

ADDRESSING ANTI-BLACK RACISM IN HEALTHCARE EVENT

Executive Summary
June 2025



Overview

The Centre for Research on Health Equity and Social Inclusion (CRHESI) convened diverse African, Caribbean, and Black (ACB) community members and healthcare stakeholders in London to gather input and co-create strategies for addressing anti-Black racism in healthcare. The event emphasized storytelling, dialogue, and participatory activities to surface lived experiences and actionable insights.

Community Input on Shaping Healthcare

Attendees shared rich insights into how they want to be involved in positively shaping healthcare systems and services in London. Their input emphasized the importance of representation, active participation, and ongoing engagement.



Preferred Forms of Engagement



Community members expressed a desire to:

- Serve on advisory committees and consultation networks
- Participate in surveys and needs assessments
- Mentor healthcare professionals and students
- Volunteer in healthcare settings
- Engage in community-based participatory research
- Receive regular updates via mailing lists and forums
- Be involved in training programs as facilitators and educators



Despite strong interest, several barriers hinder meaningful involvement:

- Lack of awareness about opportunities and unclear pathways to participation
- Time constraints and competing responsibilities
- Transportation, childcare, and language barriers
- Distrust stemming from previous negative experiences
- Uncertainty about the impact of their contributions

Recommendations for Organizations To foster inclusive engagement, organizations should:

- Improve transparency and clearly communicate the purpose and use of collected data and its governance (e.g., follow the [Engagement, Governance, Access, and Protection \(EGAP\) Framework](#)).
- Establish feedback loops that demonstrate how community input informs decisions
- Provide compensation for time and expertise

- Use culturally relevant communication channels (e.g., faith-based networks)
- Increase ACB representation in leadership and decision-making roles
- Offer culturally tailored health education and outreach
- Ensure consistent and visible presence in community events

Insights from the Patient Journey: Participants shared detailed accounts of their experiences across the healthcare continuum, revealing systemic gaps and opportunities for improvement.

Access and Initial Contact

- Many ACB individuals face challenges navigating the healthcare system due to limited health and digital literacy, language barriers, and transportation issues.
- Negative past experiences—such as being dismissed or disrespected—lead to hesitancy in seeking care.
- Trust in community-based sources often exceeds trust in institutional ones, it is important to consider these sources of strength when providing health care.
- Undocumented or uninsured individuals face heightened barriers due to fear of cost or immigration consequences.



Assessment and Diagnosis	Treatment Planning and Decision-Making	Follow-Up and Monitoring
• Implicit bias and stereotypes result in misdiagnoses or inadequate care, particularly in pain management and mental health. • Complex medical jargon and lack of cultural humility hinder effective communication. • Cultural norms, such as respect for elders or religious beliefs, must be acknowledged during assessments. • The presence of a trusted advocate or liaison should be welcomed to support patients.	• Treatment plans should be co-created with patients and families, integrating traditional healing practices where appropriate. • Clear communication about service coverage and options is essential. • Trauma- and violence-informed care must underpin all interactions, recognizing the systemic harm experienced by many ACB individuals. • Mental health support should be seamlessly integrated into care plans.	• Participants reported frustration with unanswered questions and lack of continuity in care. • Respecting cultural beliefs will influence outcomes and requires sensitive and sustained engagement. • Mechanisms for reporting discrimination must be accessible, transparent, and responsive.

Defining Healthcare Accountability: Participants articulated a vision of accountability rooted in respect, representation, and actionable change. Their input emphasized the need for culturally responsive care and structural reform.

Culturally Appropriate Patient-Centered Care	Community Representation in Healthcare	Community Engagement and Outreach	Collective Action and Accountability
• Provide safe, responsive, and respectful care, with clear data use and accessible reporting systems.	• Increase equity in hiring, mentorship, and credentialing to ensure diverse staff and leadership.	• Engage affected communities through targeted outreach, inclusive policy input, and open feedback	• Work with ACB communities through advisory networks, feedback systems, and action-oriented change.