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What kind of shoes would a social worker wear? Perceptions of occupational identities and their place in career conversations.

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If I asked you to close your eyes and conjure up an image of a typical social worker, would you be able to bring something to mind? I would. I can see a middle aged woman, with short greying hair, wearing an exotic necklace and comfortable shoes.

This feels like quite an admission. I'm not terribly comfortable acknowledging to you all that I have these kinds of stereotypes in my mind, and I'm a bit concerned about the impact of articulating these kinds thoughts widely. But I'm not alone. Research suggests that most of us can conjure up this kind of image of a stereotypical occupational identity, and there is an increasing body of evidence to show that these perceptions of occupational identities have an impact on career choices.

Perceptions of occupational identities are stored as stereotypes. A stereotype is a judgement about one individual which is made on the basis of what is known about the group that they belong to. It's the presumption that a German person is likely to be well organised, that a man will probably know something about football and that a teenager will be active on social media.

In many ways, stereotypes are useful. There is an enormous amount of information that we need to process in order to navigate the complex world around us and stereotypes function as cognitive shortcuts which allow us to make reasonably useful judgements in an instant. Evolutionarily, they have served us well, as we developed the ability to make split second decisions about whether we were in danger, but when it comes to their influence on career choices, their value is less clear cut.

Occupational stereotypes associated with various demographic features such as gender and class have long been part of our professional awareness – we know that stereotypes of nurses are female and those of stockbrokers are well-to-do, but recent evidence suggests that our stereotypical mental images of different occupational groups are more detailed and multidimensional than we had thought. Clinical psychologists are thought to wear Birkenstocks and enjoy European city breaks; we imagine primary school teachers going to karaoke bars and enjoying cycling holidays, and we see scientists as thin, pale and bespectacled.

Evidence indicates that these stereotypical images have an impact on our career choices. Gottfredson (1981) showed us that even young children have some awareness of the kind of occupations considered suitable for their sex and social class. More recently, researchers have explored the idea that people compare themselves to their stereotype of a particular occupational identity and are attracted to occupations where they see a close match. This has been shown to explain why there are so few female surgeons and software engineers (Peters et al., 2012). The approach has also shown that a range of other factors are at play: girls are put off going into computer science and physics because they imagine female computer scientists to be unattractive to men, and female physicists to be childless. These stereotypes are not always within our conscious awareness and this presents a further challenge for our clients in that they may be entirely unaware of the influence that these images are having.

The research is clear. Occupational stereotypes are widespread and inevitable, they encompass all kinds of details which may or may not be directly relevant to the jobs themselves, and they do influence career choices. Stereotypes do matter to our clients, and therefore should matter to us.

But the idea of engaging with these kinds of conversations doesn't sit easily within our professional practice. Our discomfort seems to stem from a number of different sources. Within our profession, stereotypes are not held in high regard. We know they have a detrimental impact on various groups within society, we know they are not an accurate reflection of the range of people who are or who could be successful and happy in any given role, and we wish the world wasn't like this: we wish that stereotypes were less pervasive and had less impact. A second barrier is that the kinds of stereotypes I'm talking about in this article contain a range of features which don't seem at all relevant to job choices: our clients should be making their career decisions based on the kinds of things that people do at work, and the sorts of skills they use, rather than on the kind of shoes they wear and their chances of a getting a date in the office. Thirdly, there may be an issue of credibility. It's not always easy to convince our stakeholders that underneath our approachable, client-centred, non-judgemental exteriors, there lurk the hearts and minds of skilled, expert professionals. I'm not sure that a group session that focuses on the dating habits and holiday choices of different occupational groups would do us any favours in this regard.

So we are left with a tension. A full and frank discussion of the occupational stereotypes held by our clients might allow them to reflect on their accuracy and relevance. But if we did decide to raise these kinds of questions with our clients, how can we do it without damaging our credibility, or risking taking our clients down a wholly irrelevant path?

Credibility can be established in two ways. First, the conviction of the practitioner is key. If you believe that these are relevant and important issues to address, then this will go some way towards convincing your clients that they matter. Second, quoting or referring to research can enhance your professional authority and can provide a clear explanation for the inclusion of this surprising material within your career sessions.

In terms of the conversation itself, this could be split into two parts. In the first instance, you could encourage your clients to identify and describe their stereotypical images of the jobs they are considering. Although these are stored below our conscious awareness, we can fairly easily bring them into our minds by conjuring up an image and describing it verbally. This process can be a lot of fun, and can work well in a group. People quite enjoy having permission to indulge in their stereotypes and can surprise themselves with the stories and images they can conjure up. I find the conversations work well if I ask a series of questions, starting with some basic demographic features (*'Is your image of a typical doctor male or female?' 'What sort of age are they?'*), then finding out a bit more about the image in their mind's eye (*'What do they look like?', 'What are they wearing?'*) before building up to their lifestyle (*'What kind of home do they have?', 'How do they spend their weekends?'*) and personality (*'How would their friends describe them?', 'What kinds of things are they really good at?'*). The second part of the conversation may take a more serious tone, as you discuss where their images have come from – trying to get your clients to work out whether their sources of information are reliable ones, and asking them to reflect on the impact that this information might and should be having on their career choices.

These conversations don't need to be very far removed from some more mainstream career practices. We often ask our clients to explore what they already know about a particular occupation. This approach just takes this one step further, delving a little deeper and stretching a little wider. And in doing so, you might find another technique to stimulate your clients' thinking and boost their understanding of their own thought processes.