

VIOLENT BEHAVIOR ON NURSES IN THE PSYCHIATRIC WARDS

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ABSTRACT

Nurses are vulnerable to violent behavior, especially in the psychiatric ward. Objective: identify violent behavior that is often experienced by nurses and the factors that influence it. Method: using a cross sectional design with an analytic observational approach. The research was conducted at X Hospital in the psychiatric ward: Psychiatry High Care Unit, adult women, men with criminal case and two rooms for men without criminal cases. Sample consisted of 63 nurses through a purposive sampling technique. The instrument used was the Perception of Prevalance of Aggression Scale (POPAS). Data analysis with univariate and bivariate through chi square test with $p < 0.05$. Results: the most violent behavior of patients towards nurses was verbal then physical and sexual violence. There were significant differences in violent behavior received by male and female respondents, such as: provocative and physical threats. There were significant differences in violent behavior based on the type of psychiatric ward such us: nagging, insulting, threats, humiliation to nurses, provocative, physical threats, physical violence that caused minor and serious injuries. Minor injuries were more experienced by male. Sexual temptation is more experienced by women, especially in adult men's treatment rooms, both with and without criminal cases. Conclusion: the most violent behavior of patients towards nurses in psychiatric ward was verbal then physical and sexual violence. There were significant differences in violent behavior based on gender and the type of psychiatric ward. More minor injuries were experienced by male, while sexual temptation was experienced more by women, especially in adult male rooms.

ARTICLE INFO

Keywords:

Violent Behavior; Nurse Safety;
Psychiatric Nursing

PERILAKU KEKERASAN PADA PERAWAT DI RUANG PERAWATAN JIWA

ABSTRAK

Perilaku kekerasan rentan dialami perawat terutama di ruang perawatan jiwa. Tujuan penelitian: mengidentifikasi perilaku kekerasan yang sering dialami perawat dan factor yang mempengaruhinya. Metode penelitian: menggunakan desain cross sectional dengan pendekatan observasional analitik. Penelitian dilakukan di rumah sakit X di ruang perawatan jiwa: Psikiatry High Care Unit (PHCU), dewasa wanita, laki-laki dengan kasus pidana dan dua ruangan laki-laki tanpa kasus pidana. Sampel penelitian berjumlah 63 perawat melalui tehknik purposive sampling. Instrumen yang digunakan Perception of Prevalance of Aggression Scale (POPAS). Analisia data dengan univariate dan bivariate melalui uji chi Square dengan p value $< 0,05$. Hasil penelitian: perilaku kekerasan pasien pada perawat yang paling banyak adalah kekerasan verbal kemudian fisik dan seksual. Ada perbedaan secara signifikan perilaku kekerasan yang diterima responden perempuan dan laki-laki seperti: provokatif dan ancaman fisik kepada perawat. Ada perbedaan secara signifikan perilaku kekerasan berdasarkan jenis ruangan perawatan, seperti: mengomel, mencaci, ancaman kepada perawat, penghinaan kepada perawat, provokatif, ancaman fisik, kekerasan fisik yang menyebabkan cedera ringan dan serius. Cedera ringan lebih banyak dialami responden laki-laki. Godaan seksual lebih banyak

DOI:

[10.24252/kesehatan.v16i1.37340](https://doi.org/10.24252/kesehatan.v16i1.37340)

dialami wanita terutama di ruang perawatan laki-laki dewasa baik dengan kasus pidana maupun tanpa kasus pidana. Kesimpulan: perilaku kekerasan pasien pada perawat di ruang perawatan jiwa yang paling banyak adalah kekerasan verbal kemudian fisik dan seksual. Ada perbedaan secara signifikan perilaku kekerasan berdasarkan jenis kelamin dan jenis ruang perawatan. Cedera ringan lebih banyak dialami responden laki-laki, sedangkan godaan seksual lebih banyak dialami wanita terutama di ruang perawatan laki-laki dewasa.

