



VIOLENCE AGAINST DOCTORS- SHADE OF DEFAME OR A PUBLIC OVER REACTION

Medical Science

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ABSTRACT

It isn't easy being a doctor, it never has been. The long years of gruelling training, crazy hours of work, and remuneration, which, despite popular belief, is never commensurate with the hours spent and the energy expended. Last few years, reports of violence against doctors, sometimes leading to grievous hurt or murder, are making headlines across the world. Several such incidences have been reported from India also.

KEYWORDS

INTRODUCTION :

No physician, however conscientious or careful, can tell what day or hour he may not be the object of some undeserved attack, malicious accusation, black mail or suit for damages. ... (1) The above paragraph from a reputed Journal from the USA, written 135 years ago should be an eye-opener and also prophetic. According to an ongoing study by the Indian Medical Association, more than 75% of doctors have seen violence at work. The current situation is an alarming one. It speaks of rising incidents of violence (2,3) against doctors, with some ending in fatal outcomes. National newspapers constantly report doctors being abused, bullied, manhandled, and even killed by the patient's relatives (4,5,6).

Worldwide scenario and India: The problem of violence against doctors is not specific to India. In 2017, there were at least 701 attacks on hospitals, health workers, patients, and ambulances in 23 countries in conflict around the world. More than 101 health workers and 293 patients and others are reported to have died as a result of these attacks. The countries with the most reported acts of violence on health infrastructure and against health workers and patients are Afghanistan (66), the CAR (52), the Democratic Republic of Congo (DRC) (20), Iraq (35), Nigeria (23), Pakistan (18), South Sudan (37), Syria (252), and Yemen (24). A study done in UK says half of all doctors – some degree of violence or abuse, 20% of these physical (BMJ, 2003). Among GPs, threat of violence at 1 in 500 consultations. Kuwait : 86% doctors – verbal insults or imminent violence, 28% physical attacks. Israel: 54% to 79% rate of violence in physician surveys. Australia : half of doctors physically attacked at least once (as found by a report in John Hopkins university).

In several states in India, doctors have frequently gone on strike demanding stringent punishments for those who attack doctors. Others have written articles highlighting the need for better security and surveillance at hospitals. Most of them blame “ignorance” and “the mob mentality” on the part of patients and their relatives for the attacks on doctors. Health-care staff are the most exposed professionals to workplace violence. (5)

Need for redressal of this issue

The best minds are no longer choosing medicine, and those who have, prefer to practice in locations more amenable to the practice of medicine than India. The Indian doctor, and the Indian patient, are both victims of our healthcare system and must look for solutions before it is too late. So, what actually should be ire against the poor infrastructure provided by the Government for the people, is actually directed at the person in the white coat, who is a victim of the same system as the one that victimises you. The situation is so grave that West Bengal has even decided to make medical practitioners undergo martial arts training to fend off attacks. To add to this, for doctors in India today, is the looming spectre of public violence and abuse. Doctors understand the need for regulation on costs of healthcare, and for checks and balances for quality control, perhaps more than patients

Causes

With the rise of corporate hospitals, the mentality of physicians has changed from a charitable to a lucrative one. This change has drastically influenced people's perception of physicians. With commercialization of health, more and more physicians have migrated toward corporate settings in urban centers, where large number of patients feel like a fish out of water. The rift between the educated class and the labor class of India has never been wider. The burgeoning intellectual class of doctors are becoming alienated from the grass root society.

Trust in the –doctor-patient relationship has taken a beating over the last few decades. Over time with medical care commercialization, some physicians were accused of being driven by greed and of adopting unethical practices. The ever hungry media rapidly jumped to conclusions and published sensational stories of organ theft, medical negligence and malpractice. Furthermore, reports of unnecessary tests and needless invasive procedures have caused patient distrust to grow. Government hospitals in India follow the welfare model, as majority of people are poor and do not have health insurance. Such hospitals (mostly the state referral centres) offering subsidized medical care are swamped with patients and their attendants. The average medical officer posted in the outpatient department, sees close to 350 patients a day. It is logical to assume that quality of care gets sometimes compromised while attending to such a huge number of patients in a small window of time. This may impart a perception of neglect to the patient and leave him/her only partially satisfied. After waiting in long lines for hours, some patient's attendants are already at the brink of an emotional cliff. Ineffective communication or delay in attending to a patient can easily drive them over the edge. Since most patients lack health insurance, sometimes the diagnosis comes as a financial disaster and shocks them into emotional turmoil. This results in displacement of anger toward the physician.

