## A national initiative essay sample

Psychology, Abuse



In this part of the assignment I will be explaining how National Initiatives promote anti discriminatory practice and how it is promoted in health and social care settings. I will then be assessing a recent national initiative policy promoting anti discriminatory practice and the difficulties that may arise in a health and social care setting to put into practice anti-discrimination. To conclude I will be evaluating a recent initiative that has been successful in promoting anti-discrimination and how to overcome difficulties that may arise when anti-discrimination is put in to place in a health and social care setting. What is an Anti-discriminatory practice?

It is action taken to prevent discrimination on the grounds of race, class, gender, disability etc and it takes into account how we behave towards other individuals. It is very important for all employees in a care setting promoting practice in the workplace as it is a way of overcoming prejudice, in doing so they are trying to get rid of discrimination and promote equality for service users and for the staff who are employed in providing service for the people. ADP means anti-discriminatory practise: more than simply not discriminatory, its means activity working discrimination and seeking to repair the damage it causes. If a care worker is sexist there only care for their practise is discriminatory and if care worker dose good practise it's called anti discriminatory practice What is a National Initiative?

These come under the sector of anti-discriminatory practices where they overcome discrimination if it takes place. There are three main national initiatives which cover anti-discriminatory practice they are; Conventions, legislation and regulations. Code of Practice and charters as well as, the organisational policies and procedures. These initiatives are very important

to society and towards health and social care sector as it ensures that each individual is treated equally and that there is no inequality created between individuals no matter what race, colour, gender, age, culture, disabilities, social class, cognitive ability or health status they may be.

The codes of conduct help guide service providers on their roles, rights and responsibilities it also helps understand service users on what to expect from the service providers through the support they get and the way they are treated from the health and social care staff. Most of them have a charter or code of practice which they have to follow and go according to it. This is done by the General Social Care Council who help social workers by teaching them the rules of conduct and training which they then need to apply to their profession in a particular care setting. The code also tells them what the service users need to expect from the providers and if they are treated unfairly they have the right to complain. Codes is a another word of saying rules of behaviour. European Connection on Human Rights, Act 2000

Sex discrimination Act, 1975

Mental Health Act, 1989

The Children Act, 1989

Data Protection Act, 1998

Human rights, 1998

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code of practice which they have to follow and go according to it. The code also tells them what the service users need to expect from the providers and if they are treated unfairly they have the right to complain. In addition, working in a health and social care environment the service providers need to be aware of the codes of practice and charters and ensure they are given training about them. There are rules and guidelines on procedures within organisations and how they should be carried out to promote anti-discrimination. Managers in health and social care have a responsibility to support and guide service providers in their employment to make sure they provide equality, diversity and rights to service users.

This involves positive promotion of individual rights, advocacy, work practices and staff development and training. Firstly, positive promotion of individual rights can be seen through notice boards in the hallways, reception areas or staff rooms. Having a charter for example, should be put on display for the service users to read. In addition, policies and procedures should be available for the service providers to read to help them guide to certain things if they are unsure about anything or they can be informed of where the policies and procedures can be found. Also staff should be given handbooks when they have been employed to a specific role and regular training should be given to make sure that all health and social care providers are kept up to date with changes and reminded of their duty of care. Secondly, advocacy is when a person is speaking or representing another individual who are too ill or frail to speak for themselves or they don't even know their own rights as an individual and requires assistance for someone to make these decisions related to care or treatment.

The advocate can be a professional worker or even a friend or relative and next of kin. Legislation: legislation cants stop people from being mean and nasty (stop discriminatory practise) as a society it makes a more of aware of the situation. The law cannot stop prejudge and the society think this there is sanctions in place to punish you. The equality Act , 2012 has overtaken all the rest because we have history and understanding. Professional body N (nurses). M (midwife). C (council) HCPC is for social workers

## M1:

The national policy initiative of the Equality of Human rights Act 2010 has been successful in promoting anti-discriminatory practice for example, individuals with disability who found it very difficult getting into the setting because the service had steps instead of a ramp for wheelchair users. This showed inequality and discrimination to people with disability as there was no appropriate facility for individuals with disability could use. In order to make the practice an anti-discriminatory the service providers should replace a ramp instead of steps which would make it easier for wheelchair users to use. On the other hand, a recent case study where the national policy was not working was from the BBC where basic home care help is breaching human rights. The home care review by the Equality and Human Rights Commission found some signs of physical abuse, theft, neglect and disregard for privacy and dignity. The home care review said about half of people who had given evidence reported approval with care, but a number of common complaints were made by others.

