



# **Anti-racism in AHP Education: Building an Inclusive Environment**

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## **Council of Deans of Health**

The Council represents 103 UK university faculties engaged in education and research for nursing, midwifery and the allied health professions. Our members educate almost all UK-domiciled healthcare students, over 200,000 nursing, midwifery and allied health professional students at any given time.

## Case Studies

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1	University of Surrey	Recruitment and retention
2	Brunel University	Recruitment and retention
3	Leeds Beckett University	Recruitment and retention
4	London South Bank University	Recruitment and retention
5	Brunel University	University-based learning
6	Birmingham City University	University-based learning
7	London South Bank University	University-based learning
8	Canterbury Christ Church University and University of Brighton	Practice-based learning
9	University of the West of England	Practice-based learning
10	Sheffield Hallam University	Practice-based learning
11	Sheffield Hallam University	Practice-based learning
12	Birmingham City University	Transition to employment
13	Birmingham City University	Transition to employment
14	University of Sheffield	Transition to employment

# Foreword

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Healthcare education needs to continue its focused work in the arena of equality, diversity and inclusion (EDI) in relation to promoting and embedding EDI structurally throughout higher education institutions and working within a framework of social justice. In healthcare education, it is important to engage a diverse cohort of students, so the future healthcare workforce reflects the diversity of the UK population. In particular, there is a lack of diversity in leadership positions in healthcare organisations.

Universities have long since engaged in initiatives to support minority ethnic students. However, the Covid-19 pandemic in 2020 brought health inequalities to the forefront including the impact of the pandemic on minority ethnic communities. Together, with the rise of the Black Lives Matter movement, our wider society has become more aware of the structural inequalities and inequities facing minority ethnic communities.

It is of extreme importance that within a social justice framework, the focus on anti-racism continues, and that it is embedded in structural processes throughout education systems. Many of our members are actively engaging in the practices of promoting decolonisation and allyship, two key practices that support the transformation of structural inequality and inequity in education.

This report highlights the issues affecting minority ethnic Allied Health Professions students. It brings together a collection of student centred case studies from our members across England and provides recommendations for how other universities can embed the key principles of anti-racism within their pedagogical and structural processes.

I would like to thank the Council of Deans of Health member institutions from across England who have submitted case studies for inclusion in this report, and Amelia Canning for her work in compiling and analysing them. I hope this report brings further understanding of this important issue and the inspiration to become change agents in this arena, and to disrupt the structural inequality

## **Dr Charmagne Barnes**

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## **Acknowledgments**

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The Council would like to thank all those who contributed to this work. We engaged with various organisations and groups, all of which provided us with valuable insight.

# Overview of recommendations

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Theme	Recommendations	Case Study
<b>Recruitment and retention</b>	Flexibility and innovation	Case Study 1
	Community outreach	Case Study 2
	Student safe-spaces	Case Studies 3, 4
<b>University-based learning</b>	Diversify and decolonise curriculum	Case Studies 6, 7
	Actively anti-racist pedagogy	Case Study 5
	Adequate teaching staff training	Case Study 5
<b>Practice-based learning</b>	Encourage student leadership development	Case Study 8
	Adequate practice staff training	Case Study 11
	Enable safe-spaces for students within practice environment	Case Studies 9, 10
<b>Transition to employment</b>	Scenario-based learning and lived experience	Case Studies 12, 14
	Ensure awareness of concern escalation	Case Studies 12, 14
	Encourage critical reflection	Case Study 13

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# Executive summary

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From August-October 2022, with funding from HEE the Council of Deans of Health undertook workshops and case study collection amongst its membership to collate examples of best practice in anti-racism for minority ethnic Allied Health Profession (AHP) students. This report contains 14 case studies across four themes:

- Recruitment and retention
- University-based learning
- Practice-based learning
- Transition to employment

Case studies were analysed through a consideration of key issues raised, what was done to address these issues, and what the outcomes were. A range of approaches to address these key issues were highlighted through the case studies, including community outreach, student focus groups, and simulated learning. All approaches focused around students and how to support them as best as possible.

Recommendations were then generated through a consideration of the outcomes of these interventions, including how they were evaluated by students and how successful they have been at the university. Key themes arising through recommendations include:

- Flexibility and innovation in recruitment and teaching
- Take a student-centred approach and include students in processes and decisions
- Ensure effective community engagement
- Diversify and decolonise learning materials and pedagogies
- Create safe spaces for students
- Embed comprehensive anti-racist training for teaching and practice staff
- Utilise simulation and scenario-based training prior to employment

By highlighting successful interventions currently being carried out by universities, this report aims to provide recommendations to the sector on how to better support minority ethnic AHP students during their learner journey. It also highlights suggestions for further research.

# Introduction

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The university experience of healthcare students differs from the majority of other students through a requirement to manage the demands of both university and practice-based learning. Minority ethnic students face these challenges with the additional burden of trying to navigate the structural inequalities in the higher education system and in practice, as well as facing incidents of racism. It is with this in mind that the focus of this report is the experience of minority ethnic students in higher education.

The members of the Council of Deans of Health (the Council) are university faculties who provide nursing, midwifery and AHP education and research. A key strategic priority of the Council is supporting and influencing diversity and inclusion agendas. Whilst structural inequities in higher education and healthcare need system wide changes, the Council can highlight key challenges and share best practice to progress diversity and inclusion within healthcare education.

The aim of this report is to put a spotlight on the experience of minority ethnic AHP students throughout their journey in higher education, from admissions right through to transition to employment. It showcases examples of initiatives and approaches that universities have undertaken to support minority ethnic AHP students.

# Terminology

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We understand that language related to this subject matter is complex and terminology is evolving. The term minority ethnic refers to anyone who identifies as part of any ethnic group other than White British. This highlights the fact that everyone has an ethnicity, and the issues being referred to relate to minority groups in a UK context and the discrimination and barriers they can face. This term was chosen in accordance with [AdvanceHE guidance](#) and is frequently used within the higher education sector as the accepted terminology. For consistency, this term will be used throughout the report to describe the group it is relevant to.

We understand that minority ethnic groups are extremely broad and diverse, and different groups face different challenges and outcomes. This report focuses on the experience of a cohort of minority ethnic students, but it is important to view any recommendations through an intersectional lens in consideration of any additional challenges these students may face.

This report focuses on the learner journey of [Allied Health Professions \(AHP\)](#) students. There are 14 AHP professions, working alongside multidisciplinary teams in a range of settings to assess, treat, diagnose and discharge patients across social care, housing, education, and independent and voluntary sectors. AHPs are the third largest workforce in the NHS.

Throughout the report, there will be reference to university-based and practice-based learning. This distinction has been highlighted to allow a discussion of the two key areas of learning as individual processes. In this report, university-based learning refers to any teaching and learning delivered by university staff, and practice-based learning refers to any teaching and learning completed in practice learning environments.

# Background

AHPs make up 26.4% of England's higher education healthcare student population.<sup>1</sup> These students must complete the required practice-based learning hours on top of university-based learning to become a registered professional. Additionally, some areas of focus within their course and on placement can cause emotional distress, putting students at a higher risk of mental health challenges. Minority ethnic AHP students are required to deal with the demanding nature of these courses alongside navigating the structural inequalities in the higher education system and in practice. From a pedagogical perspective, some institutions are working to embed anti-racism in their processes and curricula. Despite this, a culture of westernised values often remains entrenched within universities, leaving minority ethnic students feeling undervalued and unsupported.

Although progress has been made to reduce inequalities, and more minority ethnic students are attending university, these students continue to face challenges whilst completing their studies. In 2019, Universities UK published a report entitled '[Black, Asian and Minority Ethnic student attainment at UK universities: closing the gap](#)', which identified an attainment gap between students of different ethnicities at the majority of universities. Three years on from this report, Universities UK reported that progress has been made on reducing awarding gaps in all minority ethnic groups. However, minority ethnic students remain less likely to be awarded higher grades for their degree ([Universities UK, 2022](#)). Additionally, curricula and practices of UK universities are often designed to serve western cultural assumptions and economic interests; some students can experience challenges when pedagogies differ from their cultural expectations and are inappropriate to their needs (Newsome and Cooper, 2017). It has been suggested that universities have a role in supporting affected students with adjustment to these norms (Tomalin, 2007).

Out of the 45,000 AHP students in England, 22% identify as being from a minority ethnic background.<sup>1</sup> However, we do not see the same demographics within the AHP workforce both in university settings and in practice settings. The Council of Deans of Health's [2019 Academic Staffing Census](#) showed 7.9% of the nursing, midwifery and AHP academic workforce identified as being from a minority ethnic background.

This was lower than the wider higher education workforce, where 22.6% of academic staff identified as being from a minority ethnic background, and lower than the NHS workforce, where 17.5% of non-medical staff identified as being from a minority ethnic background. Additionally, within the NHS workforce, a higher percentage of senior nurses, midwives, and AHP health professionals identify as white than minority ethnic. In the NHS' [annual inclusion report 2021-22](#), 14% of the general workforce and 7.82% of senior leaders identified as minority ethnic. The 2022 [Allied Health Professions Strategy for England](#) acknowledges the particular lack of diversity in leadership positions, alongside the attainment gap between minority ethnic and white students, and makes a commitment actively addressing racism within health and care.

The difference in the demographics of the academic and NHS workforce compared to student cohorts highlight inequities that exist and that AHP students have to navigate throughout their learner journey. We also know from university staff and the registered AHP workforce that AHP students can witness and experience incidents of racism. For example, when speaking to minority ethnic students for this report it was highlighted that most had experienced racial discrimination during some aspect of their course. Although it was identified that some universities had engaged in initiatives to support minority ethnic students, these students still thought there was more to be done.

This report aims to provide evidence of initiatives that are being carried out across England to support AHP students from minority ethnic backgrounds and provide recommendations on what universities can do to foster anti-racism in their institutions. This project was commissioned by Health Education England (HEE) in 2022, and for this reason case studies included in the report are all from universities within England. Despite this, recommendations within the report have UK-wide implications.

1 HESA, Higher education staff statistics: UK, 2020/21

# Methodology

In order to understand sector perceptions of this issue, a series of scoping exercises were carried out from April – June 2022. This involved engagement with a range of stakeholders including AHP professional bodies, Health Education England, and members of the Council of Deans of Health. This scoping exercise also introduced an opportunity to reflect on the language used in this report.

