

MSW STUDENTS' KNOWLEDGE, SKILL AND THE APPLICATION
OF DE-ESCALATING TECHNIQUES TO REDUCE VIOLENT SITUATIONS
IN THE WORK-PLACE

A Project

Presented to the faculty of the Division of Social Work
California State University, Sacramento

Submitted in partial satisfaction of
the requirements for the degree of

MASTER OF SOCIAL WORK

by

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SPRING
2018

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Abstract
of
MSW STUDENTS' KNOWLEDGE, SKILL, AND THE APPLICATION
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Ramona Vilceanu

This study examined the relationship between Master of Social Work (MSW) students' knowledge and practice skills and whether they impact their application of de-escalation techniques to reduce violent situations in the work-place. The design of the study is an exploratory, quantitative survey research. A convenience sample of first year MSW students currently enrolled in the program at California State University, Sacramento were selected through the Social Work classes. There were 54 surveys completed. The chi-square tests were approaching significance in the association between the students' knowledge, practice skills and the application of de-escalating techniques and whether this relationship impacts the students' use of the technique. The students reported that they have practice skills in the application of de-escalation techniques and have a

foundation in the knowledge of how to apply the technique in possible violent situations while working with clients. Implications for social work practice are discussed.

_____, Committee Chair
Maria Dinis, Ph.D., M.S.W.

Date

ACKNOWLEDGEMENTS

First and foremost, I'd like to thank God for giving me the strength and opportunity to come this far in both my life and education. He put so many special people in my life that love and have supported me all the way in this journey. God is my Savior and my hope, and I would not have been able to do this without His blessing.

I am especially grateful and thankful for the support of my husband Stelian, who pushed me to pursue a master's degree in social work. Thank you Steli for your hard work to support our family financially and pay for my tuition! I absolutely could not have completed my degree without your support. Additionally, I want to give my gratitude to my children Anamaria, Alexandra, and Paul for being patient with me when I felt overwhelmed by my schedule and I hope that my hard work will serve as an example for all three of you to pursue higher education too.

In addition, I would like to offer my sincere gratitude to Dr. Maria Dinis for all her help, patience, guidance, and speedy feedback on drafts. I could not have secured a better advisor for my project.

I also owe a huge amount of thanks to David Reynolds, the Writing Resource Specialist at the Social Work Department for giving me encouragement and guidance throughout this project. I absolutely could not have completed it without his editing and support.

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Chapter 1

INTRODUCTION

In this chapter, the purpose of this study will be introduced as well as the background of the problem. Additionally, the research question and the theoretical framework used in understanding the problem presented within the study will be addressed. Definitions of terms used throughout the project will be identified. Lastly, assumptions, justifications, and delimitations will be discussed, and a summarization of the chapter will follow, addressing what will be discussed in the following four chapters.

Every day, social workers across the nation serve the most vulnerable members in our communities through mental health services systems for both children, and adults. After police officers, social workers are most at risk for being victims of client violence at work (Newhill, 1995). Social workers have been found to be eight times more likely to experience physical assault perpetrated against them by their clients than any other average worker (Budd, 1999). It is in this context that few social work students know that when they enter the social work profession they may be targets of violence perpetrated against them by their clients in the work place. This violence against social workers may negatively affect both the workers' ability to effectively deliver services and their commitment to the social work profession (Brockmann, 2002). Concerns relating to how violence from service-users can negatively affect the social workers' lives and work performance in the delivery of services have been raised by several authors (Boyas, Wind, & Ruiz, 2013; Enosh, Tzafirir, & Gur, 2013; Farmer & Owen, 1998; Littlechild, 1995).

According to the National Association of Social Workers (NASW) (2013), guidelines for social worker safety in the workplace states that workers should be “well trained in the use of their agency’s risk assessment instrument and supervised to ensure consistency in practice” (p. 18). Therefore, without awareness of the issue of violence, proper training, and supervisory support, MSW students at California State University, Sacramento (CSUS) may find themselves responding to potentially violent situations in ways that might escalate the client’s aggression even more, which can put both their life and their client’s life at risk.

The researcher interest in studying the knowledge, skills, and application of de-escalation techniques to reduce violent situations in the work-place stems from her own internship experiences working with clients that were impacted by mental health problems, drug use, and the Child Welfare System. Research in this area will further advance awareness about safety that may build a safer work climate for MSW students. Furthermore, this study may result in the development of trainings and/or academic courses on de-escalation techniques at CSUS.

Background of the Problem

Social work can be a dangerous profession. In Massachusetts between 2008 and 2013, three social workers lost their lives because of workplace violence (Zelnick et al., 2013). According to Kelly (2010):

In the past few years alone, we have witnessed the fatal stabbing of a clinical social worker in Boston, the deadly beating of a social service aide in Kentucky, the sexual assault and murder of a social worker in West Virginia, the shooting of

a clinical social worker and Navy Commander at a mental health clinic in Baghdad and the brutal slaying of social worker Teri Zenner in Kansas. These are only a few of the murders of our colleagues, which, along with numerous assaults and threats of violence, paint a troubling picture for the profession. (para. #4)

Social workers enter their profession, which involves risky situations without proper safety training because safety is not a topic covered in most social work curriculum (Kelly). The United States Department of Labor, Occupational Safety and Health Administration (OSHA) (2016), reported that, per Bureau of Labor Statistics (BLS), in 2013, 27 out of every 100 fatalities in health care and social service settings were due to assaults and violent acts perpetrated by clients against workers. In addition, BLS reported that between 2011 and 2013 there were between 23,540 and 25,630 workplace assaults annually, with 70 % to 74% occurring in healthcare and social services settings (as cited in OSHA).

Furthermore, a study conducted in 40 Massachusetts Social Service Agencies by Zelnick et al., (2013) showed that 2,627 (29 percent) clinical and 6,395 (71 percent) direct care staff experienced 1,049 incidents of violence, either physical assaults or verbal threats from their clients. The rates of physical assault or verbal threat against those workers were comparable to 11 out of 100 per year in older-adult social services settings and 12 out of 100 per year in non-older adult social services settings. Within the social work profession, institutional mental health and child welfare social workers have been found to be most at risk for becoming a victim of violence (Jayaratne, Croxon, & Mattison, 2004; Zelnick et al.).

Aggressive client behavior has negative long term effects on social workers. These negative consequences affect the workers' work, family, and social lives, and result in helplessness, professional doubts, posttraumatic symptoms, and somatic effects. In addition, workers who were exposed to client violence reported difficulty functioning at work, resulting in low performance, longer stays away from work, and high job turnover (Enosh, Tzafrir, & Gur, 2013). Work-related violence against social workers occurs for multiple reasons. First, workers are exposed to violence because they work with mandated clients that have a history of multiple issues such as mental illness, domestic violence, and substance abuse. Second, workers visit their clients in neighborhoods that are considered dangerous. Third, these workers' priority is the client's physical and emotional safety, and thus they often ignore the fact that they may become victims of violence themselves (Newhill, 1995; Newhill & Wexler, 1997; Zimmerman, 2016). Studies such as the aforementioned one explain the prevalence of this social problem which is alarming for the social work profession that is so important in our society. Understanding the negative impact of work-related violence against social workers can raise awareness about safety that may build a safer work climate for MSW students in their field placements.

Statement of Research Problem

The National Association of Social Workers (NASW) (2006) reported that 44% of the 5,000 social workers participating in a study on work-related violence experienced regular personal safety issues in their place of employment, and 30% of those social workers did not feel like their employers adequately addressed the issue. Work-related

violence is prevalent in the social work profession and affects not only the workers' personal and professional lives, but also their clients, and their communities (Kelly, 2010). Although the impacts of work-related violence have been studied for some time, the focus on addressing trainings to prevent and de-escalate violence have not been addressed. This research will study the relationship between the knowledge and skills of MSW students and their ability to apply de-escalation techniques to possibly reduce violent situations. It will also explore whether the current knowledge and skills of MSW students are effective, and examine the need for trainings to better apply the de-escalation techniques in potentially violent situations.

Purpose of the Study

The primary purpose of this research is to examine the relationship between knowledge and skills of MSW students and the application of de-escalation techniques to reduce violent situations in the work-place. The secondary purpose of this research is to study whether the current knowledge and skills of MSW students are effective and to examine if there is a need for trainings to better apply the de-escalation techniques in potentially violent situations. This research can then lead to recommendations regarding the development of trainings and/or academic course work on de-escalation techniques at CSUS.

Research Question

This study investigates the following research question: What is the MSW students' knowledge, skill, and the application of de-escalation techniques to reduce violent situations in the work-place?

Theoretical Framework

The current study utilizes crisis intervention theory. The subsections below will explain crisis intervention theory followed by a description of how this theory can be applied to the current research study. Theories are important to assist in setting a frame of reference or perspective. Crisis Intervention Theory (CIT) is utilized to understand the relationship between knowledge, skills, and the application of de-escalation techniques of MSW students to reduce potentially violent situations in the work-place.

Crisis Intervention Theory

Jackson-Cherry and Erford (2013) claim that CIT can be attributed to Lindemann, whose work began in response to the tragic Cocoanut Grove nightclub fire in Boston in 1942 in which 493 people died. Although Lindemann is regarded as the founder of CIT, Caplan and his colleagues provided the foundation for the development of CIT (Poal, 1990). Caplan's interest in crisis resulted from working with immigrant families after World War II. According to Caplan, people are experiencing crisis when they are facing an obstacle to an important life goal that are too great to be overcome for a time, using customary methods of problem-solving. "A period of disorganization ensues, a period of upset, during which many abortive attempts at solution are made" (Jackson-Cherry & Erford, p. 3).

Caplan was the first to describe the main stages of crisis reactions and, according to him, those reactions follow four distinct phases (Poal, 1990). In the first phase an individual is confronted by a problem that is a threat to his condition of equilibrium to which the person responds to feelings of increased stress by trying his usual problem-

solving skill to restore his emotional balance. The second phase is described as a rise in tension due to failure of the usual problem-solving skill. In this case, the person's functioning becomes distorted and the individual feels ineffectual. In the third phase, because the individual continues to fail, there is a rise in tension which acts as stimuli for the action of emergency measures. Therefore, the individual may resign themselves to the problem or may find a solution to the problem. In the last stage, if the problem continues, the tension may increase to a breaking point which may result in the individual having a breakdown in his mental and social functioning (Poal).

Hill has followed Lindemann's and Caplan's approach to crisis intervention theory and made important contributions to the theory and practice of crisis intervention by being the first to conceptualize the crisis theory as it applies to families (Jackson-Cherry & Erford, 2013). Hill's application of the theory postulated the ABC-X Model of Crisis, which emphasizes the interaction of (A) an event or situation, (B) resources, and (C) the perception of the event. The crisis (X) is a state of the degree of crisis of low or high stress (Jackson-Cherry & Erford). However, a few scholars expanded Hill's model to a Double ABC-X Model of Crisis. The contribution of this double model was introduced by McCubbin and Patterson and it was based on the systems orientation which assumes that systems are naturally changing and become more complex over time (Jackson-Cherry & Erford).

CIT is an emergency psychological intervention that helps individuals regain equilibrium when faced with a serious stressor in their lives with which they have no prior experience (Walsh, 2013). These traumatic events may lead to compassion fatigue

and emotional exhaustion (Cacciatore et al., 2011). CIT has a unique use in the social work profession as it is used in a wide variety of crises interventions including violent behavior, in child welfare services, schools, prisons, hospitals, residential treatment centers, and mental health facilities (Gingerich & Eisengart, 2000). Additionally, CIT has been utilized by social workers as a model of treatment by using intervention strategies from various practice interventions including ego psychology, behavioral, cognitive, structural family, and solution-focused therapies (Walsh). CIT is also compatible with social work practice because it explores solution focused intervention by shifting the focus of intervention from the problem to a solution, or exceptions to the problem (Roberts, 2009). Therefore, CIT can be viewed as a form of preventive intervention because it attempts to address ongoing problems before they result in serious impairment.

Application of Crisis Intervention Theory

Crisis Intervention Theory (CIT) is applicable to this study because it recognizes that a crisis such as work-related violence against MSW students, through not a planned event, can happen at the spur of the moment while working with clients. Additionally, CIT has been utilized as a model of treatment regarding goal-oriented planning intended for application when an individual is deeply affected by events that trigger crises (e.g. violent situations), with the objective to avoid numerous dichotomies between persons and traumatic events that can lead individuals to compassion fatigue and emotional exhaustion. CIT can be utilized to recognize that when an individual experiences stressor events in their life (e.g. violence) it can affect human functioning (e.g. social and family life). A crisis is a “situation in which there is a precipitating stressor event, a perception

of that event that leads to distress, and diminished functioning when the distress is not relieved by familiar coping resources” (Jackson-Cherry & Erford, 2013). For example, a student in a possibly violent situation is an unexpected crisis that may go beyond the limits of their resources and coping mechanisms, and one in which each student reacts differently. In this situation, the student’s professional and private lives are invaded by the crisis event, and the student may feel threatened and possibly in danger of losing their life. Therefore, CIT will be used in this research to gain a better understanding of the relationship between knowledge, skills and the application of de-escalation techniques of MSW students to reduce potentially violent situations in the work-place.

Through the application of CIT methods, students can restore their self-determination and self-confidence, and find solutions to regain equilibrium in their life. In this case, according to Lindemann’s process of crisis intervention, the students facing a crisis of distress (e.g. violence against them) should: (1) accept the sadness of the problem; (2) review the relationship with the perpetrator and become familiar with the alterations of own modes of emotional release; (3) express sadness; (4) find an acceptable formulation for future relations to the perpetrator; and (5) verbalize feelings of guilt and find persons around to use as primers for the acquisition of a new model of behavior (Poal, 1990). By focusing on solutions, students can identify within themselves strengths and resources with the goal of using verbal de-escalation of violence techniques, including, but not limited to, listening, staying calm and in control, and the use of positive language. Regarding this research study, the crisis theory is used to identify whether the current knowledge and skills of de-escalation techniques of MSW students

are effective, and to examine if there is a need for trainings to better apply the de-escalation techniques in potentially violent situations.

Definition of Terms

The following terms are applied within this study and are considered important regarding this research topic. The terms will be defined and briefly described so that the reader may understand and know how they are used throughout this study.

Violence Against Social Workers. Refers to “an incident in which a helping professional is harassed, threatened, or physically assaulted by a client in circumstances emerging from the course of the professional work with the client” (Macdonald & Sirotich, 2001, p. 109).

Verbal Abuse. Refers to “offensive language, yelling or screaming with the intent to offend or frighten you. It can include threats or abuse over the phone, but excludes sexual harassment and sexual assault” (Koritsas, Coles, & Boyle, 2010, p.260).

Intimidation. Refers to “purposely threatening, following you, using gestures to purposely offend or frighten you” (Koritsas, Coles, & Boyle, p.260).

Physical Abuse. Refers to “physically attacking you, or attempting to attack you. It includes behaviors such as punching, slapping, kicking or using a weapon or other object with the intent to cause bodily harm” (Koritsas, Coles, & Boyle, p.260).

De-Escalation. According to the National Institute for Health and Care Excellence’s guidelines on management of violence de-escalation is described as “talking with an angry or agitated service user in such a way that violence is averted and the

person regains a sense of calm and self-control” (as cited by Spencer & Johnson, 2016, p. 2).

Solution-Focused. Short-term, future-focused, and goal-directed approach that emphasizes the importance of searching for solutions rather than focusing on problems (Trepper, Dolan, McCollum, & Nelson, 2006).

