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Comment



A historic ordinance against violence to health workers of Nepal

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On May 8, 2022, the President of Nepal, on the recommendation of the Nepal government and Council of Ministers, issued the Ordinance on the Safety and Security of Health Workers and Health Institutions (First Amendment) Ordinance, 2079 B.S. under Article 114 (I) of the Constitution of Nepal.¹ The Ordinance includes the provision of a safe working environment for physicians and health care workers. The legislation was welcomed wholeheartedly by members of the medical community, particularly considering the increasing rates of violence against health workers fuelled by the surge in COVID-19 cases.²

Unfortunately, a mere five days after issuing the ordinance, emergency doctors at Birat Medical College, Tankisinuwari were attacked by relatives of patients, with the hospital itself also vandalised. This was unfortunately not an isolated incident. For example, during the COVID-19 pandemic, doctors and nurses of Bheri Hospital, Nepalgunj were forced to jump from a double-storeyed building to save themselves from attack. Health care workers and the whole medical fraternity in Nepal are clearly distressed by these situations.

The Nepal Medical Association (NMA) has long advocated for management of violence against health care workers with a demand for these types of offences to be classified as a "non-bailable offense." Initially, the Public Health Act (2075) policy deemed a person offensive if they were found to be obstructing and disturbing a health worker or institution and preventing them from fulfilling the duty, incurring a penalty in the form of a fine from 25,000 up to 50,000 NPR.³ The June 6 2021 Ordinance on Security of Health Workers and Health Institutions added jail sentences as a penalty.² The recent first amendment designates that fire or vandalism at health facilities and attacks or physical injury to heath workers will result in detention and sentencing at a trial. The detention does not apply to people padlocking health organizations, intimidating, and demonstrating offensive behaviour.

China has also approved a law to protect medical workers safety and dignity and to reduce increasing violence targeting members of the profession. Individuals involved in violence would be sentenced to a fixed-term imprisonment of 3–7 years and those disturbing medical and administrative activities would be fined or subjected to detention.⁴ The Government of India has also regulated attack on health workers as a non-bailable offense with imprisonment of up to seven years and fines ranging from 2,00,000 to 5,00,000 INR during COVID-19 pandemic.⁵

Apart from legislation, there are still many considerations needed to create a violence-free working environment. Immediate actions that should be implemented in this area include collecting data, creating partnerships among governments, health associations, civil societies, and media organizations, and creating accountable law enforcement with an investment in health security measures.⁶ A significant aspect of the problem is lack of knowledge and anti-science information.

An article in *The Lancet Infectious Diseases*⁷ describes poor public understanding, a limitation of educational interventions, and growing distrust between health experts and the population as issues for vaccine hesitancy. To solve these issues sustainably the article highlighted the importance of an open and honest relationships built on mutual respect among healthcare providers and patients, effective public health messaging and diversity, inclusion, and representation in stakeholders in the health sector.⁸

The increasing cases of violence against health care workers Nepal reflect similar gaps in health literacy, lack of knowledge, and distrust between health workers and the population. The Nepal government should explore more sustainable solutions to enforce regulations for long-term workplace violence mitigation and minimise growing distrust between the general population and medical workers by addressing communication barriers and creating more public engagement.

The government should establish health institutions as a safe workplace for future health professionals, enforce the law effectively and prioritise sustainable solutions to discourage capable health workers from leaving the country. We hope the coming years will be violence-free for healthcare workers of Nepal.

Contributors

Conceptualization, Data Curation, and Methodology Writing- original draft, Writing-review, and editing= S.K. The Lancet Regional Health - Southeast Asia 2022;3: 100037 https://doi.org/10.1016/j. lansea.2022.100037

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Declaration of interests

The author does not have any commercial or other associations that might pose a conflict of interest.

Acknowledgment

I would like to acknowledge Dr Alex Hui and Mr. Leo Atwood for professional language and technical editing.

References

- I The Annapurna Express. President Bhandari issues two important health ordinances. The Annapurna Express. https://theannapur naexpress.com/news/president-bhandari-issues-two-importanthealth-ordinances-5790. Accessed 14 May 2022.
- health-ordinances-5790. Accessed 14 May 2022.
 Belbase P, Basnet A, Parajuli A, Paudel S, Pandey A. Ordinance on the safety and security of health workers and health institutions

in Nepal: a critical analysis. J Nepal Health Res Counc. 2021;19:408–410.

- 3 Nepal Law Commission. The public health service act, 2075 (2018) [Internet]. Vol. 2075. 2019. p. 1–24. Available from: https://www. lawcommission.gov.np/en/wp-content/uploads/2019/07/The-Pub lic-Health-Service-Act-2075-2018.pdf.
- 4 Lu S, Ren S, Xu Y, et al. China legislates against violence to medical workers. *Lancet Psychiatry*. 2020;7:e9.
- 5 Covid-19: Indian government vows to protect healthcare workers from violence amid rising cases. BMJ. 2020;369:m1631.
- 6 McKay D, Heisler M, Mishori R, Catton H, Kloiber O. Attacks against health-care personnel must stop, especially as the world fights COVID-19. *Lancet*. 2020;395:1743–1745.
- 7 Adhikari B, Cheah PY. Vaccine hesitancy in the COVID-19 era. Lancet Infect Dis. 2021;21(8):1086.
- 8 Goldenberg MJ. Vaccine Hesitancy: Public Trust, Expertise, and the War on Science. University of Pittsburgh Press; 2021. https://muse. jhu.edu/book/82717.