

EFFECT OF VISION 2015 ON FORENSIC MEDICINE

**Abstract**

Vision 2015 has been formulated by the committee formed by MCI for suggesting changes in the curriculum and structure of undergraduate study i.e. MBBS. There has been a hue and cry in the medical fraternity about the various changes suggested by the committee. A critical review of Vision 2015 is being offered to suggest how it is going to affect the specialty of forensic medicine and the faculty of forensic medicine. This paper also highlights the imbalances it will produce in the knowledge of a medical graduate produced under the new vision. This vision as visualized is also going to affect the society in a harmful way. Already there are poor medicolegal services in India and this new vision is further going to jeopardize the delivery of medicolegal services throughout the country. The whole change is not beneficial to any member of the society except possibly the defence pleaders as there will be one benefit that it will lead to more acquittal of the criminals! Some recommendations have been given for the revision of vision 2015.

**Keywords:** MCI; Vision 2015; forensic medicine; medicolegal services

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**Introduction**

Vision 2015 was visualized as a sincere effort by the MCI to improve the quality of medical education in India. This was a long overdue step and this step was needed right at the time of independence to redo the medical education as per the needs of the health services for the Indian society. But even when it is late; it was thought that it will be a step in the right direction.

When efforts are made to improve a system it needs sincere desire, a proper review of the existing system, study of the drawbacks and good point of the existing system by the experts of the concerned fields. Then experts suggest changes which are critically analyzed and overall effects of implementation of new changes on the health system and the society are visualized. This document is then made public inviting suggestions from public. After considering these suggestions conclusions are drawn which are broadly acceptable to the national bodies of the experts in that particular field. These decisions should be implemented after making an amicable consensus.

When we see the constitution of the committee for suggesting changes in the medical curriculum, administration and providing of medical education; a genuine question arise in the mind that why not experts from all the subjects have been chosen ignoring the possible fruitful inputs from experienced professors who have spent their lifetime teaching only one subject during their lifetime. In this exercise neither the national bodies representing the experts in a particular field have been consulted nor have the views of prominent personalities in the different fields have been utilized. This is an era of specialization and I do not believe that a few experts can take care of all the subjects. A strong disbelief arises about the justification of various changes in other subjects for which there were no experts. There are different subjects ranging from basics like anatomy, physiology, biochemistry to paramedical subjects like pharmacology, pathology, forensic medicine, microbiology, community medicine to clinical subjects like ophthalmology, ENT, medicine, surgery, obstetrics and gynecology, pediatrics, orthopedics and psychiatry etc. As an example I put forward the case of forensic medicine where injustice seems to have crept up due to non-consultation with the forensic medicine experts.

**Discussion**

Vision 2015 shows a desire to evolves strategies and futuristic plans so that medical education in India is innovative and is able to meet the demands of national needs while preparing undergraduates to be able to perform in the changing scenario of medical science but what I could grasp from the changes suggested in forensic medicine is that:

Ethics and Legal medicine, which is part of forensic medicine, has been suggested as an elective subject whereas Forensic Medicine in totality is needed as a compulsory subject. Already the successful prosecution rate in India is far below than many other countries and this rate is likely to go down further with forensic medicine being as an elective subject as many students may not opt for it considering that this will not lead to monetary benefits in their career and important aspect of justice to the society will be lost which may further lead to restlessness in the society.

Whereas there was a strong need to make the teaching uniform all over India, but to my surprise no steps have been taken in the vision 2015 to make it uniform. In government medical colleges post-mortem examination is done and shown to the students and this is the best teaching and learning experience. This practice is also being followed in a few select private medical colleges which is a very genuine and good practice. But I ask a question here why not it is being followed in all private medical colleges where the best mortuaries of the country are located and they have very good and learned forensic medicine

experts? In this way students are being denied the education which is their due. In this way doctors are being produced in the country having different learning experiences, some very good and some not very good which is not moral for the society. This is just an example in one subject.

It has been decided to double the number of doctors by 2031 which is a welcome idea but here I will like to point out that even the services of the alleged less number of available doctors are not being utilized and many of them are unemployed or underemployed. Merely increasing the availability of doctors without any resources to utilize their services will lead to frustrations. Otherwise we will cure one aspect of the problem but which will lead to another bigger problem. Solution should be found in totality. Immediate solution should be providing jobs to all unemployed doctors so that ratio of available doctors to the needed population can be increased. There is need to increase employment opportunities in the rural areas so that apparent imbalance in the availability of registered doctors can be increased.

