

PREVALENCE OF VIOLENCE TOWARDS DOCTORS AND NURSES IN DHQ SAHIWAL

Zarish Gill, Student of BSN(Post RN) Independent College of Nursing, Faisalabad.

Date of Received: 07/05/2019

Date of Acceptance: 07/12/2019

ABSTRACT

Background: Providing care services at primary care centers require health care workers (HCWs) to closely interact with patients and their families, often under difficult circumstances. Patients and their relatives may behave aggressively or violently either due to their medical conditions, side effects of their medications, or dissatisfaction with the services provided by the health care facilities. Patients and their families may also have a history of violent behavior or feel frustrated and angry as a result of the patient's circumstances. **Objective:** (1) To identify the prevalence of violence towards doctors and nurses. (2) To identify the factors involved in the prevalence of violence towards doctors and nurses. **Study Design:** Descriptive Study. **Setting:** DHQ Sahiwal. **Period:** Jun 2017 to Jan 2018. **Material & Method:** A questionnaire was designed to be filled by 129 nurses working in the hospital. **Result:** The sample size of this research was 129 nurses and doctors working in hospital. 15.5% patients showed violent behavior while 84.5% of attendants were unvalued. Research revealed that 86.8 of the patients / attendants were illiterate and medical staff faced 58.1% psychological and 41.9% physical violence. **Conclusion:** Adequate Hospital staff security should be available all the time to avoid such incidences. Proper legislation and preventive measures should be organized.

Keywords: Violence, doctors, nurses, hospitals, patients

Article Citation: Gill Z. Prevalence of violence towards doctors and Nurses in DHQ Sahiwal. *IJAHS*, Apr-Jun 2020;02(74-80):01-07.

Correspondence Address

Zarish Gill
Student of BSN(Post RN)
Independent College of
Nursing, Faisalabad

INTRODUCTION

Working in health care is potentially an occupation at risk of violence. Providing care services at primary care centers require health care workers (HCWs) to closely interact with patients and their families, often under difficult circumstances. Patients and their relatives may behave aggressively or violently either due to their medical conditions, side effects of their medications, or dissatisfaction with the services provided by the health care facilities. Patients and their families may also have a history of violent behavior or feel frustrated and angry as a result of the patient's circumstances.¹ There was no consistent definition of workplace violence found in the literature, with variable definitions used in different studies. The World Health Organization (WHO) defined violence as: "The intentional use of physical force or power, threatened or actual,

against another person or against oneself or a group of people that results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development or deprivation." The National Institute for Occupational Safety and Health of the US Centers for Disease Control and Prevention defined workplace violence as: "violent acts (including physical assault and threats of assault) directed toward persons at work or on duty." Adapted from the European Commission, the WHO defined workplace violence as incidents where staff are abused, threatened, or assaulted in circumstances related to their work, including commuting to and from work, and involving an explicit or implicit challenge to their safety, well-being, or health.²

Working as support staff in emergency and

psychiatric units, violence is a commonly seen occurrence. In first-hand experiences, violence by patients and visitors has been detrimental to the staff and workplace environment. Research the effects of violence against nurses can result in physical injury, increased stress, and anxiety. Nurses and doctors were three times more likely than individuals in other professions to experience violence in the workplace. According to WHO, violence appears as physical violence or psychological violence in different forms, which may often overlap. Physical violence was defined as the use of physical force against another person that results in physical, sexual, or psychological harm. It may include beating, kicking, slapping, stabbing, shooting, pushing, biting, and pinching.³ Psychological violence was defined as intentional use of power, including verbal abuse, threats, intimidation, bullying/mobbing, and harassment. Verbal violence or abuse was defined as excessive use of language to undermine someone's dignity and security through insults or humiliation.

The National Institute for Occupational Safety and Health defined threats as the expressions of intent to cause harm, including verbal threats, threatening body language, and written threats. Intimidation is an intentional form of psychological violence that causes a normal person to experience fear or fright. Physical, verbal and emotional violence against nurses, in all areas of healthcare is increasing worldwide. A report from the United States, Bureau of Labor Statistics (2016) indicated the rate of injury in the healthcare setting was three times greater than the rate in private industries. The American Nursing Association (ANA, 2015) released a report, which indicated that “43% of nurses and nursing students had been verbally or physically threatened by a patient or patient's family member and 24% had been assaulted” (Lanctot and Guay 2014).

