

ACADEMY OF MASTER EDUCATORS SEMINAR SERIES

IMPORTANT INFO

TO EARN CME CREDITS:

1. TEXT 412-312-4424
2. SMS CODE – VAFPAP

Enrollment is open from 7:45 am – 9:15 am

The pandemic of microaggressions: Skills to support trainees in the face of microaggressions or discrimination

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Objectives

1. Define the concepts of bias and microaggressions
2. Explore the impact of the COVID-19 pandemic
3. Develop strategies to openly discuss discrimination and support colleagues
4. Practice strategies to respond to microaggressions

Ground Rules and Disclosures

- When making reflections use “I” statements
- Listen carefully to what others say
- Non-judgmental (even with ourselves)
- Commit to having a conversation with each other
- Confidentiality is expected
- Disclosures:
 - We are human beings and we have biases of our own that we are working to mitigate on a daily basis

Discussion

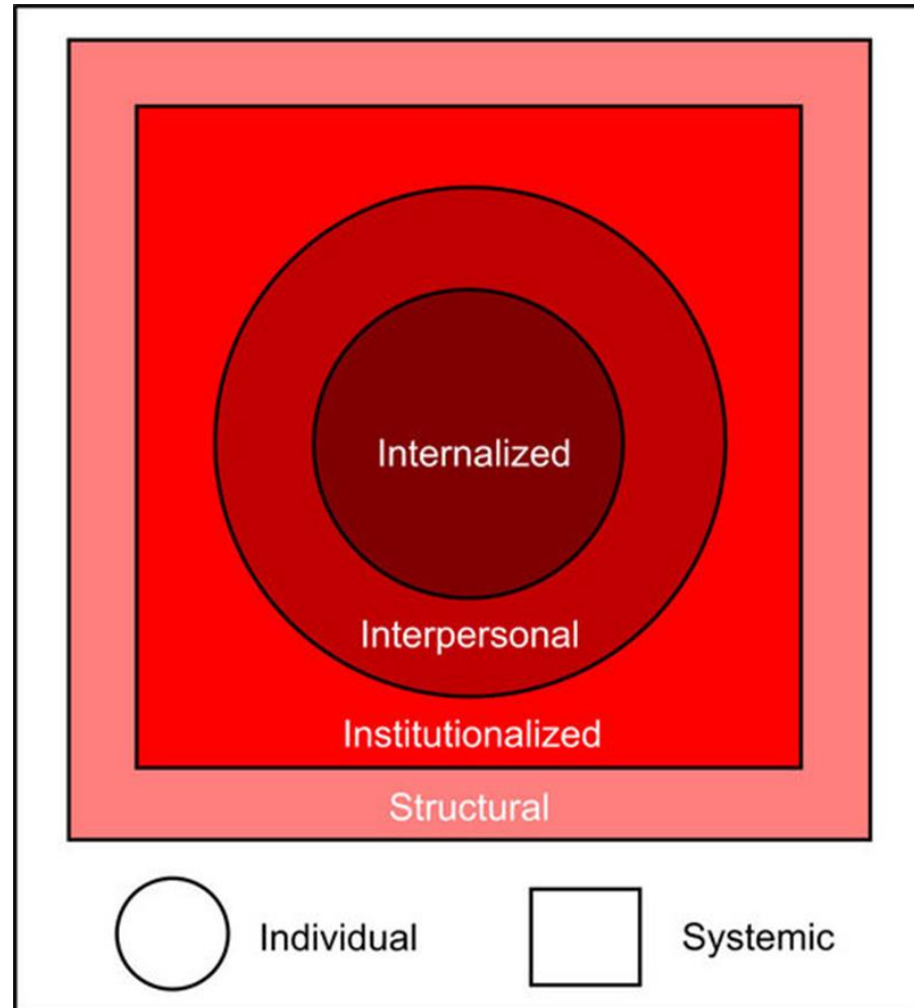
- Please utilize the chat function, we will be monitoring closely
 - Can send to everyone (preferred) or privately to Giselle Hamad who will read the question anonymously
- Use the hand raising feature
- We will intermittently pause for questions/discussion



