

# Examining Factors That Contribute to Diagnostic Inequities Among Black Women

**Veronica Gillispie-Bell, MD, MAS, FACOG**

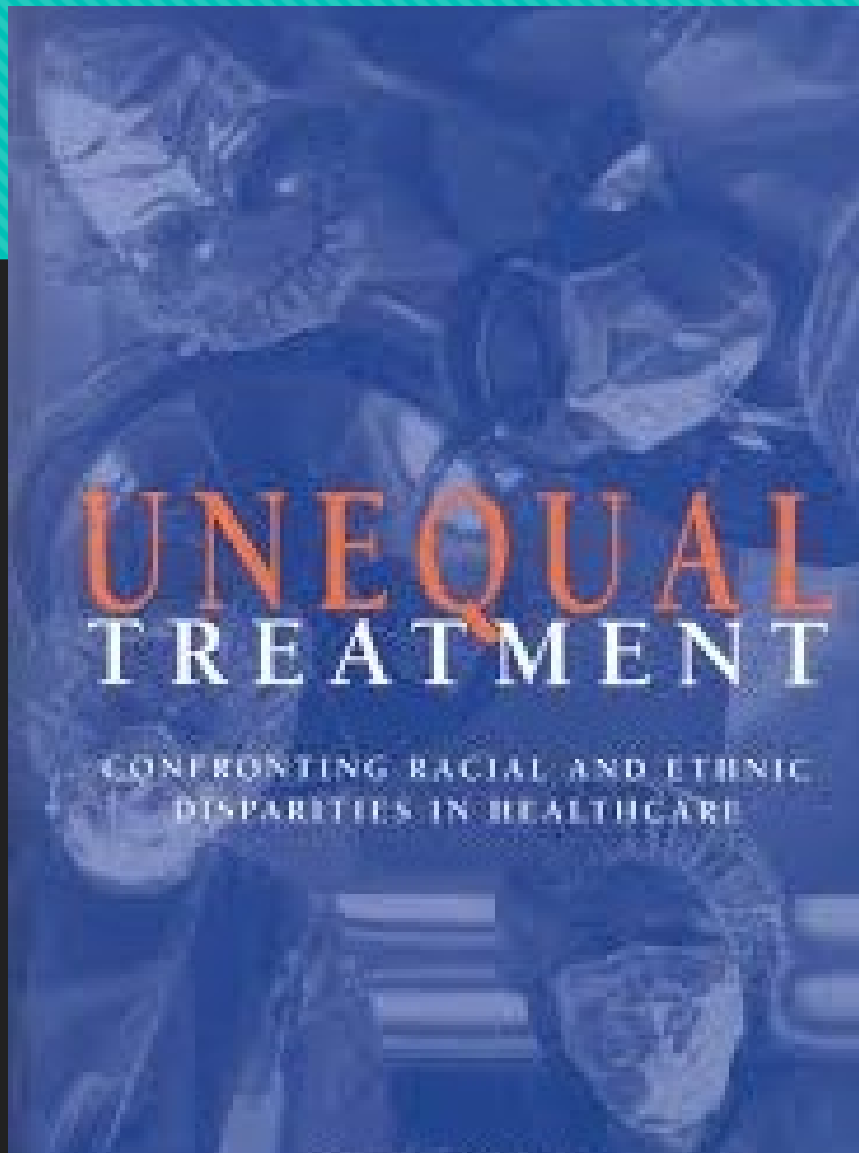
Associate Professor; Senior Site Lead/Section Head of Women's Services

Ochsner Health

Medical Director, Louisiana Perinatal Quality Collaborative and Pregnancy Associated Mortality Review

Louisiana Department of Health





- Published in 2003, Brief published in March 2002
- “Even among the better-controlled studies, the vast majority of published research indicates that minorities are less likely than whites to receive needed services, **including clinically necessary procedures**, even after correcting for access-related factors, such as insurance status”

