

# 'Stab in the heart': Health care workers reflect on abuse they've faced during pandemic

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By late September, Rikki Koberlein couldn't take another day.

For months, she had been yelled and cursed at, called a "political pawn" and told she wasn't doing her job properly.

As an intensive care unit nurse at West Valley Medical Center in Caldwell, Idaho, Koberlein said, "nursing is my calling." But the abuse day after day, month after month, wore her down.

Twenty months into the coronavirus pandemic, [health care workers](#) are far from the days when they were widely viewed and treated as heroes on the front lines of the virus fight. The treatment from COVID-19 patients and their families has worsened especially since the delta variant spread throughout Idaho this summer, health care workers say.

One patient's [family members](#) recently berated Koberlein for two straight days while the patient neared death, she said. They accused her of mistreating the patient and demanded certain unproven medications.

At one point, a family member said, "I want the medications that my president received," Koberlein recalled. He continued saying he didn't serve in the military for this, even though his demands wouldn't have helped the patient, Koberlein said.

Eventually, she called for mediation.

Koberlein, 45, began her health care career as an emergency room tech in 2013 and graduated from nursing school in 2018. She has coped with the recent stress and trauma by bonding with colleagues. Despite the challenges, she carried on with her job. Until Sept. 26.

"I broke," Koberlein said by phone. "One day I was here at home, and I had to go back to work the next day, and I just couldn't do it. I couldn't do another day of giving people my all and having it be thrown in my face saying I'm doing nothing."

Koberlein said she went into a deep depression with no energy. It would take days for her to recover from each of her three 12-hour shifts a week. She became numb to feeling joy and numb to feeling anger.

Household chores went undone. She didn't socialize with friends. Living through the fight against COVID-19 was inescapable at all times.

Given what she was dealing with, Koberlein took a month of leave.

"This is what I feel I was born to do," Koberlein said. "To have someone say I'm not doing everything I can for their loved one, it's a stab in the heart."

Fighting to save patients with COVID-19 was already "hugely challenging," said Ashley Carvalho, a doctor serving patients in Boise. Now, treating COVID-19 has come to mean navigating tense conversations with patients' family members, explaining research studies and fending off accusations.

In mid-September, Carvalho was treating a COVID-19 patient in the ICU, but the patient's family declined treatments like remdesivir and steroids, which are proven to be beneficial, Carvalho said.

Instead, the family insisted that the patient receive ivermectin, which hasn't been approved by the U.S. Food and Drug Administration to treat COVID-19. Ivermectin is an anti-parasitic drug that's used to treat diseases including parasitic worms and head lice. Carvalho said physicians aren't licensed to prescribe the drug for COVID-19 patients.

When she tried explaining that to the family, Carvalho said the situation became "highly emotionally charged." Then a family member threatened her with violence.

"I have lots of ways to get people to do things I want them to do," Carvalho recalled the family member saying, "and they're all sitting in my gun safe at home."

Carvalho called for security, and the family was escorted out of the hospital. She was disturbed by what was said. And because of the refusals, she was upset she couldn't help the patient more.

While that was her most upsetting experience, Carvalho said, she's now used to facing confrontations at least once a day.

"It's actually just very demoralizing," Carvalho said by phone. "It's hard when you've gone into a profession to help people and help them with the recommendations of the best evidence and the best science you can learn about. ... It's frustrating because both me as a physician and the patient's family, we want the patient to get better, but I feel that all of my knowledge and training is overlooked by people's families. I'm kind of more viewed as the enemy."

Eric Donahue, a hospitalist at West Valley Medical Center, said the most challenging part of the abuse he's faced is dealing with patients' angry family members. He's similarly dealt with verbal attacks and accusations.

Before the pandemic, Donahue rarely had these confrontations. Once or twice a month, he estimated. Now it's multiple times a day.

Donahue said he hasn't been physically assaulted, but he's been consistently accused of killing patients rather than attempting to save them. Accusations that he doesn't care about patients is what he's experienced the most.

"You've got to sell it to try to even get them to take whatever medication," Donahue said by phone. "Especially for COVID, you have

to convince them you're not trying to harm them, but that you actually have motives that are kind and humane."

The number of nonfatal workplace injuries and illnesses due to violence increased each year from 2011 to 2018 in the health care industry nationally, according to the Bureau of Labor Statistics. In 2018, health care workers accounted for 73% of all nonfatal workplace injuries and illnesses due to violence.

Since the start of June, the Meridian Police Department has made at least two arrests at St. Luke's Meridian Medical Center for battery against a health care worker, a felony.

On June 6, Meridian police arrested a 57-year-old Meridian woman who was at the hospital to receive care. She became combative with a nurse and "delivered an open-hand strike across the face, attempted to bite the nurse and attempted to grab at multiple areas on the nurse's person," according to Meridian Police spokeswoman Kelsey Johnston.

On June 20, police arrested a 36-year-old Washington man who had previously been discharged from the hospital. He returned looking for a missing personal item and began arguing with the hospital staff. He "struck the security guard across the face," according to Johnston.

Abusive situations have stemmed from patients and their families experiencing some of the worst days of their lives and heightened anxiety that has existed since the start of the pandemic.

