

The Role of Organizational Culture and Climate in Preventing Workplace Violence in Healthcare Settings

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Abstract

Workplace violence remains a serious issue in healthcare and continues to shape how employees behave, cope and connect within their organizations. This paper explores how organizational culture and climate influence the prevention of violence in healthcare settings by drawing on findings from recent literature. The review shows that violent incidents create deep psychological, operational, and financial strain, often leading to burnout, reduced job satisfaction, and lower quality of care. Several recurring risk factors include patient and visitor behaviour, staff shortages, weak safety climate, insufficient training and poorly structured reporting systems. At the same time, organizations with supportive cultures, clear policies and strong communication practices are better able to prevent escalation and protect their staff. Strategies such as conflict resolution training, zero tolerance policies, environmental improvements and stronger leadership accountability show positive effects in reducing violent incidents. Implementation remains challenging due to limited resources, inconsistent interpretations of violence, acceptance of aggression as part of the job and systemic gaps across healthcare services. Overall, this paper highlights that fostering a healthy organizational culture that values safety, open communication, and employee wellbeing is essential for reducing workplace violence and creating a stable and secure environment for healthcare workers.

Keywords: Workplace Violence, Organizational Culture, Organizational Climate, Healthcare Workers, Safety Practices

Introduction

The Occupational Safety and Health Administration defined workplace violence as any act or threat of physical violence, harassment, intimidation, or other threatening disruptive behaviour that occurs at the work site and comprised of threats and verbal and physical

assaults and even homicide; and affecting and involving employees, clients, customers and visitors (U.S Department of Labor). Workplace violence is categorised into four types; Type 1 or “Criminal Intent” where the perpetrator is not directly and legally related to the employees or organization the violence is usually committed in concomitance with a crime; Type 2 or “Customer/Client” violence where the violence is perpetrated by the organization’s customer or clients; Type 3 or “Worker-on-Worker” where the violence is committed against subordinate or onto peers; and Type 4 or “Personal Relationship” where violence in an employee’s personal relationship spilled into the working environment and posed a threat onto the employee or other workers (Centers for Disease Control and Prevention, 2020).

A study by Berlanda et al (2019) showed that violence is perceived more by nurses as compared to doctors, while younger healthcare workers and healthcare workers with non-secure attachments reported to be more affected. Healthcare workers in Emergency Department, Intensive Care settings and Psychiatric Department reported higher incidence of violence, as well as healthcare workers who worked night or mixed shifts (Reddy et al, 2019). In the Malaysian healthcare context, it was reported by the Ministry of Health that more than two-thirds of healthcare workers had been victims of verbal abuse, about one-third experienced physical abuse, bullying in 25% and sexual harassment in 4% (Azlihanis, 2019). These figures are significant because multiple studies had shown that workplace violence comes with significant financial and psychological costs to organizations. Besides the direct impact on affected staff in which workplace violence was found to significantly decrease job satisfaction as well as leaving them feeling devalued, humiliated and feeling fearful; it is also found to compromise patient care and patient safety by increasing affected healthcare worker’s unwillingness to serve patients and precipitating aggressive behaviours among them (Al-Shiyab and Ababneh, 2018).

The purpose of this paper is to explore the role of organizational behaviour, in particular organizational culture and climate; in preventing workplace violence in healthcare settings by examining the impact of workplace violence on healthcare workers and organizations, identifying factors contributing to workplace violence in healthcare, and discussing strategies that organizations can implement to prevent and address workplace violence. By understanding the dynamics of workplace violence and implementing effective prevention measures, healthcare organizations can create safer and more supportive work environments for their employees.

Theory Overview

One theory that relates to the topic of preventing workplace violence in healthcare settings is the Job Demands-Resources (JD-R) model. This model is developed by Bakker and Demerouti (2007) and suggested that every job has certain demands and resources that can impact employee well-being and performance.

In the context of healthcare settings, job demands such as high workload, long hours, and exposure to aggressive or violent behaviour from patients or visitors can increase the risk of workplace violence. These demands can lead to healthcare workers becoming stressed, burnt out and experiencing decreased job satisfaction, making them more vulnerable to experiencing or perpetrating violence.

