THE ROLE OF TORT LAW AS A TOOL FOR PERSONAL INJURIES COMPENSATION IN MODERN SOCIETY"

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ABSTRACT:

In common law jurisdictions, a tort could be a misconduct that unfairly causes someone else to suffer loss or hurt, leading to legal liability for the one that commits the wrongdoing act. though crimes could also be torts, the explanation for proceeding isn't essentially a criminal offence, because the hurt could also be thanks to negligence. the subsequent video explains what negligence is that the victim of the hurt will recover his or her loss as damages during a case. so as to prevail, the complainant within the case, usually named because the victim, should prove that a breach of duty (i.e., either AN action or lack of action) was the de jure recognisable explanation for the hurt. Legal injuries aren't restricted to physical injuries and will include emotional, economic, or repetitional injuries, moreover as violations of privacy, property, or constitutional rights. Torts embody such varied topics as motorcar accidents, internment, defamation, product liability, infringement, and environmental pollution (toxic torts). whereas several torts are the results of negligence, misconduct law conjointly acknowledges intentional torts, within which an individual has purposely acted during a manner that harms another. additionally, once it involves product liability, the courts have established a belief of "strict liability" for torts arising from injury caused by the employment of a company's product and/or service. beneath "strict liability," the victim doesn't got to prove that the corporate was negligent so as to win a claim for damages.

Key words: All accidents and injuries, Defendants, Claimants, financial loss and serious injuries, road traffic accidents.

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RESEARCH OBJECTIVE:

The object of this research paper is to know about the role of tort law for personal injuries compensation and to know about Development of law of torts and different cases.

SCOPE OF THE STUDY:

The scope of the study is to get the knowledge about how people using law of tort as a tool to get compensation for personal injuries.

HYPOTHESIS:

Under this act, a plaintiff can get compensation from the defendant if she/he suffers personal injury. the act also clearly speaks about the amount of compensation that shall be paid to plaintiff in different circumstances depending whether the plaintiff suffered a total disablement, partial disablement or death.

RESEARCH QUESTION:

How Tort law is universal and applies to all accidents and injuries?

How Tort claims for personal injury are often brought and defended by individuals?

Is Tort claims are determined in court by judges aided by lawyers and juries?

What is the `compensation culture'?

What is the dissonance between the modern image of tort and reality?

METHOD:

The method adopted for the research is empirical basically content analysis of available secondary data and survey.

INTRODUCTION:

The term tort is the French equivalent of the English word 'wrong' and of the legal code term 'delict'. The word tort is derived from the Latin word tortum which implies twisted or crooked or wrong and is in contrast to the word body part which means straight. everyone seems to be expected to behave during a easy manner and once one deviates from this straight path into crooked ways that he has committed a tort. therefore tort could be a conduct that is twisted or crooked and not straight. As a technical term of English law, tort has acquired a special which means as a species of civil injury or wrong. it had been introduced into nation law by the Norman jurists. Tort currently suggests that a breach of some duty freelance of contract giving rise to a civil explanation for action and that compensation is retrievable. In spite of varied makes an attempt a wholly satisfactory definition of tort still awaits its master. generally terms, a tort could also be outlined as a wrongful conduct freelance of contract that the acceptable remedy is associate action for unliquidated damages. another definitions for tort are given below: Tortuous liability arises from the breach of a duty primarily fixed by law; this duty is towards persons usually and its breach is redressable by an action for unliquidated damages.

TORT AND THE TRADITIONAL PORTRAYAL OF JUSTICE-

1. **Tort law is universal and applies to all accidents and injuries**

One powerful aspect of the traditional fairness of justice is the universal application of the law to all citizens. All are equally subject to the law and all can benefit equally or be fined. This has already been reinforced by law students at the beginning of their study of torture through torture, negligence analysis. They are told that one of the reasons for this success is that it could potentially apply to all kinds of accidents and injuries. In Indication, the formula itself is relatively simple. As a result, institutional jurisdictions looking for responsibility using the 'reasonable man' formula, no matter how complicated, are easy to understand and understand. Likewise, judges use the 'neighbor' test to determine if the responsibility for care is obligatory, and it looks capable of being used in very different situations. In fact, the actual scope of torture proceedings for personal injury is strictly limited. It may be that only certain types of injuries are attracted to compensation. The reason is that the claims brought out are highly influenced by the incidence of compulsory insurance to compensate for accidents that occur in areas where liability insurance should be sought. Road and work accidents are

widespread because these are the two major areas where insurance is required[2] 2011and 2012 They were made in 88% [3] of all claims, including motor accidents. Overall cent consisted of 80% and employer's responsibility was 8%[4]. Even more important are accidents that take place at home, or during recreational activities or playing games, and yet most of those losses are from any damage related awards. It was estimated that 7.8 million accidents occurred at home. 1999 But in only 0.5% of these are the probability of successful tour claims not only because the infill is less readily apparent but also because, in the absence of insurance, we are concerned about finding a cure for torture. I'm less inclined to think. Overall, although work and transport injuries dominate the torture system, they do not represent the usual accidents. All of this means that the place where you are injured is important[5]. There is a high likelihood of recovering accidents that are not covered by liability insurance[6]. According to a study done thirty years ago, while 1in 4 and 10 in 1 road accident were compensated for road accidents, only 1 out of 67 injured was injured. In total, 16 were the only victims of an accident that was inaccessible for three days or were overpaid through a torture system. However, if we only concern ourselves with traumatic injuries, violence was even more important: where the ability to work for six months or longer in an accident occurred, about one-third of victims suffered persecution. Suffered losses. However, this growing importance of violence was then severely undermined: if the victims of loneliness were blamed not just for those accidents, but for all the causes, including congenital illness and illness, the importance of the violence system was ten. Times less. For a variety of reasons, the group is less capable of claiming violence than accident victims, and 12 common law damages play a much more limited role in their compensation. Welfare state. Although a small portion of public welfare costs are paid to accident victims, this amount is much more than the total amount paid by the tort system. In fact, violence is the very 'junior partner' of the social security system. The Pearson Commission found in 1978 that seven times the victims of the accident were paid social protection as compared to their injuries, and that the total benefit they received was

[2] The lack of coherent policy behind compulsory insurance was traced in R. Lewis, `The Duty to Insure' (2004) 154 New Law J. 1474 and C. Parsons, `Employers' Liability Insurance ± How Secure is the System?' (1999) 28 Industrial Law J. 109.

