


# Reducing Bias during COVID-19 using the Crawford Bias Reduction Theory & Training



Dana E. Crawford, PhD  
Assistant Professor  
Clinical Pediatric Psychologist  
Albert Einstein College of Medicine

**TTAC**  
A COLLABORATION  
BETWEEN

**NEW YORK  
CENTER FOR CHILD  
DEVELOPMENT**

 **McSILVER INSTITUTE**  
FOR POVERTY POLICY AND RESEARCH  
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# Who We Are

**The New York City Training and Technical Assistance Center (TTAC), is funded through ThriveNYC, in partnership with the NYC Department of Health and Mental Hygiene (DOHMH)**

TTAC is a partnership between the New York Center for Child Development (NYCCD) and the McSilver Institute on Poverty Policy and Research

- **New York Center for Child Development has been a major provider of early childhood mental health services in New York with expertise in informing policy and supporting the field of Early Childhood Mental Health through training and direct practice**
- **NYU McSilver Institute for Poverty Policy and Research houses the Community and the Managed Care Technical Assistance Centers (CTAC/MCTAC), which offer clinic, business, and system transformation supports statewide to all behavioral healthcare providers**

TTAC is tasked with building the capacity and competencies of mental health and early childhood professionals through ongoing training and technical assistance

<http://www.TTACny.org>




# Visit our Website

TTACNY.org  
ttac.info@nyu.edu

## NYC Early Childhood Mental Health TTAC Training and Technical Assistance Center

TTAC is funded by the New York City Department of Health and Mental Hygiene through [ThriveNYC](#).

ASK TTAC 

[ABOUT US](#) [TRAINING & TECHNICAL ASSISTANCE](#) [RESOURCES](#) [ECTC PORTAL](#) [EVENTS](#)

### Events

*Thursday, April 2, 2020*  
TTAC Webinar: Supporting Families and Caregivers of Infants and Young Children Affected by the COVID-19 Pandemic

*Wednesday, May 20, 2020*  
Beginning at the Beginning: The Foundational Elements of Early Childhood Mental Health Consultation – Part I

*Friday, May 29, 2020*  
Beginning at the Beginning: The Foundational Elements of Early Childhood Mental Health Consultation – Part II

*Thursday, June 4, 2020*  
Beginning at the Beginning: Early Childhood Mental Health Consultation in Infant & Toddler Care - Part III

*Wednesday, June 10, 2020*  
TTAC Webinar: The Loss and Grief of COVID-19: Real Challenges and Practical Suggestions

*Friday, June 12, 2020*  
TTAC Webinar: Reducing Bias during COVID-19 using the Crawford Bias Reduction Theory & Training

[view more >](#)



### NYC DOHMH Bureau of Early Intervention E-Learning Modules



Foundations of Social-Emotional Development in Infants and Toddlers  
[Learn More](#)

### NYC Early Childhood Mental Health Network COVID-19 Resource Guidance



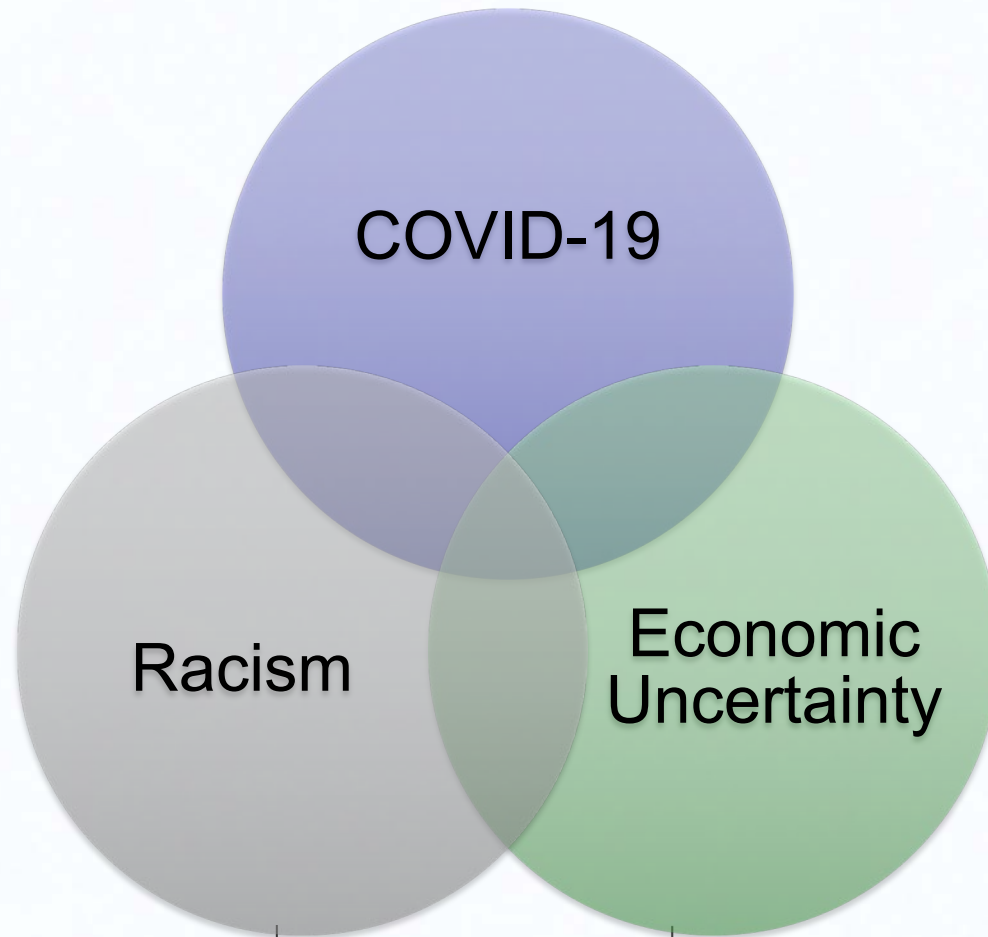
Self-care resources for child serving professionals and resources to inform your work with children and families.  
[Learn More](#)

