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## **VIOLENCE AGAINST HEALTH PERSONNEL IN SOME HEALTH CARE UNITS IN MAPUTO CITY**

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## 1. INTRODUCTION

This report results from a research project on violence against health care providers in selected health care units in Maputo city. Similar studies have been carried out in Portugal, Brazil, South Africa, Bulgaria, Jamaica, Lebanon and Thailand.

A library survey in libraries and documentation centres specialized in health issues in Maputo did not yield any report or publication on violence on the health sector in Mozambique. Interviews with key informants did not yield any information on previous scientific studies or administrative inquiries of any kind. References were made to acts of violence of health care providers against clients and amongst the personnel.

The research was carried out in the following health units in Maputo: Maputo Central Hospital; José Macamo General Hospital (including the health centre linked to the hospital), Mavalane General Hospital, Maputo Military Hospital and Bagamoyo Health Centre.

The questionnaire was applied to health care providers and other health personnel (physicians, nurses, orderlies, technicians - health, pharmacy, laboratory -, administrative personnel) working in the health units selected for the study.

The survey was conducted by a team of researchers working at the Social Sciences and Health Systems Unit at the Faculty of Medicine at the University Eduardo Mondlane. A team formed by Albertina Caldas, Zaida Aly, Preto Sebastiao Capece and Yussuf Adam were responsible for carrying out of the research. Yussuf Adam provided overall guidance and supervision during the research project.

## 2. OBJECTIVES

The main objective of this work was to analyse the level of violence which existed in the hospitals of Maputo city, identifying the factors and forms of struggle or prevention of these events.

The specific objectives defined were the following:

- Obtain information about the level of violence in Maputo health units;
- Gather knowledge about the mechanisms and procedure adopted by health personnel regarding violence problems;
- Evaluate the positive and negative impacts of the adopted mechanisms and study forms to reduce negative impacts;
- Understand the aspirations of the health care personnel and their coping strategies regarding the problems they have to face in their daily work;
- Help the health care personnel in the struggle against violence.

### 3. METHODS

A multi method strategy was used to collect information on violence against health personnel in Maputo City health units. Interviews, direct observation and questionnaires were used to collect data for the research.

Due to the reaction of the health care personnel to the research subject – violence against them – and the general attitude towards the collection of the data on the subject a number of formal and informal interviews were conducted. The main themes of the questionnaire were used as key subjects to sustain a conversation. Most of the interviews were informal and semi-structured. Records of the interactions were made after the interviews and when deemed necessary by the researchers.

Direct observation was used to know the working conditions, the process by followed to attend to health care seekers or clients and the relationships which existed amongst the health workers. Observations showed that there was an apparent peaceful ambient in the relationships between health personnel. We were not capable of observing tensions and conflicts although some interviewees referred to the existence of some problems of intra-personnel nature.

But in what refers to the relation between health care personnel and health care service users it was noted frequent conflict. Discussions were observed in the pharmacies and places where the public is attended to.

The questionnaire survey was used to collect information on violence in the health care units in the last 12 months before the interview date. The questionnaire was very long, 25 pages. There were sections on socio demographic and socio-professional data on the workers at the health units. Different types of violence were covered in specialized sections of the questionnaire.

Violence, was defined for the purpose of the research, as the actions where health personnel or workers of the health units was victim of abuse, menace or aggression in circumstances related with their work, including travel to and from their place of work. Violence was understood for the purpose of this research as menace to the security, well being or health.

The questionnaires defined and distinguished fully the following types of violence: physical violence, verbal aggression, moral aggression, sexual assault and racial discrimination.

The persons which were interviewed were chosen haphazardly in each interview site. After the first interviews in some of the sites a procedure was developed in consultation with the personnel. The interviewers were requested to be at the places in the periods where staff changed shifts.

