

# INTERNATIONAL JOURNAL FOR LEGAL RESEARCH AND ANALYSIS



Open Access, Refereed Journal Multi Disciplinary  
Peer Reviewed

[www.ijlra.com](http://www.ijlra.com)

## **DISCLAIMER**

No part of this publication may be reproduced or copied in any form by any means without prior written permission of Managing Editor of IJLRA. The views expressed in this publication are purely personal opinions of the authors and do not reflect the views of the Editorial Team of IJLRA.

Though every effort has been made to ensure that the information in Volume II Issue 7 is accurate and appropriately cited/referenced, neither the Editorial Board nor IJLRA shall be held liable or responsible in any manner whatsoever for any consequences for any action taken by anyone on the basis of information in the Journal.

Copyright © International Journal for Legal Research & Analysis

## **EDITORIAL TEAM**

### **EDITORS**

#### **Dr. Samrat Datta**

*Dr. Samrat Datta Seedling School of Law and Governance, Jaipur National University, Jaipur. Dr. Samrat Datta is currently associated with Seedling School of Law and Governance, Jaipur National University, Jaipur. Dr. Datta has completed his graduation i.e., B.A.LL.B. from Law College Dehradun, Hemvati Nandan Bahuguna Garhwal University, Srinagar, Uttarakhand. He is an alumnus of KIIT University, Bhubaneswar where he pursued his post-graduation (LL.M.) in Criminal Law and subsequently completed his Ph.D. in Police Law and Information Technology from the Pacific Academy of Higher Education and Research University, Udaipur in 2020. His area of interest and research is Criminal and Police Law. Dr. Datta has a teaching experience of 7 years in various law schools across North India and has held administrative positions like Academic Coordinator, Centre Superintendent for Examinations, Deputy Controller of Examinations, Member of the Proctorial Board*



#### **Dr. Namita Jain**

*Head & Associate Professor*

*School of Law, JECRC University, Jaipur Ph.D. (Commercial Law) LL.M., UGC -NET Post Graduation Diploma in Taxation law and Practice, Bachelor of Commerce.*



*Teaching Experience: 12 years, AWARDS AND RECOGNITION of Dr. Namita Jain are - ICF Global Excellence Award 2020 in the category of educationalist by I Can Foundation, India. India Women Empowerment Award in the category of "Emerging Excellence in Academics by Prime Time & Utkrisht Bharat Foundation, New Delhi. (2020). Conferred in FL Book of Top 21 Record Holders in the category of education by Fashion Lifestyle Magazine, New Delhi. (2020). Certificate of Appreciation for organizing and managing the Professional Development Training Program on IPR in Collaboration with Trade Innovations Services, Jaipur on March 14th, 2019*

## Mrs.S.Kalpana

Assistant professor of Law

*Mrs.S.Kalpana, presently Assistant professor of Law, VelTech Rangarajan Dr.Sagunthala R & D Institute of Science and Technology, Avadi. Formerly Assistant professor of Law, Vels University in the year 2019 to 2020, Worked as Guest Faculty, Chennai Dr.Ambedkar Law College, Pudupakkam. Published one book. Published 8 Articles in various reputed Law Journals. Conducted 1 Moot court competition and participated in nearly 80 National and International seminars and webinars conducted on various subjects of Law. Did ML in Criminal Law and Criminal Justice Administration. 10 paper presentations in various National and International seminars. Attended more than 10 FDP programs. Ph.D. in Law pursuing.*



## Avinash Kumar



*Avinash Kumar has completed his Ph.D. in International Investment Law from the Dept. of Law & Governance, Central University of South Bihar. His research work is on "International Investment Agreement and State's right to regulate Foreign Investment." He qualified UGC-NET and has been selected for the prestigious ICSSR Doctoral Fellowship. He is an alumnus of the Faculty of Law, University of Delhi. Formerly he has been elected as Students Union President of Law Centre-1, University of Delhi. Moreover, he completed his LL.M. from the University of Delhi (2014-16), dissertation on "Cross-border Merger & Acquisition"; LL.B. from the University of Delhi (2011-14), and B.A. (Hons.) from Maharaja Agrasen College, University of Delhi. He has also obtained P.G. Diploma in IPR from the Indian Society of International Law, New Delhi. He has qualified UGC – NET examination and has been awarded ICSSR – Doctoral Fellowship. He has published six-plus articles and presented 9 plus papers in national and international seminars/conferences. He participated in several workshops on research methodology and teaching and learning.*