When we are talking about need based curriculum but we totally forgetting the need of the society as far as forensic medicine is concerned. We need to develop skills of doctors in dealing with medico-legal cases rather than not exposing them to all medico-legal situations as is happening in private medical colleges. At least one police station must be attached to a private medical college so that students learn the intricacies of postmortem examination and medico-legal work.

Instead of taking steps to cater the needs of the 21<sup>st</sup> century by modernizing the different fields we are just ignoring the fields like forensic medicine which affects the society in a unique way. If medico-legal examinations are not done in a proper way it will lead to restlessness, anger and deep grief in the society as there is likelihood that it will lead to injustice due to improper collection and interpretation of evidence which will lead to miscarrying of justice. If justice is denied to the people persistently it may lead to accrued up frustration which may lead to revolutions.

We are trying to bridge the gap between demand and availability of doctors but this does not look as far as dealing with medico-legal services is concerned. There is a huge gap between demand and availability of skilled doctors in forensic medicine so all the undergraduates are needed to be taught forensic medicine otherwise an imbalance will be created resulting in dissatisfaction of masses in the medico-legal services to the society. Even the services of the available forensic medicine experts are not being used properly and they are being posted in dispensaries where no medico legal work is ever done. I suggest that they should be posted at district headquarters where their services can be utilized in a better manner and let the graduates who have a good forensic medicine learning during their undergraduate course handle the other cases.

Vision 2015 declares that "Forensic Medicine can be effectively taught during Gynecology& Obstetrics (rape, assault), surgery (injuries) and pharmacology (toxicology). [1] Legal experts can be called for medico-legal issues. Forensic medicine skills can be acquired during internship such as documentation of medico-legal cases of alcoholism, suicide/homicide, rape, assault and injury case". This will be possible only if forensic medicine is made a compulsory subject and not an elective subject in the internship. Throughout India medico legal services are performed in more than 95% of the cases by graduate doctors only and not the postgraduate forensic medicine specialists. Therefore graduate doctors must be well versed with medico legal matters and a great emphasis should be laid on teaching of forensic medicine during this period as a full-fledged equal subject and not as a smaller or subservient part as compared to other subjects.

"Professionalism and ethics curriculum will be a mandatory part of the curriculum and will be integrated throughout the MBBS Course. The foundation courses will be taken during the first and second year and rest of the curriculum will be taught along with the clinical subject". This is being taught by forensic medicine faculty and I fully agree that more emphasis should be laid on teaching of ethics and professionalism as these are the fundamentals for the successful medical profession. This will be a good preventive measure and doctors will know that how they have to practice without fear of litigation.

I agree with the vision 2015 which states that parts of clinical training should be core requirements. I will like to highlight that teaching of forensic medicine should be extended to the years when students are seriously learning dealing with patients and treating the patients. When they are learning obstetrics and gynecology to students will be better equipped to learn examining victims of sexual offences. When students are learning dealing with emergency cases they will be in a better position to deal with poisoning cases and injury cases. But this part of teaching can be effectively carried out by forensic medicine experts only as they have the experience of dealing with such cases and later on appearing the courts and knowing well the police and judiciary requires for the successful prosecution of the criminals.

Majority of doctors are always afraid of dealing with medico-legal cases and appearing in courts. That is the reason that they shun the medico-legal work. Those fearful doctors will never be able to teach forensic medicine in the right sense and this can be done best by the forensic medicine experts only. During internship all the doctors must visit the premises of the courts to see the giving of evidence in the courts so that doctors are not panicked at the name of courts and they will deal more humanly with victims and offenders.

If all the undergraduates are taught the subject of forensic medicine, not as a little brother but as a full-fledged subject, will give a long way in addressing the points raised by me and my other learned esteemed colleagues. We should not proceed in a hasty manner but should try to develop consensus duly taking into confidence various national academic bodies and other leading experts in the fields who have spent their life time nourishing and teaching the specialties.