Objectives of the study

- To identify the prevalence of violence

towards doctors and nurses

- To identify the factors involved the prevalence of violence towards doctors and nurses

MATERIAL AND METHODS

Present research study was descriptive. This research was conducted in the DHQ hospital Sahiwal. For this purpose, a questionnaire was developed by using the five likert scale. Data was collected randomly from 129 nurses working in the hospital. Briefly interview survey method was used for the collection of data. Each item has five response options like strongly disagree, disagree, agree, neutral and strongly agree against their perceptions and experiences.

RESULTS

The current survey showed that there were 74 doctors and nurses age is Upto 20 years, 33 age is 21 to 40 years and 22 having the age between range 41 years to 60 years. the results showed that 59 respondents are unmarried and 70 percent respondents are married. in this research during survey it was revealed that 64 nurses and 65 doctors provides information. the respondents whose experience is 1 to 5 years were 64, whose experience is 6 to 10 years were 39 and whose experience is above 10 years are 26 respondents.

Table 4.2 Demographic Information

Demographic Information		Results	
		Frequency	%
Age	Upto 20 years	74	57.4
	21-40 Years	33	25.6
	41-60 years	22	17.1
Marital Status	Unmarried	59	45.7
	Married	70	54.3
Job Status	Nurse	64	49.6
	Doctor	65	50.4
Experience	1-5 Years	64	49.6
	6-10 Years	39	30.2
	Above 10 Years	26	20.2

The survey results indicated that there are 17 patients and 112 attendants in the survey or during the survey. 20 patients and 109 attendants

were revealed as violent behavior towards nurses and doctors. 75 nurses and doctors faced the verbal violence abusing and the 54 nurses and doctors faced the physical violence.

Table 3. Frequency of Violence

Statement		Results	
		Frequency	%
Most of your Patients and/or Attendants are	Literate	17	13.2
	Illiterate	112	86.8
Who is more violent (or aggressive) towards you?	Patients	20	15.5
	Attendants	109	84.5
What type of violence did you experience the most?	Psychological	75	58.1
	Physical	54	41.9

33 nurses and doctors strongly agreed with the statement that attendants are scared 36 agreed, 35 showed neutral response, 20 disagreed and 4 strongly disagreed with the statement. According to the results 42 nurses and doctors strongly agreed with the statement that they often experience violent behavior from patients' attendants, 53 agreed, 28 showed neutral response, 5 disagreed and 1 strongly disagreed with the statement. 25 nurses and doctors strongly agreed with the statement that they have been insulted from patients' attendants, 46 agreed, 39 showed neutral response, 11 disagreed and 8 strongly disagreed with the statement. 41 nurses and doctors strongly agreed with the statement that they have been experiences non-cooperative attitude from patients' attendants, 46 agreed, 35 showed neutral response, 5 disagreed and 2 strongly disagreed with the statement.

Table 4. Psychological Violence

Statements	Strongly disagree	disagree	Neutral	Agree	Strongly agree
	Freq %	Freq %	Freq %	Freq %	Freq %
I often experience that Patients' attendant behaved unpleasantly?	42 32.6	53 41.1	28 21.7	5 3.9	1 .8
I have been insulted by patients or their relatives	25 19.4	46 35.7	39 30.2	11 8.5	8 6.2
I often experience that patients' attitude is non-cooperative and aggressive?	41 31.8	46 35.7	35 27.1	5 3.9	2 1.6

