

INTRODUCTION

Health care workers are among those at greatest risk for workplace violence. According to the US Bureau of Labor Statistics the health care workers are five times more likely to be victims of nonfatal assaults or violent acts than the average worker in all other occupations. Threats include verbal and written threats to cause harm, as well as threatening body language. This violence thus can take the form of intimidation, harassment, stalking, beatings, stabbings, shootings, and other forms of assault. Psychological consequences resulting from this violence may include fear, frustration, lack of trust in hospital administration, decreased job satisfaction and affects perspectives of the health care professional too. The situation is no different in India, more than 75% of doctors across the country have faced at least some form of violence, which is as per the initial findings of an ongoing study by the Indian Medical Association (IMA). The reported cases make for only the tip of the iceberg. In past there was no question to query the noble profession, but dissatisfaction with the medical services in recent times has brought forth the need to introspect the reasons behind the same. The reported cases make for only the tip of the iceberg.

CAUSES/ TRIGGERS OF VIOLENCE IN INDIA

Various studies have been conducted to ascertain the causes for increasing incidence of violence against healthcare workers. The reasons for these assaults are varied, ranging from misperception to unreasonable expectations among patients and relatives regarding healthcare and adverse events. The reasons for misperception involve many systemic issues, including inadequate state health budgets leading to crumbling health infrastructure in public hospitals already overburdened with unmanageable patient load, poor doctor patient ratio, and the rising cost of healthcare in private sector.

To compound the lack of communication skills in health professionals, there is a growing mistrust towards the intent of doctors, that patients are being admitted and treated unnecessarily for economic reasons. Mounting health bills, along with misperceptions like these have become triggers for violence against doctors.

Deficiency of Family Doctors: Fast diminishing numbers of general practitioners (GPs) in the society is a cause of grave concern. This arrangement suited the doctor and the patient alike, as they shared mutual understanding and trust. The faith of the people on doctors was immense at those times. This mutual connect vanished after the emergence of specialty and super specialty hospitals.

Age of Information: Armed with information easily available on the internet, the patients want to actively participate in the therapeutic decisions. On the other hand, medical fraternity generally perceives people coming armed with medical information available on the web as 'difficult' patients.

Disposable Income: The Indian population spent 7% of its disposable income on healthcare in 2005, which increased to 26% by 2014-2015. The people are willing to pay higher amount for saving lives of their beloved. At the same time, they expect best possible services; and are less amenable to adverse outcome (something which no-one can guarantee).

Inexperienced Doctors in Emergencies: The government hospitals, are run mainly by resident doctors who toil tirelessly without adequate sleep and rest, in the absence of assured assistance from senior doctors; dealing with the endless influx of sick patients, poor nurse/patient ratios, lack of beds, inadequate/ poor laboratory and radiology services, delays in treatment, lack of hospital supplies, and lack of security arrangements.

Lack of Communication Skills: The requirement of the hour is to develop our clinical responsiveness in critical situations. There is a need to teach and train the medical staff on ways and means to break bad news to the relatives. The doctors consider death as a routine matter, but for the laymen who assault them, it is usually their first experience in mortality. Judicious use of words and actions in such circumstances can make all the difference in the immediate reaction of the next of kin.

Media: Media too has played an important role in maligning the image of the medical profession. There has been a slew of biased stories of over-prescription, abuse of laboratory investigations, cut-backs, foreign trips, acceptance of gifts and cash appearing in the media in recent times.

