

Teaching equality, diversity and
health inequalities... with help
from imaginary friends!

Dr Diane Willis
Nursing and Health Care

This session

- This session will explain how various characters were utilised to help students:
- understand the theoretical concepts within the course
- appreciate the impact of social and psychological influences on health and well-being
- understand inequalities and diversity

Learning outcomes

- Develop understanding about the inequalities imagination model
- Appreciate the utility of imaginary characters in teaching
- How awareness of health inequalities experienced by different groups in society are enhanced by the characters

Basis of work

- Year 1 module: understanding health and well being:
 - An introduction to health policy, the concepts of health and wellbeing, and associated implications for promotion of health, from both psychological and sociological perspectives.
 - * had also been used yr 2 separately
- Utilised lectures, e-resource, discussion board, reflection and discussion
- Number of students taking the course 130-260

Bridging the Gap

Bridging the Gap: A health inequalities learning resource

Accessibility



Print this page

Welcome to Bridging the Gap

“...stark inequalities in health and other social outcomes across Scotland are not just unfair for people who are adversely affected, but ... bad for the country as a whole.”

Equally Well Review, Scottish Government, 2010a



“ In Scotland today, there is evidence of significant health inequalities in terms of mortality, physical illness, mental health and wellbeing, lifestyle behaviours associated with ill health and access to and use of health services... Inequalities are also evident according to gender, age, education, ethnicity, sexual orientation and the presence of disability or mental health problems ”

Scottish Government, 2008a

Section 2: Health in Scotland

Home

Introduction
Understanding Health Inequalities

Health in Scotland

Poverty, Deprivation and Inequalities
Health Inequalities Today - Part 1
Health Inequalities Today - Part 2
The 'Glasgow Effect'
Equality, Difference and Health Inequalities
Section Summary

Identity and Health

Discrimination and Barriers to Equality
Drivers for Change
Values and Principles,
Policy and Practice
References



“ A major cause for concern is that inequalities increasing within Scotland... Thus, the narrowing of the main aims of the health improvement challenge ”

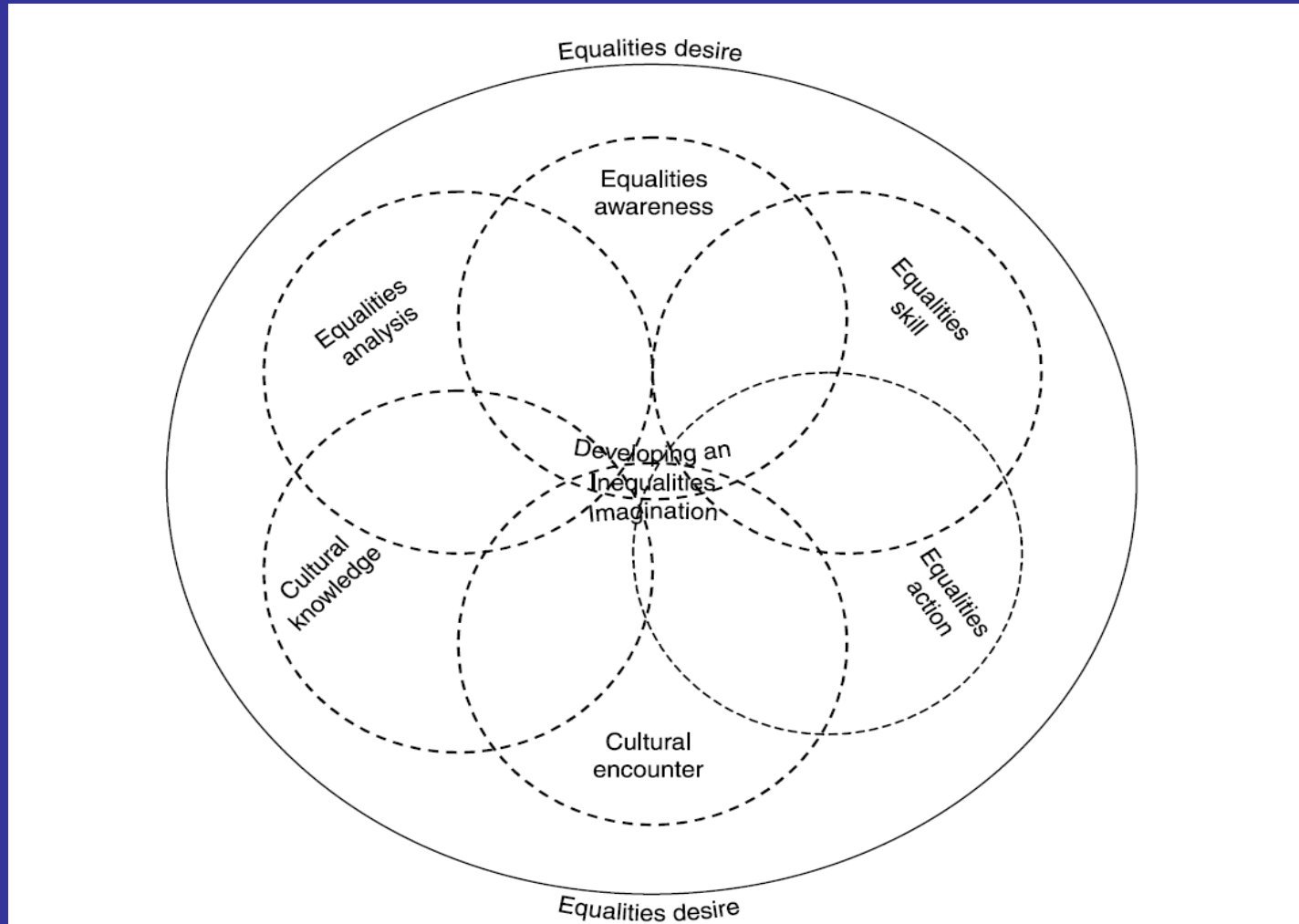
Scottish Public Health

Overview

In Health in Scotland we look at some key features and influence of inequalities in Scotland. In particular we consider what has been called the 'Glasgow effect.'