Assumptions

There are several assumptions made regarding this research study: (1) social workers are more likely to experience work-related violence perpetrated against them by clients than any other average worker due to their mission and intent to provide services and safety, permanency, and well-being for all service-users; (2) few social work students know that when they enter the social work profession they may be targets of violence perpetrated against them by their clients in the work place; and (3) social work students enter a profession which involves risky situations without proper safety training because safety may not be a topic covered in the social work school’s curriculum.

Justification

The goals of this research include acquiring a deeper understanding of how knowledge and skills impact the application of de-escalation techniques by Master of Social Work (MSW) students at California State University, Sacramento to reduce potentially violent situations in the work-place. Another goal of this study is to examine whether there is a need for trainings in how to better apply the de-escalation techniques. The topic of work-related violence perpetrated by clients against social workers remains significant to the field of social work on two primary levels. First, research indicates that

social workers choose their profession because they believe that serving others is a worthy cause. However, because social workers work with the most vulnerable and at-risk populations that suffer from poverty, mental illnesses, and alcohol and/or drug abuse they are often putting themselves in potentially violent situations (Kelly, 2010). Second, other research shows that social workers are more likely to experience physical assault perpetrated against them by their clients than any other average worker (Budd, 1999; Boyas, Wind, & Ruiz, 2013; Enosh, Tzafir, & Gur, 2013; Newhill, 1995). Without the knowledge and skills to apply de-escalation techniques, MSW students at California State University, Sacramento may find themselves responding to potentially violent situations in ways that might escalate their client's aggression, which can put both their life and their client's life at risk.

Under the current National Association of Social Workers (NASW, 2013) guidelines, social workers should be well trained in using risk assessment instruments for safety in the workplace and they should understand the importance of their own safety while working. Per the NASW Code of Ethics (2017) "social workers continually strive to increase their professional knowledge and skills and to apply them in practice. Social workers should aspire to contribute to the knowledge base of the profession" (paragraph 9). Recognition of the risk factors of work-related violence against social workers by their clients will raise awareness about the importance of having knowledge and skills in the application of de-escalation techniques. This in turn may lead to safer field-placements for students, additional trainings, and possibly a de-escalation of violent situations course elective for students at California State University, Sacramento (CSUS).

Delimitations

This research project does not include qualitative data to further explore in-depth the students' skills, knowledge, and their application of de-escalation techniques in possibly violent situations. Additionally, the data collected is limited to only first-year Master of Social Work (MSW) students currently enrolled in the program at California State University, Sacramento (CSUS) who were recruited through the Social Work 202, 235A, and 250 classes. Lastly, the researcher created the survey instrument, and further testing would be needed to improve the instrument's reliability and validity.

Summary

In this chapter, an introduction of the study was presented that included the background of the problem, a statement of the problem, the purpose of this study, and the research question. Crisis Intervention Theory as the theoretical framework was discussed, as well as the definitions of terms used. Finally, the assumptions, justification, and delimitations were included. Chapter 2, the review of the literature, will include the historical background of violence against social workers, types of violence perpetrated, impact of violence on social workers, implications for social work education, current strategies for violence prevention, and the gaps in the literature. In Chapter 4 the results of the study will be discussed. Finally, in Chapter 5 the summary of research findings is presented.

Chapter 2

REVIEW OF THE LITERATURE

In this chapter, the historic background of the problem is reviewed. Major themes are explored on existing research pertaining to violence perpetrated against social workers by their clients while working in the field. This chapter includes several sections that are divided into themes that are fundamental for the research topic. In the first section, the history of violence against social workers is discussed from a holistic perspective. In the second section, there is an exploration of indicators of client violence against social workers. The third section is a description of types of violence. The fourth section explores the impact of violence on social workers, and the fifth section explains the implications for social work education. The sixth section focuses on the current strategies for violence prevention. Finally, the author will present gaps in the existing literature and explain how this study may contribute to the body of knowledge regarding work-related violence perpetrated against social workers by their clients.

History of Violence Against Social Workers

Few people enter the social work profession realizing that they may be targets of assault by the people they wish to help. Yet, both threats of violence and actual assaults against social workers are real and frequent. According to Stierlin (as cited in Bernstein, 1981) the first known case of a client fatally assaulting a helping professional in a mental health setting occurred in 1849. The second fatal assault perpetrated against a health professional was reported in 1886. Both fatal assaults were reported in Germany. In 1889,

Laehr (as cited in Bernstein, 1981) reported that seven health professionals had been killed by their clients in other countries.

Ever since 1889 when Jane Adams and her friend Ellen Gates Starr opened the settlement house Hull House to provide social work services to women, working-class immigrants, and the poor (Knight, 2005), social workers have been at some risk of experiencing violence perpetrated against them by their clients. It was not until the later part of the 20th century that the literature revealed the first study about violence perpetrated by clients against mental health professionals including social workers. Whitman, Armao and Dent (1976) found that out of 101 mental health workers participating in the research, 24 experienced an actual or attempted attack, and 74 percent had been physically attacked in their current job. However, most of the research produced during this time was focused on professional fields other than social work, such as psychiatry (Newhill & Wexler, 1997). As early as 1978, psychiatric hospitals were responding to client violence by training staff and adopting policies that mandated reporting of violent incidents (Rey, 1996).

The literature on violence against social workers is only recent, with the first mention after a fatal stabbing of a social worker by a client in the United Kingdom in 1978 (Crane, 1986). Since then, many social workers have reported work-related violence perpetrated by clients against them. Rowett (1986) found in his national survey on violence against social workers that one worker in four had experienced assault over a five-year period. Furthermore, a study of assaults on social work staff in Scotland in 1990 found that over a period of 53 working days the social workers reported 131 incidents of

verbal abuse and 14 incidents of moderate physical aggression. These reported incidences included 10 acts of actual physical assault with workers being kicked and punch. The cumulative percentage for this study over a two-week period gave a rate of 19.3 incidents per social worker (Leadbetter, 1993).

In 1997, the National Association of Social Workers (NASW) website listed names of social workers that paid with their life while helping their clients. The list shows that violence against social workers perpetrated by clients is real, and it may result in fatalities. For example, Phyllis Caslin and Florence Pike, both were shot while trying to collect child support from a client in New York in 1992 (NYT, 1992). In 2004, social worker Greg Gaul was shot by a client in Iowa (USA Today, 2014). According to NASW, Californial News (2015) Lara Sobel was fatally shoot by a client. She was a social worker with the Department for Children and Families in Vermont.

Shockency (1999) suggested that the “job duties of social workers should be compared to law officers, in that they both encounter unpredictable individuals that could do bodily harm or death to them” (p. 20). After police officers, social workers are most at risk for being victims of client violence at work (Newhill, 1995). These workers are in the trenches with children, youth, adults, and families through some of the most dark and difficult seasons of their lives. Social workers go alone into neighborhoods that police would only attempt armed and with a partner (Newhill & Wexler, 1997), while social workers rely only on their education for their safety (Shockency).

Client violence towards social workers is not an anomaly by any means (Spencer & Munch, 2003), and there has been an increased interest in the issue of work-related

violence perpetrated by clients against social workers (Littlechild, 1995). Per Ringstad (2005), past major national studies on violence against social workers found that an estimated 42% to 86% of workers had experienced verbal abuse. These studies also estimate that up to 30% of workers reported physical assault, and 92% had experienced being threatened (Ringstad, 2009). Ringstad also reported that 86% of the one thousand social workers responding to a survey said that they had experienced violence at some point in their career. In addition, in one psychiatric emergency service the workers reported 99 of 1,806 patients as either being or potentially being violent (Tishler, Gordon, & Meyer, 2000). A survey of 300 workers in a mental health facility found that 81 percent of practitioners experienced at least one incident of client physical attack, verbal assault, or other type of violence (Tishler, Gordon, & Meyer). A review of the National Institute for Social Work studies covering 1,031 social workers in England, Scotland, and Northern Ireland found that more than 60 percent of social services workers had experienced an actual or attempted attack at least once in their careers and 37 percent had been physically attacked in their current job (Brockman & McLean, 2000).

Within the field of social work, child and family social workers are found to be some of the most at risk for client violence (Robson, Cossar, & Quayle, 2014). In addition, the national prevalence rates for social workers that had experienced work related violence in our country is high. Between 65% and 86% of social workers have experienced violence by a client during their employment (Ringstad, 2009). Violence is socially constructed and is viewed and responded to differently in different contexts. While there are some primary predictors that could contribute to the prevalence of

violence against social workers, what is viewed as violence may be influenced by the work culture itself and by what social workers perceive to be their role (Brockmann, 2002).

Indicators of Client Violence

Findings of many studies suggest a link between tasks carried out by social workers and the risk of violence. Thus, evidence notes that field social workers are at higher risk of being assaulted than those working in an office based setting. In addition, evidence suggests that male social workers are at higher risk of physical violence than their female colleagues (Brockmann, 2002). In terms of predictability, “the greatest likelihood of being threatened or attacked comes from those with a history of violence” (Bernstein, 1981, p. 546). When studying violence in the field of social work there are a few common indicators that can be seen throughout past research, such as the nature of the job, client mental health issues, and financial constraints and budget cuts. The ability to evaluate indicators of violent action by clients is related to the level of knowledge of the worker within his or her specialty (Bilici, Sercan, & Tufan, 2013).

The first indicator of violence is simply the nature of the social work profession. For example, the field of child welfare is one that consists of unwanted and mandated services, as well as a great intrusion into the private lives of families (Littlechild, 2005). The nature of the work is sensitive and can be triggering, especially when it comes to the removal of children from homes, which can lead to anger and aggression (Littlechild, 1995). The role of power that the social worker plays in child welfare can also be a provoker of violence. The clients may feel a loss of control and power, which leads to

frustration and anger. There is also a sense of ambiguity in the role that the social worker plays, which can frustrate families. On one hand, the social worker says that their role is to help the family, but, on the other hand, the social worker may act in a way that the family does not see as helpful (Littlechild).

Another detail that is considered part of the nature of the job is the location where work with clients is conducted. Most of the client services are delivered to the client's home, and that may be in an unsafe neighborhood. Social workers spend a significant amount of time in unsafe neighborhoods that are infested with substance abuse and gang involvement (Spencer & Munch, 2003). However, other studies found that physical violence is at a much higher level for residential social workers than for field social workers. Brockmann and McLean (2000) and Brown et al. (1986) found that there is an association of high risk of violence against social workers between certain settings and the client population served. For example, the National Institute for Social Work's Workforce study found that social workers working in residential settings are at 67 percent risk of violent acts perpetrated against them by clients as compared with 23 percent of field social workers (Brockmann, 2002).

In addition, there is ample evidence that a high risk of violence against social workers is part of the nature of a job that is associated with certain client groups. For example, studies found that social workers working with adults and people with mental health problems are at a higher risk of violent attacks perpetrated against them (Brockmann, 2002). The findings are not always clear as in Brown et al.'s (1986) sample, but social workers working in residential settings encounter the largest group of clients

dealing with mental health problems. Because of different time periods, work settings, indicators of violence, and categorization of workers and clients, the findings of different studies cannot be precisely compared, however, even if estimates vary, they all show that violence perpetrated against social workers is part of the nature of the job (Brockmann).

A second indicator of client violence can be symptoms of schizophrenia and other mental illnesses, non-compliance with psychotropic medication, active drug and alcohol use, weapon ownership, a history of violence or a criminal record, and whether the client is a young male (Littlechild, 2005). These demographics can describe most clients that child welfare social workers work with on a regular basis. Most clients in the child welfare system are also mandated clients, which makes it legally necessary for the social worker to provide services and work closely with these clients. These indicators can lead to many different forms of violence, with the most prevalent being verbal abuse and threatening (Littlechild). Another indicator of violence may be uncovered by exploring the client's history. Clients with a past of severe emotional issues or a history of rejection in childhood such as growing up with the absence of one or both parents, having a chaotic family life, and/or being sexually abused as a child may reveal possible clues of predictive violent-behavior (Bilici, Sercan, & Tufan, 2013). Flannery et al. (2011) found in a study focusing on clients' violent behavior in mental health settings for a period of 20 years, that clients with a history of violence and use of alcohol or other drugs are more frequently aggressive towards the working professionals. According to Bernstein (1981) 123 out of 162 cases of violence perpetrated by clients against the workers were committed by clients that have a history of violence.

The third indicator of violence may be the ongoing financial restraint on local authorities because of budget cuts. Per Leadbetter (1993), confrontation and disparity levels between social workers and clients will become increasingly higher due to major changes in the structure of the welfare system and poverty caused by high levels of unemployment. These budgets cuts resulted in fewer social service agency resources for many clients, and caseloads have risen for workers (Rey, 1994). Furthermore, at a social level, money difficulties due to the recession have created economic insecurity among many clients (Rey). Kinney (1995) and Rey (1996) explain that changes in the structure of the welfare system, economic insecurity, poverty, as well as the decline of traditional cultural institutions, such as the Church and the family predispose clients to even more violent acts. According to Hiratsuka (as cited in Rey, 1996), all these consequences in addition to easy access to guns gives clients access to tools with which to act violently upon their frustrations.

Types of Violence

While there can be many forms of violence, there are a few that are commonly reported by social workers. These types of reported violence include verbal assault, physical assault, or any other event reported by social workers and seen as violent (Munch & Spencer, 2003).

The most prevalent type of violence reported by social workers in many studies is verbal assault (Koritas, Coles, & Boyle, 2010; Kvas & Seljak, 2015; Macdonald & Sirtich, 2009; Ringstad, 2005; Ringstad, 2009). Verbal assault is clearly the most prevalent form of violence experienced by social workers. Macdonald and Sirtich (2009)

found that 87.8% of (n=164) social workers reported that they had personally been verbally harassed. Another study from a western state showed that out of 175 licensed social workers interviewed, 88 percent experienced verbal abuse from clients and 59.6 percent were threatened by a client (Rey, 1996). Tully et al. reported that among social work field instructors at the University of Georgia, 62 percent had been verbally abused (Rey). From 1992 to 1993, 25 incidences of verbal assaults were reported within the New Jersey Division of Youth and Family Services (Scalera, 1995).

Maier (1996) and Nolan et al. (1999) reported that recent studies in our country found that workers in medical emergency rooms and in private practice are at an increased rate of being subjected to verbal threats. Newhill & Wexler (1997) conducted a study using data from a survey of randomly selected National Association of Social Workers (NASW) members and found that 36 percent (N=111) of the children and youth social workers reported being threatened, and 18 percent reported being both threatened and attacked. In 1972, Whitman, Armao, and Dent (1976) conducted research in Ohio on client violence against therapists and found that out of 101 participants in the study, 79 percent of therapists and 81 percent of social worker respondents had been threatened at least one time in their professional career.

Littlechild (2005) reported that in a study of 21 social work respondents all of them had reported to experience at least one incident of verbal aggression against them from their clients. Jayaratne et al. (1996) reported that in a national study 42 percent of social workers have been verbally abused by clients. The author reported that out of 3,000 NASW social workers he examined 1,029 respondents through a national random

sample about their experiences with physical and psychological assaults between social workers and clients (Ringstad, 2005). The results of this study revealed that 86 percent (N=885) experienced psychological aggression, including threats and verbal abuse. These psychological aggressions included insults or swearing, shouts or yelling, stomping away during a disagreement, saying or doing something to spite, threatening to hit or throw something, destroying something that belonged to the worker, calling them fat or ugly, and any other psychological assaults (Ringstad). Furthermore, Ringstad (2009) reported that a study of child protective services (CPS) workers from a county child welfare agency in California found that 70 percent (N=26) indicated they have experienced psychological assault by a client during their career. In addition, it was found that 62 percent (N=23) they have experienced a psychological assault in the preceding year. Research findings suggest that there are more incidents of violence against social workers in the form of verbal abuse than physical assault (Brockmann, 2002).

