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HOSPITAL CRIMES IN KERALA: A COMPREHENSIVE REVIEW AND IDENTIFICATION OF RESEARCH GAPS

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ABSTRACT

Hospital crimes pose significant challenges to healthcare delivery by compromising the safety of patients and healthcare professionals. This paper aims to review existing research on hospital crimes in Kerala, India, to identify gaps in the current literature. A systematic literature review was conducted, focusing on studies published up to November 2024. The findings indicate that while workplace violence against doctors has been studied extensively, other forms of hospital crimes, such as theft, sexual harassment, cybercrimes, corruption, and illegal organ trade, remain under-researched. There is also a lack of comprehensive data on systemic factors contributing to these crimes. Addressing these gaps is crucial for developing targeted interventions to enhance hospital safety in Kerala.

KEYWORDS: *Hospital crimes, Kerala, workplace violence, healthcare security, research gaps, cybercrime, corruption, illegal organ trade.*

1. INTRODUCTION

Hospital crimes encompass a range of illegal activities occurring within healthcare settings, including violence against staff, theft, fraud, cybercrimes, and illegal organ trade. These crimes not only jeopardize the safety of patients and healthcare workers but also undermine the integrity of healthcare systems (Chang, 1995). In Kerala, a state in southern India known for its advanced healthcare indicators, incidents of hospital crimes have been reported, raising concerns about the adequacy of existing legal and preventive measures (The Times of India, 2023a; Shibimol, 2024a).

Despite the critical nature of this issue, there appears to be a paucity of comprehensive research addressing the spectrum of hospital crimes in Kerala. Previous studies have primarily focused on workplace violence against doctors (Kunnath et al., 2023; Kallivayalil et al., 2022), often neglecting other forms of crimes and affected groups. This paper seeks to fill this gap by reviewing existing literature on hospital crimes in Kerala and identifying areas that require further investigation.

2. OBJECTIVE

The primary objective of this paper is to review existing research on hospital crimes in Kerala to identify gaps in the current literature. By analyzing published studies, this paper aims to uncover patterns, risk factors, and the prevalence of various crimes in healthcare settings within Kerala, thereby informing future research and policy interventions.

3. METHODS

A systematic literature review was conducted to identify studies related to hospital crimes in Kerala. The following steps were undertaken:

Search Strategy: Databases searched included PubMed, Scopus, Google Scholar, and credible news outlets. Keywords used were "hospital crimes," "workplace violence," "Kerala," "healthcare security," "medical negligence," "cybercrime in hospitals," "healthcare fraud," and "illegal organ trade."

Inclusion Criteria: Studies were included if they: (1) focused on hospital crimes in Kerala; (2) were published in English; (3) were peer-reviewed articles, reports, official documents, or credible news reports; and (4) provided empirical data or comprehensive reviews.

Exclusion Criteria: Studies were excluded if they: (1) were not specific to Kerala; (2) were opinion pieces without empirical data; or (3) focused solely on patient health outcomes unrelated to crimes.

Data Extraction: Relevant information was extracted, including study design, population, sample size, methods, key findings, and conclusions.

4. RESULTS

A total of twelve references were identified as relevant to hospital crimes in Kerala. The findings are summarized below:

4.1. Legal Framework and Law Enforcement Initiatives

The Kerala Healthcare Service Persons and Institutions (Prevention of Violence and Damage to Property) Act, 2012, aims to protect healthcare workers and infrastructure from violence (Ministry of Home Affairs, 2024). Following the tragic murder of Dr. Vandana Das in 2023, there have been calls for stricter enforcement and amendments to enhance penalties (The Times of India, 2023b; Onmanorama, 2024a). The introduction of the 'Code Grey' protocol seeks to standardize hospital responses to violence, incorporating measures like incident reporting, staff training, and alert systems (Onmanorama, 2024a; Shibimol, 2024b).

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4.2. Prevalence of Workplace Violence Against Doctors

Kunnath et al. (2023) conducted a cross-sectional study with 2,400 doctors practicing in Kerala. The study found that 65.6% of doctors experienced workplace violence, predominantly verbal abuse (89.9%) and intimidation (32.7%). Most incidents occurred during the day.

Kallivayalil et al. (2022) surveyed doctors in Kerala to assess the association between workplace violence and clinical anger. Results indicated a significant correlation, suggesting that exposure to violence impacts doctors' emotional well-being and may affect patient care.

4.3. Factors Influencing Workplace Violence

Davey et al. (2020) conducted a qualitative study among 63 emergency department (ED) healthcare providers across India, including Kerala. The study highlighted that workplace violence is prevalent, with unique challenges such as financial stressors, inadequate enforcement of rules, and frequent violence from patient family members.