### The Early Childhood Mental Health Network



Get to know the Early Childhood Therapeutic Centers (ECTCs)! Available in both English and Spanish.  
[Learn More](#)

# Three Pandemics at Once



# Impact

Physical

Relational

Psychological

Moral

Lifestyle



Emotion-driven

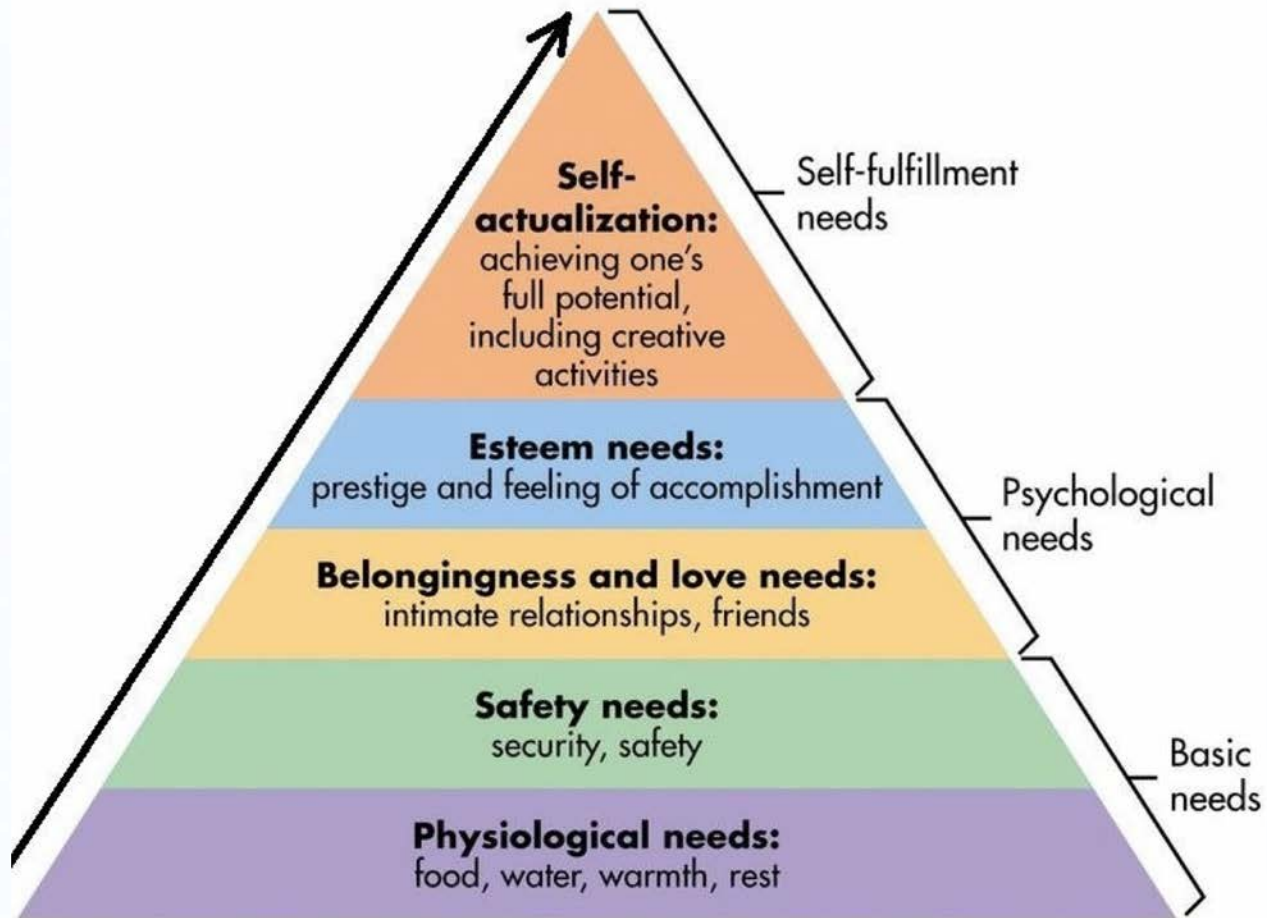
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# Optimal Health



# We need a system to anchor us



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# From HBCU

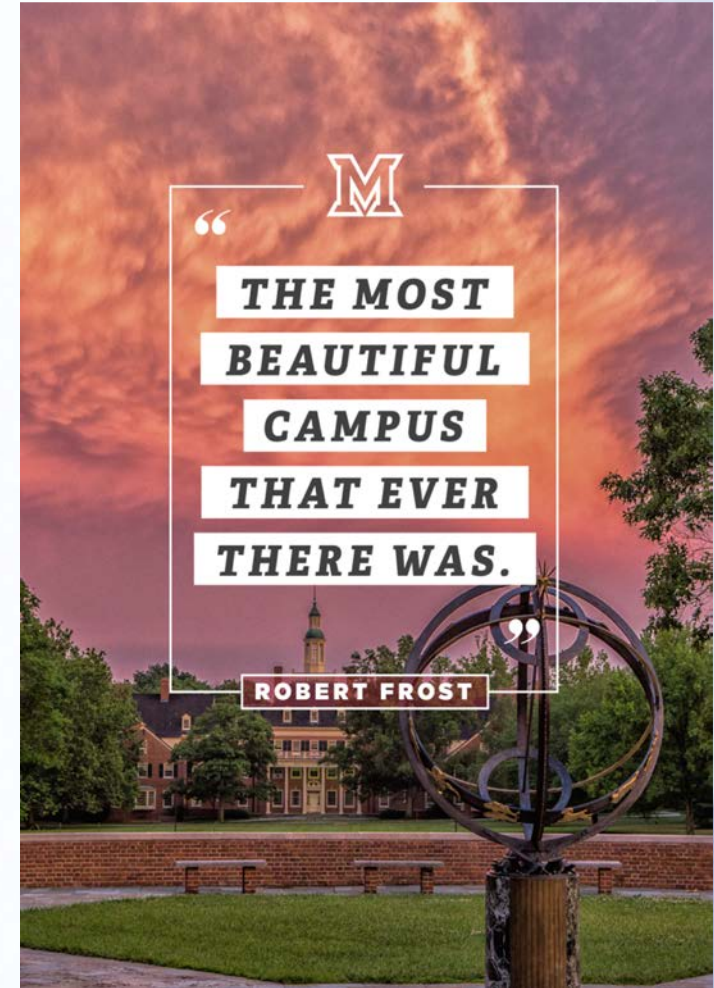
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to PWI



