

A woman with dark hair, wearing glasses, a white lab coat, and a white hairnet, is looking down and to the left. She is in a factory or industrial setting, with metal frames and equipment visible in the background. The lighting is somewhat dim, typical of an indoor industrial environment.

**TUC**

Changing the world  
of work for good

# Is racism real?

**A report about the experiences of Black  
and minority ethnic workers – polling  
findings**

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## Section 1

# Executive summary

For many years trade unions have consistently campaigned against all forms of racism and discrimination in the workplace. The TUC believes that racism is real in our workplaces. While considerable research has been conducted on access to employment, there is not much data available on the experiences of Black and minority ethnic (BME) people in the workplace.

Every worker should be treated fairly at work and have a decent, good-quality job. However, experiencing racism at work is part of everyday life for many BME workers. And this racism is often hidden as it is very rarely talked about at work.

This report presents findings from polling commissioned by the TUC from ICM. It was conducted with a panel of 1,003 BME workers

The report shows that BME workers face many forms of racism and discrimination such as: verbal abuse; racist comments and jokes; bullying and harassment; physical violence; being singled out and treated differently; or discriminated against. Our findings show that many BME workers do not report their experience formally and that this has a very negative effect on their general wellbeing, mental health and performance at work.

### Key findings of the polling results

- More than a third (37 per cent) of Black or minority ethnic (BME) workers have been bullied, abused or experienced racial discrimination by their employer.
- 19 per cent of BME workers have experienced discrimination such as being denied training or promotion.
- 15 per cent of BME workers polled have experienced verbal abuse and 16 per cent of BME workers have experienced bullying or harassment at work.
- 4 per cent of BME workers say they've experienced assault or physical violence in the workplace in the past 5 years.
- BME people reported that the discrimination they experienced at work was based on their race or ethnicity. However, when reporting assault or violence, most BME workers reported that they experienced this type of assault because of their gender.
- Direct managers were most likely to be the main perpetrators of assault and physical violence, bullying or harassment as they were for BME workers facing discrimination. The racist remarks, opinions, and jokes were mainly perpetrated by colleagues.
- 43 per cent of BME workers did not feel able to report their experience of discrimination to their employers and 38 per cent did not report incidents of bullying and harassment.

- BME workers are more likely to confide in a friend, colleague, or trusted family member – inside or outside of work – than to make a formal complaint. A substantial minority say they did nothing in response to the acts they experienced.
- Only 17 per cent of BME workers who have faced discrimination say they reported what happened to their employer, and that it was taken seriously and dealt with satisfactorily.
- The most commonly reported effects of racial harassment and discrimination were its impact on respondent's performance at work and the negative impact on their mental health. Respondents reported wanting to leave their jobs, but mostly not being able to due to financial impact.
- 29 per cent of BME workers that had suffered assaults and 28 per cent of those that had experienced bullying and harassment at work felt that they had no option but to leave.

### **BME women's experience of racism and discrimination**

- BME women face double discrimination through racism and sexism. 37 per cent of women stated race and gender as the reason for experiencing verbal abuse.
- 42 per cent of BME women did not feel able to report their experience of discrimination to their employers and 44 per cent did not report incidents of bullying and harassment.
- 41 per cent of BME women who had experienced bullying and harassment in the workplace said they wanted to leave their jobs but could not afford to.
- 37 per cent of BME women had left a job as a result of assault or physical violence.
- 57 per cent of BME women polled reported that the bullying and harassment they experienced at work affected their mental health.

### **Young workers' experience of racism and discrimination**

- The type of jobs young BME workers are concentrated in plays a key role in the racism they experience. Most younger workers (18- to 24-year-olds) polled had experienced detrimental racism and discrimination at work. Our polling shows that BME young workers are more likely than workers aged over 45 to be in an insecure job, either on a zero-hours contract (26 per cent), facing underemployment (22 per cent) or having their hours reduced at short notice (27 per cent).
- BME workers in our polling who were aged under 34 were more likely than older workers to have had racist comments directed at them or heard them directed at someone else. They were also more likely to have seen racist material being shared online.
- 39 per cent of 18-to 24-year-olds who experienced bullying or harassment reported the perpetrator as a work colleague and 39 per cent of the same age group stated it was a direct manager.

- 19 per cent of young workers who did raise the issue of verbal abuse were treated less well at work.

This report aims to raise awareness of racial harassment and discrimination as a workplace issue, confirming with statistics the many anecdotes from affected workers we have heard over the years. Racism is real and does still exist in the workplace. It is up to us to highlight this and ensure we continue campaigning to eliminate it.

## Section 2

# Introduction

In December 2016, the TUC launched a major project to gather evidence to raise awareness of racial harassment and discrimination at work and ensure that the voices of BME workers are heard. The project is intended to serve as a compelling reminder of the need to tackle racism at work and to call for policy changes that would begin the process of elimination of racism and discrimination.

Previous government initiatives on race discrimination in the labour market have tended to focus on access to work rather than examining race discrimination in the workplace.

Prior to this project the TUC produced reports that highlighted the structural and institutional problems that Black workers face in the labour market. The *Living on the margins*<sup>1</sup> and the *Insecure work and ethnicity*<sup>2</sup> reports highlighted the disproportionate impact of the growth of insecure work on BME workers. The report *Black, qualified and unemployed*<sup>3</sup> analysed the employment rates of BME workers and white workers whose highest level of qualification are the same and showed that black workers with degrees earn almost a quarter less than equivalently qualified white workers.

