



GLOBAL GUIDELINE | Workplace Violence | Prevention and Response

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A practical, evidence-informed framework for organizations operating across jurisdictions

PURPOSE Help organizations identify, prevent, manage, respond to, and learn from workplace violence and harassment across physical, psychological, sexual, and technology-enabled forms.

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General guidance only. Local legal, labor, privacy, disability, firearms, and emergency-management requirements must be reviewed before implementation.

Global Prevalence Indicators · ILO / Lloyd's Register Foundation / Gallup Survey (2022)	
22.8%	Nearly 23% of people in employment reported experiencing workplace violence or harassment during their working life.
17.9%	Experienced psychological violence or harassment at work — the most commonly reported category.
8.5%	Experienced physical violence or harassment at work.
6.3%	Experienced sexual violence or harassment at work.

Source: ILO, Lloyd's Register Foundation and Gallup (2022). Percentages overlap because a person may experience more than one form.

Executive Summary

Workplace violence is an occupational safety, security, human-resources, public-health, and business-continuity risk. It can occur in any sector and may be committed by criminals, customers or patients, current or former workers, or individuals connected to an employee through a personal relationship. It may be a single severe event or a repeated pattern that causes physical or psychological harm.

A credible program does not wait for an explicit threat. It builds reporting trust, examines behaviors and circumstances rather than stereotypes, assesses hazards by job and location, applies layered controls, manages concerning situations through a multidisciplinary team, prepares people for emergencies, and supports recovery after an incident.

"Violence and harassment on the job are all too common: more than 1 in 5 workers worldwide have experienced it. And it comes at a remarkable economic price — researchers have put the cost of workplace violence at as much as US\$56 billion annually, and that is likely an undercount."

— Florida International University / Phys.org, April 2024

CORE PRINCIPLE: No single control is sufficient. Effective prevention combines leadership, worker participation, work design, physical security, reporting, fair case management, behavioral threat assessment, training, emergency readiness, and continuous improvement.

The scale of the economic burden underscores urgency. **Workplace violence costs U.S. businesses an estimated \$121–\$130 billion each year** in medical expenses, legal fees, lost productivity, and reputational damage (SC Training, 2025; Market.biz, 2026). In healthcare alone, the American Hospital Association estimates the annual cost

at \$18.27 billion. Despite this, only approximately 30% of businesses have established formal safety and health programs (OSHA). The business case for prevention is clear: Liberty Mutual research found that for every \$1 invested in workplace safety, approximately \$3 or more is saved in related costs.

1. Purpose and Scope

This guideline applies to employees, contractors, temporary workers, visitors, customers, clients, patients, vendors, volunteers, and others interacting with the organization. It covers conduct at facilities, remote and mobile workplaces, business travel, customer sites, employer-provided transportation or accommodation, work-related events, and work-related digital communications.

- Prevent violence and harassment by identifying hazards and reducing opportunity, exposure, and escalation.
- Provide safe, accessible, and non-retaliatory methods to report incidents, threats, concerning behavior, and near misses.
- Establish proportionate assessment, intervention, emergency response, investigation, support, and recovery processes.
- Respect privacy, due process, labor rights, disability protections, and local law while prioritizing safety.

"Workplace violence is any act or threat of physical violence, harassment, intimidation, or other threatening behavior that occurs at the work site. It ranges from threats and verbal abuse to physical assaults and even homicide. Acts of violence constitute the third-leading cause of fatal occupational injuries in the United States."

— U.S. Occupational Safety and Health Administration (OSHA)

2. Definitions and Classification

2.1 Working definition

Workplace violence and harassment means a range of unacceptable behaviors, practices, or threats — whether a single occurrence or repeated — that aim at, result in, or are likely to result in physical, psychological, sexual, or economic harm in circumstances connected with work. This broad approach aligns with ILO Convention No. 190 and is compatible with definitions used by OSHA, NIOSH, HSE, Safe Work Australia, and Canadian occupational-safety authorities.

""Violence and harassment" in the world of work encompasses a range of unacceptable behaviors and practices, or threats thereof, whether a single occurrence or repeated, that aim at, result in, or are likely to result in physical, psychological, sexual or economic harm, and includes gender-based violence and harassment."

