



EEiC

Interactive tools

Frequently Raised Objections

Common 'Nightmare questions' encountered by champions for ethnic equality in health

Introduction

Progress on commissioning better health services for multi-ethnic populations is often blocked by attitudes and misconceptions. This resource aims to support any stakeholder to confidently make the case for why attention to ethnic inequalities must be part-and-parcel of commissioning and service improvement work. It could also be useful for individuals involved in commissioning who are currently doubtful about the need to consider ethnic inequalities and are uncertain of their own role and responsibilities in this regard.

In the EEiC project, researchers talked to participants about common barriers they had encountered in their work, which fell into clear categories. The project also collected responses which participants used to counter and inform those objecting to service or policy change. However, it is worth noting that these barriers may be 'invisible', in that they are often unspoken mind-sets which may indirectly hinder progress rather than always being explicit verbal obstructions.

This tool provides a list of common objections and issues raised when trying to improve health services for minority ethnic populations. They are intended to help champions for ethnic equality to anticipate problems raised by others, to develop responses and solutions.

Category 1: What's all the fuss about?

"Ethnic inequalities are not an issue in modern Britain, this is political correctness gone mad"

"We treat everyone that comes in the door equally, there's no discrimination"

"I'm not sure it's right to commission extra things for minority ethnic people. That doesn't seem fair to me."

"Minority ethnic people have a worse time in the NHS because they can't speak English or they don't understand the system. I'm not sure it's right to spend tax payers' money on these issues."

Category 2: What's this got to do with me?

"Ethnic inequalities are important but not our business as health commissioners"

"Ethnic inequalities are the remit of public health"

"Ethnic inequalities are caused by socioeconomic deprivation [and so not our problem]"

"My remit is Quality and I am fully preoccupied with that, this is the work of the E&D people"

"It's the responsibility of the service provider to decide how to deliver their services for specific communities, not for commissioners to dictate"

Category 3: I'd like to help, but it's not possible in the current situation

"Ethnic inequalities are important but can't be a focus in the current economic climate"

"We'd like to do more, but as commissioners we have very little room for manoeuvre"

"Ethnic equalities are an important issue, but we have to prioritise efficiency and quality issues first"

"The focus is always on total numbers and bottom lines, so it's not really possible to start thinking about different, small groups within this, if we direct resource in that direction then we won't meet our main targets"

"Addressing these issues is not a core priority; there are too many competing interests"

Category 4: We need to be cautious in how we deal with this difficult area

"We can't put too much emphasis on ethnic inequalities without considering other dimensions of inequality, it's not right to privilege ethnicity"

"If we do special work for minority ethnic communities this will lead to resentment among White people who feel overlooked."

"It's important that we don't ghettoise this, you know, it can be sensitive if we focus too much on the cultural differences"

"The problem is that this category, BME, is so diverse ..."

"It's so difficult to do anything about this, we have tried lots of things and nothing really works... we can end up simply wasting resources on this ..."

"We could open up a whole can of extra need, and extra cost"

Category 5: This is important but we currently just don't have enough evidence or information to be sure what to do about it

"We don't have good enough service level ethnic monitoring data to show that this is definitely a problem worth investment"

"Staff don't want to collect this data, the questions are inappropriate and people don't want to give ethnicity data anyway"

"There's no indication that this will actually be a more efficient approach and save money"

"This intervention has only been trialled in one area with a specific community, it might not be transferrable"

Real Objections and Rebuttals from Interviews



This is all just political correctness and we don't really want to do it. We deal with individual patients sat in front of us so we're not discriminating

"It's not about political correctness, it's absolutely not, it's about going back to need, action, impact and assessment, and evaluation"

"People perceive this as political correctness, rather than providing appropriate services to all those who need them"

"One quarter of the population will be from a BME background, you cannot ignore that agenda"

I've got to balance my budget, I can't be doing special things for BME communities if that costs me more money. We've got to see value for money within a 12 month cycle.



"I mean the connection between saving 20 billion off the healthcare budgets, and actually being able to get services that are right first time, to me it's an obvious link"

"All the advertising we did was free, so local newspapers, radio stations, posters, leaflets, health fairs"



I don't have a role to go sit down with community groups and spend time talking to them about what would work. Commissioners don't have a budget for it, because we send it all to the provider

"Good commissioners get out there and talk to parents, carers, families; they have many mechanisms to understand how it feels to be receiving services."

"Local authorities over the years have got better at doing consultation, at engaging communities, whether it's through questionnaire surveys or focus groups and so on"

"Westminster as an example, they invite, they've got a website, they've got various templates and they put out and say to whoever and anyone 'If you've got an issue you want exploring, or you've got some data you want to share, put it here' "