DOCTORS ARE BEING STALKED? WHAT IS THE FREQUENCY IN PAKISTAN?

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## ABSTRACT

**OBJECTIVE**

To find out the frequency of the stalking among health care professionals in public and private hospital setting of Karachi.

## STUDY DESIGN

Cross sectional survey

## PLACE AND DURATION OF STUDY

The study was carried out from November 2015 to April 2016 in public and private hospitals of Karachi.

## SUBJECTS AND METHODS

Two hundred doctors volunteered their parti­ cipation in our study after fulfilling the inclusion criteria.They were given the questionnaire.Once the form was filled, allsubjects were given the debriefing sheet, where the contact of principal investigator and another psychiatrist was given for them to combat any hidden stress emerged due to questionnaire.The SPSS version 11.0 was applied to analyze the data.

## RESULTS

132 (66%) of doctors reported being stalked. Out of all the stalked doctors, 76 (57.5%) were below 30

years and 56 (24.2%) were between 31-60 years of age, same numbers of doctors were married in the stalked group.92(69.6%) of the stalked doctors were graduate only while only 40 (30.3%) were post graduate, the number of stalked and un-stalked doctors did not difference much between public and private hospitals

## CONCLUSION

A majority of doctors reported stalking, being married, lessthan 30years old,and having done only medical graduation were found associated with being stalked.

## KEYWORDS

Stalking,Doctors,Stalking behaviorchecklist.

## INTRODUCTION

Stalking has been defined as a "constellation of behaviors involving repeated and persistent attempts to impose on another person unwanted contact and/or communication'". Incidents often occur in the form of loitering, following, surveillance and inappropriate/intrusive approaches. Communication in such circumstances can be made by either conventional or electronic means'.There are general types of stalkers; rejected, intimacy seeking, incompetent, resentful, and predatory. Delusional disorders were common particularly among stalkers seeking intimacy'.

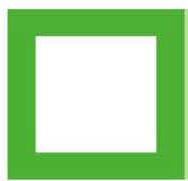
Healthcare professionals are at a greater risk of being followed than the general population, particularly by their patients themselves.' A community-based study in Germany has revealed a high lifetime prevalence of (stalking) victimization ranging from 12to 32% among women and'to 17% among men.' However prevalence rates in health care staff remain largely unknown'. Occasional threats and violence occur in clinical practice which should be distinguished from the repetitive and persistent behavior of stalkers.

A study reported that all clinical staff at risk reported that, 5% of counseling Centre staff had been stalked by clients and 64% had experienced harrasment'. Psychiatrists and those working in related sub-specialties, such as forensic psychiatry, may be at higher risk'. In one study, clinicians attending a US state psychiatric conference were surveyed. Nearly a one third had been subjected to stalking and a further 41% reported other forms of distressing intrusions, including damage to property'.

Despite causing significant psychological distress, stalking remains under recognized and poorly managed. Appropriate policies should be introduced to aid awareness and minimize risk, including the provision of formal educational programs. Victimized Healthcare professionals are prone to stress, fear, helplessness and disenchantment'. More overt psychiatric illness/mental distress maydevelop, which can have an impact on the quality of the healthcare service.

Keeping in mind our cultural perspective we think that single, unmarried female doctors will be stalked more likely, by using harassment of sexual assault, and phone call as compared with males of same demography. We also suggest that, youngmalesaremore likely to be harassed by physical threat andassault.

The purpose of our study is to find out frequency of stalking on health care professionals working in public and private hospitals of Karachi, Pakistan. The study will identify different methods used for stalking, and its impact on individuals. Also, the results can serve as baseline frequency of stalking for the futureresearch worksin Pakistan.



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**Table 3**

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professionals by patients. Psychiatric Services. Emergency

Association of Demographic Variables with Method of Harassment

|  |  |  |  |
| --- | --- | --- | --- |
| **Harassment by ,•isiting home** | | | |
|  | **Yes** | **No** | **p** |
| Up to 30 | 2 | 107 | 0.039 |
| > **30years** |  | 80 |  |
| **Ha**  Single  **Married**  **Ha**  **Graduate**  **Postgraduate**  **Hara** | **rassment throu**  17  9  **rassment thro**  66  26  **ssment by threa** | **gh cyber stalkin**  57  108  **ugh phone calls**  60  44  **ts of sexual ass** | **g**  .003  .041  **ault** |

**Graduate** 125 .036

**Postgraduate** 4 66

**Stalking through e mails**

**Graduate** 21 105 .04

**Postgraduate** 2 68

### DISCUSSION

We started our research with this notion that young female doctors were harassed more with a particular method as compared with males of same age. Our study done in Karachi, Pakistan among doctors working in bothpublic andprivate setup in which out of 200 participants132 were stalked and 68were not. Younger doctors were more prone to stalking as compared with age over 30 years. We also found out that the stalking was more frequent among married doctors, there was no major difference in public and private doctors however, graduates had more frequency of being stalked than postgraduates. Our results are different to the study carried out in England' where the percentage was 33% whereas we have gotten 66%. In 2013 another study" had same frequency of stalking and 50%lesser than our study. A community based Study' showed 33 % of stalking in the sample of 401 participants less than our study. Another community based study" done in Austria in 2008 showed 1lo/oofstalking.