#### 4. POPULATION AND STUDY SITES

The research was conducted in Maputo city, the capital of the Republic of Mozambique. The town occupies an area 300 square kilometres. The population living in the urban areas is 1.008.000 inhabitants. The population density is 3359 inhabitants per square kilometre. The public sector health network comprises 40 health units of which 5 hospitals, 16 health centres and 19 health posts. 2432 persons work in the existing health network. 221 individuals are considered superior or high level cadres, 468 belonging to the medium level, 737 are considered basic level personnel and 1008 elementary.<sup>1</sup> 396 health workers were interviewed (See table 1). 55 per cent of the interviewees were women and 44.2 men.

Table 1- Questionnaires filled by category of personnel and study site

Work places Type of personnel	Maputo Central Hospital	Mavalane H	G.J. Macamo H	Military H	Bagamoyo Health Centre	J. Macamo Health Centre	Total
Physicians	6	2	1	11	-	-	20
Nurses	45	14	18	24	7	1	109
Orderlies	65	25	26	34	10	1	161
Medicine Technician	6	5	9	11	3	2	36
Pharmaceutical Technician	3	1	-	-	1	-	5
Laboratory Technician	-	-	-	-	1	-	1
Midwife	-	1	-	-	-	-	1
Allied professions	-	3	4	1	1	1	10
Administrative Personnel	11	2	8	18	1	-	40
Others	7	2	-	3	-	-	12
Total	144	55	66	102	24	5	396

Maputo central hospital is the reference unit in the Mozambique public health system. It is considered an independent hospital and is directly controlled by the Ministry of Health. 2235 persons work at MCH: 221 physicians (148 Mozambicans and 73 foreigners) work at the hospital. 509 nurses, 1095 orderlies, 185 health technicians, 161

<sup>1</sup> Mozambique Statistical Annual, National Statistic Institute, 1999,22-36

administrative and secretarial staff and 64 cleaning staff are attached to HCM. In the MCH the sectors chosen for the interviews were the administrative sector, cardiology, SUR – Casualty and Reanimation and the services of medicine (1, 2, 3 and 4).

The Mavalane General Hospital controls 8 Health Centres; 1 of June, Malhangalene, Polana Caniço, Albasine and Inhaca. The Mavalane General Hospital also supervises 5 health posts: Hulene, Chiango, Romao, Cadeia Civil and the Civil Aviation. 407 persons are part of the staff of MGH: 23 doctor’s physicians, 41 nurses, 13 elementary nurses, 40 nurse of maternal and child health, 146 orderlies, 30 health technicians and 16 administrative technicians.

Table 2- Study sites and its personnel

Work places Type of personnel	Maputo Central Hospital	Mavalane H	G.J. Macamo H	Military H	Bagamoyo Health Centre	J. Macamo Health Centre
Physicians	221	23	24	22	1	-
Nurses	509	94	99	50		
Orderlies	1095	146	137	na	18	1
Medicine Technician	185	30	33	na	19	2
Pharmaceutical Technician			-	-		-
Laboratory Technician	-	-	-	-		-
Midwife	-		-	-	-	-
Allied professions	-					1
Administrative Personnel	161	16	15		1	-
		2				
Others	64	2	na	3	1	-
Total	2235	407	405	228	40	5

Jose Macamo General Hospital coordinates a health area which includes 8 health centres; Jose Macamo, Bagamoyo, Magoanine-Novo, Magoanine, Infulene, Inhagoia and Mabor. The personnel from Jose Macamo support most of this peripheral health centres and receives patients from them.

Military Hospital is the main reference hospital for the military in Mozambique. It is an independent hospital and is controlled by the Ministry of Defence. 238 persons work in Military Hospital of which 72 persons are civilians. The remaining persons are military. Data about workers in the hospital was not supplied due to the fact that it is considered confidential information. The main clients of the hospital are military personnel and they do not pay for the services. Civilians use the hospital but pay high fees.

