6TH Annual Chancellor’s Leadership Panel on Diversity

The Influence of Unconscious Bias

March 26, 2013

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Vice Chancellor, Diversity and Outreach

advancing health worldwide™
with diversity, equity and inclusion
Diversity

Refers to the variety of personal experiences, values and worldviews that arise from differences of culture and circumstance. Such differences include race, ethnicity, gender, age, religion, language, abilities/disabilities, sexual orientation, gender identity, socioeconomic status, and geographic region, and more.

UNIVERSITY OF CALIFORNIA DIVERSITY STATEMENT
Endorsed as Amended by the President of the University of California August 17, 2010
http://www.universityofcalifornia.edu/diversity/diversity.html
UCSF’s 2014-15 Plan

Vision: To be the world’s preeminent health sciences innovator

Goals:
1. Provide unparalleled care to our patients
2. Improve health worldwide through innovative science
3. Attract and support the most talented and diverse trainees in the health sciences
4. Be the workplace of choice for diverse, top-tier talent
5. Create a financially sustainable enterprise-wide business model
The mission of the Office of Diversity and Outreach is to build a broadly diverse faculty, student and staff community, to nurture a culture that is welcoming and supportive, and to engage diverse ideas for the provision of culturally competent education, discovery, patient care and community engagement.
2012-13 Accomplishments

- Multicultural Resource Center - Oct 2012
- Campus Inclusion Survey - Jan 2013
- Increased the number of NIH Research Supplements to Promote Diversity in Health-Related Research
- Sponsored a National LGBT Health Education Day at Association of American Medical Colleges (AAMC) Annual Meeting - Oct 2012
- AAMC Spencer Foreman Award Winner for Outstanding Community Service (SOM)
- Higher Education Excellence in Diversity Award 2012
- Chancellor’s Blue Ribbon Panel
Annual Activities

- Pipeline Programs
  - Science and Health Education Partnership (SEP) and Center for Educational Partnerships – with SF Unified Schools
  - Graduate Division Summer Research
  - Post Baccalaureate Programs (SOD, SOM, SOP)
  - Pre-Health Undergraduate Program
  - Inside UCSF an interprofessional pipeline event
  - SOM Graduate Medical Education Visiting Clerkships
  - UC Diversity Pipeline Initiative (Faculty)
  - School at Work and EXCEL – workforce development programs (Staff)
Annual Activities

• Programs that celebrate and support our campus community
  – Chancellor’s Awards – new collaborative event Fall 2013
  – Diversity Month Celebrations - October
  – University Community Partnerships Annual Celebration
  – Internal Community Building – LGBT Winter Event, Cultural History Months, MLK, Women’s Month, Disability Awareness
  – Mentoring (faculty, ABOG, UIM, Interprofessional)
  – Professional Development (staff succession and development planning, CORO, Academic Affairs)
Annual Activities

• Programs that educate and engage

  – Health Disparities Forum
  – LGBTQI Health Forum
  – Developmental Disabilities: An Update for Health Professionals Conference
  – SHPR, Affirmative Action, antidiscrimination, Unconscious Bias and Principles of Community Training
  – Best Practices in Searching
  – Gallup Engagement Survey Action Plans
### 2010 US Census
#### Hispanic or Latino Origin

<table>
<thead>
<tr>
<th>Hispanic of Latino Origin and Race</th>
<th>Number</th>
<th>% of Total Population</th>
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<tbody>
<tr>
<td>Total Population</td>
<td>308,745,538</td>
<td>100</td>
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<tr>
<td>Hispanic or Latino</td>
<td>50,477,594</td>
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<tr>
<td>Not Hispanic or Latino</td>
<td>258,267,944</td>
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<tr>
<td>White Alone</td>
<td>196,817,552</td>
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## 2010 US Census
### Race

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<tr>
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<th>% of Total Population</th>
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<td>14,674,252</td>
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<tr>
<td>Two or More Races</td>
<td>9,009,073</td>
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</table>
2010 California Census

Total Population = 37,253,956

Population by Ethnicity
- Hispanic or Latino: 14,013,719 (38%)
- Non Hispanic or Latino: 23,240,237 (62%)

