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## CHAPTER 1

# Equality, diversity and social justice

### CHAPTER OVERVIEW

In this chapter you will:

- Learn more about the key concept of discrimination and why it is so important in social work and related professional disciplines
- Start to understand how anti-discriminatory practice is underpinned by a commitment to equality, diversity and social justice
- Appreciate the importance of moving away from medicalized approaches to personal and social problems which oversimplify complex issues

### Introduction

People are different, in the sense that the population in general and social work's clientele in particular are characterized by immense diversity. Where there is difference, there is the potential for unfair discrimination, in so far as it creates the potential for particular individuals or groups to be identified as 'different' and therefore treated less favourably (I will return to this point below). Anti-discriminatory practice is, or should be, more than simply tackling those well-publicized areas of discrimination and oppression that attract considerable attention – it should encompass all forms of discrimination that can be seen to lead to disadvantage, disempowerment and oppression. That is, we need to adopt a *holistic* approach to discrimination and related matters, rather than a narrow or partial one.

The managing diversity approach (as represented in the work of Kandola and Fullerton, 1998) is one of the models we will explore in more detail below. However, for now, we can note that it can be criticized for being too individualistic and paying inadequate

attention to cultural and structural levels of discrimination and is therefore not sufficiently holistic. However, one of its strong points is that it acknowledges:

- the significance of diversity (that is, variety across individuals and groups of people) and the need to affirm and value it;
- that differences between people can and should be seen as assets to be appreciated, rather than problems to be solved; and
- that difference can so easily lead to unfair discrimination.

Diversity is therefore an important concept that we need to take seriously but, as we shall see, we need to make sure that it is not oversimplified or seen as an easy answer (Malik, 2008). As von Mende and Houlihan (2007) comment:

The persistence of discrimination, inequalities and power differences suggests that the rhetoric of diversity can be criticized as sanitizing difference, and simply masking or attenuating underlying conflicts (Netmetz and Christensen, 1996). (p. 217)

Race, ethnicity, gender, class, sexual identity, age, language, disability, religion and so on are just some of the dimensions of diversity and therefore just some of the ways in which difference can so easily be translated into discrimination and oppression as a result of the various power-related processes to be discussed in later chapters. However, these are not only dimensions of diversity in a sociological sense, they are also dimensions of experience in a psychological sense. That is, each sociologically defined area of discrimination can be analysed and explored as a discrete aspect of the social world. However, to each individual person, these are not discrete areas, they are very real intertwined dimensions of experience, part and parcel of our lived experience (what is often referred to by the French technical term, 'le vécu') and have to be understood as such. That is, the reality for each person is having to deal with a complex set of interactions across perhaps several of these different areas, rather than simply encountering discrete, unconnected areas to be considered in isolation.

This means, in effect, that we must consider each situation in its own right, rather than apply general principles in an oversimplified and dogmatic way. We must not make assumptions about 'men' or 'black people' or 'disabled people' or 'Welsh speakers', but rather consider each unique individual in the context of what we know of the influences and implications of these broad categories and their

sociological significance – to link the social level of context to the personal level of unique individual experience (Thompson, 2012), rather than fall into one of the two disastrous, but none the less common traps of either (i) treating unique individuals as if they were simply non-specific examples of social categories; or (ii) failing to recognize that individuals are unique partly because of the diversity of the social context that plays a part in shaping all of our experiences.

It should be clear, then, that discrimination is not a simple matter and that it would therefore be both inappropriate and dangerous to adopt an oversimplified approach to the challenges of developing anti-discriminatory practice. We therefore need to develop quite a sophisticated level of understanding of the complexities involved, rather than look for simple solutions that can be both woefully inadequate (in terms of not doing justice to the intricacies of what we are dealing with) and potentially disastrous (in terms of making the situation worse). It is for this reason that the first two chapters of the book concentrate on developing a platform for building up a theoretical understanding of discrimination and related concepts so that we are able to begin to face the demands of anti-discriminatory practice in an informed way.

In the first of these two scene-setting chapters we explore some key concepts before, in Chapter 2, examining a particular theoretical framework that can pull together our understanding of discrimination. Understandably, we begin our discussion of the key concepts with discrimination itself. We then move on to look at the three very important concepts that form the subtitle of the book, namely equality, diversity and social justice. This leads into a consideration of oppression, the negative and unwelcome results of discrimination (Mullaly, 2002). Finally, we examine the need to avoid ‘medicalization’, a process of pathologizing individuals that has highly discriminatory – and thus oppressive – consequences.

