

Equity, Diversity and Inclusion Student Seminar

Tuesday,
May 16th, 2023
12:00 - 13:30

Research Talk 1



Rainbow Health: Why do we need LGBTQIA+ inclusive research?
Dr. Aravinda M Guntupalli

Research Talk 2



What affects uptake of the COVID-19 vaccine by ethnic minority people in the UK?
Prof. Shaun Treweek



PGT & PGR
Feedback



Student discussion session on EDI-related needs, gaps, and more
Vivian Magboh and
Sarah Champagne

Program

- 12:00** **Lunch.** Get some food, have a chat and take your seat.
- 12:10** **Welcome and introduction**
Prof Shaun Treweek, IAHS EDI Lead
- Research talk #1: Rainbow Health: Why do we need LGBTQIA+ inclusive research?**
Dr Aravinda Guntupalli, Senior lecturer
- Research talk #2: What affects uptake of the COVID-19 vaccine by ethnic minority people in the UK?**
Prof Shaun Treweek
- 12:40** **EDI initiatives from the School and IAHS**
Sarah Champagne (IAHS EDI Committee member), Aravinda Guntupalli, Vivian Magboh (IAHS EDI Committee member) and Shaun Treweek
- 13:00** **Student feedback and discussion**
Everyone
- 13:25** **Closing remarks**
Sarah Champagne and Vivian Magboh
- 13:30** **End**

Equity, Diversity and Inclusion Student Seminar



Rainbow Health: Why do we need LGBTQIA+ inclusive res

*Dr Aravinda Guntupalli
Senior Lecturer in Global health*

Terminology

- You might come across the acronym LGBTQIA+ or one of its variants
 - L: Lesbian
 - G: Gay
 - B: Bi (sexual)
 - T: Trans (gender)
 - Q: Queer or Questioning (sexuality and/or gender identity)
 - I: Intersex
 - A: Asexual or Aromantic
 - + includes other including pansexual or gender-fluid
- **Other terms**
- **trans(gender):** a person whose gender identity does not correspond to that person's sex assigned at birth. For instance, a *trans* man would have been assigned "female" but identify as male
- **cis(gender):** a person whose gender identity corresponds with that person's sex assigned at birth. A majority of people are cisgender
- **nonbinary (NB):** a gender identity that does not fit into the binary male/female division
- **pangender:** a gender identity that is not limited to one gender and may encompass all genders at once

Two studies

- Study 1 based on Youth 12 data: Body size and weight, and the nutrition and activity behaviours of sexual and gender minority youth: findings and implications from New Zealand
 - Lucassen, M., Guntupalli, A., Clark, T., Fenaughty, J., Denny, S., Fleming, T., . . . Utter, J. (2019). *Public Health Nutrition*, 22(13), 2346-2356.
- Study 2 based on Youth 19 data: The wellbeing of sexual and gender minority secondary school students with long-term conditions
 - Guntupalli, A., Lucassen, M.F.G., Fenaughty, J., Fleming, T., Peiris-John, R., Farrant, B. & Clark, T.C. (minor revise and resubmit)

Funding and setting

- Youth'12 was funded by the Ministries of Youth Development, Social Development, Health, Education, Justice; the Department of Labour, Families Commission; and the Alcohol Advisory Council and we acknowledge Toshiba (Australia) Pty. Limited
 - Cross-sectional, self-administered questionnaire, conducted with a representative sample of NZ secondary-school students in 2012
 - 125 schools were randomly selected to participate.
 - Ninety-one schools (73 %) took part
 - 8500 students (68 %) participated
 - The University of Auckland Human Participants Ethics Committee granted ethical approval for the study (ref. 2011/206)

Funding and setting (2)

- Youth'19 was funded by two Health Research Council of Aotearoa New Zealand project grants and received ethical approval from the University of Auckland's Human Participants Ethics Committee (application ref. 022244)
 - Forty-nine secondary schools were randomly selected for this study, including four kura kaupapa Māori schools (i.e., schools that are based on Indigenous philosophies and primarily taught in the Māori language)
 - Unlike the previous Youth2000 survey waves, the Youth'19 surveys selected a random sample of schools from the Auckland, Waikato and Northland/Tai Tokerau regions that account for close to half (i.e., 47%) of Aotearoa New Zealand's youth population

