



Factors Contributing to the Occurrence of Medical Crimes in Jalalabad City and Their Prevention Method

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Abstract: Medical crimes are among the crimes committed by medical personnel during the treatment and care of patients. There are different types of these crimes, and specific legal penalties have been determined for each type. The value of this study was that it clarifies the factors that cause medical crimes in Jalalabad city and identifies ways to prevent them, so as to increase the level of justice and trust in the health sector. The main goal of the study was to identify the root causes of medical crimes and find effective ways to prevent them. This study was conducted from February to December 2024 in Jalalabad city using a mixed-method. Data were collected from 177 university professors and 33 defense attorneys via Google Forms and evaluated through thematic analysis. The results of the study indicated that the factors that contributed to medical crimes include negligence of doctors, lack of understanding of regulations, lack of compliance with medical ethics, laxity of laws, and deficiencies in the structures of health institutions.

Prevention methods included strict implementation of laws, cooperation between the government and health institutions, public awareness programs, improvement of health services, and the development of effective policies. In conclusion, it was necessary for the government, the health sector, and society to work together to reduce medical crimes. The study recommends that monitoring systems be strengthened, public awareness be increased, and the implementation of regulations be strictly monitored.

Keywords: Medical Crimes, Medical Ethics, Negligence, Patient Safety, Prevention Methods,

Introduction

Crime is a phenomenon associated with the beginning of human societies, which is defined based on religious, legal and social principles. In Islamic law, crime is an act that is prohibited based on divine text and has a prescribed punishment. One of the various types of crimes is medical crimes, which occur only in the field of medicine, such as medical negligence, revealing patient secrets, opening a clinic based on forged documents, and selling counterfeit medicines. The penal code in Afghanistan has specifically established special articles and punishments for crimes related to public health, of which non-compliance with medical regulations, refusal of treatment, and use of outdated medicines are important cases. The importance of this issue lies in the fact that medical crimes have a direct impact on people's lives and trust, because patients are

dependent on the skills and honesty of doctors and health workers. The presence of medical crimes in Nangarhar, Jalalabad City has led to distrust in the health sector, and this problem has become even more widespread due to legal gaps, administrative corruption, and weak monitoring. The purpose of the study is to identify the roots and factors of medical crimes, provide a scientific analysis of the problems and shortcomings, and identify effective ways to prevent them, so as to ensure justice and increase public confidence in the health sector.

Literature Review

Medical crime is an act committed by medical personnel in the course of treating, monitoring, or providing health care to a patient that is prohibited by law (Hashimi et al., 2024). These crimes may occur due to intentional or unintentional negligence, lack of skills, disregard for medical ethics, or failure to enforce regulations (Hogan, 2016). Many studies show that medical crimes are not only the result of individual errors, but also have their roots in fundamental shortcomings in the health system (Aibek et al., 2024). The analytical aspect is that the occurrence of medical crimes is caused by several interacting factors: poor quality of health services, lack of law enforcement, and low awareness of patients' rights provide the basis for the continuation of these crimes (King & wheeler, 2006). Research analysis shows that inadequate supervision of health institutions and the presence of corruption lead to intentional or unintentional illegal acts (Fathi, 2016). To solve this problem, law enforcement, raising professional standards, and adhering to ethical principles have been identified as important measures.

The liability theory provides a framework for legal and professional responsibility in medical crimes. This theory states that any action that harms a patient and is prohibited by law is considered a liability for medical personnel (Spitsyna et al., 2023). According to this theory, any negligence, carelessness, or non-compliance by a doctor should have legal and professional consequences, so that the rights of patients are protected (Bovbjerg & Tancredi, 2005). In Jalalabad City, most cases of medical crimes are caused by the negligence of doctors or inadequate supervision of health institutions, which highlights the importance of legal enforcement in light of the liability theory (Rezaiee, 2023). At the local level, the liability theory in the medical system ensures that the rights of patients are protected and that there is a prompt response to illegal actions (Hashimi et al., 2024). The implementation of this theory necessitates law enforcement, complaint follow-up, and training of health professionals (Spitsyna et al., 2023). The ethical principles theory explains the importance of an ethical framework in medical practice (Rezaiee, 2023). This theory presents four basic principles: beneficence, non-maleficence, justice, and respect for patients' rights (Hashimi et al., 2024; Bovbjerg & Tancredi, 2005). According to this theory, medical personnel should always adhere to these principles in their professional activities (Adejumo & Adejumo, 2020). Ethical weakness, negligence, and lack of transparency lead to the occurrence of medical crimes. An analysis of the factors that led to the occurrence of medical crimes in Jalalabad City shows that the lack of ethical principles has led to the violation of patients' rights and an increase in crimes (Rezaiee, 2023; Hashimi et al., 2024). The implementation of this theory requires the professional training of doctors, the implementation of ethical guidelines, and the strengthening of transparency systems (Palmer, 2018).