To represent the student journey, the data collection was divided into four sections:

1. Recruitment and retention
2. University-based learning
3. Practice-based learning
4. Transition to employment

This structure was used throughout workshops, case study collection, and writing of the report.

Data collection for this report was undertaken in two parts. The first part was completed through four workshops held throughout August and September 2022. The first three workshops were held online, and each focused on one theme from the report – recruitment and retention, curriculum, and transition to employment.

The online workshops sought to decipher key issues minority ethnic students face during their studies, alongside key actions that universities could take to address these. Attendees included representatives from professional bodies and universities, and individuals attended workshops according to their expertise and interest. Approximately 50 individuals from a range of professions, ethnicities, and locations across the UK attended the workshops, providing a wide breadth of knowledge and experience.

The fourth workshop sought to engage students in the project and involved minority ethnic AHP students from the Council's Student Leadership Programme. Students discussed with the Council what they thought were the key issues facing minority ethnic AHP students in the four areas of the report, and their experience of support from their universities. Students also discussed what they would like universities to do more of to support them.

The second part of data collection took the form of case studies. A template (Annex A) was created to elicit information on what individuals perceived to be the key issues surrounding racism and the student journey, what initiatives their universities were engaging in to address these, and the impact of these initiatives. In total, 14 case studies were submitted, covering a range of professions and universities.

The Council received the following distribution of case studies:

Recruitment and retention	4
University-based learning	3
Practice-based learning	4
Transition to employment	3

The full case study collection can be found in Appendix 1.

# Analysis

## 1. Recruitment and retention

### Key issues

Key issues identified within the workshop for this theme included:

#### Lack of visibility

Students felt under-represented when attending open days and in communications from universities. Additionally, university staff felt the AHPs lacked visibility within certain minority ethnic communities.

*“There wasn’t anyone who looked like me”  
AHP student*

#### Inequity within admissions processes

Often, ways of assessing student applications are inequitable and benefit those who are not from minority ethnic backgrounds. University systems are often inequitable, and this starts from the beginning of the learner journey through recruitment and admissions.

#### Exclusive culture

Some students have reported difficulty in finding a sense of community within their cohort. This is due to a range of factors including university structures and faith-based holidays. The typical UK university culture can also affect interaction with peers through discussion and group work.

### Approaches

Universities have found innovative ways to challenge the issues faced in the recruitment and retention of minority ethnic AHP students. At the University of Surrey, a bespoke videoconferencing interview system was created to allow fair selection. Designed to build in fairness from the ground up, this system addresses unconscious bias in a range of ways including recognising stereotype threats, interviewer bias, and culturally sensitive areas to name a few. This system has had a significant impact and has been reviewed positively.

Universities have also addressed the issue of a lack of visibility. At Brunel University, staff were aware of the importance of approaching under-represented minority ethnic communities to understand their perceptions of AHPs. Admissions tutors held discussions with students, community leaders, and faith leaders to understand how occupational therapy was perceived within their communities. Following this, staff altered selection procedures and considered

new ideas to attract students to the profession. Staff also approached student services at the university to support in research into transition to university. As a result, staff have noticed increased admissions from groups that were previously underrepresented within the university, and changes have been implemented from research findings.

To address the issues around exclusive cultures and lack of feeling of belonging, some universities have created student groups to meet and discuss these issues. At Leeds Beckett University, in 2021 a student-led Equality Diversity Inclusion (EDI) steering group was set up. Students meet to discuss their experiences and address actions, and staff also attend these meetings and take the responsibility of implementing the changes student’s request. The university has also developed a mentor network and EDI forum. This initiative has had a positive experience on the university experience for minority ethnic AHP students; the initiative won a Student Voice Award at the university, and the panel stated ‘the students have demonstrated a significant contribution to improving the lives of students on their course and achieving meaningful and measurable changes’. Additionally, at London South Bank University a Race and Cultural Equity Group (RaCEG) was set up to allow minority ethnic students to have a safe space to discuss their experiences. This group has implemented several changes within the university including a review of the complaints process and reporting of EDI incidents on placement, and training for practice educators.

## 2. University-based learning

### Key issues

Key issues identified within the workshop for this theme included:

#### Lack of visibility

Staff and students acknowledged the underrepresentation of minority ethnic teaching staff, leading students to feel unseen and unheard.

#### Exclusive pedagogy

Staff acknowledged the commonality of an exclusive cultural pedagogy that was biased towards those from a western culture. This includes accepted learning behaviours and practices, such as giving and receiving feedback, which have been perceived to be challenging.

### Exclusive curriculum

Staff have reported that curriculums are often centred around perceived cultural norms and not inclusive of all minority ethnic groups.

***“My lecturer was unaware there were Eat Well Guides for other cultures”***

*Dietetics student*

### Approaches

Some universities across England have sought to engage in interventions to approach these issues. At Brunel University, staff were aware of the dominance of a westernised curriculum and the importance of cross-cultural inclusion in curricula. Staff established a Race and Cultural Equity (RACE) working group to facilitate an inclusive learning environment for minoritised ethnic learners. The group were consulted on curriculum reform including diversification of learning materials and normalising discussions of race. Staff also embedded anti-racist elements into divisional processes. As a result, staff have noticed improvements between cohorts, however this is perceived to be primarily driven by specific individuals rather than formally embedded in pedagogy, and staff feel there is still a colour-blind ideology. Work will be continuing in this area to further encourage anti-racist pedagogical practices to be embedded across the school.

At Birmingham City University, Speech and Language Therapy (SLT) staff also noted that developmental norms taught in SLT are often situated in a westernised culture and rarely viewed through a critical lens. To address this, staff have taught students about the cultural bias surrounding education on this topic and encouraged a critical assessment of these norms. The staff team have also discussed alternative ways of thinking and considering the functional effects of difference. As a result of this encouragement, students have started to include a more critical approach within written work and discussion. Staff are hopeful students will continue to challenge these norms as they progress into practice.

At London South Bank University, staff noted that there is a continuing awarding gap for minority ethnic populations in the university. To address this, one member of staff created a guide on decolonising the curriculum, guiding areas for interrogation before planning change and centring the minority ethnic students and staff who are impacted by structural inequalities.

This initiative has been well received and the university will soon be forming a decolonising strategy group to influence change further.

## 3. Practice-based learning

### Key issues

Key issues identified within the workshop for this theme included:

#### Lack of support

Students and staff felt that support networks whilst on practice placement were lacking compared to support received within the university. Staff also felt this affected attainment levels.

***‘My friend felt she couldn’t speak to her lecturers when she experienced racial discrimination on placement’*** AHP student

#### Communication differences

Issues often arose around expectations and communication styles on placement. Some students were marked negatively for lack of engagement in certain perceived communication norms, such as ‘using initiative’, and some found conceptual language challenging.

#### Expectations of professionalism

Expectations are often culturally constructed, and staff found that students may be marked negatively for a lack of alignment with perceived professional behaviours. Some expectations are assumed where they may need to be explicit.

### Approaches

At Sheffield Hallam University, staff have engaged in two schemes to support minority ethnic AHP students on placement. The first, an AHP minoritised student group, was formed as a response to students needing a safe space to discuss incidents on placement. The group have held workshops and events on cultural awareness and navigating identity, alongside talks from minoritised ethnic academics. As a result, students feel they have a safe space to support each other and develop a voice to speak up. The second scheme, entitled Equity Accomplice, focuses on training department staff and practice educators. This includes six sessions addressing anti-racism and supporting students in leadership.

Staff have found that those attending the sessions are more aware of issues than they were previously, and feel more confident in anti-racism, allyship, and embedding these practices in teaching.

Staff at Canterbury Christ Church University noted disparities in degree outcomes for minority ethnic AHP students, partly as a result of challenges in practice learning environments. In partnership with the University of Brighton, an [online placement](#) was introduced to provide leadership development opportunities and to raise awareness and tackle issues of discrimination on placement. Staff created resources that were shared via blogs across the two universities. As a result, students evaluate this placement highly and carry learning from placement into their roles as future practice educators. This intervention has also created a safe space for students, allowing them to raise any issues they have.

At the University of the West of England, staff recognised additional barriers for minority ethnic groups on placement. Staff created [resources](#) to address the awarding gap and discrimination in practice, including a map of the student journey, conversations with minority ethnic healthcare students, and workshops for colleagues in practice. This initiative raised awareness and supported work addressing racism and the awarding gap. Work has begun at the university to embed new structures to support anti-racism.

## 4. Transition to employment

### Key issues

Key issues identified within the workshop for this theme included:

#### Lack of visibility

Often, students were apprehensive about joining the workforce due to the lack of minority ethnic professionals they had met in practice, especially in senior positions.

#### Expectations of resilience

Staff felt that students are expected to enter the workplace with the skills to be consistently resilient in the face of adversity. However, this can create additional emotional burden for minoritised ethnic professionals.

***“You feel like a whistle-blower as universities value their relationships with trusts”***  
AHP student

### Negative experiences on placement

Some students have experienced racism within their placement and feel nervous about progression into practice. Additionally, students who are not minority ethnic felt ill-equipped with the skills to challenge racism in practice.

***“We were taught about expectations on placement, but no one mentioned what to do if you encounter racism”*** AHP student

### Approaches

At Birmingham City University, staff were aware that minority ethnic groups were under-represented in the Speech and Language Therapy profession. These students often have a different experience on placement and in employment due to racism and lack of understanding of minority ethnic communities. To address this, the university embeds six blocks of practice-based learning within the curriculum, alongside clinical placements. As a result, students have received clear and consistent messaging in recognising and challenging racism and discriminatory practices in employment. Students have a growing sense of belonging and felt more about to speak up.

Additionally, at Birmingham City University, staff identified a growing need to support all students in identifying and challenging discriminatory practice in employment. Staff held a scenario-based session with final year students, including a facilitated discussion. Staff covered ways of approaching challenging conversations in practice and how to respond. Feedback for these sessions has been positive, and prior to the session many students had not realised their responsibility to speak out.

At the University of Sheffield, staff identified gaps in how the university was preparing students for practice and addressing racism. Staff created a series of scenario-based learning sessions, where students were coached on how to respond to racism in practice. Staff also invited practice educators into these conversations. After facilitating these sessions several times, staff realised the knowledge they could harness through students, and have continued to co-create alongside students. The sessions were successful, and staff are developing these further to embed sessions from the start of the course. Practice educators engage in anti-racism training, but this intervention evidenced the need for a more structured approach to this.