As Older people not been given enough support to eat and drink, with some staff arguing health and safety restrictions prevented them preparing hot meals. Neglect because care workers stick firmly to their tasks, such as a case when a woman was left stuck on the toilet because staff were too busy. Financial abuse, including money been stolen over a period of time. Chronic disregard for privacy and dignity, such as leaving people unwashed and putting them to bed in the afternoon. Patronising behaviour, with cases highlighted including staff talking on mobile phones while they tended to clients and also physical abuse involving pushing and rough handling. Equality Human Rights commissioner Baroness Sally Greengross, who led the report, said it was time home care provided by councils should be included in the Human Rights Act. As one of the ways to stop it continuing is to close the loophole, which means that any care that's specially made by a local authority or another public body should come under the Human Rights Act so people are protected from abuse.

The Equality Humans Right Act 2010 could be improved further as service providers are not meeting the needs of the patients as there are still signs of mistreatment and abuse. As the above article has shown elderly people are not being well looked after by the service providers. To promote a more anti-discriminatory practice I think that cameras should be put into place in health and social care settings so that the head of the services are aware of what is happening around in the environment and how the service providers are treating the patients and whether they are meeting their needs. However, putting these cameras into health and social care settings could invade service user's privacy as they like to keep themselves to themselves.

But in order to go ahead with putting cameras into the settings they should ask consent from the service users on whether they are happy in allowing them to put these types of technology into the building for their safety. This would create a more anti-discriminatory practice and it would be safer as there would be equipment that is put in place in the setting to stop all these dangerous situations occurring to the service users and make the setting more users friendly. In October 2010 a new law about discrimination is being introduced. This is called the Equality & Diversity Act 2010. This makes the rights that you have at the moment stronger, and also gives you some new rights. For example, the Equality & Diversity Act includes making it clearer that you can't be treated worse than other people because of your changed gender, your marriage or civil partnership, your pregnancy or maternity, or because you're a carer.

Another right that will come under this Act will be that woman can't be treated worse than other people for breast-feeding her baby in public places like cafes, shops and buses. A bus driver couldn't ask a woman to get off the bus just because she's breast-feeding her baby. Also, the Equality & Diversity Act says that you can't be treated worse than other people because you are a carer, for example for a disabled person. So, an employer couldn't refuse to give someone a job just because they think they will take too much time off to look after their disabled father. You'll have rights not to be treated worse than other people because of your age when you use goods and services. Public Services Equality Duty means that if you are a puvlic body you have to an extra level of responsibility to promote equality. What's changed? Indirect discrimination

Associative discrimination

Perceptive discrimination

Harassment

Harassment by a third party

Victimisation

Positive action

Pre-employment health related checks

Extension of employment tribunal powers

Equal pay direct discrimination

Pay secrecy.

The nine characteristics:

Age: Where this is referred to, it refers to a person belonging to a particular age (e. g. 32 year olds) or range of ages (e. g. 18 – 30 year olds). Disability: A person has a disability if s/he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities. Gender reassignment: The process of transitioning from one gender to another. Marriage and civil partnership: In England and Wales marriage is no longer restricted to a union between a man and a woman but now includes a marriage between a same-sex couple. This will also be true in Scotland when the relevant legislation is brought into force. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples (except where permitted by the Equality Act). Pregnancy and maternity: Pregnancy is the condition of being pregnant or expecting a baby.

Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding. Race: Refers to the protected characteristic of Race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins. Religion and belief: Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (e. g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition. Sex: A man or a woman.

Sexual orientation: Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes. Section 1, Marriage (Same Sex Couples) Act 2013. Marriage and Civil Partnership (Scotland) Act 2014. Types of discrimination covered by the act:

Direct discrimination: Direct discrimination is when a healthcare or care provider treats you differently and worse than someone else for certain reasons. Direct discrimination can be because of who you are. It can also be because of who someone thinks you are or because of someone you're with or know. You're of Asian origin. You've just found out that you're private dentist has charged you more for the same treatment as one of your friends who's white British. You think this is because of your Asian. If this is the case, it's direct discrimination. You've been treated differently and worse than your friend because of your race which is a protected characteristic. Direct discrimination is unlawful under the Equality Act and you can take action

about it. Indirect Discrimination: The law which says you mustn't be discriminated against is called the Equality Act 2010. Discrimination which is against the Equality Act is unlawful.

