

NEW ENGLAND PSYCHODIAGNOSTICS

About
Dr. Albert
Drukteinis

Industrial &
Occupational
Stress Claims
Experience

Fitness for Duty &
Americans with
Disabilities
Act Evaluations

Forensic
Telepsychiatry

Online
Library

Contact

Home

WORKPLACE VIOLENCE

Albert M. Drukteinis, M.D., J.D.

Increasingly, workplace violence draws the attention of the American public. After a postal employee shot a number of his coworkers and then committed suicide a few years ago, most post offices and many other work sites felt the trepidation and the term going postal was coined. Theories are quickly offered to explain such events and include attacks on a harsh business environment which has led to insecurity in the work force, the rise of poverty, easy access to firearms, and the growing use of alcohol and drugs, just to name a few. Often the theories follow independent political agendas and may not have much legitimate basis. The fact is, however, that workplace violence is a serious problem today and is probably a reflection of the mounting violence in society generally. This is so much so that the U. S . Department of Justice has described violence as a public health emergency and even an *epidemic*. Indeed, the statistics regarding workplace violence are alarming.

Although accurate numbers may be hard to attain, a number of public and private research studies have provided insight into the prevalence and nature of workplace violence. Understandably, fatal assaults create a high profile, but are only one manifestation of a much broader problem. Nonetheless, homicide is the second leading cause of death in the workplace and twenty workers are murdered each week in the United States. Most of these are in the course of a robbery or involve employees engaged in security work. High-risk occupations include taxi cab drivers, chauffeurs, law enforcement personnel, and retail workers. Men are the most likely victims. On the other hand, non-fatal assaults account for twenty times that of fatal ones. It is -2 -estimated that 15% of workers will be attacked in the course of their working lifetime, and 18% of those attacks will be with a lethal weapon. Most victims of non-fatal assaults are women, in particular those who are employed in the health industry where patients are likely to be the assailants. Other frequent scenarios include disputes with a co-worker, former co-worker or supervisor; disagreements with customers or clients; and following an altercation with a relative of the victim. Sometimes there is no legitimate relationship between the assailant and the victim and at other times the assailant/victim relationship is the critical precipitant to the incident.

From a legal standpoint, injuries following an assault may be covered under workers' compensation statutes as long as the injury arose out of and in the course of employment. An employee may be compensable when an assault was in response to a dispute involving the work itself or the work brought the employee and assailant together creating conditions for the dispute. In other instances even personal disputes leading to an assault may be compensable when the workplace contributed to the strain or stress on the parties, or where the parties had no relationship outside the work. Of course, assaults that are purely personal and are unrelated to the employment are not compensable so, an employee would not be covered if employment duties did not add to the risk of harm, the employee was not performing duties of employment at the time, or the condition of employment did not contribute to the assailant's plan. In other words, there must be some work connection. While workers' compensation may be an exclusive remedy, in some cases the employee can file an independent claim against the employer for intentional misconduct, negligent hiring, training, supervision, and retention of employees who become violent, or under implied contract theory where the employer has a duty to protect employees from a hostile work environment. Similarly, there may be implied covenants of good faith and fair dealing which can be invoked by employees against the employer, the doctrine of respondeat superior imposes agency obligations on the employer, and OSHA standards require that an employer do what is necessary to protect the life, safety, and health of employees. Finally, the criminal justice system has a number of remedies that may be applied to potential assailants including laws against threatening, hate crimes, stalking, brandishing a weapon, and trespass. At times obtaining a restraining order is an alternative that a potential victim or that victim's employer should consider.

Workplace violence is a complex phenomenon which requires an examination of both the assailant, the