# Recommendations

The case studies outlined in this report show valuable examples of how universities can support minority ethnic AHP students throughout their learner journey. Interventions have been widely successful, and students have felt valued and supported. However, to support minority ethnic students further, this work should be replicated across the wider university sector. The outlined recommendations should support universities to develop or create interventions to support these students.

## Recruitment and retention

*Recommendations in this section relate to Case Studies 1-4.*

- Ensure flexibility and innovation in interview processes.
- Create safe spaces for students to speak up.
- Co-create initiatives alongside students.
- Engage with communities to understand perceptions and barriers.
- Engage with university support systems to support AHP students.

**Ensure flexibility and innovation in interview processes.** Key recommendations from these findings focus on flexibility and innovation. Recruitment services should ensure the application process is simple and accessible for all students, embedding methods and principles from **Case Study 1**. This includes implementing bespoke online systems, alongside ensuring the focus on key principles of recognising potential stereotype threats, reducing verbal load, and ensuring diversity of interviewers. Institutions should engage in open and honest discussions with their recruitment teams to understand current processes and how these principles can be embedded. Universities should aim to start implementing these changes for the next round of applications and interviews.

**Create safe spaces for students to speak up and co-create initiatives alongside students. Engage with university support systems to support AHP students.** Institutions must centre the student in any work on recruitment and retention by engaging with students to co-create initiatives and working groups, like in **Case Study 3** and **Case Study 4**. Institutions must provide a safe space for students to discuss their experiences with the application process.

This could be in the form of recruitment working groups with first year students. Additionally, institutions should engage with university support staff to encourage processes to support minority ethnic AHP students, as a discrete group. Support should be tailored through an understanding of the experience of this group of students. The effectiveness of these interventions can be measured through the retention of students over time, and through evaluation of the working groups. This type of intervention is low-cost and time efficient so can be implemented quickly.

**Engage with communities to understand perceptions and barriers.** Institutions must engage with the wider community to understand the perception of the allied health professions across all cultures. This will encourage understanding of recruitment processes according to all cultural values and behaviours. Staff should meet with AHP students from minority ethnic groups during their first term, to understand their experience of the transition to university and their particular community's perception of the course or profession. From here, institutions can look to meet with community and faith leaders, like in **Case Study 2**, to understand their perceptions of the allied health professions during the application process. This understanding can inform the development of resources to support the recruitment of students from minority ethnic communities. Additionally, universities should seek to raise the visibility of minority ethnic students and staff on their promotional recruitment material. This process can be completed through a step-by-step approach, and institutions can set their own time frame in which to engage in this work. However, universities are encouraged to start this process as soon as possible, and start liaising with AHP students whose course commences in September 2023. Raising awareness of different professions across all communities will also promote workforce development.

## University-based learning

*Recommendations in this section relate to Case Studies 5-7.*

- Diversify and decolonise learning materials and teaching content.
- Embed anti-racist practices and behaviours into pedagogy and teaching processes.
- Ensure teaching staff have effective training on decolonisation in education.

**Diversify and decolonise learning materials and teaching content.** The case studies in this section show the importance of diversifying and decolonising learning materials and teaching content. Institutions can draw on strategies used within the case studies, such as creating student-led working groups to advise on content. Resources shared within this report, such as the decolonising the curriculum wheel in **Case Study 7** and encouraging critical awareness in **Case Study 6**, should be drawn upon during this process. The impact of these groups can be measured through an evaluation of student perceptions across the cohort before and after changes are implemented. It is important to note that curriculum change is unlikely to happen quickly, but this goal should be achievable if implemented on a rolling basis over a longer period of time, starting with small changes.

**Embed-anti racist practices and behaviours into pedagogy and teaching processes and Ensure teaching staff have adequate training on decolonisation in education.** Embedding anti-racist practices in pedagogy can be implemented by ensuring adequate training for teaching staff on anti-racism and decolonisation, like in **Case Study 5**, to ensure they are able to engage in equitable teaching practices and teach through a critical lens. The effectiveness of this kind of intervention can be measured through questionnaires before and after training to assess impact and understanding. It is important that this training is offered to all staff each year. This intervention should be achievable for all institutions, as there are many different types of training available at a range of costs. Additionally, it is important to understand that curriculum development often lies with professional bodies and regulators; representatives should strive to ensure these requirements are decolonised and equitable for all students.

### **Practice-based learning**

*Recommendations in this section relate to Case Studies 8-11.*

- Encourage student leadership development and build confidence to challenge discrimination in practice.
- Ensure adequate, mandatory anti-racism training for practice educators and teaching staff.
- Ensure students have a safe space to raise concerns, and that staff respect and escalate concerns.

**Ensure students have a safe space to raise concerns, and that staff respect and escalate concerns. Encourage student leadership development and build confidence to challenge discrimination in practice.** Staff should create safe spaces for students to discuss their experiences on placement, like those in **Case Study 9** and **Case Study 10**. It is important that processes are in place that are accessible whilst away from the university as well as during university-based learning. It may be beneficial for a staff member to attend any sessions with students, to take responsibility for enacting changes and escalating concerns if required and remove the burden from students. It is also important that university and placement staff encourage student leadership development whilst on placement, to build confidence in challenging discrimination, such as in **Case Study 8**. There should be a designated AHP EDI lead within each placement provider, and institutions should engage with regional AHP leads to ensure strategic planning to support minority ethnic students on placement.

For each placement, who is involved in creating these safe spaces and who students can approach if they are experiencing an issue. The impact of this can be measured through student reviews of placements, with a comparison of how many negative incidents were raised prior to and after the intervention. This may be difficult to measure due to the complexity around reporting concerns, and the reasons behind reporting or not reporting. Additionally, it is important to understand that as placements are completed away from the university, institutions may have minimal input on processes at the placement site. However, by encouraging more open conversations and introducing a safe space and designated lead that students can approach, placements can become safer spaces for students.

### **Ensure effective, mandatory anti-racism training for practice educators and teaching staff.**

Additionally, comprehensive anti-racism training should be built into wider training for practice educators and teaching staff. As evidenced within **Case Study 11**, staff who have engaged in this training have found it beneficial to understand the experience of minority ethnic AHP students and how to support them in practice.

In practice, students are further away from the support of the university, meaning practice educator understanding and support is extremely important and will significantly influence a student's experience on placement. Like training for academic staff, this can be measured through reviews and evaluation prior to and following the training, and training should be repeated on a yearly basis. Equally, it is important to understand that this may be more difficult to implement as it would require liaison with trusts and external providers, but institutions should encourage trusts to embed this training as much as possible. Communication between universities and placement providers is of extreme importance to support student experience and ensure join up ...

### Transition to employment

*Recommendations in this section relate to Case Studies 12-14.*

- Utilise scenario-based learning and lived experience to prepare students for scenarios they may encounter on placement.
- Ensure students are aware of how to escalate concerns without the support of the university.
- Encourage critical reflection of all students' own views and behaviours prior to practice and understand how to effectively support peers.

**Utilise scenario-based learning and lived experience to prepare students for scenarios they may encounter on placement. Ensure students are aware of how to escalate concerns without the support of the university.** It is important that universities utilise scenario-based learning to prepare students for situations they may encounter both on placement and when they join the workforce, like in

**Case Study 13** and **Case Study 14**. This method of learning has been shown through case studies to be an effective way of preparing students, and can be embedded in final-year modules. This intervention will ensure students are aware of aspects such as how to escalate concerns without the support of the university, and how to address discrimination in practice, whether towards themselves or a colleague. Educators should also signpost students to schemes such as HEE's [Step to Work](#), a preceptorship programme to support students into employment. To measure the success of this intervention, students can be evaluated before and after the intervention to assess their progress. This sort of intervention is in scope for universities as it can be built into transitional modules and can be taught using simulated learning if needed.

**Encourage reflection on behaviours prior to practice and understand how to effectively support peers.** Finally, staff should also encourage the whole cohort of students to critically reflect on their own views and behaviours prior to employment, like in **Case Study 12**. It is important that all students, regardless of ethnicity, have an awareness of racist incidents in practice and understand their role in actively addressing them. Students should also understand how they can support their peers who are at risk of experiencing racism, alongside being able to identify microaggressions and discriminatory behaviours. This can also be measured through scenario-based learning and can be built into modules. Additionally, students should be able to acknowledge unconscious bias and understand how to approach this. This links to previous recommendations around training for university and practice educators, which must include learning how to support students to speak up and take an active role in challenging racism.

# Conclusion

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The Council of Deans of Health and Health Education England would like to thank everyone who has contributed towards and supported this project, in particular those who attended workshops and submitted case studies. We feel privileged to be able to share the important work universities are doing, and grateful for external commitment and support.

Despite the impactful work showcased in this report, some areas identified as key issues in the initial scoping stages of the report were not addressed through case studies – in particular, the issue of visibility. There remains a significant lack of minority ethnic teaching staff, especially in senior positions, and whilst this disparity remains minority ethnic AHP students will continue to be negatively impacted.<sup>2</sup> Work must be completed to increase diversity at all leadership levels across all areas of AHP education, in particular at a senior leadership level.

It is important to consider that the scope of this report focuses around showcasing best-practice and highlighting recommendations for university health faculties. There are further recommendations around anti-racism for the wider higher education sector and for practice institutions that were outside the scope of this report. Issues such as the attainment gap in higher education were implicit in the motivation behind many interventions, but were not addressed through the scope of this report. There is a need for further work to be completed by the sector; in particular, we encourage further investigation into the attainment gap specifically for healthcare higher education students, alongside a deep dive into the experience of minority ethnic communities working in healthcare environments.

Additionally, some case studies acknowledged that despite interventions and efforts by staff, students continue to feel minoritised and lacking in confidence in navigating the student experience and transition to employment. It is important that institutions reflect on their current pedagogies and approaches to the learner journey, to consider how they can further embed anti-racism into the student experience. The case studies evidenced in this report are impactful examples of how institutions have embedded anti-racism into their processes, and it is important that all universities running AHP courses consider these interventions and how they can embed them in their own institutional processes.