Another type of violence is physical assault. Bureau of Labor Statistics (BLS) data for 1993 reported that health care and social services workers are at higher risk of incidence of assault injuries than any other fields (as cited in OSHA, 1998). Schultz (as cited in Rey, 1996) reported that in a random sample of 150 social workers in West Virginia, 100 of the respondents reported at least one incident of physical violence. A survey conducted in a western state found that out of 175 licensed social workers interviewed, 23 percent of the respondents were physically assaulted by a client (Rey). Scalera (1995) reported that from 1992 to 1993, 25 incidents of physical assault against social workers were reported. The social workers in this study have been threatened with

“knives and have has scissors thrown at them. They have been punched and kicked by clients” (p. 338). Norris (1990) reported that in a study in two English counties over 60 percent of social worker respondents had experienced actual or attempted attacks by a client.

In a study conducted in Ontario of 164 social workers it was found that 63.5 percent of respondents have been threatened with physical harm (Macdonald & Sirtich, 2009). In addition, the researchers reported that out of 168 social workers’ respondents’ 28.6 percent reported that they have been physically assaulted but not injured and 7.8 percent reported being physically injured by a client (Macdonald & Sirtich). Another study found that 30.2 (N=311) percent of social workers experienced physical assault by clients. These physical assaults include pushing or shoving, throwing something that could hurt, grabbing, punching or hitting, kicking, twisting arms or hair, slapping, and any other physical assault (Ringstad, 2005). Furthermore, Ringstad (2009) reported that 22 percent (N=8) of social workers in a county in California have been experiencing physical assaults by clients.

Other types of violence reported by social workers are sexual harassment, stalking, and physical harassment both with and without injuries (Koritas et al., 2010; Macdonald & Sirotych, 2001; Rey, 1994). According to Littlechild (1997), Phillips et al. (1989), and Sauders (1987), sexual harassment is mostly, but not exclusively an issue for women perpetrated almost entirely by male clients. However, sexual harassment had been found to be far less pronounced in the social work field compared with other working professions (as cited in Brockmann, 2002). In a study (N=21, social workers)

conducted by Littlechild (2005) in England and Finland on the effects of violence by service users against child protection social services, it was found that social workers experienced cars vandalism and one worker was held hostage in a house for a number of hours by the client.

Furthermore, Rey (1996) reported that out of 175 social workers surveyed on their experiences with client violence, 45.3 percent have been harassed via telephone, 47.3 percent had their property stolen by their clients, 19.3 percent had some property damaged, and 17.5 percent had been threatened with a weapon. Even though most violence towards social workers is indirect, there are still extensive consequences to the violence perpetrated (Kvas & Seljak, 2015; Scalera, 1993; Zimmerman, 2016).

According to Littlechild (1995) a study of probation service employees found that female workers are at a 1-in-17 chance of being sexually harassed by clients. In addition, Leadbetter (1993) found in his study on assaults on social work staff that workers are experiencing threats with weapons, and sexual and racial harassment by clients.

Impact of Client Violence Exposure on Social Workers

Research on the nature and extent of violence against social workers became popular in the 1980s, and continues to be studied today as circumstances change and the field evolves. One of the results of this growing interest in work-related violence may be that workers and agencies are realizing the effects that incidences of violence can have on workers.

The cost of violence has a negative effect on our society, as it includes the suffering of the victims and their families, the cost of medical expenses, and the financial

burden for families due to injuries (Newhill, 2003). In 2013, the total cost of medical and work loss because of violence in the United States of America was \$671 billion, of which \$214 billion was the cost for fatal injuries, and \$457 billion was the cost of nonfatal injuries (Center for Disease Control and Prevention, 2016). These figures include injuries of all causes from both intentional and unintentional violence related injuries. This shows that violence results in huge costs that overwhelm our society at all levels including individuals, families, communities, and the government.

Per Johnson (1988), although social workers experiencing violence against them believe they have learned a lot from the assault, in fact most did not learn how to avoid violence in the future. Research typically explored the underlying causes of violence, but did not show how to handle it in the future, and this problem needs to be corrected as client violence can be traumatic and have many negative consequences on both the worker and the field of social work (Johnson). Some of the strongest negative effects on workers personally are high levels of anger, fear, insecurity, anxiety, and a sense of powerlessness (Newhill, 1997; Rey, 1994). These symptoms can cause a negative impact on a worker's psychological well-being and general mental health. Depending on the level of violence experienced, social workers may also experience post-traumatic symptoms such as PTSD (Robson et al., 2014).

Studies have shown that the impact of violence on workers can lead to a general climate of fear and stress in the workplace and much quicker burnout on the job (Rey, 1996). Whether the violence is direct or indirect, there are long term effects that one must live with that may not be worth it to many workers (Zimmerman, 2015). For example,

among workers that have experienced violence perpetrated against them by clients, many fear another act of violence against them in the future. Studies found that 69% of child welfare workers who had experienced violent threats against them were afraid other episodes of violence would occur against them (Criss, 2010).

Client violence also impacts the field of child welfare social work. Studies have shown that the quality of work may deteriorate after an experience with violence, as well as the overall commitment to the field. Around 19% of attacked workers reported that they did not want to return to work and they wished to change jobs. However, not all changes reported were negative. A minority of workers who experienced violence reported feeling a greater commitment to the work and more cohesiveness with their child welfare work community (Newhill & Wexler, 1997). Bilici, Sercan, and Tufan (2013) report that assaults by psychiatric clients cause consequential injuries to the helping professionals including depression and temporary or permanent injury.

In addition, a study of 38 social workers in England revealed that exposure to client violence made them feel surprised and in a state of shock. Some of the workers felt that after they were exposed to client violence they thought about themselves being less competent to help clients (Norris, 1990). All social worker victims “sustained some degree of emotional strain. Many endures serious psychological reactions” (Scalera, 1995, p. 338). Littlechild (2005) reported that in a study of 21 social work respondents on stresses arising from violence a wide variety of negative effects were reported including anxiety and feelings of anger (n=13), fear (n=10), negative effects on working practice (n=9), anger towards client (n=4), shock (n=2), depression (n=1), and physical pain (n=1).

Exposure to violence has also been associated with adverse emotional problems such as self-blame, guilt, and anger about the incident (Littlechild, 1995).

Implications for Social Work Education

Both veteran social workers and social work students could be exposed to violence including physical assault, verbal assault, and harassment (Criss, 2010). An informal survey at the University of Southern California discovered that, among graduated students, violence was one of the most prevalent issues (Star, 1984). It is difficult to measure rates of client violence perpetrated against Master of Social Work (MSW) students because there is no reliability in how questions about violence were asked. In addition, just six studies were conducted in our country on MSW students directly, and they were nonprobability studies conducted in one social work program (Star).

Every day, social workers and social work students across the nation serve the most vulnerable members in our communities through systems such as child welfare and adult and mental health services. Reeser and Wertkin (2001) reported that in a study of 258 accredited social work schools, 42 percent had at least one student verbally assaulted by a client and 13 percent had a student that was physically assaulted. Another study of MSW and BSW students (N=589) found that 27.5 percent (N=223) were exposed to verbal abuse, 14.1 percent (N=84) have been threatened with physical harm, 9.4 percent (N=56) have been threatened with lawsuits, 7.2 percent (N=43) had experienced damage to personal or professional property, and 3.5 percent (N=21) have been physically assaulted (Criss, 2010).

Both undergraduate and graduate social work students are only slightly aware of the possible work-related violence perpetrated by clients against social workers in the field because they are not educated or taught in their class curriculum about the safety risk factors associated with the social work profession (Shockency, 1999). Tully, Kropf, and Price (1993) surveyed 121 social work students at the University of Georgia, Department of Social Work during the 1990-1991 academic year for a study of violence in field placements. Out of the 121 students who participated in the survey, 49 were BSW level and 72 were MSW level. This research found that 26 percent (n = 32) of the students reported to have experienced work-related violence perpetrated against them by clients. Out of the 32 students who experienced violence against them, 74 percent (n = 23) reported that it happened during office visits, 15 percent (n = 5) said it happened during client home visits, 9 percent (n = 3) in other places, and 2 percent (n = 1) outside the practicum setting while on the streets. In addition, this study found that 52 percent (n = 63) of the total students reported that the practicum site lacked policies regarding work-related violence or that they were not properly informed about such policies. Also, 54 percent (n = 65) of students reported that the social work curriculum provided them with limited information about risk factors such as violence in the social work profession (Tully, Kropf, & Price).

Per Shockency (1999) the literature suggests that social workers are abused and can even be killed by their clients. For example, on February 3, 1993, Rebecca Binkowski, a graduate student at Western Michigan University, was stabbed in her car by a mentally ill client, and died before her graduation. She was 25 years old (NASW,

1997). Schools of social work are responsible for their students' wellbeing and safety in their field placements. Schools should inform students about safety policies and possible violent issues should be clearly defined for them. Students should be trained on possible client violence by being "exposed to realistic situations with which they will need to cope without developing paralyzing fear of client violence or early burnout" (Rey, 1994, p. 38). Client violence in the social work profession has been illustrated through many studies, and research recognizes the serious impacts that violence against workers can have, and offers some strategies for agencies on avoiding violence and supporting workers.

Current Strategies for Violence Preventions

Many social workers feel the sole responsibility for the well-being of their client families, which leads to high levels of stress and even compromising of their own personal safety to provide aid (NASW, 2013). This high level of commitment to clients can make it difficult for social workers to grasp that the very clients that they see as victims, could also cause harm. Part of this mentality is fueled by the norms in the field of social work, such as client-centered practice (Spencer & Munch, 2003).

The client-centered perspective in the field of social work is said to have an impact on prioritizing social worker safety in the field. Social workers are often socialized to center their work and behavior around the client's needs, rather than their own. While this is a noble ideology, it also blinds workers when assessing whether a client may become violent and cause harm to them. Social workers expressed feeling fear that their commitment to the field of social work and their clients would be questioned

when expressing concern about their own personal safety. Thus, the client-centered perspective also affects the level of reporting on client violence when it does occur (Spencer & Munch, 2003).

A high percentage of social workers do not report client-violence because they feel like it is part of the job or that they are partly guilty for the violence that has occurred (Macdonald & Sirotich, 2001). In the 1980s, more research became available that addressed the issue of violence in the field of social work, but many of these studies found that there may be a significant number of underreported incidences of client violence against social workers. Due to the lack of reporting on client violence, it can be difficult to understand the extent of the issue in the field of social work (MacDonald & Sirotich).

Most social workers choose this helping profession because they want to help other people in need and they do not anticipate that they could become a victim of client violence, but work-related violence is a reality in the social work practicum (Newhill, 2003). Research found that in reality social workers are sometimes exposed to client violence in their practicum (Criss, 2010). However, social workers at all levels can successfully be trained to deal effectively with client violence (Rey, 1996). Star (1984) suggests that social workers should handle the issue of client violence by protecting themselves before, during, and following a meeting with clients, because prevention should be “the first line of defense against patient assaults” (p. 227). Most research on client violence offers strategies or recommendations to agencies on how to improve worker safety in the field of social work. One current strategy is developing a culture

within agencies of always reporting violence, as well as supporting workers after they experience violence (Littlechild, 1995).

Research suggests that workers are more likely to report violence if they feel like they will have recognition and full support from management staff. Reporting violence is also very important to bring awareness to the issue, and help urge changes to be made at the policy level (Ringstead, 2009). Many authors suggest improving agency policies and safety manuals to include proper protocols, legal protection, and support for workers (Koritsas et al., 2010; Littlechild, 1995; Macdonald & Sirotich, 2001; Ringstead, 2005). For example, agencies of social service departments developed the publication of guidelines to educate social workers on how to behave and handle violent situations (Johnson, 1988). However, the writers of guidelines for agencies rely on “social learning theories of aggression for practical suggestions about how to control violence . . . without explaining how to handle a violent incident” (Johnson, 1988, p. 382).

Other foci of current strategies for violence prevention are education, training, and early intervention skills for social workers. Researchers agree that a major focus should be given to training workers on violence and violence prevention. These trainings can be in the form of formal education in social work programs or scheduled work trainings, as well as informally through peer mentors (Ringstead, 2005; 2009). For example, some of these trainings may educate social workers against the effects of work-related violence perpetrated by clients against them (Johnson, 1988). Lee, Gate, and Fisher (2015) also believes that violence screening assessments should be conducted for all clients with whom a worker interacts. Early intervention skills, such as de-escalating

techniques, are also mentioned as helpful in reducing violence for social workers (Macdonald & Sirotich, 2001). De-escalation skills are identified as consisting of empathy and respect for the client and allow social workers to diffuse a potentially violent situation before it even starts and maintain control of the situation (Rey, 1996). This technique application is an effective direct strategy tool for working with angry, hostile clients which allows workers to de-escalate the situation using non-threatening communication skills (DiGiulio, 2001; Jayaratne, Croxton, & Mattison, 2004; Knight, 1999; Newhill, 1996; & Reeser & Wertkin, 2001).

Gaps in the Literature

While reviewing the literature, there appears to be a focus on violence and negative outcomes associated with violence against social workers (Bernstein, 1981; Bilici, Mustafa & Tufan, 2013; Brockmann, 2002; Crane 1989; Johnson, 1988; Knight, 1999; Koritas, Coles, & Boyle, 2010; Kvas & Seljak, 2015; Leadbetter, 1993; Lee, Gate & Fisher, 2015; Littlechild, 1995; Littlechild, 2005; Macdonald & Sirtich, 2009; NASW, 2006; NASW, 2013; Newhill, 1995; Newhill, 1996; Newhill, 1997; Newhill, 2003; Noris, 1990; OSHA, 1998; Padyad, Chelak, Nygren & Ghazinour, 2012; Price & Baker, 2012; Reeser & Wertkin, 2001; Rey, 1996; Ringstad, 2005; Ringstad, 2009; Robson, Cossar & Quayle, 2014; Shockency, 1999; Spencer, & Munch, 2003; Star, 1988; Tully, Kropf & Price, 1993; Whitman, Armao & Dent, 1976; Zimmerman & Posick, 2016).

Although the literature available on violence in the field of social work is abundant and very informative, there are similar patterns of limitations that can be seen in most of the research analyzed in this section. Some gaps and limitations in the research

include small sampling sizes, lack of diverse sampling populations, mostly quantified work, and a focus on the prevalence of violent experiences rather than solution focused approaches and education in de-escalation skills (Koritas, Coles, & Boyle, 2010; Littlechild, 1995; Littlechild, 2005; Macdonald & Sirtich, 2009; Newhill, 1995; Ringstad, 2005; Ringstad, 2009; Spencer, & Munch, 2003).

For most of the studies conducted on client violence, the sample sizes ranged from anywhere from 60 to 1,000 social workers, while the majority had under 100 respondents. Many of the respondents lived in similar communities and had experiences with the same agency, which can lead to biased experiences. The literature also focused on current practicing social workers, and failed to include social work students that are newly entering the field of social work. Another gap in the literature is the lack of focus on de-escalation skills or education in preventing violence (Brockmann, 2002; Koritas, Coles, & Boyle, 2010; Littlechild, 1995; Littlechild, 2005; Macdonald & Sirtich, 2009; Newhill, 1995; Noris, 1990; Ringstad, 2005; Ringstad, 2009; Spencer, & Munch, 2003).