[3] Department for Work and Pensions, Compensation Recovery Unit (CRU) ± Performance Statistics,

[4] 6 id. The Pearson Commission recorded that road and employment claims comprised 88 per cent of all claims: Report of the Royal Commission on Civil Liability and Compensation for Personal Injury (1978, Cmnd. 7054) vol. 2, table 11. Twenty years later Atiyah suspected that the relative proportion of claims had not changed: P.S. Atiyah, The Damages Lottery (1997) 99. However, employment claims have since declined considerably falling from 45 per cent of all claims in 1978 to 8 per cent now.

[5] Pearson, id., table 57

[6] 8 In Australia they are less than a fifth: H. Luntz and D. Hambly, Torts: Cases and Commentary (2002, 5th edn.) 4.

double the total loss. -These figures should not be construed to mean that violence and social security systems are mutually exclusive. In fact, they are closely linked. A person who succeeds in claiming his or her damages is more likely to reap welfare benefits as the victim of a general accident is unable to claim more welfare than the casualty victim. Provided the joint law sometimes requires a lengthy process to pursue damages claims. If accident victims could not get immediate help from the benefit system, it is unlikely that the damages[7] to the common law - with all its delays, costs, and complexity - would have survived long into the twentieth century. That is why the system of violence can be viewed as a parasite for the welfare state. It depends on the type of liability insurance . This is far from the image of tort as an independent `natural' system of rules of universal application supposedly forming the foundation of a just society[8]. Tort in practice is limited in its scope, partial in its application and very dependent upon existing systems of welfare and insurance administration[9]

2. **Tort claims for personal injury are often brought and defended by individuals**

This picture is largely self-evident so far as corporations cannot suffer any kind of injury, only individuals can. Although many claimants will try to hold their employer or state or other complex company liable, the majority will blame the other person for their injury. The names of the tort cases are filled with the person's surname[10]. Organizations appear frequently. It is said that individuality is one of the most characteristic features of torture. When combined with a subjective approach to the assessment of loss and claimant need, this uniqueness is said to prevent it from being provided by the welfare state. However, When viewed from an exercise point of view, this image of violence again requires considerable competence.

(A)defendants

Let us first consider the people who are a large number of insurance people. He is the payer of the tariff system and is responsible for 94% of the personal injury compensation. Although he is not named in the law report and is rarely mentioned in the tour textbook, he is an

[7] D. Harris et al., Compensation and Support for Illness and Injury (1984) table 2.1.

[8] Pearson, op. cit., n. 6, vol. 1, table 5; D.R. Hensler et al., Compensation for Accidental Injuries in the United States (1991) 122.

[9] Pearson, op. cit., n. 6, vol. 1, para. 1732 and table 4 suggested that in 1977 there were about 215,000 recipients of damages totalling £200 million whereas the social security system paid out £420 million to 1Ý million people. By 1988, although more

[10] J. Steele, Risks and Legal Theory (2004) 36: ```Insurance `technology'" underlies the whole practice of tort law.' Without insurance, it is probable that tort liability itself could not survive. J.G. Fleming, The American Tort Process (1988) 21, and R. Lewis, `How Important are Insurers in Compensating Claims for Personal Injury in the UK?' (2006) 31 The Geneva Papers on Risk and Insurance 323.

elephant in the living room[11]. They are almost always present and dominate the proceedings, and yet judges and jurors rarely discuss this fact, although it is true that most claims are brought against the defendants who are individual. Individuals are, they are almost insured against their liability. Likewise, most employers, companies, and organisations that prosecute them are insured. Even where local Authorities pay direct damages awards, they can hire insurance professionals to handle claims. The result is that nine of the ten respondents are actually insurance companies, the rest being large auto insurance organisations or government entities such as government departments and health[12]. Authorities For the non-insured, the actual defendant is very low. The main centre of personal injury practice are therefore insurance buildings rather than court courts, or even lawyers' offices. Over the past decade, the number of such insurance centers has declined due to company integration and greater expertise. The work is focused on specific areas. As a result of the stability of the general liability insurance market, only eight major companies have dominated it, though there are more than fifty other small companies that usually issue more than half of the insurance companies' policy. For motor insurance, there were more than 350 companies authorised to conduct motor insurance transactions, but only 65 companies and 11 Lid syndicates actively did so[13]. The ten largest motor insurance companies controlled three-fourths of the market, so when more than a million people suffered personal injury and torture last year, they came up against very few real defendants. After that, there is usually little or no part in the litigation process. For example, Harry Street, the Late Professor of Law at Manchester University and the author of Street on Tours, has revealed that he was once a defendant in a case but only found out when his decision was heard in a newspaper Then it was decided on appeal. He took no part in the proceedings. Practical insurance uses litigation tactics that are used and how to be defended. For example, this means that they usually enrol without the consent of the insurer, and they can settle matters despite objection from the policyholder. More examples of insurance company Personal injury control is given below

Claimants

When we look at the claimants, it is argued that the person whose name is in law suit is the person who has suffered. However, the tort action brought on by the insurance background on

[11] 7 R. Lewis, `Insurers and Personal Injury Litigation: Acknowledging ``The Elephant in the Living Room''' [2005] J. of Personal Injury Law 1.

[12] R. Lewis, `Insurance and the tort system' (2005) 25 Legal Studies 85

[13] Ernst and Young, Bringing Profitability back from the Brink of Extinction: A Report on the UK Retail Insurance Market (2011) 17. The Association of British Insurers found the percentage to be two thirds in Response to the Greenaway Review of Compulsory Motor Insurance and Uninsured Driving (2004) annex B

the claim greatly affected. Here we focus on the ability of the claimants to present their legal status in order to bring their claim to the fore. We know that most torturers are liability insurance policy holders and have no choice in the law firm that is set up to defend them. If they want to take advantage of the humanitarian harm provided by the policy, they must accept representation. It can be thought that on the contrary, the claimants have full freedom to choose their own lawyer. However, this is far from the case. The reason for the limited selection is the rapid expansion in recent days This is the claimant's own for the year before the event (BTE) insurance .Insurance that hurt against future legal costs before the accident. This is sometimes known as legal expense insurance. Now 3 out of 5 adults get some form of insurance or have more than 18 million drivers as part of their motor insurance, and 14 million house holders as part of their buildings and inclusive insurance. On. In total, this number includes about 22 million people, for example, about 7 million workers deserve BTE benefits as a result of their trade union membership, although this is a declining number. This large-scale market has had great success because BTE has been sold as an unconventional advantage for inclusion in existing motor liabilities or household insurance. In fact, studios have been a big selling point. A few people Opt for stand-alone BTE policies, but they generally accept the Legal expenses cover as part of a wider package.

