

PRACTICE GUIDE

Bias in child protection decision making

Introduction

This practice guide will assist practitioners to develop an understanding of how bias influences decision making in child protection and details strategies for practitioners in recognising and mitigating their effects.

This practice guide should be read in conjunction with the practice guides [Assess harm and risk of harm](#) and [Decision making at intake](#) and procedural guidance provided in the Child Safety Practice Manual relevant to decision making and risk assessment.

The *Child Protection Act 1999* requires the safety, wellbeing and best interests of a child or young person to be the paramount consideration when making a decision about their care and protection needs. Decision making in child protection is a complex process. It requires purposeful gathering of information and analysis of the information, to form a professional judgement about a course of action which best meets a child's care and protection needs.

Errors in professional reasoning that influences decision making in child protection are rarely random. Research suggests errors in reasoning are largely based on practitioners intuitively oversimplifying reasoning processes in making complex judgements (Munro, 1999). These errors can be reduced if practitioners are aware of them and continuously work to avoid them.

Types of reasoning

Assessing risk and identifying child abuse and neglect are difficult tasks. Errors of any kind can have consequences for children and their families. Some mistakes are inevitable because they are due to limited knowledge of the family or circumstances. Others, arising from errors in human reasoning, are avoidable by adopting a conscious, logical and intentional process of reasoning.

Decisions made using intuitive reasoning need to be corroborated by using logic to reach a conclusion (Munro, 1999). In the absence of such a process, practitioners are prone to taking mental shortcuts which can lead to decision making flawed by persistent bias.

In the psychological study of reasoning, two forms are commonly identified (Munro, 1999).

Intuitive reasoning is a "cognitive process that produces an answer, solution or idea without the use of conscious, logically defensible, step by step process" (Hammond, 1996, p. 60). This type of reasoning relies on instinct and feeling and is used to make quick decisions or solve problems. Intuitive reasoning involves an emotional element and is considered typically the opposite of analytical reasoning. The use of intuitive thinking allows practitioners to draw on their practice experience and show empathy and understanding toward individual difference.

Analytic reasoning is characterised as a "step by step, conscious, logically defensible process" (Hammond, 1996, p. 60). This type of reasoning is seen as clear, evidence based and makes the manner in which conclusions are reached clear. Analytical reasoning involves the thorough consideration of all available information and evidence before making decisions.



Daniel Kahneman refers to these two types of reasoning as fast and slow thinking or, system 1 and system 2. He explains system 1, fast thinking, as automatically generating suggestions, feelings and intuitions. He defines system 2 as the slow thinking system. Kahneman suggests system 2 is too slow to substitute routine decision making (system 1 decisions) so we should aim to recognise situations where we are vulnerable to mistakes and actively and intentionally switch to system 2 thinking in those circumstances.

System 1:

Characteristics of system 1 thinking:

- Fast
- Unconscious reasoning
- Judgements based on intuition
- Processes information quickly
- Hypothetical reasoning
- Large capacity
- Unrelated to working memory
- Effortlessly and automatically
- Unintentional thinking
- Influenced by experience, emotion and memories
- Can be overridden by system 2

System 2:

Characteristics of system 2 thinking:

- Slow
- Conscious reasoning
- Judgements based on examination
- Processes information slowly
- Logical reasoning
- Small capacity
- Related to working memory
- With effort and control
- Intentional thinking
- Influenced by fact, logic and evidence,
- Used when system 1 fails to form a logical, acceptable conclusion

Cognitive bias

Cognitive biases are automatic processes that make decision making quicker and more efficient. Some biases are conscious and others are unconscious or implicit. Cognitive biases can be beneficial because they allow for you to make decisions quickly, however, can also result in prejudice toward information, ideas, people, or perspectives.


Child protection practitioners are often required to manage competing demands in short timeframes and may feel overwhelmed by the range of potentially important details to consider when assessing a family. In child protection, a reactive culture often exists where practitioners rely heavily on fast, intuitive ways of thinking without allowing sufficient time for reflection. This pattern of working exists as a means of getting through large volumes of work in short timeframes. When practitioners make decisions that are not underpinned by robust assessment, the result is non defensible decisions that are not child-centred. Therefore, when making assessments and decisions practitioners must consider and reflect on whether bias is at play and actively switch to system 2 thinking.

Different types of cognitive bias in child protection practice

The biases outlined below are some of the most relevant to child protection assessment and decision making. It is important to note that a decision or assessment may be influenced by just one bias, or by several biases concurrently.

