

# Assessment of Nurses' Knowledge About Aggression and Ways Used for Aggressive Patients at Psychiatric Wards

Mohammed Abdulla\*, and Saja Hashem Mohammed<sup>2</sup>.

## **ABSTRACT:**

**Background:** The media gives a great deal of attention to persons with mental illness who commit an aggressive act. Violence and aggression in healthcare is prevalent and often highlighted by the media, researchers and healthcare organizations as well as by healthcare professionals. Incidents of violence and/or aggression are hard and perilous clinical problems that can potentially lead to harm to both staff and patients. The high prevalence of aggression will increase the adverse consequences and highlights the importance of effective medical treatment for aggressive patients.

**Objectives:** To evaluate nurses' knowledge regarding aggression and ways used for aggressive patients at Psychiatric Hospital in Baghdad.

**Materials and Method:** A descriptive study was conducted for the period from 9 July 2019 to 18 July 2019. A probability sampling (random technique) was used, the sample consisted of (50) nurses who were working at Psychiatric Training Hospital in Baghdad. Data were collected by using constructed questionnaire after validity and reliability of it were estimated. Reliability of the questionnaire was estimated through a pilot study and the validity was submitted through (14) experts related in the field of study. All data were collected through an interview approach. Data were analyzed throughout using of descriptive and inferential statistical analysis test using SPSS Version-26.

**Results:** The findings of current study indicate that the nurses have intermediate level of knowledge regarding aggression and ways used for aggressive patients.

**Conclusion:** The study concludes that there is a considerable lack in nurses' knowledge regarding approaches utilizing to deal with aggressive psychiatric patient.

**Recommendations:** The study recommends that there is an important need for education and training the nurses who have work in psychiatric ward especially who have lack or inadequate knowledge and skills about the ways to deal with psychiatric patients.

**Keywords:** Assessment, Aggression, nurses' Knowledge.

---

## **i. INTRODUCTION**

Violence pervades the lives of many people around the world, and touches all of us in some way. There is no country or society is untouched by violence. Violence has likely constantly been a part of the human experience. Its impact may be seen, in numerous forms, all over the world. Violence and aggression against medical staff is a global problem<sup>[1]</sup>. The definition of the World Health Organization defined violence as comprehensive of concepts indicate physical force /aggression, purposeful intent, direction of intent and the possibility of actual physical or psychological harm<sup>[2]</sup>.

Health care employees, especially nurses work in psychiatric wards, all the time be victims of aggressive behaviour from their patients, several psychiatric nurses have been violated frequently by patients of psychiatric hospital, about a

third of nurses in mental health settings have experienced physical violence, aggression and violence causes health staff absence, legal, security, and decreased productivity. The matter affects employees physically and emotionally, and contributes to decrease rates of job satisfaction <sup>13</sup>l.

Studies have shown that nurses are prone to patients' aggression at their workplace, between 68% and 96% of nurses have experienced a minimum of one type of verbal aggression, every year 25% of psychiatric nurses in public sector hospitals are subjected to a violent incident leading to injury, a rate thrice beyond that of other career <sup>14</sup>l. Treatment of aggressive patients often concentrate on treat the comorbid or underlying psychiatric diagnosis such as schizophrenia or bipolar disorder. Successful treatment of comorbid disorders lead to successful treatment of aggressive conducts <sup>15</sup>l.

The emphasis during a psychiatric ward continues to be placed on skills concerning to physical restraints, it refer to utilization of fabric or belts to limit movement of patient, whereas chemical restraints refer to utilization of drugs to attain the same result, many studies have found the negative result of physical restraints on patients. it's reported that physical restraints do very little to help calm a patient down and should presumably increase the agitation more. However, it's reported that physical restraints still be a common practice in nursing to manage the aggressive patient <sup>16</sup>l.

ii. **OBJECTIVES:**

The study aimed to assess nurses knowledge regarding aggression and ways used to deal with aggressive client .

iii. **METHODOLOGY:**

A descriptive design study was conducted for the period from 9 July 2018 to 18 July 2019 to assess the nurses knowledge toward aggression and ways used to deal with aggressive patients at Al-Rashad Psychiatric Hospital in Baghdad city. A (50) nurses working in the hospital were randomly selected from each ward of Al- Rashad hospital.