Aim of the study 1

- To describe the body size and weight, and the nutrition and activity behaviours of sexual and gender minority (SGM) students and compare them with those of exclusively opposite-sex-attracted cisgender students
 - Male and female SGM students were also compared
- Participants: A total of 7769 students
 - 9 % were SGM individuals

Methodology

- Sexuality was determined by the question 'Who are you sexually attracted to?'
 - response options: 'the opposite sex', 'the same sex', 'both sexes', 'I'm not sure', 'neither' and 'I don't understand this question'
- Whether a student was transgender was determined by the question 'Do you think you are transgender? This is a girl who feels like she should have been a boy, or a boy who feels like he should have been a girl (e.g. Trans, Queen, Fa'afafine, Whakawahine, Tangata ira Tane, Genderqueer)?'
- Students were categorized as heterosexual cisgender if they reported being sexually attracted to the opposite sex and that they were not transgender
- Students were categorized as SGM youth if they were sexually attracted to the same sex, both sexes or not sure of their sexual attraction/s, or if they were transgender or not sure if they were transgender
 - mental health and psychosocial needs of 'not sure' students are similar to those of other SGM youth (Lucassen et al., 2011)

Results

Reference: Heterosexual cisgender males or females	Sexual and gender minority males	Sexual and gender minority females
Tried to lose weight	1.95***	1.07
Unhealthy weight control	2.17***	1.58**
Underweight	1.84	1.18
Overweight and obese	1.4	1.24*
Frequent fast food and takeaways	2.89***	2.19***
5+ fruits and vegetables daily	1.25	0.82
Family meals together	0.91	0.85
Daily physical activity	1.18	0.89
Physically inactive	2.54***	1.22
Participation in school sports team	0.57***	0.62***

Gender differences

- Comparing male and female SGM students highlighted a general trend, such that females experience higher odds of health and well-being issues
- Female SGM students relative to their male counterparts were significantly more likely
 - to have tried to lose weight
 - to have engaged in unhealthy weight control
- Female SGM students relative to their male counterparts were significantly less likely
 - to have eaten 5+ fruits and vegetables daily
 - to have engaged in daily physical activity
- Sexual minority males were more likely to have frequently consumed fast food and takeaways than sexual minority females

What explain these inequities?

- Minority stress theory is useful in understanding the health issues reported in the present study
- For instance, stress-related coping behaviours can include consoling dietary behaviours and certain sedentary activities (Austin et., 2009), which may lead to weight gain and obesity
- There is some support for the minority stress theory in our data, given the increased challenges reported by SGM students
 - For example, it has been hypothesized that female SGM individuals may be more likely to be overweight than their male counterparts because of gender differences in managing minority-related stress

Aim of the study 2

- Aim: To explore the prevalence of long-term health conditions (which includes disorders such as asthma and diabetes) among sexual and gender minority youth (SGMY) within Aotearoa New Zealand
 - Also to report on access to health care services
- Participants: A total of 7059 students
 - heterosexual cisgender females (44.30%)
 - heterosexual cisgender males (41.64%)
 - sexuality diverse cisgender females (9.34%)
 - sexuality diverse cisgender males (3.06%)
 - transgender and gender diverse adolescents (1.74%)
- The selected outcome variables are general health, long-term health conditions, difficulties accessing healthcare and talked to a health provider privately

Figure 1. Flowchart of items and the sexuality and gender groups

Item	Responses				
A) "How do you describe yourself?"	A boy or man~	A boy or man~	A girl or woman~	A girl or woman~	Identified in another way
	↓	↓	↓	↓	↓
B) "Are you (or might you be) transgender or gender diverse?"	No	No	No	No	Yes
	↓	↓	↓	↓	↓
C) "Which of the following best describes you?"	Not applicable/ not asked	Not applicable/ not asked	Not applicable/ not asked	Not applicable/ not asked	Any gender minority & 'not sure'
	↓	↓	↓	↓	↓
D) "Who are you attracted to?"	Opposite or a different sex	Same, both or not sure	Opposite or a different sex	Same, both or not sure	Any response
	↓	↓	↓	↓	↓
Sexuality and gender groups	Heterosexual cisgender males	Sexual minority cisgender males	Heterosexual cisgender females	Sexual minority cisgender females	Transgender and gender minority

