

3. categories & containers: unpacking our biases



The purpose of this module is to understand how and why we judge.

1. welcome

2. gratitude

3. about this training

4. table of contents

5. our focus

6. core values

7. life application story

8. connection & over-relating

9. worldview

10. we all judge

11. categories & containers

12. implicit bias

13. confirmation bias

14. certainty & uncertainty

15. perception

16. challenging biases with research

17. putting it all together: supporting others

18. core values assessment

19. summary

20. next steps

21. module references

EXIT the module

1. welcome



welcome to
WHERE WE ARE AT
categories
& containers:
unpacking
our biases



Welcome to **Where We Are At**, a training course for Provincial Peer Support Workers. We're glad you're here! This course is made up of 16 modules, all designed to support your training in peer support work.

The purpose of module **3. categories & containers: unpacking our biases** is to understand how and why we judge.

Any of the modules in this training can stand alone, but you'll notice they are very interconnected. All of the concepts and core values have many layers, and they will look a little different when you see them through the lens of different topics. For example, self-determination will look a little different when we look at it through the lens of learned helplessness, grief and loss, or goal planning, but the main message will always be the same.

You will get to experience all of those layers and intersections when you move through each module of the training. Feel free to navigate back and forth between modules as you move along since learning never has to be linear. There will be references to other modules intersected throughout.

Thank you for joining us on this educational journey!

2. gratitude



Before we begin this new *learning* journey, we ask that you reflect on the following question:

What am I grateful for today?

We know that taking time to reflect can give us the clarity and strength to do what can sometimes be difficult emotional work.

Download the **reflection journal** below and use it to record your thoughts. Please don't rush. Take all the time you need. This journal will be used for several questions throughout the module.



M03_reflection-journal.pdf
65.8 KB

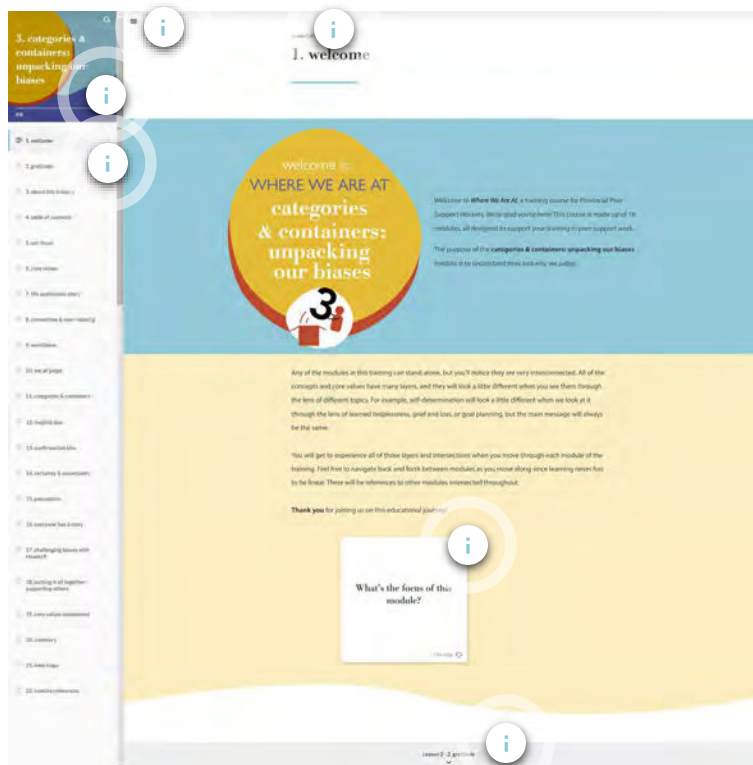


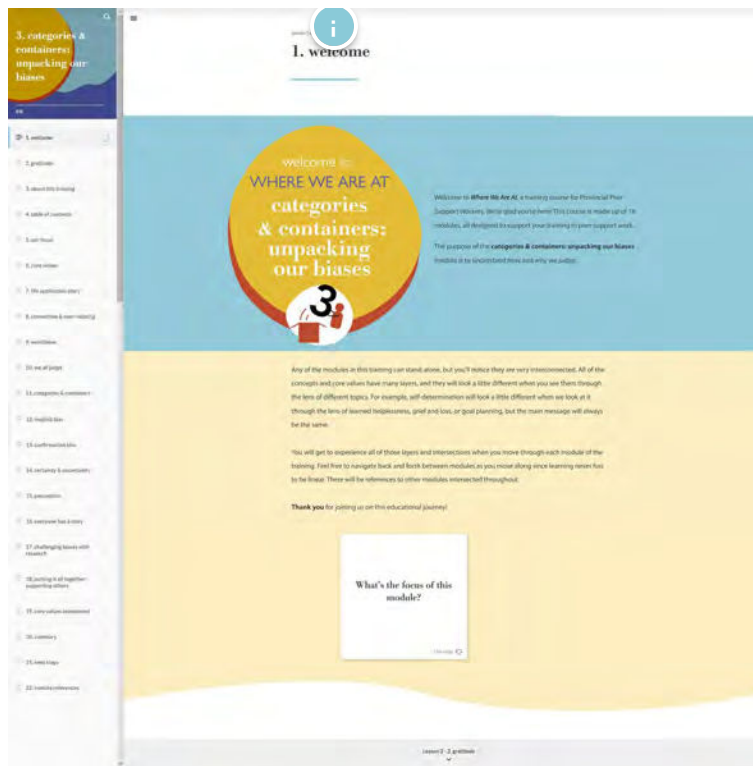
3. about this training

The course content has been guided by consultations that were held with peer support workers. It's with the utmost respect for their experience and wisdom that we share these learnings.

course navigation

You may have questions on how to use this course. We designed an interactive diagram to give you the chance to explore the different functions on the screen. Click the buttons below to learn more.





Lesson titles

Lesson 1 of 22

Above each lesson title, the lesson count is shown.

CONTINUE

reflection journal

As you discovered in the previous section, included in this training is a reflection journal. The journal is designed for you to use throughout the training. It's full of reflective questions related to the topics being explored that will get you engaging in the world around you with curiosity.

Feel free to use the journal in a way that works for you:

- 1 You can print it off and write in it or just use it to support reflective processing.
- 2 You can use the fillable PDF version and complete it online
- 3 You can write in your own journal, using the questions as guides

We encourage you to find a safe, comfortable spot to engage with these questions.

CONTINUE

where we are at

provincial peer support worker training curriculum

The *Where We Are At* educational curriculum includes 16 modules. You'll find a brief description of each below.

1. the foundations

An overview of all the practices and knowledge that will be transferable to all of the modules in this training.

2. peer support & wholeness —

Provides an introduction to peer support work and explores differences between the peer support role and other roles within the mental health and substance use systems.

3. categories & containers: unpacking our biases —

Helps you understand how and why we judge.

4. self-determination —

Looks at self-determination, the theory of self-determination and how peer support workers can support creating an ecology where people trust their own inner wisdom.

5. cultural humility —

Explores how to approach your peer support work through the lens of cultural humility and helps you understand how culture (and the destruction of culture) shapes our lives.

6. understanding boundaries & what it means to co-create them —

Examines boundary creation within the context of peer support, grounded in the core value of mutuality.

7. connection & communication —

Focuses on cultivating compassion and empathy, listening deeply to understand, and asking powerful questions to increase reflection and connection.

8. healing-centred connection: principles in trauma-informed care —

Brings together all the learnings from previous modules to support the creation of environments and relationships that are safe and trauma-informed.

9. social determinants of health —

Explores the social determinants of health and how social, economic and other factors lead to better or worse health outcomes.

10. supporting someone who is grieving —

Examines how to understand grief and loss in order to support someone who is grieving, without trying to “fix” or “save” them.

11. substance use & peer support —

Explores the principles and methodologies around the harm reduction approach to substance use disorders and some of the history around the criminalization of substance use.

12. mental health & supporting those in crisis —

Explores the mindset shift necessary to support someone through a crisis.

13. goal planning —

Focuses on how peer support relationships can support the creation and meeting of goals.

14. building personal resilience —

Explores ways to build resiliency, create wellness plans and practice self-compassion.

15. family peer support —

Explores family peer support work and how, by working from a place of shared lived experience, family peer support workers can create positive change for families by building long-term relationships based on trust with those supporting loved ones.

16. working with youth & young adults —

Explores the unique application of peer support principles to working with youth and young adults.



4. table of contents

Below you'll find a short overview of the topics you'll find in this module.

As you move through these topics, please remember you can always return to this page to revisit the main ideas being explored in each lesson.



life application story —

A scenario about recognizing our biases.

connection & over-relating —

Explores the power of connection and how it contrasts to the experience of over-relating.

worldview —

Explains the many factors that influence the way you see the world and those around you.

we all judge —

Explains how we all judge others, and how recognizing this tendency is the first step to dismantling judgements.

categories & containers —

Describes the need to categorizing information and data, as well as the need to mindfully examine, challenge and rethink how we do so.

implicit bias —

Explains the meaning of implicit bias and gives examples of how this type of bias can affect our lives.

confirmation bias —

Describes the meaning of confirmation bias.

certainty & uncertainty —

Explains to roles of certainty and uncertainty in our belief system.

perception —

Looks at the need to examine assumptions.

challenging biases with research —

Examines some biases found in the care system about recovery.

putting it all together: supporting others —

Describes the power that comes from feeling heard by others.



5. our focus

What's the focus of this module?

All human beings judge. In fact, our brains are wired that way to help us make sense of the world. The purpose of this module is to understand how

1 of 1

after reviewing this module, you'll be able to...



Explain that a worldview is a way of organizing experiences into categories and containers so that we can function in the world.



Demonstrate the skills to begin to mindfully pay attention to biases that were previously unconscious.



Examine your own worldview, and articulate how your brain is wired to judge.

6. core values

The following core values are essential for peer support work. At the end of this module, you'll be asked to decide which ones are key to this topic.

hope and wholeness for all
THIS IS THE OVERARCHING VALUE OF PEER SUPPORT.

CORE VALUE	Moving towards hope and wholeness for all:
ACKNOWLEDGEMENT	All human beings long to know and be known—to be seen for who we are, and deeply heard, without someone trying to fix or save us.
MUTUALITY	The peer relationship is mutual and reciprocal. Peer support breaks down hierarchies. The peer support worker and the peer equally co-create the relationship, and both participate in boundary creation.
STRENGTH-BASED	It is more motivating to move towards something rather than away from a problem. We intentionally build on already existing strengths. We thoughtfully and purposefully move in the direction of flourishing, rather than only responding to pain and oppression.
SELF-DETERMINATION	Self-determination is the right to make one's own decisions, and the freedom from coercion. We support the facilitation and creation of an environment where people can feel free to tap into their inner motivation. Peer support workers don't fix or save. We acknowledge and hold space for resilience and inner wisdom.
RESPECT, DIGNITY AND EQUITY	All human beings have intrinsic value. Peer support workers acknowledge that deep worth by: <ul style="list-style-type: none">• practicing cultural humility and sensitivity• serving with a trauma-informed approach• offering generosity of assumption in communication and conflict

- mindfully addressing personal biases

Peer support is about meeting people where they are at and serving others with a knowledge of equity.

BELONGING AND COMMUNITY

Peer Support acknowledges that all human beings need to belong and be a part of a community. Peer support recognizes that many people have barriers that keep them from developing community. We actively work towards deconstructing those social blockades that prevent inclusion and acceptance. Peer support workers serve with a social justice mindset, and intentionally practice empathy, compassion & self-compassion.

CURIOSITY

We are always intentional about how curiosity and inquiry support connection, growth, learning and engagement.

This curiosity isn't fueled by personal gain but by a genuine interest in connection. We encourage curiosity while respecting the boundaries and protecting the privacy of the people we support.

We are continually curious, but not invasive, while challenging assumptions and narratives. We ask powerful questions. We offer generosity of assumption to those who think differently than we do. We know that listening and asking questions are more important than providing answers.

