Do Indians Stigmatize Healthcare Professionals and People Acquiring COVID-19 in the Battle Against the Infectious Disease?

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Do Indians stigmatise healthcare professionals and people acquiring COVID-19?



Laxman Sharma, Assistant Professor and Shobana Sivaraman, Senior Research Officer, Indian Institute of Health Management Research (IIHMR), Jaipur, have a view that the coronavirus pandemic is one of the most unprecedented crises of the 21st century and history will judge us by the way we carry ourselves in this time of crisis

The novel coronavirus, formally known as COVID-19, a viral pathogen, can spread as fast as light in the globalised world, but the phenomenon of exclusion, discrimination and stigmatisation can even spread faster

The coronavirus pandemic is one of the most unprecedented crises of the 21st century and history will judge us by the way we carry ourselves in this time of crisis. Stigma has always exacerbated the suffering caused by epidemics throughout history, and the current situation is no different. It is, after all, an evolutionary response. We are programmed to distance ourselves from danger, and over centuries, we have developed an array of reactions to avoid contact with people who may carry communicable diseases. The reactions make us feel sick whether or not they pose a threat to our health.

Stigma takes its toll

There is plenty of research to show that stigma harms the mental and physical well-being of the diseased. Societal stigma can take many forms, from gossip and social rejection to physical violence and denial of essential services. This can lead to depressive symptoms, stress, and in some cases, substance abuse. As a matter of fact, people don't even have to experience stigma to be adversely affected by it. Just the anticipation of stigma can lead to anxiety and stress.

Strapped for resources

A number of hospitals that are the designated nodal centers for COVID-19 treatment are woefully unprepared to deal with the situation. Not only are they short on ICU beds, but also are fastly running out of protective equipment, whose stock has been dwindling. Families where both spouses are in the healthcare industry face an even bigger risk, especially if they have kids. Not only do they have to shield themselves from infection, but also have to juggle child care under duress.

Elsewhere, doctors have had to reach into their own pockets to buy PPE kits and sanitisers, on account. It is only going to get more difficult in the days to come. With less than one allopathic doctor and 1.7 nurses per thousand people, we are way short of the ratio recommended by the World Health Organization (WHO). According to the Indian Medical Association (IMA), we also face a shortage of critical care specialists. A pre-dominant number of doctors and beds in India are in the private sector, which has elbow room to self-regulate at the cost of the public. Unless we optimise the workforce, ration the supplies, divide the workload with the healthcare workers on duty and scale up teleconsultation, the doctors are going to have a tough time getting a handle on the situation.

The public must empathise with their plight

Ask anyone in the healthcare sector and they will tell you that they could predict the sporadic attacks on medical professionals that have only increased in frequency over the last few days. From pelting stones on field workers and assaulting physicians to manhandling community health workers and assaulting Accredited Social Health Activists (ASHAs), news and social media is rife with reports of doctors being treated poorly across the country in the face on increasing panic and uncertainty.

Ways to fight the stigma

On April 22, the central government intervened and passed a much needed ordinance to end the violence against healthcare professionals by amending the Epidemic Diseases Act of 1897. According to the announcement made by the Union Minister Prakash Javadekar, crimes against healthcare workers have been made a non-bailable offense, with fines of up to Rs 2 lakhs and imprisonment up to seven years. The ordinance, which was sanctioned by the president, will provide much-needed relief to our embattled healthcare workers who are scrambling to hold their guard in the face of a burgeoning crisis.

The good news is that education can help deconstruct stigma. It can dispel harmful stereotypes and make people understand the reality of the situation. Leaders and celebrities who have fallen prey to the disease should open up about their diagnosis on social media to normalise talking about it. Social isolation should not take the place of social distancing and it is our responsibility to educate ourselves and others so that our shared vulnerability becomes a source of strength and solidarity. We also need to be mindful of the plight of doctors who are going through what is quite possibly the most demanding and taxing period of their entire careers.