

Ramaiah Webinar on Prejudice and Projudice During COVID-19

Introduction

COVID-19 has thrown the world off course. While governments, healthcare workers, and others bend over backwards to stem the tide of COVID-19, hidden wedges of prejudice drive people apart. They distort social realities and result in acts of violence and exclusion. However, locals shower flowers on their neighbour healthcare workers and communities unite to organise food for the stranded migrants. These acts sustain, include, and nurture people during the pandemic and connote the opposite of prejudice. Prejudice, colloquially defined as an opinion without evidence, does not possess an equivalent opposite in the dictionary. Hence, we suggest the word projudice. Just as night is understood better in the context of the day, prejudice would be better understood in the presence of projudice. There are many forms of prejudice and projudice. We propose a symmetric and systematic ontology (Figure 1) to view the pathways of prejudice and projudice during COVID-19. Evidence-based solutions can emerge from the many pathways in this conceptual map. These solutions must (a) positively reinforce the projudicial acts of sustenance, inclusion, and nurturance, and (b) negatively reinforce the prejudicial acts of violence and exclusion.

Ramaiah Webinar on Prejudice and Projudice During Covid-19 is a step in that direction. We use the ontology to discuss and lead to evidence-based solutions.

Ontology of Prejudice and Projudice

Prejudice has changed form and target in the global COVID-19 pandemic. It includes violence against ASHAs and exclusion of physicians and nurses from their homes based on unwarranted fear of COVID-19 infection. The economic, political, legal, and religious underpinnings may strengthen the prejudice (Bohrer, 2020) and add personal motive (Borah & Das, 2019; Alam & Raj, 2017; Mallick, 2008) to it. They can lead to violence and exclusion against unfamiliar people.

Yet the COVID-19 pandemic is also a time for transformation (Ahmad et al., 2020). A smaller number of projudice-based acts have been reported. The projudices of sustenance, inclusion, and nurturance glimmer infrequently while being dominated by prejudice (Pescosolido et al., 2020). For example, governments have instituted and enforced laws against excluding healthcare workers from their homes, and stranded migrants have been nurtured with free food by the community. Acts of sustenance like a doctor volunteering to drive a pregnant woman to a hospital, and essential services being supplied by government staff in containment areas are not uncommon. During a lockdown nurturing stranded people with food and shelter both by the government and community stand out in the pandemic. Communities celebrating the services of people generally seen with a prejudiced eye have been widely covered by media. The act of volunteerism by people who have recovered from COVID-19 to participate in practice and research for a cure – as in the case of plasma donation, is an example of inclusion.

The strength of community acts can weaken prejudice during COVID-19 (Lowe et al., 2010). Elimination of acts of prejudice and encouraging acts of projudice can effectively address the problem for the health of the people and institutions of the country.

The acts of prejudice and projudice may be in terms of violence, exclusion, sustenance, inclusion, and nurturance. They are listed under Act in the ontology. These acts may be economic, physical, psychological, and social – listed under Type. Thus, physical violence would be a prejudicial act and psychological nurturance would be a projudicial act. These types of acts may be perpetrated based on caste, ethnicity, gender, occupation, race, region, religion, or ideology – listed under Factor. Thus, ethnicity-based physical violence would be a prejudicial act and religion-based psychological nurturance would be a projudicial act.

People and institutions may perpetuate the acts on other people and institutions – shown under the Actor and the Acted. People as individuals, families, groups, and communities may be the source or the targets of the acts. Similarly, institutions that are in healthcare, education, religion, law & order, politics, and transportation may be the source or targets. Thus, ethnicity-based physical violence by a group on an educational institution would be a prejudicial act, and religion-based psychological nurturance by a religious institution of a group would be a projudicial act.

The acts of prejudice and projudice may have an economic, moral, physical, psychological, social, and political impact on the acted entities. These are listed in the Impact column of the ontology. Thus, ethnicity-based physical violence by a group on an educational institution would be a prejudicial act that could have an adverse economic, physical, psychological, and social impact on the institution and its members. Similarly, religion-based psychological nurturance by a religious institution of a group would be a projudicial act that could have a positive psychological and social impact on the group.

The ontology encapsulates 96,000 pathways that include 160 acts of prejudice and projudice. The health of the people and the institutions of the country can be affected by acts embedded in these pathways.

Prejudice & Projudice											
Impact		Factor	Type	Act	Actor	Acted					
Economic	[impact of]	Caste	[-based]	Economic	[act of]	Violence	[by]	People	[on/of]	People	[during COVID-19]
Moral		Ethnicity		Physical		Exclusion		Individual		Individual	
Physical		Gender		Psychological		Sustenance		Family		Family	
Psychological		Occupation		Social		Inclusion		Group		Group	
Social		Race				Nurturance		Community		Community	
Political		Region						Institution		Institution	
		Religion						Healthcare		Healthcare	
	Ideology			Education	Education						
				Religious	Religious						
				Law & Order	Law & Order						
				Political	Political						
				Transportation	Transportation						

Figure 1: Ontology of Prejudice and Projudice

Webinar

The Webinar will be a free-flowing, structured, brainstorming using the ontology. The discussion will try to address the following issues systematically and systemically:

- What are the common and uncommon acts of prejudice and projudice during COVID-19?
- What are the antecedents and consequences of these acts?
- How can the acts of prejudice be prevented?
- How can the civil norms be sustained?
- How can the acts of projudice be facilitated?

