



Anti-racist principles, guidance and toolkit

Act boldly

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If you would like to access this resource in an alternative format, please contact Wellcome's Culture, Equity, Diversity & Inclusion team at inclusion@wellcome.org or +44(0)20 7611 8888.

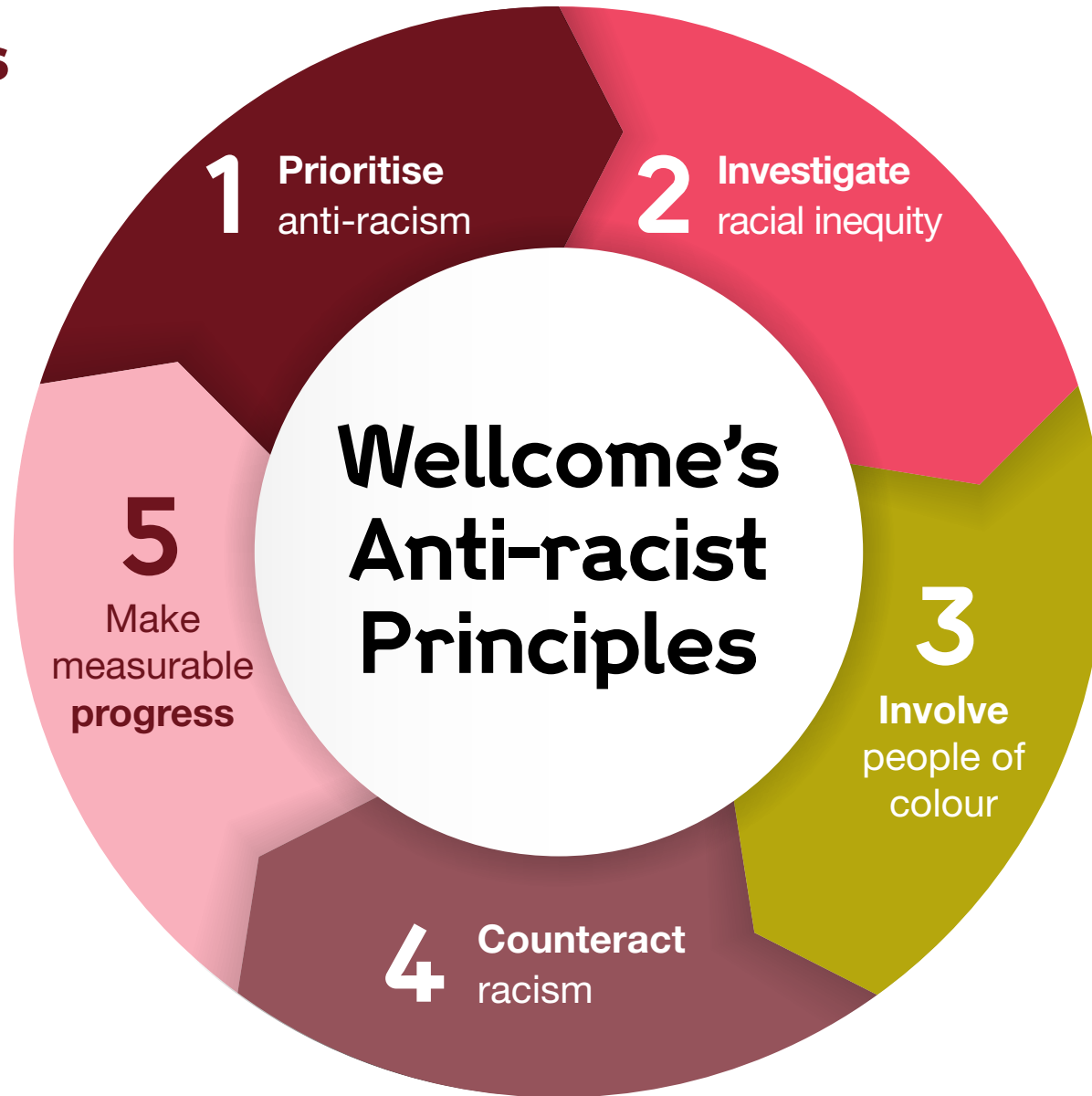
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How to be anti-racist at Wellcome

Principles

Principles



Principles

1

Prioritise anti-racism

Wellcome will no longer tolerate racism, and will work to ensure our actions and decisions do not sustain racial inequity.

Despite widespread intention among colleagues to combat racism, progress is not fast enough. Our data, our [Diversity, Equity and Inclusion strategy](#), and the Black Lives Matter movement have led to Wellcome's Executive Leadership Team (ELT) committing publicly to taking an anti-racist approach.

Wellcome has developed this resource to help us achieve racial equity in our organisation and work. This is not legal advice, it is a framework for how to be anti-racist at Wellcome.

If anti-racism work is unfamiliar and you aren't sure of the best way to change things, use these principles and the accompanying [TOOLKIT](#) to find out more, to act, and to learn from the things you try.

Anti-racism is not about replacing one form of inequity or unfairness with another. **Your actions in support of anti-racism at Wellcome will contribute to building a fairer society for everyone.** Our focus on anti-racism comes from recognising where we currently have the most work to do.

Culture change happens in different ways, from the accumulation of incremental improvements to large-scale, transformative initiatives. Whatever action you take, act boldly and put in time and resource to speed up progress towards racial equity.

2

Investigate racial inequity

Anti-racism is the active work to oppose racism and to produce racial equity – so that racial identity is no longer a factor in determining how anyone fares in life. Being anti-racist means supporting an anti-racist policy through your actions. An anti-racist policy is any measure that produces or sustains racial equity between racial groups.

This guide is primarily for people with leadership responsibilities at Wellcome, including the ELT, Senior Leadership Team, Board of Governors, and funding committee chairs. While everyone at Wellcome is responsible for anti-racism in their everyday work, those in power are accountable for meeting our [anti-racism commitments](#) and for following these **five anti-racist principles**.

