Race Equality, Hope and Momentum in Challenging Times

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July 2026

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ABOUT ME

Strategist. Leader. System-Changer.

I am a strategic advisor and board-level leader with a recognised voice on inclusive system change. I help organisations navigate complexity, strengthen credibility, and deliver meaningful impact across health, public service, and civic systems.

My work spans strategy, governance, performance improvement, health inequalities, stakeholder involvement, social value, personalisation, carer support, and equality, diversity and inclusion— with particular recognition for embedding inclusion as a core driver of better outcomes and stronger public trust.

Board & Non-Executive Roles

Non-Executive Director, **Sheffield Children's Hospital** · Chair, **Sheffield Race Equality Partnership** · **NHS Assembly** · **The King's Fund** General Council

Public Voice & Thought Leadership

Established podcaster and blogger on authentic leadership, inclusion, public and carer involvement, and reducing inequalities across health and civic systems.

Strategic judgement. Values-led leadership. System influence.

Race Equality, Hope and Momentum in Challenging Times

Race equality work is often described as difficult. But for many colleagues, the difficult part is not talking about racism **the difficult part is living with it, working through it, and still being expected to perform as though it has no impact.**

We are not here to rehearse familiar words. We are here to ask a harder question: *How do we maintain focus and momentum on race equality in challenging times?*

This Is Not Abstract

For some colleagues, these issues are not news items. They are lived experience.

The Muslim colleague

Coming to work after seeing their community demonised in public debate.

The Black colleague

Carrying the exhaustion of repeated racism before the shift even begins.

The international recruit

Wondering whether they are truly welcome; not just needed to fill a vacancy.

The staff network chair

Expected to offer insight and emotional labour without the time, power or resource to influence change.

What the Evidence Tells Us

WRES: A Decade of Insight

Race inequality is not historic; it is current. It shows up in recruitment, career progression, disciplinary processes, bullying, harassment and leadership representation.

NHS Race and Health Observatory

We cannot rely on assumption, good intentions or generic training alone. We need evidence, data, engagement and interventions designed to tackle *specific* inequalities — and we must evaluate whether they work.

Lord Mann's Review

Asks whether racism is identified, reported and acted on and whether leadership is truly accountable.

Unapologetically Anti-Racist

> The NHS North West Race Equity Assembly has set out the need for the NHS in this region to be **unapologetically anti-racist.**

That phrase matters. It means not being vague. It means not being neutral in the face of racism. It means not treating race equality as an annual report. It means not expecting minority ethnic staff to carry the burden of change alone.

It means moving from **"we value diversity"** to **"we will identify and dismantle racism where it exists."**

Race Equality Matters More Under Pressure

There can be a temptation in difficult times to say: *"We will come back to race equality when things settle down."* But race equality matters more under pressure, not less.

Pressure reveals culture

Who is heard. Who is protected. Who gets the benefit of the doubt.

Part of performance

Race equality is part of safety, retention, trust, productivity and patient care.

Racism does not pause

When race equality loses focus, the harm continues. A workforce that feels unsafe cannot carry the system indefinitely.

The North West Context

The North West is not one story. It is a region of major cities, towns, coastal communities, rural areas and highly diverse populations — long-established Black, Asian and minority ethnic communities, international recruits, faith communities, refugee and asylum-seeking communities.

Staff do not leave the outside world outside when they come through the door. Fear comes in. Anger comes in. Exhaustion comes in. Grief comes in. Vigilance comes in. And patients bring those realities too.

Race equality in the North West must be understood as a **workforce issue, a patient safety issue, a community trust issue and a leadership issue.**

From Awareness to Insight

The problem is not always lack of awareness. The problem is that awareness does not always become insight, and insight does not always become action.

1

Awareness

"Race inequality exists."

2

Insight

"This is how it shows up *here* — in shortlisting, in discipline, in who thrives."

3

Action

"What has changed because of our data? Does our network have real influence?"

Not: *"Are we diverse?"* But: **"Is opportunity fair?"** Not: *"Do we condemn racism?"* But: **"Do staff trust us when racism happens?"**

From Insight to Anti-Racist Action

The test of any conference, strategy or speech is not whether people nod today. It is whether anything changes tomorrow.