## **What is discrimination?**

The literal meaning of the term ‘to discriminate’ is to identify a difference. As such it is not necessarily a negative term. For example, being able to discriminate between safe food and harmful poison is clearly a good thing. However, when the term is used in a legal, moral or political sense (as in this book), it is generally used to refer to unfair discrimination. That is, it refers to the process (or

set of processes) through which (i) a difference is identified; and (ii) that difference is used as the basis of unfair treatment. To use the technical term, a person or group ‘suffer a detriment’ (that is, experience a disadvantage) because they are identified as ‘different’ (in terms of gender, race/ethnicity, sexual identity and so on).

Instead of differences between people being seen as positive (as per the diversity approach mentioned above and to be discussed more fully below), they become the basis of unfair discrimination, a basis for disadvantaging certain groups of people. This discrimination then becomes a source of oppression. It is through the process of identifying some people as ‘different’ that they receive inhuman or degrading treatment (a key part of the definition of oppression we will explore more fully in Chapter 2) and are thus oppressed.

While this is a satisfactory basic definition of discrimination, what it does not do is indicate the important role of power that is involved. Anyone can discriminate against anyone else. However, where the impact will be of major proportions is in those cases where relatively powerful groups will be in a position to discriminate systematically (whether directly or indirectly) against those in relatively powerless groups (Dalrymple and Burke, 2006). Such power can arise because of personal circumstances or characteristics, cultural norms or structural position (in Chapter 2 we will look at these dimensions of power in more detail). This is where established patterns of discrimination have become ingrained in social practices – racism, sexism, ageism and so on, and are not simply examples of individual preference or prejudice.

Discrimination is therefore a sociological and political phenomenon as well as a psychological one, hence the need for a holistic approach, as mentioned earlier.

### Practice focus

Lynne was a psychology graduate who had recently begun her social work training on a postgraduate course. From the sociology component of the course, she began to appreciate how narrow her perspective had previously been. She began to realize that, although her psychological perspective was very important and valuable, she also needed to understand the wider sociological issues that were so relevant to the life experiences of social work clients, relationships between social workers and clients and so on. She had begun to develop the ‘sociological imagination’.

Note that, in referring to power, I was very careful to use the term ‘relatively’. This is because, as we shall see below, there has been a tendency to oversimplify issues of power and reduce them to a simple dichotomy of two groups in society: the powerful and the powerless. Power is a much more complex phenomenon than this, and so it is important, at this early stage in our discussions, not to fall into the trap of presenting it too simply (see Thompson, 2007, for a fuller explanation of the significance of power and the complexities associated with it).

A key point to note is that the model of anti-discriminatory practice presented here is not a narrow one that ignores important wider sociopolitical concerns. In the early days of putting discrimination and oppression on the social work agenda some people conceptualized anti-discriminatory practice in narrow, legalistic terms – a very different approach from the one that I am adopting, and advocating, here.

### Good practice is anti-discriminatory practice

Social workers can be seen as mediators between their clients and the wider state apparatus and social order. This position of ‘mediator’ is a crucial one, as it means that social workers are in a pivotal position in terms of the relationship between the state and its citizens (Ferguson and Woodward, 2009).

The relationship is a double-edged one, consisting of elements of care and control. It is also double-edged in the sense that it can lead to either potential empowerment or potential oppression – social work interventions can help or hinder, empower or oppress. Which aspect is to the fore, which element or tendency is reinforced depends largely on the actions of the social workers concerned. As long ago as 1975, in the era of radical social work, Peter Leonard captured this point in relation to class and capitalism, although much the same can be said of gender and patriarchy, race and imperialism and so on:

In capitalist society, social work operates as part of a social-welfare system which is located at the centre of the contradictions arising from the dehumanizing consequences of capitalist economic production. Social workers, although situated in a largely oppressive organizational and professional context, have the potential for recognizing these contradictions and, through working at the point of interaction between people and their

social environment, of helping to increase the control by people over economic and political structures. (in Bailey and Brake, 1975, p. 55)

What this entails, in effect, is that there can be no safe middle ground, no simple compromise. This differs significantly from the traditional approach to such matters. Social work is not, as Halmos (1965) would have it, a matter of the personal detached from the political (Pearson, 1975).

As I argued many years ago:

There is no middle ground; intervention either adds to oppression (or at least condones it) or goes some small way towards easing or breaking such oppression. In this respect, the political slogan, 'If you're not part of the solution, you must be part of the problem' is particularly accurate. An awareness of the sociopolitical context is necessary in order to prevent becoming (or remaining) part of the problem. (Thompson, 1992, pp. 169–70)

In short, a social work practice which does not take account of oppression, and the discrimination which gives rise to it, cannot be seen as good practice, no matter how high its standards may be in other respects. For example, a social work intervention with a disabled person which fails to recognize the marginalized position of disabled people in society runs the risk of doing the client more of a disservice than a service (see Chapter 6 below).