3

Involve people of colour

4

Counteract racism

5

Make measurable progress

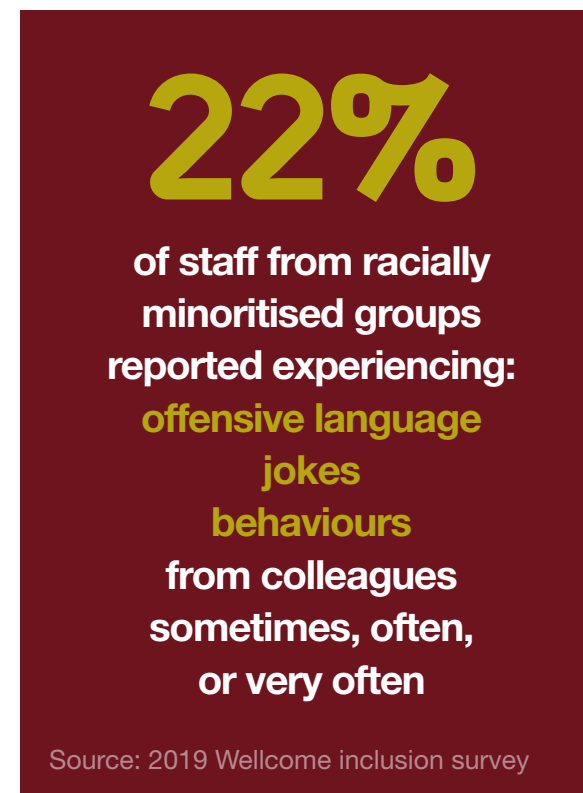
Wellcome's role

To take anti-racist action, we need to understand how racism has shaped all of us – particularly by unduly elevating the positions and perspectives of White people over those of people of colour. We know from our data that [we have persistent racial inequity at Wellcome](#) – people in racially minoritised groups face a number of additional barriers compared to White people.

Race is not a scientific category. False beliefs in some genetic or biological essence that defines all members of a racial category have been used throughout history to justify racism, and still exist today. It is the dominance of schemes that racially categorise people, and the actions these false distinctions have been used to support, that has made race and racism all too real in their impact on people's lives.

As a global organisation based in Europe with mostly White European staff, Wellcome has to understand our role, intentional or not, in producing and maintaining racial inequity. As the [ELT](#) and [Wellcome Collection](#) acknowledged in 2020, Wellcome has perpetuated racism as a funder, as an employer, and as a museum and library. Our founder, Henry Wellcome, owed much of his wealth and many items in his collection to colonialism, and our museum and library have enshrined racist systems of knowledge. Our organisation has also played a part in sustaining barriers to inclusive research, including by producing and sustaining racial inequity.

Now we must use our influence and power to remove those barriers, and to begin dismantling racist structures in our work and in society.



[FACT #1]

**Wellcome has
perpetuated racism,
and we need collective
action to counteract it**

[PRINCIPLE #1]

Prioritise anti-racism work by dedicating time and resource to it

Prioritising anti-racism at Wellcome will improve the experiences of people of colour as well as creating collective progress towards a fair society. It will make our work better and enable us to achieve Wellcome's vision.

Wellcome supports science to solve the urgent health challenges facing everyone. But health challenges affect some groups more than others, and racism – rather than race – is the main reason for health disparities between racial groups.

At the same time, far-reaching discoveries and equitable solutions for health challenges require the greatest diversity of people and ideas across science and research. We can achieve this only if research includes a broader range of perspectives – in particular, those of people most affected by the challenges we want to solve.

- You must prioritise anti-racism in the same way you prioritise other **mission-critical** work over non-essential activity. Anti-racism is not an add-on to existing projects – it is a critical part of the work, similar to budget and risk management.
- Factor in anti-racism work when allocating **resource** and setting **timelines**. The activity, time and resource necessary will depend on your context.
- **Make time** for anti-racism work. This may require stopping other activity or taking more time compared to previous projects that didn't factor in anti-racism.
 - **Example:**
the Corporate Affairs team led a project to improve Wellcome's communications to ensure they are anti-racist and anti-ableist. When Wellcome talks about global health issues that affect everyone, the way we talk must not exclude anyone.

Key questions:

How much time and resource have you and your team spent on anti-racism work in the last month?

How have you prioritised anti-racism work?

[FACT #2]

**Only outcomes,
not intent, demonstrate
whether actions and
policies are racist**

[PRINCIPLE #2]

Investigate where there is racial inequity in areas where you hold power

Racism at an individual level can range from overt hate crimes to less visible microaggressions – everyday interactions that communicate hostile, derogatory or negative insults. The same action can have different outcomes depending on the context and who is involved, and seemingly well-intentioned actions can unwittingly produce racial inequity.

At a structural level, racism involves one group having the power to carry out systematic discrimination through institutional policies and practices, and by shaping the cultural beliefs and values that support those racist policies and practices. Only outcomes, not intent, demonstrate whether actions and policies are racist.

Investigating racial inequity using external and internal data can help you understand where the issues are and target, monitor and evaluate your actions.

- You don't always need to collect new data – use the **information that's out there already**. The [TOOLKIT](#) has more sources and resources. For example:

- Black employees in the UK are more likely than other ethnic groups to experience discrimination that contributes to them not achieving their career expectations.
 - In 2019/20, Wellcome made no competitively assessed UK awards to applicants reporting their ethnicity as Black or Black British.
 - Racism in scientific practice can take many forms. For instance, many spirometers, used to diagnose and monitor respiratory illness, have a 'race correction' built into the software that controls for the false assumption that Black people have a lower lung capacity than White people.
 - [Racism in global health](#) is one of the reasons for health disparities between people in racially minoritised groups, who make up the global majority, compared to White people. For example, inequitable distribution of Covid-19 vaccines disproportionately impacts people of colour globally, and it also stops the world from ending the pandemic.
- As part of your standard monitoring and evaluation, **analyse by ethnic group** where relevant. Gather **qualitative evidence** to gain a deeper understanding of the experiences of different ethnic groups.
 - If your dataset is large enough, **disaggregate data**. Grouping people under the term BAME (Black, Asian and minority ethnic) can mask important differences between groups, such as the effects of anti-Blackness.
 - If you plan to collect data about race, be mindful of the history of colonial classification, the importance of confidentiality, and your reason for collecting data. Use existing [guidance](#) to do this work **sensitively and responsibly**.

