

Centre Universitaire Romand
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Long term consequences of physical violence at work.

Results from a follow up study with victims who consulted the Violence Medical Unit of the Lausanne University Hospital from 2007-2010.

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15.3.2013

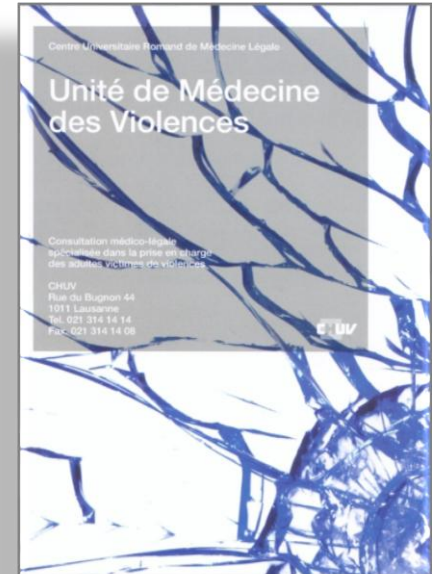


University Center of Legal Medicine

Violence Medical Unit (2006)

Medico-legal consultation for victims of interpersonal violence

- Welcome and debriefing



- Clinical examination

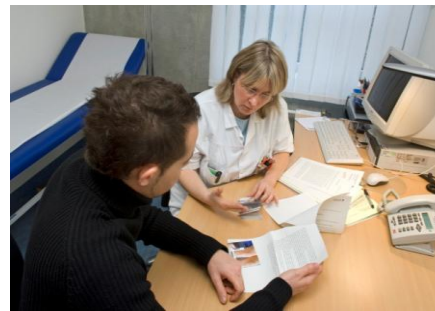


Assault and battery report



Photograph of wounds

- Referral within the medico-social network



Workplace-related violence

■ **Workplace-related violence** : during or because of work

■ **Public health problem**

- Frequent (4% of active population in CH)
- Serious
- Impacts workplaces and communities
- Prevention is possible

➡ Research project with support of SUVA

Objectives and organization of the study

1. Describe the population of victims
2. Describe the situations of violence
3. Identify local resources for prevention
4. Identify needs for improvement
 - 2 institutions
 - Health at work + violence prevention
 - Multidisciplinary team: medical doctors, sociologists, biostatistician, nurses

Mixed methods

qualitative & quantitative

■ Population

- Patients who consulted VMU 2007 to 2010 for workplace-related violence

■ Data

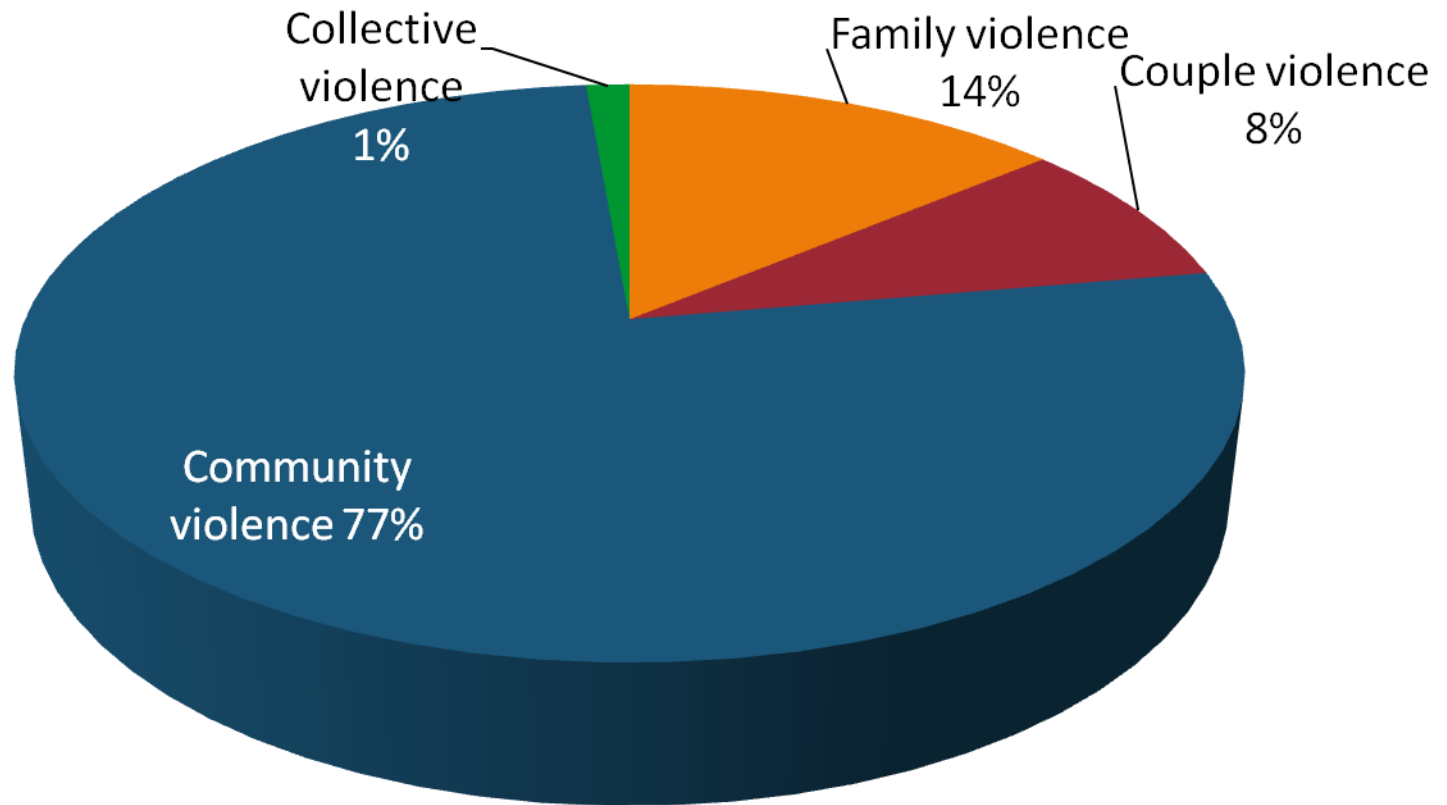
- **Medical files** and Epidata database, battery and assault reports (N=196 files, 185 patients)
- **Telephone interviews** with patients (N=87) average 2.5 years after the violent event
- **Interviews** with resource-persons (N=9)

