

VIOLENCE AGAINST MEDICAL RESIDENTS FROM CLUJ-NAPOCA HOSPITALS: RATIONALE AND METHODOLOGY

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Introduction. Even though workplace violence is frequent in healthcare, such events were exacerbated by the COVID-19 pandemic. During this period, new challenges arose for medical residents (change of specialty, increased workload, different schedules, extended exposure and contact with patients), and yet little is known about how the pandemic impacted their experience with workplace violence.

Aim. The first objective of this study was to document the prevalence and preventive measures regarding workplace violence, as experienced by medical residents, before and during the COVID-19 pandemic in Cluj-Napoca's public hospitals. Building on the outcomes of the first objective, a second objective is to provide insights into medical residents' perceptions of violent events and their views on prospective prevention measures.

Material and methods. A mixed-methods design was used, combining secondary data analysis from a larger study and primary data collection, using interviews with resident doctors. This study is a part of a larger research project that had the main goal to measure violence against healthcare workers during the COVID pandemic, not only in Romania, but also in partner countries – Armenia, Georgia and Moldova, supported by ICREATE: Increasing Injury Capacity in Research in Eastern Europe. For this research, a sub-sample of the total population from Romania (N=199), out of which 100 resident doctors were used, who worked in 8 different hospitals in Cluj-Napoca, between April and November 2022. The disseminated questionnaire contained multiple domains: socio-demographic information, workplace violence measures set in place in public hospitals of Cluj-Napoca and healthcare professionals' experience before and during COVID-19. Having the questionnaire as a baseline, a secondary data analysis was conducted, acting as preliminary results to be used for in-depth interviews. Guided by this secondary data analysis, it was observed that the term workplace violence is understood differently across groups. Also, there were differences between proposed prevention strategies in the hospitals and how workplace violence was perceived, leading to a necessity to develop an interview guide to explore the meaning of violence in their respective hospitals. Thus, the interviews are pending and will be held with medical residents, to grasp concepts and perceptions about workplace safety among them.

Results. Secondary-data analysis showed that the most predominant forms of workplace violence before and during the pandemic are verbal threats (59.6% before and 54.2% during), followed by theft (26.8% and 19.1%) and physical violence (12.2% and 14.6%). The qualitative part is in progress and will complement the first set of data, by offering more in-depth information about the experiences and causes of violence, event follow-up, needs and future expectations.

Conclusions. This study adds value to the existing literature and practices, by putting a spotlight on the prevalence of different types of violence against medical residents in hospitals of Cluj-Napoca, before and during the COVID-19 pandemic; as well as preventive and management measures.