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## ARTICLE

## Client's violence toward social workers

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**Abstract** The aim of this study is to characterize clients' violence toward social workers in terms of its frequency and type, as well as to identify the organizational measures used to reduce and manage work-related violence.

Data collection involved 3 Portuguese organizations within two different stages, which included the use of interviews and questionnaires directed to social workers ( $n = 108$ ) and their managers ( $n = 27$ ).

The results indicate that at least half of the participants were victims of clients' violence and verbal aggression, which is the most common type of violence. The results also revealed a set of measures of primary, secondary and tertiary interventions that are being used by the organizations involved in this study.

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## 1. Introduction

Nowadays the subject of work violence is being discussed worldwide (Estrada, Nilsson, Jerre, & Wilman, 2010) and has

drawn the attention of employers, employees, governmental organizations, the scientific community and the overall community (Di Martino, Hoel, & Cooper, 2003; Milczarek, 2010; Schat & Kelloway, 2003; Upson, 2004). This interest is mainly linked to the increase in frequency and severity of work violence occurrences (Fletcher, Brakel, & Cavanaugh, 2000), which have a very negative impact on both individuals and organizations (Enosh, Tzafrir, & Gur, 2013) and may

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lead to a set of consequences and costs on the society itself, as well as the governments (Barrios-Casas & Paravic-Klijn, 2011; Graça, 2004; Leather, Brady, Lawrence, Beale, & Cox, 1999).

Therefore the study and implementation of organizational measures designed to prevent and to respond the work violence related occurrences are crucial (Beale, Lawrence, Smewing, & Cox, 1999), even though there is a lack of studies related to this subject (Heiskanen, 2007; Schat & Kelloway, 2005).

Achieving a greater knowledge about the risk of violence associated with a particular work environment is mentioned by authors such as Wilkinson (2001) as a decisive factor in terms of prevention. The aim of this study, which we believe is the first focusing on this organizational issue within social workers in Portugal, is to provide a better understanding about work violence from the clients toward the employees by analyzing its frequency and type, as well as the preventive and reactive organizational measures currently in place.

## 2. Literature review

### 2.1. Workplace violence and social workers

In general, the phenomenon of work violence involves work-related events which either in an implicit or explicit way have a negative impact on the individual's professional performance, security, and health, as well as physical and psychological well-being (Di Martino et al., 2003; Fletcher et al., 2000).

According to Eurofound data (Eurofound, 2012), 11% of the employees from the 27 countries included in European Union in 2010 were victims of verbal violence while working, which shows an increase of 2% from 1995. In Portugal the results revealed a correspondent percentage of 5%. On the other hand, physical violence appears to be less frequent in Europe in general and specifically in Portugal, so that only 2% of the employees were referred to as victims of this type of violence in both cases. According to the same data, in most situations involving violence related to work, the perpetrator is a member of the public, which is also confirmed by the authors LeBlanc and Barling (2004).

Probably the most consensual classification of this phenomenon distinguishes 3 types of work violence. It was proposed by the California Occupational Safety and Health Administration (1995/1998) and was referred by several authors (e.g., Leather et al., 1999; LeBlanc & Kelloway, 2002; Mayhew & Chappell, 2001). Type I includes the violence perpetrated by members of the public who are not related to the victim or the workplace. This is mostly linked to the robbery of money or material goods. On the other hand, violence Type II (the focus of this study) is associated with situations when the aggressor is the client or someone to whom the organization and the victim provide service. Violence Type III occurs when the aggressor maintains or used to maintain a professional relationship with the victim. Considering further the violence Type II, according to Leather et al. (1999), a distinction can be made between two main patterns that encompass the vast majority of the incidents in this case. Thus, incidents may occur within

customer service, having as their main motivation dissatisfaction with the service provided (e.g., delay in customer service, the service does not meet the expectations). On the other hand, this kind of violence can represent in turn a protest by the customers in relation to persons with power positions in the organizations concerned.

Some occupational groups tend to be more exposed to work violence due to the characteristics of their work (LeBlanc & Barling, 2005). Individuals who work facing the public have higher chances of becoming victims of work violence (Milczarek, 2010), as well as those who work in the public sector (Enosh et al., 2013). When the performance of functions occurs in isolation, i.e., without the support of other colleagues, the risk of violence also tends to be higher (Chappell & Di Martino, 1998). The same happens in cases where professionals have to work out of the typical service places, as happens with home visits (Mayhew & Chappell, 2001).