Findings

Self-reported health

- Transgender and gender minority youth, were more likely to have compromised general health (adjusted Odds Ratio/aOR 4.8), followed by sexual minority cisgender females (aOR 3.9), then sexual minority cisgender males (aOR 2.7)

Odds of having a long-term health condition

- Transgender and gender diverse adolescents reported the highest odds of having a long-term health condition (aOR=6.69) compared to heterosexual cisgender males
- Sexuality diverse cisgender females and males also had significantly higher odds of having a long-term health condition compared to heterosexual cisgender males

Accessing health care

- Transgender and gender diverse youth also reported the highest odds of experiencing difficulties accessing health care (aOR=3.99) compared to heterosexual cisgender males
- Sexuality diverse cisgender females and males were also significantly more likely to experience difficulties accessing healthcare than heterosexual cisgender males



HSRU

Promoting Excellence in Health Services Research

What affects uptake of the COVID-19 vaccine by ethnic minority people in the UK?

Shaun Treweek

streweek@mac.com

HSRU is core funded by the Chief Scientist Office of the Scottish Government Health and Social Care Directorates. The author accepts full responsibility for this talk.



www.abdn.ac.uk/hsru

Follow us on  @hsru_aberdeen

Vaccine uptake varies



HSRU

-
- Although uptake of the COVID-19 vaccines in the UK is generally high, uptake is lower among some ethnic minority groups.
 - For example, by 22nd Jun 2022, overall uptake (1st dose) by people aged between 50–54 years old was 88%.
 - Break this down by ethnic group and we find that e.g. 90% of all White people had been vaccinated, compared to 63% of those of Caribbean background, 76% of those of African background and 89% of those of Bangladeshi background*.

*OpenSAFELY. NHS Covid vaccination coverage 2022. Available from: <https://reports.opensafely.org/reports/vaccine-coverage/> (Accessed 10th May 2023).

Why?



HSRU

There has been debate about the factors that affect vaccine uptake, not just for COVID-19, among all ethnic groups, including ethnic minority groups.



UK Research
and Innovation

The UK's Research & Innovation funder issued a call in early 2021 for emergency projects addressing topics related to COVID-19.

We were awarded £80,000 to conduct a project on vaccine uptake in ethnic minority groups from May to August, led by the University of Aberdeen.

A collaboration of 13 organisations HSRU





COLLABORATION
FOR CHANGE

Collaboration for change: Promoting vaccine uptake

<https://www.collaborationforchange.co.uk>

The research plan



HSRU

- Two rapid systematic reviews:
 1. Factors that affect uptake.
 2. Strategies to increase uptake.
- A discussion of the global evidence with ethnic minority community organisation partners.
- Produce some recommendations

Fairly standard rapid reviews

We used Evidence to Decision Frameworks for this

DECIDE



Developing and Evaluating
Communication strategies to support
Informed Decisions and practice
based on Evidence

GRADE

What did the reviews find?



HSRU

-
- We found 31 studies, 26 of which assessed factors. All studies were conducted in the UK, USA and Australia. We only looked at studies published in English during the last 5 years.
 - Some studies targeted COVID-19 vaccines (usually surveys) but many targeted influenza or other respiratory infections.
 - Some of the studies assessing factors (i.e. what influences uptake?) were really good.
 - The studies assessing mitigation strategies (i.e. what might increase uptake?) were not that useful.