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# “I know some lovely Racists”

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“We are worried the kids can’t understand you because of your Jamaican accent” ---School staff

---

“You just seem angry and aggressive” -- Supervisor

---

“Oh my goodness, you are so pretty for a Black girl” --Patient

---

“You aren’t like, you know, other Black people, like our patients” –Supervisor

---

“You just look softer and nicer when your hair is not in dreadlocks, you should wear it straight like those Black women on TV” --Colleague

“Get together with a group of friends,  
burning crosses, or killing people is  
**NOT racism, bias or prejudice,**  
it’s hate,  
it’s criminal...  
**it’s disgusting**”

# Microaggressions

Death by a 1000 papercuts

The term was coined by psychiatrist and Harvard University professor **Chester M. Pierce** in 1970 to describe insults and dismissals which he regularly witnessed non-black Americans inflicting on African Americans

Microaggressions are everyday slights and indignities some people encounter all the time - while others aren't even aware they're committing them. ~Derald Wing Sue



# Culture is the silent participant in **every** interaction



*Chris Buck/O, the Oprah Magazine*

# WHAT WAS YOUR FIRST EXPERIENCE WITH RACISM, PREJUDICE OR BIAS?



Chris Buck/O, the Oprah Magazine

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# Racism is a STD

“Based on what we now know about the ways racism harms children, mentally and physically, I contend that all pediatricians should work to become anti-racists.” AAP

Shaquita Bell, MD, FAAP  
AAP Voices July 29, 2019



## Racism

“It’s been said that racism is so American, that when we protest racism, some assume we are protesting America”

Beyonce Knowles Carter



INDIVIDUAL/PERSONAL

INTERPERSONAL

INSTITUTIONAL

CULTURAL

STRUCTURAL/SYSTEMIC

## Forms of racism

# You are a “good person”

- If you are participating in this webinar, some part, if not all of you **does not want** to have bias, prejudice, or racism
- You desire to provide the best patient/client care possible
- You want patients/clients to feel **heard and understood**
- You want to **feel safe** at work
- You do not want to cause others to feel unsafe
- In short, you value diversity

Privilege doesn't  
mean your life hasn't  
been hard...

It means that your  
skin color, gender, or  
sexual orientation  
aren't the things  
making it harder.

# Traditional approaches to supporting diversity

Othering

Position people with minority status as experts and not learners

Whiteness as a race and culture goes underexplored

Guilt inducing for people of privilege

Increase awareness, without concrete action steps

Cultural competency is a lifelong long long long complicated journey, which is often incompatible with a fast-paced work environments

# Where has healing and skill building happened?

---

Graduate school

---

Friends & Intimate relationships

---

Family

---

Media

---

Professional trainings

# How do we develop bias, prejudice, & racism?



Influenced by our background, cultural environment and personal experiences



Biased media representations



Social experiences



Repeated exposure to stereotypical associations and prejudices which become automated in our long-term memory

# Factors increasing Bias, Prejudice, and Racism

---

Time pressure

---


Vague or confusing situations

---

Too much information at once (“cognitive overload”)

---

Lack of attention being paid to the task



Bias,  
Prejudice,  
&  
Racism...  
in the air  
we breathe

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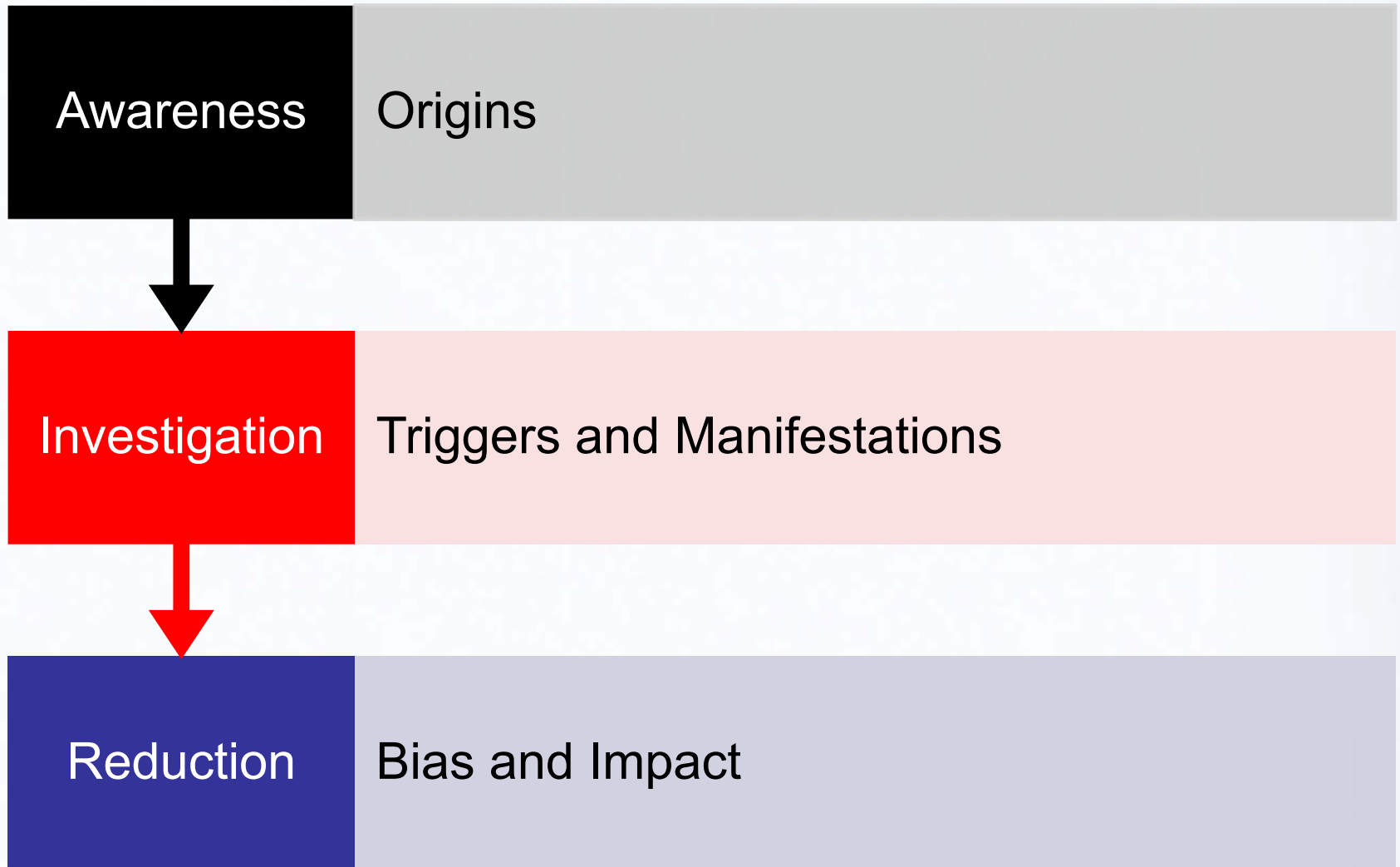


