



the Health Symposium

16.07.2026 - GREEN LANE MASJID, BIRMINGHAM

LAURA SORVALA
ILLUSTRATION

empathy
IS KEY TO
PERSON-CENTRED CARE!

HOW CAN WE CREATE
EMPATHETIC SPACES
for
SHARING NARRATIVES
& FAITH EXPRESSIONS



NOT ALWAYS
LAYERED
LIKE ME...

CULTURAL
VALUES

ARE
INFLUENCED
BY
TECHNOLOGY

- SOCIAL MEDIA
- MODERN LIFE IN BIRMINGHAM!



THEY ARE
CO-CREATED!



As was our
research!

WE USED:

- LINGUISTICS THEORY
- CONVERSATIONAL THEORY
- RESEARCH TEAM WITH COMMUNITY LANGUAGES

MEDICAL
GASLIGHTING

FINDING
SUPPORT IN FAITH
COMMUNITY!

CANCER
CHAMPIONS!

WE CREATED A
RECRUITMENT
STRATEGY!



Cancer doesn't exist in isolation...

LOCATION
MATTERS!

SAFETY

FAITH as a
COPING FRAMEWORK

SABR

Without
religion I would
have lost my
mind!



MICRO INTERACTIONS

TONE CLARITY

LISTENING

PERCEIVED RESPECT

CHALLENGING
STIGMA

I must deserve
this for my wrongs...

CANCER
IS NOT A
PUNISHMENT!

RE-LEARNING
IS POSSIBLE!



ALTERNATIVE
INFORMATION
ECOSYSTEMS

TikTok
YouTube



Hakims
(TRADITIONAL
HEALERS)

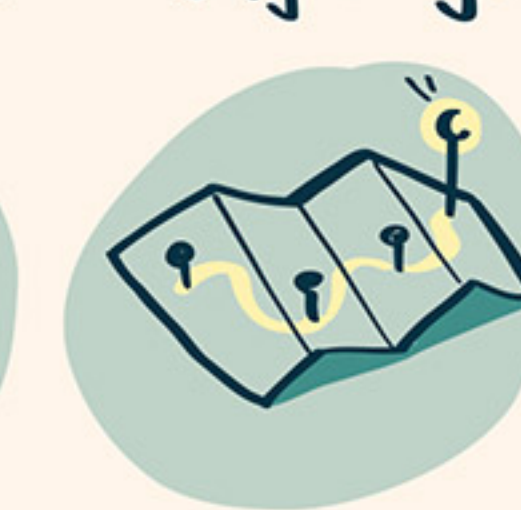
WE NEED
CLINICAL
TRANSPARENCY
FROM THE START!

COMFORT & DISTRESS

Attending
Ramadan



Planning
Pilgrimage



Prayer
as solace



'Inshallah'
CODE
SWITCHING
LIKE A SCAFFOLD!

ARABIC
= moral/
spiritual

URDU =
culturally
grounded

ENGLISH
= biomedical

Green
Lane
Masjid



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LAURA SORVALA
ILLUSTRATION

MACMILLAN

REDUCING
INEQUALITIES
IS PART OF OUR
CORE STRATEGY

LOOK AT
EDUCATION
& TRAINING

- TRAUMA INFORMED CARE
- LIVED EXPERIENCE TRAINING DELIVERY
- INTERSECTIONALITY

CANCER
CHAMPIONS

WEST MIDLANDS
CANCER ALLIANCE

WE WANT TO
REDUCE
WAITING TIMES
28 DAYS
FROM REFERRAL

COMMUNICATION
SKILLS
IN CANCER CARE ARE
ESSENTIAL!



the
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Cultural Dimensions

IN HEALTHCARE

PALLIATIVE HEALTHCARE

STEREOTYPES

RACISM

STRUCTURAL
BARRIERS

LEARN
FROM PEOPLE WITH
LIVED
EXPERIENCE!

EXPRESSING
GRIEF

"CULTURE"
POOR
UNDERSTANDING

BIAS

PROFESSIONALS
MUST DO

ONGOING
Self-reflection!



CANCER SCREENING

PARTICIPATION
SAVES LIVES.

- ✓ EARLY DETECTION
- ✓ BETTER TREATMENT
OPTIONS!