While the literature offers suggestions to agencies for preventing violence, there was little focus on how to implement those suggestions. For example, we know that de-escalation skills are recommended for social workers, but there is no knowledge on how to implement these skills, the success of the skills, and whether social workers are being trained in the skills suggested. Nearly all the authors analyzed the prevalence, causes, and impact of violence on social workers, but there was little focus on whether social workers feel like they have the skills and knowledge to handle potentially violent situations (Criss, 2010; DiGiulio, 2001; Jayaratne, Croxton & Mattison, 2004; Johnson, 1988; Knight,

1999; Koritas et al., 2010; Lee, 2015; Littlechild, 1995; Macdonald & Sirotich, 2001; NASW, 2013; Newhill, 2003; Rey, 1996; Reeser & Wertkin, 2001; Ringsted, 2005; Ringsted, 2009; Spencer & Munch, 2003; Star, 1984).

Even less attention is given to social work students, who are preparing to enter the field of child welfare. The focus of current literature is mainly on data and awareness of violence in the field of social work, rather than assessing knowledge and practice skills of social workers, as well as application and success with de-escalation techniques. The author intends to fill this gap in literature by assessing the extent of MSW students' knowledge and practice skills in applying de-escalation techniques to reduce potentially violent situations (Criss, 2010; NASW, 1997; Rey, 1994; Shockency, 1999; Star, 1984; Tully, Kropf & Price, 1993).

This study will attempt to expand the research on violence against social workers and address the gaps noted above. The author hopes to fill in several gaps in the literature by utilizing a large sample size (N=66) and administering questionnaires to master of social work students, 18 and older, who are currently enrolled at California State University, Sacramento, which is known to have a highly diverse culture. By 2020, the field of social work is expected to grow by 25%, which means that more social workers will be entering the field each day (NASW, 2013). The author hopes to fill in the gaps of the literature by assessing whether social work students feel prepared to handle violent situations when they arise through de-escalation skills. This study will focus on providing awareness about safety that may build a safer work climate for MSW students currently attending California State University, Sacramento (CSUS). CSUS is a public school with

similar programs offered statewide, and, therefore, the external validity is high because other researchers may duplicate this research at other state schools.

In addition, this research will work towards the ethical principal of social work's core values of competence by adding awareness about the importance of having knowledge and skills in the application of de-escalation techniques while working with clients that exhibit violent behavior. Lastly, the researcher hopes through this study to increase the MSW students' awareness about potentially violent situations while working with clients and to promote trainings and possibly a de-escalation of violent situations course elective for students who need to learn more about the application of de-escalating techniques at CSUS.

Summary

Chapter two is an appraisal of literature that is relevant to social workers. Throughout, the review of the literature revealed that social workers are being physically attacked, abused, threatened, and even killed while carrying out their duties. The research that exists surrounding violence against social workers provides information on the prevalence of violence in the field of social work, as well as the causes of violence, effects on social workers, and strategies for change. Due to the nature of this topic, most of the research has been conducted quantifying the level and type of violence experienced by workers, rather than assessing knowledge and skills that workers feel they have in handling violent situations. The following topics were addressed in the literature review: The history of violence against social workers, indicators of client violence, types of violence, impact of client violence exposure on social workers, implications for social

work education, current strategies for violence preventions, and the gaps in the literature.

In the following chapter, the researcher will detail the methodology of the current study.

Chapter 3

METHODOLOGY

The methodology chapter includes the research question and the discussion of the study design, study population, sampling method, and measurement instrument. This section also includes the identification of the variables, statistical analysis plan, and the human subject procedures. In addition, strengths and weaknesses regarding the methodology of this research will be addressed in the discussion of these sub-sections.

Research Question

This study explores the following research question: What is the MSW students' knowledge, skill, and the application of de-escalation techniques to reduce violent situations in the work-place?

Research Design

The researcher utilized an exploratory, quantitative study, survey research approach to explore the research question. Exploratory research “generates initial insights into the nature of an issue and develops questions to be investigated by more extensive studies” (Marlow, 2005, p. 334). According to Mitchell and Jolley (2010), exploratory research collects a large amount of unstructured information to explore a new topic and to acquire a broad understanding of an issue.

The exploratory research method is used to simply explore the question, determine the nature of the problem, and to have a clearer understanding of the problem. The exploratory research design used in this study provides a beginning base for understanding the topic, and there are no final or conclusive answers (Rubin & Babbie,

2017). Exploratory research collects large amounts of unstructured information in order to examine a new interest, or to study a subject that is new or unstudied about which very little information is available (Mitchell & Jolley, 2010; Rubin & Babbie).

The focus of exploratory research is on the discovery of ideas and insights rather than to collect statistically accurate data. Explorative research does not only apply to new interests, or new subjects that are understudied, but is appropriate for more persistent phenomena, or, when a researcher wants to test the feasibility of undertaking a more extensive study, to develop the methods to be used in a more extensive study (Rubin&Babbie, 2017).

This study is considered a quantitative study, as the researcher is trying to analyze numerical data gathered utilizing a questionnaire format survey instead of conducting interviews (Marlow, 2005). The goal of quantitative research is to produce “precise and generalizable statistical findings [which can be] generalized to a larger population that the sample represents” (Rubin & Babbie, 2017, p. 79). The goal of a quantitative research study is to determine the relationship between two things, an independent and a dependent variable within the sample population. Quantitative research can usually be replicated or repeated because of its high reliability (Marlow; Rubin & Babbie).

Quantitative methods are used for examining relationships between variables with the focus to analyze and represent that relationship mathematically by using statistical analysis. Quantitative research design is a good way to finalize results, validate or invalidate a hypothesis, and to verify whether a cause produces an effect. An important example of quantitative studies are surveys (Rubin & Babbie, 2017).

The survey is a list of questions aimed at finding specific data from a sample of people, it is a very old research technique. In survey research the researcher selects a sample of respondents from a population and administers a survey questionnaire to them. The surveys used for this research are written documents that completed by the first-year students enrolled in the master of social work at California State University, Sacramento. Survey research is usually used to assess thoughts, opinions, and feelings, and researchers will usually administer closed-ended questionnaires to a sample of people in an effort to generate findings that can be applicable to a larger population than the one that it represents (Rubin and Babbie, 2017).

The researcher utilized an exploratory survey research method employing a quantitative design to answer the research question for two reasons: (1) To find the level of knowledge of de-escalation techniques among MSW students at CSUS, and (2) to find the degree of skill to apply de-escalation techniques by MSW students at CSUS to reduce potentially violent situations in the work-place. Survey research methods to collect and interpret data have strengths and weaknesses.

One of the primary strengths of survey research is that they are considered both feasible and inexpensive and allow the researcher to efficiently administer the questionnaires to a large sample size (Rubin & Babbie, 2017). In addition, this sample has the strength of providing representation of the diverse MSW student population and its level of knowledge and skills applicable to the social work field. The sample size will represent students with different degrees of educational, field, and work experiences in the social work profession. In addition, surveys are relatively easy to develop compared

to other data-collection methods, are easy to administer, and have the capability to collect a broad range of data such as attitudes, opinions, beliefs, values, and behaviors (Rubin & Babbie).

Some of the weaknesses of utilizing a survey research are that the surveys often yield invalid data due to weak causality and limited responses to the questions (Marlow, 2005; Mitchell & Jolley, 2010; Rubin & Babbie, 2017). In addition, survey research is inflexible, as they typically require that the initial design stays the same throughout the research. In addition, surveys are subject to artificiality, as they are only collecting self-reported, recalled experiences, or possible or hypothetical action, and are not measuring social action (Rubin & Babbie). Another weakness of surveys is that the respondents may not feel comfortable to provide answers that may portray them in an unfavorable manner, and using closed-ended questions may result in a lower validity rate than using other question types (Marlow; Mitchell & Jolley; Rubin & Babbie). The questionnaires will be discussed in more detail in the measurement instrument section.

Variables

For this study, the independent variable was the knowledge and skills of Master of Social Work students. The dependent variable was the application of de-escalating techniques to reduce violent situations in the work-place. The conceptualization of the students' knowledge and skills regarding de-escalating techniques includes training, education, field experience, or work experience. The conceptualization of responses regarding applying de-escalation techniques to reduce potentially violent situations

consists of a variety of different choices that students can make including listening, staying calm and in control of themselves, asking questions, and using positive language. Conceptualization is the “process of specifying the vague mental imagery of our concepts, sorting out . . . observation and measurements that will be appropriate for our research” (Rubin & Babbie, 2017, p. 189). The independent and dependent variables were operationalized in this study by utilizing surveys with yes/no questions using the same wording and sequence of questions for all respondents, and by using closed-ended questions that reflect the concepts included within each variable. Operationalization is the “final specification of how we would recognize the different attributes of a given variable in the real world” (Rubin & Babbie, 2017, p. 189).

Study Population

The study population is comprised of first year Master of Social Work (MSW) students currently enrolled in the program at California State University, Sacramento who were recruited through the Social Work 202, 235A, and 250 classes. The students include persons from various ethnic backgrounds, field, and work experiences in the social work profession. Students may be enrolled in the MSW two year, three year, or the weekend intensive program. Their undergraduate majors vary from social work to psychology, child development to criminal justice and others.

Sample Population

This study was conducted using non-probability convenience and purposive sampling of first year Master of Social Work (MSW) students at the California State University, Sacramento (CSUS). A total of seventy-six students were surveyed. The

population surveyed included males and females from various ethnic backgrounds.

Convenience sampling is commonly utilized in social work research, as it is more cost effective (Rubin & Babbie, 2017).

Convenience sampling is used when the researcher uses subjects that can be easily found, willing to participate, and meets the eligibility criteria for the research (Marlow, 2005; Rubin & Babbie, 2017). Thus, convenience sampling was utilized as the researcher recruited available MSW students who are currently enrolled in the 2017-2018 academic school year. Purposive sampling is used when sample selection is based on knowledge about the population and purpose of the study (Rubin & Babbie). The strengths of this sample are that it provides representation of the diverse Master of Social Work (MSW) student population and their level of knowledge and skills applicable to the social work field. The weakness of this sample is due to it being limited to only first year MSW students at CSUS, which makes this study applicable only to the social work division at CSUS, master's program. Due to a smaller sample size than anticipated, the findings discussed in chapter four would be difficult to generalize to a larger population.

Instrumentation

The measurement instrument (see appendix B) used in this research was a survey. The questions consisted of both multiple choice and yes/no questions, which presented statements pertaining to the students' level of knowledge and practice skills in de-escalating techniques. In addition, the survey contained questions about the population with whom the students used the de-escalating techniques and the type of therapy

application that they believe works best for them when working with potentially violent clients.

The demographic information that was collected included questions regarding gender, age, ethnicity, current academic enrollment, program enrollment, undergraduate degree, theoretical orientation, field placement status, years of experience in the social work profession, knowledge about any Master of Social Work students experiencing direct exposure to violence perpetrated by clients against them, and, if so, the type of client violence to which they were exposed.

Some of the strengths of using a survey in research are that the questionnaires are well organized and include questions that allow the researcher to explore the study question. Another strength of the survey is that utilizing closed-ended questions made it easier for the gathered data to be analyzed (Marlow, 2005; Rubin & Babbie, 2017). In addition, survey research is considered very practical, convenient, and inexpensive because it is easy to administer in many ways including in person, through email, mail, and internet. The weakness of the survey is that surveys are inflexible as they typically require that the initial design needs to stay the same throughout the research. Surveys are subject to artificiality, as they are only collecting self-reported, recalled experiences or possible or hypothetical action, and are not measuring social action. In addition, surveys often produce invalid data due to the weak causality and limited responses to questions (Marlow; Rubin & Babbie).

The data gathering procedures will be further discussed in the following section. There were no specific reliability or validity tests conducted other than face-validity. The

instrument was shown to experts for commentary and questions were adjusted accordingly. The researcher also utilized closed-ended questions that allowed students to simply answer “yes” or “no” which could potentially minimize bias.

Data Collection Procedures

The researcher recruited the participants for this study through a non-probability convenience and purposive sampling method targeting graduate social work students enrolled at California State University, Sacramento in the academic year 2017-2018. The researcher is a second year, master of social work student at the aforementioned university. The researcher emailed SWRK 202, section 02-81875, SWRK 235A, section 04-82113, and SWRK 250, section 04-81922 professors and received consent to administer surveys in their classes.

Participation in this study took place during class time to make it convenient for participants. The researcher introduced herself, proceeded to describe the study, and informed subjects that participation in the study was completely voluntary. The researcher then went over the informed consent form, handed out the surveys, and left the room. Upon completion of the surveys, participants returned the questionnaires to an empty envelope available in the classroom. The researcher waited outside of each class room while the surveys were completed. The researcher then collected the envelope with the surveys and secured them in a locked cabinet.

Data Analysis

After the researcher collected the information gathered from the measurement instrument she inputted the data obtained from the surveys utilizing the IBM Statistical

Package for the Social Sciences (SPSS). The researcher coded the variables and produced pie charts, bar graphs, and frequency distributions. In addition, Chi Squares tests were performed in order to analyze the data and detect a relationship, if any, between Master of Social Work students' knowledge, skills, and their application of de-escalation techniques to reduce violent situations in the work-place. A p value of $<.05$ was used as the significant level.

Human Subjects

The researcher followed California State University, Sacramento's research policies and procedures by submitting an application to protect human subjects. The researcher submitted that application and received "exempt" status research approval by the Division of Social Work Research Review Committee (Appendix C – copy of the approval letter). The approval number for this human subject's application is 17-18-009 and the approval was received prior to the collection of any research data.

The surveys were administered in classes to the participants, and each potential research participant was provided with an informed consent information sheet which described and explained the purpose of the survey, the procedures, and informed potential participants that their participation in the study was voluntary. In addition, potential participants were informed that they could refrain from answering certain questions or even end their participation in the study at any time. Additionally, the researcher did not require any of the participants to sign their signatures on the consent forms in order to further protect the participants' confidentiality.

Both the human subject application form and the informed consent information sheets included information regarding how participants' right to privacy and protection of confidentiality were maintained, and the study data remained anonymous and confidential. To maintain ethical practice, the researcher specified that participation was voluntary and that each participant would be provided with informed consent information sheets.

The anonymous and confidential nature of the survey and data was emphasized to the participants in the informed consent information sheet. The subjects' right to privacy and protection of confidentiality were maintained, and the study data remained anonymous as participants were not asked to provide identifying information. Because each participant placed the paper surveys in an envelope, there was minimal risk that anyone other than myself would view the responses of completed surveys.

Confidentiality of participants was maintained, as the researcher provided an unsealed manila envelope in the class rooms for participants to submit their anonymous surveys. The researcher did not know whether each study participant completed their survey or not, but only collected the envelope and stored it in a safe and locked file cabinet at her house.

Summary

This chapter discussed the purpose, design, and methodology of the research study. Furthermore, information regarding the study population, sampling method, and measurement instrument was presented. This section also included the identification of the variables, the statistical analysis plan, and outlined the protection of human subjects.

Additionally, strengths and weaknesses regarding the methodology of this research were addressed throughout chapter 3. In the next chapter, the data analysis is presented.

