

Using Innovative Simulation Strategies To Dismantle Systemic Racism

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Disclosures

- No Financial Disclosures
- No Conflict of Interest
- “We ask that you take a moment to honor and acknowledge that we are on the ancestral homelands of the Dakota and Anishinaabe. Indigenous people have a long-standing history and connection to the land since time immemorial, and are the original stewards of lands and waters. Many American Indians were forcibly exiled from their lands because of aggressive and persistent settler colonialism and U.S. Governmental policies, but they persevered. We make this acknowledgment to honor the Dakota and Anishinaabe people, ancestors and descendants, as well as the land itself.”

This statement was developed by the Minnesota Public Health Association’s Health Equity Committee and its partners. Additional background information available at <http://mpha.net/Ancestral-Lands-Statement>

Learning Outcomes

- Describe the simulation strategies applicable to promoting health equity
- Integrate implicit bias mitigation strategies into simulations
- Apply equity and inclusion facilitation skills to simulation facilitation

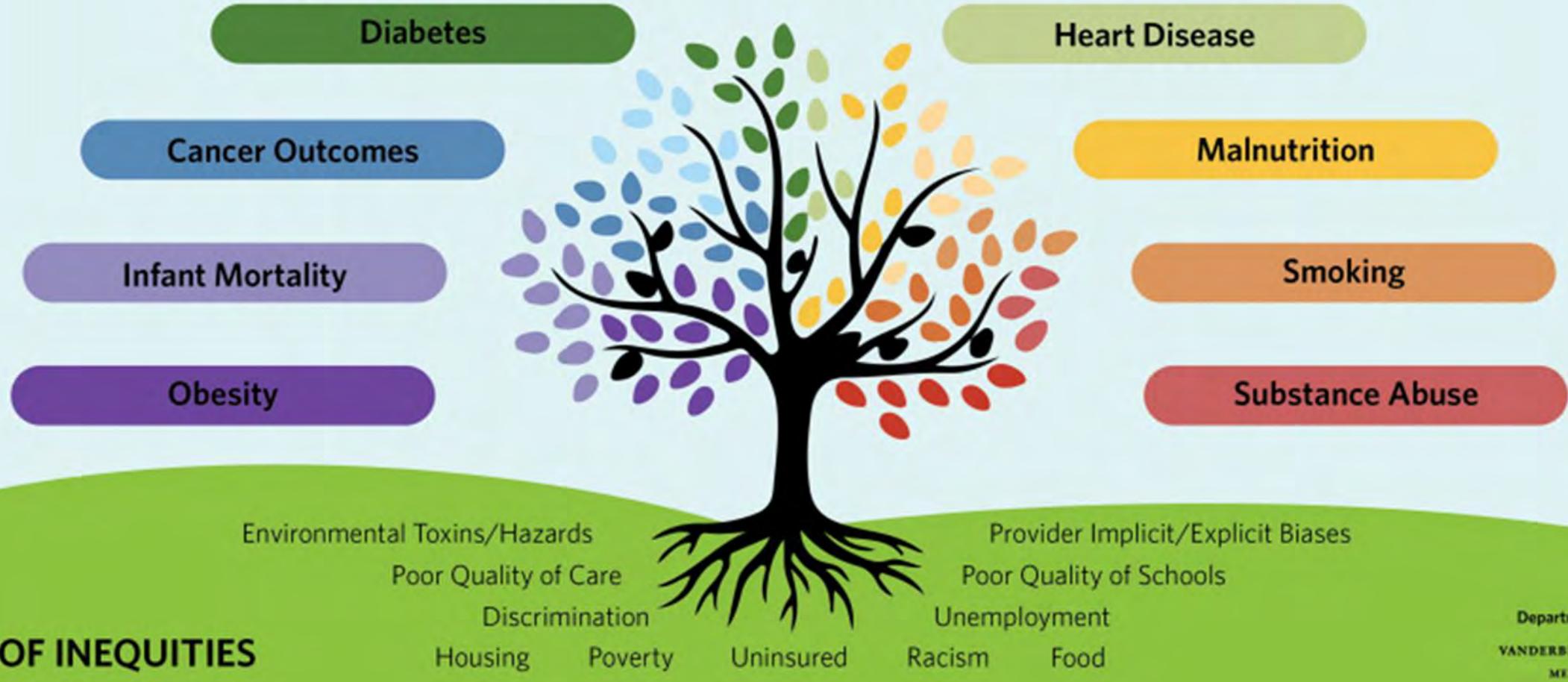
Health care disparities

- COVID-19 highlighted healthcare disparities
- Healthcare disparities span ALL areas and ages
- Health equity at Children's Minnesota