Kata kunci:

Perilaku Kekerasan; Keselamatan Perawat; Keperawatan Jiwa

Introduction

The nursing profession is one of the professions that is prone to work-related accidents and diseases. This is because nurses face many risks and hazards in the workplace such as: biology, chemical, enviromechanical, physical and psychological hazards. Violent behavior is one example of the psychological hazard faced by nurses (Walton & Rogers, 2017). Violence in the workplace is any physical assault, threat of physical or verbal violence, intimidation, harassment in the work environment or on work-related trips (National Institute for Occupational Safety and Health (NIOSH), 2020). Research conducted in five countries (Poland, Catch Republic, Slovak Republic, Turkey and Spain) found that out of 1089 nurses, 54% stated that they had experienced non-physical violence, 20% had experienced physical violence and 15% had experienced both forms of violence at workplace. In addition, 18% of respondents said they had witnessed physical violence at their workplace (Eldresenter et al., 2020). The most common perpetrators of violence are patients and their relatives (Eldresenter et al., 2020), then colleagues and supervisors (Cheung & Yip, 2017).

Violent behavior such as verbal, physical or intimidation violence often occurs in nurses who provide direct care to patients. This is caused by patients experiencing mental disorders, drunkenness/decreased awareness, ineffective communication from nurses, patient dissatisfaction with nurse services and long waiting times (Cheung & Yip, 2017);(Zhang et al., 2017). The impact of work violence on nurses is that it can interfere with the mental health of nurses, such as; appear fear, anxiety, depression, emotional exhaustion, stress, reduce self-confidence, accelerate emotional exhaustion, and account for about 73% of reasons someone wants to burnout(Hu et al., 2015); (Cheung & Yip, 2017); (Zhao et al., 2018).

Occupational violence most often occurs in mental care rooms and emergency departments/ambulance services (Llor-Esteban et al., 2017), elderly/nursing homes, rehabilitation centers (Eldresenter et al., 2020), and nurses in child rooms (Zhang et al., 2017). Nurses in psychiatric wards have a higher risk of experiencing violent behavior because of the closeness of their relationship with users (Llor-Esteban et al., 2017). Patients in psychiatric wards who are at high risk of committing violence are patients who are on medication, schizophrenia, young age, use alcohol, drug abuse, have a history of violence, and are predominantly hostile interpersonal (d’Ettorre & Pellicani, 2017).

Patients with Severe Mental Disorders (SMD) such as schizophrenia have a higher risk of violent behavior than the general population (Zhang et al., 2023). The mental health disorders they experience make them shameless, easily angry and lead to agitation and aggression. This violent behavior also arises as a result of treatment procedures in the ward such as: isolation, restraint and coercion of treatment (Seun-fadipe et al., 2019). In addition, this violent behavior is a stigmatizing effect that people with mental disorders are dangerous, threaten safety, and are prone to violence. Stigmatization in the form of verbal or physical violence, is usually carried out by people closest to the sufferer, the community, the government, or personnel. The impact of this stigmatization is fear of people with mental disorders, which is then manifested by violent behavior towards families, the community, including nurses who provide mental nursing care (Subu et al., 2016). Other factors are 1) Psychological: closed personality, loss, sexual abuse, family violence. 2) Socio-cultural: the disharmony of the living environment makes oneself want to be angry and speak harshly (Kandar & Iswanti, 2019). 3) Related to disease: type of disease, course of illness, time of

hospitalization, medication adherence, past violent behavior. 4) Demographics: age, male gender, educational level, economic status and social life are significantly associated with violent behavior in SMD patients (Zhang et al., 2023).

If this violent behavior is not addressed, it will endanger the patient, other people, the work environment, and the safety of nurses who provide direct care. Based on this, researchers as part of nursing managers are trying to identify violent behavior that is often experienced by nurses and the factors that influence it: gender and type of psychiatric ward.

Methods

The design of this study used a cross-sectional design with an analytic observational approach. This research was conducted in the psychiatric wards of X Hospital which is a referral hospital for psychiatric patients in Makassar City, South Sulawesi Province, Indonesia. The psychiatric wards used is the Psychiatry High Care Unit (PHCU), adult women, men with criminal cases, and two rooms for men without criminal cases. The population in this study was all nurses who worked in psychiatric wards. The sample in this study was taken using a purposive sampling technique, totaling 63 nurses who met the inclusion criteria. 1) Willing to be a respondent 2) Nurses who is working in psychiatric wards and are present when the research is being conducted.

