

Violence Against Healthcare Professionals in ICUs



A new study reviewed existing literature on workplace violence (WPV) against healthcare workers (HCWs) in ICUs, focusing on prevalence, risk factors, interventions, and preventive measures. WPV, defined as violent acts or threats directed towards individuals at work, is a significant issue globally, with HCWs experiencing a 20% higher rate compared to other employees. However, WPV incidents are often underreported due to various factors, including the absence of reporting systems and professional stigma.

The consequences of WPV for HCWs, such as stress, burnout, and increased turnover intentions, are profound but inadequately documented. While some studies discuss WPV prevalence and propose preventive measures, comprehensive data remains scarce, especially in ICU settings.

This study seeks to fill this gap by providing a systematic literature assessment to inform targeted interventions to address WPV in ICUs and mitigate its adverse effects on HCWs. The study aims to investigate the prevalence, risk factors, impacts, and strategies for preventing violence against healthcare workers, specifically within intensive care units.

The researchers searched several academic databases, including PubMed, Scopus, Google Scholar, EMBASE, Cochrane, and Web of Science, to identify studies focusing on violence against healthcare workers in adult ICUs. They gathered information on risk factors, patient characteristics, and the impact on healthcare workers. Additionally, they evaluated the quality of the studies, potential biases, and the level of evidence using standardised assessment tools. This meta-analysis incorporated 75 studies involving 139,533 healthcare workers across 32 countries.

The findings revealed a substantial frequency of violence against healthcare workers in ICUs, with a median occurrence of 51%. Verbal violence was the most common, affecting up to 97% of healthcare workers, followed by physical violence, experienced by up to 82%. Meta-analysis indicated average frequencies of 31% for physical violence, 57% for verbal violence, and 12% for sexual violence. Patients were identified as the primary perpetrators (56%), followed by visitors (22%). Certain risk factors for experiencing violence were identified, such as young age, less work experience, and being a nurse. Patients exhibiting violent behaviour were often male, older, and influenced by drugs. Despite the prevalence, violence was significantly underreported (up to 80% of cases), leading to higher rates of burnout, increased anxiety, and intentions to leave the job. However, the overall level of evidence was deemed low.

Workplace violence in ICUs is prevalent and often goes unreported, posing significant risks to healthcare workers. This underscores the urgent need for increased awareness, proactive screening, and preventive measures. Further research is warranted to explore potential risk factors associated with violence in these settings.

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