

WORKPLACE VIOLENCE AMONG RADIOGRAPHERS IN LAGOS, NIGERIA

Ikamaise, V.C.¹ | Archibong, B.E.¹ | Okpaleke, M.S.² | Paulinus, S.O.¹

¹Department of Radiography and Radiological Sciences, University of Calabar, Nigeria.

²Radiographers Registration Board of Nigeria, Abuja, Nigeria.

Correspondence Author: Ikamaise, V.C: 0808131

ikamaise@gmail.com

ABSTRACT

AIM: Workplace Violence (WPV) is currently a global phenomenon that is spreading fast and eating into the fabric of the entire society. Health workers are particularly at a high risk because of the nature of their work. This paper is aimed at assessing how Radiographers practicing in Lagos metropolis, Nigeria are affected by WPV.

METHODS: Workplace violence related questionnaires were administered to 120 Radiographers randomly selected in public and private health facilities. A total of 20 Hospitals/Radiodiagnostic facilities were visited in the study area. The data collected was subjected to descriptive statistics.

RESULTS: The results showed psychological (verbal) violence to be more prevalent with 68% among younger and less experienced Radiographers with age range of 21–40 years. The female Radiographers are affected more with 60%. Radiographers practicing in the public health facilities are exposed to violence more than their counterparts in the private sector. Over 84% of respondents agreed that their employers have policies in place to deal with WPV but in some instances (27%) are not utilized by staff when the need arises. The results also showed that WPV is not strongly associated with heavy workload as 51% of the respondents experienced WPV at moderate work load. However, patient relatives ranked highest among aggressors of WPV.

CONCLUSION

Workplace violence is a menace that is plaguing Radiographers in the study area.

Key words: Workplace; Radiographers; Violence; Lagos.

INTRODUCTION

Workplace Violence (WPV) is seen as physical assault, threatening behavior or verbal abuse occurring in workplace^{1,10}. Workplace violence includes overt and covert behaviours ranging in aggressiveness from verbal harassment to murder^{2,11}. It is a critical problem in both developed and developing economies globally. This has in recent times attracted increasing attention from researchers worldwide as it is rapidly spreading fast and eating into the fabric of the entire society^{1,3}. Health workers are particularly at the frontline due to the nature of their work. This paper is thus aimed at assessing how Radiographers practicing in Lagos metropolis, Nigeria are affected by WPV.

In many countries, workplace violence is as a result of different socio-political realities which give rise to different conceptions of the very nature and character of the problem. Although this is present in all work environments, health personnel are particularly exposed and victimization may be considered an inevitable part of the job which presents in the form of physical and psychological violence^{2,3,4}.

The impact of WPV on the efficiency and effectiveness of the health system at large, especially in developing countries, is significant. A joint study by the World Health Organization (WHO), International Labour Organization (ILO), International Council for Nurses (ICN) and Public Services International (PSI) was targeted at evaluating the extent of the global scourge by WPV. It is timely to investigate the effect of WPV in terms of age, gender, types and its prevalence among Radiographers in the study area. Lagos alone host 15% of the total number of practicing Radiographers in the country which therefore forms the basis for the area of interest in the study¹².

METHODS

A survey was carried out by administration of questionnaires to assess the level of WPV among respondents in terms of experience and perception. The method was based on a joint research carried out in 2000 by the WHO, ILO, ICN, and PSI⁵ and the questionnaire adapted for the population under study. A total of 120 Radiographers, comprising of 65 males (54%) and 55 females (46%) with age range of 21 to 50 years.

Data collection was carried out during visitation within official working hours to various public and private health facilities where Radiographers work. A total of 120 respondents were contacted. A total of 20 health facilities were visited for administration of questionnaire. All respondents were qualified and registered Radiographers. All questionnaires were completed and returned on the same day of the visit (return rate of 100%). The questionnaire was constructed to assess respondents experience and perception of WPV for a retrospective period of 12 months.

RESULTS

Psychological violence topped the list as the more prevalent form of violence reported as shown in Table 1.

Reports on psychological abuse came mostly from the female respondents. A suggestion by an author places this as being dependent on the society which plays a role in the way women are treated⁶

From gathered data, radiographers between the ages of 21-30 years had the highest rate of response of having been involved in violent incident at the workplace.

A greater number of responses from those attacked happened to come from radiographers working in government establishments (60% of responses).

Interestingly, 84% of respondents agreed that their employers had laid down policies on taking workplace violence. One then wonders why the rate of violence is high as seen in the results.

60% of respondents from the study attested to being witness to at least one violent incident at work in the last 12 months.

