

Review Article

Workplace inclusion: A scoping review of the qualitative literature

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Abstract.

BACKGROUND: An inclusive workplace culture supports and values the individual and collective work processes of workers from diverse backgrounds. The reality or perception of inclusion or exclusion at work can influence the social functioning, health, and well-being of workers. However, we lack knowledge about the concepts relevant to inclusion at the workplace. Furthermore, research is needed to better understand the drivers and obstacles to workplace inclusion to better promote participation in working life.

OBJECTIVE: This scoping review of the qualitative literature identifies the barriers to and facilitators of workplace inclusion.

METHODS: Systematic searches of five databases were conducted from 2000 to January 2020. Pairs of reviewers independently screened and reviewed all citations and full-text articles. We used Arksey and O'Malley's scoping review framework which advances through five stages. Barriers and facilitators of workplace inclusion were categorized relative to a multi-layered conceptualization of workplace inclusion and grouped by theme. Studies were described and thematic results totaled and communicated with evidence tables and conceptual maps.

RESULTS: Thirty-nine qualitative studies met our inclusion criteria. All five domains of the multi-layered framework were represented by the reported shared experiences of study participants. Organizational level factors, especially attitudinal barriers were the most reported barriers to workplace inclusion. Facilitators of workplace inclusion focused on employer level factors and most often cited the role of inclusive leadership and support.

CONCLUSION: Workplace inclusion requires consideration of societal, organizational, employer, and interpersonal level factors in addition to individual worker characteristics.

Keywords: Work, employment, social participation, scoping review

1. Introduction

The quality of our lives is greatly impacted by our relationships with others [1]. This sentiment extends to our working lives where we spend most of our time. Social relationships at work are possible contributors to our sense of workplace inclusion surpassing mere physical integration in the same workspace [2, 3]. Furthermore, it is this social integration that has

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a positive influence on our well-being. Workplace inclusion extends beyond the recruitment of a diverse workforce with varying sociodemographic attributes. Inclusion is a dynamic process driven by external and internal factors beyond gender, disability, race, and ethnicity.

Inclusive organizational cultures house employees from different backgrounds in an environment where they can contribute both individually and collectively to the best of their abilities while feeling valued, validated, and accepted [4–6]. However, there is a paucity of research on how organizations create and define inclusive cultures [7]. Previous conceptualizations of inclusion include a broad set of social processes that may impact an individual's access to information, sense of belonging or acceptance, job security, insider status, social support, decision-making and having a voice within the workplace [3, 8–12].

A recent systematic review of existing measures of workplace inclusion or exclusion suggested a lack of content validity [13]. More specifically, there were no original content validity studies conducted on any of the developed measures. The quality of the evidence for content validity was low for 30% of studies and very low for 70% of studies; and only one study demonstrated adequate concept elicitation during measure development [14]. Content validity refers to the degree to which the content of a measurement tool adequately reflects the construct to be measured [15]. It is the most important measurement property of an outcome measure and the most difficult to assess [16]. Researchers often develop instruments without consulting members of the target population [17]. Those that do, often fail to consult early enough to identify key constructs. The degree to which a workplace inclusion assessment instrument or tool measures the constructs they are intended to measure has significant implications for the validity of the conclusions drawn. For example, poor content validity may affect assessments of the effectiveness of workplace interventions designed to foster inclusion.

The content validation process has been described as multimethod; involving both quantitative and qualitative procedures to specify important constructs in consultation with experts and members of the target population [17]. Persons with lived experiences may be the best source of information regarding how constructs should be conceptualized. Research eliciting concepts relevant to our understanding of inclusion at the workplace is scarce. Therefore, knowledge is lacking about the relevance and comprehensiveness (i.e., no key aspects that are missing) of existing

measures of workplace inclusion. In addition, more knowledge about the facilitators and barriers to workplace inclusion, from the perspective of a diverse population of workers, is needed to better understand how best to promote participation in working life across individuals [18].

Several studies raise awareness of the challenges to workplace inclusion faced by unique or diverse groups including those by gender [19–22], age [19, 20], or ability [23]. Shared difficulties often include the characteristics of the physical and cultural work environment, prejudice, accessible work and education, and organizational policies and practices [24]. Even with gainful employment, employees from diverse groups often encounter lower work participation and lack the necessary human resources (HR) policies and practices to advance their inclusion in the workplace [3]. For example, people with disabilities experience higher rates of job insecurity and unemployment compared to workers without disabilities [25]. Employers often report a lack of understanding of how best to effectively support and include people with disabilities [26], which may contribute to their poor employment outcomes. Meacham et al. [26] argue that HR practices and employer attitudes are critical to improving the employment rates and social inclusion of workers with disabilities. Evidence implicates stigma, or negative employer attitudes and stereotypes as barriers to employment and high turnover rates [27].

1.1. The domains of workplace inclusion

To foster sustainable inclusive work practices in organizations, Daya [28] suggest three levels of contact: personal or individual factors, interpersonal, and organizational factors. The organizational level includes an inclusion climate, created from leadership and the structure and processes of the organization (e.g., senior leadership, organizational belonging, and communication). The interpersonal level represents relationships at work and their contributions to perceptions of inclusion (e.g., respect, acceptance); whereas the personal level focuses on individual characteristics that may affect both perceptions of interpersonal relationships and the organization (e.g., personality, self-confidence, control, self-esteem, power).