The government-commissioned Ruby McGregor Smith review<sup>4</sup> published in February 2017 looked at the barriers BME people face progressing in the labour market. The TUC submitted substantial evidence highlighting concerns across a range of areas including the disproportionate levels of underemployment and casualised work faced by BME workers.

In April 2017 the TUC published an interim report *Let's talk about racism*<sup>5</sup>. It was a brief summary of an online survey of union members and other working people about their experiences of racism and discrimination in the workplace in the last five years. More than 5,000 people responded. The TUC acknowledges the help of Centre for Dynamics of Ethnicity at the University of Manchester in analysing this.

The findings from that report showed that:

- Racial harassment still occurs in many workplaces. BME workers reported that they faced many forms of racial harassment in the workplace, including: bullying; racist abuse and violence; hearing racist remarks or opinions; seeing racist material online and on posters, graffiti or leaflets. The main perpetrator was their manager.

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<sup>1</sup> <https://www.tuc.org.uk/sites/default/files/LivingontheMargins.pdf>

<sup>2</sup> [https://www.tuc.org.uk/sites/default/files/Insecure%20work%20and%20ethnicity\\_0.pdf](https://www.tuc.org.uk/sites/default/files/Insecure%20work%20and%20ethnicity_0.pdf)

<sup>3</sup> <https://www.tuc.org.uk/sites/default/files/BlackQualifiedandunemployed.pdf>

<sup>4</sup> <http://touchstoneblog.org.uk/2017/03/racism-at-work/>

<sup>5</sup> <https://www.tuc.org.uk/sites/default/files/LetstalkaboutRacism.pdf>

- BME workers experience significant discrimination in the workplace, including excessive surveillance and scrutiny by colleagues, supervisors and managers. Respondents told us that they have been denied promotion, development or acting-up opportunities and training and some have been unfairly disciplined because of their race.
- It is clear that large numbers of BME workers are less likely to formally raise issues about racism at work with employers. Most respondents - especially women respondents – prefer to speak to family members, friends or work colleagues. The findings show that many BME workers do not have the confidence that their employer would deal with their complaint satisfactorily and some worry that making a complaint risks them being identified as a troublemaker or even being forced out of their job.
- Racism at work has a huge impact on BME workers' wellbeing. The survey showed that experiencing racism at work significantly impacts on BME workers' mental health and causes stress. For many, the experiences had a negative impact on their work and some had to take time off.

This report presents the findings from a representative poll of more than 1,000 British BME workers conducted by ICM. Further reports will follow on the qualitative finding of our online survey of union members.

Section 3

## BME workers' experience of insecure work

The TUC believes that BME workers' access to and progress while in employment plays an important role in the wider participation of black and minority communities in society. Our report *Insecure work and ethnicity* shows that BME workers are persistently disadvantaged in the labour market. Overall the employment rate for white people (76.1 per cent) is significantly higher than for those from minority ethnic backgrounds (64.2 per cent). The TUC believes that race discrimination is central in explaining these inequalities, compounding the lack of access to employment opportunities for BME workers.

There are over three million BME employees in the UK, of whom nearly a quarter of a million are in a zero-hours or temporary contract. The report found that 1 in 13 BME workers are in insecure work compared to 1 in 20 white employees. People from the black community were twice as likely as white workers to be in temporary work, and have experienced the largest jump in the number of people in temporary jobs between 2011 and 2016, with a sharp rise of 58 per cent compared to an overall increase of 11 per cent. Our analysis also found that almost 1 in 20 black workers are on a zero-hours contract compared to the national average of 1 in 36 workers. More strikingly, black women had seen an increase of 82 per cent in temporary contract work in the last five years.

**Table 1: Responses to polling “Have you experienced any of the following at work in the last five years”**

	18–24	25–34	35–44	45–54	55–64	65+	Overall responses
Having to work two or more jobs for financial reasons	32%	23%	14%	21%	10%	13%	20%
The hours worked being changed at short notice	27%	20%	16%	13%	8%	9%	17%
Working on a zero-hours contract	26%	17%	12%	10%	2%	10%	13%
Not being given adequate hours of work	22%	16%	10%	10%	6%	–	12%
Struggling to earn enough to afford basic living costs	14%	18%	14%	16%	1%	5%	15%
Being employed through an agency in the same workplace for more than 3 months	6%	15%	10%	8%	5%	8%	11%

As you can see from Table 1, looking at BME young workers polled, over a quarter of 18- to 24-year-olds are on a zero-hours contract. BME young workers are more likely to be underemployed and to have their hours changed at a short notice compared to older workers. 25- to 34-year-olds were most likely to struggle to earn enough to afford basic living costs.

The TUC report *Living on the margins* revealed that insecure work particularly affected young BME workers, with 15.2 per cent of young BME workers in non-permanent jobs compared to 8.4 per cent of young white workers. BME young workers aged 20 to 29 are almost twice as likely to be working on a temporary basis as a white worker.