Outline

1. Introduction to bias and microaggressions
2. Microaggressions and the pandemic
3. Case Discussion
4. Strategies to Respond

Implicit/Unconscious Bias



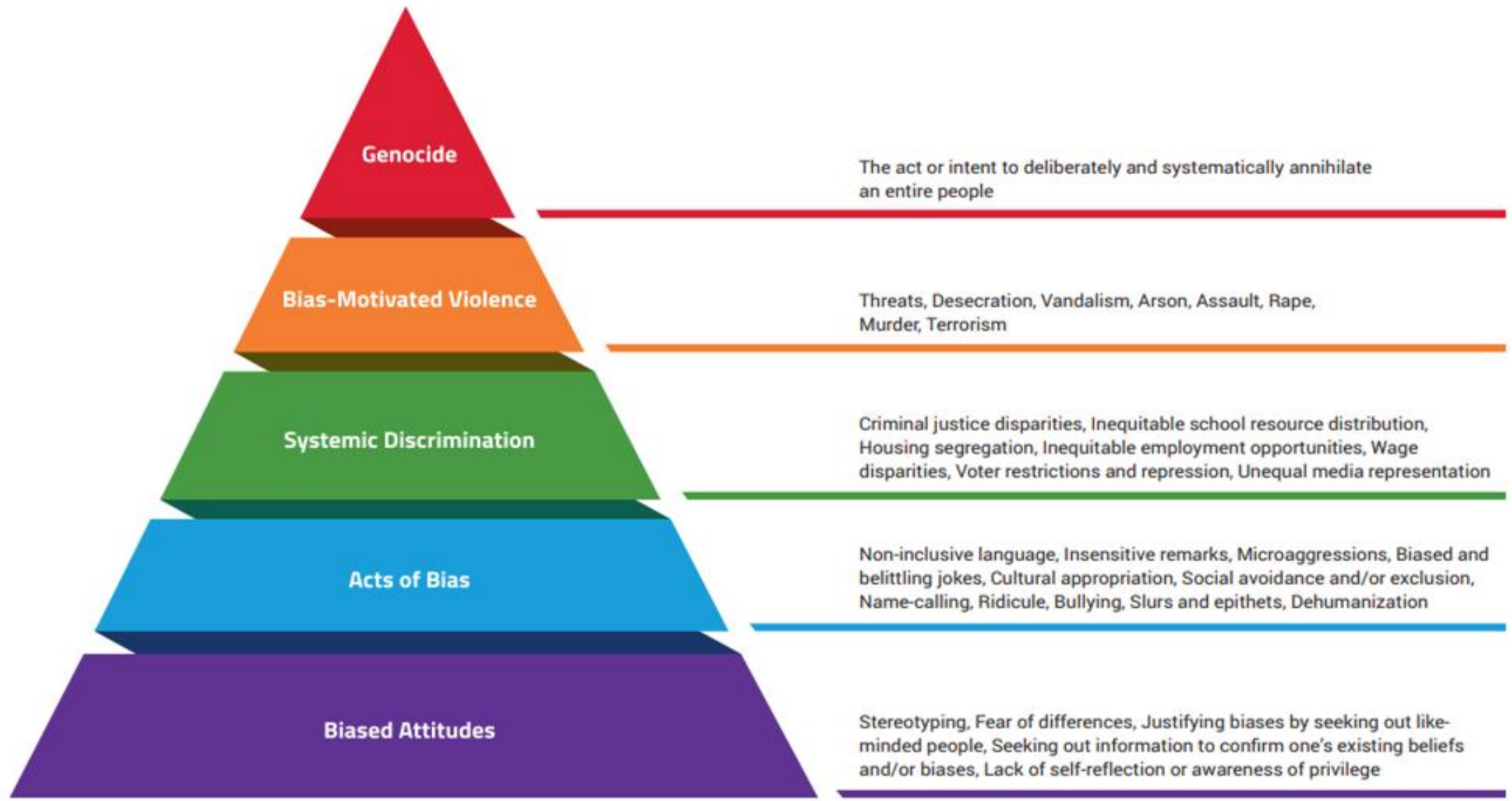
Implicit vs. Unconscious Bias

Implicit

- “implied though not plainly expressed”
- “inherent”
- “inbuilt”
- “understood”

Unconscious

- “inaccessible to the conscious mind”
- “done without realizing”
- “instinctive”
- “unthinking”



Pyramid of Hate © 2019 Anti-Defamation League

Slide Courtesy of Cristine Oh and Grace Zhang

Recent Catastrophic Examples of Bias

- George Floyd
- Ahmaud Arbery
- Breonna Taylor
- Rayshard Brooks

- Christian Cooper (Amy Cooper)



What is a Microaggression?

