No. 5
Violence and Public Contact Workers

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Has violence in the workplace increased? Some sectors of the community believe that it has. Certainly the headlines on this page illustrate the justifiable anxieties of some of our public contact workers. Many public transport workers have been verbally or physically abused by the travelling public. For example, earlier this year a Canberra bus driver suffered a heart attack and died following an altercation with a man who refused to pay a bus fare. Banking staff have to cope with irate, aggressive customers as well as the prospect of facing a professional, violent criminal. Taxation and community welfare officials encounter citizens who are hostile, and at times threatening. Every day some members of the police service have to deal with violent members of the community at some risk to themselves. Teachers, nurses, airline flight attendants and many others also confront violence in their workplace.

What are the causes of this type of violence and how can it be reduced? Crime prevention, employee protection, and victim counselling programs are underway in some organisations, such as in the banking industry, for example. But is management doing enough to instruct and protect its staff?

This issue of Violence Today goes some way to addressing these questions and suggests a number of counter-measures to protect employees against violence in the workplace.

Duncan Chappell
Chair
National Committee on Violence

'Cabbies take up arms against violence',
Melbourne Herald 17 May 1989

It was reported that taxi drivers in Melbourne have armed themselves against attacks by drunken passengers. This action follows the murder of a taxi driver at Bacchus Marsh in 1987.

'It's boring and poorly paid. Add the hassles of dealing with irate customers, and its no wonder bank staff are bolting.'
Australian Business 28 June 1989

Customer aggression is part of the reason for the high turnover of bank teller staff.

'Abusive, upset, stretched and harried, the customers are turning on bank staff and giving them what for.'

'Knife attack led to strike',
West Australian 12 June 1989

Metropolitan rail guards in Perth went on strike following the knifing of one of their colleagues. Angry and frustrated guards said they had been 'spat at, abused and one had had excrement thrown at him.'

'Bus Drivers Tell of Fear of Violence',
Sydney Telegraph 19 March 1989

Sydney bus drivers are concerned over the threat of violence to themselves and their passengers by drunks and youths. Some decline to work late shift because of violence on buses and the incidence of serious aggression is said to be growing during daylight hours.

A sad fact of contemporary life is that some workers suffer violence in the workplace at the hands of persons other than colleagues. Sometimes their aggressors are patients, for example psychiatric patients; sometimes criminals, such as bank robbers; sometimes persons subject to regulatory control, such as prison inmates. The range and variety of workplace aggressors is enormous.

There is a perception in some organisations that violence experienced by service or public contact workers is increasing, although lack of records makes confident assertion impossible. Certainly there is a growing awareness of the problem among workers, management and staff associations in industries whose employees service the public. As an official of a transportation industry union remarked recently—'People don't seem to handle their anger well any more'.

Even though records are inadequate, there is a clear need to protect many public contact workers from client violence. Successful protective measures depend on an understanding of the nature of the problem and remedial options available.

TYPES AND NATURE OF WORKPLACE VIOLENCE

Workplace violence divides into five broad motivation categories: random, instrumental, expressive, unmet needs, and criminal. These categories are reasonably

self-contained, but single instances of violence can involve more than one category.

'Random' violence is expressed by persons unable to form a clear intent—drunks or persons suffering from epilepsy, for example—and such behaviour is usually unreasoned.

'Instrumental' violence is intimidation employed to achieve a desired end, such as faster service.

Perhaps the largest category of workplace violence behaviour is that of 'expressive' violence, the product of extreme irritation, such as dissatisfaction with poor service, or desperation from welfare applicants without resources.

Violence resulting from 'unmet needs' relates to:

■ unmet physical needs;

■ unmet emotional and self-identity needs leading to a desire to 'prove' oneself;

■ displaced anger from past situations projected into current situations; and

■ feelings, attitudes and expectations toward the organisation concerned rather than the issue in hand (Bowie 1989).

'Criminal' violence is manifested in pursuit of criminal aims.

The expression of violence takes many forms, ranging from physical assault with a weapon, hand or foot, to shouted abuse and threats to shoot. Associated violence includes damage to property—breaking office signs, slamming doors, breaking glass.