A young BME female told the TUC her experience as a part-time retail worker:

*I was constantly bullied and given lesser number of hours than all my other colleagues as well as being given the worse jobs, e.g. all the cleaning tasks. I could tell it was race related. I was unfairly disciplined after asking for help to find an item. I didn't know asking for help was against the rules. I was also subjected to surveillance like I was going to steal or something.*

The rise in insecure work has had an adverse effect on the inequalities that BME workers face at work. BME workers are more likely to be in a zero-hours contract and BME young workers are more likely to be underemployed and have their hours changed at short notice.

## **Recommendations**

The TUC believes that urgent measures need to be taken to tackle the casualisation crisis faced by BME workers and is therefore calling for the following:

The government should tackle the exploitation faced by BME workers in non-permanent work by improving the rights for individuals on zero-hours contracts and agency workers.

Government should:

- ban the regular use of zero-hours contracts, and ensure all workers receive premium pay for any non-contracted hours and compensation when shifts are cancelled at short notice
- take the lead in tackling casualisation by ending the use of agency, temporary, fixed-term and zero-hours contract workers in national and local government services
- reform the rules on employment status to ensure that all workers benefit from the same employment rights, including statutory redundancy pay, protection from unfair dismissal and family-friendly rights. To this end, employment status law should be modernised, putting an end to the current two-tier workforce.

## Section 4

# Experiences of racial harassment at work

Over the years unions have consistently reported that racial harassment and bullying at work is disadvantaging BME workers in the workplace. BME workers who experience racial harassment are more likely to feel less confident at work. As we stated in our interim report, the Crown Prosecution Service defines a hate incident as any incident that the victim, or anyone else, thinks is based on someone's prejudice towards them because of their race, religion, sexual orientation or disability or because of their transgender status. It says that "racist and religious crime is particularly hurtful to victims as they are being targeted solely because of their personal identity, their actual or perceived racial or ethnic origin, belief or faith. These crimes can happen randomly or be part of a campaign of continued harassment or victimisation."

However, a racist incident in the workplace shouldn't have to be a crime in order to be taken seriously by employers. They can be any remark or form of discriminatory action aimed at, or about, a person or group. The polling results will show it is not only employers, line managers or colleagues who may be abusing or harassing workers: it can be clients, customers or those they came into contact with in the course of their work.

### Verbal abuse

Overall 15 per cent of BME people polled had experienced some form of verbal abuse at work. When we look in more detail at this figure, nearly half (47 per cent) of respondents to the polling said the verbal abuse experienced was related to their race.

When looking at the verbal abuse BME workers experienced by age the polling showed that:

- The groups most likely to say that they had experienced verbal abuse because of their race or ethnicity were 25- to 34-year-olds. 50 per cent said that the abuse was because of their race or ethnicity, and those over 55 (although the numbers of respondents among the older group was small).
- BME workers under 34 were more likely to have heard racist remarks directed at them or someone else and to have seen racist remarks being shared.

**Table 2: Main perpetrator of any form of verbal abuse**

	<b>Verbal abuse</b>	<b>Hearing racist remarks, opinions or jokes directed at you</b>	<b>Hearing racist remarks, opinions or jokes directed at someone else</b>	<b>Seeing racist material being shared</b>
My direct manager or someone else with direct authority over me (e.g. a regional manager)	21%	11%	11%	10%
Another manager	14%	13%	13%	15%
A colleague	34%	43%	45%	35%
A customer, client or patient	24%	25%	19%	15%

Table 2 shows that work colleagues are the main perpetrators for all forms of verbal abuse including hearing racist remarks directed at BME workers, racist remarks heard by someone else or sharing racist material in the workplace. BME young workers are more likely to hear racist banter being directed at them and to see racist material in the workplace.

37 per cent of women reported that race and gender was the reason for the verbal abuse they received. BME women face the double disadvantage of both race and sex discrimination in the workplace. BME women have been consistently concentrated in low-paid jobs in the public and private sector, including jobs in cleaning, caring, catering and retail. They face huge barriers in accessing full-time, permanent jobs.

Angela told us her experience of racism at work:

*Once a colleague said to me after I tried to explain that dreadlocks is a cultural hairstyle therefore it's rude to say they are disgusting. My colleague responded by saying "Oh, you are not one of those people that harp on about 'cultural appropriation'."*

Angela found this very offensive. She felt attacked and uncomfortable.

*The question was asked in an aggressive way. My colleague was not asking because she wanted to understand but instead she wanted to humiliate me.*

Angela has also experienced verbal abuse from her boss:

*My boss has shouted at me and sworn at me in front of other colleagues, something that he has never done to any other colleague. My boss set the tone so other staff also started acting disrespectfully toward me.*

Race is the most common reason given for all forms of verbal abuse that BME people experience at work. BME women have to deal with sexism and racism at work, which is a damaging experience for women.

## Bullying or harassment

The TUC believes that racial harassment and bullying is present in the workplace and that the problem has far from disappeared. This is a major barrier to BME workers in progressing at work.

ACAS defines bullying as: *"Offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means that undermine, humiliate, denigrate or injure the person. Harassment is unwanted conduct that has the purpose or effect of violating a person's dignity; or creating an intimidating, hostile, degrading, humiliating or offensive environment for that person."*<sup>6</sup>

Overall, 16 per cent of BME workers polled reported experiencing bullying or harassment at work. Nearly half (46 per cent) of BME people who have experienced bullying or harassment revealed that this is because of their race.

