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Unconscious Bias: How Might It Affect Social Work

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In recent months, the Black Lives Matter protests have cast a spotlight on implicit or unconscious bias. While these protests raised awareness of the inequitable treatment of Black people by police officers – and hence the issue of racism – unconscious bias is an inescapable fact of life for us all, permeating all areas of our work and social lives.

Although health and social workers are taught to respect and accept cultural diversity, our inherent unconscious bias unfortunately often seeps out, clouding judgements and affecting decision-making. In other words, unconscious bias impacts upon our objectivity and can create barriers to the effective engagement of certain groups of people accessing social services. So, what exactly is unconscious bias, how might it affect our decision-making, and, more importantly, what can be done about it? This article provides an overview of the topic and how it can impact on social work practice.

Understanding unconscious bias

Our brains have the capacity to handle a huge amount of data, with one estimate suggesting that up to 11 million pieces of information are unconsciously processed every second. In contrast, it seems that our brains can only consciously process a measly 40 pieces of information per second.¹ The implication of this discrepancy is clear, indicating that a huge amount of data processing in our mind is essentially automatic and without conscious intervention. The idea that most of our brain's processing of information is unconscious was a central construct of Sigmund Freud's psychoanalytical theory of personality in the 1880s. Freud advanced the notion that the unconscious mind served as a reservoir of feelings, thoughts and urges that were outside the realms of conscious awareness. This was further highlighted by psychologist Daniel Kahneman in his book, *Thinking Fast and Slow*² in which he conceptualised that the thinking processes within our brains was compartmentalised into two distinct systems, which he termed system 1 and 2.

An activity such as walking or speaking are, to all intents and purposes, automatic and require little conscious input and were expedited via system 1. In contrast, the activities governed by system 2 evolved more slowly and required some degree of conscious input e.g., problem solving, reasoning etc. Freud believed that many of our beliefs, feelings and desires are repressed, but on occasions can accidentally become expressed, hence the idea of a Freudian slip.

System 1 thinking continually guides our thought processes, attitudes, and beliefs but without our realising, and arises from the experiences of various cues gained from family, school, work cultures etc. The exposure to these different signals strongly influence our view of the world and lead to the formation of unconscious associations. Indeed, part of the brain's learning process involves the connection of items together (based on our experiences), leading to the creation of neural pathways that are laid down and ultimately strengthened, each time that same connection is made. These pathways are largely reliant upon stereotyping and operate independent of someone's intent.

According to Martin et al,³ a stereotype can be perceived as a template-like cognitive representation, in which the membership of certain groups are associated with specific attributes. The stereotype provides the brain with an easily recognisable relationship, thus easing the cognitive burden. For instance, the repeated observation of white swans, serves to strengthen the existing neural pathways and creates the stereotype of a swan, which is a white coloured bird. The appearance of a black swan however, provides ambiguous evidence which immediately challenges our pre-existing stereotype.

In practice, a consequence of this over-reliance on the unconscious amalgamation of various cues is that since a stereotype is created at a cost to accuracy, deviations from the imagery laid down in the neural circuitry can influence our response to these anomalies and precipitate unintended and discriminatory behaviour. This is termed implicit or unconscious bias and has been described by Narayan⁴ as “the tendency for people to harbour negative stereotypes or make judgements about another group”. In fact unconscious bias is often triggered automatically when encountering different situations or people, without an individual’s full awareness and control. According to Kahneman,² unconscious bias is rooted in availability heuristics, which represents the mental shortcuts used to create a stereotype. It is a form of cognitive bias or systematic error, which occurs when individuals attempt to process and interpret the information they receive.

The pervasiveness of unconscious bias

As an effective blind spot, it can be difficult for an individual to see past their unconscious bias, though it will continually influence their actions. Unconscious bias has been extensively studied in an attempt to understand the origins of racial prejudice and implicit attitudes (i.e., those which arise from unconscious bias). In an attitudinal study, Dovidio⁵ showed that White individuals self-reported racial attitudes significantly predicted bias in the verbal behaviour to Black versus other White individuals. Although today most individuals would condemn overt bigotry, this does not mean that it has been eliminated, but that it has become more nuanced. In a disturbing recent study, Okonofua⁶ examined unconscious bias in school discipline in the US, in particular in relation to punishment of Black versus White students. The study revealed how teachers’ unconscious bias associated with race lead to them being more likely to assign a harsh punishment for repeated misbehaviour to a student they thought was Black rather than White.