*“Microaggressions are **brief and commonplace** verbal, behavioral, and environmental indignities, whether **intentional or unintentional**, that communicate hostile, derogatory, or negative slights and insults that potentially have **harmful or unpleasant psychological impact** on the target person or group.”*

Could be on the basis of race, income, social capital, religion, ableness, gender, immigration status, sexual orientation and/or other characteristics

Examples of Microaggressions

“You speak English really well,” to someone born and raised in the United States.

“Are you a nurse?” to a female physician examining a patient.

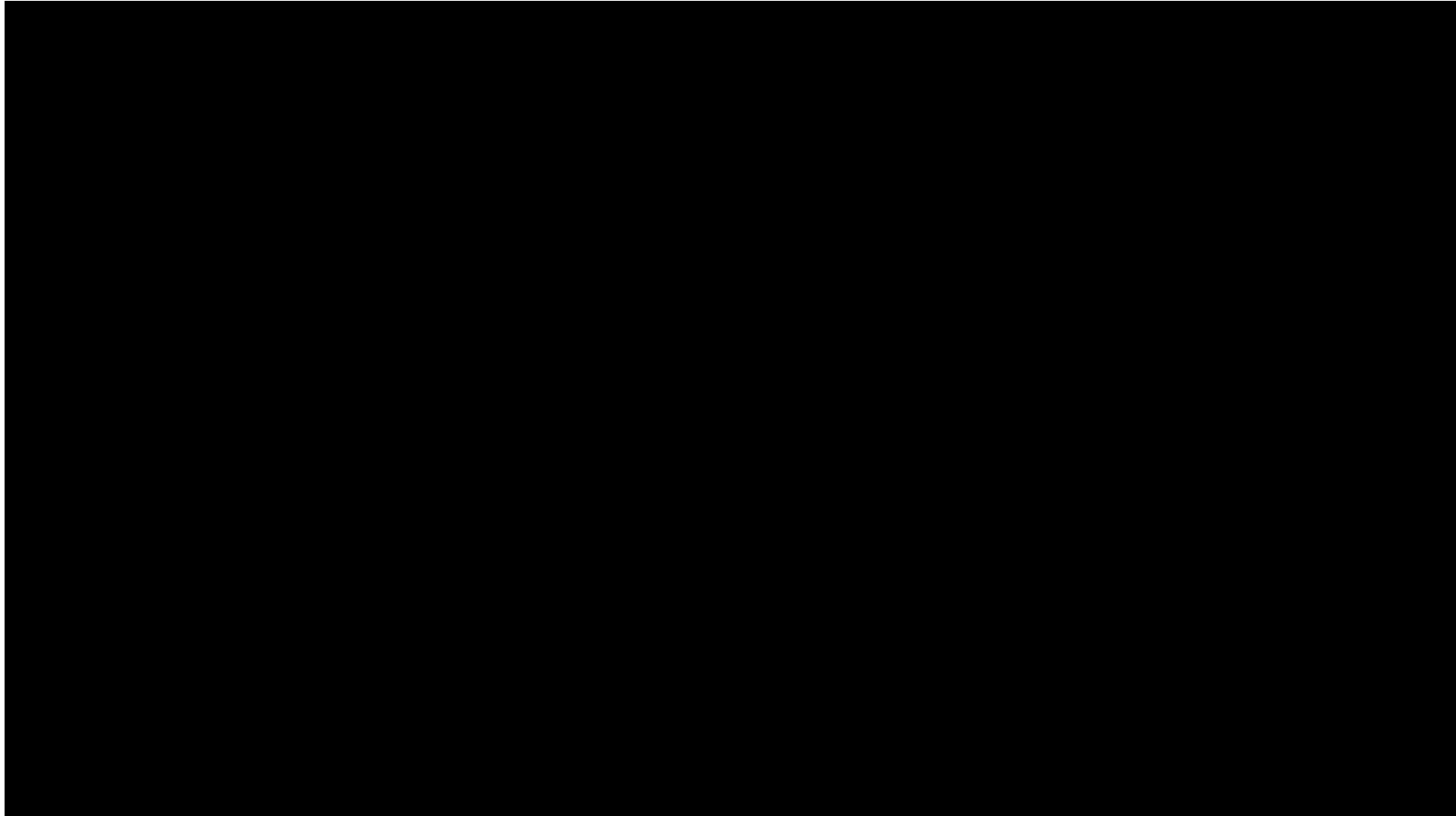
“Are you the sitter?” to a black physician walking into a patient room .