— ILO Convention No. 190, Article 1 (2019)

2.2 Source-of-threat typology

Type	Source	Typical examples
I — Criminal intent	No legitimate relationship to the organization	Robbery, theft-related assault, trespass, terrorism, opportunistic attack.
II — Customer/client	Legitimate service relationship	Aggression by a customer, patient, family member, passenger, student, inmate, or member of the public.
III — Worker-on-worker	Current or former worker	Threats, assault, bullying, harassment, retaliation, sabotage, or grievance-driven targeted violence.
IV — Personal relationship	Relationship outside work	Domestic or family violence, stalking, coercive control, or threats that enter the workplace.

2.3 Common forms

- Physical: assault, pushing, striking, kicking, biting, sexual assault, use or display of a weapon, or homicide.
- Threatening or intimidating: direct, conditional, implied, written, verbal, gestural, or online threats; menacing conduct; stalking; doxxing; unwanted surveillance.
- Psychological: repeated humiliation, bullying, mobbing, coercion, verbal abuse, discriminatory abuse, and deliberate social or professional isolation.
- Sexual and gender-based: unwanted sexual attention, harassment, coercion, assault, and violence directed at a person because of sex or gender.
- Technology-enabled: abusive calls, messages, email, social media, video meetings, location tracking, impersonation, and threats directed at remote workers.
- Property and operational: vandalism, arson, sabotage, bomb threats, intentional contamination, and credible threats against facilities or operations.

3. Extent and Impact of the Problem

3.1 Global picture

The first global survey by the ILO, Lloyd's Register Foundation, and Gallup found that 22.8% of employed people had experienced at least one form of violence or harassment at work during their working life. Psychological violence and harassment was the most commonly reported category (17.9%), followed by physical (8.5%) and sexual (6.3%). The categories overlap.

The burden is not distributed equally. Young people — those aged 15–24 face the highest global rates at 23.3% — along with migrants, wage and salaried workers, and people who had experienced discrimination were among the groups with elevated exposure. Women were particularly exposed to sexual violence and harassment, accounting for 72.5% of nonfatal workplace violence cases in the U.S. (BLS, 2021–

2022). Differences among regions should be interpreted carefully because laws, definitions, social norms, survey methods, and willingness to disclose vary.

"The statistics we see may only be the tip of the iceberg. A highly cited study found that just 12% of workplace violence incidents in healthcare were reported — meaning 88% of incidents went undocumented. Many healthcare workers still feel that violence is "part of the job," and this mindset not only perpetuates the crisis but prevents meaningful safety improvements from being implemented."

— CENTEGIX Healthcare Violence Analysis (2026), citing Arnetz et al. (2015)

This underreporting pattern extends across all sectors. Studies indicate that only 20% to 50% of workplace violence incidents are formally reported, with some healthcare-specific research finding underreporting rates exceeding 89% (MedCity News, 2026). It is estimated that up to 80% of incidents go unreported across healthcare settings, hindering organizational efforts to monitor risk, evaluate interventions, and implement protective measures (ScienceDirect, 2025). Barriers include organizational culture, time constraints, fear of retaliation, and a perception that reporting leads to no meaningful action.

3.2 Regional and sector indicators

Source/geography	Indicator	What it shows
Global — ILO (2022)	22.8% lifetime exposure to at least one form	Violence and harassment is not a marginal or sector-specific issue.
Global health sector — WHO	8–38% suffer physical violence during their careers; many more face threats or verbal aggression	Direct public contact, distress, illness, and service pressures elevate risk.
Global health sector — WHO	Up to 62% report workplace violence; verbal abuse 58%, threats 33%, sexual harassment 12%	Nonphysical violence is frequent and should not be excluded from prevention systems.
EU — Eurofound 2021	12.5% experienced adverse social behavior at work	Women and frontline workers faced higher exposure; customer-facing work roughly doubled risk.
U.S. — BLS 2021–2022	57,610 serious nonfatal workplace-violence cases; 72.8% in health care/social assistance	Severe recorded injuries are concentrated in specific sectors and understate less severe or unreported events.

U.S. — BLS 2024	470 workplace homicides (up from 458 in 2023); 379 caused by firearms	Lethal violence remains a material occupational fatality risk; firearms dominate.
U.S. — NSC 2023–2024	54,230 injuries from assaults resulting in days away from work	Nonfatal violent injuries carry significant productivity and human costs.
U.S. Healthcare — AHA	\$18.27 billion in annual costs to hospitals from workplace violence alone	Violence carries massive systemic economic consequences beyond individual harm.

