Chapter 59 Violence Against Healthcare Workers

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ABSTRACT

The focus of this chapter is violence against healthcare workers. Issues surrounding inconsistent definitions, various data collection strategies, and concerns of underreporting will be discussed. The prevalence of violence in regard to locations, perpetrators, and types of violence, as well as risk factors for violent behaviors will be identified. An examination of the impact of violence in this setting and current responses or strategies to address and prevent such violence concludes the chapter.

INTRODUCTION

The COVID-19 pandemic thrust healthcare workers into the spotlight in an unprecedented fashion. As the global community was battling and attempting to contain the spread of COVID-19, an outpouring of gratitude for those on the front lines of the pandemic was demonstrated worldwide. The altruism of these providers, often working in a strained healthcare system without adequate personal protective equipment and at risk themselves for developing COVID-19, provided a light for the public during a time of dark uncertainty.

DOI: 10.4018/978-1-6684-7464-8.ch059

However, at the same time these providers were being celebrated—and indeed long before the pandemic—they were working in unsafe environments not only due to the COVID-19 virus but because of the global reality that healthcare workers are some of the most frequent victims of workplace violence (Brophy et al., 2017; Longo, 2016; Occupational Safety and Health Administration [OSHA], 2016). Occasionally, extraordinary examples of violence against healthcare providers are deemed newsworthy. The November 2018 shooting at Mercy Hospital in Chicago, for example, received international attention: A domestic dispute between Dr. Tamara O'Neal, an emergency department doctor, and her former fiancé ended with both parties and two others, including pharmacy resident, Dayna Less, and Chicago police officer, Samuel Jimenez, deceased (Gorner, 2018). What is more common, though not widely addressed, are the occurrences of healthcare providers encountering various forms of violence typically from patients or patients' relatives or visitors. This is the seemingly epidemic global reality that is workplace violence in the healthcare sector.

Violence or threats against healthcare providers represents one of the largest public health issues today (International Committee of the Red Cross, 2018). While more common in certain sectors, no location, department, or provider is immune. The circumstances of these violent encounters are also different from incidents of violence in other industries. For example, whereas violent assaults against convenience store workers or transit drivers are often related to robbery, similar assaults against healthcare providers are typically at the hands of patients or their family members who are experiencing frustration and vulnerability. The negative effects on the victim are profound, with physical, psychological, emotional, work functioning, quality of care, social, and financial consequences (Lanctôt & Guay, 2014). Despite the incidence and consequences of this violence, few evidence-based interventions have been implemented to protect these workers (Gillespie et al., 2014), and the cases rarely are reported to law enforcement (Longo, 2016). These issues will be discussed in this chapter. The authors begin, though, with a discussion on the difficulty of defining workplace violence in healthcare, thus resulting in elusive concrete numbers concerning the frequency and incidence of this violence.

Chapter Objectives

- Discuss the issues and challenges in determining the rate of violence in the healthcare setting.
- Identify common characteristics and risk factors of the types of violence, locations, perpetrators, and victims of violence.
- Examine the consequences and impact of violence in the healthcare setting.
- Recognize current responses and strategies implemented to address violence in the workplace.

BACKGROUND

Little empirical literature existed on violence against healthcare providers prior to 2000 (Brophy et al., 2017). It is now a phenomenon that has received increasing attention, particularly concerning violence against nurses (Bradley & Moore, 2004; Gerberich et al., 2005; McPhaul & Lipscomb, 2004; OSHA, 2016). To understand violence in the healthcare system, it is necessary to first discuss definitions of terms and types of workplace violence more generally.

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