

## ORIGINAL ARTICLE

# Violence against Dental Surgeons: An Analytical Cross-Sectional Study

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## ABSTRACT

**Background:** Violence and aggression against physicians has been reported commonly in Pakistan but there is still dearth of documented literature available on this global dilemma.

**Methodology:** A pre-validated, online questionnaire was formed on 'google forms' and distributed among 640 dentists of average age 30 years. This questionnaire consisted of demographic data, multiple basic questions about workplace abuse and violence that dentists have felt or experienced during their duty hours and work set ups. It also included the experience of violence against dentists by offenders and their experience regarding institutional and hospital support provided in these situations.

**Results:** A total of 524 dental surgeons participates in the research. It was discovered that most (85%) of the dental surgeons have faced some sort of abusive events in the past one year. Similarly, 62% of the study population had suffered moderate events whereas, approximately 38% had faced severe violent incidents. Dentists mostly face verbal abuse, followed by emotional, physical and sexual. The abuser is mostly the patient or his / her relative.

**Conclusion:** Violence or abuse is considerably common in the field of dentistry and dentists have negative perception about institutional support regarding this matter.

**Keywords:** Public health; Awareness; Dentistry; Human rights; Violence

## INTRODUCTION

Violence towards healthcare physicians in different hospitals is a widespread problem. According to past literature aggressive behaviour against healthcare physicians is significantly prevalent and makes healthcare workers vulnerable to stress and anxiety<sup>1, 2</sup>. Due to continued stress, they endure poor confidence and low self-esteem, which results in failure to perform their duties. A high percentages of such cases from all around the world have been reported<sup>3</sup>. Violence can be described as any activity, action or an event that results in social, psychological, and / or physical harm to the other person(s)<sup>4</sup>. Thus, violence can be classified as verbal, physical, emotional and sexual<sup>5</sup>. Only a few studies have documented the important causes of different types of violence, and it was found that three main factors were leading to different violent episodes which were environmental factors, patients nurse communication and several factors related to the patients<sup>6</sup>. Other important causes found from previous literature are long waiting time, over-crowding, communication gap, lack of security in hospital settings, misconceptions about treatment strategies, illiterate patient<sup>7</sup>. Abuse or aggression against medical professionals is considered to be high in Pakistan yet no peer review has been published to address this issue among dentists. To take it into account, we conducted a survey among dental professionals having following objectives: To determine the awareness regarding causes of violence, types of aggression, the percentage of dental professionals who have experienced any form of

aggression from their patients, peers or attendants, and to quantify the sense of safety felt by dental surgeons in their workplaces, during on call duties in different dental hospitals and private clinics. Also, to determine the impacts and approaches to violence and how to report and prevent violence against dental professionals.

## METHODOLOGY

The study was conducted in accordance with the principles of research presented in the 'Declaration of Helsinki', and ethical approval was obtained from concerned institutions and hospitals. A survey was conducted in different dental institutions and clinics in Lahore, Pakistan. An online, questionnaire was formed on Google forms and validated by three professionals of the field. The form was circulated through email and WhatsApp<sup>8</sup>. Participants included in survey were the head of departments, post graduate faculty, post graduate trainees and consultants. Ethical approval was done from respective hospitals. The researchers collected data through convenient and snowballing sampling technique. A written informed consent was obtained from the participants who filled the online questionnaire. The questionnaire consisted of several parts, first part was informed consent, the second part asked about demographics, the third part inquired about the awareness and experience of any form of abuse and violence against dentists, and the final part collected the perceptions of dentists about policies and laws related to workplace abuse. In regard to demographics, age, gender, workplace, public/private job, occupation and

family income were implored. In the second part, 20 questions were asked related to abuse or aggression. Questions were marked on a 5-point Likert scale with the score of 1 for 'not safe at all' to 5 for 'very safe'. The questions asked were about the knowledge of dentists' regarding workplace violence, the type of violence, safety measures at workplace, the number of violent attacks they had faced in the last 12 months, type of abuser, gender which is most likely to be abused at workplace, whether or not dentists received any institutional or hospital support against workplace abuse. The intensity of aggression was categorized into mild, moderate, and severe<sup>9</sup>. They were Verbal abuse (Mild), Intimidation (Moderate), Any form of threat (Moderate), Physical attacks (severe), Sexual harassment (severe), Theft (severe), Weaponry attacks (severe) and Damage to family or property (severe).

The entire data was collected and transferred to SPSS software version 22.0. Pearson Chi-square and Fisher's test were used to analyze data for categorical variables. For numerical variables, independent t-test was applied. A p value of less than 0.05 was considered statistically significant.

**RESULTS**

A total of 524 dental surgeons participated in our study, out of which 330 (62.9%) were females and 194 (37.03%) were male dentists. The demographics of the study participants are shown in Table 1.

