Leeds DClinPsych Anti-racism positioning, objectives & initiatives



Let's talk language!

There is often confusion and discomfort about the language used to describe groups of people, particularly when it comes to race. Sometimes not knowing the right language to use can become overwhelming and make us feel paralysed and stuck. We mustn't let this be a distraction to us.

'BAME/BME' – 'Ethnic Minorities' – 'BIPOC' – 'People of Colour' (POC) – 'Non-White' are all common phrases. These are problematic because they cluster large groups of people into homogenous groups, and centre Whiteness. The term 'POC' centres a particular history of racial oppression within America, so it is less relatable to the majority of the world's population.

The language we are currently using at Leeds include: People of the Global Majority (PoGM) and people who are racially minoritized

These terms acknowledge that White skin is a minority compared to the global population and recognise than minoritisation is a social process 'done to' groups of people who may not hold as much power.

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What is race?



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Race is a **false classification of people** that is not based on any real or
accurate biological or scientific truth. In
other words, the distinction we make
between races, has nothing to do with
scientific truth.

The concept of race was created as a classification of human beings with the purpose of giving power to White people and to legitimise the dominance of White people over other people.

Race is a political construction. A political construction is something created by people; that is not a natural development; is constructed or created for a political purpose.

Whilst race may not be real, race clearly has some very real and powerful consequences (such as the effects of racism).



Definitions of Racism

Racism is the belief that race is the primary determinant of human traits and capacities and that racial differences produce an inherent superiority of a particular race (Merriam Webster, 2020).

Racism is the process by which systems and policies, actions and attitudes create inequitable opportunities and outcomes for people based on race. It is more than just prejudice in thought or action. It occurs when this prejudice – whether individual or institutional – is accompanied by the power to discriminate against, oppress or limit the rights of others.





PoGM may not speak English as their first language or may have limited English or language skills. On top of this, systems may have barriers which make it harder to access services or get equitable outcomes and treatment.

A person of the global majority is more likely to have gone to a school in a deprived area with poorer exam results and likely to have gone to a less well resourced university or accessed low paid jobs, making access and understanding of services harder.



PoGM are more likely to have had poorer support in education, healthcare and from support services, yet they may be more likely to be sentenced for crime, admitted to psychiatric hospitals – deemed as "unsafe" and experience micro-aggressions.

Systems and individuals allow and perpetuate racism which can continue to disadvantage and disempower certain groups so it is important to think about all these factors when supporting a diverse range of service users.



Race is a Protected Characteristic

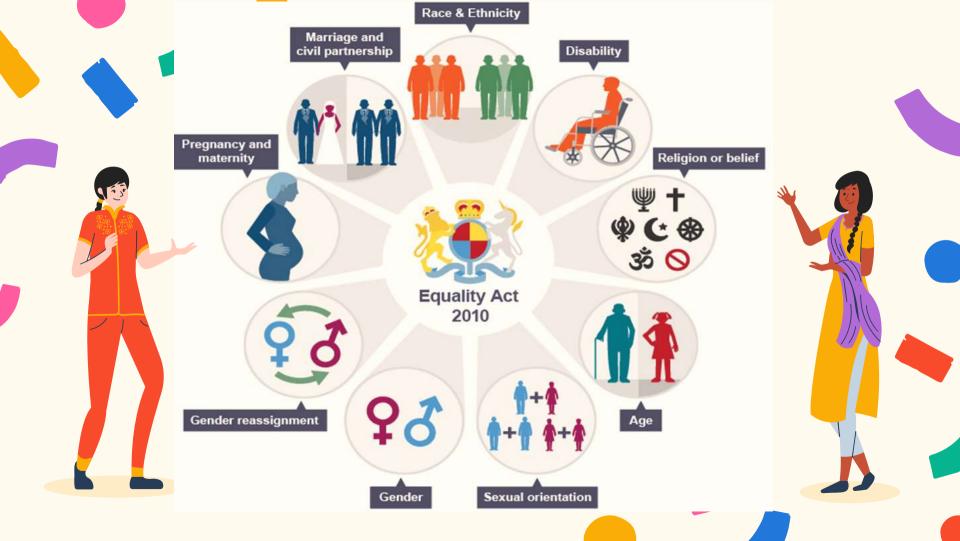
Alongside other parts of our identity, it is important to know that race is one of our 9 protected characteristics as defined by the Equality Act (2010).