Key questions:

What examples of racial inequity have you identified?

How are you tailoring your actions as a result?

[FACT #3]

**Anti-racism is not
just about changing
what we do, it is about
changing how we do it**

[PRINCIPLE #3]

Meaningfully involve people of colour in decisions

It is every person's responsibility to learn how to be anti-racist; it is not the responsibility of people of colour to teach others. But meaningful involvement of people of colour in decision making will ensure decisions are informed by insights into how racism operates, and this can help address the challenges different people face.

It can be emotionally difficult and draining for people of colour to share lived experiences of racism, particularly in a workplace context. Underrepresentation of people of colour at Wellcome, particularly at senior levels, makes meaningful involvement even more challenging. So, we need to ensure our current ways of making decisions do not exclude people of colour.

- Actively work to involve people of colour when seeking input for **any piece of work or procuring services**. This includes external advisers, consultants, freelancers, speakers, stakeholders to interview, external networks and members of funding committees.
 - For example, consider whether anything may prevent people of colour from wanting to be involved.

- Ensure your selection criteria do not perpetuate disadvantages – if you define experts as being at professorial level, that disadvantages Black women, who face more barriers to becoming professors.
- **Respect** other pressures on people's time – consider what people of colour will gain from being involved.
 - For example, if you are interested in input from staff through the [Wellcome Race Equity Network](#), consider whether your work supports its current priorities.
- Plan ahead **before making decisions** and consider whether potential actions could have a negative impact on any racially minoritised groups.
 - Traditional methods such as surveys and focus groups are useful, but meaningful involvement and co-creation may mean trialling new approaches that actively bring in different perspectives. This will increase the likelihood of reaching innovative and shared solutions.
- If a person of colour speaks up about their experience of racism, including if they say your behaviour was racist, listen to and centre the **choices and needs of that person** when deciding how to address the behaviour.
- Be humble. Listen with a **commitment to change** based on what someone is sharing, rather than listening in order to support predetermined decisions or to say you got someone's input.
- Respect that some individuals may be unwilling to share their personal experiences of racism and **find other ways** to involve people of colour in decisions.

Key questions:

How have you meaningfully and respectfully involved people of colour in your decision making?

What have you changed as a result?

[FACT #4]

**Achieving racial
equity requires
us to treat people
differently**

[PRINCIPLE #4]

Counteract racism by taking positive action or other targeted approaches to redress racial inequity

When racial equity is achieved, everyone can be treated equally. Until then, targeted approaches – including [positive action](#) – are required to undo the effects of racist policies that have caused racial inequities and unfairly disadvantage racially minoritised groups.

Our identities are complex and multifaceted, so addressing racism involves considering how it intersects with other forms of oppression. For example, Black women experience barriers linked to both their ethnicity and their gender, and disabled people of colour experience ableism as well as racism. Intersectionality offers a framework to explore differences within and between groups, taking account of historical and political contexts while maintaining awareness of racial inequalities.

Wellcome's focus on anti-racism is based on data that shows we need targeted action.

- Use Wellcome's [positive action guidance](#) to identify ways you can tackle racial inequity in your context.

- **Challenge whataboutery**, when someone responds to an accusation or difficult question by making a counter-accusation or raising a different issue. Do not be afraid to focus on specific groups when planning positive action.
- Use an **intersectional approach** by factoring in how racism intersects with other forms of oppression.
- Managers should be prepared to **take responsibility** for addressing racist comments or behaviour, bullying or harassment, and other incidents where an individual from a racially minoritised group feels uncomfortable.
- While it is not the responsibility of the individual to address these racist issues, you should speak to them about **their preferences** for how such instances are dealt with and how they would like to be supported.
 - The person responsible for addressing the racist behaviour would usually be the line manager. If the line manager is the one demonstrating racist behaviour, responsibility may pass to their manager.

Key questions:

What targeted, positive action have you taken in line with Wellcome's positive action guidance?

What other steps have you taken to redress racial inequity?

[FACT #5]

**Maintaining racial
inequity stops us
achieving our vision**

[PRINCIPLE #5]

Use your power to make measurable progress towards racial equity

Beyond moral and legal requirements to not be racist, maintaining racial inequity prevents us from achieving our vision of supporting science to solve the health challenges facing everyone, so risks of racial inequity must be managed.

As a leader at Wellcome, you hold **power** even if you don't feel powerful.

- Recognise where **you hold power** – this includes the ability to make decisions, set deadlines, allocate work, delegate, recruit and promote people, disagree or say no without fear of personal repercussions, and access others in power through networks.
- Use your power to ensure you, and those you are **accountable** for, make measurable progress towards racial equity.

- Set **stretching indicators of progress** towards racial equity each year. The key performance indicators (KPIs) should be tailored to your department or the area you are accountable for, and ambitious to ensure we rapidly counter the racial inequity at Wellcome. A combination of short-, medium- and long-term KPIs will allow for a comprehensive assessment of progress and can account for yearly fluctuations.
 - For example, a KPI could be halving the difference in funding success rates between White applicants and Black, Asian and minority ethnic applicants in a year.
- **Publish your progress** at least once a year, including any anti-racism KPIs you have not met. At an organisational level, publicly report on Wellcome's anti-racism progress in the Annual Report.

Key questions:

What are your indicators of progress towards racial equity?

What proportion of them have you successfully met?