According to previous studies, medical crimes are caused by incidents at different levels of the health sector and their causes are multifaceted (Rano, 2021). International studies show that negligence of doctors, lack of professional skills, non-compliance with laws and regulations, shortcomings of health institutions, and failure to observe ethical principles are considered the main factors of medical crimes (Spitsyna, 2023). In Afghanistan, the Penal Code also specifies

punishments related to medical crimes in articles 886 to 892, which include revealing patient secrets, refusing treatment, and using outdated medicines (Sekandary & Wafa, 2024). Studies show that the types of medical crimes are also diverse (Saeed, 2015). Injuring the patient's body by doctors, revealing patient secrets, opening a clinic based on fake documents, selling counterfeit medicines, and introducing oneself as a doctor are the most recorded (Serati, 2017). These crimes occur only in the field of medicine and are assessed under specific regulations and principles (Spitsyna, 2023). Various legal measures have been proposed to prevent medical crimes. Based on the Penal Code, compliance with professional responsibilities, protecting patients' rights, and strict enforcement of laws have been considered essential to reduce these crimes (Sekandary & Wafa, 2024). In addition, coordination between health institutions, launching public awareness programs, improving the quality of health services, and monitoring systems have been considered important elements of preventing these crimes (Saeed, 2015). From a legal perspective, doctors are subject to professional responsibilities. If a doctor is negligent in treating a patient and causes harm to the patient, he or she is held liable under the law (Rano, 2021). There is also a connection between Islamic Sharia and the national laws of Afghanistan, because any act that harms the patient and is prohibited by law is considered a crime and is punishable (Aibek et al., 2024). Theoretically, the Theory of Liability and the Theory of Ethical Principles are used to analyze medical crimes, which clarify the relationship between negligence and violation of patient rights (Palmer, 2018). Accordingly, with the help of legal, ethical, and administrative reforms, the incidence of medical crimes can be reduced (Bovbjerg & Tancredi, 2005). Overall, previous studies have shown that medical crimes have complex factors, and these crimes can be prevented through legal reforms, improving the quality of health services, and implementing public awareness programs. However, a complete and regional analysis has not been conducted in Jalalabad City in particular, which the current study fills in the gap.

Although the factors, types, and legal and administrative measures for prevention of medical crimes have been analyzed in previous studies, some aspects have not yet been fully investigated (Spitsyna, 2023). First, most studies have focused on the global and general regions, and specific provinces of Afghanistan, especially Jalalabad City, have not been studied in detail (Aibek et al., 2024). Regional analysis is important in considering not only the legal framework, but also the cultural and social contexts, as the occurrence of medical crimes varies depending on local conditions, the structure of health institutions, and public beliefs (Rezaiee, 2023; Akhtar & Khedam, 2024). Second, data from previous studies have mostly been collected based on secondary sources, statistical reports, or limited questionnaires, which do not fully include the views of expert groups (Hashimi et al., 2024). In particular, university professors and lawyers can provide key perspectives in the legal and ethical analysis of medical crimes, but the participation of these groups has been limited in previous studies (Spitsyna et al., 2023). Due to this deficiency, a precise analysis based on practical, regional, and expert views has not been conducted (Bovbjerg & Tancredi, 2005). Third, many previous studies have methodological limitations (Sekandary & Wafa, 2024). Most studies have used only quantitative or only qualitative methods, while the use of mixed methods can clarify the relationship between quantitative and theoretical analysis (Spitsyna et al., 2023). Legal analysis has also been limited, especially the implementation of the Afghan Penal Code and Islamic Sharia law, and the professional responsibilities of doctors at the local level have not been examined in detail (Rezaiee, 2023; Hashimi et al., 2024). Fourth, many previous studies have limited information on public awareness, coordination between health institutions, and the impact on the quality of health services (Spitsyna et al., 2023). These gaps create a need for new research, as local and comprehensive information is essential for practical guidance and policy-making (Sekandary &

Wafa, 2024). Consequently, new research for Jalalabad City needs to comprehensively include the views of expert groups, such as university professors and lawyers, analyze local data, the relationship between the legal and ethical framework, and effective ways to prevent medical crimes. This new research can fill gaps in previous studies, provide a scientific basis for legal, administrative, and social reforms, and provide important information for health policymaking.

