Abstract

Many researches have been emerged to study workplace violence in the health sector, focused on identifying prevalence, rates, capturing experiences of violence and developing strategies for preventing and controlling of violence. In complement to these studies, exploring the magnitude and consequences of the problem is very important. For that, this study was conducted to be complementary to these previous projects and studies. The aims were to explore the magnitude and consequences of violence against physicians and nurses in Palestinian Governmental Hospitals in the north of W.B.

To achieve the purposes of this study a descriptive, quantitative, non-experimental design was adopted. The data collection instrument was developed based on the Minnesota University instrument. And it was adapted to meet Palestinian community. Data was entered and analysed using the Statistical Package for the Social Sciences (SPSS-16.0), Win Pepi exe and the Microsoft Excel software.

The study was held at five Palestinian Governmental Hospitals in the north of W.B during (2011). A stratified proportional random sample was obtained from the study population with a sample size (271) and 88.7% response rate.

The results showed that there is significant prevalence and magnitude of violence in the studied Palestinian hospitals, results found about 20.8 % of the participants were exposed to physical assaults, Non-physical (59.5%), from non-physical about, 19.6% threat, 38.3% verbal abuse and only 1.7% sexual harassment. The events, which were recorded, were mostly (80%) single and in the evening. In addition, most physical assaults (%22) happened in office stations and patients' rooms. The most symptom felt due to physical assault was anger (44%). As for non-physical violence, the main symptoms felt were anger and headache (50.3%). The main part of the body affected was face rated (26%), (64%) of the perpetrators used hand to attack, while non-physical violence occurred face to face and rated 84.6%, with limited restriction in work.

Exposures for non-physical violence, were mostly female (59.7%), nurses(71.6%) who are middle-aged(50%) with low level of education(61.9%), little experience 43.4%, working in shift 67.8% and mostly working in emergency and medical-surgical departments(23.8%), but for physical violence exposures were mostly male (56%) , nurses(68%), with low level of education, less experience(40%), working in shift(76%), in E.D (28%) and medical surgical words (20%). While perpetrators were mostly males (76%), patients' relatives 44%, under influence of illness, while most of them 58% not impaired, with middle aged group 52% for physical. But for non-physical violence with old age group 42.7%, female 76% and not impaired 53.8%. Also there was statistical significant (P<0.05) between physical violence by age, gender and experience of exposures, where was more rate of violence in young age, male and low experience. In non-physical violence, also there was statistical significant (P<0.05) between non-physical violence by age, experience, education, marital status and department, where was more rate in young age , low experience, single and in medical surgical and Emergency departments.

The rate of reporting of incidents was low and limited (17.3%). Respondents thought that reporting was not important rated 20.8% and they were mostly afraid of negative consequences rated (20%). While 60 % of the respondents indicated that there were no specific policies or procedures or education programs to deal with violence, some preventive measures in work place like video cameras and security men are available.

The study emphasized the high prevalence and negative consequences of violence in the Palestinian health sector. It recommended developing surveillance (information) system for violence events, introducing educational programs for health personnel for dealing with violence and communication process, developing procedures and policies to prevent violence in work place, strengthening coordination between stakeholders including governmental and non-governmental agencies, professional unions and police to control and minimise the magnitude and consequences of violence. Further research is needed on the magnitude and consequences of violence in the non-governmental/ private health institutions.