# Root of Health Disparities



# Bias Beliefs about Race and Pain

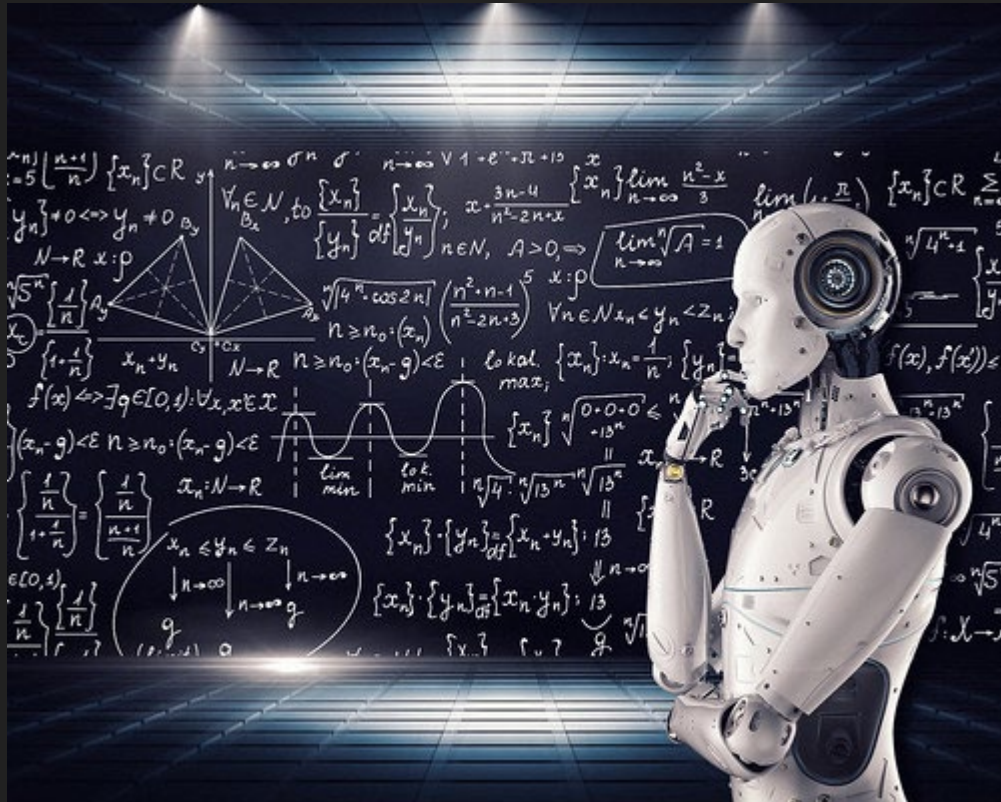
Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between blacks and whites

[Kelly M. Hoffman](#)<sup>a,1</sup> [Sophie Trawalter](#)<sup>a</sup> [Jordan R. Axt](#)<sup>a</sup> and [M. Norman Oliver](#)<sup>b,c</sup>

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- In a study of 222 **white medical students and residents**, about **50% believed Black people were biologically different than white people**, including having nerve endings that are less sensitive than whites and having thicker skin than whites

# Healthcare Algorithms



## ○ Three Biases

- **Statistical Bias:** algorithms based on studies where minorities were underrepresented giving a predictive risk that underestimates the true risk
- **Social Bias:** inequitable healthcare delivery based on clinical practices
- **Statistical and Social Bias**