Chapter 4

DATA ANALYSIS

In this chapter, the researcher will examine the data collected from the research survey questionnaires. All the research participants' demographic information, years of experience in the social work profession, and the theory application that works best for Master of Social Work (MSW) students when working with potentially violent clients will be discussed and analyzed. The analysis of the research survey will explore the MSW students' confidence in applying de-escalating techniques to reduce potentially violent situations in the work place. Chi-square tests are used to identify the relationship between the variables contained in the data set. The primary objective of the study was to investigate the following research question: What is the relationship between MSW students' knowledge, skills, and their application of de-escalation techniques to reduce violent situations in the work-place. The purpose of exploring this topic was to gain insight into whether the current knowledge and skills of MSW students are effective and to examine if there is a need for trainings to better apply the de-escalation techniques in potentially violent situations. This research can then lead to recommendations regarding the development of trainings and/or academic course work on de-escalation techniques at CSUS. A summary will conclude with the findings of all the significant relationships of the variables used in the data set.

Demographics of Study Participants

For this research, a total of 54 first-year Master of Social Work (MSW) students currently enrolled in the program at California State University, Sacramento (CSUS)

completed the survey questionnaire during the allotted class time in the Social Work 202, 235A, and 250 classes. As shown in Figure 1, out of 54 participants 38.9% (n=21) of the participants identified themselves as Caucasian, 24.1% (n=13) Latino(a) American, 13.0% (n=7) Asian American, 11.1% (n=6) African American, 3.7% (n=2) American Indian, and 9.3% (n=5) identified themselves as having another ethnicity. Figure 2 displays that 79.6% (n=43) of the participants were female, 16.7% (n=9) are male, and 3.7% (n=2) are non-binary/third gender. As shown in figure 3, most students were between the ages of 20-29 (55.6%, n=30), approximately 27.8% (n=15) of students were between the ages of 30-39. Figure 4 shows that 50% (n=27) of the participants have their undergraduate degree in social work. Figure 5 displays that 37% (n=20) of the participants have no previous experience in the social work profession. Figure 6 shows that 61.1% (n=33) of participants in the study chose to apply crisis therapy intervention in possibly violent situations when working with clients. Figure 7 displays the MSW students' confidence in the application of de-escalating techniques in possible violent situations with 79.6% (n=43) of the participants not feeling confident in applying the techniques, and 20.4% (n=11) feeling mostly confident in applying the techniques. Figure 8 shows that 90.7% (n=49) of the participants recommend the addition of trainings on de-escalating techniques to the curriculum of the social work department at CSUS. These results display that students need more education about how to handle possibly violent situations in the work-place while working with clients.

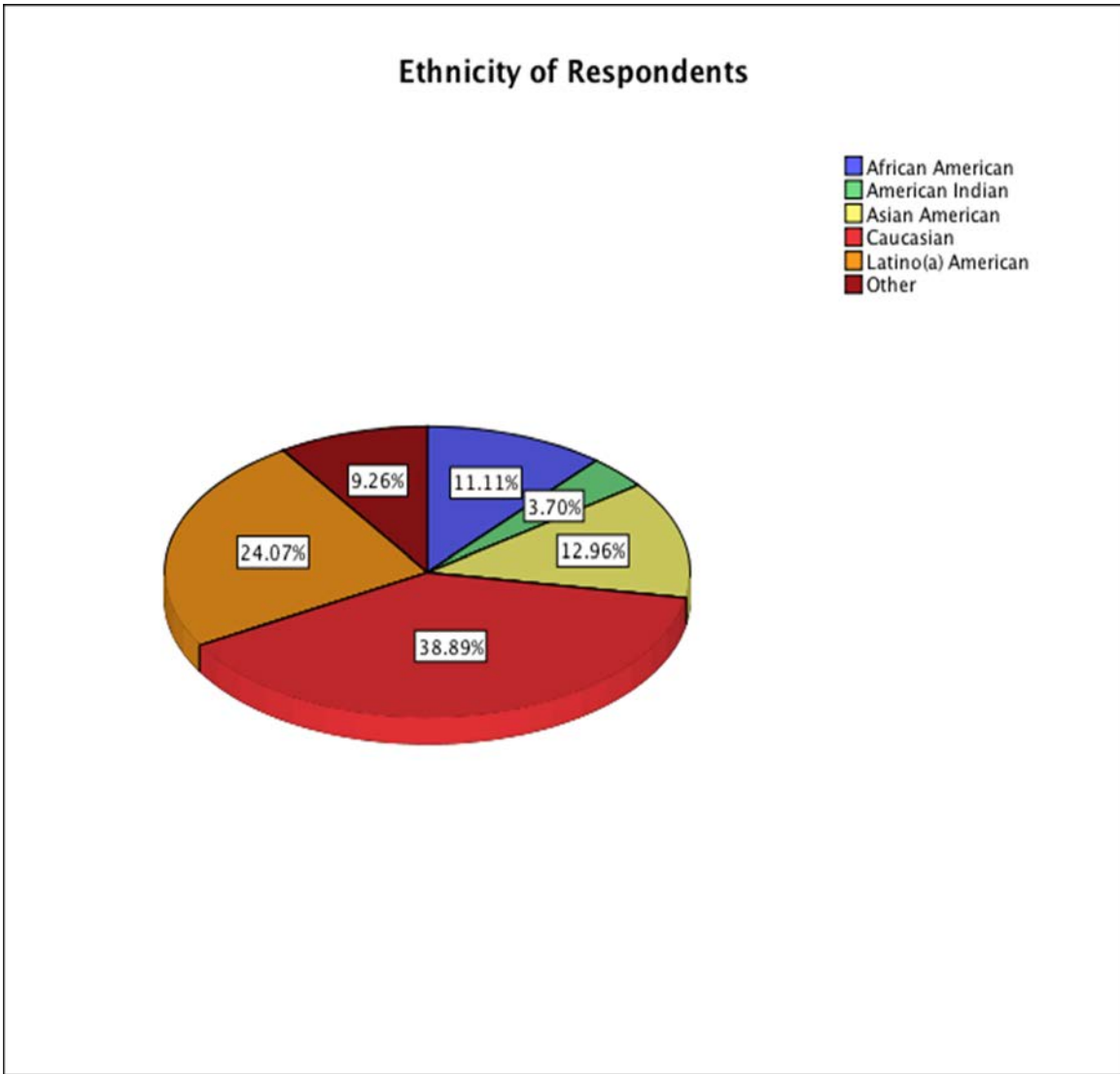


Figure 1. Ethnicity of respondents.

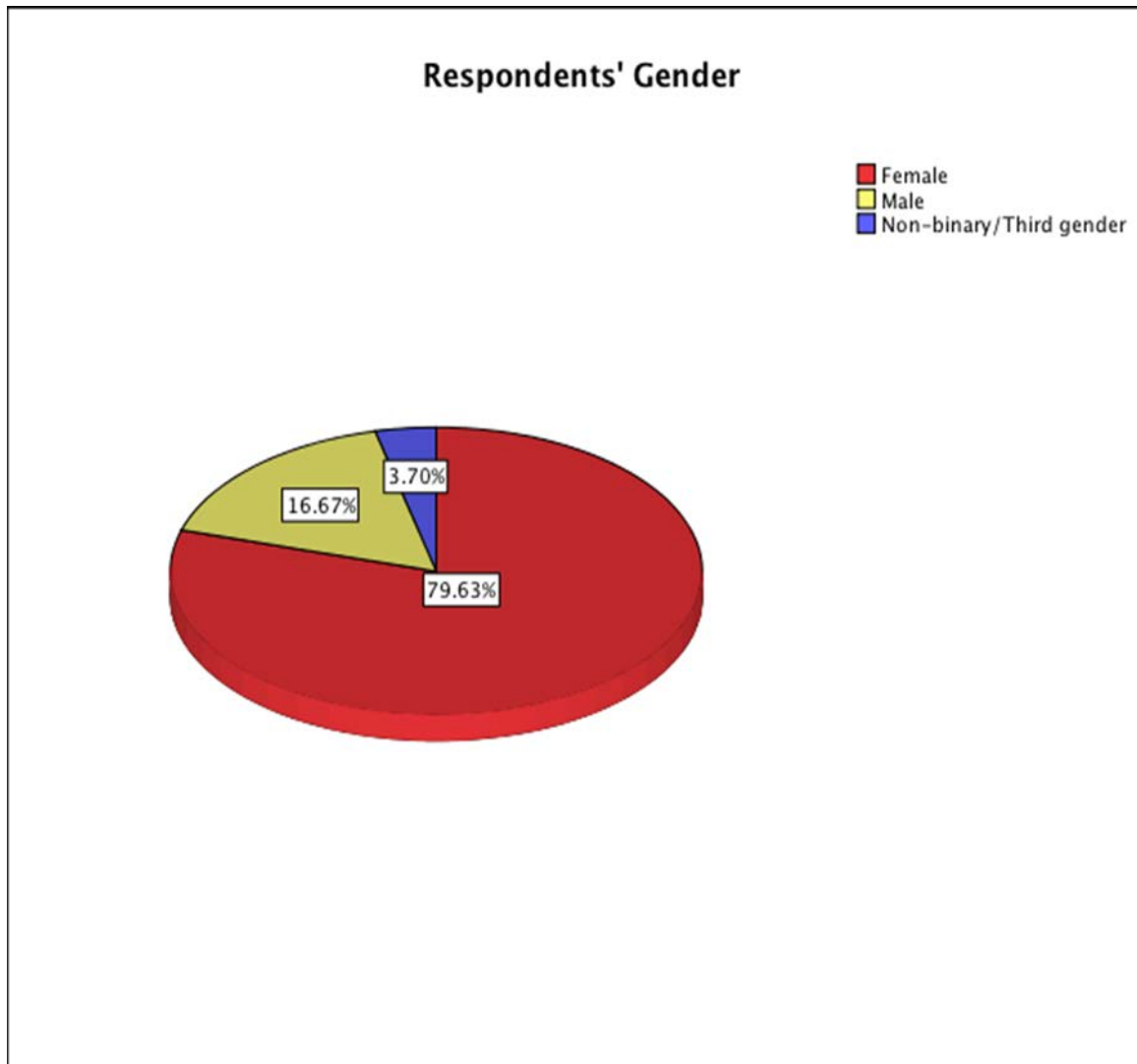


Figure 2. Respondents' gender.

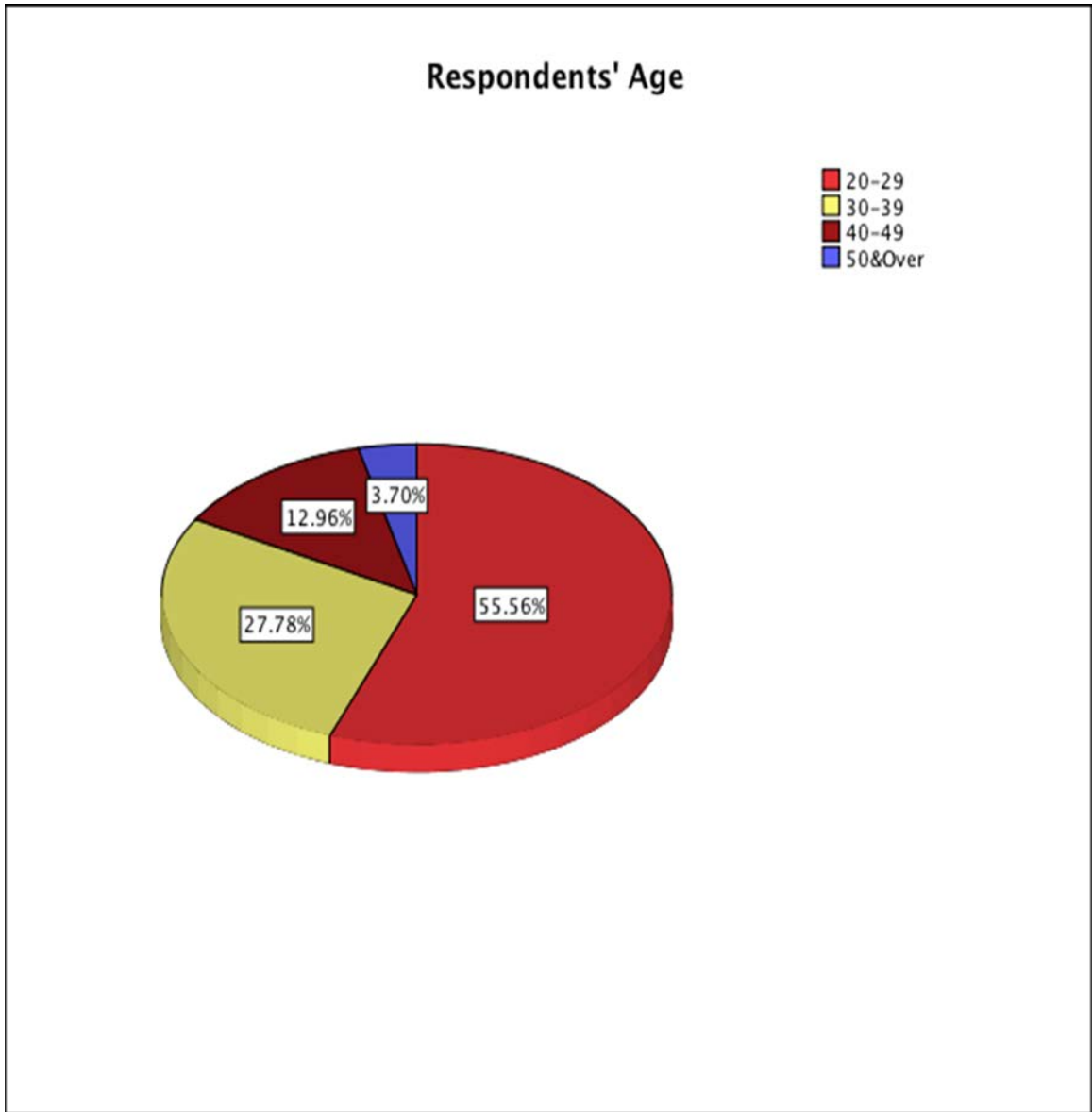


Figure 3. Respondents' age.

