

A CRITICAL ANALYSIS OF VIOLENCE AGAINST DOCTORS IN INDIA

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ABSTRACT

The word violence is getting more attached to health care system now-a-days. The negative or bad outcomes of the treatment especially in surgical and emergency department may be one of the causes of violence against doctors. Today's era is the era of commercialization. This commercialization of health care system resulted in development of technologies. This ultimately resulted in machine replacing humans which indirectly affected doctor-patient relationship. Patients are losing reliability in health services and medical profession. And the result is- many doctors are facing both physical and verbal abuse in their practices. In this review article it was tried to find the probable causes of violence against doctors, factors precipitating the violence, the long term impact of violence on healthcare system and the techniques to deal with these issues. All literature regarding violence against doctors was reviewed for this purpose. This article has given an overview of what can be done in the short run to report the phenomenon of increasing violence, such as legislature, action on part of doctors, early identification of warning signs, action on part of management, improvement in the healthcare system. It was concluded that improvement in communication skills of doctors, betterment in doctor patient relationship and taking legislative action for the crime can help to overcome the incidents of violence against doctors.

Keywords: violence, workplace, doctors, trends.

INTRODUCTION

The word "violence" is originated from Latin word *violentia*. It means- the behaviour involving physical force intended to hurt, damage or kill someone¹. Violence is now clearly taken as a public health problem. Thirty years ago the word violence and health were rarely used together. But now-a-days it is rapidly arising health problem.

Types of violence

Violence against doctors in India comprises: (i) telephonic threats; (ii) bullying; (iii) oral/verbal abuse;

(iv) physical but non-injurious assault; (v) physical assault causing injury: simple and grievous; (vi) murder; and (vii) destruction and fire-bombing²

History

Violence against doctors particularly surgeons have occurred since ancient time. It may be due to heroic interventions of surgery where unfavourable outcomes were obvious in real time compared to medicine where. Since ancient time it was emphasized on the mind of people that doctors should be beaten if he had

done any harm to the patient as Shakespeare has said “off interred with their bones”³

Indian scenario

According to a study by the Indian Medical Association, over 75% of doctors have faced violence at work place⁴

In India, some sensational cases have gathered the public attention. They have created pressure on policy makers and political leaders to solve a problem before it becomes endemic. They can serve as index cases for looking back, looking around & looking forward

In 2014, in Mansa district of Punjab, a doctor's clinic was burnt following death of a boy who was referred to a tertiary hospital but died⁵. All India Institute of Medical Sciences, New Delhi, the premier medical institute of the country is also not spared⁶.

Nineteen states of India have some kind of Medicare Service Persons and Medicare Service Institutions for the prevention of violence or damage or loss of property. Various acts are being passed and notified in the past 10 years. The Medico Legal Action Group Trust (MLAG) asked under the Right to Information (RTI) Act to all senior superintendents of police in Punjab and Haryana, the two states where the Prevention of Violence against Doctors Act is in place for over 8 years, for the information like, how many complaints by doctors or hospitals were registered under these Acts against patients or attendants and how many of those accused of assault were punished under these Acts from 2010 to 2015.

Following information was received against this question - most complaints were not registered as a first information report (FIR), a mandatory procedure to be followed by all police officers as per the judgment delivered by the Supreme Court of India in the case of *Lalita Kumari* versus the Government of Uttar Pradesh⁷. In a few cases where the FIR was registered, it was cancelled after a compromise was reached between two parties and a cancellation report was filed with the local magistrate that is the main drawback of this law.

Very few cases have reached courts after filing of a chalan but no person accused of assault on a Medicare establishment has yet been penalized under Medicare

Service Persons and Medicare Service Institutions (Prevention of violence or damage or loss of property) Acts of Punjab and Haryana from 2010 to 2015⁸.

AIM

This article is written to emphasize on the present status of violence against doctors and to find out the possible solutions to reduce the violence.

OBJECTIVE

The causes of violence against doctors are reviewed within different articles and it is tried to give the possible solutions to prevent the violence.

REVIEW OF LITERATURE

Causes of violence

The rising in cases of violence against doctors have made the society to think about the causes and prevention of such incidences. The causes can be summarized as follows

1. Poor image of doctors and the role of the media

The current impression of some of the business minded private doctors has led to the poor image of the Doctors in India. The tendency of media to sensationalize the news for the purpose of publicity, often ignoring truth has added to this.

2. Lacuna of small and medium healthcare establishments

The Indian government's share in healthcare delivery is only 20% and remaining healthcare providers are private practitioners, nursing homes and charitable hospitals. Only 33% of Indian healthcare expenditure is from government sources. Insurance permeation is low and government resources for free healthcare are not enough.

3. Lack of faith in the jurisdictional process

In India, common people do not believe in the mechanism of reprisal provided by the law as they think that doctors have more power and money to escape out. Hence they take the law into their own hand by resorting violence

4. Cost of healthcare

The rising cost of healthcare is sufficient to cause debt and frustration in many families in India where daily meal is the primacy over health. Losing the life of

loved ones despite of spending money evokes the anger leading to violence against doctors.

5. Poor communication

Many of the medical institutions in India are emphasizing on the cognitive and psychomotor domain of the medical students but lacking in developing the affective domain. This is resulting in the gap between doctor and patients. Doctors are taught clinical behaviour but not empathy. Less time is given to communicate the prognosis of disease and outcome of treatment resulting in dissatisfaction with healthcare services in patients. Government hospitals are top on the list due to lack of resources and time.