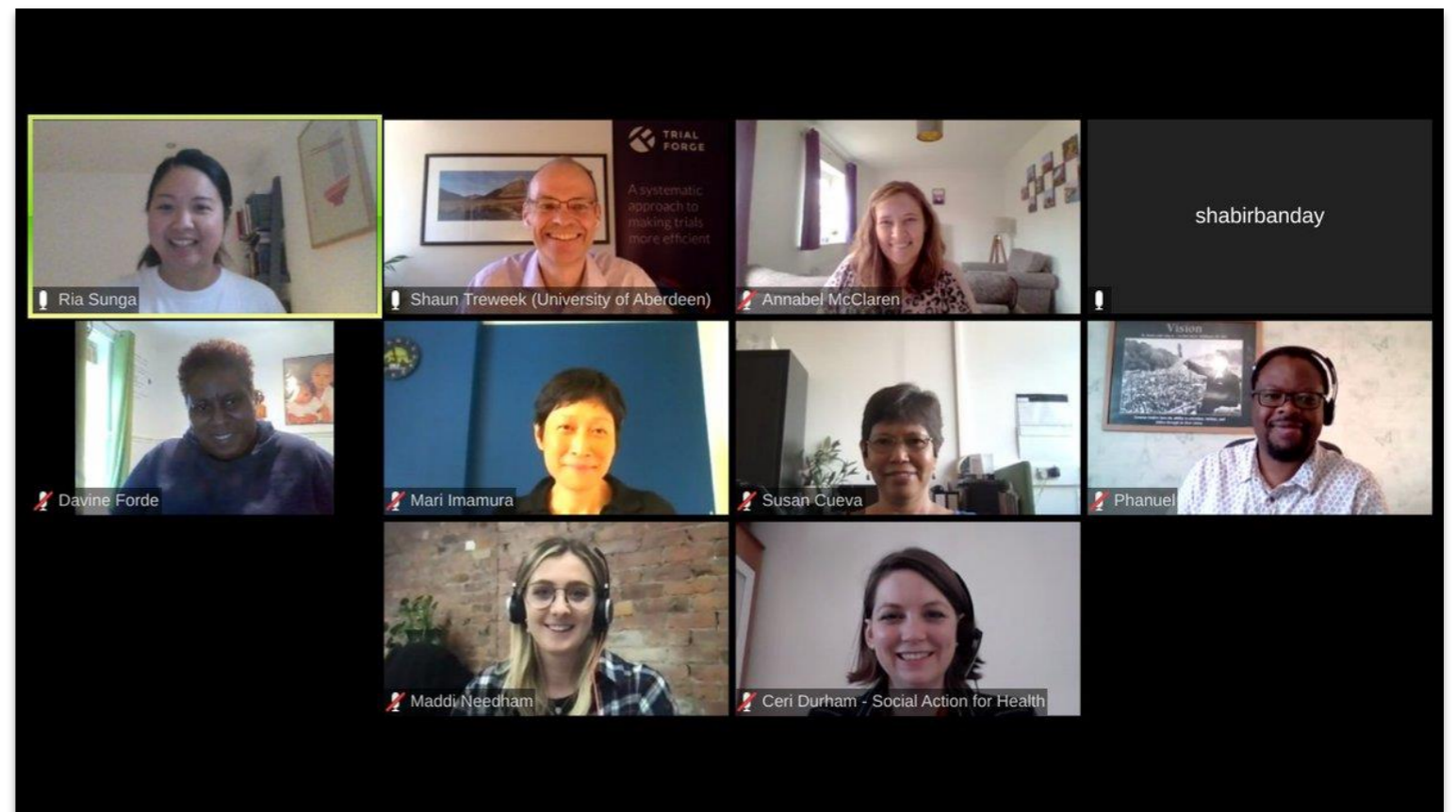
This evidence was then put into Evidence to Decision Frameworks

We did a lot of talking..



We discussed what was in the Frameworks for about 12 hours, spread over five, 2-hour meetings and a few shorter meetings. All were done online.

This gave us up-to-the-minute perspectives and insights from UK ethnic minority community organisations.



Evidence to Decision Frameworks



HSRU



Prepared by: S. Treweek Date: 2/8/2021

Evidence to decision framework - health system and public health

How important is trust in organisations as a factor affecting COVID-19 vaccine uptake by ethnic minority groups?