“You look too masculine,” to a self-identified lesbian physician.

“Minorities are still hung up on race” to a fellow physician.

"Your people must be so proud of you" to a physician with an accent.

Why are microaggressions “so bad”?



Why are microaggressions so bad?

- Clash of realities between the perpetrator and the recipient
 - Perpetrator views *intent*, while recipient views *impact*
- The invisibility of unintentional expressions of bias
- Lack of acknowledgement of cumulative effects
- Internal conflict in responding
 - Determine if a microaggression has indeed occurred
 - Reaction to microaggression – doubt, fear, rationalization
 - Responding with anger

BOTTOM LINE:

Microaggressions add up and wear you out

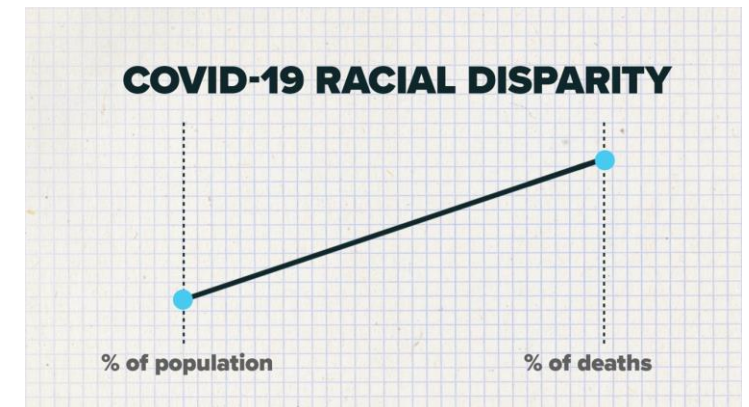
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Impacts of COVID

- Increased anti-Asian rhetoric and attacks
- The politicizing of the public health response
 - e.g. assumptions about those who wear or don't wear masks
- Disparate outcomes for communities of color
 - Decreased testing
 - Worse treatment outcomes



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Responding to Discrimination and Microaggressions

Prepare for Events Occurring

- Crucial to do beforehand
- Acknowledge we live in an imperfect work where discrimination and microaggressions occur
- Discuss as a team on who/when/how to respond if an event occurs
- Preparatory discussion promotes a positive learning climate

Approaching the Patient

Assess illness acuity

- How sick is the patient? Is there time to safely transfer care?
- Is finding another provider at your institution an option?
- Do you need to consider court order or Child Protective Services involvement?

Approaching the Patient

Cultivate a therapeutic alliance

- Build rapport
- Ask, “What concerns you?”
- Explore biases without the intention of changing the patient’s mind
- Redirect the conversation to focus on medical care: “I’m very worried about you. Let’s focus on how we can help you.”
- Educate the patient on the hospital structure: “You’re here in an academic facility, with access to a variety of physicians with specific expertise”

Approaching the Patient

Depersonalize the event

- Remember discrimination is often motivated by patients' fears and anxiety about the unknown
- Acknowledge that discrimination may be coming from patient's lack of control
- Name the behavior: "Are you discriminating against this physician because of his name/skin color/gender/religion?"