Characteristics of workplace-related violence victims

- Ca. 1 out of 10 consultations during the period considered
- 2 out of 3 workplace violence victims were male, 1 female
- Compared to total active population in the canton (1/3 of workforce), Non-Swiss overrepresented (54%)

Previous violence victimization

46% have been victims of violence previously



Occupation

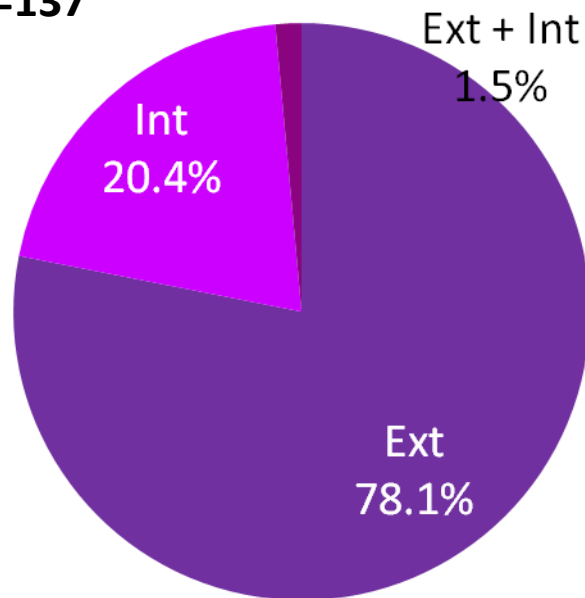
- 72.4% wage-earners and 10.81% self-employed
- 91.9% services industry
- 81.1% contact with the public

Population of victims	%
Private security	14.6
Retail business	10.8
Police force	7.6
Transportation	7.6
Total	40.6

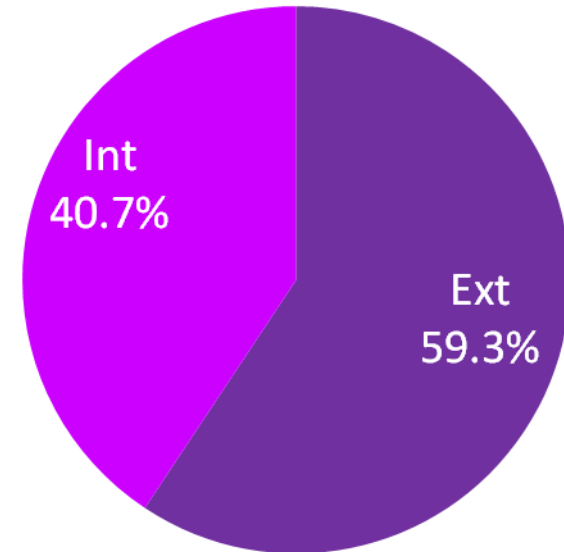
External vs internal violence (n=196)

- External violence 72.5%
- Internal violence 26.5% by
 - colleague 70.4%
 - superior 24.0%
 - subordinate 5.6%

