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HEALTHCARE PROFESSIONAL'S PERCEPTIONS ON UNCONSCIOUS BIAS IN HIRING AND PROMOTIONAL PRACTICES IN POLLACHI

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ABSTRACT

Unconscious bias in hiring and promotional practices can have significant implications for fairness, equity, and diversity within healthcare organizations. This study aims to explore healthcare professionals' perceptions of unconscious bias in these practices within the Pollachi region. Through qualitative and quantitative data collection methods, including surveys and interviews, the research seeks to identify the prevalence of unconscious bias in recruitment and promotion processes, as well as the impact on workforce diversity. The study also examines how healthcare professionals recognize and address unconscious biases and explores the role of organizational policies in mitigating these biases. Findings are expected to contribute to a deeper understanding of the challenges faced in achieving equitable healthcare workplaces and provide recommendations for improving hiring and promotional practices in the healthcare sector.

KEY WORDS: *Unconscious bias, Recruitment, Professionals*

INTRODUCTION

In the healthcare sector, hiring and promotional practices play a crucial role in shaping the workforce. However, these processes may be influenced by unconscious biases, leading to inequalities in the representation of various groups, especially in leadership and specialized positions. Unconscious bias refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner, often without the individual being aware of it. In healthcare, these biases can contribute to disparities in employment opportunities, which may, in turn, impact the quality of care provided to patients.

Despite growing awareness of diversity and inclusion initiatives, unconscious bias continues to be a significant challenge in many industries, including healthcare. While much research has been conducted in larger urban settings, limited studies have focused on rural or semi-urban regions like Pollachi, Tamil Nadu. This region presents a unique context for investigating how unconscious bias influences hiring and promotion practices in healthcare institutions, given its demographic composition and socio-cultural factors.

This study aims to examine the perceptions of healthcare professionals in Pollachi regarding unconscious bias and its impact on recruitment and promotional decisions. By exploring these perceptions, the research seeks to identify potential barriers to diversity, understand the measures taken by organizations to combat unconscious bias, and offer recommendations for more equitable hiring and promotional practices. Addressing unconscious bias is vital for ensuring that healthcare organizations attract and retain a diverse, skilled workforce that reflects the communities they serve, ultimately contributing to the improvement of healthcare delivery.

It provides a structured framework for conducting research in a replicable and organized manner. This chapter outlines the methods adopted in this study to achieve the research objectives and analyze healthcare professionals' perceptions regarding unconscious bias in hiring and promotional practices within the Pollachi region. It includes the research

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design, sampling method, data sources, statistical tools used, and the rationale behind each component of the methodology

RESEARCH OBJECTIVES

- To understand about the democratic characterizes of the respondence.
- To understand the awareness among healthcare professionals regarding unconscious bias and its potential impact on hiring and promotion processes in the medical field.

RESEARCH METHODOLOGY

A research design acts as a blueprint for the collection, measurement, and analysis of data. It guides the researcher throughout the study. For this research, a descriptive research design has been adopted. Descriptive research helps outline the characteristics of a specific population or phenomenon. Here, the study aims to describe and evaluate the extent to which unconscious bias may be perceived in the hiring and promotion processes in healthcare institutions in Pollachi. The survey method, involving structured questionnaires, was used to collect primary data from doctors, nurses, administrative staff, and human resource personnel.

Table 1: Demographic Profile of the Respondents

Particulars		Frequency	Percent
Age	Below 25	85	20.6
	25-30	186	45.1
	31-40	106	25.7
	41-50	24	5.8
	Above 50	11	2.7
Gender	Female	197	47.5
	Male	203	48.9
	Other	15	3.6
Qualification	Diploma	83	20.0
	Doctorate	37	8.9
	Postgraduate	160	38.6
	Undergraduate	135	32.5
Current Role	Administrative staff	90	21.7
	Doctor	58	14.0
	Nurse	107	25.8
	Others	40	9.6
	Support staff	43	10.4
	Technician	77	18.6
Experience	0-5	118	28.4
	11-20	104	25.1
	6-10	133	32.0
	Above 20	60	14.5
	Total	412	100.0%

The data provided captures the demographic and professional profile of 412 respondents. The majority of participants (45.1%) are aged 25-30, followed by those aged 31-40 (25.7%), with a smaller share above 50 (2.7%). In terms of gender, the group is nearly balanced, with 47.5% identifying as female, 48.9% as male, and 3.6% as other. Regarding qualifications, the largest segment holds postgraduate degrees (38.6%), while smaller portions have diplomas (20.0%) or doctorates (8.9%). In terms of roles, nurses (25.8%) form the largest group, followed by administrative staff (21.7%) and technicians (18.6%). Finally, work experience is varied, with the highest concentration having 6-10 years (32.0%), while a smaller segment has over 20 years of experience (14.5%).

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Table 2: Experience in healthcare and their belief in the existence of unconscious bias

Experience in healthcare and their belief in the existence of unconscious bias	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	50.412	12	.000
Likelihood Ratio	48.896	12	.000
N of Valid Cases	415		

The chi-square test results show a significant relationship between the variables being tested. The Pearson Chi-Square value is 50.412 with 12 degrees of freedom (df) and a p-value of .000, which is much smaller than the usual cutoff of 0.05. This means the observed relationship is unlikely to be due to random chance, suggesting a strong connection between the variables.

The Likelihood Ratio test, which is another way to measure the association, also shows a significant result with a value of 48.896, the same 12 degrees of freedom, and a p-value of .000, confirming this finding.

However, the footnote mentions that 1 cell (5.0%) has an expected count of less than 5, with a minimum expected count of 3.18. This is generally acceptable in chi-square tests, as long as the percentage is below 20%, so the results can still be considered reliable.

CONCLUSION

Unconscious bias in hiring and promotional practices remains a critical challenge in achieving diversity, equity, and inclusion within healthcare organizations. This study, focused on healthcare professionals in the Pollachi region, has shed light on the prevalence and impact of such biases in recruitment and promotion processes. The findings reveal that despite awareness of diversity and inclusion efforts, unconscious biases continue to influence decision-making, potentially limiting opportunities for underrepresented groups and affecting overall workforce diversity.

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