27 per cent of women reported that gender was a factor in the bullying or harassment they experienced. The TUC's report on sexual harassment *Still just a bit of banter?*<sup>7</sup> showed that BME women's experience of sexual harassment is often bound up with racial harassment. BME women face a dual disadvantage at work that men don't have to deal with.

*Bullying and harassment of BME staff in the NHS is an issue of real concern to the Royal College of Midwives most of whom are women. NHS England published their first report of the results of the Workforce Race Equality Standard (WRES). This revealed worrying findings about the proportion of BME staff in the NHS facing bullying and harassment. In 75% of all acute NHS trusts (where most midwives work) a higher percentage of BME staff report experiencing harassment, bullying and/or abuse by staff than white NHS staff.*<sup>8</sup>

BME workers under the age of 24 and older workers aged 55–64 were more likely to report that the bullying or harassment experienced is because of their race.

The main perpetrator reported by BME workers who experienced bullying or harassment is a direct manager (42 per cent) or a work colleague (36 per cent). The only groups not to report that the main perpetrator as a direct manager were 35–44 year olds and 55–64 year olds, who were more likely to report the main perpetrator as a colleague.

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<sup>6</sup> <http://www.acas.org.uk/media/pdf/o/c/Bullying-and-harassment-at-work-a-guide-for-employees.pdf>

<sup>7</sup> <https://www.tuc.org.uk/sites/default/files/SexualHarassmentreport2016.pdf>

<sup>8</sup> <https://www.rcm.org.uk/news-views-and-analysis/news/rcm-highlights-bullying-of-bme-nhs-staff-at-tuc-black-workers>

Aisha had a disagreement with a work colleague and was bullied when she spoke out against their racist views. She described her experience to the TUC:

*I was bullied by four colleagues because I spoke out. Two colleagues in senior positions stood up for me but it would have been dreadful if they hadn't. I don't know what would have happened. Other colleagues witnessed this series of incidents but didn't speak out.*

BME workers reported race as the main reason for their experience of harassment and bullying, with 46 per cent of BME workers giving this as the reason. BME women were also likely to say that their gender was a factor, with 27 per cent reporting that this was the main reason, though 32 per cent said it was because of their race.

### **Assault or physical violence**

While only four per cent of those polled reported that they had experienced assault or physical violence, just one example of assault or physical violence in the workplace is one too many and should end. The TUC believes that it is the employer's responsibility to ensure every worker is protected from any form of assault or physical violence in the workplace.

The polling showed that:

- 36 per cent of BME workers said that the assault or physical violence they experienced was because of their race.
- Over half (51 per cent) of both women and men who had experienced assault or physical violence reported this was because of their gender.
- BME people who experienced assault or physical abuse were most likely to report that the main perpetrator is their direct manager: a quarter reported this.
- Women were more likely than men to report the perpetrator as a direct manager (35 per cent compared to 15 per cent).
- The next most common perpetrator was a customer or client, reported by 23 per cent of both men and women.

Evidence from the polling shows that women continue to experience racism because of their gender and ethnicity. When analysing the polling responses for assault or physical violence. Just over half of BME women reported that their experience was because of their gender.

The main perpetrators of violence reported by respondents are managers and customers or clients. It is unacceptable that frontline workers such as nurses, care workers, retail staff and transport workers face abuse from members of the public when they are at work.

Dev told the TUC about his experience of abuse at work, mainly racist remarks from the public:

*This usually happens when people are drunk or under the influence of drugs. I have experienced quite a few incidents mostly on the weekends and in the night.*

*A few months ago a man was on the wrong train and he was drunk. I had to get involved as he was smoking on the train and refused to get off. He said to me: "What are you doing here? You are a black bastard."*

Dev and his colleagues ended up having to call the police as the man wasn't listening when they told him to get off the train.

*When the police arrived they asked me if I wanted to press charges and I said yes."*

Dev also reported the incident internally and it was followed up by the duty manager, who made contact with control and the transport police. Dev continues:

*Sometimes this makes me feel bad. I'm only trying to do my job. This happens quite often, which is not very nice.*

## **Recommendations**

The TUC believes that:

- Employers should have a strong equality, diversity and dignity policy that explicitly includes zero tolerance for racism and makes clear that they will support all staff who raise concerns about racism and protect staff who are subjected to racial abuse violence.
- Government should legislate to make employers responsible for protecting their workers against racism by third parties, such as clients, contractors and customers.
- Government should ensure that the Equality and Human Rights Commission has enough funding to ensure that the rules on race discrimination are properly enforced in the workplace and that employers are encouraged to improve their policies and practice.

## Experience of racial discrimination in the workplace

### Racial discrimination

The TUC believes that the structural and institutional nature of racism in the workplace has resulted in BME workers suffering from occupational segregation and being trapped in low-paying jobs. BME workers are often seen through the distorting lenses of prejudices about race, gender and class.

In the labour market BME workers continue to face discrimination. The 2007 report *Moving On Up?*,<sup>9</sup> published by the former Equal Opportunities Commission (EOC) found that Bangladeshi, Pakistani and African-Caribbean women faced “discrimination in the workplace, low expectations and stereotyping”.

Overall, 19 per cent of BME workers who took part in our poll reported they had experienced discrimination. From our polling, the most common form of racism BME workers face at work is institutional racism, which includes being denied training or promotion.

