



From Claps to Slaps—India's Health Workers' Fight with COVID-19 and Chaos

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As per the World Health Organization (WHO) statistics, 8 to 38% of health-care workers (HCWs) face physical violence at some point in their practice all over the world.¹ The Medical Council of India revealed that 75% of doctors have seen violence at the workplace in India, which included physical abuse, mental harassment, and homicide of doctor by patient's relatives for the death of a patient due to cardiac arrest.^{2–4}

These are challenging times for the entire world, facing an invisible virus without an approved standard of care treatment. The health-care personnel across the globe are in an intense pressurized environment and many countries have declared lockdowns for several weeks. In most countries including the USA where the highest number of coronavirus disease 2019 (COVID-19) cases are reported, the medical staff and other HCWs are receiving outstanding appreciation from the public and respective governments, but the situation in India is, however, quite different.⁵

On March 22, 2020, a day of Janata curfew (people curfew) was announced by the prime minister of India at 5 pm almost, every family in India came together to clap for the frontline warriors against the novel coronavirus.⁶ After years of assaults, abuses, and violence against doctors, this gesture from the public was a sigh of relief and a source of encouragement to work in risky environments.

However, in a few days, HCWs realized that they have more than one frontier to fight during this pandemic. Stigma, an incessant enemy, which doctors in India were fighting since decades has mutated and has become more virulent than the virus itself. Some of the highlights are as follows:

1. This first and foremost is an invisible disease.
2. The apathy of people toward doctors and lack of political will.

3. In some parts of the country, there was a severe lack of personal protective equipment (PPE); the same problem many countries faced globally including the USA.
4. Several governments have brought Essential Services Maintenance Act into action, even when there was no single incident of any HCW refusing to work despite knowing that their families and elderly parents were at risk because of their work in infectious environments.⁷
5. Doctors were sacked from the jobs and humiliated when they went public with the facts of lacking PPE.⁸

One of the largest residents' doctor's association of All India Institute of Medical Sciences has written a letter to the prime minister to address this issue of the humiliation of medical opinion and voice.⁸

In addition to the above-mentioned points, misinformation and fake news have added significantly toward the escalation of the challenges. The social media, particularly WhatsApp, has become a hub of *spreading misinformation and creating new dilemmas in the minds of the public*, spreading fear ubiquitously, and intensifying the hysteria about HCWs that they are more infectious and many of them believed. As the global pandemic grips the country, public shunned and ostracized doctors for the fear of infection. There was a peak of incidences where doctors, resident doctors, in particular, were evicted from rented homes. Ministry of Home Affairs has to interfere to reassure doctors and warn against such incidences.⁹

The woes of doctors have just started with the increase in the number of patients and hotspots of positive cases. Doctors at ground level were given the duty of contact tracing and testing of suspected patients from the patient's homes. Some of the heart-wrenching incidents were as follows:

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1. Even as the world acknowledges the high infectivity and mortality rate due to COVID-19 in patients with comorbidities, relatives of patients attacked a doctor in Hyderabad on March 30 for the death of a 56-year-old patient with multiple comorbidities who was severely symptomatic and tested positive for COVID-19.¹⁰
2. In a horrifying incident that took place in central India-Indore in April, two such health workers were chased with weapons, sticks, and were hurled stones at. These were female doctors who went there to collect information on contacts of positive COVID-19 patients.¹¹
3. Ghastly assaults became new normal with the news of doctors being manhandled at homes, parking lots, and being forced to evict from their own homes and threatened to kill them.
4. A female doctor from Surat civil hospital was physically abused and attacked by a neighbor next door even when she was reassuring that she was not treating COVID-19 patients.¹²
5. A total of 126 people were arrested in connection to violence on doctors in the state of Karnataka, out of whom 5 people tested positive for novel coronavirus.¹³ A 36-year-old young doctor died due to respiratory failure when every ambulance in the vicinity refused to shift him to intensive care unit (ICU) in the government hospital.¹³

The apathy hit the doctors stronger than the pandemic itself. HCW became a new class of untouchables and outcasts in the neomodern societies of India.

Nowhere in the world, people have misbehaved with HCWs who are helping to treat them. In Delhi, some people in quarantine misbehaved, roaming around the wards without their trousers and made lewd gestures toward female nurses, creating a complicated work atmosphere for them.¹⁴ In a similar incident from the same city, some patients have ripped the PPE of doctors and spat on them hurling abuses that they will make corona spread to doctors too.^{15,16} This hatred is unwanted and unexpected.

There was a question in the minds of doctors in India, "*Shall we fight COVID or Patients?*"¹⁷ This is all happening when the entire care including the quarantine and treatment including ICU care is provided to them free of cost by government.

The worst is yet to be read, being denied dignity in death. The COVID-19 warriors who served throughout their life cannot find a proper place to rest even after the death in the line of duty. Heart-wrenching incidents shook the entire medical fraternity when two doctors were refused burial ground in the most densely populated city of Chennai with 7.9 million population. Far from getting a proper rite, a mob of 50 people attacked with sticks and stones, the family of this famous neurosurgeon, who died due to COVID-19 which he contracted while treating sick patients. His colleague had to dig a grave to expedite his burial before more people could reach there.¹⁸ The Indian Medical Association responded and issued a call for nationwide symbolic protest. The central government assured action against such incidents in future and passed an ordinance that punishes the offenders with a nonbailable warrant and fine.¹⁹

But do we need these laws to show compassion toward someone, from whom we expect the same when we need it the most? What we need is sensitization of the public toward health and HCWs. We need more positive news and less misinformation on social media, lesser media trials on doctors and inadvertent health-care mishaps and most importantly a political will to protect and care for HCWs. Till then, doctors in India have to face this unprecedented occupational hazard daily at the workplace while fighting this unseen enemy.

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Conflicts of Interest

There are no conflicts of interest.

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