This principle – that good practice must be anti-discriminatory practice – should become more clearly and firmly established in the chapters that follow.

### A sophisticated understanding of discrimination is called for

One unfortunate development that accompanied the growing awareness of, and commitment to, anti-discriminatory practice, was a strong tendency towards oversimplification or 'reductionism' – reducing a complex, multi-level phenomenon to a simple, single-level issue (Sibeon, 2004). For example, to many people, the complexities of the relationship between language use and discrimination became reduced to 'political correctness' – a reliance on a list of taboo or 'non-PC' words (see Thompson, 2011b). This was also accompanied in many quarters by a very crude approach to education and training in relation to discrimination and oppression, a point to which we shall return in Chapter 2. This crude

reductionism, while a significant problem in its own right, also led to another major concern – the development of a culture of fear and blame in which defensiveness became a very common response. It is understandable that if students and in-service course participants were being told in effect that they were ‘oppressive’, they were likely to perceive this as an attack and thus respond in a defensive manner. Key features of this defensiveness have been:

- A tokenistic ‘lip-service’ approach caused by people’s understandable reluctance to engage firmly and closely with what they perceived as such dangerous, threatening issues.
- A tendency to avoid the subject where possible – a ‘Let’s not go there’ mentality.
- A tense and anxious approach which in itself could lead to oversimplification (when we feel tense, anxious and threatened, we are not likely to be eager to engage with very complex and intricate concepts and issues).
- In some cases, a long-standing lack of confidence in dealing with these issues as a result of the painful experiences of being exposed to some very crude and ill-thought-through approaches to teaching and learning (Thompson, 2009b).

In running courses on the subject of anti-discriminatory practice I have come across large numbers of people who have given me very worrying examples of earlier experiences that were extremely unhelpful in contributing to their understanding of the complexities or in equipping them to deal with such issues effectively in practice. This is a sad legacy of a rapid change from an education and training system which largely neglected discrimination and oppression to one in which such concerns very quickly became central. It is to be hoped that we have managed to learn the lessons from that period and are now adopting much more sophisticated approaches not only to anti-discriminatory practice itself, but also to how such matters are addressed through education and training.

It is therefore to be hoped that we can develop a sophisticated level of understanding of discrimination and related matters that goes beyond the dogmatic and oversimplified levels of understanding that have stood in the way of progress at various times in the past (and still manifest themselves occasionally to this day). Malik, for example, is critical of what Penketh (2000) calls ‘the excesses of anti-racism’:

The concept of race is irrational. The practice of antiracism has become so. We need to challenge both, in the name of humanism and of reason. (2008, p. 288).

I would prefer to challenge such excesses in the name of humanity, rather than humanism, but the argument remains an important one. The point is not that challenging discrimination (whether racism or any other form) is in itself irrational, but rather that we have to guard against overzealous, poorly thought through approaches that run the risk of making the situation worse and giving anti-discriminatory practice a bad name ('political correctness gone mad') (Thompson, 2009b).

## Equality

Much of the confusion and oversimplification relating to discrimination over the years can be traced back to a tendency to interpret the term 'equality' too literally. In a mathematical sense, equality means sameness. For example, to say that  $2 + 2 = 4$  is to say that 2 plus 2 is the same as (or amounts to) 4. However, we need to remember that, in a social work (and, indeed, a broader social policy) context, we are using the term in a moral or political sense and not a mathematical or literal sense. It is therefore essential to be clear that to promote equality does not mean to promote sameness or to discourage people from being different in any way. Indeed, as we will see later in this chapter, it is quite the opposite of that.

In *Promoting Equality* I make the point that it is more helpful to understand equality to mean equal fairness. What it amounts to is that to recognize that the fact that certain people are 'different from ...' other groups or the mainstream should not be confused with the idea that they are 'less than ...' others. Difference and inferiority (or 'deficit' as some writers put it – see, for example, Valencia, 1997) are not the same thing and we do a considerable disservice to members of minority groups if we fail to recognize this or allow our actions and attitudes to be based on confusing the two terms. As Baker and colleagues put it: 'all human beings have equal worth and importance, and are therefore equally worthy of concern and respect' (2004, p. 23).

In a sense, equality can be understood to mean an absence of discrimination. If, as we noted above, discrimination involves

identifying a difference and then treating people less favourably because of that difference, then clearly this involves a considerable degree of unfairness – people who are being discriminated against are not being treated with equal fairness. We should therefore note that promoting equality and pursuing anti-discriminatory practice are very much the same endeavour.

Equality can be seen to be an important concept at both a broader (macro) level of social policy and the more specific (micro) level of actual practice. In terms of the macro level of policy, the work of Wilkinson and Pickett (2009) is very significant. Based on research spanning 30 years the authors provide a strong argument that the more equal a society is in economic terms (that is, the smaller the gap between the richest and the poorest), the fewer the social problems there will be, the more positive the social relations will be and the higher the levels of well-being will be. One of the key implications of this is that greater equality will benefit not only the poorest in society, but also society as a whole.

