## **ORIGINAL ARTICLE**

# Relationship between Workplace Related Violence and Job Satisfaction among Nurses Staff

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#### **ABSTRACT**

**Background**: Violence in the workplace is a global public health problem and has caused a serious threat to the physical and mental health of health care workers. Furthermore, workplace violence also has a negative impact on the behavior of health care workers in the workplace.

Aims: The purpose of study is to investigate the relationship between workplace related violence and job satisfaction among nurses' staff

**Methods**: A descriptive correlational study conducted in Nasiriya Province/ Iraq, by simple random sample of 209 nurses is selected through the use a probability sampling approach. The reliability of the questionnaire was achieved through a pilot study and then presented to experts to prove its validity. The total number of items included in the questionnaire was 30-items for work related violence and 17-tiems for job satisfaction. The data was collected by using the self-report method and analyzed by the application of descriptive and inferential statistical data analysis approach.

**Results**: The results of the study indicated that (50.2%) of the nurses exhibited a moderate workplace related violence and (69.4%) moderate job satisfaction. There were negative significant correlation between workplace related violence and job satisfaction (r= -0.401; p=0.001).

**Conclusion**: Job satisfaction among nurses was found to be inversely connected with workplace violence "high work-related violence reduced job satisfaction". Workplace policies and procedures that focus on environmental security reporting and monitoring, as well as instructional seminars for nurses, are reducing violence and increasing job satisfaction.

Keywords: Workplace, Violence, Job Satisfaction, Nurses.

## INTRODUCTION

Nurse productivity and the quality of care they offer are both heavily reliant on the availability of sufficient nursing staff [1], making nurse shortages and high turnover rates a global concern [2]. Many countries believe the nurse-to-patient ratio to be insufficient, with Sub-Saharan Africa suffering the most [3]. Nurses who are dissatisfied with their jobs are more likely to leave the profession, contributing to the global shortage [4]. These criteria, however, do not all have the same impact on a nurse's job happiness. Others are said to be dissatisfied with childcare facilities, weekend bonuses, and control over working circumstances [5], while some are most dissatisfied with income and advancement possibilities [6]. According to studies, salary levels have a significant impact on nurse satisfaction, particularly in low- and middle-income nations.

Nurses' job satisfaction levels in various geographical and socio-cultural settings must be studied in order to determine which elements have the most impact on them. This could help healthcare executives and policymakers prioritize the issues that need to be addressed in order to increase nurse satisfaction and, as a result, healthcare delivery [7]

Workplace violence, defined as "incidents where employees are abused, threatened, or assaulted in circumstances related to their work, including commuting to and from work, involving an explicit or implicit challenge to their safety, well-being, or health" [8], It has been identified as a significant problem for nurses around the world [9]. Burnout, poorer morale, higher risk of smoking cessation, lower treatment quality, and greater psychopathy have all been linked to WPV-related job discontent [10]. It has also been proven that job satisfaction among nurses is linked to depression [11]. To the author's knowledge, no study has yet assessed the association between WPV and job satisfaction among doctors and nurses. The purpose of this study was to see if there was a link between workplace violence and job satisfaction among nurses.

# **MATERIAL AND METHODS**

A probability sampling strategy was used to choose a descriptive correlational study conducted by a simple random sample of 209 nurses. The International Labor Organization, ICN, WHO, and PSI have all contributed to the development of a study tool to evaluate

workplace violence (WHO, 2003) [12], as well as the Warr-Cook-Wall (1979) [13] job satisfaction scale and altering it to match the study's goals.

Validity was given to a panel of 11 arbitrators were asked to offer their opinions and suggestions on each of the study questionnaire's components in terms of language appropriateness, association with the dimension of study variables to which it was assigned, and suitability for the study population. To assess the questionnaire's reliability, data were collected from nurses, and the test was administered to 21 subjects from the study population who were not part of the original sample. Cronbach's alpha was discovered to be 0.70 for workplace violence and 0.86 for job satisfaction.

A SPSS-20.0 were used analyzed the information was evenly distributed. Pearson's correlation coefficient was used to investigate the relationship between workplace related violence and job satisfaction. For continuous variables, descriptive data is reported as mean standard deviation, and for categorical variables, it is shown as number (percent). Statistical significance was defined as a p 0.05.

