



# MWIA TRAINING MODULE ON VIOLENCE

## Abuse in Healthcare Professionals' Relationships

### Definition of the type of abuse<sup>1</sup>

Any action, incident or behaviour in a medical institution that creates an environment of stress, fear, stalking, and/or bullying among workers or between managers, supervisors, employees or apprentices; or where staff are abused, harmed, threatened, assaulted, or sexually harassed, compromising their safety, well-being or health.

### General facts/Prevalence rates

- Violence in the health sector constitutes about 25% of all workplace violence and occurs in all countries and health sectors.<sup>1</sup>
- Over 50% of health sector workers are affected by verbal abuse.<sup>1</sup>
- Prevalence of workplace violence is higher in the health sector (24%) than in other sectors (4-7%),<sup>3</sup> and is likely underreported.
- Psychological violence is more frequent than physical violence.<sup>1</sup>
- Internal workplace abuse prevalence varies from 4-5% in Northern Europe to 15% in Southern Europe. Cultural characteristics and social change, explain prevalence rate variation as well as research methodology.<sup>4</sup>
- Bullying is reported by 44% of USA nurses at some point during their career and by 41% of European health professionals.<sup>4</sup>
- Perpetrators are predominantly male (75%), and stalking and sexual harassment victims are predominantly females (82-88%).<sup>5</sup>
- Nurses and trainees reported more threats, aggression, physical assaults, and episodes of sexual harassment than doctors.<sup>6</sup>
- About 43% of nurses and 34% of nursing students reported enduring one or more episodes of workplace violence.<sup>5</sup>
- Approximately 13% of nurses and 7% of students reported physical assault.<sup>5</sup>
- An estimated 14% of nurses and 6% of students reported sexual harassment.<sup>5</sup>

### Risk Factors<sup>2</sup>

#### Individual Factors

- Both genders can suffer as a result of their position within an organisation
- Certain groups are more vulnerable than others (e.g. women, junior employees)
- Employees who experience conflict at work are more likely to experience conflict in other contexts (e.g. with partners, family, friends)

#### Organisational Factors

- Variables modulating level of workplace bullying include workload, role ambiguity and conflict, organisational change, leadership behaviour, social support from co-workers, and workplace culture.
- Organisational restructuring and outsourcing enlarge the power gap between managers and employees, and increase bullying.
- Less powerful employees may be blamed in an attempt to redirect team aggressiveness.
- Highly dedicated employees may be more vulnerable to stressors at work.

#### Contextual Factors

- High levels of bureaucracy and job security can protect bullies and propagate bullying.
- Middle managers are more likely to suffer workplace bullying, due to "Management Squeeze" whereby middle managers are pressured to implement unpopular policies as a result of senior decisions.
- Job insecurity, dissatisfaction with work and salary, emotionally demanding duties and working in the public health sector increases the likelihood of managers being bullied.
- Risk of bullying among nurses is increased due to work overload and extra supervision by managers, doctors and chief nurses.

## Prevention<sup>1</sup>

Any approach should be integrated, participatory and involve all parties, sensitive to culture and gender, non-discriminatory and systematic. Special emphasis should be placed on:

- Making prevention the primary focus with measures to improve the work environment, work organisation and interpersonal relationships. These preventative measures need to be introduced without waiting for workplace violence to be manifest
- Maintaining a preventative culture and policy towards workplace violence.
- Keeping policies under review and ensure updating
- Identifying and reducing risks by analysing incidents, sick leave and staff turnover, workplace inspections, discussion with workers etc. Any known act of workplace violence should be recorded
- Initiatives to raise awareness at all levels should accompany any intervention

### References

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6. Phillips, J. P. (2016). Workplace violence against health care workers in the United States. *New England Journal of Medicine*, 374, 1661-69