In terms of the micro level of practice, discrimination is likely to be an important factor in a high proportion of the situations social workers encounter. Consider the following:

- Children looked after by foster carers or in residential care being discriminated against simply because they are ‘in care’.
- Older people being patronized and treated like children because of ageist assumptions.
- People with mental health problems being stigmatized and kept at arm’s length, thereby being denied opportunities for full participation in society.
- Disabled people being excluded from certain opportunities because it is assumed that they are incapable.
- Black individuals and families not receiving services because it is assumed that ‘they look after their own’.
- A gay teenager not having their sexuality accepted and validated.
- Work with families being based on sexist stereotypes.

This, of course, is not an exhaustive list, but it should be sufficient to establish that discrimination is something that needs to be taken seriously in social work, and indeed the helping professions more broadly. So, at both macro and micro levels, equality is a fundamental concept for social work.

## Diversity

One development in recent years that has given us a foundation from which to counter the defensiveness I discussed above is the emergence of the ‘diversity approach’. This is a relatively new way of addressing inequality that has become a mainstream approach in many areas, both within and outside social work. It is characterized by two main themes:

1. It adopts a positive approach by emphasizing that diversity (that is, variety and difference) is not only a very real characteristic of contemporary social and organizational life, it is also a *valuable* characteristic. Diversity is seen as an asset, a positive feature of society that enriches our experience – it is something that should be valued, affirmed and even celebrated (Parekh, 2006). The fact that there are differences across ethnic groups, identities, approaches and perspectives should be seen as a good thing, a source of learning, variety, stimulation and interest, rather than a source of unfair discrimination based on ‘punishing’ some people for being different from the perceived mainstream (for being ‘deviant’ in some way).
2. It adopts a broad approach by arguing that any form of unfair discrimination is a problem to be tackled (this is a point to which we shall return below), regardless of whether the discrimination in question is illegal or not. In this respect, the diversity approach goes far beyond the traditional equal opportunities approach which tends to limit itself largely to ensuring legal compliance with anti-discrimination legislation (Barry, 2005).

By adopting a positive focus and not limiting itself to legal compliance, the diversity approach has the potential to offer, in part at least, an ‘antidote’ to the negative and defensive approach which has been allowed to develop in many organizational settings. In this respect, it can be seen as a positive step forward.

However, we should not be too enthusiastic in our embracing of this approach, as it has its down sides too. First, it has the potential to become a return to simplistic approaches to multiculturalism (as discussed in Barry, 2001) which emphasize the positives of cultural diversity, but without acknowledging the realities of how oppressive discrimination can be – that is, it rightly values *diversity*, but without paying adequate attention to the realities of *adversity* for those people subjected to unfair discrimination.

Second, the diversity approach has so far tended to have a very individualistic focus. There is a danger that the gains made in moving away from a psychological approach based on notions of prejudice to a more sophisticated sociological one, based on personal, cultural and structural factors (see Chapter 2) will be lost by an overemphasis on individual factors.

To be fair to the diversity approach, there is nothing inherent within it that makes these problems inevitable – they are dangers rather than necessary flaws. It has to be recognized that the diversity approach is still relatively in its infancy and is in a fairly under-developed state. How it develops in the coming years will be very significant.

Another development in the recent history of anti-discriminatory practice in the United Kingdom is a new wave of anti-discrimination legislation, culminating in the Equality Act 2010. While this is a positive and very welcome step, we have to bear in mind that the role the law can play is always going to be quite limited (consider, for example, the fact that theft is illegal does not prevent it from being widespread as a phenomenon). As we shall see in the chapters that follow, a genuine commitment to anti-discriminatory practice must go far beyond the confines of a narrow, legalistic approach that fails to take account of the wider picture. Moss helps us to understand that a commitment to promoting equality, diversity and social justice is a *values* commitment, rather than a simple matter of applying the law:

It is not enough to provide a legal framework: society has to own and celebrate the value base which it seeks to live by. And, as we have seen in our discussions of anti-discriminatory practice, there are fundamental challenges to this value base running through society. It is going to take more than some legal adjustments, however crucial these may be, to reach the situation where everyone in the community is not only valued and treated with dignity, but where their difference and diversity is celebrated as an enrichment to the community which would otherwise be immeasurably the poorer. (2007, p. 60)

The diversity approach therefore helps us to go beyond approaches that focus narrowly on legal compliance. However, as we shall see in Chapter 2, while this is a step in the right direction, it is not enough on its own.