## **ABOUT US**

INTERNATIONAL JOURNAL FOR LEGAL RESEARCH & ANALYSIS  
ISSN

2582-6433 is an Online Journal is Monthly, Peer Review, Academic Journal, Published online, that seeks to provide an interactive platform for the publication of Short Articles, Long Articles, Book Review, Case Comments, Research Papers, Essay in the field of Law & Multidisciplinary issue. Our aim is to upgrade the level of interaction and discourse about contemporary issues of law. We are eager to become a highly cited academic publication, through quality contributions from students, academics, professionals from the industry, the bar and the bench. INTERNATIONAL JOURNAL FOR LEGAL RESEARCH & ANALYSIS ISSN 2582-6433 welcomes contributions from all legal branches, as long as the work is original, unpublished and is in consonance with the submission guidelines.

# **THE GOOD SAMARITAN LAW IN CRISIS: LEGAL PROTECTIONS AND SOCIETAL IMPLICATIONS IN INDIA AND BEYOND**

AUTHORED BY - N S NIDHI

## **ABSTRACT**

*According to human instinct, people delay making quick decisions in urgent situations. Through Good Samaritan laws, the public can intervene in emergency crises through legal and procedural protections when offering voluntary aid to accident victims. In India, the Save Life Foundation v. Union of India, a landmark judicial decision made by the Supreme Court in 2016 gave guidelines which was adopted through the Motor Vehicles Amendment Act, of 2019. These laws defend good samaritans from legal action while stopping harassment toward them. The potential impact of such initiatives decreases when combined with limited awareness of the laws and cultural traditions that resist them, along with inconsistent regulatory enforcement. The worldwide response to Good Samaritan legislation consists of two main models based on either French-German mandatory rescue codes or U.S. voluntary immunity policies. This research article examines how Good Samaritan laws in India have progressed alongside their encountered impediments by studying international models to develop operational measures that enhance their efficiency.*

**Keywords:** Good Samaritan, India, Protection, Emergencies, Accidents.

## **I. INTRODUCTION**

### **The Role of Good Samaritan Laws**

Public emergencies tend to create ethical confusion, which affects how bystanders react. Most people experience an immediate desire to help yet common doubts about legal risks and harassment or hospital bills prevent them from taking action. The outdated practice poses genuine risks for bystanders because authorities commonly subject them to exhaustive questioning followed by prolonged court proceedings and potential hospital financial exploitation. Because there were no formal protections for helpers in earlier times most people chose to do nothing instead of intervening.<sup>1</sup>

---

<sup>1</sup> SaveLIFE Foundation, Good Samaritan Laws: Bridging the Gap Between Intention and Action (2018).

Good Samaritan laws remove barriers which free people to help others when they need assistance. The protective legislation defends compassionate people from various unfavourable legal consequences, ensuring their security. These laws acknowledge how people in positions where every second matters play essential roles in saving lives during road crashes, medical emergencies, and natural hazards.<sup>2</sup> These laws serve double functions through rescue operations and create spaces where residents feel responsible for helping others and building interdependency.<sup>3</sup>

### **India's Emergency Landscape**

Road accidents in India bring about one of the world's greatest death tolls producing more than 1.5 lakh fatalities annually. Medical aid provided in the right "Golden Hour" period after injuries occur might reduce the number of fatalities by half according to expert estimates. Data shows that intervention reluctance runs at alarming rates among people. Research shows that 74% of Indians avoid helping accident victims because they fear possible harassment and becoming tangled in legal proceedings.<sup>4</sup>

Good Samaritan laws are significant at this point. These laws have great potential to save thousands of lives every year because they level both cultural and systemic obstacles toward intervention. The use of Good Samaritan laws depends both on the legal standing they provide and the public understanding and systematic adherence, along with the public support they receive.

