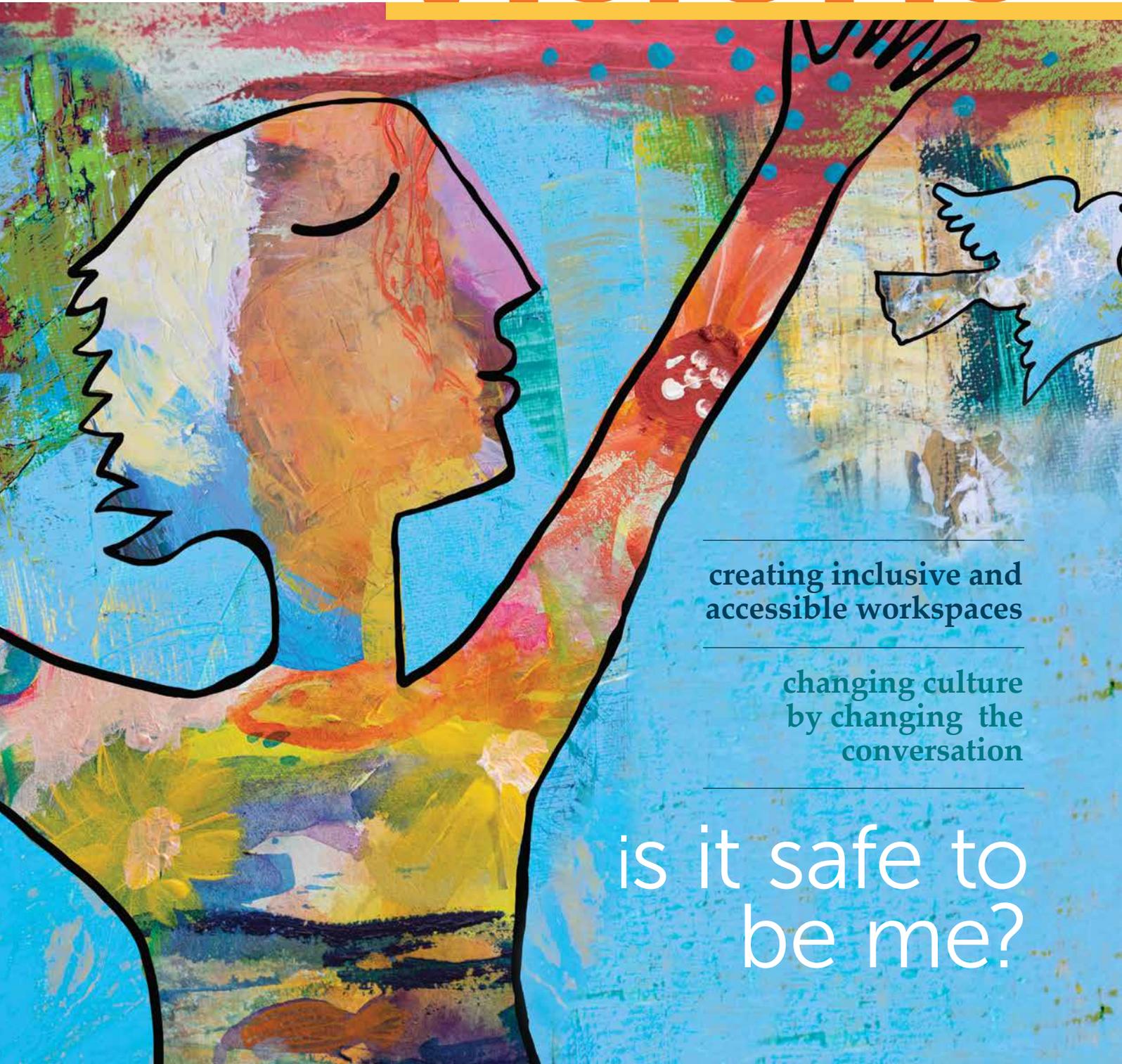


visions



creating inclusive and
accessible workspaces

changing culture
by changing the
conversation

is it safe to
be me?

visions

Published triannually, *Visions* is a national award-winning journal that provides a forum for the voices of people experiencing a mental health or substance use problem, their family and friends, and service providers in BC. It creates a place where many perspectives on mental health and substance use issues can be heard. *Visions* is produced by the BC Partners for Mental Health and Substance Use Information and funded by BC Mental Health and Substance Use Services, a program of the Provincial Health Services Authority.

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EDI: Equity, diversity and inclusion. This is an organizational framework that aims to help everyone participate fairly. It focuses on supporting people with diverse identities (such as culture, place of origin, religion, sexual orientation and gender identity), responding to bias or discrimination, and structures that allow everyone to contribute and thrive.

Systemic discrimination: Policies, practices and organizational cultures that create or enable disadvantages, exclusions, or biases against a group of people.

Intersectionality: A framework to understand how all of a person's identities interact with each other and with systems, resulting in unique privileges or harms (such as discrimination).

Marginalized communities: Communities that are treated insignificant or unimportant by a larger group or society. Marginalization aims to disempower people and prevent them from participating, and it's the result of discrimination.

editor's message

As a first-generation Iranian-Canadian woman, I could not think of a better way to begin my journey as Managing Editor of Visions than by leading an issue on a topic that is near and dear to my heart: equity, diversity and inclusion (EDI). After several years representing Anxiety Canada on the Visions Editorial Board, I am excited to share my first issue in this new role. Moving forward, you will see a rotation of three Managing Editors on this page, each bringing our unique perspectives to the magazine.

Growing up at the intersection of multiple identities, I have experienced firsthand the complexities of belonging and the challenges that come with navigating professional spaces that are not always equipped to support or understand those with diverse experiences.

Our mental health and experiences with substance use are strongly influenced by our surroundings. The workplace, where we spend so much of our time, can provide empowerment and growth, but it can also be a source of stress, isolation, and even harm. For individuals from marginalized communities, those living with different abilities, diverse gender identities, or mental health challenges, the stakes are even higher.

This issue of Visions is a call to action. To create inclusive spaces, we must commit to learning about equity, diversity and inclusion and understanding the problems that affect diverse backgrounds. Inclusion in the workplace can serve as a lifeline for those who have felt the weight of cultural expectations, the pressure to conform to new norms, and the fear of being misunderstood, marginalized, or excluded due to differences in ethnicity, gender, ability or mental health. It is about understanding that our identities are not just checkboxes on a form, they are rich and complex, deserving of respect and inclusion in every aspect of our lives.

I hope what you read today inspires you to reflect, engage, and work towards creating workplaces where everyone can be seen, heard and valued. ▾

Pargol Lesueur

Managing Editor

Pargol is the Health Literacy Lead at Anxiety Canada. Anxiety Canada is a member of the BC Partners for Mental Health and Substance Use Information.

Changing Culture by Changing the Conversation

ROSELENE DHALIWAL, MED, RD

As I prepared to write this article, I shared a historical fact with my partner. I asked if he knew that in 1919 British Columbia had passed a law to “protect” white women by making it illegal for Asian men to hire them and that the government did not repeal this law until 1968. This history shifted our conversation over dinner that evening, as he is an Asian Canadian working in the position of hiring manager.



Roselene Dhaliwal. Photo credit: Cliff Ma of Cliff Ma Photography

Roselene Dhaliwal is the inaugural Director, Equity & Inclusion with CMHA BC. Also a Registered Dietitian with a Master's in education, she is currently a PhD candidate and visiting faculty in the Faculty of Arts and Social Sciences at SFU. The daughter of immigrants from Punjab, India, Roselene lives, works and loves on the territories of the səlilwətaʔl (Tsleil-Waututh), Stó:lō, Qayqayt, and xʷməθkʷəy̓əm (Musqueam) nations

For over 20 years, I have been a dedicated health promotion and inclusion practitioner. I started my career in health care and have worked across numerous settings to advance inclusion. Whether or not the term inclusion has been formally in my job title, I've been working to change policies, practices and systems so that everyone can achieve their full potential. Often, it starts with changing the conversation.

In 2020, the Black Lives Matter movement sparked a global reckoning. We witnessed the creation of many roles,

across sectors, focused on equity, diversity and inclusion (EDI), plus justice, belonging, respect and decolonization (the terms and acronyms vary, depending on the sector). But many large corporations, non-profits, colleges and universities added these roles without any connection to their health and well-being portfolio; the responsibility for employee health often rests with human resources.

EDI is part of health

We know racism and other oppressive experiences are a determinant of

health. A sense of belonging—a key factor for health and well-being—is also essential for inclusion. So how did it come to be that we have so many new colleagues in EDI who work entirely separately from a health and well-being agenda?

In my new role within the Canadian Mental Health Association’s BC Division (CMHA BC), I focus on equity and inclusion. This role has helped me find my niche, as I see so many opportunities in the overlap between workplace health and well-being, and equity and inclusion. We can enhance our movement towards both when we see them as interconnected. When diverse employees feel they belong and can be their whole self in the workplace we are demonstrating progress towards equity and well-being.

Linking EDI and mental health in the workplace will look different depending on the size of your organization, your goals, strategic plan and business model, as well as who is in your organization. It’s an important time to reflect on questions such as who makes up your team? Who holds senior leadership roles? Are they dedicated to prioritizing and resourcing these areas? One of our

initial action items at CMHA BC was to collect data on employees’ identities and experiences of inclusion. We asked ourselves as an employer, “Do we reflect the diversity in our province?” In some respects yes, and in others we have work to do.

I’m heartened by the initiatives of BC’s Office of the Human Rights Commissioner (BCOHRC), which released the Employment Equity Toolkit in 2022. They developed this tool because they acknowledged that “more than three decades after the term ‘employment equity’ was coined, the effects of systemic discrimination continue to be seen across the labour market.”¹ The toolkit covers an introduction to employment equity and five topic areas to help employers move towards achieving employment equity: accommodations, compensation, data collection, complaint resolution and hiring and promotion.

In it, I saw data that reflected my own experiences: racialized people experience a pay gap and senior leadership positions lack representation by racialized women. I feel privileged to be in the role I am in within CMHA BC. Throughout my career, however, I’ve had to work harder than my white

counterparts to achieve the same positions. This reality underscores the importance of continued efforts to bridge the gap between equity and inclusion and health and well-being in the workplace.

Legislation and policy shape equity

It is also an important time to think about legislation. We have heard about legislation in Alberta, Saskatchewan and New Brunswick impacting trans youth, and I am concerned about future impacts. And in Canada we are not immune to the rhetoric that is challenging equity, diversity and inclusion.

In terms of employment equity, it has been more than 40 years since the federal Employment Equity Act was first passed in Canada. It is well known that the Act did not bring about the intended change; we are still working towards achieving employment equity. All the folks who did not get the promotion or who continue to work in multiple low-paying, front-line positions that reflect employment inequities—have we ever asked them about how these experiences impact their mental health?