## Social justice

Social justice is another important dimension of anti-discriminatory practice, and so it is important to be clear about what we mean by this key concept.

We can identify two approaches to, or understandings of, social justice: narrow and broad. The narrow conception is concerned with the redistribution of wealth and is associated with a traditional focus on class inequalities and the primacy of economic inequality. Here there is a major emphasis on poverty and the need to eradicate, or at least alleviate it (Lister, 2004). This is parallel with the idea of challenging ‘social exclusion’ which tends to be discussed in narrow class-based terms relating to income and other economic factors, paying relatively little attention to how other social processes, largely unconnected with class, can also result in exclusion and marginalization (that is, being pushed to the margins of society). Disability discrimination would be a good example of this.

The broader approach is concerned with a much wider range of social inequalities: gender, ‘race’, age, disability, religion, language, sexuality and, indeed, any form of inequality based on social categories (or ‘social divisions’ to use the technical term) (Barry, 2005). It is this latter, broader and more holistic sense of social justice that anti-discriminatory practice is concerned with (Ferguson, 2008).

Thompson and Thompson capture the importance of social justice when they argue that:

The term *social* justice is used rather than simply justice to show that it is more than a matter of individual fairness (although that too is very important); rather, it is a matter of understanding how social processes and institutions systematically combine to produce unfair outcomes. Social justice is therefore a *sociopolitical* matter, rather than simply a matter of personal ethics. It reflects the *social* nature of social work and its links with wider social and political issues. (N. Thompson and S. Thompson, 2008, p. 214)

When it comes to social justice, then, social work is in a pivotal position, in so far as the individual and collective actions of members of the profession can either challenge and undermine the processes that produce unfair outcomes (by promoting equality) or can reinforce them (for example, by basing our practice on discriminatory assumptions). It is therefore important that social work is committed to promoting social justice.

## Oppression

If we recall that discrimination is the process by which differences are identified and people are treated unfairly ('less favourably' to use the technical term) because of those differences, then we can take our analysis a step further by understanding that oppression is the outcome of that unfair treatment. That is, the unfair treatment associated with discrimination has oppressive consequences for the people so affected. To develop our understanding of discrimination further we therefore need to have a reasonable grasp of the oppression it gives rise to.

It is important to note at this point that differences between this book and the work of authors who distinguish between anti-discriminatory and anti-oppressive practice are primarily semantic, rather than theoretical or ideological. In order to promote forms of practice that are genuinely emancipatory, it is necessary to address the processes of discrimination that give rise to oppression. So, whether we refer to such endeavours as anti-discriminatory or anti-oppressive practice, is in my view not a significant issue. What is significant is that we seek to reduce oppression by tackling the processes of discrimination that give rise to it.

In Chapter 2, I offer a definition of oppression which includes the idea that it involves: 'the negative and demeaning exercise of power'. Similarly, the Webster's Third New International Dictionary uses the phrase 'unjust or cruel exercise of authority or power' in its definition of oppression. Power and oppression are therefore closely linked (Mullaly, 2002).

In order to understand oppression as a dimension of the lives of social work clients (and potential clients), it is therefore necessary to be clear about the part played by power and how it operates. This is particularly important, as power is a unifying theme across the various subsections of this chapter – it is a concept which can be seen to apply in each of the topics covered. It links together what may otherwise appear a relatively unrelated series of issues.

Where social workers, and indeed other human services professionals, come into contact with clients, power is always on the agenda; it is a basic part of how people interact in general, and especially how professionals relate to their clientele. This is very much the case in terms of the power of men in relation to women, white people in relation to black, young in relation to old, and able-bodied in relation to disabled, and so on. In addition, we must recognize the power of social workers in terms of:

- knowledge and expertise;
- access to resources;
- statutory powers; and
- influence over individuals, agencies and so on.

Power is an aspect of the relationship between social workers and their clients – in addition to the social divisions which go to make up the social structure (Payne, 2006). This raises two sets of potential problems:

1. The social worker's power can be used in an oppressive way – that is, it can be abused (Thompson, 2007).
2. The social worker may not be sufficiently sensitive to issues of power/powerlessness and oppression as they relate to clients in terms of their social location – gender, race, age and so on.

Anti-discriminatory practice therefore needs to be very sensitive to issues of power, and not simply in relation to the main areas of discrimination discussed in this book.