1.1.1. Individual

Personal factors associated with employee perceptions of inclusion discussed in the literature include

valued contributions, participative decision-making processes, work autonomy, job security, and feelings of validation, recognition, acceptance, and appreciation [4, 6, 9, 10, 14, 28]. In this context, the term “personal” [28, p.299] refers to the individual’s characteristics that may affect how they perceive their interpersonal relationships and those within their organization (e.g., employer or co-worker relationships).

1.1.2. Employer and leadership

The leadership style of the employer may play an important role in creating workplace inclusion. Inclusive leadership is defined as, “leaders who exhibit openness, accessibility, and availability in their interactions with followers” [29, p.250]. More specifically, demonstrating explicit employee attention and availability by their willingness to engage in open communication, listen and invite feedback from their employees [4, 6, 9]. These employer actions develop an employee’s sense of value [30] which is further bolstered by having access to the information they need to do their jobs and the resources to support their work [9, 10]. Together these behaviours cultivate quality relationships and safe working environments for employees to share their contributions [29]. In this context, the term ‘employer’ is meant to address the leadership style of the organization in contrast to the organizational culture or working environment.

Inclusiveness practices may also help to promote the satisfaction of uniqueness and need for belongingness. In their review of inclusion and diversity in work groups, Shore et al. [12] reported several types of inclusive practices, such as information access and participation in decision-making, procedures for conflict resolution, facilitating communication, and abandoning stereotypes.

1.1.3. Organizational climate and work environment

Over 20 years of research findings support numerous organizational factors as influencers of an organization’s inclusive culture [5], which includes organizational cultural assumptions and beliefs regarding diversity [6], and HR practices [5]. These internal organizational processes seek to create inclusion above mere numerical representations of diversity [12]. The organizational inclusion climate includes the structures and processes specific to an organization [28]. The organizational processes and practices that uphold a sense of organizational justice (i.e., system justice) are important to workplace inclu-

sion and may include the authority system, and how information is processed, generated, and received, to promote the fair treatment of diverse employees at multiple levels [12].

Nelissen et al. [31] define inclusive climate specific to persons with disabilities as referring to “the implicit rules team members adhere to about the way people with disabilities are accepted, helped and treated within the work team” [31, p.469]. Therefore, when the inclusive climate is high, a shared vision and rules for positive, acceptable, and valued behaviours will dominate. Conversely, when the organizational inclusive climate is low, employees are less likely to value inclusive norms [31].

1.1.4. Interpersonal

Interpersonal factors are defined as relating to perceptions of inclusion manifested through working relationships [28]. Workplace culture and work relationship structures (e.g., working in close proximity, similar job descriptions and schedules among coworkers) may influence opportunities for interpersonal or social interactions and integration at work [1]. However, for this contact (e.g., work team projects) to have positive effects on interpersonal relationships among diverse employees, the interaction must dispel any negative stereotypes [32].

1.1.5. Societal or systemic

Examining the societal or systemic factors that may influence workplace inclusion recognizes the context in which organizational and individual factors, as well as their interpersonal effects might interact. Such a community perspective of inclusion may provide organizations with a framework in which to influence, and be influenced by, societal norms and expectations (e.g., workplace laws, rights). This broader definition of inclusion accounts for the sociological community [3] and is accepting of system level interventions to improve workplace inclusion.

1.2. Theories and frameworks related to workplace inclusion

Optimal distinctiveness theory [33], proposes that individuals seek to be accepted by valued groups to optimize needs for belongingness and individuation or uniqueness [12, 34]. Knappert et al. [35], developed their model of inclusion in keeping with optimal distinctiveness theory and the definition provided by Shore et al. [12] as “the degree to which an employee perceives that he or she is an

esteemed member of the work group through experiencing treatment that satisfies his or her needs for belongingness and uniqueness” [12, p.1265]. In their model, inclusion is an important connector between organizational antecedents (e.g., inclusive leadership and human resources practices) with individual outcomes. They also recognize national (i.e., societal) influences on workplace inclusion in addition to the role of organizations and individuals [35]. In their community-oriented inclusion framework, Fujimoto et al. [3] present a community approach to managing diversity based on common interest activities. Lysaght et al. [36], unpack the complexities of social inclusion and productivity in an empirically developed model where social inclusion is defined by a number of complex interactions between environmental factors (i.e., community expectations, choices and needs) and personal characteristics and skills [36, 37]. While several theoretical and conceptual frameworks exist for postulating workplace inclusion processes and hypothesizing their formative relationships, an understanding of workplace inclusion from those with lived experiences is lacking.

The purpose of this study was to explore the landscape of qualitative research describing the barriers to and facilitators of workplace inclusion and map the constructs important to the conceptualization of workplace inclusion. Qualitative research has an important role in that it represents the opinions and lived experiences of those feeling included or excluded at work. Previous work has shown the elicitation of these concepts from this group is inadequate [13]. This scoping review provides a platform for the experiences, preferences, and priorities of a diverse group of employees and employers. The breadth of their lived experiences is presented with a summary of shared barriers to and facilitators of workplace inclusion.