***Note on the meaning of the term "generosity of assumption" from the glossary of terms:** *Assumptions happen when we don't know the whole story, and allow our brains to fill in the blanks. Often we make negative assumptions about people or situations. Generosity of assumption means that we extend someone the most generous interpretation of their intent, actions, or words.*

7. life application story



Check out this scenario with Cassandra and Taylor.

scenario —

Cassandra really valued her peer support worker job. She loved that she was doing well and was in a place where she was able to support others.

She had been meeting up with her peer, Taylor, for several months. They discovered that they both enjoyed cycling, so today they had gone for a bike ride along the river and stopped to grab an ice cream. Taylor had been recovering from a mental health crisis for more than a year now, and was focused on taking things one day at a time.

“What have you been up to this week?” asked Cassandra.

“Nothing much. Just been doing a bit of cycling and hanging out at home.”

“So have you applied to any of those jobs you were interested in?” asked Cassandra.

“No, not yet,” replied Taylor. “I’m worried I won’t be able to handle the stress.”

“What about part-time?”

“Yeah. Maybe.”

“I’m sure you’ll be able to handle it. It might be challenging at first, but you’ll get used to it. I remember feeling scared to start anything new after getting sick, but it started to get easier.”

Cassandra would never say this out loud, but she didn’t really understand Taylor’s lifestyle and felt Taylor was being somewhat lazy. After her own mental health crisis, she returned to work fairly quickly and found that the structure and routine really helped her own recovery. It seemed like Taylor never did anything but hang out at home. She didn’t work or do many activities with friends, and every week it was the same story. She kept encouraging Taylor to join groups, volunteer or try some new hobbies since that’s how Cassandra maintained her own well-being. She felt that Taylor wasn’t doing enough to support her own recovery.

After all of Cassandra’s pushing, Taylor eventually found a job but quit shortly after as she wasn’t prepared for the level of stress. After taking a few more months to feel grounded in her own recovery, she found a part-time job that suited her personality much better. She had taken the time she needed and was much better equipped to manage the new challenges.

Cassandra realized that everyone heals at their own pace and that doing “more” isn’t necessarily better. She reflected on her own upbringing, and how productivity, work ethic and “being busy” were valued above things like health and well-being. While these things were still important to Cassandra, she gained an awareness that these were her own values and shouldn’t be forced on anyone else.

CONTINUE

questions for reflection

Answer these questions in your reflection journal.

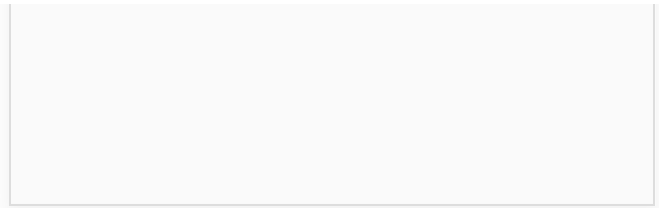
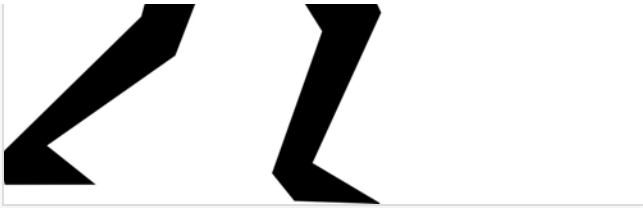


Can you relate to Cassandra in this scenario? Have you ever been frustrated by someone else's lack of progress?

1 of 4



Have you been in Taylor's shoes? Have you felt pushed by someone else? How did that make you feel?



2 of 4



How was work valued in your family of origin? How does that part of your upbringing affect you today?

3 of 4



Think of two of your strongly held beliefs. We all have them! For example, beliefs about: work, religion, money, family, health and fitness, and politics.

- **Why are these beliefs so important to you?**
- **What in your past experience has contributed**

8. connection & over-relating

“It’s such an amazing feeling when someone lets you in and you develop relationships.”

Perry PSW

connection

Dealing with a mental health diagnosis or problematic substance use often brings up feelings of disconnection, isolation and shame, and when we slip into this place – this world of isolation – we feel like no one could possibly understand our struggles. We feel alone.

Then one day we have the opportunity to meet someone who sees us – really sees us – and says, “Me too.”
“I understand.”

Connection begins to form. We feel acknowledged. The shame we’ve been holding onto slowly begins to melt away and we realize we aren’t so alone after all. We begin to climb out of our cave of isolation, find opportunities to give to those around us, and our compassion grows exponentially.

This is one of the main reasons peer support is so effective: it harnesses the power of shared experience. It’s rooted in mutuality. It gives us the opportunity to cultivate compassion for someone else and offer self-compassion and kindness to ourselves. It also allows us to be treated with empathy. We get to know and be known.

This is peer support in action.

Shery Mead, author of “Intentional Peer Support: An Alternative Approach,” describes peer support and mutuality this way:

This might not sound like a big deal, but for many people relationships have become all about getting: telling your problem story and then getting help with it. There is little, if any, emphasis placed on giving back. That’s a big deal!!! Service relationships are like a one-way street and both people’s roles are clearly defined. But in ‘regular’ relationships in your community, people give and take all the time. No one is permanently on the taking side or the giving side. This exchange contributes to people feeling ok about being vulnerable (needing help) as well as confident about what they’re offering. For many of us, being the role of ‘getter’ all the time has shaken our confidence, making us feel like we have nothing worthwhile to contribute. Peer support breaks that all down. It gets complicated somewhat when one of us is paid, but modeling this kind of relationship in which both of us learn, offers us the real practice we need to feel like a ‘regular’ community member..’ (Mead, 2008, p.7)

This is peer support in action.

Shery Mead, author of "Intentional Peer Support: An Alternative Approach," describes peer support and mutuality this way:

This might not sound like a big deal, but for many people relationships have become all about getting: telling your problem story and then getting help with it. There is little, if any, emphasis placed on giving back. That's a big deal!!! Service relationships are like a one-way street and both people's roles are clearly defined. But in 'regular' relationships in your community, people give and take all the time. No one is permanently on the taking side or the giving side. This exchange contributes to people feeling ok about being vulnerable (needing help) as well as confident about what they're offering. For many of us, being the role of 'getter' all the time has shaken our confidence, making us feel like we have nothing worthwhile to contribute. Peer support breaks that all down. It gets complicated somewhat when one of us is paid, but modeling this kind of relationship in which both of us learn, offers us the real practice we need to feel like a 'regular' community member...' (Mead, 2008, p.7)

CONTINUE

over-relating

A potential shadow side to this beautiful sense of connection between us, as peer support workers, and those we support can be a tendency to over-relate. Over-relating means assuming we have more similarities with a peer than we actually do. This happens because we have commonalities with that person's experience and tend to fill in the blanks of what we don't know with assumptions that stem from our own perceptions and worldview.



For example, a peer support worker named Sam starts working with a man named Bal, and in the process, they figure out they both have diabetes. This is a powerful point of connection. They both feel like they have found someone who understands a big struggle that other people in their lives just don't get – the struggle to face a disease that can be silent, debilitating and socially isolating.

But what if over-relating starts creeping into the relationship? What if Sam starts assuming that Bal's experiences are the same as his? What if Sam starts giving advice to Bal about managing his diabetes without considering that Bal's situation is quite different from his own?

In fact, Bal's situation is not much like Sam's at all. Bal uses insulin. Sam doesn't since he is able to manage his blood sugar with diet, exercise and medication. Sam runs five miles a day, but Bal has an old knee injury from when he was a teenager that prevents him from running. Bal and Sam come from different cultures. Bal's family and extended family are very close, and traditional cultural foods are always an important part of his everyday family life. Sam's family lives across the country and he only sees them once every few years, and even that feels like too much to him.

Even though Sam and Bal have some experiences in common, the “me too” that started their connection can easily break down if Sam over-relates with Bal. In fact, the more Sam makes assumptions about Bal’s life and gives advice without considering their differences, the more opportunity their relationship has for disconnection, misunderstanding and resentment.

Instead, Sam and Bal can choose to harness the connection that comes from sharing the experience of diabetes, be curious about other points of connection in their lives, while also being mindful of the differences. This approach will help their relationship grow.

One practice that will surely keep their relationship from growing is advice-giving. Advice-giving, done openly or subtly, can cause disconnection. Advice is always based on our experiences and worldview, so when we give advice, we’re unintentionally stealing someone’s self-determination. You can read more about advice-giving and self-determination in the self-determination module.

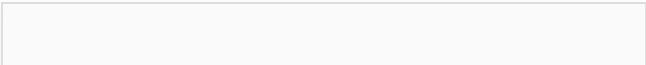
questions for reflection

Answer these questions in your reflection journal.



Think about one of the first times you felt that “me too” connection with someone. How did you feel when someone shared that they had a similar lived experience as you? How did that feel in your body?

1 of 2





Have you ever been in Bal's position and felt like someone was making assumptions about you without really listening?

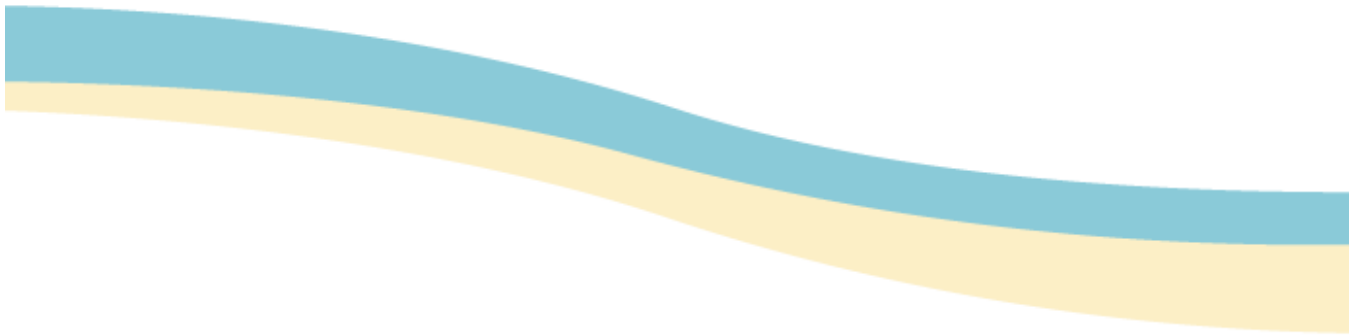
2 of 2

CONTINUE

When we communicate with others, it's essential to be aware that everything we say comes from what we already know and everything we hear is also filtered through what we already know.

**We can't really begin to hear others
unless we choose to listen differently.
This means listening from a place of
curiosity rather than a place of knowing.**

We can't connect deeply with others unless we're aware of our tendency to judge others based on the limitations of our own worldview and perceptions. Only then we can choose to hear another person's truth.



9. worldview

“Every person carries in his head a mental model of the world – a subjective representation of external reality.”

Alvin Toffler

CONTINUE



Simply put, your worldview is the lens through which you see the world. Everything we encounter from information, to conversations, to situations is filtered through our worldview.

An unexamined worldview is invisible to us, because it's simply our "truth."

In this module, we'll never say that one person has a "better" or "more or less evolved" worldview than another. That's not our purpose. We simply want to explore this topic as a way to understand why we all judge, how our judgements and biases are formed, and how we can be more aware of our perspectives when we interact with others.

Your worldview is made up of literally every small and large experience in your life. These experiences come together to shape the way you think, what you believe, and how you perceive the world around you. No two people have exactly the same worldview. Even when we encounter something similar, we never experience it exactly the same way, because our experiences are affected by our unique perceptions.

