## VIOLENCE IN THE HEALTH SECTOR

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**V**iolence is a social and public health problem that threatens populational development, affects quality of life and breaks down social tissues. It is a global phenomenon that transcends fronteers, depends on neither race nor age, socioeconomic condition, education, creed or religion, sexual orientation, nor workplace. Nowadays, violence has reached epidemic proportions, branching out into healthcare<sup>(1)</sup>.

Nevertheless, it is not new, the history about Kain and Abel in the Bible is an example of how it is near to impossible to describe any human evolution without recognizing the experience of force, domination and attempts to exclude other human beings<sup>(2)</sup>.

One of the main problems related to this phenomenon is its ethiology and multicausality. It is easy to say that violence is rooted in the foundations of social relations, but it I very diffficult to determine its causes. Some state that it results from biological needs, while others explain it on an individual base, and still others recognize violence as a phenomenon with merely social causes, sometimes provoked by the breakdown of the ruling order, sometimes by the revenge of oppressed people or the weakness of the State<sup>(2)</sup>.

Violence is defined by the World Health Organization (WHO) as the "intentional use of physical force or power, threatened or actual, against oneself, another person or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation"<sup>(3)</sup>.

Apart from civil conflicts and wars, violence can be physical, sexual, mental and moral. It is a generic term that covers all kinds of abuse: behavior that humiliates, degrades or damages a person's well-being, dignity and value<sup>(1)</sup>.

Deaths caused by homicide and suicide, intrafamily violence, sexual violence, against children, adolescents, elderly persons, women and at work are some of the aspects that currently cause most worry <sup>(4)</sup>.

What occupational violence in the health sector is concerned, in view of the large number of workers hit by this phenomenon all over the world, the International Labour Organization (ILO), the World Health Organization (WHO), the International Council of Nurses (ICN) and Public Services International (PSI) established a joint guideline program, aimed at helping these professionals to combat fear, agressions, humiliation and even homicides at their workplace<sup>(5)</sup>.

This initiative constitutes a response to the problem of violence in hospitals and other health centers in developing and developed countries, since research has pointed out that about 25% of violent accidents at work occur in the health sector, and that more than 50% of health workers have already experienced this kind of incidents<sup>(5)</sup>.

A specialist in safety and international health<sup>(6)</sup> affirms that the violence health workers are subject to goes beyond individual aggressions and offenses, since it impairs the quality of care, productivity and development; the same author considers that its consequences involve considerable repercussions on the efficiency of health systems, mainly in developing countries.

There is evidence that the highest incidence rate of violent crimes occurs among ambulance workers, nurses and physicians active in pre-hospital care. Large hospitals in residential areas with high population or crime rates, as well as those in isolated regions are particularly vulnerable<sup>(6)</sup>.

The guidelines set by ILO/WHO/ICN/PSI<sup>(5)</sup> aim to help all people responsible for workplace safety, governments, employers, workers, unions, professional groups and the public in general, focusing on how the problem should be

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approached in the health sector; describing possible interventions in view of local realities; how to determine, evaluate and decrease risks by prevention measures, as well as how to reduce the repercussions of violence to a minimum and avoid its reoccurrence. Hence, we advise everybody to read this document, which can be accessed for free on http://www.ilo.org/public/spanish/dialogue/sector/papers/health/guidelines.pdf

## **REFERENCES**

- 1. Consejo Internacional de Enfermaras CIE. (SWZ). La violência: epidemia mundial [seriado en linea]. 2004. [consultado 17 febrero]; [2 pantallas]. Disponivel en: URL: <a href="http://www.icn.ch/matters\_violencesp.html">http://www.icn.ch/matters\_violencesp.html</a>
- 2. Minayo MCdeS. Violência como indicador de qualidade de vida. Acta Paul Enfermagem 2000; 3(nº especial):159-80.
- 3. Organização Mundial da Saúde. Informe mundial sobre la violencia y salud. Genebra (SWZ): OMS; 2002.
- 4. Organización Panamericana de la salud. Organización mundial de la salud. Informes finales del 44 Consejo Directivo. 55ª Sesión del Comité Regional; 22-26 sep 2003; Ginebra (SWZ): OPS; 2003.
- 5. Organización Internacional de Enfermeras, Organización Mundial de la Salud y Internacional de Servicios Públicos. Directrices marco para afrontar la violencia laboral en el sector de la salud. Ginebra (SWZ): OIT/CIE/OMS/ISP; 2002.
- 6. Di Martino V. Workplace violence in the health sector country case studies (Brazil, Bulgaria, Lebanon, Portugal, South Africa, Thailand, and an additional Australian study): synthesis report. Ginebra (SWZ): OIT/OMS/CIE/ISP; 2002.