2. Methods

A scoping review was conducted to map the concepts underpinning workplace inclusion and the main groups contributing to the available evidence [38]. The five-stage methodological framework first described by Arksey and O’Malley [39] was used to: 1) identify the research question; 2) identify relevant studies; 3) select studies; 4) chart the data; 5) collate, summarize, and report results. This scoping review was reported based on the Preferred Reporting Items

for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) [40].

2.1. Stage 1: Identifying the research questions

We posed the following questions:

- 1) How is workplace inclusion conceptualized across diverse populations of workers and employers?
- 2) What are the barriers to and facilitators of workplace inclusion?

2.2. Stage 2: Identifying relevant studies

2.2.1. Search strategy

We developed a comprehensive search strategy to retrieve peer-reviewed qualitative publications on the topic of workplace inclusion or exclusion. Search terms were generated describing: (i) work and inclusion (e.g., work engagement, work participation, employment inclusion, organization cohesion) and (ii) qualitative studies (e.g., interview, focus group, experience) using a range of search terms to optimize results [41, 42]. The search strategy was developed with a health sciences/hospital librarian (PYW) and piloted in MEDLINE through Ovid Technologies from Week 1 January 2000 to Week 3 January 2020 (Supplement 1). This time period was selected to retrieve contemporary conceptualizations of workplace inclusion and employment policies and practices. The search strategy was validated in MEDLINE with the retrieval of a key set of relevant articles. This search strategy was adapted as necessary and applied to EMBASE, PsycINFO, CINAHL, and ABI/INFORM for the same search period, and limited to English language studies. Reference lists of eligible studies and review articles were examined to detect additional relevant citations. We used End-Note X7 to manage search results. [Thomas Reuters. ENDNOTE. Available from: <http://endnote.com/>]

2.3. Stage 3: Study selection

2.3.1. Eligibility criteria

Included studies were full-text, original, empirical, primary qualitative studies from peer-reviewed journals with findings describing barriers or facilitators of workplace inclusion with specific reference to the terms ‘inclusion’ or ‘exclusion’ and work.

2.3.2. Study designs

Qualitative studies were selected to better understand the key aspects of workplace inclusion from the perspective of those experiencing it [43], to capture the richness and depth of participants' experiences and to provide a deeper understanding of employee or employer lived experiences of workplace inclusion to extend our understanding of the phenomena and the meaning it holds for individuals [44]. Mixed-methods studies were accepted when information from the qualitative portion could be clearly extracted.

2.3.3. Population

The population of interest was active or former employees, those seeking paid employment, and employers. Both employee and employer perspectives were included for a holistic portrayal of factors important to the conceptualization of inclusion at work from the individual and group perspectives. Unpaid groups of workers (i.e., caregivers, volunteers), students (apart from field or practicum placements), sports teams (i.e., nonprofessional athletes), and the self-employed (i.e., farmers) were excluded. The factors that influence inclusion or exclusion at paid places of employment may differ from unpaid work. This study focuses on work in organizations that have paid employees.

2.3.4. Phenomena of interest and context

We sought to better understand the barriers to and facilitators of workplace inclusion. Included were the perspectives of a diverse population of workers, coworkers, employers, and organizations (e.g., HR personnel) across all industries.

2.3.5. Screening

Title and abstracts were independently screened against eligibility criteria and marked as 'irrelevant' or 'possibly relevant' by pairs of reviewers (MR-SL, MR-HA, MR-AV, MR-KK). The full text of articles considered 'possible relevant' were retrieved for further examination. Two independent reviewers determined study eligibility for the review. Any discrepancies were resolved by discussion and consensus. The inter-rater reliability was computed for the screening of articles using the kappa coefficient and 95% confidence intervals (CI) [45]. Reasons for exclusion were recorded and a flow chart of study selection prepared according to the PRISMA-ScR statement [40].

2.4. Stage 4: Charting the data

All included studies were read in their entirety. The general content to be extracted was initially discussed by the lead authors (MR and SL). Data charting tables were developed by the primary author (MR) and reviewed by a second author (SL) to establish the information to be extracted. Charting is a technique used for organizing and interpreting data by sorting, and categorizing material, according to key themes [39]. The data was first independently charted by one reviewer (MR) and independently verified by a second reviewer (SL/HA/AV) to minimize error. Results were discussed and updated in an iterative process. Any inconsistencies or disagreements were resolved through discussion or consultation with a third reviewer.

Data was extracted from each included article describing their characteristics (e.g., country of origin, year of publication), contextual factors (e.g., study population, diversity characteristics), use of a supporting framework or theory, barriers to and facilitators of inclusion, and corresponding level of engagement (i.e., individual, employer, organizational, interpersonal, societal).

Emergent themes across each of the five levels of engagement were grouped and named by the primary author (MR) and then reviewed by the second author (SL) to ensure that the original extracted and tabled results were represented [46]. During the qualitative synthesis, care was taken to present the findings of the included studies accurately and reliably as intended and to avoid re-interpretation [44]. The methodological quality of individual studies was not evaluated as the aim of this review was to describe the range or comprehensiveness of the literature in this area rather than comment on its rigor [39, 40].

