

THE CULTURE, HEALTH & WELLBEING ALLIANCE

EQUITY ACTION PLAN

May 2025–March 2027



INTRODUCTION

The Culture, Health & Wellbeing Alliance (CHWA) is the national membership organisation for creative health for England. We have a membership of around 7,000 people, most of whom deliver creative work to support health and wellbeing. CHWA believes in the transformative power of creativity and culture to improve individual and community health and wellbeing.

We recognise however that access to these benefits is not evenly distributed, and that systemic inequalities create significant disparities in health outcomes (see for example the *Marmot Review 10 Years On*¹).

This Equity Action Plan outlines our commitment to embedding equity, diversity and inclusion (EDI) into all aspects of our work, both internally within our organisation, throughout the work that we do with our members, and externally across the creative health sector.

This plan acknowledges the systemic inequalities that exacerbate health disparities and underscores our responsibility to actively work against them. We aim not only to reflect the diversity of the communities the sector serves, but also to actively challenge the barriers that prevent equitable access to creative health opportunities.

The plan outlines our strategies across five interconnected themes: *Partnerships, Collaboration and Advocacy for Equitable Change* across the Sector; *Support, Training and Development* for our Members; *Representation, Inclusion and Diversity* within our Membership; *Leadership, Governance and People* within our Organisation; and *Communications and Representation* within our broader work.

The plan recognises the nuances of impact – where we can have direct influence, where we can exert influence, and where our primary role is to listen and amplify the voices of others.

This Equity Action Plan represents an integrated approach, aiming to embed equity not as an add-on, but as a fundamental principle guiding all aspects of the Culture, Health & Wellbeing Alliance's work. This plan represents a crucial step in our journey towards a more just and equitable creative health sector.

¹ Marmot, M. et al. 2020, *Marmot Review 10 Years On*, Health Foundation. Available at <https://www.instituteofhealthequity.org/resources-reports/marmot-review-10-years-on>

We recognise that this is an ongoing process, and we are committed to continuous learning, adaptation, and collaboration to achieve our goals. This plan is not a static blueprint but a framework for continuous learning and adaptation.

BACKGROUND & CONTEXT

The Culture, Health and Wellbeing Alliance is committed to pursuing meaningful change in relation to equity within the culture, health and wellbeing fields. However, as a relatively small central team, it is vital to ensure that we balance ambitious aims with realistic considerations, to ensure our efforts are feasible and sustainable.

This plan reflects our consideration of remaining pragmatic and focussed in our approach, without taking anything away from the scale of our overall mission towards advancing equity work.

Ongoing reflection and review of this plan will calibrate our progress against aims, ensuring we remain responsive and effective in our pursuit of a more equitable landscape in the creative health sector.

What have we been doing already?

Since 2020 we've been working on a [roadmap to "building a more equal alliance"](#). This is at the heart of our current [Equality, Diversity and Representation Policy and Equality Action plan](#). It is an ongoing process with successes, failures and continuous learning. The following are some key points from our equity journey over recent years.

Key Commitments & Actions:

- **The 1%:** Since 2021, CHWA has dedicated 1% of its budget to equity work, funding initiatives like Black History Month conversations and equity consultations.
- **Data Collection:** Moved from infrequent, low-response EDI surveys to continuous data gathering through sector surveys, board/staff/freelancer information, mailing list sign-ups, conference attendance, and programme participation. This is building a more nuanced understanding of CHWA's engagement.
- **Adapting Structure:** Committed to co-production and working with stakeholder groups. Formalised processes for building representative working

groups, considering protected characteristics, geography, practice/experience, and lived experience. Actively working to diversify long-standing stakeholder groups by changing recruitment and offering leadership development instead of unpaid "representation" roles.

- **Collaborating:** Working with colleagues on shared equity work, e.g. the Fair Pay and Lived Experience Manifesto produced with the Arts & Social Outcomes Network
- **Programme & Communications:** Shifting focus to health equity in training and public definitions of creative health (e.g., "Equitable" principle in the Creative Health Quality Framework). Ensuring visible diversity and addressing key dates (for example Black History Month, Disability History Month, Pride Month) and justice issues in bulletins and online content.
- **Training:** Ensuring our training offers incorporate equity and/or health inequalities.
- **Review & Learning:** Ongoing review of the Equity Action Plan, informed by listening and learning, has led us to this new Action Plan.