Culturally Biased  
AND  
a good person

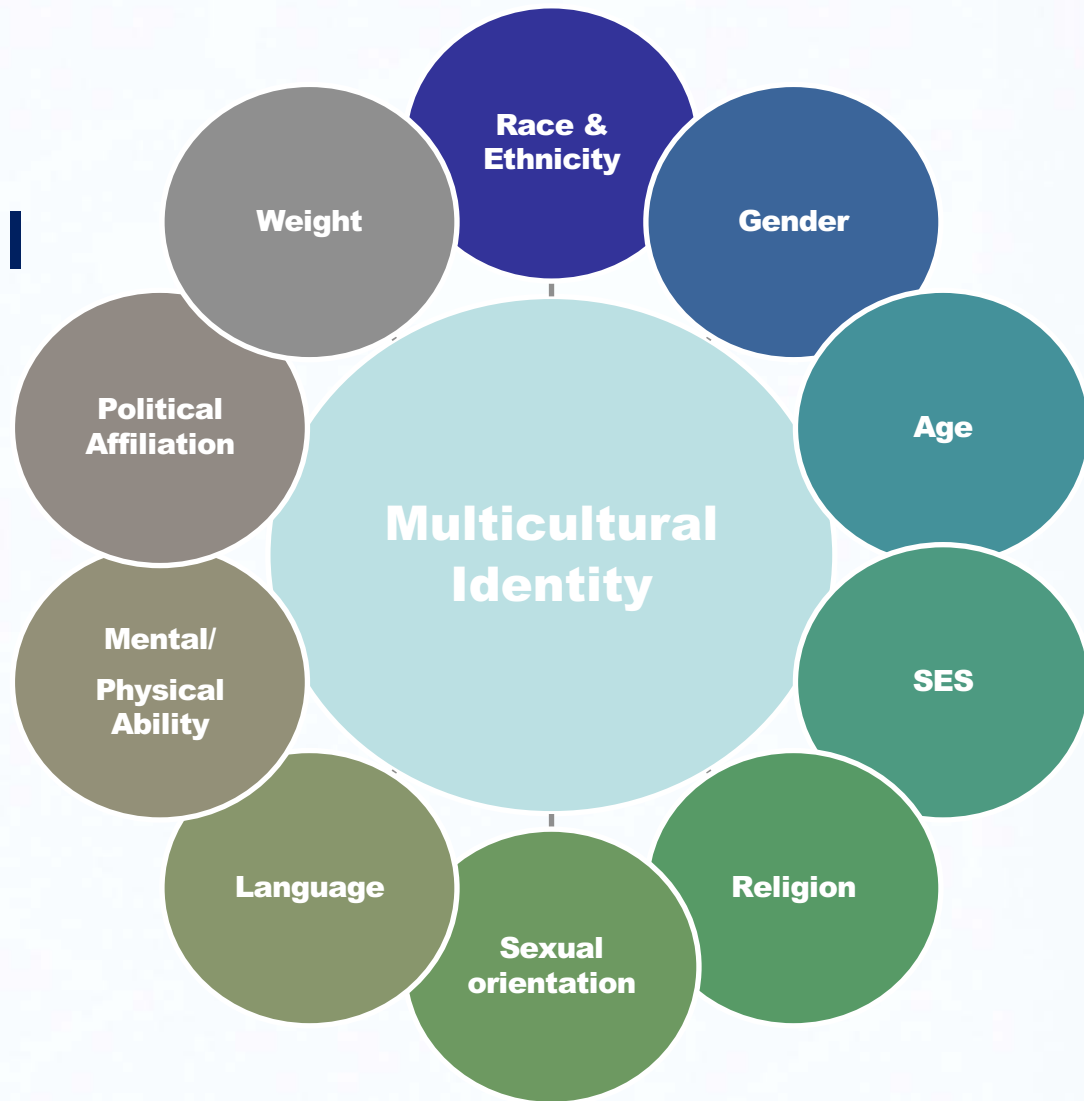
# Focus on **IMPACT**, not on intent



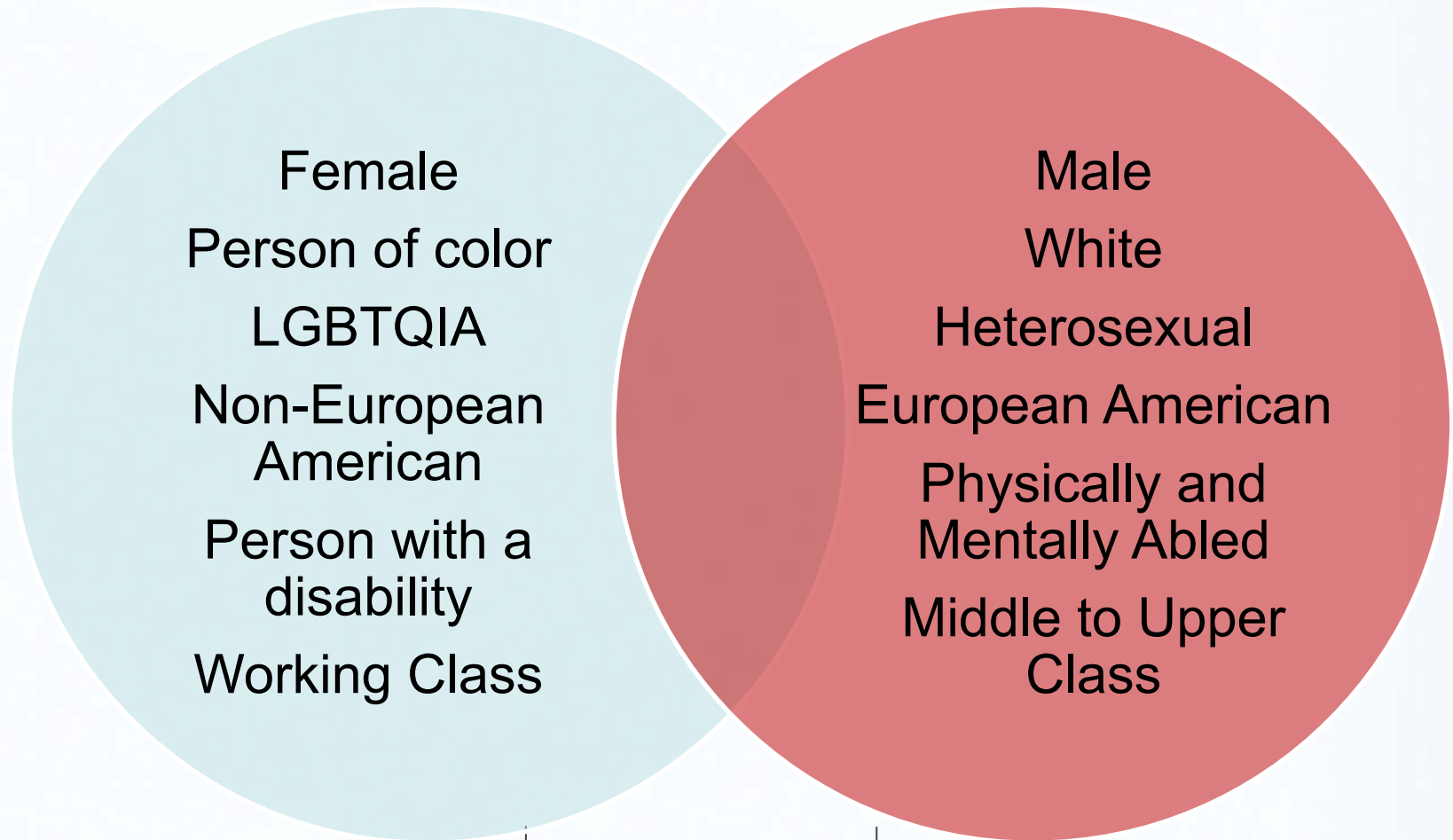
# CRAWFORD BIAS REDUCTION THEORY & TRAINING (CBRT)



