

A crisis of trust and deterioration of the social norms - Addressing the surge in violence against doctors

Man is a social animal, so social behaviour is the cornerstone of any society and this holds true for all the members. The rising tide of violence against medical professionals in India is a deeply disturbing phenomenon that demands urgent attention. Recent data reveal that up to **75% of doctors** have faced verbal or physical workplace violence, a figure corroborated by multiple studies and the Indian Medical Association (IMA)^{1,2}. The problem is more widespread than initially thought to be and many cases go unreported³. This alarming statistic is more than a number, it signals a breakdown in both the doctor-patient relationship and the structural integrity of our healthcare system. Of late, there has been a surge in such incidents and this problem is becoming more persistent and intractable. Meagre government spending on healthcare associated with the poor socioeconomic status of the patient and the ever-rising cost of treatment has worsened the situation in present times^{4, 5}. Therefore, there is a dire need of corrective measures in the form of strong legislations, increased spending on the health care system and steps to improve the communication skills of our health care professionals.

Diving deep into the problem and trying to find a solution

As per a study conducted in a Delhi hospital in 2023, it was found that 80.4% of resident doctors endured verbal abuse and 21.7% faced physical assault⁶. In Kerala, a survey revealed 65.6% of doctors reported experiencing violence, which is largely verbal with only 13.5% seeing any follow-up action to these cases. These confrontations occur mainly in emergency or ICU settings, involving relatives of patients as perpetrators in over 80% of cases. Such violence deeply affects doctors' mental health. Many doctors report

heightened anxiety, PTSD symptoms, and even contemplate migration^{7,8}.

Below are some of the cases that occurred in the last few years and jolted the whole nation fuelling demands for better protections:

- The lynching of **Dr. Deben Dutta** in Assam in 2019 spurred legal reforms and highlighted the consequences of mob violence^{9,10}
- In **May 2023**, **Dr. Vandana Das** was stabbed to death while on duty in Kerala, an incident that galvanized protest and legislative action^{11,12}
- The **rape and murder of a trainee doctor in Kolkata in August 2024** triggered widespread outrage, a nationwide strike by about **300,000 resident doctors**, and the Supreme Court-appointed National Task Force to improve medico safety^{13,14}

The main causes of this crisis are systemic and can be summarised as:

- **Overstretched and under-resourced healthcare infrastructure:** Inadequate staffing, logistic issues and prolonged wait times breeds frustration among patients and families¹⁵.
- **Communication gaps:** Due to heavy rush of patients, long working hours with fatigue creeping in and sometimes even due to poor communication skills there may be a communication gap between the health care personnel and the patients or their attendants often fuelled by unmet expectations or unclear messaging which can exacerbate tensions^{15,16}.
- **Lack of proper laws:** The laws against the incidences

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of violence are either vague or inadequate with a poor legal follow up. If this is done properly and the culprits are punished, it can act as a deterrence¹⁶.

- **Security deficiencies:** In majority of the places there are deficiencies including limited surveillance and poor security staffing, which renders healthcare settings vulnerable to aggressive mobs¹⁷.

Charting the Way Forward: Strengthening the legal landscape by filling up of the gaps in the legislation and other measures that should be contemplated:

1. **Enact a Central Protection Act:** A strong national law is essential to standardize safeguards, establish compensation mechanisms, and enable swift justice to the victims of violence¹⁸
- **Epidemic Diseases (Amendment) Act, 2020** made attacks on healthcare workers non-bailable offenses, with penalties up to 7 years and mandatory timelines for investigation¹⁸
- Several states including **Kerala, Karnataka, Maharashtra, and West Bengal**—have introduced or strengthened laws to protect medical professionals, often providing for speedy trials, presumptions in favour of the victim, and broader definitions of protected persons^{19,20}
2. **Improve Hospital Infrastructure & Security** Strategic deployment of CCTV, trained security personnel and proper duty facilities especially for women, can stem violent outbursts²¹
3. **Elevate Medical Communication Training** Integrate conflict de-escalation, empathetic patient communication, and grievance redressal skills into medical education curriculum^{16,21,22}
4. **Promote Reporting & Accountability** Establish accessible, efficient systems that protect whistle blowers and ensure that cases are pursued, not dismissed^{7,8}
5. **Launch Public Awareness Campaigns** Media and civil society should counter misrepresentation of doctors and foster respect for healthcare workers.
6. **Engage Professional Bodies** The IMA and other associations need to proactively collaborate with policymakers to enforce changes and ensure

compliance.

Persistent Challenges:

- Despite 19-26 states having protective legislations, **convictions are rare**; for instance, Maharashtra logged 636 complaints and 1,318 arrests between 2015–2020, yet only four convictions have taken place²³
- **Absence of a central uniform law.** A fragmented patchwork of state rules without a central, uniform law undermines consistency and enforcement^{24,25}

CONCLUSION

Violence against doctors is more than an attack on individuals, it is a fracture in the foundation of public health and societal trust. It is only through a combined strategy i.e., legal reform, enhanced infrastructure, training, and social engagement that we can protect those who stand on the front lines of care. India's doctors deserve nothing less.

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