

GLASGOW CENTRE FOR POPULATION HEALTH

ANTI-RACISM STRATEGY 2026

The Glasgow Centre for Population Health (GCPH) is committed to embedding anti-racism into our organisation.

Our core focus of improving population health and reducing health inequalities in Glasgow, and Scotland, is underpinned by a commitment to advocating for health equity. This includes a commitment to anti-racism, recognising that racism is a determinant of health, and the intersectional issues which compound and cut across socioeconomic status to impact health and wellbeing. This is especially important in the context of our work being situated within the most ethnically diverse area in Scotland¹, in terms of prevalence of non-White ethnic groups, and in a city with a deep history of systemic inequality and poverty².

Background

Since the beginning of our anti-racism journey in 2020, we've taken important steps to build awareness within Glasgow City, and across Scotland, and with key partners, of how racism contributes to health inequalities through several high profile and well attended events, including seminars³ from prolific speakers including Prof Kevin Fenton, Prof David Willams and Angela Saini, as well as efforts such as our yearly Black History Month blog series featuring guest blogs from community organisations such as the Coalition for Race Equality⁴ and Rights and Media Education⁵. Through our work, we have highlighted important considerations and recommendations to improve equality for racialised communities in Glasgow through examples such as our recently published Glasgow Ethnicity Profile⁶, and Cash First project⁷ which is investigating the impact of a 'cash first approach' in communities facing food insecurity, including refugees and asylum seekers.

Internally, we have made efforts to improve our individual understandings of anti-racism and our organisational culture by undertaking team training on racial literacy and structural racism, delivered through facilitated sessions from Neish Training that encouraged challenging, open and respectful discussions on racism and power.

We've also engaged with other external experts, who have provided training and consultancy on specific workplace practices, such as to develop more inclusive recruitment practices, and made efforts to ensure our communications reflect racial diversity. Collectively, these steps help us recognise opportunities both within and beyond our organisation, where action can be taken

¹ <https://www.scotlandscensus.gov.uk/census-results/at-a-glance/ethnicity/>

² <https://www.understandingglasgow.com/glasgow-indicators/poverty/poverty-overview>

³ <https://www.gcph.co.uk/latest/events/past-events>

⁴ <https://www.gcph.co.uk/latest/news-blogs/1276-black-history-month-2025-crers-manifesto-for-an-anti-racist-scotland>

⁵ <https://www.gcph.co.uk/latest/news-blogs/1213-bringing-lived-experience-of-migration-and-racialisation-into-research>

⁶ <https://www.gcph.co.uk/latest/publications/1275-glasgow-city-ethnicity-profile>

⁷ <https://www.gcph.co.uk/our-work/1182-cash-first-in-glasgow>

to promote racial equality and diversity and where we can play our part in dismantling racialised health inequalities in public health.

Strategy for 2026

Despite undertaking targeted work in this area over the past five years, we have yet to set out a clear strategy to embed anti-racism across all areas of our work. This document presents our plans for the next 12 months, including how anti-racism will be centred within five levels of our operations (our organisational culture, our work, our procurement practices, our governance and our role in the wider public health landscape), guided by examples from our partners; NHS Greater Glasgow and Clyde (NHS GGC)⁸, University of Glasgow⁹ and Scottish Government¹⁰; and internal discussions as a team from October to December 2025.

From 2026/27, the GCPH will strengthen its governance, systems and external relationships to ensure anti-racism is embedded within recruitment, procurement, governance and community engagement. Progress against these objectives will be reviewed quarterly and reported through regular updates and engagement with the GCPH team at monthly team meetings. Progress will also be reported through internal governance structures.

As we move forward, we remain focused on listening, learning and working towards making lasting change to both our organisation and to the public health landscape in Scotland. As part of this commitment, we welcome feedback to help us improve and ensure our actions are meaningful, inclusive, and accountable.