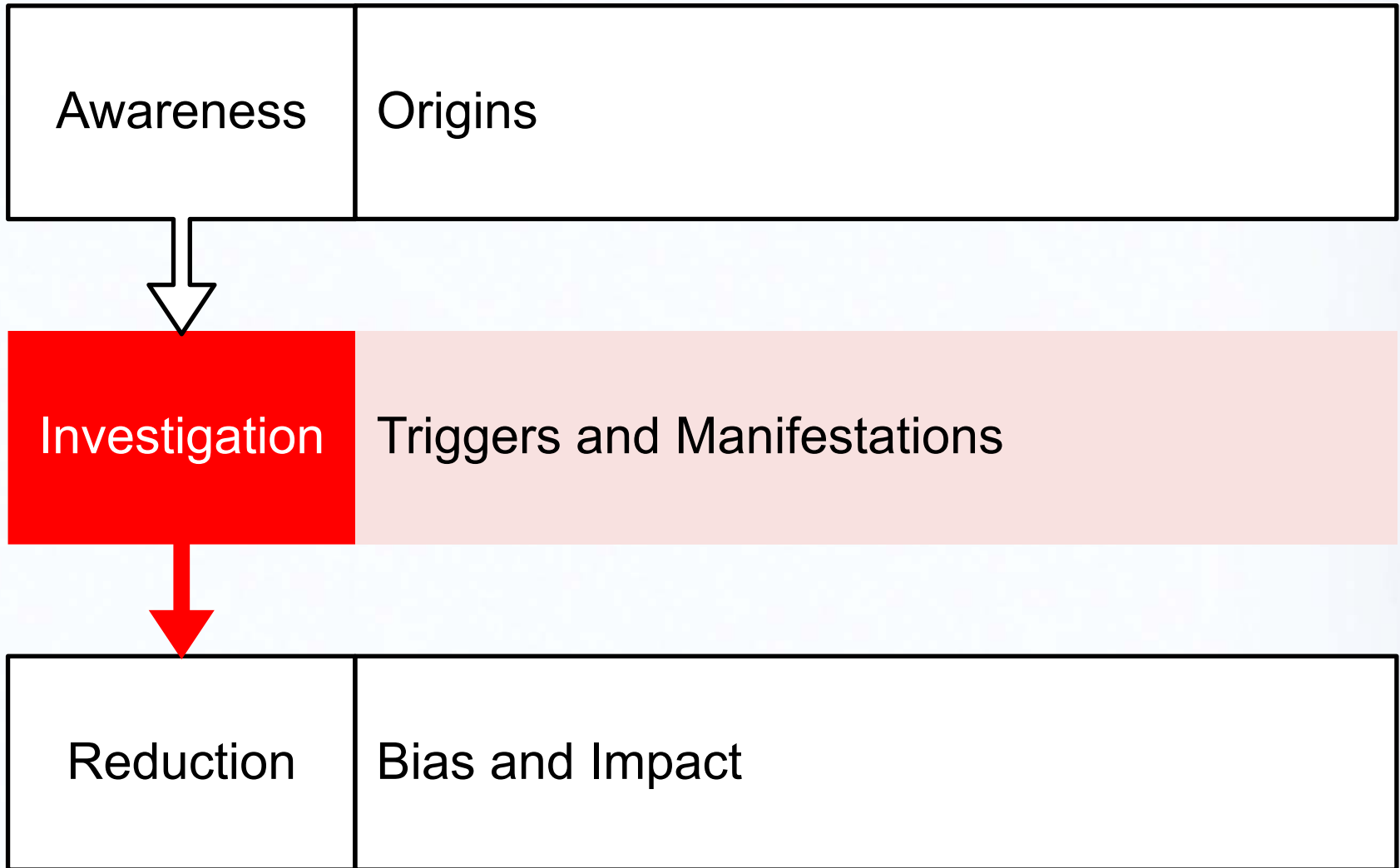
# We all have multicultural identities



# Socially Oppressed Groups (SOG) and Socially Privileged Group (SPG)



# CRAWFORD BIAS REDUCTION THEORY & TRAINING (CBRT)



# Signs of Being Triggered

## Affectively

- Fear, anger, anxiety, sadness, excitement

## Behaviorally

- Yawning, frowning, eye contact adjustment, getting too close

## Cognitively

- Judgment, diagnosis, flashbacks, excessive curiosity

## Physically

- Heart palpitations, dry mouth, tense muscles

# Triggers

Youth and/or their families

Colleagues

Administration

Supervisors

