Reflecting back on my 40-year career as a nurse, teacher and researcher, it is ironic that I spent a significant amount of time investigating racism against overseas nurses (ONs) in the NHS while ignoring my own white privilege.

My belief that racism was an individual act blinded me to systemic, structural and institutional racism.

I have come to understand that racism in British society and therefore, nursing, happens directly and indirectly.

It is a system of discrimination, oppression and white privilege which is painfully obvious to BAME people in everyday acts of micro-aggressions and injustices but goes unrecognised by whites who benefit from their white identities and positioning.

It is not down to an individual's actions, beliefs or attitudes.

Racism is built into social structures and often invisible. Racism rests on white privilege which blinds white people to their own colour, rendering them unaware of their whiteness and their privilege.

By failing to acknowledge my own whiteness and white privilege, by believing only bad people are racists, I denied racism existed in its fullest extent, that is, in everyday acts of oppression as well as in systemic white privilege.

My recognition of how racism was reproduced in the NHS came during the course of three studies<sup>1</sup> into international nurse migration.

I was appalled at how ONs were treated as marginal members of society with fewer access to rights than everybody else<sup>2</sup>.

ONs in both studies routinely described having their passports confiscated either when they arrived at a care home for several days, or when disciplinary action was taken against them.

In the second study<sup>3</sup>, we wrote about the ONs' experiences of bullying and racism on the adaptation course they were required to complete before registering with the Nursing & Midwifery Council (NMC).

We showed how ONs were marginalised; seen as 'slow' and not good learners by their mentors who failed to have any consideration of different cultural approaches to learning.

We concluded that as learners on the adaptation course, ONs were bullied and racially discriminated towards by mentors and managers within a racist system.

During the third study <sup>4</sup>some 10 years later I was again shocked at the extent of continuing racism in the NHS. ONs were employed by large well-known NHS hospital trusts as healthcare assistants (HCAs) rather than as registered nurses because they repeatedly failed to pass language tests.

The ONs considered that their skills were consistently taken advantage of by their employers who could rely on them as HCAs to work effectively as registered nurses.

They also felt that there was no support to learn English and what was available was expensive on an HCA salary.

Finally, they believed that the language tests themselves were too difficult to pass with no social interactions with English speakers.

In effect, they felt exploited by a racist system.

I was shocked that discrimination was still as powerfully described by ONs in 2016 as it was in the two earlier studies. In the second study, a trade union representative told us: "[ONs] are recruited under this ethical policy but it's not ethical and it means these people are treated badly, they are exploited and at risk. I think some of these nurses disappear, they are exploited, in debt and powerless and have no choice."

I have found it is painful and difficult to reflect on my whiteness, the privilege whiteness entitles me to and the ways in which I have been not only part of a racist system but inadvertently and indirectly racist myself.

I interpret my failure to understand my own position in a white supremacist society as a defence against the pain of recognising my own racism, or white fragility. I suggest that as a profession, at least in the UK, nurses have some way to go to do this collectively; to really understand the dynamics of racism in practice, education and research.

The paper - *Reflections on whiteness: racialised identities in nursing* – has been peer reviewed and published in the <u>Nursing Inquiry</u> journal.

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<sup>4</sup> Allan H T and Westwood S (2016) Perceived barriers to UK nurse registration among non-European nurses. Nursing Standard. 30, 37, 45-51. doi: 10.7748/ns.30.37.45.s41

<sup>&</sup>lt;sup>1</sup> Allan, H. T. (2022) Reflections on whiteness: racialised identities in nursing. Nursing Inquiry, 29 (1), e12467. pp. 1-9. ISSN 1320-7881

<sup>&</sup>lt;sup>2</sup> Allan, H. T., Larsen, J., Bryan, K. & Smith, P. (2004). The social reproduction of institutional racism: internationally recruited nurses' experiences of the British Health Services. Diversity in Health and Social Care, 1, 2, 117-126.

<sup>&</sup>lt;sup>3</sup> Allan, H. T., Cowie, H. & Smith, P. (2009). Overseas nurses\_experiences of discrimination: a case of racist bullying? Journal of Nursing Management, 17, 898–906 doi: 10.1177/0969733010368747