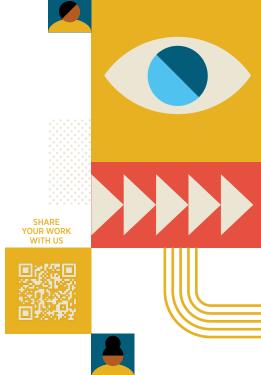


ANTI RACISM PRINCIPLES

Anti-racism is about more than pledges and good intentions.

To meaningfully combat racism in healthcare, we need to think about tangible actions. This series of briefings highlights concrete steps that healthcare providers can take to ensure that their services work for everyone, regardless of the colour of their skin.





APPLYING A RAGE-GRITIGAL LENS



Applying a race-critical lens means systematically examining interventions, including innovative treatment and service improvements, to mitigate how they might perpetuate or exacerbate ethnic and racial health inequities. This approach challenges organisations to move beyond surface-level approaches and promotes a deeper examination of structural or embedded biases. Unlike Principle 5, this is not about reviewing existing policies and processes, but about putting mechanisms in place to ensure that any new intervention is properly assessed for its potential impact on racially minoritised communities.

At its core, applying a race-critical lens requires asking fundamental questions about representation and equity.



Without the application of a race-critical lens, regardless of intention, interventions have the potential to worsen ethnic and racial health inequities. Over time, and through the prolific implementation of unconsidered innovations and improvements, can worsen ethnic and racial inequity in access, experience, and outcomes. Without accounting for their needs, the healthcare system risks excluding racially minoritised communities from innovative care, entrenching driving factors such as digital exclusion, language barriers, and a lack of trust.



The impact of not adopting a race-critical lens has been seen countless times, with one such example being the use of pulse oximeters. The NHS Race and Health Observatory (NHS RHO) identified evidence pointing to the inequitable functioning of these devices, which shine a light through a person's skin to measure the amount of oxygen in their blood. The evidence indicated that the readings could be different depending on a person's skin colour.

At the time, these devices were being rolled out rapidly as part of the NHS response to the COVID-19 pandemic, with patients being asked to take their own readings at home. While there was an urgency to this, the failure to do a substantive equality impact assessment could have put lives at risk. Such examples of not adopting a race-critical lens demonstrate how new approaches to care can inadvertently cause greater inequity, improving access and outcomes for some, while further raising the barrier for others.



There are steps that everyone in the system can take to apply a race critical lens to their work:

- If you're a commissioner, carefully assess the evidence base behind any
 new innovation or technology to understand the potential impact it could
 have on racially minoritised communities. For example, whether the AI
 or machine learning training datasets represent the full diversity of local
 patient demographics. You must also consider the inherent bias within
 those developing the innovations, and how such bias could be further
 embedded and mitigated.
- If you're a **provider** procuring or developing innovative interventions, you should embed equity considerations into your requirements and evaluation criteria. This includes requiring evidence of diverse community involvement in development processes, documentation of bias testing and mitigation strategies, and plans for ongoing monitoring of differential impacts across population groups. Community involvement could come in many forms, through focus groups and co-development, and should be present throughout the process.
- If you're a **provider** designing and delivering services, develop
 proactive mitigation strategies where inequities are identified, including
 implementing alternative access routes for communities who may face
 barriers to digital technologies and providing culturally appropriate and
 accessible communication and support materials.
- If you're a **practitioner**, take steps to collect specific ethnicity data around uptake and outcomes. It is through this monitoring that it becomes possible to evaluate any resulting inequity, including the creation of further barriers or differing outcomes across population groups.
- **Everyone** must commit to the effective use of Equality Impact Assessments when developing and implementing any innovation, technology, or new intervention.