So What? (Impact & Insights):

- Demographic data reveal that CHWA's network is very diverse in sexuality and neurodiversity, with a large proportion having caring responsibilities, and disability representation mirroring the national average.
- Under-representation: People of African and Caribbean Heritage, Asian heritage, and Gypsy/Roma/Traveller heritage are under-represented. Women are significantly over-represented (80-90%). Socio-economic data requires further analysis.
- Recognising that representation alone isn't enough; creating a sense of belonging for systematically marginalised groups is crucial for driving systems change.
- Increased diversity in Board and staff: 20% identify as Disabled; there has been a significant shift away from affluent backgrounds (56% to 30%); and a reduction in those identifying as white (80% to 60%).
- More robust internal systems to improve equity.

New Areas of Focus:

- **Fair Pay:** Committed to Real Living Wage since 2022 and introduced a policy for paying freelancers and low/unwaged contributors, now extended to Board members.
- **Access:** Published a guide to accessible events, introduced video/audio options in recruitment, commissions, and awards, and video versions of bulletins. Focussing on improving access for Deaf and disabled colleagues.
- **Wellbeing:** Recognising the amplified wellbeing risks for those with protected characteristics and the importance of supporting practitioners' wellbeing – including through CHWA's Practising Well Award. Internally focussing on reducing output and slowing down to be more inclusive.
- **Solidarity:** Increasingly prioritising solidarity with organisations and campaigns redefining health and wellbeing, with a commitment to making public statements on issues impacting marginalised groups (case-by-case basis currently, aiming for a clearer policy).

And now?

- Equity is now more central to CHWA's underlying [Theory of Change](#).
- We're focusing on where CHWA can have direct impact, where it can influence, and where it needs to listen and amplify.

ACCOUNTABILITY

Accountability is paramount for the integrity of this equity action plan. We recognise that meaningful change requires us to be transparent and answerable for our progress. To that end, CHWA commits to:

- Submitting regular reports to our Board, ensuring that equity work remains a central focus of our governance.
- Eliciting ongoing feedback relating to our equity activity from partners, sectoral collaborators, members, staff and volunteers.
- Reporting and seeking feedback on our work through a dedicated Critical Friends Equity Group (to be established), providing ongoing scrutiny, challenge, and guidance from external individuals.

- Publicly reporting on our progress, as part of our annual report, ensuring that our commitment to equity is visible and accessible to our members, partners, the wider sector and public.

BUDGET

Every year since 2021 we have committed 1% of our core funding budget – a percentage based on a 2020 recommendation from IncArts. This year, we have increased this commitment from 1% of core funding to 1% of all funding received.

THEORY OF CHANGE

Here is our newly revised Theory of Change, reflecting a greater centering of equity consideration across the work that we do.



CORE AIMS OF EQUITY ACTION PLAN

1. Partnerships, Collaboration and Advocacy for Equitable Change:

Listen and collaborate to actively champion justice and equity within the creative health sector, driving positive change through partnerships, collaboration and advocacy.

2. Support, Training and Development:

Empower members to:

- Work towards a more just and equitable society
- Understand and work with the social determinants of health
- Understand and collaborate to address health inequalities
- Support and champion anti-oppressive, anti-racist, and anti-ableist practice, advancing equity for all marginalised communities.

3. Representation, Inclusion and Diversity:

Proactively foster a diverse, representative, and inclusive membership by identifying and dismantling barriers to participation and ensuring equitable access and opportunities for all.

4. Leadership, Governance & People:

Develop and implement proactive strategies to recruit, retain, and actively support a diverse and representative Board, staff, and volunteer body.

5. Communications and Representation:

Amplify the voices and experiences of diverse individuals and communities within the creative health sector, sharing knowledge and promoting equitable representation.

1. PARTNERSHIPS, COLLABORATION AND ADVOCACY FOR EQUITABLE CHANGE - Sector Focus

AIM

- Listen and collaborate to actively champion justice and equity in the creative health sector, driving positive change through partnerships, collaboration and advocacy.

