



Violence against Female Health Professionals during the COVID-19 Pandemic: A Moral Dilemma

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Dear Editor,

In healthcare settings, workplace violence is recognized as a serious occupational health problem characterized as an event in which health professionals are scared, intimidated, ill-treated, frightened, or attacked with a direct impact on their health, safety, or well-being throughout their careers.

Along with damaging interpersonal relationships, it also undermines the individuals' self-confidence, their psychological and physical well-being [1,2].

Workplace violence against female health professionals has a negative effect on the standard of care they offer, makes them scary, and causes numerous problems, including poor performance and low self-esteem. It also contributes to absenteeism, workflow imperfection, reduced employee effectiveness, productivity, and satisfaction [3].

The prevalence of workplace violence against health professionals from 2005–2019 has been estimated at 22.3%, and its physical and non-physical forms were 10.1 and 36.5%, respectively.

Its prevalence during the COVID-19 pandemic seems to be growing compared to the past. The prevalence of general workplace violence in America is higher than in Asia, which can be attributed to the cultural characteristics, crowding, lack of resources, and context of societies that vary from region to region [4].

Despite the praise given to health professionals during the COVID-19 pandemic, there is a strong correlation between the severity of the prevalence and patient violence incidents, especially when it manifests as an attack on body fluids, spitting, or coughing as a threatening behavior on personnel directly caring for patients [5].

Violence against female health professionals can increase the risk of post-traumatic stress disorder, work-related burnout, and stress during pandemics, leading to poor mental health, tension perceptions, less satisfaction, and ineffective performance, and a hostile work environment [6].

On the other hand, widespread disinformation about the condition, combined with already high levels of anxiety and fear in society, appears to be

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a driving factor in violence against female health professionals worldwide. As a result, in a global healthcare crisis such as the COVID-19, it is critical to inform people through easily accessible, reliable information sources properly and to ensure discourses made by social leaders. However, policymakers should prepare an action plan that will be followed in the event of any workplace violence [7].

When there is a lack of security, episodes go up quite considerably. As a result, offenders need to be held accountable for their actions and prosecuted. The governments should establish new protective policies for female health professionals, such as detaining offenders, fining them, and providing special transportation for women. Additionally, workers exposed to high levels of violence must enhance their self-care techniques [8].

Additionally, it's important to fully inform patients and their relatives of possible outcomes and management strategies. As a result, establishing hostility management teams to handle incidents in the early phases of violence can significantly reduce consequences. Moreover, shorter wait times and strict one-attendant strategies to prevent overcrowding can lessen patient discontent [9].

For this purpose, many multicomponent interventions, such as standalone and structured training programs, should be done to create a safe workplace for female health professionals to work with respect and dignity. It may be advisable to use metal detectors at the entrances, restrict access to certain areas available to invaders by using card readers or safe door locks, carefully check for weapons on individuals entering the health care settings, and install cameras as a part of violence reporting systems in high-hazard areas like waiting rooms, operating rooms, and emergency departments. Moreover, gender sensitization can be seen as a diversity initiative in every organization [10].

In a health emergency like the Covid 19 outbreak, healthcare professionals' well-being and safety may be threatened by the patients and their family members who refer to the healthcare settings in the worst physical and mental situations.

Therefore, the issue of healthcare violence should be recognized on both a public and an international scale, and health policymakers, the medical community, non-governmental

organizations, and governments should collaborate to reduce violence during upcoming pandemics. On the other hand, it is crucial that non-discriminatory, inclusive, and gender-responsive strategies and protective measures for reporting violence and the proper managing of aggressive individuals be considered.

Conflict of interest: None declared.

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