (3.1) Unknown 552 691 1,243 (2.5) International/Foreign 1,013 1,766 2,779 (5.5) Total 18,620 32,165 50,785

Race	Applicant Pool - %	PharmD (1 st degree) -%	PharmD (Postbaccalaureate)-%
White	37.4	49.8	29.8
Black/African American	13.5	8.5	17.9
Hispanic/Latino	9.2	5.7	2.9
Asian	28.6	25.6	18.6
Native Hawaiian/PI	0.1	0.3	0
Native American or Alaska Native	0.1	0.3	0
Two or more races	3.1	3	1.3
Unknown	2.5	3.5	15.4
International/Foreign	5.5	2.6	14.1

19

Get your paper and pen/pencil

Multifaceted Identity Macrosystems: - Culture - Media - Laws Systemic influencers (macrosystems) - History Middle influencers (exosystems) Exosystems: - Extended family (microsystems) - Faith groups - Neighborhoods Microsystems: - Peers - Siblings

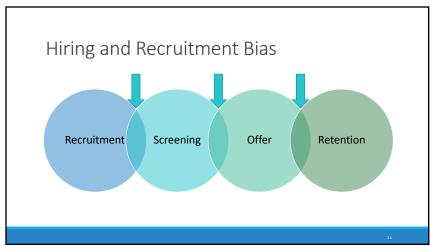
21

Multifaceted Identity - Positionality IDENTIFY REFLECT

- Primary identity group (often based on appearance)
- Religion, faith, or spirituality
- Foods, traditions, holidays
- Language, mannerisms, expression
- · Socioeconomic class, able-bodied
- How do my individual systems interact with my identity?

22

- Confirm or conflict
- Do elements of my personal identity put me in the majority or minority?
 - Is it situational
- Is my workplace diverse?



Ask the tough questions 1. Is my group diverse (is this defined)? 2. Do I have a process that minimizes bias? 3. Does favoritism or leaning towards historical comfort play a role? 4. Would this applicant feel comfortable here? 5. Is there a place for this applicant long term? 6. Does this matter, do I care?

Thought Experiment - Activity

Which 2 candidates would you invite for an interview?

One

Graduated from Omaha, Nebraska, BS, MBA

GPA 3.82, president of organization, good LOR

Enjoys photography, sports, foodie

GRA 3.82, secretary for organization, good LOR

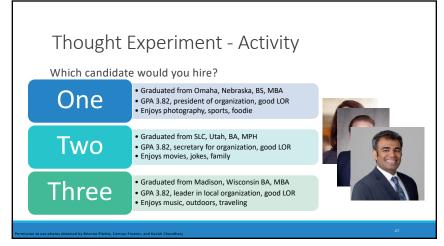
Enjoys movies, jokes, family

Graduated from Madison, Wisconsin, BA, MBA

GPA 3.82, leader in local organization, good LOR

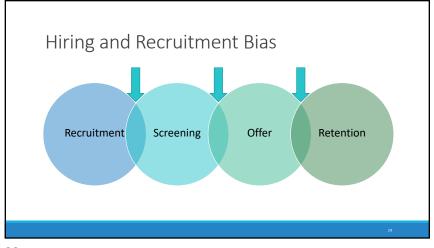
Enjoys music, outdoors, traveling

25 26





27





29 30



Pillars ■ Understand positionality ☐ Identify ways intersectionality plays in your work or school environments · Increase your understanding of how your worldview is informed and • System harms/failures increase influenced based on the amount of minority identities · Identify your personal bias System success increases based on · Reevaluate assumptions the person's majority identity • Increases the value of more diverse · Center decisions around the most representation at the decision making vulnerable or easily overlooked table

Pillars

Practice cultural humility

- Establish a system that allows feedback and growth
- Provide space for dialogue
- Minimize the perception of being superior or having greater understanding
- ☐ Dismantle structural oppression
 - · Take time to understand the origins
 - · Diagnose the severity
 - Determine best approach to changing harmful system culture
 - · Look for resources near you

34

33

Question 3:

Which is most important to you when creating an action plan for DEI initiatives?