Qualitative findings (i.e., barriers and facilitators of workplace inclusion) across different studies were organized by theme and mapped to a multi-layer conceptual framework to better understand the levels of factors impacting inclusion. This form of qualitative metasynthesis is defined as, the "theories, grand narratives, generalizations, or interpretative translations produced from the integration or comparison of findings from qualitative studies" [47, p.56]. The goal of this synthesis is to account for all important similarities and differences across the lived experiences of study participants and the emergent themes. Findings were extracted from the results section of studies. This included participant quotations from the primary studies (first order) and paraphrases or observations

put forward by the authors of the primary studies (second order) [48].

2.5. Stage 5: Collating, summarizing and reporting results

In this fifth step, we collated, summarized, and reported our results descriptively and analytically using tables and figures.

2.5.1. Literature mapping

A descriptive numerical analysis of the information collected was examined to establish the extent and nature of the literature [49]. We summarized the total number of articles, year of publication, country where studies took place, study objectives, populations, and methods from included studies. Evidence is presented in narrative format and tabled [50].

2.5.2. Conceptual mapping

The following overview of our data synthesis strategy includes five key elements [44]: 1) We considered the barriers and facilitators reported by each study as ‘findings’; 2) findings were identified by the repeated reading of text; 3) findings were grouped to develop categories based on similarity in wording, or concept; 4) category descriptions were created by the primary author (MR) and independently verified by the second author (SL). Any discrepancies were resolved by discussion until consensus was reached among the reviewers; and 5) synthesized findings were mapped to the corresponding framework and accompanying thematic descriptions organized. We extracted, grouped, abstracted, and formatted findings to calculate their frequency and present and interpret our synthesis results. After extracting relevant findings, we grouped thematically similar findings together and noted their count. This method supports the use of counting and numbers in the creation of meta-summaries to search for patterns. With this qualitative meta-summary approach, higher frequency themes (i.e., finding replication) support the validity of our results using a quantitative logic [51]. Similar barriers or facilitators were grouped together using a content analysis approach with thematic coding [52]. Commonalities were then condensed, and themes developed by the primary author and independently verified by the second author.

A narrative synthesis of key findings from the qualitative studies included in this review was conducted. Barriers and facilitators of workplace inclusion were grouped thematically and conceptually mapped

to a multi-layered framework, representing person (i.e., individual), contextual (i.e., employer, organizational, societal), and interpersonal-level factors, as suggested by four contemporary models of social inclusion or exclusion at work: 1) the ‘Community-oriented Inclusion Framework’ [3], 2) the ‘Multilayered Framework of Refugees’ Exclusion at work’ [35], 3) the ‘Model of Social Inclusion’ [53], and 4) the model of ‘Diversity and Inclusion Management Considerations’ [28]. Figures 2 and 3 represent the facilitators and barriers of workplace inclusion, respectively, as mapped to this multilayered model.

More specifically, we modelled workplace inclusion as a dynamic and complex interaction between individual and contextual or environmental factors relating to one’s employer or leadership, organizational practices and the work environment (e.g., organizational climate), and societal or systemic factors. The interplay of these components was captured by an ‘interpersonal’ factor which may have accounted for employee-employer relationships or employee-employee relationships among co-workers. Personal factors were unique to individuals and may have included their sociodemographic characteristics, attitudes, motivations, and values. These dynamically interacting factors work together to support workplace inclusion.

3. Results

3.1. Search results

Our combined search strategy identified 20,948 citations, with 5,985 duplicates removed. Titles and abstracts of the remaining 14,963 references were screened for relevance, yielding 155 articles judged as potentially relevant for our review. After applying the eligibility criteria to the full-text versions of these studies, we identified 39 qualitative studies that described barriers and facilitators of workplace inclusion (Figure 1). The interrater reliability among the reviewers was calculated and the resulting Simple Kappa value of 0.68 (95% CI: 0.42–0.95) represents a “substantial agreement” [54].

3.2. Synthesis of results

3.2.1. Literature mapping

Supplement 2 provides a general description of the qualitative studies included in this review. Studies were published from the year 2000 [55] to 2019