The nurses were participated voluntarily in the study. The data were collected through using a questionnaire after estimate the reliability and validity . The content validity of the questionnaire was estimated through a panel of experts related to the study field, reliability was estimated through a pilot study which included (14) nurses who were excluded from the study samples, and determined by computation of Alpha Correlation Coefficient (Cronbach's Alpha), the alpha correlation coefficient ( $r$ ) was =0.70. The questionnaire has been constructed and developed as a tool for data collection through an comprehensive review of literature, related studies, books and thesis .

The study instrument developed to include the following parts:-

Part 1:

**Section A.** Is a covering Letters to obtain the agreement of nurses to participate in the present study.

**Section B.** This section includes the socio- demographic characteristics of the sample, which includes: Gender, age, level of education. year of experience in general hospital, year of experience in psychiatric hospital and training course

**Part-II:** This part of questionnaire includes the staff Knowledge's about Aggression and Violence and ways when dealing with the aggressive patient, this part consist of two domains as follow:-

**1- Domain one:** (MCQs) Its consist of (16) Items which is constructed to assess levels of the nursing staff knowledge's about aggression and violence.

**2- Domain two:** (MCQs) Its consist of (8) Items about the ways used by nurse to deal with the aggressive psychiatric patient.

This tool is designed through use of multiple-choice question, the scoring system of the scale is :(1) for true answer and (0) for false answer.

Cut of points for scores of domain one very low= (0.38-0.5), low= (0.51-0.56), intermediate = (0.57-0.63), good= (0.69-0.88).

Cut of points for scores of domain two: very low= (0.25-0.38), low= (0.39-0.5), intermediate = (0.51-0.63), good= (0.75-0.88).

Cut of points for scores of total knowledge: very low= (0.76-0.94), low= (1-1.13), intermediate = (1.19-1.31), good= (1.32-1.51).

**Results:**

**Table (1). Distribution samples of the study according to Demographic Characteristics of the participants**  
*f: Frequency, %: Percent*

Gender			Training Course		
Gender	f	%		f	%
Male	27	%54.0	Not Participate	16	%32.0
Female	23	%46.0	Once Participated	13	%26.0
<b>Total</b>	<b>50</b>	<b>%100.0</b>	More Than Once	21	%42.0
			<b>Total</b>	<b>50</b>	<b>%100.0</b>
Age			Level of Education		
Years	f	%	Level	f	%
20- 29 years	13	%26.0	School	2	%4.0
30-39 years	18	%36.0	Preparatory	27	%54.0
40 and more	19	%38.0	Institution	16	%32.0
<b>Total</b>	<b>50</b>	<b>%100.0</b>	College	5	%10.0
			<b>Total</b>	<b>50</b>	<b>%100.0</b>
Years of Experience			Years of Experience in Psych. Hospital		
Years	f	%	Years	f	%
1-10 years	25	%50.0	1-10 years	35	%70.0
11 -20 years	20	%40.0	11 -20 years	11	%22.0
21- 30 years	1	%2.0	21- 30 years	2	%4.0
more than 30	4	%8.0	more than 30	2	%4.0
<b>Total</b>	<b>50</b>	<b>%100.0</b>	<b>Total</b>	<b>50</b>	<b>%100.0</b>

Table (1) Shows that (54% ) of the samples were male and (46% ) were female, the high percentage

percentage of age participants (38%) were (40 and more) years .(54%) of the participants have preparatory education .Half of participants have (1 - 10) years' experience in general hospitals while (70%) have (1 - 10) years' experience in psychiatric hospitals, about(42%) of participants have twice training course at least regard dealing with the aggressive patient.