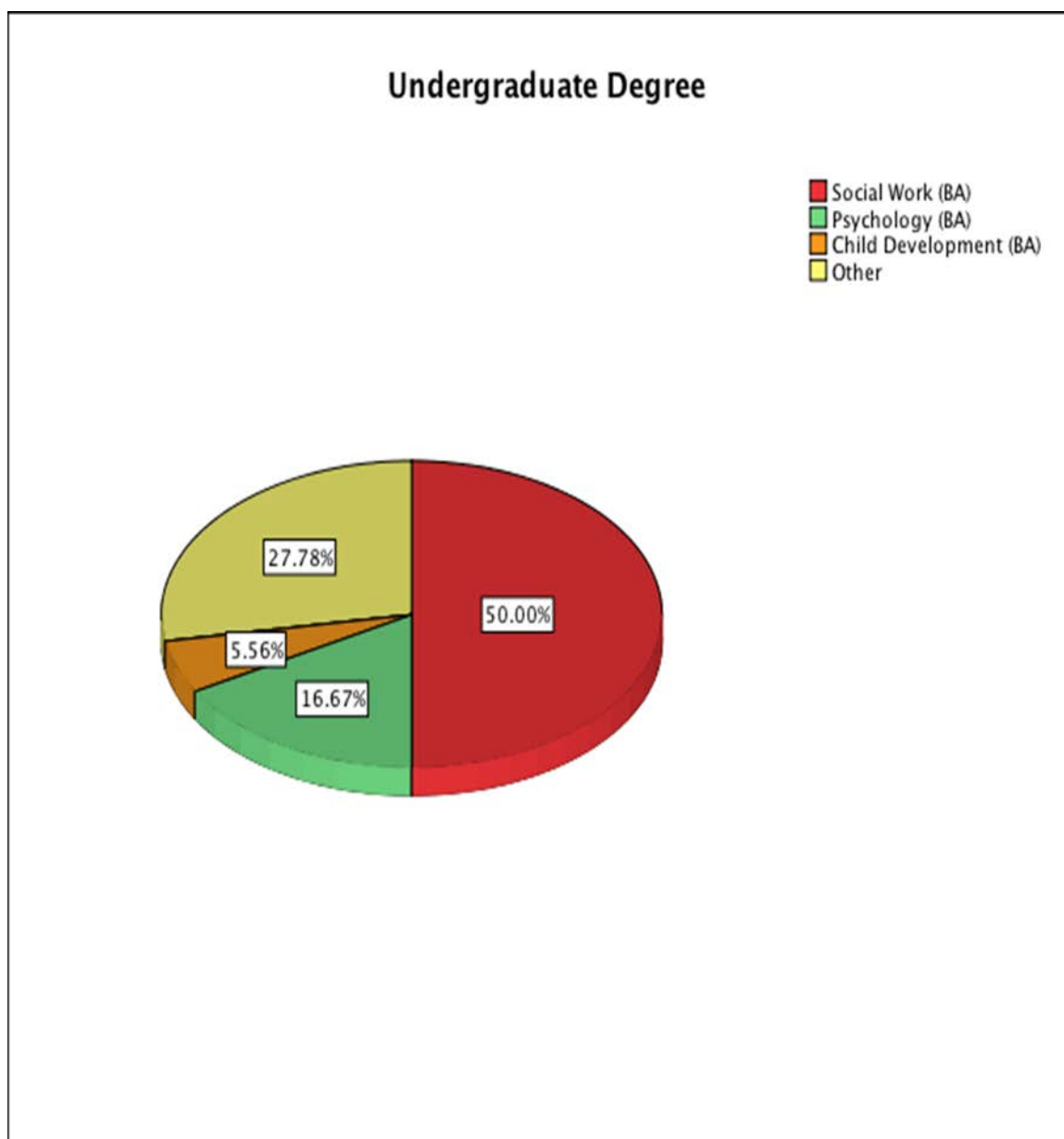


Figure 4. Undergraduate degree.

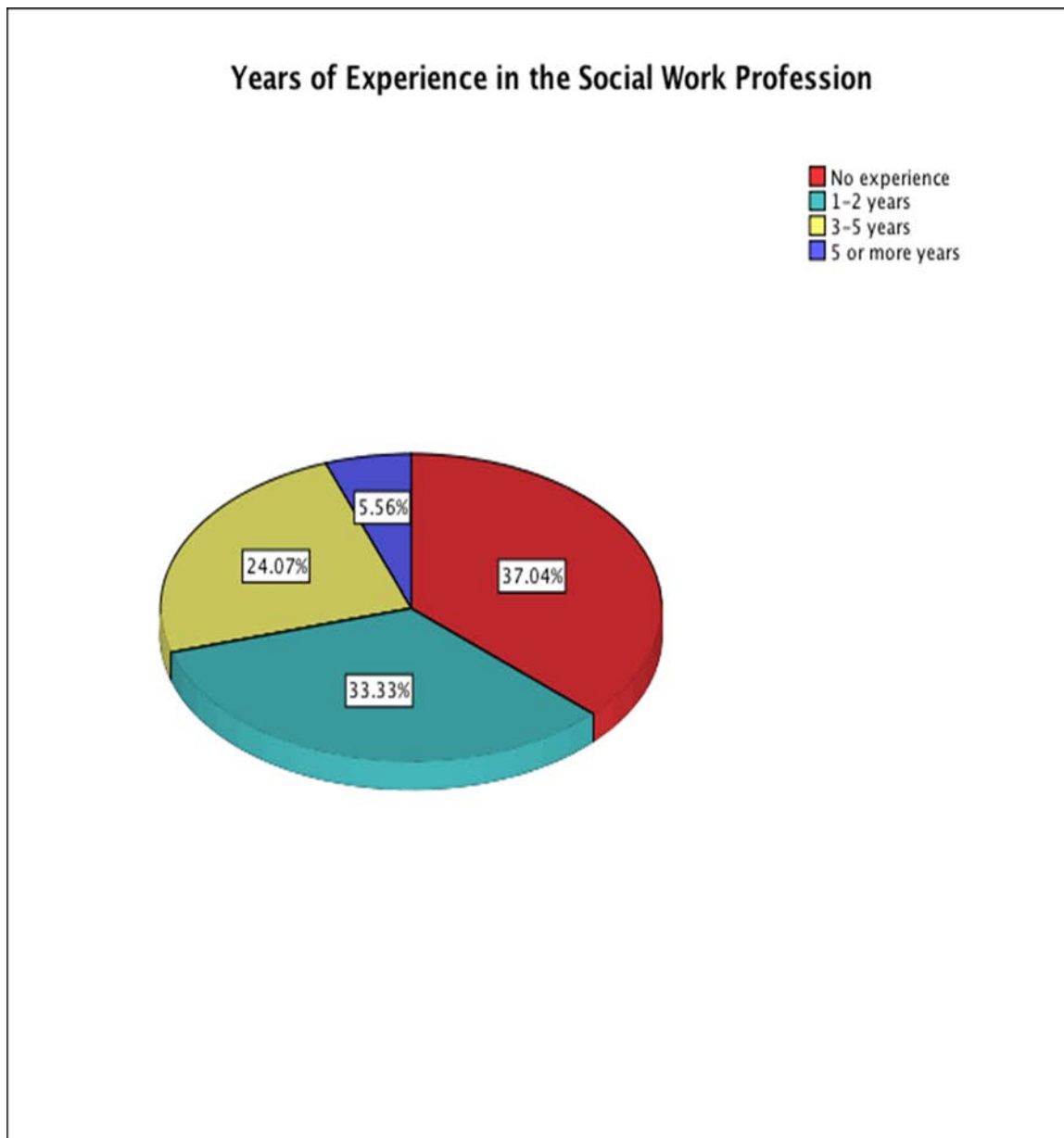


Figure 5. Years of experience in the social work profession.

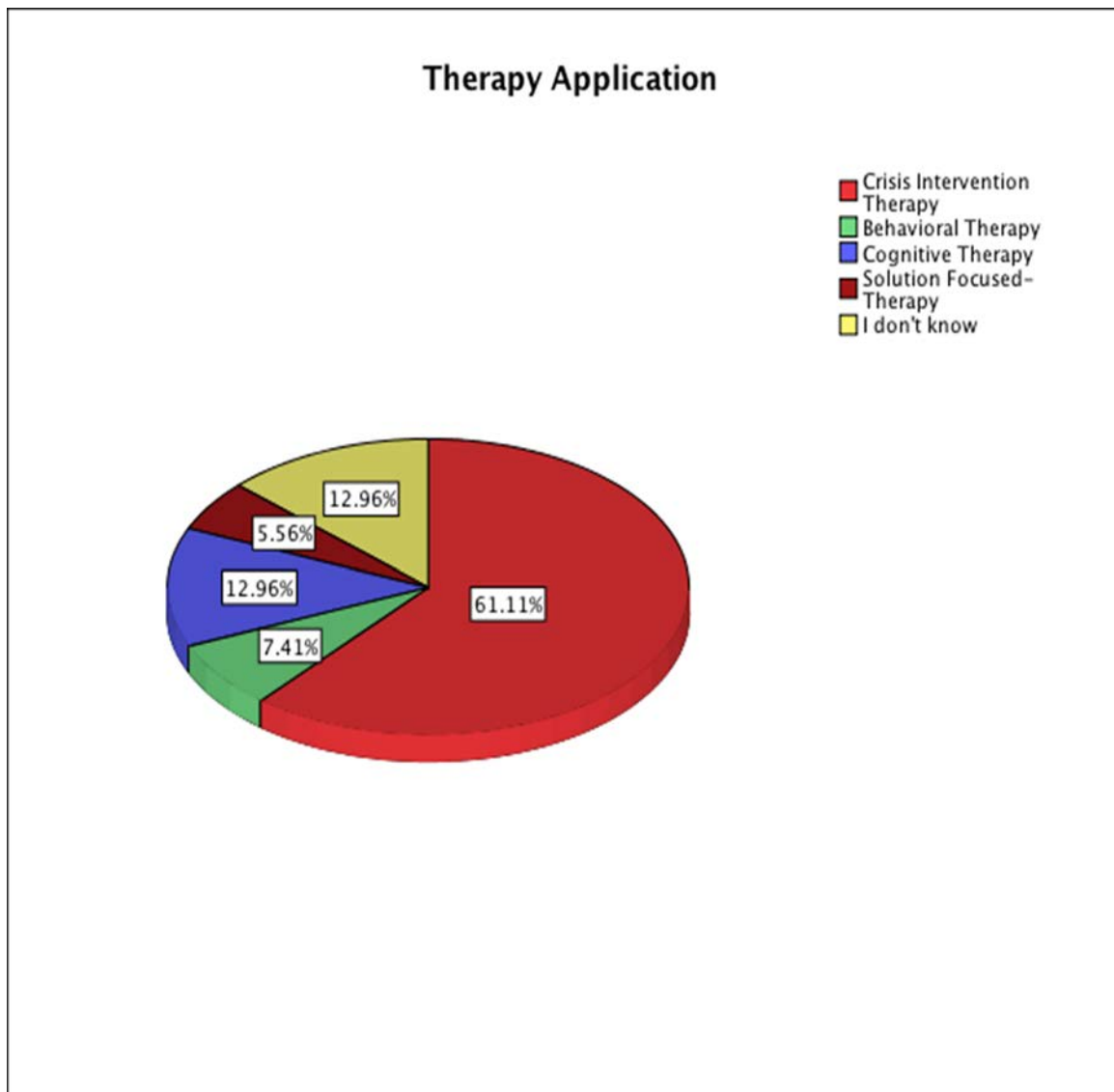


Figure 6. Therapy application.

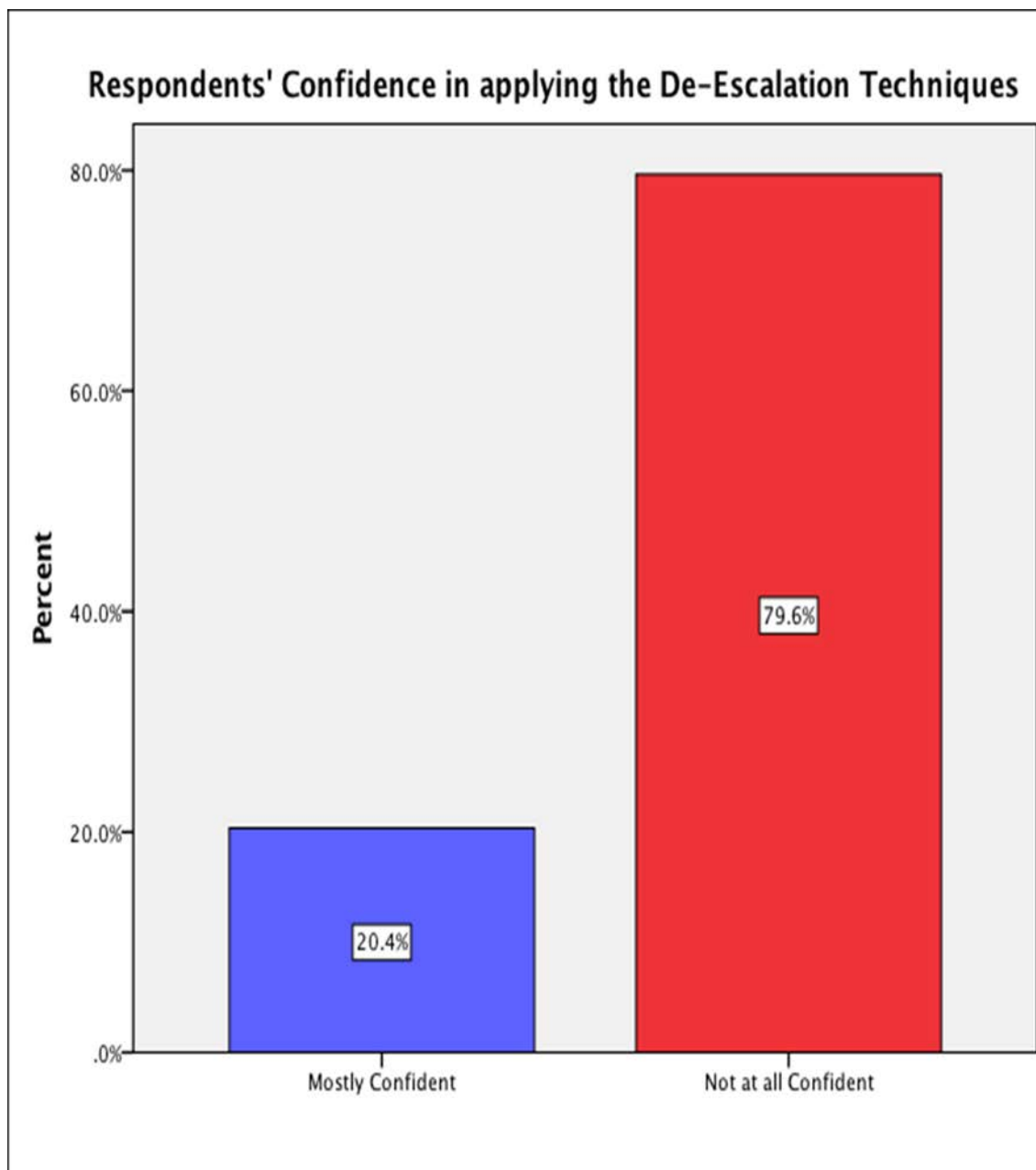


Figure 7. Respondents' confidence in the application of de-escalation techniques.



Figure 8. Training recommendation.

What is the MSW Students' Knowledge, Skills, and the Application of De-Escalation Techniques to Reduce Violent Situations in the Work-Place?

This section will explore the MSW students' knowledge and the application of de-escalating techniques when working with potentially violent clients. The researcher ran Chi-Square Tests to get a better understanding of the relationship between the independent and dependent variables in the study. In some cases, the chi-square tests indicated significance in the relationship between the dependent and independent variables as confirmed by chi square tests. However, in other cases, the chi-square tests were not statistically significant.

Table 1 reveals that among 54 individuals who participated in the study, 69.0% of the respondents who answered "yes" to having practice skills in the application of de-escalation technique, used the technique when working with clients. The chi-square test was statistically significant ($\chi^2=5.868$, $df=1$, $p=.015$), with a zero cell (0.0%) having an expected count less than 5, and a minimum expected count of 11.57.

Table 2 shows that the majority, 91.7%, of the respondents who have practice skills in the application of de-escalation techniques also have a foundation in the knowledge of how to apply the technique. The chi-square was statistically significant ($\chi^2=4.427$, $df=1$, $p=.035$), but there were two cells (50.0%) having an expected count less than 5, and a minimum expected count of 3.36. Because of the two cells with an expected count less than 5, the chi square test is not significant.