These are some things that make up our worldview:

- Childhood experiences – and there are many!
- Race
- Exposure to other races
- Exposure to the worldview of others around you
- Cultural background and identity
- Subcultures you are involved in, like sports, music and the arts
- How you were raised: two parents, single parent, blended family, extended family, family friends, foster care
- Siblings, birth order
- Socioeconomic position – as a child and as an adult
- Goal achievement
- Physical health
- Relationship with substances like alcohol or drugs
- Mental health
- Experience of death or loss
- Experience of trauma
- Gender & sex

- Village, town or city where you grew up
- Country you live in, now and in the past
- Religious beliefs, both when you were young and now
- Political beliefs
- Experience with nature
- Social experiences from an early age to the present moment
- Any experiences of bullying or mistreatment
- Experiences with food, including food scarcity, or having everything you have ever needed
- Everything you read, listen to, watch, including all forms of media and the news
- Educational experiences: schools you attended, degrees you hold, attitudes towards education in your family of origin
- Work experience and work ethic

Note that this list is very far from exhaustive!

CONTINUE

question for reflection

Answer this question in your reflection journal.



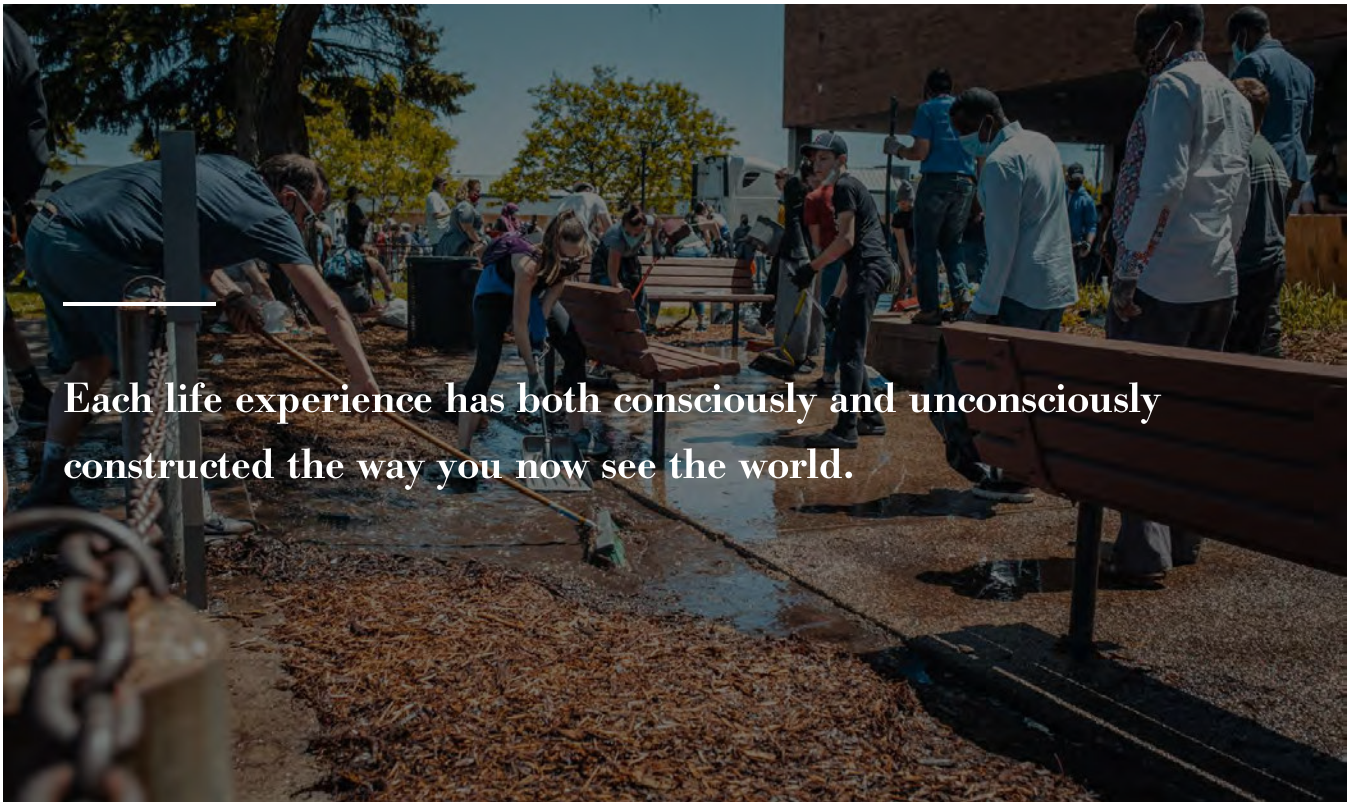
What are some experiences that make up your worldview? Pick the top 10 that come to your mind.

1 of 1

CONTINUE

Our worldview begins to form very early in life and is largely influenced by experiences that happen outside the realm of our choice and control. We can free ourselves of this inherited point of view, but only if we're willing to wrestle with the deep questions needed to thoughtfully explore the assumptions and biases that created it in the first place; only then can our worldview expand.

In this module, we will explore the wrestling and questioning that is needed to unpack our worldview, and from there, the tools needed to challenge the judgements, biases, and assumptions that make up that worldview.



Each life experience has both consciously and unconsciously constructed the way you now see the world.

CONTINUE

It's important to note the powerful impact collective, community, family and generational experiences have on our worldview. Caregivers – consciously or unconsciously – pass their beliefs, fears and trauma down to the children they are caring for. Intergenerational trauma, for example, happens when both the psychological and physiological effects of trauma are passed down from generation to generation.

We explore this idea more in module **8. healing-centred connection: principles in trauma-informed care.**



CONTINUE

Let's look back at our life application story:

scenario: Cassandra and Taylor —

Cassandra really valued her peer support worker job. She loved that she was doing well and was in a place where she was able to support others.

She had been meeting up with her peer, Taylor, for several months. They discovered that they both enjoyed cycling, so today they had gone for a bike ride along the river and stopped to grab an ice cream.

Taylor had been recovering from a mental health crisis for more than a year now, and was focused on taking things one day at a time.

"What have you been up to this week?" asked Cassandra.

"Nothing much. Just been doing a bit of cycling and hanging out at home."

"So have you applied to any of those jobs you were interested in?" asked Cassandra.

"No, not yet," replied Taylor. "I'm worried I won't be able to handle the stress."

"What about part-time?"

"Yeah. Maybe."

"I'm sure you'll be able to handle it. It might be challenging at first, but you'll get used to it. I remember feeling scared to start anything new after getting sick, but it started to get easier."

Cassandra would never say this out loud, but she didn't really understand Taylor's lifestyle and felt Taylor was being somewhat lazy. After her own mental health crisis, she returned to work fairly quickly and found that the structure and routine really helped her own recovery. It seemed like Taylor never did anything but hang out at home. She didn't work or do many activities with friends, and every week it was the same story. She kept encouraging Taylor to join groups, volunteer or try some new hobbies since that's how Cassandra maintained her own well-being. She felt that Taylor wasn't doing enough to support her own recovery.

After all of Cassandra's pushing, Taylor eventually found a job but quit shortly after as she wasn't prepared for the level of stress. After taking a few more months to feel grounded in her own recovery, she found a part-time job that suited her personality much better. She had taken the time she needed and was much better equipped to manage the new challenges.

Cassandra realized that everyone heals at their own pace and that doing "more" isn't necessarily better. She reflected on her own upbringing, and how productivity, work ethic and "being busy" were valued above things like health and well-being. While these things were still important to Cassandra, she gained an awareness that these were her own values and shouldn't be forced on anyone else.

reflections on this scenario

Cassandra has a very defined worldview about work that has influenced her own work ethic and spilled over to how she is supporting Taylor. Before she takes the time to examine her perceptions about work, she pushes Taylor to get a job even though she isn't ready.


Cassandra's perceives her personal "truth" as a universal "TRUTH." She isn't able to see that her worldview is influencing the support she is giving Taylor. Without realizing it, she is taking away Taylor's self-determination.

This pushing from Cassandra could have easily created disconnection in the relationship. Instead, their interaction ultimately creates an opportunity for Cassandra to examine her worldview. She reflects on her strongly-held beliefs about work and realizes they are influenced by her family of origin. She becomes aware that not everyone approaches work the same way she does. She begins to understand that other people have different perspectives because they've had different experiences. For example, she discovers that Taylor had experienced some trauma at work that had created a barrier to getting back into the workplace, and that she needed to feel equipped and ready before she could get another job.

Despite Cassandra's pushing, Taylor figures out what's right for her. Eventually, she is able to practice self-determination. In her own time, she gets a job that meets her needs.

This bias about work ethic is something Cassandra will need to remind herself of regularly when she works with people. Such strongly held beliefs can be very sticky. They are rooted in our unconscious until we do the work to self-examine and change our perspective.

Like Cassandra, we all need to examine our strongly held beliefs regularly to make sure they don't create a disconnection with the people we support.



We all have a unique worldview. What we believe and what we perceive are distinctive to us because no one else has shared all of our life experiences. We all have reasons for believing what we believe. Our worldview tells the story of our own unique blend of experiences.

When we take a mindful approach to examining our worldview, we learn to see life, others and ourselves differently. This self-examination supports us to make paradigm shifts in regards to how we relate to the world and how we choose to support our own well-being.

We'll dig into self-care in module **14. building personal resilience**.

“We see the world, not as it is, but as we are—or, as we are conditioned to see it.”

Stephen R. Covey,

The 7 Habits of Highly Effective People: Powerful Lessons in Personal Change

CONTINUE

learned helplessness & worldview



As we explore in the **peer support & wholeness** module, learned helplessness occurs when someone is repeatedly exposed to a stressful situation or environment outside of their control. No matter what they try, they can't change it, and, over time, they stop trying. They perceive the situation to be hopeless even when opportunities for change emerge or present themselves.

Consider the conditioning of learned helplessness and how it relates to worldview. When we seek understanding for what happened to someone, we begin to feel empathy and compassion for them, while supporting them to take the risk to challenge their worldview in a way that feels safe to them.

CONTINUE

another definition of worldview

In the article "What is a Worldview," Ken Funk defines worldview this way:

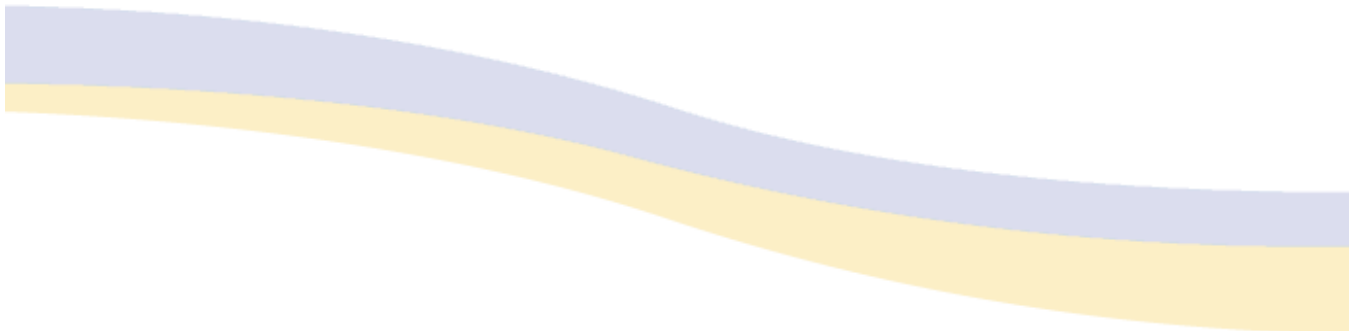


worldview

A worldview is the set of beliefs about fundamental aspects of Reality that ground and influence all one's perceiving, thinking, knowing, and doing. One's worldview is also referred to as one's philosophy, philosophy of life, mindset, outlook on life, formula for life, ideology, faith, or even religion.

1 of 1

It's worth keeping this alternate definition in mind as you ponder this important topic.



10. we all judge

We judge.

Everyone does.

It's impossible to be non-judgemental because our brains are actually wired to judge. Without the ability to judge we wouldn't survive. We'd have to relearn basic things every day. Functioning in the world would be really challenging.

