

Explain the concepts  
of equality, diversity  
and rights in relation  
to health and ...

[Life](#), [Relationships](#)



BTEC Extended Diploma Health and Social Care

Unit 2: Equality, diversity and rights in health and social care.

P1, P2, P3, M1- Concepts and discriminatory and anti-discriminatory practices. 6th November 2012 By Grace Kirby.

Contents Page: Page 3 - 5 Part 1(P1): Explains concepts of equality, diversity and rights in relation to health and social care.

Page 5 - 8 Part 2(P2): Describes discriminatory practices in health and social care. Page 9 - Part 3(P3): Describes the potential effects of discriminatory practice can have on staff and individuals using health and social care.

Page Part 4(M1): Assess the effects on those using the service of three different discriminatory practices in health and social care settings.

### **Part1 (P1):**

Explains concepts of equality, diversity and rights in relation to health and social care. This report will evaluate how Equality, diversity and rights incorporate into the health and/or social care sector and how it is benefited by all members of staff, service users or patients in each health and/or social care settings.

Equality is being equal to everyone else, especially in rights, status or opportunities. There are laws in place to ensure that every individual is treated equally this includes organisations having equality policies to reinforce the concept. Diversity is accepting and respecting differences between yourself and also other individuals around you. This means that

everyone is recognised as being different which is valued and respected. Rights are legal entitlements.

For example, an individual has a right to live in society without being abused or intimidated because of their race, beliefs, gender, sexuality or disabilities.

‘ Working in the health and social care sector, equality, diversity and rights are at the core of everything you will be doing. These terms embrace all individuals using the health and care sectors and every person working within them. It is essential that people working within health and social care recognise the need to treat every individual equally no matter what their gender, race, beliefs, sexuality, age, disability, ethnicity, sexual orientation, education, language, background or skin colour. ’ In Britain it has truly broaden its multicultural society with a huge variety of different types of cultures and backgrounds who live and work all over the country. ’ In total, 6.5 per cent of the British population consists of ethnic minorities. The British population is made up of the following ethnic groups:

- White - 53, 074, 000 (includes Irish, Polish, Italian, etc)
- Black Caribbean - 490, 000
- Black African - 376, 000
- Black Other - 308, 000
- Indian - 930, 000
- Pakistani - 663, 000
- Chinese - 137, 000
- Bangladeshi - 268, 000
- Other Asian - 209, 000 (includes Vietnamese, Malaysian, Thai)

- Other - 424, 000 (people who did not think they fitted the above categories)'

With Britain being so diverse it has a lot of benefits to being so multicultural such as; the arts, diet, education, language, tolerance, social cohesion and cultural enrichment. ' The arts provide a valuable way of bringing diversity to a wide audience.

For example, films made in other countries can demonstrate culture from around the world in a form that is easy to interpret and may intrigue as well as educated people about other cultures. Museums and exhibitions also give an understanding of cultures from around the world, past and present. Plays and other theatrical performances can bring an experience of contemporary world culture. All these things can help us understand and appreciate ' difference'.

With knowledge from the arts a person working in health and social care can develop a deeper understanding of diversity. ' Another good reason to enjoy a multicultural society is its food. In a recent survey in Britain the Chinese dish Chow Mein was voted the favourite food, with Indian food being the other main choice. In fact these two foods accounted for 70 per cent of food choices according to the market leader in consumer survey analysis Mintel. This information is very important for the health and social care profession, as individual tastes have to be taken into account when planning a person's diet. More and more people are enjoying a diet with herbs and spices.

This is partly due to our multicultural society and also because more people are travelling to other countries and tasting different types of food and drink.

A person's diet also needs to be tailored to their health requirements. For example, diabetics and some older people may need to exclude certain foods; likewise, a person's religious belief may mean that halal meat is a requirement. Asking people about their food likes and dislikes, and what they can and cannot eat, is all part of considering and respecting their diversity.

Education has been one of the most developed over recent years with diverse cultures being explored and valued within the curriculum. ' Schools and colleges now include studies in a wide range of cultures and languages. The education system has also benefited from people from different backgrounds reaching management positions and making positive changes in relation to diversity. The inclusion of equality, diversity and rights training in the health and social care profession has increased and has become an important part of the professional training programme.

All organisations are required by law to train their staff in equality, diversity and rights, usually under the equal opportunities framework. Education is an important tool in helping to get rid of ignorance about diversity. ' In today's society many people know more than one language, this can either be their mother tongue or a language that is learnt through the education system or self taught. This can be beneficial for health professionals, it gives chances to work abroad as well as learn something new.

With the development of online services, there is a wealth of information in most spoken languages. Information is also available in sign language, and the visually impaired can use specialised software, which speaks to the viewer. People who can speak languages other than English are highly

sought after in health and social care because many of those using the services may not speak English. Interpretation is seen as a new career in the health service, so speaking another language is clearly beneficial for health and social care professionals. 'Tolerance is a very important quality to have when working in health and social care.

You may come across people you do not get on with or who have different views from, you this is life and has to be accepted; after all, we are all individuals. You have to be mature and professional and professional when working with colleagues and helping people, even though you may sometimes not feel you want to be. Difference has to be accepted - even more in health and social care than in other occupations.