Dora Kisteleki for The Washington Post, January 13, 2021

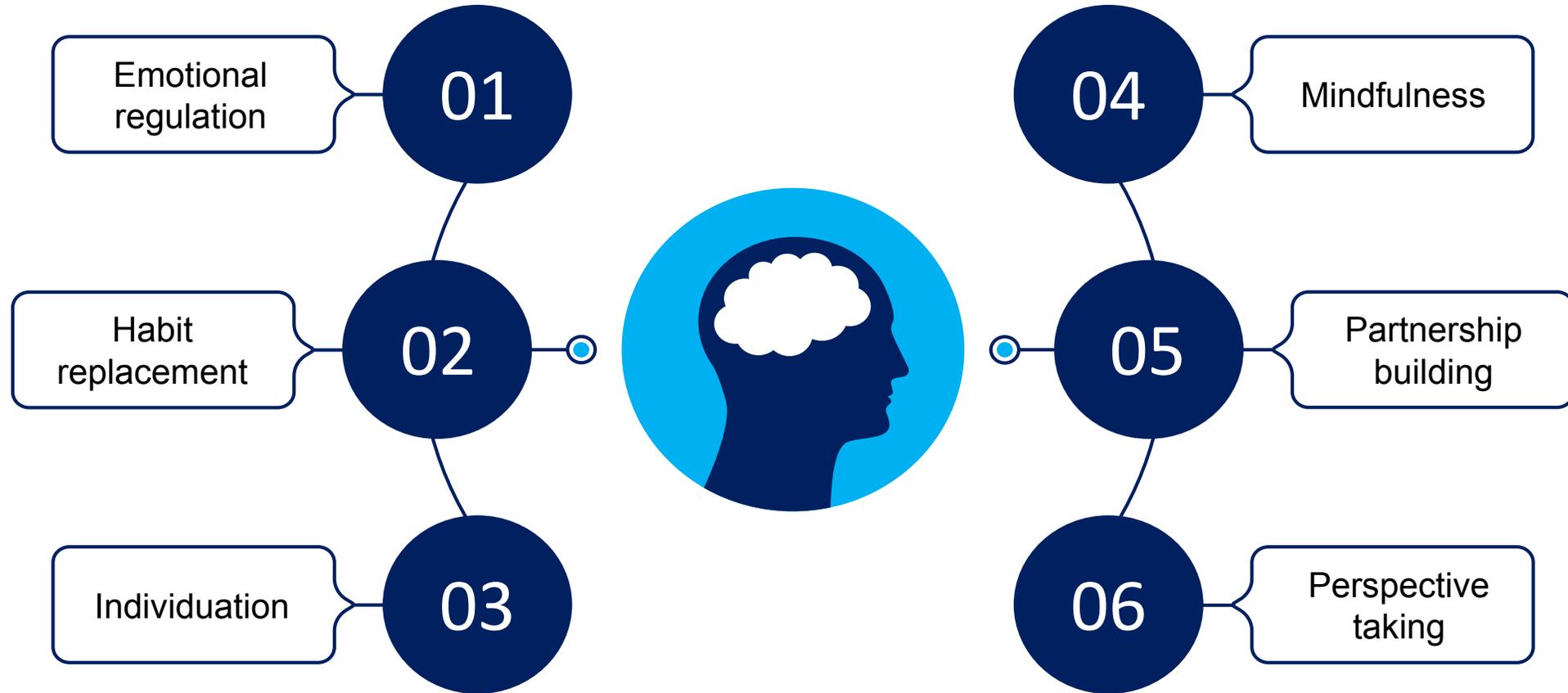
DISPARITIES IN HEALTH OUTCOMES



Implicit Bias Training

- Initial focus “fixing” the behavior
- Shifted with better understanding of implicit bias and its impact
- Currently range from noninteractive lecture to small, intensive multiday workshops with role play