If the word “judge” bothers you, consider any of these words instead:

discern, assess, evaluate, determine, distinguish, intuit, conclude

1 of 1

All of these words have similar root meanings.

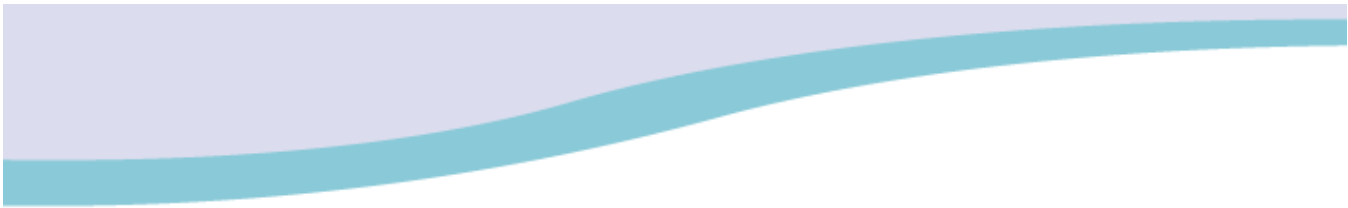
We choose to avoid using the term “non-judgemental” in the B.C. Peer Support training program because it’s virtually impossible to not judge. Denying the fact that we all judge actually creates a barrier to dismantling our assumptions and biases and we end up more likely to get lost in our big sweeping judgements. When we deny that we judge, we get stuck in our own worldview. We unconsciously think that our small “t” truths are universal BIG “T” TRUTHs for everyone.

That said, we can learn to be more aware of the judgements, assumptions and biases that stem from our worldview.

When we’re aware of our very basic human tendency to judge, we can choose to:

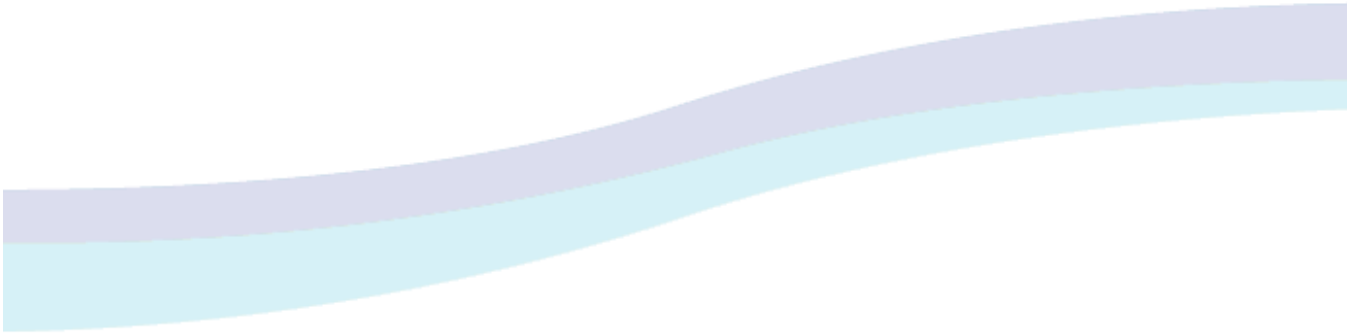
- See our worldview as a cumulation of our past experiences
- Notice our judgements
- Put our judgements aside
- Explore someone else’s experience and worldview
- Seek to understand others instead of trying to convince others of your truth

We all have unconscious or implicit biases. Realizing that we have them because of our past experiences (worldview) is the very first step in dismantling them.



It's our goal to approach this topic as a normal human function that requires mindful attention. We all have the capacity to manage our judgements, assumptions and biases if we try.

Let's go deeper into examining how this process works.



11. categories & containers



Which do you prefer:

- **Puppies or kittens?**
- **Dogs or cats?**
- **The book or the movie?**
- **Dark chocolate or milk chocolate?**
- **Swimming in a pool or the ocean?**
- **Texting or calling?**
- **Star Wars or Star Trek?**
- **Coffee or tea?**
- **Solitude or a party?**

Many of us have strong opinions about some of the choices listed above, even though they are quite innocuous. Some people might feel stronger than others, depending on past experiences. Did your opinion come quickly or did you have to pause and think? If your opinion came quickly, why? If you had no opinion, why not?

The ability to create categories is a huge developmental milestone for babies. Babies need to learn EVERYTHING – from dog, cat, apple and cup, to all parts of the body. As we grow, we continue to need categories and containers so we can filter information and stimuli that come our way. What if we had to relearn what a mug or a couch was every single day? What if we had to look up directions every time we went to work or to the grocery store? It would be exhausting. Not to mention being gripped by fear and constant uncertainty each day as we encounter strange new things that don't make sense.

Categories and containers are necessary. We NEED them to make sense of the world. The creation of categories and containers increases certainty and can actually help calm our nervous system.

But these categories can become a huge problem when they become rigid and mindless.

NOTE: The topic of uncertainty is covered in module **1. the foundations**.

CONTINUE

organizing data

Data comes at us every second of the day. The only way to make sense of this information is to create containers and categories. If we didn't do this, we'd feel absolutely overwhelmed.

The creation of categories helps us construct meanings from what we see, hear, feel, smell and taste. Most of these meanings are automatic. When we walk into a room and see a chair, we know how to sit down. With little to no conscious assessment of the structure, we sit down, trusting that it will support us.

When we take a trip to a new city, we see how much our basic lives revolve around existing, unexamined categories and containers. Travel challenges our sense of what's "normal" and forces us to rethink our routines and schedules.



[Tarpon Springs Depot](#)

For example, have you ever stayed at a friend's house, a hotel, or an Airbnb? At home, you likely have a regular routine when you wake up in the morning, perhaps involving coffee and a shower. When you travel, you can't help but experience a disruption to this routine. Perhaps you fiddle for 5 minutes with a coffee maker you don't know how to use, only to give up and decide to visit a cafe instead. Then you hop in the shower and stare at the faucet for a long time trying to figure out how to get it to work... only to give up and have a bath. Everything is thrown off, and you're suddenly conscious of your normally unconscious categories and containers.

bigger than coffee makers & showers

However, this issue of categorization is bigger than simple stimuli like coffee makers and showers. Our brains work the same way to categorize more abstract ideas and beliefs as well. When something happens to us in life, we put a meaning to it, and that meaning informs our worldview.

For example, Sarah was a middle-aged woman who had lived her life without ever having used a computer. Her family couldn't afford one when she was in school, and she was told by one of the teachers she admired that boys were better at technology than girls. As she grew older, she heard stories of how computers can be used to steal identities and she was terrified that if she ever did learn to use one, something like that would happen to her. The thought of learning how to use one filled her with dread and fear.



Whenever she got the courage to try to learn, she grew frustrated and angry easily. The meaning she gave to her experience was that a woman her age would never be able to learn computers. This attitude carried over to other forms of technology, like smartphones and tablets. As the years went on, Sarah's fear only increased. She saw more and more people using computers, and it made her more and more anxious.

She began avoiding any places where computers were used, like libraries, stores and banks. She felt like she was stuck in the past, and her fear was preventing her from ever being able to keep up with the times. This affected her career choice. It also influenced how she raised her children.

What Sarah didn't consider was that no one encouraged her to use computers. If she'd had a different experience, or had challenged the meaning she had given to her experience of failing, she may have realized that she could definitely manage computers pretty well.

Our belief system is made of meaning that we give to categories such as:

- Individual values
- What it means to be a good person
- Importance of family
- Expectations of friendship
- Expectations of romantic relationships
- Belief in God, religion or atheism
- Political beliefs
- Role education plays in one's life
- Feelings about conflict
- Work ethic
- Beliefs about our own and other peoples' skill levels
- Beliefs we have about people of other races, genders, ages and abilities
- Relationship with money

These beliefs are deeply embedded in our subconscious and they guide us when we make decisions. But while categories and containers are needed, they can be a problem if we forget we have them. We must continue to examine them, otherwise, we get stuck seeing the world from a single perspective, and when we do that, we're more apt to make big, sweeping judgements about others without even realizing we're doing it. These judgements then become our capital "T" TRUTHS we believe should apply to everyone, instead of our own personal "truths" that are there to help us create meaning and organize all the information that comes our way.

The goal is to:

- 1 Be aware we have a worldview
- 2 Be mindful these categories and containers exist
- 3 Mindfully examine our worldview, categories and containers so we can choose to expand them. By doing so, we'll then intentionally see the world differently.

Questioning our strongly held beliefs and expanding our categories and containers doesn't mean we have to change our minds. The act of self-reflection and questioning is more important than any conclusions we come to. In fact, examination, not change, is the goal. And perhaps in the process of examination, we might decide to change.

CONTINUE

connecting with others while acknowledging our worldview

Relationships can be ripe for misunderstandings because, when we come from different worldviews, it can be hard to see eye to eye.

A practice that supports the building of strong connections is to come at the relationship from a place of not knowing. Get curious. Instead of assuming others have the same perspective and worldview as us – and, when we find out they don't, fighting to convince them why we're right and they're wrong – learn about their worldview. Seek to understand and empathize with it first. Cultivating empathy supports us to see our own worldview and choose to try to see someone else's.

An aspect of empathy is perspective-taking. Challenging your assumptions and biases means we need to put ourselves in the other person's shoes.

In her lecture entitled, "Creativity and the Evolution of Culture," Harvard professor Dr. Ellen Langer says:

When you are mindful, you are actively noticing things. You are actively drawing distinctions, forming categories. When you are mindless, you're relying on the categories and distinctions that you have drawn in the past. When you're mindful, you're sensitive to context. When you're mindful your behavior does not have to be chaotic. It can be rule and routine guided – it's just not rule and routine governed.

Dr. Ellen Langer

questions for reflection

Answer these questions in your reflection journal.



In reading this section, do you think it's easier to notice other people's biases and assumptions than it is to notice your own? Why or why not?

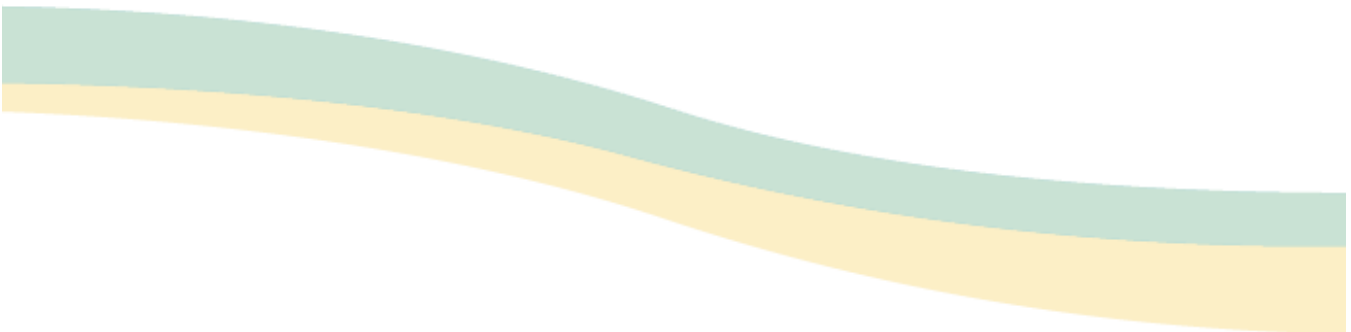
1 of 3



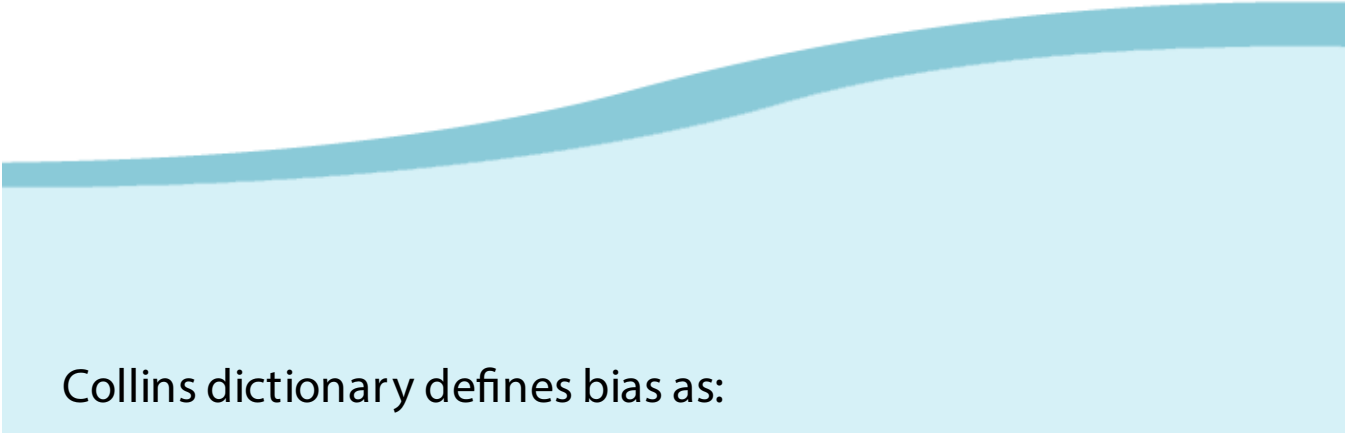
What can you do to begin noticing when your worldview is impacting your interactions with others?



