

Corrigendum to “Ending violence against healthcare workers in India: a bill for a billion” [The Lancet Regional Health Southeast Asia 6 (2022) 100064]



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The authors deeply regret for the error in the rate calculations for India. The violence against healthcare worker (VAHCW) rate for India should have been 3 per 100,000 HCWs and not 3 per 10,000. Hence, the third paragraph should read as follows:

The publicly available II data reveals that from 2016 to date, India saw a total of 220 reported VAHCW incidents contributing to 3.4% of the global incidents, [6] though India contributes to less than 1% of the global HCWs. [7] India had a rate of 3 VAHCW incidents per 100,000 HCWs (based on health workforce counts for 2019). [7] Among South Asian countries, India had the second most number of incidents after Afghanistan, which is considered a conflict zone. Compared to India, Nepal had one-third VAHCW rate and one-tenth incident count, yet it recently passed the ordinance for protection of HCWs. [1] The VAHCW incidents rate in India was 6 and 84 times greater than that in UK and China—countries that have taken legal action against violence. [1] While the numbers are not comprehensive and should be cautiously compared across countries due to limitations in data collection, reporting channels, and context, they certainly point to the problem of VAHCW in India.

While the does not change the greater implications of the article, the direction of advocacy, and recommendations for policymaking, it is still an important correction that the authors believed they were obliged to report. The authors would like to apologise for any inconvenience caused.

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