Sometimes I hear jokes or remarks at work	28 21.7	51 39.5	25 19.4	19 14.7	6 4.7
Sometimes, patients and attendants stare me with lustful eyes which make me uncomfortable	33 25.6	36 27.9	35 27.1	20 15.5	4 3.1
Sometimes, patient or attendants try to harass me at work	26 20.2	37 28.7	45 34.9	15 11.6	6 4.7
Sometimes I have been facing unwanted behavior from patient side	24 18.6	49 38	0 0	43 33.3	13 10.1
Sometimes Patients are not satisfied with my performance?	23 17.8	52 40.3	38 29.5	12 9.3	4 3.1
I have been verbally abused on my workplace.	29 22.5	50 38.8	26 20.2	18 14	6 4.7
I have been threatened on my workplace.	29 22.5	42 32.5	38 29.5	17 13.2	3 2.3
Most often, I have been upset while dealing with patients at work	20 15.5	46 35.7	36 27.9	21 16.3	6 4.7
Sometimes, I have been criticized publicly by patients/relatives	33 25.6	34 26.6	35 27.1	19 14.7	8 6.2
I have faced verbal violence from patient and / or attendant while performing duty	30 23.3	39 30.2	36 27.9	20 15.5	4 3.1
Sometimes I have been tortured mentally at work	22 17.1	46 35.7	33 25.6	19 14.7	9 7
Sometimes, I have been given aggressive message /remark at work	27 20.9	39 30.2	36 27.9	20 15.5	7 5.4
Sometimes, I have been verbally abused due to hospital fees and dues (expensive treatment)?	31 24	31 24	40 31	21 16.3	6 4.7
Most likely, I think that I will experience misconduct on duty	34 26.4	39 30.2	32 24.8	22 17.1	2 1.6
Mostly, I have been facing the emotional difficulty while performing my duty	27 20.9	41 31.8	44 34.1	14 10.9	3 2.3
At least once, I have been feared to death from patient or attendant	27 20.9	38 29.5	28 21.7	25 19.4	11 8.5

29 nurses and doctors strongly agreed with the statement that they have been threatened on workplace, 42 agreed, 38 showed neutral response, 17 disagreed and 3 strongly disagreed with the statement. 29 nurses and doctors strongly agreed with the statement that they have been verbally abused, 50 agreed, 26 showed neutral response, 18 disagreed and 6 strongly disagreed with the statement. 29 nurses and doctors strongly agreed with the statement that they have been faced the problem that patients are not satisfied with their services, 52 agreed, 38 showed neutral response, 12 disagreed and 4 strongly disagreed with the statement. 24 nurses and doctors strongly agreed with the statement that they have been faced the unwanted behavior, 49 agreed, 0 showed neutral response, 43 disagreed and 13 strongly disagreed with the statement.

Table 5. Physical Violence

Statements	Strongly disagree	disagree	Neutral	Agree	Strongly agree
	Freq %	Freq %	Freq %	Freq %	Freq %
I have been Physically beaten by punch or kick (or tried to do so) by patient or attendant?	18 14	37 28.7	36 27.9	20 15.5	18 14
I have been injured by a patient or attendant at my workplace	9 7	35 27.2	46 35.7	22 17.1	17 13.2
Sometimes, I have been forcefully stopped from giving treatment	17 13.2	34 26.4	43 33.3	26 20.2	9 7
Sometimes, I have to act physically to stop or escape from patient side violence.	19 14.7	41 31.8	32 24.8	27 20.9	10 7.8
I have been attacked with sharp object	22 17.1	29 22.5	27 20.9	29 22.5	22 17.1
Sometimes, I have been scratched at work by patients / attendants	25 19.4	29 22.5	22 17.1	34 26.4	19 14.7
Most often, I have been pulled or pushed at work	25 19.4	22 17.1	40 31	21 16.3	21 16.3

28 nurses and doctors strongly agreed with the

statement that remarks are passed are scared 51 agreed, 25 showed neutral response, 19 disagreed and 6 strongly disagreed with the statement. 20 nurses and doctors strongly agreed with the statement that patients dealing is so upset 46 agreed, 36 showed neutral response, 21 disagreed and 6 strongly disagreed with the statement. 33 nurses and doctors strongly agreed with the statement that patients they are criticized by patients 34 agreed, 35 showed neutral response, 19 disagreed and 8 strongly disagreed with the statement.

39 agreed, 36 showed neutral response, 20 disagreed and 4 strongly disagreed with the statement. 22 nurses and doctors strongly agreed with the statement that patients they are tortured mentally by patients 46 agreed, 33 showed neutral response, 19 disagreed and 9 strongly disagreed with the statement. 27 nurses and doctors strongly agreed with the statement that they faced aggressive behavior by patients 39 agreed, 36 showed neutral response, 20 disagreed and 7 strongly disagreed with the statement. 31 nurses and doctors strongly agreed with the statement that they are verbally abused by patients 31 agreed, 40 showed neutral response, 21 disagreed and 6 strongly disagreed with the statement.