**Table (2) Distribution of Nurses' knowledge about Aggression and Violence (Domain One) regarding Demographic Characteristics**

Demographics		Level of Knowledge									
		very low		low	intermediate	good	total				
		f	%	f	%	f	%	f	%		
Gender	male	5	0.0%	8	16.0%	5	10.0%	9	18.0%	27	54.0%
	female	7	14.0%	5	10.0%	4	8.0%	5	10.0%	21	42.0%
	<b>Total</b>	<b>12</b>	<b>24.0%</b>	<b>13</b>	<b>26.0%</b>	<b>9</b>	<b>18.0%</b>	<b>14</b>	<b>28.0%</b>	<b>50</b>	<b>100.0%</b>
Age	20- 29	3	6.0%	5	10.0%	3	6.0%	2	4.0%	13	26.0%

	30-39	6	2.0%	8	8.0%	9	3.0%	10	5.0%	36	6.0%
	40 and more	3	5.0%	5	10.0%	2	4.0%	9	8.0%	19	8.0%
	<b>Total</b>	<b>12</b>	<b>4.0%</b>	<b>14</b>	<b>28.0%</b>	<b>9</b>	<b>3.0%</b>	<b>15</b>	<b>30.0%</b>	<b>50</b>	<b>100.0%</b>
Level of Education	School	7	14.0%	8	16.0%	2	4.0%	10	20.0%	27	54.0%
	Preparatory	7	14.0%	8	16.0%	2	4.0%	10	20.0%	27	54.0%
	Institution	3	6.0%	4	8.0%	5	10.0%	4	8.0%	16	32.0%
	College	1	2.0%	2	4.0%	1	2.0%	1	2.0%	5	10.0%
	<b>Total</b>	<b>12</b>	<b>24.0%</b>	<b>14</b>	<b>28.0%</b>	<b>9</b>	<b>18.0%</b>	<b>15</b>	<b>30.0%</b>	<b>50</b>	<b>100.0%</b>
Years of Experience	1-10	7	14.0%	9	18.0%	4	8.0%	5	10.0%	25	50.0%
	11 -20	4	8.0%	4	8.0%	4	8.0%	8	16.0%	20	40.0%
	21- 30	0	0.0%	1	2.0%	0	0.0%	0	0.0%	1	2.0%
	< 30	1	2.0%	0	0.0%	1	2.0%	2	4.0%	4	8.0%
	<b>Total</b>	<b>12</b>	<b>24.0%</b>	<b>14</b>	<b>28.0%</b>	<b>9</b>	<b>18.0%</b>	<b>15</b>	<b>30.0%</b>	<b>50</b>	<b>100.0%</b>
Years of Experience in Psych. Hosp.	1-10	8	16.0%	11	22.0%	7	14.0%	9	18.0%	35	70.0%
	11 -20	3	6.0%	2	4.0%	1	2.0%	5	10.0%	11	22.0%
	21- 30	0	0.0%	1	2.0%	0	0.0%	1	2.0%	2	4.0%
	< 30	1	2.0%	0	0.0%	1	2.0%	0	0.0%	2	4.0%
	<b>Total</b>	<b>12</b>	<b>24.0%</b>	<b>14</b>	<b>28.0%</b>	<b>9</b>	<b>18.0%</b>	<b>15</b>	<b>30.0%</b>	<b>50</b>	<b>100.0%</b>
Training Course	Not	3	6.0%	3	6.0%	4	8.0%	6	12.0%	16	32.0%
	Once	3	6.0%	6	12.0%	3	6.0%	1	2.0%	13	26.0%
	< once	6	12.0%	5	10.0%	2	4.0%	8	16.0%	21	42.0%
	<b>Total</b>	<b>12</b>	<b>24.0%</b>	<b>14</b>	<b>28.0%</b>	<b>9</b>	<b>18.0%</b>	<b>15</b>	<b>30.0%</b>	<b>50</b>	<b>100.0%</b>

f: Frequency, %: Percent

Table (2) show that (18%) of male and (12%) of female have good level of knowledge about aggression and violence, (12%) of samples within thirty decade of age have very low level of knowledge, (10%) of participants who have school and preparatory education have good level of knowledge, (16%) of nurses with experience (11-20) years' in general hospital have good level while (18%) of nurse have experience (1-10) years' in psychiatric hospital have good level of knowledge, (16%) of nurses who have more than once participated in training course have good level of knowledge while (12%) of nurse who not participated have good level of knowledge.