Social cohesion is where a community sticks together behind many reasons such as ethnicity. Feeling belonged somewhere is very important to human behaviour as it provides a safe and understanding environment where a group sticks together. In health and social care team members need to form this type of bond. Working in a diverse team requires each member to value and respect all others in the team. Without this bond a team works ineffectively and will eventually fall apart, causing major problems for the people using the service.

Cultural enrichment is 'all the social and cultural benefits described above will bring about cultural enrichment through diversity, which will improve life for everyone, both those who work in health and social care and those who use the services provided.' Active Promotion of equality and individual rights  
Health and social care professionals need to actively promote equality and

the rights of individuals, whether they are working in or using these services. The word 'Active' emphasises the need to ensure that action is taken on these issues.

There are many laws, policies and procedures in effect to promote equality and individual rights such as the care value base (CVB). There are seven principles which promote rights for every individual who uses a service within the health and social care sectors. The care value base principles are all equally important and should in theory form the basis of all your relationships with clients and colleagues. The seven principles are:

1. The promotion of the anti-discriminatory practice
2. The promotion and support of dignity, independence, and safety
3. Respect for, and acknowledgment of, personal beliefs and an individual's identity
4. The maintenance of confidentiality
5. Protection from abuse and harm
6. The promotion of effective communication and relationships
7. The provision of personalized individual care.

In health and social care there are various ways to actively promote equality and individual's rights such as the following:

- Promoting the rights, choices, and well-being of individuals
- Anti discriminatory practice - empowering individuals

- Dealing with tensions and contradictions Staff development and training
- Practical implications of confidentiality, e. g. recording, reporting, storing and sharing of information

## **Part 2(P2):**

Describes discriminatory practices in health and social care. In health and social care discrimination occurs more often than expected this can vary from your colleagues discriminating against you or the service users also the service users discriminating against you. Discrimination can happen in many forms, people are discriminated against for many things as well.

People are mostly discriminated against for the following:

- Culture
- Disability
- Age
- Social class
- Gender
- Sexuality
- Health status
- Family
- Status
- Cognitive ability

### **Culture**

' A person's culture is important to them and identifies who they are in the world. It is developed within the social group they are raised in and can

<https://assignbuster.com/explain-the-concepts-of-equality-diversity-and-rights-in-relation-to-health-and-social-care/>



change when they are mature enough to decide for themselves what culture best suits them. In the health and social care profession, respecting a person's culture is important for all concerned.

It is important for the individual because it creates a sense of support and understanding, promotes their well-being and can help their health. It is also important to health and social care professionals because they see the benefits of their care value base and this underlines the importance of respecting an individual's culture.

### **Disabilities**

In health and social care, you will work with and support people with various disabilities. The disability Discrimination Act (DDA) makes it unlawful to discriminate against someone who has a disability.

The act covers employment, access to goods, facilities and services of organisations, education, buying and renting a property and transport services. There has to be full accessibility for anyone with a disability. The organisation you work for will be required by law to have a policy in place regarding disability.

### **Age**

Age discrimination happens ' when someone is treated unfavourably because of their age, without justification, or is harassed or victimised because of their age'.

There have been some controversies regarding the dispensing of certain very expensive drugs to older people because of their shorter life expectancy, due to their age. Some people have argued that

the money would be better spent on drugs for younger people. However denying a person a drug due to their age may open the health service to considerable legal risk, and legal advice needs to be sought first before decisions like this are made'.

### **Social class**

Our social class is apparent from the place where we live. The higher the class, the better the place is kept and maintained. This inequality has also infiltrated health and social care. In the forward to a department of Health publication, Alan Milburn MP, former Secretary of State for Health, stated that the poor are far more likely to get cancer than the rich, and their chances of survival are lower too; the letter carries to say that health care is a postcode lottery.

However: ' At the heart of human rights is the belief that everybody should be treated equally and with dignity - no matter what their circumstances' -

Source: Equality and Human Rights Commissions (www.equalityhumanrights.com)'.

### **Gender**

A person cannot be discriminated against because of their gender. Under the Gender Equality Duty 2007, all organisations, including health and social care services, cannot discriminate unfairly due to a person's gender. Equal rights of access, health care, and rights must be followed.

### **Sexuality**

Sexual orientation can be referred to a person is attracted to another person of the same sex (gay or lesbian), the opposite sex (heterosexual), or both

sexes (bisexual). Discrimination against someone because of their sexuality is against the law.

If someone feels discriminated against because of their sexuality or feels they are being discriminated against they can seek legal help. Health status ' sometimes difficult decisions have to be made regarding a person's medical treatment, taking into account the cost of the treatment, their expected quality of life after the treatment, their expected quality of life after the treatment and their overall life expectancy, people making these decisions should always keep questioning their own assumptions and prejudices, and do their best to balance the welfare of individual patients with broader funding considerations.

