Workplace Violence is a Serious and Growing Problem

- An estimated 1 million workers are assaulted annually in U.S. workplaces. Most of these assaults occur in service settings such as hospitals, nursing homes, and social service agencies.
- Workplace violence deaths increased to 705 in 2020, while more than 27,000 violence-related lost-time injuries were reported.
- 392 worker deaths were workplace homicides.
- Workplace violence is the fourth-leading cause of workplace death overall and the second-leading cause of workplace death for women.
- Women workers are at greater risk of violence than men; they suffer seven of every 10 lost-time injuries related to workplace violence and are 50% more likely to be killed by a relative or domestic partner in the workplace than men.
- There is no federal OSHA standard to protect workers from workplace violence.

What is Workplace Violence?

The Occupational Safety and Health Administration (OSHA) defines workplace violence as “any act or threat of physical violence, harassment, intimidation or other threatening disruptive behavior that occurs at the work site.” OSHA estimates that about 2 million workers report violent workplace incidents each year. The actual number of incidents is thought to be much higher as many events probably do not get reported.

Not all workplace violence can be prevented. But all employers are responsible for adhering to OSHA’s General Duty Clause that states that all employers, regardless of size, must provide a place of employment “free from recognized hazards that are causing or are likely to cause death or serious harm.”

Types of Violence

Type 1: Criminal Intent

In this kind of violent incident, the perpetrator has no legitimate relationship to the business or its employees. Type I violence is usually incidental to another crime such as robbery, shoplifting, or trespassing. Acts of terrorism also fall into this category.
Type 2: Customer / Client
When the violent person has a legitimate relationship with the business—for example, a customer, client, patient, student, or inmate—and becomes violent while being served by the business.

Type 3: Worker-on-Worker
The perpetrator of Type 3 violence is an employee or past employee of the business who attacks or threatens other employee(s) or past employee(s) in the workplace. Type 3 violence between coworkers is commonly referred to as lateral or horizontal violence. It includes bullying, and frequently manifests as verbal and emotional abuse that is unfair, offensive, vindictive, and/or humiliating though it can range all the way to homicide.

Worker-on-worker violence is often directed at persons viewed as being “lower on the food chain” such as in a supervisor to supervisee though incidence of peer to peer violence is also common.

Type 4: Personal Relationship
The perpetrator in these cases usually does not have a relationship with the business but has a relationship with the intended victim. This category includes victims of domestic violence who are assaulted or threatened while at work. For example, the husband of a worker follows her to work, orders her home and threatens her, with implications for not only this worker but also for her coworkers and clients / patients.

Risk Factors
Several factors may increase a worker’s risk for workplace assault. These factors include the following:

- Contact with the public
- Exchange of money
- Delivery of passengers, goods, or services
- Having a mobile workplace such as a taxicab or police cruiser
- Working with unstable or volatile persons in health care, social service, or criminal justice settings
- Working alone or in small numbers
- Working late at night or during early morning hours
- Working in high-crime areas
- Guarding valuable property or possessions
- Working in community-based settings

Prevention Strategies

Environmental Designs

- Commonly implemented cash-handling policies include procedures such as using locked drop safes, carrying small amounts of cash, and posting signs and printing notices that limited cash is available. It may also be useful to explore the feasibility of cashless transactions. These approaches could be used in any setting where cash is currently exchanged between workers and customers.

- Physical separation of workers from customers, clients, and the public using bullet-resistant barriers or enclosures has been proposed for certain settings such as hospital emergency departments, and social service agency claims areas. The height and depth of counters (with or without bullet-resistant barriers) are also important considerations in protecting workers since they introduce physical distance between workers and potential attackers. Consideration must nonetheless be given to the continued ease of conducting business; a safety device that increases frustration for workers or for customers, clients, or patients may be self-defeating.
• Visibility and lighting are also important environmental design considerations. Making high-risk areas visible to more people and installing good external lighting should decrease the risk of workplace assaults.

• Access to and egress from the workplace are also important areas to assess. The number of entrances and exits, the ease with which nonemployees can gain access to work areas because doors are unlocked, and the number of areas where potential attackers can hide are issues that should be addressed. This issue has implications for the design of buildings and parking areas, landscaping, and the placement of garbage areas, outdoor refrigeration areas, and other storage facilities that workers must use during a work shift.

• Numerous security devices may reduce the risk for assaults against workers and facilitate the identification and apprehension of perpetrators. These include closed-circuit cameras, alarms, two-way mirrors, card-key access systems, panic-bar doors locked from the outside only, and trouble lights or geographic locating devices in mobile workplaces.

• Personal protective equipment such as body armor has been used effectively by public safety personnel to mitigate the effects of workplace violence. For example, the lives of more than 1,800 police officers have been saved by Kevlar® vests.

Administrative Controls

• Staffing plans and work practices (such as escorting patients and prohibiting unsupervised movement within and between clinic areas) are included in the California Occupational Safety and Health Administration Guidelines for the Security and Safety of Health Care and Community Service Workers. Increasing the number of staff on duty may also be appropriate in any number of service settings. The use of security guards or receptionists to screen persons entering the workplace and controlling access to actual work areas has also been suggested by security experts.

• Work practices and staffing patterns during the opening and closing of establishments and during money drops and pickups should be carefully reviewed for the increased risk of assault they pose to workers.

• Policies and procedures for assessing and reporting threats allow employers to track and assess threats and violent incidents in the workplace. Such policies clearly indicate a zero tolerance of workplace violence and provide mechanisms by which incidents can be reported and handled. In addition, such information allows employers to assess whether prevention strategies are appropriate and effective. These policies should also include guidance on recognizing the potential for violence, methods for defusing or de-escalating potentially violent situations, and instruction about the use of security devices and protective equipment. Procedures for obtaining medical care and psychological support following violent incidents should also be addressed. Training and education efforts are clearly needed to accompany such policies.

Behavioral Strategies

• Training employees in nonviolent response and conflict resolution has been suggested to reduce the risk that volatile situations will escalate to physical violence. Also critical is training that addresses hazards associated with specific tasks or worksites and relevant prevention strategies.

• Training should not be regarded as the sole prevention strategy but as a component in a comprehensive approach to reducing workplace violence. To increase vigilance and compliance with stated violence prevention policies, training should emphasize the appropriate use and maintenance of protective equipment, adherence to administrative controls, and increased knowledge and awareness of the risk of workplace violence.

For more information, contact the AFT health and safety team at 4healthandsafety@aft.org