Therefore, the services sector tends to be more affected by this organizational issue than the industry, and social workers appear to be on top of the high-risk professions (LeBlanc & Barling, 2005; OSHA, 2004). As such, several studies about violence from customers directed to these professionals have been undertaken in many countries, having confirmed the occurrence of the phenomenon in many of them (Enosh, Tzafir, & Stolovy, 2014). One study conducted in the United States showed that more than half of the participants reported having been victims of workplace violence especially involving verbal abuse, and there are recorded episodes of physical violence (Ringstad, 2005). Enosh et al. (2014) also note investigations carried out in countries such as Canada (Macdonald & Sirotich, 2005) or Israel (Enosh et al., 2013; Tzafir, Enosh, & Gur, 2013), the results of which were headed in a similar direction.

The delivery of social services itself is risk related because it is tied to social control, for example, the authority to deny resources, usually because of lack of eligibility, may cause aggression (Newhill, 1995). Second, the clients of social service agencies must often cope with high levels of frustration and many unmet needs (Shields & Kiser, 2003). Third, worker-related characteristics may play a role, for example, young professionals (Jayaratne, Croxton, & Mattison, 2004) and inexperienced ones (Brady & Dickson, 1999) are more prone to client violence.

In general, violence in the workplace can result in the occurrence of any event which, implicitly or explicitly, negatively affects the performance, safety, health or physical or psychological well-being of a person in circumstances related with their work (Di Martino et al., 2003; Fletcher et al., 2000). In this sense, these situations may not occur in the workplace and may involve behaviors as varied as, for example, homicide, physical or verbal abuse or threats (Fletcher et al., 2000; Mayhew & Chappell, 2001). Among the range of behaviors, the physical aggression which results in death is, of course, the most serious form of violence but also the least frequent (Schat & Kelloway, 2005). In turn, the forms of violence that do not involve physical contact, although they occur more frequently, are rarely given attention and are less valued by people (Greenberg & Barling, 1999). After all, the existence of physical as well as psychological violence is clearly recognized (Di Martino et al., 2003).

## 2.2. Consequences of workplace violence

The problem of workplace violence has serious consequences on the physical, psychological or behavioral character, which may or may not manifest contiguously to the incidents (Schat & Kelloway, 2005). These, in turn, have implications both for the employees concerned about their colleagues and, consequently, for the respective organization (Chappell & Di Martino, 1998; Dupré & Barling, 2003; LeBlanc & Barling, 2005). Therefore, considering the implications at the individual level, the perception by professionals that they may be at risk and that they constitute potential targets of violent behaviors can, alone, cause them a level of pressure and stress enough to cause considerable discomfort (Lennings, 1997). In addition, psychological problems related to mood disorders such as depression or sleep disturbances are seen as consequences of the exposure to this type of violence (Hershcovis & Barling, 2010). These often result from high levels of fear and anxiety caused by the dilemma faced by the victims by the uncertainty about their future safety (Barling, Rogers, & Kelloway, 2001). There is evidence that fear and depressive moods experienced by the victims are associated with a decline in their organizational commitment, as well as an increase in their perception of injustice and negligence of their work (Barling et al., 2001). Post-traumatic stress disorders, concentration difficulties, reduced self-confidence or reduction of the job satisfaction are other problems often cited as a result of workplace violence (Di Martino et al., 2003). In some cases, those problems cause such serious malfunctions that in the absence of appropriate intervention can result in suicide cases (Chappell & Di Martino, 1998). Regarding the effects of physical character, they may be different, ranging from black stains or small wounds, up to the victim's own death (Milczarek, 2010). Moreover, even if a person is not a direct victim of violence in the workplace, it does not mean that cannot be affected by the phenomenon. Indeed, to witness directly co-workers' violent episodes can lead to consequences, in some cases, similar to those suffered by the victims themselves (Giga & Hoel, 2003).

Ultimately, this phenomenon has an impact in the organization itself. This is reflected in a literature review from Schat and Kelloway (2005) which makes reference to consequences of exposure to workplace aggression. These authors mention, for example, its negative effect in terms of work satisfaction, turnover intention, productivity and counter-productive behavior in the workplace.

## 2.3. Workplace violence interventions

Taking into account the serious negative impact of work violence, the study, design and use of measures to prevent and manage its occurrence are extremely important (Beale et al., 1999). Prevention includes actions taken in order to avoid violent incidents (primary intervention) and also reactive measures to deal with the actual incidents (secondary intervention) (Di Martino et al., 2003; Wilkinson, 2001). Finally, it is also important to consider treatment measures in order to minimize their consequences and enhance the individuals' recovery, which allows them to overcome the

situation and return to a normal working life (tertiary intervention) (Di Martino et al., 2003).