## **II. THE EVOLUTION OF THE GOOD SAMARITAN LAWS IN INDIA**

### **The 2016 Supreme Court Guidelines**

The Supreme Court's decision in the *Save Life Foundation v. Union of India* led a path towards formal Good Samaritan laws in India in the year 2016.<sup>5</sup> This case was a public interest litigation that was filed to address the common hesitation among the bystanders to be involved in accidents. Therefore, the apex court in India issued comprehensive guidelines to address the issues and promote the good samaritan laws in India to protect them from procedural harassment. These guidelines included immunity from both civil and criminal liability to protect the good samaritans while they were assisting the accident victims. Suppose there is a

<sup>2</sup> SaveLIFE Foundation, Road Accidents in India: Trends and Solutions (2019).

<sup>3</sup> WHO, Strengthening Pre-Hospital Care: An Analysis of Global Emergency Responses (2021).

<sup>4</sup> National Crime Records Bureau, Statistical Report on Public Involvement in Emergencies (2019).

<sup>5</sup> Supreme Court of India, *Save Life Foundation v. Union of India*, W.P. (Civil) No. 235 of 2012, (2016).

bystander who aided an injured victim and took the victim to the hospital, the bystander cannot be held liable if the victim's condition worsens or even if the victim ends up dead. The guidelines also highlighted the anonymity of the bystanders. The bystanders who were not willing to disclose their information could report accidents anonymously and would not further be mandated to attend any proceedings.<sup>6</sup> The guidelines established particular requirements that medical facilities and law enforcement agencies need to follow. Hospitals received instructions not to turn away treated victims whom Good Samaritans brought for medical care and to avoid requesting financial payments from these Good Samaritans.<sup>7</sup> Police officers received instructions to conduct only one round of questions with Good Samaritans before they had to refrain from keeping anyone detained more than necessary. The provisions aimed at neutralising the restraints which prevented people from coming to rescue during adverse situations.<sup>8</sup> Through their directives, the Supreme Court established fundamental legal protections for citizens who wanted to help others while ensuring none of them endured financial or legal consequences.

### **The Motor Vehicles Act, 2019**

After the Supreme Court outlined its guidelines, the Motor Vehicles (Amendment) Act 2019<sup>9</sup> became the country's legal foundation for protecting Good Samaritans. The enactment of the Act gave national legal authority to the previous guideline principles from 2016 by making them mandatory across all territories. The legislation incorporated three essential protections, which provided liability, immunity as well as specific legal questioning procedures and safeguards against hospital harassment. The Act transcended guidelines through legislation to resolve the difficulties when decisions are interpreted differently by individuals.

The Act established its legislative foundation only for road accidents while omitting critical preparations for natural disasters along with medical crises and public violence incidents. The limited coverage within the Act demonstrated India's requirement for broader legal solutions to handle multiple emergency situations which exist across the nation.

---

<sup>6</sup> UNESCAP, The Role of Civil Society in Promoting Emergency Medical Aid (2020).

<sup>7</sup> Red Cross India, The Role of Bystanders in Medical Emergencies in Rural India (2022).

<sup>8</sup> National Law University Delhi, Understanding Barriers to Emergency Interventions in Indian Urban Areas (2021).

<sup>9</sup> Motor Vehicles (Amendment) Act, 2019, No. 32, Acts of Parliament, 2019 (India).



### **Karnataka's Proactive Approach**

The **Karnataka Good Samaritan and Medical Professional (Protection and Regulation during Emergency Situations) Act, 2016**,<sup>10</sup> gave the state of Karnataka the distinction of being the first among Indian states to create legislation in this sphere. Beyond Supreme Court guidelines, the state implemented innovative measures that encouraged bystander intervention.

According to Karnataka's legislation, Good Samaritans earned payment for their expenses when helping victims after accidents. Helpers who spend their money on victim hospital transfers and urgent medical support can obtain reimbursement from the government. Through this legislation, Karnataka created formal appreciation measures for Good Samaritans who would receive both awards and certificates because such recognition helps encourage similar intervention from others.

