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View Point

## Assault on Doctors in India - A Rising Unhealthy Trend

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#### INTRODUCTION

**A** young lady postgraduate of the Department of Pulmonology at the Radha Gobinda Kar Medical College Hospital (Kolkata, India) had to sacrifice her life in the most gory and brutal way<sup>(1)</sup> to wake an entire nation and its rulers up to the fact that doctors working in India are extremely vulnerable to physical assault and are totally unprotected by the law as well as the institution where they work.

In India, assaults on doctors have become a growing concern in the recent years.<sup>(2-6)</sup> For obvious reasons, big hospitals as well as small clinics tending to sick children are more vulnerable to such assaults. Physical attacks not only hamper the professional and emotional well-being of healthcare providers but also undermine the integrity of the medical system. Doctors, who are considered as healers and expected to save lives, often face physical and verbal abuse from patients and their families. Various factors contribute to this disturbing trend, and understanding them is essential to develop practical solutions.

#### COMMON CAUSES OF ASSAULTS ON DOCTORS

#### Patient Dissatisfaction and Unrealistic Expectations

One of the most prevalent causes of assaults on doctors is patient dissatisfaction, often arising from unrealistic expectations regarding treatment outcomes more so in the emergency room and in the intensive care units. Patients and their families sometimes expect instant or guaranteed recovery, which is not always possible, particularly in cases of severe trauma, terminal illnesses, or critical medical conditions. When these expectations are unmet, patients and their relatives get frustrated and direct their anger toward the concerned healthcare providers. For instance, in June 2019, a junior doctor at the Nil Ratan Sircar (NRS) Medical College (Kolkata, India) was severely assaulted after a 75-year-old man succumbed to an illness.<sup>(7)</sup> The patient's relatives, upset by the death, blamed the doctors and initiated a violent attack on them. This incident sparked nationwide protests by medical professionals.

# Overcrowded and Underfunded Public Healthcare System

India's public healthcare system is overburdened due to her large population and lack of adequate resources. Public hospitals are often understaffed underfunded and underequipped, leading to long waiting times and poor patient outcomes. The frustration caused by overcrowding in hospitals, delay in receiving care and insufficient communication between medical staff and patients often boils over into aggression toward doctors. For example, in July 2021, a doctor at a government hospital in Rajasthan, India was assaulted by the relatives of a deceased COVID-19 patient.<sup>(8)</sup> The patient's family, aggrieved by the non-availability of ventilators and other critical medical supplies, held the doctor responsible, even though the pandemic had strained healthcare resources beyond capacity.

#### **Overburdened Public Healthcare System**

India's public healthcare system is overburdened and understaffed. This often causes delays in treat ment which frustrates patients and their families. Overworked doctors are left to handle the brunt of these frustrations, often becoming targets of violence. The incident at the Safdarjung Hospital (New Delhi, India) in 2021 is a stark reminder. A junior doctor was brutally assaulted by the family of a COVID-19 patient who had died, leading to an uproar in the medical community.<sup>(9)</sup>

#### Poor Communication and Lack of Transparency

Communication gaps between healthcare providers and patients or their families are yet another common cause of violence. When doctors fail to convey the gravity of clinical condition, the limitations of medical treatment or the risks involved in certain procedures, patients' families may feel misled or uninformed. The resultant misunderstanding often leads to hostility toward doctors.

An incident in Hyderabad (Andrapradesh, India) in 2017 highlights this issue. After the death of a woman during childbirth due to complications, the family accused the hospital staff of negligence and attacked the attending doctor. It was later revealed that the doctor had failed to adequately inform the patient's family about the high-risk nature of the pregnancy, leading to their anger and violent reaction.<sup>(10)</sup>

#### **Cultural and Emotional Factors**

Cultural and emotional factors also play a significant role in assaults on doctors. In many Indian communities, doctors are often seen as authoritative figures with almost supernatural abilities to save lives. When a loved one dies or their health worsens despite medical treatment, families may feel an intense sense of betrayal and grief. This emotional response, coupled with the cultural attitude that views death as a failure of healthcare system rather than a natural part of life, can incite mob violence. In June 2020, a doctor in Assam was brutally beaten by a mob after a patient who had been undergoing treatment for chronic liver disease passed away. This incident reflects the deep impact of emotional and cultural perceptions on violent confrontations.<sup>(11)</sup>

#### Political and Media Sensationalism

In some cases, political and media influences exacerbate the problem. Sensational reporting by the media, particularly when it involves allegations of medical negligence, can fuel public outrage. Politicians sometimes take advantage of such situations and offer support to the aggrieved families, which can embolden them to seek retribution against doctors.

#### **Money Matters**

In most of the corporate hospitals, when patients die of incurable disease, their relatives indulge in violence just to escape paying the hospital bill for a treatment which was futile. Hospital administrators are inclined to disperse the crowd and cool tempers within the hospital premises. They are often willing to write off the bills of a deceased patient to buy peace. Relatives of patients tend to take advantage of this weakness of big corporate hospitals.

#### FREQUENCY OF ASSAULTS ON DOCTORS

Assaults on doctors are alarmingly frequent in India. According to a report by the Indian Medical Association (IMA), over 75% of doctors in India have faced some form of violence at work.<sup>(12)</sup> The frequency of these incidents has been steadily increasing, particularly in the emergency rooms of public hospitals, where the pressure on medical staff is often the highest. Although exact statistics are difficult to obtain due to underreporting and variations across the states, the frequency of violent attacks is a clear indicator of a widespread problem within the healthcare system.