Equity within the workplace also means ensuring all of our team members can be their whole selves and equipping each of them with the supports to do so. This might include a flexible schedule to allow for caregiving responsibility or the ability to take days off that align with faith-based practices. Programs intended to support employees’ mental health, such as employee assistance programs or employee family assistance programs, often represent a one-size-fits-all approach. The phone numbers

Equity within the workplace also means ensuring all of our team members can be their whole selves and equipping each of them with the supports to do so. This might include a flexible schedule to allow for caregiving responsibility or the ability to take days off that align with faith-based practices.



and website to access such resources are shared widely within workplaces, but we also must acknowledge that these are based on a Western view of mental health. Support for mental health looks different depending on our identities. For me, I feel most supported in community, with folks who share some of my lived and living experiences.

I am hopeful that, with the BCOHRC toolkit and the recent activity of the Employment Equity Act Review Task Force (which submitted its final report to the Federal Minister of Labour in December 2023), change is on the horizon. The task force emphasized a framework required to achieve employment equity that includes “barrier removal, meaningful consultations and regulatory oversight.”² I have provided my insights and thoughts to the federal team tasked with the Employment Equity Act Modernization. I remain hopeful that every worker who has identity factors that place them in an employment equity group is able to realize their full potential. And I am confident that this will have positive impacts on their mental health.

Talking about equity and mental health

Years ago, as I was being interviewed by media for Eating Disorders Awareness Week, I remember concluding my responses with, “We can change the culture by changing the conversation.” I was previously not vocal about the employment inequities I experienced, but I have slowly been making a shift. They did impact my mental health, self-confidence and sense of inclusion. In teaching an undergraduate course on EDI as a visiting faculty member at SFU, I want to ensure that undergradu-

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ates have essential skills to bring into the workforce, and I am bringing my own examples forward, as well as the historical and current context in BC and Canada.

By acknowledging and addressing the interconnectedness of EDI and mental health, we can foster more inclusive, supportive and healthy workplaces. This approach not only benefits individual employees but also strengthens organizations, creating environments where everyone can thrive.

I invite you to reflect: Where are the intersections of equity and inclusion with mental health in your own life? Within your workplace? Are there ideas in articles you have read lately that caused you to pause? What about insights from your own experience or situations you have witnessed? When we notice the link between equity and mental health, all of us have the ability to contribute to change by changing the conversation. ▽

The Existing Workplace Landscape

EDI, MENTAL HEALTH AND SUBSTANCE USE

KRISTIN BOWER

When a person comes to work, they should feel part of something, that they are supported to do their best work, to grow and build new skills, and to—dare I say it—enjoy it! They should feel supported during the ups and downs we all face in life. I began my career in human resources because I believed that (still do, over 20 years later). I wanted to help shape workplace cultures for the better. But it wasn't until I experienced a major depressive episode about 15 years ago that my view shifted on the role an employer should play in employee mental health.

Kristin (she/elle) is a partner at Leda HR (www.ledahr.com). She is privileged and grateful to live, work, learn and play on the unceded territory and traditional lands of the Katzie (q̓ic̓əy̓) First Nation



Kristin Bower. Photo Credit Maxine Bullock

I was first diagnosed with depression in my twenties. Since then, I have also struggled with generalized anxiety disorder and an eating disorder and have abused alcohol. My mental health has ebbed and flowed; sometimes healthy and well and sometimes not. I accept that I have a chronic illness. What I no longer accept is that I should feel shame for it or that I should hide it.

What always helped me in the workplace was when I had a caring and empathetic leader who wanted

to support me to be a contributing, healthy member of a team. The managers who focused on my ability—my skills and potential—rather than any inability helped me see what I was capable of. While talking with my director at the time, I thanked him for accommodating me. I will never forget his response: “We aren't accommodating you. We are learning from you.”

What didn't help was when I had the opposite—a manager who was concerned about productivity above all

and who failed to see me as a human being experiencing a serious illness.

Working for a top employer at the time of my major depressive episode, but with a manager who just didn't know how to support me (or that they should), made me see that even the best workplaces can struggle to be there for an employee with mental health or substance use challenges. As I came out of the depressive episode, I decided to focus my career on workplace accessibility, equity, diversity and inclusion.

Facing the issue

But this isn't really about me. I am only one of the many Canadians who experience a mental health challenge. By the time Canadians reach age 40, one in two have, or have had, a mental illness.¹ Consider that number in the context of your workplace. If it's not you, it's the person next to you. We cannot continue to ignore the issue.

While anyone can experience a mental illness or substance use issue, those who belong to diversity groups experience these things at higher rates and face extra challenges when they live with a mental illness or substance use problem:

- Women have higher rates of mood and anxiety disorders than men.²
- Indigenous Peoples, especially youth, die by suicide at much higher rates than non-Indigenous people. First Nations youth aged 15–24 die by suicide about six times more often than non-Indigenous youth. Suicide rates for Inuit youth are about 24 times the national average.³
- People who experience prejudice or marginalization may use

Recognize that workplace disclosure is a process. Just because you've tried to start the conversation, doesn't mean the person will want to talk. Normalizing the topics of well-being and mental illness in the workplace can help people feel as safe as they would if they had the flu or a broken bone.



substances to cope with trauma or social isolation.³

- People in the 2SLGBTQQIA+ community are two and a half times more likely to experience depression, anxiety and substance misuse than non-2SLGBTQQIA+ individuals.⁴
- Trans women of colour have higher rates of suicide than others in the 2SLGBTQQIA+ community.¹

An understanding of equity, diversity and inclusion (EDI) concepts, like inequities and microaggressions by employers and colleagues, is vital to people living and working with mental health and substance use challenges. At a time when the rates of mental illness and substance use disorders remain high—as does stigma—we need to work together to create more equitable workplace cultures. When we don't, we lose talented, skilled employees.

Research shows that those with a mental illness are much less likely to be employed. Unemployment rates are as high as 70–90% for people with the most severe mental illnesses.¹ This hurts our economy and businesses, and it hurts people. Many who experience mental health challenges can work—and want to work! Having a place to go, with people who rely on your contribu-

tions, can help a person maintain a sense of purpose and self-esteem.

A manager who wants to help a person with a mental illness stay in the workplace, rather than take a leave (or quit), can work with a benefits provider organization to adjust workload, working hours or location. Often small tweaks can make a big difference.

New conversations

As an EDI consultant I work with clients of all sizes across sectors. What I have seen consistently in the past five years is that more employers are talking about depression and anxiety. I hear from employees about “lunch and learns” and how they encourage people to use the employee and family assistance provider (EFAP). This is all good. Here's what's missing...

It's all pretty superficial, and there isn't any real ownership or commitment to it. Discussion is still about the theory of supporting people and not the practice. It's not that managers and co-workers don't care. I think the opposite is true: they care a lot, but they don't want to say or do the wrong thing, so they opt to let the EFAP do the work.

A lunch and learn is a good start. But will one hour change anything? Encour-

aging employers to make use of the EFAP is great, but not when it means a leader uses it as an excuse to avoid a personal, human-centred conversation with an employee who might be struggling. Outsourcing human connection is never a good idea.

I believe we can create positive change. But not unless we change our approach. It takes a long-term commitment and action. Here are some tips for moving the dial on your mental health and substance use efforts:

- Connect your organization’s EDI efforts with your mental health and substance use efforts. EDI, mental health and substance use are absolutely interconnected, as shown by the statistics above.

- Consider the psychological and mental health impact (not to mention the effects on civility and respect) in your workplace of untrained managers and outdated, colonial policies and practices.
- Invest in leadership development grounded in EDI principles and centred on a human approach.
- Start talking about things like addiction and eating disorders. Consider how inclusive your social events might be to employees experiencing these things.
- If you see changes in an employee or colleague, don’t ignore it. Many of these illnesses are pretty darn lonely and isolating. Reaching out can be a lifeline.
- Recognize that workplace disclosure is a process. Just because you’ve tried to start the

conversation, doesn’t mean the person will want to talk. They may feel it’s too personal, or they may have experienced discrimination or stigma in the past. Normalizing the topics of well-being and mental illness in the workplace can help people feel as safe as they would if they had the flu or a broken bone.

I know. It can feel like a lot, particularly when we consider that most businesses in BC are small, with limited resources. So, here’s my tip for those organizations (and the big ones, too!): reach out to a partner. There are many wonderful mental health and substance use community-based organizations that can help. In the words of social worker Dr. Brené Brown, “We don’t have to do all of it alone. We were never meant to.”⁵ ▼

INTERESTED IN LEARNING MORE?

SUPPORTING PEOPLE WHO USE SUBSTANCES
A Brief Guide for Friends and Family

UNDERSTANDING SUBSTANCE USE
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Mental Health, Intersectionality, and Supporting Employees in the Wake of Crisis

WILL SHELLING, MPPGA

Understanding intersectionality in context

Intersectionality describes the various ways someone's identity can influence how they interact with policies and processes—from accessing social services to barriers in formal education. It is a theory and a practice that's entered the mainstream through podcasts, infographics on social media and government policies like the BC's Anti-Racism Data Act, which will collect data to remove race-based barriers to government services.¹



Will Shelling (he/him) is a Vancouver-based government relations consultant specializing in justice and EDI, with a focus on Indigenous relations, climate change and culture. He is a director for White Ribbon Canada, a non-profit dedicated to ending gender-based violence by engaging men and masculine people. Outside work, you can find him supporting local wine bars and cooking for friends

It's inevitable that our mental health can be tied easily to our occupations. We spend so much of our lives at work. For many, mental health and intersectionality may seem difficult to mesh, like fitting a square peg into a round hole. But an intersectional lens, when understood and applied clearly, can lead to improved employee retention and support, especially regarding mental health at work.

Intersectionality explained

Defined by Kimberlé Crenshaw in the 1980s, intersectionality is “the

complex, cumulative way in which the effects of multiple forms of discrimination combine... especially in the experiences of marginalized individuals or groups.”²

Growing up in the US as a mixed-race Black child in the early 2000s gave me a specific lived experience, different from the experience of others I've known in my adult years, who share similar identity components to me but grew up in Canada. This means policies, processes and, especially, the news impact me differently. Visceral



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For those who are marginalized in the workplace, it’s not your job to “fit in” to your workplace. Your employer and colleagues should foster inclusion and champion different opinions.



imagery of police violence and racist violence against Black folks during the summer of 2020 remains with me. It’s not normal to open your phone and see violent images of people who look like you brutalized. I know I’m not the only one who experiences this feeling today.

As a Black man, I’m impacted by racism every day, through either systemic factors or individual moments I share with other people. However, identifying as a man means I don’t experience the unique violence faced by Black women on account of both their gender and race (known as misogynoir).