By implementing tailored policies Karnataka State showed how government entities at various levels enhance national civic programs through localized adaptive measures and community-driven accountability. Karnataka's success with its Good Samaritan legislation failed to inspire other states in India which leaves significant geographical areas dependent on the national law framework.

## **III. GLOBAL COMPARISONS: GOOD SAMARITAN LAWS AROUND THE WORLD**

### **France and Germany: A Duty to Rescue**

The legal position concerning Good Samaritan aid differs significantly between India's present voluntary system and the mandatory rescue specifications implemented in Germany and France. National laws maintain requirements for assisting individuals in danger since communities believe everyone shares responsibility for each other's protection.

France's Penal Code through Article 223-6 makes it illegal for citizens not to help persons in danger when rescue would not endanger them.<sup>11</sup> Anyone who sees an accident without helping victims and calling emergency services may receive legal penalties. Through German law, Section 323c of the Strafgesetzbuch requires individuals to offer assistance during

<sup>10</sup> Karnataka State Legislature, Karnataka Good Samaritan and Medical Professional (Protection and Regulation During Emergency Situations) Act, 2016.

<sup>11</sup> Code Pénal [C. Pén.] [Penal Code] art. 223-6 (Fr.).

emergencies. Penalties in the law serve to pressure bystanders, so they must step in both morally and through legal obligation.<sup>12</sup>

Essentially, every society adopts these legal rescue requirements because they believe responsibility should be among us as we work together for community welfare. These intervention-promoting frameworks serve their purpose of getting people to help, yet they spark moral and legal concerns about what's acceptable in state-enforced activation requirements.<sup>13</sup>

### **The United States: Encouraging Voluntary Intervention**

The United States stands different from European duty-to-rescue guidelines by advocating voluntary interventions only. Each U.S. state maintains its own rules about Good Samaritan laws which extend legal protection from liability for persons who help others during emergencies.<sup>14</sup> A bystander providing CPR during a cardiac arrest faces no legal action if their actions unintentionally lead to unintended medical consequences.

The United States embraces this methodology because its American character appreciates personal autonomy more than functionalities. The U.S. Good Samaritan laws function to waive lawsuit concerns, so people feel invited to step forward, although assistance remains voluntary.<sup>15</sup>

### **India's Balanced Approach**

The Good Samaritan legal framework in India exists somewhere between European Laws and those of the U.S. Through their protective provisions; these laws allow people to act altruistically without imposing mandatory rescue responsibilities.<sup>16</sup> These laws achieve effectiveness through a balance which lets societal attitudes and cultural norms influence their ultimate impact. In India, there exists such deep doubt about governmental institutions combined with widespread apprehensions about legal consequences that separate laws designed to protect volunteers may prove insufficient to create helpful behaviour.<sup>17</sup>

---

<sup>12</sup> Strafgesetzbuch [StGB] [Penal Code], § 323c (Ger.).

<sup>13</sup> WHO, Ensuring Legal Protections for Bystanders During Medical Crises 11 (2020).

<sup>14</sup> Richard Elliott, Good Samaritan Laws in the United States: Legal and Ethical Perspectives, 27 Am. J. Emerg. Med. 123 (2019).

<sup>15</sup> World Bank, Improving Road Safety in Low and Middle-Income Countries: A Framework for Action 35 (2021).

<sup>16</sup> Motor Vehicles (Amendment) Act, 2019, No. 32, Acts of Parliament, 2019 (India).

<sup>17</sup> SaveLIFE Foundation, Good Samaritan Laws: Bridging the Gap Between Intention and Action 21 (2018).

