

The Quality of Work-Life, Job Satisfaction and Workplace Violence Among Registered Nurses in Selected Tertiary Hospitals in Metro Manila, Philippines: An Explanatory Sequential Mixed Methods

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ABSTRACT

The goal of the study is to present workplace violence in the form of workplace bullying and how it has affected nurse's quality of work-life and job satisfaction. The study is an explanatory sequential research design where Phase I of the study is a quantitative research design in descriptive cross-sectional correlational approach. It was further explored in the Phase II which is the qualitative research design in descriptive phenomenological approach. In the Phase I of the study, 210 respondents participated in an online survey consisted of questionnaires for workplace violence, quality of work-life and job satisfaction. It showed insignificant values with $P > 0.05$ level, this means regardless of workplace violence experienced by some, the quality of work-life, and the job satisfaction of the staff nurses remains independent to each other. After analyzing the data, 15 respondents were interviewed to further explain the pragmatic philosophy in understanding the respondent's perspectives and pursuit. Employing Colaizzi's Method for data analysis, it has revealed 5 Major themes which are Predisposing factors on Workplace Violence, Actions of Workplace Violence, Resolution of the Victim, A Compassionate and Fulfilled Nurse, and Professional Growth and Career Stability. An interventional development variant was developed based on the 5 major themes entitled PreP for WV or the Prevention Plan for Workplace Violence. It is further recommended in the study for a program that focuses leadership and administrative program for managerial levels in nursing department to elevate prevention practices on workplace violence.

Keywords: Workplace violence, workplace bullying, job satisfaction, quality of work-life, nurses

Introduction

Individuals in a workplace are usually exposed in violence, and nursing profession are more likely to be vulnerable. Unfortunately, healthcare facilities are experiencing skyrocketing violence worldwide (Mohamad, et. al 2023). The European Commission Directorates-General V (EU DG-V) defined Workplace violence (WPV) as those that includes, but is not limited to, abuse, threat, and attack related to their work that harm their health, safety or well-being, either explicitly or implicitly and which result in physical injuries, verbal abuse, racial discrimination, sexual harassment, bullying and the like. Furthermore, workplace violence, can lead to mental health problems, several physical problems and job-related issues (Galanis et al., (2024). Workplace violence in healthcare is not that recognized globally due to insufficient reports.

This is due to informal reporting systems, absence of policy or policy not that fully implemented (Mohamad Yazid et al., 2023). Based on study of Alshahrani et al., (2021), among all other occupational settings, healthcare experiences a higher rate of violence, not to mention those still unreported incidences. Most of victims thought that violence is part of the job, and not all instances cause injuries or psychological harm, thus tolerance of violence (Christensen, S. & Wilson, B., 2022). The Joint Commission Sentinel Alert Issue No. 40 underscores that intimidating and disruptive behaviors can heighten the risk of medical errors, contribute to lower patient satisfaction and avoidable negative outcomes, inflate healthcare costs, and prompt skilled clinicians, administrators, and managers to pursue opportunities in more supportive work environments. Workplace violence threatens the core values of the nursing profession, which revolves around caring for others. Workplace violence can lead to elevated job stress, reduced job satisfaction, heightened job turnover rates, absenteeism, burnout, physical exhaustion, post-traumatic stress disorder, fear, and even suicidal ideation, that significantly impact the quality of work-life for nurses.

With this objective, the researcher seeks to measure and investigate the encounters of registered nurses concerning workplace violence and its impact on their job satisfaction and quality of work-life. Accordingly, leveraging findings presented, the researcher intends to develop a policy framework aimed at preventing, addressing, and remedying workplace violence. Even without a dedicated law targeting workplace violence in healthcare, both employers and victims have possible avenues for recourse.

Materials and Methods

This study utilized an explanatory sequential mixed methods approach, integrating both quantitative and qualitative methodologies. On the first phase, a web-based link was sent out via trusted mobile applications and/or social media platform and the recipient voluntarily decided his and her participation on the said survey. Descriptive cross sectional correlational approach was used in this study to generate the data systematically. Specifically, the study aimed to explore the relationships between respondents' age, gender, length of employment, position within the institution, and area of assignment with variables such as job satisfaction, quality of work-life, and workplace violence. Additionally, it sought to examine the interrelationships among quality of work-life, job satisfaction, and workplace violence.

