Institutional Bias in Public and Private Entities

Implicit or unconscious bias means having a preference to a person or group of people – often without knowing it. The development of bias is an unavoidable product of our environment, created by exposure to media, conversations, education and stereotypes. A person usually develops a preference for people who are similar in race, gender, sexual orientation, language, ability, or geographic location to him or herself. Watch this short video to learn more about implicit bias.

Institutional bias is the product of bias in individuals, as well as years of historical oppression of specific groups of people. The product of this institutional bias is that private and public entities, discriminate against specific people or communities (such as people of color, people with disabilities, people with low income, people who identify as LGBTQ+, etc.) in systems, policies, practices and services. In turn, this discrimination is witnessed in inequities within communities, and as disparities in health outcomes. Watch this short video for an illustration of the multiplied impact of bias within the education and criminal justice systems on people of color. The impact of institutional bias is found in many private and public sectors, from health care and research to the entertainment industry.

While it is difficult to identify a measure of institutional bias, society does have reliable health, education and other social indicators that repeatedly and predictably identify race and other identity-based disparities that are the outcomes of this institutional bias. There are also data from the 2014 Oregon Medicaid BRFSS survey1 which asked Medicaid members about their experiences with race.

In 2014, 15.9% of adult Medicaid members reported thinking about race at least once per day. White members were least likely (7.4%) to report thinking about race compared to other races (15.9%). Nearly 50% of American Indian/Alaska Natives reported thinking about race once per day (Figure 1)

More African American adult Medicaid members (16%) reported worse treatment than people of other races (6.4%) when seeking health care.

Figure 2. Adult Medicaid members who felt their experiences with health care were worse than other races/ethnicities, Oregon, 2014
African American members were also more likely to report physical and emotional symptoms due to treatment based on their race (Figure 3)

Figure 3. Adult Medicaid members reporting physical and emotional systems due to treatment based on race, Oregon, 2014

**Additional Resources:** [2014 Medicaid Behavioral Risk Factor Surveillance System (MBRFSS) Survey](#)

**About the Data:** The 2014 MBRFSS survey questionnaire was modeled on the general population BRFSS survey questionnaire and included topics such as; chronic health conditions, health care access, physical activity and nutrition, preventive health screening, substance use, neighborhood safety and housing stability, hunger, family planning, intimate partner violence, and adverse childhood experiences. All survey questions were chosen from standard BRFSS items or other validated questionnaires.

**For More Information Contact:** Health Policy and Analytics

**Date Updated:** 2014