REDUCTION

The issue of violence in society is massive and identification of causal factors, development of macro level policies and programs for prevention and control are time-consuming, their implementation difficult and their efficacy doubtful.

Workers faced with workplace aggression require prompt and effective attention to their concerns. How does one address this need? Is there a universal micro-level approach or does each instance require unique treatment?

The short answer is: a little of each. Micro-level approaches to social and physical problems are inevitably situationally determined. Ron Clarke (1983) takes the view that much offending and other nuisance behaviour can be seen not as the product of deeply structured societal flaws but of deliberate choices by individuals. In short, the greater the opportunity to engage in crime and other anti-social behaviour the greater will be the commission of such behaviours. Clarke identifies three strategies for opportunity reduction: surveillance, target hardening and environmental management.

Surveillance refers to controls over the visibility of offending behaviour. Target hardening makes targets less vulnerable, for example locks on doors. Environmental management involves manipulation of social and physical factors to either eliminate or reduce targets of crime. Clarke terms these approaches 'Situational Crime Prevention' (SCP) and each includes both physical and behavioural elements.

Despite situational differences, are there common elements which could be used to tackle aggression toward public contact workers? The answer is a qualified 'yes'. Most aggression inflicted on public contact workers occurs in the course of normal business transactions between workers and aggressors. In the study of such interactions, a flow process is apparent and while it varies in detail from situation to situation, holds for all cases. This process is illustrated at Figure 1.

Figure 1 shows that both aggressor and public contact worker bring to any interaction a range of antecedent experiences and

attitudes. These can include mental illness, private worries or lack of training, and will influence the quality of interaction. Interaction comprises two elements: physical environment and social environment. Both influence the result along a spectrum ranging from satisfactory to unsatisfactory. Identification of these elements, and the characteristics associated with them, enables one to apply selected SCP approaches as applicable. In sum, the problem is reduced to its component parts and direct and indirect protective remedies can be applied to each part.

Having done that, the various measures need to be co-ordinated within the framework of a reduction program; the Department of Social Security's National Counter Training Program is an excellent case in point. This Program is a comprehensively designed customer service program aimed at improved client service and ipso facto reduced client aggression.

Research has been conducted in a number of industries experiencing customer aggression; most has been undertaken by private consultants and has addressed particular facets of the problem, such as counter design or procedures. One study, by London's Tavistock Institute, conducted a comprehensive survey of client aggression in accordance with the conceptual framework presented above. The study's report, *Aggressive Behaviour by Claimants* (Poyner, Webb & Meakin 1988) illustrates both human and physical elements, factors peculiar to the situation studied as well as those, such as service systems, which have more general application.

Different studies necessarily vary but the process flow posited at Figure 1 is common to all. One example of variation is that some interactions between workers and aggressors are brief and impersonal, others are lengthy and involve a considerable degree of intimacy.

FIGURE 1 **Worker—Aggressor Processor Flow**
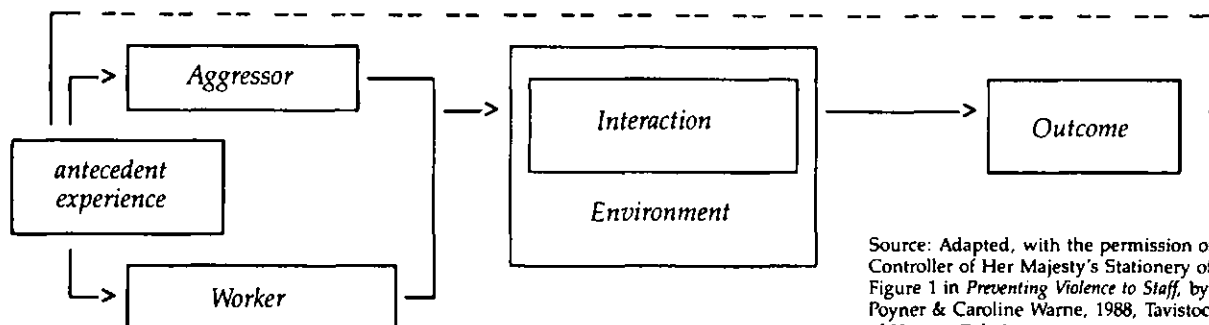
Some work environments are almost totally controlled by workers and their employers—such as casualty wards or legal aid offices—and greater manipulation of the environment is possible in such circumstances.