Joshi and Joshi (2018) explored perceptions among junior doctors in India, identifying factors like materialism, negative media portrayal, and lack of protection as contributors to workplace violence.

4.4. National Context of Workplace Violence

Jain et al. (2021) found that workplace violence against resident doctors in Indian teaching hospitals is prevalent, with 86% experiencing violence, primarily verbal abuse. The study emphasized the need for better communication, strict laws, and strengthened security measures.

Grundmann et al. (2017) compared workplace violence experiences between emergency medicine physicians in India and the USA, revealing that 89% of Indian respondents witnessed verbal violence, impacting job satisfaction and workplace safety.

4.5. Cybercrimes in Hospitals

Cybersecurity threats in hospitals, such as ransomware attacks, pose significant risks to patient care and operational stability (Argaw et al., 2020). While no specific studies were found on cybercrimes in Kerala hospitals, the global trend suggests that healthcare facilities are increasingly vulnerable due to complex infrastructures and resource limitations (Jalali and Kaiser, 2018). Hospitals can mitigate risks by simplifying systems, aligning stakeholders with security protocols, and providing regular staff training (Wasserman and Wasserman, 2022).

4.6. Illegal Organ Trade

Cases of illegal organ trade have been reported in Kerala. Shibimol (2023) reported that a Kerala court issued summons to a private hospital and eight doctors for violating organ transplantation norms. Another incident involved the alleged organ harvest of a victim taken into custody by Kerala police (The New Indian Express, 2024). These incidents highlight the need for stringent enforcement of regulations to prevent exploitation and corruption in organ transplantation practices.

4.7. Corruption in Healthcare

Corruption and poor governance hinder the delivery of quality healthcare services, leading to poor health outcomes and increased costs for patients (Naher et al., 2020). Kumar (2003) noted that healthcare is among the most corrupt service sectors in India, with common forms of corruption including bribery and absenteeism. These practices can lead to inadequate patient care and undermine public trust in healthcare institutions.

4.8. Other Crimes in Hospitals

Incidents of medical negligence, financial fraud, and sexual offenses have been reported in Kerala hospitals (The Times of India, 2024a; Onmanorama, 2024b). For example, a physiotherapist was charged with molesting a woman patient, and a doctor was involved in a financial fraud investment scam. These cases emphasize the need for robust legal and preventive mechanisms to address a broader range of hospital crimes.

5. DISCUSSION

The reviewed literature confirms that workplace violence against doctors is a significant issue in Kerala's hospitals. Verbal abuse emerges as the most common form, often perpetrated by patients' family members (Kunnath et al., 2023). The high prevalence of such incidents highlights a critical area of concern for healthcare administrators and policymakers.

However, the literature exhibits notable gaps:

- Limited Scope of Research: The focus on doctors overlooks other healthcare professionals, such as nurses, administrative staff, and support personnel, who may also be victims of workplace violence or other crimes.
- Neglected Types of Crimes: There is a lack of research on other forms of hospital crimes, including theft of medical equipment, sexual harassment of staff and patients, medication fraud, cybercrimes targeting hospital information systems, and corruption within healthcare facilities.
- Systemic Factors: Few studies examine the systemic and infrastructural factors contributing to hospital crimes, such as inadequate security measures, poor lighting, lack of surveillance systems, and ineffective reporting mechanisms.
- Psychological Impact: The long-term psychological effects of workplace violence on healthcare workers, including stress, burnout, and decreased job satisfaction, are underexplored.
- Legal and Policy Frameworks: Limited research assesses the effectiveness of existing legal provisions, such as the Kerala Healthcare Service Persons and Institutions Act, 2012, and their enforcement in preventing hospital crimes.

6. CONCLUSION

Hospital crimes in Kerala present a multifaceted challenge that extends beyond workplace violence against doctors. The existing literature primarily focuses on this aspect, leaving other critical areas insufficiently addressed. There is an urgent need for comprehensive research encompassing various types

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of hospital crimes, their prevalence, contributing factors, and impact on healthcare delivery.

Addressing these gaps will require:

- Broadening Research Focus: Future studies should include a wider range of crimes and affected groups within hospital settings.
- Interdisciplinary Approaches: Collaborations between healthcare professionals, criminologists, sociologists, and legal experts can provide holistic insights.
- Policy Evaluation: Assessing the effectiveness of current laws and policies will inform necessary reforms.
- Preventive Strategies: Research should inform the development of targeted interventions, such as staff training, security enhancements, and public awareness campaigns.
- By advancing research in these areas, stakeholders can develop evidence-based strategies to enhance safety, improve patient care, and support healthcare professionals in Kerala.

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