The instrument used was adapted from the Perception of Prevalence of Aggression scale (POPAS) questionnaire from Nijman et al. (2005) which has been translated into Indonesian and used by previous researchers Elita (2011). This instrument has been modified by the researcher, where out of 15 statements the researcher only used 9 statements related to violence from patients to nurses. This questionnaire aimed to assess the experiences of nurses regarding violence experienced while caring for patients, both: physical, verbal and sexual. Participants in the study were asked to estimate how often they experienced violence from patients over a year, expressed on four scales (never, seldom, often and always).

Data collection was carried out July 26 – August 2, 2021 after obtaining research permission from the hospital. Researchers coordinated with the head of space in distributing questionnaires to respondents. Explanations related to research and informed consent, the researchers attached in the questionnaire. Data analysis in this study consisted of two stages. The first is univariate analysis to look at the characteristics of the respondents and determine the median of nine types of patient violence behavior towards nurses. Both bivariate analyzes were used to assess the relationship between the independent variables (sex and type of psychiatric ward) and the dependent variable (nine types of violent behavior) through the chi-square test with a p value <0.05.

Result

A. Characteristics of Respondents

Respondents in this study amounted to 63 nurses. There were more female respondents (55.6%) than men, most of the ages were in the range of 26-35 years (38.1%), the most education was Associate's Degree (D3) in Nursing (46.0%), the highest work experience was more than 10 years (52.4%). The psychiatric care rooms studied were five psychiatric wards, where the number of samples in each room was an average of 13 respondents. Respondents who had never participated in mental nursing care training (52.4%), were slightly more than those who had attended training. The characteristics of the respondents in this study are shown in table 1.

Table 1. Characteristic of Respondent

Characteristic		n	(%)
Gender	Male	28	44
	Female	35	56
Age	17-25 years	9	14
	26-35 years	24	38
	36-45 years	14	22
	46-55 years	13	21
	56-65 years	3	5
Education	Associate's Degree (D3)	29	46
	Undergraduate Degree (S1)	11	18
	Register Nurse	23	36
Work experience	< 6 years	23	37
	6-10 years	7	11
	> 10 years	33	53
Psychiatric wards	PCHU	13	21
	Adult woman	13	21
	Men with criminal cese	13	21
	Adult male without criminal cases I	13	21
	Adult male without criminal cases II	11	16
Training related to psychiatric nursing care	Yes	30	48
	No	33	52

1. Violent Behavior of Patients in Nurses

Violent behavior in the results of this study indicated that verbal violence was the most frequently experienced by respondents (64-97%), followed by physical violence (51-71%) and sexual violence (0-38%). Based on the median value, it was found that verbal violence was in the category of seldom and often, physical violence was in the never and seldom category, and sexual violence was in the category never experienced by nurses.

The violent behavior of patients in the category often experienced by nurses is verbal violence such as: nagging, insulting, and so on. Violence in the category seldom experienced by nurses, namely: threats to nurses, provocative, physical threats to nurses and physical violence that causes serious injury. Violence in the category never experienced by the patient namely: physical violence causing minor injuries and sexual violence in the form of sexual temptation or rape. Rape was reported to have never been experienced by all respondents (0%). Patient's violent behavior towards nurses can be seen in table 2.