We understand resources can be limited and healthcare education and educators face competing priorities. This report suggests a range of recommendations that require different levels of resource, from those that can be implemented quickly with little resource to those that may require more time and funding. Despite this, we believe the potential impact of all interventions will be of a significant value to the sector and the future workforce. We also encourage the sharing of resources and best practice throughout networks and across professional body communities. Through recommendations formed to support universities, we hope this report will stress the importance of prioritising EDI in AHP education.

<sup>2</sup> Advance HE, [Equality in higher education: statistical report 2018](#)

# Appendix

Number	University	Contact	Theme
1	University of Surrey	Dr Alison Callwood	Recruitment and retention
2	Brunel University	Dr Kee Hean Lim	Recruitment and retention
3	Leeds Beckett University	Dr Lindsey Thiel	Recruitment and retention
4	London South Bank University	Musharrat Ahmed-Landeryou	Recruitment and retention
5	Brunel University	Jou Yin Teoh	University-based learning
6	Birmingham City University	Aydan Suphi	University-based learning
7	London South Bank University	Musharrat Ahmed-Landeryou	University-based learning
8	Canterbury Christ Church University and University of Brighton	Helen Carr	Practice-based learning
9	University of the West of England	Professor Marc Griffiths	Practice-based learning
10	Sheffield Hallam University	Shirley Masterson-Ng	Practice-based learning
11	Sheffield Hallam University	Shirley Masterson-Ng	Practice-based learning
12	Birmingham City University	Aydan Suphi	Transition to employment
13	Birmingham City University	Melanie Packer	Transition to employment
14	University of Sheffield	Dr Emma Gregory	Transition to employment

## Appendix 1 – Case studies

### Recruitment and Retention

Case Study 1: Alison Callwood, the University of Surrey	
<b>Target audience</b>	Applicants to AHP programmes
<b>The challenge: Why was there a need for this initiative?</b>	<p>Facilitating diversity and inclusion in selection to health professions is increasingly recognised as an ethical and practical priority. However, the responsibility of universities to ensure welcoming and fair selection has never been more challenging to enact, due to the unintended biases intrinsic to human assessment and the impact of Covid-19 driven social distancing restrictions requiring rapid adaption to online systems. The rate of change has outstripped published evidence, and best practice guidance on the design and configuration of interviews to optimise engagement and performance of people from diverse backgrounds, thereby mitigating potential unfairness issues, is not readily available.</p> <p>Pre-pandemic, candidate selection was predominantly face-to-face using unstructured or structured approaches including panel interviews, group interviews and Multiple Mini-Interviews (MMIs). MMIs are series of short, focused interactions with several different interviewers. This multi-station format featuring scenario questions, tailored scoring proforma and a unidirectional flow of conversation is designed to mitigate the potential impact of interviewer bias. MMIs have been shown to be a feasible, acceptable, valid, and reliable candidate selection approach across health professions. Nonetheless, MMIs are understood to be subject to unintended bias.</p> <p>Technology-facilitated interviews can potentially alleviate bias issues, however there is limited evidence regarding the effectiveness of these approaches to selection into the health professions. For example, some candidates reported feeling that the ability to fully express themselves was impaired while others considered the absence of an interviewer made the process more objective. The pandemic-driven move to online interviews has resulted in recent small single site evaluations of the use of video-conference technology to facilitate MMIs, but unintended bias remains a concern.</p>
<b>The initiative: What did you do to address this issue?</b>	<p>Funded by UKRI, the university has built and evaluated what they believe is the first bespoke (asynchronous) videoconference facilitated interview and assessment system uniquely grounded in the MMI methodology. The platform was co-designed by a range of users and configured with ten principles building in fairness from the ground up. These principles were elicited from multiple sources, including platform-users, research in recruitment to the police force and commercial sectors where, for example, it has been shown that using language that supports the affirmation of values increases the probability of minority applicants passing an exam by 50%.</p> <p>The ten strategies included to:</p> <ul style="list-style-type: none"><li>● Recognise potential issues with stereotype threats and belonging uncertainty that may impact on candidates' performance and use language that supports the affirmation of values at each station (e.g., "well done for getting this far").</li><li>● Incorporate encouraging words/phrases into the interview dialogue, as well as any communications circulated to applicants (e.g., "good luck").</li><li>● Soften the language of technical instructions e.g., "when you are ready ..." or "when you have familiarised yourself with...".</li></ul>

## Appendix 1 – Case studies continued

<p><b>The initiative: What did you do to address this issue?</b> <i>Continued</i></p>	<ul style="list-style-type: none"><li>● Reduce the verbal loading of interview content particularly for neurodiverse applicants.</li><li>● Accommodate access and engagement for neurodiverse applicants with extra time, adjusted fonts, and a tailored user-interface (UI) including background colours.</li><li>● Provide opportunities for candidates to familiarise themselves with the UI and format prior to their interview.</li><li>● Recommend generic, blank backgrounds for video or videoconference facilitated interviews or, if not possible, advise blurred backdrops to avoid unconscious bias.</li><li>● Ensure diversity of interviewers to include gender, age and ethnicity mix, experts-by-experience, and other stakeholders.</li><li>● Avoid culturally sensitive subject areas in interview content.</li><li>● Ensure the use of inclusive, gender-neutral language with appropriate pronouns (e.g., ‘they/them/their’).</li></ul>
<p><b>The future: What impact has this made and how will it continue in the future?</b></p>	<p><b><i>“It felt a safe environment which put me at ease”</i></b></p> <p>An interim evaluation of the online MMI with principles of fairness ‘built in’ was conducted at the University of Surrey in May 2022 following 917 interviews. Reliability was good-excellent, and sub-group analysis showed similarly positive results across age groups, UK/non-UK applicants, male/female and those self-declaring a disability. 89% of respondents found the instructions helpful/very helpful; 61% found the process intuitive/very intuitive. Applicant quotes included: ‘It felt a safe environment which put me at ease’, and ‘It is very appealing and easy to navigate’. Applicants perceived the flexibility of being able to take the online interview when it suited/alongside other commitments, seeing different members of staff, Covid safety, a relaxed environment and cost savings as advantages.</p> <p><b><i>“It is very appealing and easy to navigate”</i></b></p> <p>These preliminary findings have substantial implications for the future configuration of online and face-to-face interviews as building in principles of fairness to the design are relatively straightforward and low cost to implement.</p>

## Appendix 1 – Case studies continued

Case Study 2: Dr Kee Hean Lim, Brunel University London	
<b>Target audience</b>	All university AHP Departmental, Divisional Leads, Programme Leads, Admission Tutors, and Student Experience Leads. All those responsible for recruiting, selecting students and concerned about the well-being and success of students transitioning to university.
<b>The challenge: Why was there a need for this initiative?</b>	<p>The Brunel University BSc Occupational Therapy programme has for several years been successful in attracting applicants from different ethnic backgrounds; around 30-40% of students each year are from minority ethnic backgrounds. There is still a need to widen participation and ensure that under-represented communities are aware of occupational therapy as a career choice. The university had under-representation of students from Sikh, Somali, Nepalese and Vietnamese backgrounds, and as a London University students must be representative of the diverse communities they serve.</p> <p>The university understood the need to ensure that its selection processes are not bias towards particular groups of students and decided to review the type of selection activities adopted in selecting students. They also considered the skills students needed to possess to engage and thrive within their studies and to develop to become competent practitioners.</p> <p>There was a need to consider student experiences in transitioning to University. Factors such as transition, belonging, making friends, managing the self, and mental health are significant challenges for the majority of students as they impact upon their well-being, integration and progression in their courses. Students from financially constrained, less well-resourced and supported backgrounds seemed to be more impacted by such transitions too.</p>
<b>The initiative: What did you do to address this issue?</b>	<p>The Admissions Tutor met with current students from minority ethnic groups underrepresented at the university, to learn how occupational therapy is understood and perceived within their specific communities and how best to promote and profile the profession. It was also important to understand how students from such backgrounds choose their university course. Meetings with community and faith leaders were also arranged where possible. The Admissions Tutor also attended, to present the profession as a career, explain the value of occupational therapy, and be available to speak to parents, families, and other community members.</p> <p>In 2019, staff undertook a review of previous selection processes and decided to try alternative approaches. They moved away from activities that might give some students an advantage, for example those coached through interview preparation organised by schools. They also recognised the importance of certain qualities such as collaborative working, communication of ideas and views, and reasonable written and reasoning skills. These qualities were necessary for students to engage, succeed in studies and become a competent practitioner. Staff revised selection activities to reflect this, including more group activities and discussion of contemporary topics. Additionally, the Admissions Tutors over the past three years have been from a minority ethnic background, to better reflect inclusiveness and diversity within the profession and promote more diverse perspectives in selection.</p>

## Appendix 1 – Case studies continued

<p><b>The initiative: What did you do to address this issue?</b> <i>Continued</i></p>	<p>Staff approached Brunel Student Services to fund and support research looking at a range of factors influential in student transition, health, and well-being. Staff led two separate research projects at Brunel University, the first open to all students across the whole University and the second with MSc and BSc occupational therapy students. These projects specifically looked at students' transition to university and factors that impact progression, exploring their experiences and examining such issues as exam stress, challenges to transition, resilience, and the impact on their mental health and wellbeing. Staff also identified the impact of university services, support systems, and buddy support.</p>
<p><b>The future: What impact has this made and how will it continue in the future?</b></p>	<p><b><i>“This initiative has helped them develop a greater sense of belonging and be part of the development of their professional studies.”</i></b></p> <p>Staff continue to work with their current students to understand how to better promote the profession of Occupational Therapy to under-represented groups. Staff are planning to ask students from all ethnic groups to review recruitment strategies, promotional materials, and processes. They will also continue to liaise with the Royal College of Occupational Therapists to ensure minority ethnic groups are more targeted in the promotion of the profession to increase diversity and inclusion. For some students from minority ethnic backgrounds, career decisions and choice of universities are influenced more by family and community preferences rather than the individual's choice. Therefore, more work needs to be done in engaging with such communities and changing perceptions. Staff have noticed more applicants from Sikh and Somali backgrounds at Brunel in recent years and have continued to maintain a good percentage of ethnic minoritised background students for a broad mix of groups.</p> <p>Staff will maintain the changes in the selection processes that have been introduced and will be undertaking a review of selection processes at the end of the academic year 22-23 involving all of the diverse student body to ensure all voices are heard and all suggestions considered. Regarding progress made, in the current BSc Occupational Therapy Year 1 intake, around 50% of students are from minority ethnic backgrounds, representing greater diversity. These figures are similar in the MSc pre-registration Occupational Therapy programme. This work in appropriate selection methods is ongoing and will be reviewed and examined to support progress made.</p> <p>Within the Occupational Therapy Division at Brunel University, changes have been introduced from research findings gathered. This includes pairing students with senior students from similar backgrounds as buddies to mentor and assist in their transition and adjustment to university life. Staff have encouraged students from minority ethnic backgrounds to be student ambassadors so they can earn extra money to support their studies, whilst acting as valuable role models for the profession. Staff have engaged minority ethnic students in co-producing the teaching content, reviewing case studies and workbooks, and drawing upon their knowledge, expertise, and ability to influence change. This initiative has helped them develop a greater sense of belonging and be part of the development of their professional studies. Staff will continue to look at supporting our students through developing their exam strategies, reviewing their progress, and having authentic assessments. They have also encouraged open discussions with students around mental health and general well-being, introducing different activities and student events to reduce their isolation and sense of loneliness.</p>

