

# Black and Minority Ethnic Staff: How to work within the constraints of a flawed system

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I am a Black and Minority Ethnic (BME) person who has had the privilege of working in the NHS on projects aimed at improving quality of care for patients and staff (1). I've witnessed first-hand the positive impact of empathetic dealings between senior and frontline staff, whilst acknowledging I've been on the receiving end of discriminatory behaviour too.



My experience informs the view that, regardless of whether or not racism is as endemic or institutionalised as many

people claim it is, I feel BME persons can and should take positive steps to help preserve their interests and aspirations in this system.

Whilst acknowledging the efforts of movements like Black Lives Matter, I often remind myself that system-wide cultural transformation is a lengthy process. BME people may well have to contend with a flawed system for a long time to come, so there isn't room for complacency.

How do we as BME persons begin to navigate and work within the constraints of the system presented before us?

*I think the first step is to realise that some of the power we think is solely in the hands of policy-makers is actually in our hands.*

It's about how we can harness that power to address the inequalities we see before us.

For example, conversations about remedying a lack of diversity in senior

teams usually centre around policy initiatives e.g. introducing targets and quotas for BME staff. However, there are steps you can take right here and right now as a BME person to increase diversity in your team.

I'd like to outline some important steps below with a disclaimer. I won't advocate for the Anglicisation of BME names to increase chances on a job application, nor for Anglicising accents to avoid social judgement from bigoted individuals. I feel it's possible for BME persons to progress within this system without having to dilute their unique identities.

- BME staff can help other BME persons in simple ways e.g.
  - (i) If you are a senior BME staff member who laments being surrounded by a white-only team, consider mentoring junior BME staff aspiring towards departmental leadership
  - (ii) If you are a BME team member noticing a lack of diversity, consider overseeing work experience in your department for other BME/under-represented groups. I oversaw work

experience programmes that increased the uptake of BME staff in my department.

- Report bullying, harassment or racist behaviour. If someone is displaying discriminatory behaviour towards you, the chances are they will also seek to harm other BME staff. Reporting such behaviour is the first step towards rooting out racism in your department.
- Reverse mentor a senior white leader and try to influence the change you want to see. My participation in a reverse mentoring programme helped me explore and shape my mentee's attitudes, behaviours and policies in relation to equality, diversity & inclusion. (2)
- Set up a networking group with other BME staff that seeks to

highlight and address the specific problems faced by the BME contingency in your department. You will have the courage to feed your recommendations to the senior management team.

- In a system that may be pitted against you, you have every motivation to work as hard as, if not harder, than everyone else to increase your chances of getting the internal promotion you deserve.

Parts of an entire system deemed as structurally or institutionally racist are guilty until proven innocent.

Whilst movements like Black Lives Matter take up the mantle of instilling societal change, BME persons need to do some of the groundwork at a local level.

This way, positive change can be elicited from the top-down and from the bottom-up simultaneously.

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#### References

- 1) Raza, A., Kovatch, V. (2018). Non-Clinical Compassion: the forgotten value. *Health Service Journal*. Available at: <https://www.hsj.co.uk/policy-and-regulation/non-clinical-compassion-the-forgotten-value/7023225.article>
- 2) Raza, A., Onyesoh, K. (2020). Reverse Mentoring for Senior NHS Leaders: a new type of relationship. *Future Healthcare Journal*. Available at: <https://www.rcpjournals.org/content/futurehosp/7/1/94>