Understanding the Indian scenario and cues to overcome this issue

The document — Tracking Universal Health Coverage: 2017 Global Monitoring Report — published in the Lancet Global Health shows that currently, 800 million people spend at least 10 per cent of their household budget on health expenses for themselves, a sick child or another family member. For around 9.7 crore people, of whom over 4.9 crores are in India, these expenses are high enough to push them into extreme poverty, forcing them to survive on just \$1.90 (Rs 122) or less a day. India accounts for over half of the estimated 100 million people pushed into poverty worldwide every year due to high out-of-pocket expenses on healthcare, a joint report on universal health coverage by the World Health Organisation and the World Bank has revealed.

The role of the doctor :

In the sick room, ten cents' worth of human understanding equals ten dollars' worth of medical science. (Martin H Fischer, MD) (7). And we often see, doctors who can't communicate well are more likely to end

up in court. Doctors must take efforts to educate and inform the public at large about diseases and medical problems. try not to escalate costs later or change plans frequently. One should help people adjust to the sickness , pain and death that are central to being human. Better communication skills and documentation of the very aspect of the care and vice versa. Proper and effective communication with the patient and the attendants is an art, and should be taught to all young doctors. We should try to live up to the patients expectations by not making them feel inferior or if everything is solely their mistake. Proper training The importance of teaching empathy to budding doctors cannot be stressed enough. In emergency and ICU settings, doctors should take time to clearly explain patient prognosis to attendants who may harbor unreasonable expectations. Counselors for emotional support should be arranged for wherever feasible .Proper and effective communication with the patient and the attendants is an art, and should be taught to all young doctors. We should try to live up to the patients expectations by not making them feel inferior or if everything is solely their mistake. Balancing between recent advances and patient satisfaction. Proper use of paramedical staffs has to be ascertained.

Role of the society : The society i.e the patients and their relatives should also shoulder the responsibility along with the health givers, the government and the staffs in preventing this menace. These disputes require better redressal forums and not vengeance. the people will have to understand that no medicine comes with a 100% efficacy rate. Some make it easily, while some don't make it. Either way, vandalising the health unit wont do the justice. Social leaders, religious gurus/Imams and other influential persons too have a greater role to play to maintain harmony in the society and give out a clear message that such heinous acts have zero tolerance in a civilized media.

Role of the hospital: there is a need to have a quick review of the available services and the areas in which the hospitals are lacking . Also a proper discussion by a proper panel should be done to see for the reasons of such acts if they have occurred in past, and to see for the improvement of the services of the patients . The better the transparency , more will be the patient's satisfaction. Rush hours are to identified and proper security deployment should be in the place.

Violence in any form and in any setting is reprehensible. However, acts of violence in a hospital are the most extreme and should be dealt with an iron hand. Hospitals are sanctums of healing and recuperation. In addition to jeopardizing the safety of medical personnel, violence threatens patient safety and hampers their recovery to health. For the good of the Indian society, doctors rather than turning a cold shoulder, should work in tandem with the government as well as the public, to tide over this crucial problem.

Laws against doctor assault should be displayed on the walls. To ensure doctor safety, every hospital should create an emergency protocol and an evacuation plan in case of a major act of violence.

The constructive role of media

Present day media is everywhere and has enormous power than it used to have in past. With increasing powers, comes more responsibility. Hence, for a constructive role to play, it has to be impartial i.e. publish both the views of any incident with avoidance of any sensationalism. It should hold on debate on the lacking of care givers and care takers and play a role in the right fulfillment of its positive role. Greater role in education of masses is the responsibility of both print and electronic media.

It should work towards spreading awareness regarding various government health reforms, education regarding their rights and duties and criminal offences regarding vandalism and violence involving healthcare.

Responsibility of the Government

India's expenditure on the health sector has risen from 1.2 per cent of the GDP in 2013-14 to 1.4 per cent in 2017-18 as compared to developed countries like Japan, which spends around 18% on the same. With more allocation towards the health sector, basic works like upgradation of primary health care facilities, existing medical colleges , formation of new medical colleges and hospitals and wider coverage of the preventive medicine programmes could be achieved in the near future. Ours is a country with a huge population where we cannot build hospitals at par with those of developed nations. However if we

achieve a healthier population, we can be at par with them in providing better access to the needy population.

Stringent laws regarding vandalism or any unlawful behaviour of anybody who harms the doctor or other health-care providers with better control over media to avoid sensationalism. Talking on preventive aspects, Nutrition, immunization, health education, pollution control, personal hygiene, access to clean water, unadulterated milk, unadulterated food, facilities for exercise, playground, etc. are the basic requirements.

CONCLUSION:

While a doctor is expected to be altruistic, above temptation and akin to God, he is not above suspicion, reproach and ridicule, and indeed, maligning and violence. Trauma and ICU setups being the most targeted places, need to worked out sooner in this regard. Stringent laws and strictful enactment of the medical protection act has become the need of hour now. While most of the Indian states have enacted on it, some are still way lagging behind. The responsibilities of government, the role of media, the society, the hospitals and the doctors themselves, have to fulfilled in each of their own way if we want to have a healthier place with a healthy working environment.

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