



Legislation Text

File #: Res 0512-2018, **Version:** A

Res. No. 512-A

Resolution calling on New York State to require medical schools to train all students about "implicit bias".

By Council Members Rosenthal, Rivera, Ayala, Reynoso, Lander, Cornegy, Dromm, Chin, Ampry-Samuel, Cumbo, Adams, Rose, Barron, Louis, D. Diaz, Menchaca, Koslowitz, Gibson, Kallos, Treyger, Rodriguez, Eugene and the Public Advocate (Mr. Williams)

Whereas, In recent years, the health care community has shifted its focus to further address health inequity and its impact on individuals from traditionally marginalized communities, including people of color, people with disabilities, people who are lesbian, gay, bisexual, intersex, transgender, queer, questioning, gender non-conforming and/or non-binary (LGBTQ+/TGNCNB), children, individuals who are overweight, those experiencing behavioral health issues, and those who are female; and

Whereas, According to the Perception Institute, implicit bias is when individuals have attitudes towards people or associate stereotypes with them without their conscious knowledge; and

Whereas, Research has shown that people have implicit attitudes regarding race, gender, age, disability, weight, and sexual orientation, and several general patterns of bias have repeatedly been shown in research, such as socially-dominant groups often having implicit bias against subordinate groups; and

Whereas, According to Health Affairs, studies consistently recognize the role of implicit bias in worsening health outcomes, increasing health care costs, and exacerbating health disparities, resulting in disparate maternal health outcomes, substandard pain management for Black patients, unequal cardiovascular testing for women, lesser mental health services for patients with mental illness, and mistreatment and avoidance of obese patients; and

Whereas, Research shows that racial disparities can have an impact on a person's health outcomes and

care in New York City, which is illustrated by the City's maternal mortality and morbidity rates; and

Whereas, According to the New York City Department of Health and Mental Hygiene (DOHMH), Black, non-Latinx people are eight to twelve times more likely to experience maternal mortality than their white counterparts; and

Whereas, According to the Center for the Independence of the Disabled New York (CIDNY), 44.4 percent of New Yorkers with disabilities rated their health as fair or poor in 2014, compared to only 9.1 percent of those without disabilities; and

Whereas, According to Independence Care System (ICS), because of lack of access to care for people with physical disabilities due to providers' lack of understanding of the populations' accessibility needs, people with physical disabilities have higher rates of obesity, arthritis, asthma, cardiovascular disease, diabetes, high blood pressure, high cholesterol and stroke; and

Whereas, National surveys of individuals who are transgender reveal that one-third of those who saw a health care provider had at least one negative experience related to being transgender, and nearly one-quarter reported that they did not seek the health care they needed due to fear of being mistreated as a transgender person; and

Whereas, Studies have shown that individuals who identify as lesbians have more barriers to care and are not screened for cervical cancer as often as heterosexual women, even though rates of cervical cancer are higher among lesbian women; and

Whereas, Children who are intersex, or are born with variations in their sex characteristics, are often subjected to "normalizing" surgeries that are irreversible, risky, and medically unnecessary; and

Whereas, Even though most babies born with intersex traits are healthy and do not require surgery, medically unnecessary operations still occur today, including in New York City; and

Whereas, According to DOHMH, although the number of new HIV diagnoses have decreased between 2014 and 2018, Black and Latinx people are still disproportionately impacted compared to their white

counterparts; and

Whereas, With health outcomes so closely tied to one's race, gender, and other identities, our health care system must do a better job addressing health inequity; and

Whereas, As of now, not all medical students in the state of New York receive implicit bias training, which could hamper the goal of health equity for all; and

Whereas, According to experts, all medical students should receive ongoing, comprehensive training on implicit bias; and

Whereas, Training should include information about structural racism in the medical field and activities to promote reflection on one's own implicit biases; and

Whereas, All implicit bias trainings must include an explicit bias component; and

Whereas, Our medical system perpetuates racism, ableism, and other forms of oppression by not addressing both implicit and explicit bias, and medical professionals may also possess explicit biases which can result in the harm of a patient; and

Whereas, It is critical to have well-trained and culturally competent and humble providers who are educated about bias to ensure the fairer treatment of all individuals, and to ensure medical outcomes are not skewed because of bias, whether implicit or explicit; now, therefore, be it

Resolved, That the Council of the City of New York calls on New York State to require medical schools to train all students about "implicit bias."

EB

LS 6602

08/03/2018 updated 12/14/2020