3. **Tort claims are determined in court by judges aided by lawyers and juries**

One of the perpetrators of the law of violence involving public opinion about justice is the strange judge, with the help of such well-trained barristers who carefully scrutinize the evidence to come to a sensible decision. Judges and barristers are always male and later distinguished by their complement of clothing. They sit in the formal environment of the courtroom, often with wooden panes, which affect many ways of delivering justice[14]. Some people can even create a box of good and true twelve people for the jury to decide with their peers. Formally respected and feared at the same time. Although helping to make an unresponsive decision out of emotional response, the environment is so strange to many contenders that they will do almost anything to avoid it. Fear is one of the major reasons for appearing in court and being properly examined The contenders are also ready to accept the first offer they have. This also explains why some claims are not processed as well. However, this is a bit of a foundation concern because today judges and juries never decide cases in court. The inclusion of these symbols of justice is very limited when we consider how

[14] 9 L. Mulcahy, Legal Architecture: Justice, Due Process and the Place of Law (2011).

violence is determined. We have already seen that a really large number of insurance companies are defended. The high cost of litigation, when combined with the small size of the claims, ensures that the legal concept and its validity are not economical in the way that the popular imagination imagines. In practice, it is the insurers who decide whether or not a case is extremely unusual for a court hearing. An important statistic of the violence system shows how unusual it is for a court to be involved: 98% of cases are dealt with before they are settled even when it is scheduled for trial, And some of those who get a trial date, most of them conclude before. It's structured hearing. In one survey, only 5 of the 762 common cases were heard[15]. In effect, the insurance company allows trial judges to settle only 1% of all claims. In these rare cases, the judge does not receive any help from the jury, the second major symbol of public justice. Although personally injured in the United States as an important feature of the trial, they were abolished in all the extraordinary cases in the United Kingdom. 1933, was rejected many years ago. An escaped jury cannot be merely a case of personal injury in the United Kingdom if a case reaches court and is decided by a judge, this decision is unlikely to be further challenged. Some cases are appealed to the High Court[16]. The result is that when called upon by the senior judiciary, they are left to decide on a very small portion of very rare cases. Whether the appellate court has the opportunity to examine a point of the tour law may depend on the insurance company because, if it reaches the insurance company's doubtful completion, the claimant can be paid in full. And if it is given a cost award then the process is underway. By controlling their settlement tactics and which issues are appealed, insurance companies have established the principles of torture and what happens in practice. This is beyond the popularity of how the law of violence is framed and the impact it has. If we turn our attention to those cases that are excluded from the court, as opposed to being formally decided, we know that it is the insurance company that sets the threshold. Lawyers and regular procedures are involved. Increasingly, they are trying to settle matters at an early stage without resorting to court documents. In a survey of major insurance companies it was estimated that due to the default case, the number of cases that were dealt with only after a third course was reduced to a formal proceeding[17], The vast majority of claims are informally settled. : Thirty years ago, 86% of cases were resolved without writ of

[15] P. Pleasence, Personal Injury Litigation in Practice (1998) 12. Earlier, Harris et al., op. cit., n. 9 suggested that as many as 3 per cent of cases might go to trial. See, also, P. Cornes, Coping with Catastrophic Injury (1993) 20.
[16] J. Grisham, The Runaway Jury (1996). The residual power to order trial by jury in personal injury cases after the Administration of Justice (Miscellaneous Provisions) Act 1933 was very rarely exercised. After Ward v. James [1966] 1 Q.B. 273 juries were even more confined
[17] Davis v. Johnson [1979] A.C. 264, at 278; Fairchild v. Glenhaven Funeral Services Ltd [2002] 1 A.C. 32.

formal action. Now more cases are being dealt with at an early stage. Insurers are avoiding not only judges, courts, and the judicial process but also lawyers. Defence lawyers are being ignored. Dealing with claims against local authorities for road maintenance failures - largely avoiding the input of lawyers. More work is being done at home by insurers. In addition, in an effort to increase efficiency and reduce costs, insurers have sought to ensure that fewer legal entities work for them.

For example, in 2004, AXA insurance company announced that it had reduced by half the number of law firms defending its cases. Similarly, over a period of four years, the Zurich insurance company decimated the number of firms representing its policyholders in catastrophic cases: only four firms now defend such cases for this large insurer. Much of the work being done in personal injury law firms is now being carried out by unqualified or partly-qualified paralegal personnel. It is feared that, as a result of proposed reforms, non lawyers at claims management firms could be left in charge of even complex personal injury claims. The image of tort law as being regularly administered by highly trained lawyers in a formal environment is thus very far from the reality

4. Tort liability is largely dependent upon proof of fault and findings of law

Popular culture is not sure to the extent that it requires error in order to find responsibility. It is clear that wrongdoing has been the primary force that justified the continued expansion of the law of violence. However, the concept of responsibility goes far beyond error, and it is evident in the strict responsibility governments found in tort law. These areas of responsibility for noncompliance are generally limited in their practical impact, but there is widespread public support, particularly in the area of work injury. For example, it has been shown that people generally believe that employers should pay for their job losses, even in the absence of any fault from them[18]. However, as a whole, the principle of error plays an important role in determining the popular response. Whether the compensation is paid. In the absence of error, for example, property owners are rarely found liable. The doctrine of wrongdoing has a huge impact on students of torture law because of its disproportionate emphasis on textbooks. Neglect of the common law is a fundamental element of violence education. Strict liability, especially if deriving from the law, is the neglected area of study. As a result, the standard response to inquiries compensation Will compensation be paid? 'Often' depends on whether the error can be proven. 'However, the crime, which is popular