34 nurses and doctors strongly agreed with the statement that they experienced misconduct by patients 39 agreed, 32 showed neutral response, 22 disagreed and 2 strongly disagreed with the statement. 27 nurses and doctors strongly agreed with the statement that they faced difficulty from patients' side, 41 agreed, 44 showed neutral response, 14 disagreed and 3 strongly disagreed with the statement. 27 nurses and doctors strongly agreed with the statement that they feared about patient's death, 38 agreed, 28 showed neutral response, 25 disagreed and 11 strongly disagreed with the statement.

According to the results 18 nurses and doctors strongly agreed with the statement that they physically beaten by punch, 37 agreed, 36 showed

neutral response, 20 disagreed and 18 strongly disagreed with the statement. 9 nurses and doctors strongly agreed with the statement that they injured by patient or attendant, 35 agreed, 46 showed neutral response, 22 disagreed and 17 strongly disagreed with the statement. 17 nurses and doctors strongly agreed with the statement that they forcefully stopped from giving treatment, 34 agreed, 43 showed neutral response, 26 disagreed and 9 strongly disagreed with the statement. 19 nurses and doctors strongly agreed with the statement that they physically stop or escape from patient side, 41 agreed, 32 showed neutral response, 27 disagreed and 10 strongly disagreed with the statement. 22 nurses and doctors strongly agreed with the statement that they have been attacked by patients, 29 agreed, 27 showed neutral response, 29 disagreed and 22 strongly disagreed with the statement.

25 nurses and doctors strongly agreed with the statement that they have been scratched by patients and attendants, 29 agreed, 22 showed neutral response, 34 disagreed and 19 strongly disagreed with the statement. 25 nurses and doctors strongly agreed with the statement that they have been pulled or pushed by patients and attendants at work, 22 agreed, 40 showed neutral response, 21 disagreed and 21 strongly disagreed with the statement.

DISCUSSION

Zhao et al.⁴ completed a cross-sectional survey of health care professionals from 19 hospitals in six Chinese cities between July and October 2014. Approximately, 126 participants from each of the 19 hospitals were chosen. A questionnaire developed in 2003 by the International Labor Office (ILO), International Council of Nurses (ICN), Public Services International (PSI), and WHO was used to survey the individuals. Information collected included demographics, workplace violence anxiety, live experiences, and prevention. Of the 1,793 health care professionals who responded, 170 had been

exposed to physical violence, and 1,241 had been exposed to psychological violence over the previous 12 months.

Baby et al.⁵ confirmed through semi-structured interviews of 13 registered nurses (RNs) and 1 licensed practical nurse (LPN) from a mental health unit in New Zealand that verbal abuse was experienced daily. Physical violence was experienced, but not as often as verbal violence. Negative side effects seen in nurses after these experiences included anxiety, frustration, and burnout.

Ryan et al conducted a prospective study on assault against staff by youths in a state psychiatric hospital for children and adolescents to examine the frequency and nature of violence directed at staff. The study sample comprised all 111 patients who were hospitalized during the study period and 140 employees who had patient contact, including direct care staff, clinicians, and teachers. All staff who were involved in the direct care of patients were asked to complete a confidential questionnaire immediately after the assault. Of the 111 participants, the 37 who committed assaults during the course of the study were deemed to be assaultive. Most incidents against staff resulted in no detectable physical injury. However, 99 incidents produced level 2 or 3 injuries: six assaultive incidents resulted in injuries that required medical attention. The results of this study indicate that physical assault against staff in child and adolescent psychiatric settings is frequent and problematic.

Winstanley and Whittington.⁶ conducted a study on "Aggression towards health care staff in a UK general hospital: variation among professions and departments". This study extends existing research by evaluating physical assault, threatening behavior and verbal aggression from patients/visitors towards general hospital staff in the context of different professions and

departments. Results showed that aggression is widespread. Within the preceding year, 27% of the respondents were assaulted, 23% experienced threatening behavior from patients and 15.5% experienced threatening behavior from visitors. Over 68% reported verbal aggression, 25.7% experiencing it more regularly than monthly. Staff nurses and enrolled nurses reported the most assaults (43.4%) and doctors, the fewest (13.8%). Other nursing grades and health care professions all reported levels of physical assault in excess of 20%.