Credibility bias

This bias refers to the tendency to believe information to be true or more credible if it comes from a source perceived as trustworthy. For example, a practitioner who perceives a parent to be



indictive is less likely to view information provided by them as credible in comparison to information provided by a professional.

Confirmation bias

This type of bias refers to the tendency to seek out information that supports something you already believe. This bias sees people take notice of things that matter to them and dismiss the things that do not support their hypothesis. This type of bias can lead to the 'ostrich effect' where someone 'buries their head in the sand' to avoid information that may disprove their assessment or conclusions.

The Dunning Kruger effect

This bias refers to situations in which people or practitioners perceive a concept or event to be simplistic, because their knowledge about the topic is limited or lacking. For the most part, the less you know about something, the less complicated it will appear. This form of bias limits curiosity as people do not feel the need to further explore the information and is predominantly evident when someone has reduced a complex idea to a very simple one.

Ingroup bias

This bias refers to how people are more likely to support or validate someone within their own social or work group than an outsider. This bias causes people to preference the views of members of their group and discredit those from outside of their group, even when they know nothing about them.

Availability bias

This bias refers to the tendency to rely on information we can quickly recall when making an assessment or evaluating a situation. Using this mental shortcut, people make decisions based on information or experience that is readily available and easily recalled, even though there may be more credible or reliable information that is not as easily recalled because it is not the most recent. "Facts are memorable if they are vivid, concrete, arouse emotion and are either the first or most recent" (Munro, 1999).

Recent events come to mind more readily than past ones and this is illustrated in the way professionals become absorbed in present day issues and fail to stand back and place current events into a longer term assessment of the family. This bias can be very powerful in preserving the current risk assessment by obscuring the pattern of behaviour or the frequency with which small worrying incidents are happening.


Anchoring bias

This bias refers to people's tendency to rely too heavily on the first piece of information they receive regardless of the accuracy of that information. This information acts as an anchor for all other judgements, assessments or assumptions made about the person or topic.

First impressions have enduring effect because they influence the way any new information is interpreted (Munro, 1995). In practice, this might result in the practitioner who has formed a positive opinion of a family being more likely to treat any new allegation of abuse with scepticism.

The halo effect

The 'halo effect' occurs when evaluating or assessing someone you like. In this case, practitioners are more likely to judge a person as trustworthy, even where insufficient information is available to inform the basis of this assessment. For example, where practitioners perceive parents as open and engaging, they tend to feel reassured. Parental cooperativeness is then often used to gauge



risk which raises the chances that parental deception may be missed or their parenting capacity overestimated.

Status quo bias

This bias refers to the preference to keep things in their current state, regarding any change as a loss. This bias can result in difficulty to process the required change or to accept that change is required.

Ethnocentrism

A bias that makes one judge other cultural, practices, beliefs and people based on one's own culture or ethnicity. This bias often leads to a lack of consideration for other ways of life, a misinterpretation of different cultures, and a belief that one's own cultural group is more important or correct.

Strategies for reducing bias in decision making

Despite the influential nature of biases, there are strategies practitioners can employ to mitigate their effects and make more informed decisions. First and foremost, awareness of bias is crucial as it enables practitioners to recognise when bias may be influencing their judgement. Challenging personal beliefs and assumptions, as well as adopting a blind approach to decision making can also help reduce the influence of bias.

Supervision

Professional supervision supports high quality and culturally safe practice. Some of the core purposes of the supervision process are to promote reflection and can include reflecting on the supervisees' biases and the role they play in their assessment and decision making.

A blind approach

Implementing a blind approach involves limiting exposure to information which has the potential to unduly influence an assessment or decision thereby minimising the impact of biases on the outcome. Blinding in this sense refers to consideration of objective information for example: facts, and excluding subjective information for example, opinions. By conducting a blind approach practitioners can increase the accuracy and fairness of their decision-making processes, ultimately improving outcomes.

Alternative perspective

The crucial element in strategies aimed at counteracting bias is that they involve considering alternative perspectives (Plous, 1993. P. 256).

One strategy for practitioners is to imagine they are taking the opposing point of view and to think of reasons why their judgement might be wrong. By using this approach, a practitioner is required to look for information to support the opposing view, rather than challenge their existing belief. This approach requires careful consideration of what sources of evidence might be worth pursuing if a different interpretation can be given to existing information and analysing the reliability of the evidence at hand.

Triangulation

Triangulation involves gathering information from multiple sources. Using triangulation enhances the credibility of your findings and mitigates the presence of bias in your conclusions. Importantly, triangulation involves not only the gathering of multiple sources of information but ensuring all of that information is considered in assessments, particularly when contradicting information has been gathered.