#### Family status

Since sexuality has broadened in society with the sexuality act, people are discriminated against gay and/or lesbian parents, single parents, parents of different genders, parents of different races with mixed race children and other family groupings. Cognitive ability ' Discrimination on the grounds of cognitive ability may arise because of a brain injury a learning disability or difficulty, or a person's social class or education. It can be easy to discriminate against people with cognitive disabilities but care must be taken not to do so.

Valuing People Now is a government strategy which aims to improve the lives of people with learning disabilities, and those of their families and carers.

**Part 3(P3):**

describe the potential effects of discriminatory practice can have on staff and individuals using health and social care. In all aspects including health and social care discriminatory practice has very negative effects on the people being cared for. This section will explore the effects in more detail.

Marginalisations (treat a person or group as insignificant)

Marginalization is when people feel as if they are not a part of the main group or society as if they don't belong anywhere. This is a potential effect of discrimination because a person is made to stand out and made to be different from everyone else and they can therefore feel like they are all alone and marginalized from the rest of society or in the case of a health and social care sector, other service users. When a person is marginalized they are made to feel like they are different and not in a good way.

For example a lower class citizen being admitted to a private care trust because there is no room elsewhere and being surrounded by all upper class service users. They may then be treated differently because of that i. e. discriminated against and they may begin to feel pushed out alone because of whom they are and where they are. This is a clear example of Marginalisation. Disempowerments (make a person or group less powerful or confident) ' Individuals or groups that are discriminated against by other individuals or more powerful groups will feel disempowered.

They may be willing to fight against this and in some cases will win their case. However, many do not and they lose the will to fight against discrimination. As a result of this, they may become depressed and devalued

and disempowered, which in turn may lead to more health issues. ' This could happen in a health and social care setting for example Low self - esteem and self - identity Discrimination can lead to people losing their self-worth or self esteem. Some people already have low self esteem before they begin to use the health and social care services.

A person with low self esteem will experience negative self-identity, which brings a feeling of worthlessness and depression. The health and social care professional needs to ensure that an individual's self esteem is maintained at a high level or can be raised when its low, to help the person cope with the situation there in. Restricted opportunities ' All types of discrimination may lead to a person not using health and social care provision and this can lead to poorer health. The discrimination may be by individuals, health organisations or even the government. ' Negative behaviours such as aggression or criminality Negative behaviour, aggression or crime can be partly caused by discrimination.

Living in poverty and experiencing discrimination. Living in poverty and experiencing discrimination can affect an individual's behaviour. People may experience hardship and then take their frustrations out on police, teachers and health and social care professionals. People may take out their anger on those they see in a position of power and health professionals can find themselves being verbally or physically attacked. People may have anger management problems and they may take this out on the health and social care professional.

Drug users may also display negative behaviour while in care.

**Definitions**

1. Equality: the state of being equal especially in status, rights and opportunities.
2. Equity: the quality of being fair and impartial
3. Diversity: the state of being diverse; variety
4. Rights: that which is morally correct just or honourable
5. Opportunity: a set of circumstances that make it possible to do something
6. Difference: a point or way in which people or things are not the same
7. Overt discrimination: when you do not hide the fact you are discriminating, it is not hidden
8. Covert discrimination: hidden or subtle discrimination.
9. It is opposed to overt discrimination
10. Stereotyping: view or represent as a stereotype
11. Labelling: assign to a category, especially inaccurately or restrictively
12. Prejudice: preconceived opinion not based on reason or experience
13. Disadvantages: unfavourable circumstances Belief: an acceptance that a statement is true or that something exists
14. Values: the regard that something is held to deserve; the importance or preciousness of something
15. Vulnerability: the state of being vulnerable or exposed
16. Abused: the improper use of something

17. Empowerment: authorization: the act of conferring legality or sanction or formal warrant Independence: freedom from the control, influence, support, aid or the like of others Interdependence: mutuality: a reciprocal relation between interdependent entities.
18. Racism: prejudice or discrimination directed against some of a different race based on such a relief. S
19. Sexism: prejudice, stereotyping or discrimination, typically against women on the basis of sex.
20. Homophobia: an extreme and irrational aversion to homosexuality and homosexual people.

## References

1. Edexcel Health and social care level 3, Book 1 BTEC National P. 48
2. British Council, 2009
3. Edexcel Health and social care level 3, Book 1 BTEC National P. 50
4. Edexcel Health and social care level 3, Book 1 BTEC National P. 50
5. Edexcel Health and social care level 3, Book 1 BTEC National P. 50
6. Edexcel Health and social care level 3, Book 1 BTEC National P. 50
7. Edexcel Health and social care level 3, Book 1 BTEC National P. 50
8. Edexcel Health and social care level 3, Book 1 BTEC National P. 2
9. Edexcel Health and social care level 3, Book 1 BTEC National P. 65
10. Edexcel Health and social care level 3, Book 1 BTEC National P. 65 P. 66
11. Edexcel Health and social care level 3, Book 1 BTEC National P. 66

12. Edexcel Health and social care level 3, Book 1 BTEC National P.  
67
13. Edexcel Health and social care level 3, Book 1 BTEC National P.  
69
14. Edexcel Health and social care level 3, Book 1 BTEC National P.  
69
15. Edexcel Health and social care level 3, Book 1 BTEC National P.  
69