

# The Upstate Bias Checklist

A Checklist for Assessing Bias in Health Professions Education Content

Please reference the Upstate Bias Checklist Manual (external link) for more information.

## Table of Contents

- Curriculum ..... 2
- Race and Ethnicity ..... 2
- Visual Images ..... 3
- Clinical Vignettes ..... 4
- Sex and Gender ..... 5
- Sexuality, Sexual Behavior, and Sexual Orientation ..... 6
- Disability ..... 7
- Mental Health and Substance Use ..... 8
- Weight ..... 9
- Immigration Status, Nationality, Language, and Culture ..... 10
- Poverty and Socioeconomic Status ..... 10
- Age ..... 11
- Religion and Faith Tradition ..... 12
- Prisoners ..... 12
- Rural Residence ..... 13
- Interprofessional Communication ..... 14
- Final Comments and Recommendations ..... 15

## CURRICULUM

1. Curricular Unit
2. Course
3. TLM Title
4. TLM Type

## RACE AND ETHNICITY

1. Does the content include any mention of race or ethnicity? If photos of humans or parts of humans are included, race is present in the content.  
Yes  
No
2. Should the content include any mention of race or ethnicity?  
Yes  
Unsure  
No
3. Are explicit biological differences between racial or ethnic groups stated?  
Yes  
No
4. Regarding content about EXPLICIT biological differences between racial or ethnic groups, check all that apply:  
This content is not essential to the lecture.  
This content is not scientifically accurate.  
The relationship of social or structural determinants of health to the racial or ethnic differences is not discussed.  
This content does not discuss the role of toxic stress (e.g., chronic exposure to racism) in contributing to biological differences between races.  
This content states that racial groups are biological constructs.  
Learners are told that this information is important for standardized examinations.  
None of the above applies to this content.
5. Are biological differences between racial or ethnic groups implied?  
Yes  
No

6. Regarding content about IMPLICIT biological differences between racial or ethnic groups, check all that apply:

This content is not essential to the lecture.

This content is not scientifically accurate.

The relationship of social or structural determinants of health to the racial or ethnic differences is not discussed.

This content does not discuss the role of toxic stress (e.g., chronic exposure to racism) in contributing to biological differences between races.

This content implies that racial groups are biological constructs.

Learners are told that this information is important for standardized examinations.

None of the above applies to this content.

7. Could this content be perceived as promoting stereotypes, bias, shame, or stigma?

Yes

Unsure

No

## Recommendations

### VISUAL IMAGES

1. Were visual images of human beings included?

Yes

No

2. Was consent obtained for use of these images?

Yes

No

3. Do the images add something important to the content?

Yes

No

4. Could the image(s) suggest stereotypes or promote bias?  
*Be particularly cautious with cartoons and other images that are meant to be comical, as well as with images that are de-identified in some way (headless, eyes covered with black bars-these may imply that the person photographed should be ashamed of being identified and the latter are ineffective).*
- Yes
  - Unsure
  - No
5. Are the people depicted in the images racially and ethnically diverse?
- Yes
  - No
6. Are the people depicted in the images diverse in terms of body habitus (e.g., shape, size, physical disability)?
- Yes
  - No
7. If using images of physical findings, do they represent the full spectrum of skin tones or other physical features?
- Yes
  - No
  - Not Applicable
8. If using image(s) to illustrate morphological features of disability, are the image(s) primarily tragic or negative (e.g., suggesting a poor quality of life)?
- Yes
  - Unsure
  - No

## Recommendations

### CLINICAL VIGNETTES

1. Does your content contain one or more clinical vignettes or references to specific patients (whether real or hypothetical)?
- Yes
  - No

2. Are patients' stories de-identified or was consent obtained for the use of their stories in teaching?

De-identified

Verbal or written consent obtained

Both de-identified and consent obtained

Neither de-identified nor consent obtained

Patient cases are all hypothetical

3. Does the vignette use language that indicates judgment of the patient or the patient's behavior?

*In addition to more obvious examples, subtle word choices (such as "alleged", "admitted" or "denied") may also indicate judgment and should be avoided in most cases.*

Yes

Unsure

No

4. Is any aspect of the (real or hypothetical) patient's experience mocked, shamed, or demeaned?

*Includes any comments meant to elicit laughter, sarcasm, etc.*

Yes

Unsure

No

## Recommendations

### SEX AND GENDER

1. Does the content include any mention of sex or gender?

*If photos of humans are included or if the content includes clinical vignettes/references to individual people (patients or health care professionals), gender is most likely present in the content.*

Yes

No

2. Should the content include any mention of sex or gender?

Yes

Unsure

No

3. Are all genders represented in the content?  
Yes  
Unsure  
No
4. Is gender presented as part of a spectrum (i.e., NOT represented as a binary concept)?  
Yes  
No
5. Does the content conflate gender identity with sexual orientation?  
Yes  
Unsure  
No
6. Does the content promote traditional gender roles?  
Yes  
Unsure  
No
7. Are symptoms, signs, other clinical findings and/or disease presentations (e.g., chest pain) referred to as "atypical" or "variant" when they occur in women?  
Yes  
No
8. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