How to be anti-racist at Wellcome

Toolkit

The resources in this toolkit can help you meet Wellcome's anti-racist principles.

To help measure your progress, you can use the anti-racism progress tracker on the next page.

This is just a starting point – there are so many anti-racism resources available, and different things will work well for different people. This toolkit includes the sources we drew on to create the principles as well as other resources you may find useful.

We will continue to update this toolkit over time with case studies and additional material.

Anti-racism progress tracker

Use this tracker to measure your progress towards meeting the anti-racist principles.

			I've shared my progress with:
1	Prioritise anti-racism work by dedicating time and resource to it.	How much time and resource have you and your team spent on anti-racism work in the last month? How have you prioritised anti-racism work?	
2	Investigate where there is racial inequity in areas where you hold power.	What examples of racial inequity have you identified? How are you tailoring your actions as a result?	
3	Meaningfully involve people of colour in decisions.	How have you meaningfully and respectfully involved people of colour in your decision making? What have you changed as a result?	
4	Counteract racism by taking positive action or other targeted approaches to redress racial inequity.	What targeted, positive action have you taken in line with Wellcome's positive action guidance ? What other steps have you taken to redress racial inequity?	
5	Use your power to make measurable progress towards racial equity.	What are your indicators of progress towards racial equity? What proportion of them have you successfully met?	

[TOOLKIT #1]

Prioritise anti-racism work by dedicating time and resource to it

CASE STUDY #1A

Our foundational work to prioritise anti-racism – looking inwards

Team: Mental Health Priority Area

Author: Cristina Doherty, Graduate Trainee

The Mental Health Priority Area started our anti-racism work by doing personal learning and utilising the recommended books and resources shared on Trustnet (Wellcome's staff intranet), online and amongst friends. We came together to share our reflections, looking inwards and thinking critically about the ways we as individuals or as a team contribute to the maintenance of the White supremacist system we operate in.

To facilitate continual education and reflection, we have a Teams channel for sharing resources such as articles, webinars and events. For example Mental Elf, a mental health research website, has been running an anti-racist mental

health web series which has included webinars such as '[Mental health research is racist, so what are we all going to do about it?](#)' We have committed to watching these webinars and dedicating team meetings to discuss the content and capture lessons to take forward in our work.

To prioritise anti-racism work we have also integrated time and space into our internal processes and systems. When we initiate projects, we have a kick-off meeting with an agenda checklist. Alongside roles, budgeting and other matters, we have a standing agenda item on diversity and inclusion (D&I). This is a time to discuss anything relating to our D&I efforts including our anti-racism work. For example, if our meeting is about planning a new commission, this space might be used to discuss our selection process, thinking about how the indicators commonly relied on to deem an application 'good' or the 'best science' might be reinforcing and rewarding beneficiaries of current structures.

These are the first small steps at the start of a bigger journey for us. In addition to integrating antiracist work into our internal processes we are also thinking about how we prioritise it through the research we fund. For our next workplace mental health commission, we are exploring including a specific focus on interventions to support people who experience inequalities within workplaces.

[TOOLKIT #1]

Prioritise anti-racism work by dedicating time and resource to it (continued)

CASE STUDY #1B

How to make our communications anti-ableist and anti-racist

Team: Corporate Affairs

Author: Melissa Paramasivan, Communications Manager

Ableism and racism exist in science, research, and at Wellcome. In response to Wellcome's commitment to [global ambitions and a strategy](#) that makes inclusion and equity non-negotiable in solutions to health challenges, the Corporate Affairs team are developing an inclusive communications playbook.

Designed for staff and partners responsible for communications (such as agencies and freelancers), the playbook sets out principles, red-lines, and examples of how to make content and the design process anti-ableist and anti-racist. We acknowledge we have biases and are working with [Brand by Me](#) and [This Ability](#), two agencies who specialise in anti-racism

brand strategies and anti-ableism in the creative industry respectively, to support us in delivering our inclusive mission. They have conducted an audit and review of our current communications, investigating inequity and areas where we can improve, and this will inform the playbook.

The playbook will be a practical 'how to' guide and we have dedicated time and resource to develop it. We meaningfully involved a wide range of internal and external stakeholders throughout this project, including people of colour and disabled people, through interviews, workshops and other methods. The playbook will be informed by these groups and tested by the team who will use it daily.

We have prioritised this piece of work to inform the upcoming brand campaign, which aims to reach new audiences who have different expectations to our current research-based audience. It is the perfect opportunity to use and test the playbook ahead of wider adoption across the department and by other teams.

The audit results and how they are framed to the team are key in shaping behaviours and how willingly the playbook will be used. We are carefully considering the messaging around the results and proposed ways of working, and past performances are not being measured against these new guidelines. We know that our communications are a product of sectors that are not inclusive, and this is an opportunity to recognise where we are and move forward.

Staff have so far shown overwhelming support for the project, with many suggesting ways to integrate new learnings into their work. The staff involved recognise that Wellcome has the power, privilege and responsibility to actively change conversations to create a healthier environment and better research.

[TOOLKIT #2]