## **RESULTS**

The analysis of sociodemographic characteristic for nursing staff in this table (1) shows that about two third of them are young with age group 20-29 years (67%) in which the average age refer to 28.81± 6.814 year. The gender variable refers that 66% of nursing staff are females and 34% are males. Regarding marital status, more than half of nursing staff are married (54.2%) and 40.1% of them is still unmarried. Highest percentage of nursing staff are graduated from nursing institute with diploma degree (39.7%). Regarding workplace department, the highest percentage refers to critical care units as seen among 31.1% of nursing staff. The current position for nursing staff reveals that more of them are working as nurse direct with patients (80.4%). Regarding years of experience, 56.9% of nursing staff are reported they have 1-5 years of experience in nursing.

Table 1: Socio-Demographic Characteristics of Study Sample

Variables	Class	n=209	%
1/(M+S1)=28.81+6.8141	20 – 29 year	140	67
	30 – 39 year	49	23.4
	40 – 49 year	17	8.2

	50 ≤ year	3	1.4
Gender	Male	71	34
Gender	Female	138	66
Marital status	Unmarried	84	40.1
	Married	113	54.2
	Divorced	5	2.4
	Widowed	6	2.8
	Separated	1	.5
Qualification	Secondary school	52	24.9
	Institute	83	39.7
	College	74	35.4
Current workplace	Emergency units	36	17.2
	Critical care units	65	31.1
	Medical & surgical wards	61	29.2
	Other units	47	22.5
Current position	Department supervisor	34	16.3
	Nurse	168	80.4
	Paramedic	7	3.3
Years of experience	1 – 5 years	119	56.9
	6 – 10 years	51	24.4
	11 – 15 year	18	8.6
	16 – 20 year	10	4.8
	21 ≤ year	11	5.3

Findings indicates that nursing staff are at risk of moderate level of violence at workplace as seen among more than half of sample (50.2%).

Table 2: Workplace related Violence

Freq.	%	M ± SD
103	49.3	
105	50.2	51.38±6.757
1	.5	31.30±0.737
209	100	
	103 105 1	103 49.3 105 50.2 1 .5

M: Mean for total score, SD=Standard Deviation for total score Findings indicates that nursing staff are showing moderate level of job satisfaction as revealed among 69.4%.

Table 3: Job Satisfaction

Job Satisfaction	Freq.	%	M ± SD	
Low	32	15.3		
Moderate	145	69.4	34.26±5.810	
High	32	15.3	34.20±3.810	
Total	209	100		

M: Mean for total score, SD=Standard Deviation for total score Findings exhibit that there is high significant relationship (strong reverse) between workplace violence and job satisfaction among nursing staff at p-value= 0.001 which indicates that low job satisfaction is associated with high workplace violence.

Table 4: Correlation between Workplace Violence and Job Satisfaction among Nursing Staff (N=209)

Workplace Violence			
	Persons' r	401*	
Job Satisfaction	Sig. (2- tailed)	.001	Negative Sig.
	N	209	

## DISCUSSION

Workplace violence (WPV) is a global public health issue that has put healthcare professionals' physical and mental wellbeing at risk. Furthermore, workplace violence has a negative impact on the conduct of healthcare employees.

Current study findings indicates that nursing staff are at risk of moderate level of violence at workplace as seen among more than half of sample (50.2%). "This conclusion is consistent with their findings, which showed that out of 348 participants, 150 (43.1%) of nurses had encountered moderate workplace violence [14]. 47 (13.5%) had experienced physical violence, 98 (28.2%) had experienced verbal abuse, 36 (10.3%) had been bullied/mobbed, and 25 had experienced sexual harassment (7.2 percent). Furthermore, our findings are in line with those of research conducted in Saudi Arabia (45.6%) [15] and Rwanda (39%) [16]. However, this is lower than studies conducted in the United States (76%) [10], Northeastern China (83.3%) [17], Jordan (55.5%) [18], Indonesia (54.6%) [19], Gambia (62.1%) [20], and