Supervisees

The American College of Obstetricians and Gynecologists and the American Congress of Obstetricians and Gynecologists

- Implicit bias may affect the way ob-gyns counsel youth about treatment options such as contraception, vaginal birth after cesarean, and the management of fibroids.
- Implicit bias has been documented to affect the patient-physician relationship as well as treatment decisions and outcomes.

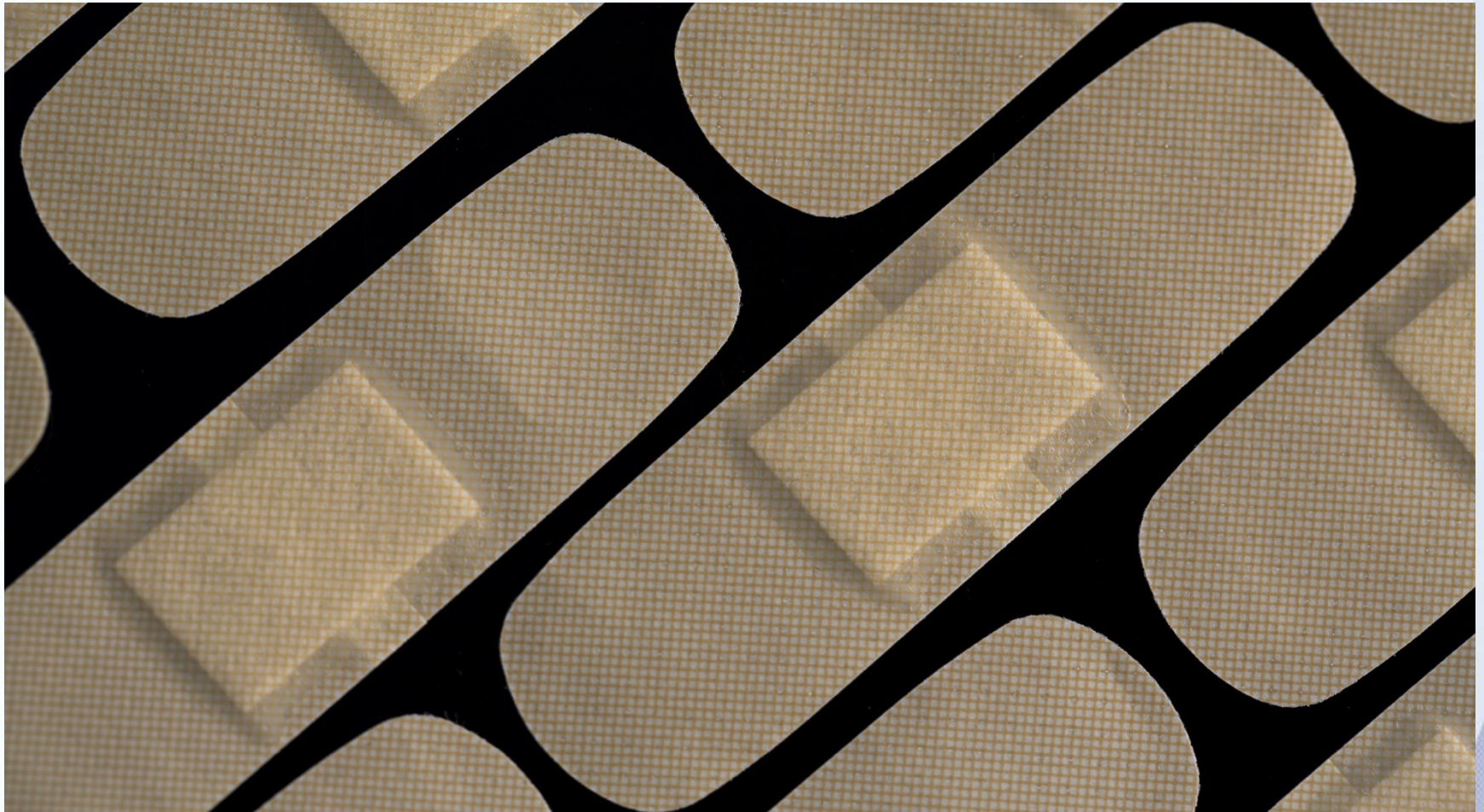
**Black infants are 3.2 times as likely to die from complications related to low birthweight as compared to white infants.**