[18] S. Lloyd-Bostock, `Commonsense Morality and Accident Compensation' in Psychology, Law and Legal Processes, eds. D.P. Farrington et al. (1979)

about the compensation and sustained by the students' reaction, does not reflect the actual implementation of the law. Through liability insurance, in practice the Tour provides a framework for processing large payments on a very small scale. Acting on these usual claims, insurers decide which elements of the damage they will accept or fight. The important fact here is that it is unusual for them to face liability: One study revealed that there is very little talk about qualifying liability in insurance companies' files, and only 20 percent initially[19]. The cases were denied. Most claims are low cost and not competitive and, consequently, insurers pay the least of them. It is very rarely, however, to insist that a particular defendant was in the wrong, or that someone should resist the pleasure. Contrary to the feedback received from tour textbooks, duty of care, loss, and even breach of duty, there is usually no dispute about system action. Another factor in establishing responsibility, at least in the awareness of law students, is the importance of finding the law. Appeal cases are read one after another to properly advise an essayer and to succeed in litigation. However, in practice, the context of law enforcement arguments that occurs in appellate courts has little to do with the personal injury practitioner's day-to-day work. In the case of road accidents it has been shown that driving skills and common sense used in the scope of 'road rules' are more important than any legal principle. To further emphasize this, we can say that these are facts rather than the law that are more likely to determine the case. A barrister included in the survey commented that the excuse for not reading the case papers before the hearing was that the facts disclosed in the courtroom would inevitably change: all you can say is that initially you How does this look on the evidence found? In the stage, which is a rare picture that will be put to the test. There was a chapter in these houses that said, "Never think about the law, it's all about the facts, and never mind the facts because when your client If the witness comes out, all that will change is the box anyway

5. Tort cases reflect the justice requirements of due process and fairness

As we have already seen, the popular image of the delicate balance of justice scales through the Goddess of Justice requires close scrutiny when considering what usually happens in the tour case. There has already been talk about the representation and the right to control the claim against which litigation is made. Here we look more at the factors that influence the settlement of claims and contradict them with the traditional display of justice. As we have seen above, the facts found in the books rather than the law are the ones that are more

[19] Citizens Advice Bureau, No Win, No Fee, No Chance (2004) para. 4.31

important in determining the outcome of a claim. But how are these facts found? Conventional imagery is rigorous, unbiased, and a detailed investigation of what happened. In a road accident we can imagine that there will be a careful forensic examination of the site by experts to determine the cause of the injury. The effects of speed, weather, road level and layout, vehicle design, etc. will be carefully weighed. Witness testimonies from several potential parties will be taken and police reports will be investigated. Thereafter, the evidence will be subject to cross-examination in court to determine its probative value, which is being done in accordance with the strict rules of the evidence. At each point, the parties will be able to inquire and examine the opinions presented and present their alternative views within the limits of the rules of civil procedure, which aim to provide a fair hearing for all. The reality is far from ideal. Classic empirical studies show that, in practice, it is the insurance bureaucracy that largely determines which facts are accepted, how the litigation progresses, and whether, when claims are settled[20]. Are. In particular, Ross found that when the rules of violence were used in three ways, they changed. Secondly, they were made more liberal. And third, they were more disqualified. Let us describe each of these features in turn, and consider how facts are found in most cases. In practice, the rule that it is necessary to prove the error is also uncertain as to the circumstances of the particular accident. The principle needs to be simplified to make this claim easier and the facts easier to find. For reasons of cost and administrative efficiency, insurance companies are forced to change other criteria for analytical analysis of violence. The mechanical rules of the thumb turn any detailed investigation into a charge. For example, in practice, the driver of a car who is behind someone is always found to be negligent. Similarly, the driver of the car emerging from the junction believes that the oncoming collision is at fault. Experts have neither the time nor the resources to analyse every road accident scene and accurately calculate the cause of the accident.

6. Tort focuses upon compensating financial loss and serious injuries

One of the tour pictures is of a care system that specifically compensates for the needy when they are suddenly killed. After a serious injury, the claimants may suffer a small amount. They may be unable to work. Sooner or later any employer's support will be withdrawn and they may lose their jobs. The savings, if any, will be exhausted and relying solely on modest

[20] See id.; Harris et al., op. cit., n. 9; and, in the American context, H.L. Ross, Settled Out of Court (1980). The major findings are supported by more recent empirical studies and, in particular, by Goriely et al., op. cit., n. 34. But see the critique of Genn's work in R. Dingwall et al., `Firm Handling: The Litigation Strategies of Defence Lawyers in Personal Injury Cases' (2000) 20 Legal Studies 1.

resources provided by the welfare state can prove difficult. The claimants may be unable to support their families, cannot pay the mortgage and then risk the home. Then their loved ones can indirectly be affected. In addition, claimant's injury may require constant care. Some medical devices and rehabilitation treatments cannot be easily obtained from the National Health Service. The cost of delivering it privately can be enormous. Without financial support, nursing support can be minimised, delayed rehabilitation, and increased pain. The tour system exists to address these concerns about money[21]. One aspect of violence is that it is a system that provides direct financial assistance that recipients of compensation need greatly, who are seriously injured. Who could possibly question the basic humanitarian function of the law of torture and deny its usefulness? Unfortunately the reality of this photo has again been removed from the picture that has just been painted. First, it is not the case that the harm caused by violence is primarily attributed to those who have been seriously injured. The vast majority of claimants suffer only minor injuries, although it is true that severely injured persons receive a substantial portion of the total loss. Second, there is a financial loss but only a small portion of the total lump sum bill. Instead it is a disproportionate amount of damage that is disproportionate to the amount of damage. Pain and suffering and loss of convenience include two-thirds of the total given thirty years ago, and it remains at that level. The extraordinary importance of pain and suffering in the face of financial loss reflects the fact that most awards are for minor injuries and include a relatively small amount. The average pay is less than £ 5,00052, which is about two months average salary. In these minor cases, the claimants suffer very little, if any, reduction in income and medical costs. Future financial losses occur in only 7% of cases and are less than 9% of the total loss bill. Where road accidents are involved, in recent years 70 percent of injuries have been attributed to the effects of exile. Claimants are often left with symptoms that are difficult to rule out. In practice, violent claimants who suffer the devastating effects of their accident are rare. Instead, almost all suffer minor injuries and will soon recover[22]. They are not spared any persistent adverse effects. In most cases the accident does not result in a claim for social protection. These are minor injury incidents that incur extraordinarily high system

[21] D. Dewees, D. Duff, and M. Trebilcock, Exploring the Domain of Accident Law: Taking the Facts Seriously (1996) 19. P.A. Bell and J. O'Connell, Accidental Justice: The Dilemmas of Tort Law (1997) 63

[22] For example, the Health and Safety Executive estimated that the cost of including pain and suffering would increase payroll costs from 1 per cent to 2.5 per cent in an integrated compensation scheme for work injury. Greenstreet Berman, Changing Business Behaviour ± Would Bearing the True Cost of Poor Health and Safety Performance Make a Difference? (2002).

costs compared to their damages[23]. But one of the important things to note here is that the image of the torture system that looks after the immediate financial needs of the most severely injured people in society is far from realistic.