## **IV.CASE STUDIES: GOOD SAMARITAN INTERVENTIONS IN PRACTICE**

### **Karnataka's Success Stories**

Several successful cases resulting from Karnataka's state-level law indicate how Good Samaritan protections deliver revolutionary changes to public safety. A driver who rendered aid to a harmed pedestrian drove them to get medical care at the hospital. The motorist faced no police detention and avoided medical expenses because Karnataka had laid out state-level protections which revealed positive pathways for interventions without legal or financial risks.<sup>18</sup>

### **Lessons from Delhi**

Additionally, under Supreme Court guidelines in Delhi, the provision for anonymous reporting proved essential for enabling bystander assistance. The bystander who saw an accident dialled an anonymous report before supporting the victim until paramedics took over. The significance of maintaining anonymity becomes evident since fear of lengthy legal involvement functions as one of the main obstacles that stop people from taking action.

### **International Examples**

Good Samaritan laws across the world create multiple examples demonstrating they encourage bystanders to perform lifesaving actions. A court in France charged a group of spectators for not helping a drowning child because French society typically expects people to assist each other. A Good Samaritan law in Vermont USA protected a citizen who performed CPR on an arrest victim while walking by.

## **V. THE NUMBERS SPEAK: STATISTICAL INSIGHTS INTO BYSTANDER BEHAVIOUR**

Good Samaritan laws in India gain meaning through statistical analysis, which creates complete snapshots of emergency responder behaviours and cultural reactions to emergency assistance. Statistical research shows that legal safeguards have not bridged substantial information gaps about emergency readiness or response efforts, thus demonstrating the necessity of forging ahead with additional education initiatives and systemic adjustments.

---

<sup>18</sup> SaveLIFE Foundation, The Impact of State-Level Good Samaritan Laws in India: A Case Study of Karnataka 10 (2019).

### **Bystander Reluctance in India**

Survey research done by the SaveLIFE Foundation demonstrated that 74% of Indians fail to help accident victims on roads because they are concerned about facing legal harassment. The poll results show an improvement of 88%; the figure indicates reluctance but remains pervasive. People avoid helping because they dread becoming innocent victims of legal harassment, along with distrust in enforcement agencies and worry about medical liability expenses.<sup>19</sup>

Through statistical data, we can see how well Good Samaritan laws work in India while understanding both the advantages and difficulties of emergency intervention by bystanders. Data shows a widespread lack of awareness along with inadequate readiness and intervention action, which demonstrates the need for amendments in the law and public awareness initiatives.<sup>20</sup>

### **Awareness Gaps Among Stakeholders**

The insufficient public awareness includes in both general people and crucial stakeholders among police personnel as well as healthcare providers. A survey revealed medical professionals and police personnel knew about Good Samaritan protections at only a 23.5% rate.<sup>21</sup> A knowledge deficit acts as a substantial barrier because untrained authorities frequently perpetrate harassment by using their power to detain Good Samaritans for lengthy interrogations or request personal information that threatens increased exposure.

Medical professionals' understanding of this subject remains at unacceptable low levels. Several hospitals have denied emergency care to patients transferred by Good Samaritans because of administrative backlashes and financial requirements beforehand. These situations break the Motor Vehicles Act 2019 legal standards and create barriers that will make people think twice about helping in emergencies.<sup>22</sup>

### **India's Alarming CPR Deficit**

India experiences an alarming downturn in reported bystanders who provide CPR while the rates in the country fluctuate between 1.3% to 9.8%. Research shows Denmark and Norway

---

<sup>19</sup> SaveLIFE Foundation, The State of Bystander Interventions in India: A Report 8 (2021).

<sup>20</sup> WHO, Strengthening Pre-Hospital Care: An Analysis of Global Emergency Responses 12 (2021).

<sup>21</sup> ICMR, Pre-Hospital Care and Public Involvement in Emergencies 19 (2021).

<sup>22</sup> National Law University Delhi, Understanding Barriers to Emergency Interventions in Indian Urban Areas 21 (2021).

achieve greater than 70% CPR training rates because both nations mandate school-based CPR instruction.<sup>23</sup> Nationwide variations in first aid and CPR knowledge show that India desperately needs national CPR training to become universal.

Without selected CPR training people become unable to save lives while their anxiety about worsening medical situations increases. People fear legal and medical penalties after performing first aid or CPR without training although Good Samaritan laws protect volunteers during good faith emergency rescues. The double challenge emerges from offering both reasonable legal protection and essential training for emergency response actions to citizens.