47 per cent of BME workers polled stated the reason for their experience is because of their race. As with other forms of racism, BME women respondents stated the discrimination is because of their gender, with 37 per cent reporting this. And over half (51 per cent) of BME women polled reported the main perpetrator as their direct manager.

**Table 3: Main perpetrator of discrimination at work by age**

	18–24	25–34	35–44	45–54	55–64	Total
My direct manager or someone else with direct authority over me (e.g. a regional manager)	31%	39%	40%	71%	60%	45%
A colleague	41%	21%	26%	7%	12%	22%
Another manager	13%	21%	20%	12%	28%	19%
A customer, client or patient	8%	7%	2%	4%	0%	5%

As you can see from Table 3, nearly half of BME workers reported the perpetrator of discrimination they experienced as their direct manager. Nearly a quarter of BME workers reported the perpetrator as a work colleague.

<sup>9</sup> Equal Opportunities Commission (2007). *Moving On Up? The way forward*.

The table also shows that all but one age group reported their direct manager as the main perpetrator in incidents (for 18- to 24-year-olds it more likely that a colleague is the instigator of incidents that lead to racial discrimination). The discrimination includes being denied training or promotion, excessive surveillance and unfair disciplinary action. It's important to note that a large number of workers over 45 also reported a direct manager as the main perpetrator.

Research by the Greater London Employers' Association<sup>10</sup> showed that higher levels of disciplinary action were being taken against BME workers in eight London boroughs. The report highlighted the connection between poor management and disciplinary action against BME staff in these boroughs. The analyses showed that managers were either hesitant of tackling work problems of BME workers for the fear of being accused of discrimination or BME workers would face disciplinary action for every error they made.

Our findings clearly show that BME people face discrimination at work mainly from a direct manager who has authority over their work, though for young workers it is more likely to be a work colleague. Again, race is the main reason given for the discrimination. While overall race is the main reason given for the discrimination, women stated that gender was also a factor in the way they were treated. BME people aged over 45 are more likely to report the treatment they are being faced with as down to their race and were also more likely to identify the perpetrator as a direct manager.

Union rep Chris, who has represented BME members who have been victims of racism and bullying, told the TUC:

*BME staff at my NHS Trust are four times more likely to be subjected to a disciplinary. The disciplinaries BME staff face are often for what we believe to be insubstantial charges. I believe BME staff are singled out, although this may be subconsciously. The disciplinary panels are mainly all white. This is indicative of institutional racism.*

*BME staff are often on the wards with dangerous patients. Occasionally violent, confrontational incidents happen in acute wards. Sometimes the police are called if a patient is being violent towards staff.*

Chris has been made aware of racist tirades against nurses, doctors and NHS workers by patients. Chris has noticed that the majority of BME staff are in lower-grade jobs and don't often get into higher-graded jobs:

*Band 6 BME workers rarely seem to be promoted across the four Trusts our UNISON branch covers. This is even more apparent in the higher echelons of the organisations – from the evidence of photos in the hospital corridors, it seems the directors of the largest general hospital in Oxford are all white.*

Chris tries to encourage staff to write incident reports but there appears to be a culture of acceptance, and tolerance towards those being racist, on the basis that they are ill.

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<sup>10</sup> Greater London Employers' Association (2000). *The Organisational and Managerial Implications of Devolved Personnel Assessment Process.*

However, these regular occurrences of discriminatory language and behaviour just add further stress and humiliation to those BME staff who are the subjects of the abuse.

As a union rep Chris represents BME lower-graded staff such as cleaners and porters, who often feel demeaned and patronised by managers. Chris explained that the Trust is aware of the racism and bullying BME workers face:

*The racism BME workers face at the Trust is tackled by unions through ongoing campaigns and self-organised group initiatives but the Trust should be doing this. Racism does not seem to be a priority for them. There is little equality and diversity training.*

### **Recommendations**

The TUC believes that employers should:

- publish data on BME pay, recruitment, promotion and dismissal
- set aspirational targets for diversity in their organisation and measure progress against those targets annually
- work with trade unions to establish targets and develop positive action measures to address racial inequalities in the workplace.

Section 6

## Raising the issue

BME workers should feel confident that they can raise issues of concern with their employers and that their complaint will be taken seriously and dealt with satisfactorily. This should also include dealing with any customer or service user who is abusive or threatening.

**Table 4: BME workers reporting racism and discrimination**

	Bullying or harassment	Verbal abuse	Assault	Discrimination	Hearing racist remarks, opinions or jokes directed at you	Seeing racist material being shared
I reported what happened to my employer and it was dealt with satisfactorily	20%	22%	23%	12%	20%	14%
I reported what happened to my employer, but it was not dealt with satisfactorily	23%	24%	31%	17%	20%	22%
I reported what happened to my employer, it was not dealt with satisfactorily and I was treated less well as a result	16%	14%	22%	19%	9%	11%
I did not report what happened to my employer	38%	33%	18%	43%	42%	45%

Table 4 shows the percentage of BME workers who experienced different forms of racism at work who did and did not report the incidents. The figures clearly show that a large number of BME workers are still not reporting the racism they experience to their employers. Nearly half of BME people (43 per cent) who experienced discrimination did not report the incident to their employer.

Table 4 also shows BME workers who do report racism and discrimination often find it is not dealt with satisfactorily. Nearly a third of people who were assaulted at work (31 per cent) stated that they had reported the incident and it was not dealt with satisfactorily. Just under a quarter of BME people who reported their experience of verbal abuse or bullying or harassment stated the incident wasn't dealt with satisfactorily.