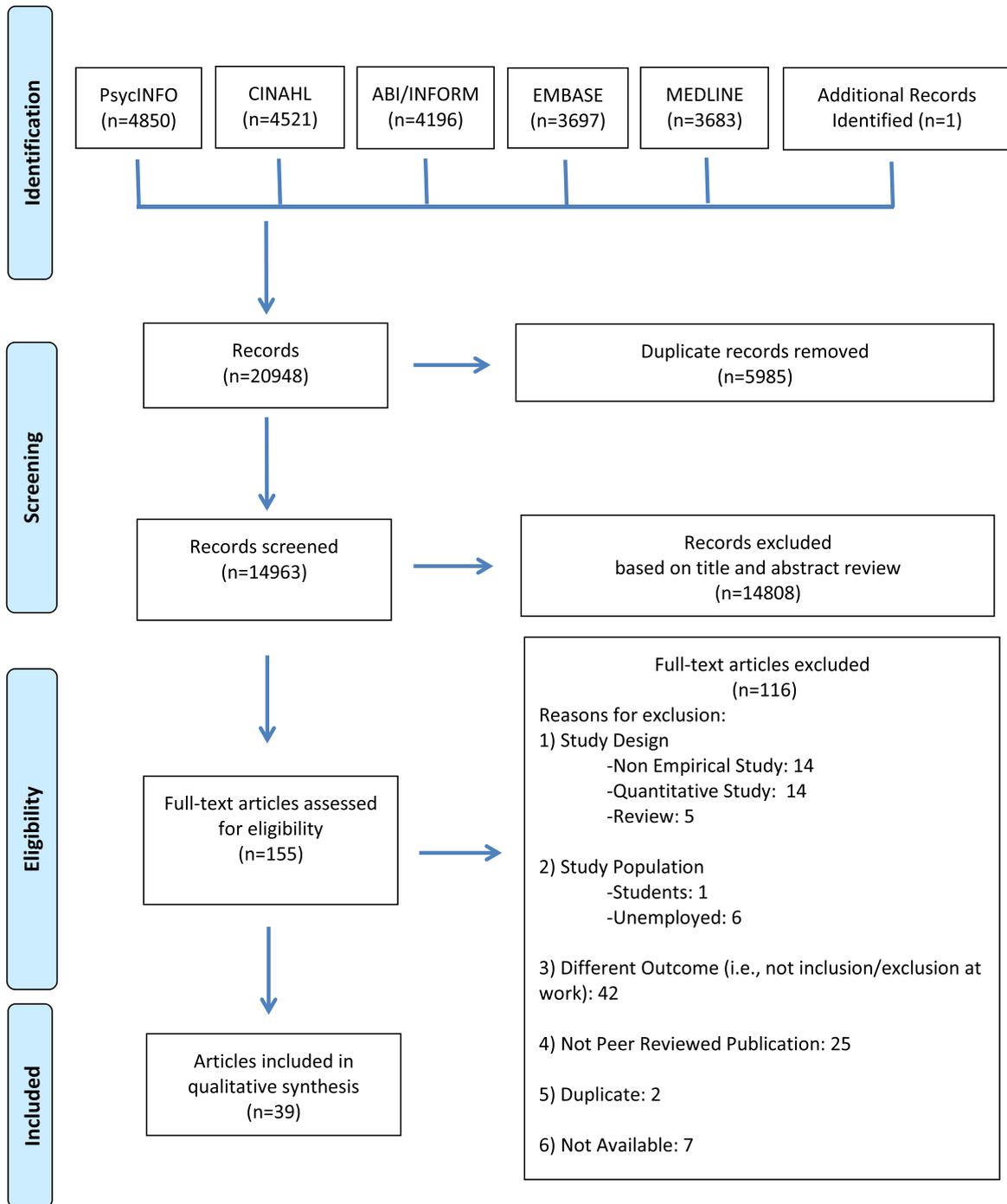


Fig. 1. Flow diagram of study selection.

[18, 56]. Most studies (30/39) were published after 2010. A global representation of the literature was available with seven studies from the United States, four studies each from Brazil, the United Kingdom, Norway; three studies from Canada; two studies each

from England, China, Sweden, Australia; and single publications from Denmark, Turkey, Spain, Italy, South Africa, the Netherlands, India and Germany combined, and one study took place across several countries of the European Union.

