# The Black Box and the Bazaar

#### Reflections on the NHS vs. Indian Healthcare

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Over the last few days, attending to my sister-in-law as she goes through medical treatment in the NHS, I have had the opportunity to see this system up close. It has forced me to reflect on the nature of care, and contrast it with our own healthcare system in India.

The positives and negatives of the NHS run deeper than just medical outcomes; they are a reflection of the societies that built them.

### The Comfort of the State

If you judged a hospital solely by its amenities, the NHS is a triumph. Even in a government hospital, the quality of life is startlingly high compared to private hospitals back home. There are comfortable beds, clean linen, and cheerful clothes for patients. A menu is presented with a wide variety of food options, served with proper cutlery. I even saw a service dog come in to cheer the patients up!

It is a system designed to be kind. But I've started to wonder: can a system be kind without being useful?

# **Quantity \*is\* Quality**

While the bedside manner is pleasant, I noticed a distinct difference in the raw "reps" of the medical staff.

In places like PGI Chandigarh, a doctor might see hundreds of patients a day. It is chaotic, yes, but that volume forces a brutal efficiency and a deep pattern-recognition capability. In care, as in most things, quantity \*is\* quality. If you've done something 1,000 times quickly, you are often better equipped for the edge cases than someone who has done it 10 times slowly and "perfectly."

Here, the junior doctors, physios, and nurses constantly need to consult seniors, either because of process, or because of lack of exposure to numerous cases. They simply haven't seen enough outliers. They are bogged down in paperwork and legalese — burdens that Indian doctors are often spared so they can focus on the patient.

### The Black Box System

The most jarring cultural shift, however, is the flow of information. The NHS operates as a "Black Box."

In India, we are used to holding the plastic bag of evidence: the CDs of the MRIs, the printed CT scan reports, the discharge summary. We own the data – literally, because we're holding it in files and paperwork. Here, there are no files given to you. You are told very little about medicines or specific test results. Funnily enough, GDPR means that here too you own the data – but we were told that we would get access to the digital link with all the information after a month (!).

There is also a rigid, individualistic definition of privacy. As a brother-in-law, I was told nothing. Only the patient and next-of-kin are recognized. While this protects privacy, it ignores how Indian families actually operate — as a collective unit of care.

Ironically, the "Black Box" had a leak where we might have preferred a seal: the patient was told every scary detail of their condition directly. In India, a doctor might filter this truth, telling the patient a little, the spouse a bit more, and the brother-in-law the hard reality, allowing the extended family to absorb the shock so the patient can focus on healing.

This left me wondering: on the one hand, I can see the pros and cons of the system here that treats you as an individual and as an adult; but I also see the pros and cons of the Indian way where you are treated as a family-member and as a "child" when you are healing.

## Implicit Trust vs. Fatalistic Agency

This friction comes down to a fundamental difference in how we view the world.

In the West, there is a legacy of **Implicit Trust**. The social contract says: "If I work hard and follow the rules, the government will take care of me (education, healthcare, pension)." The British are used to trusting the system.

In India, we are defined by **Fatalistic Agency**. We know we won't be taken care of. We know we are stuck. We know that to get anything done, we must beseech God, petty officials, or take charge ourselves. We don't trust the system; we bend it.

This is why the current mood in the UK feels so heavy. That implicit trust is breaking. Slowing growth and struggling public services mean the "deal" is off. People have poorer healthcare compared to their parents' generation, and they are angry about it.

Often, this anger is directed at the visible change in society—specifically immigrants. They look at the strain on services and blame the newcomers. Yet, the irony inside the hospital walls is stark. The NHS is powered by immigrants. From the consultants to the nurses, I saw faces from India, the Caribbean, and Africa everywhere. The very people blamed for "clogging" the system are actually the ones keeping its heart beating.

But because the locals were raised to rely on the state, they lack the muscle memory to take charge when that state falters. They are stuck in a broken promise.

### The Illusion of Freedom

This leads to a confusing paradox regarding freedom.

We often look at the West and imagine high degrees of liberty. But often, people's freedoms and choices here are sacrificed at the altar of systems and processes. In the UK, you are fighting a nameless beast called "The System." It is polite, bureaucratic, and immovable.

In India, freedom is messy. It is the freedom to fight, to argue, to be rude, to push a little harder. It is the freedom to try to solve your own problem because you know no one else will.

When you come from India, you are initially in awe of the NHS's quality. But eventually, you realize that for the locals, things feel worse than before. They are angry because a promise is being broken. We, conversely, are never angry at the system—because we never trusted it in the first place.