# Module Subject: Understanding, Recognizing and Addressing Bias

### Included in This Module:

- 1. Video recording of lecture
- 2. Activity Guide for Instructors
- 3. Lecture Note Worksheet for Students/ Quiz Questions
- 4. Discussion guide/Writing prompts
- 5. List of additional resources

#### Module Goals:

- Introduce the concept of "implicit bias."
- Help students recognize their own implicit bias around mental health conditions in a safe and non-judgmental way.
- Explain the detrimental effects of implicit bias relating to mental health conditions.
- Help students begin to change their mental illness-related implicit bias by presenting factual information.

Estimated Time to Complete Module: 30-40 minutes (including 10-15 minutes for students to complete implicit bias assessment before class)

## **Activity Guide for Instructors:**

- Before accessing the video lecture, please ask students to complete <u>Project Implicit's Mental Illness Implicit Association Test</u>.
- Below are instructions for students on how to access the Harvard Implicit Bias test before viewing the video lecture. You can cut-and-paste these instructions into an email, or post them somewhere on your online learning platform:

Before viewing the online lecture, please complete Project Implicit's Mental Illness Implicit Association Test.

- Go somewhere quiet, where you can focus without lots of distractions.
- Using a computer with a keyboard and mousepad (NOT a smartphone or touchpad), visit https://implicit.harvard.edu/implicit/user/pih/pih/selectatest.html.
- Under the heading "Mental Health" at the very top of the page, select the "Mental Illness IAT"



- Follow the instructions on how to use the assessment. It should take 10 to 15 minutes.
- Print or screenshot your results.
- Run by Harvard, this test will collect demographic data, but your answers will remain anonymous.
- The goal of this assessment is to have students acknowledge that they may hold beliefs and biases that they are not consciously aware of, or implicit biases. The assessment is meant to be taken in private, and results do not need to be shared. The intention is not to shame students, or make them feel self-conscious about the beliefs they may unconsciously hold the goal is to simply make students aware that the human brain creates and holds ideas without us actively controlling it. Acknowledgement is the first step in understanding and changing implicit biases.

- You may wish to take the assessment yourself, so you have a frame of reference if students want to discuss their results.
- How the assessment works (from implicit.harvard.edu): By testing how quickly you could categorize mental illnesses with "dangerous" words versus physical illnesses with "dangerous" words, the IAT indirectly assess how much these concepts are linked in your mind. The idea is that the more strongly associated the two concepts are in memory, the more quickly you will be able to categorize words into those paired categories. For example, it's usually easier to categorize words when "flowers" and "good" are paired together than when "flowers" and "bad" are paired together. Previous research shows that our conscious reports and the associations revealed by the IAT can be different.
- Students may push back on their IAT results, or may have questions about "what this all means." From the website implicit.harvard.edu (Visit the FAQ page here):
  - o We want to stress that the IAT does not provide a diagnosis, and it should not be used to determine one's 'true' attitudes or feelings. Moreover, the results that you receive are not static, but can vary depending on a variety of factors. If you take the anxiety test while studying for a particularly stressful exam, for instance, it may be more likely that you will display associations between self and anxious than if you take the same test while relaxing on a beach.
  - o What does it mean if I get a test result that I don't believe describes me or, if I take the same test twice, I get different results each time? You may be giving the test more credit than it deserves! These tests are not perfectly accurate by any definition of accuracy. Normally, outcomes will change at least slightly from one time to another. You may discover this if you repeat any of the tests. We encourage repeating any test for which the outcome surprises you. If the outcome is the same, the result is definitely more trustworthy than is the first result alone. If the outcome varies, it is best to average the different results. However, if the outcome varies widely from one time to another (something that is unusual) we suggest that you just regard the set of results as 'inconclusive'. Besides normal variation in the reliability of assessment, the IAT is also known to be malleable based on differences in the social setting and recent experience. These factors will influence the consistency of measurement across occasions.
  - o Does this mean that I will always have these associations? Absolutely not. In fact, following treatment, initial evidence suggests that many of these associations are likely to change. Thus, if you believe that your automatic associations reflect an issue that has been particularly challenging and that you would like to address, there are many resources available (please visit our health resources link for information about physical and mental illness and treatment options).