Materials and Methods

This study was conducted in Jalalabad city from February to December 2024. A mixed method (quantitative and qualitative) was used for the study to investigate the factors that cause medical crimes and ways to prevent them. The sample of the study consisted of 177 university professors and 33 lawyers, who were selected through purposive sampling due to their professional experience. The data was collected through Google Forms, and secondary sources such as books, published articles, and internet resources were also used. The collected data was transferred to Excel and evaluated using thematic analysis. The consent of the participants, confidentiality, and compliance with ethical principles were strictly observed during the research process. There was a problem of incomplete responses from some participants, for which the exact number is mentioned in addition to the percentage. The results of the study can be used in health policy-making, improving professional standards, and effective ways to prevent medical crimes.

Result

A questionnaire was prepared to conduct a study on the occurrence and prevention of medical crimes in Jalalabad, Nangarhar, which included ten questions from the participants. The analysis and figures of these questions are as follows:

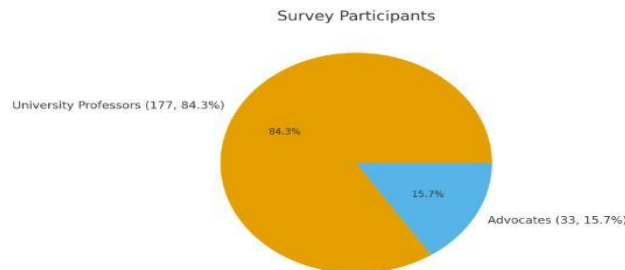


Figure 1. The Survey Participants

The survey participants included 177 university professors and 33 lawyers. Statistically, university professors made up 84.3 percent of the total participants, while lawyers made up only 15.7 percent. This difference indicates that the majority of participants come from academic and educational backgrounds.

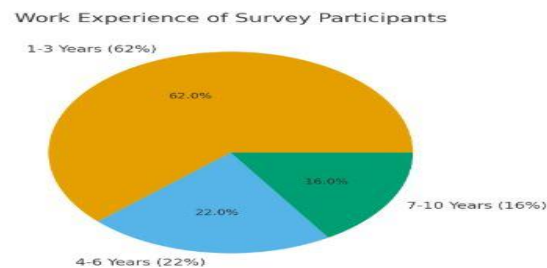


Figure 2. Work Experience of Survey Participants

Of the 210 survey participants, the majority, 130 (62%) have 1 to 3 years of work experience. About 46 (22%) have 4 to 6 years of work experience. Only 34 (16%) have 7 to 10 years of

experience. This indicates that most survey participants are new or intermediate-level professionals, while those with long-term experience are few.

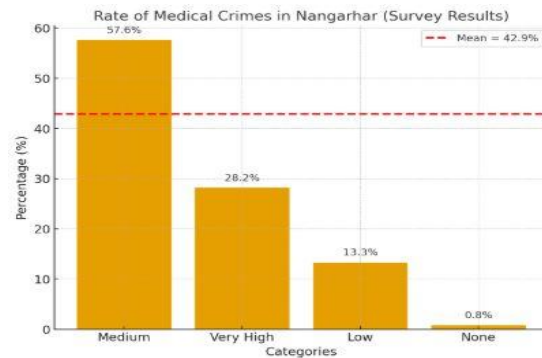


Figure 3. Rate of Medical Crimes in Jalalabad

The results of the first question of the survey show that the level of medical crime in Jalalabad is mostly considered moderate (57.6%). About 28.2% of the participants considered this level to be very high, while only 13.3% indicated a low level and 0.8% indicated none. Based on the results, the general perception of medical crime in the society is moderate, but a significant portion of the people considered this problem to be high and serious, which raises concerns about the trustworthiness and transparency of the healthcare sector.