The Black feminist activist and scholar Audre Lorde once wrote that “there

is no such thing as a single-issue struggle because we do not live single-issue lives.”³ Lorde said this in 1982 and her words call us today to understand that racism, sexism and homophobia are not an “issue” that can be addressed in a silo. Each requires complex responses that touch on other “-isms.” It’s hard to separate anti-racism from disability justice, as the Civil Rights Movement seeded the ground for that movement in the US,⁴ and homophobia cannot be viewed without understanding patriarchy as an oppressive force that harms all.

An intersectional lens on mental health and substance use policy

The core of taking an intersectional approach, especially with workplace policy, means being curious about

another person’s viewpoint. This requires radical empathy. We need to be honest with ourselves about our workplaces and be vulnerable, especially when accounting for the mental health of employees. Often, this is not a comfortable conversation but starts with questions:

Who? When working on a strategy or policy, you ask: who is present in the room? What biases are brought in? This allows you to critically evaluate which perspectives often receive attention.

What can change? Next, ask: what perspectives are not present? How can you include those people in the development of a strategy or policy? You may need to take a step back to understand who needs to be meaningfully invited into this space.

Who is working hardest? Are those with lived experience of substance use or mental illness subject to more emotional labour than those who do not? How can you even the field of work so everyone can show up fully to create the best policy? Ask: what does it look like to compensate emotional labour? I’ve seen students compensated for emotional labour on university committees through stipends or grants. In my professional career, I’ve witnessed EDI work built into positions and given time within the workday, so people don’t have to tackle it as extra labour.

What about stigma? There’s a possibility that people will not want to participate in EDI work. The stigma of substance use and mental illness stubbornly persists in our workplaces, which may prevent people with lived

experience from participating. This could be out of fear of retaliation or being treated differently. Participation can also incite difficult, traumatic memories. It may be best to reach out to community groups or local mental health advocates who can provide vital research and perspective on your workplace strategy.

No longer a “nice to have”

Providing these sorts of policies is no longer considered something that’s “nice to have” in the workplace. While protests let groups collectively mobilize for change, recent counter-protests, like those against queer and transgender rights in some Canadian cities, can cause a negative impact on 2SLGBTQIA+ people in the workplace. They are seeing people protest their inclusion in society. This has a detrimental effect on their mental health.

However, for many Black folks, our pain became hyper-visible once again with the visceral images of violence against Breonna Taylor, Ahmaud Arbery and George Floyd. This happened alongside rampant anti-Asian racism during COVID-19. Workplace mental health policy should include ways for folks of marginalized backgrounds to reach out to managers so they can take a step back and focus on themselves. It can be as simple as ensuring staff feel comfortable speaking up about their experience, or finding a dedicated person in the office who can advocate for them across management.

Finally, young workers are seeing workplace EDI policies as a workplace must-have. Gen Z is looking for supportive and inclusive spaces for marginalized people. They also see EDI as a good



Anxiety CANADA

“[My anxiety] came out the most in extreme perfectionism and an extreme fear of failure.”

- Ayla Tesler-Mabé
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indicator of a company’s wider commitment safe workplaces.⁵ Every company is competing for the best talent. If the best Gen Z workers have their pick of where to go after graduation, they’re likely going to choose a place where they feel supported—or will leave places that aren’t keeping up.

Despite what pundits and clickbait media articles say, inclusive workplaces are solidifying their foothold in the market. As our workplaces shift between virtual and in-person, we need more emphasis on people and their mental health to ensure all individuals are supported.

Intersectionality teaches us to use a unique lens to understand specific issues facing marginalized folks and to stay open to new perspectives. Openness is needed to bring in new ideas

on topics your office may not have grappled with before, and to make younger workers feel they belong.

For those who are marginalized in the workplace, it’s not your job to “fit in” to your workplace. Your employer and colleagues should foster inclusion and champion different opinions to ensure that those who come after you enter a safe place to contribute their fullest selves. ▽

Lead, Laugh, Learn

A LEADER'S GUIDE TO MENTAL WELLNESS IN THE WORKPLACE

LINDSAY BISSETT

At a time when mental wellness ranges from cheesy Pinterest quotes to ever-evolving treatment options, understanding wellness at work may feel like a steep hill to climb. Not to worry! We are in this together, putting one foot in front of the other.

Lindsay is a human resources consultant who blends expertise with a passion for social media and mental health advocacy. She has extensive experience in equitable HR practices and fostering positive employee relations. A wife and mother of two, Lindsay delights in kitchen dance parties and glamping under the stars



As a workplace leader, a future leader or someone who knows you don't need the title "leader" to be a true leader, your role extends beyond meeting deadlines and hitting targets. You're responsible for fostering an environment where team mental health is prioritized. Let's explore practical strategies for creating a workplace that promotes mental wellness, with a focus on building trust, normalizing conversations around mental health and substance use, and addressing systemic factors that may impact employee well-being.

Building trust and psychological safety

Psychological safety will always forge the path to a thriving workplace

culture, and trust is the foundation. When team members feel safe and supported, they're more likely to communicate openly and bloom professionally. Below, I describe some ways that leaders and leaders-to-be can cultivate trust.

Lead by example: Show your team it's OK to make mistakes. Although hard, making mistakes is the way we all learn. Try laughing at yourself by sharing an embarrassing story or funny mishaps. Laughter can break down barriers and build camaraderie. For example, some people have teased me for my upbeat way of speaking. Nonetheless, I've also seen how my positive outlook opens people up. Maybe our magic is in the things that make us different.

Encourage open communication:

Embrace a culture where team members feel comfortable sharing their ideas, even if they're a little out there. Why not? The next big breakthrough could come from the wackiest idea! "Innovation" is just a fancy word for wacky.

Establish clear expectations: Be transparent about goals and expectations. This isn't the time to be mysterious. Speaking of wacky ideas, can you integrate wellness targets into those boring ol' corporate ones? Give something new a try!

Normalizing mental health and substance use conversations

Mental health and substance use are crucial aspects of overall well-being. Yet they're often stigmatized and overlooked in the workplace. Remember: while we may not all have a mental illness, we all have a unique mental-health profile, with our own ups and downs. Normalizing conversations around these topics can help reduce stigma and encourage employees to seek support. Here are some ways you can promote open dialogue:

Provide education and resources:

Offering and attending workshops or seminars on mental health awareness and substance use is a good start. Something I have found helpful and inspiring is hearing from folks about their first-hand experiences with mental illness or substance use. Stories have incredible power to connect us.

Lead supportive conversations:

Conversations about mental health and substance use can happen in large or small settings. Be prepared if the conversation takes flight. How?

Practice. If you're stuck, a listening ear goes a long way in making someone feel supported.

Model self-care practices: Prioritize your own well-being. Don't be afraid to take a mental health day when needed, prioritize healthy practices or seek help for mental health challenges. We're all human. Recently, I talked to my manager about a tough week (it was only Tuesday!). She said she was starting work later than usual to go to the gym in the mornings. That story provided a sense of relief regarding the lunch-time walk I'd taken with my dogs the day before. Now I share dog-walk pictures in our team chat to inspire others to prioritize self-care and enjoy adorable dog photos!

Addressing substance use with sensitivity.

Substance use is still a very taboo topic. Taboo, yet normalized. From "mommy juice" cups and breweries to corner cannabis shops, we talk a lot about substance use, but not with the honesty it deserves. As a leader, and as a human, it's important to address this issue with empathy while also promoting accountability and support. We don't have to be experts, but we cannot continue shying away from this topic. Consider the following approaches:

Offer (and take advantage of) education and training: Workshops or seminars on addiction awareness can make a big impact. Many are available free online.

Offer confidential support: Ensure that employees have access to confidential resources, and don't forget to remind them that it's OK to reach out

related resources

For more on psychologically safe workplaces, see Workplace Strategies for Mental Health: workplacestrategiesformental-health.com

For more on ERGs, see this article by Steve Yan, of the Business Development Bank of Canada: bdc.ca/en/articles-tools/blog/employee-resource-groups-giving-employees-platform-improve-workplace

for help. Establishing that foundation of psychological safety will help assure employees are comfortable talking about hard things, which may lead to them accessing help sooner.

Rethink team events: Are your team celebrations or events inclusive of people who battle addiction or just prefer to avoid substance use? Are you planning after-work drinks? Consider something everyone can comfortably participate in. Escape rooms, cooking classes and team volunteering events are ways to bond inclusively.

Promoting equity and inclusion

Systemic factors can impact well-being and contribute to workplace stress. It's important to promote equity in your organization. Below are some strategies to consider.

Conduct equity audits: We don't know what we don't know, right? Get the facts. Evaluate your organization's policies, practices, attraction and retention strategies, benefit plans, overall

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Truly Human Workplaces

A LOVING MODEL FOR INTEGRATING GRIEF AT WORK

MALLORY O'CONNOR

I think we could all use a bit more love at work. Not romantic love, but a loving spirit of generosity, grace and support. I know from experience that when we hold this space for each other, our workplaces can become an integral part of our support system when grief inevitably interrupts our lives.

Mallory¹ has crafted a 30-year career made up of many positions and roles. Currently, as Practice Lead, Culture and Transformation at Habanero (www.habaneroconsulting.com), she focuses her skillset, in empathy, facilitation and relationship-building, on shaping and changing organizational culture and vision. Outside of work, she loves being active outside, especially in, on or near water



Mallory O'Connor

I work in a unique organization. We help companies become more purposeful places to work. We focus on improving organizational culture and how people communicate and collaborate. For almost 18 years I've crafted my way into many new challenges and roles at Habanero. I have both received and provided meaningful coaching and mentorship. It's been a remarkable and fulfilling career journey.

I recognize how unique this experience is and that not everyone has a relationship with work that they could describe as loving. I probably wouldn't have described it as such until it was put under stress by the biggest challenge of my life. In March 2020, our 15-year-old son Clive ended his life by suicide. At the brink of

the pandemic, the world crumbled around me and our family.

How my workplace, company leaders and colleagues responded has galvanized my thinking about how workplaces can create a loving model for grief:

Redefine bereavement leave

Our organization is "policy light." There isn't a prescribed bereavement leave. In many companies, standard leave is three or five consecutive days. As anyone who has experienced loss knows, that is not long enough to cover the initial passing, future arrangements, funerals and celebrations of life. I'd suggest making leave days flexible and as-needed, not capped in number. This allows employees to have support

if grief rears up in the future, such as on anniversaries and other milestones (i.e., birthdays, Mother's Day), without being forced to choose between income and well-being.

Advocate for grief as an acceptable condition for disability

I was able to access our company's short-term disability benefits when it was clear I was not able to return to work after Clive died. And when I exhausted the short-term period, I was able to transition to long-term disability with the support of my GP, employer and therapist. Having continuity of income, which was graciously topped up to 100% by Habanero, meant that I could focus on putting one foot in front of the other through the seemingly impossible journey of grief.