On the other hand, interactions in taxi cabs, in the streets or in clients' homes or places of business are far less susceptible to manipulation. Buses, trains, ferries, aircraft and the like comprise the middle ground where some environmental control is possible although physical control over clients is not great. A forthcoming publication of the Australian Institute of Criminology entitled 'Protecting Counter/Interviewing Staff from Client Aggression' (Swanton & Webber), includes a comprehensive discussion of built public contact environments and office managers, and those faced with such problems will find it a useful reference.

In addition to normal customer service training, a number of public sector organisations now provide special training to staff required to work with unruly clients, prisons and hospitals being just two areas of such initiative.

WORKERS' CONTRIBUTION TO THEIR OWN VICTIMISATION

It is unrealistic to assume that all public contact workers are the innocent victims of client aggression. Relevant to our present purpose is the contribution service purpose is the contribution service workers make to their own victimisation through poor interpersonal skills and poor service.

A few fortunate souls are intuitively good communicators, they are innately sensitive to the moods and needs of others and operate to satisfy them. For most of us, and in particular workers dealing with stressed clients or having to enforce unpopular policies, natural ability is insufficient. Training is needed to ensure inter-personal contacts are both controlled and well conducted. To put a client at ease and promote a productive atmosphere are skills which need to be taught, and all service agencies must address this need. A few have done so with great competence, others with modest success. Many have not.

In addition to managing interactions effectively, service workers must be able to detect cues of impending violence and to adjust their strategies accordingly. Remedial and safety procedures need to be developed by management, in consultation with staff, and then addressed in training packages. Large organisations are often able to fund substantial training programs but smaller organisations need to cut their cloth according to their respective budgets, network with others similarly placed, buy space in a larger organisation's training program or hire the necessary expertise.

A principal purpose of training packages is to ensure public contact workers are sufficiently equipped with product or service knowledge to satisfy clients. Poorly trained and uninformed workers will irritate customers, quite apart from the issue of employer liability if incorrect advice is given.

Antecedent experiences or conditions may result in irritating behaviour by a service provider which is likely to aggravate clients and cause aggression. For example, a contact worker who is unwell may treat a client impolitely without meaning to. This behaviour, especially in combination with other factors—delays or uncomfortable seating—can lead to aggressive client reaction. Service workers with a heavy case load are sometimes reduced to irritability themselves causing a reciprocal response from clients. Supervisors should ensure over-taxed workers are rotated or relieved.

An important factor determining the behaviour of public contact workers is their level of commitment to customer service. Without doubt, some public contact workers lack or lose commitment in the face of continuing public rudeness or apathy. Workers such as bus conductors and taxi drivers, for example, find it difficult to remain positively committed to the ideal of client service in the face of constant disincentives. Managements need to bear this in mind when planning staff development programs.

There are numerous instances of service worker insensitivity to clients' needs. A recent example involved doctors and nursing staff servicing day patients. Patients were wheeled one by one into a treatment room for a procedure which was unpleasant and

upsetting for patients. Throughout the entire process members of the medical team conversed between themselves in loud voices, treating their patients as inanimate objects. This was accompanied by a good deal of laughter and instruments being placed in metal receptacles with unnecessary noise. This lack of sensitivity towards clients easily develops over time in the absence of high customer service commitment and quality control. The point is particularly valid in those vocations whose clients are at great disadvantage vis-a-vis those who service them.

Although many public contact workers are assaulted through no fault of their own, the fact remains that a substantial proportion of client aggression can be avoided through sound practices and training.

INSTANCES OF CLIENT AGGRESSION

Public contact workers interact with their constituencies in a wide variety of contexts: post office counter clerks, welfare workers, police officers, train guards, nurses and so on. As most of these industries and jobs have not been studied from an aggression perspective it is difficult to make firm statements about them. However, it is possible to comment in a general way on a number of occupations in the hope of gaining a broader understanding of the problems involved.

