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# Philosophy bias and stigma

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*DOI:*
10.1515/9783110650990-007

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*Document Version*
Publisher's PDF, also known as Version of record

*Citation for published version (Harvard):*
Bortolotti, L & Puddifoot, K 2019, Philosophy bias and stigma. in D Bubbio & J Malpas (eds), *Why Philosophy?.* De Gruyter, pp. 51-64. https://doi.org/10.1515/9783110650990-007

Link to publication on Research at Birmingham portal

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Lisa Bortolotti and Katherine Puddifoot

# Philosophy, Bias, and Stigma

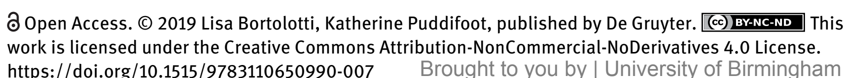
**Abstract:** In this chapter we discuss the impact of philosophical research on our understanding of the world. Considering two examples from our areas of research, we argue that empirically informed philosophy can help us both reduce and control the effects of implicit bias on our behavior, and challenge the stigma associated with the diagnosis of psychiatric disorders. In both cases, knowledge of philosophy and practice of philosophy make a significant contribution to the development of a fairer society.

## 1 What Philosophy Is and Why It Matters

We take philosophy to be at the same time a practice and a body of knowledge. As a practice, philosophy invites us to adopt a critical attitude towards received opinions and acquire the capacity to assess and develop arguments for or against a certain position. We learn how to spot weaknesses in an argument and build counterexamples to it, but also, more constructively, we learn how to avoid bad reasoning and anticipate objections when we propose an argument for a certain position. Philosophy as a practice is useful in so far as it allows us to think about complex issues avoiding biases and fallacies, to express our thoughts more clearly and persuasively, and to revise our positions in the light of counterevidence or feedback.

As a body of knowledge, philosophy is about gaining an understanding of the issues that matter to us, and to which we apply the analytical and argumentative skills we just described. Do we have an immortal soul? Why is it wrong to have an incestual relationship? Is there anything more to knowledge than a true belief justified by the evidence? These are some of the questions philosophers ask in their daily work. In practical philosophy, we investigate ethical and political issues, and, in theoretical philosophy, we ask questions about the methodology of the sciences, the nature of reality, the complexities of the human mind, and the limitations of our knowledge of the world, among many others. Philosophy as a body of knowledge is more or less useful depending on the issues that

The authors acknowledge the support of the European Research Council under the Consolidator grant agreement number 616358 for a project called *Pragmatic and Epistemic Role of Factually Erroneous Cognitions and Thoughts* (PERFECT).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we are planning to investigate and on whether we regard them as central to our understanding of reality and ourselves, or as likely to improve our way of life.

In the rest of the chapter, we would like to focus on two areas in which philosophy has played and continues to play a very important role: (1) our understanding of implicit biases, and the ways in which their effect can be controlled or reduced; and (2) our understanding of mental health, and the ways in which we can challenge the stigma that is usually associated with psychological distress.

## 2 Implicit Biases: The Phenomenon

Implicit biases are responses to members of social groups (e. g., races, religions, gender, ability groups), associating group members with traits in virtue of their social group membership. They frequently occur unintentionally, seemingly without the believer being aware of their occurrence, and are difficult to control. They can lead to the differential treatment of group members.

For example, in a study of implicit racial bias, Keith Payne presented images of items: either weapons, like a gun, or harmless items, like a tool.[1] But before presenting these pictures, participants were shown a picture of a black or white man's face. Those who were shown the black face were more likely to mistakenly view the image as a weapon than those who were shown the white face. Implicit biases are used to explain this phenomenon: the picture of the black faces primes people to think about violence, because they automatically associate black male faces with violence. That is, they have an implicit bias associating black people with violence. As a result of the implicit association, they are more likely to view the ambiguous picture of the item as violent.

In another set of experimental studies on the effect of implicit bias, undertaken in Sweden, measurements were made of the extent to which certain employers associated Arab-Muslims[2] or obese people[3] with laziness and incompetence. Those employers who strongly associated Arab-Muslims and obese people with these characteristics were less likely than others to invite members of these groups to interview for a job.

