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Country Case Studies
Question Guidelines for Focus Group Discussion / Qualitative Interview

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International Labour Office **ILO**   International Council of Nurses **ICN**
World Health Organisation **WHO**   Public Services International **PSI**

Joint Programme on
Workplace Violence in the Health Sector

**WORKPLACE VIOLENCE IN THE HEALTH SECTOR
COUNTRY CASE STUDIES RESEARCH INSTRUMENTS**

GUIDELINES FOR FOCUS GROUP DISCUSSION

GENEVA 2003

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Question Guidelines

I. OBJECTIVES

1. Confirm and/or revise the proposed definitions of workplace violence
2. Assess individual and institutional interpretation of and attitude towards workplace violence
3. Understand the context of workplace violence
4. Understand health staff coping mechanisms for workplace violence
5. Identify institutional support in relation to workplace violence
6. Identify any community support (health and social) in relation to workplace violence
7. Define the gaps, the needs and suggestions for future responses

II . METHODOLOGY[i]

PREPARATION of focus group discussion:
- Information of authorities concerned
- Training of moderator
- Invitation of the participants ; participation is absolutely voluntary
- Preparation of the room ; if possible, a room considered neutral by the subject should be chosen

GROUP COMPOSITION:
- 5-10 participants
  - selection of participants according to target groups (research protocol)
  - to promote frank discussion some issues should be considered:
    - Selection of participants should be made at random. Using pre-existing groups (e.g. teams, department) can be difficult because of existing hierarchical structures
    - Similar hierarchy levels: randomised selection should be made within groups of equivalent hierarchy.
    - Participants of same sex and similar age (relevant in some countries)
    - Beware of potential ethnic conflicts, and try to minimize the potential for such problems in the focus groups.

TIME:　　　90 to 150 minutes

PROCESS of focus group meeting:
  (1) Warm up:
- Introduction and welcome
  - Introduction moderator(s) and participants
  - Ice-breaker/ warm-up question about their background, their family and work (Tell us something about yourself, your family, your work, things you like to do..) – very brief (2 minutes per participant maximum)
- Introduction of subject:
  - Review of study goals , purpose of the meeting ;
  - focus group ground rules (e.g. speaking clearly and one at a time)
  - Introduce topic of workplace violence as a potentially emotionally charged topic. Explain that participants may feel uncomfortable or become agitated because of some of the topics. If such a situation arises, participants are free to stop talking or to leave the discussion at any time they need to do so.

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(2) Discussion on workplace violence:
  ▪ question guidelines A, B, or C guide to cover main aspects
    o emphasis on group process or dynamics, not necessarily to follow sequence of question guidelines
  ▪ Conclude and reach consensus on the discussion summary of each item under discussion

(3) Conclusions of discussion :
  ▪ major points are summarised and presented by facilitator to test if conclusions are accepted by participants

(4) Closing procedures

RECORDING & ANALYSIS
  • Tape recorder , if possible and accepted by participants
  • discussion protocol
  • if possible, an observer should take notes
  • if possible, visualisation of major discussion points (flip chart, board, card method)

III . OUTLINES OF QUESTIONS
Different outlines according to the target groups
Outline A: for target group health sector personnel
Outline B: for target group stakeholders, etc.
Outline C: for target group patients

Question guideline A
  for target groups:
  health sector personnel at all hierarchical levels and all workplace settings
  (*Note to moderator: Make sure to prompt if needed to ensure that people consider community and ambulatory services in terms of personnel (paramedics, ambulance personnel, home-based care aides, etc.)*

1. How would you describe workplace violence?
  ▪ participants' concept of workplace violence,
2. There are definitions used by other people before. What do you think about these definitions: do you agree or which revisions would you recommend ?
   (*note to moderator:*
  ▪ *for focus groups conducted before distribution of questionnaire, please discuss all definitions provided with survey questionnaire, also the categorization into physical and psychological violence)*
  ▪ *for focus groups conducted after distribution of questionnaire : in case there had been approved agreement on revised definitions for survey, please use these locally adapted definitions for discussion (previous approval by Steering Committee required)*

3. Are you worried about workplace violence?
  ▪ are you now more worried than one year ago?

4. What types of workplace violence are most often present in your work ?
  ▪ Which kind of workplace violence would you describe as most common or typical

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5. Who is most vulnerable to being victimized in health care settings?

