

## **DIGNITY IN CARE BRIEFING**

### **Why is dignity in care being highlighted?**

As part of a broader dignity in care campaign the Department of Health has announced a number of new initiatives including a £67 million grant to 'place dignity and respect at the heart for caring for older people'; a network of local dignity champions and a practice guide.

### **What is dignity?**

Dignity consists of many overlapping aspects, involving respect, privacy, autonomy and self-worth. Dictionary definitions often talk in terms of a state, manner worthy of esteem or respect; and (by extension) self-respect. Dignity in care, could therefore be taken to mean the kinds of care, in any setting, which support and promote, rather than undermining a person's self-respect

Indignity is easier to pinpoint than dignity, applying to situations where a person is emotionally or physically abused, stigmatised, humiliated, neglected, or treated more as an object than a person.

### **What is the link between dignity and human rights?**

Dignity is a core human rights principle. It was one of the motivating concerns for the Universal Declaration of Human Rights, adopted by the General Assembly of the United Nations in 1948 following the horrors of the Second World War. The Universal Declaration therefore opens with the words 'Whereas recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world.'

### **How have the courts looked at dignity?**

The principle of dignity runs throughout the entire text of the European Convention on Human Rights, given domestic force in 2000 by the Human Rights Act. It has been described by the UK courts as 'the core value of our society'.

The principle of dignity finds expression in a number of specific human rights including the right not to be treated in a degrading way under Article 3 and the right to respect for private life in Article 8. The principle of dignity is engaged by various forms of ill-treatment including:

- Physical or emotional abuse;
- Severe racial discrimination;
- Excessive force used to restrain a person;
- Compulsory treatment;
- Decisions about who sees or touches a person's naked body;
- Intimate care, dressing practices and other practices involving a person's naked body;
- Manual handling; and
- Accommodation on mixed wards against a person's wishes.

The principle of dignity is increasingly emphasised by the courts when they are exploring people's rights to be protected from inhuman and degrading treatment (Article 3) and to have a private and family life (Article 8). For example, in a case involving two disabled sisters who successfully used Articles 3 and 8 to challenge a blanket ban on manual handling in their local authority, the High Court stressed that the principle of dignity underpins almost all the provisions of the Convention and is indeed 'the core value of our society'. The Court stressed that this requires better standards of treatment for those vulnerable to human rights abuses including disabled people. It is clear that this insight also applies to other groups who may be in need of protection, for example children, older people and people living with mental health problems. See *A and others v East Sussex County Council and Another* (2003).

### **Why does dignity matter to older people and their care?**

Despite much good practice, from BIHR's work providing training and consultancy to voluntary and community sector and public sector organisations we have also seen many examples of indignity, causing great distress to those concerned. For example:

*Pressure placed on a care contractor to cut costs meant that the number of personal care hours allocated to an older service user were greatly reduced. At one point, the woman was placed on a commode, fed Weetabix and washed by her carer, all at the same time.*

Examples reported to us from other voluntary organisations include the following:

*- Situation of older people who are not incontinent are sometimes forced by staff in residential care homes to use incontinence pads because staff say they do not have time to take them to the toilet. (Source: Action on Elder Abuse)*

*- Night staff at a residential care home forced older people to wake up at 4 a.m. They helped the older people at this time to dress and clean themselves. They were then left waiting for hours before day staff commenced their shift and took them down to the cafeteria to be fed. This routine was dictated by the division of responsibilities between the night and day staff, and not by the needs of the residents. This raises issues under Article*

8, and is a good example of the needs of service users not being placed at the heart of the decision-making process. (Source: Action on Elder Abuse)

### **What difference can human rights principles make to dignity in practice?**

The NHS has stressed that the principle of dignity is central to its ambition to shape services around the needs and preferences of individual patients, their families and their carers. It finds expression in a wide range of health initiatives including the Department of Health's Dignity in Care agenda and the Patient Focus guidance used by the Healthcare Commission when inspecting healthcare organisations.

These core human rights principles are simple and resonate strongly with both providers and users of public services. When asked what they would like to see in public services, people often highlight being treated with dignity and respect. They are also of enormous practical utility, for example as 'flags' that help people to identify when human rights may have been violated or as 'prompts' when solutions to human rights issues are being sought.

### **Putting the human rights principle of dignity into action**

**During a BIHR training session, a carer in a residential care home identified that bathing and towelling a learning disabled man without attempting to shield his nudity may have violated his right to respect for private life under Article 8, or his right not to be treated in a degrading way under Article 3. Carers were assisting him in this manner because he had previously fallen in the bath and he was now scared of being in the bathroom alone. However, during the training session, the carer realised there were steps she could take to safeguard his dignity, and therefore protect his human rights, for example by supervising and reassuring him behind a screen. The carer was guided in this thinking by a group discussion of dignity which had struck a chord with her and which reminded her of the situation of this man.**

**A former nurse recalled an occasion on which rehabilitation workers left an older woman completely naked on a hospital ward. They were training her to dress herself as part of a rehabilitation programme so that she could begin to care for herself again. There were men on the ward and male staff members wandering around at the time. A duty manager saw the situation and intervened. The rehabilitation workers were reprimanded. During the training session the former nurse explained how Article 3 and 8 rights were engaged by the situation and discussed ways in which the woman could have been taught the same skills without interfering with her dignity interests. For example the rehabilitation session could have taken place in a private room, or behind a screen.**

### **What will make an impact in this area?**

It is good to see the Government taking leadership whilst acknowledging that that is those on the frontline who have daily responsibilities for providing care to older people who are critical in achieving a seachange in attitudes and behaviour. Human rights principles like dignity and respect which are given expression the specific rights in our own Human Rights Act are valuable tools because their starting point is the dignity of each individual, whatever their background or circumstances. They make clear the minimum standards required to ensure that each person's dignity is respected whilst putting no ceiling on going beyond the minimum to provide a truly excellent service.

### **What other relevant initiatives are there?**

Some organisations are beginning to see the potential for human rights principles to be a powerful tool to bring about changes in organisational and individuals' practice when delivering public services.

BIHR provides human rights training and consultancy across the public, voluntary and community sectors.

A current project of particular relevance to the dignity in care campaign is a joint BIHR initiative with the Department of Health and a number of pilot NHS Trusts to produce a practical health and human rights framework/guide.

**For further information please see [www.bihr.org.uk](http://www.bihr.org.uk) or contact Katie Ghose, Director of BIHR on 020 7848 1818 ([kghose@bihr.org.uk](mailto:kghose@bihr.org.uk))**