Consider the self-determination module. Why do you think awareness of your own worldview and assumptions and biases is important when supporting someone's self-determination?



12. implicit bias



Collins dictionary defines bias as:

bias

a tendency to prefer one person or thing to another, and to favour that person or thing.

1 of 1

Implicit has a similar meaning as unconscious.

Implicit biases show up when our unconscious thoughts impact our words and actions automatically.

The Perception Institute says:

The mind sciences have found that most of our actions occur without our conscious thoughts, allowing us to function in our extraordinarily complex world. This means, however, that our implicit biases often predict how we'll behave more accurately than our conscious values.

CONTINUE

let's look at some examples

Here's a common riddle popular a few years ago:

A father and son are in a car crash and are rushed to the hospital. The father dies. The boy is taken to the operating room and the surgeon says, "I can't operate on this boy, because he's my son." How is this possible?

Where did your mind go when you read this riddle? Did you get it right away, or did it take a second to realize that the surgeon was the boy's mother? Or what if the surgeon was the boy's other father and his parents were in a same-sex marriage?

This uncovers some possible implicit biases that people can have. Women today are able to choose many different careers. However, there's still a significant gender imbalance in fields such as medicine, tech and engineering, as well as in leadership positions overall. Women hold, on average, about 15% of CEO jobs in Canada.



Conversely, consider a family where the father stays home with the kids. Do you think he might encounter bias if he chooses to get involved in daytime parent groups?

Many people still struggle with unconscious or conscious bias when it comes to same-sex partnership and parenting. Consider how schools might speak to guardians and perhaps call them "mom and dad," not taking into account that some children have two moms, two dads or are being raised by a grandparent or other family member.

Implicit bias is also very strong in racial issues. This bias shows up in so many systemic ways, as we cover in other parts of this training. You can learn about one tragic example in the box below .

ignored to death —

Brian Sinclair was a 45-year old Indigenous man from Manitoba. Mr. Sinclair was referred to the emergency department of the hospital by his family physician for a treatable bladder infection. He came by taxi and entered the ER in his wheelchair. Thirty-four hours later, he died after being ignored and untreated. An inquiry concluded that workers thought he was:

- Drunk and “sleeping it off”
- Had already been discharged and had nowhere to go
- Homeless and in the ER avoiding the cold

A later inquiry determined he was killed by racism. The tragic episode showed how implicit biases throughout the system led to a man’s death.

“We all know Mr. Sinclair’s death was preventable, and we failed Mr. Sinclair as a health-care system,” said Réal Cloutier, interim president of regional health care authority. “... We need to understand that the perceptions we have, the assumptions we make about people all impact about how we deliver care to individuals, and we really have to come to terms that systemic racism has [an impact] on the way we deliver health-care services.”



Below are some other examples of implicit bias:

Many people have a bias that in the field of medicine, men should be doctors and women nurses.

Another bias is that women are better in the arts and men in the sciences.

If you see a very tall Black male, does your mind think, "Wow! He must be a great basketball player?" What if he's lousy at basketball, but instead a gifted artist?

People with a mental health diagnosis or who are using substances in a potentially harmful way often experience bias based on the stereotype that all mental and physical problems are caused by the drug use rather than deeper issues that were already present.

There can be a bias that people who live in cities are smarter than those who live in suburban or rural areas.



People in wheelchairs and others who experience physical disabilities face unconscious bias on a regular basis, as do people who are neurodivergent.

BIPOC (black, Indigenous, and people of colour) people and women are also likely to experience bias in the hiring process. There have been studies done where the exact same resume gets sent out with different names attached, but the interview results are very different. The resumes with white male names get the most attention and are more likely to be called back for an interview. Conversely, the names that appear BIPOC or typically feminine are more likely to be overlooked. Since the resumes are exactly the same, and, according to Workopolis, an employer spends about 11 seconds looking at a resume, this says that bias is the problem, not qualifications.

Similar biases show up in issues such as pay imbalances, promotions and leadership opportunities with BIPOC people and women.

Research shows neurodivergent people receive disproportionately negative judgements from allistic people. These first-impressions, also called "thin slice judgements," range from seeing an autistic person as being on drugs, being a sexual predator, as "creepy," or even as a school shooter. This forces autistic people to be defensive and protective. It also means they start at a disadvantage in any relationship. The following images are from a website called NeuroClastic.com.



another example of bias

This example comes from an actual peer support training. This particular group was very progressive. There were Indigenous participants who supported the group to challenge some racial biases and judgements. There were several LGBTQ2+ people in attendance who supported amazing dialogues about unpacking societal biases. It was a profound training that fostered powerful energy that would radiate out into the community long after it was over.



The last hour of the training was a celebration that drifted into a casual conversation. Somehow the conversation turned to air travel, and then to parents and how they overuse devices with their children, especially on airplanes. Many people were involved in that conversation, and people were quick to criticize and judge parents for allowing their children to use devices. However, the people who were commenting the most didn't have small children. Meanwhile, there were a few parents of small children in the room who saw this from a very different perspective. They pointed out that when you travel, people glare at you if your child is loud or cries. The solution? Give the child an iPad with some downloaded shows. Another possible scenario to help understand this issue: a parent turns on a device for their child when they desperately need a couple of hours to get a task done or have a moment's peace

How do you think those parents felt during this conversation? Biases and judgements show up in many different ways; they're not restricted to race or gender. Keep in mind:

- Having unconscious biases is normal and part of being human
- Even the most progressive people have implicit biases
- To minimize their impact, we can get curious about them, notice they are there, deconstruct them and let go of the shame attached

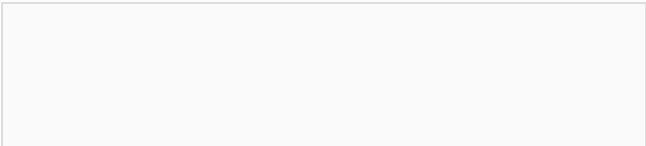
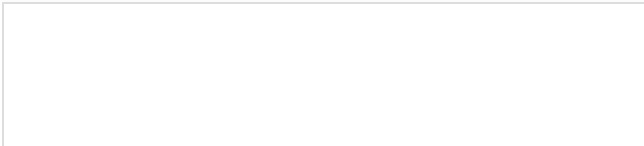
CONTINUE

questions for reflection

Answer these questions in your reflection journal.



What are some other examples of implicit bias?





What are some personal biases you are aware of?

2 of 3



In recent months, have you become more aware of some of your implicit biases?

3 of 3

CONTINUE

how are implicit biases formed?

We talked already about how the brain organizes information into categories and containers. We also covered how our life experiences and the information we consume form our worldview and impact the way we approach other people and situations. These important methods of organizing information also create implicit biases.

Keep this in mind when reflecting on implicit bias:

- Implicit biases are unconscious
- Implicit biases cause instant automatic reactions rather than thoughtful reflective responses
- Implicit bias is deeply embedded and shows up constantly in our everyday lives
- Every human being has implicit biases – EVERYONE

intuition

Cambridge dictionary defines intuition this way:

intuition

an ability to understand or know something immediately based on your feelings rather than facts.

A gut feeling or a strong hunch is another way to define this. Intuition is a fast, automatic, unconscious processing style.

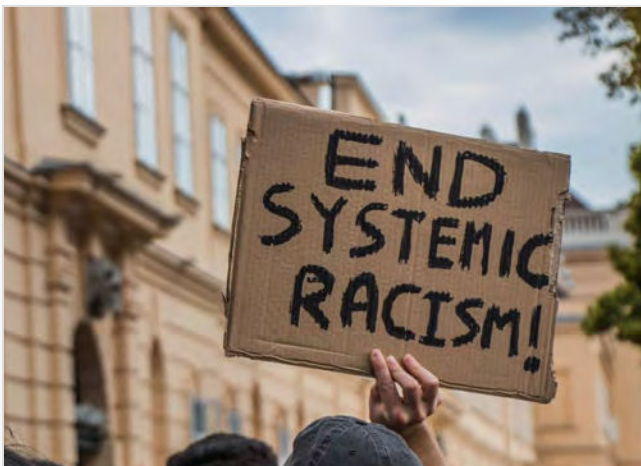
A common definition of intuition is deeply learned expertise that we can unconsciously rely on. In the harm reduction world this might look like a peer support worker at an overdose prevention site who has reversed hundreds of overdoses and can unconsciously rely on that lived expertise to respond quickly and decisively because to them the problem is well-understood. Intuition is like a gut feeling that helps us with decision making.

The danger of relying on our unexamined intuition when it involves other people is that we risk getting stuck in our biases without even realizing it. We think we are tapping into our expertise, but we are actually tapping into our unconscious biases. Consider the employer who spends 11 seconds reading a resume and “goes with their gut” and chooses the white male candidate.

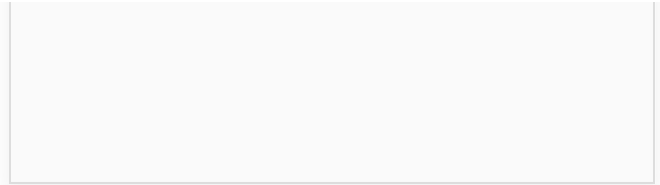
CONTINUE

question for reflection

Answer this question in your reflection journal.



Can you think of some situations where intuition can bring up implicit bias?



1 of 1

CONTINUE

Some things we can do to bring awareness to our implicit biases:

Understand the nature of bias. Dig into why they exist.

Make unconscious biases conscious: talk about them.

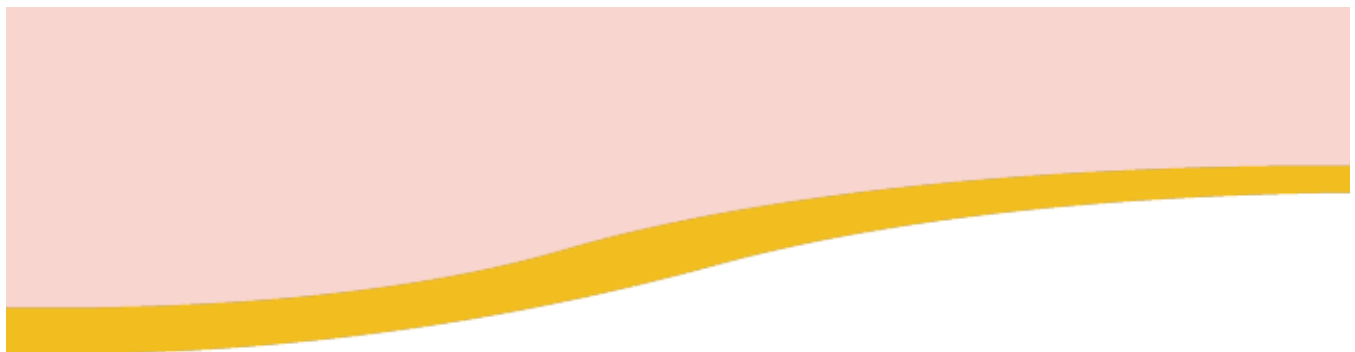
Let go of shame, as that can keep us stuck in our biases when we become defensive. But we do need to keep ourselves accountable to change and shift our biases.