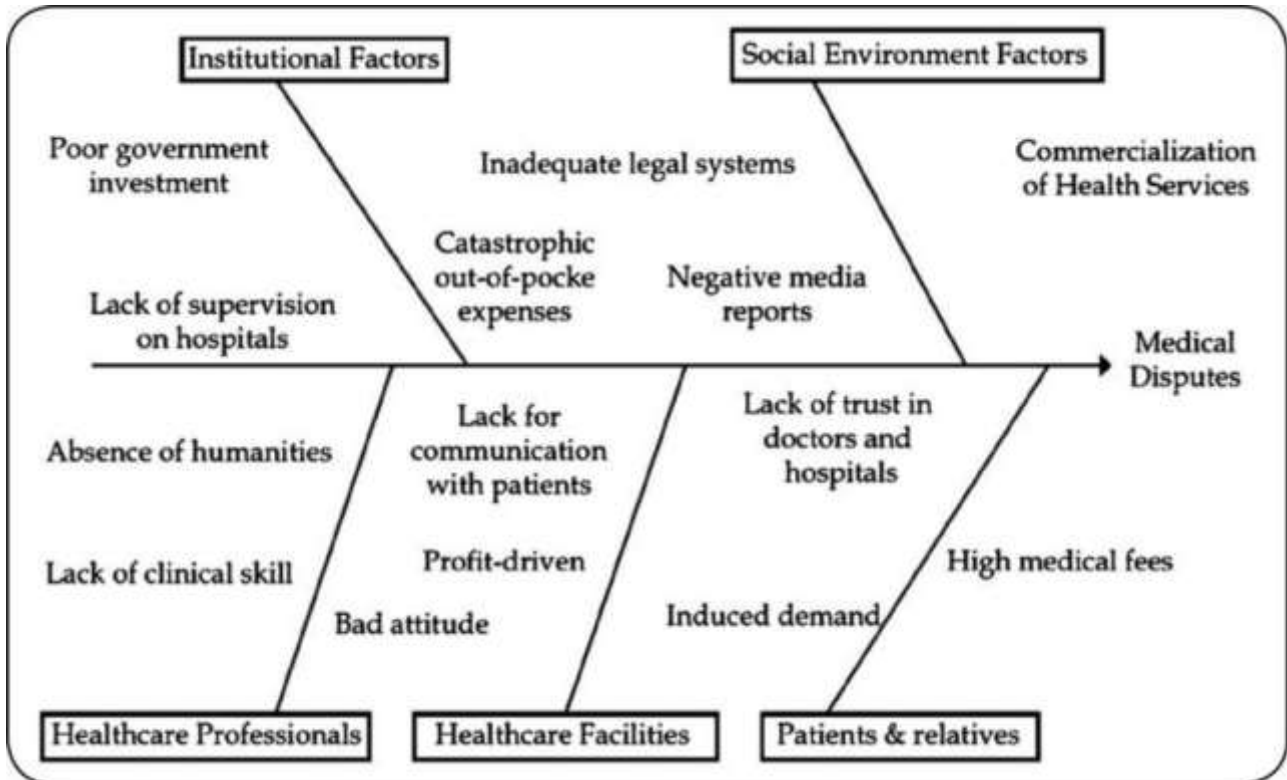


Table 1: Various Causes of Violence against Health Care Workers

PREVENTIVE MEASURES

It is prudent to mention that a safe atmosphere at work place can be achieved by implementing certain effective strategies.

Personal Measures:

1. All workers should be able to recognize signs/risk of assault and manage such situations. They should be able to resolve conflicts at the beginning stage.
2. One should watch for signals of impending violence.
3. Identify verbal and non-verbal anger, frustration, threatening gestures and body language.
4. Look for drug or alcohol abuse.
5. Present a calm and caring attitude.
6. Maintain behaviour that help diffuse violence.
7. Don't match threats.
8. Don't isolate yourself with a potentially violent person.
9. Evaluate situation for potential threat when you enter a room and be vigilant throughout the encounter.
10. Always keep an open path or exit.
11. If the situation becomes irresolvable, try to remove yourself from there.
12. Don't hesitate to call for help or police assistance.

Environmental/ Infrastructure Measures:

1. When constructing new buildings plan to minimize damages that can occur due to violence.
2. Place security cameras and panic alarms.
3. Place good monitoring system like CCTV at all high-risk places.
4. Install metal detectors capable of detecting guns, knives, cutting and piercing instruments.
5. Provide security escorts for parking lots specially at night.

6. Design waiting areas to accommodate and assist visitors/ patients who have delay in service.
7. Provide double exits in staff rooms and examination rooms.
8. Install enclosed nursing stations.
9. Install deep service counters and bulletproof/ shatterproof glass enclosures in reception.
10. Arrange furniture and other objects to minimize their use as weapons.

Administrative Measures:

1. Administration should adopt a “zero tolerance” for violent behaviour against its health care workers. Management commitment and employee participation is the core for the success of prevention of violence at work place and improvement of working atmosphere. To prevent violence in hospitals a trained team should be organized who is in direct contact with patients.
2. Limited number of people should be allowed to enter hospital with patient.
3. At no time health care worker should be left alone with patient/relatives.
4. Visitors to be allowed only during visiting hours.
5. Security persons to accompany healthcare worker in high risk areas.
6. Persons with history of violence to be identified and security officer to accompany them during examination and transfer.
7. Carry out regular drills for healthcare workers to train them in identifying risk factors, preventing and managing violent incidents.
8. Patient inputs through informal patient surveys and interviews can be useful in improving work atmosphere and avoiding such incidents.

CONCLUSION

Violence against healthcare workers is unacceptable. In addition to the negative impact on the psychological and physical well-being of the medical staff, it affects their morale and motivation. As a consequence, this compromises the quality of care and puts efficient health-care delivery at risk; not to mention the tremendous financial loss sustained by the health sector. The insensitivity of the society in general and indifference of the courts and governments in particular, towards this serious issue is a cause to worry. The assurances are vague and their execution amounts only to a sham lip service. It is the duty of the government as well as the social organizations and professional bodies of doctors to bring the doctors and public on the same side.

There is a need to train and sensitise the doctors, nurses, para medical staff and other ancillary staff including the agencies involved in providing healthcare to be more sensitive and communicative. The govt agencies should be made aware of the deficiencies and shortcomings in public health facilities. Awareness in general public, improving the educational standards, provision of quality healthcare affordable to all, responsible media and ensuring proper security measures with more stringent laws will go a long way in curbing this menace.