On the other hand, job resources such as social support, training in conflict resolution and de-escalation techniques, and a supportive organizational culture can help mitigate the impact of job demands and reduce the likelihood of workplace violence. Employees that work in a positive work environment where adequate resources are provided are more likely to feel supported, safe and valued.

By applying the JD-R model, healthcare organizations can identify and address job demands and resources that contribute to workplace violence. This can lead to the development of targeted interventions and policies aimed at preventing workplace violence and promoting the well-being of healthcare workers.

Literature Review

Impact of Workplace Violence on Organizational Behaviour

Workplace violence disrupts the work environment by creating a toxic workplace culture which hinders valuable interactions among employees, impacting teamwork, collaboration, and employee's well-being by causing poor health, personal injury, decreased job satisfaction which contribute to stress and burnout and underperformance (Kent, Troth, and Jordan, 2014).

Singh and Waldia (2024) in their research suggests that aggressive behaviours are consciously or subconsciously bolstered by an organizational climate that normalizes aggression among employees while a positive work environment characterized by respect, communication, and collaboration can diminish the possibility of conflicts spiralling into aggressive behaviour by promoting a healthy work environment and enhancing employee wellbeing, leading to increased job satisfaction and overall organizational performance.

Factors Contributing to Workplace Violence

In healthcare settings, workplace violence often stems from the attitudes and behaviours of patients, family members, friends, or visitors who may be experiencing intense emotional stress and have unrealistic expectation and compounded by factors within the work environment, such as staff shortages, inexperienced and anxious employees lacking adequate training as well as systemic or environmental issues like overcrowding, long waiting times, rigid visiting policies, and communication barriers due to language or cultural differences. (Lim et al, 2022)

This is echoed by Zainal et al (2018) in a study on workplace violence in Malaysian public hospitals which revealed that most perpetrators of workplace violence were identified as patients' relatives and visitors, followed by the patients themselves and factors such as high patient volume, urban high population density area, and the nature of the hospital being a tertiary care centre were identified as consequential in predicting workplace violence

In addition, a low level of organizational safety climate was significantly associated with workplace violence with studies showing that healthcare workers in environments with poor safety climate were more likely to experience violence at work (Rajakrishnan et al, 2022) while an absence of clear workplace policy also contributes to violence by setting unclear expectations which leads to misunderstanding and potential conflicts; lack of prevention measures which include training, risk assessment and reporting procedures; inadequate

response protocol leading to ineffective responses, delayed interventions and failure to provide adequate support to victims; failure to address root causes; and non-compliance to legal requirement leading to potential liabilities for the organization (Bordignon et al, 2021)

Organizational Strategies for Preventing Workplace Violence

Preventing workplace violence starts with providing a positive organizational culture and climate. Creating an organizational climate that can help prevent conflicts from escalating into aggressive behaviours requires steps such as implementing conflict resolution training to equip workers with skills to effectively manage and resolve conflicts; establishing zero tolerance policies for aggression in workplace and communicating the consequences of engaging in aggressive behaviours and ensuring all violations are met with appropriate actions; fostering a culture of open communication where employees are comfortable expressing their concerns and grievances; and regularly assessing organizational climate to identify potential sources of workplace aggressions (Singh and Waldia, 2024)

Within the healthcare context, strategies for preventing violence should include training and educating healthcare workers on how to recognize, prevent, and respond to workplace violence with strategies that include de-escalation techniques, conflict resolution skills, and communication strategies to effectively manage challenging situations; implementing security protocols and measures in healthcare facilities to ensure the safety of staff, patients, and visitors which include increasing security personnel presence, installing surveillance cameras, and establishing emergency response procedures for violent incidents; enhancing communication channels between healthcare workers, patients, and visitors to address concerns and grievances effectively; providing psychosocial support programs for healthcare workers to help them cope with the stress and emotional impact of workplace violence; making necessary modifications to the work environment to reduce the risk of violence, such as improving waiting areas, treatment rooms, and staffing levels; and developing and enforcing comprehensive workplace violence prevention policies that clearly outline expectations, procedures, and consequences related to violent behavior in healthcare settings (Zainal et al, 2018)