Bagamoyo Health Centre is situated in the Urban District No5 and provides health services to the following neighbourhoods: Bagamoyo, Malhazine, Jorge Dimitrov, 25 of June A and B and Green Zones. It is a primary health care unit and has only one physician who happens to be the director. The Health centre has in total 40 workers. Bagamoyo Health Centre depends of the Jose Macamo Hospital which supplies medicine and materials. It is also the reference centre for the Health Centre

The sites for research were chosen according to three criteria: 1) willingness of the administration or personnel to support this kind of research, 2) representativeness of the different levels of the Maputo city and Mozambique health care institutions and 3) reference to the existence of conflicts between clients and health care providers or health personnel.

In each site a number of questionnaires were applied. The different categories of personnel were covered. Arrangements were made as for the research teams to be present at the places in moments chosen or recommended by the health workers. Various arrangements for the interviews were experimented. Researchers were at the hospital all the time or during a period of the day. The number of questionnaires filled was very low. Health care personnel alleged that they did not have time during working hours.

## 5. THE RESULTS

In Maputo Central Hospital 144 questionnaires were applied to different kinds of personnel. (See table 1) In this unit the most frequent types of violence were physical, verbal and moral aggression. 17 individuals were victims of physical aggression, 74 verbal aggressions, 47 of moral aggression, 20 of racial aggression and 4 sexual harassment. (See table 2 - annex). The aggressors were family members of the patients or the patients themselves. In some cases the aggressor was a chief or a member of the permanent staff.

In Mavalane General Hospital 55 questionnaires were filled. 3 persons alleged to have been victims of physical aggression, 17 of verbal aggression, 13 of moral aggression, 1 of sexual harassment. No case of racial discrimination was reported by the personnel. Physicians alleged that they did not suffer any type of aggression... (See table 3- annex).

In Jose Macamo General Hospital 71 members of diverse category of staff were interviewed. Of the interviewed 4 alleged to have been victims of physical violence, 19 of verbal aggression, 8 of

moral aggression and 1 of racial discrimination. No case of sexual harassment was reported... (See table 4 - annex)

In the Military Hospital we obtained 102 questionnaires. Violence cases reported were: 1 case of physical violence, 28 of verbal aggression, 8 of moral aggression and 6 of racial discrimination. No case of sexual harassment was reported... (See table 5-annex). No many cases of violence were reported from the Military Hospital. Doctors in the military hospital were the category of staff less prone to suffer cases of violence from clients. The staff category more affected by violence is the category of the orderlies or serventes.

In the Bagamoyo Health Center the violence cases reported were: 12 of verbal aggression, 5 of moral aggression, 1 racial discrimination. No case of physical violence or sexual harassment was reported... (See table 6- annex). Violence is not a preoccupation for the workers at the center.

We applied 396 questionnaires in the various health units in Maputo city. The results show that 7.8 % ( 31) were victims of physical violence, 38% (151) of verbal aggression, 20, 5% (81) of moral aggression, 1, 1, 3 % ( 5) of sexual harassment, 7 % ( 28) of racial discrimination and 25.4 % ( 100) did not respond to the questions. . (See table).

Maputo Central Hospital was the health unit where most cases of all type of violence were reported. The type of violence most reported was verbal violence or aggression. The reason behind this situation, is according to the staff interviewed, is the high number of clients that attend the hospital. Bagamoyo Health Center is the unit where less cases of violence were registered. The type of most frequent violence reported was verbal aggression. Military Hospital presented only one case of physical violence.

Bagamoyo Health enter was the unit that registered the smallest number of cases of verbal and moral aggression. Bagamoyo Health Center and Jose Macamo Hospital registered only one case each of racial discrimination. José Macamo Hospital, Military Hospital and Bagamoyo Health Center did not register any case of sexual harassment. Mavalane Hospital did not receive any case of racial discrimination. (See table 7)

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<del>Table 7 - Results Types of violence Hospital</del>	Physical (%)	Verbal aggression (%)	Moral aggression. (%)	Sexual harassment (%)	Racial discrimination (%)
H.C.Maputo	17	74	47	4	20
H.G.Mavalane	3	17	13	1	0
H.G.J.Macamo	4	20	8	0	1
H. Militar	1	28	8	0	6
C.S. Bagamoyo	0	12	5	0	1
Victims =73.1% Not responded=26, 9% Total=100%	25= 6, 3%	151= 38%	81= 20, 5%	5=1, 3%	28= 7%

In general, males complained more of physical violence and racial discrimination. Females felt more the results of other types of violence: moral and verbal aggression, and sexual harassment.