It is against the law to discriminate against people based on these protected characteristics.

The Equality Act (2010) provides the legal framework to tackle disadvantage and discrimination.

In line with this, the UOL aims to combat racism on all levels and has developed strategies and initiatives to do so.

Please see next slide for all 9 protected characteristics



What is Anti-racism?

- To understand the term 'anti-racism' or 'anti-racist' it is important to know that this concept is different from being 'not-racist'.
- When individuals and institutions claim to be "not-racist", this creates
 distance from the problem without any active effort to address it. It leads to
 a failure in acknowledging how systems can be flawed, biased and
 oppressive against PoGM and results in the maintenance of the status quo.
- Anti-racism involves actively, consciously and deliberately challenging and working towards changing beliefs, norms, values, behaviours and policies which perpetuate racist ideologies and racial inequality.



Positioning

As part of our anti-racism work across the UoL DClinPsych programme, we are making a conscious effort to understand and dismantle the unconscious biases we hold individually and on the programme.

We are also working to recognise the deep rooted structural, social and systematic issues which continue to perpetuate racism. While we are working to tackle these barriers, we recognise there is still work to be done to help maintain and sustain change.

Our work in addressing racism and improve racial equity is summarised in our 7 key objectives. You can find our executive summary, position statement and further anti-racism information/resources on our extranet EDI page.

UoL 7 Objectives & Action Plans

In line with the Health Education England (HEE) objectives, at UoL we have developed 7 objectives to guide our anti-racism work and improve equality, diversity and inclusion on the programme.

Objective 1: Leadership and Programme Commitment

Addressing racism and inequality is a societal, moral, academic and business issue. It affects how systems operate including our programme.

We don't believe hiding from racism is an option. We are committed to shining a light on racism and confronting it when we see it in ourselves, our team, our programme and our profession.

Objective 1: Leadership & Programme Commitment

What we have done and what we are still doing (October 2022):

- Having representation of senior managers at all meetings, discussions, conferences & training about race to ensure the importance of antiracism work remains on our agenda and senior leaders are visible.
- All staff have attended a 3-day bespoke workshop and additional space was also created at the recent staff away-day to think about antiracism and bias.
- A Leeds position statement, EDI webpage and selection of resources have been designed, developed and uploaded to our extranet site.

- Model to staff and trainees the importance of antiracism within all aspects of what we do rather than deferring to the EDI/anti-racism team.
- We are committed to allocating funding and resources for things that increase likelihood of success e.g. speakers at open day, supervision, outreach schemes etc.
- We are committed to keeping the anti-racism roles as a key part of our programme.
- Representation of senior management at all key events e.g. Inclusion group, staff training, open days etc.



An ability to discuss racism and ethnic discrimination, at both an individual and systemic level, is important to anti-racism and should therefore be treated as a meta-competency for all course staff, supervisors and trainees

We recognise the need to do something different and this requires dedicated, conscious and deliberate action. This starts in increased awareness, knowledge and training. We commit to ensuring awareness of race, ethnicity, racism and discrimination are robustly explored.

Objective 2: Knowledge and Training

What we have done and what we are still doing (October 2022):

- Shortlisting information developed and training session on bias delivered to encourage people to reflect on implicit biases when interviewing and understand the challenges of people from disenfranchised communities interviewing with a not always diverse panel.
- We have developed a suggested cultural humility competency to embed into the existing placement assessment form. We are currently consulting with staff and trainees on 3 potential options.
- EDI/anti-racism lead regularly being consulted upon for lecture session support.

- Protected 1 day per year anti-racism training for every year group.
- Staff to identify how to keep anti-racism on team agenda.
- Advanced supervisor workshop planned for 19th
 April 2023 to explore cultural humility to support placement supervisors.
- Reverse mentoring scheme pilot has been developed. This will be a paid role in which experts by experience from marginalised communities will mentor trainees for 6 months.

Objective 3: Curriculum Review

- We recognise that the current psychological curriculum is Eurocentric and typical focussed on Western values, norms and expectations without appreciation of other ways of thinking.
- We recognise that there are inequalities in terms of service user access to therapies in the community. Service users from marginalised communities continue to be labelled as "hard to reach" without recognition that services and interventions can be irrelevant and unsafe.
- We recognise it is not possible to completely 'decolonise' our curriculum. We plan to situate the histories and knowledge that do not originate from the West in the context of imperialism, colonialism and power and consider why these have been marginalised.
- We plan to systematically review what we teach, how we learn and identify voices which go unheard or often become de-centered.