By furthering our understanding of these and similar unconscious or unintended forms of bias and prejudice, recent philosophical research on implicit

**1** B. Keith Payne, 2001, pp. 181–192.
**2** Dan-Olof Rooth, 2010, pp. 523–534.
**3** Jens Agerström and Dan-Olof Rooth, 2011, pp. 790–805.

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bias illustrates the substantial contribution that philosophy can make to understanding the nature of human thought and how it influences interpersonal interactions. In the domain of implicit bias research philosophy is also at its most practical: providing insights about potential ways to reduce the implicit stereotyping involved with implicit bias.

## 2.1 The Psychology of Implicit Bias

One strand of philosophical research into implicit bias aims to identify the psychological underpinnings of implicit bias. It aims to answer the question, what, precisely, are implicit biases? How do implicit biases relate to better-recognized psychological states? For example, much recent philosophical discussion has aimed to answer the question: "How do implicit biases relate to beliefs?"

For a significant number of the years during which implicit biases have been studied, it has been assumed in the psychological literature that they are merely associations that people make in their thinking—for example, one might associate social groups (e. g., *women*) and their members with concepts (*weakness*) or feelings (*aversion*)—and that they can only be changed via retraining. They have been distinguished from other mental states on the basis that the believer is often unaware of or unable to control the operation of implicit biases. These associations often conflict with our explicit evaluations: we might explicitly endorse egalitarian specific principles (e. g., all races are equal, all genders are equal) while at the same time making associations that do not fit with these principles, (e. g., associating black people with laziness or women with weakness).[4]

On this characterization of implicit biases they seem different to beliefs. Beliefs tend to involve a commitment to a thought, to respond to argument and evidence,[5] while making an unconscious and automatic association does not require commitment and the association is unlikely to respond to argumentation. If someone *believes* that women are weak then one might engage them in a debate or present evidence of strong women. For example, one might say, "Look at me," while flexing one's muscles lifting something heavy, to illustrate that you are a strong woman. In contrast, if someone has an implicit bias associating women with weakness then, according to those who think that implicit biases are mere associations, one should encourage that person to engage in

4 See, e. g., John F. Dovidio and Samuel L. Gaertner, 2004, pp. 1–52.
5 Tamar Szabó Gendler, "Alief and Belief," 2008, pp. 634–663; Tamar Szabó Gendler, 2008, "Alief in Action (and Reaction)," pp. 552–585.

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training to change their habits. In recent philosophical work, however, the idea that implicit biases are distinguishable from beliefs has been challenged.[6] It has been argued that psychological work on implicit bias shows that they are beliefs[7] or belief-like.[8] For example, some psychological findings suggest that implicit biases can be changed via the presentation of evidence.[9] The same findings suggest that implicit biases might not be mere associations; they might have a propositional structure, more like beliefs.[10]

The outcome of debates about the nature of implicit biases could shift our understanding of how we should conceive of thoughts and actions that we engage in, unintentionally and sometimes unknowingly, leading to differential treatment of members of different social groups in virtue of their group membership via the operation of implicit bias. If these responses are the result of beliefs, then there is reason for thinking that we should think and feel the same way towards people displaying these implicit attitudes as we would about people displaying discriminatory beliefs.[11] This discussion could also identify ways to combat implicit bias. If we find that implicit biases are beliefs, then we can aim to combat them via argumentation and evidence.[12]

## 2.2 The Morality and Epistemology of Implicit Bias

Debates about implicit bias also venture into moral philosophy and epistemology. Implicit biases have moral import because they lead to discrepant behavior, such as members of certain groups being denied interviews for jobs or being given different medical treatment to members of other social groups.[13] This moral import is related to the epistemic import: disparities in treatment often result from biased judgments. For example, a female student's work might be marked harshly because the marker has a negative implicit bias against females, leading them to allow information that should not influence the judgment, i.e., information about gender, to determine the mark awarded.[14] Because of cases

**6** Eric Mandelbaum, 2016, pp. 629 – 658.
**7** Eric Mandelbaum, 2016, pp. 629 – 658.
**8** Neil Levy, 2015, pp. 800 – 823.
**9** Jan De Houwer, 2014, pp. 342 – 353; Eric Mandelbaum, 2016, pp. 629 – 658.
**10** De Houwer, 2014, pp. 342 – 353; Eric Mandelbaum, 2016, pp. 629 – 658.
**11** R. Levy, 2015, pp. 800 – 823.
**12** Alex Madva, 2016, pp. 2659 – 2684.
**13** See, e.g., John F. Dovidio and Susan T. Fiske, 2012, pp. 945 – 952.
**14** Jennifer Saul, 2013, pp. 39 – 60.