(See table 7.1 Table 7.1- Gender and Violence

Type of violence Gender	Violence	Verbal Ag.	Moral Ag.	Sexual H.	Racial Discrimination
Male	13= 52%	74= 49%	40= 48, 2%	2= 33, 3%	15= 51, 7%
Female	12= 48%	77= 51%	43= 51, 8%	4= 66, 7%	14= 48, 3%
Total	25=100%	151=100%	81=100%	6=100%	28=100%

The opinion of health staff about violence is that verbal abuse or violence is very common in the health units is very common. Health unit's staff considers that verbal violence is very common in the hospitals and up to a certain point it should be understood because it is a product of the nervousness of the patients family and of the patients themselves due to the situation in which they are.

Victims do not do anything to reclaim their rights. In many instances the health personnel which considered themselves victims of aggression or violence did not do anything. They did not take any measure. They tried to fake that nothing had happened. In other cases they told family or friends about the incident. The reason for this type of behavior according to the interviewees is that they do not know what to do, to whom to direct their preoccupations. Other said that there is no trade union body or a special unit where they could lodge a complaint or participate about the event. A small number of workers did communicate to their hierarchical superiors about the incidents. The staff considers that working conditions in which they work are one of the factors of violence. These scenes of violence happen because the patients and their families demand a more adequate treatment.

The solutions proposed by the health personnel vary from increase in the availability of security guards to gadgets. The health staff proposed the following measures:

- Security Measures (ex. guards, alarms, radio transmitters) - 17%
- Environment Upgrading (lighting, privacy, access, cleanliness) - 13, 8%
- Special clothing or equipment- 13, 6%
- Restricted access to public- 10, 8%
- Explicit protocols for patients (control, procedures for restraint, medication, a access to information)-7, 3%
- Selection of patients (to detect and evaluate the presence of aggressive behavior) -7, 3%
- Change of time-tables and shifts- 7, 3%
- Training - 5%
- Restriction of exchange of money in the workplace- 4%
- Increpes In Sta. site- 3,7%
- Reduction of work time alone- 2, 5%
- Check in procedures for the personnel- 2%
- Other changes - 0, 7%

## 6. CONCLUSIONS

The research project allows us to conclude that staff working in the health sector institutions is not prepared for a questionnaire of this type. Various forms of resistance to a research on violence in the health care units were encountered. A fair image of the situation of violence in the health workplaces was constructed. The levels of violence, the relationships between staff members and between staff members and clients were studied. The study allows us to describe the opinions of the health care unit staff members about the measures which could be taken to diminish violence against workers. An evaluation of the relevance of methods to control violence was initiated.

Verbal aggression is the type of violence most present in Maputo health units. The unit which registers the biggest number of violence cases is the Maputo Central Hospital due to the sheer size of its operations. Mechanisms to cope with violence exist in the various health centers: security guards, restricted access to the public and special equipment and clothes. But they have not. bei sufficient to curb violence in the workplace.

Violence in the health care provision units is according to staff caused by lack of conditions to attend to the patients and the time patients have to wait to be treated. Patients become more aggressive as they have to wait to be treated.

The level of violence in the health centers and hospitals is very high but this violence is regarded as a normal situation part of the day to day. Denunciativos are not. made because the leaders and directors are not prepared to act upon the denunciations

National development programs should incorporate studies to prevent violence because its affects the normal functioning of the hospitals and consequently the performance of health care staff.