Treat grief like a concussion

After five months on leave, I started a gentle, part-time return to work. With the long-term disability provider, we framed the return as gradual—starting with just a few hours a week—and unpredictable. Unlike a physical injury, where the journey to full functionality follows a fairly typical trajectory, recovery from an emotional injury can be non-linear. We likened my capacity to that of a concussion, with good and bad days. Rather than forcing a fixed commitment and pushing through when it "hurt," my employer and the disability provider supported flexibility in my plan. In the end, it resulted in my full return to capacity, both at work and in my community, where I was able to resume my role as the chair of the Vancouver Mural Festival.²

Support grief literacy

Our organization is only about 60 people, so we tend to know each other

well, often sharing stories of our home lives and family experiences. One of the most remarkable things that Habanero did to help make my re-entry to work successful was to recognize how worried and uncomfortable my colleagues were about meeting with me for the first time after losing Clive. They didn't feel confident in knowing what to say or feared saying the "wrong" thing. Habanero brought in a grief counsellor, who facilitated a company-wide session on grief and loss, mental health, teen suicide and how to support a colleague. It gave people a chance to learn, ask questions and feel more comfortable.

Communicate expectations

While I can't speak for what others would want or need in coming back to work after a loss, I can share what was important to me. I wanted to prepare my colleagues for my return. So ahead of just popping in to a Teams meeting, I crafted an email to the whole organization, sharing my gratitude for their support and what they could expect from me. I helped them understand the nature of the work I'd be starting with and that I might still be a bit wobbly, especially with folks who knew Clive. That we might cry together. That I still wanted to hear about their families. That talking about Clive wasn't a taboo subject. And that if things were too hard for me in a given moment, I'd just let them know. This clarity helped so much in setting expectations for such a hard, complicated journey.

Over my initial few weeks back, I made the effort to meet one on one with work friends and colleagues. It was hard, but it was a way to integrate the loss into my work life. I can't say this would be the route for everyone,

but it helped me. I was able to communicate what I needed for a successful return and to reconnect with my peers.

A truly human experience at work

The experience I had with Habanero was unprecedented, but also congruent with the values of the organization. Hard times test what you stand for, and they showed through their actions that they stand for a human experience at work.

There are so many mutual benefits to creating workplace grief experiences like mine. For the employee, there's safety in experiencing their grief and returning at a pace that is in their control. The continuity of their income means they won't rush back just for the pay cheque; rather, they will return when they're emotionally ready. This ensures a more confident re-integration to work.

For the employer, this approach takes a long-term perspective, rather than focusing on the short-term resolution of getting an employee back to work. They create deeper trust and loyalty with that employee. The company is also doing the right thing for the business. They are retaining highly trained, valuable resources who would be costly to lose and replace. From a bottom-line perspective, they are better off than if they limited bereavement benefits, forced an unsuccessful return to work and negatively impacted their employee's well-being and engagement. They're demonstrating that they are truly living their values and are an employer of choice.

To me, this is truly human. And it's love. ▾

The Power of JEDI

TERRI MACKAY

As a longtime human resource professional, I apply the principles of justice, equity, diversity and inclusion (JEDI) in the work we do at Lookout Housing and Health Society. In 2020, Lookout founded a JEDI Committee to serve as a platform for discussing and addressing all these issues together, throughout the organization. To us, JEDI is not just a moral obligation. It is integral to our success.

Terri is a leader in the non-profit social services sector. She serves as People and Culture Director at Lookout Housing and Health Society, where she chairs the JEDI committee. Also a mental health first aid class facilitator, Terri is a believer in compassion, resilience and community whose leadership style is characterized by empathy, strategic thinking and dedication to social justice



Terri Mackay

The JEDI committee provides a forum for consultation, feedback and discussion on workplace matters of JEDI and anti-racism related to our workplace. Celebrating inclusiveness and diversity internally, as well as in our service work with guests, is one of the best ways to foster open-minded culture. Our strength lies in the perspectives, experiences and backgrounds of both employees and guests.

Lookout's mandate is to provide housing and support services to people with few other options, and we are dedicated to creating a respectful, inclusive environment where every individual can contribute fully to our shared objectives. To share how these principles can help other organizations

thrive, below I describe each and connect them to our work at Lookout.

Justice at Lookout is about justice-oriented services that work towards systemic change and address root causes of inequality, like poverty, discrimination, oppressive policies, overt racism and lack of access to services, housing and healthcare. Justice means dismantling systemic barriers that prevent marginalized groups from accessing necessary resources and support. Lookout is committed to recognizing and rectifying historical and ongoing inequities that have disproportionately affected Indigenous peoples, racialized communities, 2SLGBTQ+ individuals and other marginalized groups.

Equity at Lookout is about going beyond a general idea of equality. Equity recognizes that different people and communities have different needs and starting points. It involves creating tailored interventions that address these diverse needs, ensuring everyone has the resources and opportunities to thrive.

An equitable approach at Lookout means working to reduce disparities in access to services. Staff are immersed in cultural diversity through the clients we serve and take great pride in celebrating diverse cultures at each of our sites. We have menus representing different cultures and identify programs that highlight cultural artwork. It brings a big smile to our faces when we see our staff and guests make bannock for the very first time—everyone benefits.

Diversity means honouring and respecting collective staff diversity, with a focus on inclusive, trauma-informed language. We also empower people from diverse backgrounds to become part of the team. A diverse Lookout is better equipped to address the unique challenges faced by our most vulnerable communities.

The JEDI Committee developed Lookout's diversity statement: "Lookout Housing and Health Society is committed to empowering people from different races, gender, age, religion, identities and unique experiences. We welcome everyone from diverse backgrounds and encourage diversity that fosters an inclusive environment." As we welcome clients from diverse backgrounds, our organizational environment must reflect anti-racism, reconciliation and JEDI principles.

Inclusion means creating environments where all individuals feel welcomed, respected and valued. This means services must be designed and delivered accessibly and affirm everyone. Inclusive services at Lookout actively seek input from the communities we serve, involving them in decision-making processes to ensure services are relevant and responsive.

This might include:

- using inclusive language
- using a trauma-informed lens when communicating
- providing interpreting services (for non-English speakers)
- ensuring physical accessibility
- creating safe spaces where marginalized individuals can express needs and concerns without fear of discrimination or judgment
- regular staff and guest surveys

For me, JEDI is about a sense of belonging and feeling valued regardless of position, status or heritage. If we can create a culture where guests, clients and staff feel the same way, I believe we can make this ever challenging world a better place. The most rewarding part for me is to be included in diverse cultural celebrations.

Indigenous representation in JEDI activities

In alignment with the Truth and Reconciliation Commission's Calls to Action, we recognize the need to address historical and ongoing impacts of colonization on Indigenous peoples. We're dedicated to implementing practices and policies that respect and honour Indigenous cultures and perspectives. This includes celebrating



traditional values of our Indigenous guests through ceremonies like drum circles, smudging and having accessible Elders for consult.

Lookout held a t-shirt design contest in 2022. Two of our Indigenous guests designed a t-shirt for Lookout to create awareness of the impacts of intergenerational trauma and promote the truth that every child matters. Our employees proudly wear it on National Indigenous Day and other days throughout the year.

The t-shirt design, shown above, centres on the medicine wheel and the four colours, which are meant to be inclusive of all nations and peoples:

- The orange handprint represents missing, murdered and Indigenous women and children
- Paw prints represent the protectors
- The four stones in the middle of the design represent the four seasons
- Coloured stones represent emotions, spirituality and physical and mental balance

CONTINUED ON PAGE 30

If mental health involves expressing ourselves fully in all settings, no hiding, we might ask: how can workplace culture change to make that easier for everyone? Here, we present the experiences of two contributors who share what it's like to join in at work events while living with their own unique point of view: as sober, and while living with disordered eating.

Navigating Sobriety and Cultural Sensitivity at Work

A CALL FOR INCLUSIVITY

HOPE SINCLAIR

Entering the dimly lit room buzzing with the voices of my colleagues, a knot tightened in my stomach. It was a work social—an evening I had been worried about attending. Looking around, I saw glasses clinking, drinks being passed around and colleagues engaged in lively conversations and laughter. They looked comfortable in each other's company.

Celebrating 15 years of sobriety in Vancouver, Hope has extensive experience working within marginalized communities. Passionate about championing sobriety, she brings a deep understanding of addiction and recovery to all she does



Photo credit: Juanmonino at ©iStockphoto.com

Taking a deep breath, I reminded myself why sobriety mattered so much to me. It wasn't merely about avoiding the physical toll alcohol took on my body; it was about regaining control of my life and my decisions. Yet, as I stood there amidst the cheer of my co-workers, I couldn't shake the feeling of being an outsider.

An invisible barrier seemed to separate us—one I couldn't break. Overwhelmed by my thoughts and insecurities, I withdrew into silence. Hyperaware of how I was seen, I became even more anxious. Colleagues openly questioned my quietness, as if there was something wrong with me.

Despite the sting of feeling rejected, I was committed to sobriety. I understood that staying true to myself meant accepting that not everyone would understand my choice. Instead of self-pity, I chose to focus on the positives of my journey—the newfound clarity, sense of empowerment, and knowledge that I was gaining more control of my life. As I left the event that night, a wave of pride washed over me. Despite the challenges, I had stood firm in my sobriety.

Still, a persistent thought lingers: Wouldn't it be wonderful if events like these, particularly during the holiday season, were alcohol-free? I know I am not alone; many other employees who are sober or in recovery avoid gatherings due to discomfort or triggers. I also recognize that, for some colleagues, the choice to abstain from alcohol might not stem from addiction issues, but from cultural or personal beliefs.

As workplaces evolve, it's crucial for employers to consider the needs and experiences of all employees, including those in recovery from substance use and those who choose not to drink alcohol for cultural reasons. ”

Work events should be inclusive of all employees, irrespective of their relationship with alcohol. This would not only foster unity among co-workers, but also align with the work we do to support those grappling with addiction. Without alcohol, everyone could fully participate in, and enjoy, the festivities without fear of judgment or exclusion. This would cultivate a more supportive workplace culture. I see a future where workplace celebrations embrace inclusivity. Then everyone could partake in the joy of the season without feeling sidelined or pressured to compromise their relationship with alcohol.

As workplaces evolve, it's crucial for employers to consider the needs and experiences of all employees, including those in recovery from substance use and those who choose not to drink alcohol for cultural reasons. There are lots of ways to create environments where individuals feel safe, valued and empowered. Employers can offer non-alcoholic beverage options (not just water or soda), provide resources for employees in recovery and reassess the role of alcohol in workplace gatherings.

