

Abstract - Psychological Safety, Anti-Racism and Racial Allyship in the NHS

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Background and Context:

A substantial and growing body of evidence demonstrates that racism is embedded within the structures, cultures, and everyday practices of the UK National Health Service (NHS). Research has consistently shown that racially minoritised staff experience disproportionate disadvantage across recruitment, career progression, disciplinary processes, and access to development opportunities, alongside heightened scrutiny and reduced confidence in organisational responses to concerns. These experiences have significant implications for staff wellbeing, engagement, retention, and psychological safety. In the context of the COVID-19 pandemic and the heightened global focus on racial injustice following the murder of George Floyd, NHS organisations have increasingly invested in anti-racism and racial allyship training initiatives. However, there remains limited empirical research exploring how such interventions are experienced by staff and how they interact with psychological safety at the team level within racially stratified organisational contexts.

Aim:

This study aims to explore how training interventions focused on anti-racism and racial allyship are understood, interpreted, and experienced by NHS staff, and how these interventions may influence psychological safety within NHS teams.

Methodology:

The study adopts a qualitative research design underpinned by a constructivist ontology and social constructivist epistemology, recognising that experiences of anti-racism, racial allyship, and psychological safety are socially constructed, relational, and context dependent. Data will be generated through semi-structured interviews and reflective diaries with NHS staff across a small number of Trusts. This multi-method qualitative approach is intended to capture both in-depth narrative accounts and reflective sense-making over time, enabling exploration of how organisational culture, power relations, and training interventions shape perceptions of psychological safety i.e. interpersonal risk, voice, learning, and inclusion. Reflexivity is integral to the research process, acknowledging the value-bound nature of the inquiry.

Contribution to Practice:

By situating anti-racism and racial allyship training within the wider context of structural racism in the NHS, this study seeks to inform the design and implementation of training

approaches that support, rather than inadvertently undermine, psychological safety. The research aims to offer practical guidance to NHS organisations on undertaking this morally and socially important work in ways that protect staff wellbeing, foster meaningful engagement, and contribute to more equitable, inclusive, and psychologically safe team environments, with potential implications for workforce sustainability and patient outcomes.