Making a Difference

Are you a floor mopper or tap turner –off?

Thirty year ago, as a young post graduate student of public health in 1973, I had the opportunity to listen to a lecture on ‘Future directions and challenges in research’, by late Dr. Denis Burkitt. He was a famous mission hospital doctor and medical researcher from Africa, who for many years, directed the Medical Research Council of the UK and promoted a re-thinking in the focus of medical research from a pre-occupation with; intracellular research to a new commitment to ‘behavioural and societal research’. The core of this lecture was an important question he presented to all of us youngsters, as a challenge in our future vocation. This question has been a great stimulus to me for the last 30 years, helping me explore a new meaning for the role of the doctor and a new vision for the healing ministry. In memory of this late medical prophet, I share this question with the readers of CMJI.

Imagine a room with a wash basin. On entering the room, you find that water is pouring out of the tap, the sink is overflowing and there is a mess on the floor. What would your first response be to tackle the situation? Will you be a floor-mopper or a tap turner off?

The medical and nursing profession have long been floor-moppers, using drugs and technology to floor mop the overflow of illnesses and disabilities in the community. With the knowledge of preventive medicine being limited, this seemed the most logical response and therefore, the clinically – oriented drug- technology-dispensary- hospital- oriented healing ministry developed.

As we reach the end of the millennium, medical knowledge has grown and our knowledge of diseases has also improved greatly. Many more of the preventable causes of illness are known and the deeper social determinants are better understood. Also newer tap-turning off skills have been developed to varying levels of competence.

Are the healers in the ministry ready to become tap turners off or are they going to continue to ‘floor mop’ in the old tradition, getting distracted and carried away by the glistening versions of floor mops being produced by the multinational medical industry today?

For many in the ministry, this question will be a very disturbing one as it was for me 30 years ago. Brought up on the white coat, stethoscope and Pavlonian prescribing reflexology of orthodox medicine, I failed to understand what tap turning off meant and its relevance to the medical vocation, when I first heard about these ideas. Today three decades later, I have become a little wiser.

The ‘floor-mopper in me had stressed the relevance of coronary care units and promoted coronary bypass surgery, till the ‘tap turner off’ in me took over to promote exercise, cycling, diet modification, reduction in smoking and various other lifestyle changes and social controls over advertising.

The ‘floor-mopper in me had stressed trauma surgery and neurosurgical care as a
response to the increasing epidemic of accidents and violence till the ‘tap turner off’ in me took over to promote road safety, occupational hygiene, helmets and belts, gender sensitivity and communal harmony.

The ‘floor mopper’ in me had promoted vitamins- pills, tonics, enriched and fortified foods in response to the continuing problem of malnutrition- till the ‘tap turner off’ in me took over to promote low cost, local food mixes, vegetable gardens and efforts to make our institutions more baby friendly and our society more nutrition security conscious.

The ‘floor-mopper’ in me had stressed intravenous fluids and anti-diarrhoeals for the treatment of childhood diarrhea till the ‘tap turner off’ in me took over to promote home based ORT, access to clean water, and environmental sanitation and land reform.

As the medical college teacher for a decade (1973-83), and as a community health trainer in the next two decades (1984-2003), I discovered an additional challenge in Prof. Burkitt’s question. Could education of the health team geared to the floor-mopping tradition of orthodox medicine be reoriented too the tap turning off challenges arising out of the new medical knowledge of today? Is socially relevant and community oriented education of such a health team possible? Could health team member be sensitized to the deeper social-economic-political-cultural-determinants of health?

Today three decades after hearing that disturbing question, I can unrepentantly affirm that floor moppers among us can become tap turners off. But floor moppers need a new understanding of medicine- a ‘conversion’ if you please.

What type of Health Worker are you?

A “Tap Turner Off”   OR   “A Floor Mopper”

This new vision calls for a paradigm shift in our thinking- a shift to a new people and community centred, holistic health paradigm promoting people’s empowerment, educational and societal processes, and creating autonomy and awareness- building.
The Christian Medical Commission study on ‘Health and Wholeness: the Christian role in health’ emphasizes the same need for conversion in a different way. Its study recognizes a simple fact:

‘From around the globe, the 10 regional grassroots consultations on ‘Health, Healing and Wholeness’ wove a tapestry depicting their understanding of health. The major recurrent thread throughout that fabric is the fact that health is not primarily medical. Although the ‘health industry’ is producing and using progressively sophisticated and expensive technology, the increasingly obvious fact is that more of the World’s health problems cannot be best addressed in this way’.

Thirty years ago, I was asked the question: Are you a ‘floor-mopper’ or a ‘tap turner off’? Today, the question I would like to put to you for serious reflection is: Can the healing ministers continue to be floor moppers when they are being challenged to become tap turner off? If so, join the People’s Health Movement- a global network of ‘tap turners off’. The People Charter is a global consensus document of around 1500 ‘tap turns off’. Are we ready for this conversion?

Dr. Ravi Narayan, Coordinator, People’s Health Movement (Global)
(A revised and updated version of an earlier Health Advocate column that was featured in CMJI nearly a decade ago)