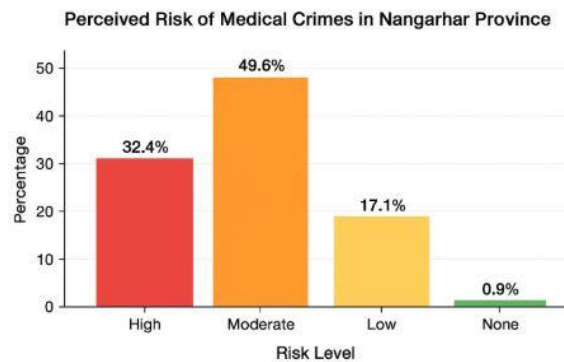


Figure 4. Perceived Risk of Medical Crimes in Jalalabad

The results of the second question of the survey show that the majority of participants (49.6%) have a moderate perception of the risk of medical crimes. The percentage of participants with a high perception of risk is 32.4%, which indicates that a significant number of people are concerned about the improper provision of services to patients or patients. The number of participants with a low perception of risk is 17.1%, and only 0.9% of participants do not perceive any risk of medical crimes at all. Overall, this data shows that approximately 82% of participants perceive the risk of medical crimes to be either moderate or high. This indicates that public trust in patient safety, compliance with medical ethics, and the quality of health services is still limited.

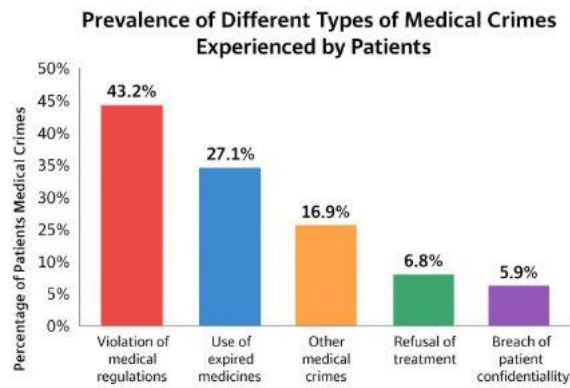


Figure 5. Prevalence of Different Types of Medical Crimes Experienced by Patients

The participants' responses indicate that doctors most often committed misconduct in complying with medical regulations (43.2%), which is considered a serious threat to patients' rights and safe treatment. The second biggest problem is the use of historical or outdated medicines (27.1%), which directly harms the patient's health. Other crimes were mentioned by 16.9%, while refusal of treatment and disclosure of patient confidentiality had fewer incidents, at 6.8% and 5.9%, respectively. This data indicates problems in the quality of health services and compliance with medical ethics.

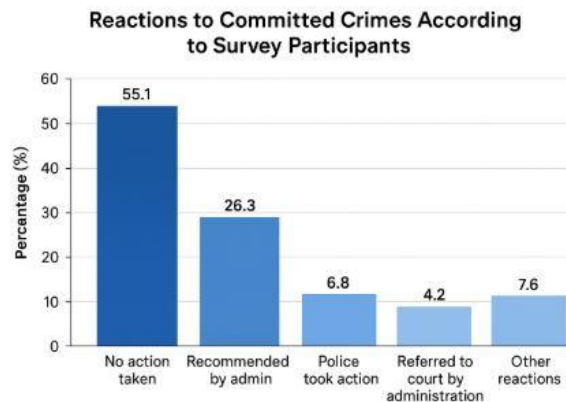


Figure 6. Reactions to Committed Crimes According to Survey Participants

The fourth question asked the survey participants, if a person had committed the above crimes, what kind of reaction was shown to them? Among the participants, (55.1%) there was no action taken against them, (26.3%) the perpetrator was recommended by the administration, (6.8%) the police took action, (4.2%) the administration referred them to the court, and (7.6%) the participants specified other reactions in addition to these reactions.