Comparability note: figures use different populations, timeframes, definitions, and reporting thresholds. They should not be ranked as if they measure the same outcome.

3.3 Consequences

- People: injury, disability, death, acute stress, anxiety, depression, sleep disruption, post-traumatic symptoms, damaged trust, and effects on witnesses and families.
- Organization: absenteeism, presenteeism, turnover, workers' compensation, medical and legal expense, reduced productivity, damaged morale, recruitment challenges, and reputational harm. Research shows that one serious violent incident causes an average of 8 sick days per affected worker and a 50% productivity decline in the short term.
- Operations and customers: service interruption, reduced quality, errors, security restrictions, loss of public confidence, and business-continuity impacts.
- Culture: normalization of abuse, silence, retaliation fears, and weakening confidence in leadership when reports are ignored or handled inconsistently.
- Financial: globally, researchers estimate the cost of workplace violence at up to \$56 billion annually — and that figure is likely an undercount (FIU/Phys.org, 2024). U.S. estimates range from \$121–\$130 billion per year across all sectors when accounting for medical expenses, legal fees, and lost productivity.

"The effects of workplace violence are profound, including physical and emotional suffering, destroyed careers and harm to companies and society — and it comes at a remarkable economic price. Researchers have put the cost at as much as US\$56 billion annually, and that is likely an undercount."

— Dr. Yilmaz Akgunduz, Florida International University (Phys.org, April 2024)

4. Risk Factors and High-Risk Conditions

Risk is created by the interaction of people, tasks, environment, organization, and external conditions. Risk factors are not proof that a person will become violent and should not be used as a profile.

Domain	Examples to assess
Work/task	Handling cash, valuables, drugs, or high-value assets; enforcing rules; denying services; delivering bad news; collections; inspections; terminations; working with distressed, intoxicated, cognitively impaired, or justice-involved persons.
Staffing/operations	Lone work, mobile work, home visits, night work, understaffing, long waits, high workload, inadequate supervision, unpredictable demand, isolated reception or parking areas.
Physical environment	Uncontrolled access, poor lighting, blind spots, inadequate separation or escape routes, unsecured weapons or tools, weak communications, lack of alarms, and unsuitable interview or service rooms.
Organizational	Poor safety climate, inconsistent discipline, tolerated bullying, unclear policies, weak reporting, slow case handling, lack of consultation, restructuring, layoffs, labor disputes, and inadequate training.
External/digital	Local crime, civil unrest, conflict, terrorism, online targeting, doxxing, public controversy, domestic violence, stalking, and threats to executives or public-facing staff.

IMPORTANT: Taxi drivers are more than 20 times more likely to be murdered on the job than other workers, according to OSHA. Retail workers account for 24.6% of all workplace homicides (BLS). Healthcare workers experience a violence-related injury rate of 14.2 per 10,000 FTE — nearly five times the private industry average of 3.1 per 10,000 (BLS, 2021–2022). These figures underscore that risk is concentrated and actionable — not inevitable.

"30% of respondents say they've witnessed violence in the past five years, up from 25% in 2024. Even more concerning, 15% say they've been directly targeted — a sharp increase from just 12% the year prior. Gen Z workers, who hold the most customer-facing roles, are both the least likely to receive training and the least confident in their ability to manage tense situations."

— Traliant 2025 Workplace Violence Report

5. Key Challenges

- Underreporting: workers may see abuse as "part of the job," believe reporting changes nothing, fear retaliation or blame, lack time, distrust confidentiality, or

find the process difficult. Globally, 55% of victims believe reporting incidents would be a waste of time (ILO World Risk Poll).

- Inconsistent definitions: organizations may count only physical injury and miss threats, bullying, sexual harassment, online abuse, near misses, and domestic-violence spillover.
- Fragmented ownership: security, HR, legal, safety, compliance, operations, communications, and mental-health resources may hold separate pieces of the same risk.
- Hindsight bias and profiling: dramatic incidents can encourage simplistic "red flag" lists. No demographic, diagnosis, or isolated behavior reliably predicts violence.
- Privacy and legal variation: information sharing, monitoring, background checks, medical information, labor consultation, firearms, and mandatory reporting differ by jurisdiction.
- Unequal exposure: frontline, lone, mobile, migrant, temporary, young, female, and public-facing workers may face higher risk or greater barriers to reporting.
- Weak learning systems: focusing only on blame can suppress reporting and prevent analysis of work design, supervision, environment, and control failures.
- Generational and technological gaps: Gen Z and remote workers face distinct risk profiles. Over 61.5% of remote workers have endured bullying or harassment in digital environments (SC Training, 2025), yet technology-enabled violence is frequently excluded from conventional prevention programs.