Implicit bias mitigation strategies

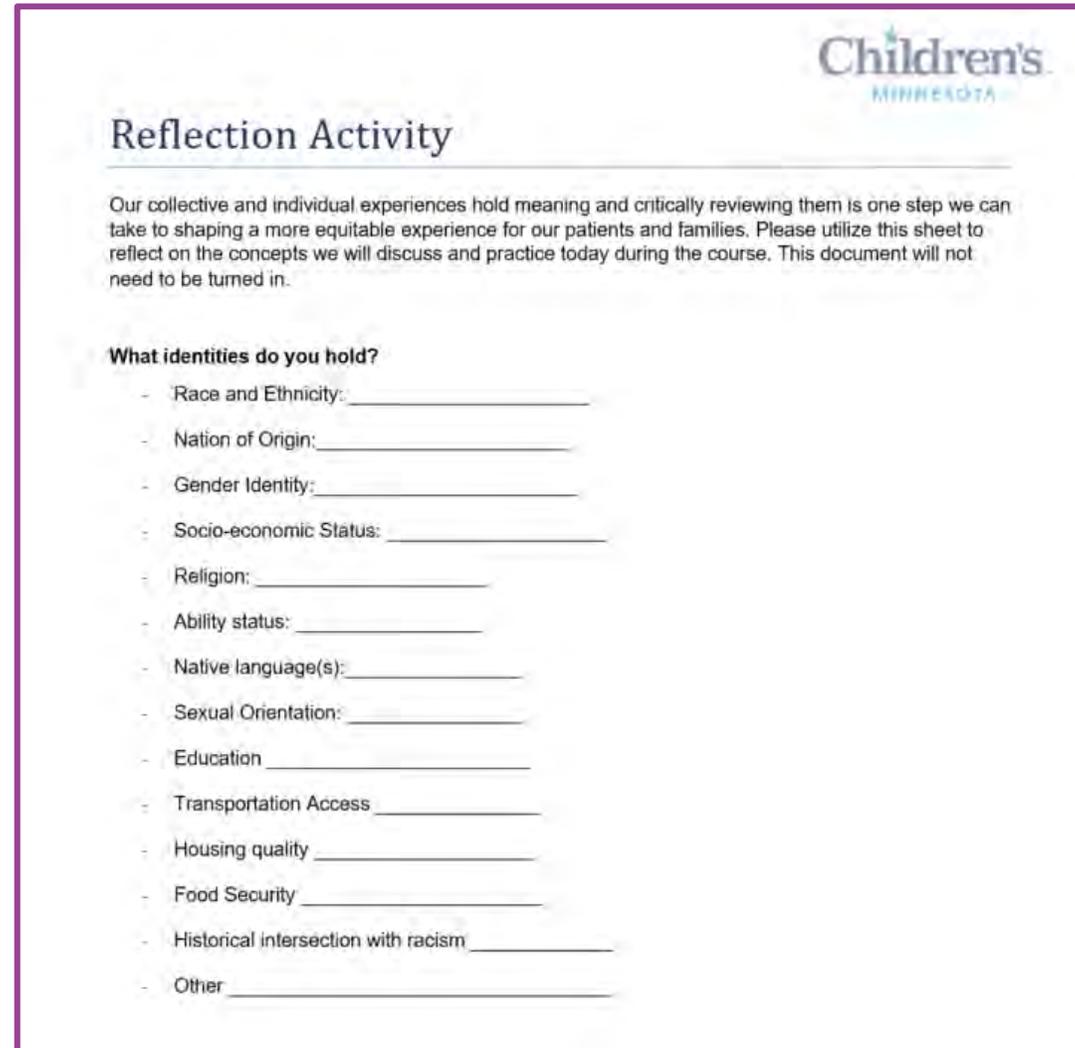


Ground rules

- Share air time.
- Lean into discomfort with difficult conversations and commit to engaging in emotional labor.
- All learners are here to improve and provide better care to patients and families. We all have different identities and life experiences. Speak honestly from your own perspective – use “I” statements. **We all hold implicit biases** and are striving to recognize these biases and mitigate them to improve the way we provide care.
- Expect non-closure [1]. We are all aiming for improvement during these sessions and we accept our growth will need to continue after this session.
- The content may be triggering or difficult for people of color and we aim to create a safe space. Microaggressions will be addressed as they arise.
- Please only share your own experiences and respect others by refraining from sharing their stories. We value confidentiality as a way to allow us to be vulnerable today while we practice skills around mitigating racial bias.