Problem: Uptake of the COVID-19 vaccines is lower in some ethnic minority groups

Background: Although uptake of the COVID-19 vaccines in the UK is generally high, uptake is lower among some ethnic minority groups [1,2]. For example, by 27/7/2021, 90% of White 50-54 year olds had been vaccinated, compared to, for

Factor influencing

organisation

Main outcome

Setting: UK

Perspective:

'The 'hostile environment' rhetoric in the UK is an important influencer of trust regarding a person's position in society. This is not just about vaccines and NHS but e.g. Windrush, Grenfell. These set the tone for minority ethnic voices not being heard or believed.'

Subgroup comparisons

CRITERIA	JUDGEMENTS	RESEARCH EVIDENCE	COMMENTS
<p>PROBLEM</p> <p>Is the factor a important?</p>	<p>Don't know <input type="checkbox"/> Varies <input type="checkbox"/> No <input type="checkbox"/> Probably no <input type="checkbox"/> Probably yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/></p> <p>Detailed judgements (see 'COMMENTS')</p>	<ul style="list-style-type: none"> In a UK study done in 2020/21, 23 community leaders talking about the COVID-19 vaccines raised widespread distrust of government and the NHS as a problem, though it is more entrenched in some communities than others. Past policy ('hostile environment') contributed to this "[In the] Turkish speaking community, they have seen people die in hospital but not at home, so there is no trust in the NHS." [#grey24; Focus groups; study quality high] [3]. A US study done between 2012 and 2014 with 119 adults, with a range of different ethnic groups talking about flu vaccination found trust in pharma to be low with almost all participants expressing concern that pharma favoured profits over the needs of the public. "These people, it's a business. They don't make money curing you. They make money selling you drugs. They're drug dealers" (African American). In some cases concerns about profits were larger than concerns about the vaccine. Trust in government varied with White people trusting institutions but questioning competency while African Americans were less trusting and questioned government motives "I have major trust issues with my government across the board...a lot of people are trust motivated. If you don't have my trust then I'm not going to pay you much mind no matter what you say" (African American). There was a suggestion that trust may be greater in younger people "However, most of us, I'm glad to say, or it seems, have 	<ol style="list-style-type: none"> Personal experience is important: it can support or reduce trust, depending on whether it is good or bad. A central feature of trust re. vaccination is the consistent pattern of inequality experienced by minority groups prior to Covid-19 (women in childbrth, cancer care etc). Improvement has been talked about for a long time but not addressed so why trust an organisation now? They did not deal with our previous concerns. The 'hostile environment' rhetoric in the UK is an important influencer of trust regarding a person's position in society. This is not just about vaccines and NHS but e.g. Windrush, Grenfell. These set the tone for minority ethnic voices not being heard or believed. The growing far right

To cut to the chase: Factors



HSRU

What factors affect vaccine uptake?

1. **A lack of trust** in organisations and individuals who advise on vaccine uptake.
2. **Little culturally and linguistically appropriate information** that covers issues of concern, including an honest discussion of benefits and harms.
3. **Inconvenient location and timings** of vaccine appointments.

How sure are we these factors matter?

We are certain these factors are very important.

To cut to the chase: Strategies



HSRU

What strategies might increase uptake of the COVID-19 vaccine?

1. **Using trusted messengers** to provide information.
2. **Tailoring the message** culturally, linguistically and ensuring relevant issues are covered, so that people get information that directly addresses their concerns.
3. **Providing flexible venues and times** for vaccination.

How sure are we these strategies will work?

We expect these strategies to increase vaccine uptake but are uncertain about the size of that increase.

What are the key take-home messages?



1. **Improving trust, creating culturally and linguistically tailored information** that addresses people's concerns, and **offering vaccination at convenient places and times** are key strategies for successful vaccine delivery. Any approach to increasing vaccine uptake in ethnic minority groups will have to directly consider all three strategies.



2. **Ethnic minority groups are not the same**, and therefore cannot be grouped together. There are differences between and within communities, therefore any meaningful approach to increase vaccination in ethnic minority groups must directly involve organisations that understand and have the trust of the communities concerned.



