

# New research sheds light on patient discrimination against health care workers

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University of Alabama at Birmingham researchers have published new information about patient discrimination toward health care workers who identify as gender non-binary individuals.

Published in *Patient Experience Journal*, lead author Katherine Meese, Ph.D., assistant professor in the Department of Health Services Administration and director for the UAB Center for Healthcare Management and Leadership, says more focus needs to be placed on stress from patient mistreatment to the health care team.

"Health care organizations have paid increasing focus over the last decade on improving the patient experience," Meese said. "However, the discussion about patient behavior toward clinicians has been almost entirely missing from the conversation."

A survey of clinicians was conducted at a large academic medical center, resulting in a final analytic sample of 1,682 physicians, nurses, advanced practice providers and clinical support staff. Nurses reported the greatest incidence of mistreatment by patients as a major stressor (18.69%), followed by advanced practice providers (11.26%), clinical support staff (10.36%) and physicians (7.69%).

Overall findings indicate that nurses and those who work in the [emergency room](#) and ambulatory or outpatient clinics were more likely to be stressed from mistreatment by patients than by clinicians. Gender or [sexual minorities](#) (not identifying as male or female) and younger (18–34 years of age) health care workers were also more likely to experience stress from mistreatment by patients.

Meese adds that, during the height of the COVID-19 pandemic, there has been an escalation in patient violence toward [health care workers](#) nationwide, sometimes ending tragically.

"What I am advocating for is a more balanced discussion of how we address and improve the patient experience, while also addressing the rising incidence of patient violence and mistreatment toward clinicians," Meese said. "Our health care workforce is already in a fragile state, with

rising burnout and intentions to leave the profession. The first step in the discussion is better understanding the extent of the problem."

Meese says recent research suggests the majority of mistreatment at work for physicians came from patients and hospital or clinic visitors.

"Our research also highlights which groups are at highest risk of experiencing stress from patient [mistreatment](#)," she said. "Importantly, this includes younger employees, nurses, gender non-binary individuals, and those working in the emergency room and ambulatory settings. This information is valuable for health care leaders seeking to determine where to target limited resources."

## **A step in the right direction**

Meese notes that many organizations have responded with increased security presence on critical units, clear expectations for patient behavior, a no-tolerance policy for violations and even panic buttons in patient rooms.

"Organizations may also need to consider how they measure and encourage improvement of the [patient experience](#)," Meese said. "Do they include a balanced approach accounting for the behavior of the patient? Is there a punitive model for failing to meet a certain threshold in experience scores?"

Meese says she and her team are committed to understanding what factors are associated with the health care worker's experience and well-being so we can ultimately support the creation and sustainment of a healthy, fulfilled and flourishing workforce.

"Our first step is to ask interesting questions that are yet unanswered, and the [research design](#) follows," she said. "We are working with a

variety of partners' projects that involve testing leadership interventions, evaluating new models of team-based care delivery, addressing post-COVID PTSD and peer support."

**More information:** Katherine A. Meese et al, Rules of engagement: The role of mistreatment from patients in the nurse, physician and advanced practice provider experience, *Patient Experience Journal* (2022). [DOI: 10.35680/2372-0247.1719](https://doi.org/10.35680/2372-0247.1719)

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