Seek out people who are different from you. Spend time in communities that are different than yours.

Seek out information that supports you to stretch your beliefs. Don't fall prey to confirmation bias by only seeking out information that's aligned with your pre-existing beliefs.

Don't fall into stereotype-based thinking, even if it seems like a silly non-issue. For example, be cautious about jokes that put people into stereotypes.

Seek out people who defy stereotypes.



question for reflection

Answer this question in your reflection journal.

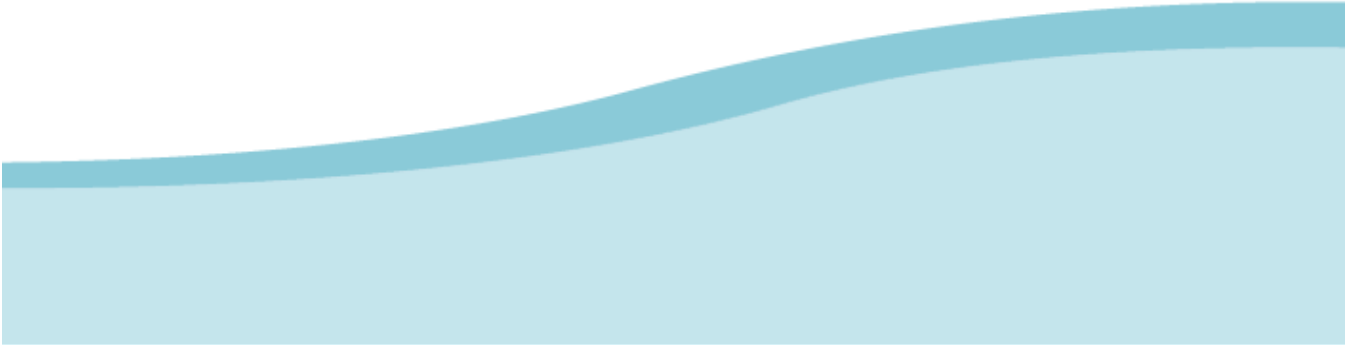


What will you do to continue to unpack your implicit biases?

1 of 1



13. confirmation bias



Confirmation bias is the tendency to look for and focus on evidence that supports existing beliefs, while ignoring or disregarding evidence that contradicts those beliefs.

Wikipedia defines confirmation bias this way:

confirmation bias

Confirmation bias is the tendency to search for, interpret, favour and recall information in a way that confirms or supports one's prior beliefs or values. People tend to unconsciously select information that supports their views, but ignore non-

Confirmation bias is part of what makes biases so sticky. Intentionally or not, we tend to seek out information that supports our views and that further solidifies our beliefs. We also know that social media algorithms purposely fill our newsfeeds with like-minded information, thereby confirming our biases even more. Expand the box below to learn more.

social media and confirmation bias

Social media algorithms are designed to show users content that is most likely to keep them engaged and on the platform. These algorithms use a variety of factors, such as past engagement, search history and demographic information, to determine what content to show a user. However, this can often result in confirmation bias, where users are only exposed to content that confirms their pre-existing beliefs and opinions. For example, if a user frequently engages with posts from a particular political viewpoint, the algorithm will show them more content from that same viewpoint, effectively creating an echo chamber. This can lead to users becoming more entrenched in their beliefs and less likely to consider alternative perspectives.

In addition, social media algorithms prioritize content that is more likely to generate engagement, such as posts that are controversial or emotional. This can result in the spread of misinformation and fake news, which can further reinforce users' pre-existing beliefs and opinions. For example, if a user sees a post that aligns with their political beliefs but is based on false information, they may be more likely to share it without fact-checking because it confirms their existing beliefs. As a result, confirmation bias can become amplified and lead to the polarization of society.



confirmation bias and peer support work

In the context of peer support work, confirmation bias can lead to several issues:

Limited perspective: Peer support workers may focus only on information that supports their beliefs and ignore information that challenges their beliefs. This can result in a narrow and limited perspective, which may not be helpful in providing comprehensive support to their peers.

Lack of empathy: Confirmation bias can also lead to a lack of empathy for peers who hold different beliefs or experiences. Peer support workers may dismiss or minimize the experiences of peers who do not align with their own views, which can make it harder for peers to feel understood and validated.

Ineffective support: When peer support workers are affected by confirmation bias, they may unintentionally provide ineffective support that reinforces their peers' negative beliefs or behaviours. This can prevent peers from making progress and may even cause harm.

Let's look at a specific example.

Tiffany's depression

Suppose that a peer support worker, Tiffany, who struggled with depression in the past and successfully managed it by incorporating exercise into her daily routine, has a pre-existing belief that exercise is the only solution for managing depression. Tiffany starts working with Alonzo, who is seeking support for his depression.

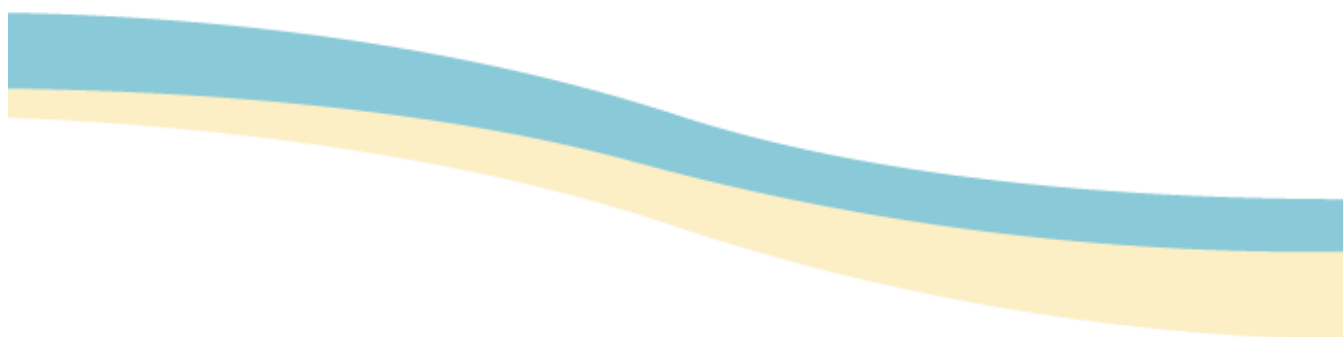
Due to her confirmation bias, Tiffany may unconsciously seek out information from Alonzo that confirms her belief that exercise is the only solution to depression, and ignore or dismiss any other factors that may be contributing to his mental health struggles. She may also selectively focus on the information that supports her belief and forget anything that contradicts it.



This can lead to a situation where Tiffany becomes overly fixated on exercise as the only solution for Alonzo's depression, ignoring other potential treatments or strategies that could also be effective. This may hinder

Alonzo's progress towards recovery, and he may feel that his concerns are not being fully heard or addressed. This could potentially strain their relationship if Tiffany continues to push exercise as the only solution and disregards Alonzo's input and experiences.

Peer support workers should strive to remain open-minded, empathetic, and non-judgemental. They should actively seek out different perspectives and be willing to consider information that challenges their own beliefs. By doing so, they can provide more effective and supportive assistance to their peers.



14. certainty & uncertainty



Movement is life.

In fact, our eyes need to move in order to gather information. Our fast, jerky eye movements are called “saccades” (suh-KODS). Our eyes make hundreds of thousands of saccades a day, and that enables us to see! If our eyes stop moving, we literally stop seeing. The science of eyesight is much more complex than we can get into here, but the point is that we need movement to be able to perceive things. It’s also important to add that people who can’t see are able to develop their other senses to support the compensation of lack of sight. So that also means movement, growth and change.

When we are stuck – both literally and figuratively – we actually stop seeing with any kind of clarity.

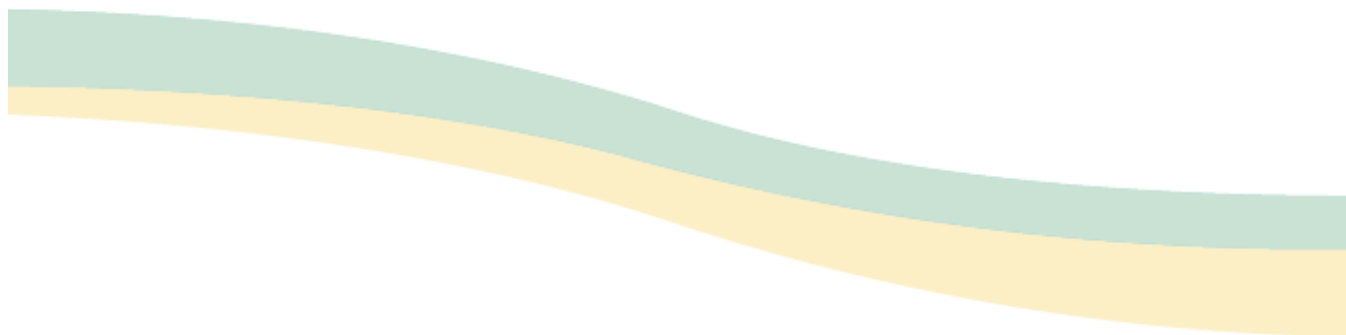
This shows up, as we have previously covered, with learned helplessness. When we’re conditioned to think that nothing we do can change anything, we get stuck. We get stuck in the status quo.

When we approach anything from a place of absolute certainty, we are solidifying our biases.

When we make room for uncertainty, we are creating space for possibility! We’re opening up our minds for another narrative – we’re opening up our minds to expand.

In her Harvard talk, “Uncertainty and The Power of Possibility,” Dr. Ellen Langer tells a story of something that happened at a horse show. A man told her he was getting a hot dog for his horse. Dr. Langer thought this was odd, that “horses are herbivores, they don’t eat meat!” However, the man bought the hot dog and the horse ate it. This challenged her Harvard/Yale-educated thinking. She realized, “everything I thought I knew was probably wrong, at least some of the time.”

Her point? Only when we learn to let go of strongly held certainties can we be open to new possibilities.



15. perception

examining assumptions

As we have talked about, we all come to the table with our own assumptions and biases. These assumptions and biases are impossible to avoid because they support us to make sense of the world.



When we consider interpersonal connection, it's important to remember we only ever see a partial story. Just as only about 10% of an iceberg is visible above the water, much of anyone's story is below the surface. Like the iceberg, there is so much we can't see or know about another person, yet our brains begin to fill in those

unknowns with assumptions. We create a narrative about another person based entirely on what WE know from our past experiences, and OUR worldview.

It's essential, then, that we realize there's much we can't see about a person, and that we always need to challenge our assumptions and choose, instead, to acknowledge our biases. We should then work to put them behind us.

Listening in order to understand is essential. Most of us aren't really taught to listen in this way. It takes practice. We explore more about listening in module **7. connection & communication**.

everyone has a story

[The Dictionary of Obscure Sorrows](#) is a website and [Youtube channel](#) by poet John Koenig. He created words that were missing from the English language to use in his poetry. He came up with the word "sonder":

sonder —

n. the realization that each random passerby is living a life as vivid and complex as your own—populated with their own ambitions, friends, routines, worries and inherited craziness—an epic story that continues invisibly around you like an anthill sprawling deep underground, with elaborate passageways to thousands of other lives that you'll never know existed, in which you might appear only once, as an extra sipping coffee in the background, as a blur of traffic passing on the highway, as a lighted window at dusk.