In this context, organizations have a very important role from the outset because they have the responsibility to ensure the safety of their workers and provide conditions for a healthy work environment (Dupré & Barling, 2003; Fiesta, 1996; Milczarek, 2010). Also in this sense, some studies indicate that the organizational support demonstrated through the support of supervisors or their own work colleagues has a significant moderating effect at the level of workplace violence in terms of performance, as well as regarding the victims', physical and emotional well-being (Bayman & Hussain, 2007).

Thus, at the level of *primary intervention*, there are several measures of a structural nature that should be considered. It is about the installation of security mechanisms as is the case of metal detectors, to prevent the entry of armed persons in the services, as well as surveillance systems that allow the monitoring of what is happening in the facilities (OSHA, 2004). Concurrently, the organization of space must predict the existence of waiting rooms appropriate to the public, adapted so that it cannot be used as a weapon, with protective glasses at the reception level, as well as counting systems that allow each customer to know at any moment how many people remain to be served before him (NIOSH, 2002). The creation of restricted areas to clients and emergency exits for employees is also very important (NIOSH, 2002). In terms of management, the organization must develop and implement protocols that govern the organization of work so that employees never work alone, and also to minimize waiting time for customer service (Heiskanen, 2007). During the supervisory meetings it should be discussed with supervisors and colleagues strategies to effectively deal with potentially violent clients, which should be duly identified (OSHA, 2004). Security guards must also be present to ensure the installation surveillance (NIOSH, 2002). Employees, in turn, should receive training to enable them to anticipate and effectively manage conflict situations, such as recognizing dangerous situations (Beale et al., 1999; Milczarek, 2010). In relation to home visits, the employees should receive conduct training as well as get access to policies and procedures specific to these situations (OSHA, 2002). They should also be equipped with mobile phones and as a matter of policy they should be required to follow a daily plan and maintain contact with a colleague through the day in order to report any location change (OSHA, 2002). The team work is also referred as a measure in these cases (OSHA, 2002).

In relation to *secondary intervention*, emergency action plans and formal procedures must be followed in order to help control the situation and, if necessary, remove the affected or vulnerable employees out of their workplace (Beale et al., 1999). Additionally, mechanisms should be created that allow employees to warn the security responsible of an imminent danger in order to be supported by them (NIOSH, 2002).

Finally, and with regard to the *tertiary intervention*, victims must receive all necessary care to the recovery of their physical and psychological well-being, and the other employees, such as managers, should be sensitized about the immediate negative and long-term effects that may arise in order to be better prepared to provide their

support (Beale et al., 1999). In this sense, the support of professionals trained for this purpose should be available, and they must accompany victims until normal functioning is reestablished (Beale et al., 1999). In addition, victimized employees should be encouraged to report all cases of assault and also threats to management in order to more easily detect the need for implementing new intervention measures (OSHA, 2004). In the event of a formal complaint filed by the employee, all the necessary support from the organization must be provided (OSHA, 2004).

As will be seen in the empirical part, the results of the study presented identified measures related to each intervention level. Besides trying to analyze the interventions in each of these levels, the study also intended to contribute to the characterization of the phenomenon of work-related violence, which is in this case, customers in the face of the social service professionals.

### 3. Methodology

#### 3.1. Design and measures

This study combines two different stages – including qualitative and quantitative methods – and two different groups – managers and employees. Initially 3 employees and 2 managers were interviewed and afterwards 105 employees and 25 managers answered online questionnaires.

The initial purpose of the qualitative stage was to access the suitability of the questionnaire selected for the quantitative stage to our sample (Portuguese social workers), taking into account that the original version was designed by a research team from the University of Haifa (Tzafrir et al., 2013) specifically for Israeli social workers. Additionally, the information collected through the semi-structured interviews was used to complement the questionnaire with 2 sections related to intervention measures that were not considered on the original version. As mentioned previously, one of the purposes of the study was to contribute to the identification of intervention strategies used or that could possibly be used by organizations and employees when faced with workplace violence occurrences.