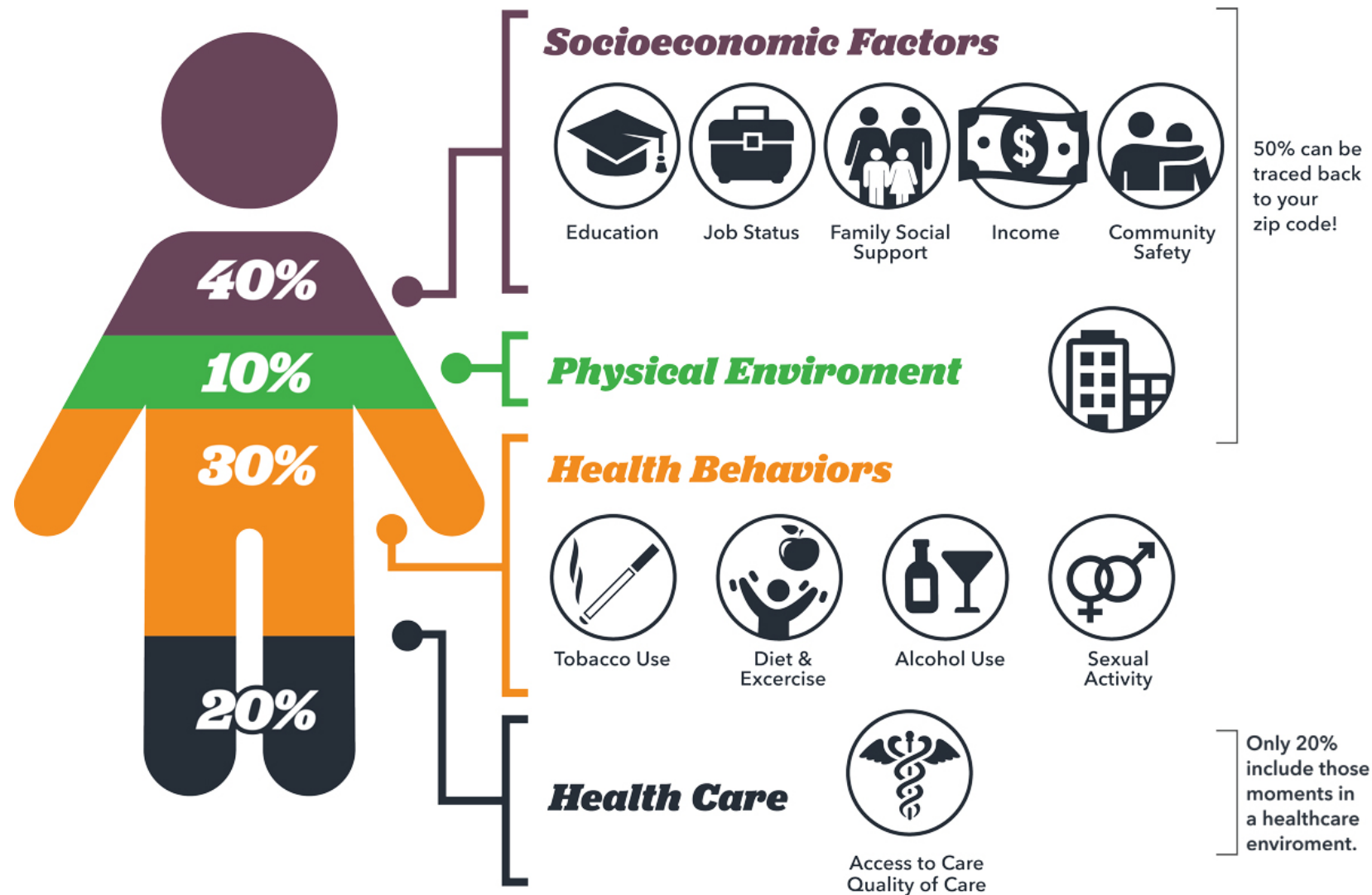
# Structural racism impacts social determinants of health

- In 1906, W.E.B. DuBois stated that social conditions, **not genetics**, impacted the health of Blacks, causing racial disparities in health outcomes.



# Social Determinants of Health





Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)



# You Cannot Have Quality Without Equity

- The Institute of Medicine defines quality as ***“the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge”***
- ***To accomplish quality, we must acknowledge and address the implicit bias and stereotypes that prevent us from delivering equitable care***

Equity	Safe
	Effectiveness
	Patient-Centered
	Timely
	Efficient



**We must  
implement  
change  
through a  
Lens of Equity**

# Thank you

Veronica Gillispie-Bell, MD, MAS, FACOG

[Veronica.Gillispie@la.gov](mailto:Veronica.Gillispie@la.gov)

[vgillispie@ochsner.org](mailto:vgillispie@ochsner.org)

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