EQUITY IN AWARD ADJUDICATION



WHAT IS THE ISSUE?

Emergency medicine in Canada exists within the greater context of Canada, its past, present and future. Discrepancies in health for patients from marginalized groups exist and are part of a legacy of racism, colonialism and other forms of inequity. Physicians and other emergency medicine team members from underrepresented groups face unique challenges in their work due to bias and discrimination. We have an important responsibility in the adjudication of CAEP awards to purposefully work toward equity.

WHY DOES EXAMINING SYSTEMIC BARRIERS MATTER WHEN ADJUCATING AWARDS?

Those who are female, BIPOC, people with disabilities, and 2SLGBTQIA+ have had a uniquely different journey of overcoming largely invisible or unspoken obstacles in society. Important contributions by those underrepresented in medicine through mentorship and community building is often not recognized as the important academic and clinical work that it is. It's important to consider the diverse backgrounds of the candidate that preceded even getting to the nomination table. In fact, failure to examine system barriers may lead to a lack of appropriate recognition, which can perpetuate inequities.





"BUT I'M NOT RACIST/SEXIST/HOMOPHOBIC/TRANSPHOBIC/ ABLEIST!"

We all have unconscious bias. They are prejudices we have but are unaware of. Unconscious biases cause us to make decisions that favour or exclude others. Even if we sincerely believe we're being fair and objective, stereotypes may still influence our opinions - without us being aware of it. With the privilege of selecting award winners, it's important we recognize our biases so that we make fair decisions and allocate awards equitably and not based on our biases.

IMPLICATIONS OF UNCONSCIOUS BIAS

We are all prone to making cognitive errors when evaluating others. Our brains default to mental associations.



Multiple studies of resumes with identical credentials but different names have shown - across all cultures - that names associated with the ethnic majority receive more favourable ratings and better chances of advancing for selection and interviews. Contrary to what we might think, the bias was MORE PRONOUNCED in evaluating resumes of higher academic quality.



HOW DO I RECOGNIZE MY UNCONSCIOUS BIAS?

The Harvard Implicit Association Test allows us to reliably uncover our unconscious biases. The IAT allows us to assess for our biases such as: skin-tone (light skin - dark skin), gender-career, gender-science, race (black - white), sexuality (gay-straight), weight (fat-thin), Arab Muslim (Arab Muslim - other people) and many more. The IAT predicts our behaviours.

WHAT CAN I DO?

- 1. We STRONGLY suggest that you do the **FREE Stanford One Hour Unconscious Bias in Medicine online training.** It allows you to work through your unconscious biases so that you can be more equitable in the award adjudication process.
- 2. Review the literature on Equity, Diversity and Inclusion (references attached, on page two)
- 3. Hold yourself accountable to equity in award allocation by explicitly moving toward equity as a priority in award adjudication.
- 4. It is expected that members of your selection committee will represent a diversity of lived experiences in terms of gender, sexuality, race, and indigeneity. If your committee does not include members of groups underrepresented in medicine please discuss this as early as possible with the Canadian Association of Emergency Physicians (CAEP) leadership for support in this area.
- 5. Ask everyone on the selection committee to explain the reasons behind their decisions.
- 6. Assign a Diverse Thinker on your selection committee to avoid groupthink. This person is given the task of bringing an alternative lens to the dialogue.
- 7. We suggest ranking candidates as: outstanding, excellent, very good, etc. Within a tier, all candidates are considered equal. The award would go to the person
 - in the top tier who is part of the most underrepresented group within CAEP.

CAEP EQUITY, DIVERSITY AND INCLUSION ADVISORY COMMITTEE

DR. EVAN ADAMS DR. HUMA ALI DR. JENNIFER BRYAN DR. ROB PRIMAVESI

RESOURCE

STANFORD UNCONSCIOUS BIAS IN MEDICINE COURSE

EQUITY, DIVERSITY AND INCLUSION REFERENCES



STANFORD UNCONSCIOUS BIAS IN MEDICINE

https://online.stanford.edu/courses/som-ycme0027-unconscious-bias-medicinecme

HARVARD IMPLICIT ASSOCIATION TEST

https://implicit.harvard.edu/implicit/canada/takeatest.html

GUIDELINES FOR ASSESSING THE PRODUCTIVITY OF NOMINEES

TRI-AGENCY UNCONSCIOUS BIAS ONLINE TRAINING MODULE

HEWLETT, S. A. (2016). HOW DIVERSITY CAN DRIVE INNOVATION. HARVARD BUSINESS REVIEW.

<u>THE EQUITY MYTH: RACIALIZATION AND INDIGENEITY AT CANADIAN UNIVERSITIES</u> (<u>PDF, 6.3MB</u>), <u>PUBLISHED IN 2017 BY FRANCES HENRY, ENAKSHI DUA, CARL E.</u> JAMES, AUDREY KOBAYASHI, PETER LI, HOWARD RAMOS, AND MALINDA S. SMITH

FURTHER RESOURCES CAN BE ACCESSED AT: CAEP EDI RESOURCES WEBPAGE