Work Place Violence among Nurses: Its Effect on their Work Stress

Thesis

Submitted for Partial Fulfillment of Master Degree in Nursing Sciences (Nursing Administration)

By

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2018

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First and foremost, I feel always indebted to Allah to whom I relate any success in achieving any work in my life.

I would like to express my deep appreciation to **Prof. Dr.**Harisa Elshemy, Professor of Nursing Administration Faculty of Nursing, Ain Shams University for her precious help, moral support, fruitful advice, kind attitude and her valuable remarks that gave me the confidence and encouragement to fulfil this work.

I am immensely indebted and deeply grateful to **Dr. Heba**Omar, Lecturer of Nursing Administration Faculty of Nursing, Ain

Shams University, for her great encouragement, excellent guidance,
powerful support, valuable constrictive advices and generous help,
precious time, relentless mentoring and valuable support.

Special thanks are also extended to all the participants in this study who gave their time and cooperation during data collection.

Magda Ebrahim Abasery

Dedication

I would like to dedicate this thesis to

My Parents

Husband

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All My Family

For Their Love, care, support and encouragement that allowed me to accomplish this work

Magda EbrahimAbasery

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Abstract

Workplace violence and work stress are serious problems and tackling they can result in significant harms to organizations. Workplace violence and stress have effects on health and performance. Aim: The aim of this study is to assess the relationship between workplace violence and stress among nurses **Design:** A descriptive, correlational design was used. **Setting:** the study conducted at kafer- Elzayat General Hospital affiliated to ministry of health. **Subjects:** The subjects of this Study included all the available nurses their total number is 134. Tools of data collection: two tools were used namely workplace violence in health sector questionnaire sheet and Expanded nursing Stress scale. Results: high statistically significant relation was shown between nurses' total stress and workplace violence. As regard, a statistically significant negative correlation was revealed between workplace violence and stress **Conclusion:** The Bullying domain of work place violence among nurses working in Kafer Elzayat is the highest, while racial harassment is the lowest one with a high level of stress with negative correlation. **Recommendations:** The workplace violence policy must be developed for the healthcare institutions to guide nurses in case of violence. The dimensions of work stress among nurses need to be investigated by the hospital administrators regularly.

Keywords: Workplace Violence, Work Stress, Nurses.

Introduction

Workplace violence affects the dignity of millions of people worldwide. It is a major source of workplace inequality, discrimination, stigmatization and conflict. It is becoming a central human rights issue. At the same time, workplace violence is increasingly appearing as a serious, sometimes lethal threat to the efficiency and success of organizations. Violence causes immediate and often long-term disruption to interpersonal relationships, the organization of work and the overall working environment (WHO, 2010).

Workplace violence affects practically all sectors and all categories of workers; the health sector is at major risk. Violence in this sector may constitute almost a quarter of all violence at work. Under the strain of reforms, growing work pressure and stress, social instability and the deterioration of personal interrelationships, workplace violence is rapidly spreading in the health sector. Recent studies confirm that workplace violence in the health sector is universal, although local characteristics may vary, and that it affects the health of both women and men, though some are more at risk than others (**Di Martino, 2002**).

Workplace violence is not a new phenomenon and is often sensationalized by the media when an incident occurs. Verbal abuse is a form of workplace violence that leaves no scars. However, for nurses, the emotional damage to the individual can affect productivity, increase medication errors, and incur absenteeism, and decrease morale and overall satisfaction within the nursing profession. This results in staffing turnover and creates a hostile work environment that affects the culture within the organization (**Araujo and Sofleld, 2011**).

Workplace violence in the health sector is a worldwide concern with healthcare workers being at high risk of becoming victims. Violence includes any physical assault, verbal abuse or threatening behavior occurring in a workplace setting. Both physical and non-physical violence against health care worker is a major problem affecting their health and productivity. Moreover, the consequences of workplace violence in the health sector have a significant impact on the effectiveness of health systems, especially in developing countries (Schablon et al., 2012).