KPIS/GOALS (TO MARCH 2027)

- Seek opportunities for collaboration to influence policy relating to equity and justice in creative health.
- Ensure that equity and justice are core to all CHWA's policy responses.
- Increase consultation with members relating to policy responses.
- Ensure at least one active collaboration per annum with other progressive networks and campaigning organisations from March 2026.
- Enhance member engagement with the work of allied progressive networks through communicating their work to our membership.

STRATEGIES

- Strengthen and expand existing and new partnerships to increase our collective impact and reach advocating for equity in the creative health sector and beyond.
- Communicate the impact of these partnerships.
- Build and maintain a diverse network of partnerships with relevant organisations, including those representing marginalised communities, those with policy influence, and other relevant networks.
- Regularly communicate the work of allied progressive networks including initiatives, resources, and opportunities for collaboration through CHWA communication channels.
- Actively collaborate with partners on joint advocacy and policy engagement.
- Embed equity considerations into all partnership agreements and activities.
- Learn from and share good practice in equity through partnerships, collaboration and networks.

TACTICS

- Review existing partnerships against CHWA's equity goals, evaluate capacity to support equity and identify potential for further collaboration on shared equity objectives. Periodically review partnership activities to assess their impact on equity and identify areas for improvement.
- Research and identify key organisations (including those representing marginalised communities and those with policy influence) whose missions and values align with CHWA's equity goals.
- Establish a system for regular communication with key partners, sharing updates, seeking input, and exploring opportunities for collaboration.
- Ensure all internal policies relating to partnerships and procurement reflect equity considerations.
- Feature collaborative projects and partner initiatives related to equity activity in at least 12 CHWA communications (e.g., newsletters, website), and use CHWA bulletins to spotlight others' equity, anti-racist, and/or anti-ableist work, sharing recommendations for best practice with our members.
- Identify and adopt relevant good practice recommendations on equity from partners, collaborators and other organisations into CHWA's work.
- Regularly attend partners' events and network meetings with a specific focus on identifying and learning about good practices in equity, and sharing good practice from CHWA.
- Offer support to partners and others leading innovative equity work, including through opportunities to share resources, case studies, and learning related to equity (e.g. through joint events or communications).
- Synthesise learnings from collaborations and shared experiences to create practical resources and guidance for CHWA members and the wider sector on implementing equitable practices, e.g. access guidance and examples of best practice in access.
- Explore opportunities to participate in or deliver joint training on equity and anti-discrimination with partner organisations.
- Establish and adhere to inclusive practices in all joint activities, ensuring accessibility and representation.

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EVALUATION

- Maintain partnership tracker or database that records active collaborations.
- Document completed assessments of key partnerships.
- Maintain content calendar or log of CHWA communications (newsletters, website, social media) - tracking instances where collaborative projects and partner initiatives related to EDI are featured.
- Record adopted recommendations, including source, recommendation, and changes made within CHWA as a result.
- Track impact of policy advocacy activity.
- Conduct internal review and report on health and effectiveness of CHWA's partnerships, specifically in relation to advancing justice and equity. This report should explore:
 - The extent to which current partnerships are active and mutually beneficial.
 - How current partnerships contribute to CHWA's ability to support justice and equity goals.
 - The work CHWA has undertaken with other networks and campaigning organisations.
 - How and how often CHWA has promoted partners' work to its members.

2. SUPPORT, TRAINING AND DEVELOPMENT - Member Focus

AIMS

- Empower members to:
 - Work towards a more just and equitable society
 - Understand and work with the social determinants of health
 - Understand and collaborate to address health inequalities
 - Support and champion anti-oppressive, anti-racist, and anti-ableist practice, advancing equity for all marginalised communities

KPIS/GOALS (TO MARCH 2027)

- Members demonstrate increased awareness and understanding of how work relates to health inequalities and anti-oppressive practices, as evidenced by positive feedback gathered through surveys and feedback from CHWA events on these topics.

STRATEGIES

- Provide and signpost to training and accessible resources and events focused on: health inequalities, social determinants of health, anti-racism, anti-oppression and anti-ableism.

TACTICS

- Pilot and evaluate training modules on health inequalities, anti-racism, and anti-ableism within existing leadership programmes, and adapt based on member feedback.
- Consistently highlight resources, training opportunities, and best practices related to health inequalities, anti-racism, and anti-ableism in the bulletin and across all communication channels.
- Create and maintain a dedicated online resource hub for members, providing accessible materials, toolkits, and guidance on addressing health inequalities, anti-racism, and anti-ableism in their practice.
- Establish skill/expertise sharing online sessions providing an opportunity for members to share best practice/new work case studies with those seeking guidance on integrating equitable practices into their work.

