BUSINESS
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FACTSHEET

RACE AND MENTAL HEALTH AT WORK

Business in the Community's (BITC) 2019 Mental Health at Work: Time to Take Ownership report, in partnership with Mercer March Benefits, was informed by a statistically valid YouGov panel of more than 4,000 employees. This factsheet highlights some of the insights drawn from the research relating to black, Asian and minority ethnic (BAME) employees and their experiences of mental health at work. The survey found that:

- Overall, almost 2 in 5 (39 per cent) of employees have experienced poor mental health where work was a contributing factor in the past year (up from 36 per cent in 2018). However, for BAME employees it was almost one in two (47 per cent).

- While 51 per cent of employees overall feel comfortable talking generally in the workplace about mental health issues (down from 54 per cent in 2018), only 40 per cent of BAME employees feel comfortable. This can be linked to a further finding from this research that white employees are more likely than those from a BAME background to have been formally diagnosed with a mental health condition (31 per cent compared to 23 per cent).

Of those BAME employees who have experienced mental health symptoms related to work, a quarter (25 per cent) stated their ethnicity was a factor in these symptoms, compared to only 1 per cent of those with work related symptoms who were white. There were other factors where there were significant differences between the ethnic minorities and white workers; the survey shows that BAME employees are significantly more likely to believe their gender was a factor of their symptoms – 14 per cent compared to 7 per cent of white employees; their age was a factor – 18 per cent compared to 12 per cent of white employees and becoming a parent – 9 per cent compared to 4 per cent of white workers.
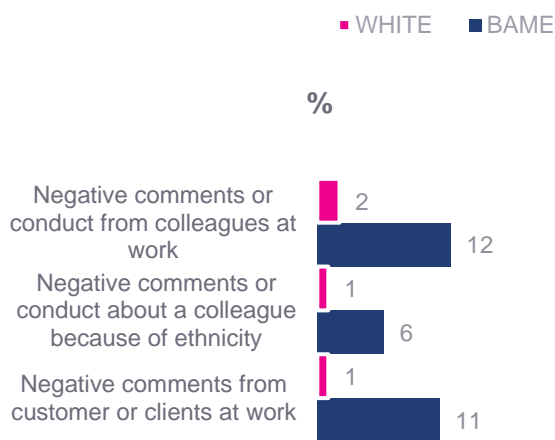
> **47 per cent of BAME employees reported experiencing poor mental health symptoms related to work in the last year.**

Even more disturbing our research shows that nearly a third (30 per cent) of the BAME respondents felt that they had experienced negative workplace behaviours or outcomes in the past year due to their ethnicity. Most commonly, this has been negative comments from colleagues or customers and/clients. In simple terms, BAME employees were more likely to suffer racial discrimination, harassment and bullying (*see graph 1. below*). This finding echoes the BITC Race at Work Surveys 2015 and 2018 [i]that revealed on average 25 per cent of BAME employees have experienced or witnessed racial bullying and harassment from managers, co-workers and customers.

Racial discrimination in the workplace comes in many forms from institutional racism (the denial of progression opportunities based on race), to racial bullying and micro-aggressions/behaviours.

Graph 1: Experiencing negative behaviour in past year due to ethnicity - percentage

■ WHITE ■ BAME

%

Negative comments or conduct from colleagues at work: 2 / 12

Negative comments or conduct about a colleague because of ethnicity: 1 / 6

Negative comments from customer or clients at work: 1 / 11

Source: BITC Mental Health at Work report 2019

Other factors that cause BAME mental health inequalities in the workplace and beyond include socio-economic inequalities, isolation at work, lack of career progression/hiring biases and mental health stigma:

ISOLATION AT WORK

SOCIO-ECONOMIC INEQUALITIES

SOME FACTORS CAUSING BAME MENTAL HEALTH INEQUALITIES

LACK OF CAREER PROGRESSION / HIRING BIASES

MENTAL HEALTH STIGMA
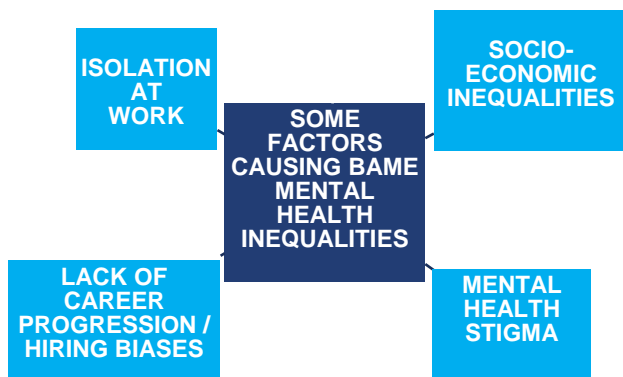
Isolation at work

BAME workers are often isolated in the workplace due to being under-represented. They are often the only BAME person in the room or team having nobody to share their experiences with. This situation is even more acute for ethnic minorities in senior management positions. This isolation and loneliness can affect mental wellbeing.

Our research shows that BAME managers struggle to put the interests of their team members before the interests of the organisation with 16 per cent of BAME managers more likely to report this dilemma happening every day compared to 8 per cent of white managers.

BAME managers were also more likely than white managers to say that they did not handle the most recent occurrence of someone experiencing mental health problems well (25 per cent compared to 15 per cent). Furthermore, BAME managers are more likely than white managers to cite having no resources or materials for support (25 per cent compared to 14 per cent) and having no one to talk to about it as barriers (14 per cent compared to 7 per cent).

Socio-economic inequalities

Mental health problems are often more prevalent in BAME communities due to the intersection of race and poverty and the way ethnic minorities are economically marginalised in UK communities.

There is a huge race employment pay gap; on average black workers get paid 8.3 per cent less than white workers.[ii] Our survey findings highlight that 37 per cent of employees from a BAME background said they felt underpaid compared to 27 per cent of white employees. BAME workers often face higher risks of job insecurity and are a third more likely to be on a zero-hour contract[iii].

Our research shows that one in five (20 per cent) of BAME workers cited unpredictable hours of work/shifts/income as the specific issue causing

mental health symptoms at work. It is clear this greater financial insecurity BAME employees face has a greater toll on their mental health.

Gaining employment has always been a challenge for ethnic minorities - there are 3.9 million BAME people in employment in the UK despite a persistent employment rate gap that remains between white people currently (78.2 per cent), and BAME people (66.8 per cent).[iv].

Lack of career progression/hiring biases

Racial biases in institutional hiring and the lack of equal career opportunities for BAME staff has a negative toll on employee mental health.

In the survey, 39 per cent of BAME employees said that they felt stuck in their role with no opportunities for progression compared to white employees and 22 per cent of BAME employees felt that their role was never clear or changed regularly. 9 per cent of BAME employees felt they did not get a job or promotion due to their ethnicity compared to 1 per cent of white employees.

Previous research [v]disclosed that nearly half of all BAME respondents felt they needed to leave their current workplace in order to progress compared with less than a third of white respondents.

Mental health stigma

In some ethnic minority communities mental health problems are rarely spoken about and can be seen in a negative light. This will undoubtedly carry into the workplace making it more difficult for people from these different communities to seek support and discuss any mental health issues they are facing.

Intersectionality and one size does not fit all

BAME employee experiences may intersect with other parts of their identity. One fifth (20 per cent) of BAME LGBT+ employees report feeling as though they lost a job in part due to their sexual

orientation or race compared to 7 per cent of those from a white background.

Research by the TUC [vi]found that 57 per cent of BAME women who have been affected by bullying and harassment at work have suffered mental health problems as a result. Data from the 2017 Race Disparity Audit[vii] revealed that black adults were more likely than adults in any other ethnic groups to have been sectioned under the Mental Health Act.

On the other hand, white British adults were more likely to be receiving treatment for a mental or emotional problem than adults in other ethnic minority groups.

This highlights the necessity to recognise and understand the unique issues facing individuals from different ethnic minority groups when dealing with wellbeing in the workplace. Employers should not put BAME employees under one umbrella.

It is worth giving a mention to refugees and asylum seekers who are often from a BAME background and may enter the workplace once status is given. Research [viii]highlighted by the Mental Health Foundation shows that asylum and refugee seekers are five times more vulnerable to mental health issues than the UK population due to the difficult conditions they face such as unemployment, isolation, inadequate housing, and lack of legal protection.

