

# Nurses' attitude towards patient violence in emergency department

## Introduction

A safe and therapeutic environment in all health care institutions is imperative for healthcare workers to deliver high quality care for people with different health needs. Unfortunately, patients' aggression and/or violent behaviors' towards health care workers are common phenomena in various clinical settings. These phenomena are not only limited to psychiatric care institutions/units but also extended to general care settings such as hospitals.<sup>1</sup> While workplace violence can occur between various disciplines, patient violence towards nurses represents the most common form in the health care institutions.<sup>2,3</sup>

An Emergency department (ED) is a major gateway to health care for a large proportion of the general population.<sup>4</sup> It is identified as one of the most high-risk areas for patient violence.<sup>5</sup> Indeed, the prevalence of patient violence in EDs has risen to an alarming figure worldwide. Around 25% of the nurse respondent's experienced physical assaults more than 20 times in the 3 years preceding Gacki-Smith and his colleagues' study,<sup>6</sup> and almost one-fifth of them experienced frequent verbal abuse.

## Impact of workplace in health care setting

The short-term and longer-term impacts of patient violence are both substantial at both individual and organizational level. At the individual level, violence leads to both physical and psychological trauma, including frustration and anger.<sup>7</sup> Staff may become afraid of patients and their job performance may be affected after an incident of patient violence.<sup>8</sup> At the organizational level, patient violence is associated with lower quality of care provided for their patients.<sup>9</sup> It also produces significant longer-term effects on recruitment and retention of nurses.<sup>10</sup>

## Contributing factors of violence

There are many factors involved in the presentation of patient violence in EDs. From the theoretical perspective, it can be the result of patients' genetic abnormalities, unresolved personal conflicts, and a response to frustration at perceived unmet needs.<sup>11,12</sup> However, none of these theories can fully explain the complexity of patient violence in the ED. It also assumes patients are largely responsible for their violent behaviors and fails to consider other contextual factors. Indeed, there is a growing recognition on understanding the causes of patient violence from multiple angles are broadly classified into patient-related; environment-related and interaction-related factors, which include staff morale, patient/staff ratio and ward policy and staff variables such as their educational level and years of clinical experience.<sup>13</sup>

## Nurses' attitude towards violence

With more understanding of these risk factors, the frontline nurses may feel much safer and more confident in management of patient aggression, as well as in establishing therapeutic nurse-patient communication and relationships.<sup>14</sup> However, as suggested

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by many nurse researchers that nurses' attitudes towards causes and management of patient violence have a far-reaching impact, which can largely vary across patient populations and clinical settings. Therefore, the nurses' perception towards patient aggression and its correlated factors are worthwhile to study because nurse is a decision maker of how to improve their patient care and prevent any harms or injury on both staff and patients.<sup>15,16</sup> Besides, nurses' attitudes can be mutually transferred to colleagues through communication and forming a culture in wards. The future managing style of nursing students after graduation also may be affected through professional socialization,<sup>17</sup> which is the process by which individuals acquire the values, attitudes, morals, knowledge and skills owned by the group.<sup>18</sup> Thus, it is important to obtain present nurses' attitude regarding patient violence and take measures to avoid cultivating a negative attitude among 'future' nurses.<sup>19-21</sup>

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## Conflict of interest

The author declares no conflict of interest.

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