Oppression is also significant in relation to identity (Parekh, 2008). The traditional view of identity as a narrow, psychological issue is increasingly being challenged as sociological and political aspects of identity are receiving greater attention (Pullen, Beech and Sims, 2007). And oppression is an important factor in understanding this wider view of identity formation. Woodward challenges the narrowness of conventional views of identity when she argues that:

identities are forged through the marking of difference. This marking of difference takes place both through the symbolic systems of representation, and through forms of social exclusion. Identity, then, is not the opposite of, but depends on, difference. In social relations, these forms of symbolic and social difference are established, at least in part, through the operation of what are called classificatory systems. A classificatory system applies a principle of difference to a population in such a way as to be able to divide them and all their characteristics into at least two, opposing groups – us/them (e.g. Serb/Croat); self/other. (1997, p. 29)

It follows, then, that it is important for social work education and practice (particularly in relation to assessment, for example) to take on board this broader conception of identity. An individual's identity will owe much to his or her social location and thus possible or actual experiences of discrimination and oppression.

Social workers have at times been criticized for taking too narrow and individualistic an approach, and thus failing to appreciate wider social patterns (Mills, 1970). Social workers who seek to develop anti-discriminatory practice need not only to move beyond the micro level of the individual level to understand the macro level of the sociopolitical, but also to appreciate how the sociopolitical domain has a major impact on the personal and subjective. Who I am is not just a matter of my unique and personal life-world, it is also a matter of my social location and to what extent and in what ways I may experience oppression. As Lawler (2008) puts it: ‘identity needs to be understood not as belonging “within” the individual, but as produced between persons and within social relations’ (p. 8).

The various forms of oppression – be it sexism, racism, disablism, heterosexism, sectarianism or internal colonialism and so on – can be seen to have a potential impact on identity in terms of:

- alienation, isolation, marginalization;
- economic position and life chances;
- confidence and self-esteem; and
- social expectations, career opportunities and so on.

The links between identity and oppression are significant, although an analysis which does justice to these issues is far beyond the scope of a more generalized, introductory text such as this. The basic linkages should none the less be borne in mind when considering the various sources of oppression discussed below.

### Practice focus

Tim had many years’ experience as an unqualified worker before commencing his professional training. That experience, though, was entirely in a fieldwork team where he dealt exclusively with individuals and families on a casework basis. On the first placement of his course, however, he worked on a community development project where, for the first time, he was able to see the shared problems, the commonalities of poverty, deprivation, racism and so on. With the help of his practice teacher he was able to understand the structural dimension of social problems and to appreciate the need to go beyond individual or family problems.

One further aspect of oppression I wish to consider is that of its complex, multifaceted nature. There can be no simple or crude

model of oppression, and especially no spurious ‘hierarchy of oppressions’ (that is, no ranking of one form of discrimination as being somehow more significant or more important than the others). As we have noted, oppression is a dimension, or outcome, of a power relationship, specifically a relationship premised on discrimination. Such relationships are, of course, diverse and many sided, forming an intricate web of social patterns and interactions. To reduce this to a simplistic, one-dimensional model of oppression as the evil or unenlightened behaviour and attitudes of certain social groups (men, white people and so on) is a form of crude ‘reductionism’, in the sense that it reduces a complex, highly variable situation to the status of a monolithic, undifferentiated concept (Sibeon, 2004; Thompson, 2000a). It is to the significance of this that we now turn.

### Multiple oppressions

There are many texts available which concentrate on a particular aspect of anti-discriminatory practice, whether this be anti-racism (Williams and Johnson, 2010), anti-ageism (S. Thompson, 2005) and so on. This book, however, is not intended simply as an introduction to each of the discrete areas. There is an underlying thread of ‘multiple oppression’, the interweaving of various sources and forms of oppression.

Discrimination and the oppression it gives rise to are presented as aspects of the divisive nature of social structure – reflections of such social divisions as class, race, gender, age, disability, sexuality, language group, religion and sexual identity. These are dimensions of our social location (where and how we fit into society), and so we need to understand them as a whole – facets of an overall edifice of power and dominance, rather than separate or discrete entities. To use an existentialist term, they are ‘dimensions of our lived experience’.

Race, class, gender and so on tend to be separated out for analytical purposes, but they are, of course, not entirely separate processes; they occur simultaneously and affect people in combination. They are related dimensions of our complex existence, rather than discrete entities.

There is a need for a wider analysis which goes beyond class, race and gender to include marginalization on the grounds of age, disability, sexuality and other such ‘social divisions’. What is called for is an integrated approach, a holistic perspective which

recognizes the reality of multiple oppressions which seeks to concentrate on the commonalities and shared aspects of alienation, marginalization and discrimination. In short, political energies should be directed towards challenging oppression in its various forms, rather than in-fighting between different anti-discrimination interest groups.

This is, of course, more easily said than done, but the argument does have implications for social work policy and practice. The notion of an integrated analysis is a central one to this book, as my focus will be very clearly on the conception of anti-discriminatory practice as a unitary whole (rather than simply the sum total of anti-sexism plus anti-racism plus anti-ageism and so on). It has to be recognized that the combination of oppressions and their interaction is a complex, intricate and relatively under-researched area, but one which none the less needs to be addressed (see *Promoting Equality*). Discrimination and oppression are multifaceted phenomena, and so it is important to gain an understanding of both the common themes across areas and the key differences between them (see Chapter 9).