3. **Strategy evaluation** should be a core component of vaccine delivery programs.

Equity, Diversity and Inclusion Student Seminar



EDI initiatives from Institute of Applied Health Sciences and the School

*Aravinda Guntupalli, Shaun Treweek,
Sarah Champagne and Vivian Magboh*

Equity, Diversity and Inclusion Student Seminar



IAHS

- The EDI Committee
- The Athena Swan award
- The EDI Implementation Plan

- <https://www.abdn.ac.uk/iahs/equality-diversity-inclusion-2345.php>

The screenshot displays the website for the Institute of Applied Health Sciences (IAHS) at the University of Aberdeen. The page is titled "Equality, Diversity & Inclusion" and features a navigation menu with options like "About", "Equality, Diversity & Inclusion", "Research", "Academic Groups", "Teaching", "Research Support", "IAHS Executive", "News", and "Events and Seminars". The main content area includes a breadcrumb trail: "University Home / The Institute of Applied Health Sciences / Equality, Diversity & Inclusion". Below this, there is a sidebar with a list of links: "University Home", "The Institute of Applied Health Sciences", "Equality, Diversity & Inclusion", "EDI Committee", "Contact", and "Athena SWAN". The main text area contains a heading "Equality, Diversity & Inclusion" followed by a paragraph stating: "The Institute of Applied Health Sciences is committed to promoting equality and diversity within an inclusive working and learning environment. This is key to all we do." Below this, another paragraph states: "The Institute has an Equality, Diversity and Inclusion Committee that has responsibility for overseeing the implementation of Institute, School and University equality, diversity & inclusion-related policies, including the development of Institute policies and practices to ensure the study and work environment for all students and staff is inclusive, tolerant and accessible. We work together with other groups in the University, and especially the [School Equality, Diversity and Inclusion Committee](#) to ensure that policy becomes practice." On the right side, there is a dark blue box with the heading "EDI related policies" and the text: "The University has a range of policies to promote equality, diversity and inclusion and the Institute of Applied Health Sciences implements them all." At the bottom of this box, there is a link for "More information".

Equity, Diversity and Inclusion Student Seminar



School of Medicine, Medical Sciences and Nutrition

- The EDI Committee
- The EDI strategy
- Race Equality Champions
- The School Athena Swan Committee

- <https://www.abdn.ac.uk/smmsn/equality-diversity-inclusion/edi-related-policies-frameworks-1365.php>

The screenshot displays the University of Aberdeen website. The top navigation bar includes links for Study, About, Research, Alumni & Giving, Business, and Quick Links, along with a search icon. The main header identifies the page as 'The School of Medicine, Medical Sciences and Nutrition'. Below this, a secondary navigation bar lists 'About', 'Equality, Diversity & Inclusion', 'Undergraduate Study', 'Postgraduate Study', 'Research', 'Clinical Academic Training', 'News', and 'More'. The breadcrumb trail reads: 'University Home / The School of Medicine, Medical Sciences and Nutrition / Equality, Diversity & Inclusion / EDI Related Policies, Frameworks & Strategies'. A left-hand sidebar menu shows a hierarchy: 'University Home', 'The School of Medicine, Medical Sciences and Nutrition', 'Equality, Diversity & Inclusion', 'School Equality, Diversity and Inclusion Committee', 'School EDI Strategy', 'The Athena SWAN Charter', 'Race Equality Champions', 'Care Support Fund', and 'EDI Related Policies, Frameworks & Strategies'. The main content area features the title 'EDI Related Policies, Frameworks & Strategies' with a yellow underline. Below this is the sub-heading 'Policies, Frameworks & Strategies for Staff & Students' and the section 'Discrimination, Harassment & Bullying'. The text under this section states: 'It is the responsibility of all members of staff to behave courteously and respectfully towards each other and to ensure that their behaviour does not cause unnecessary offence or upset. If you consider you have been the victim of bullying or harassment or wish to report an incident of bullying or harassment, you should use the Staffing Policy Against Discrimination, Harassment and Bullying in the Workplace found [here](#).' The section 'Flexible Working' is partially visible at the bottom.