- A) Identifying/creating a DEI committee
- B) Reviewing rubrics and interview questions for bias
- C) Establishing a process for bias reduction in promotions
- $\ensuremath{\mathsf{D}})$ Continuing the conversation about diversity through regular meetings or case reviews
- E) Taking time to assess personal bias that may stall future action planning

Just "Culture"

Bias Mitigation Strategies

☐ Consider using blinded evaluations

☐ Standardize the application process as possible

☐ Collect data at each step to track progress

☐ Prevent one opinion from dominating all opinions

☐ Commit to increasing diversity in your workplace or schools

Consult a diversity and equity representative or organization

☐ Adopt a regular training or meeting to discuss areas of bias within your institution

MEDICATION SAFETY

- Enhance error reporting
- Have a process for shared accountability
- Improve system processes and design
- Proactively monitor and screen for potential errors
- Enhance patient safety

DIVERSITY, EQUITY, AND INCLUSION



35



In Summary

Implicit bias, microaggressions, intersectionality, positionality, and cultural humility are common terms in DEI

Having a process to understand positionality can help identify systems that impact each individual

Process interrupters can help identify areas for improvement in recruitment, screening, hiring, and retaining a diverse workforce

The practice of cultural humility is a tool that can improve allyship and diversity as DEI leaders

37

References

- Marcelin JR, Sirai DS, Victor R, Kotadia S, Maldonado YA, The Impact of Unconscious Bias in Healthcare: How to Recognize and Mitigate It. J Infect Dis. 2019 Aug 20;220(220 suppl 2):562-573. doi: 10.1093/infdis/jic214. PMID: 31430386.
- Santee J, Barnes K, Borja-Hart N, Cheng AL, Draime J, Edwards A, Nonyel N, Sawkin M. Correlation Between Pharmacy Students' Implicit Bias Scores, Explicit Bias Scores, and Responses to Clinical Cases. Am J Pharm Educ. 2021 Jul 22:8587. doi: 10.5688/ajpe8587. Epub ahead of print. PMID: 34301558.
- Harari L, Lee C. Intersectionality in quantitative health disparities research: A systematic review of challenges and limitations in empirical studies. Soc Sci Med. 2021 May,277:113876. doi: 10.1016/j.socscimed.2021.113876. Epub 2021 Mar 24. PMID: 33866085; PMCID: PMC8119321.
- Chong LSH, Kerklaan J, Clarke S, Kohn M, Baumgart A, Guha C, Tunnicliffe DJ, Hanson CS, Craig JC, Tong A. Experiences and Perspectives of Transgender Youths in Accessing Health Care: A Systematic Review, JAMA Pediatr. 2021 Jul 19. doi: 10.1001/jamapediatrics.2021.2061. Epub ahead of print. PMID: 34279538.
- Hall WJ, Chapman MV, Lee KM, Merino YM, Thomas TW, Payne BK, Eng E, Day SH, Coyne-Beasley T, Implicit Racial/Ethnic Bias Among Health Care Professionals and Its Influence on Health Care Outcomes: A Systematic Review. Am J Public Health. 2015 Dec; 105(12):e60-76. doi: 10.2105/AIPH.2015.302903. Epub 2015 Oct 15. PMID: 26496688; PMID: 26496688.
- FitzGerald C, Hurst S, Implicit bias in healthcare professionals: a systematic review. BMC Med Ethics. 2017 Mar 1;18(1):19. doi: 10.1186/s12910-017-0179-8. PMID: 28249596; PMICID: PMICS333436.
- Chapman EN, Kaatz A, Carnes M. Physicians and implicit bias: how doctors may unwittingly perpetuate health care disparities. J Gen Intern Med. 2013 Nov;28(11):1504-10. doi: 10.1007/s11606-013-2441-1. Epub 2013 Apr 11. PMID:23576243; PMCID: PMC3797360.
- Sherman MD, Ricco J, Nelson SC, Nezhad SJ, Prasad S. Implicit Bias Training in a Residency Program: Aiming for Enduring Effects. Fam Med. 2019 Sep;51(8):677-681. doi: 10.22454/FamMed. 2019.947255. PMID: 31509218
- Altman MR, Kantrowitz-Gordon I, Moise E, Malcolm K, Vidaković M, Barrington W, O'Connor MR, de Castro AB. Addressing Positionality Within Case-Based Learning to Mitigate Systemic Racism in Health Care. Nurse Educ. 2020 Nov 12. doi: 10.1097/NNE-0000000000937. Epub ahead of print. PMID: 33156141.
- Consul N, Strax R, DeBenedectis CM, Kagetsu NJ, Mitigating Unconscious Bias in Recruitment and Hiring. J Am Coll Radiol. 2021 Jun;18(6):769-773. doi: 10.1016/j.jarc.2021.04.006. Epub 2021 Apr 30. PMID: 33993397.



It's Just Culture: Leading with Diversity, Equity, and Inclusion

Kimberly Terry, PharmD, BCPS, BCCCP Drug Information Specialist University of Utah Health