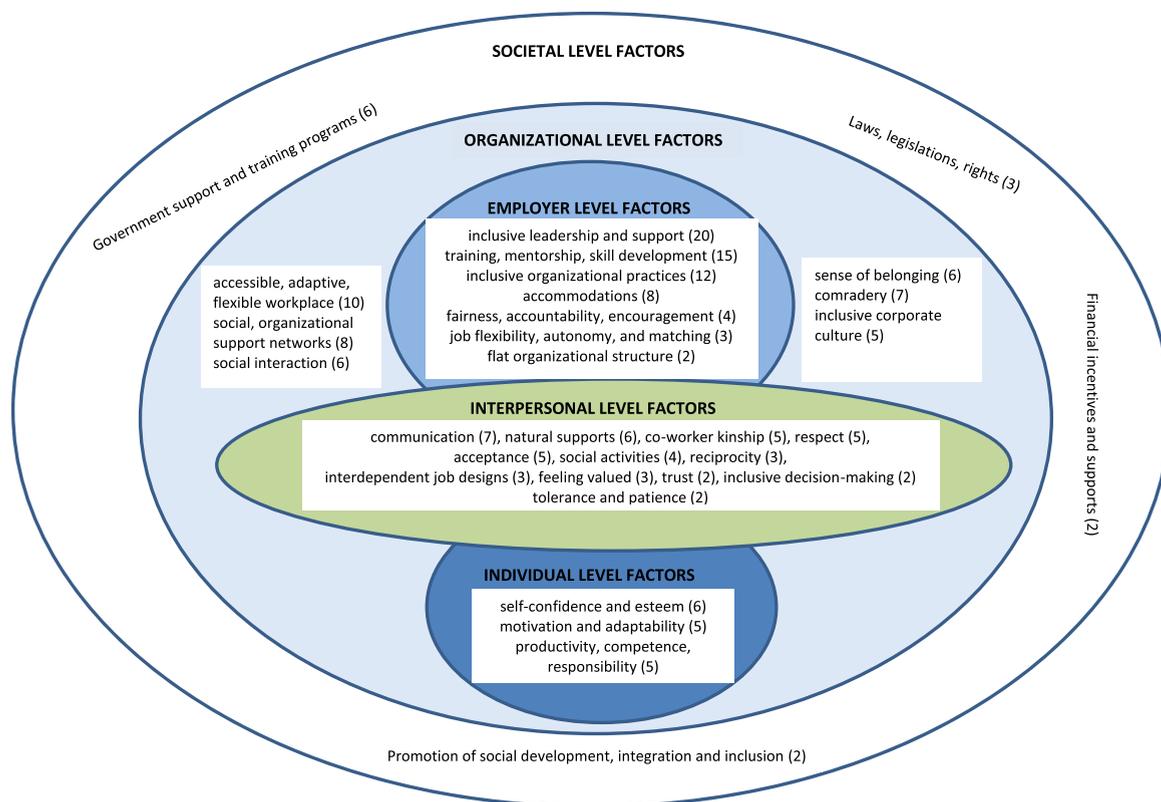


Fig. 2. Facilitators of workplace inclusion—Conceptual mapping to a multi-layered framework (count).

Study populations included healthcare workers [56], persons with schizophrenia [57], hearing loss [24], dyslexia [8], visual disabilities [58], learning disabilities [8, 59–61], intellectual disabilities [36, 26], developmental disabilities [36, 55, 62], Asperger syndrome [63], musculoskeletal or mental health problems [18, 64], minorities [65–69], and disabilities unspecified [1, 70–73]. Twenty of the 39 included studies provided information on the age distribution of their study participants which ranged from 16 to 75 years of age. Twenty-eight studies commented on the gender distribution. The percent female among these studies ranged from 12% [63] to 100% [73]. Thirteen studies included employer, manager, leader or union representative perspectives regarding the challenges and promoters of inclusion at the workplace [5, 26, 28, 35, 62, 67, 71, 74–79].

Most studies used semi-structured, in-depth, or narrative interviews to collect their data (28/39), focus groups (1/39), participant observations or combinations of the above (10/39). Most studies analyzed their results using thematic (17/39) or content analysis methodologies (13/39).

3.2.2. Conceptual mapping

Supplement 3 highlights the main themes, theoretical frameworks, and key findings of the 39 included studies. More specifically, the identified barriers to and facilitators of workplace inclusion are thematically mapped to one of five levels of factors—individual, employer, organizational, interpersonal, and societal. Facilitators of workplace inclusion were identified in 37 of 39 studies. All but five studies [14, 26, 55, 56, 66] discussed barriers to inclusion at work.

3.2.2.1. Facilitators of workplace inclusion: Most identified facilitators were at the employer/leadership level ($n=75$), followed by interpersonal ($n=55$), organizational ($n=50$), individual ($n=31$), and societal ($n=19$). Conceptual mapping of the most frequent groups of facilitators to the multilayer workplace inclusion framework is visually displayed in Figure 2. At the employer level, ‘inclusive leadership and support’ was the most prominently reported facilitator of workplace inclusion with 20 occurrences across the 39 included studies. The most common

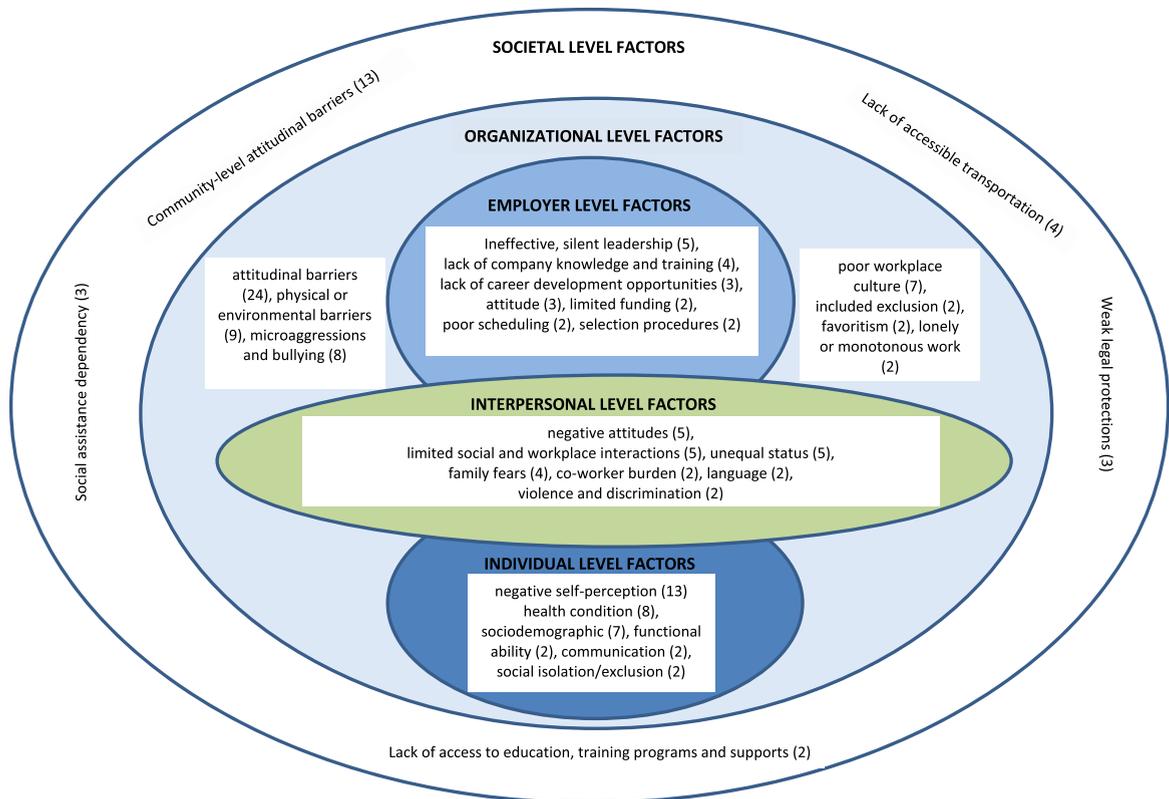


Fig. 3. Barriers to workplace inclusion—Conceptual mapping to a multi-layered framework (count).