Date: Thursday, October 1, 2020

Time: 3:00 pm to 5:00 pm (IST)

Facilitator: Dr Arkalgud Ramaprasad, Director, Ramaiah Public Policy Center, Bengaluru, India; Professor Emeritus, the University of Illinois at Chicago, USA

Moderator:

Dr Anupama Sanjeev, Research Fellow, Ramaiah Public Policy Center, Bengaluru, India

Coordinators:

Ms Devina Neogi, Research Associate, Ramaiah Public Policy Center, Bengaluru, India

Dr Anupama Sanjeev, Research Fellow, Ramaiah Public Policy Center, Bengaluru, India

References

- Ahmad, A., Mueller, C., & Tsamakidis, K. (2020). Covid-19 pandemic: A public and global mental health opportunity for social transformation? *The BMJ*, 369. Scopus. <https://doi.org/10.1136/bmj.m1383>
- Alam, S., & Raj, A. (2017). The academic journey of witchcraft studies in India. *Man in India*, 97(21), 123–138. Scopus.
- Bohrer, A. J. (2020). Sorcery and Sovereignty: Bodin's Political Economy of the Occult. *Political Theology*. Scopus. <https://doi.org/10.1080/1462317X.2020.1730539>
- Borah, L., & Das, M. (2019). Witch-hunting in Assam: Myth or reality. *Space and Culture, India*, 7(3), 99–114. Scopus. <https://doi.org/10.20896/SACI.V7I3.566>
- Lowe, S. R., Chan, C. S., & Rhodes, J. E. (2010). Pre-Hurricane Perceived Social Support Protects Against Psychological Distress: A Longitudinal Analysis of Low-Income Mothers. *Journal of Consulting and Clinical Psychology*, 78(4), 551–560. <https://doi.org/10.1037/a0018317>
- Mallick, A. (2008). Witch-hunting in 1857. *Economic and Political Weekly*, 43(39), 118–119. Scopus.
- Pescosolido, B. A., Perry, B. L., & Krendl, A. C. (2020). Empowering the Next Generation to End Stigma by Starting the Conversation: Bring Change to Mind and the College Toolbox Project. *Journal of the American Academy of Child and Adolescent Psychiatry*, 59(4), 519–530. Scopus. <https://doi.org/10.1016/j.jaac.2019.06.016>

List of Panellists

Sl.No	Name	Affiliation
1.	Dr Anupama Shetty	General Manager – CSR, Narayana Health, Bengaluru
2.	Ms Akshatha Kulkarni	Senior Wellbeing Officer, Karnataka State Police, Karnataka
3.	Dr Chaitanya Pradeep N	Assistant Professor, CHRIST (Deemed to be University), Bengaluru
4.	Mrs S S Jayanthi	Resident at an apartment complex and has been part of nurturant activities for COVID +ve residents.
5.	Dr John Paul.M	Consultant Physician, Sparsh Hospital, Yeswanthpur, Bengaluru
6.	Ms Kanika Goswami	President, Shantiniketan Welfare Association & journalist with the Economic Times.
7.	Mrs Madhurima Das	Senior L&D Expert, PoSH (The Sexual Harassment of Woman at Workplace (Prevention, Prohibition & Redressal) Act, 2013)
8.	Mr Nagaraj Krishnamurthy	Involved as a Rotarian to supply essentials and food to labour settlements, and the needy during COVID-19.
9.	Ms Panchali Ray	Author, Researcher on nurses in India, The Politics of Precarity
10.	Ms Sruti Sivaraman	Dementia Care - Team Lead, Nightingales Medical Trust, Bengaluru
11.	Dr Sonali Jadhav	Principal, M.S. Ramaiah Institute of Nursing Education and Research, Bengaluru
12.	Ms Sowmya Puttaraju	Counsellor Mind-Coach, Consultant psychologist for corporates and educational institutions.
13.	Dr Suma Singh	Dean of Humanities Associate Professor, Dept of Economics, Mount Carmel College, Autonomous, Bengaluru
14.	Mrs Usha Shetty	Worked to feed and house stranded migrant workers during and after the COVID 19 lockdown.
15.	Mr Vignan Gowda	Team Member, Citizens for Sustainability, Bengaluru
16.	Dr Virupaksha H S	Assistant Professor, Dept of Psychiatry, Ramaiah Medical College and Hospital