Intersectionality and Mental Health

If we don't experience something ourselves, how do we become aware that it exists? How do we put ourselves in someone else's shoes to understand what life experiences are like for them?

Research shows that mental health challenges impact us all, but that they are compounded for people also experiencing **stigma and discrimination** as a result of **intersecting identities** (race, gender, class, ability, sexuality etc.).

In order for us to build more caring and empathetic workplaces, we must **create space to talk about the impacts and experiences of intersecting identities** as they relates to mental health.

KEY TERMS

Social Determinants of Health:
The conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems that shape and influence health outcomes. These include economic policies and systems, development agendas, social norms, social policies and political systems.

Intersectionality: The interconnected nature of social categorizations such as race, class, disability, sexual orientation, and gender as they apply to a given individual or group. Intersectional identities can create interdependent systems of discrimination and disadvantage.

Positionality: The social, cultural and political context that makes up ones identity. It describes how this identity influences, and potentially biases, your understanding and outlook of the world. Identities and personal experiences vary within social and/or cultural groups.

Microaggressions: Everyday verbal, behavioural or environmental indignities, slights, put-downs and insults (intentional or unintentional) that can cause ongoing stress and trauma.

IDENTITY AND MENTAL HEALTH

Frequency of **mental health problems and negative health outcomes** are experienced by **marginalized communities**.

Race
Gender identity & expression
Indigeneity
Sexual orientation
Disability
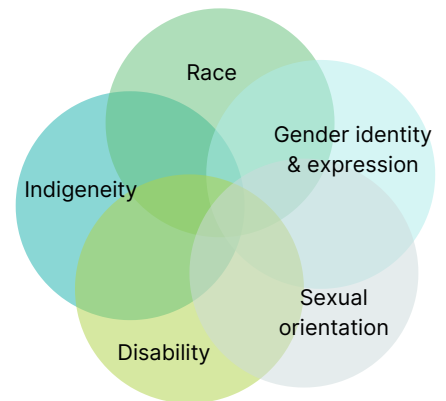
WHY?

Discrimination
- Racism
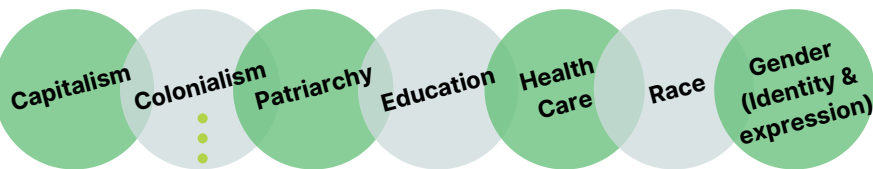- Rejection (family/community)
- Isolation

Harassment
- Microaggressions
- Trauma
- Violence

Structural Inequities
- Barriers to access/care
- Lower quality of life/care
- Lack of culturally trained mental health professionals

EXAMPLES

Capitalism • Colonialism • Patriarchy • Education • Health Care • Race • Gender (Identity & expression)

Cultural suppression/persecution and forced assimilation have profound effects on health and social outcomes **across generations**.

PROTECTIVE FACTORS

Connection to a peer group

Reconnection to traditional practices and medicines

Supportive community