Adherence to legislations and public policies that address workplace violence in the health sector such as the Occupational Safety and Health Administration (OSHA) can help organisations raise awareness about the prevalence and impact of workplace violence in health services, prevent workplace violence incidents and mitigate risks through proactive strategies and interventions, provide support mechanisms for victims of workplace violence, holds individuals and organizations accountable for their actions related to workplace violence, improves reporting and response, and encourage collaboration among different stakeholders, including government agencies, healthcare institutions, professional associations, and community organizations, to address workplace violence collectively (Bordignon et al, 2021)

Discussion

The healthcare industry operates in highly stressful climates surrounded by sick, desperate, aggressive patients or accompanying persons, with healthcare workers witnessing suffering and deaths daily. Having healthcare workers at their best physical and mental health is crucial to ensure the rest of the population are adequately taken care of.

Implementing zero-tolerance policies for aggression in the workplace communicates the consequences of engaging in aggressive behaviours and deter individuals from behaving aggressively and create a safer work environment. Regularly assessing the organizational climate can help identify potential sources of workplace aggression and allows organizations to take proactive measures to address these issues before they escalate. Organizations need to communicate to the staff that they are protected and supported within their work environment. Encouraging an environment of open communication, where employees feel at ease voicing their concerns and grievances, can prevent conflicts from escalating and enables the timely resolution of issues before they escalate into violence.

Overall, a positive organizational culture and climate that prioritize employee well-being, communication, and conflict resolution can help prevent workplace violence in healthcare settings. Creating a culture where employees feel safe can indeed help reduce violence in the workplace. When employees feel safe, they are more likely to feel supported by their organization and less likely to engage in behaviours that could lead to violence. Additionally, a culture of safety sends a clear message to perpetrators or potential perpetrators that aggressive or violent behaviour will not be tolerated, which can act as a deterrent. This can help create a more peaceful and respectful work environment for everyone.

Conclusion

Workplace violence in healthcare settings is a significant issue that can have profound effects on organizational behaviour, employee well-being, and overall organizational performance. It disrupts the work environment, hinders teamwork and collaboration, and contributes to stress, burnout, and decreased job satisfaction among healthcare workers. Factors contributing to workplace violence in healthcare include the attitudes and behaviours of patients, family members, and visitors, as well as work-related elements such as staff shortages, overcrowding, and inadequate training of personnel who may feel ill-equipped to manage escalating situations.

Organizational strategies for preventing workplace violence include providing conflict resolution training, implementing zero-tolerance policies for aggression, fostering a culture of open communication, and enhancing security protocols in healthcare facilities. These strategies help create a work environment where conflicts are less likely to escalate and ensure that healthcare workers feel both physically protected and psychologically supported. Overcoming the challenges associated with violence prevention requires a multifaceted approach that emphasizes education, allocation of resources, management accountability, and coordinated collaboration among institutional stakeholders.

In conclusion, creating a positive organizational culture and climate that prioritize employee well-being, communication, and conflict resolution is essential for preventing workplace violence in healthcare settings. Addressing the underlying triggers of violence and promoting consistent behavioural expectations can contribute to a safer and more respectful work environment for all parties involved.

This study contributes to existing knowledge by establishing that workplace violence in healthcare is not merely an interpersonal or patient-driven issue, but an organizational climate outcome shaped by safety culture, leadership enforcement, communication norms,

and structural clarity. Supportive reporting systems, zero-tolerance enforcement, and strong psychosocial climates are shown to function not as administrative add-ons but as core protective mechanisms that sustain employee security and safeguard standards of care.

Contextually, the study highlights that in many healthcare environments violence is implicitly normalized as part of the profession, resulting in tolerance, under-reporting, and emotional desensitization among workers. It underscores that genuine violence reduction requires more than procedural enforcement; it depends on consistent organizational messaging, leadership accountability, and emotional support structures that position dignity and safety as non-negotiable cultural expectations rather than discretionary ideals.

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