Objective 3: Curriculum Review

What we have done and what we are still doing (October 2022):

- Audit of slides underway against 5 benchmarking questions (e.g. including cultural differences in teaching, accounting of background, author, context of theory or model).
- Written guidance for contextualising teaching has been developed (e.g. what the curriculum currently includes and what to think about next (e.g. in CBT sessions etc.)
- SEP ongoing service evaluation to understand trainees and staff experiences of the curriculum in relation to anti-racism.

- Workshops to be designed for lecturers and module leads to drop in to and think about the curriculum - re: adapting session material.
- Complete an annual audit and review of slides and provide feedback/consultation.
- To develop anti-racism specific guidance in module handbooks and within academic coursework guidelines.

Objective 4: Everyone feels Safe & Supported

- Unfortunately it is documented that many trainees from racially minoritised backgrounds don't feel safe whilst training and may experience racism and micro-aggressions.
- Whilst we recognise at times this may be due to ignorance rather than malice we do not think this is acceptable and strive for all trainees and staff to feel safe, supported and comfortable regardless of their identity.
- We plan to achieve a varied support programme for racially minoritised trainees. We believe this should be co-produced and driven by the needs and requests of trainees.
- There will also be a variety of formal and informal routes for raising complaints of racism and ethnic discrimination that are embedded in course policy and procedures.

Objective 4: Everyone feels Safe and Supported

What we have done and what we are still doing (October 2022):

- Support groups offered. Trainees have provided feedback on how they think it could run next year.
- Draft reporting system and flowchart developed to raise concerns about discriminatory language and who people can speak to regarding concerns about racism or discrimination.
- A booklet including resources, support and networks on different aspects of intersectional identities has been sent out to welcome trainees.
- Co-created safe spaces, which will be externally facilitated, for minoritised trainees as required.

- Mid October invite all trainees who identify as being from minoritised backgrounds to participate in discussion group about launching the safe spaces.
- Further develop the reporting system for the recording of concerns and actions taken.
- In collaboration with Sheffield and Hull a feedback survey has been developed to explore whether trainee's identity is having a negative impact on their experiences on the DClinPsych.

Objective 5: Outreach













- Statistics demonstrate year on year applicants from racially marginalised communities are less likely to be selected (although work is being done to change this).
- White British applicants have a 1 in 5 chance of being shortlisted for an interview compared to 1 in 13 of racially minoritised applicants (Clearing House, 2017).
- We recognise that there are barriers at all levels so we plan to provide additional resources, opportunities and clinicians to address some of the barriers that people from minioritised communities face.
- You can also read more about contextual admissions and positive action on the Leeds Clearing House website.

Objective 5: Outreach

What we have done and what we are still doing (October 2022):

- YAHMS (Yorkshire And Humber Mentoring Scheme) running with 29 mentees currently receiving support (and relaunching in January).
- YAHMS open day with guest speaker providing a talk on her experiences as a Black woman in psychology and teaching critical thinking and reflection skills.
- Developing links with local schools, sixth forms and colleges by building network, providing resource (a quick guide into clinical psychology booklet) and developing workshops to promote clinical psychology as a career options early on.
- Trainee mentoring scheme pilot delivering 4 workshops to undergraduate students across local universities.

- Implementing positive action at interview stage if an applicant declares they are racially minoritised and tie with another applicant.
- Considering a DClinPsych application workshop next year and currently consulting with trainees to develop an interview preparation workshop.
- Developing resources to share and discuss what clinical psychology is/answer FAQs.
- Closer liaison with local schools, colleges, sixth forms to raise the profile of clinical psychology and relevant mentoring schemes.

Objective 6: Collaboration and Feedback

- We believe listening is an action with the purpose of understanding what another person is telling us.
- We recognise that we may have overlooked opportunities to develop for the better in the past and want to move forward purposefully, listening to the feedback of people who know more than us who experience racism to help us do better.
- We recognise the risk of White savourism and also the problems with White blindness. For this reason we want to work in collaboration with others to develop our programme so that anti-racism and anti-oppressive practice is truly fundamental to all that we do.
- We commit to be transparent in all that we do. This
 includes gathering feedback and publishing it openly.
 We will ensure that we hear from all stakeholders about
 their experiences.