EVALUATION

- Evaluate all training sessions pertaining to equity and justice to measure participant learning, changes in confidence, and feedback on practical application of learnings to future work.
- Monitor usage statistics for the online resource hub (e.g., number of visits, downloads of materials, most popular resources) to gauge member engagement and identify areas for improvement.
- Assess how members perceive their work relating to health inequalities and equity through biennial State of the Sector survey.

3. REPRESENTATION, INCLUSION AND DIVERSITY - Member Focus

AIM

- To proactively foster a diverse, representative, and inclusive membership by identifying and countering barriers to participation and working towards equitable access and opportunities for all.

KPIS/GOALS (TO MARCH 2027)

- Work with a Critical Friends Equity Group to explore challenges faced by underrepresented groups within the creative health sector, organisational and sectoral initiatives to address these challenges, and recommendations for sector-wide responses, starting in 2026.

STRATEGIES

- Build our understanding of the challenges and possibilities through:
 - Establishing and maintaining ongoing mechanisms for gathering and amplifying the voices and experiences of underrepresented members of the creative health sector, eg. consultations, surveys, blogs, and ongoing feedback elicited through CHWA communication channels.
 - Actively learning from successful diversity, equity, and inclusion initiatives implemented by other organisations and networks (via SAMs, regional champions, home nations' networks).
- Proactively address the needs and priorities of underrepresented practitioners by developing/promoting targeted initiatives, resources, and support systems.
- Establish a Critical Friends Equity Group and partnerships focused on advancing equity and inclusion within the creative health sector, and share the outcomes and recommendations with CHWA members.
- Centre an equity focus in all CHWA working groups, to include equity-focussed objectives and recurrent equity agenda items.

TACTICS

- Work with existing stakeholder groups (strategic alliance members, regional champions, home nations networks) to understand more about existing EDI work in the sector.
- Report on findings from the above, including actionable recommendations for CHWA, to inform new initiatives and resources.
- Report on CHWA's Equity journey and any new resources pertaining to EDI, including survey data analysis (include in annual report).
- Work with partners to develop and maintain a publicly accessible directory or similar means of platforming underrepresented practitioners and organisations, and promote its use to support diversity and inclusion in events/programmes/public comms.
- Consistently invite feedback on new collaborations, activity, policies, etc.

EVALUATION

- *Are we telling the story?:* Monitor numbers / proportion of blogs / resources etc.
- *Are people hearing the story?:* Monitor click-throughs in bulletin and google analytics.
- Monitor instances of re-posting, likes, adoption etc.
- Continue to assess average demography across all EDR surveys in relation to identified priority areas; develop a better understanding of how to analyse the socioeconomic data we're gathering.
- Evaluate the effectiveness of the Critical Friends Equity Group through regular feedback.

4. LEADERSHIP, GOVERNANCE AND PEOPLE (ORGANISATIONAL CULTURE) - Staff, Board & Volunteer Focus

AIM

- Develop and implement proactive strategies to recruit, retain, and actively support a diverse and representative Board, staff, and volunteer body, fostering an environment where people feel a sense of belonging, inclusion and respect.

KPIS/GOALS (TO MARCH 2027)

- Establish team members' sense of belonging (Staff, Board, Volunteers) and implement changes where necessary.
- Establish baseline demographic data for Board, staff and volunteers. Set measurable targets for increasing representation of underrepresented groups within CHWA by March 2027. Publicly report on progress annually.
- Establish baseline demographic data for CHWA regional champions. Set measurable targets for increasing representation of underrepresented groups by March 2027. Publicly report on progress annually.
- Identify and address barriers to engagement and development for Board, Staff and Volunteers.

STRATEGIES

- Integrate principles of equity, diversity and inclusion (EDI) into all aspects of CHWA's operations, programmes, and decision-making processes. Ensure that representation and belonging are central considerations in strategic planning, resource allocation, and programme design.
- Establish a structured mechanism for ongoing consultation with staff, Board members, volunteers, and external EDI experts to inform the implementation, evaluation, and continuous improvement of this Equity Action Plan.
- Conduct a review of the regional champions model, including an assessment of its impact on EDI and its effectiveness in reaching diverse communities. Adapt the model as needed to ensure it actively promotes representation, inclusion, and equitable access to opportunities and resources.

