

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Gender differences in reporting workplace violence: A qualitative analysis of administrative records of violent episodes experienced by healthcare workers in a large public Italian hospital
AUTHORS	Acquadro Maran, Daniela; Cortese, Claudio Giovanni; PAVANELLI, Pierluigi; Fornero, Giulio; Gianino, Maria Michela

VERSION 1 – REVIEW

REVIEWER	Dr Roxanne Keynejad King's College London, UK
REVIEW RETURNED	18-May-2019

GENERAL COMMENTS	<p>Thank you for the opportunity to review this interesting paper on an important subject. I think some changes could clarify its readability, especially of the methods which are rather unusual.</p> <p>TITLE: This varies between the electronic submission, pages 1 and 3. The addition of gender differences on p3 is helpful.</p> <p>ABSTRACT: Since the results can only be concluded about the violence that was reported by different staff groups, it would be better to indicate this rather than saying the violence "experienced" by those groups.</p> <p>INTRODUCTION The introduction is clear and well-written. Some context about the acceptability of demonstrative language in Italian culture and rates of violence generally would be helpful. The study could also be better situated within literature about healthcare staff burnout and the need for health workers not to be deterred from their professions by adverse experiences in the healthcare workplace. p4 line 56 The higher reporting by psychiatric and emergency department staff might indicate reporting bias rather than higher risk. p5 line 3-5 The higher reporting by nurses might indicate reporting bias rather than higher risk. p5 line 34 Violence might also lead staff to leave the profession.</p> <p>METHOD p8 line 54 what constituted sensitive data? p10 lines 12-30 terms like 'lexical universe' are unclear. Please also clarify what 'topoi' refers to. Given the unusual mixed methods reported in this paper it would help to situate this methodology in the wider literature and to explain the rationale for using these methods.</p>
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	<p>RESULTS</p> <p>p11 lines 51-54 What proportion of female staff reported violence by patient relatives? What proportion of male staff reported violence by visitors? It isn't enough to say only "more".</p> <p>It would be better to spell out the meanings of SPR and ECU in full as they are non-standard abbreviations.</p> <p>I am unclear what the reader is meant to take away from figures 1 and 2. It would help for the meanings of the different classes to be indicated on the figures themselves.</p> <p>It is unclear how the number of female-reported occurrences (14951) and forms (2739) relates to the total number of incident reports (408).</p> <p>DISCUSSION</p> <p>Well-written and clear.</p> <p>Perhaps follow-up work could include interviews with staff on gender differences in the long-term impact of these events?</p>
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REVIEWER	Judith Arnetz Michigan State University College of Human Medicine, USA
REVIEW RETURNED	25-Jul-2019

GENERAL COMMENTS	<p>This paper presents a descriptive and qualitative analysis of workplace violence events reported by approximately 400 healthcare workers in an Italian hospital. The paper is well-written but leaves me to question its contribution to the literature. I hope the authors will find the following comments helpful:</p> <ol style="list-style-type: none"> 1. Title: The title page states that the title of the paper is "A qualitative analysis of administrative records of violent episodes experienced by healthcare workers working in a large public Italian hospital." On the abstract page, the title includes a prior phrase, "Gender differences in reporting workplace violence." Which of the two is the proper title? The abstract leads the reader to understand that the comparison by gender was a main objective, which the paper clearly confirms. 2. Rationale: It is simply not clear to me what gender differences in workplace violence exposure and/or reporting can imply for prevention. The fact that female workers experienced/reported more verbal violence and males reported more physical violence does not change the fact that all healthcare workers are at risk for some form of violence and interventions are sorely needed. The paper's concluding paragraph states that, "...findings could be used by health organization management to improve individual measures, such as intervention programmes, counselling, and psychological help, to reflect on victimization experiences..." To me, this is too general and did not need a study to support such an approach. 3. Methods: The qualitative analysis is described well. However, more explanation is needed as to why classes I, II, and III were more similar than classes IV and V in figure 2. The names assigned to the respective classes should be included in the headings for tables 2 and 3 or in the respective figures. 4. Methods: A detail: Out of 408 records, 22 were excluded (14 +8). This leaves 386 records, although the paper states that 396 were included. This needs to be corrected or clarified. 5. Results: Many (most) of the paper's findings were clearly in line with previously-reported studies, as summarized by the authors on
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	<p>p.5, lines 6-14. Other cited studies looked at gender differences (e.g., references 13 and 17), although the authors never refer to, or discuss, those studies in the Discussion section.</p> <p>6. Discussion: The first paragraph is a repeat of study results. The second paragraph touches on the contextual factors for the reported violence; none of these results are in any way new. Some of the references (e.g., 42, 49) are quite old and outdated.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Reviewer Name: Dr Roxanne Keynejad

Institution and Country: King's College London, UK

Please state any competing interests or state 'None declared': None declared.

Thank you for the opportunity to review this interesting paper on an important subject. I think some changes could clarify its readability, especially of the methods which are rather unusual.

TITLE: This varies between the electronic submission, pages 1 and 3. The addition of gender differences on p3 is helpful.

REPLY: thank you for your comment, the title has been corrected.

ABSTRACT: Since the results can only be concluded about the violence that was reported by different staff groups, it would be better to indicate this rather than saying the violence "experienced" by those groups.

Reply: thank you for your comment, the abstract was changed.