Investigate where there is racial inequity in areas where you hold power

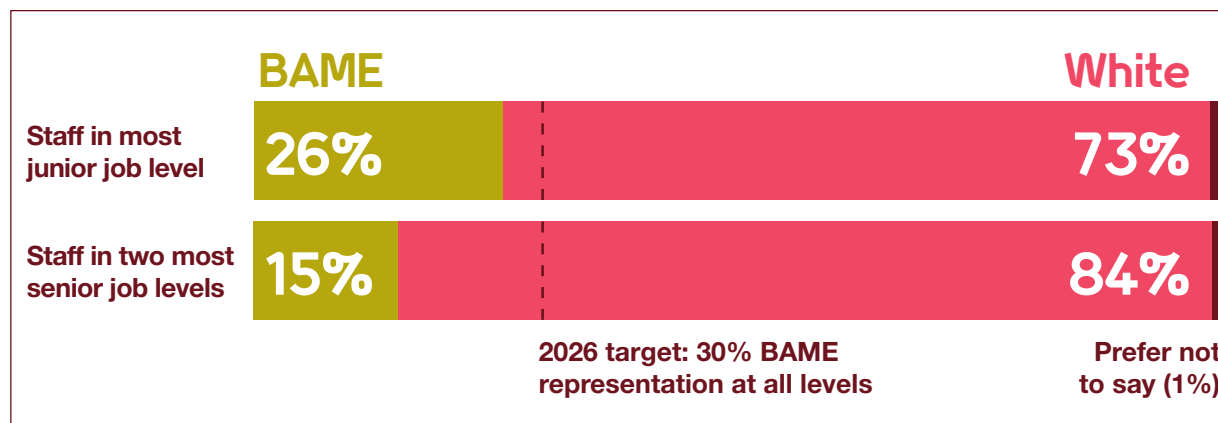
CASE STUDY #2

Evidence of racial inequity at Wellcome

Team: Culture, Equity, Diversity & Inclusion

We regularly analyse staff and funding data to understand the experiences of different groups, tailor our actions, measure progress, and ensure accountability. Evidence of persistent racial inequity at Wellcome caused us to include a focus on anti-racism when we updated our [Diversity, Equity and Inclusion strategy](#) in 2019-2020.

Our staff data over the last three years shows that people of colour have been particularly underrepresented at senior levels. In 2020, 21% of all staff who provided data were Black, Asian or minority ethnic (BAME), and the proportion was higher in junior job levels. We sometimes use the term BAME when reporting our analysis because this reflects how we collect and aggregate our data, which is based on UK census categories, but we acknowledge the limitations of this term and expect our approach will continue to evolve.



Although Wellcome's 2020 [Ethnicity Pay Gap](#) suggests relative parity, we know it does not give us the full picture and the calculation is masking issues with diversity at more senior levels.

In the 2019 inclusion survey, 22% of staff from racially minoritised groups reported experiencing offensive language, jokes or behaviours from colleagues sometimes, often, or very often; this proportion was highest for Black staff (28%) and lowest for White staff (11%).

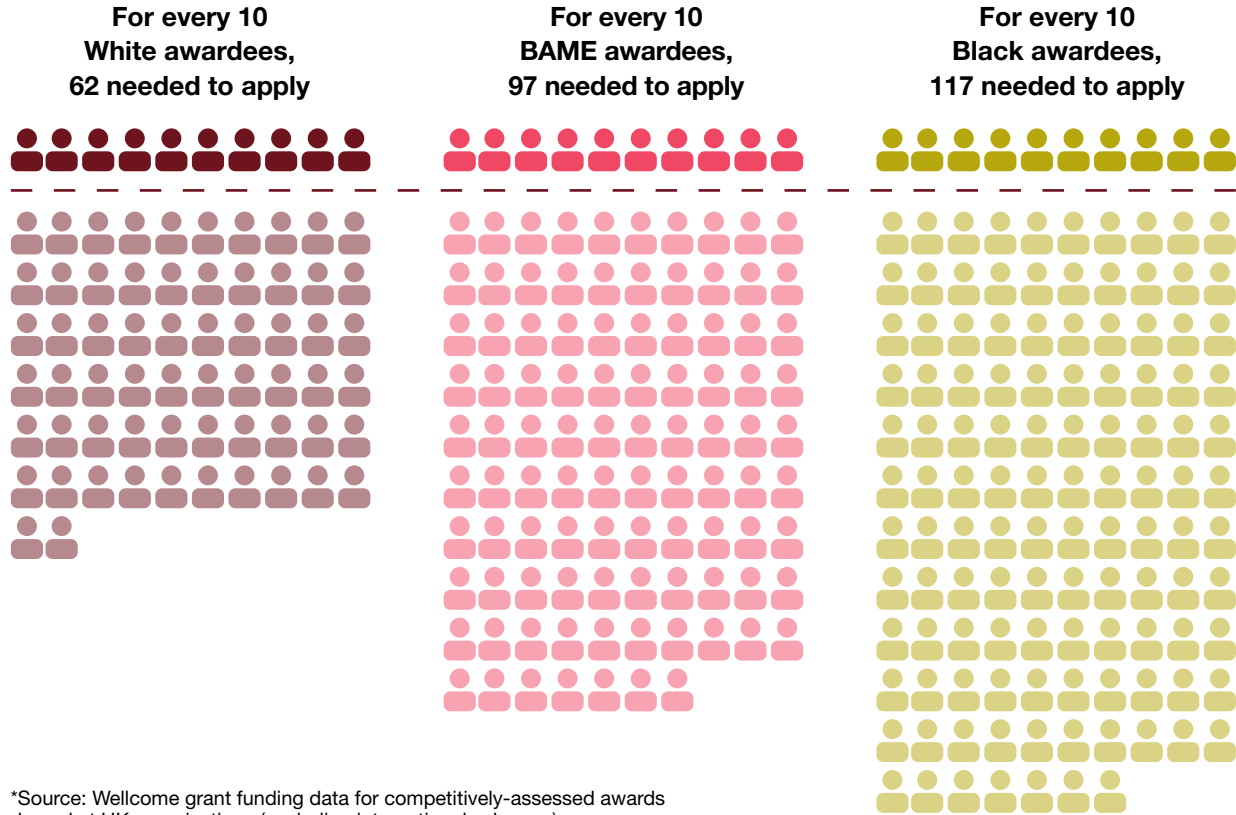
Wellcome's 2019 inclusion survey also showed that Black staff were less likely than other ethnic groups to agree that it is clear what they need to do to progress.

Investigate where there is racial inequity in areas where you hold power (continued)

Analysis of the people Wellcome funds also indicated inequity in our funding decisions. These are some key findings from Wellcome's [grant funding data](#):

0%
In 2019/20, Wellcome made no competitively assessed UK awards to applicants reporting their ethnicity as **Black or Black British**

There was racial inequity in our funding success rates* in aggregate over four years (2016-2020):



*Source: Wellcome grant funding data for competitively-assessed awards based at UK organisations (excluding international schemes).

