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Title Page

Title of the article: **Assault on Medical Professionals: A community’s Perspective**

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Contributors

1. Kishore Yadav Jothula,

2. Sreeharshika D\*

Affiliation and Mailing Address :

1. Associate Professor, Dept of Community and Family Medicine, All India Institute of

Medical Sciences, Bibinagar,Yadadri Bhuvanagiri district, Telangana

Ph: 9885155920 Mail: dr\_kishore\_2021@yahoo.com

2. Tutor, Dept of Forensic Medicine, ESIC Medical College, Sanath nagar, Hyderabad,

Telangana

Ph: 7032616055 Mail: sreeharshika10@gmail.com

\*Corresponding Author:

Name: Dr. Sreeharshika D

Address: Tutor, Dept of Forensic Medicine, ESIC Medical College, Sanath nagar, Hyderabad,

Telangana

Phone numbers :7032616055

E-mail address : sreeharshika10@gmail.com

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Abstract Page

**Abstract:**

**Background:** In recent years, rising incidents of violence against doctors were reported and according to Indian medical association, 75% of doctors have seen violence at work. Media blaming doctors, commercialization of health hampered doctor patient relationship which brought change in perceptions of people.

**Objectives:** To assess the perception of rural people about medical professionals and assault

on doctors

**Methods and Material:** Cross sectional study with sample size of 180 was conducted in two randomly selected villages attached to a medical college. Houses were selected by systematic random sampling method and older person was identified as study subject. Data was collected by predesigned pretested semi structured questionnaire. Data was presented in proportions with confidence interval and chisquare test was applied to find the association between variables by using SPSS ver.22

**Results:** Among the participants 69.4% (95% CI: 62.7, 76.2) agreed with the saying “Doctor is equal to God” and 71.7% (95% CI: 65.1, 78.2) were aware about assault. 2.2% (95% CI: 0.1, 4.4) were involved in assaulting doctors and most (75%) common reason believed was not providing proper treatment.

**Conclusions:** This study reflects positive and negative perception of community towards medical professionals. Efforts must be taken by all the concerned sectors to prevent hospital violence.

**Key-words:** Assault, Commercial, Doctor, Medical professionals, Patient

**Introduction:**

*“aushadham jahnavi toyam vaidyo narayano harih”*

"When the body has lived its duration of time and has been caught up in the diseases therein, the medicine is Ganga water and the doctor is Narayana who takes away everything."[1]Doctor is a person who can identify the health problems and prevent it or cure it by applying his knowledge and skills. Every human requires the services of health care personnel at one or other point of time right from womb to tomb. Doctors are bestowed upon a divine status since ages and medical profession is considered as noble profession.

In recent years, rising incidents of violence against doctors were reported. According to Indian medical association, 75% of doctors have seen violence at work.[2] According to a retrospective study in India, 51% of incidents occurred in public hospitals.[3] Doctors in India, China, Pakistan, Bangladesh, Nepal and Sri Lanka increasingly fear violence at work. Nearly 70%of doctors and 90% of paramedical staff in Israel, reported violence in the workplace, mostly verbal abuse. UK and USA considered among the forerunners of modern medicine, are facing the menace of violence in the medical workplace since decades.[4]

Now days patients are much more likely to resort to aggression if not satisfied with health care. [5] Most of the doctors were adopting risk free practice by not undertaking critical cases because of increasing trend of workplace violence in hospitals. Poor quality of medical services, increased awareness among patients, media blaming doctors, commercialization of health, hampered doctor patient relationship and brought change in perceptions of people regarding medical professionals. As the incidents of doctors being assaulted were increasing every day, it is essential for the medical fraternity to understand the people perception regarding assault, which in turn may guide in identifying root causes and addressing those unfortunate incidents.

The rationale of this study is to explore people perception about medical professionals and act of assault on them. The study may also help to assess the faith and regards of the society towards the doctors and emphasise the need for the doctors to make some changes in their approach towards the patient for their own safety as well as to re-establish the obliterating doctor patient relationship.

With this background, the present study was undertaken with the aim of assessing the perception of rural community in Telangana state about medical professionals and Perception and practice regarding assault on medical professionals.

**Materials and Methods**

**Study design, setting, and subjects:**

The study was a cross‑sectional study conducted from July 15th 2019 to August 15th 2019 in two randomly selected villages (Cherlapally and Dandampally) out of 11 villages attached to a medical college in Nalgonda district of Telangana state. Study participants were villagers aged 20 years and above residing for at least 1 year in the two selected villages. Seriously ill, subjects from the houses which were locked on the day of data collection, who were not willing to participate and persons who have participated in the pilot study were excluded from the study.