6. Who are the aggressors in most of the cases?
   - aggressors in cases of **physical** violence
   - aggressors in cases of **psychological** violence in its various forms (verbal abuse, bullying/mobbing, sexual or racial harassment, threat)

7. In your opinion what are the most important contributing factors (causes) for **physical** workplace violence?
   (note to moderator: if no responses from group, may use following probes to get specific responses:
   Causes may be related to
   - *working conditions (time constraints, stress, job insecurity, diversification of requirements, competitiveness)*
   - *physical environment (noise, heat, lighting, etc)*
   - *personal factors (gender, age, race, etc))*
   And what are the most important contributing factors to the different forms of **psychological** workplace violence (verbal abuse, bullying/mobbing, sexual/racial harassment, threat) ?

8. What do you think triggers off a violent incident in a health sector work setting?
   - common triggers for physical violence
   - common triggers for psychological violence
   (Trigger: what is the immediate situational factor that encourages violence?)

9. What are the consequences of **physical** workplace violence and
   what are the consequences of **psychological** workplace violence on:
   - individual workers (as victims and as co-workers)
   - the work-atmosphere
     (Note to moderator: if no answer, you may give as examples: quality of interactions between colleagues or between workers and patients , job satisfaction, etc)
   - the provision of services in health care settings
     (note to moderator: if no answer, may give examples as: quality of care, service efficiency, staff turnover or staff shortage)

10. What institutional response mechanisms exist in cases of **physical** workplace violence?
    What institutional response mechanisms exist in cases of **psychological** workplace violence?
    (Note to moderator: if no answer from group, may use following probes to get specific responses: "Institutional response mechanisms include reporting procedures,   investigation of the incident, and penalization of aggressor, among others. What   response mechanisms are you aware of?")

11. What is the response of individuals in cases of physical workplace violence?
    What is the response of individuals in cases of psychological workplace violence?
    - How do victims react and cope with the incidents
    - How do colleagues react

12. What kind of support exists for victims of physical workplace violence?
    What kind of support exists for victims of psychological workplace violence?
    - within health institutions / at your workplace
    - in the community / outside of your workplace
    (Note to moderator: if no answer from group, may use following probes to get specific responses: "Support mechanisms include counselling services, medical

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treatment, debriefing procedures, and formulation of safety plans, among others. What   kind of support mechanisms are you aware of?")

13. In your opinion what should be done to improve support services for:
    - victims of physical workplace violence in the health sector
    - victims of psychological workplace violence in the health sector
    - What barriers limit the provision of appropriate support services for victims of physical and psychological workplace violence

14. Are there measures for prevention of **physical** workplace violence at your workplace? Are there also prevention strategies for the various forms of psychological workplace violence?
    - Which of the measures are working effectively
    - In your opinion what should be done to improve the prevention measures
    - What would you recommend as priority measures to prevent the various forms of workplace violence

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Question guideline B
for target groups working in organizational, political context:
representative organisations, health authorities, occupational health and safety specialists, labour lawyers

1. How would you describe workplace violence?
   - participants' concept of workplace violence

2. There are definitions used by other people before. What do you think about these definitions: do you agree or which revisions would you recommend for your country ?
   (note to moderator:
     - *for focus groups conducted before distribution of questionnaire, please discuss all definitions provided with survey questionnaire, also the categorization into physical and psychological violence)*
     - *for focus groups conducted after distribution of questionnaire : in case there had been approved agreement on revised definitions for survey, please use (see changes in A) these locally adapted definitions for discussion (previous approval by Steering Committee required)*

3. Is physical and psychological workplace violence targeting health sector personnel a concern within your work?
   - if yes , which types of workplace violence are most often present
   - did physical workplace violence in the health sector increase in recent years?
   - did psychological workplace violence in the health sector increase in recent years?