1. Our organisational culture

Internally we have demonstrated a strong willingness and motivation to engage in anti-racism work. In 2023, questionnaires were circulated to the team to assess baseline awareness and readiness to approach anti-racism. The results of this survey found that 100% of staff agreed that they had a role to play in GCPH embedding anti-racism. 80% of staff recognised that we operate in a structurally racist system and 100% said they understood racism as a fundamental determinant of health. There was less confidence in speaking about racism and its impacts openly and confidently with 45% strongly disagreeing or tending to disagree and 20% not sure. There was also less confidence in how to respond to incidences of racism in either GCPH or the wider system.

Following this survey, the team received five 90-minute training and reflection sessions with Neish Training Ltd. These sessions helped the team to reflect on how to respond to racism, and how it is embedded in our wider system and culture. Building on this effort, we see an opportunity with our current reduced team size to engrain anti-racism into our organisational culture further, ensuring staff feel supported, encouraged and confident to take an anti-racist approach and stance. We plan to do this by:

⁸ <https://www.nhsggc.scot/your-health/equalities-in-health/areas-of-work/nhsggc-anti-racism-plan-2025-2029/>

⁹ <https://www.gla.ac.uk/explore/togetheragainstracism/>

¹⁰ <https://www.gov.scot/publications/race-equality-framework-scotland-2016-2030/>

- Building in explicit support/channels of accountability for staff who experience racism in the workplace. As part of this, senior staff will be required to commit to developing their capacity in this area to ensure staff can be supported appropriately.
- Focusing on relationship building across sectors and with experts in the field by having organisational representation in different groups and networks, committing to attending events and network meetings.
- Moving our work from focusing solely on highlighting inequalities to active anti-racism – including advocating for an equity focus with our partners and collaborators.
- Add an agenda item for all team meetings to provide a team-wide ‘community of practice’ to reflect on issues as they arise, share anti-racism resources, ask for advice etc.

2. Our work

In 2023, the team received training from the NHS GGC Equality and Human Rights Team (EHRT) on the Equality Act (2010) and the Public Sector Equality Duty and Equality Impact Assessment (EQIA). Following this, an Equality Impact Assessment (EQIA) was created for GCPH to assess future work against to ensure that different equalities groups were being considered in the planning and delivery of research.

Although this assessment has not been a formal requirement within our work planning thus far, there have been considerable developments in our racial equality-focused work over the past few years. There is now a ‘Racialised health inequalities’ page on the GCPH website¹¹ detailing our work in this area, and anti-racism and equalities are now explicitly mentioned within our aims and objectives on the GCPH website.

Building on this work, in 2026 we are committed to:

- Updating our communications strategy to reflect anti-racist communications, including a framing and language guide for internal use across the team. Within this strategy, a set of cultural holidays and awareness periods will be selected and committed to recognising within our online communications throughout the year.
- With representation across the team, staying up to date and participating in, relevant seminars on racialised health inequalities and reflecting on what this means for our work.
- Working on a collective narrative to thread all GCPH work – ensure messaging supports anti-racist principles and does not perpetuate harm for marginalised communities.
- Reflecting on our knowledge gaps, and how equalities matters relate to our work, as individual team members.
- Implementing the requirement for EQIA’s to be completed for all new pieces of work.
- Developing approaches to community engagement that are inclusive and diverse and which prioritise relationship-building, co-production and trust, rather than one-off consultation.
- Ensuring engagement methods are accessible, culturally appropriate and mindful of power imbalances.

¹¹ <https://www.gcph.co.uk/our-work/1269-racialised-health-inequalities>

- Explore fair and transparent ways to recognise and value community expertise, including reimbursement or other forms of support where appropriate.
- Use GCPH's platform to amplify racialised community voices, priorities and evidence within public health discourse and policy influence.

