KEY PROFESSIONAL SKILLS FOR UNBIASED INTERACTIONS
Key Professional Skill
Reducing inter-group bias through perspective taking

Multiple studies have shown that perspective taking (the cognitive component of empathy) lowers racial and other biases in interpersonal encounters. Both cognitive and emotional components of empathy ultimately produce more positive orientations toward and greater interest in the welfare of the other. Perspective taking – putting ourselves in the other person’s shows helps us experience that person as an individual vs. seeing them through the lens created by their group category.

**Perspective-taking is a skill - the ability to consider the world from another individual’s viewpoint can be learned through practice.**

- Take a moment to imagine yourself in the other person’s shoes.
- If possible, do an accuracy check.
  - “I was thinking about what this might be like for you ... you might be (thinking feeling...). Am I close?
  - Pitfall: letting stereotypes affect our ideas of what the other person might be feeling, thinking, experiencing.

How much practice will you need? It depends on how much you currently practice perspective taking.

**Try the Propensity for Perspective Taking Self-Assessment**

Resource: Watch short animated videos:

[http://brenebrown.com/2013/12/10/rsabear/](http://brenebrown.com/2013/12/10/rsabear/)

[https://youtu.be/RZWf2_2L2v8](https://youtu.be/RZWf2_2L2v8)

**References**


Key Professional Skill
Reducing inter-group bias by creating a common "in-group" – partnership building shortcuts

• Take a moment to focus on a common identity with the person. Imagine that the patient is part of your clan, tribe, extended (very!) family, and think about the person as a partner or teammate.
• What is your common goal? What are both of you working towards? What key values and concerns do you have in common?
• When you talk with the other person, try to use inclusive pronouns: “we”, “us”, “our”.
• What other actions can you make to signal to this person that you are on the same team? Non-verbal cues are also powerful at communicating partnership.

WHY IS THIS CRUCIAL?
The human tendency to identify with an in-group and favor in-group members over “others” is readily seen in some of the classic psychology experiments where randomly assigned or seemingly meaningless group memberships prompted subjects to care for and bond with new “ingroup” members and willingly mistreat people in the other group (Stanford Prison Experiment), or go to great lengths to maintain group superiority over the other group (Minimal Group Procedure). These were short term experiments; how much more might socially and historically relevant group categories we have been aware of our entire lives be ingrained into our implicit attitudes and behavior toward people? However, even these stubborn unconscious attitudes can be consciously reprogrammed, if we focus on similarities rather than differences with our patients. Research suggests that we can train our unconscious minds to attend to superordinate common group identities instead of the socially relevant differences.

Try reframing every encounter as a partnership, where you are both striving together for the same goals, and relying on each other for information and perspective that the other does not have. One quick strategy to shift your perspective is to use plural pronouns as often as possible. Talk about "our challenges"; say what “we might try” to do, or suggest that your recommendation "might work for us." This strategy has the added benefit of subtly signaling that you are on the same team, and perhaps increasing the other person’s trust and comfort with you as well.

Resource: Watch short animated pieces: http://brenebrown.com/2013/12/10/rsabear/
https://youtu.be/RZWf2_2L2v8

References
Key Professional Skill: Emotional Regulation

Implicit cognitive processes are more likely to hijack our behavior when we are feeling stressed and under high cognitive load. Relaxation techniques help shift control of our behaviors to our conscious mind. Regulating our emotions also helps us be prepared to react in a professional and compassionate way when we meet patients with conditions that might elicit a negative emotional response, like disgust or anger. Outsider and self-ratings of doctors’ ability to regulate emotions and be aware of emotions predicted patient trust. Positive emotions help us perceive individuating characteristics in people who are members of a different race, reducing reliance on group stereotypes to guide our behavior. Positive emotions also help lower our likelihood of seeing others as outsiders.

There are several ways to regulate emotions. Some are reactive, for example, attempting to suppress an emotion. Suppressing negative emotions does not work well – in fact it can make things worse.

Learning emotional regulation/emotion shifting skills are specific life-skill strategies that

- Free cognitive resources, flexibility, creativity, problem solving.
- Improve your health and well-being
- Improve clinical decision-making
- Improve interactions with others, including patients
- Prevent unintended implicit biases from hijacking thoughts and behavior

You may feel that these skills are less important than other knowledge and skills you need. Nothing could be further from the truth. Spend some time researching the impact of stress on physical health, mental health, cognitive ability, problem-solving and decision-making.

We focus on techniques that can be done relatively quickly to manage the stress of a busy clinical setting. However, daily practice makes a big difference in how easy or hard it is to use these skills under stress. Mindfulness – or mindfulness meditation is an evidence-based approach you may be interested in learning more about.

References

Burgess. Are providers more likely to contribute to healthcare disparities under high levels of cognitive load? How features of the healthcare setting may lead to biases in medical decision making. Medical Decision Making. 2010, 30(2) pp 246-57.