Oromia, Ethiopia (62.1%). (82.8 percent) [21]. This could be related to socio-cultural disparities and healthcare system differences. It's also possible that this is due to under-reporting of violent events. When compared to a study conducted in Ethiopia's Amhara area (26.7 percent) [22], the level of WPV was larger". This could be because the research in the Amhara region was conducted primarily in referral hospitals, which is a difference in context. This could also be related to time disparities, with people in recent times experiencing various socio-economic instabilities, which could be a driving factor in the violence towards nurses. This study's prevalence is also greater than that of a study conducted in Hawassa public health facilities (29.9%) [23]. Our could be attributed to a definition discrepancy, since the study in Hawassa defined workplace violence using the past 6 months before to data collection, whereas this study used open time prior to data collection to determine workplace violence. Among the various levels of workplace violence, moderate violence was shown to be the most common, which is consistent with several research conducted in various nations [24][25].

According to the findings of the current survey, nursing staff had a moderate degree of job satisfaction, as stated by 69.4 percent of the sample, with an average of 34.26 (5.710), which is a concerning result. This study is consistent with data from studies conducted at hospitals in Nasiriyah City, Iraq, which found that nurses have a modest level of job satisfaction [26]. In Northern India, it was also discovered that the majority of nursing professionals were either moderately or highly satisfied with their jobs [27]. According to Jimma Zone Public's research, one-third of nurses are dissatisfied with their jobs. The result variable was predicted by professional dedication, workload, working unit, and mutual understanding at work [28].

The findings revealed a strong negative connection (r=-0.401; p=0.001) between workplace violence and job satisfaction among nursing staff (r=-0.401; p=0.001), indicating that a high degree of workplace violence is related with low job satisfaction. Workplace violence had a significant impact on job satisfaction among nurses in 13 general hospitals in Beijing [29]. Multiple regression studies found that verbal abuse and perceived respect were statistically significant factors of nurses' job satisfaction in Africa. Nurses who were verbally abused and treated with disrespect were more likely to be dissatisfied with their jobs [30]. A policy of "zero tolerance" for violence and "low tolerance" for disrespect might be introduced to protect nurses and healthcare professionals in general. In Spain, "violence and bullying by coworkers, users, family members, or others accompanying the patient had a direct negative influence on internal and external job satisfaction, though this effect was offset by perceived social support [31]. A strong healthcare support network is essential to promote nurses' job happiness by buffering the harmful effects of workplace violence. Nurse violence is more widespread in emergency departments in Egypt than in community health facilities. The vast majority of nurses who have experienced workplace abuse have remained silent about it. Psychological and verbal hostility were the most common forms of abuse experienced by the study participants, followed by physical attack. Workplace regulations and procedures that focus on environmental security, reporting, and monitoring, as well as educational seminars for nurses that focus on communication tactics and stress or dispute resolution, are all needed to properly handle workplace violence. Workplace violence was found to have a positive relationship with turnover intent (r = 0.238, P 0.01) and job burnout (r = -0.150, P 0.01), but a negative relationship with job satisfaction (r = -0.228, P 0.01) and social support (r = -0.228, P 0.01). 0.077, p 0.01) in another Chinese investigation. Social support mediated WPV, work satisfaction, burnout, and desire to turn to some extent" [33].

The average responders (SD) for workplace violence was 51.38 (6.75) on a medium scale, while their mean (SD) for job satisfaction was 34.26 (5.71) on a medium scale, according to the findings. Violence in the workplace had a substantial negative connection with nurse job satisfaction (r=-0.401;p=0.001). Nurses

who have been victims of violence are more likely to report high levels of work stress, as well as worse levels of care quality and job satisfaction, according to a new study.

Because the retrospective approach requires nurses to remember workplace violence in the most recent incidence of violence, recall bias may be a weakness of this study. Furthermore, because the perpetrators could not be monitored at the time of the investigation, the study does not include perpetrator factors.

## CONCLUSION

Nurses job satisfaction negatively correlated with workplace related violence "high work-related violence resulted in low job satisfaction". Workplace policies and procedures that focus on the security of the environment reporting and surveillance, and educational seminars for nurses which indeed helps to reduce violence and achieve job satisfaction.

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