- 45 per cent of BME workers who saw racist material being shared did not report this to their employer.

- 42 per cent of BME workers who experienced racist remarks directed at them did not report the incident to their employer.
- 43 per cent of BME workers who experienced discrimination and witnessed racist remarks did not report the incident to their employer.

**Table 5: Raising the issue**

	Bullying or harassment	Verbal abuse	Assault or physical violence	Discrimination
Confided in a friend or colleague at work	47%	40%	30%	38%
Confided in your family, your partner or a friend outside of work	44%	35%	49%	38%
Reported to the police	9%	13%	29%	6%
Reported to the HR department	22%	24%	34%	17%
I did nothing	14%	19%	12%	17%

Table 5 shows that the most common form of action for BME employees who experience racism at work was to speak informally to a work colleague, family or friends. Nearly half of BME workers who experienced bullying or harassment spoke to family or friends.

Table 5 also provides more detail when analysing the reporting levels for each type of racist action. For example, for everyone who stated that they had experienced violence, 29 per cent reported the incident to the police and 34 per cent reported it to HR. The table also shows 19 per cent of BME workers who experienced verbal abuse did nothing.

Looking in more detail at the experiences of women shows that many of them did not report abuse, and when they did report it, it was not dealt with satisfactorily.

Just over a quarter of BME women (29 per cent) who had experienced verbal abuse reported the incident to their employer but it was not dealt with satisfactorily. 36 per cent of women who experience assault or physical violence reported the incident but also felt their complaint wasn't dealt with to their satisfaction and 19 per cent said the same when reporting discrimination.

As we found in the online survey conducted by the TUC, a large number of women simply did not report the different forms of racism and discrimination they had experienced to their employer:

- Nearly half (46 per cent) of BME women did not report the fact that they had seen racist materials being shared.
- 45 per cent of women did not report that they had heard racist remarks directed at them.

- 44 per cent of women did not report the bullying or harassment they had suffered to their employer.
- 42 per cent of BME women did not report discrimination and the same number did not report hearing racist remarks directed at someone else.

One of reasons why many BME women do not report their experience is fear of repercussions at work. For example, 35 per cent of BME women reported being treated less well after reporting the assault and physical violence they had experienced and 16 per cent of those who raised the issue of racist material being shared stated they were subsequently treated less well at work.

The polling showed that workers over 45 were less likely to report the racism they experienced. 72 per cent of 45- to 54-year-olds did not report seeing racist material being shared. 63 per cent of 55- to 64-year-olds did not report the discrimination and 60 per cent of the same age group did not report the bullying or harassment faced at work.

As the findings from the polling show, the most common form of reporting is informally to family members or friends, which mirrors the findings from our interim report. A significant number of BME workers do not report the racism and discrimination to their employer. Many BME women do not have confidence in their employer to deal with their experience to their satisfaction and instead suffer in silence.

A BME woman told the TUC of her experience of racism and reporting:

*The vast majority of which has been subtle, yet powerful. There have been a few incidents. The first incident that stands out is being called a nigger. The perpetrator was defended and aided in spreading lies about me when I reported it.*

Another – Samantha – noticed while working for her most recent employer that there were no prominent BME staff. She said:

*I was the only one. Equality and diversity training was not part of the induction process.*

*I have been bullied and subjected to my professional working space being defiled with food, and objects being smashed and left on my desk. Someone deliberately cut a picture that was on my desk and propped it up against my keyboard.*

When Samantha reported these incidents her head of department was very dismissive and said "why would that be happening to you?" Even after reporting, the bullying continued:

*Everyone had their own printer on their desk. One day my printer was making a loud noise. I opened the printer to find there was a pip from a date fruit stuck in the printer.*

Again, Samantha referred this to her head of department – who was again dismissive. Samantha then spoke to her HR department, who did take it seriously and thought it so important that it wanted to contact the police. It suggested putting cameras around Samantha's desk, but Samantha felt embarrassed and didn't want to attract further attention.

## **Recommendations**

The TUC believes that:

- employers should make sure there is a simple method for BME workers to report racism at work, and make sure that BME workers feel confident that complaints about racism will be taken seriously, acted on and dealt with satisfactorily
- employers should ensure that all staff know that workers who raise concerns about racism will not be victimised for doing so.

Section 7

## Impact of racism at work

A TUC poll on bullying<sup>11</sup> conducted in 2015 showed that nearly half of people polled (46 per cent) said bullying had had an adverse impact on their performance at work and the same number of people believed it had had a negative impact on their mental health. More than a quarter (28 per cent) said it had had a detrimental effect on them physically and one in five (22 per cent) had taken time off work as a result of being bullied.

The findings of a study by the University of Manchester and University College London<sup>12</sup> showed that racial discrimination is likely to affect the wellbeing and life aspirations of any individual. It also analysed the mechanisms linking experiences of discrimination to family members and found that as well as the health impact on the individual it extended to others, including their children’s health and development.

As we reported in our interim report, the survey findings showed that the most common consequences of racial harassment and discrimination were effects on respondents’ performance at work, negative mental health impacts and respondents wanting to leave their job but often not being able to do so for financial reasons.