## **Lecture Note Worksheet for Students**

(Instructor: You can use these as quiz questions for students to answer after viewing the lecture, or as a handout for students to take notes while they view the lecture.)

Implicit Bias is defined as:	
Implicit biases:	
<ul><li>can be positive or negative</li><li>generally favor your own "ingroup"</li></ul>	
are activated without your awareness or control	
Implicit biases come from various places, including:	
learned behavior, from sources like	
self-preservation, which means	
• social motives. For example:	
<del></del> ,	
Implicit biases tend to be activated when people are,	
feel pressed for time, or otherwise feel	
Only% of violent crimes are committed by individuals with mental health issues.	
Implicit biases can be unlearned by following several steps, including:	
<ol> <li>Acknowledge and address your biases.</li> <li>Understand that empathy is a skill you can build.</li> </ol>	
3	·
4	<u> </u>
When you use person-first language, instead of saying "that's crazy," you could say	
Instead of saying,	
"successful suicide," you could say	

#### **Discussion Guide:**

(Instructor: You can use these discussion questions during a live online class, or use them as writing prompts for post-lecture reflection.)

- Why do you think some people subconsciously believe that people experiencing mental health issues are violent or dangerous? Where does this bias come from, and why does it persist?
- Where do you think *your* personal beliefs about mental health conditions and mental health come from? Think about the media you've consumed, your family's beliefs and expectations, as well as how your community talks about mental health—what messages have you grown up hearing about mental health, mental health diagnoses, and people who experience mental health challenges?
- What are two ways you can work to address and change your implicit biases, regarding mental health issues or any other topic?
- Consider the following scenario: Robert, who has depression, works at a large public relations firm. At times, his depression worsens. When this occurs, he requests a flexible schedule—to arrive at work late rather than early morning—as an accommodation. Robert's supervisor assembles a team to work on an important project for the firm. She decides, based on the long hours this will require, the numerous tight deadlines that need to be met, and the team meetings involved, not to assign Robert to the team, even though he has previous experience with cases similar to the current project.
  - What assumptions did the supervisor make about Robert's abilities?
  - Were the supervisor's reasons for not including Robert on the team reasonable?
  - What questions should the supervisor have asked Robert before making her decision?

#### **Additional Resources:**

- National Public Radio's *Invisibilia* podcast: "The Culture Inside," from June 15, 2017 <a href="https://www.npr.org/programs/invisibilia/532950995/the-culture-inside">www.npr.org/programs/invisibilia/532950995/the-culture-inside</a>. This is an hour-long podcast exploring the topics of subconscious beliefs and implicit racial bias, and discussing the pros and cons of the Implicit Association Test.
- National Alliance on Mental Illness (NAMI) "Stigma-Free" pledge: <a href="www.nami.org/Get-Involved/Pledge-to-Be-StigmaFree">www.nami.org/Get-Involved/Pledge-to-Be-StigmaFree</a>. This site offers a short quiz for participants to understand stigma against mental health issues, as well as resources to learn about mental health diagnoses and find support from others.
- Canada's Centre for Addiction and Mental Health free educational courses: <a href="https://moodle8.camhx.ca/moodle/">https://moodle8.camhx.ca/moodle/</a>. These are free, accessible webinars on general mental health topics, such as "Mental Health 101" and "Empowering Families Affected by Psychosis."
- Kirwan Institute and MTV's "Bias Cleanse": <a href="http://www.lookdifferent.org/what-can-i-do/bias-cleanse">http://www.lookdifferent.org/what-can-i-do/bias-cleanse</a>. This free program addresses three types of implicit bias around race, gender and anti-lgbta+. While these do not relate directly to mental health conditions, it is a good way for students to begin understanding and addressing the overall concept of "implicit bias." Participants can sign up for free daily emails, each containing a short, private activity to help them understand what stereotypes they may hold.
- PDF (included in this packet) "The Stigma of Mental Illness is Making Us Sicker: Why Mental Illness Should Be a Public Health Proirity," by Michael Friedman, Ph.D., 2014.