**Sample size and sampling technique:**

Sample size 180 was estimated using formula of n = 4p (1‑p)/d2 where p = 70% (As there are no previous studies, p was taken from findings of pilot study where 70% agreed with the saying “Doctor is equal to God”), precision (d) as 10% of p and non-response rate as 5%. Based on proportionate sampling method, it was decided to collect data of 110 subjects from Cherlapally village and 70 subjects from Dandampally village. Houses were selected by systematic random sampling method. After visiting the selected house, irrespective of sex, older subject among the available was included in the study. If the selected person falls into exclusion criteria, then next older person in the house will be included in the study. The study was approved by the institutional ethics committee and the study participants were briefed about the purpose and nature of the study, and informed consent was obtained before data collection.

**Study tool and Data collection:**

Pre designed and pre tested semi structured questionnaire was used as a study tool and pilot study was conducted on 50 rural people initially and questionnaire was translated into local language as a part of standardization of the questionnaire. The questionnaire consists of socio-demographic variables such as age, gender, education, occupation and possessing white ration card which indicates low socio economic status. It also consists of questions regarding perceptions towards medical professionals and about assault on doctors. Data was collected by face to face interview method.

**Ethical considerations:**

The study was approved by the institutional ethics committee and the study participants were briefed about the purpose and nature of the study, and informed consent was obtained before data collection.

**Statistical analysis**:

Data were analyzed using IBM SPSS Statistics for Windows Version 22.0. Categorical and continuous data were expressed as proportions with confidence interval (CI) and mean with standard deviation (SD), respectively. Pearson’s Chi‑square test was applied as test of significance for assessing association between education status and subjects perception about medical professions and assault on doctors. P<0.05 was considered as statistically significant.

**Results:**

Among 180 sample size, a total of 180 individuals could be studied with response rate of 100%. The mean age of study participants was 40.99 years (SD ± 15.17). Majority of participants were of age group 20 -29 years (31.1%), females (61.1%), completed or studying college level education (42.8%), unemployed (48.3%) and belong to families with white ration card (67.2%).

Only 69.4% (95% CI: 62.7, 76.2) participants agreed with the saying “Doctor is equal to God.” and majority of the subjects felt doctors are more commercial (80%) as well as try their level best to save patients life (96.6%). Majority (71.7%) [95% CI: 65.1, 78.2] of the subjects were aware of assault on doctors and 2.2%subjects were involved in assaulting doctor. 20.5% subjects felt nothing wrong in assaulting doctor. (Table 1)

Doctors looting people (63.6%) and lack of empathy towards patient (38.2%) were the most common perceived reasons for not considering doctor as god (Table 2)

Most common reason given for assaulting doctor was not providing proper treatment (75%) and attitude of hospital staff (75%). (Table 3)

Emotional rage due to death of patient (65.2%) and ignorance regarding survival chances of patients (25.2%) were the most common reasons for assaulting doctors as perceived by participants who felt doctor is not at fault in all the unfortunate events. (Table 4)

It was found that statistically significant difference was observed among different groups of participants categorized based on education status and agreeing with the saying “Doctor is equal to God”, aware of assault on doctors, aware about legal punishment for assaulting doctor and having bad experiences in hospitals. However no statistically significant difference was observed with involving in assaulting a doctor. (Table 5)

**Discussion:**

The present study found that 69.4% of the participants agreed with the saying “Doctor is equal to God” which reflects the sustainability of high regards for the medical professionals in the rural community and reasons given for not accepting the above saying were doctors looting the patients, doctors couldn’t save life, lack of empathy towards patient and doubt on competence of present generation doctors in the community which is pointing towards the quality of medical education training in our country.

The present study revealed that most of the subjects have got the impression that doctors became commercial now days. Irrespective of place of residence like rural or urban, significant number of people are preferring private clinics and corporate hospitals to government hospitals for quality healthcare services which resulted in opening the channel for commercialization of medical profession. The practice of prescribing unnecessary medicines, investigations and also medical and surgical procedures in order to meet the targets given by the management is seen in few corporate hospitals, which is a fact that cannot be denied. This unethical practice by few greedy practitioners is degrading the value of medical profession and also reputation of other doctors in the society. Patients start suspecting the genuinity of the doctor if the expenditure of treatment though reasonable, is beyond his scope and that can lead to abuse or assault if anything goes against the patient. A study conducted by Ahmed F et al. found that around 6.2% physicians were falsely accused of harming the patients and hence they had to face violence from the patients & their attendants.[6] In a study conducted by Jothula KY et al. it was found that 29.33% of the first year medical students took the profession with earning more money as one of the reasons and in another study by Jothula KY et al. 44 (51.1%) out of 86 medical students revealed that earning more money was also one of the reasons to take up particular speciality in future.[7,8] Earning money is necessary for everyone in this modern society and doctor is no exception, but exploiting the ignorance of patients for money is unethical and this thought should be instilled into the minds of young budding doctors.