INTRODUCTION

The introduction is clear and well-written.

Some context about the acceptability of demonstrative language in Italian culture and rates of violence generally would be helpful.

REPLY: rates of violence in European and Italian workers were added.

The study could also be better situated within literature about healthcare staff burnout and the need

for health workers not to be deterred from their professions by adverse experiences in the healthcare workplace.

REPLY: thank you for your comment, a sentence and references were added.

p4 line 56 The higher reporting by psychiatric and emergency department staff might indicate reporting bias rather than higher risk

REPLY: sentences were added to explain this bias.

p5 line 3-5 The higher reporting by nurses might indicate reporting bias rather than higher risk.

REPLY: sentences were added to explain this bias.

p5 line 34 Violence might also lead staff to leave the profession.

REPLY: a sentence – and the reference -was added.

METHOD

p8 line 54 what constituted sensitive data?

REPLY: name, surname and workers' registration number. The information about sensitive data was added.

p10 lines 12-30 terms like 'lexical universe' are unclear. Please also clarify what 'topoi' refers to.

REPLY: explanations were added, the word 'topoi' was deleted and the term 'conventional themes' was added.

Given the unusual mixed methods reported in this paper it would help to situate this methodology in the wider literature and to explain the rationale for using these methods.

REPLY: an explanation was added.

RESULTS

p11 lines 51-54 What proportion of female staff reported violence by patient relatives? What proportion of male staff reported violence by visitors? It isn't enough to say only "more".

REPLY: percentages were added in the text.

It would be better to spell out the meanings of SPR and ECU in full as they are non-standard abbreviations.

REPLY: SPR is the standardized Pearson residuals, the words “from this point forward: SPRs” were added in brackets. The word E.C.U. was replaced with “elementary context units” in the text.

I am unclear what the reader is meant to take away from figures 1 and 2. It would help for the meanings of the different classes to be indicated on the figures themselves.

REPLY: the meanings of the different classes were inserted in figure.

It is unclear how the number of female-reported occurrences (14951) and forms (2739) relates to the total number of incident reports (408).

REPLY: those numbers might help the reader to understand the wealth of the descriptions used by female. This is the conventional way to present results using Alceste (see for example Reinert, M. (1990). *Alceste une méthodologie d'analyse des données textuelles et une application: Aurelia De Gerard De Nerval. Bulletin of Sociological Methodology/Bulletin de Méthodologie Sociologique*, 26(1), 24-54).

DISCUSSION

Well-written and clear.

Perhaps follow-up work could include interviews with staff on gender differences in the long-term impact of these events?

VERSION 2 – REVIEW

REVIEWER	Roxanne Keynejad King's College London, UK
REVIEW RETURNED	01-Oct-2019

GENERAL COMMENTS	<p>Thank you for addressing my previous comments. Aside from two issues, I am happy with this version.</p> <p>Thank you for inserting the meanings of the different classes into the figures but I remain unclear what the reader is meant to take away from figures 1 and 2. To be useful to the reader they would require more explanation in their footnotes.</p> <p>With reference to my previous comment and the authors' reply: "It is unclear how the number of female-reported occurrences (14951) and forms (2739) relates to the total number of incident reports (408)."</p> <p>REPLY: "those numbers might help the reader to understand the wealth of the descriptions used by female. This is the conventional way to present results using Alceste (see for example Reinert, M. (1990). <i>Alceste une méthodologie d'analyse des données textuelles et une application: Aurelia De Gerard De Nerval. Bulletin of</i></p>
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	<p>Sociological Methodology/Bulletin de Méthodologie Sociologique, 26(1), 24-54)."</p> <p>I still think that the way the sentence about occurrences, forms and hapax in paragraph 1 of page 14 is unclear for readers unfamiliar with this methodology. Please could the authors define occurrences, forms and hapax here to ensure that less familiar readers can understand this section?</p>
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VERSION 2 – AUTHOR RESPONSE

Thank you for inserting the meanings of the different classes into the figures but I remain unclear what the reader is meant to take away from figures 1 and 2. To be useful to the reader they would require more explanation in their footnotes.

Reply: thank you for your comment. A more explanation was added.

In figure 1: *‘Text corpus of administrative records compiled by female HCWs victims of workplace violence. The dendogram shows the classification procedure used to create the two classes that emerged (amount of variance explained = 96.9%). Class I explained 75% of the variance and was labelled Waiting time. Class II explained 25% of the variance and was labelled Physical attack’*

In figure 2: *‘Text corpus of administrative records compiled by male HCWs victims of workplace violence. The Dendogram shows the classification procedure used to create the five classes that emerged (amount of variance explained = 93.6%). The dendrogram shows that Classes I, II and III are more similar than Classes IV and V. At the same time, Classes IV and V are more similar than the other classes. Classes I, II and III explain – together – 65% of the variance; Classes IV and V explain 35% of the variance. Classes I, II and III were labelled Verbal violence. Classes IV and V were labelled Corporeal assault’.*

I still think that the way the sentence about occurrences, forms and hapax in paragraph 1 of page 14 is unclear for readers unfamiliar with this methodology. Please could the authors define occurrences, forms and hapax here to ensure that less familiar readers can understand this section?

Reply: thank you for your suggestion, a definition of occurrences, forms and hapax, was added in paragraph 1 of page 14.