



IMPROVING AFRICAN-AMERICAN RETENTION IN SUBSTANCE ABUSE TREATMENT

A series of educational products, guidance, and technical assistance for mental health providers, substance abuse treatment providers and primary care physicians who seek to elevate cultural competence efforts to include an understanding of the presence and impact of implicit racial bias in health care and substance abuse treatment.

TOPICS:

Scope of the Problem

What it Means to be African-American

Implicit Bias and Microaggression

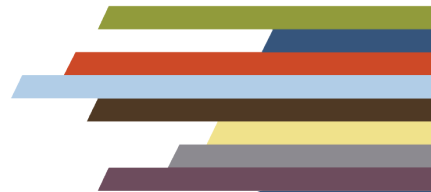
Evidence-Based Strategies

Southeast Addiction Technology Transfer Center

Morehouse School of Medicine's National Center for Primary Care
720 Westview Drive, Suite 300
Atlanta, GA 30310

Phone: 404.752.1016

Email: southeast@attcnetwork.org



Southeast (HHS Region 4)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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Implicit Racial Bias and Microaggression



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INTRODUCTION

Retention in substance abuse treatment is a significant predictor of substance abuse health outcomes. Early drop-out has linked to relapse to drug and alcohol use and poorer long-term prognosis.

African-American race is an independent predictor of lack of referral to substance abuse treatment, as well as early treatment drop-out, with some studies showing drop-out rates as high as five times that of individuals who identify as Caucasian.

A significant amount of evidence directly links racism and discrimination to negative mental health and substance use outcomes. Current cultural competence efforts largely focus on undermining ignorance of other cultures, explicit hatred, and bigotry while under-appreciating the importance of addressing implicit racial bias and microaggression that can affect African-American health outcomes, even in the absence of overt racism.

This pamphlet defines implicit racial bias and microaggression, and offers evidence-based strategies for addressing both substance use treatment programs.

WHAT IS IMPLICIT RACIAL BIAS?

Implicit bias is the term that is used to describe unconscious thoughts and attitudes we have towards people, or stereotypes we unconsciously associate with specific groups.

Unlike explicit racial bias, which is conscious, based on beliefs and takes time and motivation to enact, implicit bias is unintentional, quickly activated, and often in conflict with individual beliefs and values.

Explicit bias in healthcare has steadily declined over time; the however implicit bias persists. In fact, healthcare providers display the same rate of implicit bias as the wider public.

African-American patients are less likely than white patients to be referred to as residential substance abuse treatment, even when symptoms are severe enough to warrant such referral.

WHAT IS MICROAGGRESSION?

Microaggressions are small-scale verbal or physical interactions that do not always have malicious intent, but emotionally injure the receiving party. Microaggressions are the behaviors that result from implicit racial bias. Common race-based microaggressions include:

- “You’re not like other Black people.”
- “What are you?”
- “Your name is too hard to pronounce.”
- “You’re so articulate!”

While the above microaggressions are not meant to be insults, they are based on negative stereotypes and attitudes and therefore are received as such.

IMPACT ON RETENTION

Implicit racial bias and associated microaggression have been shown to negatively impact patient-provider interactions, treatment decisions, quality of care, treatment adherence, and health outcomes.

Studies demonstrate that African-Americans react less positively to providers who exhibit high implicit bias, even if explicit bias is low.

The therapeutic alliance is integral to substance abuse treatment and significantly associated with patient’s follow-up on referrals and treatment engagement and retention. As such, mental health providers must seek to raise conscious awareness of implicit biases, to prevent microaggressions that unintentionally undermine the therapeutic alliance.

HOW DO WE ADDRESS IMPLICIT BIAS AND MICROAGGRESSION?

Evidence-based interventions for addressing implicit bias and microaggression are based in the cognitive-behavioral model and aim to increase individual self-awareness.



Reduce Risk Factors

Bias is more likely to arise under busy, stressful conditions or when one is distracted.



Individuation

Evaluate individuals based on personal, rather than group-based attributes to prevent Stereotypic thoughts.



Increase Opportunities for Contact

Seek opportunities to diversify experiences and engage in positive interactions with members of the target group.