

Understanding Healthcare Experiences Through TEDx Talks: A Thematic Study

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ABSTRACT: Healthcare experiences are shaped by a range of social and structural factors that influence access to care, health outcomes, and public trust in medical systems. To explore how these experiences are portrayed and discussed in digital media, a thematic analysis was conducted on eight TEDx Talks focusing on challenges and perspectives within healthcare systems. Each video was examined for key messages, intended audiences, barriers to inclusion, proposed solutions, personal reflections, and actionable recommendations. Across the talks, recurring themes included disparities in care delivery, implicit bias, representation, and the importance of equity-oriented reforms. Speakers emphasized solutions such as cultural competence training, workforce diversity, and system redesign to promote fairness and inclusivity in healthcare. Overall, the findings highlight the role of digital platforms like TEDx in fostering awareness, dialogue, and understanding of social and experiential dimensions of healthcare.

KEYWORDS: Healthcare experiences, TEDx talks, Diversity and inclusion, Thematic analysis

** Project conducted by graduate students as a Psychology laboratory activity in the elective course (Diversity, Equity, and Inclusion in Healthcare)*

INTRODUCTION

Across the globe, as one in six people worldwide experience discrimination (UN Global compact, 2024). It manifests in various forms, from overt acts of hate to more subtle, systemic barriers that limit opportunities for marginalized communities (Bradby., 2010); disparities driven by structural racism, social determinants of health, and institutional biases (Bailey et al., 2017). Healthcare should be a basic right for everyone, but there are still many challenges that people from racial and ethnic backgrounds face. These challenges come from a long history of unfair treatment and continue because of hidden biases, economic differences, and not enough representation in healthcare. This leads to unequal access to medical care and poorer health outcomes for these communities (Odzakovic et al., 2023). Thus, understanding these barriers and working towards inclusivity, involves actively addressing these challenges and implementing strategies that promotes diversity and fair opportunities for all individuals (Okeahialam et al., 2025). TEDx Talks, guided by the slogan “*Ideas Change Everything*” (TED, 2000), serve as influential platforms for discussing real-world challenges. These short, freely accessible presentations offer a cost-effective and engaging way to reach broad audiences and encourage community involvement in health-related issues. As Nicolle, Britton, Janakiram, and Robichaud (2014) note, technological innovations enhance communication and connection, enabling TEDx Talks to effectively share knowledge. Their open-access nature allows people from diverse backgrounds to gain insight into the social factors that shape health and well-being. The aim of the study is to explore how racial and social inequities in healthcare are presented, communicated and addressed in public through TEDx Talks.

METHODOLOGY

Eight (N=8) TEDx videos related to minority groups and racial disparities in healthcare were purposefully selected from YouTube. To fit within time constraints, only English-language videos focused on healthcare inequalities and racism, with durations between 10 and 20 minutes, were included in the analysis.

Present project was carried out by psychology graduate students as part of a laboratory activity within the elective course Diversity, Equity, and Inclusion in Healthcare PSY-509, aimed at fostering experiential learning and analytical skills.

Understanding Healthcare Experiences Through TEDx Talks: A Thematic Study

PROCEDURE

A structured content analysis was carried out on TEDx talks addressing racial and social disparities in healthcare. Utilising inductive, qualitative and grounded research techniques, videos were selected without any pre-determined themes or ideas (Charmaz, 1983), later video contents were collectively used to analyse texts in objective, systematic and quantitatively ways (Wimmer and Dominick 1996). Data was recorded using researcher's self-developed excel sheet contents of video were identified that includes core messages, intended audiences, and barriers to inclusion were assessed, and proposed solutions, personal reflections, and practical steps for improving inclusivity were documented. Responses were aggregated and examined to extract overarching themes and sub-themes.