### **The Cost of Hesitation: Preventable Deaths**

Each year, more than 1.5 lakh people die in road accidents across India, revealing the human toll caused by inactive bystanders during emergency medical situations. Healthcare could save 50% of accident victims if victims receive proper emergency medical attention. The high incidence of preventable deaths shows why Good Samaritan laws remain vital to filling the gap between survival and fatality. These laws will fail to protect lives if more people do not recognise their importance and if systems supporting them do not undergo necessary reforms.

### **Global Comparisons and Lessons for India**

The World Health Organization (WHO) published a report showing strong countries achieve higher than 60% bystander response through public awareness campaigns paired with mandatory first aid training in countries like Germany and Japan. These nations achieve high bystander participation rates by implementing legal safeguards which blend with traditional values emphasising societal solidarity and by requiring practical first aid education throughout the nation.<sup>24</sup>

A coordinated national strategy in India failed to develop resulting from which India obtained fragmented and inconsistent action outcomes. The progressive actions of Karnataka and other states demonstrate successful local initiatives but their effectiveness deteriorates when unchecked by national government policies. The problem is increased by the lack of a centralised system which tracks Good Samaritan law impacts because this leaves policymakers unable to identify areas where improvement is needed or to assess overall system advancement.

---

<sup>23</sup> Ministry of Road Transport and Highways (India), Annual Report on Road Accidents and Emergency Interventions(2020).

<sup>24</sup> WHO, Strengthening Pre-Hospital Care: An Analysis of Global Emergency Responses 12 (2021).



### **Insights from Public Perception Surveys**

Surveys on public perceptions of Good Samaritan laws reveal a paradox: The majority of Indians want legal protections for helpers yet show unwillingness to help in actual situations. Lawmaking efforts alone prove insufficient for resolving deeply rooted societal attitudes toward unprovoked assistance since population statistics reveal acceptance of legal protections without matching actual in-situ intervention behaviours. The advancement of Good Samaritan laws needs three essential elements: clear regulation together with community awareness creation joined by cultural behavioural changes to turn passive bystander behaviour into engaged help.

## **VI. CHALLENGES HINDERING THE EFFECTIVENESS OF GOOD SAMARITAN LAWS**

The introduction of Good Samaritan laws in India faces significant limitations in practical application because of multiple governmental shortfalls, social norms and cultural boundaries. Public trust remains weak because legal protections remain inconsistently enforced throughout different regions of the country. State departments with low knowledge of Good Samaritan laws continue to target helpers when it violates their intended safeguards. Bystanders have reported through their experiences that police continued to question them without reason, even after laws had provided their right to immunity. Law enforcement officials demonstrate a poor understanding of Good Samaritan law specifics because training about these protocols is inadequate.

The Supreme Court's 2016 instructions specify free medical care for victims at hospitals while Good Samaritans remain free of charge, yet hospitals continue violating these requirements. Many individuals who provide emergency aid say they face pressure from medical facilities to pay bills and assume legal accountability for what occurred. This behaviour discourages both good-willed and well-meaning persons because healthcare facilities make them bear excessive financial and psychological responsibility. Both hospitals and police officers face limited consequences for noncompliance; the stipulations continue without proper oversight. The irregular enforcement methods destroy the intended function of Good Samaritan laws and allow these laws to fail at their purpose of reducing fear in emergency cases.<sup>25</sup> Without effective

---

<sup>25</sup> Motor Vehicles (Amendment) Act, 2019, No. 32, Acts of Parliament, 2019 (India).

accountability structures to punish institutional violations of these protections, public confidence in the system continues to decline.

The major obstacle stems from insufficient public understanding of these laws. Even throughout the years since their creation, the legal safeguards intended to protect Good Samaritans remain mostly unknown to the general public. Research by the SaveLIFE Foundation shows that 74% of Indians lack awareness of what protections their laws provide. Because victims remain uninformed about their rights they become exposed to harassment and exploitation since intimidation and questioning prevent them from asserting themselves. The lack of awareness about legal protections exists most strongly in rural and semi-urban territories due to insufficient information access. Regions affected by persistent myths about emergency rescues continue to believe helpers must bear legal responsibility and financial consequences if the victim dies from their injuries. Invalid myths prevent normal people from becoming potential helpers and establish an environment of deliberate refusal to assist others.