1. Heard-Garris presentation, 2020

Reflection activity



Children's MINNESOTA

Reflection Activity

Our collective and individual experiences hold meaning and critically reviewing them is one step we can take to shaping a more equitable experience for our patients and families. Please utilize this sheet to reflect on the concepts we will discuss and practice today during the course. This document will not need to be turned in.

What identities do you hold?

- Race and Ethnicity: _____
- Nation of Origin: _____
- Gender Identity: _____
- Socio-economic Status: _____
- Religion: _____
- Ability status: _____
- Native language(s): _____
- Sexual Orientation: _____
- Education _____
- Transportation Access _____
- Housing quality _____
- Food Security _____
- Historical intersection with racism _____
- Other _____

Reflection Activity



- What does yelling mean to you?
- What are the rules around expression of emotional distress?

Simulation based training



Rama CPR training



COD Nursing Simulation



EdTech Stanford University



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Simulation for Implicit Bias Mitigation Strategies

Pre-learning:

Individually

[TEDx Talk "Are you Biased? I Am"](#) by Kristin Pressner

Narayan article: Addressing Implicit Bias in Nursing

Chapman et al article: Physicians and Implicit Bias: How Doctors May Unwittingly Perpetuate Health Care Disparities

(30 mins)

Activities:

Mindfulness

Personal Reflection Activity

(1 hr)

Simulation Case 1:

30 mins Deliberate Practice

30 mins Debrief

(1 hr)

Simulation Case 2:

30 mins Deliberate Practice

30 mins Debrief

(1 hr)

Mindfulness Activity

(20 mins)

Evaluation

(10 mins)

Video

- <https://youtu.be/Wt5QdgTpltA>

Implicit Bias Mitigation Strategy (IBMS)	Description
Counter-stereotypic imaging	Nurse, recognizing bias, purposely identifies members of a group who counter the stereotypical image of the group, and replaces the automatic biased image with the positive image. Related to mindfulness.
Emotional regulation	Nurse reflects on “gut feelings” and negative reactions (dislike, fear, frustration) to patients from vulnerable groups. Nurse then intentionally strives to be empathetic, patient, and compassionate. Related to mindfulness and perspective taking.
Habit replacement	Nurse frames recognized biases as bad habits to be broken. Develops and uses a personal toolkit of self-interventions to replace the bad habit of biased thinking with the good habit of accepting and caring about each patient as an individual. Related to emotional regulation, individuation, mindfulness, and strategies nurses use to help patients change harmful lifestyle behaviors.
Increasing opportunities for contact	Nurse seeks to develop relationships with members of a group to which the nurse does not belong, with the goal of dissolving stereotypes.
Individuation	Nurse mindfully seeks to see patients as individuals instead of as members of a stigmatized group. Related to therapeutic relationship, patient-centered care, and culturally competent care.
Mindfulness	Nurse purposely takes the time to calm thoughts and feelings by being mindful of the present moment, which can help the nurse act compassionately toward the patient. Related to emotional regulation and perspective taking.
Partnership building	Nurse intentionally frames the clinical encounter as one in which the nurse and patient are equals, working collaboratively toward the same goal.
Perspective taking	Nurse purposely and empathetically thinks about what the patient is thinking and feeling, stimulating feelings of caring and compassion. Related to mindfulness and therapeutic relationship.
Stereotype replacement	Nurse reflects on negative reactions to members of vulnerable populations, acknowledges stereotypical responses, considers reason for the feeling, and commits to respond with compassion in the future. Related to self-reflection.