Together, we can navigate sobriety and cultural sensitivity at work with dignity and respect, thus paving the way for a more inclusive and compassionate future. ▾

Living with mental illness in your family?

What would you like your child to know?

BCSS Youth programs provide children and teens with age-appropriate educational resources and information about mental illness and substance use disorders.

With the guidance and support of our program facilitators, participants are provided a safe space to share healthy discussions about mental illness with their peers from across BC.

Learn more at: www.bcssyouth.org



This is Me at Work

DOES MY EATING DISORDER HAVE A PLACE AT MY “PROFESSIONAL-WORLD” TABLE?

MARY ANNA

I’m a professional, a mom, an athlete, a professor, a researcher, a friend and more. I’m hard-working, enthusiastic, resilient, fun, caring and a little stressed. I love to refinish old furniture and other creative endeavours. These things may be how my colleagues describe me, see me or engage in conversation with me. What about the days, though, when I look and act stressed or tired, or have a hard time connecting?

Mary Anna is a 60ish-year-old health educator and researcher. She has lived with disordered eating since her twenties. High functioning and successful, still, she wonders what she might have achieved otherwise. Her aim is to share, educate and decrease the impact of this illness for others. Mary Anna lives in the Okanagan



Photo credit: NoSystem images at ©iStockphoto.com

On the days my eating disorder (ED) comes to work with me in a big way and fills my briefcase, I can’t explain that it’s the reason I feel this way. I need to make up something else that is “acceptable” to talk about. This makes me feel lonely, unsupported and not true to myself or my colleagues.

You know those “bring your kids to work” or “job shadow” days? Well, my ED comes to work with me every day; it’s a daily shadow. However, I don’t get to show it off, be excited about it or have it engage with my work or colleagues.

My ED is such a huge part of my story, which began in my late teens,

yet I have few safe people to share it with, certainly no one at work. I end up pushing it down and feeling squashed. If you are living with an ED, I'm sure you can relate. It's not welcome at the professional-world table.

We spend so much time at work. Any job can be competitive, and the very nature of that can fuel an ED. How do we explain or ask for a sick day or leave? Workplace meetings, luncheons and social events can also be a struggle. We are left to find creative ways to not eat this, to have that instead, or not this much but that much. That added stress may have us avoiding these social situations. Oh, the ED will love that—but then we miss out!

The nuances of how our ED shows up varies (i.e., from a very full to a relatively empty briefcase), but it's there, no matter where we are in our recovery (or not). I am in the field of health, and eating disorders is an area I research and teach about. Logically, I know the value of having both academic training and lived experience, yet it makes it harder to say, "this is my health issue" because of the very nature of the field I'm part of. We all know it's not about will or knowledge or food! Hence, I remain anonymous in this article. In certain circumstances I am happy to share.

We're all dealing with something. Many, more than we know, also share the experience of EDs. I find support among



Photo credit: psisa at ©iStockphoto.com

I leave you with an image of one of my favourite pieces of nature, a pinecone. I've always loved them, collected and displayed them. During one of the many times I have picked one up off a trail, I had an "ah-ha" moment: all pinecones are unique and beautiful and deserve to be cared for, just like every body! ”

those who also have lived experience and with close friends and family who accept, even if they don't understand.

I hope you find those people for you, so when you show up to work, your ED takes up only a little pocket in your briefcase. Hopefully, the ripple effect of more interactions is greater understanding in the workplace.

I leave you with an image of one of my favourite pieces of nature, a

pinecone. I've always loved them, collected and displayed them. During one of the many times I have picked one up off a trail, I had an "ah-ha" moment: all pinecones are unique and beautiful and deserve to be cared for, just like every body! Next time you see a beautiful pinecone, pick it up, cherish it and think of wonderful you. ▼

Exploring Religious Accommodations in the Workplace

KAMAL ARORA, PHD

Show up to work in December, and your workplace or office space may be festooned with lights, Christmas trees and red-and-green Christmas holiday décor. Perhaps your workplace organizes a Secret Santa gift exchange for the annual Christmas party. During Easter, your employer might organize an Easter egg hunt. Come October, colleagues may dress up in spooky costumes around Hallowe'en.

Kamal holds a PhD in anthropology and works in equity, diversity and inclusion in public health. Kamal is the former editor of Visions Journal



Several of the statutory holidays observed provincially and federally are based on Christian days of significance, such as Christmas and Easter. Many workplaces in BC openly celebrate these Christian holidays, or holidays that have European roots. Yet, there are many holidays that British Columbians celebrate that are not acknowledged or accommodated in the workplace—Eid, Kwanzaa and Vaisakhi are some examples—despite the diversity of people who call this province home.

I am a Sikh, Punjabi woman who grew up as a second-generation immigrant settler in the Lower Mainland. Like many others of my faith, I celebrate Sikh holidays such as Bandi Chhor Divas, Diwali and Vaisakhi. One year, when I asked a previous employer to make accommodations for me to celebrate Bandi Chhor Divas and Diwali, my request was refused. Although I had support from my union and a Sikh organization advocating on my behalf, the issue dragged on. It left me feeling disheartened,

with low morale, and that my beliefs did not matter—I felt that who I was, was not celebrated or even tolerated. I was anxious that I would be seen as a nuisance or a problem¹ at work, and I felt stressed. I enjoyed my work and interactions with my colleagues, but on some days I would collapse in a heap on my couch after work, mentally drained and exhausted. In short, the issue impacted my mental health.

Our province is incredibly diverse. Racialized peoples make up almost 34 percent of the provincial population, and immigrants make up 29 percent.² Despite these numbers, racialized workers are discriminated against in the labour force. For example, racialized workers make less average income than white workers³ and are more likely to be overqualified for the jobs they have.⁴ Racialized workers also face other forms of systemic discrimination at work, such as discrimination in the hiring process or maltreatment by others. We know that systemic racism and discrimination can impact people’s mental health and well-being.

Workplaces must abide by human rights statutes. Section 13 of the BC Human Rights Code⁵ enshrines your right to be treated fairly at work and not be discriminated against because of your ancestry, religion, Indigenous identity, gender, age and more. Employers have a legal duty to accommodate a worker’s needs, such as religion or accessibility needs, to the point of undue hardship. This means employers must accommodate until it becomes too difficult, unsafe or expensive to do so.⁶ Yet, despite these legal protections, there are systemic challenges for diverse communities

with regards to celebrating days that are significant to them.

It starts with advocacy

Despite these systemic challenges, there are ways you can advocate for yourself and your colleagues. Awareness is key. You can:

Build excitement. For example, you might build a calendar with your colleagues to learn more about each other and days that might be significant for each of you. You can also write to your marketing or communications department and ask them to share messaging marking celebratory days on their internal and external communications channels. If you’re in a leadership position, you can poll your staff with an optional survey to find out what dates are important to your team and how you can best support your team members.

Get specific. Your workplace cannot make accommodations for you if it doesn’t know what’s important to you. If there are specific religious holidays you celebrate, discuss their importance for you with your supervisor or manager. Together, you can explore how accommodations can be made. For example, perhaps you can substitute another day for a statutory holiday,⁷ an option outlined in BC’s Employment Standards Act.

Aim for flexibility. If there’s flexibility in your schedule, you might be able to take a day off and make up that time elsewhere in your work week. Employers can also explore other options, such as offering flexible personal days for workers to take additional time off. If you’re in a unionized position, you can also

contact your union representatives to discuss ideas.

An inclusive and equitable workplace leads to better mental health for employees. We live in a time where “diversity,” “equity” and “inclusion” are buzzwords we hear when talking about societal institutions, be it health-care, academia, the justice system or others. Turning buzzwords into real change at the workplace requires more than just lip service. Workplaces must do better. Employers, including supervisors, managers and leaders, play a critical role in ensuring equity in the workplace, creating an inclusive work culture and promoting diversity. Creating safe spaces for open communication between workers and employers is key.

Religious accommodations are an important issue affecting workers’ experiences and equity in the workplace, but it is one issue among many, including hiring, promotion and retention policies, compensation, training and mentorship opportunities, and many more. Small steps, like proactively acknowledging, accommodating and welcoming our differences, help address systemic inequities and go a long way towards creating workplaces where workers not only show up, but can show up as their full selves and thrive. ▽

The Professional Advantages of Being a Lesbian

ELISABETH COOKE, BA, JD LAW

I have the privilege of representing my true self personally and professionally. I have always lived in urban areas of Canada, though my travels and adventures have taken me to further-flung places to live and work, such as Australia and Southeast Asia. I have had access to excellent education, financial support, advice and mentorship, and many other resources and supports—the list goes on. I have been learning to unpack my privilege, to see where it is, where it comes from and what to do about it.

Elisabeth¹ is the CEO and co-founder of Dignii Technologies Inc., a company that advances dignity in the workplace. A lawyer by training, she advises governments and public and private organizations. A specialist in diversity management, she is also a speaker and commentator for media and conferences. She loves yoga and whiskey, and lives in North Vancouver with her wife and two children



Elisabeth Cooke

So even though I'm in my mid-forties and I have been a lesbian—the 'L' in the 2SLGBTQAI+ community—for pretty much all that time, my sexual orientation hasn't really held me back. Or maybe it has, and I haven't realized it. I'm certainly more outwardly aware of my sexuality now that I'm married and have children.

I work in the field of diversity, equity and inclusion, where my lived experience gives me added insights and an advantage when understanding what goes on for equity-deserving groups.

Because of who I am, I do my job in a different way from some of my peers. I see inclusion enriching the lives of everyone—not just marginalized people—and I regularly bring in personal examples of what diversity means to me.

Stories about the ridiculous things people say to me: "Maybe you just haven't met the right guy." Or pointing out the biases I realize I have, like assuming all the other kids at the park have a mother and father and not same-sex parents. Being able to

make a joke and express how I see myself making judgments and having biases, even though I'm a member of the 2SLGBTQIA+ community. I find it helps people take their guard down and enjoy the journey on the path to creating a more inclusive community.

I care about what I do for a living. I care about the outcomes of my clients and customers. Not only because it reflects on us as a company, but because I truly believe that advancing dignity is the right thing to do. I think my personal experience and passion have contributed to my success.

I spend every day at Dignii providing advice and expertise to leaders in government and companies across Canada on how to advance dignity. Our software gives our clients the metrics—the baseline evidence—to understand who they employ and what they experience at work. My professional reputation is enriched by my academic achievements, expertise and experience advising clients for over 15 years. I feel exceptionally lucky to be able to do something I care about for a living. I also err on the side of humour to redirect difficult conversations, and I feel very comfortable speaking to large groups.

Now, that doesn't mean things have been easy. I have to come out to people every time I meet someone new. I field questions and queries about my personal life and decisions that my heteronormative (straight) friends would never get. Things like:

- Are you sure you're gay? (a personal favourite)
- How do you divide up chores in your house?