Table 2. Violent Behavior of Patients in Nurses

Violent Behavior	Median (Range of Answers) 1= Never 2= Seldom 3= Often 4= Always	Respondents Experiencing Violence
Verbal Violence		
Nagging, insulting, and so on	3 (1-4)	61 (97%)
Threats to nurses	2 (1-3)	60 (95%)
Humiliation to nurses	2 (1-3)	53 (84%)
Provocative	2 (1-3)	40 (64%)
Physical Violence		
Physical threats to nurses	2 (1-3)	45 (71%)

Causes minor injury	1 (1-3)	32 (51%)
Cause serious injury	2 (1-3)	34 (54%)
Sexual Violence		
Sexual temptation	1 (1-4)	24 (38%)
Sexual Violence or Rape	1 (1)	0

2. Factors Influencing Types of Violent Behavior Experienced by Nurses.

This study examines the factors that influence violent behavior by patients towards nurses. There are two variables studied, namely gender and type of psychiatric ward. The results of research and bivariate analysis can be seen in table 3 and table 4.

Table 3. Relationship between Gender and Types of Violent Behavior

Gender	Category	Types of Violent Behavior								
		1(%)	2(%)	3(%)	4(%)	5(%)	6(%)	7(%)	8(%)	9(%)
Male	Never	2(7)	1(4)	4(14)	4(14)	2(7)	10(36)	11(40)	19(68)	28(100)
	Seldom	10(36)	20(71)	16(57)	19(68)	23(82)	15(53)	15(53)	7(25)	0
	Often	14(50)	7(25)	8(29)	5(18)	3(11)	3(11)	2(7)	2(7)	0
	Always	2(7)	0	0	0	0	0	0	0	0
Female	Never	0	2(6)	6(17)	19(54)	16(46)	21(60)	17(48)	20(58)	35(100)
	Seldom	11(31)	27(77)	25(71)	14(40)	16(46)	12(34)	16(46)	11(31)	0
	Often	13(38)	6(17)	4(12)	2(6)	3(8)	2(6)	2(6)	3(8)	0
	Always	11(31)	0	0	0	0	0	0	1(3)	0
<i>p</i>		0,054	0,71	0,22	0,004	0,003	0,157	0,761	0,761	

Information:

1. Nagging, insulting, and so on.
2. Threats to nurses
3. Humiliation to nurses
4. Provocative
5. Physical threats to nurses
6. Causes minor injury
7. Cause serious injury
8. Sexual temptation
9. Sexual Violence or Rape

Table 3 shows that there are significant differences in violent behavior received by female and male respondents. 1) Verbal violence is provocative (p value = 0.004); 2) Physical violence in the form of physical threats to nurses (p value = 0.004). Physical violence causing minor injuries was not significantly different by gender, but we can see that male respondents experienced more physical violence causing minor injuries (64%) compared to female (40%). 3) Sexual violence, although there is no significant difference, we can see in table 3 that female respondents experienced more sexual temptation (42%) than male respondents (32%).

Table 4. Relationship between Types of Treatment Rooms and Types of Violent Behavior

Ward	Category	Types of Violent Behavior								
		1(%)	2(%)	3(%)	4(%)	5(%)	6(%)	7(%)	8(%)	9(%)
PCHU	Never	0	0	0	8(62)	0	1(8)	1(8)	9(69)	13(100)
	Seldom	6(46)	10(77)	13(100)	3(23)	13(100)	12(92)	12(92)	3(23)	0
	Often	7(54)	3(23)	0	2(15)	0	0	0	0	0
	Always	0	0	0	0	0	0	0	1(8)	0
Adult woman	Never	0	2(15)	2(15)	12(92)	13(100)	13(100)	7(54)	12(92)	13(100)
	Seldom	1(8)	11(85)	11(85)	1(8)	0	0	6(46)	1(8)	0