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like this, there is reason to doubt both the morality and accuracy of many of our judgments that might be influenced by implicit bias.[15]

However, while behavior performed under the influence of implicit bias is often morally objectionable, there is debate about whether the biased person is morally responsible for the bias and its outcomes. Jennifer Saul,[16] for example, argues that people who act under the influence of implicit bias are not blameworthy for their actions. This is because the actions are not chosen, they are the result of their upbringing; they are not under the control of the thinker; and the believer will not even be aware of the operation of the bias or their discrepant behavior. Jules Holroyd disagrees, arguing, on the basis of psychological evidence, that people can be aware of the operation of implicit bias.[17] While they might not be aware via introspection of the operation of implicit bias, they can have awareness of a body of knowledge about people's tendencies to possess and display implicit bias, or be aware of the manifestation of implicit bias in biased behavior. In addition to this, Holroyd argues that that people *can* control their implicit biases, they can adopt long range strategies to control their implicit biases. For example, if they are employers then they can make sure that when they consider CVs of candidates, the CVs are anonymous, so the employers do not know if candidates are Arab-Muslims or Obese and implicit biases relating to these groups cannot be triggered. Others deny that control is required for responsibility arguing instead, for example, that one is responsible for a mental state if it reflects one's evaluative judgments.[18] For these moral philosophers, whether or not an individual is responsible for their implicit bias depends upon whether the implicit bias is reflective of, or integrated with, their other attitudes.[19]

It is not necessarily the case that either everyone or no-one is responsible for the effects of implicit bias. It might be that only certain individuals are responsible for being aware of implicit biases, that is, persons who act as gatekeepers, like employers.[20] It might be that wider societal change is needed to prevent or mitigate the negative effects of implicit bias, rather than changes to individu-

**15** See, e.g., Tamar Szabó Gendler, 2011,"On the Epistemic Costs of Implicit Bias," pp. 33–63; Jennifer Saul, 2013, "Implicit Bias," pp. 39–60; Jennifer Saul, 2013, "Skepticism and Implicit Bias," pp. 243–263; Katherine Puddifoot, 2016, pp. 421–434.

**16** Jennifer Saul, 2013,"Skepticism and Implicit Bias," pp. 243–263.

**17** Jules Holroyd, 2012, pp. 274–306.

**18** See, e.g., Angela M. Smith, 2005, pp. 236–271.

**19** cf. N. Levy, 2015, pp. 800–823.

**20** Natalia Washington and Daniel Kelly, 2016, pp. 12–36.

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als.[21] If so, governments and other large institutions, such as media corporations, might be responsible for reducing implicit biases, and be, or stand culpable if they fail to do so. Perhaps each person is potentially responsible for their implicit bias wherever they can reasonably be expected to be aware of the operation of implicit biases and strategies to combat their effects because on such occasions they have a role to play in combating implicit bias and the discriminatory behavior that follows.[22] Some of us are in a better position than others with regards to both the ability to discover the presence of implicit bias and the ability to combat it, due, for example, to our position as academics with access to the psychological literature. For others, though, it would be less reasonable to expect them to be aware of and combat their implicit bias, thus making them less morally irresponsible or blameworthy if they fail to do so.

## 3 Mental Health and Its Boundaries

Contemporary societies are struggling to counteract mental health stigma and to ensure parity of esteem between physical and mental health. Stigma means that people with a known psychiatric diagnosis are discriminated against, and negative thoughts and actions are being directed at them for the mere reason that they experience mental health issues. Parity of esteem is the view that patients with mental health issues should receive the same level of care and be allocated the same resources as patients with physical health issues. Stigma is very persistent in the area of mental health, and there is a pervasive "them and us" attitude dividing people who experience mental health issues from people who do not. This "them and us" attitude is what needs to change within society for individuals, communities, and institutions to recognize that being unwell should never count as a reason for being ignored, neglected, discriminated, marginalized, or laughed at.