Table 1

<i>MSW Students' Practice Skills and the Use of De-Escalation Techniques</i>					
			Do MSW students ever use any de-escalation techniques with clients		Total
			Yes	No	
Practice Skills in the Application of De-escalation Techniques	Yes	Count	20	9	29
		% within practice skills in the application of de-escalation techniques	69.0%	31.0%	100.0%
		% within ever used any de-escalation techniques with clients	69.0%	36.0%	53.7%
		% of Total	37.0%	16.7%	53.7%
	No	Count	9	16	25
		% within practice skills in the application of de-escalation techniques	36.0%	64.0%	100.0%
		% within ever used any de-escalation techniques with clients	31.0%	64.0%	46.3%
		% of Total	16.7%	29.6%	46.3%
Total		Count	29	25	54
		% within practice skills in the application of de-escalation techniques	53.7%	46.3%	100.0%
		% within ever used any de-escalation techniques with clients	100.0%	100.0%	100.0%
		% of Total	53.7%	46.3%	100.0%

Table 2

<i>MSW Students' Practice Skills in the Application of De-Escalation Techniques</i>							
			How Much Knowledge in the Application of De-Escalation Techniques		Total		
			Have a foundation	More than the average classmates			
Do MSW Students Have Practice Skills in the Application of De-Escalation Techniques	Yes	Count	11	1	12		
		% within do MSW students have practice skills	91.7%	8.3%	100.0%		
		% within how much knowledge in the application of de-escalation techniques	61.1%	14.3%	48.0%		
		% of Total	44.0%	4.0%	48.0%		
	No	Count	7	6	13		
		% within do MSW students have practice skills	53.8%	46.2%	100.0%		
		% within how much knowledge in the application of de-escalation techniques	38.9%	85.7%	52.0%		
		% of Total	28.0%	24.0%	52.0%		
		Total		Count	18	7	25
				% within do MSW students have practice skills	72.0%	28.0%	100.0%
		% within how much knowledge in the application of de-escalation techniques	100.0%	100.0%	100.0%		
		% of Total	72.0%	28.0%	100.0%		

Table 3 indicates that 51.0% of students (n=26) who reported to have practice skills in the application of de-escalation techniques are enrolled in their first year of practice field. The relationship between the MSW students practice skills and their enrollment in their field placement did not approach significance. The chi-square analysis was not significant. ($\chi^2=2.738$, $df=1$, $p=.098$).

Table 4 indicated that 95.5% of the students who reported having 1 to 2 years of experience in the social work profession also reported being in their first year of field placement. However, the relationship between the MSW students' years of experience and field placement status did not approach significance. The chi-square analysis was not significant ($\chi^2=.100$, $df=1$, $p=.751$).

Table 5 shows that 97.6% of the respondents who have more than average knowledge in the application of de-escalation techniques also reported they need more education to acquire more skills in the application of the de-escalation techniques. The chi-square was statistically significant ($\chi^2=9.977$, $df=1$, $p=.002$), but there were, three cells (75%) having an expected count less than 5, and a minimum expected count of .09. Because of the three cells with an expected count less than 5, the chi square test is not significant.

Table 6 shows that the majority of the participants, 80% of the students, believed that if they would have additional training in the de-escalating techniques they were very likely to apply the technique when working with clients that exhibit violent behavior, and only 20% of the students believed that the de-escalating technique could prevent possible violent situations. The chi-square test was statistically significant

($\chi^2=8.180$, $df=1$, $p=.004$), but two cell (50%) have an expected count less than 5, and a minimum expected count of 2.08. Because of the two cells with an expected count less than 5, the chi-square test is not significant.

Table 7 reveals that 91.7% of the students have knowledge about de-escalation techniques, but need more education to acquire skills on how to use the technique. Conversely, 100.0% of the students reported needing more education to acquire practice skills in the application of de-escalating technique and state that they do not have knowledge about the technique. The chi-square was not statistically significant ($\chi^2=.451$, $df=1$, $p=.502$).

Table 8 indicates that 89.6% of the students ($n=43$) who answered “yes” that de-escalation techniques skills could help prevent possible violent situations, would recommend adding a training course on de-escalating techniques to the Department of Social Work Curriculum. However, even if the majority of participants reported that de-escalating techniques could prevent violent situations, the chi-square analysis is not significant ($\chi^2=.689$, $df=1$, $p=.407$).

Table 3

<i>Years of Field Experience and Practice Skills of De-Escalation Techniques</i>							
			Practice Skills in the Application of De-escalation Techniques		Total		
			Yes	No			
Field Status	First year	Count	26	25	51		
		% within years of field status	51.0%	49.0%	100.0%		
		% within Practice Skills in the Application of De-escalation Techniques	89.7%	100.0%	94.4%		
		% of Total	48.1%	46.3%	94.4%		
	Second year	Count	3	0	3		
		% within years of field status	100.0%	0.0%	100.0%		
		% within Practice Skills in the Application of De-escalation Techniques	10.3%	0.0%	5.6%		
		% of Total	5.6%	0.0%	5.6%		
		Total		Count	29	25	54
				% within years of field status	53.7%	46.3%	100.0%
		% within Practice Skills in the Application of De-escalation Techniques	100.0%	100.0%	100.0%		
		% of Total	53.7%	46.3%	100.0%		

Table 4

<i>Field Status and Years of Experience in the Social Work Profession</i>					
			MSW Students Years of Experience in the Social Work Profession		Total
			1 to 2 years	3 or more years	
Field status	First year	Count	19	12	31
		% within years of field status	61.3%	38.7%	100.0%
		% within years of experience in social work profession	95.0%	92.3%	93.9%
		% of Total	57.6%	36.4%	93.9%
	No field experience	Count	1	1	2
		% within years of field status	50.0%	50.0%	100.0%
		% within years of experience in social work profession	5.0%	7.7%	6.1%
		% of Total	3.0%	3.0%	6.1%
Total	Count	20	13	33	
	% within years of field status	60.6%	39.4%	100.0%	
	% within years of experience in social work profession	100.0%	100.0%	100.0%	
	% of Total	60.6%	39.4%	100.0%	

Table 5

<i>How Much Knowledge do MSW Students' Have in the Application of De-Escalating Techniques</i>							
			How Much Knowledge in the Application of De-Escalation Techniques		Total		
			Have a Foundation	More than the Average			
Do MSW students need more education to acquire skills in de-escalation techniques	Yes	Count	1	41	42		
		% within the need of more education to acquire skills in de-escalation techniques	2.4%	97.6%	100.0%		
		% within how much knowledge	50.0%	97.6%	95.5%		
		% of Total	2.3%	93.2%	95.5%		
	No	Count	1	1	2		
		% within need more education to acquire skills in de-escalation techniques	50.0%	50.0%	100.0%		
		% within how much knowledge	50.0%	2.4%	4.5%		
		% of Total	2.3%	2.3%	4.5%		
		Total		Count	2	42	44
				% within need more education to acquire skills in de-escalation techniques	4.5%	95.5%	100.0%
		% within how much knowledge	100.0%	100.0%	100.0%		
		% of Total	4.5%	95.5%	100.0%		

Table 6

<i>How Likely are MSW Students' to Apply the De-Escalation Technique to Prevent Violent Situations</i>							
			Can De-Escalation Technique Skills Help Prevent Possible Violent Situations		Total		
			Yes	No			
If MSW Students Had Additional Training in De-Escalating Techniques, How Likely Would They Consider Applying Those Techniques?	Unlikely	Count	4	5	9		
		% within additional training in de-escalating techniques	44.4%	55.6%	100.0%		
		% within de-escalation technique skills help prevent violent situations	20.0%	83.3%	34.6%		
		% of Total	15.4%	19.2%	34.6%		
	Very Likely	Count	16	1	17		
		% within additional training in de-escalating techniques	94.1%	5.9%	100.0%		
		% within de-escalation technique skills help prevent violent situations	80.0%	16.7%	65.4%		
		% of Total	61.5%	3.8%	65.4%		
		Total		Count	20	6	26
				% within additional training in de-escalating techniques	76.9%	23.1%	100.0%
		% within de-escalation technique skills help prevent violent situations	100.0%	100.0%	100.0%		
		% of Total	76.9%	23.1%	100.0%		

Table 7

<i>Do MSW Students' Have Knowledge about De-Escalating Techniques</i>					
			Do MSW students have knowledge about de-escalating techniques		Total
			Yes	No	
Do MSW students need more education to acquire skills in de-escalation techniques	Yes	Count	44	5	49
		% within do MSW students need more education to acquire skills in de-escalation techniques	89.8%	10.2%	100.0%
		% within knowledge about De-escalating Techniques	91.7%	100.0%	92.5%
		% of Total	83.0%	9.4%	92.5%
	No	Count	4	0	4
		% within do MSW students need more education to acquire skills in de-escalation techniques	100.0%	0.0%	100.0%
		% within knowledge about De-escalating Techniques	8.3%	0.0%	7.5%
		% of Total	7.5%	0.0%	7.5%
Total	Count	48	5	53	
	% within do MSW students need more education to acquire skills in de-escalation techniques	90.6%	9.4%	100.0%	
	% within knowledge about De-escalating Techniques	100.0%	100.0%	100.0%	
	% of Total	90.6%	9.4%	100.0%	

Table 8

<i>Can De-Escalation Technique Skills Help Prevent Possible Violent Situations</i>							
			Would MSW recommend adding a training course on de-escalating techniques to the Department of Social Work Curriculum		Total		
			Yes	No			
Do de-escalation technique skills could help prevent possible violent situations	Yes	Count	43	5	48		
		% within could help prevent possible violent situations	89.6%	10.4%	100.0%		
		% within Would MSW recommend adding a training course on de-escalating techniques	87.8%	100.0%	88.9%		
		% of Total	79.6%	9.3%	88.9%		
	No	Count	6	0	6		
		% within could help prevent possible violent situations	100.0%	0.0%	100.0%		
		% within Would MSW recommend adding a training course on de-escalating techniques	12.2%	0.0%	11.1%		
		% of Total	11.1%	0.0%	11.1%		
		Total		Count	49	5	54
				% within could help prevent possible violent situations	90.7%	9.3%	100.0%
		% within Would MSW recommend adding a training course on de-escalating techniques	100.0%	100.0%	100.0%		
		% of Total	90.7%	9.3%	100.0%		

Summary

This chapter analyzed MSW students' knowledge, skills, and their application of de-escalation techniques in possible violent situations. Additionally, the researcher analyzed the other demographics such as ethnicity, undergraduate major, years of experience in the social work profession, chosen therapy application when working with potentially violent clients, and the students' confidence in the application of de-escalating techniques. The statements that were analyzed were chosen to assist in finding the answers to the research question. The next chapter will discuss and make conclusions based on all the findings of the data. Furthermore, implications for social work practice, research limitations, and recommendations will be explained.

Chapter 5

CONCLUSION

This chapter summarizes and concludes the research findings and the data that were collected in this research study. The relationship between MSW students' knowledge, skills, and their application of de-escalating techniques and the variables that were shown to be significant by the chi square test will be discussed. In addition, this chapter will discuss the limitations of the study, implications for social work practice and policy, as well as recommendations for future research.

Summary

The purpose of this research was to explore the relationship between knowledge, skills and the application of de-escalation techniques by MSW students to reduce violent situations in the work-place. The secondary purpose of this research is to study whether the current knowledge and skills of MSW students are effective, and to examine if there is a need for trainings to better apply the de-escalation techniques in potentially violent situations. This research can then lead to recommendations regarding the development of trainings and/or academic course work on de-escalation techniques at CSUS. The researcher analyzed the responses on the questionnaires from MSW students to explore their ability to apply de-escalating techniques in possibly violent situations in the work place. Currently there is no research referencing the knowledge and skills levels of MSW students, or their ability to employ de-escalating techniques. The results of the study revealed that MSW students have knowledge and skills in applying de-escalation techniques, but they do not feel confident in applying the technique, and therefore they

feel that they need more training to acquire skills to effectively apply the technique when working with clients that exhibit violent behavior.

The chi-square test results showed a correlation between the knowledge, skills, and the application of de-escalation technique of MSW students. The data showed that some of the variables tested through chi-square were not significant. The demographics of this research showed that there were different age and ethnic groups with different levels of experience in the social work profession who filled out the survey. Much of the data analysis proved to be inconclusive or not statistically significant. As seen on the tables in Chapter 4, the data shows that students who have knowledge and practice skills in the application of de-escalating techniques also used the techniques when working with clients.

The results of the study offered evidence of the correlation between MSW students' knowledge and practice skills of de-escalating techniques and the students' application of the technique in possibly violent situations. In the literature review, Shockency (1999) pointed out that both undergraduate and graduate social work students are only slightly aware of the possible work-related violence perpetrated by clients against social workers in the field because they are not educated or taught in their class curriculum about the safety risk factors associated with the social work profession. However, as seen in Table 7, most respondents have knowledge about de-escalating technique, but they believe they need more education to acquire more skills to effectively apply the techniques in possible violent situations.

To further explore the relationship between the students' knowledge, skills, and the application of de-escalating technique the researcher asked questions on the survey to gain insight on the participants' attitudes regarding the possibility of having more trainings and if de-escalating technique skills could help them prevent possible violent situations. As shown in chapter 4, the majority of students reported that having additional trainings in the application of de-escalating techniques would very likely result in an increase of effectively use the technique. (See Table 6). This response shows that the majority of students need more trainings of de-escalating techniques to help them apply the technique effectively in possible violent situations when working with clients.

Discussion

The data collected from the surveys revealed that MSW students' who have knowledge and practice skills of de-escalating techniques, also use the techniques while working with clients. This study was approaching significance in answering the research question of what is the relationship between MSW students' knowledge, skills, and their application of de-escalation techniques to reduce violent situations in the work-place?

Violence against social workers has been documented through many studies, and research recognizes the serious impacts that violence against workers can have, and offers some strategies for agencies on avoiding violence and supporting workers. After police officers, social workers are most at risk for being victims of client violence at work (Newhill, 1995). However, the majority of research conducted does not focus on the solution focused approaches and education in de-escalation skills or education in preventing violence (Newhill, 1995; Ringstad, 2009; Spencer, & Munch, 2003). In

addition, most of the research are focused on current practicing social workers, and failed to include social work students and those newly entering the field of social work.

Focusing on the importance of MSW students' practice skills in the application of the de-escalation technique when working with clients that exhibit violent behavior is crucial, because the literature suggests that social workers are abused and can even be killed by their clients (Shockency,1999). Furthermore, increasing the MSW students' awareness about potentially violent situations while working with clients will benefit the students by increasing their safety while in their field placement and may result in promoting trainings and possibly a de-escalation of violent situations course elective for students who need to learn more about the application of de-escalating techniques at CSUS.

This research is important to the social work profession because without awareness of the issue of violence, proper training, and supervisory support, MSW students at CSUS may find themselves responding to potentially violent situations in ways that might escalate the client's aggression even more, which can put both their life and their client's life at risk. Both veterans' social workers and social work students could be exposed to violence including physical assault, verbal assault, and harassment (Criss, 2010). An informal survey at the University of Southern California discovered that violence perpetrated by clients against graduated students was one of the most prevalent issue (Star, 1984).

None of the literature reviewed addressed students' knowledge about violence against social work students that are newly entering the field of social work, but focused on current practicing social workers. Another gap in the literature is the lack of focus on

de-escalation skills or education in preventing violence (Brockmann, 2002; Koritas, Coles, & Boyle, 2010; Littlechild, 1995; Littlechild, 2005; Macdonald & Sirtich, 2001; Newhill, 1995; Noris, 1990; Ringstad, 2005; Ringstad, 2009; Spencer, & Munch, 2003). It is imperative for social work students to have practice skills in de-escalating violent situations as this helps to ensure that their personal lives and their clients' lives are safe.