In the present study, 17.8% subjects had bad experience in hospital and it was surprising to know that 27.8% of the study subjects were aware of legal punishment for assaulting doctor. In a study done on doctors by Anand T et al. in Delhi, it was found that only 49.1% of the participants were aware of any legislation regarding punishment for assault on healthcare workers.[9] The current study found that 2.2% of subjects were involved in assaulting doctor and it was shocking to know that 20.5% felt that assaulting a doctor was right. Most common reason given for assaulting doctor was not providing proper treatment (75%), which emphasise the need for the doctor to give quality time in explaining the patient condition, treatment protocols to the attenders and can use counsellor services if required to break the bad news. The other reasons given for assaulting doctors were related to hospital administration issues like delay in admission, didn’t admit the patient which lead to death, attitude of hospital staff and felt like looted. Sharma S et al. study reported unexpected death, unexpected complication, extended hospital stay, staff shortage and unexpected bill as reasons for workplace violence in a tertiary care teaching hospital.[10]

Current study found positive perception of community towards doctors with the finding that almost 86% of the subjects felt doctor is not at fault in all the unfortunate events and their most common perceived reason for assaulting doctor was emotional rage due to death of patients followed by ignorance regarding survival chances of patients. Joshi SC et al. study revealed that junior doctors working in a teaching hospital also perceived that emotional factors overpower logical ones and leads to work place violence.[11] Public opinion about government health services as in Madhiwalla N et al. study conducted in Mumbai teaching hospital was that the most common grievance of patients was the hospital staff’s rude behavior followed by constant demands to pay for services or to purchase materials from outside and poor communication about the patient’s condition.[12] Kumar M et al. study found that doctors of a tertiary care hospital in south Delhi perceived long waiting periods as a cause of violence followed by delayed medical provision, violation of visiting hours and patient’s dissatisfaction with nursing staff. Doctors also explained that while patients are very casual about their disease until complications arises, they get impatient and violent once they reach hospital. Many doctors (56.45%) were of the opinion that patient’s relatives also create such situations intentionally to evade the hospital bills.[13]

The present study highlights the need to address these issues from the both doctor as well as patient side. The patient or the attenders must understand that inspite of best effort put by the doctors, the outcome may not be positive. It is the responsibility of the doctor to build a healthy doctor patient relationship like giving more time in explaining the condition and prognosis of the patient and to appoint a counsellor if necessary, to break the sad news or to make them understand the risk involved. There is need for the doctors to plan protective measures like not allowing many attenders, careful observation of the attenders’ emotions and to exit if sense danger. It is advisable to look for indicators of violent behaviour such as staring and eye contact, tone and volume of voice, anxiety, mumbling and pacing(STAMP).[14] Sood R et al. study on medical undergraduates and postgraduates found that 89.1% of participants have said yes to the question that doctors need to be trained in martial arts and 77.9% of the participants said that training and orientation of the doctors needs to be improved.[15] Media should give actual facts instead of projecting doctors in negative shades. Government should bring rules and regulations to stop the violence on doctors and to punish the people involved in assaulting the doctors.

A statistically significant difference was observed among the subjects categorized based on education about agree with the saying “Doctor is equal to God”. The proportion of college level educated people agreeing the saying was found to be less when compared to others. This difference might be due to more expectations from doctors and bad experiences they had in the hospitals. Present study found that highest proportion of people involved in assault was found to be the people with higher education status, contradicting the results observed in Ahmed F et al. study which stated that majority of the perpetrators who attacked the doctors were uneducated.[6]

**Strengths and limitations:**

Highlighting the perception of rural community about assault on doctors which is a burning issue now a days is the strength of the study. Reflecting the people perception about medical profession in the current study in order to enhance doctor patient relationship by understanding changes in community attitude towards doctors and medical profession now a days is another strength of the study. Current study was done on subject which doesn’t have handy literature for reference, which is another positive aspect of the current study. However, few limitations could not be avoided, particularly restricting to only rural community which limits the generalization of the results.

