

Violence against doctors: an emerging epidemic amidst COVID-19 pandemic in India

We read the letter by Iyengar *et al* with great concern and agree that the violence against doctors in India is an emerging epidemic in itself.¹ There needs to be urgent corrective actions at various levels to bring a halt to this heinous crime. Even the COVID-19 pandemic has been unsuccessful in awakening the authorities and the public. We discuss the pertinent issues, personal experiences, violence reports and strategies to control this epidemic.

COVID-19: AN EXPLOSIVE FUEL TO A RAGING FIRE

COVID-19 has brought fear, uncertainty and anxiety among people in an unprecedented fashion. Healthcare professionals (HCPs) around the world work tirelessly to serve humanity, all the while battling with these emotions. It is, therefore, truly disheartening when one learns about incidents of abuse and ostracism against HCPs, as the problem of violence against doctors in India is increasing steadily. Despite many reactionary measures like enhanced security to doctors at the workplace and stricter medical negligence laws, Indian doctors are teetering on the brink of a major silent crisis, amidst the COVID-19 pandemic, which is detrimental for the growth of the society in the coming times.

FIERY RECIPE FOR DISASTER

Dissatisfied patients and their agitated friends and relatives, impaired doctor–patient relationship, an ever hungry media and the medical community's negative image created by misleading journalism are the usual perpetrators for violence against doctors. However, the fear and uncertainty of COVID-19 pandemic and the misinformed suspicion of doctors being vectors of transmission were the root cause for these recent catastrophes. These events put the medical community in a state of fear and regret for choosing a career when the society does not support them. A majority of doctors are now unwilling to motivate their children to pursue this profession, once revered by the society not too long ago.

PERSONAL ENCOUNTERS OF THE 'ABUSIVE' KIND

In March 2020, a nationwide lockdown was enforced in India, creating panic and uncertainty among patients, their kin and the general public. Many housing-property owners asked their tenanted doctors working in All India Institute of Medical Sciences, New

Delhi, the premier institute of national importance in India, to vacate their houses. In a personal incident, one of the authors experienced shock, when he went shopping for groceries. The shop owner had an apathetic look on seeing his vehicle's hospital logo and asked him not to enter his shop. When he accidentally touched a stack of egg crates kept outside the shop, the owner got infuriated and ordered him to buy all the eggs, and asked him to never visit the shop again. Two female doctors in our hospital were beaten by a fruit seller after knowing they were doctors. A doctor in Chennai who had died due to COVID-19 was denied burial at two different cemeteries while his colleagues and family members were attacked by a mob.² This inhumane act made the Indian government to effectuate an emergency ordinance for frontline corona workers under which any person attacking a health worker involved in treating COVID-19 can be jailed for up to 7 years.³ Since then, no such events were reported in the next 1 month, perhaps signifying a change in perception and behaviour. But alas, the relief was short lived. In June 2020, a doctor at Hyderabad's coronavirus facility was assaulted by relatives of a patient who had died at the hospital. More than 300 postgraduate doctors treating patients with COVID-19 went on strike for 2 days, demanding protection and justice for this spate of violence but are yet to receive justice.⁴ In July 2020, a senior doctor was assaulted and stabbed by the deceased patient's relative in Mumbai.⁵

UNEASY ROAD TO CHANGE

Reactionary measures to an event of violence are unlikely to boost the flagging morale of the medical workforce or represent sustainable solutions. The change must come from 'within'—within the people, in their perception towards doctors. To tide over this crisis, government agencies must work in tandem with the public; to abate their fears, to make them realise the criminal nature of vandalism and violence in a hospital, and the disgraceful and ungratifying marrow of ostracism. Also, for doctors to work fearlessly with devotion and dedication during COVID, there is a desperate need to rekindle the trust that patients and the society place in their doctors. Last, but not least, people should realise that hospitals are centres of healing and recuperation, and that doctors are integral to the health and well-being of the society.

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