



Contents

Introduction	7
DO NOT DO... Recommendations in health inequities	
1. Do not disregard problems patients may have in obtaining a health card	9
2. Do not record value judgments about patient attitudes in their medical history	10
3. Don't be blinded by biomedical vision	11
4. Do not reproduce the inverse care law	12
5. Do not medicalize what is social or socialize what is medical	14
6. Do not focus on deficiencies	16
7. Do not assume that "where there's a will, there's a way" or disparage the person's own self-care strategies	17
8. Do not reinforce the imbalance of power with those who come to the consultation in a situation of precariousness, poverty or exclusion	18
9. Do not favor verticality in the consultation	19
10. Do not label patients according to rigid preconceptions or fall into cultural determinism when assessing their health status	20
11. Do not overlook care work, whether in the case history or in the preparation of therapeutic proposals and investigation into adherence to them	22