victim, and the setting in which the assault takes place. What causes some individuals to become violent is not well understood. Biological theories describe neurochemical linkage to violent behavior. In particular, studies show that low levels of the neurotransmitter serotonin or its bi-products is a powerful predictor of future excessive aggression. Psychological theories look at early childhood experiences including abuse and/or reinforcement of violence as perpetuating violent behavior. Sociocultural theories explore the substrate of violence in the conditions of the community from which the individual comes. While mental illness is often associated with violence, only a minority of persons with mental disorders are actually violent and most violent offenders are not suffering from mental illness. When individuals do become violent due to a mental illness, they are usually more easily recognized by their bizarre or unusual behavior and may have a documented history of treatment or hospitalization. The more problematic cases are those where individuals have personality disorders which are not mental illnesses but maladaptive patterns of thinking and behaving. In robberies, for example, criminal activity may be perpetuated by individuals who have *anti-social* personality traits. Their lack of -guilt and non-compliance to social norms has led to a lifetime pattern of disregarding the rights of others. In addition, individuals with other personality disturbances may be seen in the workplace who not only create disruption to the organization but may be prone to violent behavior. For example, people with *paranoid* personalities may be perpetually suspicious of the motives of others and feel that they are unduly slighted. They may be prone to retaliate against the perceived harm or injustice. Also, *narcissistic* individuals, some of whom can become romantically obsessed, may react violently when they are rejected or when their inflated sense of self-importance is challenged. *Borderline* personalities are those whose mood is quite unstable, they, too, can create havoc within an organization and overreact when frustrated or slighted. Often, personality disturbance is of a *non-specific* type in which an individual may have features of different types of personality disorders with the common characteristic of marginal interpersonal, social and occupational functioning. In addition, there is good evidence that alcohol and drug abuse play a role in workplace violence. One third of all violent offenders generally are alcoholics, and drug abuse increases the likelihood of aggressive and violent behavior.

Along with work settings which are a high risk for violence based on the nature of the employment, other workplace characteristics may predispose to stress and conflict leading to aggression. These can be divided into operational stressors and employment security stressors. *Operational stressors* include unrealistic demands on workers, lack of regard for worker's needs, overly authoritarian management, insufficient attention to physical environment and security, inconsistent application of policies and procedures, chronic labor management conflicts, preferential treatment of some employees, ineffective employee grievance procedures, lack of consistency by management, and monotonous and unfulfilling work. *Employment security* stressors include no opportunity for advancement, layoffs and down-sizing, loss of benefits, reprimands, and fear of termination. In an era where re-engineering of the workplace has become popular, the employee often feels dispensable and powerless. When constructive options no longer exist, violence may be a perceived remedy.

A number of preventive strategies to deal with workplace violence have been proposed. The first of these is to ensure that there is an adequate assessment of the potential for violence. This comes from understanding the peculiar risks of the employment setting and accurate reporting of violent incidents and threats. A formal policy for violence prevention should be established and reviewed. The cost of this is a fraction of what violent episodes can incur to the organization. Establishing a *zero tolerance* for violence or other risky behaviors is an important part of the approach. Second, once a risk is identified, it is necessary to design an environment that is safe. This can be through natural surveillance, control of access to the workplace, enhanced lighting and low profile landscaping, reinforcement of territorial boundaries of the work site, and providing security patrol. Third, there should be adequate employee screening. Since it is difficult even for professionals to identify a potentially violent individual, employers are even more at a disadvantage. However, minimum screening of employee applicants for this possibility should be considered. This can include obtaining a criminal record history, credit check, prior employer feedback, verifying education and professional credentials, drug screening, and obtaining the driving record. Fourth, it is imperative that threats are responded to adequately and in a timely fashion. Managers may be afraid to respond or prefer to deny that a violent episode will ever occur. In contrast, an inappropriately angry response is also ineffective and may reinforce the violence. A concerned confrontation which tries in good faith to understand and help the threatening individual, while at the same time focusing on inappropriate behaviors, offers the proper balance in response. Looking for solutions rather than blame is a constructive and useful philosophy. Unfortunately, solutions are not always readily available and, therefore, workplace violence will continue to challenge managers, lawyers, and psychologists in the years ahead. (See Journal of Occupational and Environmental Medicine, Vol. 38, No. 10, October 1996 and Occupational Medicine; State of the Art Reviews - Vol. 11, No. 2, April-June 1996, Philadelphia, Hanley and Belfus, Inc.)

[back to the top...](#)

[Return to Online Library...](#)

©2005-2012 New England Psychodiagnostics / Dr. Albert M. Drukteinis
all rights reserved

1750 Elm Street - Manchester, NH 03104-2943

PHONE

Manchester, NH (603) 668-6436 or (603) 668-1495

Woburn, MA (781) 933-7768 • **Portland, ME** (207) 756-6037 • **Burlington, VT** (802) 860-2909

Tampa, FL

FAX: (603) 668-4226 • eMAIL: aldruk@aol.com

[Industrial & Occupational Stress Claims Experience](#) - [Fitness for Duty & Americans with Disabilities Act Evaluations](#)

[Forensic Telepsychiatry](#) - [Online Library](#)

[About Dr. Drukteinis](#) - [Contact](#) - [Home](#)