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Unconscious bias: the hidden culture underpinning day surgery practices

Introduction

Cultural research studies attempt to explore the shared practice of a specific group of individuals and try to explain human behaviour and the social interactions which are often deemed as the norm. However, the 'cultural portrait' of a specific sphere of practice can often be misrepresented, as the surface image is only the tip of the iceberg and it is the invisible internal culture, found beneath the surface, which represents the greatest influence on clinical practice.

Methods

To examine how culture influences and shapes preoperative pain planning practices; a critical ethnographic methodological approach was adopted, utilising Carspecken's analytical enquiry framework. Qualitative and quantitative data from observations and interviews were analysed using reconstructive analysis and triangulated with the numerical data that was statistically analysed.

Results

Over 9 months, 130 hours of practice were observed, and 20 staff interviews were conducted. Four central themes emerged from the data; however, the finding that was hidden was a negative unconscious bias towards specific surgical specialities and patient gender, which had a direct impact on the levels and depth of preoperative pain conversations and management strategies.

Conclusions

Unconscious and intuitive processes can serve to protect; however, biases can also be harmful, and can negatively influence clinical decisions and interactions. For the status quo to be changed, healthcare professionals need to be made aware of any potential bias or assumptions and fully understand how these impact on their interactions and pain planning and management decisions.