. Table(2.1) Distribution Nurses' knowledge about ways deal with aggressive patient (Domain two) regarding Demographic Characteristics

Demographics		Level of Knowledge									
		very low		low		intermediate		good		Total	
		f	%	f	%	f	%	f	%	f	%
Gender	male	7	14.0%	8	16.0%	8	16.0%	4	8.0%	27	54.0%
	female	6	12.0%	4	8.0%	10	20.0%	3	6.0%	23	46.0%
	<b>Total</b>	<b>13</b>	<b>26.0%</b>	<b>12</b>	<b>24.0%</b>	<b>18</b>	<b>36.0%</b>	<b>7</b>	<b>14.0%</b>	<b>50</b>	<b>100.0%</b>
Age Years	20- 29	4	8.0%	3	6.0%	4	8.0%	2	4.0%	13	26.0%
	30-39	5	10.0%	2	4.0%	8	16.0%	3	6.0%	18	36.0%

	10 and more	4	8.0%	7	14.0%	6	12.0%	2	4.0%	19	38.0%
	<b>Total</b>	<b>13</b>	<b>26.0%</b>	<b>12</b>	<b>24.0%</b>	<b>18</b>	<b>36.0%</b>	<b>7</b>	<b>14.0%</b>	<b>50</b>	<b>100.0%</b>
Level of Education	School	0	0.0%	0	0.0%	2	4.0%	0	0.0%	2	4.0%
	Preparatory	6	12.0%	6	12.0%	11	22.0%	4	8.0%	27	54.0%
	Institution	5	10.0%	4	8.0%	4	8.0%	3	6.0%	16	32.0%
	College	2	4.0%	2	4.0%	1	2.0%	0	0.0%	5	10.0%
	<b>Total</b>	<b>13</b>	<b>26.0%</b>	<b>12</b>	<b>24.0%</b>	<b>18</b>	<b>36.0%</b>	<b>7</b>	<b>14.0%</b>	<b>50</b>	<b>100.0%</b>
Years of Experience	1-10	7	14.0%	4	8.0%	9	18.0%	5	10.0%	25	50.0%
	11 -20	5	10.0%	6	12.0%	7	14.0%	2	4.0%	20	40.0%
	21- 30	0	0.0%	0	0.0%	1	2.0%	0	0.0%	1	2.0%
	< 30	1	2.0%	2	4.0%	1	2.0%	0	0.0%	4	8.0%
	<b>Total</b>	<b>13</b>	<b>26.0%</b>	<b>12</b>	<b>24.0%</b>	<b>18</b>	<b>36.0%</b>	<b>7</b>	<b>14.0%</b>	<b>50</b>	<b>100.0%</b>
Years of Experience in Psych. Hosp.	1-10	9	18.0%	7	14.0%	13	26.0%	6	12.0%	35	70.0%
	11 -20	3	6.0%	3	6.0%	4	8.0%	1	2.0%	11	22.0%
	21- 30	0	0.0%	1	2.0%	1	2.0%	0	0.0%	2	4.0%
	< 30	1	2.0%	1	2.0%	0	0.0%	0	0.0%	2	4.0%
	<b>Total</b>	<b>13</b>	<b>26.0%</b>	<b>12</b>	<b>24.0%</b>	<b>18</b>	<b>36.0%</b>	<b>7</b>	<b>14.0%</b>	<b>50</b>	<b>100.0%</b>
Training Course	Not	3	6.0%	4	8.0%	6	12.0%	3	6.0%	16	32.0%
	Once	6	12.0%	4	8.0%	1	2.0%	2	4.0%	13	26.0%
	< once	4	8.0%	4	8.0%	11	22.0%	2	4.0%	21	42.0%
	<b>Total</b>	<b>13</b>	<b>26.0%</b>	<b>12</b>	<b>24.0%</b>	<b>18</b>	<b>36.0%</b>	<b>7</b>	<b>14.0%</b>	<b>50</b>	<b>100.0%</b>

f: Frequency, %: Percent

Table (2.1) show that (14%) of male and (12%) female nurses have very low level of knowledge about ways deal with aggressive patient , (10%) of samples within thirty decade of age have very low level of knowledge. (8%) of participants who have preparatory education and (6%) who have institution education have good level of knowledge, (10%) of nurses with experience (1-10) years' in general hospital have good level also (12%) of nurse have same experience years in psychiatric hospital have good level of knowledge, (4%) of nurses who have more than once participated in training course have good level of knowledge while (6%) of nurse who not participated have good level of knowledge.

