



# Broken windows effect

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Many experts consider that reporting is essential for developing a successful workplace violence prevention program (1,2). Health care workers can learn from the reported violent episodes both to perform early intervention and to protect themselves. However, we doubt that whether the public and patients will be affected by the workplace violence reporting. It is well known that the main channel for people to obtain this information is the media. If the media reported the violent events partially or non-objectively, the potential perpetrators would receive a false signal to imitate the behavior reported in the past. Workplace violence could spread like an infection, which is so-called broken windows effect.

For example, a woman in Xiangtan county of central China died of multiple organ failure during childbirth caused by amniotic fluid embolism, a rare condition that can occur during pregnancy or in the immediate postpartum period with a high likelihood of death. The false reporting by a local media in August 2014 caused widespread debate throughout the country then (3). Two years later, a woman in Suide county of northwestern China died of the same complications after giving birth. A newspaper in Xi'an immediately twisted a report entitled "*The hospital nurses were playing with the mobile phone when the woman lay bleeding*" to attract public attention (4), although the monitoring video showed all the facts. Surprisingly, the journalists in the both reports did not describe any words on workplace violence by the patients' family members. The latter learned from the former event little on the medical risk of childbirth, unfortunately the workplace violence continued to occur. According to the White Paper on the Practice of Medicine by Chinese Physicians by the Chinese Medical Doctor Association in 2014, 84% of doctors considered the irresponsible media reporting is one

of the most important causes of workplace violence (5). The media of China are urged to examine their role in building a harmonious doctor-patient relationship.

Medical dispute spreads to the countryside in recent years. Physical attacks and violence on medical workers have become a common event in China. The deteriorated doctor-patient relationship is a microfilm of the trust crisis in the whole Chinese society. In China from 2003 to 2013, 101 serious incidents of violence against health care workers occurred, including 23 incidents that resulted in the death of 24 doctors or nurses (6). According to the statistics by a Chinese newspaper, from January 2015 to May 2016, there are 51 violent events exposed in the media, of which 21 were happened in June 2015 (7). However, the media did not report in any incident whether the perpetrators had been punished due to their illegal acts of violence. So the workplace violence is still alarmingly increasing in China.

What is the impact of workplace violence on health care workers? A survey in 2011 indicates that 78% medical practitioners do not expect their children to study medicine any more in the future (5). A number of doctors have the idea or plan to give up the occupation (8). In fact, due to the unsafe professional environment and lack of respected social status, Chinese young generation has lost enthusiasm in pursuing a career of medicine. National medical colleges warn that the number of medical students is reducing (9). More terribly, the elites among Chinese doctors and students have turned their eyes to the developmental opportunity in the developed countries, where doctor is a prestigious profession with large income and high social class. More and more Chinese elites devote themselves assiduously and faithfully to the United States Medical Licensing Examination (USMLE). According to the reports from the Educational Commission for Foreign Medical

Graduates (ECFMG) of America, China was ranked the fifth in the number of gaining ECFMG certificates all over the world from 1987 to 2011 (10). We have to ask who would like to become doctors in future China.

The Chinese government has made continuous efforts on the healthcare reform. However, it is not enough at all. The civil society needs to take action to solve the dilemma of the doctor-patient relationship. This is equal to save ourselves.

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