
Workplace Violence and Mental Illness

by Kristine M. Empie

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Reviewed by William V. Pelfrey, Jr

Although several incidents of workplace violence have drawn significant media attention over the past few years, little research exists to explain these dramatic occurrences. Kristine Empie's text is a detailed description of her research on the causes, correlates, and utility of workplace violence committed by the mentally ill against mental health workers.

Empie selected routine activities theory as her theoretical framework. This is based on the research of Hindelang (1978) and Cohen and Felson (1979), and posits that the customs and activities of victims significantly influence their probability of victimization. The theory is relatively common in the criminal justice literature and has been used to explain property and violent crimes in a number of studies. Its explanatory power has increased as researchers have incorporated such variables as offender motivation, the importance of facilities and place, and security issues. Empie elected to test this theory in a mental health setting, since the mentally ill are typically viewed as more violent than the population at large. Thus her research considers the routine activities of mental health workers and their potential risk of violent victimization by the mentally ill.

Interviews with and surveys of mental health employees formed the primary sources of data. Research questions considered such factors as employee training, experience, and education; severity of mental illness; location and nature of the facility; and other variables. Through the use of a survey, the author found the likelihood of victimization of health care workers by patients correlated with night and weekend shift work; with the gender of employee (males are more likely to be attacked); and with working in an acute, crisis facility. Conversely, Empie found that the level of education, the training and the years of experience of health care workers, the number of co-workers present, the types of patient mental disorders, as well as the location of the facility, did not predict workplace violence. These findings contradicted data gleaned from employee interviews, where factors such as experience, training, and education were thought to influence how workers behave and how they avoid incidents of violence. An obvious deficit of this research design is the reliance on self-report data—the design and findings would have been significantly supported if a data set of reported incidents had been incorporated in the analysis. A second key shortfall of this research is the dearth of psychological information: the author does not adequately consider such key issues as job satisfaction, the psychological impact of previous incidents of violence, the stress produced by threats or actual violence, and other similar variables.

Workplace Violence and Mental Illness is a well-written and detailed report of a single study—a survey and series of interviews conducted with mental health employees to collect self-report data. The book strongly resembles a dissertation in that an extensive, widely-encompassing literature review is presented (particularly on routine activities theory) but is only marginally revisited later in the book. Additionally, the depth of the study is significant (substantial detail on analysis and findings) while generalizability is limited. Several interesting and potentially useful

findings emerged in this research and a number of policy recommendations are proposed that would be of interest to mental health administrators and employees. This book would be useful to those who are interested in conducting research in mental health settings—several interesting findings merit further study. While security implications are evident in these findings, that is not the principal intent of this text.

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