CONTINUE

question for reflection

Answer this question in your reflection journal.



How does the idea of sonder apply to unpacking biases?

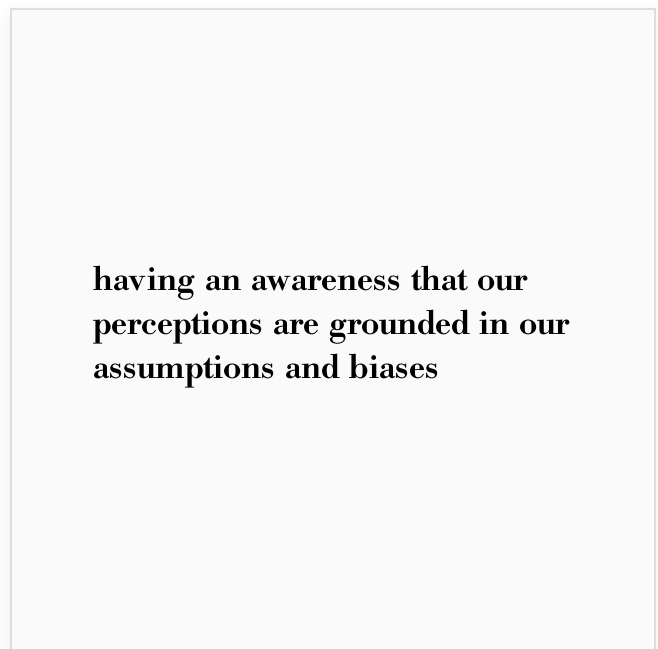
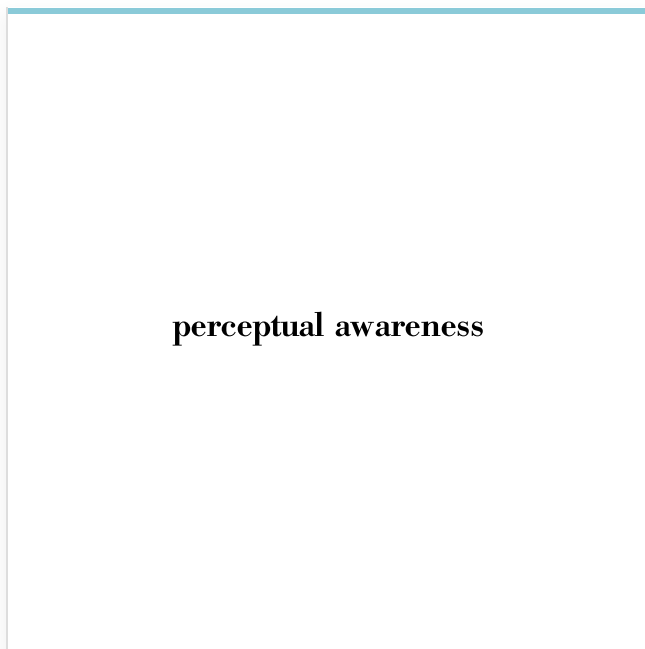
1 of 1

CONTINUE

perception & noticing our judgements

Noticing our judgements always starts with self-examination and self-awareness. We need to see our “containers” and change the way we perceive them. We have to understand that we are each seeing through our own worldview and the containers we have formed to make sense of things. Bringing awareness to our judgements means questioning our perceptions and containers.

Neuroscientists call this “perceptual awareness.” What is perceptual awareness?



1 of 1

When we realize that our perceptions are grounded in our assumptions and biases, we can begin to expand our containers and really listen to understand.



We can challenge our unconscious biases when we become mindfully aware that we all have them.

Mindfulness is noticing things. It's the capacity to be totally conscious of the present moment, to be aware of our environment and our actions while not succumbing to excessive reactivity or over-stimulation from what's happening around us.

When we're mindful of our biases, we unpack how they got stuck in our subconscious. The way we can unpack these biases is to constantly reflect and question ourselves, especially when making quick decisions. We need to disrupt those biases and create more tolerance for difference, with the end goal to become more open.

16. challenging biases with research

Many people with diagnoses like schizophrenia come across biases from services providers. They commonly hear things like, "You'll never work again," or "You'll never have a regular job – or a family." Hearing dire predictions like this from professionals has been one of the hardest parts of dealing with this disorder.

A thought disorder like schizophrenia is very complex. There are many layers that science still doesn't understand.



CONTINUE

the vermont longitudinal study of persons living with the mental health diagnosis of schizophrenia

Courtenay Harding, Ph.D., and her team conducted a 32-year longitudinal study on the topic of recovery. She studied 262 severely disabled people who had been discharged from psychiatric facilities. She studied people living with the mental health diagnosis of schizophrenia who were considered the most “ill.” This was the first of several similar studies.

Her research uncovered findings that contradicted expectations. Read this excerpt from the study, “The Vermont Longitudinal Study of Persons with Severe Mental Illness, I: Methodology, Study Sample, and Overall Status 32 Years Later” (Harding, Brooks, Ashikaga, Strauss, Breier).

The findings from the Vermont cohort, drawn from the most chronically ill patients...revealed that over one-half of these once profoundly ill, long-stay patients had achieved a much higher level of functioning than had been predicted by our own research team during the early days of the patients' community tenure. (1987)

As you can see, over half of the participants got better!

Hardy and her team combined their research results with four other similar longitudinal studies.

Thus, of the 1,300 subjects in the five studies who were assessed two or three decades later, more than one-half were found to have considerably improved or recovered (52). Such similarities in the findings across studies seem to override the differences. Together the data give evidence that, contrary to the expected downward and deteriorating course for schizophrenia or for other severe and chronic psychiatric disorders, symptoms can be ameliorated over time and functioning can be restored. (from "The Vermont Longitudinal Study of Persons With Severe Mental Illness, I: Methodology, Study, Sample and Overall Status 32 Years Later")

For the purpose of the studies done over a 50-year period, a list of criteria was developed. People had to meet four of the six criteria listed below to be considered recovered:

- 1 No current signs or psychiatric symptoms
- 2 Living independently in the community
- 3 Stable source of income
- 4 Enduring, supportive human relationships
- 5 No current medication
- 6 Appearance such that nobody would know that the person had been in the hospital

A National Empowerment Center article called, "[People Can Recover From Mental Illness](#)," by Dan Fisher Ph.D., MD, cites that studies carried out by several researchers has shown that over a 20–30 year period, a majority of people can recover from the most challenging mental health diagnoses. The article states that, "in most cases they no longer need medication and use holistic health and peer support to continue their healing."

The article also points out that recent World Health Organization (WHO) studies have shown "that the rate of recovery from severe mental illness is much better in the third world than in Western industrialized countries." Why? To answer this question, they point out that historical evidence indicates there was a time in the past, during the 1830–40s, when the rates of recovery were much higher in America because the country held a much more optimistic view of recovery.

You can read more about the WHO study [here](#).

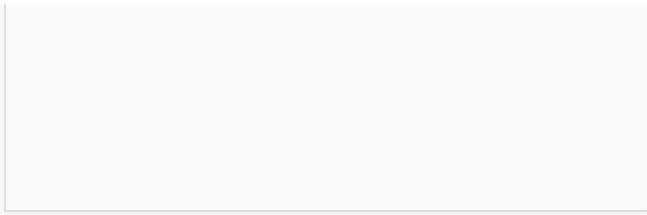
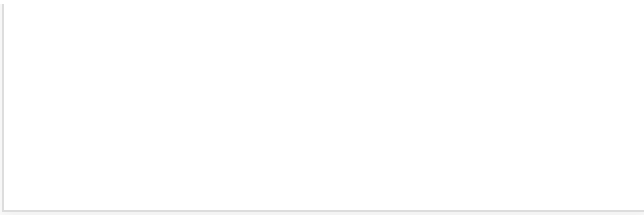
CONTINUE

clinician’s illusion

If a majority of people are able to recover from even the most challenging mental illnesses, then why aren't service providers more encouraging? Perhaps there's a link to mindset called clinician's illusion. Clinician's illusion is common in both the mental health and substance use sectors. It means:

clinician’s illusion

when people only see chronically unwell people, they believe everyone stays unwell and no one recovers



1 of 1

Think about it. If in your work you always see the same people at their worst, you focus on what you ARE seeing without considering what you are NOT seeing.

Consider everything we have covered in this module so far and apply it to clinician's illusion:





My experiences form my worldview

"I only ever see people when they are unwell and at their worst. I see people with _____ as always sick."



My worldview forms my judgements and biases

“People who have _____ are always unwell and will always need support from the system. That is what I have seen.”

[My little “t” truth has now become a BIG “T” TRUTH.]



My bias becomes an unconscious bias:

"No one with _____ will recover."

In the article, "RTP: The Clinician's Illusion; Why Clinicians Don't See Enough Recovery," Larry Davidson, Ph.D. refers to the research study, "The Clinician's Illusion" (Cohen & Cohen. 1984) and states:

Based on fairly sophisticated statistics, they showed that people who work in clinical settings, i.e., clinicians, see people who are ill. While this statement alone may seem obvious, its converse is less so, i.e., that clinicians do not see people who are, or when they are, well. Especially in the case of ambiguous and prolonged conditions, the Cohen's showed that clinicians tend to assume that people with such conditions are usually ill, and that these conditions are usually disabling, even though that may not always be the case. If I only see you when you are sick, I am going to assume that you are always sick. And if I work in a clinical setting, and therefore typically see people when they are sick, I am likely to draw the erroneous conclusion that the people I see are always sick. What I may not stop to consider is that I may not be seeing them because they are in fact doing well. (2013)

questions for reflection

Answer these questions in your reflection journal.



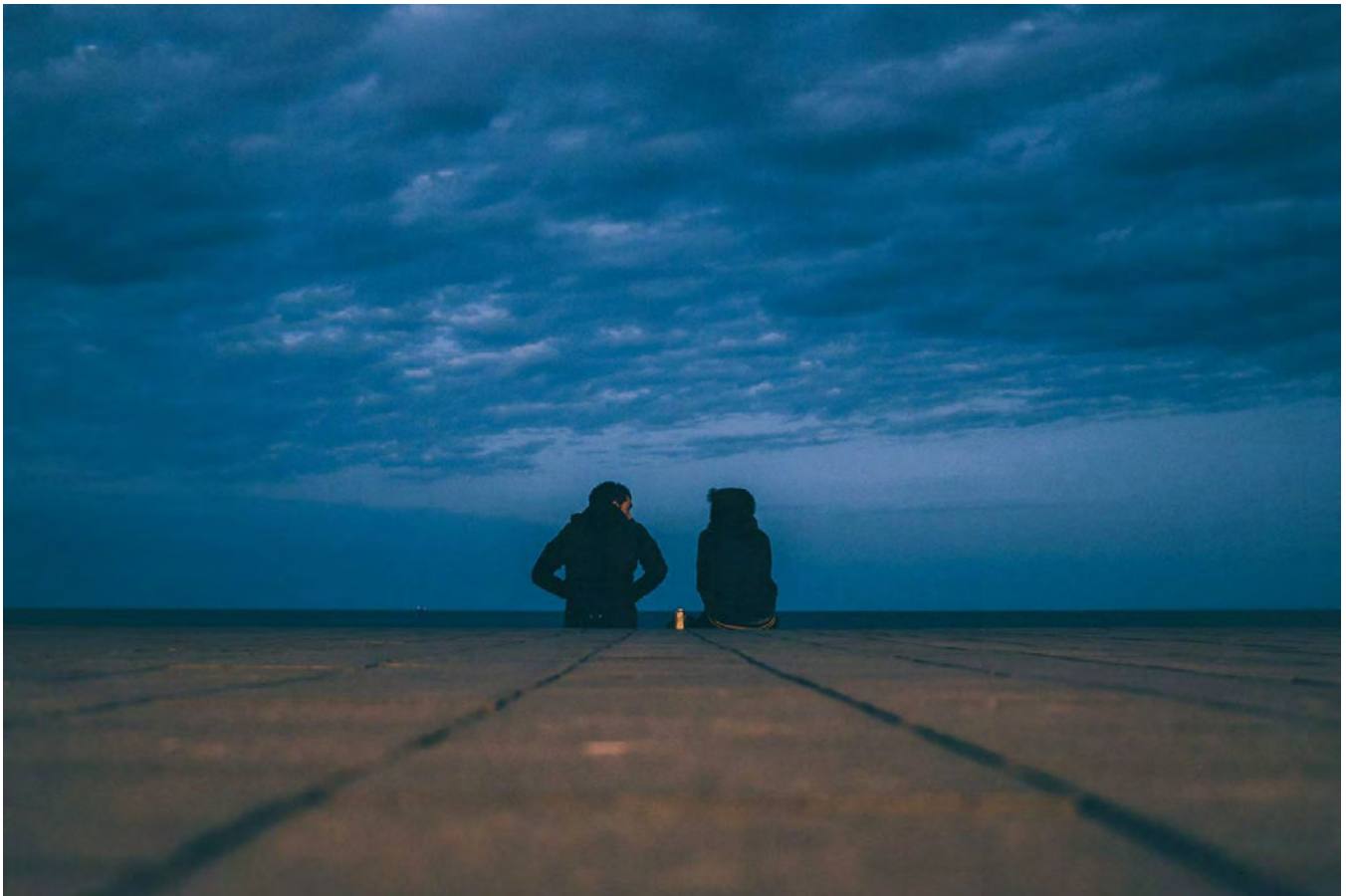
Consider how peer support disrupts the clinician’s illusion. Do you think having peer support workers embedded on clinical teams would help support clinicians from developing unconscious biases about people’s ability to recover?