**Black women are approximately 3 to 5 times more likely to die than white women.**



# Black pain is ignored



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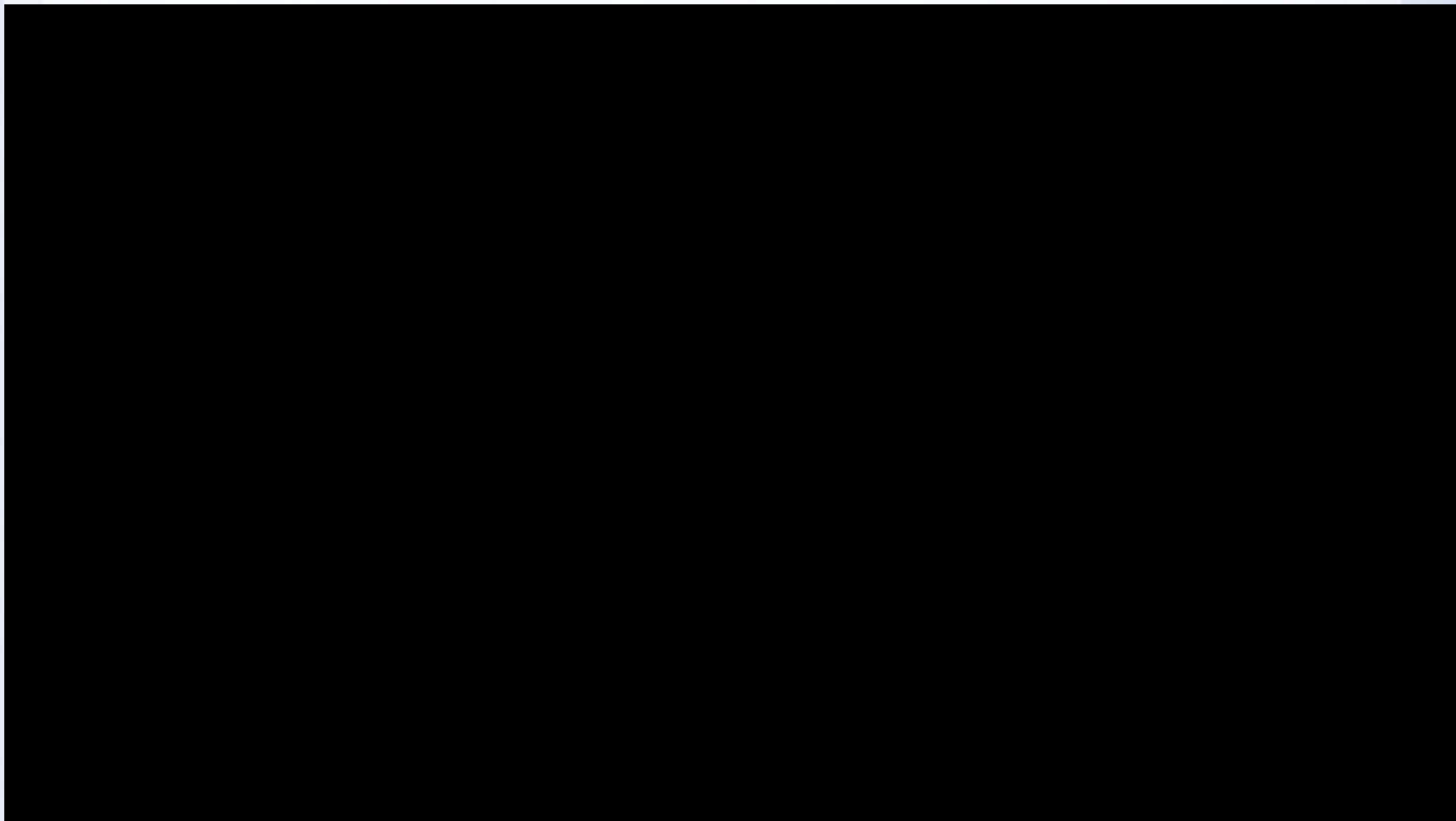
# What gets triggered?

Affectively

Behaviorally

Cognitively

Physically



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# What gets triggered?

Affectively

Behaviorally

Cognitively

Physically

# Psychological Impact

- Self-blame and decrease self-esteem
- Somatic symptoms
- Depression
- Anxiety
- Trauma
- Shame
- Fear
- Guilt

# And it's Uncomfortable & Scary

- Embarrassed
- Shamed
- Fired
- Sued
- Assaulted
- Killed

# We have become Fragile

- Belief that conversations about racism, should be comfortable
- Belief that discomfort should be avoided
- Belief that uncomfortable conversations about race are intolerable
- Belief that if the conversation is uncomfortable, it is the responsibility of racial minorities, to teach white folks how to tolerate race conversations

# Coping Strategies



## Moving Away

- Varies along a continuum from denial and minimization, through distortion and avoidance, to detachment and withdrawal



## Moving Toward

- Varies along a continuum from dependency and enmeshment, through overcommitment and overidealization, to overidentification and excessive preoccupation



## Moving Against

- Varies along a continuum from over-pathologizing and condescension/superiority to anger, hostility, and sarcasm