**Table 6: Impact of racism**

	Bullying and harassment	Verbal abuse	Assault	Discrimination
It had a negative impact on my performance at work	45%	35%	19%	44%
It had a negative impact on my mental health	53%	36%	45%	36%
It caused me to leave my job or leave the employer	28%	19%	29%	22%
It made me want to leave my job (but I couldn’t because of financial or other factors)	38%	28%	46%	30%
It caused me to have to take time off work	25%	13%	21%	15%

<sup>11</sup> <https://www.tuc.org.uk/workplace-issues/health-and-safety/bullying/nearly-third-people-are-bullied-work-says-tuc>

<sup>12</sup> <http://www.sciencedirect.com/science/article/pii/S0277953615300770>

The findings from the polling reinforces the information we received from our survey. Table 6 shows the impact racism has on BME workers' wellbeing, the polling results being that racism at work affected BME workers' performance in their jobs:

- Overall 44 per cent of BME people who experienced discrimination stated the experience had had a negative impact on their performance at work.
- Looking in more detail at a breakdown of the results by age shows that more than half of over-45-year-olds reported that verbal abuse had had a negative effect on their performance at work.

The impact of racism is not just limited to work performance: BME workers polled highlighted the impact that experiencing racism had had on their mental health. The polling revealed that:

- Over half (53 per cent) of BME workers who had experienced bullying or harassment said
- 36 per cent of BME workers who had experienced verbal abuse reported it had had an impact on their mental health.
- Nearly half of 25- to 34-year-olds polled reported that the experience of being verbally abused in the workplace had impacted on their mental health.
- 45 per cent of BME workers who had suffered physical assault said it had had an impact on their mental health.

The polling revealed that the combined experience of racism and sexism in the workplace had more acute impacts for BME women:

- 57 per cent of BME women polled reported that bullying and harassment they had experienced at work had affected their mental health
- 45 per cent of women who had experienced discrimination stated the experience had had an effect on their mental health.

The most common effect of racism reported from the polling was an impact on BME workers' performance at work and their mental health. For many BME workers, the experience of racism at work made them want to leave their jobs. Nearly half of BME workers (46 per cent) who experienced physical violence and assault wanted to leave their jobs but couldn't for financial reasons.

Some workers did end up leaving their job. 29 per cent of BME workers that had suffered assaults and 28 per cent of those that had experienced bullying and harassment at work felt that they had had no option but to leave.

The situation as reported by BME women was even more severe, with 41 per cent of BME women who had experienced bullying and harassment wanting to leave their jobs but unable to for financial reasons, and 37 per cent reporting that they had left a job as a result of experiencing assault or physical violence.

Racism can have a damaging effect on your health and wellbeing and is seen as a problem only when someone is abused or treated differently because of their race. Racism can have

long-lasting effects on a worker's health and can severely affect a BME worker's experience at work.

The racism BME worker Samantha had experienced had made her feel nervous and anxious. Her mental health deteriorated to the extent that she was signed off work. She told the TUC:

*I felt awful and embarrassed. I felt as if I was under the spotlight. I became very tearful and physically sick. This had an impact on my work. I saw no way out. This damaged my self-esteem. In my career this was the role where I had the most success and many other people noticed.*

*This should have been handled differently but the company's number one goal was to protect themselves and this wasn't by accident but intentionally.*

Samantha handed in her notice and has since found a new job. She fully supports our campaign and said:

*I am so pleased to have received the email, having been the victim of racism so many times and having seen others oppressed in this way. I am so dejected that this is likely to characterise the rest of my working life. The restrictions imposed by tribunal fees and general resistance to the notion of racism as anything other than excuse-making forces victims to stay silence.*

## **Recommendations**

The TUC believes that government should:

- legislate to ensure that companies and businesses employing more than 50 people publish a breakdown of employees by race and pay band
- ensure the Equalities and Human Rights Commission has enough funding to promote workplace anti-racist policies and practice and take more legal cases to make sure the law reflects the nature of contemporary racism.
- make private sector companies responsible for promoting equal treatment throughout their activities, just as public sector organisations already are.

## Conclusion and recommendations

The aim of this project is to raise awareness of the systematic forms of racism that are still occurring in the workplace. Racism is seen by many people as something that has been greatly reduced or even eliminated from the workplace, remaining in a more subtle form; but this is clearly not what we have been told by BME workers. Our survey findings together with this report, based on extensive polling and the stories from BME workers we have highlighted, show that racism is still alive in the workplace. It is clear that urgent action is needed to deal with this problem.

The analyses of the polling report links directly with the findings from our interim report. Due to the structural and institutional racism in the workplace BME workers are disproportionately concentrated in low-paid jobs and sectors. BME workers are often seen as poorly educated, inexperienced and aggressive if they speak up. So, instead, BME workers choose to suffer in silence and feel isolated at work.

The main group of people who suffer disproportionately are BME women and young workers as they are more likely to be in insecure work. They may not be classed as employees and therefore miss out on many of the existing statutory protections, making them more vulnerable and less confident in speaking out about racism and discrimination faced at work. As our past reports on insecure work has shown, people in insecure work often miss out on family-friendly rights such as maternity, paternity and adoption leave, the right to an itemised payslip and protections from unfair dismissal.