Flight attendants

Data have not been systematically collected in respect of aggression against flight attendants but some dimensions of the problem are known. Sexual harassment appears to be substantial in the industry with more than one-half of cabin attendants claiming to have been sexually harassed according to a study conducted by Flinders University (Williams 1989).

Non-sexual harassment is also common. Some air passengers are acutely aware of time and aggression is not unusual under conditions of time anxiety. One matter which has created a noticeable increase in passenger aggression has been the recent emphasis on cabin baggage limits.

Refusal by cabin attendants to permit oversized brief cases to be taken on board can mean lost working time in-flight and up to 20 minutes delay at the luggage carousel at destination. Thus, passenger irritation at having baggage rejected can be severe. Consideration could be given inter alia to reducing passenger irritation by designing alternative provisions less inconveniencing to passengers.

One aspect of aggression, the misbehaviour of large social groups, particularly footballers, aboard aircraft has been solved by refusing future business from such groups. But, occasional assaults, oral abuse and threats are by no means unknown to flight attendants.

Teachers

According to sources within the profession, secondary school teachers are resigned to oral aggression from students; such behaviour is accepted as an occupational hazard. Other sources suggest great variations exist from school to school. The incidence of more serious aggression toward teachers is not numerically large but is nevertheless cause for concern. Some teachers have lost their sense of vocation as a result of the aggression they experience. The situation has reached the stage where some teaching services prescribe procedures for dealing with student aggression. Apart from students themselves, teachers may suffer at the hands of parents, and youths who enter schools to harass both students and teachers. In addition, teachers at special schools occasionally face problems of physical violence from their charges.

There is a widespread perception among teachers that aggression in the classroom is increasing and is in part the result of the influence of children's television programs. Under-reporting of incidents by teachers is considered a serious barrier to improved understanding of the problem.

Hospital Staff

Hospitals face considerable workplace violence, due in part to the number of patients suffering altered states of consciousness. Sexual assaults and robberies associated with staff accommodation and car parks are common. One 1988 study monitored 30 hospitals

in New South Wales where 660 assaults were recorded. Just over 10 per cent of those assaults were classified as aggravated, a rate considerably higher than that in the community even without taking into account the under-reporting that inevitably occurs in such collections (Hosplan 1989).

A useful approach to prevention and control of violence and other objectionable behaviour in hospitals is 'Hospital Watch'. When one group of 15 hospitals supported Hospital Watch, which essentially consisted of lectures to staff, an 11 per cent reduction in reported offences and nuisances overall resulted.

Also in the health field, male ambulance officers in the Central Ambulance District of New South Wales are assaulted on average once every four years and female officers once every two years (Field 1988).

Police

Police officers, by virtue of their role in regulating public behaviour, are the most assaulted of all occupational groups. All states now collect statistics and for the period 1976-1985, for example, no statistically significant increases were noted (Swanton & Walker forthcoming) but more recent data from New South Wales suggests a current increase. It is always difficult to assess the extent reporting systems themselves affect data as distinct from increases resulting from societal change or changes in police enforcement policies and styles. Thus, it is difficult to conclude that a true increase in assaults on police is occurring but, it is possible to assert that the problem is substantial in all jurisdictions and that the situation is not improving.

What can police do about this increase? Two broad strategies suggest themselves. First, more detailed research is necessary to improve understanding of the social context of assaults on police and the conditions under which they principally occur. Second, armed with such advice, officer survival specialists should develop appropriately tailored remedial programs. It has been traditional for police to emphasise physical disincentives to assaults inflicted on them, but it is now apparent police are different from other public contact workers only in degree. Far

greater emphasis should be paid to improving interpersonal skills and developing officers' capacities to interpret cues of excitability and impending violence together with techniques for converting that knowledge into non-physical responses.

Aggressors

So much for the victims of aggressions and environments in which aggression occur; but, what about the aggressors themselves? Aggressors fall into four basic categories:

■ mentally deranged and/or suffering altered states of consciousness, such as intoxicated persons;

■ people whose irritation reaches a level where they become aggressive;

■ people who use aggression to achieve their needs; and

■ professional criminals.