This means you can take action in the civil courts. Indirect discrimination is when a healthcare or care provider has a practice, policy or rule which applies to all its patients and clients, but it has a worse effect on some people than others because of who they are. A GP surgery requires patients to provide proof of address when registering. This applies to all new patients regardless of their protected characteristic. But Gypsies and Travellers are less likely to be able to provide a proof of address and therefore they'll find it more difficult to register. This could be indirect discrimination against Gypsies and Travellers because of the protected characteristic of race. The rule seems fair, but it has a worse effect on this particular group of people. Associative Discrimination: Associative discrimination now applies for all practical purposes to all the discrimination strands. It did apply already to race, religion or belief and sexual orientation and has been extended to cover age, disability, gender reassignment and sex.

This is direct discrimination against someone because they associate with another person who possesses a protected characteristic. An example of associative discrimination might be a non-disabled employee who is discriminated against because of action she needs to take to care for a disabled dependant. Perceptive Discrimination: perceptive discrimination will now apply for all practical purposes to all the discrimination strands. This already applies to age, race, religion or belief and sexual orientation and has

been extended to cover disability, gender reassignment and sex. This is direct discrimination against an individual because others think they possess a particular protected characteristic. It applies even if the person does not actually possess that characteristic.

Harassment discrimination (third party): Harassment is "unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual". Harassment applies to all protected characteristics except for pregnancy and maternity and marriage and civil partnership. Employees will now be able to complain of behaviour that they find offensive even if it is not directed at them, and the complainant need not possess the relevant characteristic themselves.

Employees are also protected from harassment because of perception and association. Harassment will apply to all protected characteristics except for pregnancy and maternity and marriage and civil partnership. However, because of the overlap with sex and sexual orientation discrimination, for practical purposes, employers should assume the same protection will be given to people with these characteristics as for other protected characteristics. Third party: This already applies to sex and is now extended to cover age, disability, gender reassignment, race, religion or belief and sexual orientation. The Equality Act makes us potentially liable for harassment of our employees by people (third parties) who are not employees (for example, contractors or external trainers. Third parties can

also include students). Strict requirements for third party harassment means that one-off incidents may still occur without the employee having recourse to complain: we will be liable however when harassment has occurred on at least two previous occasions, and we are aware that it has taken place and have not taken reasonable steps to prevent it from happening again.

Victimisation: Victimisation occurs when an employee is treated badly because they have made or supported a complaint or raised a grievance under the Equality Act; or because they are suspected of doing so. An employee is not protected from victimisation if they have maliciously made or supported an untrue complaint. There is no longer a need to compare treatment of a complainant with that of a person who has not made or supported a complaint under the Act. The Equality Act 2010 in relation to disability discrimination applies to the provision of educational services, as well as other services and also includes an institution's relationship with its staff.

The law is framed in general terms and is not intended as a barrier to innovative use of technology. Neither was it intended to mandate use of ICT as being appropriate in all circumstances. Reasonable adjustments and workarounds will vary as required in order to prevent substantial disadvantage arising in particular circumstances. The Public Sector Equality Duty reinforces the requirement that colleges and universities need to be anticipatory and proactive in allowing disabled persons to access and participate in tertiary education activities.

D1

This report presents findings of a telephone survey of organisations' understanding of equality legislation which was conducted between November 2011 and January 2012. It is the first in a sequence of three topic reports that procedures a important early phase of the Government Equalities Office (GEO) assessment of the Equality Act 2010, which was mainly applied in October of that year. This report examines workplace equality structures and differences in organisations' attitude concerning equality. The Equality Act combines the preceding nine pieces of equality legislation founded on protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation to create, for the first time in Britain, united equality legislation. The first main objective of the Equality Act is to simplify legislation by removing irregularities and variations that had developed ended time.

The present topic report aims to give an impression of organisations' appointment with workplace equality legislation. Thus, the primary research impartial is to provide evidence of levels of meeting with, and considerate of, equality issues and to instrument how these vary by characteristics such as size and segment. The phone survey involved 1, 811 formations with two or more workers across England, Scotland and Wales. It covered the private and public sectors as well as the voluntary, community and social enterprise (VCSE) sector. Over-sampling was employed in Scotland and Wales and the final dataset was one-sided to reflect the actual geographic spreading of organisations by nation and English region. The survey discovered extensive

assignation with equalities and with equality legislation. The devastating majority of formations had either a written policy relating to equality or an approach to discrimination issues that was known by their employees.