4. In your opinion what are the most important contributing factors to **physical** workplace violence in the health sector (causes)?
   And what are the most important contributing factors to the different forms of **psychological** workplace violence (verbal abuse, bullying/mobbing, sexual/racial harassment, threat) ?
   (Note to moderator: to get specified responses you may give examples:
     - *working conditions (time constraints, stress, job insecurity, diversification of requirements, competitiveness)*
     - *social / cultural context (violence in general, poverty, political situation, etc.))*

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5. What impact have institutional reforms (Public Service Reform / Health Sector Reform) had on:
   - working conditions
   - level of physical workplace violence
   - level of psychological workplace violence?

6. What effects does **physical** workplace violence have ?
   And what effects do the various forms of **psychological** workplace violence have?
   - Impact on employees and their performance
     (note to moderator: to specify answers, may give examples as distress, burnout, absenteism....)
   - impact on health services
     (note to moderator: to specify answers, may give examples as quality of care, cost/ lost workdays , staff fluctuation)
   - impact on health sector and society

7. What kind of support exists for victims of physical workplace violence?
   What kind of support exists for victims of psychological workplace violence?
   - within health institutions
   - in the community
     (Note to moderator: to get specific responses, may use following probes: "Support mechanisms include counseling services, medical   treatment, debriefing procedures, and formulation of safety plans, among others. What kind of support mechanisms are you aware of?")

8. From your point of view what should be done to improve support services
   - for victims of physical workplace violence in the health sector
   - for victims of psychological workplace violence in the health sector

9. Which institutional measures are already implemented as responses to **physical** workplace violence ?
   And which measures exist as responses to **psychological** workplace violence?
   - what works effectively, and why (promising examples)
   - what does not work, and why (obstacles, lessons learnt)
     (note to moderator: to get specific responses, may give examples: "Institutional response mechanisms include reporting procedures, investigation of the incident, and penalization of aggressor, among others. What response mechanisms are you aware of?)

10. What do you consider to be the most important strategies/activities to prevent physical workplace violence in the health sector ?
    And what do you consider to be the most important strategies/activities to prevent the different forms of **psychological** workplace violence in the health sector?
    (Note to moderator: if no answer from group, may use following probes to get specific responses: "Prevention options can fall under the categories of security measures (e.g. guards, alarms, portable telephones), improvement of surroundings (e.g. lighting, working areas, noise, heat, access to food, cleanliness, privacy), restriction of public access, and human resource development, among others. What preventive measures are you aware of?")

11. What barriers constrain implementation of measures to reduce workplace violence (physical and psychological) in the health sector?

Question guideline C

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for target group patients

1. How would you describe violence against health sector personnel at work ?
   - what types of workplace violence (violent/aggressive/humiliating behaviour) exist
   - how would you categorize the different types of violence against health sector personnel at work

2. What types of violence are most often present in health care settings?

3. Who are the aggressors in most cases?
   (note to moderator: please consider to address the various types of workplace violence separately)

4. In your opinion what are the main causes of the violent incidents?
   (Note to moderator: if no answer from group, may use following probes to get specific responses:
   "Causes may be related to:
   Factors in working conditions
   Conditions of the physical environment
   Personal factors")

5. What effects does workplace violence have on the provision of health services?
   (Note to moderator: if no answer from group, may use following probes to get specific responses: "Situations of violence may have effects on the provision of services, including quality of care, service efficiency, staff turnover or staff shortage, among others. How does workplace violence, in your opinion, influence service provision?")

6. What do you think should be done to prevent physical and psychological violence against health personnel

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[i] Reference: Maier, et al (1994): Assessment of the District Health System using qualitative methods. London, MacMillan Press Ltd.