Recruitment & Progression

Panels structured, trained and accountable for outcomes. WRES data discussed as operational intelligence, not filed as compliance.

Leadership Accountability

Senior leaders meeting staff networks with decision-making power, not just goodwill. Disciplinary data reviewed for race disparities.

International Recruits

Proper pastoral support, not just induction slides. Staff told clearly: *"If you experience racism, we will act."*

Responding to "What About Other People?"

Health inequality is complex. Poverty, disability, age, gender, geography, faith and class all shape health outcomes. We must take all of these seriously.

> **"A fair health system has to be capable of holding more than one truth at the same time."**

We can tackle poverty *and* racism. We can address disability discrimination *and* ethnic inequality. Anti-racism is not a competition between communities. It is saying that racism is a specific driver of avoidable harm — and unless we name it, measure it and act on it, we will continue to reproduce it.

The danger comes when **"what about other people?"** is used to stop the conversation rather than deepen it. Naming racism is not discrimination against anyone else.

From Policy to Priority and Personalisation

Policy is not real because it exists

It is real when it works. A race equality policy is real when minority ethnic staff can see fair progression. A speaking up process is real when people trust it. A leadership commitment is real when it survives pressure.

Personalisation matters

The experience of a Black African nurse may not be the same as a British-born Pakistani doctor. Race intersects with gender, class, disability, religion, migration status, accent, role and geography.

We must ask more precise questions: *Who is least likely to progress? Who is most likely to enter formal disciplinary processes? Who is leaving? Who is staying but exhausted?*

Helping People Keep Going When They Are Tired

Race equality work can be exhausting — for staff who experience racism, for staff networks, for leaders trying to make progress. The lesson from high-pressure environments is not heroic endurance. **People keep going when support is structured, leadership is clear, teams are cohesive and recovery is planned.**

Recognise

Signs of racial fatigue, fear and disengagement. Do not wait for a formal complaint.

Respond

Early after racist incidents or cumulative stress. Check in, record, support and escalate.

Recover

Create space for decompression, peer support and rest. Recovery protects people and services.

Reconnect

People to team, purpose and shared values. Isolation is corrosive. Connection sustains hope.

Resource

Give staff networks, managers and teams the time, training and authority to act.

Culture, Hope and Purpose

> **"Hope is not passive optimism. Hope is not asking people who experience racism to wait quietly. Hope is created when people see progress."**

Hope is created when a concern is raised and acted on. When a manager challenges racism in the moment. When a recruitment process changes and outcomes improve. When a board asks hard questions and follows through.

Hope has to be organised. Hope needs data. Hope needs systems. Hope needs leadership. Hope needs accountability. Hope needs courage. Hope needs follow-through. Otherwise hope becomes rhetoric.

A Moment of Reflection

> Think of one colleague who may be carrying more than they say. Someone who keeps showing up. Someone who may be tired. Someone who may have experienced racism or exclusion. Someone who may have stopped speaking because they do not believe anything will change.

Ask yourself: What is one thing within my influence that could make their working life safer, fairer or more hopeful?

That is where race equality becomes practical. Not in the abstract. Not in a strategy document. But in the next decision, the next conversation, the next response to harm.

What Staff at All Levels Can Do

Boards & Senior Leaders

Treat race equality data as core performance intelligence. Resource the work. Be visible when racism occurs. Do not delegate race equality to those with the least power to change the system.

Managers

Know your staff. Challenge racism early. Make development opportunities transparent. Take patient racism seriously. Create team spaces where staff can speak honestly without fear.

Teams & Individuals

Notice who speaks. Notice whose ideas are credited. Challenge exclusion respectfully. Do not leave race equality to the person most affected by racism. **No one can do everything. But everyone can do something.**

Closing Challenge

> **"Race equality will not be delivered by aspiration alone. It will be delivered by courageous leadership, honest data, trusted systems, inclusive teams, fair opportunity and everyday action."**

Before you leave today, identify three things: **one action you will take personally, one conversation you need to have in your team, one accountability you will follow up in 30 days.**

I am seen.

I am safe.

I am valued.

I have a voice.

And when racism happens, I know this organisation will act.

Get in Touch

I'd be delighted to connect, collaborate, or continue the conversation. Please feel free to reach out through any of the channels below.

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