Deliberate practice

- Realistic practice in small group, play/pause format
- Repeated practice integrating words and behaviors of the mitigation strategies
- Learn from each other and critically reflect



Debriefing & microdebriefing

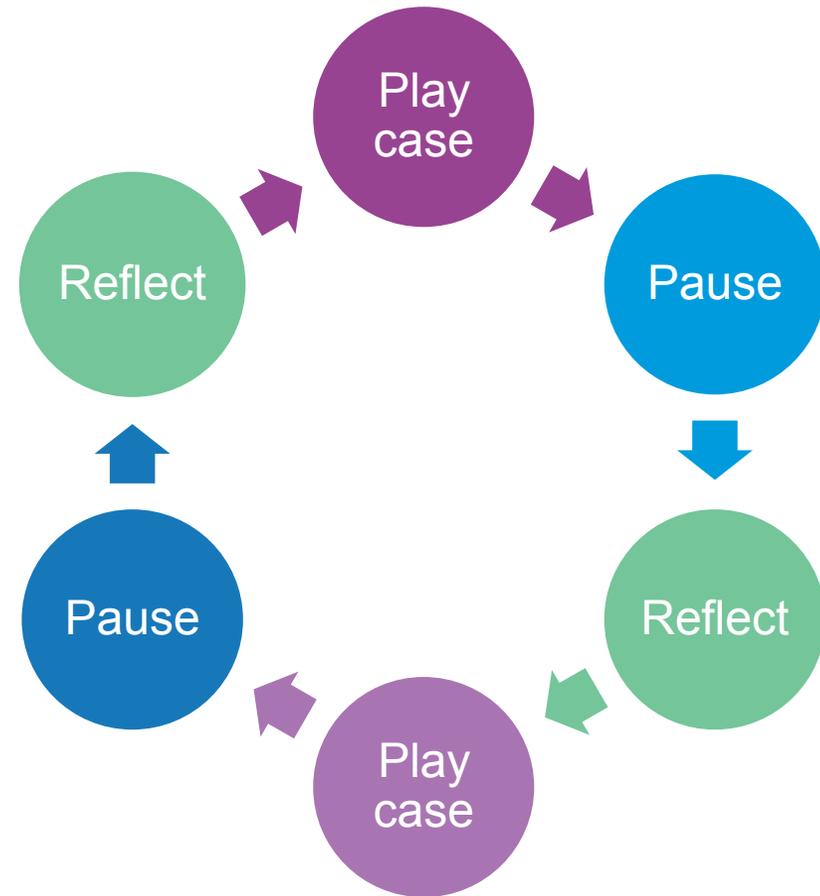


Debriefing & microdebriefing

- **Caregiver:** No one cares what we think, decisions keep getting made without us. No one even treats me like John's father. The lady at the welcome desk stopped me yesterday, asking all these questions, saying "Has the mother allowed you to visit?" I have been here for three days, with my son. It is like you people are keeping me from him.
- **Healthcare professional:** I know you have been here and you deserve to be with John whenever you want to. I am sorry you experienced this.
- **Caregiver:** So is it going to change?
- **Healthcare professional:** Well we have to screen all families before they enter the hospital, it is for your safety and John's that we do this with every family.
- **Caregiver:** I saw a bunch of people not stop at the desk. It's not *all* families.
- **Healthcare professional:** (Turn to facilitator) I don't know what to say.

Debriefing & microdebriefing

- Pauses to allow for reflection
- Rewind and play to practice implicit bias mitigation strategies (IBMS)
- Feedback from actor
- Critical reflection and integration of IBMS are the main focus



Facilitator development



Question

How might you apply some of the concepts shared today in your own setting?

Mindfulness Activity

“Now we will do a mindfulness activity to help bookend our time together.

“I invite you to close your eyes and plant your feet on the ground.

“Take a moment to ground yourself in your own body. Notice the outline of your skin and the slight pressure of the air around it. Experience the firmer pressure of the chair beneath you- or the ground or floor beneath your feet.

Can you sense hope in your body? Where? How does your body experience that hope? Is it a release or expansion? A tightening born of eagerness or anticipation?

What specific hopes accompany these sensations? The chance to heal? To be free of the burden of racialized trauma? To live a bigger, deeper life?

Do you experience any fear in your body? If so, where? How does it manifest? As tightness? As a painful radiance? As a dead, hard spot?

What worries accompany the fear? Are you afraid your life will be different in ways you cannot predict?

...Do you feel the raw, wordless fear- and, perhaps, excitement- that heralds change? What pictures appear in your mind as your experience that fear?

If your body feels both hopeful *and* afraid, congratulations. You're just where you need to be for what comes next. Take a deep breath in, and exhale. When you are ready, open your eyes.”



Thank you!

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