BME women face many barriers in the labour market. This begins when they enter the labour market and goes on throughout their career. The TUC report *Black Women and Employment*<sup>13</sup> showed that BME women are more likely to be unemployed or have problems finding a suitable job – and when they do find work they are more likely to be overqualified for the job. The report found that BME young women have the same career aspirations and hopes for promotion as their white friends but that employer attitudes and presumptions about BME women were significant barriers to them being able to access work and progress in the workplace. The report highlighted the negative impact of cultural stereotyping. The TUC believes that, because of racial and gender discrimination, black women face a double disadvantage in accessing and participating in the labour market.

The TUC believes that now is the time for the government, employers and unions to take action to eliminate all forms of racism in the workplace.

We recognise that many employers have equal opportunities or diversity policies and procedures on bullying and harassment but believe that it is essential these policies are regularly reviewed and updated to ensure that they are fit for purpose. As well as reviewing the policies, employers should ensure that these are promoted so that workers, customers

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<sup>13</sup> <https://www.tuc.org.uk/sites/default/files/extras/bwae.pdf>

and clients are familiar with their contents. It is important that no form of racist abuse or harassment, whether from visitors, customers, clients or employees, is tolerated. Employers should enforce a zero-tolerance policy. It should be made clear that any form of abusive racist remarks or forms of discrimination will not be accepted in the workplace. BME workers should feel confident and safe in their working environment at all times.

Verbal racist abuse and the sharing of racist material creates a hostile work environment for BME workers that can result in isolation from work colleagues and undermine collaboration and team working in organisations. The TUC believes that workers should be able to work in a physical environment that is not hostile due to employers failing to ensure the wellbeing of all workers.

All forms of discrimination should be tackled. In the labour market BME workers continue to face discrimination. When employed at senior levels, they feel their career progression is inhibited by racial discrimination. The 2008 Department of Work and Pensions (DWP) study, *Management Recruitment*,<sup>14</sup> which looks at the recruitment of underrepresented groups into senior roles, found that 23 per cent of black and 21 per cent of Asian managers rated their career progression as disappointing, compared to only 13 per cent of those from both white and mixed ethnic backgrounds.

The findings from our survey show that discrimination is a major concern for BME workers, with more than half of BME workers voicing their concern. The survey findings highlight that excessive surveillance and scrutiny by managers, supervisors and colleagues was one of the main issues. A high number of BME workers were also being denied training, promotion or development opportunities. These barriers that BME workers face in employment result in workers being stuck in low-paid jobs with no hope of being able to take up senior positions at work.

BME workers should feel confident they can report their experience and raise concerns about racism. Without the belief that their complaint will be dealt with satisfactorily and in a timely way, the racism taking place in the workplace will not be dealt with. Many BME workers worry about the ramifications of reporting the racism, bullying, harassment and discrimination they have experienced. This could be because they worry about not being taken seriously, being blamed for creating a problem, losing their job or being the target of further forms of racism and discrimination.

We believe that the physical and psychological impact for BME workers experiencing any form of racism or discrimination or working in a hostile environment are far reaching. It can undermine workers careers, leave them feeling isolated from colleagues at work and have an effect on relationships with families and friends.

Over the years we have consistently stressed the need for a separate, clear race equality strategy and action plan that tackles the lack of access to training and promotion and unfair performance assessments, and addresses the pay gap between BME workers and white

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<sup>14</sup> Department for Work and Pensions (2008). *Management Recruitment: understanding routes to greater diversity*.

workers. The TUC believes that it is time for the government, employers and unions to take immediate action to combat all forms of racism at work.

The TUC is calling on employers and government to take action to combat and eliminate racism and discrimination at work. Here is a clear set of recommendations for employers and government on how to do this.

## **RECOMMENDATIONS**

### **To tackle racist discrimination and harassment at work, employers should:**

- ensure they have a strong equality, diversity and dignity policy that explicitly includes zero tolerance of racism
- make it clear that they will support all staff who raise concerns about racism and act to protect staff who are subject to racial abuse
- publish data on BME pay, recruitment, promotion and dismissal; set aspirational targets for diversity at their organisation; and measure progress against those targets annually
- work with trade unions to establish targets and develop positive action measures to address racial inequalities within the workforce
- make sure there is a simple method for BME workers to report racism at work, and make sure that BME workers feel confident that complaints about racism will be taken seriously, acted on and dealt with satisfactorily.
- ensure that all staff know that workers who raise concerns about racism will not be victimised for doing so.

### **To tackle racist harassment and discrimination at work, government should:**

- ban the regular use of zero-hours contracts, and ensure all workers receive premium pay for any non-contracted hours and compensation when shifts are cancelled at short notice
- take the lead in tackling casualisation by ending the use of agency, temporary, fixed-term and zero-hours contract workers in national and local government services
- reform the rules on employment status to ensure that all workers benefit from the same employment rights, including statutory redundancy pay, protection from unfair dismissal and family-friendly rights. To this end, employment status law should be modernised, putting an end to the current two-tier workforce
- change the law to make employers responsible for protecting their workers against racism by third parties, such as clients, contractors and customers
- legislate to ensure that companies and businesses employing more than 50 people publish a breakdown of employees by race and pay band

- ensure the Equalities and Human Rights Commission has enough funding to promote workplace anti-racist policies and practice, and take more legal cases to make sure the law reflects the nature of contemporary racism
- make private sector companies responsible for promoting equal treatment throughout their activities just as public sector organisations already are.