TACTICS

- Implement ongoing self-assessment and reflection exercises for staff, Board members, and volunteers to increase awareness of personal biases, promote culturally responsive practices, and foster a shared understanding of EDI principles.
- Develop and maintain comprehensive policies and allocate adequate resources (financial, human, and time) to support the effective implementation of this Equity Action Plan. These policies should address recruitment, retention, promotion, professional development, and anti-discrimination/harassment/oppression.
- Ensure that freelancers and people on low/no wages are paid a fee for their time in attending or presenting at meetings that are for CHWA's benefit, in line with our policies.
- Ensure that Board members (Non-Executive Directors) are paid a fee for a proportion of their time if they are freelance or on low/no wages, in line with our policies.
- Ensure equity is built into all job descriptions as a core consideration of the work.
- Review all CHWA policies and resource allocation to ensure alignment with the principles, objectives, and actions outlined in this Equity Action Plan.
- Adhere to internal guidance relating to equity, including diverse representation in working groups; recruitment; and accessibility, incorporating best practices in EDI.
- Develop and implement Regional Champions recruitment strategy to improve representation from groups currently underrepresented within the creative health (based on sector surveys).
- Work with Regional Champions to share learning about their own and others' effective EDI work in creative health.

EVALUATION

- Conduct ongoing evaluation (e.g. surveys, exit interviews, etc) to explore the questions 'Is CHWA representative? Do people feel they belong? What might support a sense of belonging?' Analyse data to identify factors that contribute to or hinder inclusion and alter Equity Action Plan accordingly to address any gaps or challenges.
- Engage an external EDI consultant to conduct confidential qualitative interviews with Board members and staff to gather in-depth insights on EDI-related

experiences, perceptions, and identify areas for improvement in organisational culture and practices.

- Implement ongoing EDI data collection and analysis, including demographic surveys for all recruitment processes (staff, Board, volunteers, champions), events, etc.

5. COMMUNICATIONS AND REPRESENTATION

AIM

- To amplify the voices and experiences of diverse individuals and communities in the creative health sector, sharing knowledge and promoting equitable representation.

KPIS/GOALS (TO MARCH 2027)

- Communicate the diversity of the creative health sector in CHWA communications (website, newsletters, social media) through regular features, profiles, articles, etc.
- Feature creative health stories relevant to underrepresented groups in CHWA communications (website, newsletters, social media) to raise awareness and promote inclusive practices, with a target of 12 stories per year.
- Increase the number of diverse individuals and organisations contributing to and shaping CHWA communications (e.g., as guest writers, interviewees).

STRATEGIES

- Proactively seek out, feature, and platform diverse voices and perspectives for CHWA communications.
- Implement and promote communication practices that ensure accessibility, cultural sensitivity, and equitable representation in all CHWA communications.

- Collaborate with external organisations and networks to expand the reach & impact of CHWA's communications in promoting diversity and equitable representation.

TACTICS

- Develop a content calendar that prioritises diverse voices.
- Establish a system for recruiting diverse contributors.
- Ensure all communication channels meet accessibility standards.
- Develop guidelines for culturally sensitive language.
- Cultivate relationships with organisations representing diverse communities.
- Collaborate with partners to cross-promote content.
- *Bulletin*: Spotlight under-represented artists / orgs / practitioners (monthly); Special bulletin issues: Black History Month, Pride, Disability History Month.

EVALUATION:

- Assess Contributor Diversity: Monitor number and demographics of individuals and organisations contributing to CHWA communications over time.
- Gather Feedback on Inclusivity: Collect feedback from members and audiences (e.g., through surveys, feedback forms) on the accessibility, cultural sensitivity, and inclusivity of CHWA communications.

This plan was written by the Culture, Health & Wellbeing Alliance team and Rukhsana Jahangir. It has evolved from data gathered by CHWA as well as formal and informal discussions across numerous settings both within and outside CHWA. We are grateful to the many people and organisations whose conversations, shared thinking and learning have helped us form this plan.