1 of 2



How can you as a peer support worker protect yourself from developing clinician’s illusion?

17. putting it all together: supporting others



So how do we overcome our dependence on quickly categorizing information that leads to biases? How do we succeed in truly understanding and valuing others? In his talk, "Experiences in Communication," given at the California Institute of Technology in Pasadena in 1964, Carl Rogers said:

When someone really hears you without passing judgement on you, without trying to take responsibility for you, without trying to mold you, it feels damn good. . . . When I have been listened to and when I have been heard, I am able to re-perceive my world in a new way and to go on. It is astonishing how elements

which seem insoluble become soluble when someone listens. How confusions which seem irremediable turn into relatively clear flowing streams when one is heard.



18. core values assessment

question for reflection

Answer this question in your reflection journal.



In what ways have the core values (see list below) intersected with the topic of unpacking our biases?

1 of 1

CONTINUE

core peer support values



acknowledgement —

All human beings deserve to be seen for who they are.

IN ACTION: Peer support strives to acknowledge – and deeply hear – people where they are in their journey.

PSWs SUGGEST: Asking open-ended questions and actively listening to the PSW to see if they feel comfortable sharing their experience. Ask: “What do you think about that situation?” “Is there a coping strategy that you have used in a previous similar experience that worked for you?”

mutuality —

All healthy relationships are mutual and reciprocal.

IN ACTION: Peer support relationships are co-created, with all parties participating in boundary creation.

PSWs SUGGEST: Having a conversation about what is and isn't okay to discuss with the PSW.

“...Even though I am a PSW, it's painful for me to make eye contact with people. Hopefully, clients will see that if I'm looking away that it actually means that I am deeply listening to them. Being vulnerable and open seems to allow the other person to do their version of the same, building trust and respect and co-creating the relationship.”

strength-based —

Every human being has strengths.

IN ACTION: Peer support intentionally builds on existing strengths. It thoughtfully and purposefully moves in the direction of flourishing, rather than only responding to pain and oppression.

PSWs SUGGEST: Finding things that the PSW feels really confident about and expanding on those areas or delving into those areas and supporting their choices.

self-determination —

Motivation works best when it's driven from within.

IN ACTION: Peer support encourages self-determination and acknowledges and holds space for resilience and inner wisdom.

PSWs SUGGEST: Support the PSW in making decisions and doing things on their own – based on their wants, needs and goals.

respect, dignity & equity —

All human beings have intrinsic value.

IN ACTION: Peer support honours human value by

- Practicing cultural humility and sensitivity
- Serving with a trauma-informed approach
- Offering generosity of assumption
- Addressing personal biases mindfully
- Meeting people where they are
- Serving with a knowledge of equity

PSWs SUGGEST: Treat PSWs as you would like to be treated and expect to be treated. Learn about them on a personal level and treat them as equals.

belonging & community —

All human beings need to belong and be a part of a community.

IN ACTION: Peer support recognizes that many people have barriers that keep them from developing community and it actively works towards deconstructing those social blockades that prevent inclusion and acceptance. Peer support encourages a social justice mindset, and intentionally promotes empathy, compassion and self-compassion.

PSWs SUGGEST: Help PSWs feel wanted and cared about. Help them find resources that foster a sense of community and belonging.

“My quality of life improves immensely when I am surrounded by one or a community of people who understand me. I don’t feel alone. I can be myself among people who I know understand me on a deeper level. When I feel like I can be myself, I feel more confident and able to take positive risks, thus improving the quality of my life. The root of this is connection and being able to be seen for who I truly am. Peers can help people be seen in a real way.”

curiosity —

Curiosity and inquiry support connection, growth, learning and engagement.

IN ACTION: Peer support

- Is continually curious
- Challenges assumptions and narratives
- Asks powerful questions
- Offers generosity of assumption to those who think differently
- Knows that listening and asking questions is more important than providing answers

PSWs SUGGEST: Ask questions and be engaged in learning about your PSWs. Find out about their culture and explore with them.



19. summary

Let's review some of the key concepts covered in this module.

Connection is one of the main reasons peer support is effective. It harnesses the power of shared experience.

Over-relating, the assumption that we have more similarities with a peer than there actually are, is a tendency to avoid.

Our worldview, the lens through which we see the world, is influenced by many factors early in our lives. We should take a mindful approach to examining our worldview.

Everyone judges others. We have the capacity to manage our judgements, assumptions and biases if we try.

We make sense of the world by sorting experiences and beliefs into categories and containers. These categories and containers become problematic if they are rigid. We should consciously become aware of them and question their usefulness.

Implicit bias shows up when our unconscious thoughts impact our words and actions automatically. Confirmation bias occurs when we choose to ignore data that may contradict our biases.

We often make assumptions about things we don't know. To overcome this tendency, we need to practice perceptual awareness, which means to question our assumptions and perceptions, then change them to be more in alignment with truth.

Clinician's illusion is a condition where health practitioners become wrongly convinced that people who are ill can't experience healing. Peer support disrupts clinician's illusion.



One of the best ways peer support workers can support someone is to truly listen to them.



20. next steps

We want to thank you for taking the time to walk alongside peer support workers on a shared path of learning from lived experience.

You are now ready to visit another module of the Peer Support Worker training curriculum!

Please head home to <https://peerconnectbc.ca> where you will find the individual training modules and facilitation guides. You will also find a [resource page](#) at that site to continue your learning about peer support work and the issues surrounding it.

A Project of BCcampus, Funded by B.C. Ministry of Mental Health and Addictions

Released July 2021

Curriculum Developer and Writer: *Jenn Cusick*

Project Manager: *Jonathan Orr*

Consultant and Former Project Manager: *Corey Ranger*

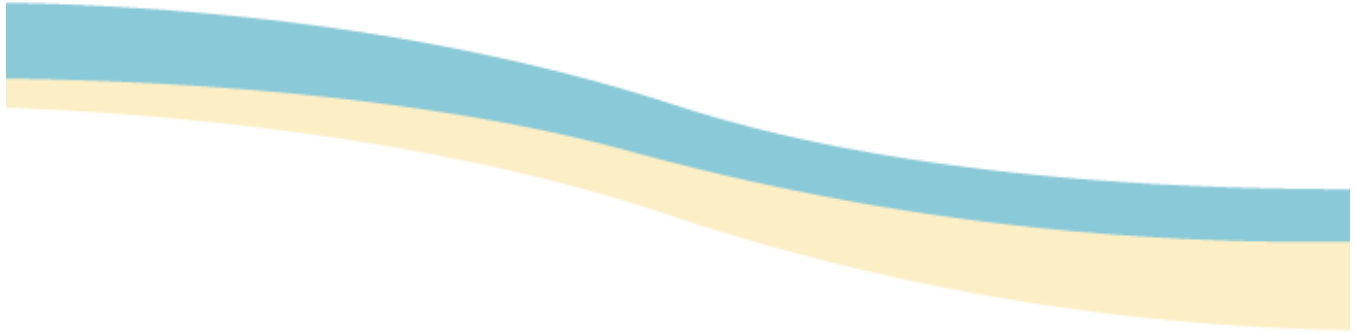
Life Application Story Writer: *Robyn Thomas*

Editor: *Annie Brandner*

Graphic Designer: *Jeseye Tanner*

Peer Portraits: *Jesse Winters Photography*

Instructional Design & Development: *PathWise Solutions Inc.*



21. module references

The following sources were used
for this module:



The following sources were used for this module:

Cohen, P., & Cohen, J. (1984). [The Clinician's Illusion](#). Archives of General Psychiatry, 41(12), 1178.

Covey, S. R. (1998). *The 7 Habits of Highly Effective People*. Franklin Covey.

Davidson, L. (2013, February 1). RTP: [The Clinician's Illusion; Why Clinicians Don't See Enough Recovery](#). NYAPRS.

Fisher, D. (2018, February 16). [People can recover from mental illness](#). National Empowerment Center.

Funk, K. (2001, March 21). [What is a Worldview?](#)

Geary, Aidan. (2017, September 18). Ignored to death: Brian Sinclair's death caused by racism, inquest inadequate, group says. CBC News. <https://www.cbc.ca/news/canada/manitoba/winnipeg-brian-sinclair-report-1.4295996>

Harding , C. M., Brooks, G. W., Ashikaga, T., Strauss, J. S., & Breier, A. (1987). [The Vermont longitudinal study of persons with severe mental illness, I: Methodology, study sample, and overall status 32 years later](#). *American Journal of Psychiatry*, 144(6), 718–726.

HarperCollins Publishers Ltd. [Bias definition and meaning](#): *Collins English Dictionary*.

[Implicit Bias Explained](#). Perception Institute. (2017, May 17).

Koenig, J. (2012, July 22). [sonder](#). *The Dictionary of Obscure Sorrows*.

Langer, E. (1999, October 22). *Creativity and the Evolution of Culture*.

Langer, E. (2019, March 6). [Uncertainty and The Power of Possibility | Ellen Langer | Talks at Harvard College](#). YouTube.

Lotto, B. (2017). Celebrate Doubt. In *Deviate: the Science of seeing differently* (pp. 260–260). essay, *Weidenfeld & Nicholson*.

Madrid, J., & Hout, M. C. [Eye Spy: Why We Need to Move Our Eyes to Gather Information About The World](#). *Frontiers for Young Minds*.

Maximé, F., Ballard, P., & Lingren, K. (2019, July 19). [Francesca Maximé – ReRooted – Ep. 9 – Implicit Bias with Percy Ballard and Kate Lingren](#). ReRooted Podcast.

Mead, S. (2014). In *Intentional Peer Support: An Alternative Approach* (p. 7). essay, *Intentional Peer Support*.

Rogers, C. (1964). [Experiences in Communication](#). Experiences in Communication by Carl Rogers.

University of California, San Francisco. Strategies to Address Unconscious Bias.

<https://diversity.ucsf.edu/resources/strategies-address-unconscious-bias>.

Whelan, J. (2017, May 26). [“Gut Feel” or Unconscious Bias? When Should We Trust Our Intuition?](#)

EXIT the module

**You've completed this module.
Click the button to EXIT.**

EXIT MODULE