DISCUSSION

Previous studies^{5,7,11} on the issue has always shown an above average incidence rate, indicative of its fast spreading nature and silent character. In the working lives of women, violence has not been an exceptional phenomenon as obtainable in other parts of the world. Psychological violence ranks top among other forms of violence. However, this is not to say that these forms exist in isolation. They are closely related and often overlap in the workplace. Benveniste, et al (2005) reported 5% physical injury involvement in WPV in Australia as against 6% by this study¹¹.

The age of a radiographer directly reflects in his/her years of experience. Years of experience on the job in some ways matter in the way a violent incidence is handled by a staff, irrespective of the perpetrator of the act, co-worker or outsider. Some authors suggest that newly employed are at a higher risk than more experienced staff^{2,8}.

The working conditions found in government owned establishments in the country is a potential stressor to violence in the workplace. Privatization, pay cuts, subcontracting, heavy workload are factors that can build up a climate for violence to thrive. It is not enough to say that there are policies in place, but if these policies are utilized by the victims when the need arises and whether the authorities involved abide by the penalties allotted to perpetrators, no matter the standing of the individual will arrest the present standing of WPV in the society. Poor utilization could also arise from non-communication of these policies to employees and this should be looked into. For a good number (60%) to have been witnesses to violent incidents at work, it becomes a thing of concern as this goes a long way to show how deep WPV has eaten into the work environments. Ng, et al (2009) reported that 61% of radiographers in public hospitals had experienced WPV¹⁰.

CONCLUSION

This work has provided only a peek into the situation faced by Radiographers. However, the results may not largely reflect the overall situation in the geographical area but are possibly indicative of trends at the national level. Generalizations should be considered with some care.

The obtained results are not far-fetched from what is obtainable around the world. It may not be so worrisome in this part of the world since we are still attending to issues pertaining to the basic necessities of life. The effects of this scourge are unimaginable if let loose. This should be a wake-up call to those concerned to beef up measures to stem its further spread.

This study's scope should be widened to cover the entire nation and if possible, other health professions to give a true picture of the Nigerian situation.

Table 1: Participants Demographics

Sex	Male	52	54%
Distribution	Female	44	46%
Age Range	Mean	36 years	
	Range	21 - 50 years	
Total		120	

Table 2: Distribution of WPV by form

Form of Violence	Frequency	Percentage
Verbal	40	83
Sexual	12	25
Physical	3	6
Psychological	52	58

Note: verbal and sexual violence both constitute psychological violence. Physical violence include fighting, pushing etc.

REFERENCES

- 1 Niosh (1996) Violence in the Workplace, Department of Health and Human Services, National Institute of Occupational Safety and Health, Washington DC: 96-100
- 2 Poster, E. C. (1996). A Multinational Study of Psychiatric Nursing Staff Beliefs and Concerns about Work Safety and Patient Assault. Archives of Psychiatric Nursing, 10 (6), 365-373.
- 3 Carmel, H. and Hunter, M. (1989). Staff Injuries from In-patient Violence. Hospital and Community Psychiatry, 40, 1, 41-46
- 4 Hoel, H; Rayner, C; and Cooper, C. L. (1999). Workplace Bullying. International Review of Industrial and Organizational Psychology. New York and Chichester: John Wiley & Sons, pp. 195-230
- 5 Elliot, P. P. (1999). Violence in Health Care. What Nurse Managers need to know. Nursing Management (Dec). Elsevier.
- 6 Martino, V. (2002). Synthesis Report on Workplace Violence in the Health Sector. Geneva: World Health Organization.
- 7 Cooper, C. & Swanson, N. (2002). Workplace Violence in the Health Sector – State of the Art. Geneva: ILO/ICN/WHO/PSI Joint Programme on Workplace Violence in the Health Sector.
- 8 Saarela, K. L. and Isotalus, N. (1999). Workplace Violence in Finland: High Risk Groups and Prevention Strategies. American Journal of Industrial Medicine Supplement 1, 80-81.
- 9 Whittington, R. and Wykes, T. (1996) Aversive Stimulation by Staff and Violence by Psychiatric Patients. British Journal of Clinical Psychology 35,1, 11-20.
- 10 Ng, K., Yeung, J., Cheung, I., Chung, A. & White, P. (2009). Workplace Violence: A Survey of Diagnostic Radiographers in Public Hospitals in Hong Kong. 51(4): 355-63.
- 11 Benveniste, K. A., Hibbert, P. D & Runciman, W.B. (2005). Violence in Health Care: The Contribution of the Australian Patient Safety Foundation to incident Monitoring and Analysis. Med. Journal Australia 183(7):3348-51