Workplace violence a major problem for US nurses

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An article released by CBS News last month revealed the extraordinary amount of violence and abuse directed toward nurses within their workplaces. The report provides a distressing account of the crisis facing nurses in hospitals and clinics all over the country, shedding light on conditions for one of the most victimized and vulnerable sections of the labor force.

Patti Kunz Howard, president of the Emergency Nurses Association, described the pressure placed on nurses as a "very real challenge," adding that "if you ask emergency nurses, they will tell you every single shift they work there is some case of workplace violence." Nurses more closely exposed to patients, such as workers in emergency rooms, frequently encounter harmful situations where physical assaults and verbal aggression are a part of daily routines.

A nurse veteran described the nursing profession as "dangerous," with violence happening "frequently in the acute and critical care populations where you think patients are too sick." Despite most violent incidents occurring in connection with patients and their family members, aggression from co-workers and even from physicians isn't considered exceptional.

One nurse working a shift in an emergency room said that she was punched by a disgruntled patient who resisted having her blood drawn. Randee Litten, who works in St. Joseph's Hospital in California, indicated that the patient was already designated as suffering from a mental disorder, and that she "was trying to medically clear them so they could go to a mental health facility, and I got punched in the face by her and got a black eye."

According to *American Nurse Today*, journal of the American Nurses Association (ANA), incidents like this one occur with striking regularity, with the caption of one report declaring that "virtually every nurse has experienced or witnessed some degree of workplace violence."

Donna Fountain, the co-chair of the ANA, described her experience as a student nurse as nearly intolerable. She recalled operating a therapeutic intervention with a psychotic resident. What at first started as a normal treatment changed rapidly when "he suddenly leaped across the table and started choking me. Immediately five big men [male staff] grabbed him, put him in a straitjacket, and sedated him."

Last April, Lynne Truxillo, a nurse from Baton Rouge, Louisiana, died after being attacked by a mental health patient after she had tried to save the life of a co-worker who had been assaulted moments before. Truxillo, after making an attempt to escape, was grabbed and had her head violently shoved against a desk repeatedly, suffering injuries that eventually led to her death.

Nurses around the country spoke out on social media with shock and outrage over Truxillo's death, with many revealing the frequent caution nurses must take when dealing with mentally ill patients, while at the same time expressing anger at the lack of protection that nurses are given while on the job. Although the great majority of mental health patients do not resort to violence, there is sometimes unpredictability and danger involved.

In a survey conducted and published by AMN Healthcare, 41 percent of nurses responded that they had been victims of bullying, incivility, and other forms of workplace violence, while 27 percent said they had witnessed it. Sixty-three percent of the respondents said their organization did not even address these incidences adequately.

These grim statistics, however, are only a conservative estimate, according to experts. Unreported

incidents are common, and many nurses have even become accustomed to the attacks.

One of the major causes of the increase in violence within the workplace is the lack of mental health resources and treatment, either from the absence of local resource centers and clinics or the unaffordability of mental health care for a large section of the population. As a result, more and more people suffering from psychological trauma and disorders have resorted to emergency rooms as a first resort.

In California, where Litten suffered her injuries, the situation is dire. "Mental health hasn't been invested in for years, and now we have a huge [increase] in the mental health population in California," Litten said. "There are no resources for them, so they come to us."

According to a California Health Policy Survey conducted in 2018, when asked if most people with mental health conditions in California are able to get the services they need, 57 percent responded "no." In fact, the main institutions for psychiatric care in both California and across the country aren't hospitals and clinics, but jails and prisons. In 2017, more than 30 percent of California prisoners received treatment for serious mental disorders, an increase of 150 percent for two decades.

No doubt social austerity and cost-cutting on the part of local and federal government officials have played a central role in worsening the mental health crisis in the United States. In California as well as countless other states, social programs and services have been starved of hundreds of millions of dollars since the financial crash of 2008, coinciding with the enrichment of the business and financial elite and the precipitous decline of workers' livings standards. This has placed a burden, not just on the mentally ill and their families facing the skyrocketing costs of medical treatment, but also on physicians and nurses.

Despite most nurses cited by AMN Healthcare indicating they were satisfied with having a nursing title as a career choice, an overwhelming number were dissatisfied with the overall quality of the profession itself, from workplace conditions and safety to compensation and job security.

Out of an estimated 3.5 million registered nurses in the US, one in five hold second jobs and a striking 273,000 hold a second full-time job. Sixty-six percent of nurses surveyed said that they were worried that their job was affecting their health, and 44 percent admitted they often think about quitting altogether.