The issues become worse because societal elements, together with cultural influences, play a significant role. The Western mindset that emergencies represent “other people’s problems” exists strongly in India because of widespread institutional malfunction and administrative incompetence that persists over the years. Citizens avoid risky situations because they believe interfering in emergencies will force them into lengthy procedures along with legal problems. Society demonstrates a willingness to avoid getting involved, which functions as an accepted reason to refrain from acting in response to emergencies.<sup>26</sup> The problem is worsened by authorities’ distrust because people worry their help will be either misunderstood or punished by unprofessional or dishonest officials.

The ethical as well as practical challenges surrounding intervention create extra difficulty during intervention efforts. India supports voluntary emergency aid through Good Samaritan laws yet these laws differ from the mandate-based duty-to-rescue systems currently in force throughout France and Germany. National law follows a voluntary platform because it upholds democratic standards thus it maintains both personal freedoms and stays free from forced actions. The absence of legal obligation in touching base with victims frees individuals to decline interventions unless they face no risks to themselves. The lack of guidelines regarding emergency intervention leads society to question both its moral obligations to public safety and

---

<sup>26</sup> Red Cross India, The Role of Bystanders in Medical Emergencies in Rural India (2022).

whether enforced regulations would increase public care. Helping can lead bystanders to experience worry because they lack expertise which may endanger victims in urgent conditions found within high-risk scenarios such as disasters violence outbreaks and medical crises.

Reliable data extraction related to Good Samaritan interventions remains unavailable in India resulting in major obstacles to system improvement. The population of India lacks a system to document how Good Samaritan legislation affects lives through bystander intervention or show the adversities encountered while assisting victims. The current lack of validated data constrains legislators' ability to determine whether current laws need adjustment and their actual success rate. Organizations face challenges when developing effective policy changes because they lack reliable data which makes it difficult to use resources appropriately and determine nationwide effects of educational outreach activities.<sup>27</sup>

## **VII. RECOMMENDATIONS FOR STRENGTHENING GOOD SAMARITAN LAWS IN INDIA**

India must create a full-scale strategy which extends past legal reforms to consist of public awareness efforts alongside institutional responsibility and cultural progress to solve these core systemic and procedural difficulties. Multiple strategies must exist to guarantee Good Samaritan laws save lives since they target bystander intervention.

Expanding Good Samaritan protections remains one of the most crucial urgent needs for our society Present law enforcement mainly addresses road accidents, so enforcement legislators must expand coverage to all emergencies. Public emergency rescue operations stall because of natural disasters, including floods, earthquakes, and landslides, which lead to massive casualties. The provision of legal immunity for disaster response would increase participation by the community during critical crises. Medical emergencies calling for immediate intervention, such as heart attacks, strokes, and epileptic seizures, cause bystanders to delay their help because they worry about potential legal responsibility. A legal inclusion of these emergencies in India's framework ensures broad Good Samaritan protection for everyone.

Increasing public knowledge stands as an essential component for complete success. A large percentage of Indian citizens lack awareness about the rights and duties prescribed by these

---

<sup>27</sup> St. John Ambulance, Global First Aid Training Models and Their Application in India (2022)

laws. National awareness programs need to start immediately to eliminate false impressions about Good Samaritan legislation across India.<sup>28</sup> Through television and radio platforms alongside social media platforms, information efficiently reaches a broad audience. Fundamental messaging in public service commercials needs to eliminate false beliefs to demonstrate why prompt rescue interventions save people in emergencies. Awareness-based education must focus on locating its efforts in rural and semi-urban locations because these areas experience the strongest misinformation regarding legal safeguards. Through partnerships with non-governmental organizations alongside community leaders and grassroots networks, the messages can be distributed to marginalized communities.