Moreover, unconscious bias rears its head in the criminal justice system. According to a recent report, people from a BAME background are almost three times more likely than White people to be stopped and searched, and that for every 100 White women given a custodial sentence for drug offences, 227 Black women are incarcerated for the same offence.⁷

Nevertheless, unconscious bias is pervasive in society and not restricted to racial prejudice, extending to gender, sexual orientation, disability and any other number of aspects of identity. For example, in the context of employment, Fiske⁸ notes how reliance upon stereotyping is more probable when the evaluative criteria are ambiguous and thus more open to interpretation. Stereotyping provides the necessary structure and order, shaping the information, especially if there are potential multiple interpretations. In such instances, the antecedents of stereotyping are a perceived lack of fit between the individual’s category and the occupation. Hence, a woman applying for a position in a male dominated role for which the desirable attributes include the need to be aggressive, competitive, and highly driven, may not be compatible with an employer’s stereotype of a woman.

Possible examples of unconscious bias in social work

Although it is a given that everyone has some degree of unconscious bias, healthcare and social workers are trained to respect cultural diversity and to set aside their own biases, since harbouring unconscious biases can affect an individual’s decision-making process and ultimately their judgements. One obvious possible area of unconscious bias, especially among heterosexuals, is homophobia. Fortunately, in a study of social workers attitudes, less than 10% were homophobic, although where present, it was significantly greater in relation to homosexual males than females.⁹

While the lack of such overt bias might be expected, in practice, the effects of unconscious bias are more likely to be discernible through an examination of a social worker's management of cases. In a study examining social workers' decision-making in children's social care in three local authorities, it was found that children from a non-white ethnic group were more liable to be both referred for further action and to become a serious case review. While the authors could not offer any concrete explanations to account for this, one hypothesis advanced was that it was due to social workers being influenced by unconscious bias.¹⁰

Another area in which unconscious bias has an impact is in child sexual abuse and exploitation, and there is some evidence to suggest that this is especially true among black and ethnic minorities (BAME) groups in cases of sexual abuse within families.

The use of stereotyping due to a lack of cultural competency is liable to influence social workers' decision-making and create a barrier to effective support. According to a report from the Children's Commissioner,¹¹ children from some BAME communities and children with physical or learning difficulties are less likely to come to the attention of authorities as a victim of sexual abuse in the family. In an examination of the reasons why child sexual abuse among BAME children often goes unreported, Davies¹² describes how discussions addressing racism and the stereotype of an "angry Black woman", "aggressive and confrontational" were seen as examples of the barriers to building relationships and accessing genuine support.

Equally of concern is the area of child sexual exploitation (CSE) in the BAME communities. In a recent and collaborative report from The Children's Society, Victim Support and the National Police Chiefs' Council,¹³ it was recognised that a lack of understanding and knowledge amongst professionals can lead to a disparity in recognition and response. The report noted how part of the problem lies in stereotypes, and in particular the media perception of an Asian perpetrator/White victim offending model, with the result that BAME victims are not being identified by frontline services. However, a further – and more worrying – issue raised in the report was the "unconscious bias and racist attitudes of practitioners as well as structural inequalities that caused racially motivated responses" which prevented children and young people from receiving equal and effective safeguarding from services.

Finally, according to Marsh,¹⁴ sexual abuse of boys continues to be missed. In part, this arises from an unconscious bias among professionals because of a narrow consideration of the victim's characteristics, such as gender, age, ethnicity and disability, all of which influence a social worker's judgement and decision-making. This problem is compounded by some of the current risk assessment tools being used, which almost serve to reinforce a stereotypical case by limiting the focus for a social worker. In fact, it has been suggested that many risk assessment tools are "generally less appropriate for boys, younger children and disabled children".¹⁵

What can be done about unconscious bias?