Specifically, in the first phase of the study two scripts were developed, one for the social workers and the other for managers. This option was taken in the sense of trying to understand not only the point of view of employees as victims, potential victims or witnesses of violence, but also to try to assess the organization's perspective on the problem, represented in the case by the management. Thus, both the scripts initially included introductory and more general questions about the perception of the participants about the problem. In its follow-up questions have been placed about the forms of violence to which professionals are exposed and also about the measures they adopt to manage them. It also included questions about the types of support that the victimized employees receive as well as about the preventive measures developed to prevent the occurrence of violence. Finally, there was space for comments and suggestions. In the case of the interviews with managers, a question was also added about the types of responses that usually are given when confronted with the story of a victimized employee.

The second phase of the study, as noted, was related to the implementation of the questionnaire. The Portuguese version of the questionnaire has, like the original, two versions for employees and managers accordingly. The employees' questionnaire includes eight different sections (e.g., "sources of stress at work", "interpersonal relationships in work teams"). However, for the purpose of this article we analyzed only 3 of them, including: frequency of aggressive behavior from clients, preventive measures and management measures. The section that evaluates the frequency of customers' aggressive behavior consists of 16 items (e.g., "In the past three months, how many times has a customer shouted at you?"), which are answered on a 7-point Likert scale ranging from 0 (never, no occurrence) and 6 (occurrence of 6 or more times of a specific behavior in the past three months). In addition to the previous answers, which are related to violence in the "last three months," there was also one last option on the scale that should be ticked if the conduct in question occurred "more than three months ago." Regarding the sections "preventive measures" and "management measures," these were composed, respectively, by 4 and 6 response options (e.g., "Assign more than one employee to the same case" in the first case and "report the case to the line manager" in the second) that respondents should point out the organization they worked for and that resulted from the analysis of the interviews in the previous phase. In both sections, in addition to the previously specified options (i.e., the prevention of violent behavior or management measures in the event of violence that resulted from the analysis of the interviews), the participant could also add strategies by checking the option "other strategies" in the respective section (in Tables 4 and 5 the frequency of this option is marked as "other").

The managers' questionnaire is similar to the social workers' questionnaire and consists of 7 sections from which only 2 were considered: preventive measures and management measures (cf. Tables 4 and 5 in the results).

#### 3.2. Participants and procedures

In both phases employees and managers (social workers) participated from three similar institutions that provide social public services in Portugal. All employees who participated had direct contact with the public, which may have occurred on the premises of its own facilities and/or within home visits.

Three employees and two managers participated in the first phase, and all interviews were conducted in the workplace of the respondents. On average they lasted for about 30 min and were audio recorded. Besides getting approval to record the interviews, the member of the research team responsible by conducting the interview, explained to every interviewee the study objectives, the relevance of their participation, and that the participation is entirely voluntary and the confidentiality of the data collected is assured by the research team.

The second phase of the study, which has a quantitative character, was based on a sample of 105 employees and 25 managers. Although initially the sample was counted with 125 employees and 29 managers, it was necessary to



**Table 1** Characteristics of the sample.

	Employees		Managers	
	<i>n</i>	%	<i>n</i>	%
<b>Sex</b>				
Female	88	83.8	19	76.0
<b>Age</b>				
≤30	5	4.8	–	–
31–35	14	13.3	2	8.0
36–40	30	28.6	8	32.0
41–45	22	21.0	4	16.0
46–50	19	18.1	4	16.0
51–55	10	9.5	3	12.0
>55	5	4.8	4	16.0
<b>Qualifications</b>				
Secondary school	13	12.4	6	24.0
Degree	88	83.8	17	68.0
Master or higher	4	3.8	2	8.0
<b>Organizational tenure</b>				
	M (SD) <sup>a</sup>		M (SD)	
Working time in the organization	15.39 (8.1)		20.79 (11.1)	
Working time in function	10.68 (7.1)		7.98 (6.2)	
<b>Home visits at work</b>				
Yes	82	78.1	–	–
<b>Security surveillance at work</b>				
Yes	46	43.8	10	40

<sup>a</sup> M (mean); SD (standard deviation).

eliminate participants. Specifically, in the case of employees, 5 questionnaires showed a high percentage of missing data (exceeding 19%) and the rest had been subjected blank. Regarding the managers, 2 questionnaires showed also higher percentages of missing data (over 21%) and the other 2 were also subjected blank.