- How did you have kids?
(Newsflash: there are many ways to make a family!)

Thankfully I'm not bothered by these questions, and I manage to answer them in a way that is informative but also lets people know that the question is probably something they shouldn't ask someone else. I respond with answers like:

- Are you sure you're straight?
- Usually equally, but if I can pay someone to do it, I will.
- We had kids because we wanted kids, and we made it happen.
(Sometimes this is followed by "How did you have kids? Can you tell me exactly how it happened?" which leads people to realize how personal the question is.)

For the most part I can turn those moments into learning experiences. Professionally, this is generally the goal. And using humour makes those moments much lighter and easier to address. Sometimes, especially if I'm giving a presentation, someone challenges me or wants to debate for the sake of arguing. Thankfully I have a Juris Doctor of Law and two younger brothers, so I'm well versed with those situations and can disarm them.

I embrace the opportunity to represent my community. Representation of the 2SLGBTQIA+ community has lagged, historically. Or we have painted people into stereotypical supporting roles, for example, in TV and film. The lesbian gym teacher, the gay best friend and, disturbingly, the victim of a crime have become classic examples. Today we are seeing much better representation across media and

throughout our culture. We see the 2SLGBTQIA+ community represented in films for who they are as a whole person, not for their sexual orientation or gender identity.

I consider it another form of privilege to be able to share who I am and be seen by others. Visibility is helpful, particularly for younger people. But it also helps their parents and others in the community. This is especially true since my wife and I had kids. Instead of being "diverse" because I'm gay, I can be "diverse" as representing many different things all at once. A mother, a wife, a business owner, a settler, a lawyer and a woman with an incredibly dry sense of humour that, frankly, is only getting drier.

Importance of diversity of experience cannot be overstated—but you should look out for it. ▽

Workplace Violence Experienced by BC Nurses

A FEMINIST AND ANTIRACIST LENS

JUE LUO, RN

As nurses, we often face abuse and violence at work. Personally, I've had my fair share of being yelled at and even physically assaulted. I recall an incident where a patient, furious at the facility's policies, punched me in the head. This attack left me shocked and humiliated. Sadly, my experience is far from unique. Many of my colleagues have endured similar violence, leading some to sustain serious injuries and even leave the profession.

Jue is a registered nurse based in Vancouver. She currently works in cancer care and mental health and has a keen interest in holistic health. In her spare time, she enjoys reading, running and immersing herself in music



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The rest of us keep showing up. But we're only human, and wearing that professional façade too long takes a toll. Unresolved trauma from witnessing or experiencing workplace violence affects our performance and mental health. A province-wide survey in 2019 underscored high rates of mental health symptoms among BC nurses, with about half reporting symptoms of PTSD—that's 1.5–3 times higher than the national average.¹ And statistics show violence toward nurses

has increased in BC over the last two decades.² Personally, I see a link between these two realities.

As frontline workers, we interact with individuals who tend to be distressed due to health concerns. In BC, local issues like forest fires and the overdose epidemic have also contributed to collective trauma and stress. Frustration with our strained healthcare system has led many to direct their anger at nurses. Since the COVID

pandemic, I've noticed a rise in violent incidents experienced by myself and my colleagues alongside those reported in the news. This trend is backed up by a national poll showing satisfaction with healthcare among BC residents dropped by 36% from 2020 to 2023—the largest decline among all provinces.³

Digging into research, I found gendered and racialized perceptions of our profession that have deep historical roots. These troubling perceptions intersect with challenges faced by the BC healthcare system and perpetuate violence toward nurses. We need to address structural sources of violence that compromise nurses' well-being. As an Asian female nurse and recent immigrant to Canada, I'm willing to share my insights and contribute to this important discussion.

Gender bias and devaluation of emotional care

Even though more men and people of different genders are becoming nurses these days, nursing is still mostly viewed as a career for women. As of 2021, more than 90% of BC nurses were female.⁴ When violence happens for us at work, it's often brushed off as part of the job, mimicking how society normalizes violence against women.

Feminist literature points out that women in caring roles, like nursing, are expected to show endless empathy.⁵ This perception makes patients and visitors more likely to get aggressive towards female nurses and intrude into our personal space. Some of my colleagues have been subjected to offensive comments about their bodies and unwanted touching. Alarming, work-related sexual violence experienced

by BC nurses has increased drastically over the last two decades.²

Nurses often don't receive the respect we deserve compared to doctors, who are viewed as the ones making critical clinical decisions. However, I know firsthand that the emotional and relational care nurses offer plays a significant role in healing. We invite patients to ask questions, listen to their fears and provide comfort.

Unfortunately, recent healthcare reforms focused on cost savings have burdened us with excessive paperwork and tasks, leaving us with less time to connect with patients.^{5,6} This, combined with the ongoing nursing shortage, contributes to long wait times. For years, BC has recorded the longest wait times in ERs and walk-in clinics in the country.^{2,7} As a result, some patients become frustrated and lash out.

Racial stereotypes and underreported racialized violence

Another source of structural violence affecting nurses is institutional racism. While BC prides itself on multiculturalism, clashes can arise due to different languages, cultures and traditions. In a high-pressure healthcare setting, patients or health professionals might misinterpret the actions of a racialized nurse. For example, an Asian nurse who avoids eye contact—a sign of respect in their culture—may be perceived as uninterested or unprofessional.

Personally, I've faced racial slurs from a patient who insisted on having a Caucasian nurse. In another instance, a patient doubted my competence because my English isn't

perfect. In those moments, I felt hurt, demoralized and vulnerable. Repeated exposure to microaggressions can lead to emotional and physical exhaustion. It's troubling that many workplace anti-violence programs only address physical attacks and overlook racist attitudes and actions that nurses of colour encounter regularly.

A study in the US found that Asian and Black nurses were less likely to speak up about workplace violence compared to white nurses.⁸ In my opinion, this can be partly explained by the pressure on nurses of colour to fit into certain stereotypes, such as being the "grateful immigrant" (a myth that immigrants should always be thankful for their new country, even when treated unfairly).

I've found myself staying quiet when I sense harassment at work sometimes, worried I might be labelled as oversensitive. For Asian nurses, stereotypes also depict us as submissive or only capable of menial tasks, like feeding or cleaning. We can be seen as unworthy of respect, making us more prone to workplace violence.

As BC welcomes nurses from around the world to care for a diverse population, it's crucial for organizations to provide better support to newly arrived nurses of colour. Simply asking individuals to enhance their communication skills and adjust to the Canadian work culture is missing the point.

From my research and observations, the higher rates of violence experienced by nurses in BC are tied to systemic issues and stereotypes, including those related to gender and

race. I believe organizations can do a better job by involving frontline nurses in developing effective strategies based on our lived experiences. Additionally, improving staffing levels is essential for nurses' safety, as research shows heavy workloads are a primary reason for patients' dissatisfaction and aggression.²

Helping ourselves

To my fellow nurses, I want to offer a word of encouragement. It's OK to feel overwhelmed, but you don't have to face unsafe work situations alone. We can take small steps to strengthen our resilience:

- Lean on trusted co-workers. Nursing thrives on the camaraderie we build facing challenges together.
- Set boundaries firmly and be OK with saying "No." Avoid taking on more tasks when you are already spread thin.
- Speak up and report incidents of violence to your manager and union. Refuse to work in situations where you feel threatened.
- Get involved in workplace safety initiatives, like diversity and inclusion training, community outreach and healthcare workers' rights committees.
- Engage in activities outside work that help you relax and recharge.
- Celebrate your cultural heritage, language skills and who you are. Never believe anyone who uses your differences to justify mistreatment. ▽

LEAD, LAUGH, LEARN— CONTINUED FROM PAGE 15

representation and compensation. Whose voices are missing, and from which tables? When we know better, we can do better.

Provide diversity and inclusion

training: Encourage learning experiences that balance seriousness and information with light and inspiration. This isn't about ticking a box. It's about bringing people along on a journey.

Support employee resource groups

(ERGs): ERGs encourage belonging and peer support (see Related resources). When establishing an ERG network, make sure groups are rooted in a purpose, with appropriate technical and emotional resources.

By being proactive, leaders can create an environment where employees flourish. And remember: a little levity can go a long way. Sometimes we must be serious, but not all the time. Don't be afraid to laugh, lighten the mood and show your team that it's OK to be human. We're in this together, one step at a time. ▽

THE POWER OF JEDI— CONTINUED FROM PAGE 19

- The 12 stones represent the ancestors

Red Dress Day is dedicated to honouring and raising awareness for missing and murdered Indigenous women and girls. We show solidarity by hanging red dresses and facilitating cultural art projects. This also serves as a public call for justice and remembrance. The photo accompanying this article captures our guests creating artwork to symbolize and bring awareness to Red Dress Day.

JEDI and internal change

The JEDI Committee conducts annual and ongoing assessments of all Lookout policies and identifies policy and training gaps. In 2022 we won a grant from the Federation of Community Social Services of BC to put staff through specialized equity and reconciliation training. Our staff are comfortable with concepts like unconscious bias and cultural competency, but training increased their ability to apply it to real-life situations.

Lookout has also been recognized as a finalist by the Charity Village Awards for Best Non-profit Employer for Diversity, Equity and Inclusion. This proves there's a place for everyone at Lookout! It may seem like establishing a JEDI Committee is a lot of work, but the benefits outweigh the effort. We've seen increased staff engagement, increased guest satisfaction and an overwhelming sense of community. JEDI at Lookout is a force for good! ▽

The Struggle is Real

SAN STEPHENS

When I was young, I knew I wanted to have children. I also wanted a loving partner. I was raised by a single mom. Later on, she met someone and we became a blended family. Those years were not easy. I struggled with low mood, and I was hospitalized with anorexia nervosa as a preteen.



San is a mother, partner, daughter and grandmother. She has been working as a family peer support worker for the last several years. She also shares her love of arts and crafts with local elementary school students. She will return to finish her degree in child and youth care this fall

I met somebody when I was in Grade 12. We got married when I turned 19 and had two children. He was very controlling and emotionally and physically abusive. Not the dream marriage I had wanted. He also struggled with mental health. I tried leaving him several times but always ended up going back.

My Grandma knew my marriage was failing and suggested I go back to school, which I did. I got an on-call job where I completed my first practicum. I was thinking about leaving again when my husband had a major overdose attempt that left him with brain damage. It was hard, but that summer I did leave him for good.

I was now a single parent going to school and working on-call jobs to pay

a mortgage. My girls and I were all falling apart in our own ways. Both struggled with anxiety and managing their emotions. My youngest had extreme meltdowns. Add in their experiences witnessing family violence, being mugged while out with their grandma and having a traumatized mother, it made sense they were struggling. I was working so hard I kind of forgot about my own mental health, which got me in the end.