On the second phase, an interview was done using a web-link application, via zoom or G-meet, to meet the most convenient time for the interviewee and the researcher. The researcher employed phenomenological research designs to explore the universal nature of a

phenomenon through the perspectives of individuals who have experienced it. Employing Colaizzi's Method for data analysis involves several steps: transcribing participants' descriptions, extracting significant statements, formulating meanings, clustering formulated meanings, developing an exhaustive description, identifying the fundamental structure of the phenomenon, and validating findings through participant feedback.

On the third phase, The researcher utilized the practical guidance of the 7 Elements of Workplace Violence Prevention Program, which breaks down the process of intervention design into seven elements: (1) Risk Assessment and Identification; (2) Policy Development and Implementation; (3) Training and Awareness Programs; (4) Incident Reporting and Investigation; (5) Support and Assistance for affected employees; (6) Workplace Design and Security Measures and (7) Continuous Review and Improvement.

Results and Discussion

On the first phase, the researcher also explored on the relationships between and among the quality of work-life, job satisfaction, and the workplace bullying experienced by the staff nurses.

Table 1. Relationships between and among the Quality of Work-life, Job Satisfaction, and Workplace Violence Experienced by the Staff Nurses

Variables	Workplace Bullying		
	r	P-value	Interpretation
Quality of Work-life	0.072	0.29	Not Significant
Job Satisfaction	-0.019	0.78	Not Significant

As indicated data shows insignificant values with $P > 0.05$ level, this means that each category did not show significant association between and among them. Regardless of workplace violence experienced by some, the quality of work-life, and the job satisfaction of the staff nurses remains steady, which was also explicitly reflected between quality of work-life and job satisfaction of the respondents. This implies that the staff nurses may have given more time and focus to the responsibilities that they have to comply and integrate in their day-to-day duties. Workplace violence negatively correlates with job satisfaction (Hu et al., (2024) and quality of work-life (Zulkarnain et al., (2023)). If the institution has low to none incidence of workplace violence, there is a high percentage of quality of work-life and job satisfaction. The

study also found that the work environment has a significant positive moderating effect on workplace violence, quality of work-life and job satisfaction. In line with this finding, a decline in job satisfaction can be attributed to the fear about the working environment, as evidenced by the study of Labrague and de Los Santos (2021) in the Philippines, which found a significant correlation between nurses' fear of COVID-19 and decreased job satisfaction. Moreover, quality of work-life and job satisfaction positively correlates to each other. This is not surprising as the quality of work-life is an indicator of how satisfied employees are (Salahat et al (2022). Therefore, higher management must orchestrate and outline a system for the quality of work-life within the institution into an organizational culture based on the welfare of the nurses that promotes independence, professional growth and character development. This is because it will ultimately increase the efficiency of the organization and promote job satisfaction (Dargahpour (2022).

On the second phase, after analyzing the interview that has been transcribed, here are the 5 major themes with their corresponding theme cluster related to Quality of Work-Life, Job Satisfaction and Workplace Violence of the registered nurses.

Table 2. Summary of Themes and Theme Clusters

Themes	Theme Cluster
1. Predisposing Factors on Workplace Violence	<ul style="list-style-type: none"> • Attitude towards Work • Working Environment • Rumors at Work
2. Actions of Workplace Violence	<ul style="list-style-type: none"> • Intimidation • Limiting Opportunities • Acceptance
3. Resolution of the Victim	<ul style="list-style-type: none"> • Support System • Ignoring Behavior
4. A Compassionate and Fulfilled Nurse	<ul style="list-style-type: none"> • Recognition of Work • Nursing as Vocation
5. Professional Growth and Career Stability	<ul style="list-style-type: none"> • Work-related Benefits • Job Stability • Career Development