Implications for Social Work Practice and Policy

In this study, there are implications for social work practice and policy. Presently, there is little research on this topic and the information gained from this study will help to increase the knowledge base, and hopefully the information gathered by the researcher for this study will encourage others to do additional research on this topic.

On the micro level, it would be ideal for social work students to be self-aware of their level of knowledge and practice skills in the application of de-escalating technique in possible violent situations, so that they may be more effective when working with clients that exhibit violent behavior. If the information that was presented in this study is utilized by students, then it would hopefully increase their own self-awareness as to the reasons it is imperative to have practice skills in the application of de-escalating techniques and how having those skills can benefit their ability to serve clients.

Students who enter the social work profession need to be aware that social workers have been found to be eight times more likely to experience physical assault perpetrated against them by their clients than any other average worker (Budd, 1999). It is in this context that few social work students know that when they enter the social work

profession they may be targets of violence perpetrated against them by their clients in the work place.

On the mezzo level, the findings in this study can better prepare social work educators to meet the needs of their students and to assist in training future social workers. By knowing that violence may negatively affect both the workers' ability to effectively deliver services and their commitment to the social work profession (Brockmann, 2002), education can be adapted and tailored to address those issues. For example, one of the top reasons that students need to be aware of possible violence against workers is that social workers across the nation serve the most vulnerable members in our communities through mental health services systems for both children and adults. The National Association of Social Workers (NASW) (2013), guidelines for social worker safety in the workplace states that workers should be "well trained in the use of their agency's risk assessment instrument and supervised to ensure consistency in practice" (p. 18).

Therefore, without awareness of the issue of violence, proper training, and supervisory support, MSW students at California State University, Sacramento (CSUS) may find themselves responding to potentially violent situations in ways that might escalate the client's aggression even more, which can put both their life and their client's life at risk. The present social work curriculum at CSUS tends to focus on micro level practice. However, with safety being one of the top issues for social workers entering their profession, which involves risky situations without proper safety training because

safety is not a topic covered in most social work curriculum (Kelly, 2010), there should possibly be a greater focus on macro level work in the curriculum.

Also on the mezzo level, it would be beneficial if students gathered together to advocate for their own safety. By joining together students can help educate and empower each other as well as helping to increase the advocacy voice for students which in turn may result in trainings to learn to better apply the de-escalation techniques in potentially violent situations.

On the macro level, this research study can indirectly influence the policy makers who will understand how beneficial trainings on de-escalating techniques are to social work students which will in turn lead to safer field-placements for students. The findings of this study can also help improve current policies for social work education needs by examining to see if new policies can be put into place to better train future social workers on how to de-escalate possible violent situations. These policy changes could occur on various levels, such as adding training classes to the curriculum of social work education, trainings, or N.A.S.W. education recommendations. Possible policy changes could include requiring social work classes to address the issue of violence against social workers, and requiring social work students to attend classes on de-escalating techniques to help them acquire more practice skills in how to apply the techniques in possible violent situations against them. Before implementing any policy changes, further studies need to be done to make sure that policies that could harm future social workers or clients are evaluated and not put into place.

Recommendations

The purpose of this study was to explore the relationship between the knowledge and skills of MSW students and their ability to apply de-escalation techniques to possibly reduce violent situations. It also explored whether the current knowledge and skills of MSW students are effective, and examined the need for trainings to better apply the de-escalation techniques in potentially violent situations. The following section includes a recommendations list of future research and resolution to better improve the findings of this study:

- The researcher could have extended the sample population to all social work students currently enrolled at CSUS. This can also help resolve the number of students' distribution by having bachelor of social work students participate in the research study.
- For future studies, researcher could survey participants in a neutral environment which will help eliminate participants concerns about privacy.
- Further research study suggestions include researcher using a larger sample size to create a generalized study, surveying multiple social work schools, and include both bachelor and master of social work students in the study.
- Social work education could focus more on macro level practice. This can be done through specific classes on macro level practice or amended curriculum in the classes that currently exist.

- Social work education could address students' safety to help students acquire more practice skills in the de-escalation technique to reduce the risk of getting hurt while working with clients.
- Social work education programs could require students to attend trainings during their education to address their level of knowledge, practice skills, and the application of de-escalating technique which in turn may result in a safer environment when working in the field.
- Further research could be conducted on this topic to better understand students' level of knowledge, skills, and their ability to apply de-escalating techniques and implement changes to better train future social workers. Future studies should include qualitative research, larger populations, and representative sampling methods.

Limitations

This study contained several limitations that were briefly mentioned in Chapter 3. One of the primary limitations is the sampling methods that were utilized in this study. Convenient sampling is regarded as weak in respect to validity and generalization. Furthermore, the sampling method includes biases because the sample is not considered random and representative of the entire population of the respondents who are being studied. The findings of this study cannot be generalized to larger populations because of the limited number of participants (n=54) and because representative sampling was not utilized. The survey research is regarded as weak in both validity and causality because it is limited in the questions and fails to address all aspects of the issue of violence. In this

research, the researcher asked several questions of the students regarding their knowledge and practice skills about de-escalation techniques as opposed to more detailed questions regarding the level of the students' applications of the techniques when in possibly violent situations while working with clients.

In addition, this research project does not include qualitative data to further explore in-depth the students' skills, knowledge, and their application of de-escalation techniques in possibly violent situations. Additionally, the data collected is limited to only first-year Master of Social Work (MSW) students currently enrolled in the program at California State University, Sacramento (CSUS) who were recruited through the Social Work 202, 235A, and 250 classes, and therefore the findings are not applicable to the larger population outside this educational institution due to the non-participation of outside students. Lastly, the researcher created the survey instrument, and further testing would be needed to improve the instrument's reliability and validity. In order to further the research on this topic the study needs to be duplicated, larger populations need to be sampled, and representative probability sampling methods should be used.

Conclusion

The primary purpose of this research is to examine the relationship between knowledge, skills, and the application of de-escalation techniques of MSW students to reduce violent situations in the work-place. The secondary purpose of this research is to study whether the current knowledge and skills of MSW students are effective, and to examine if there is a need for trainings to better apply de-escalation techniques in potentially violent situations. This research can then lead to recommendations regarding

the development of trainings and/or academic course work on de-escalation techniques at CSUS. The research data and findings from Chapter 4 were discussed. The literature review from Chapter 2 and theoretical framework from Chapter 1 were used to analyze the findings of the study. The implication of social work practice and policy were also presented. Additionally, the research study limitations and recommendations were discussed for future research suggestions regarding the level of the practice skills and the application of de-escalating techniques by MSW students. The findings of this study suggest that additional research needs to be done on the topic so that it can be better understood and applied. This study needs to be duplicated in order to validate the findings. Additional in-depth studies could also further explore this topic and add to the body of knowledge of the application of de-escalating techniques in possibly violent situations when working with clients.

APPENDIX A

Consent to Participate in Research

PARTICIPATION CONFIRAMATION / LETTER OF INFORMED CONSENT

STUDY TITLE: MSW Students' Knowledge, Skills, and the Application of De-escalating Techniques to Reduce Violent Situations in the Work-Place

My name is Ramona Vilceanu and I am a second-year graduate student in the Division of Social Work program at California State University, Sacramento (CSUS). I would like to invite you to participate in my research study because your knowledge and skills of the application of de-escalating technique in potentially violent situations are important when working with clients. If you choose to participate in this study, please complete the following survey. The survey will take no more than 15 minutes to complete. The knowledge gained from this study it is hoped to benefit future social worker's use of de-escalating techniques. Trainings and course recommendations may also be suggested as a result of the findings from this study.

There are no known sociological and economic risks associated with your participation in this study. The questions in the survey ask about your level of knowledge and practice skills of de-escalating techniques in which you choose one answer. Because the surveys are paper surveys, other students in the classroom may come in contact with the information you provide, which could compromise confidentiality. However, the researcher will not know if you participated in the study; therefore, your identity will remain anonymous and your survey answers will also be kept confidential by the researcher all the time. Information collected will only be reported in aggregate format.

Among the measures taken to insure confidentiality is the encryption of all electronic data collected and/or entered into a database (data stored behind a secure firewall). Hard copied data will be maintained in a safe, locked location and any descriptive information collected will be destroyed by August 31 of 2018. You are free to withdraw your consent, skip answering any questions, and/or discontinue your participation in this study at any time. By choosing to complete and turn in this survey, you have given your implied consent and therefore agree to participate in this study.

I am highly appreciative of your time. Please fill free to contact the researcher, Ramona Vilceanu by email, at vilceanu@csus.edu if you have any questions. You may also contact Maria Dinis, Ph.D., MSW, the thesis advisor/chair, at (916) 278-7167, or by email at: dinis@csus.edu. For questions about your rights as a participant in this research study, please call the Office of Research Affairs, California State University, Sacramento, (916) 278-5674, or by email at: irb@csus.edu.

I have read the descriptive information on the Research Participation cover letter. I understand that my participation is completely voluntary. My completion of the survey and handing it into the researcher implies that I am agreeing to participate in this study. I may keep this copy of the Research Participation cover letter for my record.

APPENDIX B

Survey

DE-ESCALATING TECHNIQUE QUESTIONNAIRE**Part I: Participant Data**

Instructions: Please choose only one answer for each question by checking one of the boxes.

1. What is your gender?

- Female
- Male
- Non-Binary/Third Gender
- Transgender
- Prefer to Self-Describe
- Prefer not to say

2. What is your age range?

- 20-29
- 30-39
- 40-49
- 50&Over

3. What is your Ethnicity?

- African American/Black
- American Indian
- Asian American
- Caucasian
- Latino(a) American
- Other: Please Specify: _____

4. What is your current academic enrollment?

- MSW I
- MSW II

5. What is your MSW Student Program Enrollment?

- 2 - Year Full-Time
- 3 - Year Full-Time
- 3 -Year Weekend Intensive

6. What is your Undergraduate Major/Degree?
- Social Work (BA)
 - Psychology (BA)
 - Child Development (BA)
 - Other (please specify): _____
7. What is your Primary Practice Orientation (Theoretical Orientation)?
- Crisis Intervention
 - Psychosocial
 - Cognitive
 - Behavioral
 - Systems
 - Other (please specify): _____
8. What is your Field Placement Status?
- Currently enrolled 1st year
 - Currently enrolled 2nd year
 - No field experience
9. How many years of experience do you have in the social work profession?
- No previous experience, other than MSW field placement
 - 1-2 Years
 - 3-5 Years
 - 5 + Years
10. Do you have knowledge of MSW students experiencing any direct exposure to violence perpetrated by clients against them in their practicum setting?
- Yes
 - No

11. IF YOU ANSWER YES TO QUESTION # 10, PLEASE ANSWER THIS QUESTION, IF YOU ANSWER NO TO # 10 SKIP THIS QUESTION AND GO TO PART II.

What type of client violence are you aware of that MSW students were exposed to while in their practicum setting?

- Physically assaulted by a client
- Threatened with physical harm by a client
- Verbally abused by a client
- Threat of lawsuit by a client
- Other. Please describe: _____

Part II: Participant Questionnaire

Instructions: Please choose only one answer for each question. Thank you!

1. Do you have any knowledge about de-escalating techniques?

- Yes
- No

2. Do you have any practice skills in the application of de-escalating techniques?

- Yes
- No

3. If you answer no to question #2, please skip this question, go to question #4.

How did you acquire the practice skills in the application of de-escalating techniques?
Please check all that apply.

- Education/class
- Training
- Readings (i.e., text books, journals, etc.)
- Field placement
- Work experience
- Other (please specify): _____

4. Do you think that in the social work profession MSW students will be exposed to possibly violent situations in which they will be required to apply de-escalating techniques?

- Yes
- No

5. Do you think it is imperative for MSW students to have practice skills in the application of de-escalating techniques?

- Yes
- No

6. Do you think that having practice skills in applying de-escalating techniques may save the life of a social worker?

- Yes
- No

7. How much knowledge in the application of de-escalating techniques would you say that MSW students have?

- None
- They know very little
- They have a foundation
- They know more than the average classmates/co-workers
- Other. Please describe: _____

8. If MSW students were to be exposed to a violent situation perpetrated against them by a client, to what extent do you think they might feel confident to effectively apply de-escalating techniques?

- Very confident
- Mostly confident
- Somewhat/partially confident
- Not at all confident

9. Where do you think MSW students feel is the most beneficial environment to acquire practice skills in de-escalating techniques? Please check all that apply.

- Through a class or training while in the MSW program
- While in the field placement
- After graduation through their employer
- Other. Please describe: _____

10. Do you think that MSW students need more education to acquire practice skills in de-escalating techniques?

- Yes
- No

11. Do you think that de-escalating techniques skills could help MSW students prevent possible violent situations?

- Yes
- No

12. Do you know of any MSW students who have ever used ANY de-escalating techniques with clients?

- Yes
- No

13. Which de-escalating techniques did they apply? Please check all that apply.

- Listening by staying calm and in control of themselves
- Asking questions
- Using positive language
- Other (please explain): _____
- None

14. Do you think MSW student applying the technique(s) in the question above was helpful in de-escalating the situation?

- Yes
- No
- I don't know if they applied any de-escalating techniques with clients

15. Do you know how many times MSW students have used de-escalating techniques?

- At least once
- 2-3 times
- 4 or more times
- Never
- I don't know

16. Do you know if MSW students used de-escalating techniques with the following population? Please check all that apply.

- Children
- Adults
- Children and Adults
- None
- I don't know

17. Do you know which of the following populations MSW students think respond best to de-escalating techniques? Please check all that apply.

- Children
- Adults
- None
- I don't know

18. Do you know which therapy application works BEST for MSW students when working with potentially violent clients?

- Crisis Intervention therapy
- Behavioral therapy
- Cognitive therapy
- Solution focused-therapy
- Other (please specify)
- I don't know

19. If MSW students had additional training in de-escalating techniques, how likely do you think they would consider applying those techniques in their practice?

- Extremely unlikely
- Unlikely
- Likely
- Very likely

20. Do you think MSW students would recommend adding a training course on de-escalating techniques to the Department of Social Work Curriculum?

- Yes
- No

21. Do you think MSW students would recommend adding an elective course on de-escalating techniques to the Department of Social Work Curriculum?

- Yes
- No

Thank you for participating in this research!

APPENDIX C

Human Subject Letter



CALIFORNIA STATE UNIVERSITY, SACRAMENTO

DIVISION OF SOCIAL WORK

To: Ramona Vilceanu

Date: September 6, 2017

From: Research Review Committee

RE: HUMAN SUBJECTS APPLICATION

Your Human Subjects application for your proposed study, **“MSW Students' Knowledge, Skills and the Application of De-escalating Techniques to Reduce Violent Situations in the Work-Place”**, is **Approved, Exempt, with Recommendation(s)**. Please review the recommendations below and discuss with your thesis/project Advisor. You do not need to resubmit your Human Subjects Application to the Research Review Committee.

Your Human Subjects Application Protocol # is: **17-18-008**. Please use this number in all official correspondence and written materials relative to your study. Your file will be shredded three years from this approval date. Approval carries with it that you will inform the Committee promptly should an adverse reaction occur, and that you will make no modification in the protocol without prior approval of the Committee.

Recommendation(s)

Recommendation 1: Questionnaire needs copy-editing and some of the items should include “check all that apply.”

The committee wishes you the best in your research.

Research Review Committee members Professors Maria Dinis, Serge Lee, Kisun Nam, Francis Yuen, Jude Antonyappan, Teiahsha Bankhead

Cc: Dinis

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