[TOOLKIT #2]

Investigate where there is racial inequity in areas where you hold power (continued)

Further resources

Guidance on collecting and analysing diversity data

- [Things to consider](#) when collecting and using data about race.
- Guidance on [collecting diversity data](#).

Resources for managers

- Progression:
 - How to [progress people of colour from middle management to senior roles](#).
 - How to [address barriers to career progression](#).
 - Tools to interrupt bias in how you [evaluate performance](#) and [allocate work and opportunities](#).
- Recruitment:
 - Tools to [interrupt bias in recruitment](#).

- Staff experiences of racism:
 - Insights into the [experiences of Black employees](#) in the UK.
 - [Racial microaggressions](#) – everyday interactions that communicate hostile, derogatory or negative insults – and the [impact](#) they can have.
 - [Racial trauma](#) and its impact at work.
- More [tools for managers](#) to interrupt bias.
- [Developing an anti-racism strategy](#)

Resources for people working in global health

- [Decolonising global health](#).
- What [success](#) would look like in decolonising global health.
- [Why we need fair global vaccine allocation to end Covid-19](#).

Examples of racism in scientific practice

- [How Racism Creeps Into Medicine](#).
- [How False Beliefs in Physical Racial Difference Still Live in Medicine Today](#).
- [Pulse Oximeter Devices Have Higher Error Rate in Black Patients](#).
- [Why race science is on the rise again](#).
- [Ethnicity, Race and Inequality in the UK](#) – chapter four is on health inequalities.

Racism in research funding

- [Race Matters](#).
- [Fund Black scientists](#).
- [The Broken Pipeline](#) report.

[TOOLKIT #3]

Meaningfully involve people of colour in decisions

CASE STUDY #3A

Black and South Asian public-led change: equitable data collection

Team: Understanding Patient Data

Authors: Rebecca Asher and Emily Jesper-Mir (job share), Strategy and Engagement Manager

Covid-19 has highlighted the health inequalities experienced by Black and South Asian people. It has also exposed the gaps in health records that make it harder to understand and tackle these problems. There is now a policy focus for more data to be collected. But it is unrealistic to expect lasting change without examining the reasons behind the gaps.

These reasons are likely to include structural racism, lack of training, mistrust and the perception that data collection doesn't have a clear benefit. These issues – and how to address them – can only be meaningfully explored through engagement and co-development of solutions with Black and South Asian people, led by practitioners with strong connections within these communities.

We aim to uphold Wellcome's anti-racist principles in the way we're commissioning the engagement work:

- **Scoping:** We worked to meaningfully involve people of colour from the outset, so first we spoke with campaigners, academics, community researchers and the Wellcome Race Equity Network. Their critique of our plans led to important improvements in how we framed the problem and the project aims. We are setting up an advisory group to provide further challenge along the way.
- **Request for proposals:** We wrote this in a way that didn't require previous experience of Understanding Patient Data or Wellcome. We left scope for suppliers' expertise and creativity, including on engagement methods to enable respectful and open conversations with Black and South Asian members of the public.

- **Support:** We ran a supplier event, where people could ask questions and meet collaborators. We are offering support on information governance to improve access for small organisations who might not have this expertise in their teams – our priority is to find an organisation with expertise in engaging with Black and South Asian members of the public.

Ours is one of a clutch of projects within [Data for Science and Health](#) that aim to apply the anti-racist principles. Our focus is engagement, others grapple with tech and policy approaches. Once we have chosen a supplier for our project, we will offer feedback to everyone who applied and will ask for their feedback too, so we can review and amend our processes. Because we still have much to learn about working in a consciously anti-racist way.

[TOOLKIT #3]

Meaningfully involve people of colour in decisions (continued)

CASE STUDY #3B

A new Collections Gallery for Wellcome Collection

Team: Collections Gallery

Author: James Peto,

Project Director, Collections Gallery

Wellcome Collection's current permanent exhibition Medicine Man was originally put together for the British Museum in 2003. It shows part of the vast collection of objects, images, books and archives collected by Henry Wellcome and his agents between 1890 and 1936, reflecting the particular stories of health and medicine that they wanted to tell. Henry Wellcome's collections were classified and displayed in ways that placed White European views at the top of a racist and ableist hierarchy of scientific and cultural values.

In 2024/5 we will replace Medicine Man with a new Collections Gallery. Both in its development and in its presentation the new gallery aims to shine a light on the structural inequalities that have shaped our collections. It will be built on a

programme of new research into our collections, developed through sustained partnerships with communities of researchers who will bring fresh perspectives and new understandings. Minoritised people and those whose stories have previously been neglected or suppressed will play a major role in shaping the content of the gallery.

This programme of collaborative research aims to:

- Address the power structures and prejudices reflected in our collections which continue to shape health inequalities today.
- Amplify the previously ignored voices of those whose experiences and expertise tell more inclusive and equitable stories about human life and health.
- Build multiple perspectives into knowledge-making and content development and create continuing dialogues with those with whom we work.

The overarching research questions will be determined with the involvement of people of colour and disabled people, working as advisors to the project, who can help shape the way in which the structural racism represented

in our collections is transparently addressed and actively countered. Specific research partnerships will address material in the collections that bears witness to the exploitation of colonised people and the relationship between science and the construction of race. These partnerships will be shaped and led by people of colour with the aim of creating a Collections Gallery that tells stories from which no one feels excluded, and which points towards a much more equitable approach to individual and global health in the future.

Further resources

Information on **emotional labour** – the way people in some roles have to manage emotions during interactions to achieve professional goals and conform to role requirements:

- [Being Black at work right now means doing a lot of extra emotional labor](#)
- [Impossible Burdens: White Institutions, Emotional Labor, and Micro-Resistance](#)

[TOOLKIT #4]

Counteract racism by taking positive action or other targeted approaches to redress racial inequity

What is positive action?

