

Healthcare & Hospital Management & Biologics and Biosimilars

International Conference & Exhibition on

March 26-27, 2018 | Orlando, USA

Indu Saxena

All India Institute of Medical Sciences, India

Discriminatory attitudes in healthcare workers; the need to identify and rectify

The social fabric in all countries comprises of groups, some of which are more favored than others in terms of power, prestige, and privileges, leading to discrimination against the weaker groups. Discrimination is a consequence of prejudiced stereotypes associated with certain groups of individuals and results in denial of equal rights and opportunities to some people of the society. No nation or society can claim to be free from all forms of discrimination, as there are always some individuals in the role of either the victim or the victimizer. Economic growth in India in the recent years has been remarkable and the percentages of people living below the poverty line and of illiteracy have declined. The benefit of India's growing economy is reflected in the improved healthcare sector; however, health and healthcare facilities are still not equally amenable to all. This is not merely due to lack of healthcare facilities in specific geographical areas but also due to various forms of discriminations observed by the people involved in healthcare. Discriminations based on race, religion, socioeconomic status, gender and skin colour are common in some countries and unfortunately India is also one of them. The concepts of caste, religion, gender, and social status are so deeply rooted in some families that they are difficult to eradicate by education in a single generation. Extended and joint families are also responsible for enforcing such prejudices. Consequently, even educated healthcare workers find it difficult to remove their cultural shackles on the job, and knowingly or unknowingly practice discrimination. The need to improve the healthcare facilities for the less privileged groups is urgent,

and the government has been taking steps to increase the number of physicians by developing more medical colleges and hospitals. Every problem cannot be solved at the government's level; individual participation of faculty teaching in medical colleges is required to improve the attitude of the healthcare workers, so that people from all walks of life may expect equal and fair treatment at healthcare centers. The first step to find the solution of any problem is to recognize that the problem exists. Studies should be conducted to identify the sources of bias in different regions. Various tools have been devised to recognize prejudice in healthcare workers, and new tools can be developed to identify the negative biases prevalent in India. The attitudes of practicing physicians can be identified and counselled through compulsory CMEs. Maximum benefits can be obtained by modifying the attitudes of medical, dental, and nursing students. The minimum age of admission to medical, dental, and nursing courses is 17 years in India: an age at which many students can unlearn harmful or wrong customs and traditions. Classes should be conducted on ethical issues related to discriminations in healthcare. Unofficial data suggest that more than 80% medical, dental, or nursing students with biased attitudes change their approach on realizing their bias nature.

Speaker Biography

Indu Saxena is currently working as Assistant Professor, at Department of Biochemistry, All India Institute of Medical Sciences, Jodhpur-342005, Rajasthan, India.

e: indu.saxena@rediffmail.com

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