Table 1: Demographics of the study population

Demographic		Number (N)	Percentage (%)
Gender	Female	330	62.9
	Male	194	37.03
Qualification	General Dentist	298	56.8
	PG trainee	154	29.4
	Specialist	72	13.7
Job specification	Government	178	33.9
	Private	346	66.0

The frequency and percentage of reported abuse cases are presented in Table 2. About 80% of the study population had faced some sort of violence in the past one year.

Table 2: Frequency and distribution of reported violence cases in Pakistan

Characteristic		Frequency (n)	Percentage (%)
Violence in the last one year	Yes	419	79.9
	No	104	20.0
Overall frequency of violence	Once	284	67.7
	2-3	83	19.8
	More than 3	37	8.1
	Not specified	15	3.5
Characteristics of the abuser and the person abused			
Type of abuse	Physical	40	9.5
	Verbal	247	58.9
	Sexual	29	6.9
Type of abuser	Emotional	103	24.5
	Relatives of patient	126	30.0

	Patient	203	48.4	
	Colleague / peer	89	21.2	
	Other	1		
Reported the abuse	Yes	62	14.8	
	No	357	85.2	
Response of the abusee	Informed a legal party / superior authority	92	21.9	
	Defended myself verbally	145	34.6	
	Defended myself physically	75	17.9	
Emotional experience about the abuse	Took no action	107	25.5	
	Fear / Stress	206	39.3	
	Anger / Frustration	298	56.8	
	Headache / Fatigue	154	29.4	
	Sadness	101	19.2	
	Irritability	99	18.9	
	Suicidal thoughts	4	0.9	
	Difficulty speaking	15	3.5	
	Friends or family that have been attacked by violence		284	67.7

We also asked the dentists about their perceptions regarding policies relating to violence at workplace. The results of which are displayed in Table 3.

Table 3: Dentists' perceptions regarding policies related to violence

Properties		Total (n)	P value
Who do you think is more abused?	Males	100	0.001
	Females	393	
	Both	31	
Is there a procedure for reporting violence in workplace?	Yes	25	0.001
	No	499	
Are you satisfied with the way your administration deals with cases of violence	Yes	79	0.002
	No	445	
Is there a policy against workplace violence where you work?	Yes	207	0.002
	No	317	
Do you believe you are protected by the law?	Yes	98	0.001
	No	426	
Are there actions to investigate violence cases?	Yes	154	0.001
	No	370	

**DISCUSSION**

Our study showed that about 80% of dental surgeons face some kind of violence at their workplace and majority of the abusee are females. Violence against physicians is not a new concept. The rate of violence in Middle-East is about 63%<sup>5</sup>, whereas in Europe it is 38.3%. In India, it has been

reported that 77.7% of doctors face workplace violence<sup>10</sup> and upto 75% in China<sup>11</sup>. On a daily basis, healthcare workers have to face several different challenges on the account of their daily practice. Healthcare workers are burdened with long hour shifts, double duties and extraneous workload, violence against them just adds to their anxiety. Our study explored violence against a particular type of healthcare workers, dental surgeons.

Very few studies have documented about violence against dental surgeons. Tantawi and his team assessed the intent of dental surgeons to report abuse against them in Arab countries<sup>12</sup>. They concluded that majority of dentists intended to report against abuse. In our study, we deduced that about 90% of the dentists did not report against the abuse they faced during practice. The reason for this could be explained by the lack of administrative policies and support to dentists in hospitals and institutions<sup>13</sup>. Another reason could be the lack of awareness of such policies. Several institutions include written policies against violence and abuse in their bylaws, as per government orders but those rules are never communicated to the staff and / or those policies are never implemented which is why dentists still face workplace abuse<sup>14, 15</sup>.

Gender discrimination exists in various fields of science and medicine and has been prevailing for the last century<sup>16</sup>. Women have been discriminated in jobs, education and even basic rights for a long time. Our study revealed that female dentists are significantly more likely to face violence at workplace than men of the same profession. These results are not new. Several studies that have been conducted elsewhere also predict the same outcome<sup>16, 17</sup>. All these studies pertain to either Middle East countries or South-East Asian countries, where female gender is still considered weak, and women are subjected to patriarchy and abuse.

Violence causes severe mental trauma and stress to individuals which leads to depression and sometimes loss of job. Studies have shown that professionals lose their motivation to work or progress if they are suffering from mental trauma or stress<sup>7</sup>. If left unresolved, these symptoms may lead to depression or suicidal thoughts. Dentistry, like any healthcare profession is a respectable field with great responsibility and care. Proper laws should be implemented to ensure patient and doctor safety. Country-wide campaigns and safety workshops must be conducted to increase awareness amongst the masses.

## CONCLUSION

Within the limitations, our study concludes that more than 80% of dental surgeons face violence at their workplace and majority of those are women. Majority of dentists face verbal abuse and those mostly from patients. Most of the abusee do not report the abuse, instead they attempt to defend themselves verbally. The cases of abuse lead to increase in stress, anger and frustration among working dentists. They also believe that not enough policies and administrative support is available to protect dental surgeon's sanctity and rights in workplace.

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