7. Tort awards full compensation for losses suffered

Although most injury-prone injuries are minor, some are more serious and account for the amount of damages they cause. In 2002, insurance companies estimated that only 1% of all transactions in the tour system resulted in payments of £ 100,000 or more. However, some of these transactions were responsible for 32% of the total amount paid by the system. These are serious injuries that are most likely to get people's attention, one reason is that they are more likely to go to court and report in newspapers. These accounts are often written in the press to suggest that the award of compensation is the equivalent of winning a large pool. Even `wind falls. Due to the amount of content they can also cause readers to feel jealousy. While it may be easy for someone to suffer a disability for some unintended reason, it is as easy to forgive the envy of others. What has rarely been done is the suffering and loss of the victim and how his daily life has changed dramatically. Newspapers rarely have to pay for the details of the problems they face, for example, spinal cord injury or brain damage. Instead, the impression is often left that the pernicious victims are being well cared for by society and most of them are in the new billionaire population. It is certainly true that the victims of torture are treated better, while the majority of accident victims are left to rely on their own resources, such as through the welfare state's safety net. Is completed. [24] However, it is misleading to suggest that people with severe injuries will receive all of their needs from the torture system. Traditionally, compensation has come in the form of an epoch, and decades of experience have proven that those who need long-term care and support will be inadequate. There are many reasons for this. The biggest reason for the deduction of funds is that there is actually a lot of allowance for return on investment of losses. Discount rates are used to allow the fact that claimants receive compensation before they do so, for example, they now need to work for their wages that they have now lost. Are. The concession recognises that this rapid receipt can yield investment income. However, the discount used to calculate losses is incorrectly

[23] Pearson, op. cit., n. 6, vol. 1, para. 256 estimated that the cost of operating the tort system amounted to 85 per cent of the value of tort payments distributed to claimants. The Lord Chancellor's Civil Justice Review (1988; Cm. 394) para. 432 estimated that the cost of the tort system consumed 125 per cent to 175 per cent of damages awarded in the County Court. Jackson LJ, Review of Civil Litigation Costs (2010) [is this the correct ref.?] also found recent evidence of disproportionately high costs.

[24] Even where an accident causes incapacity for work for six months or more only a third of victims receive tort damages: Pearson, op. cit., n. 6, vol. 1, table 5.

set. This rate never reflected the actual rate of return that the claimant could actually receive. It is currently expected that a claimant will receive the actual rate of profit above the inflation and after taxing 2.5%. With the increase in per capita inflation and tax deduction at 1 per cent, the claimant will have to get a per cent return at a time when the safest secured savings rate is around 3 per cent. It is inevitable that the amount of money paid in any case will be disposed of sooner than the court speculates. Nor have the courts granted any allowance for the increase in the expected age, which we can now expect. On the contrary, there is a lot of allowance given to the potential for a person with a disability[25]. All of this is the result of a long-term money insufficiency. The final reason for the low compensation is that the court is likely to agree on a uniform compensation, and due to the uncertainty of litigation, there will be a substantial discount on the case given by the judge. The damage done in this way is often less than that. It is true that the cost of winning awards has increased exponentially over the past decade. However, the overall issue remains that, for a number of reasons, claimants are less likely to receive a one-time payment[26]. 'They are not compensated and practically returned to the place they were in before the accident. Most serious injuries are compensated.

TORT AND THE MODERN PORTRAYAL OF A COMPENSATION CULTURE

The `compensation culture'

Compared with the aforementioned, and often misleading, images of tour law, there is a widespread impression that violence has contributed to a harmful `compensation culture '[27]. claim Our claim has grown to the point that we are now looking. Personal injury compensation regardless of minor error. The story of claims of pure accidents and minor injuries prevents us from entertaining but disturbing stories. Fraudulent and fraudulent claims are considered common, even when complaints are made against legitimate claims. The

[25] The introduction to the Government Actuary's Department, Actuarial Tables For Use In Personal Injury And Fatal Accident Cases (2004, 5th edn.) para. 15, notes that the set discount rate has never been within 0.5 per cent of the correct rate of return. The resulting substantial under-compensation is illustrated in the introduction to R. de Wilde et al., Facts and Figures (2008±9, 13th edn.) and A. Lewis, `Discount Rates' [2012] J. of Personal Injury Law 40. The Ministry of Justice is presently consulting about revising the discount rate: .

[26] Those receiving periodical payments are much better treated: R. Lewis, `The Indexation of Periodical Payments in Tort: The Future Assured?' (2010) 30 Legal Studies 391; R. Lewis, `The Politics and Economics of Tort: Judicially Imposed Periodical Payments of Damages' (2006) 69 Modern Law Rev. 418.

[27] 3 Compensation culture generally is considered by Lewis et al., op. cit., n. 61;, K. Williams, `State of Fear: Britain's ``Compensation Culture'' Reviewed' (2005) 25 Legal Studies 499; R. Mullender, `Negligence Law and Blame Culture: A Critical Response to a Possible Problem' (2006) 22 Professional Negligence 2; A. Morris, `Spiralling or Stabilising? The Compensation Culture and our Propensity to Claim Damages for Personal Injury' (2007) 70 Modern Law Rev. 349; J. Hand, `The Compensation Culture: Cliche Â or Cause for Concern?' (2010) 37 J. of Law and Society 569.

increase in claims is thought to represent criticism and a reduction in personal responsibility. Likewise, the claimants are shown not as victims of wrongdoing, but as 'scroungers' and 'selfish milkmen'. Reducing the principle of coercion and mistreatment with which the British are culturally tied[28]. Concern about the culture of compensation is more frequently linked, however, to the short-term progress in the torture system since the 1990s: widespread claims. The emergence of advertising and direct marketing; the introduction of 'non-one-fee' contracts; and claims referral payments. In the 1970s, claims for personal injury were handled by general practice lawyers who waited on client instructions. However, by the end of the 1990s, personal injury had become an area of practice and lawyers were advertising for work. 66 Given the potential in the market, the Claimant Administration (CMC) claimed that the CMC realised that they could make money by recruiting clients. And selling them to lawyers. He was involved in making massive claims on television, radio, newspapers and billboards. They also deal directly with people on the street, in residential property and out of schools. Some even offered financial lure to claim. The rules of conduct of lawyers which prevented them from paying the CMC in respect of claims, their payments were banned on a regular basis and the restriction on such payments was lifted in 2004.. Was, in response to concerns about immoral practices, the government began regularising the CMC. 2007. While such companies can no longer directly access in person, they have been compromised by sending unsolicited text messages and non-controversial phone calls. There are now 2,500 CMCs registered for personal injury work, and more than three-quarters of the population is reported. Contacted About Claim The[29] claims market has become a huge business, with lawyers generally paying between £ 600 and £ 900 per referral. Claims Claims In 2000, claims privatized privately fund privatization in claims advertising, CMC, and referral payments. Legal aid was largely eliminated and the use of conditional fee agreements (CFAs) was increased. Under the claims of these agreements, ant lawyers can receive an increase in their fees in each case in which they win. If they can succeed, they can double their costs but if they lose, then nothing. The self-contenders were encouraged to seek litigation under these "no-one" deals because there was only one financial risk they were liable for. If the case was