## Appendix 1 – Case studies continued

Case Study 3: Lindsey Thiel, Leeds Beckett University	
<b>Target audience</b>	BSc and MSc Speech and Language Therapy students
<b>The challenge: Why was there a need for this initiative?</b>	<p>In 2020, focus groups were carried out with minority ethnic students studying BSc and MSc Speech and Language Therapy at Leeds Beckett University. Students identified the following issues within the course, university, and wider profession:</p> <ul style="list-style-type: none"> <li>● Limited minority ethnic SLT role models for students</li> <li>● Social activities that are not inclusive to students from different cultures</li> <li>● Lack of sense of belonging at university and on some placements</li> <li>● Not feeling that they have a voice</li> <li>● Experience of discrimination</li> <li>● Not feeling they could talk to teaching staff about discrimination</li> </ul> <p>The university felt an urgent need to make changes in response to these findings.</p>
<b>The initiative: What did you do to address this issue?</b>	<p>In September 2021, the university supported minority ethnic Speech and Language Therapy students to set up an Equality, Diversity and Inclusion Steering Group, which is student-led but staff supported. Since then, this group have met once a month to have open discussions about lived experiences and to set and address actions together which support the course team to improve inclusivity and promote anti-racism. Staff take on the responsibility of implementing the actions identified by students in the group, so the burden is not on them. Some of the changes made include:</p> <ul style="list-style-type: none"> <li>● Putting a statement in the course handbook that it is acceptable to have time off for major religious festivals and arranging assessments around these</li> <li>● Setting up a module on the distance placement educator training course on EDI</li> <li>● Setting up and running a workshop on developing a culturally responsive SLT service</li> <li>● Inviting prominent speakers who have worked on decolonisation and anti-racism in SLT to talk at the university</li> </ul> <p>The EDI Steering Group have also planned and implemented two bigger projects:</p> <p><b>The mentor network:</b></p> <p>The group have invited practising speech and language therapists who belong to an underrepresented group within the profession to be mentors for students at the university. So far, the group have matched several students with mentors, and they are having monthly meetings. The mentors will also be involved in reviewing academic teaching and curriculum development and attending Equality, Diversity and Inclusion events and careers events.</p> <p><b>The EDI Forum:</b></p> <p>The group has set up a monthly EDI forum which is open to all speech and language therapy students and focuses on any matters related to EDI (including gender, race, ethnicity, LGBTQ+, disability). The forum is an opportunity for sharing experiences and learning with each other, which includes having discussions in response to questions, watching videos, reading an article, or discussing something in the media. The group has held online, face to face and hybrid meetings.</p>

**The future: What impact has this made and how will it continue in the future?**

***“The group has made a significant positive impact on their experience at the university.”***

The students who have been part of the steering group have provided feedback that the group has made a significant positive impact on their experience at the university. Those who have been applying for jobs this year have also been able to discuss their work on this within their personal statements and job interviews. Students involved in the mentor scheme so far have fed back that it they have found the scheme to be beneficial and enjoyable. The students in the EDI Steering group also won the Leeds Beckett Students Union Student Voice Award in 2022.

The EDI steering group also planned a series of events for Black History Month in October 2022:

- A timetabled EDI session in induction week. 10 invited speech and language therapists from under-represented groups will share experiences and facilitate group discussions about diversity, inclusion, and anti-racism.
- Guest speakers invited
- A Black History Month lunch for staff and students
- The course team will make at least one change to each Semester 1 module that relates to Equality, Diversity and Inclusion (e.g. reflection questions; critical discussions about existing models and theories; teaching and discussion on health inequalities; more representation in case studies; discussions and reflection about anti-racism). This links with projects that the teaching team are engaging with in collaboration with other HEIs around decolonisation of the SLT curriculum.

## Appendix 1 – Case studies continued

Case Study 4: Musharrat Ahmed-Landeryou, London South Bank University	
<b>Target audience</b>	AHP students and staff
<b>The challenge: Why was there a need for this initiative?</b>	Some students on allied health professions courses asked why the course team were not talking about the murder of George Floyd, and how it may be affecting Black students, or providing any support or comfort in light of this event. They felt very hurt and invisible as Black students.
<b>The initiative: What did you do to address this issue?</b>	Through a survey, staff asked the minority ethnic students on allied health courses what support they wanted. The majority of students stated they needed a safe space where they could discuss their experiences freely with staff who would understand. With their agreement, staff created an online meeting on MS Teams as an extracurricular activity. The group developed terms of reference and agreed to meet every last Wednesday of the month. The group was officially formed in October 2020 and was named Race and Cultural Equity Group, abbreviated to RaCEg. It was agreed that the group would be a critical friend to the course too.
<b>The future: What impact has this made and how will it continue in the future?</b>	<p>The group has resulted in the school's student complaints process to be under review and a practice placement learning subgroup to be formed, with student representatives reviewing reporting processes of EDI incidents on placement and training for practice educators. This includes training on how to be an ally to students and how to be equitable. In the long term, staff will measure student belonging, number of students raising EDI incidents, and number of minority ethnic students being successful on placement. Belonging is a key indicator of success, so this initiative will contribute to the reduction of the degree awarding gap.</p> <p><b><i>“The group has resulted in the school’s student complaints process to be under review and a practice placement learning subgroup to be formed, with student representatives reviewing reporting processes of EDI incidents on placement and training for practice educators. This includes training on how to be an ally to students and how to be equitable.”</i></b></p> <p>Students racialised as white in allied health also wanted to have a similar group, so in November 2022 the Allyship and Cultural Equity Group (AaCEg) was created. Every December the two groups join to deliver an outward facing Documentary and Discussion evening. There have been two successful events since the groups formed; these events raise the EDI agenda and enable critical discussions and reflections regarding practice and education.</p>

## University-based learning

Case study 5: Jou Yin Teoh, Brunel University London	
<b>Target audience</b>	Undergraduate Student Occupational Therapists from diverse Black and Asian backgrounds.
<b>The challenge: Why was there a need for this initiative?</b>	<p>This initiative was brought about by a series of incidents occurring through the acute stages of the Covid-19 pandemic in 2020, such as the murder of George Floyd and the Black Lives Matter/Racial Justice Movements in Healthcare, which were driven by the impact of the pandemic on racially minoritized communities.</p> <p>While the Covid-19 pandemic and its accompanying discussions around race in occupational therapy may have been relatively recent (), the occupational therapy profession has been grappling with issues of cross-cultural inclusion for a long time. Over the past two decades, Occupational Therapy researchers have raised concerns about the epistemic dominance of Western, Educated, Industrialised, Rich, and Democratic (WEIRD) societies. This dominance has skewed the knowledge base of professions such as Occupational Therapy and has affected subsequent practices underpinned by them. If left unattended, it will continue to perpetuate various ongoing inequities at the expense of diverse individuals and communities around the globe – including in the areas intersecting health and education. This historical context underpinned the focus on addressing WEIRD dominance opposed to the race-ethnicity awarding gap, which is more typical in education.</p>
<b>The initiative: What did you do to address this issue?</b>	<p>The Occupational Therapy Division at Brunel University London set up a Racial and Cultural Equity (RACE) Working Group in 2020 to facilitate anti-racist classroom and curricula reforms through educational interventions embedded throughout the division. Efforts over the past two years have attempted to harness epistemic diversity alongside anti-racist and anti-oppressive pedagogy and curricula. Within the academic curriculum, reforms focused on diversification of learning materials – for instance racially, ethnically, religiously, and culturally diverse case studies were used to teach the human and informing sciences and occupational therapy process. Staff attempted to normalise discussions on race in university-based settings starting from Welcome Week to encourage active student engagement with systemic issues. Effort was made to diversify guest lecturers as well as permanent academic staff, for demographics of academic staff to be representative of the student body. Additionally, staff began to embed anti-racist and anti-oppressive elements into divisional processes such as admissions, Welcome Week, and placements. Collectively, these reforms aimed to allow racism and other forms of oppressions to be explicitly named and addressed. Staff started to implement these interventions in phases over the 2020/2021 academic year and efforts to ensure they are more deeply embedded throughout the curriculum are ongoing.</p> <p>Efforts by the RACE Working Group continue to remain a work-in-progress. The RACE Working Group received funding from the University during the 2021/2022 academic year to evaluate the impact of efforts to address race-based educational inequities in occupational therapy. Students and educators were expected to co-produce improvement efforts for the 2022/2023 academic year based on findings. For this evaluation, staff decided to compare experiences of students from the 2019/2020 and 2020/2021 intake. Staff circulated a survey to all students and conducted group interviews for racially minoritized students – one for each cohort.</p>