RESULTS

Table 1: Video Titles and Durations

Speaker's Name	Video Title	Duration (min)
Delain Teabout Thomas	Yes, racism is a public health crisis: now what?	18
Dr. Melissa Clarke	Surprising solutions to racism in US healthcare and policing	19:06
Dr. Nwando Olayiwola	Combating Racism and place-ism in Medicine	11:24
Dr. Curry-Winchell	Why black patients don't trust the healthcare system	13
Lisa Cooper	Tackling ethnic health disparities: Lisa Cooper at TEDxBaltimore 2014	20:49
Dr. Ndidiamaka Amutah	A broken healthcare system: racism and maternal health	11:37
Willie Underwood III	Racial Health Equity: A Right Now Priority	12
Dennis Pocekay	Racism & Health	17:42

Table 2: Key Messages

Speaker's Name	Key Message
Delain Teabout Thomas	There is a lack of transparency and equity in healthcare, leading to health disparities related to racism.
Dr. Melissa Clarke	Racism in healthcare and policing is systemic, requiring restructuring for equity.
Dr. Nwando Olayiwola	Systemic biases in medicine harm patients; technology and educational reform can promote health equity.
Dr. Curry-Winchell	Black patients mistrust the healthcare system; representation is crucial to regain trust.
Lisa Cooper	Persistent health inequalities among ethnic groups in the U.S. need to be addressed.
Dr. Ndidiamaka Amutah	Racism in the U.S. healthcare system leads to poor maternal health outcomes for Black women.
Willie Underwood III	Addressing racial disparities in healthcare requires eliminating biases and improving representation.
Dennis Pocekay	Racism causes chronic and acute health problems; promoting diversity and inclusion is essential.

Overall key message : Systemic racism and biases in healthcare lead to significant health disparities for racial and ethnic minorities.

Table 3: Target Groups

Speaker's Name	Target Group
Delain Teabout Thomas	Racial minorities
Dr. Melissa Clarke	Racial minorities, particularly Black and Brown communities
Dr. Nwando Olayiwola	Racial and ethnic minorities, particularly Black communities or economically disadvantaged neighborhoods
Dr. Curry-Winchell	Black people
Lisa Cooper	Racial and ethnic minorities, low-income communities, immigrant populations
Dr. Ndidiamaka Amutah	Black women in the United States
Willie Underwood III	Racial minorities, particularly Black Americans
Dennis Pocekay	Racial minorities, particularly Black people

The main target group overall in all videos is racial and ethnic minorities, particularly Black and Brown communities.

Understanding Healthcare Experiences Through TEDx Talks: A Thematic Study

Table 4: Barriers to Inclusivity

Speaker's Name	Barriers
Delain Teabout Thomas	Lack of transparency, racism, low considerations for minority groups
Dr. Melissa Clarke	Systemic bias, lack of accountability
Dr. Nwando Olayiwola	Systemic racism, place-ism (geographic location affecting health outcomes)
Dr. Curry-Winchell	Bias, lack of representation
Lisa Cooper	Implicit bias, lack of access to quality healthcare, cultural and language barriers
Dr. Ndidiamaka Amutah	Implicit bias, discrimination, economic disparities, lack of insurance
Willie Underwood III	Implicit bias, historical medical racism, economic impact of health disparities
Dennis Pocekay	Social factors, lack of resources, lack of education, cultural racism

Table 5: Proposed Solutions

Speaker's Name	Proposed Solutions
Delain Teabout Thomas	Redesigning inequitable systems, increasing transparency through T.I.M.E Certification
Dr. Melissa Clarke	Implicit bias and cultural competency training, redesigning systems for equity
Dr. Nwando Olayiwola	Leveraging technology, educational reforms to address systemic biases
Dr. Curry-Winchell	Representation, equal access to jobs and opportunities
Lisa Cooper	Training healthcare providers to recognize and reduce implicit bias, improving healthcare access, adapting medical practices to respect cultural differences
Dr. Ndidiamaka Amutah	Translational Health Equity Research (MOTHER) Lab, Center for Black Maternal Health and Reproductive Justice (CBMHRJ)
Willie Underwood III	Awareness of disparities, treating all patients with dignity and respect, increasing representation in healthcare
Dennis Pocekay	Promoting diversity and inclusion, addressing systemic racism