Nurses who experience workplace psychological violence could reduce work passion and impair empathy ability, however in this study, with acceptance and ignoring behavior, as well as help with the support systems in the form of colleagues, find ways to counteract or resolve experienced violence. This can be related to nurse's innate caring attitudes. Caring is the underlying altruistic foundation of nursing that can transform the choice of nursing as a career

into a calling to care or convert a calling to care into a choice of career. A career in nursing provides the gratification of service and the fulfillment of a call to caring. Nurses not only negatively tolerated adverse consequences but also actively mobilized personality resources and psychological capitals to resist psychological violence. This can be result of nurse's resiliency which is a personality resource and psychological capital which enables nurses to copy with pressure events and adapt to stressful contexts in positive manners. Previous studies found that resilience constituted a personal resource which alleviated the adverse impacts of workplace psychological violence and maintained the mental health of affected nurses (Li, Liao, & Ni (2024). Based on their study, nurses experienced workplace psychological violence not only negatively tolerated adverse consequences but also actively mobilized personality resources and psychological capitals to resist psychological violence. Fan et al. (2022) conducted an across-sectional study which involved 349 nurses to explore the relationship between workplace violence and resilience, correlation coefficient analysis found that workplace violence was negatively associated with resilience. Therefore, the presence of resilience alleviated the impact of psychological violence among these nurses.

Project No.	Major Topic	Sub Topic	Goal	No. of Topics	Hours	Duration
1	Workplace Adversities and Personal Well-Being	Nurse's Well-being and Stress Management	Identify factors that roots Workplace Violence and its effect on nurses' wellbeing	2	8	4-week program with bi-weekly sessions (total of 4 sessions)
		Workplace Design and Security Measures Refresher				
2	Strategic Planning in Workplace Violence	Identification and Risk Awareness of Workplace Violence	Construct plans to mitigate and combat workplace violence with appropriate systematic and effective intervention	2	8	4-week program with bi-weekly sessions (total of 4 sessions)
		Workplace Violence Policy Review				
3	Promotion of Workplace Etiquette	Workplace Violence Intervention Program	Create an environment conducive in working for healthcare workers	2	8	4-week program with bi-weekly sessions (total of 4 sessions)
		Counselling and Life-skills Training Enhancement				
4	Bio-psychosocial Appraisal and Development	Nurse's Forum: Optimal Well-Being	Strengthen personality in response to workplace violence	2	8	4-week program with bi-weekly sessions (total of 4 sessions)
		Psychological and Spiritual Enhancement				
5	Career Recognition and Advancement	Work-Life Integration	Inculcate sense of calling and career development for professional growth	2	8	4-week program with bi-weekly sessions (total of 4 sessions)
		Career Advancement and Opportunities				

Figure 1. Matrix of the Staff Development

On the third phase, a policy on workplace violence for nurses have been formulated. It is entitled Prevention Plan for Workplace Violence (PreP for WV). The purpose of the Prevention Plan for Workplace Violence (PreP for WV)) is to have a clearly understood, accessible, and actionable policy to respond quickly to episodes of workplace violence specifically with workplace bullying. The goal of establishing a Prevention Plan for Workplace Violence (PreP for WV) is to reduce violent incidents in the workplace at all areas within the hospital vicinity. Through the implementation of this prevention program, this will be achieved through improved employee awareness, violent incident identification and reporting, tracking of violent incidents, and corrective actions when hazards are recognized. Shown below is the outline of the activities for the prevention plan.

Appropriate elevation and response need to be determined at the time of the incident, whether it is an in-person event or a threat of future harm. With any incident, employee safety is of the highest importance. Elevation and response mechanisms can include the employee leaving the area, calling for help, or, with a more imminent threat, calling security or police officers. The employee must share the specifics of the violent incident or experienced bullying with a supervisor/manager or other leader. An Violent Incident Report shall be completed by the individual's immediate supervisor. If the immediate supervisor is not available, the report shall be completed by the next level of management or the Department Head. Prior to proceeding with any formal investigation, the management level supervisor shall report any incidents of threats or acts of violence to the Department Head. Below is the proposed incident report outline for the PreP for WV:

A – Violent Incident Report

Employee Information

Reporting Employee: _____

Affected Employee(s): _____

Affected Employee(s) Job Title(s): _____

Department: _____

Facility Address: _____

Incident Information

Date incident occurred: _____

Time incident occurred: _____

Specific address and detailed description of description where incident occurred (i.e. empty hallway, warehouse bathroom):

- Type I violence: work-related bullying encompassing assigning unattainable tasks, imposing unrealistic deadlines, burdening with overwhelming workloads, assigning meaningless tasks, providing incomplete information, and threatening job security
- Type II violence: person-related bullying encompassing behaviors such as yelling, intruding, invading one's privacy, spreading rumors or gossip, public humiliation, insulting, or ignoring someone.
- Type III violence: Physically-intimidating bullying encompassing contentious and hostile demeanor that are physical, including criticism, shouting, or public embarrassment, as well as instances of physical aggression or threats of harm, such as finger-pointing, shoving, or obstructing the victim's path.