organizational level facilitator of workplace inclusion was an ‘accessible, adaptive, and flexible workplace’. Among the interpersonal level facilitators, communication was most prominent. The majority of reported individual level facilitators of workplace inclusion related to feelings of self-confidence and esteem, whereas government support and training programs were most often reported among societal level factors.

3.2.2.2. Barriers to workplace inclusion: Most identified barriers to workplace inclusion were at the organizational level ($n = 58$) followed by individual ($n = 38$), employer ($n = 30$), interpersonal ($n = 28$), and societal ($n = 26$). Conceptual mapping of the most frequent groups of workplace inclusion barriers to the multilayer framework is depicted in Figure 3. The majority of identified individual factors related to negative self-perceptions (e.g., self-blame, low self-esteem, lack of confidence, feelings of worthlessness). At the employer level, ineffective or silent leadership was cited most often. Attitudinal barriers were by far the most common organizational level factors reported (e.g., discrimination, stereo-

types, stigma, and prejudice). Negative attitudes (e.g., stalling friendship development, poor socialization) dominated the interpersonal level factors, and community-level attitudinal barriers (e.g., history of racism) led the societal level factors.

An analysis of studies including persons with disabilities [1, 8, 24, 26, 36, 55, 57–64, 70–73, 75, 80] revealed similar trends. Most identified facilitators of workplace inclusion were at the employer level ($n = 45$), followed by organizational ($n = 33$), interpersonal (26), societal ($n = 15$), and individual level factors ($n = 11$). The majority of identified barriers to workplace inclusion were at the organizational level ($n = 35$) followed by individual ($n = 20$), interpersonal ($n = 17$), employer ($n = 16$) and societal ($n = 16$).

4. Discussion

4.1. Summary of findings

This scoping review mapped the qualitative literature describing barriers to and facilitators of

workplace inclusion across diverse groups of workers. We included 39 studies sharing the lived experiences of workers, employers, and organizational leaders to gain insights into what matters most to workplace inclusion. Study locations varied geographically yet shared perceptions of the challenges to workplace inclusion and the strategies to overcome them. The synthesized experiences were visually displayed across two conceptual maps (Figs. 2 and 3). Each representation highlighted the most prominent supportive or obstructive factors to workplace inclusion across several levels including factors relating to the individual, the employer, the organization as a whole, interpersonal, and societal level factors. All five levels of factors were represented validating their role in workplace inclusion. Across all studies and a subset of studies examining persons with disabilities, most barriers were at the organization level and most facilitators were at the employer/leadership level.

A recent systematic review [13] of peer-reviewed literature, over the same time period (2000 to 2019), identified 10 development studies of individual measures of workplace inclusion or exclusion and evaluated their measurement properties, including content validity which was found to be lacking. These measures included the Workplace Ostracism Scale (WOS) [81], Ostracism Interventionary Behaviour Scale (OIB) [82], Workplace Culture Survey (WCS) [23], Workplace Exclusion Scale (WES) [83], Perceived Group Inclusion Scale (PGIS) [84], Organizational Cultural Intelligence Scale (OCQ) [85], Mor Barak's Inclusion-Exclusion Scale (MBIE) [9], Climate for Inclusion Scale (CIS) [86], Workplace Social Inclusion (WSI) Scale [87], and the Inclusion-Diversity Scale (IDS) [14]. Seven of the ten measures focused on inclusion [9, 14, 23, 84–87] versus exclusion at work.

Among these seven measurement tools specific to workplace inclusion, the WCS [23] addressed the greatest number of possible barriers and facilitators to inclusion at work across four of the five levels of engagement. The WCS addresses organizational level factors including job tenure, shared tasks, co-worker support, scheduling, access and required equipment; inclusive practices such as a formal workplace orientation and training, equal pay, supported transportation, work life balance programs, and opportunities for promotion; employer feedback; interpersonal factors such as shared meals, language, social interactions at work and non-work related events; and societal level factors including Employee Assistance Programs [23]. Missing from this tool

were individual level factors. This finding is in contrast to the PGIS [84] and the WSI [87], which solely focus on individual level factors within a group context. The three items related to inclusion from OCQ focus on the organization [85]. The MBIE combines individual feelings of inclusion, decision-making influence within the group context, and considers the input from supervisors and the access to training and materials within the work environment [9]. The IDS [14], provides the greatest representation of community or societal level factors including equitable systems and demonstrated commitment to community relationships, organizational and employer level factors including equal access to opportunities, fair treatment, affirmative action initiatives, commitment to diversity, education and training, power and information sharing. Finally, the CIS [86] includes items assessing equitable employment practices, the organizational climate, and decision-making influence. Therefore, we lack a contemporary measure of workplace inclusion addressing the five domains of workplace inclusion. Given the limitations of existing measures of workplace inclusion it may be necessary to combine existing measures to better evaluate the inclusivity of a workplace given our understanding of the multiple players and their individual contributions to the overall experience of workplace inclusion.