PRIVACY
& MODESTY

- TEST KITS AT HOME
- HEALTHCARE SETTINGS

COMPASSIONATE
LISTENING

- COMMUNICATION
SKILLS
- LEARNING FROM PATIENTS
- RESPECTING CHOICES

OUR GOAL IS
CULTURAL
RESPONSIVENESS

DEVELOPING
CULTURAL
HUMILITY

building
Empathy
TRUST

COMMUNICATION
IS AT THE ROOT OF
GOOD CARE!

FINDING THE
WORDS?

NOTICE
CUES
& BODY
LANGUAGE

AVOID
BLOCKING
BEHAVIOURS

BE AWARE
OF YOUR
BIASES

I hear what you
are saying...

SHOW
ACTIVE
LISTENING

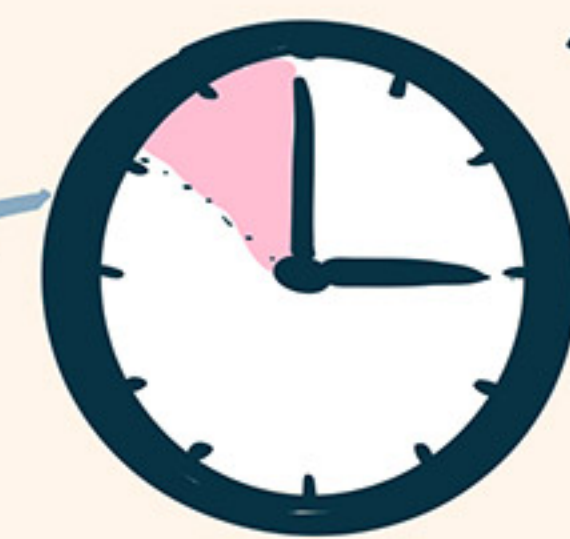
CREATE
PSYCHOLOGICAL
SAFETY

ALLOW
SILENCE

Health Inequalities & Cancer

MAJOR CHALLENGES

SUPPORTING HOMELESS COMMUNITIES



NOT ENOUGH TIME

APPOINTMENTS NEED TO BE LONGER TO BE ABLE TO TAKE IN ALL THE INFORMATION!

MAIN BARRIERS



DISTRUST

- MISPRESENTATION IN CLINICAL TRIALS
- CONSPIRACY THEORIES...

COMPLEX LANGUAGE

- JARGON
- NUANCES OF ENGLISH LANGUAGE

LANGUAGE

- ENGLISH ONLY
- DIALECTS

ACT!

IF WORDS FAIL...



USE ACTIVITIES

AS A WAY FOR MEN TO SUPPORT EACH OTHER!

PAY ATTENTION TO BODY LANGUAGE



USEFUL CONVERSATIONAL STRATEGIES

ACKNOWLEDGE

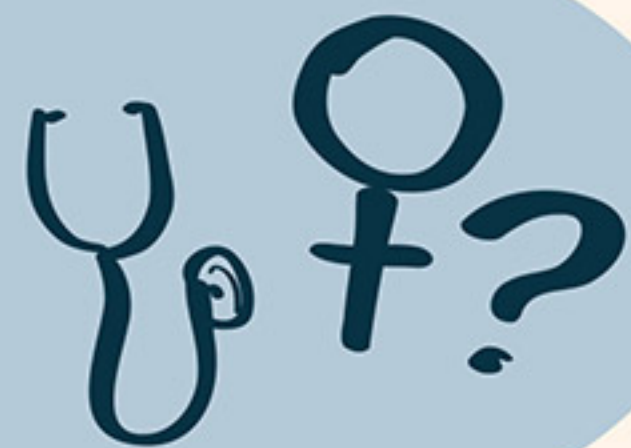
WHAT THE PATIENT TELLS YOU - DON'T DISMISS!



