

The Assessment of Workplace Violence against Nurses among the Public Hospitals of Lahore, Pakistan

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Abstract

Introduction: *Violence is defined in the Oxford Dictionary as “Behavior including physical drive expecting to harm, harm, or slaughter somebody or something” (OED, 2014). The World Wellbeing Organization (WHO) characterized working environment savagery as “Incidents where staff are mishandled, undermined or attacked in circumstances related to their work, counting commuting to and from work, including an express or understood challenge to their security, well-being or health” (Richards, 2003).*

Literature: *In the United States of America (USA), the Bureau of Labor Statistics stated that there was a 6% increase in violence in private health care and social assistance sector, reaching 19,360 cases in 2012 (BLS, 2013). In Europe, 26% of educational and health workers thought that their safety or health was at risk. However, 12% of them were actually subjected to intimidation (Paoli & Merle, 2001).*

Methodology: *The study design for this study was descriptive cross sectional.*

Result: *Results analysis of different components of this research study such as the Demographic data, Workplace Violence by Patients and Their Families against Nurses among Participants. The*

qualification of the participants. There were 69.0% Diploma nurses in the study, 28.0% of the nurses were BSN and 3% others participates

Discussion: *The sample size of this study was 137, the questionnaire fill from the staff nurses to assess the perception of the nurses about the Workplace Violence by Patients and Their Families against Nurses, in this study male participants were 0 and female participants were 100 %, the qualification of the participants 69.0% Diploma nurses in the study, 28.0% of the nurses were BSN and 3% others participates.*

Conclusion: *The purpose of this study was to assess Workplace Violence by Patients and Their Families against Nurses, data was collected from the staff nurses through questionnaire which was analyzed on spas which result show the participants score such as The score of the participants about the **Have you experienced the curse by others at workplace** in which 29% participants score were strongly disagree, 37% were disagree, 15% were neutral, 11% were agree and 8% were strongly agree.*

Key words: Workplace Violence, Physical Violence, Behaviors.

INTRODUCTION

1.1 Background

Violence is defined in the Oxford Dictionary as “Behavior including physical drive expecting to harm, harm, or slaughter somebody or something” (OED, 2014). The World Wellbeing Organization (WHO) characterized working environment savagery as “Incidents where staff are mishandled, undermined or attacked in circumstances related to their work, counting commuting to and from work, including an express or understood challenge to their security, well- being or health” (Richards, 2003). Workplace violence has major effects not only on lives but also on productivity and quality of customer care (Gates, 2011).

Workplace violence frequently occurs in health-care environments. In spite of the fact that the definition of viciousness varies depending on practice settings or circumstances, there's agreement that savagery within the working environment is hindering to the wellbeing and prosperity of medical attendants and to the arrangement of quality nursing care.² Working environments incorporate healing centers and long-term care facilities, as well as hone settings within the community such as essential care destinations, outreach administrations, instructive educate, and clients' homes (Kitaneh & Hamdan, 2012).

Definition of Workplace Violence This policy statement defines work environment viciousness as 'an occurrence of hostility that's physical, sexual, verbal, passionate or mental that happens when medical caretakers are mishandled, debilitated or attacked in circumstances related to their work'. (Gates, 2011).

Enrollment and support inside the Ontario nursing workforce may well be a major concern for government and nursing organizations.¹⁹ With 21.3 per cent of the nursing workforce qualified to leave as of 2005, issues of upkeep and enrollment are without a doubt more pressing.²⁰ Brutality inside the work environment direct impacts the number of individuals who enter or remain inside the nursing calling

Workplace violence may occur in any department in the hospital or nursing home, but Nurses who worked in ED were more likely to experience WPV than in any other department as reported. (Abou-ElWafa et al, 2014).