### Practice focus

Sue was keen to work in an anti-discriminatory way in assessing Mrs Desai's needs under the NHS and Community Care Act 1990 and therefore paid close attention to Mrs Desai's cultural background and needs and her experiences of racism. However, it was only in a subsequent supervision session that she realized that her anti-discriminatory focus had been one-dimensional. That is, she had neglected to consider issues of gender and sexism or, indeed, the profound effects of ageism on Mrs Desai. Sue was fortunate in having a team leader who had a good understanding of anti-discriminatory issues, and who was able to help her develop her understanding and skills in this demanding aspect of practice.

## Avoiding medicalization

In order to foster equality, diversity and social justice, there are various things that we need to do. Chief among these is the need to avoid 'medicalization' – that is, the process of translating personal and social problems into medical matters. This has the effect of 'pathologizing' people and is a form of reductionism – which once again involves reducing a complex, multidimensional situation to a

simple matter of ‘illness’ or ‘disorder’. Mental health issues are a good example of this.

People who are deemed to be mentally disordered often encounter a negative response, even to the point of outright hostility, from the community at large. However, it is often the case that the response of professionals can also be experienced as oppressive. This is due, in no small part, to the tendency to view issues of mental disorder in terms of a medical model – that is, to adopt a ‘medicalized’ approach. Such an approach has been criticized by many (for example, Bentall, 2004, 2010; Crossley, 2006; Gambrill, 2005; see also my *Promoting Equality*) for its narrow and distorted perspective which presents moral, social and political matters as medical problems and therefore clearly located within the domain of the medical profession (and the pharmaceutical industry).

The critique of the medical model is not a new idea. For example, as long ago as 1986, Busfield described Szasz’s views on this issue (which themselves date back to the 1960s) in the following terms:

The notion of mental illness is, Szasz claims, but a metaphor for what should, more accurately, be called ‘problems in living’, for except for the organic mental illnesses (those with identifiable physical causes) which would be better thought of as brain diseases, what is termed mental illness mystifies what is in fact a moral judgement, for the term illness suggests a scientific and objective assessment of sickness based on identifiable physical pathology. On the contrary it is a moral judgement and should be recognized as such. (1986, p. 86)

Translating moral issues into medical ones has two implications which are particularly relevant to anti-discriminatory practice:

1. *Power* The ‘medicalization’ of mental disorder gives considerable power to members of the medical profession and the administrative, technical and professional structures of which they form a part.
2. *Stereotypes* The classification system inherent in the medical model can be seen to have the effect of producing stereotypes of people said to be suffering from ‘mental illness’. It concentrates on generalities at the expense of specifics (Pickering, 2001).

These are both key aspects of the process of discrimination and the oppression that results. We therefore need to look carefully at their impact on service users and systems of service delivery.

The power of the medical profession to define and control deviance is a long-established one which is not commonly challenged within social work practice on a day-to-day basis. This power base and its influence on social work thinking and practice can act as a significant obstruction to the development of a social work of empowerment. This applies in a number of ways – for example:

1. As Chamberlin comments:

once a person is labelled ‘mentally ill’, he or she loses fundamental rights that everyone else takes for granted. In fact, most so-called anti-stigma campaigns are run by the very people and organizations that control and support the process of diagnosis and treatment. ... Once a person has been defined as mentally ill, his or her own decision-making ability is called into question, and therefore, his or her protests are often discredited or, even worse, labelled one more ‘symptom’ of his or her illness. (2006, p. xi)

2. Medical discourse separates the individual’s experience of pain or distress from the wider social context which underpins it. Thus the emphasis is on ‘treating’ individuals rather than tackling the underlying sources of distress. As Bentall argues:

*We should abandon psychiatric diagnoses altogether and instead try to explain and understand the actual experiences and behaviours of psychotic people.* By such experiences and behaviours I mean the kinds of things that psychiatrists describe as symptoms, but which might be better labelled complaints, such as hallucinations, delusions and disordered speech. I will argue that, once these complaints have been explained, there is no ghostly disease remaining that also requires an explanation. Complaints are all there is. (2004, p. 141)

I would want to make sure that the explanation of these complaints also includes reference to wider sociopolitical factors, and is not just limited to psychological explanations (which would amount to replacing one form of reductionism with another).

Both these points illustrate the danger of ‘blaming the victim’ (Ryan, 1988) by reducing a complex web of psychological, social, moral, political and economic factors to a simple pathology ‘within’ the individual.