## Appendix 1 – Case studies continued

<p><b>The initiative: What did you do to address this issue?</b> <i>Continued</i></p>	<p>Nine participants submitted the survey (including two white students) and there were 11 participants in the group interviews. The university made a conscious effort to ensure participants were evenly distributed across Black and Asian student groups – participants comprised of a total of five Black and six Asian students. Outcomes were shared with students and educators collaborating in preparation for the upcoming academic year. The co-production process was funded by Health Education England and a report will be produced in 2023.</p>
<p><b>The future: What impact has this made and how will it continue in the future?</b></p>	<p><b><i>“Initiatives directed at addressing racial inequities to be embedded formally into the curriculum were more highly valued.”</i></b></p> <p>Student narratives show that despite efforts by the RACE working group over the past two years, a colour-blind ideology has remained entrenched in the students’ experience of the academic curriculum. They continue to feel minoritized, and while lack of preparation to work with racially diverse clients was still reported, minority ethnic students felt particularly unprepared to navigate practice placements and the workplace. A shift towards a more intersectional, critical and colour-conscious approach would better prepare them to manage racialised experiences.</p> <p>While improvement between cohorts has been identified, efforts were perceived to be primarily driven by specific individual educators, extra-curricular and informal rather than formally embedded across the explicit curriculum. Students expressed appreciation for informal, extracurricular efforts; however, initiatives directed at addressing racial inequities to be embedded formally into the curriculum were more highly valued as they would be accounted into existing workloads and would require attention across the entire student population. This was also perceived to be more sustainable in the long-term. This approach will require collective engagement from all educators, which is aligned with student expectations. Students expressed appreciation for the case-based approach to facilitate learning of fundamental knowledge and skills and for deliberate efforts to assign them into diverse teams. The need for an intersectional approach was also highlighted.</p> <p>Educators and academic administrative leaders in the health and care professions who are actively attempting to take an anti-racist, anti-oppressive approach to the curriculum need to recognize that challenging anti-racism will be an ongoing, uphill battle, and they should not be disappointed by discouraging results. Effort must be made to prepare students to address both workplace and health inequities. This is best facilitated through formal and explicit embeddedness across the academic curriculum and using an intersectional approach.</p>

## Appendix 1 – Case studies continued

<b>Case study 6: Aydan Suphi, Birmingham City University</b>	
<b>Target audience</b>	First year Speech and Language Therapy students
<b>The challenge: Why was there a need for this initiative?</b>	Staff became aware of how the use of 'developmental norms' is culturally situated and stems from the history of colonisation. This presented a dilemma because such norms are used widely in clinical practice but are typically presented as 'facts' rather than viewed through a critical lens.
<b>The initiative: What did you do to address this issue?</b>	In teaching first year students about language development, rather than simply presenting developmental norms, staff shared the dilemma with them – that norms are based largely on white middle class monolingual populations and yet applied widely. Staff encouraged using norms but with critical awareness of how they are sometimes imposed on populations and used to differentiate between so called 'typical development' and 'atypical development'. This has been discussed across the developmental teaching team, so that critical thinking and discussion can be continued across the course. The team have briefly discussed alternative ways of thinking, for example looking at the functional effect of any differences in development rather than immediately problematising any deviation from the norm.
<b>The future: What impact has this made and how will it continue in the future?</b>	<p><b><i>“Students have started to include their critical thinking about this within their written work and discussions.”</i></b></p> <p>It is too early to tell what impact this change has had, but students have started to include their critical thinking about this within their written work and discussions. Staff are hopeful that they will continue to challenge 'deficit-based' models as they go into practice, whilst recognising that services (health and education) are largely based on these models.</p>

## Appendix 1 – Case studies continued

Case study 7: Musharrat Ahmed-Landeryou, London South Bank University	
<b>Target audience</b>	AHP students and staff
<b>The challenge: Why was there a need for this initiative?</b>	There is a continuing degree awarding gap for minority ethnic populations at the university in general, which is also represented in the allied health professions courses.
<b>The initiative: What did you do to address this issue?</b>	LSBU has a Race and Cultural Equity Group, made up of minority ethnic students and staff on allied health courses. In November 2020, this group was asked to consider what a new way of working would look like for them. Staff had already been exploring the decolonising methodology for curriculum transformation and speaking to AHP staff groups regarding this, and student suggestions from this group aligned with this approach. Musharrat, the staff member leading on this project, undertook a sabbatical through the university teaching fellow scheme for the academic year 2021-2022. By the end of the sabbatical, Musharrat had developed an evidence informed guide entitled 'Decolonising the Curriculum Wheel – a Reflection Framework'. This guides areas for deep interrogation before planning change, always centering the minority ethnic students and staff who are impacted by the structural inequities and racism in the higher education system. Centering this aspect means collaborating with minority ethnic staff and students at every part of the decolonising transformation process. The wheel framework is now part of the university wide curriculum framework strategy, and Musharrat is the lead for supporting the AHP courses in their decolonising transformation journey.
<b>The future: What impact has this made and how will it continue in the future?</b>	<p><b><i>“Belonging is a key indicator of success, so will contribute to a reduction of the degree awarding gap.”</i></b></p> <p>LSBU will soon be forming an AHP decolonising the curriculum strategy group which will include course leads, students, and service users from minority ethnic backgrounds, alongside admin and student support staff. The areas covered will be the degree awarding gap, rate of successful completion of Year 1 and Year 3, number of students successful on placement, and measuring belonging within the course. Belonging is a key indicator of success, so will contribute to a reduction of the degree awarding gap.</p> <p>This is being supported and resourced by the Dean of the School of Allied Health and Community Health. The support of leadership is key in the decolonising approach, as it drives culture of the organisation.</p>

## Practice-based learning

Case Study 8: Helen Carr, Canterbury Christ Church University and the University of Brighton	
<b>Target audience</b>	Initially funded for AHP students, this project is now open to any student doing a health or social care course. 29 students have taken part in the project, 28 of which have been Occupational Therapy and Physiotherapy students.
<b>The challenge: Why was there a need for this initiative?</b>	In 2019, the Universities UK and the National Union for Students published the <u>Closing the Gap</u> report. This report highlighted the significant and persistent disparities between the degree outcomes of white students and their minority ethnic counterparts and the urgent need to tackle racial inequalities in Higher Education. Students studying on professional courses spend up to 50% of their time in practice placements. Research has shown that minority ethnic students face significant and unique challenges within the practice learning environment; they encounter psychological, societal, and cultural challenges because of their identity. Through regular monitoring of placement evaluations, amongst the many positive evaluations, it can be learnt that many minority ethnic students experience microaggressions and racism.
<b>The initiative: What did you do to address this issue?</b>	<p>Canterbury Christ Church University, in collaboration with the University of Brighton, gained HEE funding in January 2021 to run an online placement for AHP students. Provisionally supporting 12 students across the two universities during the first year, the project has now been co-created by 29 students.</p> <p>The aims of the placement are to provide leadership development opportunities for minority ethnic students, raise awareness of and tackle issues of discrimination experienced by minority ethnic students during practice placements, enhance the experiences of minority ethnic students on practice placement, promote allyship and foster a sense of belonging within practice placements, and provide a set of resources for Practice Educators, students, and placement partners to develop their understanding of race, ethnicity and diversity within the learning and working environment.</p> <p>The first students on this project developed the identity and initial timeline of this project. They met with stakeholders, students across the two faculties, and Practice Educators, to identify the support and resources required to enhance placement experiences of minority ethnic students. Students have created a wide range of resources disseminated nationally, including real case examples from the direct experiences of students at the universities, and shared experiences through conferences, webinars, educator training, and social media. The inclusion of real case scenarios has led to ongoing work by the two universities in encouraging students to feel safe to speak up about their experiences.</p> <p>The placement emphasises co-creation and co-direction. Students are partners on this placement and are given the opportunity to bring their whole self to the learning space. The universities provide regular supervision, opportunities for reflection on previous placement experiences, and discussions on grappling with complex ideas on inclusivity. Students have shared direct experiences of discrimination and learned about their own white privilege, white fragility, and white sanction, and importantly learned from one another.</p>

The future: What impact has this made and how will it continue in the future?

***“Students evaluate this placement highly in terms of increasing self-confidence, enhancing their own learning and development of leadership skills, and feeling safe to share their experiences through peer support.”***

#### **Students and Staff**

The project is now in its second year and has supported over 29 students across both universities. These students have held focus groups and surveys both internally and externally, reaching out to students at other universities. Towards the end of each placement, the university has seen transformations within our students including becoming equipped with a greater depth of knowledge around appreciating diversity and developing insights that will be crucial in their future roles as practice educators themselves whilst developing their digital skills and confidence in presenting their ideas.

Students evaluate this placement highly in terms of increasing self-confidence, enhancing their own learning and development of leadership skills, and feeling safe to share their experiences through peer support. Students have also carried learning from this project to their roles as future Practice Educators, influencing the workplace from within. In particular, one previous student has supported four students as a Practice Educator and stated his learning through this placement shaped the standard of practice education he provides. Regarding employability, one student said this placement helped him shine in an interview when he talked about his experience, and how he will use this learning in his practice with patients. Another alumni student has said he is being given NHS leadership training as an outcome of this placement.

***“Created a safe place for students to have conversations that could be difficult in a wider classroom.”***

Learning for academics at the universities is also significant. Through relationship-based teaching, they have created a safe place for students to have conversations that could be difficult in a wider classroom. The current students say they have developed excellent interpersonal relationship with their peers across the universities through group work and creating videos together, allowing conversations about daily cultural difference which they would not have gained otherwise.

***“Attendees felt their understanding of issues such as microaggressions, the attainment gap and allyship increased alongside their confidence to support minority ethnic students in practice, through the practical advice provided by the students.”***

#### **Practice**

Resources are shared in Practice Educator workshops where there is excellent feedback and students usually co-present, giving a greater impact. Placement provider organisations are keen to be involved in the project. In particular, one webinar was evaluated extremely highly. Attendees felt their understanding of issues such as microaggressions, the attainment gap and allyship increased alongside their confidence to support minority ethnic students in practice, through the practical advice provided by the students. The project’s resources are now being widely used by Practice Educators, encompassing over 4,000 views online.