There has been a lot of resentment in the fraternity of forensic medicine over the proposed changes in the Vision 2015 of MCI. A lot of criticism has emanated in the various groups on the net like forensicswayout@yahoo-groups.com, [2] forensics@facebook.com, [3] quality\_of\_medical\_education@yahoo-groups.com [4] and others. Many organizations have done

press conferences against this move and met the ministers in their respective states. Hundreds of emails have been sent to IAFM, ICFMT, IST, PAFMAT and other organizations. On February 5, 2011 most of the experts of forensic medicine wore black badges all over India in protest against this move of MCI.[5] Even medical students and other doctors protested all over India including Mumbai.[6]

### **Conclusions**

Various changes in the vision 2015, concerned to forensic medicine, are being suggested which are as follows:

1. There should be no retrograde step in the teaching of forensic medicine in India. In the whole world various subspecialties of forensic medicine are being developed e.g. forensic odontology, forensic nursing whereas thoughts and policies are being generated to reduce or eliminate the teaching of forensic medicine at the undergraduate level.
2. Sub-specialities of forensic medicine should be developed. New machinery and equipment should be provided in the medical colleges and district level hospitals to improve the medicolegal services.
3. This subject needs to be at par with other clinical subjects as many doctors will land themselves in trouble in the courts by not knowing the laws of the land applicable to them. Ignorance of law is never considered an excuse. It is better to teach this subject along with clinical subjects.
4. Students need to know the various aspects of forensic medicine to give a better medicolegal service to the society as more than 95% of the medicolegal services in India are being provided by the graduates only throughout the country because of unavailability of experts of forensic medicine. The only beneficiary of the change will be criminals who will have more acquittals due to poor quality of medicolegal services in the country. Defence lawyers will be a happy lot in this process as they will have a roaring business due to the lapse of board of governors of Medical Council of India.
5. The duration of the teaching of forensic medicine is increased along with increasing the marks of forensic medicine like any other subject.
6. More time should be allocated in teaching practical aspects of forensic medicine to the undergraduate students making it compulsory for the doctors to attend the mortuaries and courts during their course curriculum.
7. There should be compulsory duty during internship in forensic medicine department and compulsory visits to the courts to become familiar with the court procedures.
8. Medical faculty in forensic medicine should be increased to give a better teaching platform to the students.
9. Private medical colleges should be allocated post-mortem work so that students in private medical colleges are not discriminated in learning practical aspects of forensic medicine.
10. National academies of forensic medicine and state academies of forensic medicine must be consulted as law and order is a state problem before any changes in the teaching of forensic medicine are considered which is directly going to affect the law and order position in the country.
11. Better employment opportunities should be provided to the doctors particularly in rural areas and better facilities and incentives should be given to doctors working in rural areas.
12. Toxicology should be developed so that many precious lives in poisoning cases can be saved.
13. Forensic Medicine experts should be posted at district headquarters and posts of forensic medicine experts should be created at Civil Hospital level.

It is recommended that MCI should take into consideration these suggestions and suggestions put forward by other esteemed colleagues and associations. It should take into consideration the draft reports of various committees and judgment of various courts suggesting improvement in the facilities and equipment in the mortuaries and in the departments of forensic medicine. These reports and judgments have emphasized giving more importance to forensic medicine at undergraduate level.

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### **References**

1. MCI Proposed undergraduate medical education. <http://www.mciindia.org/tools/announcement/UG-medical-education.pdf>(accessed Jan 22, 2011).
2. Kumar A. Appeal from Dr AdarshKumar ; Gen Sec IAFM to observe 5th Feb. 2011.  
<http://tech.groups.yahoo.com/group/forensiclayout/message/54>(accessed Feb 6, 2011).
3. Sabale P. Protest at Mumbai.  
[http://www.facebook.com/home.php?sk=group\\_133287760068513&id=137434712987151](http://www.facebook.com/home.php?sk=group_133287760068513&id=137434712987151)(accessed Feb 6, 2011).

4. Goel P. Suggestions for vision 2015. <http://in.mg50.mail.yahoo.com/neo/launch?.rand=e83f9o9i0av4t#>(accessed Feb 6, 2011).
5. [http://www.facebook.com/home.php?sk=group\\_133287760068513&notif\\_t=group\\_activity](http://www.facebook.com/home.php?sk=group_133287760068513&notif_t=group_activity)(accessed Feb 6, 2011).
6. <http://www.facebook.com/photo.php?fbid=10150091676796896&set=o.133287760068513>(accessed Feb 6, 2011).