Approaching the Patient

Ensure a safe work environment

- Provide support and assurance of your colleague's competence: “I would trust this physician to take care of my own family”; “I agree with this physician. What other questions may I answer?”
- Speak to Risk Management
- Escalate to hospital administration
- Empower your colleague to come up with next steps

Case Discussion

Review of Ground Rules

- When making reflections use “I” statements
- Listen carefully to what others say
- Non-judgmental (even with ourselves)
- Commit to having a conversation with each other
- Disclosures:
 - We are human beings and we have biases of our own



Case #1

You are the attending on a medicine ward team, your student asks to speak with you about an incident that occurred. She reports that she walked in to a patient room to begin a medical interview, as she entered, the case manager who was speaking to the patient says to her “the tray is over there by the trash can”. The student, Marsha, responded “Oh, I’m the student with the team”, to which the case manager retorts “what do you expect, you all look the same with those masks on”.

- Did a microaggression occur?
- How would you approach supporting your housestaff during this situation?
- What words would you say?

Case #2

- You are the attending on an inpatient ward and your 3rd year medical student is Vivian Nguyen, a young woman of Asian descent interested in pursuing your specialty. You both walk in to meet a patient who just arrived on your floor.
- Vivian bids the patient good evening and the patient and patient's family visibly cringes at the sight of her.

- Did a microaggression occur?
- How would you approach supporting your housestaff during this situation?
- What words would you say?

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Responding to Discrimination and Microaggressions – Specific Skills

Approaching the Speaker

- Patient or co-worker
- Role model how anyone can respond in a similar situation
 - Inquire
 - Paraphrase/Reflect
 - Reframe
 - Express the impact of the statement
 - Express one's preference
 - Re-direct the conversation
 - Re-visit
 - Take responsibility

Inquire

- Ask the speaker to elaborate on what they meant
 - Helps us understand their perspective
- Examples:
 - “I’m curious. What makes you ask that?”
 - “What makes you believe that?”
- Avoid “Why?” questions as can increase defensiveness



Paraphrase/reflect

- Same skills we use in motivational interviewing
- Demonstrates understanding
- Reduces defensiveness in rest of conversation

- Examples:
 - “You’re saying...”
 - “You believe...”
 - “So it sounds like you think...”



Reframe

- Create a different way of looking at a situation
- Make help speaker uncover their own unconscious biases
- Examples:
 - “I’m wondering what message this is sending her? Do you think you would have said this to a white male?”
 - “What would happen if...”
 - “Could there be another way to look at this?”
 - “let’s reframe”



Use Impact and “I” Statements

- A clear, nonthreatening way to directly address these issues on behalf of oneself
- It communicates the impact of the situation while avoiding blaming
- Examples:
 - “I felt ... when you said ... and it(describe impact on you)”

Use Preference Statements

- Clearly communicate one's preferences rather than stating them as demands or having other guess what is needed
- Examples:
 - In response to racist, sexist, homophobic, etc. jokes
 - "I don't think this is funny. I would like you to stop."
 - "It would be helpful to me..."



Re-direct



- Shift the focus to a different person
 - Particularly helpful when someone is asked to speak for his/her entire race, cultural group, etc.
- Examples:
 - “Let’s shift the conversation...”
 - “Let’s open up this question to others and see what they think.”

Revisit

- Even if the moment of the microaggression has passed, go back and address it.
- Research indicates that an unaddressed microaggression can leave just as much of a negative impact as the microaggression itself.
- Examples:
 - “I want to go back to something that was brought up in our meeting...”
 - “Let’s rewind _____ minutes...”

Take Responsibility – accept feedback

- Stumbling into a microaggression
 - If you need to reconsider a statement/action, acknowledge and apologize
- Examples:
 - “I recognize that I have work to do.” (instead of “I didn’t mean to”)
 - “I’m going to take some time to reflect on this.”
 - “I apologize, I’m going to do better.”
 - “How can I make this right?”
 - “Thank you”

Take Home Points

- We all have hidden biases which can lead to microaggressions
- There is nothing “micro” about microaggressions
- We need support our trainees in the face of microaggressions
 - Not doing so implies we are complicit with the sentiment
 - Prepare with your team how you respond if one is witness
 - Have prepared words to respond during an event
 - Debrief about the event afterwards

Questions

Please raise your hand on zoom



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- Important to track dissemination for our educator's portfolios
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- **Please use our materials with appropriate attribution**
- **Thank you!**

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