Equity, Diversity and Inclusion Student Seminar

University of Aberdeen

- The EDI Committee
 - Race Equality Champions
 - Race Equality Strategy Group
 - LGBTQIA+ champions
-
- [Antiracism Strategy.pdf](#)
(abdn.ac.uk)
 - We adopted the [Jerusalem Declaration on Antisemitism](#) this year, working with Jewish students to achieve this and support their safety and security on campus



University of Aberdeen
Antiracism Strategy
2022-2025

BOLD, HONEST, ACCOUNTABLE, EMPATHETIC

Equity, Diversity and Inclusion Student Seminar



Race Equality resources and support

- <https://www.abdn.ac.uk/staffnet/working-here/race-equality-12589.php>

The screenshot shows a navigation menu on the left with the following items: University Home, StaffNet, Working Here, Equality, Diversity and Inclusion, Race Equality (highlighted), Community, Resources, and Support. The main content area is titled "Race Equality" and features a quote from Professor George Boyne: "As a university which strives to be open and welcoming, diverse and inclusive, we recognise the reality of systemic racism, both in wider society, and within our institution." Below the quote is a portrait of Professor George Boyne and a paragraph stating: "We are committed to stamping this out as a matter of priority and have a plan of action in place dedicated to tackling racism and creating an anti-racist university. We will lead this action with passion, taking a whole-university approach, encouraging our colleagues and students to engage in open discussions on race equality. Racism has no place, and will not be tolerated, in our University or across the sector." Below this is the text: "Professor George Boyne, Principal and Vice-Chancellor". At the bottom of the page, there is a section for "Race Equality Charter Survey Results" with the Race Equality Charter logo and a button that says "Download the REC Survey Report".

Equity, Diversity and Inclusion Student Seminar

Decolonising and Enhancing Curriculum

- https://www.abdn.ac.uk/staffnet/governance/decolonising-and-enhancing-the-curriculum-steering-group-13989.php?dm_i=5EH4,NJ64,3AGSTC,2UB5Y,1

Purpose

A steering group of the University Education Committee that develops an approach which addresses embedded racial stereotypes and/or limited perspectives in the curriculum and supports Schools to develop learning materials which offer students a rich diversity of views and role models.

Remit (To be reviewed annually at first meeting of committee cycle)

1. Develop a partnership and collaborative approach to working practices and the formulation of strategy, policies and guidance for the delivery of the purpose of the group.
2. Develop a set of principles and definitions that articulate the vision for the work of the group and the wider institutional goals associated with the group's purpose.
3. Undertake a scoping exercise to understand the existing curriculum practices, and from there identify both good practice and gaps for action.
4. Put in place an institutional action plan for the work, and monitor progress on the action plan.
5. Support Schools and Professional Services to develop their own plans to address the agreed vision and principles.
6. Develop a good practice toolkit and staff training for Schools so that they can:
 - a. Utilise evidence-based approaches to support their curriculum work
 - b. Gain literacy on decolonising curricula
7. Develop internal and external partnerships that will enrich the work of the group and enable the sharing of good practice.
8. Put in place an evaluation strategy.