Philosophy can help address these issues by showing that there is no principled reason to prioritize physical health over mental health, and that there is no sharp divide but rather significant continuity between being mentally well and being mentally unwell. Distress can manifest in a variety of ways, ranging from debilitating diseases affecting good functioning for several years, to temporary forms of anxiety or depression that may come to the attention of healthcare professionals but may not have long term consequences and may not need to be

**21** Elizabeth Anderson, 2012, pp. 163–173.
**22** N. Washington and D. Kelly, 2016, pp. 11–36.

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medically treated. Philosophy can also accelerate and justify the process that leads to breaking the divisive nature of discussions about mental health. Philosophers, often in collaboration with neuroscientists, cognitive psychologists and psychiatrists, study the strengths and limitations of the human mind and are especially interested in those circumstances in which cognitive and affective states do not seem to be shaped or motivated by how things are. False and unsupported beliefs as well as inappropriate emotional reactions are common in clinical and nonclinical contexts alike.

In our own research, we investigate those reports that are often regarded as marks of irrationality and as symptoms of a mental disorder, such as implausible delusional beliefs, distorted autobiographical memories, and attempted explanations of behavior that do not fit the facts. Although such reports can emerge in the context of schizophrenia, dementia, depression, eating disorders, amnesia and other psychiatric conditions, they are not confined to them, and can affect everybody. Research suggests that people routinely ignore evidence when it does not lend support to their often-inflated views of themselves, that they reinterpret memories of failure and overestimate future chances of success, that they see the past as colored by their current beliefs and values, and that they "make up" stories to fill the many gaps in their knowledge of themselves. In the previous section, when discussing sexist attitudes in academia, we saw a common case of imperfect cognitions: vulnerability to implicit biases is very widespread, and it has implications for the rationality of judgments and decisions.

Philosophers ask whether symptoms of mental health issues that are taken to be paradigmatic examples of irrationality differ in kind or just in degree from the common behaviors described above. In collaboration with empirical scientists, we investigate whether the underlying mechanisms responsible for the manifestations of irrationality we find in the clinical population are similar or significantly different from those that we find in the nonclinical population. Cognitions are likely to be less constrained by reality when the person experiences perceptual anomalies, reasoning deficits, memory impairments, and emotional disturbances—so the extent to which symptoms of mental health issues are due to these factors should be taken into account. But the effects of the ensuing loss of contact with reality is made worse by the social isolation people experience when they lack the opportunity to get feedback from others due to the fear of being stigmatized and misunderstood in the home, among friends, and in the workplace.

What the mentally well and the mentally unwell have in common needs to be observed, remarked upon, and studied systematically. Philosophy can help provide an empirically informed perspective on the continuity between irrationality in the clinical and nonclinical contexts. By doing so, it can also help chal-

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lenge stigma and reject the current "them and us" attitude that characterizes discussions of mental health.

## 3.1 The Phenomenon of Delusion

The term "delusions" refers to a clinical phenomenon, and in particular to observable symptoms of schizophrenia, delusional disorders, dementia, amnesia, and other psychiatric conditions. In the most recent version of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5), delusion is defined as follows:

> A false belief based on incorrect inference about external reality that is firmly held despite what almost everyone else believes and despite what constitutes incontrovertible and obvious proof or evidence to the contrary. The belief is not ordinarily accepted by other members of the person's culture or subculture (i.e., it is not an article of religious faith). When a false belief involves a value judgment, it is regarded as a delusion only when the judgment is so extreme as to defy credibility.[23]

This definition is problematic in many respects, but it remains a useful diagnostic tool. Examples of delusions are *persecution*, where the person reports that other people are hostile and intend to cause her harm, and *jealousy*, where the person reports that her romantic partner is being unfaithful to her. More unusual delusions include *mirrored-self misidentification*, where the person reports that there is a stranger in the mirror, or the *Cotard delusion*, where the person reports that she is dead or disembodied.

Here we focus on delusions as they are often taken to be the mark of madness, an obvious symptom of mental illness and an example of radical irrationality. We suggest that, contrary to what most assume: (a) the irrationality of delusions does not differ in kind from that of superstitious or prejudiced beliefs, and (b) the fact that an action is motivated by a delusion does not necessarily rule out that the person is accountable for that action. If we can make a good case for (a) and (b), then we have a powerful illustration of the thesis that there is significant continuity (and not a categorical difference) between behaviors categorized as manifestations of mental illness and behaviors that do not attract any specific diagnosis.