	Often	1(8)	0	0	0	0	0	0	0	0
	Always	11(84)	0	0	0	0	0	0	0	0
Men with criminal cases	Never	2(15)	1(8)	6(47)	1(8)	0	5(39)	5(39)	6(47)	13(100)
	Seldom	6(46)	8(62)	3(23)	7(53)	9(69)	5(39)	5(39)	4(30)	0
	Often	5(39)	4(30)	4(30)	5(39)	4(31)	3(22)	3(22)	3(23)	0
	Always	0	0	0	0	0	0	0	0	0
Adult male without criminal cases I	Never	0	1(8)	2(15)	1(8)	4(30)	8(62)	8(62)	8(61)	13(100)
	Seldom	5(39)	8(62)	11(85)	12(92)	8(62)	4(30)	4(30)	5(39)	0
	Often	8(61)	4(30)	0	0	1(8)	1(8)	1(8)	0	0
	Always	0	0	0	0	0	0	0	0	0
Adult male without criminal cases II	Never	0	0	0	1(9)	1(9)	4(36)	7(64)	4(34)	11(100)
	Seldom	3(27)	5(45)	3(27)	10(91)	9(82)	6(55)	4(36)	5(45)	0
	Often	6(55)	6(55)	8(73)	0	1(9)	1(9)	0	2(18)	0
	Always	2(18)	0	0	0	0	0	0	0	0
p value		0,01	<0,001	<0,001	<0,001	<0,001	<0,001	0,008	0,076	

Information:

1. Nagging, insulting, and so on
2. Threats to nurses
3. Humiliation to nurses
4. Provocative
5. Physical threats to nurses
6. Causes minor injury
7. Cause serious injury
8. Sexual temptation
9. Sexual Violence or Rape

Table 4 shows that in the PCHU the violent behavior of patients in the category that always occurs is: sexual temptation (8%). Violent behavior in often categories: nagging, insults, and so on (54%); threats to nurses (23%); provocative (15%). The PCHU room is a room intended for new patients who are still agitated, so they are still prone to violence. In the adult women's room, violent behavior was classified as often and always: nagging, insulting, and so on (8%) and (84%). In the male ward with criminal cases, all behaviors were included in the often category (22-39%) except for rape. In the men's ward without a criminal case 1, those who fall into the category often: nagging, insulting, and so on (61%), threats to nurses (30%), physical threats to nurses (8%) cause minor injuries (8%), and cause serious injury (8%). In the men's ward without a criminal case II, those who fall into the category often: nagging, insulting, and so on (55%), threats by nurses (55%), Humiliation to nurses (73%), physical threats by nurses 1 (9%), causing minor injury in 1(9%), and sexual abuse in 2(18%). Violent behavior in always categories: nagging, insulting, and so on (18%).

Table 4 also shows that there were significant differences between the patient's violent behavior and the type of psychiatric ward. 1) Verbal violence in the form of nagging, insulting, and so on (p value = 0.01); threats to nurses (p value = <0.001); humiliation of nurses (p value = <0.001); provocative (p value = <0.001). 2) Physical violence: physical threats to nurses (p value = <0.001), causing minor injuries (p value = <0.001) and causing serious injuries (p value = <0.001). 3) Sexual violence, even though there was no significant difference, we can see that sexual temptation was more common in adult male care rooms, both with and without criminal cases.

Discussion

Violence in the workplace is any physical assault ,threat of physical or verbal violence, intimidation harassment in the work environment or on work-related trips (National Institute for Occupational Safety and Health (NIOSH), 2020). Violence from patients to nurses in this study was divided into three categories: verbal, physical and sexual violence.



1. Violent Behavior of Patients in Nurses

The results of this study found that the most type of violent behavior of patients towards nurses in the psychiatric ward was verbal violence (64-97%), followed by physical violence (51-71%) and sexual violence (0-28%). Research by (Eldresenter et al., 2020) found that 94% of nurses in mental care rooms experienced more verbal violence by patients than other perpetrators. The results of the same study in psychiatric ward found that 46-78% of health workers had experienced verbal violence, 43-78% had received threats, and 9.5-37.2% had experienced sexual harassment (d'Ettoire & Pellicani, 2017). However, other studies have also found different results, namely physical violence by patients is more common in psychiatric care rooms, while non-physical violence by patients is more common in emergency departments (Llor-Esteban et al., 2017).

Seeing this difference, a study found that determinants of the occurrence of violence in psychiatric care were influenced by inadequate patient-health worker relationships, patient-on-call staff relationships, additional hours of patient care per day and high levels of anxiety among staff (d'Ettoire & Pellicani, 2017). Other factors that influence are: overcrowded of the bed, busy and noisy environment, an unequal ratio of nurses and patients (Li et al., 2022)

Physical violence against nurses is in second place as the most common type of violent behavior experienced by nurses: physical threats (71%), causing minor injuries (51%) and causing serious injuries (54%). Research by (Eldresenter et al., 2020) found that 100% of the perpetrators of physical violence in mental care rooms are patients.