# The Avoider (moving away)

- Withdraw
- Refers patient elsewhere
- Silence others
- Humor



- Exaggerated sense of responsibility
- Excessive advocacy
- Over-sharing

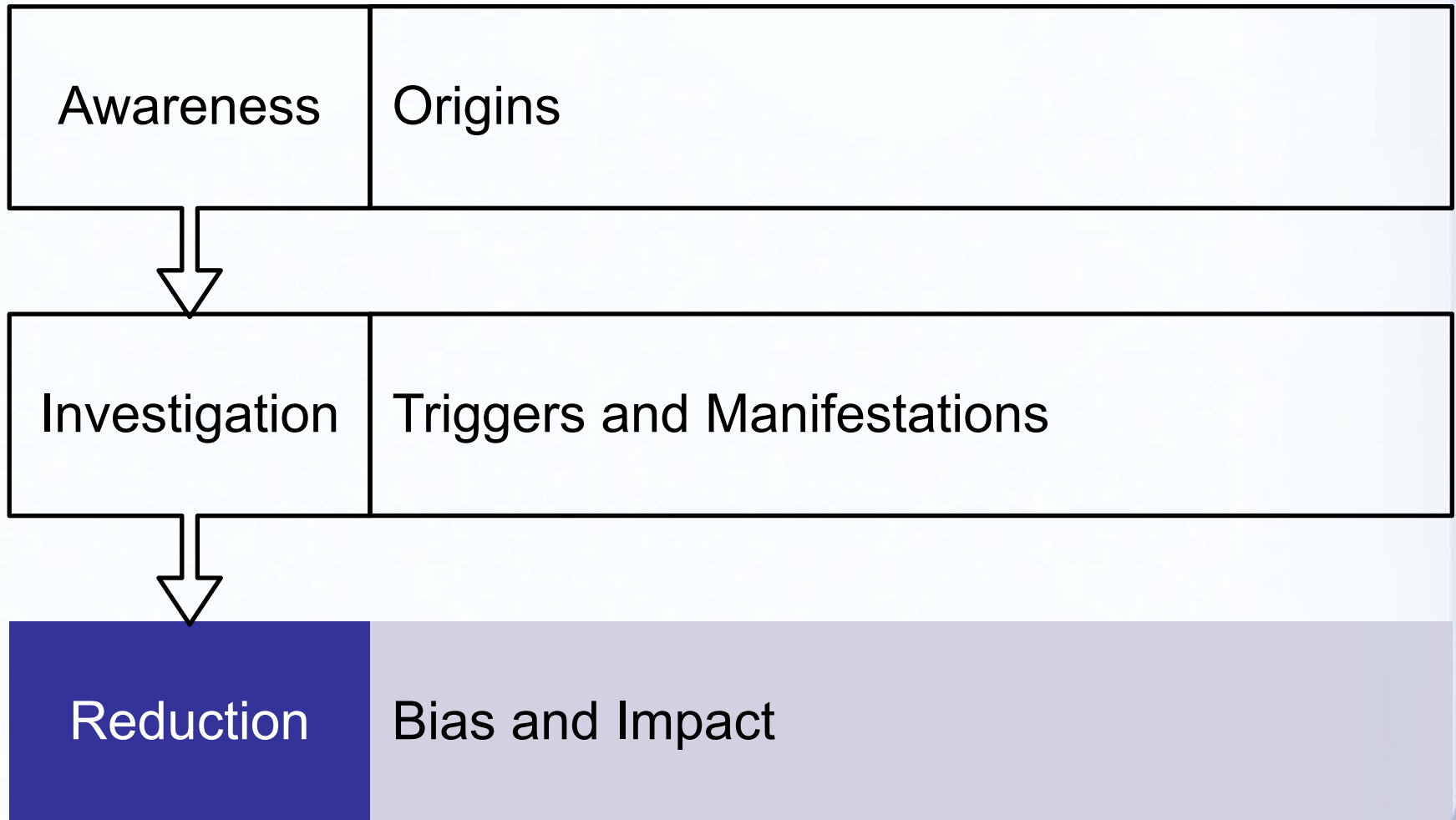
# The Superhero (moving toward)



## The Critic (moving against)

- Anger and irritability
- Heated arguments
- Sarcastic remarks
- Diagnosis

# Crawford Bias Reduction Theory & Training (CBRT)



# “LET UP” on bias, prejudice, and racism

<b><u>L</u>isten:</b>	What about this triggers you?	Make sure you are hearing the person, not your bias
<b><u>E</u>mpathize:</b>	Honor your own history and pain	Empathize with yourself, then others
<b><u>T</u>ell your story:</b>	Prepare for strategic self-disclosure	Use “I” statements
<b><u>U</u>nderstand:</b>	Reflect on your role in the larger system of bias, prejudice, and racism	Understand the impact, rather than focusing on your intention
<b><u>P</u>sycho educate:</b>	Use your expertise to correct unhelpful/unhealthy thinking patterns	Make it clear that you do not collude with bias, prejudice, and racism

# Patient calls me “This B\*Tch”

## Affectively

- Fear, anger, anxiety, sadness,

## Behaviorally

- Eye contact adjustment, less friendly

## Cognitively

- Flashbacks, diagnosing

## Physically

- Heart palpitations and tense muscles

# “LET UP” on bias, prejudice, and racism: Patient

<b>L</b> isten:	What about this triggers you?	Gender, Age, Status, and Self-concept
<b>E</b> mpathize:	Honor your own history and pain	Recognize my trauma and the pain associated
<b>T</b> ell your story:	Prepare for strategic self-disclosure	When I heard you say that, I was at first offended, but then I wondered... I'm worried that...
<b>U</b> nderstand:	Reflect on your role in the larger system of bias, prejudice, and racism	I'm worried that...
<b>P</b> sycho educate:	Use your expertise to correct unhelpful/unhealthy thinking patterns	I will not disrespect you in this space and I do not support hate language



But it's so Hard...

- Naming fatigue, discomfort, and safety as the reason not to persist is privilege
- The goal is to build stamina

# Action Work

- Discuss with a friend or trusted colleague, ways you have learned bias, racism, prejudice
- Practice a cultural “do over”

# Anchoring reflection questions

---

What are my values around this issue?

---

What am I defending?

---

Is this conversation anchored in humility, respect, and love?

---

How can I LET UP?

# Mind Full vs. Mindful



from

STORY  
CORPS

&

UP  
WORTHY

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# Contact information

Dr. Dana E. Crawford, PhD  
www.drnanacrawford.com  
drnanacrawford@gmail.com  
Twitter: danacrawfordphd  
Instagram: drnanacrawford



Thank you for the honor of  
your time and attention