**23** American Psychiatric Association DSM-5 Task Force, 2013, p. 819.

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## 3.2 Epistemic and Ethical Issues Arising from Delusion

Delusions share a form of epistemic irrationality, that is, a failure to meet the standards of rationality for beliefs with respect to the relationship between the content of the belief and the evidence. Delusions are not easily given up in the face of challenges and tend to resist counterevidence.[24] But is the irrationality of delusions different in kind from the irrationality of superstitious or prejudiced beliefs?

The epistemic feature that is considered most distinctive of delusions—resistance to counterevidence—is actually a very common feature of a variety of typical beliefs. Once they adopt a hypothesis, people are very reluctant to abandon it, even when copious and robust evidence against it becomes available. This is true not only of prejudices against racial groups (such as "Blacks are more aggressive") and superstitions that have no scientific foundations (such as "more accident occur in the nights of a full moon"), but also of beliefs in scientific theories, a context in which responsiveness to evidence should be seen as paramount. For instance, Chinn and Brewer found that people discount evidence against a theory they support but do not discount evidence against a rival theory.[25] Self-enhancing beliefs are especially resistant to counterevidence, and people keep believing that they are more skilled, talented, attractive, successful, and moral than average, even when their life experiences repeatedly suggest otherwise. In order to maintain a positive image of themselves, they reinterpret negative feedback and focus on selected evidence that supports their self-enhancing beliefs.[26]

The claim that the epistemic irrationality of delusions is continuous with the epistemic irrationality of nondelusional beliefs has a variety of implications. For instance, it may be an important factor when we want to understand whether a person should be regarded as responsible for those actions that are driven or motivated by her delusional beliefs. There are some legitimate concerns about the connection (either openly acknowledged or implicit in most legal systems) between having psychotic symptoms such as delusions, or having a certain psychiatric diagnosis such as schizophrenia, and being held unaccountable for one's actions. The problem with generalizing from one set of symptoms or one diagnosis to unaccountability is that people with similar symptoms or the same diagno-

**24** Lisa Bortolotti, 2016; Lisa Bortolotti and Kengo Miyazono, 2015, pp. 636–645.
**25** Clark A. Chinn and William F. Brewer, 2001, pp. 323–393.
**26** E. Hepper and Constantine Sedikides, 2012, pp. 43–56.

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sis may behave in very different ways.[27] This suggests that further information about individual cases is required before making a judgment about accountability: information about how one's symptoms or diagnosis affect decision making, and specifically the making of those decisions which led one to commit the crime.[28]

The presence of delusions is often considered as a key criterion for criminal insanity. In the high-profile case of the mass murderer Breivik, in Norway, the debate about whether he should be regarded accountable for his crime largely depended on whether his anti-Islamic and racist beliefs were regarded as delusional or just prejudiced in the same way as are the beliefs of many extremists. We should take into account two factors before implying that because an action has been motivated by a delusional belief, the person who performed the action should not be held accountable for it.

First, in terms of how delusions motivate criminal action, the role of delusional beliefs does not seem to be different from the role of nondelusional beliefs, unless we assume that the presence of delusions also signals the presence of a specific cognitive deficit that impacts on the decision to commit the crime in question. Second, having beliefs that are epistemically bad and potentially dangerous, such as prejudiced beliefs about the inferiority of a group of people or the legitimacy of using violence towards them, is not always sufficient to give rise to criminal action, whether the beliefs are delusional or not. Having such beliefs may contribute to an explanation for the crime, but does not make criminal action inevitable or excusable.

# 4 Conclusions and Implications

As we suggested in section 2, discussions of implicit bias in philosophy have the potential to provide a great deal of insight into strategies that can and should be implemented to reduce implicit prejudice. Philosophers discussing implicit bias often focus on this issue. Actions that might ordinarily be used to combat prejudice, such as attempting to adjust one's judgments to make them more fair,[29] are less likely to be successful against implicit bias than explicit prejudice because even where people are aware that they are biased, they are unlikely to be aware of the extent to which they are influenced by bias.[30]

**27** Richard Bentall, 2006, pp. 220–233.
**28** Lisa Bortolotti, Matthew R. Broome, and Matteo Mameli, 2014, pp. 377–382.
**29** Miranda Fricker, 2007.
**30** Linda Martín Alcoff, 2010, pp. 128–137; Benjamin R Sherman, 2015, pp. 1–22.