The results of this study found that although physical violence is in the seldom category, this violence has been experienced by most nurses and causes minor and serious injuries, so it must remain a concern for nursing managers. Research by (d'Ettoire & Pellicani, 2017) found nurses had experienced serious violence and caused severe injuries such as: injuries including broken bones, eye injuries, and permanent disabilities. The next effect is that the assault victim suffers from post-traumatic stress, anxiety, depression and avoidant behavior. Women had significantly more stress symptoms than men, and post-traumatic stress was not associated with the severity of the physical damage from the assault. So it can be concluded that no matter how light the injury experienced by the nurse, it will still cause post-traumatic stress due to physical violence by the patient. If this is not addressed by the nursing manager, it will affect the quality of service provided by the nurse.

2. Factors Affecting Violent Behavior of Patients in Nurses

The results of this study found that there were significant differences in violent behavior received by female and male respondents such as. Provocative, physical threats to nurses and physical violence that causes minor injuries are more common in men than women. Previous research by (Cheung & Yip, 2017) found that the risk factors for violence experienced by nurses were that male nurses, lack of clinical experience, younger age, less education, clinical position and type of hospital setting.

Different results were obtained for sexual temptation, although there was no significant difference, but it was found that female nurses (42%) experienced sexual temptation more than male nurses (32%), especially in the male ward with and without criminal cases. This is in accordance with research by (Zhao et al., 2018) that female nurses experience more non-physical (verbal and sexual) violence than physical violence.

This research was conducted in five psychiatric ward, the results found were that on average nurses experienced violent behavior in all wards. The results of the same study in psychiatric services found that the care areas was the location where violent behavior most often occurred compared to the communal area and the seclusion area (Camus et al., 2021).

This research also found that violent behavior was experienced more by nurses in male care rooms than by women. Previous research found that factors significantly related to violent behavior in SMD patients were male gender, age, educational level, economic status and social life (Zhang et al., 2023). So it can be concluded that male wards have a higher potential for violent behavior than women.

This study also found that violence in the men's ward with criminal cases (69%) was also relatively high. The men's ward with criminal cases is a ward intended for men who have a history of criminal cases and the average patient here is a patient with violent behavior. Previous research found that risk factors for violent behavior were patients with a history of alcohol use, drug abuse, a history of violence, and dominantly hostile interpersonal (d'Ettorre & Pellicani, 2017).

The results of this study found that there were significant differences in the type of nurse's ward and the seven types of violent behavior received by respondents, such as: nagging, insulting, threats to nurses, insults to nurses, provocative, physical threats, physical violence that causes minor and serious injuries. The results of the same study revealed that there was a significant relationship between violent behavior and the workplace environment in hospitals (mental care rooms, emergency departments, surgery rooms, intensive care, support services) (Seun-fadipe et al., 2019). Even though the working environment used in this study were all mental care rooms, the types of rooms also included inpatient, emergency and intensive care rooms so that these two studies could be compared.

Conclusion

The most of violent behavior experienced by nurses in the psychiatric wards was verbal violence, followed by physical violence and finally sexual violence. Among the nine types of violent behavior by patients, verbal violence in the form of insulting, and nagging was included in the category most often experienced by patients, while rape was sexual violence that nurses had never experienced. There were significant differences in the violent behavior received by male and female respondents and the type of treatment room. More minor injuries were experienced by male respondents, while sexual temptation was experienced more by women, especially in adult male care rooms.

Acknowledgements

Thank you to the hospital and participants in this study. This research was supported by the Universitas Borneo Tarakan, the Institute for Research and Community Service (LPPM) of the Universitas Borneo Tarakan, Sekolah Tinggi Ilmu Kesehatan Makassar and Regional Special Hospital (RSKD) Dadi South Sulawesi Province.

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