Although a written policy was more widespread in medium and large organisations, almost half of micro-enterprises (with between two and nine employees) also had one. Most organisations had a chosen employee who was responsible for equality issues. The study provided evidence of a strong connotation between having a written policy and good practice (although it cannot attribute causation); Amid organisations with an method to equality issues, there was generally a number of encouraging factors . In small, medium and large enterprises alike, most defendants felt the approach resulting from a sense of moral obligation on the part of the owners or executives as well as a concern to be in obedience with workplace equality regulation. A large majority of written policies explicitly covered characteristics that had been protected by legislation prior to the Equality Act. Though, even in the small organisations, at least half of policies did so In the largest establishments (with 250 or more employees) more than 80 per cent included these protected characteristics. In establishments with fewer than 50 employees, only a minority had become more aware of equality legislation over the previous two years whereas in medium and large enterprises this was the response of the majority.

Among large organisations, three-quarters had become more aware of their responsibilities in this area. The amount of defendants reporting that there is a decent reason for their organisation having an approach towards equality

exceeds 90 per cent in every group of organisation. Companies are concerned that their establishments are compliant with workplace equality legislation and are also concerned with how their organisation is perceived. Having a written policy is associated with good practice while merely having a designated equality officer is not. Most medium and small organisations, and most private enterprises, report no change in awareness of equality in the workplace issues over the previous two years. On the other hand, three-quarters of large organisations and just over half of public organisations do report having become more aware. This suggests that the widening scope of equality legislation may have had most impact on those with the highest level of prior engagement. A third of private sector organisations' policies do not mention marriage or civil partnership and nearly half do not mention gender reassignment.

Pressure to promote equality is not coming principally from staff but from external pressures or organisations' sense of moral or social responsibility. Even among large organisations, only a quarter mention pressure from staff or trade unions. This finding underlines the importance of external regulatory and moral pressures. The results establishments with 10 or more employees were highly likely to have a written policy relating to equality matters as were organisations in the VCSE (voluntary, community and social enterprise) and public sectors. By contrast, among micro-enterprises (with between two and nine employees) and in the private sector, only about half of establishments had a written policy. Among organisations that did not have a written policy, a large majority (89 per cent) indicated that there was, nevertheless, a conscious approach to equality matters with regard to

recruiting and managing staff. The same percentage (89 per cent) stated that the organisation's approach to equality was widely known by staff.

However, only a minority confirmed that a written policy was being prepared (three per cent) or was likely to be prepared (14 per cent). Report 2

The survey presented respondents with scenarios that they might face in areas such as recruitment and promotion, which were related to provisions of the Equality Act. For each, they were asked to rate the organisation's support for equality legislation in this context. These scenarios revealed that there was widespread support for legislation that prohibited discrimination, in these specific contexts, on the basis of characteristics such as sexual orientation and faith.

One scenario involved recruiting a male candidate for a job over an equally qualified female because it was assumed the woman would start a family soon. In medium and large organisations, and in the public and VCSE sectors, there was a similar level of support for legislation that prohibits this action . Furthermore, while support for legislation to prohibit this was somewhat lower in micro- and small organisations, and in the private sector, even here around three-quarters of organisations wholeheartedly supported it.

Another scenario related to advertising a job which placed an upper limit on the age of applicants who will be considered. Compared with the gender example, there was a lower level of support for legislation that prohibits this type of discrimination.

Support was lower still for the scenario where a disabled employee was refused promotion because they had taken substantial sick leave in the previous year. The drop in support for the disability example compared with the gender example is particularly pronounced in the public and VCSE sector, reflecting their almost total support for gender equality legislation. Pressure to promote equality is not coming principally from staff but from external pressures or organisations' sense of moral or social responsibility. The results establishments with 10 or more employees were highly likely to have a written policy relating to equality matters as were organisations in the VCSE (voluntary, community and social enterprise) and public sectors. Among organisations that did not have a written policy, a large majority (89 per cent) indicated that there was, nevertheless, a conscious approach to equality matters with regard to recruiting and managing staff. The same percentage (89 per cent) stated that the organisation's approach to equality was widely known by staff. Report 2

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