4.2. Strengths and limitations

This scoping review of the qualitative literature collated existing experiences with workplace inclusion and addressed the fragmented knowledge in the area [48]. The results of this study were arrived at using an established scoping review methodology [39], and a systematic search strategy developed in collaboration with a health sciences/hospital librarian. A broad search of five relevant databases was conducted and study selection was carried out independently by two reviewers at each stage. We used detailed, predefined inclusion and exclusion criteria ensuring good agreement between reviewers (Kappa coefficient=0.68), and transparent, reproducible methods.

Some studies may have been missed due to the parameters of the review. Our search was restricted to English language articles, which may have excluded some relevant articles. We did not include a search of the grey literature because our focus was on qualitative, peer-reviewed research findings. In addition, employment opportunities, access and workplace policies may vary across countries; therefore, our

results may not be generalizable across all populations.

An emergent workplace inclusion framework was used to map the barriers to and facilitators of workplace inclusion to gain insights as to where the burden of inclusion rests (i.e., at the level of the individual, employer, organization, or society). This framework is untested but based on overlapping concepts from four contemporary models that may change over time and across populations. It is also possible that the evaluation and interpretation of themes described in the studies were subject to the reviewers' own biases. To minimize potential reviewer biases, themes were independently analyzed and verified. Combining our conceptual mapping with a meta-summary provided a quick visual overview of our study findings. Furthermore, the inter-study frequency of identified factors across our multi-layered model supports its validity as a conceptual framework for workplace inclusion.

4.3. *Implications for research, policy and practice*

The conceptual congruence of the data to our multilayered framework of workplace inclusion provides support for its validity [88]. However, future research is required to test these assumptions across populations, industries, and time. This work may also inform future measure development or content validity studies assessing the comprehensiveness of their conceptualization of workplace inclusion.

The implications for practice highlight the role of leadership and organizational systems in fostering workplace inclusion, as most identified facilitators of and barriers to workplace inclusion addressed these areas. HR policies, practices, and attitudes may play a significant role in the full participation and inclusion for all workers. A need was identified for policies to enforce inclusion in the labour market, address practical missing steps, and promote the involvement of diverse groups in the development of HR policies [1, 58, 60, 72, 80]. Further, a heightened awareness of the job entry process, comparative work, and the development of supportive work relationships is desired [55, 75]. Recognition of these impactful roles plays an important part in the work disability and occupational rehabilitation paradigms. Shifting the focus from individual level factors associated with inclusion to group and environmental level factors may prove to be more effective with respect to workplace inclusion outcome measures. Simi-

larly, research focused on employer or organizational level interventions to foster workplace inclusion may be prioritized. According to Fujimoto et al. [3, p. 525], at the organizational level, "inclusion is driven by an organization's social mission to enhance co-participation of diverse members through communal activities (work and non-work) inside and outside organizations". These authors highlight the exchange that takes place within an inclusive environment between minority and majority members facilitating a "shared identity among dissimilar members" [3, p. 525]. Alternatively, at the individual level, Shore et al. [12, p.1265] define inclusion as "the degree to which an employee perceives that he or she is an esteemed member of the work group through experiencing treatment that satisfies his or her needs for belongingness and uniqueness". This definition of inclusion combines the notion that individuals also want to feel a sense of belonging, and feel valued, for their unique characteristics.

In summary, research is needed to better understand the impact of factors such as accessibility, transportation, housing, education, leader performance and employers' attitudes and practices on the quality of individual employment experiences and workplace inclusion [8, 36, 59, 61, 89]. In addition, future research should explore longitudinal changes over time, across populations and industries, with a greater focus on diversity and inclusion in different organizational or community contexts [3, 5, 24, 26, 28, 35, 77] to develop the construct of workplace inclusion.

5. Conclusions

This scoping review mapped the barriers to, and facilitators of workplace inclusion that were identified from 39 contemporary qualitative studies of the lived experiences of diverse populations of employees and employers. Most facilitators of workplace inclusion were at the employer/leadership level which recognizes the importance of a top-down approach. The decisions of employers or leaders can filter down through a hierarchical structure to potentially impact the inclusivity of a workplace. Barriers and facilitators of workplace inclusion spanned across five levels of engagement highlighting the important role of individual, employer, organizational, interpersonal, and societal level factors, and their holistic influence on workplace inclusion.

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Conflict of interest

The authors report no conflicts of interest.

Ethical approval

No animal or human studies were carried out by the authors for this article and thus ethical approval was not required.

Informed consent

No animal or human studies were carried out by the authors for this article and thus informed consent was not required.

Author contributions

MR and SL contributed to the study's conception and design. All authors contributed to the literature search and data extraction. Analyses were primarily performed by MR. The first draft of the manuscript was written by MR and all authors commented on subsequent versions of the manuscript. All authors read and approved the final manuscript.

Data availability

Data sharing is not applicable to this article as no datasets were generated or analysed during the current study.

Supplementary materials

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