Opinion: Mental health needs to be a cornerstone of equity, diversity and inclusion initiatives

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Equity, diversity and inclusion programs have become ubiquitous in the

workplace. As organizations publicly express their commitment to diversity and inclusion, there is a growing concern that these concepts are merely buzzwords to make organizations look more socially responsible.

There has also been a growing backlash against the diversity, equity and inclusion movement. So, too, is the recognition that diversity statements can backfire against diverse applicants or reek of tokenism. They can result in unintended consequences, like making organizations less likely to notice discrimination or forcing job applicants to tone down their racial identity to increase their chance of a callback.

There is evidence that bias and diversity training that isn't grounded in research can be ineffective or even have the opposite of the intended effect. Poorly executed equity, diversity and inclusion programs can provoke resentment among certain groups, like white men, or provide a smokescreen for increased discrimination.

On the bright side, the need to take diversity seriously has grown, too. Arguments for successful equity, diversity and inclusion programs (EDI) often point to how it can grow the bottom line or improve innovation. Others seek to reconcile the business and social justice cases for diversity.

But there is another part of this conversation that is rarely acknowledged: the universal human right to mental health.

Mental health is a human right

Oct. 10 was World Mental Health Day; a day when the World Health Organization seeks to educate people about mental health and combat the stigma associated with it. This year's theme was "Mental health is a universal human right."

This message carries significant weight, especially in the aftermath of the COVID-19 pandemic and associated lockdowns, which led to a worldwide surge in substance abuse, mental health issues and lingering feelings of fear and anxiety. These issues have a broad societal impact, particularly in the workplace, where people typically spend the majority of their adult lives.

Individuals from marginalized communities are disproportionately affected by mental health issues in the workplace. These challenges can encompass a range of issues, from anxiety and depression to feelings of loneliness and exclusion.

Part of this is due to the harassment and discrimination women and marginalized individuals experience. According to one study, racial and ethnic minorities suffer race-specific discrimination four to six times more often than their white counterparts, while women are three to four times more likely to face gender discrimination and sexual harassment than their male peers. Belonging to more than one disadvantaged group further increases the likelihood of workplace discrimination.

The COVID-19 pandemic has exacerbated the mental health challenges faced by marginalized communities, placing additional strain on their mental health.

Additionally, structural racism has led to workplace cultures where fear of retribution silences victims of discrimination, preventing them from speaking out.

As such, marginalized employees are at risk of losing more than just pay or a promotion—their voices may be ignored when it comes to planning and implementing the policies that are supposed to benefit them. This situation is exacerbated by the increased emphasis on workplace meritocracy, which can lead to hidden discrimination.

The perils of meritocracy

Meritocracy is the idea that there is a clear standard of merit and that individuals can be assessed, judged, ranked or sorted accordingly.

However, the idea of selection by merit tends to create a bias against marginalized employees, because they're assumed to have gotten their position because they belonged to a particular category rather than having deserved it.

Additionally, racialized individuals, particularly those of Asian descent, often face the pressure of conforming to the "model minority" stereotype and not speaking out about their needs. They are implicitly expected to work harder and be smarter than others.

When individuals are unable to meet these artificial standards, they may blame themselves for not being able to succeed. Poorly executed EDI programs can worsen the situation.

Far too many individuals suffer in silence, rather than seek treatment. A survey from 2016 found that Asian-Americans were 51 percent less likely to use mental health services than European Americans.

The pandemic has further compounded these challenges for East Asian Canadians, who have been experiencing increased levels of anti-Asian discrimination. Even indirect experiences of racism can lead to higher levels of anxiety and depression.

More effective EDI initiatives

In light of the pandemic, it's crucial that workplaces committed to diversity and inclusion don't overlook the importance of addressing

mental health concerns.

Workplace initiatives that support equity, diversity and inclusion should also target mental health. This means any EDI initiative should also address the core problems that cause common mental health issues. There are several potential strategies workplaces should consider:

1. Embrace diverse perspectives: Workplaces should actively encourage diverse personalities and attitudes while fostering a culture of inclusion.

2. Understanding intersectional discrimination: Intersectional discrimination refers to the fact that individuals may face discrimination based on multiple aspects of their identity, such as race, gender and sexual orientation. Recognizing and addressing these unique challenges is essential.

3. Empowering women: Initiatives to help women succeed in the workplace, like mentorship and sponsorship programs, are critical. These approaches have shown to have positive outcomes in breaking down barriers for women in various industries.

4. Fostering a sense of belonging: Ensure employees from diverse backgrounds feel like productive and valued members of their work community. This can help organizations tailor their mental health strategies to be more person-centred and holistic.

5. Building workplace communities: Promote the development of a strong sense of community within the workplace. This can enhance the overall well-being of employees and contribute to a more supportive and inclusive environment.

6. Culture-specific interventions: Implement community-based mental

health strategies that take into account the unique cultural backgrounds and experiences of individuals and adapt support accordingly.

These suggestions are only the beginning, however. What truly matters is setting up EDI and mental health programs in the workplace that are based on evidence. While there is still a long road ahead, the integration of EDI and mental health initiatives represents a significant step towards more inclusive, equitable and mentally healthy workplaces for all.

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