

# From Silence to Speaking: On 'Silences', health and the importance of being heard

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#### **Professional Practice**

"Science and art of promoting health, preventing disease and prolonging life through organised efforts of society, organizations, public and private, communities and individuals" (Wanless report 2004, p.3)





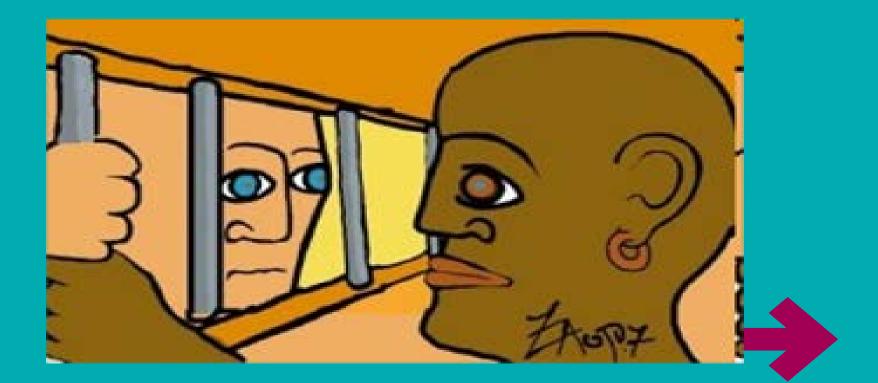
#### **Diversity and Health**

There is no encounter between a health professional and patient or client that does not entail working with difference. Thinking and learning about difference, and about how to manage difference in relationships with others , is therefore essential – but often neglectedwork for all health professionals'

(Kohner 2003)

#### **Insider Out?**







### How hard can it be ..?

- Diversity issues often difficult to action due to tensions at level of individual, social group and society.
- Planning and provision may be complicated by historical, political and language issues
- Action often avoided or 'sanitised' by focus on policy and documentation





#### **Envisioning leadership**

"The Candle is not there to illuminate itself"

Jan-Fishan Khan (17<sup>th</sup> Century)





#### **Fanny Lou Hamer**

 In 1964, Fanny Lou Hamer, an African–American civil rights activist (1917-1978) wrote,

'All my life I have been sick and tired. Now I'm sick and tired of being sick and tired.'

Hamer, F. L. (1964, June 1). Life in Mississippi. In J. DeMuth, "Tired of Being Sick and Tired," The Nation, p. 549.



#### Dame Professor Elizabeth Anionwu





#### **Key Principles in Compassionate Leadership**

- Health as a positive resource and life long process
- Patients, public and carers as active/informed partners in planning, delivery and evaluation of care
- Inter and intra disciplinary approach
- Sustained and accountable improvements in practice, policy, education and research





## Those who cannot remember the past are condemned to repeat it.

George Santayana,

The Life of Reason, Volume 1, 1905

US (Spanish-born) philosopher (1863 - 1952)





I'm afraid your headscarf clashes with our office dress code ... 200 Wilcox















## Public health: A changing health concept

- 1920s Sanitation, health care and disease,
- 1930s Free School Milk Act
- 1940s Welfare State/NHS. Slum clearance, new towns and 'green belt'
- 1950s Smokeless zones
- 1960s birth control, rising birth rates
- 1980s Inequalities in health, health informatics
- 1990s Costs of NHS
- 2000s User centred, localised changes
- 2010s Global perspectives, self care and 'Living well'



## The personal is political....

How we learn, experience and respond to health issues personally and professionally shapes the workforce we produce and ultimately the communities in which we live





#### **Screaming Silences**

Experiences which are historically and/or politically undervalued, absent or invisible. Absence of this 'evidence' leads to policy/practice and care developed in 'Silence'

(Serrant-Green 2004)

### Nurse Training: 'Insider out'

- Transcultural (culturally safe) healthcare training problematic
- Opportunity dependant on tutor expertise not professional standardisation
- Matters of life, 'safety' and wellbeing







## **Snowy White Peaks**

• The attitude to diversity displayed by many in the senior echelons of the NHS seems to be a mixture of indifference and denial

(Kline 2014)

- "Research suggests that the experience of black and minority ethnic (BME) NHS staff is a good barometer of the climate of respect and care for all within the NHS.
- "Put simply, if BME staff feel engaged, motivated, valued and part of a team with a sense of belonging, patients were more likely to be satisfied with the service they received"

(West et al 2012)



#### 'Silent' issues in safeguarding 'ourselves'

- NHS: Support is openly available to all at the point of need
- Rights to support enabled through open communication
- 24 hour access to help
- 'freedom to speak out'
- Fear of discovery or suspicion of centralised services





#### **Begging... or seeking support?**







#### Resilience .....

## Are any of these familiar?





Compassionate leadership...Personal and professional resilience

"Resilient people possess thee characteristics — a staunch acceptance of reality; a deep belief, often buttressed by strongly held values, that life is meaningful; and an uncanny ability to improvise"

Diane Coutu (2002)

Harvard Business Review "How Resilience Works,"





#### **Standing on the Shoulders of Giants**



- Mary Seacole
- Edith Cavell
- Felicity Stockwell
- Neslyn Watson- Druee
- Dame Audrey Emmerson
- Bronte Welsh
- Dame Nita Barrow
- Dame Professor Elizabeth Anionwu
- Cecilia Amin



#### Legacy......Where are you 'Journeying' to?

- What do you want your organisational contributions to stand for?
- What kind of an impact do you want to have on your patients, families and communities?
- What contributions do you want to make to your professional field?
- Whose lives will you have touched?
- What lessons would you like to pass on to future generations?
- How can you best contribute?



#### The Challenge...What's stopping you?

#### "I do what I do because I am fearful, not fearless"

Gina Miller - Powerlist 2018



## **Diversity** in AND for Practice

- Equality and quality in healthcare is more than simply considering 'colour' or status
- Permeates ALL the contexts in which we live both inside and outside work
- Safeguarding the diversity of our community and workforce includes responsibilities for self and each other
- Requires ACTION to safeguard healthcare professions futures and the safety of our people/communities



#### What will YOU do....?

What's your pledge? What do you not yet know? What do you need to find out? Where will you go next?





The women who sustained me through that period were black and white, old and young, lesbian, bisexual, and heterosexual, and we all shared a war against the tyrannies of silence. They all gave me a strength and concern without which I could not have survived intact. Within those weeks of acute fear came the knowledge– within the war we are all waging with the forces of death, subtle, and otherwise, conscious or not–I am not only a casualty, I am also a warrior.

What are the words you do not have yet? What do you need to say?....Perhaps for some of you here today, I am the face of one of your fears. Because I am a woman, because I am black, because I am myself, a black woman warrior poet doing my work, come to ask you, are you doing yours?

Audre Lorde (1984)



## Thank You @lauraserrant I.serrant@mmu.ac.uk