These two examples relate both to power and to the individual, but in different ways. In the first, the personal power of the individual is denied and, in the second, the effects of wider processes and structures are translated into individual pathology. In both cases the individual is disempowered.

Similar issues apply to the process of stereotyping. Medicine claims to be an objective science and therefore seeks to establish clear and explicit diagnostic categories. And, of course, when categories are being applied to people, the danger of stereotyping is one to be wary of.

This applies particularly to the diagnostic label of 'schizophrenia' which is a much disputed concept. It has been criticized by many as a vague 'catch-all' which covers a broad range of problems (see, for example, Boyle, 2002; Bentall, 2004). This lack of rigour is captured by the statistic that a person is two to three times more likely to be diagnosed as schizophrenic in the United States of America than in Britain (Miles, 1987).

Applying labels to people on the basis of a dubious scientific objectivity is a process which has distinctly oppressive connotations. There is a clear danger of setting up stereotypical expectations which have profoundly negative and discriminatory implications.

It is evident, therefore, that an uncritical approach to mental health social work which adopts the tenets of the medical model is not conducive to anti-discriminatory practice. What is called for is an approach which is more holistic, in so far as it is more attuned to cultural and structural factors and does not stop short at the individual level.

As we shall see in Chapter 2, cultural factors are important in terms of shared meanings and values – the context in which the supposedly 'schizophrenic' behaviour can be rendered intelligible (Crossley, 2006). That is, we cannot assume, as conventional psychiatry does, that 'mad' behaviour is meaningless and without foundation. An anti-discriminatory approach would be less dismissive and would be more attuned to Laing's

long struggle to show that those labelled 'schizophrenic' are coherent in their agony – that their turns of phrase, silences, behaviour and hallucinations make a certain sense, given some dispassionate knowledge of the relationships within which they are located. (Ticktin, 1989, p. 4)

Structural factors are also very relevant. Consider, for example, the links between gender and mental health (Fawcett and Karban,

2005) or race and mental health (Fernando, 2010). But even beyond this, the medical model can itself be seen as a generalized vehicle of oppression. As Fernando comments:

When present-day psychiatrists ... diagnose schizophrenia, in effect they stigmatize – although admittedly many do not realize it. So the clear message is that to get rid of stigma we need to get rid of the genetic-biomedical model of mental illness. (2010, p. 39)

Thornicroft (2006) describes in detail the various ways in which people with mental health problems can be stigmatized and discriminated against, but his work is presented in the language of medicine and pathology. A truly anti-discriminatory approach to mental health issues would need to go beyond such an uncritical acceptance of a medical model of mental distress.

Clearly, this view raises a number of issues which merit much more attention than I am able to devote to them here. None the less, I hope my main point is clear, namely that the medical model, with its individualist and pathologizing focus has a discriminatory and oppressive impact, and is therefore not an adequate basis for anti-discriminatory social work practice.

It is also worth emphasizing that, while I have used mental health as an example of the problematic adoption of a medicalized perspective on life problems, this is not the only area of social work to which it applies. As we shall see in later chapters, it is also a problematic feature of how other groups are treated by the helping professions – older people and disabled people, for example. It is a common feature of discrimination.

## Conclusion

This is the first of two chapters geared towards laying down the foundations of a theoretical understanding of discrimination on the premise that an approach that lacks such understanding is likely to be, at best, an ineffective one and, at worst, counterproductive (Thompson, 2010). It has provided an overview of such key concepts as discrimination, equality, diversity, social justice, oppression and medicalization. We are now ready to move on to explore the theory base more fully in order to take further our understanding of the complex issues involved in developing approaches to practice that are truly emancipatory – that is, which help us to tackle discrimination and oppression.

## Point for reflection

- What practical steps can be taken to promote equality?
- Why is it important to 'value diversity'?
- In what ways can social work be seen as part of a commitment to social justice?
- Why is it important to avoid 'medicalizing' personal and social problems?

## Further resources

*Promoting Equality* (Thompson, 2011a) develops many aspects of the discussion in this chapter. Thompson (2007) focuses in particular on issues relating to power and empowerment. Beyond my own work there is a wealth of relevant literature that can be drawn upon to take our knowledge and understanding further – for example, Baxter (*Managing Diversity and Inequality in Health Care*, 2001) on diversity; Mullaly (*Challenging Oppression: A Critical Social Work Approach*, 2002) on oppression; and Cohen and Timini (*Liberatory Psychiatry: Philosophy, Politics and Mental Health*, 2008) and Kirk (*Mental Disorders in the Social Environment: Critical Perspectives*, 2005) on medicalization. Barry (*Why Social Justice Matters*, 2005) is a very helpful text in relation to social justice – all social workers should read this book.

Please see the Guide to Further Learning on page 196 for a list of further materials and training resources.



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