**Table (3): Distribution of Levels of Knowledge among Nurses about Violence and ways deal with aggressive patient**

Knowledge domains	Levels of Knowledge									
	Very Low		Low		Intermediate		Good		Total	
	f	%	f	%	f	%	f	%	f	%
knowledge about aggression and violence	2	4%	4	8%	9	18%	5	10%	20	100%
knowledge about ways with aggressive patient	3	6%	2	4%	18	36%	7	14%	30	100%
<b>Total Knowledge</b>	<b>3</b>	<b>6%</b>	<b>1</b>	<b>2%</b>	<b>14</b>	<b>28%</b>	<b>2</b>	<b>4%</b>	<b>30</b>	<b>100%</b>

frequency, %: Percent.

This table (3) indicates that the highest percentage of nurses (30%, f=15) having good levels of knowledge related violence (domain one) . While the highest percentage of nurses (36%, f=18) having intermediate levels of knowledge about ways deal with aggressive patient (domain two). Concerning the levels of the total knowledge, the highest percentage of nurses (28%, f=14) having intermediate level of knowledge.

**Table (4) Association between Demographic Characteristics and knowledge domains were determined by using correlation coefficient (r).**

Domains	knowledge about aggression and violence		knowledge about ways deal with aggressive patient		Total Knowledge	
	r	Sig.	r	Sig.	r	Sig.
Gender	-0.119	0.410	0.050	0.732	0.054	0.710
Age	0.214	0.135	0.007	0.962	0.090	0.532
Level of Education	0.025	0.864	0.009	0.126	0.172	0.232
Years of Experience in General hosp.	0.195	0.175	0.113	0.436	0.001	1.000
Years of Experience in psychiatric hosp.	0.015	0.916	0.157	0.278	0.107	0.459
Training Course	-0.075	0.604	0.002	0.987	0.031	0.829

The table (4) show no significant relationship between demographics characteristics and nurses' knowledge about aggression and violence (domain one) . Also, there is no significant relationship between demographics characteristics and nurses' knowledge about ways deal with aggressive patient (domain two). Also, there is no significant relationship between demographics characteristics and total Knowledge.

**iv. Discussion:**

This study objected to assess nurses knowledge in respect to aggression and ways deal with aggressive patients at psychiatric hospital.

Table (1) show that (54%) from participants were male while (46) were female this result may because female nurse prefer work in general hospital more than psychiatric and fear from psychiatric patients , Ismail (2016) show in her study the most of the sample (79.3) were male<sup>[7]</sup>, related to age, the study reveals that (38%) of samples is within age ( $\geq 40$ ) years, concerning the level of education , more than half of nurses (54%) have preparative graduate and (32%) have diploma certificate , nurses may have desire to develop their education, especially there is more than ways to get certificate and easy to get it, the greater number of nurses in the study (70%) of samples having (1-10) years' experience in psychiatric hospitals ,the psychiatric hospital receives new appointees of nurses. (42%) of nurses participated more than once in training course related aggression and dealing with aggressive patient, this refer necessity inclusion all nursing staff in training courses which assist nurses to enhance knowledge and confidence to deal with aggressive patients , Bekelepi (2015) show Less than half the participants in his study confess that they had received training on the management of aggression and an equal number stated that it had met their needs in understanding and managing aggression<sup>[8]</sup>.

Table (2) show that (18%) of male and (12%) of female have good level of knowledge about aggression and violence, also the table show that (30%) of nurses have good level of knowledge while (24%) of them have very low level of knowledge, this relatively refer to the nurse have awareness and some information regarding aggression.

Table (2.1) show (8%) of male and (6%) of female have good level of knowledge about ways deal with aggressive patient, also the table show that (36%) of nurses have intermediate level of knowledge while (26%) of them have very low level of knowledge. The good level of nurse knowledge about aggression is matched by the intermediate level in her treatment methods.

