

## Introduction

The National Institute for Occupational Safety and Health (NIOSH) defines workplace violence as "acts (including physical assaults and threats of assaults) directed toward persons at work or on duty". The health care sector leads all other industry sectors in incidence of nonfatal workplace assaults. Pediatric residents are positioned at the frontline of stressful interactions with parents and families who are under significant personal, financial, medical and emotional stress. Several recent incidents of violence or near-violence inspired us to attempt to document the prevalence of pediatric residents' experience with workplace violence. We hypothesize that residents are inadequately trained to handle such workplace violence and that they would benefit from further training in how to prevent and respond to workplace violence.

## Methods

We recruited a convenience sample of 25 US Pediatric Residency Program Directors in 2007. All Program Directors agreed to distribute a self-administered web-based questionnaire addressing resident exposure to verbal or physical abuse from patients and/or patients' families to residents in their programs.

## Results

Participating programs ranged in size from 13 to 150 residents. Five hundred forty one of 1211 (45%) eligible residents completed the web-base questionnaire. Response rates according to year were:  
 PL-1 (Postgraduate level) - 34%  
 PL-2 – 31%  
 PL-3 – 31%.  
 Chief Residents – 4 %.  
 Seventy percent of respondents were female  
 91% were from academic residency programs..

**Thirty three percent** of respondents (178 of 541) were **verbally or physically assaulted** by patients or patients' families during their residency training. Verbal abuse was more common than physical abuse. One hundred seventy four residents (**32%**) were **verbally assaulted** during their residency training, while only **50 (9 %)** responded that they had been **physically assaulted**. (P < .0005)

One hundred percent of the residents who were verbally abused reported that other staff members were involved, and 83% of those who were physically assaulted reported that others were involved in the assault.

**Seventy one percent** of pediatric residents reported having **no teaching about workplace violence** during their residency training. The majority (**74%**) thought they would **benefit from additional training in managing angry patients and families**.

## Conclusion

Over a third of Pediatric residents experience some form of verbal and/or physical abuse from patient's families. Yet, the majority do not receive any formal training about workplace violence and managing angry patients and families. Pediatric Residents often encounter potentially dangerous patients and/or families in the course of their work. Residents are often the first physician a patient will encounter during their illness experience. The high incidence and adverse consequences of verbal and physical assaults in addition to the lack of formal teaching on workplace violence suggests that all Pediatric Residents should receive training in recognition, management and prevention of workplace violence. A curriculum on workplace violence and managing difficult situations should be implemented. Violence must not be tolerated in our Pediatric Training Institutions.

## References

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