Given that unconscious biases seem to operate just below the level of awareness, it can be difficult to understand them, but this is the most important first step in managing biases. It is also vital to eliminate the stigma surrounding unconscious bias in that it is not deliberate. As with most problem-solving, there is not a "one-size fits all" solution, but there are several aspects that should be focused upon.

Firstly, it is necessary for individuals to recognise that they possess an unconscious bias and acknowledgement enables acceptance of some level of accountability and responsibility to allow a difference to be made. Moreover, through self-reflection, it is possible to recognise inherent beliefs and values and consider how these might lead to unconscious bias. Gaining personal awareness allows a worker to accept their unsuitable attitudes and behaviours and to stay on the right path when faced with the threat of unconscious bias.

A further and valuable exercise to help overcome unconscious bias is to achieve a grounding in cultural competency, especially if a large proportion of potential clients originate from a particular ethnic background. A greater understanding of the cultural norms and values can help to remove a worker's existing stereotypes related to the culture. It can also nurture greater confidence in dealing with members of the culture, especially if a worker is concerned about causing offence by

using the incorrect terminology. Lastly, cultural competency allows a worker to develop a sense of empathy with the vulnerabilities of minority groups, help identify and remove any barriers to communication and engagement, and finally offer a better insight of the cultural constructs of fear, shame or blame.

There are several training courses on unconscious bias available online and it is also possible to use the Project Implicit bias test (see resources).

It is also worth emphasising that unconscious bias does not simply operate on a personal level, but can become entrenched within organisations. As a member of the BAME community myself, I feel that organisations are not doing enough to promote and embed racial equality in the workplace and it is important that social care leaders develop a truly equitable workplace environment. Tokenism is not enough, but sadly within many organisations, it seems to have become nothing more than a tick box exercise. Entering a room as the only person from a BAME background, I often feel isolated as there is unlikely to be anyone who can relate to my experiences.

Most recently, and in light of the murder of George Floyd, the British Association of Social workers (BASW) has created a position statement on equality, diversity and inclusion in which they address institutional racism.

“We recognise that racism and social injustice are institutionally, structurally, and systemically deep-rooted in all public and private institutions to varying degrees. We call for organisations to properly acknowledge this as the first step in addressing this scourge on society”.¹⁶

In fact, as discussed by Samuel,¹⁷ BAME social workers have been inexplicably over-represented in fitness to practice cases, and there is a distinct lack of panel members from BAME communities.

Organisations need to develop a long term strategy that embraces inclusivity because this will ultimately add value to the services it provides, particularly where there is a multicultural community. Leaders of organisations should consider positive discrimination at every level, to allow for a diverse mix of staff that can best serve the needs of the community. In trying to embrace change, it would help to seek the advice of experts on equality to support the implementation of diversity policies within organisations.

In summary, an unconscious bias represents the ill-informed stereotype that each of us hold within our subconscious mind, but which lurks just beneath the surface of our awareness and serves only to distort our objectivity and capacity for independent assessment.

As social workers, one of our central values is the need to operate within an anti-discriminatory environment. Tackling unconscious bias is a struggle that requires an acknowledgement of its existence. Nevertheless, this is the first, crucial step necessary to overcome the problem and help remove the barriers that prevent effective engagement with everyone who needs to access our services.

About the author

Evelyn is a Social Work Team Manager specialising in Child Protection at Hull City Council. Evelyn also held a similar post at Bradford Metropolitan District Council for five years. Evelyn has considerable leadership experience, having previously worked as an Educational Leader in Zimbabwe. Whilst working in Bradford, Evelyn completed the Firstline Leadership Programme, further enhancing her leadership skills. She is highly passionate about ensuring positive outcomes for children, and understanding how this can be achieved through effective leadership.

Resources

[Re: Work Unbiasing](#)

[Project Implicit](#)

[Cylix Challenging Unconscious Bias](#)

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