Checklist of Questions to Answer After a Violent Incident

1. Which type of person threatened or assaulted the staff?

Type I: ☐ Stranger ☐ Thief/Suspect ☐ Other

Type II: ☐ Client/Customer ☐ Passenger ☐ Person in Custody ☐ Patient ☐ Visitor

Type III: ☐ Current Co-worker ☐ Former Co-worker ☐ Supervisor/ Manager

Type IV: ☐ Employee's Friend ☐ Employee's Relative ☐ Family/friend of client or patient

2. What type of violent incident occurred (check all that apply)?

☐ Verbally harassed ☐ Verbally Threatened ☐ Physically Assaulted ☐ Punched

☐ Slapped ☐ Grabbed ☐ Pushed ☐ Choked ☐ Kicked ☐ Bitten

☐ Hit with Object ☐ Threatened with Weapon ☐ Assaulted with Weapon ☐ Animal Attack

☐ Other (Describe): _____

3. Was a weapon used? ☐Yes ☐No

Describe the incident:

4. Was/were the staff working alone? ☐Yes ☐No

If not, who was/were with the staff that may have witnessed the incident?

5. Were there threats made before the incident occurred? ☐ Yes ☐ No

If yes, was it ever reported to the employee's supervisor or manager that the employee(s) was/were threatened, harassed, or was/were suspicious that the attacker may become violent?

6. Are you willing to testify against the Respondent in Court to obtain a restraining order?

☐ Yes ☐ No

Reporter Information

Report Completed By: _____

Department/Job Title: _____

Date: _____ Phone number: _____

Email: _____

B – Violent Incident Investigation

The Department Manager (DM) will complete the investigation into the violent incident. Further investigation and resolution of the incident is expected within seven (7) days in addition to submitting a copy of the completed investigation to Human Resource Department (HRD).

Incident Analysis To be completed by DM Professional:

Has this type of incident occurred before at the workplace? ☐ Yes ☐ No

What were the main factors that contributed to the incident?

What could have prevented or at least minimized the damage caused by this incident?

Post-Incident Response

- ☐ Yes ☐ No Did the staff require medical attention as a result of the incident?
- ☐ Yes ☐ No Did the staff miss work as a result of the incident?
- ☐ Yes ☐ No Was security contacted?
- ☐ Yes ☐ No Was building facilities contacted?
- ☐ Yes ☐ No Was immediate counseling provided to affected workers and witnesses?
- ☐ Yes ☐ No Was critical incident debriefing provided to all affected staff who desired it?
- ☐ Yes ☐ No Was post-trauma counseling provided to affected staff who desired it?
- ☐ Yes ☐ No Was all counseling provided by a professional counselor?=
Has there been follow-up with the staff? ☐ Yes ☐ No

Is this a recurring event? ☐ Yes ☐ No

Are there modifications to be made to PreP for WV to reflect updated practices? ☐ Yes ☐ No

Describe updates to PreP for WV _____

Investigation completed by: _____

Department/Job Title: _____

Date: _____ Phone number: _____

Email: _____

C – Violent Incident Log and Instructions

Log#	Person who completed log	Incident Date	Incident Time	Physical Location	Violence Perpetrator	Incident Type	Police Notified (Y/N)

Conclusion

The staff nurses have emphasized that altruism towards their clients played a key factor in maintaining their value as a nurse in the profession. It is identified that acknowledgement and recognition from the clients makes their work worthwhile. On the other hand, staff nurses continuous to aim professional growth and development and have intense desires to provide better life not only for themselves but also for their loved ones. For the nurses, they deserve more than what they are receiving now and deserve a greener pasture for the future to come. In

line with this, a workplace violence prevention plan is proposed for the nursing management to implement. With workplace violence, it is with the management and administration's responsibility to combat existing incivility and inequality in the workplace. More important so, it is their responsibility to prevent any signs of violence in the workplace. Nevertheless, staff nurses should be taken care of very well in the workplace by the nursing management. As for all, it is everyone's responsibility on how to control violence in the working environment.

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