Authors: Gemma Tracey, Science & Research Lead – Diversity & Inclusion, and Charlotte Hussey, former D&I Project Officer

Positive action is an important tool to tackle under-representation and address the impact of historical and current discrimination. Professor of human rights law Colm O’Cinneide [defines positive action](#) as the ‘use of special measures to assist members of disadvantaged groups in overcoming the obstacles and discrimination they face in contemporary society’.

The Equality Act 2010 sets out the legal framework for positive action in the UK. The Equality and Human Rights Commission have produced guidance on [positive action in the workplace](#), and [Wellcome’s positive action guidance](#) provides further tailored advice for Wellcome staff.

Positive action is different from positive discrimination, and distinguishing between these approaches is important for understanding the limits to what can be done to address under-representation under British law. Key to this distinction is that positive action is designed to support a particular group without negatively impacting others. For example, if you have evidence indicating that Black British people are underrepresented in your organisation, it’s ok to advertise a job in a magazine that has a largely Black readership so long as you also advertise the job on the main organisation’s website.

If others are disadvantaged by the action taken to support a particular group then the action could be classified as positive discrimination, which is unlawful. This is why when undertaking a positive action project, Wellcome colleagues need to consult the Legal team and develop an appropriate action plan based on evidence of need, i.e. under-representation.

Further resources

- [Guidance](#) and [resources](#) for people working in **research funding**.
- Insights from Binyam Mogessie, a Wellcome grant holder, on [why representation is so important in science](#).
- Resources for **managers and team members** on ways to [identify](#) and [deal with](#) racism at work.
- Resource on common [characteristics of White supremacy culture](#) in organisations and how we can counteract these. It can feel uncomfortable and confronting to read the term White supremacy, but it’s important to remember we are talking about structural issues. This resource explains how common organisational characteristics, like a sense of urgency, can contribute to racial inequity and what we (particularly people with leadership responsibilities) can do about it.
- Videos of [Kimberlé Crenshaw](#) and [others](#) on intersectionality.

[TOOLKIT #4]

Counteract racism by taking positive action or other targeted approaches to redress racial inequity (continued)

CASE STUDY #4

Learning from University College London's Research Opportunities Scholarship programme

Team: Culture, Equity, Diversity & Inclusion

Author: Gemma Tracey, Science & Research Lead – Diversity & Inclusion

In investigating what positive action could look like for Wellcome, the [Research Opportunity Scholarships programme at University College London](#) (UCL) provides a useful case study.

Data from the Higher Education Funding Council for England (HEFCE) indicates that between 2010 and 2016 the number of Black and minority ethnic (BME) students attending university for undergraduate study increased by 34% (HEFCE, 2017). A report by [Leading Routes](#) shows that while BME students are relatively well represented amongst both first degree undergraduate students and taught postgraduate students, this has not yet translated into postgraduate research. In 2018, 16.8% of postgraduate research students were from BME backgrounds, and only 4% were Black.

Similarly, data at UCL showed that students from some UK BME backgrounds are much less likely to pursue a PhD or consider a career in academia. As noted on [UCL's website](#): “The university's BME undergraduate student intake has increased 46% since 2013/14. However, these headline figures hide significant under-representation at post-graduate level. The proportion of white students grows by more than a third whilst the proportion of students from UK Asian and Black backgrounds more than halves.”

To address this in 2018 UCL launched a scholarship programme to support research degree students from BME groups that are currently under-represented at UCL: “The UCL Research Opportunities Scholarship programme is being implemented as a form of positive action to address this under-representation in the top strata of higher education. However, it also encourages students from BME backgrounds to consider research as a possible career path, inspiring future generations.”

The [programme website](#) provides details on eligibility, including specific information about which minority ethnic groups can apply (Black,

Pakistani and Bangladeshi applicants) based on UCL data about under-representation in their postgraduate research student cohort.

Applicants for the scholarship also need to go through the standard application process to gain a place on a postgraduate degree programme at UCL. Or to put it otherwise: spaces on academic programmes are not reserved for them and they need to profile their previous academic attainment and future research interests like any other applicant. The scholarships consist of fees equivalent to the standard postgraduate home rate plus a maintenance stipend. The scholarship also includes additional research costs of up to £1,200 per year for the stated duration of the programme and comprehensive personal and professional development support package.

This example from UCL shows how an organisation can identify a challenge related to racial inequity (the under-representation of people from certain minority ethnic backgrounds in their portfolio) and design an initiative to directly tackle it (by providing scholarship opportunities).

[TOOLKIT #5]

Use your power to make measurable progress towards racial equity

CASE STUDY #5

Turning the Executive Leadership Team's anti-racism commitments into action

Team: Strategy

Author: Ed Whiting, Director of Strategy

In our discussions in the Executive Leadership Team (ELT) about how to turn the anti-racism commitments into action, we've been keen to find ways to embed and [mainstream this work into Wellcome's core strategy](#) and work.

As individuals, we know that our own personal listening and learning will be a vital part of the work to make Wellcome an anti-racist organisation, and that we won't have all of the answers immediately.

To make sure we are taking the first steps towards a truly anti-racist approach with the right pace, care and accountability, we agreed a specific objective as one of the three core ELT objectives for 2020-21 – "Wellcome's D+I strategy (and the specific commitments we have made on anti-racism) is embedded into our funding, mission and internal culture and processes".

We've suggested some specific activities through the year in support of this objective – including personal development and learning, and embedding anti-racist commitments into 2021-22 delivery plans – and indicators of success that we will look for in future staff surveys (e.g. "increased proportion of Wellcome staff, BAME staff and disabled staff think Wellcome respects individual differences" and "Wellcome is committed to D+I").

We will report on progress against these objectives and KPIs as part of the reporting on the ELT objectives, at mid and end-year – which will be discussed by ELT and the D+I team, and cascaded to Wellcome.