Although any health care worker is at risk for WPV, nurses and aides are the most vulnerable personnel to violence, as they have direct contact with patients, families, relatives (Gilany & Amr, 2010)

Nurses have been reported to be subject to several forms of verbal violence including shouting or yelling; swearing or

cursing (Smith et al, 2009); racial statements (Franz et al., 2010), and threats (Roche, 2011).The highest incidence of threatening nurses was in Australia (66%) (Roche et al., 2010) and Germany (55%) (Franz et al., 2010)

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This high percentage of WPV against nurses in Jordan made it significant for investigators. Based on database search, there are scarce review papers investigating WPV against nurses by patients or their families, and it is limited to EDs The aim of this review is to explore the profundity, aspects, and consequences of WPV against nurses by patient or their families and potential preventive measure (Taylor & Rew, 2011).

Medical caretakers working in all segments of wellbeing care are at hazard for viciousness. Discoveries from the 2005 National Study of the Work and Wellbeing of Medical caretakers appeared that in Ontario 28.4 percent of respondents had been physically attacked by a persistent within the past twelve months and 2 per cent had been physically attacked by somebody other than an understanding. (Richards 2006)

2.1 LITERATURE REVIEW

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19,360 cases in 2012 (BLS, 2013). In Europe, 26% of educational and health workers thought that their safety or health was at risk. However, 12% of them were actually subjected to intimidation (Paoli & Merle, 2001).

In 2002, the WHO reported the incidents of physical and psychological violence against health care workers reached 37% in Bulgaria, 54% in Thailand, 61% in South Africa, and 41% in Lebanon (WHO, 2002).

Recently, WPV in healthcare settings has been identified in Jordan when the chairmen of the Jordanian Medical and Nurses Associations declared that incidents of violence against health care workers have been escalated (Sameh, 2006).

A Turkish think about found that 64.6 and 55.6% of medical caretakers who detailed verbal and physical viciousness, individually, gotten wasteful reactions in avoiding savagery; there was no self-evident follow-up input for reports; they were on edge of losing their employments, being faulted by chairmen, and dreaded legitimate methods that would take after the occurrences (Pinar & Ucmak, 2011).

However, an American study revealed that nurses believed that reporting incidents of violence might have an adverse effect on customer service. On the other hand, nurses perceived reporting ED violent incidents as a sign of incompetence or weakness; it was not important because of lack of physical injury to staff as a result of WPV. Thus, they looked at violence as it was something that came with the job. Finally, lack of support from administration/ management was the main barrier for reporting violence (Gacki-Smith et al., 2009)..During assault, 37.5% and 44.7% of nurses reported that they told the person to stop the verbal violence, and almost half of nurses (45%) tried to defend themselves physically during the physical violence (Abu al rab 2011).

PROBLEM STATEMENT:

Workplace violence is a serious worldwide concern, especially for the health care professional. Workplace violence is getting increase due to over burden of patients in the hospital and had great impact on the quality care of the patients and nursing job satisfaction. The research problem addressed in the study focused to analysis the magnitude of workplace violence and their effects on nurse's job satisfaction and quality care. Moreover, it addressed how workplace contributes negatively to the quality of the patient care. Actions are needed to prevent the workplace violence to enhance quality care and nurses job charge nurse.

SIGNIFICANCE:

As workplace violence have great effects on quality of care therefore, studding the causes of workplace violence i.e. aggressive behavior, workload and long shifts negatively impact on the job stress and quality care, is significance for the health care providers, medical staff, hospital management, policy makers of health care system as well as for the patients.

OBJECTIVE:

To identify the consequences of workplace violence in nursing.

3. METHODOLOGY

3.1 Study Design

The study design for this study was descriptive cross sectional.

3.2 Study Setting

The setting used for the study will be Doctor Hospital.

3.3 Study Population

The data for the study will be taken from the nurses. The total population is 300.