Case consultation

Practitioners are encouraged to engage in regular case consultation with Senior Practitioners and other stakeholders to challenge thinking and collaborate for best outcomes. Case consultations allow for practitioners to present, clarify, conceptualise, and formulate a way forward. The consultation process should involve consideration of all available information. Where there is not enough information available to form a case conceptualisation or to support the current intervention, consideration of alternative options or ideas is warranted.

Practice advisors and leaders

Consultation with practice and cultural leaders is critical to ensuring relevant information is considered when making decisions and formulating assessments. Consultations of this kind not only ensures quality, evidence based practice, it provides an opportunity to reflect on what has been considered to date and will assist practitioners to consider any biases present in the their decision making process.

The department employs a range of professionals including cultural practice advisors, regional practice leaders, as well as specialist services clinicians - [Specialist Practice - Department of Child Safety, Seniors and Disability Services](#).

Practice skill sets

Practitioner skills in both analysis and synthesis need to be developed as a means of combating bias in decision making. Analysis is the process of pulling information apart, examining elements in detail and exploring interrelationships. Synthesis is the process of combining separate elements of information into a coherent whole – something that makes sense based on consideration of all the information at hand.

A means of increasing practitioners' ability to practice regular analysis and synthesis is by supporting and promoting the ability to engage in critical thinking, creative thinking and contemplation.

Critical thinking

Critical thinking is a kind of thinking in which you question, analyse, interpret, evaluation and make a judgement about what you read, hear, say or write. Critical thinking means being able to clarify thinking to break down a problem, interpret it and use that interpretation to make an informed decision or judgement. To become a critical thinker you need to learn how to:

1. **Clarify** your thinking purpose and context
2. **Question** your sources of information
3. **Identify** viewpoints
4. **Analyse** sources and viewpoints
5. **Evaluate** the viewpoints of others
6. **Synthesise** your own argument.

Creative thinking

Creative thinking refers to the ability develop innovative solutions and experiment with new ideas to help solve complex problems. Creative thinking involves brainstorming a number of ideas and considering them from multiple perspectives to examine how they might assist with the issue at hand. Creative thinking Creative thinking involves:

1. **Analysis** of facts, data and information to develop rational solutions
2. **Innovation** or, the ability to come up with something new to solve a problem
3. **Collaboration** to ensure multiple perspectives and ways of thinking are considered when coming up with ideas



Reflection

Assessing risk and formulating assessments are difficult tasks. Entertaining the idea that bias may have misled in your assessment is even more difficult to process however, given the importance of making informed, considered, and defensible decisions in child protection work, it is a challenge that needs to be addressed.

Reflective questions

Questions for combatting biased decision making:

- What information informs my assessment?
- Have I remained curious and inquisitive about what I am seeing and assessing?
- Have I been open to receiving new information?
- Have I listened to the perspectives of others in formulating my assessment?
- What alternative perspectives have I considered, or not considered?
- Would I have reacted differently if the information at hand had come from a different source?
- How does this client make me feel?
- What values or judgements of my own have I considered or applied as a part of my assessment?

Questions for risk assessment:

- What has been happening?
- What could happen?
- How likely is it that it will happen?
- How serious could it be?
- What is in place to mitigate it?

Questions for families, parents and carers:

- What is your view of what happened?
- What has it been like living with the issue?
- How can we work together to find a solution that works for you?
- What is your greatest fear in all of this?
- Can you imagine how things would be if you did not live with (the issue)? For example: the fear of violence?
- Can you imagine what you might do if a similar situation was to happen again?
- How did you cope in the past?
- Who helps to give you support and guidance about what to do?
- What do you want to change first and how can I help?
- How would you say that you are different when you are less stressed in your home life?

Navigating issues questions:

- Do you believe that the issue you have identified is the biggest problem for the family?
- What other people should help with this issue?
- What would you like to change now?
- What needs to happen in order to have this exception taking place more frequently?
- What do we have to do to make sure these changes or the exception remains?
- If there was a problem inside the family which we haven't referred to yet, what would that be?



Scaling questions:

- On a scale of 0 to 10, with 10 meaning you have every confidence that this problem can be solved and 0 meaning you have no confidence at all, where would you place yourself today?
- On the same scale, how hopeful are you that your problem can be solved?
- What would need to be different to move up just one step?
- What is the most important thing that needs to be done to keep things at a 7 or an 8?



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