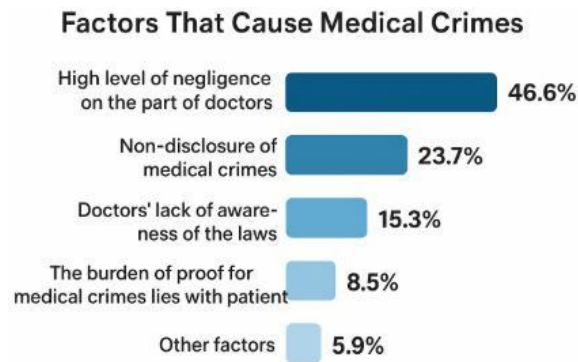


Figure 7. Factor That Cause Medical Crimes

The fifth question from the survey participants was asked as follows, what do you think are the factors that cause medical crimes? Among the participants, (46.6%) indicated a high level of negligence on the part of doctors, (23.7%) non-disclosure of medical crimes, (15.3%) doctors' lack of awareness of the laws, (8.5%) the burden of proof for medical crimes lies with the patient, and (5.9%) mentioned other factors in addition to these factors. Such as disregard for professional standards, shortcomings in the structures of the health system.

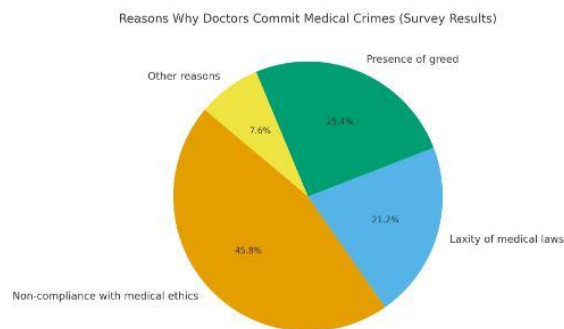


Figure 8. Reasons Why Doctors Commit Medical Crimes

The sixth question asked the survey participants, “Why do you think doctors commit medical crimes?” Among the participants, (45.8%) cited a high level of non-compliance with medical ethics, (21.2%) the laxity of medical laws, (25.4%) the presence of greed, and (7.6%) other crimes in addition to these crimes.

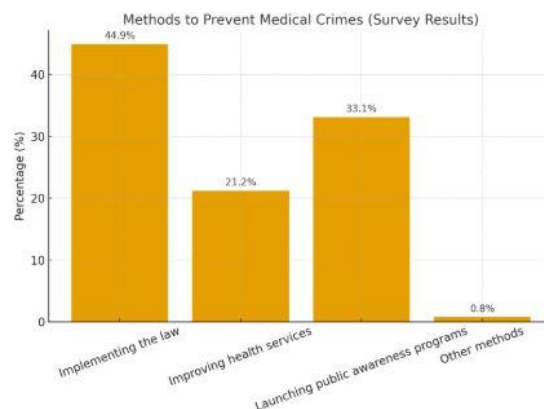


Figure 9. Methods to Prevent Medical Crimes

The seventh question asked the survey participants, "In your opinion, which of the following methods should be used to prevent medical crimes?" Among the participants, (44.9%) percent responded to this question by implementing the law, (21.2%) percent by improving health services, (33.1%) percent by launching public awareness programs, and (0.8%) percent by considering other methods, such as better supervision of medical affairs, increasing religious knowledge of medical personnel, etc., in order to prevent the occurrence of medical crimes.

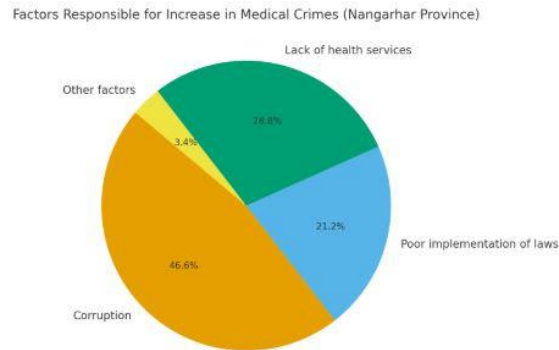


Figure 10. Factors Responsible for Increase in Medical Crimes

The eighth question asked the survey participants, "In your opinion, what factors are responsible for the increase in medical crimes in Jalalabad?" Among the participants, (46.6%) percent cited corruption, (21.2%) cited poor implementation of laws, (28.8%) cited lack of health services, and (3.4%) cited other factors as contributing to the increase in medical crimes in Jalalabad.

