Study on violence against doctors and its impact on career selection

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Abstract

Background: Workplace violence is gaining prevalence throughout the globe in all the institutions, which deals the general public and the hospitals are no exception to it, since it caters a service which connects the emotional component of the patient and their escorts. The most common triggering factor for the attack on doctors is sudden death. Across India, violence against doctors is on rising trend. Majority of the violent situations are faced by the doctors at the emergency department or dealing with people during odd times. Indian medical Association (IMA) has revealed that nearly 75% of the doctors in India have faced violence at their workplace.

Objectives: Aims to evaluate the reasons for selecting the Medical Profession, prevalence of insecurity and its impact on career selection among the medical students.

Material & Method: A cross-sectional study was conducted among the medical students of Sri Lakshmi Narayana Institute of Medical Sciences, Puducherry. A Pre-designed and semi structured questionnaire was framed to collect data from 260 medical students during the period of February-April 2019 and analyzed using SPSS software, version 21.

Results: Among the study population, the reason for selecting the medical profession recorded is 57% (147) due to self-interest, since they wanted to serve the humanity, 33.07% (86) joined out of their parents wish, 10.38% (27) said they chose since it is a lucrative profession. 72% of the participants said that doctors are at the higher risk of being victims of violence and the main reason is the manipulation of the news telecasted by the media. According to the students, the specialties with high risk are emergency medicine, surgery, OG and hence they wish to choose dermatology, radiology which are at a lower risk.

Conclusion: Violence against doctors is one of the influencing factors for the medical students in deciding their future career and hence Government & Institution should take measures to protect doctors.

Keywords: Doctors, hospital, risk factors, workplace violence

1. Introduction

Work place violence being defined as “Violence acts, including physical assaults and threats of assault, directed towards person at work or on study”. In Health sectors Doctors are being threatened, abused or even assaulted. According to WHO workplace violence has both the physical and psychological components. Annual incidence of Workplace violence is four times more in the health care. (8 serious cases/10,000 full time employees) as compared to all the other professions (2/10,000) [1, 2]. Approximately 70-80% of incidence are never reported (2).

Across India, violence against doctors is on rising trend. Majority of the violent situations are faced by the doctors at the emergency department or dealing with people during odd times. Indian medical Association (IMA) has revealed that nearly 75% of the doctors in India have faced violence at their workplace [3]. The most common triggering factor for the attack on doctors is sudden death. Others include any denial during admission process, any sort of delay in providing care. Almost all the times, violence is being started by any of the relatives with an argument, others join in the fray. Ultimately violence results in a stressful working climate. It hurts physically and also brings an everlasting impact on the self respect of the concerned Doctors. Owing to the above impacts, resident doctors are facing an alarming threat in selecting their field to be persuaded for post graduation.

2. Methods

2.1 Study Design: This study is a cross-sectional study.

2.2 Study Area: This study was conducted among the medical students of Sri Lakshmi Narayana Institute of Medical Sciences, Puducherry.
2.3 Study Population: The medical students persuading their Internship were the study population.

2.3.1 Study Period: The study was conducted from February-April 2019 in Sri Lakshmi Narayana Institute of Medical Sciences, Puducherry.

2.4 Sample Size and Method: The sample size for our study 260, and samples were collected through convenient sampling method.

2.5 Inclusion Criteria: The inclusion criteria for the study were the students who showed their willingness in participating.

2.6 Exclusion Criteria: students who were absent during the study period.

2.7 Study Tool: A pretested and semi-structured questionnaire was used as a study tool for data collection. The questionnaire consisted of sections such as personal profile, questions analyzing the reasons for selecting the Medical Profession, prevalence of insecurity and its impact on career selection among the medical

2.8 Data Collection & Analysis: The data collected were entered in excel sheet and analyzed using SPSS software version 21.

2.9 Ethical Considerations: Ethical approval was obtained from the Institutional Ethical committee, of Sri Lakshmi Narayana Institute of Medical Sciences, Puducherry before conducting the study. We explained the study and its importance to the participants. Confidentiality were ensured throughout the study.

3. Results

Table 1: Shows the frequency of variables determining the career selection and violence against doctors