USE PLAIN LANGUAGE

AVOID ACRONYMS

BARRIER TO ASK: ACCESSING FEMALE PRACTITIONERS



MEN & TALKING GROUPS

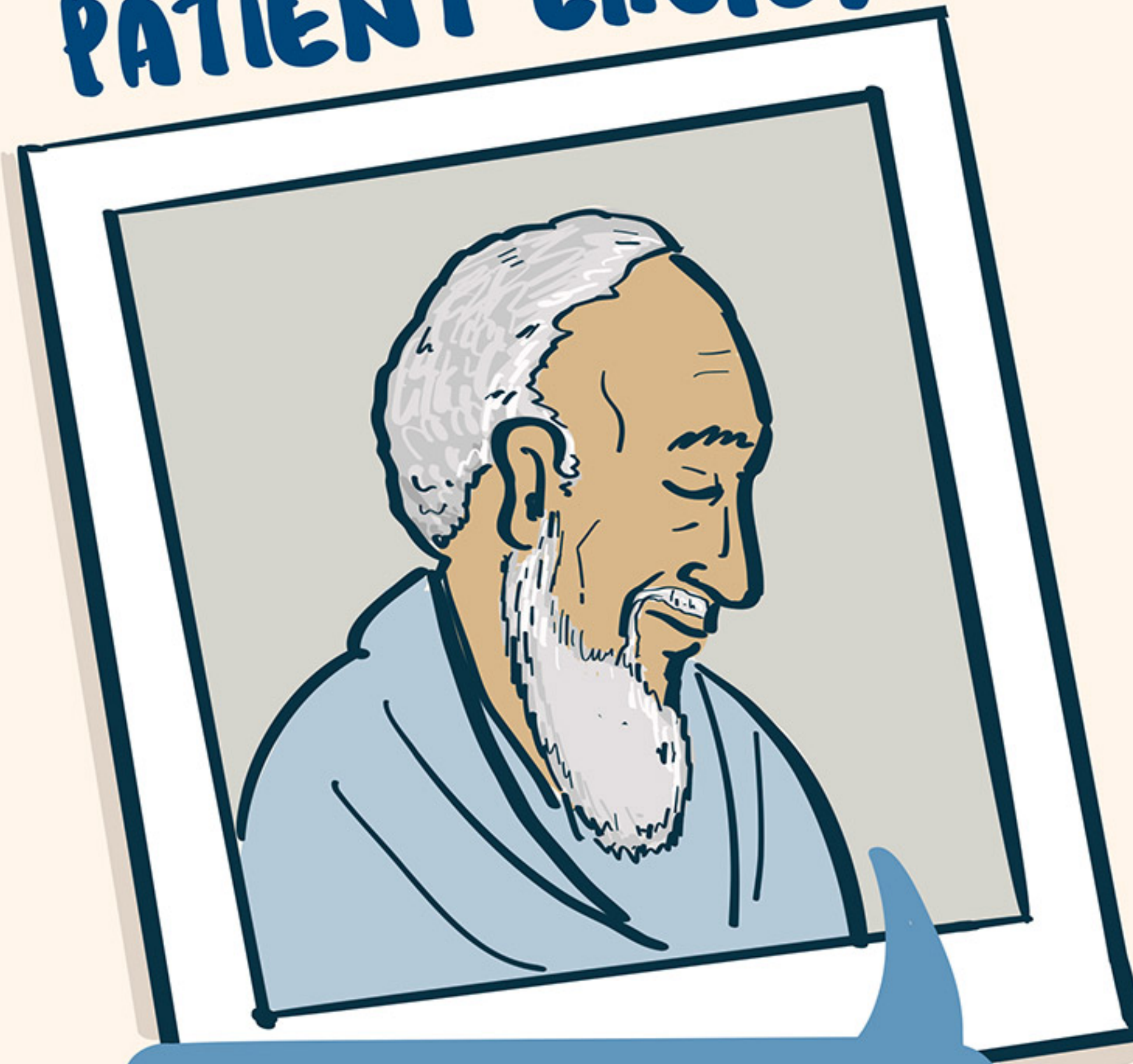
MEN CAN FEEL TOO VULNERABLE!