Males n=137



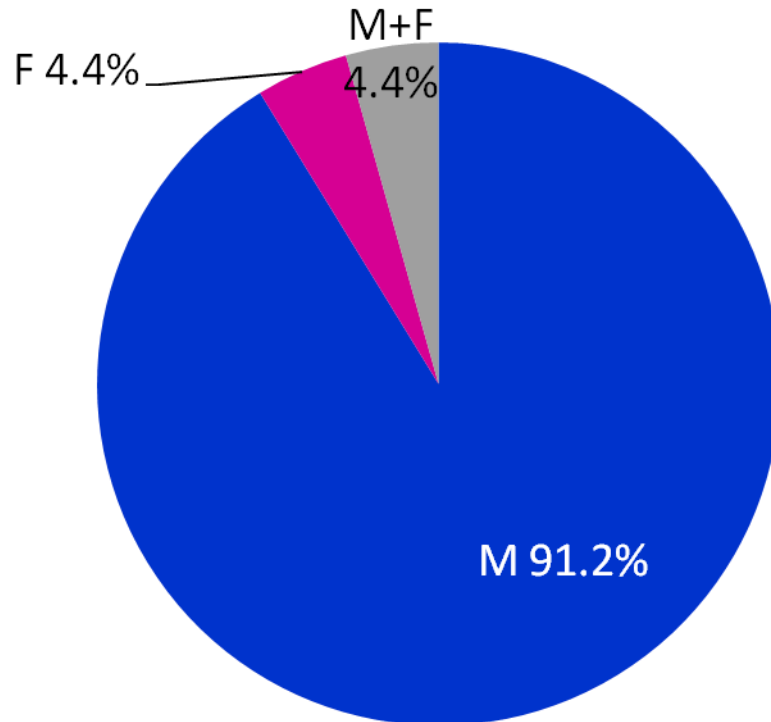
Females n=59



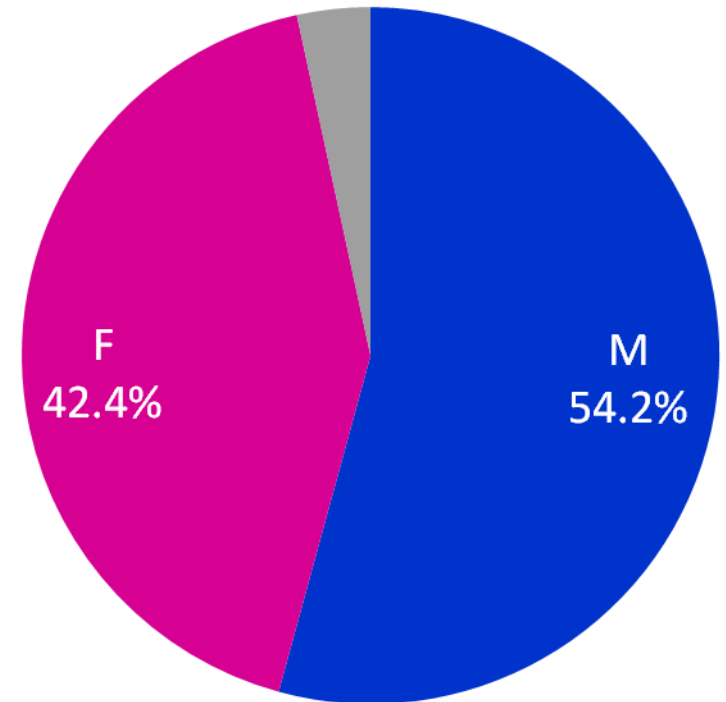
Perpetrators of workplace violence

83% acted alone

Male victims
n=137



Female victims
n=59



Consequences of workplace violence

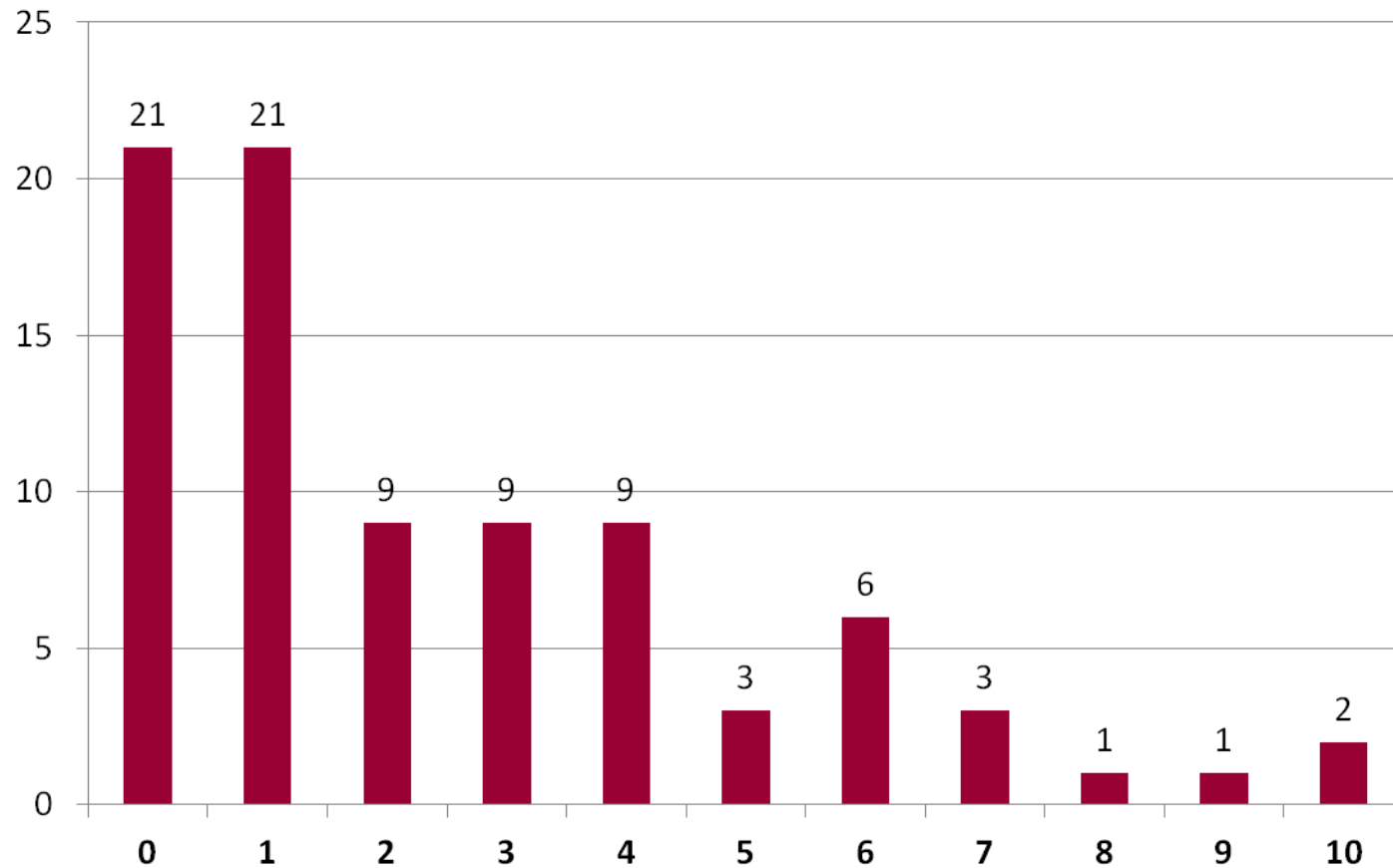
Measuring severity through a score

1. Total duration of sick leave due to the assault,
2. Physical long term effects,
3. Psychological long term effects,
4. Impact on employment : diminished work time, job lost or quit because of the assault.

Each item evaluated (0-1-2-3) according to the severity of consequences

$$\text{Score} = \sum \text{values of 4 variables}$$

Values of the severity score



- Highest score = 10
- Almost 20% have a score of 5 +
- Almost 50% have 2-4
- Almost 1/3 have 0-1

Possible predictors → severity of consequences

1. Internal violence
2. No other employee present
3. Self-employed
4. Death threats
5. Pre-existing health condition
6. Seriousness of initial symptoms of psychological distress
($p < 0.001$)
7. Seriousness of initial injuries
8. Previous violent victimization

Perception of a lack or inadequate response

1. From the employer

$p < 0.05$

2. From colleagues

3. From friends and family

Qualitative results : exemplary situations

Theme 5 : biopsychosocial consequences

- Mechanic assaulted by a driver when transporting goods
- « *My morale was down for almost a year, nowadays I never get out of the vehicle if there is a problem. I consider there is still 30% of me that remains damaged* ».

Qualitative results : exemplary situations

Theme 5 : biopsychosocial consequences

- Ticket inspector assaulted by passengers
« I am just a little outraged ».
- Taxi driver assaulted by a client
«It's over, I don't want to dwell on it... It has affected me very much ».

Prevention resources

- Absence of a coordinated prevention network
- Variations in existence and forms of organization policies
 - Some large institutions in the public sector and in « at risk » services are better equipped (eg hospitals, public transportation)

Recommendations

- Large dissemination of prevention messages :
 - Workplace violence = not acceptable + illegal
 - Risk for employees, teams, organizations : health, security, financial, quality of work
 - Consequences of workplace violence = underestimated
 - Initial psychological condition
 - Support from employers contributes greatly to victims' recovery

Support from employers

- Expressions of moral support (letter, phone call)
- Support in filing a complaint
- Advice on where to find assistance : healthcare, insurances, center for victims, e tc.
- Measures to prevent future workplace violence
- Facilitate return to work