#### **TYPES OF ASSAULTS ON DOCTORS**

#### **Physical Assault**

Physical violence is the most common type of assault faced by doctors in India. It can range from slapping, punching and kicking to more severe forms of violence like mob attacks using deadly weapons.<sup>(12)</sup> These physical assaults can cause serious injuries and permanent disabilities to doctors and hospital staff, leaving them mentally traumatized as well. In 2017 a renowned gastroenterologist in Mumbai was fatally assaulted by a mob when he refused to allow additional relatives to accompany a patient inside the emergency room. In a similar incident, a tea-estate doctor of Assam was killed in 2019.<sup>(13)</sup>

#### Verbal Abuse

Verbal abuse, though less physically harmful, can still have a profound psychological impact on doctors. Patients or their families often use derogatory language, threats and insults to express their anger or frustration. This constant exposure to verbal abuse can lead to stress, anxiety and burnout among the healthcare professionals.

#### Damage to Property

In addition to personnel assaults, angry relatives of patients often damage hospital equipment, shatter windows and destroy medical facilities in an outburst of violence. This not only endangers the lives of other patients but also hampers the overall functioning of the hospital. During the COVID-19 pandemic, hospitals in several states, including Maharashtra and Delhi, witnessed damage by mobs angry over the unavailability of oxygen cylinders, ventilators or hospital beds.

#### **Cyber Bullying and Online Threats**

With the rise of social media, many doctors now face online harassment and threats. Dissatisfied patients are using social media to publicly shame and threaten doctors, damaging their reputations and professional credibility. This type of assault can have long-lasting effects on a doctor's career and mental health.

#### **POSSIBLE REMEDIES**

#### **Strengthening Security at Hospitals**

One of the most immediate steps that can be taken is to improve security at hospitals, particularly in high-risk areas such as the emergency rooms and intensive care units. The presence of trained security personnel with weapons can act as a deterrent to potential assailants and helps in controlling the adverse situation before it escalates into violence. Many hospitals have started implementing security protocols like panic buttons, closed-circuit television (CCTV) cameras and rapid-response teams. For example, after the NRS Medical College incident, the Government of West Bengal deployed more police officers at its hospitals, reducing the frequency of such violent episodes. CCTV cameras installed in critical areas will enable recording the incidents of violence and hold the perpetrators accountable.

#### **Public Awareness Campaigns**

Public awareness campaigns aimed at educating patients and their families about the realities of medical treatment and the limitations of doctors could help in mitigating violence. Such campaigns should emphasize the importance of patience, cooperation and communication in achieving the best possible healthcare outcomes. Medical associations and governments can work together to change the unrealistic public perception of doctors as infallible miracle workers. In 2017, the state of Maharashtra initiated a campaign highlighting the dangers of violence against healthcare workers, urging people to respect doctors and follow protocols in hospitals. Such initiatives should be replicated nationwide.<sup>(14)</sup>

#### Legal Protection of Doctors

Despite the growing number of assaults, legal protections for doctors in India remain inadequate. The government should consider passing stricter laws that impose harsher penalties on individuals who assault doctors. State level ordinances have been passed by Tamilnadu in 2008, Karnataka in 2009, Maharashtra in 2010, Bihar in 2010, Assam in 2011 and Delhi in 2021. Under these ordinances a non-bailable arrest warrant against culprits can be issued. Imprisonment up to 3 years and a fine of Rs.50,000 can be slapped and the money can be recovered from culprits who damage hospital properties. All other states are needed to follow suit.

Currently, the Epidemic Diseases (Amendment) Ordinance-2020, provides some protection to healthcare workers during pandemics.<sup>(15)</sup> But broader legislations are needed to protect doctors in all other situations. The Healthcare Services Personnel and Clinical Establishments (Prohibition of violence and damage to property) Bill, 2019<sup>(16)</sup> has been proposed by the central government of India recommending stricter punishment. Meanwhile, the Government of West Bengal has hastily passed a bill to this effect recommending capital punishment for certain heinous crimes committed against doctors, but has not yet been ratified by the concerned authorities.

Additionally, fast-track courts should be established to ensure quick resolution of cases involving violence against medical professionals. A lengthy legal process can dissuade doctors from pursuing legal action, thereby allowing perpetrators to go unpunished.

#### Training in Communication and Conflict Resolution

Improved communication skills and conflict resolution strategies can help doctors in managing difficult conversations with patients and their families. Medical curricula should include training on how to effectively convey bad news, manage patient expectations and de-escalate potentially volatile situations. In 2019, the All-India Institute of Medical Sciences (AIIMS) at New Delhi, India introduced workshops for doctors on handling agitated patients and families, aiming to reduce the risk of violent incidents.

#### **Psychological Support for Doctors**

Doctors who have been assaulted often suffer from psychological trauma.<sup>(17)</sup> Hospitals should establish support systems for healthcare workers, including counselling services and peer support groups, to help doctors cope with the emotional toll of violence. This will not only help them recover, but also prevent burnout and retain talent in the medical profession.

#### CONCLUSION

The increasing incidence of assaults on doctors in India is a multifactorial issue. It frequently stems from patient dissatisfaction, shortcomings of the system, poor communication and cultural factors. Physical and verbal violence against doctors is disturbingly common. A combination of legal remedy, better security measures, public education and improved doctor-patient communication can help in mitigating this problem. It is crucial to safeguard the well-being of doctors and nurses, who are at the forefront of providing essential healthcare services, and ensure that they can perform their duties without fear of violence. There is a need to hit the iron when it is hot and in the present milieu when there are continuous protests across the country against assaults on doctors, we need to bring in the toughest laws against this crime which to some extent will scare the potential culprits. It is next to impossible to improve the national psyche which breeds on impatience, immoral and indecent behaviour in public leading to frequent road rages, rapes, child molestations and crimes of all other types which were literally unknown in our society in the past. Beating up doctors is one of them.

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