Scenarios & Techniques

CONVERSATION CARDS ACTIVITY

PATIENT CHOICE



"I don't want treatment,
I want to leave it
in God's hands"

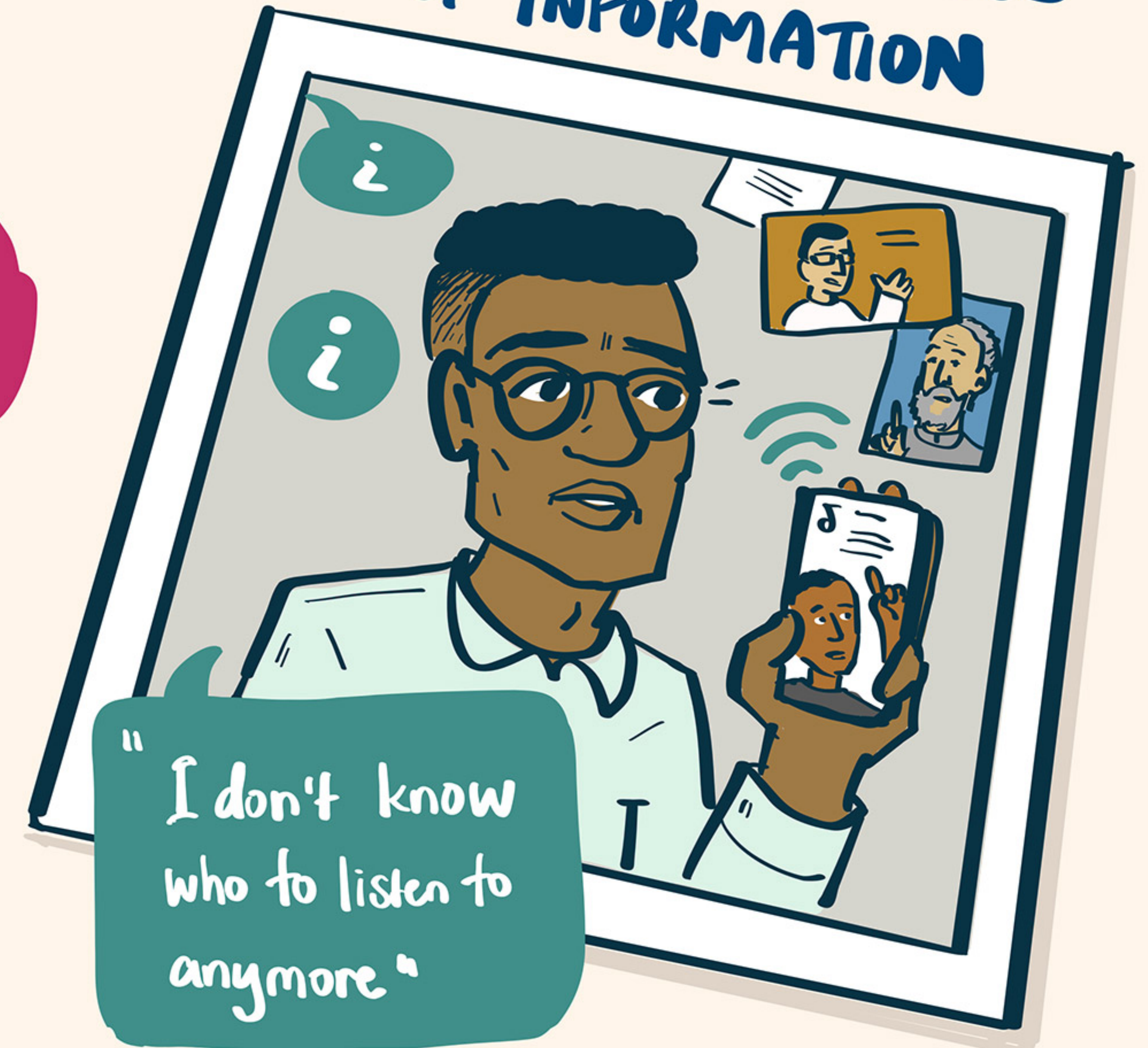
- ↳ RESPECT THE PATIENT'S CHOICE
- ↳ BE OPEN TO MORE THAN JUST ONE PATH

MEDICATION & RAMADAN



- ↳ OPEN UP THE CONVERSATION!
ADJUSTMENTS TO TREATMENT
OR PRAYER TIMES?

DIFFERENT SOURCES OF INFORMATION



"I don't know
who to listen to
anymore"

- ↳ CLEAR & CONSISTENT MESSAGES
- ↳ PARTNERSHIP WORKING