

*Student Bioethics Essay*

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## **Environmental Justice**

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"The art of medicine consists of 'amusing' the patient while 'nature' cures the disease." With due respect to Sir Voltaire, your saying is no less than a satire today because amusing gives the thought of 'disparity'. So we know that disparity is the never-leaving companion of disability. History at every nuance reveals that the disabled have been kept untouched to the social strata and down to the bottom of the social ladder. Hence, the healthcare services have never reached to the most needful.

Disabled in India and across the parameters of the globe are helpless and lost in the abyss of a healthcare system that fearlessly flaunts an overt affection to the (pay)abled. Hence, equity is the solution which lessens this health disparity.

Equality and equity are generally defined by their absence and often used interchangeably. Misunderstanding the meaning of the terminology can lead to a wrong treatment whereby the practitioners think they are doing the right thing whereas they may be compounding the problem. Therefore, if equality and equity to access to the healthcare is a goal, it takes to have a clarity regarding their meanings.

Treating all equally is often interpreted as treating all in an identical manner. Indeed, when asked about their provisions in healthcare to the disabled, some healthcare staff proudly say that they do not discriminate between people, rather treat everyone the same. However, if different patients have different needs, then giving the same treatment to everyone may result in the needs not being met. For instance, consider the sending of patients to several labs repeatedly. It may be argued that the people are treated the same as everyone, so as to follow up with the protocols but what if the patient has a severe physical disability? These patients are unlikely to follow up and hence the needs are not being met.

'Equality and equity are related concepts as inequity may be regarded as the lack in care of equal quality to be provided.' said by Whitehead. He argued that inequity may not always result from lack of equality but when it is unnecessary, unfair and unavoidable then inequity exists. Thus barriers in achieving equity should be removed or modified since doing so is a fair and just response to the historical disparity.

The disabled face a lot of challenges while they need a healthcare facility. The reluctance of the staff to treat the disabled also comes into play. This situation turns to be more complex and uncompassionate for the people with intellectual disabilities. The stigma attached to them adds on to their agony. Proper medication is the major lacking factor in the view of healthcare for persons with disabilities on a larger extent.

We come across many people with disabilities who are independent and free from labels but that self-sustenance works at a cost that they have to work on their own. Thus the minimal saving would not allow them to invest much in their own health and be away from the avenues of medical assistance. This transforms their disorders into chronic state. The whole lot of grievances affect them mentally and emotionally.

There is a long way to go for the right to health for persons with disabilities become a reality. A comprehensive law is needed to be implemented which may cater the special needs of women, children and older people with disabilities. Physicians should be instilled with more humanitarian qualities like of apprehension and solidarity which helps in the better understanding of the situation and treatment of the same. Government should provide them financial assistance and not just token assistance. Transport services should be provided. Rehabilitation of the people with disabilities including support camps beyond basic rehabilitation.

Understanding the gravity of the situation, a health insurance scheme 'Swavalamban' launched by The New India Assurance Company Ltd , with the Government of India has provided health insurances which are affordable and has given them general healthcare facilities improving their quality of lives.

Projects such as 'Gubbara Project' by Latika Roy foundation in Dehradun, where they are present in district and civil hospitals is worth implementing. It may be linked with 'Rashtriya Swasthya Bima Yojana'.

Honour global aspect, many hospital settings have implemented Hospital passports which provide key information about the healthcare facilities to the disabled being person-centred and fair. Many hospitals employ special mental disability liaison nurses to provide specialist advice and expertise to staff for better treatment of people with intellectual disabilities.

Equality, as we know runs through a thickness of issues but equity is what we expect. Are we ready to embrace them to be one of amongst us? At the nick of time, we all must embark on a journey, crossing all differences to endeavour them to metamorphose in real sense from being 'disabled' to be 'differently abled'.