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Also, implicit biases seem to arise as a result of the fundamental inequalities in our societies,[31] which lead, for example, to young black males as being depicted in the media as more likely to engage in criminal behavior than others.[32] As soon as a social group is associated with a trait, such as being a criminal, others in their society are likely to automatically associate individual members of the social group with crime. Fundamental changes to the structure of society might therefore be required to mitigate the negative effects of implicit bias.[33]

As we suggested in section 3, discussions of mental health in philosophy can help us combat stigma and justify parity of esteem between physical and mental health. Focusing on the phenomenon of delusions, we showed that two common assumptions should be revisited. First, we assume that delusions are irrational in a different, more radical way, than nondelusional beliefs, but their resistance to counterevidence is not a distinctive feature. The emphasis on continuity can shape our attitudes towards people who report delusional beliefs and may also inform the breadth of the treatment options available to people with delusions. Although we tend to think that people cannot be talked out of their delusions, there is some evidence that some forms of therapy are efficacious in reducing the rigidity of delusional states, and the preoccupation of the person with the topic of the delusion.[34]

Second, we assume that the presence of delusions implies criminal insanity, and that people cannot be held responsible for those criminal actions that are driven or motivated by their delusional beliefs. But it is not clear whether the presence of delusions is ever sufficient for criminal action and whether it indicates a more general impairment in people's capacity to make decisions. Thus, a blanket recommendation to consider people with delusions always unaccountable seems to be poorly justified and should be replaced by a more careful consideration of each case history.

Philosophical discussions can contribute to developing practical solutions to the problems raised by implicit bias and the mental health stigma. Philosophy therefore has the potential to fundamentally change interpersonal interactions so that they are no longer underwritten by bias, stigma, and prejudice, which distort judgments and lead to unfair treatment.

**31** Tamar Szabó Gendler, 2008, "On the Epistemic Costs of Implicit Bias," pp. 33–63.

**32** Katherine Puddifoot , 2017, pp. 137–156.

**33** E. Anderson, 2012, pp. 163–173.

**34** Max Coltheart, 2005, pp. 72–76; David Kingdon, Katie Ashcroft, and Douglas Turkington, 2008, pp. 393–410.

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# Bibliography

Agerström, J., and D-O. Rooth. “The Role of Automatic Obesity Stereotypes in Real Hiring Discrimination.” *Journal of Applied Psychology* 96, no. 4 (2011): p. 790.

Alcoff, L. “Epistemic identities.” *Episteme* 7, no. 2 (2010): pp. 128–37.

American Psychiatric Association DSM-5 Task Force. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. Washington, DC: American Psychiatric Association Publishing, 2013.

Anderson, E. “Epistemic Justice as a Virtue of Social Institutions.” *Social Epistemology: A Journal of Knowledge, Culture and Policy* 26, no. 2 (2012): pp. 163–173.

Bentall, R. “Madness Explained: Why We Must Reject the Kraepelinian Paradigm and Replace it with a ‘Complaint-orientated’ Approach to Understanding Mental Illness.” *Medical Hypotheses* 66, no. 2 (2006): pp. 220–233.

Bortolotti, L., and K. Miyazono. “Recent Work on the Nature and the Development of Delusions.” *Philosophy Compass* 10, no. 9 (2015): pp. 636–645.

Bortolotti, L., M. R. Broome, and M. Mameli. “Delusions and Responsibility for Action: Insights from the Breivik Case.” *Neuroethics* 7, no. 3 (2014): pp. 377–382.

Bortolotti, L., “Delusion.” In *The Stanford Encyclopedia of Philosophy*, Spring 2016 ed., Edward N. Zalta (Ed.). Stanford: Stanford University, 2016. http://plato.stanford.edu/archives/spr2016/entries/delusion/.

Chinn, Clark A., and William F. Brewer. “Models of Data: A Theory of How People Evaluate Data.” *Cognition and Instruction* 19, no. 3 (2001): pp. 323–93.