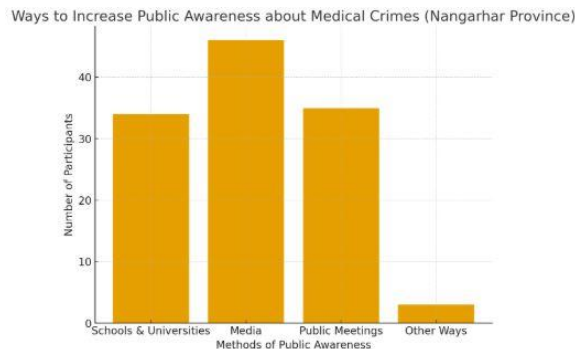
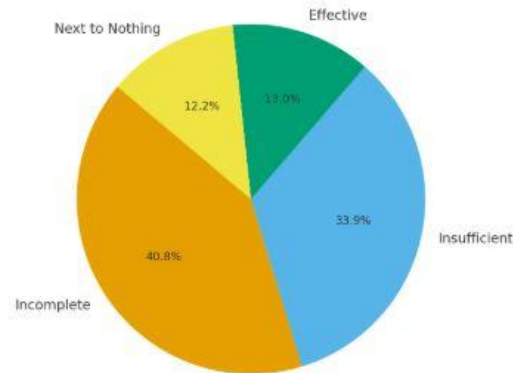


Figure 11. Ways to Increase Public Awareness about Medical Crimes

The ninth question from the survey participants was as follows, in your opinion, how can public awareness about medical crimes be increased? Among the participants, (118) people responded to this question, of which (34) people said public awareness through schools and universities, (46) people said public awareness through the media, (35) people said public awareness through public meetings, and (3) participants considered other ways to increase public awareness about medical crimes in Jalalabad.

Assessment of Government's Actions Against Medical Crimes

**Figure 12.** Assessment of Government's Actions against Medical Crimes

The tenth question from the survey participants was structured as follows: How do you assess the government's actions against medical crimes? Among the participants, (40.8%) largely considered the government's actions to be incomplete, (33.9%) considered the government's actions to be insufficient, (13.1%) considered the government's actions to be effective, and (12.2%) considered the government's actions to be next to nothing.

Discussion

A comparison of previous studies, such as those from Tajikistan (Casual Complex of Medical Crimes, 2024) and Pakistan (Crimes in Medical: A Criminological Perspective, 2021), shows that the main factors of medical crimes are negligence of medical personnel, lack of skills, corruption, lack of enforcement of laws, and weak supervision. The Jalalabad city study also confirms the same factors, but reveals some regional characteristics. In this region, the burden of proof for medical crimes lies mostly with the patient, and insufficient supervision of health institutions has led to the occurrence of crimes, which is not so evident in Tajikistan and Pakistan. Critical analysis shows that non-compliance with professional standards, poor quality of health services, and lack of legal processes provide the basis for the continuation of crimes. According to the Theory of Liability, any action that harms a patient and is prohibited by law is considered the doctor's responsibility and should have legal and professional consequences. Similarly, the Ethical Principles Theory states that medical personnel should respect the rights of patients, the good, non-maleficence, and justice, as moral weakness and lack of transparency lead to the occurrence of medical crimes. Critically, previous studies have poorly analyzed local conditions, cultural factors, and the opinions of expert groups such as university professors and lawyers, which the Jalalabad city study encourages in its analysis. The conclusion is that laws alone are not enough to prevent medical crimes; professional training, public awareness, trust-building, and strengthening accountability systems are necessary. A comprehensive mechanism of legal, ethical, administrative, and social measures, combining responsibility and ethical frameworks, is necessary to prevent medical crimes.

Conclusion

An analysis of medical crime incidents in Jalalabad City shows that this problem is not only the result of individual mistakes by doctors, but also a clear reflection of shortcomings in the basic components of the health system. Negligence of doctors, non-compliance with medical ethics, non-implementation of laws, corruption, and weak supervision of health institutions are the main factors that pave the way for the continuation of medical crime. In addition, the low quality of health services and the low awareness of the population about their health rights have further

exacerbated the problem. As a future problem, the expansion of health services, the incorrect implementation of legal and ethical frameworks, and limited cooperation of specialist groups are leading to an increase in medical crime. To solve this problem, it is recommended to make fundamental changes in the structure of the health system.