Further resources

- [Guidance](#) and [tools](#) on how to evaluate and measure progress towards racial equity.
- Emma Dabiri's book on [What White People Can Do Next](#) – From Allyship to Coalition.

[TOOLKIT #5]

Use your power to make measurable progress towards racial equity (continued)

Reflections on power and inclusion

**Author: Eliza Manningham-Buller,
former Chair of the Board of Governors**

This was first published on Wellcome's staff intranet in 2019 and has been updated for this toolkit.

I have been reflecting since Ruth Hunt's talk to staff about the exercise of power. Some of you may recall that she gave an illustration of an occasion when she had chosen not to exercise her power as Head of Stonewall.

For power has dangers, as well as opportunities. We are told "Power corrupts". If you have it, or give that impression, others can be intimidated, keep their distance and be reluctant to tell you what they think. If you behave badly you are more likely to get away with it than if you feel powerless. Power can lead to delusion, that you know the answers when it is actually clear you don't. And you can assume that a powerful position earns you respect which it does not.

When I told an old friend that I was intending to apply to become head of MI5, he sought to dissuade me. He said that I would be damaged by it, that it would be impossible for me to retain my values and that, in effect, it was inevitable that I would be corrupted. During my five years at the top I often heard the echoes of his words and tried to prove him wrong.

I am grateful therefore when colleagues at Wellcome give me feedback, including critical feedback, disagree, argue and tell me, politely, that I am wrong.

I have also been thinking about the Inclusion part of [Diversity and Inclusion](#). I realise that one of the keys to that is spreading the power around. In our society, not everyone has equal access to power or a share of it and we need to do more to address that.

At Wellcome we want all colleagues to feel that they belong and that their contribution is valued. That includes having the power to take initiatives, propose new ways of working and promote fresh ideas. It is also the power to challenge and disagree.

The results of the 2019 staff survey suggest that not everyone feels that they have that power, or indeed the permission of the organisation to differ. But without those views being heard, Wellcome will not benefit fully from what its staff can contribute. I have always thought that some of the best ideas come from the most junior people. I hope that Wellcome's [Code of Conduct](#), [Speak Up policy](#), and anti-racist principles will make this easier.

We know the same challenge exists in the institutions we fund. Our project on [Research Culture](#) is an important way to help us work towards more inclusive research environments.

I hope that Wellcome makes further progress on Diversity, Inclusion, and anti-racism, and that more people will share the power of the organisation.

How to be anti-racist at Wellcome

Glossary

[GLOSSARY]

Anti-racism

Anti-racism is the active work to oppose racism and to produce racial equity – so that racial identity is no longer a factor in determining how anyone fares in life. Being anti-racist means supporting an anti-racist policy through your actions. An anti-racist policy is any measure that produces or sustains racial equity between racial groups.

Sources:

Kendi (2019) and MP Associates, Center for Assessment and Policy Development, and World Trust Educational Services (2020)

Racism

Racism at an individual level can range from overt hate crimes to less visible microaggressions – everyday interactions that communicate hostile, derogatory or negative insults. The same action can have different outcomes depending on the context and who is involved, and seemingly well-intentioned actions can unwittingly produce racial inequity.

At a structural level, racism involves one group having the power to carry out systematic discrimination through institutional policies and practices, and by shaping the cultural beliefs and values that support those racist policies and practices. Only outcomes, not intent, demonstrate whether actions and policies are racist.

Sources:

[CARED Collective](#) (Calgary Anti-Racism Education), [Dismantling Racism Works \(dRworks\)](#) and Sue et al. (2007)

Power

Power is about our relationships with one another. It is the ability to accomplish something or act in a certain manner. In a work setting, power includes the ability to make decisions, set deadlines, allocate work, delegate, recruit and promote people, disagree or say no without fear of personal repercussions, and access others in power through networks. Power is not just individual, but cultural.

Power is relational and can shift in different contexts. Whiteness, wealth, citizenship, and education are some of the mechanisms through which certain groups can have more power. Power can be used intentionally both in negative ways and positive ways, and individuals within a culture may benefit from power they are unaware of.

Sources:

[Intergroup Resources](#) and the [CARED Collective](#) (Calgary Anti-Racism Education)

Sources and resources

We have learnt from many people when creating this resource, and we are very grateful to everyone listed here and in the Acknowledgements section. We have drawn on or referenced the following works as outlined below.

Wellcome's public anti-racism commitments are available on our websites.

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[#1 – PRIORITISE]

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[#2 – INVESTIGATE]

Guidance on collecting and analysing diversity data

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Resources for managers

These give examples of racial inequity in the workplace and how managers and staff can create an anti-racist workplace. The statistic in Principle #2 about progression of Black employees is taken from the Chartered Institute of Personnel and Development 2017 report.

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Resources for people working in global health

Racism in global health is one of the reasons for health disparities between people in racially minoritised groups, who make up the global majority, compared to White people. For example, inequitable distribution of Covid-19 vaccines disproportionately impacts people of colour globally, and it also stops the world from ending the pandemic.

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Sources and resources (continued)

Examples of racism in scientific practice

Racism in scientific practice can take many forms, as outlined here. Research and interventions that responsibly consider differences between groups is important (for instance, to avoid creating pulse oximeter devices that have a higher error rate in Black patients as shown below) and these need to be informed by anti-racist principles.

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Racism in research funding

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[#3 – INVOLVE]

Emotional labour

It can be emotionally difficult and draining for people of colour to share lived experiences of racism, particularly in a workplace context. These sources provide more information on emotional labour.

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Sources and resources (continued)

[#4 – COUNTERACT]

Positive action

These provide practical guidance on positive action (measures to improve equality for one group without disadvantaging another group). Positive action is intended to address inequalities and structural barriers that certain groups face.

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You can find more information about this resource and how we developed it at www.wellcome.org/anti-racist-principles

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