

An Intervention to Empower Nursing Students to Reduce Bias and Improve Patient Care

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Background

Implicit bias, a discriminatory bias based on an implicit attitude, prejudice or stereotype (Greenwald & Krieger, 2006) plays an important role in the care delivered by health providers.

Although most healthcare providers intend to treat all patients equally, multiple studies have documented that healthcare providers have implicit biases consistent with that seen in the general population; including showing a preference for White people and a negative bias toward Black people (Chapman et al., 2013; Dehon et al., 2017; FitzGerald & Hurst, 2017; Hall et al., 2015; Schnierle et al., 2019; Zestcott et al., 2016)

Implicit bias by healthcare providers is one identified factor contributing to health inequities (Nelson, 2002).

Evidence suggests a clear relationship between implicit bias and treatment recommendations, quality of care, and patient health outcomes

Many interventions designed to reduce implicit bias are either non-effective or may even increase implicit bias (FitzGerald, Martin, Berner, & Hurst, 2019)

Objectives

To determine how to incorporate the “Prejudice Habit Breaking Intervention” into undergraduate nursing curriculum

Investigate the effectiveness of an established intervention, “Prejudice Habit Breaking Intervention,” in a sample of nursing students

The Prejudice Habit Breaking Intervention

Developed by Dr. Patricia Devine

Explains bias as a mental habit and the steps that can be taken to “break the bias habit”

Based on the belief that individuals must be aware of their biases and be concerned about the consequences before they will have the motivation and put forth the effort to reduce their biases

Successfully used to increase the number of female-identifying faculty hired in science, technology, engineering, math, and medical (STEMM) fields at the University of Wisconsin-Madison (UWM)

The intervention was shown to increase personal awareness of one’s bias and concern about discrimination in undergraduate students

Methods

Dr. Patricia Devine delivered her intervention in October 2023
Only 8 students attended
4 students participated in Focus groups

The intervention used to develop three 1-hour modules

Surveys before and after modules
Demographics
Concern about Discrimination scale (Devine et al., 2012)
Should, Woulds, and Discrepancies Scale (Monteith & Voils, 1998)
Interpersonal Racial Allyship Scale and Cultural Cognitions and Actions Scale (Williams & Noor, 2021; Kanter et al., 2020).
The Everyday Discrimination Scale (Williams et al., 1997)
General Feedback on module and how to incorporate into the curriculum

Implementation and Progress

Delivered each module twice in person
74 students expressed interest
24 completed all three modules and surveys

Requested and approved to deliver over Zoom
14 students expressed interest
3 completed all three modules and surveys
During Finals
26 students expressed interest
12 attended module 1
Modules 2 and 3 ongoing

Strategy	Description
Stereotype Replacement	Involves replacing stereotypical responses for non-stereotypical responses; recognizing a response is based on stereotypes, labeling the response as stereotypical, and reflecting on why that occurred; then considering how the biased response could be avoided in future and replace it with an unbiased response
Perspective Taking	Involves taking the perspective as if the individual was a member of the stereotyped group.
Individuation	Involves preventing stereotypic inferences by obtaining specific information about group members which helps people to evaluate member of the target group on an individual and personal level rather than group based characteristics.
Counter-stereotypic imaging	Involves imagining counter-stereotypic others, for example famous (Barack Obama) or a personal friend which makes positive exemplars relevant and accessible when challenging stereotypes
Increasing opportunities for contact	Involves seeking opportunities to encounter and engage in positive interactions with out-group members.

Next Steps and Implications

Analyze Data

Consider incorporating into a course next year and continuing data collection

Provide foundational information on strategies to update our curriculum to include bias to align with AACN Essentials

Successfully reducing bias in nursing students could be one part of the solution to reducing health inequities

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Mary Byrn, PhD, RN

Biography

Mary A. Byrn, PhD, RN is a tenured Associate Professor and Department Chair of the Family and Community Health Department in the Marcella Niehoff School of Nursing. Mary has a passion for teaching and working with students. She enjoys sharing her love for nursing research through teaching. She also shares her clinical expertise and passion for nursing by teaching undergraduate students Concepts of Professional Nursing Practice.

Her research interests involve investigating ways to improve the quality of life and health outcomes of underserved populations. Her research has investigated women with gestational diabetes and perinatal depression and people with type 2 diabetes and mild cognitive impairment. She has explored the documented health inequities in maternal health care by examining the impact of race on treatment differences during the perinatal period. Currently, she is examining how to incorporate effective and impactful teaching strategies in nursing school curriculum to reduce the impact of unintentional bias from nurses in patient care.

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