3.4 Sample size

Slovins formula will be used to obtain the sample size of the study participants.

$$n = N / 1 + Ne^2$$

If

$$N = \text{population} = 300$$

$$e = \text{Margin of error} = 0.05$$

$$n = \text{sample size} = 137$$

Then

$$n = N / 1 + (N) (e)^2$$

$$n = 300 / 1 + 200(0.05)^2$$

$$n = 300 / 1 + 200(0.0025)$$

$$n = 300 / 1 + 0.5$$

$$n = 300 / 1.5$$

$$n = 200$$

So, the sample size will be 137 nurses.

3.5 Sampling Strategy

Convenient sampling strategy will be used in this study.

3.6 Inclusion Criteria

- Nurses who have more than one year of clinical experience will be included in my study
- The staff nurses willing to participate in the study.

3.7 Exclusion Criteria

- Those nurses who have less experience than one year will be excluded from this study.
- Those who not willing to participate.

3.8 Study Variables

3.8.1 Dependent variable. The dependent variable are Workplace and violence.

3.8.2 Independent Variables. The independent variable is sexual Harassment, Aggressive behavior of the family.

3.9 Research instrument

The instruments of this study will be Likert scale Questionnaire. The questionnaire discusses the variables of this study. This questionnaire will be distributed among the participant which will be informed verbally, and consent form will be also attached.

3.10. Data collection

Data will be collected through the structured questionnaire. Approval for this study will be taken from the ethical committee and HOD.

3.11. Data Analysis

Data was analyzed by using the SPSS version 21.0 Tables and graphs will be used along with inferential data analysis.

3.12. Ethical Consideration

The moral and ethical values of the participants will be respected. The ethical principles to research on human participants will be considered important aspect.

Confidentiality. The personal information like name, phone number and address in the access of the primary researcher and will not mentioned in research. The information of the participants will not leaked in any way throughout the study.

Autonomy. The participants given information about the possible benefits and risks of the research and will not free to

sign the consent. Justice. All the nurses had the equal right to participate or withdraw.

Veracity. The true information will provide to the participants before giving the consent and no portion of the truth will be covered from the participants.

3.13 Time framework the time will take from February to June (approximately 4 month).

4. DEMOGRAPHIC DATA ANALYSIS AND RESULTS

4.1. Data Analysis and Results

This chapter includes Results analysis of different components of this research study such as the Demographic data, Workplace Violence by Patients and Their Families against Nurses among Participants. Table 1 shows that male participants were 0 and female participants were 100 %

Table 1: Gender

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid female	100	100.0	100.0	100.0

Table 2: Qualification

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid diploma in nursing	69	69.0	69.0	69.0
bsc nursing	28	28.0	28.0	97.0
other	3	3.0	3.0	100.0
Total	100	100.0	100.0	

Table 2 shows about the qualification of the participants. There were 69.0% Diploma nurses in the study, 28.0% of the nurses were BSN and 3% others participates.

Table 3

Marital Status					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	married	17	17.0	17.0	17.0
	single	83	83.0	83.0	100.0
	Total	100	100.0	100.0	

Table 3 shows the marital status of the participants which shows that married participants were 17% and 83% participants were single.

Table 4: Stay In Organization

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	less than 1 year	17	17.0	17.0	17.0
	1-5year	78	78.0	78.0	95.0
	6-10year	3	3.0	3.0	98.0
	above10 year	2	2.0	2.0	100.0
	Total	100	100.0	100.0	

Table 4 shows that 11.5% of the participants were age 18-25 years, 70% were age 25-30, and 25% participants were in age group 35-50 while 4.0% of the participants were from age above 50 years. It also shows that 1% of the study participants were males while 0% participants were Females. Similarly, 100% participants were Nurses, 100% of the participants regarding experience of the study participants,

Table 5: Age Group

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	18-25	70	70.0	70.0	70.0
	25-30	25	25.0	25.0	95.0
	35-50	4	4.0	4.0	99.0
	above50	1	1.0	1.0	100.0
	Total	100	100.0	100.0	

Table 5 show the participants about stay in organization in which 17% people were less than 1 year, 78% people were from 1 to 5 years, 3% people were from 6 to 10 years, and 2% participants were from above 10 years.