The top 5 frequently used harassment methods in our study were; phone calls, followed by, by spreading rumors, cyber stalking, and spying. Our study iscomparable to the study done in India showing 5 most frequent harassment methodsas following (55.3%), unsolicited telephone calls (30.7%), spying (11.3%), unsolicited letters (22.7%) and communication methodswith thevictims (17.4%)."

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**SUBJECTS AND METHODS** the stalked doctors were graduate only while only 40 (30.3%) were post graduate, the number of stalked and un-stalked doctorsdid not

**Participants** difference much between public and private hospitals(table 1). The top 5 frequently used harassment methods in our study were; phone

The sample consisted of 200 health care professionals selected calls (n= 92, 46.9%), followed by (n=60, 30.6 %), 3 by spreading through purposive convenient sampling technique; from doctors rumors (n=29, 14.7%), cyber stalking (n=26, 15.7%), and spying working in various medical colleges. Medical professionals working (n=23,11.7%).

in both private and public hospitals were being contacted

individually and given them the information sheet to understand the Table I

purpose ofour study.When they agreed,the consent form was given Frequency of stalking among doctors and was dully signed. All the subjects were given a choice to

|  |  |  |
| --- | --- | --- |
| **Total No.or Doctors** | **Doctors Stalked** | **Doctors Not Stalked** |
| 200 | 132 (66%) | 68 (34%) |
| <30 Years | 76(57.5%) | 35(51.4%) |
| >30 Years | 56(24.2%) | 31(45.5%) |
| Married | 76(57.5%) | 35(31.5%) |
| Unmarried | 55(41.6%) | 31(35.6%) |
| Public Institute | 67(50.7%) | 33(48.5%) |
| Private Institute | 65(49.2%) | 35(51.4%) |
| Graduate Doctors | 92(69.6%) | 36(52.95) |
| Postgradu 1tc | 40(30.3%) | 30(44.11%) |

withdraw from the study at any stage from collection to compilation of results.The entire subjectsweregiven the number, through which they can persuade their decision.Once the form was being filled, all subjects were given the debriefing sheet, where the contact of principal investigator and another psychiatrist given for them to combat any hidden stress due to stalking.The inclusion criteria was; age group 25 to 60 years. Only doctors were taken in our study from healthcare system.

## Instruments

Demographic information was collected from a pre designed proforma.

The research tool consisted of 69items pertaining to the objective of the study".The tool wasdividedinto 7parts.Part A had itemsrelating socio-economic characteristics of the respondents. Part B of the tool

had itemsrelated to harassment methods.Part Chad itemsrelated to Chi-square test was

performed to see the association of

findthe(physical, Emotional, social and financial) impacts on victims. Part Dis relatedto coping strategiesadapted by thevictims.

demographic variables with the method of stalking. Female doctors were stalked more through phone calls (p = .018) as compare with

The data was analyzed by the researcher, and were extensively males who were stalked more by harassment of their friends (p = checked for inputting errors. All entered cases were rechecked for .031) and through physical harm (p = .031). Chi-square test has

accuracy.

shown that doctors between age group of 31 to 65 yrs were stalked

more by the method of visiting home as compare with their junior

**DATA ANALYSIS** colleagues. Single doctors were more harassed through cyber stalking than married ones, Graduates were more harassed through

All the data was analyzed using SPSSversion 22.Descriptive statistics phone calls and e mails than post graduates while post graduates was calculated. Mean and standard deviation was calculated for were more harassed by the threats of sexual assault than graduates qualitative variables like gender, marital status, profession, (seetable3).

qualification and association with presence of stalking. Chi-square

test was used to check the association with different variables and **Table 2**

difference in methods of stalking. p value < 0.05 was considered Associationbetween method of stalking and gender

significant.

|  |  |  |  |
| --- | --- | --- | --- |
| **Harassment through phone calls** | | | |
| **Gender** | **Yes** | **No** | **p** |
| Male | 29 | 51 | .018 |
| Female | 63 | 55 |
| **By Harassing A Friend** | | | |
|  | | |  |
| Male | 10 | 70 | .03 I |
| Female | 5 | 113 |
| **Harassment Through Physical Harm** | | | |
| Male | 7 | 73 | .03 I |
| Female | 2 | 115 |

### RESULTS

200 doctors were recruited in the study, 100 from public and 100 from private institutions. Demographic details of one sample showed that 81 were male and 119 were female, 111 (55.59%) were

below 30 years of age while 87 (43.5%) were between 31-60 years of

age, 111(60.3%) were married and 89 (39.6%) were unmarried, 128 (64%) were only graduates while 70 (35%) were post graduates (table 1).

Results showed that 132 (66%) of doctors reported being stalked (table 1). Out of all the stalked doctors, 76 (57.5%) were below 30 years and 56 (24.2%) were between 31-60 years of age, same numbers of doctors were married in the stalked group.92 (69.6%) of

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