

Workplace Violence against Nursing Staff in Maternal and Child Health Centers

Thesis

*Submitted for Partial Fulfillment of the Master Degree
In Nursing Sciences (Community Health Nursing)*

By

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List of Abbreviations

Abb.	Meaning
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AAOHN	American Association of Occupational Health Nurses
BLS	Bureau of Labor Statistics
CCTV	Closed Circuit Television
CDC	Centers for Disease Control
IAHSS	International Association of Healthcare Security and Safety Foundation
ILO	International Labor Office
IRRTs	International Regulatory Review Teams
MCH	Maternal and Child Health
NIOSH	The National Institute for Occupational Safety and Health
OPM	Office of Personnel Management
OSHA	Occupational Safety and Health Administration
WHO	World Health Organization
WPV	Workplace Violence

Abstract

Workplace Violence against Nursing Staff in Maternal and Child Health Centers

By

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Workplace violence against nurses is a significant problem in health care settings all over the world. **The aim:** The study aims to assess workplace violence against nursing staff in maternal and child health centers. **Research Design:** The study was descriptive study design. **Sample:** Convenience sample was conducted among all nurses at maternal and child health centers included 275 nurses. **Setting:** All maternal and child health centers of Markz Abu Hommos, El-Beheira, Governorate, Egypt. **Tools:** One tool was used, data was collected using an interview questionnaire sheet including the following parts: **Part I:** Socio-demographic characteristics, **Part II:** Work characteristics and risk factors contributing to workplace violence, **Part III:** Prevalence of the various types of workplace violence, **Part IV:** Policies and regulation to deal with workplace violence, **Part V:** Knowledge of nurses regarding types of workplace violence, **Part VI:** Performance of nurses regarding types of workplace violence, **Part VII:** Attitudes of nurses regarding types of workplace violence. **Result:** This study revealed that less than one quarter of nurses were victim to physical violence and sexual harassment, more than two third of them exposed to psychological workplace violence. More than half of nurses had unsatisfactory knowledge and majority of nurses have negative attitude and low performance toward the workplace violence. **Conclusion:** There were significant statistically relationship between knowledge, attitudes and performance of nurses and exposure to different types of workplace violence. There were significant statistically relationship between work characteristics of nurses and exposure to different types of workplace violence. **Recommendation:** Developing effective workplace violence prevention programme to restrict workplace violence and protect nursing staff in MCH centers, such as a mandatory incident reporting system, review of security teams' responsibilities, and incident follow-up by management.

Keywords: Workplace Violence, Nursing Staff, Maternal and child health centers.

Introduction

Workplace violence (WPV) is defined as mistreatment, threatening behavior or insults, including physical or psychological violence, workplace violence is a serious global social issue and has been a common and important issue in the medical setting as well as in the home, at school and in the military (*Hahn et al., 2016*).

There are many harmful effects of workplace violence on persons such as physiological, psychosomatic, and behavioral, when a violent act is brought to the nurses, they must take steps to investigate and the person who did this must be answerable and steps should be taken to decrease such cases, many new and old nurses have experienced violence or had seen violent cases in workplace (*Mingli et al., 2016*).

Physical and psychological violence were manifested forms in the workplace, physical violence is historically the most reported and researched form of violence against nurses, it is now recognized that verbal abuse, harassment, bullying and mobbing behaviour can have negative consequences and that action must be taken to reduce these forms of WPV (*Holmes et al., 2015*).

Workplace violence causes decrease in professional efficiency and negatively affects nurses' quality of work, they are less satisfied with their job and not agree to stay and work there, they are anxious and not willing to perform duty, can result in continual exhaustion and sleep disturbances, and harmfully affect the level of patient care (*Speroni et al., 2014*).

Nurses' performance in MCH centers may be influenced by workplace violence, which is contributing to the loss of professional nursing manpower and a low retention rate among MCH nurses, ultimately has a negative impact on a country's social welfare and health (*Lancôt & Guay, 2014*).

Workplace violence effects can be profound at an individual, organizational level and social consequences, negative consequences involve: injury; disability; death; impaired emotional health; decreased job satisfaction; compromised job performance; lost days of work; increased healthcare costs; damaged facilities and a destabilized workforce, all ultimately affecting the quality of patient care (*Hahn et al., 2016*).

Worldwide, three in four nurses experienced verbal or physical abuse such as yelling, cursing, grabbing,

scratching or kicking from patients and visitors, morbidity and mortality weekly report notes that injuries from workplace violence in nurses and nurse assistants almost doubled between 2012 and 2014 (*Speroni et al., 2014*).

Maternal and child health centers should provide a safe as possible work environment, staff protection from violence needs to be incorporated into the design of buildings and should include facilities such as time-out areas and quiet places, in addition, nurses should be able to call for help when needed and for security guards, and items such as personal alarms and duress alarms may be useful in some areas (*Malik et al., 2016*).

Nurses are the chief providers of MCH services, they have an ever expanding role in family planning, prenatal care, postnatal care, woman health service and child health services and breast feeding, the specific objectives of MCH care focuses on the reduction of maternal, perinatal, infant and childhood mortality and morbidity (*Kailash, 2014*).

Significance of the study:

Employees of health sector are exposed to violence; nurses are at the highest risk because they provide direct service to patients and play a pivotal role in the quality of services provided to these patients (*Heckemann et al., 2015*).

Workplace violence against nurses is a significant problem in health care settings all over the world and in Egypt, in Mansoura university hospitals, Egypt research found that relative/visitor was the most common type of perpetrator for physical, verbal violence, and bullying (61.8%, 63.6%, and 50.8%) respectively (*Samir et al., 2014*).

Workplace violence in Ismailia, Alexandria and Mansoura Governorates, Egypt hospitals and MCH centers revealed that verbal abuse was the most frequent recorded violence action (70%-76%), followed by physical abuse (67%), bullying/ mobbing (60%) and least was sexual harassment (2%-9%) (*Elkhawaga et al., 2015*).

Aim of the Study

This study aims to assess workplace violence against nursing staff in maternal and child health centers through:

- 1- Assessing the prevalence of different types of violence against nurses working in maternal and child health centers.
- 2- Assessing the nurses' knowledge, attitudes and their performance regarding types of violence against nurses working in maternal and child health centers.
- 3- Assessing associated factors of different types of violence against nurses working in maternal and child health centers.

Research questions:

- 1- What is the prevalence of various types of violent events witnessed or experienced by nurses working in maternal and child health centers?
- 2- What are nurses' knowledge, attitudes and their performance regarding types of violence against nurses working in maternal and child health centers?
- 3- What are associated factors of different types of violence against nurses working in maternal and child health centers?
- 4- Is there relationship between nurses' knowledge and their performance regarding types of workplace violence in maternal and child health centers?
- 5- Is there relationship between work characteristic and workplace violence in maternal and child health centers?