We consider life circumstances as significant factors in understanding inequalities, and introduce the 'protected characteristics' such as

Inequalities imagination model



Hart, Hall and Henwood (2003)

Characters – my imaginary friends

- Sharon: Jason her 2yr old son, Garry her boyfriend, baby no2, Rosie (her mum), Jessie (her Grandmother) and two brothers Joe and Danny.
- Alex and Dr Singh (Alex has 2 sons - John divorced. His son Martin lives with his mum and step-dad. Other son Terry, married to Maureen and grandchildren Sarah and Darren).
- Alice and Paul

My own characters:

- Dr Singh and family: Gita (mother-in-law), Ramesh (son) and Jeevanjot (wife)
- Sarah and Philip (her son)

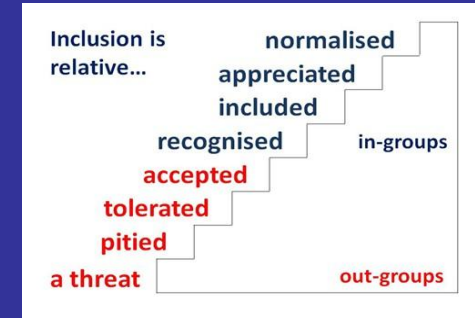
Example 1 Prejudice & discrimination

- Lecture: set the theoretical base using psychology and sociological work e.g. stereotypes, labels, attitudes, beliefs. Video: Jane Elliot.

- How did the characters help?

Social acceptance – Sharon

- Q: How do you think Sharon sees herself?
- Q: How do you think others might see Sharon?



- *Not attended three antenatal appointments with her midwife17 year old mother of a 2 yr old - is heavily pregnant.. Lives in a council flat, and is on welfare benefits.....*

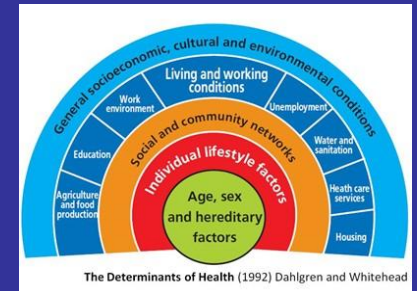
Alex – Stereotyping

- What about Alex's expectations for himself, do you think he is right to accept things as they are?
 - *Grace has left a hole that can't be filled, and he is getting older. Maybe he does just need to just get on with things...*
- Would it have made any difference to how Dr Singh's handled things if Alex had been 44?

Example 2: Determinants of health

- Lecture: Introduce the Wider Determinants of Health (Dahlgren and Whitehead 1992).

Explore using Alex – getting students to map this out
Discussion board/self directed activity



- Q: In what ways do you think Alex is at risk in terms of his health?
- **Age, sex and hereditary factors:** Alex older – male
- **Individual lifestyle factors:** poor diet or lack of physical activity – think about why this is.

Example 3 communication skills

- Q: How do you think Dr Singh managed the consultation with Alex?
- Q: Would you handle the situation the same way? If no, what would you do in this situation?

- Discussion board and then in class this was discussed - following week Dr Singh sent a note thanking them for their input.

- Weight loss (bereavement), hip pain (mood and motivation)
 - Medical model of health vs psychobiological – missed referral opportunity
- *Alex: folk with bigger worries than me' Dr Singh ..you're the boss.*
 - Limited time in consultation, Doctor-Patient relationship
- *Anti-depressants and Alex: 'happy pillsget addicted'.*
 - Health promotion , Lay health perception, Attitudes

Other areas

Smoking and health promotion

- Q: What concerns would you have about the effect of Sharon's smoking on Jason and her unborn baby?
- Q: What other health concerns might you have about Sharon, given what you know about her circumstances?

Early years teaching/developmental psychology'

- Q: Do you think Sharon's situation has any other implications for Jason, for example achieving his developmental milestones?

Social policy

Evaluation

- How not to do an evaluation !
- Case studies:
 - *“The case studies work well in bringing the issues together and relating the different people to certain issues.... instead of just talking about discrimination it was related to three people who we know personally this is good and helped to develop an understanding.”*
 - *“Explained some very stereotypical situations which helped me to understand why people get into disadvantaged circumstances”.*
- Questioning approach:
 - *I'm less judgemental it's easy to judge people in the way they live their lives and the unhealthy choices they make but now I question the reasons behind those decisions - did they actually have a choice?*
 - *Sharon's case study allowed me to take a step back & think before I am quick to judge as I am from a similar area and the people do live like this.*
- Future practice
 - *“Treat everybody fairly, don't judge them by their situation because I might not know their background - can't read their mind so don't know why they're here.”*
 - *“it may ensure that people are treated as equals in the future”.*

References

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