Those elements have created a "perfect storm" for dangerous interactions, said Elizabeth Steger, St. Luke's Health System senior vice president of clinical practice integration and chief nursing executive.

"That negative energy or aggression that seems to be a little bit of

friendly fire when it comes from those that we serve, it just exacerbates the situation," Steger said.

Steger believes misinformation isn't causing most of these combative behaviors.

Instead, she said the cause more frequently is underlying tensions that bubble up among patients and their families.

"Our visitation has changed, access to patients has changed, the number of visitors has changed due to the nature of COVID," Steger said in a video interview. "And I think that's been a challenge for people. Less access to information. So that's really created some heightened frustration, too."

But others in the health care field did say misinformation is causing friction with patients and their families.

Carvalho said misinformation has made people wary of research and evidence. She added that she observed a shift in patients' behaviors based on politics about receiving the vaccine.

School board meetings have become a battleground for debates over COVID-19 policies, and candidates' stances on the topic played a role in this month's Treasure Valley school board elections. Lt. Gov. Janice McGeachin has criticized Gov. Brad Little for encouraging people to receive COVID-19 vaccinations.

Little hasn't implemented any vaccine requirements, and McGeachin has spread misinformation about vaccines. She used a misleading statistic to disparage COVID-19 vaccines' efficacy, according to the Idaho Falls Post Register. McGeachin also tweeted on Nov. 5 that she agrees children don't need a COVID-19 vaccine even though the Centers for

Disease Control and Prevention had already recommended it for everyone 5 and up.

"I wish (community leaders) would stop spreading misinformation, because I truly think that's the source of a lot of the aggression that health care providers see," Carvalho said. "That's easier said than done."

Given that patients' relatives are desperate to save their loved ones, Koberlein said she understands where they're coming from. But she said she wouldn't ask for something drastic, like a treatment that isn't proven.

Koberlein also pointed to the politicization of vaccines as a dangerous precursor for confrontations. She said she's been falsely accused of withholding unproven treatments for political purposes.

"The change was politics regarding the vaccination and huge, huge misinformation. Ridiculous misinformation," Koberlein said. "That was the biggest change."

Since May 15, unvaccinated people have accounted for 88% of Idaho's COVID-19 hospitalizations and 86% of the state's COVID-19 deaths, according to the Idaho Department of Health and Welfare.

## **Misbehavior wears down doctors, nurses**

On top of trying to treat people for COVID-19 while crisis standards of care remain activated in Idaho, doctors and nurses are worn down by the way they've been treated.

Some say the abuse could result in a smaller workforce.

"All of this together is really making them consider if they're going to stay in health care or not," Steger said. "That's obviously concerning for



all of us, because we need our talented and skilled clinicians and providers to be here with us."

At least three people in Koberlein's unit took leave because of the trauma they experienced, she said. Nearly all of the nurses in the unit are attending therapy to help cope, she said, and four or five other people have left the unit.

During her leave, Koberlein put together puzzles on her dining room table, took care of plants around her house and made pottery. Those hobbies help her relax.

As she discussed what she experienced, Koberlein held back tears.

"It's torture," Koberlein said.

The time and energy put into explaining procedures with patients and their families takes away from what could be spent on trying to treat patients. While nurses and doctors are doing their best, they're increasingly burnt out, said Donahue, the West Valley hospitalist.

"That's a hard toll on any human, whether you're a nurse, a doctor or someone in the military that's fighting a war," Donahue said. "What it feels like is you're at war every day."

Both Donahue and Koberlein said they've forged stronger bonds with their colleagues as a result. They check in on each other regularly, and they've become more honest with each other.

Leaning on each other is the only way to handle how they're treated, Donahue said. Instead of questions that might elicit an "I'm fine" answer, people in his unit have been asking more specific ones, like how much sleep are you getting?



Koberlein mentioned how nursing used to be one of the most trusted professions. Gaining trust is now one of the biggest hurdles she faces.

Donahue believes the solution is simple. Just be kind and respectful. Adults should apply the lessons children learn in preschool and that parents give to their own children.

"We have just kind of gone crazy, and we stopped respecting one another, and we're pretty rude as Americans to other people with different opinions," Donahue said. "I think we just need to have some common decency."

Steger said she thinks the situation will improve as COVID-19 hospitalizations decline and hospitals eventually return to how they operated before the pandemic. At that point, there could be more access to visitors and, she hopes, less tension.

Oftentimes, patients beg to receive a COVID-19 vaccine when it is too late, Carvalho said. Given how the virus continues to spread, Carvalho says people no longer have the luxury of time to wait to get vaccinated. In Idaho, 61.5% of people age 12 and up have received at least one dose of the vaccine, according to the Idaho Department of Health and Welfare.

More people getting vaccinated could help, but Carvalho said, "I don't know if there's an easy fix."

COVID-19 patients who weren't vaccinated weren't set up for success, Koberlein said. That makes it a steeper challenge to treat them and a more dire situation. That means more dangerous outcomes and more highly emotional interactions with family members.

Though she's skeptical of how achievable it is, Koberlein said the

solution is helping people understand that health care workers are doing everything they can to save patients.

"Each day we should just treat everyone with love, kindness and compassion," Koberlein said. "We're all on the same team."

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