Equity, Diversity and Inclusion Student Seminar

Exhibition exploring the North-East's links to the slave trade

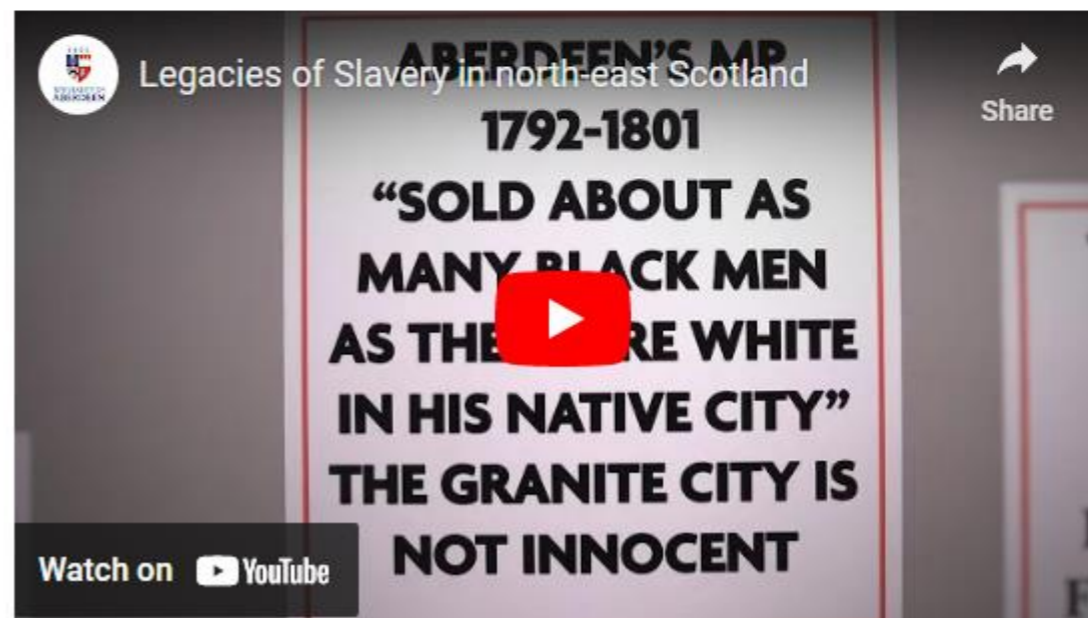
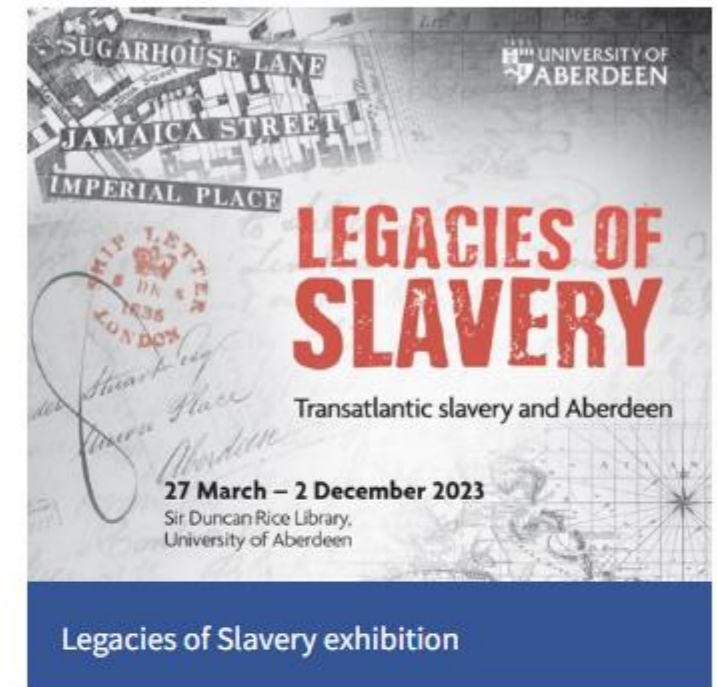
- <https://www.abdn.ac.uk/news/16867/>

Exhibition to explore North-East's legacies of slavery

27 March 2023

A new exhibition exploring the North-East's links to the slave trade will open at the University of Aberdeen.

It forms part of the University's commitment to improve understanding of both the institution's own colonial legacy and the wider region's connections to the enslavement of people. The exhibition draws on a two-year research project which has investigated the legacies of slavery at the University and the broader region. This exhibition is a step in recognising the role of Aberdeen and North-East Scotland in this history, and how its legacy continues today.



Equity, Diversity and Inclusion Student Seminar



Discussion Questions?

Equity, Diversity and Inclusion Student Seminar



How could we make students with different identities feel more comfortable in IAHS?

What avenues would make it easier for students to flag issues or provide feedback to IAHS on EDI matters?

How could we make course modules more inclusive of extra academic resources from the Global South and minority groups?

How could we make IAHS orientation activities more inclusive?

How could IAHS promote more student equity or equality?

Are there any EDI initiatives from your past work/school place that you recommend IAHS incorporate?