

Unconscious Bias Exercise Tool (UBET)

Individual Version

Intent: Understanding Others, Gaining Insight, Experiencing Greater Empathy

Sexton, 2020

Background: Unconscious bias is a neutral term, the beliefs held outside of a person's consciousness.

Intent: The Unconscious Bias Exercise Tool (UBET) is designed to allow the individual completing it to look inward at how one defines oneself based on upbringing, background and life experiences. In addition, the exercise is designed to take the individual completing it to a different or more opposite perspective, allowing a closer look at how individuals view those who are not like them.

The desired outcome is to gain a deeper and broader perspective of oneself and others.

Audience: Please complete the first section (YOU), listing things about YOU.

Then go to the next section (DIFFERENT THAN YOU) and describe someone who is or could be different than you in terms of background, upbringing, etc. Please know that you are not required to answer any item with which you are uncomfortable. Thanks.



UBET Published in:

Madell, J. R. and Hewitt, J. G. 2023, *From Listening to Language: Comprehensive Intervention to Maximize Learning for Children and Adults with Hearing Loss*, Thieme Medical Publishers, NY and Stuttgart.

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Section 1

• **YOU**

- Race/ethnicity _____
- Gender _____
- Sexual identity _____
- Age _____
- Children
 - Yes
 - No
- Hearing status
 - Deaf
 - Hearing
 - Hard of hearing
- Communication mode
 - Spoken language
 - Visual language
 - Combined spoken and visual language
- Parents
 - Living
 - Deceased
- Siblings
 - Yes; if so, how many? _____
 - No

- Educational level
 - High school
 - College
 - Graduate Degree
 - Doctoral Degree
- Religion
- Socioeconomic status
- Geography
 - Where did you grow up?
 - Where do you currently live?
- Marital status _____
- Occupation _____

Please share how completing this section made you feel about yourself.

Section 2

• **DIFFERENT THAN YOU**

- Race/ethnicity _____
- Gender _____
- Sexual identity _____
- Age _____
- Children
 - Yes
 - No
- Hearing status
 - Deaf
 - Hearing
 - Hard of hearing
- Communication mode
 - Spoken language
 - Visual language
 - Combined spoken and visual language
- Parents
 - Living
 - Deceased
- Siblings
 - Yes; if so, how many? _____
 - No
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- Marital status _____
- Occupation _____

Take time to consider how you felt about this person, who is different than you. Was there any part of this that upset you? Did anything make you feel glad that you are not this person. If so, why? Be honest and write your feelings below.

Please share any additional comments.