Presented in Table 1 is data that allow characterizing the sample considering the two groups (employees and managers). The group of employees is mostly female (83.8%), aged between 36 and 40 years (28.6%) and graduates (83.8%). Similarly, the group of managers also includes a higher percentage of females (76%) and with the same level of qualifications (68%). About half of the participants are aged between 36 and 45 years. Regarding the organizational tenure, the employees work in the institution on average for about 15 years, having on average about 11 years working at the current function. In turn, the managers are in the institution on average for about 21 years, in the current service for an average of approximately 8 years. Also in relation to the characteristics of the work situation, about three-quarters of employees perform home visits in the exercise of their functions. Finally, the majority of employees (65.2%) such as managers (60%) did not have surveillance security in their workplace.

The implementation of the questionnaire either for employees or for managers was done online. The preference for this format aimed to facilitate the participants'

access because, though they are associated with a given institution, they work in widely dispersed geographic locals. In the three institutions which hosted the questionnaires, a detailed presentation has been made of the study to the respective organization's representative and his collaboration has been requested in spreading the link for filling out the questionnaires among his employees.

The collection of data from both phases took place between early June and mid-September 2012, and all participants were informed about the purpose of the study and the importance of their contribution as well as the confidentiality of the data collected.

## 4. Results

This section starts by presenting the interview results of the first phase of the study (qualitative results) and then the results of the questionnaires (quantitative results).

### 4.1. Qualitative results

Template analysis (King, 1998, 2004) was the method used to analyze the interviews. The initial and final templates for both employees and managers are presented in Table 2, which contains information related to their awareness about the phenomenon, types of violence identified and also reveals a set of strategies associated with each intervention level. To facilitate the understanding of the data presented, the quotes related to employees are marked as "E" and the ones related to managers as "M", being the numbers related to the individuals interviewed.

In general, both employees and managers have the perception that they have to face aggressive behavior from their clients on a daily basis ("Up to date there were few complex situations... but as a matter of fact the violence does exist." E3/"I'm aware of the fact that in general there are situations which involve some violence and tension" M1).

Accordingly, it was possible to identify 6 types of violence that the employees are confronted with in circumstances related to their employment, including: physical aggression ("(...) the lady assaulted us with a glass ashtray." E3)/"(...) we have situations which involve some degree of physical violence."); verbal aggression; threat of being physically attacked ("(...) we mainly suffer from verbal aggression and threats of being physically assaulted." E3/"Normally it's a matter of verbal violence and there are some threats as well..." M1); threat to their families; harassment ("At some point I actually end up being followed home! During a period of time, my daughter wasn't that little anymore but I started to pick her up from school every day (...). At the time there were some threats." E2); and kidnapping ("(...) one of the individuals actually locked me in my office and pointed a knife at me." E3/"(...) the referred person was out of control (...) and decided to kidnap our employee in her house." M2).

In order to achieve a better understanding concerning the role of the organization in terms of intervention strategies, for each level, the measures identified are presented according to their initiative, whether they come from the organization itself or the employees. The intervention

**Table 2** Initial and final templates (employees and managers).

Employees		Managers	
Initial template	Final template	Initial template	Final template
Awareness of the phenomenon	1. Awareness of the phenomenon 1.1. Confirming the existence of violence.	Awareness of the phenomenon	1. Awareness of the phenomenon 1.1. Confirming the existence of violence.
Types of violence from clients toward staff	2. Types of violence 2.1. Physical aggression 2.2. Verbal aggression 2.3. Threat of physical aggression 2.4. Threat to the family 2.5. Harassment 2.6. Kidnapping	Types of violence from clients toward staff	2. Types of violence 2.1. Physical aggression 2.2. Verbal aggression 2.3. Threat of physical aggression 2.4. Threat to the family 2.5. Kidnapping
Primary intervention	3. Primary intervention 3.1. Organizational 3.1.1. Security personnel 3.2. Employees' initiative 3.2.1. Police support 3.2.2. Team work 3.3.3. Keep family informed	Primary intervention	3. Primary intervention 3.1. Organizational 3.1.1. Information sharing 3.1.2. Keep family informed 3.2. Employees' initiative 3.2.1. Police support 3.2.2. Team work
Secondary intervention	4. Secondary intervention 4.1. Employees' initiative 4.1.1. Call the police 4.1.2. Report to the police 4.1.3. Report to the supervisor	Secondary intervention	4. Secondary intervention 4.1. Employees' initiative 4.1.1. Report to the police 4.1.2. Report to the supervisor 4.1.3. Ask for the service manager support
Tertiary intervention	5. Tertiary intervention 5.1. Organizational 5.1.1. Legal support 5.1.1.1. Efficiency 5.1.2. Psychological support 5.2. Employees' initiative 5.2.1. Sick leave	Tertiary intervention	5. Tertiary intervention 5.1. Organizational 5.1.1. Legal support 5.1.2. Psychological help 5.1.3. Change of workplace 5.1.4. Change of role 5.1.5. Reassign the case 5.1.6. Reduction of workload

measures referred by employees and managers are generally coincident with the 3 intervention levels.