Financial and human conditions should be created in order to allow for the normal functioning of health care units.

## ANNEXES

### TABELAS DE DISTRIBUIÇÃO DOS TIPOS DE VIOLÊNCIA NOS HOSPITAIS

Tabela 2- Type of violence in HCM

Tipos de violência. Categoria	Violência física	Agressão verbal	Agressão moral	Assédio sexual	Discriminação racial
Médicos	0	3= 4,2%	0	0	0
Enfermeiros	5=29,4%	26= 36,6%	20= 42,5%	0	10= 50%
Serventes	9= 52,9%	31= 43,6%	22= 47,7%	2= 50%	10= 50%
Pessoal administrativo	1= 5,8%	4= 5,6%	3= 6,5%	1= 25%	0
Pessoal técnico	0	3= 4,2%	1= 2,1%	1= 25%	0
Outro	2= 11,7%	4= 5,6%	1= 2,1%	0	0
Total	17=100%	74=100%	47=100%	4=100%	20= 100%

Tabela 3- Type of violence in HGM

Tipos de violência. Categoria	Violência física(%)	Agressão verbal(%)	Agressão moral(%)	Assédio sexual(%)	Discriminação racial(%)
Médicos	0	0	0	0	0
Enfermeiros	1= 33,3%	5= 29,4%	46,2%	1= 100%	0
Serventes	1= 33,3%	7= 41,2%	15,4%	0	0
Pessoal administrativo	0	0	0	0	0
Pessoal técnico	0	2= 11,8%	15,4%	0	0
Profissões aliadas	0	1= 5,9%	7,7%	0	0
Outro	1= 33,3%	2= 11,8%	15,4%	0	0
Total	3= 100%	17= 100%	100%	1= 100%	0

Tabela 4- Type of violence in HGJM

Tipos de violência. Categoria	Violência física(%)	Agressão verbal(%)	Agressão moral(%)	Assédio sexual(%)	Discriminação racial(%)
Médicos	0	0	0	0	0
Enfermeiros	1= 25%	6= 31,6%	3= 37,5%	0	0
Serventes	3= 75%	7= 36,9%	1= 12,5%	0	0
Pessoal administrativo	0	2= 10,5%	3= 37,5%	0	0
Pessoal técnico	0	4= 21,1%	0	0	1= 100%
Outro	0	0	2= 12,5%	0	0
Total	4= 100%	19= 100%	9= 100%	0	1= 100%

Tabela 5- Type of violence in HM

Tipos de violência. Categoria	Violência física(%)	Agressão verbal(%)	Agressão moral(%)	Assédio sexual(%)	Discriminação racial(%)
Médicos	0	5= 17,9%	0	0	1= 16,7%
Enfermeiros	0	4= 17,9%	2= 25%	0	2= 33,3%
Serventes	1 =100%	9= 32,1%	3= 37,5%	0	1= 16,7%
Pessoal administrativo	0	4= 14,3%	2= 25	0	0
Pessoal técnico	0	4= 14,3%	1= 12,5%	0	2= 33,3%
Profissões aliadas	0	1=	0	0	0
Outro	0	0	0	0	0
Total	1= 100%	28= 100%	8= 100%	0	6= 100%

Tabela 6- Type of Violence in C.S. Bagamoio

Tipos de violência. Categoria	Violência física(%)	Agressão verbal(%)	Agressão moral(%)	Assédio sexual(%)	Discriminação racial(%)
Médicos	0	0	0	0	0
Enfermeiros	0	3= 25%	0	0	0
Serventes	0	5= 41,6%	4= 80%	0	1= 100%
Pessoal administrativo	0	0	0	0	0
Pessoal técnico	0	2= 16,7%	0	0	0
Técnico de farmácia	0	1= 8,3%	0	0	0
Profissões aliadas	0	1= 8,3%	1= 20%	0	0
Total	0	12= 100%	5= 100%	0	1= 100%