Lin, and Liu.⁷ conducted a study on “the impact of workplace violence on nurses in south Taiwan”. The purpose of this study was to explore the prevalence of workplace violence (WPV) committed by patients and their family members against healthcare workers in south Taiwan. Two hundred and thirty nurses in a 400-bed hospital were sent surveys. The Chinese workplace violence incident questionnaire with 32 items was designed by the researcher. The instrument was distributed to nurses by their head nurses. Completed questionnaire were returned within one week to the appropriate head nurse. Nearly two third of the nurses reported experiencing a WPV event. A majority of the nurses representing a variety of clinical settings in nursing, reported experiencing WPV, including verbal and physical. Many nurses reported experiencing more than one WPV event. However, the experience of WPV significantly differed depending on the subject's education, Years of nursing practice at the time of WPV events, age, and training against violence were not found to be associated with WPV. Experience of WPV among nurses in Taiwan was common especially the verbal type and all settings were potentially high risk.

Avander et al.⁸ described the indirect verbal violence as patients or visitors using a certain tone of voice when speaking or used indirect threats towards nurses. This was often seen

when patients were not happy with their care or they were not satisfied with what was done for them. Often, patients used indirect verbal threats towards nurses when they were talking to family members or visitors about how they were displeased with their care.

CONCLUSION

The results indicated that there is prevalence of violence towards doctors and nurses in hospitals. Most common types of violence in hospitals are as support staff in emergency and psychiatric units, violence is a commonly seen occurrence. In first-hand experiences, violence by patients and visitors has been detrimental to the staff and workplace environment. Research the effects of violence against nurses can result in physical injury, increased stress, and anxiety. Nurses and doctors were three times more likely than individuals in other professions to experience violence in the workplace. 15.5% patients showed violent behavior while 84.5% of attendants were its cause. Research revealed that 86.8 of the patients / attendants were illiterate and medical staff faced 58.1% psychological and 41.9% physical violence. Adequate Hospital staff security should be available all the time to avoid such incidences. Proper legislation and preventive measures should be organized.

REFERENCES

1. Adib, S. M., Al-Shatti, A. K., Kamal, S., El-Gerges, N., & Al-Raqem, M. (2002). Violence against nurses in healthcare facilities in Kuwait. *International journal of nursing studies*, 39(4), 469-478.
2. Avander, K., Heikki, A., Bjerså, K., & Engström, M. (2016). Trauma nurses' experience of workplace violence and threats: Short-and long-term consequences in a Swedish setting. *Journal of trauma nursing*, 23(2), 51-57.
3. Baby, M., Glue, P., & Carlyle, D. (2014). 'Violence is not part of our job': A thematic analysis of psychiatric mental health nurses' experiences of patient assaults

from a New Zealand perspective. *Issues in mental health nursing*, 35(9), 647-655.

4. Gates, D. M. (2004). The epidemic of violence against healthcare workers.
5. Gillespie, G. L., Gates, D. M., Miller, M., & Howard, P. K. (2010). Violence against healthcare workers in a pediatric emergency department. *Advanced Emergency Nursing Journal*, 32(1), 68-82.
6. Lanctôt, N., & Guay, S. (2014). The aftermath of workplace violence among healthcare workers: A systematic literature review of the consequences. *Aggression and violent behavior*, 19(5), 492-501.
7. Lin, Y. H., & Liu, H. E. (2005). The impact of workplace violence on nurses in South Taiwan. *International journal of nursing studies*, 42(7), 773-778.
8. Przybylski, A. K., Ryan, R. M., & Rigby, C. S. (2009). The motivating role of violence in video games. *Personality and Social Psychology Bulletin*, 35(2), 243-259.
9. Winstanley, S., & Whittington, R. (2004). Aggression towards health care staff in a UK general hospital: variation among professions and departments. *Journal of clinical nursing*, 13(1), 3 10.
10. Zhao, S., Xie, F., Wang, J., Shi, Y., Zhang, S., Han, X., ... & Liu, X. (2018). Prevalence of workplace violence against Chinese nurses and its association with mental health: A cross-sectional survey. *Archives of psychiatric nursing*, 32(2), 242-247.

AUTHORSHIP AND CONTRIBUTION DECLARATION

Sr. #	Author's Full Name	Contribution to the paper	Author's Signature
1	Zarish Gill		