Factors precipitating violence

Sometimes patients have to wait for long time outside the doctors chamber due to crowd making them panic. Many times patients did not get the emergency care within the golden hour. These are some of the precipitating factors

Long term impact of violence on healthcare professionals

Increased incidences of violence are causing many long term impacts on healthcare providers like increases in leaves from duties, lack of job satisfaction, decreased work output, insecurity etc⁹

Possible steps to be taken needs to prevent the violence against doctors

There is an emergency need to keep safe environment in health care system. Only after that healthcare professionals should be expected to work with devotion and dedication.

1. Legal steps needed to be taken by the government
There is a punishment for violence under the Prevention of Violence against Medicare Persons and Medicare Institutions Acts and relevant sections of the Indian Penal Code (IPC). But the main drawback of the current law is that after violence has occurred, the doctor files a police complaint. At the same time patient's relatives file a complaint for criminal negligence. After few hearings both the parties compromise which results in no punishment to the culprit. Few changes in the IPC can help to lessen the drawbacks.

2. Action on part of doctors

Firstly doctors should accept their imperfections should not try to do procedures beyond the scope of their training and facilities. Valid informed consent is the second most vital and defensible step in preventing violence. This must include the probable fatal outcomes of the procedure especially during and after conducting the procedures. Video consents are the advanced form of informed consents which can be applied now-a-days. They should also keep the proper documentation of all invasive procedures so as to help in case a patient takes any legal action. Improving communication skills will solve many problems, help in gaining trust of the relatives. Make the patient aware of the limitations of medical field and make them treat the doctors as human beings and not the God. It is necessary to look for indicators of violent behaviour such as staring and eye contact, tone and volume of voice, anxiety, mumbling and pacing (STAMP).¹⁰ A large number of relatives should not be allowed at the patient's bedside. Restricting entry can prevent the mob violence.

3. Action on part of management

Hospital administration and all clinical establishments should develop the Standard Operating Procedures for violence. Trainings should be conducted for each member of the staff to teach them how to react in the situations of violence. Insuring the establishment for the damage to property, injury to workers is also one of the actions on part of management.

DISCUSSION

Cases of violence against doctors are increasing day by day in India. Doctors are living in fearful environment in their workplace causing lack of job satisfaction and decreased work output. Many factors are contributing in the case of Indian scenario of violence against doctors out of which lacking trust of the patient is most important. Unrealistic expectations from doctors on front of patients are increased because of the increased cost of healthcare system. Doctors are somewhere failing to communicate the exact outcome of the treatment and thus losing the

trust of the patients. Social media is adding to the situation as they are ignoring the facts for the sake of sensational news. Also the laws are not so much supporting for doctors. These episodes are also causing the financial loss to healthcare system and thus increasing the burden on government and police eventually. Certain steps should be taken to overcome the violence against doctors in long run.

CONCLUSION

Violence against doctors in India needs immediate attention as the situation has already reached the critical stage. It is the high time to improve certain factors to handle the issue. Seventeen states in India have legislation against violence on doctors and hospitals but poor implementation, inadequate knowledge of police personals and lacuna in laws make these state medicare acts completely ineffective. So it's the need of time to bring in the central act immediately. Government should increase the resources in government hospitals and increase the budget for healthcare policies in India. Instead of searching for the breaking news, the media in India should educate the people about the facts of Indian healthcare system. Medical institute should work on developing the affective domain of the medical students. Institutions should aim at producing humane, empathic doctors rather than money making robots. Lastly if doctors communicate well with the patients, this will help gaining trust of the patients and improve the doctor patient relationship. All these factors will eventually help to overcome this issue in great extent. This article can help to develop the strategies to fight for the violence against doctors.

Abbreviation: SMHCEs –Small and medium healthcare establishments, SOP-Standard operating procedure, RTI- Right to Information, MLAG-Medicos Legal Action Group Trust

REFERENCES

1. <http://en.oxforddictionaries.com/definition/violence> (Accessed on September 4, 2018)
2. Neeraj Nagpal, Incidents of violence against doctors in India: can be prevented?, The National Medical Journal of India, vol.30 no.2 2017, <http://www.nmji.in> (Accessed on September 4, 2018)
3. Amitav Banarjee, Perspective on Violence against Doctors, Medical Journal of Dr.D.Y.Patil Vidyapeeth, May 2018:6(3):6-13, <https://www.researchgate.net/publication/325192816> (Accessed on September 3, 2018)
4. [http://m.timesofindia.com/inidia/Over 75% of doctors have faced violence at work, study finds](http://m.timesofindia.com/inidia/Over_75%_of_doctors_have_faced_violence_at_work,_study_finds). (Accessed on September 3, 2018)
5. [http://timesofindia.indiatimes.com/2014/5/15/archivelist, Boy dies during treatment, irate relatives ransack clinic](http://timesofindia.indiatimes.com/2014/5/15/archivelist,Boy_dies_during_treatment,_irate_relatives_ransack_clinic). (Accessed on September 3, 2018)
6. <https://www.youtube.com/watch?v=lwWTl0xpUGw> (Accessed on September 10, 2018)
7. <https://indiankanoon.org>, Lalita Kumari vs. Government of Uttar Pradesh, AIR 2012 SC 1515, November 2012
8. Neeraj Nagpal, Incidents of violence against doctors in India: can be prevented?, The National Medical Journal of India, vol.30 no.2 2017, <http://www.nmji.in> (Accessed on September 4, 2018)
9. Amitav Banarjee, Perspective on Violence against Doctors, Medical Journal of Dr.D.Y.Patil Vidyapeeth, May 2018:6(3):6-13, <https://www.researchgate.net/publication/325192816> (Accessed on September 3, 2018)
10. www.eurekaalert.org/pub_releases/2007-06/bpl-ssc062007.php STAMP system can help professionals to identify potentially violent individuals. Eureka Alert! The global source for science news, Washington, DC: Black Lack Publishing; 20 June 2007. (Accessed on September 4, 2018).

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