**Conclusion:**

Medical authorities and professionals along with government should take necessary measures in bringing down the incidents of assaulting medical professionals and also address commercialisation of medical sector. It is the responsibility of all the medical fraternity to restore the dignity of their noble profession and strive to retain the divine status of the doctor in the community. Apart from having good opinion on doctors, people do have negative perceptions which indicate obliteration of divine aura of medical profession. Patients must realise that negative outcome doesn’t mean doctor is at fault or incompetent all the times and faulty and greedy practices of few doctors should not be generalised to whole medical fraternity.

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Table 1: Perception of subjects regarding medical professionals, bad experience in hospital,

Awareness, perception about assault and act of assault on doctors (n=180)

|  |  |  |  |
| --- | --- | --- | --- |
| **S no** | **Questions about perception regarding medical professionals** | **Yes (%)** | **95% CI** |
| 1 | Do you agree with the saying “Doctor is equal to God” | 125 (69.4) | 62.7,76.2 |
| 2 | Do you think doctors are more commercial now a days | 144 (80) | 73.4,85.6 |
| 3 | Do u agree that doctors always try their level best to save patients life | 174 (96.6) | 92.9,98.8 |
| **S no** | **Questions about bad experience, awareness and act of assaulting doctors** | **Yes (%)** | **95% CI** |
| 1 | Aware of assault on doctors | 129 (71.7) | 65.1,78.2 |
| 2 | Had bad experiences in hospitals | 32 (17.8) | 12.2, 23.4 |
| **3** | Ever involved in assaulting a doctor | 4 (2.2) | 0.1, 4.4 |
| 4 | Aware of legal punishment for assaulting doctor | 50 (27.8) | 21.2,34.3 |
| **S no** | **Questions about perception about assault on doctors** | **Yes (%)** | **95% CI** |
| 1 | Is it right to assault a doctor | 37 (20.5) | 14.9,27.2 |
| 2 | Do u think doctor is at fault in all the unfortunate events | 25 (13.9) | 8.8, 18.9 |

Table: 2 Reasons for not with the saying “Doctor is equal to God” (n=55)

|  |  |  |
| --- | --- | --- |
| S no | Reasons | Frequency\* (%) |
| 1 | Doctors are looting people | 35 (63.6) |
| 2 | Doctors couldn’t save life all the times | 16 (29.1) |
| 3 | Lack of empathy towards patient | 21 (38.2) |
| 4 | Present generation doctors are not competent enough | 9 (16.7) |

\* Frequency not corresponding with total because of multiple responses by participants

Table: 3 Reasons given by participants ever involved in assault for their action (n=4)

|  |  |  |
| --- | --- | --- |
| S no | Reasons for Assault | Frequency\* (%) |
| 1 | Doctor didn’t treat properly | 3 (75) |
| 2 | Attitude of hospital staff | 3 (75) |
| 3 | Delay in admission | 2 (50) |
| 4 | Didn’t admit the patient which lead to death | 1 (25) |
| 5 | Felt like looted | 2 (50) |

\* Frequency not corresponding with total because of multiple responses by participants

Table: 4 Reasons for assault on doctors as perceived by participants who felt doctor is not at

fault in all the unfortunate events (n=155)

|  |  |  |
| --- | --- | --- |
| S no | Reasons for Assault | Frequency\* (%) |
| 1 | Emotional rage due to death of patient | 101 (65.2) |
| 2 | Ignorance regarding survival chances of patients | 39 (25.2) |
| 3 | Feeling of looted by doctor | 32 (20.6) |
| 4 | Doubt on competency of doctor in saving critical patient | 11 (7.1) |

\* Frequency not corresponding with total because of multiple responses by participants

Table: 5 Association between education of the subjects and perceptions about medical

professionals and assault on doctors (n=180)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Question | Illiterates (%)  (n=43) | School (%)  (n=60) | College (%)  (n=77) | Chi-square  P value |
| Agreed with the saying “Doctor is equal to God” | 29 (67.4) | 51 (85) | 45 (58.4) | 0.01 |
| Aware of assault on doctors | 24 (55.8) | 42 (70) | 63 (81.8) | 0.01 |
| aware about legal punishment for assaulting doctor | 4 (9.3) | 16 (26.7) | 30 (38.9) | 0.01 |
| Had bad experiences in hospitals | 2 (4.6) | 5 (8.3) | 25 (32.5) | 0.01 |
| Ever involved in assaulting a doctor | 1 (2.3) | 0 (0) | 3 (3.9) | 0.30 |