When they were in elementary school, I met my current partner. We eventually had a baby together. I was working on my degree and planned on continuing after I gave birth. It was an extremely hard pregnancy—I had excruciating migraines and nausea. My migraines did not go away. I was prescribed strong pain medications,

which I became addicted to. Working full-time became impossible. I ended up on a disability pension. Since my ex-husband was unable to work, I didn't receive any child support for my two older children. I could make extra money while on disability, so I took a local job roughly in my field. It didn't pay well, but it was in my community during school hours.

The mental health of all three of my children got worse. They all received counselling at Child and Youth Mental Health. My youngest entered the school system just as my middle daughter started high school. Both were struggling with insomnia and anxiety. We ended up with a double whammy of school refusal—neither of them had the capacity to attend regularly. I remember receiving a letter from my youngest's school that she'd been late or absent 52 times. All I could do was laugh. I didn't need a reminder. This was my life!

When my middle daughter entered Grade 8, a combination of bullying, anxiety and depression stopped her from going to class. My youngest struggled with separation anxiety, sensory issues and learning. I couldn't work full-time, as I was either homeschooling or driving to alternate programs out of our catchment area.

Working was also very difficult for me when my middle daughter was a teen and young adult. She was emotionally dysregulated and experienced suicidal ideation. She self-harmed, struggled with disordered eating and used substances. I refer to these years as "my put-out-fires years." I was continually locating and keeping her safe, taking her to the ER and

sometimes picking her up from the police station. Nobody can do this and successfully hold down a full-time job.

Our social circle got really small. My daughter couldn't tolerate being alone or having people over. She also damaged our home. There's a lot of stigma that comes with mental health and substance use. You feel shame and guilt as a parent of a child struggling with mental health. We felt we needed to protect ourselves from all the judgment, and we were exhausted. I found it hard to do anything social or even go to appointments. My marriage barely survived.

This journey also hit us hard financially, as obviously, I wasn't bringing in very much money. We paid for private psych assessments, equine therapy (with horses) and tutoring for my youngest daughter, and for dialectical behavioural therapy (DBT) and a concurrent disorders therapist for my middle daughter. My partner and I also took DBT skills courses for parents, and we did family therapy with my youngest. Her behaviour brought up my past traumas, so a saving grace was having my own therapist.

We spent a lot of money during those challenging years—house repairs, lost cell phones, prescriptions and special food. My middle daughter didn't go on disability pension until she was 23, so we had to support her. I know some of the money I gave her went to support her substance use.

As things settled a bit, I took on more work gigs. I feel if I had completed my schooling and had one well-paying job, I would have had less stress. It

took a couple jobs to make comparable money.

I know parents in my situation are always told self-care is important, but it's totally true! Mini self-care moments were the way to go for me. It could just be sitting in my car for a moment to ground myself before going into the house, or taking deep breaths of fresh air. It adds up. If I hadn't started practising self-care, I wouldn't have withstood the intense situations we experienced.

I encourage caregivers to carve out time to replenish energy with something you enjoy. Start small, with five or 10 minutes a day to do something just for you. Maybe sit in the sunshine with your morning coffee, or start a project and do a little each day. When your life isn't going as you'd hoped, it's important to experience these moments of mastery and joy.

We got better with setting limits. It was hard at first, as my middle daughter's behaviours got bigger before they got smaller. We started clawing back pieces of our life, doing activities outside the house again. At first it was hard for her to tolerate being home alone. Eventually, she started using her coping strategies. I can say today that she's functioning really well.

All my daughters are riding the waves of life. We're still trying to get ahead financially. Having three healthy daughters is what matters. And I'm finally going back to school! ♡

We All Need to Start Somewhere

EQUITY FOR IMMIGRANTS

VISHAD DEEPLAUL, MGC

My husband and I come from the province of KwaZulu-Natal in South Africa. We met 24 years ago and are together and married 21 years. We have a son who'll be 13 this November. We had him via surrogacy in South Africa. Immigration was not something we ever considered. I'm fourth-generation South African. We were established individuals. You have all your support system, all your people.



Vishad Deeplaul

Vishad is the Senior Manager for Equity, Diversity & Inclusion, People & Culture, for the City of Burnaby. Born and raised in South Africa, he is a passionate advocate for equity, diversity, and inclusion. With experience in non-profits in BC. He and his husband achieved constitutional change for equal treatment for fathers in South Africa

Still, we could see that South Africa was becoming more dangerous, crime-wise. Politically, there was a decline. We wondered: when our son was at the age to either study or get into the workforce, would there be opportunities for him? We wanted a better life for him.

We immigrated in 2017 to Coquitlam. Irshad, my husband, was offered a job in Vancouver. My son and I followed three months later. We wanted good schools, a good community.

Immigration is only for the very brave. The first two years were very difficult. The sense of community was the biggest piece missing.

Entering a workforce without supports

My son was five and I needed to find a job as quickly as possible. I was turning 40 and very confident. But that confidence soon was taken away. Everybody asked for Canadian experience. How would you have Canadian experience when you haven't lived here?

One day, I went into a furniture store just to look. The manager offered me a job because I spoke about the struggles of not being able to find one. I worked 10 a.m. to 2 p.m. Monday to Friday, then on the weekend I'd do a full shift. I was very appreciative for the work, but it also affects you when you're educated or have international experience and

it isn't recognized. We all need to start somewhere, but I think as an immigrant it's harder.

Not finding work brings stress, and then when you do get it, it's different. In working hard to prove yourself, you neglect yourself, your mental health. It impacts your home and family. I eventually got alopecia, where your hair falls out. I didn't want to come across as ungrateful. But clearly it had an effect, not only mentally but physically.

As immigrants, you don't have the tools to navigate this space. You worry when you ask questions: are you going to offend somebody? I felt incredibly isolated because I'm such a people person.

Feeling the mental health impacts

I can't remember any supports for immigrants. Workplaces didn't have that. There was no understanding that I might need a day off because of a cultural celebration. When I worked in retail, there were no initiatives for people to meet your family, spouse or kid.

Through a conversation back in South Africa, my dad introduced me to his friend's daughter, who works for Anxiety Canada. She was our support. She shared the MindShift® CBT app with me and told me how to use it to calm myself down. It really was a big help.

In my home country, going for therapy and getting support is shunned. I think we have to show new immigrants there's nothing wrong with it. It's a powerful tool. The other big help was my son. When you immigrate with kids, you're forced to settle very quickly. You want them to be comfort-

able. So I joined the school parent advisory council (PAC). The PAC was made up of seven individuals from seven different countries, all immigrants. We were each other's support system. And we still are today.

Changing the workplace

Where we are today in workplace culture is very different. Creating workplaces where we are included and voices and diversity are celebrated is what I get to do in my work with the City of Burnaby. Knowing, as an immigrant, what it is to experience those feelings, I make sure we push an equity agenda forward. I don't want anyone to ever feel unheard.

We did a cultural assessment at the City of Burnaby. This showed us the demographic landscape of the city. We wanted that information so we could support our staff. From that, we created engagement initiatives. We have cultural celebrations, like Lunar New Year, Diwali and Nowruz. We aim for pride in the workplace.

If I could make magical wishes for what workplaces should be, one of the biggest is realizing the value of lived experience. You can have the most amazing mind working for you, but if you're not creating opportunities for staff to give you feedback, you don't know that value. When you do, automatically, you have somebody feeling more included.

Some people feel that a master's or PhD from a developing country is not as credible as a degree from Canada. It's such a silly belief. That's why immigrants are probably going to feel undervalued and permanently chase feeling valued again. We need mental

health resources, policies, education and programming pieces. We must create opportunities for staff to get to know each other's backgrounds.

We held a welcoming week in September last year. We reached out to staff who felt comfortable to share their stories as newer immigrants. It was so great to read. When you take these opportunities, you go in depth. This is a person, that's their spouse, that's their kids.

Progress towards equity for all

I still get folks asking me, "So tell me where you're from?" I say I'm from Burke Mountain, in Coquitlam. I think we can get to more respectful language, with education and resources for folks who are not immigrants.

Currently I'm studying because my workplace gave me that opportunity. It's going to help me grow. I feel more connected with my workplace, but also more commitment, because they've shown that commitment back to me.

When I describe myself now, I say I'm a South African-Canadian. The seven years I've been here have made me very proud to be an immigrant. The initial struggles make you stronger. And I love supporting other newer immigrants so they know it's going to be OK. It's going to be OK. ✓

related resources

To learn more about the MindShift® CBT app, visit: anxietycanada.com/resources/mindshift-cbt

Youth and Homelessness

COMPLEXITY AND HOPE

CHELSEA MINHAS, MSW

As someone who has worked alongside homeless, at-risk and trafficked youth for over 16 years, I have learned a lot about this complex issue. When we talk about homelessness, we are not just referring to individuals sleeping rough on the streets—it extends much further than that, to couch surfing, staying in shelters or temporarily living in unsafe environments.

Chelsea has been with Covenant House Vancouver for over 16 years. As Chief Program and Impact Officer, she is driven by her mission to use evidence-based practices to serve all youth with respect. Chelsea is also a sought-after trainer and speaker. She lives in Langley with her husband and two children, Amira and Axel. See her TED Talk by scanning the QR code below



The lack of stable housing not only puts a young person's physical well-being at risk, but also takes a toll on their mental health and overall sense of security.

When I interact with these young people, I see their resilience and strength in the face of adversity. I'm often reminded of a young woman I worked with who was trafficked for many years and whose first trafficker was a family member. This young person is now raising her own daughter. Many youth like her have experienced trauma, abuse or neglect, leading them to leave unsafe living conditions in search of a better life. These young people have hopes and dreams, they are kind and giving and they are an important part of the future of our communities. Homeless-

ness is the least interesting thing about them.

It is crucial to recognize that homelessness is not a choice youth make, but a consequence of complex social issues and systemic failures. They face unique barriers to accessing, stable housing due to a variety of factors. Some of these challenges include:

Lack of legal documentation. Many homeless youth do not have access to essential identification documents, such as birth certificates, photo ID or even immigration paperwork. Sometimes they must leave home without them. Papers also get lost during housing instability or ruined by weather while youth live on the street. This can be difficult to resolve, between cost, wait

times and barriers to legal support. Yet these documents are needed to access housing, employment and education.

Limited income and employment opportunities. Homeless youth often lack steady income and face barriers to accessing job opportunities due to their age, lack of experience or limited education. Income assistance and disability rates are not adequate in today's housing market and there are not enough rental supplements available. Without financial stability, affording housing becomes a significant challenge.

Family instability and conflict. Consider this: I have met a young person who, before coming to Covenant House, chose to live on the street because it was safer than their home. Trauma histories and generational challenges can impact families' ability to support youth. This affects young people's chances of securing or maintaining housing. Often the work we do at Covenant House is to support youth to create a network of chosen family.