As a remedy to effectively respond in times of crisis, citizens need to complete mandatory first aid and CPR training. Mandatory training in schools and workplaces within Denmark and Norway resulted in observed bystander CPR success rates above 70%. Similar training programs in India should follow the success of programs like Denmark and Norway to boost medical emergency response rates since current bystander CPR rates vary between 1.3% and 9.8%. The Indian St John Ambulance operates with the Indian Red Cross Society as a mechanism to sponsor complete training initiatives for large groups.<sup>29</sup> Certifications received by participants become eligible for employment prospects and educational credit through the mobilization of mobile units to rural locations and the establishment of performance-linked incentives.

Pursuing rewards together with public recognition for Good Samaritan acts serves as an additional tool to foster greater public involvement. Through financial reimbursements established in Karnataka citizens can obtain monetary compensation for their contributed expenses when assisting as a Good Samaritan. A tax benefit program should reward emergency responders who choose to help others while disasters are occurring. Public appreciation needs equal attention since media coverage of good Samaritan stories along with community events and awards stimulates people to imitate this displayed behavior. Annual "Good Samaritan Day" could become government-backed to support recognition of altruism and encourage people to intervene according to plans that officials would develop.

---

<sup>28</sup> ICMR, Pre-Hospital Care and Public Involvement in Emergencies (2021).

<sup>29</sup> SaveLIFE Foundation, The State of Bystander Interventions in India: A Report (2021).

The consistent implementation of Good Samaritan laws requires essential strengthening of enforcement procedures throughout the United States. Scheduled training sessions must teach law enforcement staff, healthcare workers, and court personnel about which protections the laws guarantee for them.<sup>30</sup> People who disobey these provisions concerning treatment needs and helper security must face harsh consequences under a penalty system that punishes violators.<sup>31</sup> Centralised reporting for Good Samaritan interventions would facilitate progress monitoring, non-compliance identification and policy upgrading through valuable collected data.

Long-term work is essential to develop mutual empathy and support because these cultural barriers prevent it. Storytelling emerges as a strong mechanism for creating change. Film and television media along with social media campaigns should feature actual stories about Good Samaritans who successfully intervened to save lives to show how interventions benefit society.<sup>32</sup> Educational institutions need to establish classes which teach about community accountability and moral judgment as part of their core studies so they can bring forth compassion beginning in primary education. Leaders from religious and community organizations should promote altruistic conduct by representing it as a moral obligation for society.<sup>33</sup>

## VIII. CONCLUSION

Good Samaritan laws demonstrate beyond their legal nature the collective commitment of communities to personal well-being through compassion. India has praised both Supreme Court measures from 2016 and the Motor Vehicles Act from 2019 for creating supportive legal structures which motivate bystanders to act. These laws encounter obstacles in their effectiveness because of inconsistent enforcement, together with limited public awareness and cultural hesitation.

India will get optimal results from these laws through widening coverage protections alongside thorough public programs about emergency response requirements and guidelines for helping others while offering discernible rewards for beneficial conduct. By observing how

---

<sup>30</sup> European Road Safety Observatory, International Comparisons of Good Samaritan Interventions (2021).

<sup>31</sup> Ministry of Health and Family Welfare (India), Bridging the Gap: Policy Suggestions for Better Emergency Interventions (2020).

<sup>32</sup> SaveLIFE Foundation, Encouraging Public Participation in Emergency Medical Care: Policy Brief (2022).

<sup>33</sup> Danish Health Ministry, Effectiveness of Community-Based Emergency Medical Training Programs (2020).



intervention laws work in France and Germany alongside the effectiveness of Danish mandatory CPR training programs India can build its emergency response framework.

Good Samaritan laws achieve their success through means which extend beyond legal frameworks. Public institutions must build trust while people learn to take responsibility and show empathy for the shift to become successful. Through effective implementation of these recommendations, India can develop a helping society which transforms compassion into shared duty and collective responsibility. Through our collective efforts; we will ensure everyone feels comfortable helping save lives by making fear transform into meaningful intervention as we build societal hope.