Table 6 : Actionable Steps

Speaker's Name	Actionable Steps
Delain Teabout Thomas	Realizing the need for transparency in public health and taking action to prevent health disparities
Dr. Melissa Clarke	Understanding the need for big system changes and hearing from affected communities
Dr. Nwando Olayiwola	Recognizing the importance of making healthcare fair for everyone, regardless of race or location
Dr. Curry-Winchell	Understanding the need for more representation in healthcare to prevent racism
Lisa Cooper	Learning about different cultural perspectives, supporting policies to improve access to care, continuing to learn about health disparities
Dr. Ndidiamaka Amutah	Increasing awareness of racism in healthcare, promoting policies against racism and discrimination
Willie Underwood III	Reflecting on how historical injustices affect healthcare today, inspired to work towards eliminating disparities
Dennis Pocekay	Promoting diversity and inclusion, addressing systemic racism

DISCUSSION

The study found that racial and social inequalities in healthcare are major issues, influenced by discrimination, bias, and structural barriers. The TEDx talks analyzed highlighted key themes such as unfair medical treatment, lack of diversity in healthcare, and the need for policy changes. The most prominent theme revolves around systemic racism in healthcare and its impact on racial and ethnic minorities. Across all categories the key messages, target groups, barriers to inclusivity, proposed solutions, personal reflections, and actionable steps, the discussions consistently highlight how racial biases, implicit discrimination, and historical injustices contribute to health disparities. These findings match previous research showing that racial minorities often receive lower-quality healthcare, leading to poorer health outcomes (Bailey et al., 2017). One major issue discussed was implicit bias in medical

Understanding Healthcare Experiences Through TEDx Talks: A Thematic Study

decisions. Some healthcare providers may treat patients differently based on race without realizing it. Studies show that Black and Hispanic patients receive less pain treatment than White patients (Hoffman et al., 2016). This can lead to serious health risks. Another key issue was systemic racism in healthcare institutions. Many Black patients distrust the medical system due to past unethical studies, such as the Tuskegee Syphilis Study (Alsan & Wanamaker, 2018). This mistrust causes some to avoid seeking medical care, making health problems worse. Solutions like increasing diversity in healthcare and improving cultural training for doctors can help (Cooper et al., 2018).

Access to healthcare was also discussed. Many minority groups, especially those from low-income backgrounds, face financial barriers to medical care. This increases rates of chronic diseases like diabetes and heart disease (Williams et al., 2019). Solving aforementioned issues requires a combination of policy changes, better training for doctors, and community support. TEDx talks help spread awareness, but real change needs action from healthcare leaders and policymakers. Needless to assert that racism in healthcare is a structural issue that demands institutional change, education, and inclusivity efforts to achieve health equity for everyone.

CONCLUSION

Research highlights that effective anti-racism interventions in healthcare should be thoughtfully developed and executed across multiple levels of the system. This requires actively including Black, Indigenous, and other racialized groups in decision-making processes to ensure their perspectives and needs are represented. Additionally, organizations should implement comprehensive policies and procedures specifically designed to address and eliminate instances of racism within the system. Furthermore, it is essential to establish transparent and accessible accountability tools and processes, ensuring that these measures are communicated to all stakeholders involved, fostering a culture of responsibility and trust within the healthcare environment (Hassen et al., 2021).