Objective 6: Collaboration and Feedback

What we have done and what we are still doing (October 2022):

- Prioritising and maintaining the Everybody's Voice & Inclusion group to work collaboratively with people who have lived experience.
- Consultation with Everybody's Voice, the Inclusion group, trainees, supervisors and course staff regarding the development of cultural humility competency which is vital to competency development.
- Above framework out for consultation.
- Networking database developed with contacts of local charities, universities, organisations, interested parties, stakeholders etc. so that we have easy communication with relevant people.

- Develope a survey for trainees to understand the impact of identity on experiences of training. This needs to be sent out and the feedback to be collated and analysed to see what areas can be improved.
- Planned study to capture clinicians experiences, confidence and competence in working using a clear anti-racist stance.
- Working on a service evaluation project to evaluate the effectiveness of the YAMHS mentoring scheme.

Objective 7: Sustainability

- We recognise that we are seeking to overcome decades of injustice, Eurocentric teaching and challenge systems which are maintained by Western ideals.
- We recognise that in order to make meaningful change we must ensure that the changes we
 make are sustainable. We commit to holding ourselves accountable to do better and
 continuing to strive towards our goal of racial equity.
- We also recognise that we are at the start of our journey but have every intention of continuing to strive for racial justice and quality.
- For every initiative we will consider how we can evaluate effectiveness and ensure the ongoing implementation of anti-racism interventions.

Objective 7: Sustainability

What we have done and what we are still doing (October 2022):

- Protected funding for anti-racism team (lead and project support officer) which has been written into tender.
- Recording and reporting of demographics on the DClinPsy to explore whether there is an improvement in terms of diversity and racially minortised applicants getting through selection each year.
- Development of a 'calendar of anti-racism' to capture all initiatives and interventions that are ongoing so that they can be repeated each year.
- Audit teaching slides so that we have a baseline.

- Evaluation of mentoring scheme is in development. One idea is for a qualitative study to run alongside a quantitative study.
- Produce a report on staff feedback of 3 day training and requests for next steps.
- Identify ways in which anti-racism can remain on the agenda and then action these ideas to ensure both trainees and the team are considering and implementing anti-racist practice across all aspects of the course.





Thinking about anti-racism in practice



Calling in V Calling out

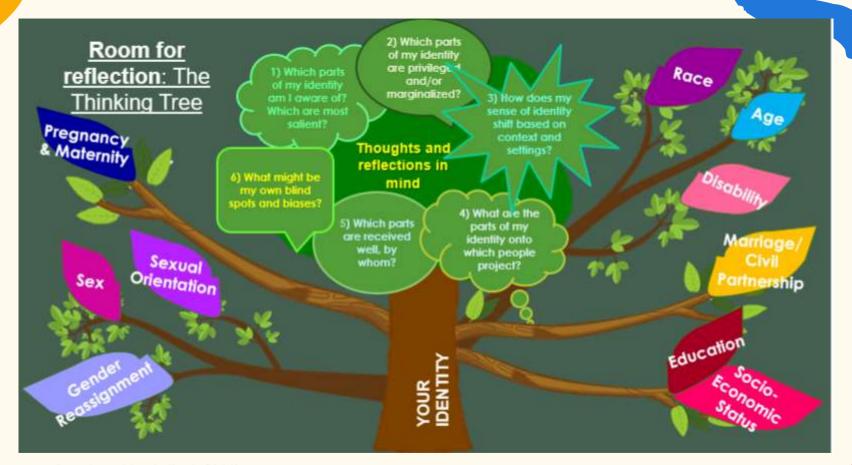
Calling Out:

- When we need to let someone know that their words or actions are unacceptable
- When we need to interrupt in order to prevent further harm
- Will likely feel hard and uncomfortable, but necessary

Calling In:

- When there is an opportunity to explore deeper and make meaning together
- When we are seeking to understand or learn more
- When we want to help imagine different perspectives, possibilities, or outcomes

- Focused on reflection, not reaction
- Consider: How might we call out the behaviour, while calling in the person?





Please contact Tansy Warrilow, EDI/Anti-racism lead if you have any questions:

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