Have you experienced the curse by others at workplace

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid strongly disagree	29	29.0	29.0	29.0
disagree	37	37.0	37.0	66.0
neutral	15	15.0	15.0	81.0
agree	11	11.0	11.0	92.0
strongly agree	8	8.0	8.0	100.0
Total	100	100.0	100.0	

Have you experienced the yelling by others at workplace

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid strongly disagree	15	15.0	15.0	15.0
disagree	37	37.0	37.0	52.0
neutral	22	22.0	22.0	74.0
agree	19	19.0	19.0	93.0
strongly agree	7	7.0	7.0	100.0
Total	100	100.0	100.0	

The score of the about the **Have you experienced the yelling by others at workplace** in which 15% participants score were strongly disagree, 37% were disagree, 22% were neutral, 19% were agree and 7% were strongly agree.

Have you experienced the impolite speech from others at workplace

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid strongly disagreed	13	13.0	13.0	13.0
disagree	29	29.0	29.0	42.0
Neutral	16	16.0	16.0	58.0
Agree	28	28.0	28.0	86.0
strongly agree	14	14.0	14.0	100.0
Total	100	100.0	100.0	

The score of the about the **Have you experienced the impolite speech from others at workplace** in which 13% participants score were strongly disagree, 29% were disagree, 16% were neutral, 28% were agree and 14% were strongly agree.

Have you ever threatened by anyone at workplace

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid strongly disagreed	31	31.0	31.0	31.0
disagree	32	32.0	32.0	63.0
neutral	18	18.0	18.0	81.0
Agree	11	11.0	11.0	92.0
strongly agree	8	8.0	8.0	100.0
Total	100	100.0	100.0	

The score of the about the **Have you ever threatened by anyone at workplace** in which 31% participants score were strongly disagree, 32% were disagree, 18% were neutral, 11% were agree and 8% were strongly agree.

DISCUSSION

This cross-sectional study assesses the Workplace Violence by Patients and Their Families against Nurses In doctor hospital

Lahore. The sample size of this study was 137, the questionnaire fill from the staff nurses to assess the perception of the nurses about the Workplace Violence by Patients and Their Families against Nurses, in this study male participants were 0 and female participants were 100 %, the qualification of the participants 69.0% Diploma nurses in the study, 28.0% of the nurses were BSN and 3% others participates. The marital status of the participants which shows that married participants were 17% and 83% participants were single. The age of the participants was 11.5% of the participants were age 18-25 years, 70% were age 25-30, and 25% participants were in age group 35-50 while 4.0% of the participants were from age above 50 years. It also shows that 1% of the study participants were males while 0% participants were Females. Similarly, 100% participants were Nurses, 100% of the participants regarding experience of the study participants, stay in organization in which 17% people were less than 1 year, 78% people were from 1 to 5 years, 3% people were from 6 to 10 years, and 2% participants were from above 10 years.

This study also show score of the participants about variable which were the score of the participants about the **Have you experienced the curse by others at workplace** in which 29% participants score were strongly disagree, 37% were disagree, 15% were neutral, 11% were agree and 8% were strongly agree.

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CONCLUSION

The purpose of this study was to assess Workplace Violence by Patients and Their Families against Nurses, data was collected from the staff nurses through questionnaire which was analyzed on spas which result show the participants score such

as The score of the participants about the **Have you experienced the curse by others at workplace** in which 29% participants score were strongly disagree, 37% were disagree, 15% were neutral, 11% were agree and 8% were strongly agree, which shows that more participants score was strongly disagree.

LIMITATIONS OF THE STUDY:

Limitations of the study were following

- Lees sample size 137 due to which we cannot generalize this study on whole population.
- One of limitations of this study was lack of time
- Daringness of participants to participate in study was also a big obstacle
- Convenient sampling technique was used which often suffer from biasness

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