

## WAYS TO CHALLENGE YOUR BIASES

### 1. Let's get meta



- Think about the way you are thinking
- When I consider families who are trauma exposed, what are my initial reactions?
- How do I feel when I interact with parents with mental illness?
- What are my personal experiences with mental illness and trauma exposure and how it is affecting my interactions with parents/families?
- What are my reactions to news stories about childhood trauma and maltreatment?

### 2. Is there a bias?



- Am I engaging in a thinking bias?
- If there is a bias, which one is happening more than others?
- Am I seeing this bias bleed into other areas of my life?
- What are the consequences of this bias as to how it plays out on my emotions and my behaviors?

### 3. Check the facts







- What tangible, clear evidence do I have that this bias is true? false?
- Ask trusted others about their experiences on the matter to determine if your perception is legitimate or not.
- If you are placing a label on another person (e.g., failure, bad), define the term and assess what qualities of the term the person has vs does not have. Or replace with less colorful words.
- Buy into the bias and allow yourself to see where the thoughts lead you. Did you end up in an unrealistic/exaggerated place?

### 4. Remember the big picture



- Remind yourself that everyone has thinking biases, AND it is your responsibility to challenge them.
- Don't allow yourself to give up due to feeling overwhelmed by thoughts
- Consider the reasons that you are an early childhood provider and the strengths you bring
- How can that help you to check your biases and interact with caregivers collaboratively?
- The reality is that a caregiver is usually not going anywhere and children will only suffer if not properly supported. You are a positive influence for the child. How can we keep that intact?

TYPE OF BIAS	EXAMPLE
<p>Drawing a conclusion when facts do not support the conclusion or when facts are contrary to the conclusion</p> 	<p>A parent does not return a text or phone call. Child care provider assumes that the parent does not care to be involved.</p>
<p>Making a general rule about a person or situation based on past isolated experiences</p>	<p>"Parents who drop their children off without their medications should not even bother bringing their kids to my home"</p>
<p>Focusing on a single detail while ignoring other details about a given situation</p> 	<p>Parent relies on grandparent to assist child with reading and math facts. Child care provider perceives the situation as "passing the buck" and not fulfilling their parenting responsibility.</p>
<p>Undermining positive characteristics by making neutral/positive things negative and rejecting positives as not good enough</p>	<p>"They think they can show up and play with their kid, and I'm going to give them a parent of the year award?"</p>
<p>Expecting the worst to happen in a given situation (catastrophizing)</p> 	<p>"Children who are exposed to their parents' drama will end up with substance use problems"</p>
<p>Labeling people or situations instead of viewing them as having many sides to their personality</p>	<p>"That kid is a lost cause. Their parent doesn't even care about them."</p>
<p>Relating events to oneself when there are not facts to support the connection</p> 	<p>"That parent is is always late for pick-up because they just want to annoy me."</p>

References:  
 Burns, D. D. (1989). *The feeling good handbook: Using the new mood therapy in everyday life*. William Morrow & Co.  
 Beck, A. T., Rush, A. J., Shaw, B. F., & Emery, G. (1979). *Cognitive therapy of depression*. New York: The Guilford Press.