Coltheart, M. “Delusional Belief.” *Australian Journal of Psychology* 57, no. 2 (2005): pp. 72–76.

De Houwer, J. “A Propositional Model of Implicit Evaluation.” *Social and Personality Psychology Compass* 8, no. 7 (2014): pp. 342–353.

Dovidio, J. F., and S. T. Fiske. “Under the Radar: How Unexamined Biases in Decision-Making Processes in Clinical Interactions Can Contribute to Health Care Disparities.” *American Journal of Public Health* 102, no. 5 (2012): pp. 945–952.

Dovidio, J. F., and S. L. Gaertner. “Aversive Racism.” *Advances in Experimental Social Psychology* 36 (2004): pp. 1–52.

Fricker, M. *Epistemic Injustice*. Oxford: Oxford University Press, 2007.

Gendler, T. S. “Alief and Belief.” *The Journal of Philosophy* 105, no. 10 (2008): pp. 634–663.

Gendler, T. S. “Alief in Action (and Reaction).” *Mind and Language* 23, no. 5 (2008): pp. 552–585.

Gendler, T. S. “On the Epistemic Costs of Implicit Bias.” *Philosophical Studies* 156, no. 1 (2011): pp. 33–63.

Hepper, E.G., and C. Sedikides. “Self-enhancing Feedback.” In *Feedback: The Communication of Praise, Criticism, and Advice,* edited by R. Sutton, M. Hornsey, and K. Douglas, pp. 43–56. London: Peter Lang, 2012.

Holroyd, J. “Responsibility for Implicit Bias.” *Journal of Social Philosophy* 43, no. 3 (2012): pp. 274–306.

Kingdon, D., K. Ashcroft, and D. Turkington. “Cognitive Behavioural Therapy for Persecutory Delusions: Three Case Examples.” In *Persecutory Delusions: Assessment, Theory and Treatment,* edited by D. Freeman, R. Bentall, and P. Garety, 393–410. Oxford: Oxford University Press, 2008.

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Levy, N. “Neither Fish nor Fowl: Implicit Attitudes as Patchy Endorsements.” *Noûs* 49, no. 4 (2015): pp. 800 – 823.
Madva, A. “Why Implicit Attitudes are (Probably) Not Beliefs.” *Synthese* 193, no. 8 (2016): pp. 2659 – 2684.
Mandelbaum, E. “Attitude, Inference, Association: On the Propositional Structure of Implicit Bias.” *Noûs* 50, no. 3 (2016): pp. 629 – 658.
Payne, B. K. “Prejudice and Perception: The Role of Automatic and Controlled Processes in Misperceiving a Weapon.” *Journal of Personality Social Psychology* 81 (2001): pp. 181 – 192.
Puddifoot, K. “Stereotyping: The Multifactorial View.” *Philosophical Topics* 45, no. 1 (2017): pp. 137 – 156.
Puddifoot, K. “Accessibilism and the Challenge from Implicit Bias.” *Pacific Philosophical Quarterly* 96, no. 3 (2016): pp. 421 – 434.
Rooth, D-O. “Automatic Associations and Discrimination in Hiring: Real World Evidence.” *Labour Economics* 17 (2010): pp. 523 – 534.
Saul, J. “Implicit Bias, Stereotype Threat, and Women in Philosophy.” In *Women in Philosophy: What Needs to Change*, edited by K. Hutcheson and F Jenkins, pp. 39 – 60. Oxford: Oxford University Press, 2013.
Saul, J. “Skepticism and Implicit Bias.” *Disputatio* 5, no. 37, (2013): pp. 243 – 263.
Sherman, B. “There’s No (Testimonial) Justice: Why Pursuit of a Virtue is Not the Solution to Epistemic Injustice.” *Social Epistemology* (2015): pp. 1 – 22. doi: 10.1080/02691728.2015.1031852.
Smith, A. “Responsibility for Attitudes: Activity and Passivity in Mental Life.” *Ethics* 115 (2005): pp. 236 – 71.
Washington, N., and D. Kelly. “Who’s Responsible for This? Moral Responsibility, Externalism and Knowledge About Implicit Bias.” In vol. 2 of *Implicit Bias and Philosophy,* edited by M. Brownstein and J. Saul, pp. 11 – 36. Oxford: Oxford University Press, 2016.

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