What can employers do

The business case for taking care of diversity and employee wellbeing is well documented by McKinsey[ix]

'More racially diverse and happy teams result in strong business outcomes for organisations'

We urge employers to implement three calls to action. These are priority actions we believe will have the biggest impact on organisational capability to support better mental health:

1. **Create good work that enhances mental health for everyone.**

2. **Acknowledge and support poor mental health, whatever the cause.**

3. **Sign up to the [Mental Health at Work Commitment](#).**

Recommendations for leaders

- Take an inclusive and employee-led approach to providing support.

- Introduce training for workplace adjustments and modifications so that support can be tailored.

- Reinforce and tailor mental health support for BAME groups as these employees are at a particular disadvantage at work, with their own unique set of challenges.

- Promote and implement zero-tolerance policies and guidelines that:

  - develop awareness of non-inclusive behaviours and define those that are unacceptable
  - support and encourage staff to be responsible bystanders when they witness bullying and harassment.

- Join up inclusion and wellbeing activity to enable a whole person approach and track your progress in both these areas.

- Identify and address barriers that exist in the organisation specifically for BAME employees.

- Be explicit about the responsibility of line managers towards BAME employees and educate them on these unique challenges.

- Ensure all line managers can address the mental health issues of an employee no matter their gender, ethnicity or background.

- Use induction courses to emphasise the importance of mental health and wellbeing in the organisation and signpost ways in which support is provided. Highlight specific support and networks for BAME colleagues.

- Challenge mental health champions to create links with their BAME networks or sponsors, to create targeted awareness and support.

- Embed mental health and wellbeing into apprenticeship schemes. Give apprentices opportunities to contribute to health and wellbeing policies.

- Create inclusive leaders that empower BAME employees and improve their performance and productivity.

- Consider signing the Race at Work Charter. This sends a clear message to all employees that the organisation is committed to addressing race inequalities and will commit to:

  - appointing an executive sponsor for race.
  - capturing ethnicity data and publicise progress.
  - committing at board level to zero tolerance of harassment and bullying.
  - making clear that supporting equality in the workplace is the responsibility of all leaders and managers.
  - taking action that supports ethnic minority career progression.

Relevant resources:

- [Tackling Racial Harassment and Bullying toolkit](#)
- [BITC Mental Health at Work 2019 report](#)
- [The Mental Health at Work Commitment](#)
- [BITC PHE Mental Health for Employer toolkit](#)
- [Inclusive Succession Planning: A Toolkit for Employers](#)
- [Let's Talk About Race](#)
- [Race at Work Charter](#)

Who are we counting?

UK Census 2011 ethnic groups. All reference to BAME (black, Asian and minority ethnic) workers or 'ethnic minority' workers in this factsheet include the following Census 2011 ethnic minority categories:

Asian/Asian British
- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other Asian

Black/African/Caribbean/ black British
- African
- Caribbean
- Other black

Mixed/multiple ethnic groups
- White and Black Caribbean
- White and Black African
- White and Asian
- Other mixed

Other ethnic group
- Arab
- Any other ethnic group

Reference to 'white' people in this factsheet include the following Census 2011 categories:
White
- English/Welsh/Scottish/Northern Irish/ British Irish
- Gypsy or Irish Traveller
- Other white

Source: Office of National Statistics (ONS)

References:

[i] Business in the Community (2015) Race at Work Survey 2015 (24,457 participants) available at bitc.org.uk
[ii] TUC (2018) Racism in the workplace
[iii] Ibid TUC
[iv] Labour Force Survey, Annual Population Survey and Labour Market Status by ethnicity (18 February 2020)
[v] Business in the Community (2011) Race to Progress: Breaking down barriers available at bitc.org.uk

[vi] TUC (2018) Racism in the workplace
[vii] Race Disparity Audit (2017)
[viii] Mental Health Organisation BAME Communities
[ix] McKinsey & Co (January 2015) 'Why Diversity Matters' article.

All statistics in this factsheet are taken from the 2019 Mental Health at Work Report unless otherwise stated.