[28] Atiyah, op. cit., n. 6; F. Furedi, Courting Mistrust: The Hidden Growth of the Culture of Litigation in Britain (1999); D. Lloyd, `The Compensation Culture: A New Legal Paternalism?' in Compensation Crazy: Do We Blame and Claim Too Much?, ed. E. Lee (2002); C. Harlow, State Liability: Tort Liability and Beyond (2004)

[29] 9 P. Rohan, `Law Society Votes to Allow Referral Fees' Law Society Gazette, 9 January 2004. Vanilla Research, Referral Arrangements Research (2010); Charles River Associates, Cost Benefit Analysis of Policy Options Related to Referral Fees in Legal Services (2010); Legal Services Board, Referral Fees, Referral Arrangements and Fee Sharing: Decision Document (2011); A. Higgins, `Referral Fees ± The Business of Access to Justice' (2012) 32 Legal Studies 109

lost for the defendant's costs. Although in most cases this risk was just a remote one, there was still more protection: insurance for proper premiums, insurance could be arranged to help the claimant avoid any concerns regarding the financing of his claim. Could find. In this way, the claimant can seek damages if there is no financial risk. It is widely believed that it gave the contenders every reason to 'go away'. Similarly, it seems that violence has become a moral threat. The irregular culture of claiming to be hampered by these developments has led to widespread fears that violence has become a burden, rather than undermining society. Organisations, businesses, public institutions, and individuals are said to have risked fears of being prosecuted. The papers tell stories of council trees falling, teachers refusing to go to school, and volunteering in the fall. It is believed that insurance has also affected the availability and affordability of insurance. The culture of compensation is said to be 'robbing the UK economy' and the service is 'cutting through the public service budget to some extent'[30]. Thus, in contrast to traditional imagery, modern forms of violence are extremely fragile. However, in conjunction with the traditional picture, we can identify a contradiction between the concepts of violence in culture and the reality in practice.

CASE LAW:

Rule in Rylands v Fletcher

Anyone who in the course of "non-natural" use of his land "accumulates" thereon for his own purposes anything likely to do mischief if it escapes is answerable for all direct damage thereby caused. It imposes strict liability on certain areas of nuisance law. While in the UK, this rule is strictly "a remedy for damage to land or interests in land" and "damages for personal injuries are not recoverable under the rule", in India, the courts have developed this rule into a separate area of absolute liability rule, where an enterprise is absolutely liable, without exceptions, to compensate everyone affected by any accident resulting from the operation of hazardous activity. This differs greatly from the UK approach as it includes all kinds of resulting liability other than damage to land[31]

[30] In practice, in nine out of ten personal injury cases the uplift in fees is limited by industry-wide agreements. In road traffic accidents it is generally restricted to 12.5 per cent, in employment accident cases to 25 per cent, and in employment disease cases to 27.5 per cent. Civil Procedure Rules Part 45, ss. III, IV, V; G. Wignall (ed.), Conditional Fees, A Guide to CFAs and Litigation Funding (2008

[31] R.k baggiya law of tort.

TRENDS IN OUR PROPENSITY TO CLAIM PERSONAL INJURY COMPENSATION

Overview

Whilst historical data are in short supply, those which are available support the view that there has been a long-term increase in the number of personal injury claims. They appear to have arisen four-fold since the 1970s. The Pearson Commission estimated that there were 250,000 claims in 1973[32]. In 1988, the Civil Justice Review roughly estimated that there were around 340,000 claims[33]. In 2011±12, the Compensation Recovery Unit (CRU) recorded just over a million claims. Established in 1989, CRU administers the recovery of social security benefits from tort damages and holds reliable data on the number of claims pursued, whether successful or unsuccessful, settled or litigated. Unfortunately, CRU's data has only been publicly available since 2000 though data are available for 1997±98.81

Year	Number of claims	Year
Number of claims		
1973 (estimate)	250,000	2005/2006
674,422		
1988 (estimate)	340,000	2006/2007
710,784		
1997/1998	705,232	2007/2008
732,750		

Nor is it possible to see in the figures any immediate effects of the removal of legal aid and the expansion of CFAs in 2000. Indeed it is clear that between 2000 and 2006 when the media, politicians, and representative groups were bemoaning our ever increasing propensity to claim, the number of claims was relatively stable. In fact the number of accident claims, as opposed to those for disease, declined between 2003 and 2005. It is true, however, that claims have increased every year since 2006 though it is misleading to talk about general trends in our propensity to claim because different types of injury show different claim patterns

[32] LCD, op. cit., n. 13, para. 391. This estimate is given with no indication of the facts upon which it is based and seems not to be derived from the research from Inbucon Management Consultants, Civil Justice Review: Study of Personal Injury Litigation (1986)
[33] Pearson, op. cit., n. 6, vol. 2, para. 59

(b) Clinical negligence

Year	Number of claims
1973 (estimate)	700
2000/2001	10,901
2001/2002	9,779
2002/2003	7,977
2003/2004	7,121
2004/2005	7,205
2005/2006	9,321
2006/2007	8,575
2007/2008	8,876
2008/2009	9,880
2009/2010	10,308
2010/2011	13,022
2011/2012	13,517

The number of clinical negligence claims has thus increased significantly since the Pearson Commission's estimate in 1973. Between 2000 and 2010, however, the number of such claims fluctuated but did not increase overall. Although there has been a moderate increase in the past two years, clinical negligence claims continue to constitute only 1 per cent of all personal injury claims. Moreover, there appears to be a strong culture of not claiming in this context. The Department of Health has suggested that there are in the region of 850,000

`adverse events' annually in the National Health Service, half of which may be avoidable[34]. Whilst a crude measure, this suggests that only 2 per cent of people with grounds for complaint go on to pursue a claim.

