

Equality, Diversity and Inclusion in OH leadership

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Why is diverse leadership important in healthcare and OH?

EDI -
healthcare/NHS

EDI - patients

EDI - OH

EDI - workers

Discrimination in Healthcare - Patients

- ▶ In healthcare (NHS) - Francis Report (2013) - inquiry following events Mid-Staffordshire NHS
 - People with disabilities - struggle to access appropriate care and support - less favourable health outcomes.
 - Disabled NHS employees experience difficulties accessing the support they need. 15% did not feel employer had made adequate adjustments.
 - Gender - stigma around certain illnesses impacts the likelihood of women accessing services.
 - NHS - 78% female 22% men. Smaller number of women at a senior leadership level compared to male across both the NHS and the civil service

Discrimination in Healthcare - Patients

- Some groups have higher levels of ill health - S. Asians Diabetes, Afro-Caribbean - 3x risk mental health. Increased dissatisfaction with mental health services Cf white population.
- Other groups like gypsies, asylum seekers, refugees - v. low levels of health/wellbeing. Experience overt prejudice/rejection
- Main barriers - Communication/language
 - Lack of recognition of ethnic differences
 - Ignorance of problems facing communities
 - Dismissal of issues
 - Lack of confidence

Discrimination in Healthcare - Workers

- ▶ Gender discrimination
 - Casual sexism/lower pay/weaker recommendations (1)
- ▶ Disability discrimination
 - Less likely to feel part of supportive team /be supported by non-clin mx (2)
- ▶ Religious discrimination
 - Muslim Drs face more freq and serious levels of discrimination (3)
- ▶ Sexual orientation
 - LGB Drs face more abuse/discrimination due to sexual orientation (4)

1) B Beagan Micro inequities and everyday inequalities: 'race,' gender, sexuality and class in medical school
Can J Sociol, 26 (2001), pp. 583-610

2) <https://www.gmc-uk.org/about/what-we-do-and-why/data-and-research/the-state-of-medical-education-and-practice-in-the-uk>

3) Aasim I. Padela, Huda Adam, Maha Ahmad, Zahra Hosseinian & Farr Curlin (2015): Religious identity and workplace discrimination: A national survey of American Muslim physicians, AJOB Empirical Bioethics, DOI: 10.1080/23294515.2015.1111271

4) The experience of lesbian, gay and bisexual doctors in the NHS - BMA report

Discrimination in Healthcare - Workers

- ▶ Kline report - Snowy white peaks (2014)
 - Poorer experiences in ethnic minority workers by every measure
 - - more often found in lower grades
 - - recruitment, promotion, awards, bonuses
 - - bullying and harassment
 - - referral for disciplinary action and/or to regulators
 - - under-represented at senior leadership level
- ▶ Ethnic minority workers - more likely to be in service/frontline roles
- ▶ Ethnic minority workers more likely to be in temp/insecure work

Leadership in healthcare

▶ NHS

- Recruitment process disproportionately favours white applicants
- Very significant gap between composition of boards and national bodies cf to workforce and rest of local population
- Little or no progress despite Race Equality Action Plan (2010)
- Now, WRES for trusts to monitor and report.
- 2020 WRES report - improvement in some areas (senior manager pay band, rep at board level)
- - no improvement in others (recruitment, bullying/harassment)

Leadership in OH

- ▶ OH - very little data to ascertain
 - ?variable practices
 - ?likely to be same or worse ?lack of monitoring, ?accountability
- ▶ SOM EDI taskforce and University of Glasgow
 - Funding research to investigate career experiences and progression of OH clinicians based on PCs. Focus of EDI

Why is diverse leadership important?

- ▶ Francis report (2013) - Correlation between discrimination of ethnic minorities in workplace and patient experience
- ▶ Kline (2014) - 'Robust evidence that diverse workforce linked to good patient care'
- ▶ Mckinsey Report (2020) - 'Robust business case' for diversity and organisational performance. The greater the representation, higher the likelihood of outperformance.
- ▶ HBR (2019) - teams with inclusive leaders - high performance, high quality decisions, behave collaboratively

What does an inclusive leader do?

- ▶ **Visible commitment:** authentic commitment to diversity, challenge the status quo, hold others accountable and make diversity and inclusion priority.
- ▶ **Humility:** modest about capabilities, admit mistakes, create the space for others to contribute.
- ▶ **Awareness of bias:** awareness of personal blind spots /flaws in the system work hard to ensure meritocracy.
- ▶ **Curiosity about others:** demonstrate an open mind-set and deep curiosity about others, listen without judgment, seek with empathy to understand those around them.
- ▶ **Cultural intelligence:** attentive to others' cultures and adapt as required.
- ▶ **Effective collaboration:** empower others, pay attention to diversity of thinking.

Inclusive leadership

- ▶ Seek feedback
- ▶ Be visible and vocal
- ▶ Deliberately seek out difference
- ▶ Check impact
- ▶ Become comfortable being challenged

Allyship in healthcare

- ▶ Be aware of own privilege
- ▶ Listen to different groups and their views
- ▶ Acknowledge and believe their experience
- ▶ Advocate/support others - reach out if needed
- ▶ Role model positive behaviours

Allyship in healthcare

- ▶ Be aware of own prejudices/conditioned thinking
- ▶ Educate yourself
- ▶ Avoid making assumptions
- ▶ Question stereotypes
- ▶ Speak up/challenge policies, practices, demeaning remarks/comments

The End

- ▶ Thank you or listening!
- ▶ Further Resources/Reading
 - NHS WRES report 2020
 - NHS WDES standard
 - Race at Work Charter - BITC
 - Inclusion and diversity in the workplace - CIPD
 - MHFA - My Whole Self campaign