Population by Race
- White: 21,453,934 (58%)
- African American: 2,299,072 (6%)
- Asian: 4,861,007 (13%)
- American Indian and Alaska Native: 362,801 (<1%)
- Native Hawaiian and Pacific Islander: 144,386 (<0.5%)
- Other: 6,317,372 (17%)
- Identified by two or more: 1,815,384 (5%)
Additional Demographics

• LGBTI - 3.5% National, 4% California \(^{Gallup \ 2013}\)
  – UCSF Faculty 7% \(^{UCSF \ Faculty \ Climate \ Survey \ 2011}\)

• Disabilities - 18.7% \(^{US \ Census \ 2010}\)
  – New Federal guidelines pending

• Veterans
  – New Federal guidelines pending
Representation of Women in Academic Medicine, 2011-2012

Black, Native American, and Hispanic Medical School Faculty: <10%

Percentage of U.S. Medical School Faculty by Race and Ethnicity, 2012

- White: 64%
- Asian: 12.4%
- Black/African American: 2.2%
- Hispanic or Latino: 3.8%
- Native American / Alaska Native: 0.12%
- Native Hawaiian/Other Pacific Islander: 0.13%
- Other: 15.9%
- Multiple Race: 1.9%
- Other: 15.9%
2012 UCSF Students and Trainees by Gender

- Residents/Fellows: 52% Female, 48% Male
- Postdocs: 49% Female, 51% Male
- Graduate Academic Students: 58% Female, 42% Male
2012 UCSF Students and Trainees by Gender (Across Schools)

Pharmacy: 67% Female, 33% Male
Medicine: 54% Female, 46% Male
Dentistry: 52% Female, 48% Male
Nursing (MS & MEPN): 88% Female, 12% Male
Fall 2012 Students/Trainees by Racial/Ethnic

Residents/Fellows
- Asian: 28%
- Black/AA: 4%
- Hispanic: 5%
- White: 51%

Postdocs
- Asian: 38%
- Black/AA: 2%
- Hispanic: 9%
- White: 48%

Graduate Academic Students
- Asian: 26%
- Black/AA: 6%
- Hispanic: 9%
- White: 49%
Fall 2012 Students by Racial/Ethnic (Across Schools)

- Pharmacy:
  - Asian: 61%
  - Black/AA: 4%
  - Hispanic: 16%
  - White: 8%

- Medicine:
  - Asian: 27%
  - Black/AA: 7%
  - Hispanic: 15%
  - White: 2%

- Dentistry:
  - Asian: 48%
  - Black/AA: 2%
  - Hispanic: 12%
  - White: 5%

- Nursing (MS & MEPN):
  - Asian: 23%
  - Black/AA: 5%
  - Hispanic: 13%
  - White: 52%
UCSF Faculty Trends

n = 2325 / 2397 / 2475

- **Female**: 44% / 45% / 45%
- **Male**: 56% / 55% / 55%
- **Native Am**: 0.3% / 0.3% / 0.3%
- **Asian**: 21% / 23% / 24%
- **Black/AA**: 2% / 2% / 2%
- **Hispanic**: 3% / 3% / 5%
- **Other**: 3% / 2% / 3%
- **White**: 70% / 69% / 67%

Dec 2010 | Dec 2011 | Dec 2012
UCSF Faculty Gender by Series, December 2012

n = 2475

- **Adjunct**: Female 211, Male 170
- **Clin X**: Female 158, Male 232
- **HS Clinic**: Female 461, Male 420
- **In Res**: Female 170, Male 289
- **Ladder**: Female 120, Male 244
## Career Staff

### Comparison of Workforce Profiles (%)

<table>
<thead>
<tr>
<th></th>
<th>Professional Support Staff</th>
<th>Management and Senior Professional</th>
<th>Senior Management Group</th>
<th>TOTAL</th>
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<td>2006 (n = 1067)</td>
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<td>71.1</td>
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<td>Non-White</td>
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<td>28.9</td>
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<tr>
<td>Female</td>
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<td>55.4</td>
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<tr>
<td>Male</td>
<td>30.7</td>
<td>44.6</td>
<td>66.7</td>
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<td>2013 (n = 12782)</td>
<td>2013 (n = 1561)</td>
<td>2013 (n = 22)</td>
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<tr>
<td>White</td>
<td>38.6</td>
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<td>8.4</td>
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<td>0.0</td>
<td>0.4</td>
</tr>
<tr>
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Barriers to Increased Diversity