(a) Employers' liability (accident and disease)

Year	Number of claims
1973 (estimate)	117,600
2000/2001	219,183
2001/2002	170,554
2002/2003	183,342
2003/2004	291,210
2004/2005	253,502
2005/2006	118,692
2006/2007	98,478
2007/2008	87,198
2008/2009	8 6,957
2009/2010	78,744
2010/2011	81,470
2011/2012	87,350

Between 2000 and 2005 the number of employers' liability claims fluctuated considerably. This was largely due to the establishment in 1999 of temporary special schemes of compensation for coal-mining diseases. These schemes closed in 2004 and since then the number of employers' liability claims has fallen by two thirds. Whilst there was an increase in 2011±12, there are still fewer claims made today than in 1973. Arguably this accords with increased health and safety at work. However, the Health and Safety Executive states that 115,379 injuries resulting in 3 or more days off work were reported by employers in 2010±11. In addition, 1.2 million working people were said to be suffering from a work-

[34] Internal memorandum of the Department of Social Security uncovered during research for Lewis, op. cit., n. 55, ch. 14

related illness, half a million arising that same year. On the basis of these statistics, the Trades Union Congress estimates that only 1 in 10 people injured at work go on to claim compensation.

4.The dissonance between the modern image of tort and reality

In many cases there is a contradiction between violence and reality on modern issues. Previously, while the number of clinical negligence and public liability claims has increased moderately long-term, this increase in owners' liability has not been sustained. In 2010 there were fewer such claims than 11 in 1973. Secondly, the perception that advertising claims, 'no-one' contracts, and referral payments have led to a growing number of claims in the wrong places in the late 1990s. Given the number of accidents leading up to the claim, the claim culture in the UK is relatively weak in the clinical, employment and public context. Third, the theory that we are more willing to make minor injuries claims than in the past is not supported by evidence. While it is true that the majority of claims involve minor injuries that cost less than £ 5,000, this has been the case for a long time. Fourth, the concerns that claimant claims have in common are exaggerated. There are inevitably fraudulent claims within the system. There are specific concerns regarding public liability claims. In a 2004 survey, 68% of councils reported an increase in the number of hard and fraudulent claims for compensation.[35] However, such evidence is plausible, and the extent of such claims is unclear. Public liability claims have not increased substantially since 2000 and this shows that advances in the torture system itself have not made a lot of stupid claims. In light of this, it is difficult to support these complaints that harassment has become a burden in recent years compared to the rising cost of claims, in fact government reviews suggest that complaints and complaints about availability are available to employers. The media's tolerance for liability insurance was exaggerated in the media. The increase in premiums was due to non-merger factors, including lower insurance costs, reduced investment income, and increased risk of re-insurance, apart from the rising cost of re-insurance following the terrorist attacks in September 2001. The boundary has been shown to be exaggerated and is largely generated by the idea of self-violence, rather than the practice of violence. Finally, they choose to privilege key critical accounts related to claims that represent a reduction in personal liability. The fact that the level of claim has not increased in recent developments in the violence system is

[35] Department of Health, An Organisation with a Memory: Report of an Expert Group on Learning from Adverse Events in the NHS (2000). T. Baker, The Medical Malpractice Myth (2005) ch. 2 reviews several American studies all finding a substantial failure to claim

indeed surprising. Felstiner et al. Explain that claims are made socially through the process of naming, accusing, and claiming. 90 According to this process, an individual perceives an unexpected traumatic experience as a harmful experience. (S) to. Attributes that have a traumatic experience for the error of another person or entity (s), and then voices that make the person or entity responsible for the problem (s). The authors emphasize that every phase of change is `thematic, unstable, reactive, complex and incomplete. Names, accusations, and understanding of and reactions to claims and situations and events in particular and with many factors will affect a person's response to injury[36]. Furthermore, it Moving on to the name, the indictment and the litigation process, the injured must be able and willing to do so, which will not always happen. Individuals can nominate but not claim or charge but claim. Claim levels, therefore, depend on external factors (which affect our ability and willingness to convert injuries to claims), and our legal awareness (which affects our perception of our ability to claim). , And informs our consent to do so.). Research has shown that, in the past, potential claimants were unable to make a claim because they did not know whether they could do so or did not know how to do so. In addition, their willingness to make a claim was reduced to fears that the claim would be stressful, costly and intimidating, and through doubts about the efficacy of the claim. We would expect large-scale `non-fee-fee advertising to be fueled by advertising, referral payments. Clearly, advertising not only raises awareness of the likelihood of making a claim after an accident, but also of our claim. Advertising wants to increase our willingness to make claims in a variety of ways. First, it can alleviate concerns about claiming and seeking legal advice. People can get anonymous tips through phone lines, thus eliminating the fear of dealing with lawyers face to face. Ads give the impression that claims are quick, easy, and stress-free, avoiding images of judges and court scenes Claims have been portrayed as normal, distorted, and administrative rather than contradictory in nature. In addition, by using the 'no fee now' tagline, advertising seeks to convince the public that getting legal advice and representation is free and easy. Secondly, advertising seeks to enhance the utility of claiming. They provide examples of compensation for different injuries in different contexts, highlighting the financial value of pursuing a claim. They also indicate that claims are often successful. Lastly, ads try to create a sense of entitlement and speak of 'rights' in compensation. However, the claim rate is lower for most injuries. From the limited data available, it is unclear whether the advertising of claims has not been effective in

[36] The claims of miners in respect of, first, respiratory disease, and secondly, the use of vibrating tools led to settlement schemes which were called `the biggest personal injury schemes in British legal history and possibly the world.' From 1999±2004 about 760,000 claims were registered: DTI, `Background to Coal Health Claims', at .

increasing our general competence and suitability of claims, or alternatively, whether it has been effective in motivating us to seek legal advice, But these levels of claiming are being stopped by lawyers on an economic basis. While CFAs can eliminate the financial risk of filing a claim with a claimant, they transfer the risk to the lawyer. Lawyers working on a 'one-on-one' fee have sufficient resources to invest until the end of the claim, and take the risk of not paying if the claim fails. There is some evidence of CFA lawyers sreening out economically unattractive claims as a result, although our knowledge and understanding of CFA practice is limited[37].

