Health Equity and Inclusion Statement

Approved by the National Council Board of Directors on October 23, 2023

At the National Council for Mental Wellbeing, diversity, health equity and inclusion are core to our work.

We define health equity as the elimination of unjust, avoidable and unnecessary barriers in health care. These barriers can be based on one’s background, geography, gender and gender identity, sexual orientation, age, economic class, disability or discriminatory systemic factors such as racism and access to resources. Health equity is urgent and overdue, and we advocate for mental wellbeing recognizing and acknowledging that these barriers exist.

To combat these entrenched obstacles and to help everyone achieve their full health potential, we are committed to actively addressing equitable access to services, building capacity for care delivery, investing in our workforce and promoting mental wellbeing as a core component of health and health care.

Our more than 3,400 members and the millions they serve are fighting for a stronger, better funded and more integrated approach to mental health and substance use care. Therefore, we need varied perspectives across the full spectrum of the mental health and substance use services field — including within our own workforce and from those whom we serve — to achieve this. As such, we require diversity of skills, experience and backgrounds among our board of directors, leaders and staff to reflect the diverse nature of our environment and the varying circumstances of those we serve.

At the National Council for Mental Wellbeing, we ground our culture in the experiences of those who seek our care. We understand that a sense of belonging — which we define as the intersection of equity, diversity and inclusion — is integral to wellbeing. Therefore, we uphold respect and humility as core tenets of our ethos.

As an organization that operates through the lens of health equity, we also expect this commitment from our organizational leaders and members.

Our organization and Board are committed to exemplifying equitable and inclusive leadership. More specifically, we will:
1. Openly acknowledge systematic injustices and work to dismantle them in all areas of mental wellbeing access, care and treatment.

2. Work to better understand the makeup of the people we serve and ensure our members and our Board reflect these populations across geography, gender and gender identity, sexual orientation, age, economic class and disability.

3. Work more closely and meaningfully with those we serve, including both members and clients, and remain open to how we view our work.

4. Use person-centered language that addresses our workforce and the people we serve in a sensitive and informed manner.

5. Revise our recruiting process to attract a multidimensional workforce with diverse lived experiences into our organization.

6. Cooperate with partners across sectors to develop inclusiveness, trust and health equity.

7. Engage our colleagues, members and those they serve to ensure they feel valued, welcome and included.

8. Back legislation and programs to support diversity and inclusion efforts in health care.

9. Create and support an environment where colleagues and members feel comfortable with the self-reflection and vulnerable dialogue necessary for true accountability for progress on these commitments.

10. Treat succession planning as an opportunity to develop new perspectives in leadership, for both our organization and Board.