- Pipeline
- Support Systems
  - Mentoring
  - Professional Role Models
- Disparity in scientific identity and values
- Unconscious Bias
Social stereotypes about certain groups of people that individuals form outside their own consciousness

Patterns based on small bits of information

Often incompatible with our conscious values
Implicit Association Test (IAT)  
http://implicit.harvard.edu/

Biases and associations exist in most people (over 75%) - 15 years of research, more than 10 million taken IAT

Maps to existing social hierarchies and stereotypes (Nosek, 2009)

- Favor men, Whites, youth, heterosexuals, and physically able
- Males = Science; Females = Liberal Arts
Unconscious Bias

• National Academy of Science (2006)
  – Greatest barrier to achieving gender equity in STEMM is systematic bias, frequently unconscious

  – Institutional transformation -- changing attitudes and behaviors -- required to ensure equal opportunities
Unconscious Bias

- AAAS (2007) - “bias literacy” is prerequisite to action
- Institutional change requires making explicit what may be implicit (unconscious) through addressing the bias process (Carnes et al., 2012)
• Data we receive from others may be biased
• Regardless of gender or ethnicity, we also have biases
• Affects hiring, evaluation, selection of leaders

(Wright, AAMC, 2010)
> 25% female applicants in candidate pool, women more likely to be rated as qualified and recommended for hire (Heilman, 1980)
• 50% higher call-back rate if named “Emily and Gregg” vs “Lakisha and Jamal”
  - Fictitious resumes in response to wanted ads (Bertrand & Mullainathan, 2004)

• Race and resume (King et al., 2006)
  - Whites & Hispanics benefit from quality resume
  - Blacks evaluated negatively with quality resume
  - Occupational Stereotypes – Black & Hispanics more suited for lower status; Asians high status regardless of resume
• NIH Review Panels (Ginther et al., 2011)
  – Black applicants 10% less likely than Whites to receive NIH investigator initiated research grants
  – Taking into account education, country of origin, training, previous research awards, publications & employer
Probability of NIH R01 Award by Race and Ethnicity, FY 2000 to FY 2006 (N = 83,188)

Ginther DK et al, Science 2011
• Symphony orchestras
  – Switched to “blind” auditions – increased hiring of women by 25% (Goldin & Rouse, 2000)

• Recommendation Letters for Faculty
  – Similarities but more “standout” adjectives for males (Schmader et al., 2007)
  – Female letters shorter, contained more “doubt raisers” & focus on teaching; males as researchers (Trix & Psenka, 2003)
**Mothers**

- Lower perceived competence & starting salaries. (Correll et al., 2007; Heilman & Okimoto, 2008)
- Less interest in hiring & promoting mothers compared to fathers & childless employees. (Cuddy et al., 2004)

**Fathers**

- Not penalized & sometimes benefit from fatherhood. (Correll et al., 2007)
What Works?

• Concrete, objective indicators & outcomes reduce standard stereotypes (Fiske & Taylor, 1991; Heilman, 2001; Bernat & Manis, 1994)

• Commit to specific credentials before reviewing applications (Uhlmann & Cohen, 2005)

• Use structured interviews and objective evaluation criteria (Martell & Guzzo, 1991; Heilman, 2001)

• Allow sufficient time as bias stronger when under time pressure (Martell, 1991; Blair & Banaji, 1996)
What Works?

• Individual Accountability
  – Investigate your own potential bias, know the research
  – Take the perspective of a member of a different group (Galinsky & Moskowitz 2000)

• Provide training workshops (Blair & Banji, 1996)

• Accountability for decision makers (Foschi, 1996; 2000; Foschi et al., 1994)

AAMC webinar: Science of Unconscious Bias
Thank You

Q & A

Comments:
DiversityOutreach@ucsf.edu