Mental health and substance use challenges. Homeless youth experience higher rates of mental health challenges such as depression, anxiety and PTSD.¹ In addition, some homeless youth experience challenges with their substance use. This can impact a youth's daily functioning and their ability to get or maintain housing. There are limited housing options that meet the needs of youth living with mental health and substance use challenges. Many communities lack developmentally appropriate harm reduction and recovery options.

Barriers to education. Imagine being a young person having to stay up all

night on the street to stay safe, then being expected to catch a bus to school with no money and stay alert to learn all day—on an empty stomach. The survival mode of homelessness does not lend itself to success in school. Survival can take priority over school attendance. Our school systems also lack resources to support the trauma and learning needs that homeless youth face—even though so many dedicated and amazing educators advocate relentlessly for students. And without a strong educational foundation, accessing stable housing can be challenging.

Lack of support networks. Homeless youth may have a reduced number of healthy relationships or networks that can provide guidance, mentorship or emotional support. Without these they may feel isolated and overwhelmed, making it harder to navigate the complexities of securing housing.

Trauma history. Many homeless youths have experienced trauma, abuse, neglect or adverse childhood experiences that have a lasting impact on their ability to trust others, form relationships and maintain stability. Addressing these underlying factors and trauma is crucial in helping them overcome barriers to housing.

These are just some of the barriers that homeless youth face when seeking stable housing. To support them, our goal must be to go beyond meeting immediate needs and take a holistic approach. We have to:

- create a safe space where they can feel heard, valued and supported without judgment
- offer developmentally appropriate spaces that say, "I see you, you

matter and you are worth it!"

- work closely with young people to create personalized support plans that empower youth to build skills and transition to adulthood in a healthy way
- build trusting relationships and offer resources, such as counselling, education and employment assistance
- advocate for systemic policy changes and increased public awareness in the areas of adolescent mental health and substance use, lack of affordable housing and inadequate developmentally appropriate support systems

In these ways, we can work towards long-term, sustainable solutions that prevent homelessness and ensure that every young person has the opportunity to thrive.

When we treat homeless youth as equals and involve them in decision-making processes, we empower them to take ownership of their lives and shape their own destinies. At Covenant House, we have Youth Advisory Committees for all our programs. We also host youth consultation events on policy and strategic planning. We listen because, together, we can break the cycle of homelessness.

Working with youth is a privilege. It has been both challenging and rewarding. Each day, I am inspired by their strength, courage and determination. An investment in youth is an investment in community. If we can impact the life of one youth, we can impact generations of change—from one relationship, one investment. Homelessness is the least interesting thing about them. ▽

We All Belong Here

TOWARDS HOUSING FOR EVERYONE IN NORTH VANCOUVER

STEPHANIE WILSON

In 2019 I spoke in support of a rental development in the City of North Vancouver. The project would add two new four-storey buildings beside an existing tower. Many rental projects require “demoviction” (evicting tenants so the building can be demolished for redevelopment). This project was “infill,” going into unused lot space.

Stephanie (she/elle) is an activist in North Vancouver.



Photo credit: MangoStar_Studio at @iStockphoto.com

It seemed like an easy win for North Vancouver: a relatively gentle increase in density located near transit and within walking distance of daily necessities. Plus: no displacement of tenants. Of the project’s 40 units, four were designated below market rates for older adults at risk of homelessness. At the time, the rental vacancy rate in the City of North Vancouver was 0.8% (it’s worse today: newer data puts vacancy at 0.6%).¹

It was not an easy win. All told, 230 people signed a petition against the rezoning needed for development. A City of North Vancouver councillor said it was the largest petition they’d

ever received.² Many who spoke against the project worried about increased traffic and said the additional units would disrupt enjoyment of Victoria Park, a nearby greenspace. One claim stayed with me: bringing in more renters would stop nearby condo owners from showing respect towards the Cenotaph in Victoria Park.

The project ultimately passed and is currently under construction.

Four years later and 11 blocks to the east, a similar story unfolded. In November 2023, I attended an open-house information session for a housing development in the District



Photo credit: Marco Rosario Venturini Autieri at ©iStockphoto.com

It's hard to put into words the anguish inflicted on unhoused people in Vancouver in recent years. They've endured street sweeps, decampments, and, I believe, ongoing harassment from the Vancouver Police Department and park rangers. ”

of North Vancouver. The proposed project, in the 1200-block of East Keith Road, would bring 60 new units of supportive housing and five units for people with complex care needs, which would be provided at shelter rates.

I attended after reading online posts from residents hoping to cancel the project. In my view, many of those statements seemed discriminatory towards people who are unhoused or use drugs. At the open house, it was obvious that support for the project was the minority position in the room.

Still, rezoning to allow development at 1200 E Keith was ultimately approved

in February 2024—unanimously—after a record-breaking five days of public hearings.³ The majority of speakers were against the project. Over 2,000 people signed a petition rejecting the development, primarily citing safety and drug use concerns.⁴

I'm so happy to see this project move forward and I'm looking forward to welcoming 65 new residents into my community. However, I am seriously concerned about the ideologies that have been twisting conversations around supportive and low-barrier housing.

Ideology, not solutions

Far-right and right-wing ideologies have long focused on homelessness.

From the far right, homelessness is twisted to justify xenophobia, often arguing against immigration. Right-wing ideologies tend to focus on supposed personal failures. In this view, unhoused people are portrayed as violent criminals and threats to society. Low-barrier housing developments that do not require abstinence are often framed as promoting criminal activity and harming neighbourhoods.

This rhetoric was highly visible during BC's 2022 municipal elections. Media coverage linked crime to homelessness, especially around stranger attacks in Vancouver. Tough-on-crime candidates around the province argued that they should be elected for peace and order. The Vancouver Police Union endorsed a mayoral candidate for the first time: Ken Sim and the ABC Vancouver party. Sim was elected on the promise to hire more police officers to take on allegations of rising crime.⁵

The problem? The Vancouver Police Department simply didn't report data that showed stranger attacks dropped 60% between 2021 and the first half of 2022. This wasn't made public until November 2023.⁶ But hatred towards unhoused people continues.

Between an overpass and supportive housing

The future 1200 E Keith development sits at the intersection of East Keith Road and Mountain Highway. Behind the site, an overpass crosses Highway 1. In July 2022, individuals associated with the Freedom Convoy movement and related far-right causes started a Thursday afternoon overpass rally. Their messages have evolved,

including attacks on 2SLGBTQ+ rights and harm reduction strategies like safer supply.⁷

It's painfully ironic to me that so many residents fought against 1200 E Keith on the grounds that it would bring public drug use into the area and endanger residents when, within sight of the lot that will provide housing and care for 65 people, a group of Freedom Convoy and related far-right supporters spend their Thursday afternoons on an overpass drinking beer and, in my view, harming people in the community.

A bridge away but not a world apart

It's hard to put into words the anguish inflicted on unhoused people in Vancouver in recent years. They've endured street sweeps, decampments, and, I believe, ongoing harassment from the Vancouver Police Department and park rangers. Nestled under soaring mountains and insulated by a history of generational wealth, North Vancouver seems different at first glance. It's easy to assume that homelessness isn't as much of a problem here.

But walk the forest trails and you'll come across tents and remnants of camps where people have sought shelter. In addition, housing and related services in the Metro Vancouver area are concentrated in Vancouver. People from North Vancouver are forced to leave their community and seek services there. People deserve a dignified home, and they deserve to live in their community of choice.

I have a few reasons to be hopeful. The District of North Vancouver has

HELP US HELP THE ENVIRONMENT

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several upcoming housing developments, including 1200 E Keith. And the City of North Vancouver revised its Mid-Market Rental Policy in 2022, which protects renters who are being priced out of increasingly astronomical rates. But I'm very concerned about what will happen between today's housing announcements and the time people have keys to their homes.

For example, a Travelodge hotel was turned into temporary supportive housing after it was acquired to provide shelter during the COVID-19 pandemic. It was originally hoped that the Travelodge would help bridge the gap until permanent housing was ready at 1200 E Keith in 2026. Instead, Travelodge residents were evicted in mid-2024, and some were forced to look for housing outside of North Vancouver due to lack of housing supply.⁸

Like others, I moved to North Vancouver in 2017 for access to incredible outdoor opportunities, a calmer pace of life and an easy commute to work. No one assumed the worst of me. But that's how people are treated when they seek non-market or supportive housing. It isn't right, and more people need to stand up for community members who are being treated unfairly. There's more than enough space for everyone to make a home here. **V**

resources

BC's Office of the Human Rights Commissioner: Employment equity toolkit

bchumanrights.ca/resources/employment-equity-toolkit

A toolkit to help employers build more equitable workplaces. The toolkit introduces topics like employment equity, human rights, and discrimination, and then covers five topic areas: accommodations, compensation, data collection, complaint resolution, and hiring and promotion.

Trans Rights BC transrightsbc.ca

Information about human rights for trans, non-binary, and gender-diverse people in BC, including employment rights and steps to take if you experience discrimination at work. You'll also find information about human rights complaints and a guide to advocate for yourself and your rights in spaces like workplaces.

- For more on self-advocacy, check out **Trans at Work: Navigating the Workplace as Trans and Non-binary Folks** from Friends of Ruby in Ontario. This zine guides you through practical self-advocacy approaches and offers suggestions to manage difficult situations at work. Download the zine at friendsofruby.ca/resources/trans-at-work-zine

Canadian Centre for Diversity and Inclusion ccdi.ca

Learn more about building equitable workplaces in Canada through education opportunities, a community of practice, and partnerships. CCDI offers the Canadian Certified Inclusion Professional certification. You can also find resources to explore religious and cultural perspectives as well as general information on topics like anti-Asian hate, diversity and accessibility, anti-Black racism, and Indigenous inclusion.

Tech + People Network tapnetwork.ca/edib/getting-started

Equity, diversity, inclusion and belonging tools for the Canadian technology sector to support and increase the representation of equity-deserving groups in tech workplaces. Find a resource library, leadership training, and a benchmarking toolkit to help workplaces evaluate the impact of EDI strategies.

Indigenous Ally Toolkit reseauumtlnetwork.com/en/publication/ally-toolkit

The Indigenous Ally Toolkit from Montreal Indigenous Community Network discusses what it means to be an ally, why education matters, and how to engage in anti-oppression work. You'll also find good practices for organizations and workplaces.

Against Representation Without Transformation by Merray Gerges

earlymagazine.com/articles/against-representation-without-transformation

In an article from Early Magazine, Merray Gerges asks: How do the lives and experiences of BIPOC (Black, Indigenous, and People of Colour) employees actually matter to institutions and employers? Does simply increasing representation challenge systems and biases that drive inequities and inequalities?

 This list is not comprehensive and does not necessarily imply endorsement of all the content available in these resources.



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