Current mental health policies emphasise treatment in the community rather than involuntary hospitalisation. This policy is said to result in concentrations of potentially unstable persons in the vicinity of consultants' chambers, for example. A small proportion of psychiatric patients pose a problem to shop and other counter staff of businesses in the areas in which they congregate as they are generally not susceptible to reasoning and, in small premises, can be difficult to control.

Rational persons are an entirely different proposition. The great majority of such persons respond positively to courteous treatment and comfortable conditions. For the most part, expressions of aggression by rational persons are the result of antecedent problems—debt, grief or marital strife—which are triggered by deficiencies of public contact staff or the physical environment. It is possible to reduce aggression from such persons by the adoption of sound staff development policies.

Persons employing aggression to satisfy their needs represent a particularly interesting group in terms of prevention. Although improved interpersonal skills among service providers will help reduce the probability of violence among some such persons, counter measures also need to emphasise appropriate modifications of the

built environment and sound procedures.

Criminals present yet another category of aggressor. Their behaviours are susceptible to situational crime prevention responses, such as target hardening. Offices and agencies subjected to armed robbers, demonstrators, terrorists or such like need to be protected by appropriate technology, access controls and procedures. Publicity advising the existence of such defences in premises and stating the probability of arrest should they be attacked, does increase offenders' perception of risk. Successes achieved in countering robberies in financial institutions reflect most creditably upon situational crime prevention perspectives and measures.

CONCLUSION

Aggression toward public contact workers by clients, customers and others represents a substantial but largely unquantified social problem; there is a perception in some industries and organisations that client aggression is growing. Broad, global influences are operating to create greater levels of aggression in contemporary society generally and this is manifest in reduced relations between public contact workers and clients, as well as in other situations. However, short-term solutions are realistically confined to situationally determined analysis, whether in aircraft or school rooms.

A battery of counter measures, direct and indirect, are available and are most fruitfully directed to the following areas:

■ improving workers' job skills;

■ improving workers' capacities to interact effectively with clients; and

■ manipulating physical environments in which worker/client interactions occur.

Scope for such situationally determined crime prevention measures varies greatly according to industry and location. Management and staff need to place maximum effort on commitment to and improvement of customer service, in particular, skills necessary to ensure pleasant and productive interpersonal relations and dedication to excellence.

Managements too often only address worker protection issues in response to staff complaints. The phenomenon of workplace violence is now so apparent in service industries and organisations, however, that it should be routinely incorporated in occupational health and safety programs, thereby becoming an integral part of personnel administration. A few large service oriented government agencies are now addressing the problem realistically and effectively but most bodies, public and private, still have a great deal to do in order to reduce the amount of violence inflicted on public contact workers.

REFERENCES

Bowie, Vaughan 1989, *Coping with Violence*, Karibuni Press, Sydney.

Clarke, R.V. 1983, 'Situational Crime Prevention: The Theoretical Bases and Practical Scope', in *Crime and Justice: An Annual Review of Research*, eds M. Tonry & N. Morris, University of Chicago Press, Chicago, IL, pp. 225-56.

Field, Graham 1988, *A Study on the Increase in Violence in the Sydney Metropolitan Area with Particular Reference to the Incidence of Stabbings and Shootings and the Consequent Threat to Safety on NSW Ambulance Officers*, Central District Ambulance, Sydney.

Hosplan, Security Advisory Group 1989, *Crime in Health Care Facilities: A Comparative Study*, NSW Hospitals Planning Advisory Centre, Sydney.

Poyner, Barry; Webb, Barry & Meakin, Robin 1988, *Aggressive Behaviour by Claimants*, Tavistock Institute, London.

Swanton, Bruce & Walker, John (forthcoming), 'Police Employee Health', Australian Institute of Criminology, Canberra.

Swanton, Bruce & Webber, Daryl (forthcoming), 'Protecting Counter/Interviewing Staff from Client Aggression', Australian Institute of Criminology, Canberra.

Williams, Claire 1989, 'Flight Attendant Survey Results', *Aerien*, vol. 2, no. 1, Mar.