In regard to the *primary intervention*, it was possible to identify 3 organizational strategies, as well as 3 strategies implemented by the employees, even though there was no formal regulation related to their usage. One of the strategies suggested by both the organization and employees involves the advance information of the families about the implications of each step of the process ("*(...) when there is a situation when a child has to be taken away I always inform the family as soon as possible because it's a way of controlling the conflict.*" E2/"*(...) it is our duty to keep the families informed because it is their right*" M2). The objective is to raise their awareness about the fact that the tribunal orders must be followed in order to try to reduce the conflict. The remaining organizational strategies identified involve the provision of security personnel in the workplace ("*I know that in some places such as big cities where the reality is different they actually have security personnel permanently on site to assist them.*" E2), as well as the promoting of information-sharing between colleagues

and managers with the view to facilitate the identification of potentially risky situations, as well as the best way to deal with them ("*All the cases are extensively discussed during the supervisory meetings therefore there is always more than one person thinking about the case and defining the best strategy to deal with them.*" M2).

The strategies adopted by the employees on their own initiative include the request of the police support to keep potentially dangerous situations (e.g., home visits) under control and dissuade potential aggressors ("*We usually go to the home visits accompanied by the police to control de situation.*" E3). Another strategy consists of assigning more than one employee to the same case in order to avoid having only one person meeting with the client ("*(...) we book appointments with more than one employee to keep them from dealing with the clients alone...*" E2/"*We can have more than one employee assigned to a case to support each other and to be able to pay attention to different aspects of the case.*" M2).

As to *secondary intervention*, all 4 strategies that were identified come as a result of the employees' initiative. This

**Table 3** Frequency of clients' aggressive behavior.

During the last 3 months how many times	0		1-2		3-5		6+		>3 months	
	n	%	n	%	n	%	n	%	n	%
Client yelled at you	37	35.2	31	29.5	13	12.5	8	7.6	16	15.2
Client insulted you on purpose	61	58.1	24	22.8	3	3.9	2	1.9	14	13.3
Client left office and slammed the door	62	59.0	22	21.0	2	1.9	3	2.9	16	15.2
Client threatened to complain of you to supervisor/management	62	59.0	20	19.1	5	4.9	3	2.9	15	14.3
Client used a general threat (such as: "you will be sorry for that")	64	61.0	19	18.1	3	2.9	2	1.9	17	16.2
Client cursed at you	65	61.9	22	21.0	2	1.9	3	2.9	16	15.2
Client threatened to physically harm you or your family	79	75.2	8	7.6	1	1.0	1	1.0	16	15.2
Client threatened to damage your property	90	85.7	4	3.9	0	0.0	1	1.0	10	9.5
Client dropped objects, furniture, or kicked furniture	93	88.6	6	5.7	0	0.0	0	0.0	6	5.9
Client threw an object at the wall or on the floor	96	91.4	5	4.8	0	0.0	0	0.0	4	3.8
Client threatened you through media (internet, cell phone)	93	88.6	6	5.7	1	1.0	1	1.0	3	2.9
Client harassed you through media (internet, cell phone)	101	96.2	1	1.0	1	1.0	0	0.0	1	1.0
Client pulled or pushed you forcefully	102	97.1	0	0.0	0	0.0	0	0.0	2	1.9
Client harmed you in such a way that you needed slight medical aid (band aid, iodine, etc.)	102	97.1	1	1.0	0	0.0	0	0.0	2	1.9
Client slapped, kicked, or punched you	103	98.1	0	0.0	0	0.0	0	0.0	2	1.9
Client harmed you in such a way that serious medical damage has been caused (broken bone, sutures were needed, etc.)	103	98.1	0	0.0	0	0.0	0	0.0	2	1.9

set of strategies includes: the request of the police support to deal with the occurrence of violent situations ("(...) we had to call the police in 3 different occasions at least." E1/"Usually the employees report these situations to the police" M1); the submission of a formal complaint to the police ("(...) at the time we've made a formal complaint to the police." E3); the report of the situation to their supervisor ("(...) we know that when situations like these happen to our colleagues they then report them to their supervisors." E2/"(...) usually they report the situations to us by email when they feel like that's the right thing to do." M1); as well as the request of the service manager's support in order to try to calm the situation down ("(...) they usually ask the service manager for support and it tends to work." M1).

