The Intersection of Wellbeing and Diversity in the Workplace

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Why Employee Wellbeing is at the Core of Creating Equity for Your Marginalized Populations

Structural racism in America is a public health issue. Black Americans and other marginalized populations are disproportionately affected by chronic disease, have a shorter life expectancy and are dying at higher rates of COVID-19, and recent events have drawn much-needed attention to the urgent need for change in our society, in our healthcare system and in the workplace. And while organizations seek to improve diversity and inclusion, a true culture of health and wellbeing for all cannot be achieved without a focus on equity.

Dr. Aletha Maybank, The American Medical Association's (AMA) inaugural Chief Health Equity Officer, shared her expert insight into the issue of racial inequity and why equity in the workplace is the driving force for reducing the health disparities experienced by Black Americans. Read on to learn how you, as an employer, people leader or health industry expert can be a part of the solution by promoting health literacy, daily wellbeing engagement and healthy habits, access to care and healthcare transparency.

> # Racism is a threat to public health and the advancement of health equity and the delivery of care.
>
> **Dr. Aletha Maybank**

Our zip code impacts our health more than our genetic code. Up to 60% of our health outcomes[1] are influenced by the environments in which we live and work, including our education, access to care, social support network and economic stability. These are known as the social determinants of health (SDOH), and minority ethnic groups— particularly Black Americans—are more likely to experience poor health outcomes due to the structural racism within our society.

Black Americans are at a significantly greater risk of developing a chronic condition—and at a younger age— than White Americans. In fact, Black American adults are 60% more likely to be diagnosed with diabetes[2] and nearly half are considered to be obese[3] compared to roughly one-third of White adults. And with the strong correlation between hospitalization or death due to COVID-19 in those with preexisting conditions along with the higher transmission rates in minority ethnic groups, Black Americans are dying at a 2.3 times higher rate during this pandemic.[4]

While we can point to SDOH to explain these health disparities, much remains to be learned about them. One thing, however, is clear — employers have the power to drive meaningful change and to close the gap.

According to Dr. Maybank, health equity is "having the conditions, resources, opportunities and power to achieve optimal health." Simply put, work is a common experience between the privileged and the marginalized, creating the ideal setting to provide the education and tools necessary to improve health outcomes for populations that otherwise would not have immediate access to these resources.

Employer-based insurance covers roughly 55.1% of the U.S. population[5] with health insurance, putting them in a position of power and influence over the health outcomes of individuals of all races and ethnicities.

Creating a culture of equity and wellbeing by providing the necessary tools and education for preventing or managing the chronic conditions that disproportionately impact Black Americans can go a long way in protecting the current and future health of your workforce.

What are diversity, inclusion and equity?

- **Diversity is understanding and accepting the uniqueness of each individual and encompasses their personality, thoughts and life experiences**

- **Inclusion is the creation of an environment that wholly supports each individual in their journey to reach their full potential**

- **Equity is the ideal of removing the barriers to advancement through fair and just treatment, access and opportunity for all**

To create a true culture of equity in the workplace, Dr. Aletha Maybank emphasized the importance of recognizing our bias and blind spots as individuals and as institutions. In order to do this, she recommends the strategy she has created with her team at The American Medical Association: normalize, organize and operationalize. Educating your workforce by building a shared language around race, power and privilege along with training is the first step in organizing an infrastructure of equity and providing the tools that allow your workforce and your organization to put these changes into action. It can be difficult for leadership to know the right way to approach this, so businesses should seek the help of experts such as outside consultants.

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Some other things to consider as your organization works to center equity in its culture and practices include:

- Listening to your employees, especially those impacted by these structural inequalities, to help inform and drive change.

- Shifting power and resources to make building this culture of equity a top priority by allocating the funds to build and allow teams of people to focus their energy on this massive task.

- Finding ways to support your employees emotionally and socially through this time of change and transformation.

- Establishing strong leadership and sense of teamwork towards this company-wide culture of equity.

- Identifying your accountability measures, such as data tracking and reporting.

In the words of Dr. Maybank: "We can't be silent in order for progress to happen." Workplace equity and inclusion is only the first step in the fight against systemic racism. To learn more about how you can create a more equitable workplace, watch the replay of Dr. Aletha Maybank's THRIVEx session, The "E" (Equity) in DE & I: Why Diversity and Inclusion Can't Happen Without It.

1 https://www.healthaffairs.org/do/10.1377/hblog20171025.721263/full/
2 https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=18
3 https://www.niddk.nih.gov/health-information/health-statistics/overweight-obesity
4 https://www.apmresearchlab.org/covid/deaths-by-race
5 https://www.census.gov/library/publications/2019/demo/p60-267.html