### SEXUALITY, SEXUAL BEHAVIOR, AND SEXUAL ORIENTATION

1. Does the content include any mention of sexual behavior, sexuality, or sexual orientation?  
Yes  
No

2. Should the content include any mention of sexual behavior, sexuality, or sexual orientation?  
Yes  
Unsure  
No
3. Is the spectrum of sexual orientation represented in the content?  
Yes  
Unsure  
No
4. Does the content recognize the sexual health needs of patients with physical disabilities?  
Yes  
Unsure  
No
5. Does the content recognize the sexual health needs of patients with cognitive disabilities?  
Yes  
Unsure  
No
6. Does the content recognize the sexual health needs of older patients, including geriatric patients?  
Yes  
Unsure  
No
7. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

### DISABILITY

1. Does the content include any mention of disability, including physical or cognitive/intellectual disability? *Note that mental health, substance use, and aging are addressed in separate domains.*  
Yes  
No

2. Should the content include any mention of disability, including physical or cognitive/intellectual disability?  
Yes  
Unsure  
No
3. Does the content include positive representations of disability (e.g., as typical human variation or diversity)?  
Yes  
Unsure  
No
4. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

### MENTAL HEALTH AND SUBSTANCE USE

1. Does the content include any mention of mental health or substance use?  
Yes  
No
2. Should the content include any mention of mental health or substance use, or of the particular healthcare needs of patients with these concerns?  
Yes  
Unsure  
No
3. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No



## Recommendations

### WEIGHT

1. Does the content include any mention of weight or body mass index?  
Yes  
No
2. Does the content assume or imply a linear or straightforward relationship between weight (or body mass index) and health?  
Yes  
Unsure  
No
3. Does the content emphasize personal responsibility in discussions of obesity?  
Yes  
Unsure  
No
4. Does the content discuss genetic, epigenetic, social, and structural risk factors related to obesity?  
Yes  
Unsure  
No
5. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

## IMMIGRATION STATUS, NATIONALITY, LANGUAGE, AND CULTURE

1. Does the content include any mention of immigration status, nationality, language, or culture?  
Yes  
No
2. Should this content include any discussion of the healthcare needs of patients who are not citizens, were born in another country, or do not speak English fluently?  
Yes  
Unsure  
No
3. Does this content distinguish between different categories of immigration status, including refugees, asylum seekers, and undocumented immigrants, "green card holders", etc.?  
Yes  
No  
Not applicable
4. Could this content be understood as suggesting that patients who do not speak English are less capable of understanding healthcare information, making informed healthcare decisions or adhering to healthcare recommendations?  
Yes  
Unsure  
No
5. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

## POVERTY AND SOCIOECONOMIC STATUS

1. Does the content include any mention of poverty or socioeconomic status?  
Yes  
No

2. Should this content include a discussion of poverty or socioeconomic status?  
Yes  
Unsure  
No
3. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

## AGE

1. Does the content include any discussion of older adults or geriatric patients?  
Yes  
No
2. Should this content include a discussion of the distinctive needs of older adults or geriatric patients?  
*Considerations include whether the issue being taught often affects older people or manifests differently in older people. Pay special attention to discussions of sexuality.*  
Yes  
Unsure  
No
3. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

## RELIGION AND FAITH TRADITION

1. Does the content include any discussion of religion or faith tradition?  
Yes  
No
2. Should this content include any discussion of religion or of the special needs of patients belonging to certain religious groups or faith traditions?  
*Please use caution in this area and avoid treating religious groups as monolithic; most patients interpret their religious faith or lack thereof in ways unique to them and their families.*  
Yes  
Unsure  
No
3. Does that content assume that religious or faith-based groups are monolithic and present their beliefs as such?  
*Examples include suggesting that all Muslim women refuse to see male providers; that all Amish families want to consult their community elders prior to making a major medical decision; or that Catholic patients never use contraception.*  
Yes  
Unsure  
No
4. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

## PRISONERS

1. Does the content include any discussion of incarceration or of the special healthcare needs of prisoners?  
Yes  
No

2. Should this content include any discussion of incarceration or of the special healthcare needs of prisoners?  
Yes  
Unsure  
No
3. Does the content discuss mass incarceration as a public health problem (e.g., the school-to-prison pipeline)?  
Yes  
No
4. Does the content discuss the relationship between systemic, institutional, or structural racism and mass incarceration?  
Yes  
No
5. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

### RURAL RESIDENCE

1. Does this content include any discussion of patients from or of healthcare provision in rural areas?  
Yes  
No
2. Should this content include any discussion of the particular healthcare needs of rural patients and populations?  
Yes  
Unsure  
No
3. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

### INTERPROFESSIONAL COMMUNICATION

1. Does this content discuss healthcare practitioners from more than one profession (e.g., medicine, nursing, physical therapy) or specialty (e.g., pediatrics, emergency medicine)?  
Yes  
No
2. Should this content discuss healthcare practitioners from more than one profession (e.g., medicine, nursing, physical therapy) or specialty (e.g., pediatrics, emergency medicine)?  
Yes  
Unsure  
No
3. Does this content address each profession and/or specialty respectfully?  
Yes  
Unsure  
No
4. Does this content use gender-neutral pronouns when referring to members of each profession or specialty?  
Yes  
Unsure  
No
5. Could the content be perceived as promoting stereotypes, bias, shame, or stigma?  
Yes  
Unsure  
No

## Recommendations

## FINAL COMMENTS AND RECOMMENDATIONS