

## **2** Understanding Systemic Bias

What is bias? A bias is an opinion, prejudice, or judgment in favor of an idea, person, or community compared with another. Biases or opinions are developed when we accept assumptions, stereotypes, or misperceptions as facts or take an unbalanced approach to understanding others. The behaviors that result from biases, whether intentional or unintentional, often result in excluding others. While rarely a conscious decision, biases are often woven within the structure, policies, practices, and procedures of a system. Systemic bias can be difficult to define and to change.

## Misunderstandings and Misperceptions

**Misunderstandings and misperceptions** caused by lack of correct information and assumptions can be the source of bias.

Which of the following reflect the perceptions that are present in your work, agency, or department programs? (check all that apply)

People with disabilities...

Need more help than others

Do not have the same quality of life

Are not healthy

Are not leaders

Can be a drain on the system

Need a separate plan

These examples of common misunderstandings contribute to bias and ableism.

## Ableism

**Ableism** is an extremely common and persistent type of discrimination. It refers to having and/or showing prejudice against individuals with disabilities. Ableism stems from misunderstandings and misperceptions about a person's value, worth, and ability to contribute. It can be predominant in the health care community, where many practitioners view a disability as something that is broken and needs to be fixed.

Ableism can impact how we see and treat a person with a disability.



Is there ableism in your workplace? Evidence of ableism might include:

- Policies that reward workers for not taking time off when they are sick (or punish people for being sick too often).
- Saying that someone with a disability is “an inspiration” for completing daily activities. Or saying that someone without a disability is “a saint” for engaging or spending time with someone with a disability.
- Praising a disabled person for not complaining about their disability or for “not seeing themselves as a victim.”
- Assuming someone’s quality of life is poor or of less value because they have a disability.

# Stereotypes and Implicit Bias

**Unintentional bias or unconscious bias** refers to stereotypes or beliefs that affect our actions in a discriminatory manner. Most bias towards people with disabilities is unintentional. Stress, distraction, lack of understanding or awareness and a default commitment to agency standard practices (even when inaccessible), contribute to unintentional implicit bias by those working in public spaces. Health service environments can inadvertently promote stereotypes and bias, even when they are framed in positive perception.

Stereotypes can appear to be positive and negative.

<b>Positive Stereotypes</b>	<b>Negative Stereotypes</b>
<p><b>Positive stereotypes</b> that reveal implicit bias might be reflected in the use of the following terms:</p> <ul style="list-style-type: none"><li>• Brave</li><li>• Inspirational</li><li>• Overcomer</li><li>• Differently abled</li></ul>	<p><b>Negative stereotypes</b> that reveal implicit bias include the following ideas:</p> <ul style="list-style-type: none"><li>• Someone needs to take care of people with disabilities.</li><li>• We need to have sympathy for people with disabilities.</li><li>• People with disabilities are fragile, struggling, hurting, sick, or sensitive.</li><li>• Everything is harder for people with disabilities.</li></ul>

Stereotypes reveal implicit biases. The first step to address implicit biases is to identify them.

<b>Unconscious Bias Checklist</b>	<b>Yes/No</b>
Talking loudly with accentuated lip movements when you learn someone has hearing loss.	<input type="checkbox"/>
Grabbing a person who is blind or has limited vision by the arm to steer them in a certain direction.	<input type="checkbox"/>
Thinking that someone on the autism spectrum has a photographic memory and asking them detailed or historical questions.	<input type="checkbox"/>
Moving away from someone slightly after they identified themselves as having a mental health disability.	<input type="checkbox"/>
Not noticing building, infrastructure or facility features, that are inaccessible to people with mobility, sensory, or other disabilities.	<input type="checkbox"/>
Not noticing communication methods or strategies that are inaccessible to people with sensory, intellectual, or other disabilities.	<input type="checkbox"/>
Noticing that someone has a visible disability and changing procedures without asking about assistance they may need.	<input type="checkbox"/>
Addressing a person with a disability in ways that reflect an intimate or close relationship (such as dear, honey, or sweetheart), which would not be used to address someone without a disability.	<input type="checkbox"/>
Addressing a personal attendant rather than the person with a disability indicating an assumption that they do not understand or are unable to make and communicate decisions.	<input type="checkbox"/>
Talking with others about a person with a disability in a way that you would not talk about other people.	<input type="checkbox"/>

## Overcoming Bias and Achieving Equity

Both bias and ableism can result from a belief that people with disabilities are deficient, that something is wrong with them that inherently limits their life experience and capacity; and that disabilities should be fixed, if possible.

Here is a different way of thinking: Disabilities are part of the human experience, and people's ability to function in an environment is directly related to that environment. Because most environments are not designed with everyone in mind, not everyone can equitably access, understand, or use what's around them. This makes environments inaccessible and inequitable.

Accessibility is when information, activities, and environments are meaningful and usable for as many people as possible (like people with disabilities). If everything were designed to be accessible, we might stop viewing people as needing to be fixed and instead view inaccessible environments as what needs fixing.

Creating accessible environments is the foundation to providing equitable programs.



## **Strengths, Weaknesses, Opportunities, and Threats to Agency Equity**

Although diversity, inclusion, and equity programs are becoming increasingly valued and implemented, these programs are often relegated to human resource departments and typically do not include disability in their equity viewpoint. As a result, public-facing programs might be perceived as inclusive but may still be ineffectual.

To identify agency competency, understanding, and perceptions that might be influencing agency practices, conduct an internal evaluation of Strengths, Weaknesses, Opportunities, and Threats (SWOT) to measure assumptions about accessibility and inclusion for people with disabilities.

### Strengths

List ways that your agency demonstrates disability inclusion, accessibility, and inclusion.

**S** **STRENGTHS**

### Weaknesses

List ways that your agency demonstrates implicit bias and ableism that are impacting your ability to deliver equitable services.

**W** **WEAKNESSES**

### Opportunities

List things that your agency can do immediately to minimize bias and build equity.

**O** **OPPORTUNITIES**

### Threats

List ways that implicit bias negatively impacts your ability to provide equitable programs for people with disabilities.

**T** **THREATS**



Who can help build on strengths and opportunities and minimize threats to disability equity?



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