5,The exception in relation to road traffic accidents

Year	Number of claims
1973 (estimate)	103,300
2000/2001	401,757
2001/2002	400,445
2002/2003	398,892
2003/2004	374,761
2004/2005	402,924
2005/2006	460,097
2006/2007	518,821
2007/2008	551,905
2008/2009	625,072
2009/2010	674,997
2010/2011	790,999
2011/2012	828,489

[37] P. Fenn, A. Gray, and N. Rickman, The Impact of Conditional Fees on the Selection, Handling and Outcome of Personal Injury Cases (2002); P. Fenn, A. Gray, and N. Rickman, The Impact of Sources of Finance on Personal Injury Litigation (2002); R. White and R. Atkinson, `Personal Injury Litigation, Conditional Fees and After-theEvent Insurance' (2000) 19 Civil Justice Q. 11

In stark contrast to other types of claim, there has been both a long-term and short-term increase in the number of road traffic accident (RTA) claims involving personal injury. Between 2000 and 2004 the number of RTA claims actually declined but since 2004 it has increased each year with the result that over the last six years the total has doubled. This increase is largely responsible for the long-term increase in all personal injury claims. In 1973, RTAs constituted 41 per cent of all personal injury claims. By 2001 this had increased to 54 per cent and by 2012 RTAs constituted 80 per cent of all claims. This increase has occurred despite the fact that the number of casualties reported to the police is falling: only 222,146 road casualties were reported in 2009, less than a third of the number of claims pursued that year.93 Since 2007 claims for damage to vehicles alone have fallen, partly because people are driving less as a result of rising fuel costs. However, the proportion of these claims with a personal injury element has continued to rise.94 A large majority of people injured in RTAs go on to claim compensation and there is clearly a strong culture of claiming in this context. Whilst there has been some exaggeration, it is generally accepted that the increased number of RTA claims in recent years is causing problems with the affordability and availability of car insurance[38]. In addition, concerns surrounding the quality of RTA claims appear to have a stronger foundation. It seems that the increase in claims is largely attributable to an increase in whiplash claims, which reportedly constitute at least 70 per cent of all claims. By 2004, the United Kingdom already had twice the average number of whiplash claims compared with other European countries and since then the number of RTA claims has doubled.96 Whiplash injuries can result in chronic disability though many whiplash claims involve only trivial injuries from low-impact collisions and result in only short periods of severe pain, require no medical treatment, and result in no absences from work. Whilst data are in short supply, it does seem that we are more likely to claim for a trivial injury after an RTA than in other contexts. It also appears that we are more likely to engage in fraud in the RTA context. The problem is that whiplash may be established in many cases on the basis of a medical report which simply confirms that somebody has reported pain after an accident. Whilst many whiplash claims will be genuine, there is evidence of organised criminals staging or inducing collisions

[38] 5 HC Transport Committee, op. cit., n. 54 and Twelfth Report, Cost of motor insurance: follow up, HC (2010±12) 1451. Office of Fair Trading, Private Motor Insurance: Summary of Responses to the OFT's Call for Evidence (2011).

6.Those involved in an RTA are more likely to be contacted directly soon after the accident and encouraged to claim.

For most types of accidents, the claims market usually waits for potential claimants to respond to their advertisement. However, this is a very active process in relation to the RTA. Individuals are encouraged to make a claim by contacting a CMC and / or lawyer immediately after an accident. The reason is that it is easy for the claims market to find out who has been involved in the RTA. Garage, malfunctioning companies, and suppliers of alternative vehicles sell the details of those damaged to the CMC[39]. Some CMCs are also engaged in data mining by retrieving the names and addresses of the people referred to the CMC, but who are not currently claiming. They also get data from the insurance comparison website to find details of people who announced they had had an accident over the past three years. The biggest increase in claims is in the areas where claims management companies are concentrated. Surprisingly, lawyers also get the details of potential claimants from liability insurers. While insurers have expressed concern that the cost of resolving reference fee payment claims increases, some have decided to reduce their costs by selling details on non fault drivers. Report an accident on your policy. In fact, some insurers download their data to tele-seas companies to find out if they are injured. Although the practice of referral payments has been around for some time, lifting this ban in 2004 may go a long way in explaining the rise in RTA claims since then. Third-party arrests have also contributed to this escalation trend: Since about 2005, insurers have approached the injured through their policy holders and offered to settle before engaging in legal advice. Has tried to reduce the cost of resolving claims. It is not uncommon for accident victims to be contacted by a number of different sources, each of whom requests to make a claim. Compared to other accidents, when prompting people to claim after the RTA, the system is now highly institutionalised and efficient.

7.The process for resolving RTAs is quicker, simpler and more routinised than that in place for other types of claim and has a higher rate of success.

As stated in the first part of this article, the majority of claims are decided by insurers without the involvement of the courts. In order to effectively and economically process large numbers of low-cost claims, insurance companies have developed bureaucratic methods of dealing

[39] European Insurance and Reinsurance Federation (CEA), Minor Cervical Trauma Claims (2004) 4.

with claims. In practice the role of error has weakened and the system has become more liberal if all the cases have gone to court. The result is that the success rate of RTA claims is very high. As the number of RTA claims has increased over the years, the process for insurance companies to process them has become more commonplace. It ended in 2010 with the establishment of a 'portal' for RTA claims of up to $ 10,000, which provides fast, early electronic exchange of information related to claims between claimant lawyers and insurers. This usually leads to a high rate of claiming for several reasons[40]. They legitimise the process of identifying implicitly - the frequency and importance of a problem as well as the appropriateness of the actions taken in response to it. Finally, they can also encourage opportunistic and organised fraud because claims are not rigorously scrutinised or defended.

CONCLUSION

This article describes two sets of violent images that dominate the culture. The first set reflects different aspects of the traditional picture of justice. In contrast, the second group of images is recent and has to do with the development of the compensation culture. We have shown, in different ways and at different levels, how these images are practically different from the reality of violence. In describing how violence plays out, we have revealed the salient features of a culture of violence. In practice, violence is heavily influenced by institutions. In the first part of the article, we highlight the effects of both welfare and insurance. In the second part, our focus was on the influence of the market for `` new one-way claims " in recent years. Overall, the article describes how the process of violence affects the business interests and economic demands of the institutions around it. In terms of modern imagery, the claims market is essentially familiar, though it is far more exaggerated than in the context of road traffic accidents. However, in the context of traditional exposure, the impact of insurance is hidden and little is known. While the media ignores the truth in favour of entertaining but ambitious "stories" of greedy contenders and ambulance advocates, female scholars have largely ignored the truth in favour of ideology and ideology. They have done very little to remove many myths. Cultural images of violence fail to reflect how the personal injury compensation system operates.

[40] Pre-Action Protocol for Law Value Personal Injury Claims in Road Traffic Accidents and Practice Direction 8B to the Civil Procedure Rules. J. McQuater, `The RTA Claims Process' [2010] J. of Personal Injury Law 103.