

ReJudge Study: *Reducing rates of non-medically indicated CS through an Open Access multi-media evidence and behavioural change programme for lawyers and judges*

Behavioural factors associated with fear of litigation as a driver for the increased use of caesarean sections: A scoping review

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Background: Caesarean sections (CS) rates are increasing globally. Fear of litigation (FoL) or defensive medicine practices by health care providers are commonly identified as factors contributing to the increase. However, little is known about the behavioural drivers influencing this fear. We aimed to explore the cognitive, social, and environmental factors that drive FoL among healthcare providers and influence their decision-making regarding mode of birth.

Methods: We conducted a scoping review searching MEDLINE, Scopus, and WHO Global Index (January 1, 2001-March 9th, 2022). We used the principles for the adoption of a behavioural science perspective in public health developed by WHO as a framework to analyse findings. We used content analysis to identify themes and employed a narrative approach to summarize the findings.

Results: We identified 2968 citations, and 56 were included. Most articles did not use a measure of FoL influence on provider's behaviour beyond self-report by providers. None of the studies used a clear theoretical framework to discuss the behavioural drivers. We identified 12 drivers under the three domains of the WHO framework: 1) Cognitive drivers: availability bias, ambiguity aversion, relative risk bias and beliefs around safety, commission bias, and loss aversion bias; 2) social and cultural drivers: patient pressure, social norms, and blame culture; and 3) environmental drivers: legal, insurance, medical and professional, and media. Cognitive biases were the most discussed drivers of FoL in relation to CS, followed by legal environmental factors, and pressure from patients.

Conclusions: Even though there is no standardized and internationally accepted definition and measurement for FoL, fear as a driver for rising CS rates results from complex interactions between cognitive, social, and environmental drivers. FoL drivers are context-specific but overall, they include cognitive bias that favour CS choice, patient pressures, growing intolerance to complications and uncertainty, legal and medical practice environments, and experience with litigation. FoL is generated by the actual risk of litigation and by how providers perceive this risk and the potential consequences of the process itself independently of the legal outcome. Behavioural interventions addressing these drivers are crucial to address FoL as part of strategies to reduce CS rates.

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