

IS THERE A BUSINESS CASE?

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It's hard to not feel a sense of dissatisfaction with the equality agenda. Despite our best efforts – or, in some cases, a lack of effort – our rate of progress has not matched the pace of changes in the needs and complexity of the population.

Figures from recent patient surveys, for example, show people from African, Caribbean, and Pakistani backgrounds are less likely to say they were treated with dignity and respect during their care, less likely to be involved in decisions about their care, and less likely to say they were respected by doctors. Younger people also fare less well on these indicators compared to older people: women, less well than men. The Stonewall guide on training and creating a 'gay friendly' workforce, presents some compelling reasons as to why it is important that organisations work on trying to create places where all individuals can thrive. There is nothing here that organisations would not disagree with – organisations can reap the benefit of increased productivity, of making the most of a diverse workforce, retaining talented staff, improving services and finally complying with the law. So despite evidence of disparity between particular groups, and compelling reasons for change – why aren't we getting any closer to achieving the ambitions we say we want to achieve?

Now, I know what you're thinking – your mind is immediately searching for individuals from protected groups, who hold positions of power and influence. You are seeking out the exceptions - projects that you have been involved in, training you have been on, patients helped, colleagues you know and work with productively. But I think you will still find that these are exceptions, and if you are honest, you couldn't guarantee that these positive experiences were routine, and were likely to be repeated in all areas of your service.

Perhaps in recognition of this the NHS has proposed a number of new initiatives recently. In addition to calls to make the Equality Delivery System mandatory, NHS England has pledged to introduce a Race Equality Standard to gauge organisations' progress on key equality indicators. Key to these initiatives is a focus on the what rather than the how – that is, they specify in what areas outcomes need to improve, but leave the mechanics and machinations to individual organisations.

In doing this, there is a danger that our good aspirations, our targets, our schemes and our collection of data and our search for evidence, will not help to motivate action on equality. Seeing inequalities perpetuated down the years, staff plod through the motions – dutifully filling in monitoring forms or attending generic training, all the while sceptical of the activity's ability to bring about change. Furthermore, the leadership and guidance – or lack of it – that's provided doesn't always equip people with a clear vision of what they need to do differently in their day-to-day roles. Faced with the prospect of doing or saying the wrong thing staff often prefer to take the safer option: do nothing at all.



It's important to recognise the diminishing returns we're getting from our equality interventions. To recognise that as compelling as we believe this agenda is – we need to think about what gets in the way of change – and how can we really help others to be affected by an agenda which we say we believe in – but often, if we are honest, pay lip service to.

The 'awakening culture' programme is yet another initiative – but we are designing it and delivering it based on the recognition that to get equalities moving we need to build on past approaches, and

build in new strategies, such as human rights-based approaches, to support people to deliver the rights and entitlements that we all deserve. We need to enable all staff – not just those from protected groups, to have the understanding and skills they need to be better practitioners – not only of health, but also of inclusion and equality. We need space to hear what's not going well and to be honest about the challenges we face in delivering diversity. We also need to listen and learn.