## Appendix 1 – Case studies continued

Case Study 9: Professor Marc Griffiths, University of the West of England	
<b>Target audience</b>	All AHP students
<b>The challenge: Why was there a need for this initiative?</b>	<p>Now perhaps more than ever, higher education is being challenged to become accessible, inclusive and representative of the society we live in. Issues of race equality should be at the top of the higher education agenda with increased scrutiny from students, staff and regulatory bodies, such as the Office for Students. Institutional racism and structural barriers to education found in universities and healthcare practice settings is unfortunately a current occurrence and 'lived experience' for minority ethnic healthcare students. Barriers to education, equitable levels of support, and subsequent employment need to be removed for any student. Strategies that identify and address racism and racial inequalities require co-creation with relevant stakeholders who have the skills and expertise to sensitively engage minority ethnic communities, to inspire sustainable change and create an institutional 'culture' that values diversity. The awarding gap data for minority ethnic healthcare students also required timely address. Previous work on unconscious bias training, student workshops and 1:1 student advocate support fed into this project.</p>
<b>The initiative: What did you do to address this issue?</b>	<p>The project solution was to contribute to a key aspect of improving educational outcomes and addressing discriminatory characteristics in practice for minority ethnic healthcare students. The project was a collaborative approach between the UWE Bristol, the two major NHS Trusts in Bristol, North Bristol Trust (NBT), University Hospitals, University Hospitals Bristol and Weston NHS Foundation Trust (UHBW), Sirona Care &amp; Health, BNSGG and Avon and Wiltshire Mental Health Partnership (AWP). By enhancing the 'lived experience' of minority ethnic students in Higher Education by recognising and reducing discriminatory behaviour in practice, this will positively impact and increase attrition and decrease the awarding gap. The practice partners involved confirmed their clear support for this work, particularly as it offers the opportunity for a regional wide approach to improving equality, diversity and inclusivity in the NHS and organisations that provide placements to healthcare students.</p> <p>Activities in this project included:</p> <ul style="list-style-type: none"> <li>● Co-creation of a 'map of the student journey'</li> <li>● Conversations with minority ethnic healthcare students – what they want and what they need</li> <li>● Workshops for professional colleagues who support minority ethnic students in practice</li> <li>● Project engagement in wider university and external partnership strategies</li> </ul> <p>Members of Faculty Executive team at UWE Bristol scoped the project design principles and worked with representatives across each of the partner organisations to agree basic inclusion and exclusion criteria for the project. Significant time was invested early in the project to agree ways of working, and to understand potential institutional bias in relation to race and our collective need to own this challenge in terms of supporting all our students during their time on their educational and professional development journey. The Project Manager co-created and delivered a total of sixteen workshops in practice for 3 professional colleagues, led nine three-hour workshops for the project team, co-created a map of the student journey, created podcasts, #student connections, consulted on EDI work/initiatives, disseminated project work across the South West at various network/group meetings, events and connected key partners, students and overall integrated care system (ICS).</p>

**The future: What impact has this made and how will it continue in the future?**

***“The project has raised awareness and supported work addressing racism and the awarding gap related to practice-based healthcare programs.”***

The key outputs demonstrate that the project has been worthwhile, value for money and delivered on budget. The connection and engagement of partners across the BNSSG system over the duration of the project was seen (by members) as being one of the key recognitions of learning about ways of working, converging points of working and recognising the challenges associated with providing support for minority ethnic students during their university journey. The project has raised awareness and supported work addressing racism and the awarding gap related to practice-based healthcare programs. Work has also begun in embedding new structures around anti-racism in supporting minority ethnic healthcare students in practice placements. Whilst this project alone did not have a single objective of resolving the challenges that minority ethnic healthcare students experience in practice, it has focused the need to work across the local system and also the need to understand that interventions to support students learning need be co-created through partnership working and appropriate cultural training.

## Appendix 1 – Case studies continued

Case Study 10: Shirley Masterson-Ng, Sheffield Hallam University	
Target audience	All AHP students
The challenge: Why was there a need for this initiative?	There was a need for a safe space for minority ethnic students to seek support and to discuss issues that were relevant to them. Research shows students are often reluctant to report racial incidents on placement due to fear of consequences. One of the key factors around successful engagement is for students to feel a sense of belonging, which increases confidence, and to develop meaningful and trusting relationships with their peers and academic staff.
The initiative: What did you do to address this issue?	In 2019, an AHP Minoritised Group was set up for minority ethnic students and allies to meet regularly. This group is co-run with Nursing and Midwifery Minoritised, another programme run at the university, and facilitated by Shirley Masterson-Ng and a colleague in the nursing faculty, Ifrah Salih. The group meets monthly and has held various events such as workshops on cultural awareness and navigating identity, and talks from minority ethnic academics, senior leaders, and recent graduates. A recent workshop was held face-to-face and discussed microaggressions. The project has also delivered a conference entitled Sheffield Diverse Voices in Healthcare, run in conjunction with the University of Sheffield BAME Medics Society (a student run group) in 2021 and 2022. Additionally, members of the project held a film night event where students were shown a film about racism. They also presented the Nursing Narratives 'Exposed' documentary with the team that produced this about racism and the pandemic.
The future: What impact has this made and how will it continue in the future?	<p><b><i>"I feel empowered to support minority ethnic students."</i></b></p> <p>Feedback received about the group has been positive:</p> <ul style="list-style-type: none"> <li>● It is a safe place to discuss and support each other</li> <li>● It is a much-needed group and will support students in different situations</li> <li>● Students can learn from different experiences</li> <li>● Students can understand different cultures and diversity</li> <li>● "The scheme has had a massive impact on my time at SHU!"</li> <li>● "It was very powerful and informing!"</li> <li>● "I feel empowered to support minority ethnic students"</li> </ul> <p>The group provides a support network for students, increases awareness of issues affecting minority ethnic students, and provides positive role modelling.</p> <p>The group has received funding from Sheffield Hallam University, and this year there are two AHP student co-leaders to help plan and run events and support the group. Going forward, more staff will be included in the running of the group so that it is not too reliant on one staff member. Students have had opportunities to support events such as monitoring the chat in online conference events, helping with planning, and introducing events, all of which have helped develop their confidence and voice.</p> <p>Going forward, the project leaders aim to increase visibility and social media presence via Twitter and Instagram. Sign up forms have been produced and distributed on campus via QR codes, and members plan to attend course inductions to chat to students. Project members produced a short zoom video that will be sent to all students in pre-enrolment, and they would like to produce some podcasts and are planning events for next year.</p>

## Appendix 1 – Case studies continued

Case Study 11: Shirley Masterson-Ng, Sheffield Hallam University	
<b>Target audience</b>	Academics and Practice Learning staff, AHP students
<b>The challenge: Why was there a need for this initiative?</b>	At Sheffield Hallam University, AHP students are often referred to Shirley (as the EDI lead for AHP courses) when issues arise around racist incidents on placement. Some of these incidents are overt acts of racism, whilst others have been more subtle, microaggressions from other staff, patients, and students. Students often discuss placement issues at the Nursing and Midwifery and AHP Minoritised group meetings. Staff, both academic and in practice, require support to raise their awareness of these issues and to support students who experience these issues.
<b>The initiative: What did you do to address this issue?</b>	<p>In response to this issue, staff at the university have engaged in a number of initiatives to support students on placement.</p> <p>As part of a research team exploring stakeholder perceptions of minority ethnic health and social care students' experiences on placement, and to raise awareness of these issues, staff have presented at different AHP group meetings including SY ICS LEAP programme, RCOT conference, SHU OT and PT educator conference, and Notts Healthcare educator conference. Staff also presented recently to the Sheffield Teaching Hospitals Aspiring Leaders programme on Power and Privilege.</p> <p>Staff are also co-facilitating an Equity Accomplice Programme (A suite of six sessions addressing anti racism) for the AHP department at SHU and invite practice partners to attend these sessions. Staff have facilitated anti-racism sessions with the staff in the department and the new academic starter group. Staff have also supported students on leadership placements. In particular, one student on a leadership placement produced an anti-racism online reflective resource that is now being used as an intervention for a research project. Staff also deliver an anti-racism and leadership session for all students on leadership placements in AHP at SHU.</p>
<b>The future: What impact has this made and how will it continue in the future?</b>	<p><b><i>“Staff are hoping to support other staff to feel confident to include anti-racism in their teaching within their subject groups.”</i></b></p> <p>The leadership team in AHP are committed to encouraging all members of the AHP department to attend the Equity Accomplice programme. Staff are hoping to support other staff to feel confident to include anti-racism in their teaching within their subject groups. It is difficult to see what impact has been made in the early stages of the programme, but staff do believe that staff in AHP at SHU are much more aware of the issues and the need to address them. There is much more openness about acknowledging and recognising the anti-racism work that needs to be done.</p>

## Transition to Employment

Case Study 12: Aydan Suphi, Birmingham City University	
<b>Target audience</b>	Undergraduate and post-graduate (pre-registration) students in speech and language therapy. Demographic group is diverse in terms of ethnicity, socio-economic background, and age, but majority female.
<b>The challenge: Why was there a need for this initiative?</b>	The university experienced a growing awareness of the need to support students in identifying and challenging discriminatory practice towards clients and colleagues. Students with minoritised ethnicities, genders or with a disability have been telling the university for some time about their experiences in facing discrimination, for example when they are on a peer placement with a student who does not share the minoritised characteristic. The university wanted to provide students with the skills to recognise their responsibilities in identifying and speaking out against discrimination.
<b>The initiative: What did you do to address this issue?</b>	A 90-minute session is carried out with all final year students, run as a forum theatre with two actors. Following a brief introduction which covers ground rules and RCSLT & HCPC guidance, the theatre is started. The actors play characters in 3 different scenarios. For example, in the first scenario, a physiotherapist and SLT are talking in their break and the physiotherapist expresses stereotypically derogatory comments about a shared client. The scene is stopped, discussion is facilitated, and students are encouraged to suggest possible directions for the characters to follow. Staff cover ways of approaching challenging conversations, how to respond when discriminatory practice is raised by a colleague, and how to manage the difficult emotions in challenging and being challenged. Staff and students also discuss their roles as bystanders. Depending on the group, sometimes students are encouraged to swap into the characters' places to continue the discussion.
<b>The future: What impact has this made and how will it continue in the future?</b>	<b><i>“Students have reported that they had not realised it was their responsibility to speak out.”</i></b> Feedback from this session has been very positive. Students have reported that they had not realised it was their responsibility to speak out. Staff are hopeful that this teaching will contribute to awareness of discrimination and the responsibility for ongoing reflection and learning of an individual's own views and behaviours within the allied health professions.