REFERENCES

- 1) Alsan, M., & Wanamaker, M. (2018). Tuskegee and the health of Black men. *The Quarterly Journal of Economics*, 133(1), 407–455. <https://doi.org/10.1093/qje/qjx029>
- 2) Bailey, Z. D., Krieger, N., Agénor, M., Graves, J., Linos, N., & Bassett, M. T. (2017). Structural racism and health inequities in the USA: Evidence and interventions. *The Lancet*, 389(10077), 1453–1463. [https://doi.org/10.1016/S0140-6736\(17\)30569-X](https://doi.org/10.1016/S0140-6736(17)30569-X)
- 3) Bailey, Z. D., Krieger, N., Agénor, M., Graves, J., Linos, N., & Bassett, M. T. (2017). Structural racism and health inequities in the USA: Evidence and interventions. *The Lancet*, 389(10077), 1453–1463. [https://doi.org/10.1016/S0140-6736\(17\)30569-X](https://doi.org/10.1016/S0140-6736(17)30569-X)
- 4) Bradby, H. (2010) “What Do We Mean by “Racism”? Conceptualising the Range of What We Call Racism in Health Care Settings: A Commentary on Peek et Al. *Social Science & Medicine*, vol. 71(1), p10 <https://doi.org/10.1016/j.socscimed.2010.03.020>.
- 5) Charmaz, K. (1983). The grounded theory method: An explication and interpretation in contemporary field research. In M. Emerson, (Ed.), *Contemporary field research: A collection of readings* (pp. 109–126). Little Brown and Company
- 6) Clarke, M. (n.d.). Surprising solutions to racism in US healthcare and policing [Video]. TEDx Talks.
- 7) Cooper, L. A., Roter, D. L., Carson, K. A., Beach, M. C., Sabin, J. A., Greenwald, A. G., & Inui, T. S. (2012). The associations of clinicians’ implicit attitudes about race with medical visit communication and patient ratings of interpersonal care. *American Journal of Public Health*, 102(5), 979–987. <https://doi.org/10.2105/AJPH.2011.300558>
- 8) Hassen, N., Lofters, A., Michael, S., Mall, A., Pinto, A. D., & Rackal, J. (2021). Implementing Anti-Racism Interventions in Healthcare Settings: A Scoping Review. *International Journal of Environmental Research and Public Health*, 18(6), 2993. <https://doi.org/10.3390/ijerph18062993>
- 9) Hoffman, K. M., Trawalter, S., Axt, J. R., & Oliver, M. N. (2016). Racial bias in pain assessment and treatment recommendations, and false beliefs about biological differences between Blacks and Whites. *Proceedings of the National Academy of Sciences*, 113(16), 4296–4301. <https://doi.org/10.1073/pnas.1516047113>
- 10) Masson, M. (2014). [Letter to the editor]. *Canadian Family Physician*, 60(12), 1080.
- 11) Nicolle, E., Britton, E., Janakiram, P., & Robichaud, P. M. (2014). Using TED Talks to teach social determinants of health: Maximize the message with a modern medium. *Canadian Family Physician*, 60(7), 777–778 (English), 788–789 (French).
- 12) Odzakovic, E., Huus, K., Ahlberg, B. M., Bradby, H., Hamed, S., Thaper-Björkert, S., & Björk, M. (2023). Discussing racism in healthcare: A qualitative study of reflections by graduate nursing students. *Nursing Open*, 10(6), 3677–3686. <https://doi.org/10.1002/nop2.1619>
- 13) Okeahialam, N., Salami, O., Siddiqui, F., Thangaratinam, S., Khalil, A., & Thakar, R. (2025). Effects of strategies to tackle racism experienced by healthcare professionals: a systematic review. *BMJ Open*, 15(1), <https://doi.org/10.1136/bmjopen-2024-091811>
- 14) TED. (2000). TED: Ideas worth spreading. Ted.com; TED Talks. <https://www.ted.com/>

Understanding Healthcare Experiences Through TEDx Talks: A Thematic Study

- 15) UN Global compact. (2024). Diversity, Equity and Inclusion | UN Global Compact. Unglobalcompact.org. <https://unglobalcompact.org/take-action/action/dei>
- 16) Williams, D. R., Lawrence, J. A., & Davis, B. A. (2019). Racism and health: Evidence and needed research. Annual Review of Public Health, 40, 105–125. <https://doi.org/10.1146/annurev-publhealth-040218-043750>
- 17) Wimmer, R. D., & Dominick, J. R. (1996). *La investigación científica de los medios de comunicación*. Barcelona, España: Bosch Comunicación.



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