Table (3) show the highest percentage of nurses (28%,  $f=14$ ) having intermediate level of knowledge related to total knowledge, while (26%) of nurses have very low level of knowledge. Therefore, as results mentioned above, we can say that there is a significant lack in nurses' knowledge towards ways deal with aggressive patient.

Bekelepi (2015) showed (above 80%) of the nurses have good level of knowledge about management of aggressive psychiatric patients, on the other hand Study of Nibras (2018) showed (78%) from nurses in her study have extremely very low of knowledge about agitation<sup>[9]</sup>.

The table (4) show no significant relationship between demographics characteristics and all domains of knowledge, also there is no significant relationship between demographics characteristics and total Knowledge, for all domains of knowledge, the non-significant association could be clarified that these knowledge domains could be not affected by whether the nurse is male or female; whether is younger or older; whether has higher level of education or lower, whether has longer career in general wards or shorter and whether participated in training course or not.

Nibras (2018) revealed that the level of knowledge about ways deal with aggressive patient not affected by gender, level of education, years of experience, Ilkiw-Lavalle (2006) show in his study there was no significant difference on overall knowledge and age groups<sup>[10]</sup>.

#### v. CONCLUSIONS:

The study concluded that there is a significant lack in nurses' knowledge in regard to aggression and violence and ways deal with aggressive psychiatric inpatient.

#### vi. RECOMMENDATIONS:

The study recommends, that there is an essential need for education and training nurses who have lack or inadequate knowledge about approaches utilizing to deal with aggressive patients by establish continuing training course theoretically and practically based on the recent studies and researches, to enhance skills and confidence when deal with aggressive psychiatric patient. These educational programs conducted with cooperate with mental health department and supported by ministry of health.

#### REFERENCES:

1. World Health Organization, (1999). Injury: a leading cause of the global burden of disease Geneva, (document WHO/HSC/PVI/99.11).
2. World Health Organization. (2002). Guide to United Nations resources and activities for the prevention of interpersonal aggression (WHO/NMH/VIP/02.05) (4thed.). Geneva. [http://www.who.int/violence\\_injury\\_prevention/media/en/633.pdf](http://www.who.int/violence_injury_prevention/media/en/633.pdf) (accessed 16 March, 2014).
3. Flood, C., Bowers, L., Parkin, D., (2008). Estimating the costs of conflict and containment on adult acute inpatient psychiatric wards. *Nursing Economics* 26 (5), 325-330, 324. Mental health and behavior in schools departmental advice for school staff. London: Department for Education.
4. Del Bel JC. Workplace aggression. *Nursing Management*, 2003;34(9):30-4.

5. Sheila L. Videbeck, PhD, RN. Judith M. Schultz, MS, RN.( 2011). Lippincott's manual of psychiatric nursing care plans,9 edition, p 415.
6. Nelstrop L, Chandler-Oatts J, Bingley W, Bleetman T, Corr F, Cronin-Davis J, et al.( 2006). A systematic review of the safety and effectiveness of restraint and seclusion as interventions for the short-term management of violence in adult psychiatric inpatient settings and emergency departments. *Worldviews Evid Based Nursing*; 3(1):8–18.
7. Nurses' Attitudes Toward Causes And Management Of Aggressive And Violent Behavior Among Inpatients In Psychiatric Hospitals In Baghdad.(2016). *Journal of Nursing and Health Science* 1940 Volume 5 Issue 2 Ver. 2 (Mar. - Apr. 2016), PP 26-34 .
8. Ntombiyakhe Bekelepi.,(2005) Knowledge and Skills of professional nurses in managing aggressive patients in a Psychiatric Hospital in the Western Cape.
9. Abdel-Hussein, N. H., & Mohamed, S. H. (2018). Effectiveness of an Educational Program on Nurses' Knowledge toward Restraint and Seclusion for inpatients at Psychiatric Teaching Hospitals. *Indian Journal of Public Health Research & Development*, 9(12), 1175-1180.
10. Ilkiw-Lavalle, O. (2006). Enhancing mental health staff confidence and skills in response to aggression and violence: A longitudinal study of aggression minimization programme. PhD Thesis. University of Wollongong, Department of Psychology.