## Appendix 1 – Case studies continued

<b>Case Study 13: Melanie Packer, Birmingham City University</b>	
<b>Target audience</b>	Speech and Language Therapy students
<b>The challenge: Why was there a need for this initiative?</b>	<p>There is an ever-growing acceptance in both the Speech and Language Therapy profession and universities responsible for pre-registration education that minority ethnic groups are not adequately represented in the profession. Increased diversity is seen as having benefits both for the profession and the communities that it seeks to serve. The discussion regarding inequalities in speech and language therapy resonates with discussions that are gaining momentum at a global level. To truly see innovation in practice we must see transformation at 3 levels: clinical practice, professional education, and research.</p> <p>Anecdotal evidence suggests that not all students have the same experience whilst training including placements and these observations gain weight when viewed in the context of recent publications. The development of the practice-based learning development is an example of how the Speech and Language Therapy Department at Birmingham City University seeks to adopt an anti-racist and anti-discriminatory position and in doing so aligns teaching and learning with both university and national policy and guidance.</p>
<b>The initiative: What did you do to address this issue?</b>	<p><b>Students</b></p> <p>Six blocks of practice-based learning (PBL) are embedded within the curriculum for the MSc Speech and Language Therapy. PBL is in addition to the assessed clinical placements completed as part of the course. Teaching consists of a range of learning experiences such as clinical simulations, workshops, working with experts by experience and visiting lecturers who are experts in their clinical field. Each block of practice-based learning (PBL) builds upon the knowledge and skills that are taught in recent teaching modules, recent placements and previous (PBL) blocks. The blocks should also support future clinical placements. Teaching is planned so that it aligns to the five core capabilities as outlined in RCSLT (2021) curriculum guidance for the pre-registration education of speech and language therapists.</p> <p>As well as embedding equality, diversity, and inclusion (EDI) within core teaching in the curriculum, PBL teaching offered a complementary safe space, where difference and inequalities could be explored. Students following the programme have an opportunity to consider and develop their ability to be culturally responsive and adopt an anti-discriminatory practice in workshops and simulations. To do this, staff included a sixth strand of learning to the practice-based learning (PBL) blocks. Some areas covered across three years included:</p> <ul style="list-style-type: none"> <li>● Cultural awareness and unconscious bias</li> <li>● Understanding concepts of power and privilege</li> <li>● Protected characteristics and different types of discrimination</li> <li>● Defining microaggressions, intersectionality and health inequalities</li> <li>● Allyship through a series of simulated scenarios</li> <li>● Discussion and guidance on reporting discrimination that may be witnessed whilst on placement and after qualification</li> <li>● A simulated interview for a Band 5 post, alongside feedback</li> <li>● A review of resources or research papers; considering the cultural assumptions and the implications of decisions made based on those assumptions</li> </ul>

## Appendix 1 – Case studies continued

<p><b>The initiative: What did you do to address this issue?</b> <i>Continued</i></p>	<p><b>Practice educators</b></p> <p>EDI is part of Birmingham City University's core Practice Educator training. The training implicitly acknowledges that student learning and healthcare take place in a social, historical, and political context. Practice Educators are asked to their position and role as educators. The content of PE training includes areas such as EDI and why it is important, protected characteristics, intersectionality, reasonable adjustment, student experience, allyship, and resources to support continued professional development.</p>
<p><b>The future: What impact has this made and how will it continue in the future?</b></p>	<p><b><i>“Has really got me thinking about the implementation of change we as professionals can make within healthcare and education.”</i></b></p> <p>Threading EDI focused practice-based learning through the course has meant that students have received a clear and consistent message recognising anti-racist and anti-discriminatory practice as central to speech and language therapy. Students from minority ethnic groups have a growing sense of belonging.</p> <p><b>Examples:</b></p> <p><b>Student A</b> requested impromptu supervision after teaching. During supervision they spoke about their fear of joining the profession. They expressed fear regarding interviewing for their first SLT post. Upon further discussion it became clear that they had experienced discrimination in previous job interviews (for non SLT roles). The supervision provided the student with an opportunity for their experiences to be validated. It also provided an opening where the student could acknowledge that the discriminatory behaviours were not acceptable. Through discussion they were able to identify what would support them to prepare for job interviews later in the year and ensure that the negative experiences did not negatively influence their confidence during the interview process. An informal plan was discussed, and the interview simulation provided an opportunity for the student to go through a simulated interview, receiving positive and constructive feedback. The student has now successfully interviewed for her first post and is now set to join the profession.</p> <p><b>Students B</b> described the impact of attending the workshop that focused upon positionality: “Although I felt quite emotional coming out of the session it was one of my favourite sessions, we have had so far on the course...and has really got me thinking about the implementation of change we as professionals can make within healthcare and education.”</p> <p>The introduction of an EDI practice-based learning strand is viewed as the beginning of a process of decolonisation of the curriculum and is an example of the work that is being focused on at this time. Further evaluation of the impact is required and at departmental level, the teaching team are looking at further adjustments in terms of content and delivery on both undergraduate and postgraduate courses. As we adjust the curriculum, we recognise the importance of working with our partners and so further dissemination of practice educator training and evaluation of training is planned. Supervision and discussion with partners on the subject decolonisation of the curriculum are planned for 2023.</p>

## Appendix 1 – Case studies continued

<b>Case Study 14: Dr Emma Gregory, University of Sheffield</b>	
<b>Target audience</b>	Final year Speech and Language Therapy students (undergraduate and postgraduate); Practice Educators supervising students on clinical placement
<b>The challenge: Why was there a need for this initiative?</b>	<p>Students reported experiences of racism on placement including microaggressions in communication, racist comments being directed at students, and racist language being used in the presence of the student but aimed towards someone else. Although the reports were few, the university was aware that it was probably only hearing from students who felt confident to speak up. Students who reported an incident often mentioned being unsure of how to respond, particularly if a Practice Educator was not present. It was also clear that Practice Educators had not always had training in managing racism in practice. This highlighted a gap in how the university was preparing students for both placement and practice, as well as how it was integrating anti-racism into its Practice Educator training.</p> <p>Staff noted how often students questioned whether it was acceptable to respond to racism when they were working with clients who have cognitive or behavioural difficulties, or when they wanted to maintain a therapeutic relationship with the client. Students were not sure of how to ensure non-judgemental care whilst making everyone feel safe and welcome. Students access anti-racism training from the university institution, but it was clear that more was needed. It was important to help students think about what they might actually do or say in a situation where racism occurred.</p>
<b>The initiative: What did you do to address this issue?</b>	<p>The initial actions aimed to start building space for conversations with both students and Practice Educators, which run alongside broader initiatives in decolonising the curriculum.</p> <p><b>Racism scenario</b></p> <p>Staff introduced time to talk through a placement-based racism scenario in one of the final year modules entitled 'Transition to Professional Autonomy'. Staff were keen to ensure the scenario reflected the lived experience of students, so approached a graduate who had raised concerns during the programme who gave permission for her experience to be used.</p> <p>The scenario described a peer long-arm placement where the Practice Educator was not present. Racist comments were made which related to people close to one student's ethnicity and made both students uncomfortable. One staff member felt ill equipped to respond to the student during and after the incident, having had no formal training in this area. The staff member was unaware of the anti-racism resources at the time, but following the incident sought advice from the university's Race Equality team. The team reassured the staff member that the most important action in this situation was to make space for discussion in a safe environment, build student confidence in speaking up, and ensure that students know that everyone should feel safe in their workspace. The team also stressed that there is never a "one size fits all" answer, and that individuals can make choices about how to respond. This may differ day to day depending on context. Within these discussions, staff also talked about balancing duty of care and speaking up, tackling racism head on, the issue of indicating agreement if someone does not speak up, self-compassion when someone does not speak up, individuality in approaches, seeking support, and taking a team approach.</p>

## Appendix 1 – Case studies continued

<p><b>The initiative: What did you do to address this issue?</b> <i>Continued</i></p>	<p><b>Practice Educator training</b></p> <p>As a pre-session training requirement, staff asked Practice Educators to watch four videos about anti-racism hosted by the professional body. Staff were also directed to the longer <a href="#">anti-racism programme of learning</a> from RCSLT. It was explained that any experiences of racism on placement must be discussed and actioned where necessary. Practice Educators were asked to discuss their own approach to anti-racism and placements in their departments, encouraging them to share processes in their own workplaces with all students early in their placement and let them know how to raise concerns or seek support. Staff shared a Google document for attendees to share experiences and made space for discussion within the live session.</p>
<p><b>The future: What impact has this made and how will it continue in the future?</b></p>	<p><b><i>“A dynamic approach that anticipates these awful behaviours is good to have in place. Obviously we hope that racism is being reduced in society so that these incidents happen much less often, but being ready to deal with them is necessary.”</i></b></p> <p><b>Racism scenario</b></p> <p>Staff have facilitated discussions of this scenario three times so far, and have realised that the knowledge actually lies within the student group. Many students opened up about their own experiences (or those of peers) and ways in which Practice Educators had supported them on placement. This revealed how widespread student experiences of racism in SLT are and how infrequently students were raising this.</p> <p>Staff are aware that there is a need to engage students in scenario-based discussion from the outset of the course. Staff plan to integrate this in placement preparation much earlier and thread this through the programme. The Race Equality team suggested developing scenarios covering a few different levels of racist behaviours and different responses that a healthcare team and/or student could take. Within workshops the group can co-create simple plans to cover these issues, proactively considering different levels of support for different levels of incidents. Thinking through responses in advance of what will be an extremely stressful situation increases the likelihood they can respond when an incident of racism occurs in their healthcare environment. Online mandatory training which explores such scenarios would be ideal, but providing opportunities to talk in person are important too. This means staff continue to learn from students, and them from each other. As the Equality Team advised, “a dynamic approach that anticipates these awful behaviours is good to have in place. Obviously we hope that racism is being reduced in society so that these incidents happen much less often, but being ready to deal with them is necessary.”</p> <p><b>Practice Educator training</b></p> <p>The pre-session anti-racism training is now a core part of the Practice Educator training. However, the university needs to develop a more structured approach to expanding this learning within the live session, as they were not able to generate and real discussion of Practice Educator experiences. This may largely have been due to the lack of structure provided for this. It may be that attending Practice Educators did not have relevant experiences to discuss, but staff may also have expected too much of Practice Educators in initiating discussion in this area. It seems important to create a non-judgmental space for discussion in an intentional way, explicitly stating what might feel challenging at the outset. Use of specific scenarios may aid discussion enabling PEs to problem solve and share expertise.</p>

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## Resources

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[Combatting racial discrimination against minority ethnic nurses, midwives and nursing associates](#)

[Step to Work – Health Education England](#)

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