3. Our procurement practices

GCPH as an organisation is a legal entity of NHS GGC and all our procurement practices are carried out in line with NHS GCC policy. However, we intend to produce an internal practice guide to embed anti-racist and equality-focused principles within procurement processes, ensuring they align with GCPH values and can create opportunities for different communities, helping to boost local economies. We will do this by:

- Reviewing our existing internal procurement practices, guidance and criteria to ensure equality, diversity and inclusion expectations are clearly articulated.
- Where appropriate, including social value and equality considerations when commissioning external work, or events.
- Exploring opportunities to commission or collaborate with organisations led by, or closely working with, racialised communities, particularly within the third sector.
- Increasing staff awareness of ethical and inclusive procurement approaches through internal guidance and discussion.

4. Our governance and team

The GCPH's team and governance structures have historically not reflected the diversity of Glasgow. This underrepresentation is partly due to the limited diversity within managerial and governance roles throughout the public sector and as such within our partner organisations¹². Recognising this, we are committed to broadening our perspectives internally, and strengthening our governance arrangements and the diversity of our staff team so that anti-racism is explicitly embedded in oversight, decision-making and accountability. We aim to do this by:

- Reviewing and updating GCPH internal recruitment practice (in compliance with NHSGGC overall policy), new job descriptions and person specifications to ensure inclusive language and proportionate criteria are used.
- Committing to advertising all roles through a wider range of channels, including networks and platforms accessed by racialised communities.
- Implementing preapplication information sessions and seek to include diverse representation on interview panels wherever feasible.
- Providing anti-racist and inclusive recruitment training for all staff at GCPH involved in recruitment and selection, with a particular focus on senior and decision-making roles.
- Embedding anti-racism as a standing consideration within governance discussions, reporting and strategic decision-making.
- Supporting governance and senior leadership development through training on racial literacy, structural racism and anti-racist leadership.

¹²<https://static1.squarespace.com/static/615c1bee105b4f55a98326d0/t/646e148912826a771547f272/1684935841144/Ethnicity+and+Employment+in+Scotland%27s+Public+Sector+V4.pdf>

- Regularly reviewing governance arrangements to assess progress and identify areas for improvement as regards working towards becoming anti-racist.

5. Our role in the wider public health landscape

During the COVID-19 pandemic, GCPH took a leading role in the public health sector in Scotland by publishing a COVID-19 micro briefing which highlighted disparities in COVID-19 infections and related-deaths amongst racialised communities¹³. In 2025, we created an ethnicity profile⁶ for the Glasgow Health Determinants Research Collaboration (GHDR), drawing upon the results of the 2022 Scottish Census – this was the first available publication providing an overview of this data.

Despite these positive developments in our work and position within the sector, we hope to leverage this by strengthening partnerships and producing high quality and timely evidence that will inform public health decision-making and policy to reduce inequities for racialised, and other marginalised, communities. We hope to achieve this by:

- Identifying opportunities to respond to current challenges and the political context, having an ‘advocacy’ role in the sector.
- Having a role in leading and ‘legitimising’ anti-racism in public health, giving others the confidence to raise such issues and empowering them to do work in this area.
- Making explicit in partnership document, such as the Memorandum of Understanding, that we are committed to this work and gaining support from our partners.
- Supporting third sector organisations supporting racialised communities by highlighting their work and advocating for resourcing community-led responses.

Summary of our plans

The Glasgow Centre for Population Health is committed to embedding anti-racism across all aspects of our organisation and work. This strategy sets out our priorities for 2026, focusing on four key areas: strengthening our organisational culture, ensuring our work reflects anti-racist principles, diversifying governance, and influencing the wider public health landscape. We recognise that racism is a fundamental determinant of health and that dismantling racialised health inequalities requires sustained, collective action. Through recruitment, training, partnership working, and advocacy, we aim to create meaningful change that is inclusive, accountable, and impactful.

Our commitment is ongoing, and we welcome collaboration and feedback in achieving collective goals to racial equity in public health.

¹³ <https://www.gcph.co.uk/our-work/32-covid-19-micro-briefings>