In relation to the *tertiary intervention*, it was possible to identify 6 organizational strategies and one strategy

suggested by employees. The organizational strategies include: legal support ("(...) at the time the organization provided legal support..." E3/"(...) an attorney is nominated by our director to legally defend them." M1); psychological support ("We know that there is a service of psychological support..." E1/"The employees don't usually use the psychological support our service provides." M1); the possibility of being transferred to a different workplace ("Sometimes we assess the possibility of changing the employee to a different workplace." M1); the possibility of being transferred to a different role ("In a couple of situation it happened that we've changed the employee to a different role with its agreement." M2); the possibility of reassigning the case to another colleague ("(...) sometimes we actually assign the case to a different colleague so that the victim stops to contact with the aggressor." M2); as well as the reduction of the workload ("We try to reduce

**Table 4** Strategies to prevent clients' aggressive behavior.

	<i>n</i>	%
<i>Employees</i>		
Assign more than one employee to the same case	66	62.9
Privilege services rendered in the appropriate setting, avoiding visits at domicile	37	35.2
Ask the social services responsible for its support	35	33.3
Ask for the police to attend to home visits	18	17.1
Other	12	11.4
<i>Managers</i>		
Assign more than one employee to the same case	16	64.0
Ask the social services responsible for its support	14	56.0
Privilege services rendered in the appropriate setting, avoiding visits at domicile	11	44.0
Ask for the police to attend to visits at domicile	8	32.0
Other	1	4.0

the workload so for a while they don't receive new cases." M2).

The only strategy adopted by the employees on their own initiative is to go on sick leave in order to temporarily avoid the occurrence of similar situations ("(...) at the time I ended up going on sick leave for a while (...) to see if the situation started to calm down" E3).

## 4.2. Quantitative results

### 4.2.1. Frequency of clients' aggressive behavior

The results related to this section are presented in Table 3 and ordered according to their frequency during the last 3 months. These results refer exclusively to the employees' questionnaire.

In general, these results are in line with previous studies as, for instance, actions associated with verbal violence are shown to be more frequent than those associated with physical violence.

Accordingly, only 35% of the employees said that they were never yelled at by a client and almost 8% were involved in situation where the clients behaved this way toward them 6 or more than 6 times in the last 3 months.

On the other hand, at least 97% of the employees said that they never suffered from any form of physical violence perpetrated by their clients.

### 4.2.2. Strategies to prevent clients' aggressive behavior

The results related to this section for both Employees and Managers are presented in Table 4.

Regarding the first group the results show that 2/3 of the employees refer to team work as one of the strategies they use. The strategy referred by a smaller number of

**Table 5** Management strategies adopted after a violent incident.

	I have heard of it		I have used/been engaged in it	
	<i>n</i>	%	<i>n</i>	%
<i>Employees</i>				
Report the case to the supervisor	70	66.7	39	37.1
Assign a different employee to the case	58	55.2	21	20.0
Report the case to the police	70	66.7	17	16.2
Avoid the assignment of problematic cases to the employee	36	34.3	5	4.8
Transfer the employee to a different service	41	39.0	1	1.0
Assign a new role the employee	37	35.2	1	1.0
Other	1	1.0	1	1.0
<i>Managers</i>				
Report the case to the supervisor			24	96.0
Report the case to the police			14	56.0
Assign a different employee to the case			13	52.0
Avoid the assignment of problematic cases to the employee			2	8.0
Assign a new role the employee			1	4.0
Transfer the employee to a different service			0	0.0
Other			1	4.0

employees (17.1%) is the involvement of the police in home visits. Apart from the measures previously identified, the results of the last open-response item ("other") revealed another 3 strategies, including: ask for the police to attend their actual workplace; reduce to a minimum the number of people attending meetings and avoiding extra family members or people related to the clients, unless needed; and the communication through a client's trust contact who may help to mediate the situation.

The results related to the Managers are similar. Besides the measures previously defined, the results of the last open-response item revealed another strategy, which was also referred by employees: request to the police assistance at their actual workplace.

### 4.2.3. Management strategies adopted after a violent incident

The results related to this section for both Employees and Managers are presented in Table 5.

