

Ordinance on the Safety and Security of Health Workers and Health Institutions in Nepal: A Critical Analysis

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ABSTRACT

Violence against health workers has been considered a common issue throughout the world. The protection of health workers in low and middle-income countries such as Nepal has not been considered a serious issue by the government. But due to the surge of COVID-19 pandemic and increasing violence against health workers, commendable steps have been taken by the Government of Nepal to protect the safety and security of health workers and health institutions in Nepal. However, the question mark on effective implementation of the ordinance exists suggesting for the appropriate action from concerned authorities and strong collaboration among these sectors.

Keywords: Health worker; Nepal; ordinance; safety

INTRODUCTION

Assault and attack against health workers is not a recent phenomenon. Despite the chaotic scene of the COVID-19 pandemic, front-line health workers have been working prolonged hours to provide health services for the public. Along with the fear of being infected, the COVID-19 pandemic has made the scenario worst for health workers as they are being attacked, humiliated, and verbally abused, by the public.¹ Absence of safety of health workers leads to the compromise in keeping the patients safe. On June 6th, 2021 the ordinance on safety and security of health workers and health institutions has been issued by President Bidya Devi Bhandari amending the existing Security of Health Workers and Health Organizations Act after a long period of lobbying. Provision on attacks and threats against on-duty health workers, acts of vandalism, insulting of health sector employees, and obstruction of health service users have been considered as punishable crimes by the ordinance.

POLICY CONTEXT

Clause 44 of The Public Health Service Act (2075) has stated health workers, staff, or employees working at a risky workplace shall be provided with risk allowance by the concerned employer as prescribed by the Government of Nepal. Similarly, as per article 52 clause (h) of Public Health Act (2075), a person obstructing and disturbing the health worker or health institution and preventing them from fulfilling the duty as stated by

the act is deemed to have committed the offense. The offence created is liable to be punished with a fine from 25,000 up to 50,000.²

The Ordinance on Security of Health Workers and Health Organizations has placed the provision of crime and punishment to those who set the health sector settings ablaze with two to five years of jail sentences or fine amounting from Rs 200,000 to Rs 500,000 or both. Similarly, jail sentences up to three years or a fine of Rs 300,000 or both have been placed on those who vandalize the health sector or hurt health workers and staff. Fine of up to Rs 100,000 or one-year jail term or both has been set for padlocking the health organization, intimidating, and demonstrating offensive behavior towards the health workers.

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INTERNATIONAL PERSPECTIVES

Health workers are at high risk of experiencing violence globally mostly by patients and visitors. As per World Health Organization (WHO), about 38% of health care workers experience physical violence which not only impacts the psychological and physical well-being of the healthcare workers but also affects their commitment towards patient care which is an ultimate loss to the global health sector.³ Since the early phase of the pandemic, front-line health workers such as nurses and

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doctors have been physically assaulted and pelted with eggs in Mexico. Also, the incidents of being beaten spat on, threatened, stoned, and even eviction from their homes has not been new across India as the pandemic surged. Similar examples of violence can be seen in several countries including the USA and Australia.⁴

The Government of India took prompt action in ordinance to protect the Healthcare Workers against violence due to the dire need of health care workers during the crisis of COVID-19. The ordinance has planned to cover all the healthcare workers including, doctors, nurses, paramedical staff as well as accredited social health workers. However, the effective implementation of this ordinance is yet to be seen. The attack against healthcare workers has been made a non-bailable offense by GOI where prison up to seven years and fines ranging from 2,00,000 to 5,00,000 has been sentenced.⁵

China approved the law to regulate the healthcare services that included provisions to prevent violence against medical workers as disputes between patients and medical workers alarmed. As per the Criminal Law of China, imprisonment for 3 to 7 years had been sentenced for those who cause violence disturbing medical activities. Administrative punishments such as fines and detentions had been clarified for those disturbing medical activities.⁶

Similarly, the Government of the UK had introduced National Health Service (NHS) violence reduction strategy in 2019 which has doubled the sentence for violence against emergency service staff from 6 months to 1 year. Further, to deal with violence and abuse, the strategy also clarified the responsibilities of the organization and improve the staff training.⁷

NATIONAL PERSPECTIVES

The occupational health and safety (OHS) related rules and regulations have been formulated in Nepal. As per the OHS law, the organization should be responsible for the safety of its employees. Considering the pandemic situation, the safety of health workers is at stake in Nepal. The health workers have been going through mental and emotional turmoil while providing care to the patient. There has been an enormously negative impact on the psychological aspects of health workers as they fear being infected and risking the lives of their families. Along with this, health workers are bound to face financial burdens as in case of infection, healthcare expenditure is paid from their own pocket.⁸

Nepal Medical Association (NMA) in Nepal had been raising

the issue of workplace violence in health care settings to the concerned stakeholders and even called out for a nationwide strike to grab the attention of respective authorities. Also, to address the increasing violence against doctors Government of Nepal had passed Health Professional and Health Institution Protection Act which was not implemented effectively.⁹ However, the recent introduction of the ordinance on the health safety and security of health workers and health institutions in Nepal has raised hope for the health workers. Despite this, there is doubt on effective implementation of the services until and unless it is passed by the parliament of Nepal.

RECOMMENDATION

The violence directed towards health care workers should be halted effectively. This requires the effective collaboration of various stakeholders including all the levels of government. Assurance of compliance to the legal standards as set by ordinance should be made by involving the law enforcement sector such as police forces. Also, social media can be used effectively to grab the attention of the public towards legal consequences such as imprisonment and fines on taking action against the health workers. Besides, the concept of health workers has been narrowed down to only doctors and nurses but it refers to the various professionals engaged in the health sector. This highlights the need for collaboration between NMA, nursing association, public health association, and others.

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Competing interests: None declared

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