The risk factors of workplace violence were largely explored in the environmental and patient factors. Viitasara and Menckel (2002) declared that violence was influenced

by underlying structural and situational risk factors. Regarding patient profiles, patients manifesting higher levels of thinking disturbances, hostile-suspiciousness and agitation-excitement presented higher risk of violence (Chen et al., 2009). Alcohol-induced psychosis, schizophrenia with alcohol abuse, and substance abuse increased offending behaviors. Anderson (2002) found that staff with abuse history was more vulnerable to physical violence and sexual harassment. The relationship with patients, not the gender was a predictor of violence (Chen et al., 2009).

The negative consequences of violence impact heavily on the delivery of health care services, which could include deterioration in the quality of care provided and the decision by health workers to leave the health care professions. This in turn can result in a reduction in health services available to the general population (**Aydin et al., 2009**).

Stress is an important factor affecting health and wellbeing of a person. Specific associations between perceived stress and hardiness can reflect the characteristics of workers in particular professions (Sindik et al., 2014). The negative effects of occupational stress on health have been extensively reported (Bayram and Bilgel, 2008), and all the reports indicate that escalating, profound and

rapid changes in organizations are increasingly causing occupational stress to affect the workforce (Killam et al., 2012).

Though such effects concern all professions, the professionals of services and health attention seem to be particular victims of this situation. Among the different health professions, nursing has been considered a profession highly susceptible to stress. Nursing stress is considered a problem that affects the practice worldwide (Montgomery et al., 2013), The effect of stress has been considered an important cause of decreasing health and reduction in the level of efficiency of nursing field (He et al., 2012).

Nursing is a profession that are highly vulnerable to stress, and it is considered that the nurses are exposed to problems that affects the practice worldwide (Ladstatter et al., 2014). The rapid changing health care environment has put enormous strain on healthcare workers at all levels. Downsizing, restructuring, and right sizing have become popular words in most health care organizations. This has been especially true in hospitals, where a crushing push toward economic viability impose stress (Sindik et al., 2014).

Significance of the study:

Work place violence is a major problem facing nurses in all over the world and in Egypt. In Ismailia the study of **Fahim** (2010) found out that nurses of both sex were at high risk of work place violence and most of them have been victims at one time or another. Another study by Samir (2012) assessed exposure to work place violence and its types and nurses' reaction found that the majority of nurses (86.1%) had been exposed to work place violence. Stress and violence are increasingly noted in health sector workplaces. Doctors, nurses and social workers are all high on the list of occupations with serious stress levels, while violence in the health sector constitutes almost a quarter of all violence at work. Employers and workers are equally interested in the prevention of violence and severe stress at the workplace, therefore the aim of this study is to assess the relationship between workplace violence and stress among nurses. It is hoped that this study can help to initiate action to tackle violence and stress among nurses.

Aim of the Study

The aim of this study is to assess the relationship between workplace violence and stress among nurses through:

- 1. Assessing types of workplace violence among nurses
- 2. Assessing level of work stress among nurses.
- 3. Finding out the relationship between workplace violence and work stress among nurses.

Hypothesis:

There is an effect of work place violence on work stress among nurses.

Review of Literature Workplace Violence

Definition of violence:

Violence is defined as the international use of physical force or power, threatened or actual, against oneself, another person, or against a group, or community that either results in or has a harm, mal development or deprivation (WHO, 2012). Violence can be defined as an act of violence includes physical force such as slapping, punching, kicking and biting use of an object as a weapon aggressive behavior such as spitting, scratching and pinching or verbal threat involving no physical contact (Nolan et al., 2001).

Workplace violence defined as violent acts directed toward person at work or on duty. A workplace may be any location either permanent or temporary where an employee performs any work-related duty. It ranges from offensive or threatening language to homicide (Occupational Safety and Health Administration, 2008).

According to the National Institute for Occupational Safety and Health (NIOSH, 2006), workplace violence is defined as violent acts (including physical assaults and