In relation to the first group the results show that the strategy referred to by a great number of employees involves



the reporting of violent incidents to their supervisor (67% heard of it and 37% used it at some point). On the other hand, only 1% of the employees were engaged in 2 of the strategies identified (i.e., "Transfer the employee to a different service" and "Assign a new role to the employee"). Apart from the measures previously defined, the results of the last open-response item revealed other strategies, such as using communicational and conflict management strategies.

The results related to the Managers follow the same trend mentioned above although in this case no one identified the transference of the employees involved in violent incidents to different services as a management strategy. Apart from the measures previously defined, the request the police assistance at the workplace was once again mentioned.

## 5. Discussion

The results of this study revealed that at least half of the participants have been victims of work violence, which is demonstrated as well by some studies carried out in other countries (e.g., Enosh et al., 2014; Ringstad, 2005). Verbal aggression was shown to be the most frequent type of violence.

Additionally, based on the analysis of both interviews and questionnaires, it was possible to identify a set of 11 strategies of primary intervention, 4 strategies of secondary intervention and also 6 strategies of tertiary intervention.

In terms of primary intervention according to the questionnaires, the most frequently used strategy is related to team work. This was also referred to by authors such as Heiskanen (2007), who defended that organizations must organize their staff in order to keep individuals from working alone.

Only about 1/3 of the participants confirm the existence of security surveillance in their workplace, even though this is one of the most frequently referred and basic safety measures (e.g., OSHA, 2004). According to managers' interviews, there are also internal discussions and information-sharing in order to define strategies to cope with particular cases, both of these measures being referred to in the literature (NIOSH, 2002).

In terms of secondary intervention, the strategy used more often is to report any incident to the direct manager. This is very important because it helps to identify critical cases and also to understand if the implementation of further measures and strategies is needed (OSHA, 2004). Additionally, the measure related with the adoption of better communicational and conflict management strategies reflects the judgment of several authors including Beale et al. (1999) and Milczarek (2010). The authors defend that employees must be trained to be able to effectively anticipate and manage conflict situations, as well as to recognize potentially dangerous situations.

Finally, in regard to the tertiary intervention, the provision of psychological support is referred to by authors such as Beale et al. (1999) as an important factor that helps the victims cope with the situation in order to overcome its negative impact and return to their normal lives. Whenever a formal complaint is presented to the police, the organization should provide legal support to the employee (OSHA, 2004), which is actually happening in this case.

However, it is possible to conclude that, in regard to the organizations considered in this study, there is still room for improvement when taking into account that not all the aggressive behaviors referred to are covered by the set of strategies they currently have in place. This applies as well for the literature about the subject, as the number of studies is still not sufficient to clarify all the different aspects involved in this issue.

Moreover, this is also reflected in the suggestions given by the employees in their interviews, which are related to primary intervention strategies. Among them is a factor that suggests the existence of more proximity between employees and supervisors/managers as a way of improving their awareness and understanding about the different situations they have to face on a daily basis, in order to be better prepared to deal with them. This information is relevant when taking into account that authors such as Bayman and Hussain (2007) defend that this type of organizational support is very important, as it reduces the negative effects of work-related violence. Therefore, it has a positive impact on the victims' performance, as well as on their physical and emotional wellbeing.

## 6. Final considerations and suggestions for future developments

The research on the phenomenon of violence at the workplace is scarce in Portugal in general and concerning the social workers in particular. In addition to trying to identify the main violent behaviors to which these professionals are exposed, the accomplished study also tried to integrate a part more geared toward intervention, particularly by identifying the strategies used by the workers themselves and by the organization both in preventive and reactive terms. In this sense, we believe that the current study makes a significant contribution to the description of the existing reality, despite the relatively reduced number of participants involved, aspect that represents one of its main limitations, as it restricts the generalization of the results.

Therefore, it is suggested that new studies focused on this problem should take place, involving a larger sample as well as a deeper investigation in relation to the secondary and tertiary strategies. Also, in future investigations it would be important to assess the impact of the implementation of the referred strategies in terms of the frequency of occurrence of violent incidents. Given that the social workers can perform their professional activity at the institution in which they provide services and/or at the client's domicile, it would also be important in future studies to understand in greater detail the influence of the type of workplace in terms of exposure to violent behaviors as well as in terms of the adopted intervention strategies. In fact, studies focused on different workgroups would also be helpful to clarify the phenomenon in order that the prevention and management strategies can be tailored accordingly and their results be more effective.

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