| Variables                               | Frequency | Percentage |
|-----------------------------------------|-----------|------------|
| Reasons To Become Doctor                |           |            |
| Parents wish                           | 86        | 33.07      |
| Dream career                           | 111       | 42.69      |
| To earn more money                     | 27        | 10.38      |
| To serve sick people                   | 30        | 11.53      |
| If any other                           | 6         | 2.30       |
| Total                                  | 260       | 100.0      |
| Reasons For Speciality Choice          |           |            |
| Based on area of excellence in internship | 66       | 25.38      |
| Interest knowing the depth of the subject |         | 38.07      |
| Fear of competition.                   | 38        | 14.61      |
| Any disappointment following Patient/Relatives behaviour towards doctors. | 14 | 5.38 |
| Fear of taking risks.                  | 20        | 7.69       |
| More income                            | 20        | 7.69       |
| Others                                 | 11        | 4.23       |
| Reasons To Regret.                     |           |            |
| Longer duration of study               | 110       | 42.5       |
| Tough syllabus                         | 146       | 56.4       |
| Fear of exams                          | 1         | 0.4        |
| Fear of surgeries                      | 1         | 0.4        |
| Stress                                 | 2         | 0.76       |
| Do You Have The Fear Of Doing Specialisation |       |            |
| Yes                                    | 83        | 31.92      |
| No                                     | 177       | 68.3       |
| Aim Of Field To Be Persuaded While Joining MBBS | While Joining MBBS | At The End of Finishing MBBS |
| Medicine                               | 69(26.5%) | 46(17.7%)  |
| Surgery                                | 61(23.4%) | 47(18.1%)  |
| OBG                                    | 52(20%)   | 49(18.8%)  |
| Paediatrics                            | 36(13.8%) | 36(13.8%)  |
| Public health                          | 21(8.07%) | 20(7.69%)  |
| If any other specify                   | 21(8.07% )| 62(23.8% )|
| Were Do You Think Would Be More Violence |           |            |
| PHC                                    | 190       | 73.4       |
| OPD                                    | 64        | 24.7       |
| District hospitals                     | 2         | 0.8        |
| Private Nursing Homes                  | 2         | 0.8        |
| Corporate Hospitals.                   | 2         | 0.8        |
| After Joining The Course Have You Ever Regretted | Yes | 137 | 52.9 |
| No                                     | 123       | 47.3       |
| Have You Ever Been A Victim Of Violence | Yes | 200 | 76.92 |
| No                                     | 60        | 23.07      |
| Have You Ever Heard About Violence     |           |            |
| Yes                                    | 245       | 94.23      |
| No                                     | 15        | 5.4        |
Doctor are being threatened, attacked verbally as well as physically. Many of those who are attacked or threatened have reported experiencing anger, fear, anxiety, self-blaming, and loss of confidence. In Pondicherry, the practice of attacking hospitals and health care staff is rather rampant, due to increasing violence in recent years against the personal safety of medical practitioners.

The Present study is a questionnaire based study on interns. A total of 260 interns participated in the study. Among the Total study population, the reason for selecting the medical profession recorded 43% due to self interest and 33% joined out of their parents wish and 30% choose the profession since they wanted to serve humanity and the remaining 10% said they chose considering it a lucrative profession. From the above analysis it is evident that 40% of the interns will become doctors because they wanted so and its their dream career.

In the study conducted by Reena Sood et al., 82.5% participants have recorded that doctors are at higher risk of being victim of violence than other profession which is close with our study which reported 72%. According to the students, the specialities with high risk are emergency medicine, surgery, OG and hence they wish to choose dermatology, radiology which are at a lower risk. This is similar with a study done among doctors working in a tertiary care hospital in Delhi. This is similar with a study done among doctors working in a tertiary care hospital in Delhi, where higher proportion of doctors from the department of surgery experienced workplace violence compared to other departments. [7]

The problem is multi-factorial in source. Lately, Indian society is experiencing a exploding awareness regarding patient's rights. This trend is clearly evident from the recent gush in proceeding concerning medical professional or establishment liability, weak consent, and gap of confidentiality arising out of the doctor-patient relationship. [8] Certainty in the doctor–patient relationship has taken a whipping over the last few decades. The hospitals offering subsidized medical care are swamped with patients and their attendants. This may leave a perception of inattentiveness to the patient and leave him/her only partially satisfied.

4. Discussion
In foregone years Doctors relished good reputation and treated with esteem. But today setting has changed. There is a new-sprung epidemic invading medical profession across the whole globe. Doctors are being threatened, blasted verbally and physically [5]. In China, the execution of attacking hospitals and health care staff is considered rampant. Due to increasing violence in recent years against medical staff that threatens the personal safety of medical practitioners, the performance of Chinese medical education applicants has decreased greatly [6].

In our study, the reason for selecting the medical profession recorded is 57% (147) due to self-interest, since they wanted to serve the humanity, 33% (86) joined out of their parents wish, 10.38%(27) said they chose since it is a lucrative profession which is similar to the study done by Reena Sood et al., where Maximum students (68.0%) have chosen the field because of self-interest, 14.3% chose the profession since they wanted to serve humanity and only 5.8% participants said they chose it for being lucrative profession. This indicate that large indefinite quantity students will become doctors because they wanted so. [4]
Now Indian Medical Association is all fixed to establish an online initiative that stimulate its members to report assault cases of doctors on duty. This initiative is yet under finalization [9]. There is a need for more sweat to end this threat. Media needs to play a more proportionate role. Doctor patient relation needs more to be better. A doctor should be next to patients’ family to figure trust. More demanding laws should also be there.

5. Conclusion
Trust in the doctor patient relationship has taken a beating over the last few decades. In Pondicherry where illiteracy is high such unpredictable adverse events are not accepted by patients and families and can result in wrong perceptions and anger. This leads to attacks on doctors physically or in a court of law. There is a need for more efforts to end this menace. Media needs to play a more balanced role. Doctor patient relation needs more to be improved. A doctor should be close to patients and family to build trust.

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