

Addressing Equity and Inclusion

Activity #3: Diversity Study Results for Discussion

Read the description of the study results and discuss your reaction and the implications for your mentoring practice. See the “Benefits and Challenges of Diversity” article in the guidebook for more details about these and other studies.

Study 1: Studies of hiring involve assigning a man’s name or woman’s name to the same application and randomly distributing the applications to a group of reviewers. The reviewers are more likely to hire the person if there is a man’s name on the application. The sex of the reviewer has no effect on the outcome. The result has not changed much over 40 years of doing the study (Steinpreis, Anders et al. 1999; Dovidio and Gaertner 2000; Moss-Racusin, Dovidio, et al. 2013).

Study 2: Many studies show that when reviewers are asked to review job performance based on a written description of the person’s accomplishments, they rate the performance higher if they told that they are reviewing a man. In one study the difference between ratings for men and women candidates was greater when the evaluator was busy or distracted. The sex of the reviewer was not significant (Martell and Leavitt 2002).

Study 3: A linguistic analysis of 300 letters of recommendation for successful candidates applying for (and ultimately being offered) faculty positions at a major medical school showed differences in language and content. Male candidates were referred to more often as “researchers” and “colleagues,” whereas women were referred to as “teachers” and “students.” There were 4X more references to women’s personal lives than to men’s and there were more “doubt raisers” in letters about women (Trix and Psenka 2003).

Study 4: An ecology journal initiated double blind review (authors’ names not revealed to reviewers, reviewers’ names not revealed to authors). During the 6-month period of the trial, the acceptance rate for papers first-authored by women increased significantly. There was no change in the frequency of acceptance of papers first-authored by women in a similar ecology journal during same period (Budden, Tregenza et al. 2008).

Study 5: Evaluators expressed less prejudice against African American candidates if they were instructed to avoid prejudice (Lowery, Hardin et al. 2001).

Study 6: When participants were shown images of admired black figures they associated negative words with black people less than those who were shown pictures of disliked black figures or not shown pictures at all (Blair, Ma et al. 2001; Dasgupta and Greenwald 2001).

Study 7: Subjects were told to select one of two rooms in which to watch a movie. In each situation there is a handicapped person sitting in one of the rooms. If both rooms are showing the same movie, the subjects were more likely to choose the room where the handicapped person is sitting. If the rooms are showing different movies, the subjects are more likely to choose the room where the handicapped person is not sitting. The result is the same independent of which movie is showing in the room with the handicapped person (Snyder 1979).

Study 8: One study examined differences over a ten-year period of whites' self-reported racial prejudice and their bias in selection decisions involving black and white candidates for employment. They report that self-reported prejudice was lower in 1998-9 than it was in 1988-9. At both time points, white participants did not discriminate against black candidates when their qualifications were clearly strong or weak, but they did discriminate when the qualifications were mixed or the decision ambiguous (Dovidio and Gaertner 2000).

Study 9: Stereotype threat is the anxiety people feel about confirming stereotypes of a group to which they belong. When stereotype threat is activated, usually by reminding a person of their race or sex, a person may identify with a negative stereotype and perform less well than without activation. MRI examination of the human brain shows that activating stereotype threat makes blood move from the cognitive centers to the affective centers of the brain (Krendl, Richeson et al. 2008).

Study 10: A wide range of studies show that racial and ethnic minorities tend to receive lower quality healthcare and are less likely to receive routine medical procedures than non-minorities patients, even when the issue of access to health-care is controlled (Smedley, Stith and Nelson, 2003).

Study References:

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- Dovidio, J. F. and S. L. Gaertner (2000). "Aversive racism and selection decisions: 1989 and 1999." 319.
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- Smedley, B.D., Stith, A.Y. and Nelson, A.R. (2003). *Unequal Treatment: Confronting Racial and Ethnic Disparities* Washington D.C. National Academies Press.
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- Trix, F. and C. Psenka (2003). "Exploring the Color of Glass: Letters of recommendation for female and male medical faculty." *Discourse & Society* **14**(2): 191-220.

Many of these studies and others are summarized in: Fine and Handelsman (2005). "The Benefits and Challenges of Diversity" in *Entering Mentoring: A Seminar to Train a New Generation of Scientists*. Madison, WI: University of Wisconsin Press and Handelsman, Miller and Pfund (2005). "Diversity" in *Scientific Teaching*. New York: W.H. Freeman and Co. This activity was taken from the National Academies Summer Institute on Undergraduate Education in Biology (<http://www.academiessummerinstitute.org>, access June 2010)