With the implementation of all these measures, not only the level of medical crime will decrease, but the quality of health services will also improve. Additionally, collaboration between university professors, advocates, and health professionals increases the effectiveness of solutions in training, research, and policymaking, which in turn has a profound positive impact on the health status of the community. It is recommended that future research include local cultural and social factors in the analysis to create a comprehensive and practical framework for preventing medical crimes.

Reference

Adejumo, O. A., & Adejumo, O. A. (2020). Legal perspectives on liability for medical negligence and malpractices in Nigeria. *The Pan African medical journal*, 35, 44. <https://doi.org/10.11604/pamj.2020.35.44.16651>

Aibek Seidanov, Roman Temirgazin & Erzhan Utebaev (2024). Crimes in Medical: A Criminological Perspective on Causes, Conditions, and Prevention, *Pakistan Journal of Criminology* Vol. 16, No. 03, July—(595-608). <https://doi.org/10.62271/pjc.16.3.595.608>

Akhtar, Imranullah & Khedam, Abdul. (2024). Studying the Factors Contributing to the Sexual Harassment of Women in Jalalabad City, Afghanistan: A Social Perspective. *Journal of Higher Education and Development Studies (JHEDS)*. 4. 207-219. 10.59219/jheds.04.01.61.

Bovbjerg, R. R., & Tancredi, L. R. (2005). Liability Reform Should Make Patients Safer: “Avoidable Classes of Events” are a Key Improvement. *The Journal of Law, Medicine & Ethics*, 33(3), 478-500. <https://doi.org/10.1111/j.1748-720X.2005.tb00513.x>

Fathi, Mohammad Javad. (2016). Examination of crime and similar concepts in the medical law, *Journal of Medical Ethics and History of Medicine*, published online 1 May 2016. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4958928/>

Hashimi, Sayed & Abdulillah, Kamran & Shukria, Niazi & Rahemi, Mohammad. (2024). A Descriptive Study of Depressive Disorders among Medical Students in Jalalabad City. *Nangarhar University International Journal of Biosciences*. 03. 10.70436/nuijb.v3i01.155.

Hogan, Sara. (2016). Medical crime: occupational crime at its worst, sociological imagination. *westerns undergraduate sociology student journal*, vol. 5. Abstract. Available at: <https://ir.lib.uwo.ca/si/vol5/iss1/5>

King, T. ,E. and wheeler, M., B. (2006). *Medical Management of Vulnerable and Underserved Patients: principle, Practice and Populations*. McGraw-Hill Professional. Available at: <https://accessmedicine.mhmedical.com/book.aspx?bookID=1768>

Palmer, D. (2018). Liability theory. In *The SAGE encyclopedia of business ethics and society* (Vol. 7, pp. 2080-2081). SAGE Publications, Inc., <https://doi.org/10.4135/9781483381503.n693>

Rano A. Abdullayeva. (2021). Causal Complex of Medical Crimes in the Republic of Tajikistan, *Russian-Tajik (Slavonic) University, Dushanbe, Tajikistan*. <https://www.scitepress.org/Papers/2021/106619/106619.pdf>

Rezaiee, Z. H. . (2023). Study the Types of Medical Crimes and Medical Infractions in the Penal Code of Afghanistan. *Nangarhar University International Journal of Biosciences*, 2(02), 71–79. <https://doi.org/10.70436/nuijb.v2i02.45>

Saeed K. M. I. (2015). Prevalence of hypertension and associated factors in Jalalabad City, Nangarhar Province, Afghanistan. *Central Asian journal of global health*, 4(1), 134. <https://doi.org/10.5195/cajgh.2015.134>

Sekandary, Muhammad & Waf, Noorani. (2024). A Critical Analysis of Medical Crimes: From the Perspective of the Penal Code of Afghanistan. *American Journal of Law and Political Science*. 3. 13-19. 10.58425/ajlps.v3i2.273.

Serati Nouri, Nasim. (2017). The criminalization principles of medical crimes. A thesis submitted to the Graduate studies office in partial fulfillment of the requirements for the degree of Master of science in criminal law and criminology. University of Tehran, page.45.

Spitsyna, Hanna & Davydenko, Ihor & Turska, Valeria. (2023). THEORETICAL ASPECTS OF MEDICAL WORKERS' CRIMINAL LIABILITY. *Archives of Criminology and Forensic Sciences*. 7. 82-87. 10.32353/acfs.7.2023.06.