"Underreporting of workplace violence incidents may be due to healthcare workers' beliefs that violence is an expected part of the job, beliefs that no action will be taken against perpetrators, fear of negative consequences from reporting, or a lack of easily accessible reporting systems. The Joint Commission recommends that healthcare leaders make it clear that it is the organization — rather than the victims of violence — that is responsible for addressing workplace violence."

— PSNet / Agency for Healthcare Research and Quality (2023)

KEY INSIGHT: Relying solely on lagging injury data may significantly underestimate actual exposure. Prevention strategies must be built with current trends — not only historical averages — in mind. For every fatal workplace violence incident, there are hundreds of nonfatal assaults, threats, and intimidation events that go unmeasured (Silent Beacon, 2026).

6. Prevention Framework

6.1 Leadership, policy, and worker participation

Research consistently demonstrates that organizational culture and leadership commitment are the single most powerful determinants of whether violence prevention programs succeed or fail. A safety climate in which workers trust that reports will be taken seriously — and that they will not face retaliation — is the prerequisite for all other controls.

"Companies with formal violence prevention policies see a 25% reduction in incidents, underscoring the critical need for structured, documented safety programs."

— Market.biz Workplace Violence Statistics 2026

- Issue a written, leadership-endorsed policy defining prohibited conduct, scope, reporting routes, non-retaliation, immediate danger procedures, case handling, confidentiality limits, and consequences.
- Assign an executive sponsor and a cross-functional program owner. Include worker representatives and local leadership in risk assessment and control design.
- Set behavioral expectations for employees and third parties. Incorporate relevant requirements into contracts, visitor rules, customer communications, and vendor management.
- Review the program at least annually and after serious incidents, major operational change, new sites, or emerging threats.

6.2 Hazard identification and risk assessment

- Review incident, injury, security, complaint, grievance, absence, turnover, customer-abuse, near-miss, and police-call data without relying on a single system.
- Consult workers through interviews, focus groups, anonymous surveys, and walk-throughs, including night shifts, remote workers, and contractors.
- Assess by task, location, shift, population served, event, travel route, digital exposure, and foreseeable trigger — not only by job title.
- Prioritize risks by likelihood, potential severity, exposure frequency, control gaps, and vulnerability of affected workers.
- Document corrective actions, owner, due date, residual risk, and verification of effectiveness.

6.3 Layered controls

Control level	Examples
Eliminate/substitute	Redesign high-conflict processes; remove unnecessary cash handling; provide remote or appointment-based alternatives; avoid lone work where feasible.
Engineering/physical	Access control, reception barriers where justified, lighting, visibility, safe rooms, duress alarms, communications, CCTV consistent with law, safe parking, secure interview layouts, and multiple exit paths.
Administrative/work design	Staffing levels, check-in systems, two-person tasks, appointment/visitor rules, queue management, service-recovery processes, safe termination planning, travel protocols, and escalation procedures.

People/capability	Role-specific de-escalation, supervisor response, reporting, conflict management, trauma-informed support, emergency exercises, and BTAM competency.
Personal protective measures	Only where risk assessment supports them; must be legally compliant, organization-approved, trained, maintained, and integrated with policy. PPE must not substitute for higher-level controls.

6.4 Reporting and intake

- Offer multiple routes: supervisor, HR, security, safety, ethics line, digital portal, and emergency number. Provide anonymous or confidential options where lawful and feasible.
- Permit reporting by victims, witnesses, managers, contractors, and third parties. Encourage near-miss and concerning-behavior reporting.
- Make the process accessible across languages, disabilities, shifts, work locations, and employment categories.
- Acknowledge reports promptly, explain next steps and confidentiality limits, protect against retaliation, and provide feedback when possible.
- Separate emergency reporting from routine complaints so imminent threats reach emergency services and site security immediately.

BEST PRACTICE: Implementation of straightforward and easy-to-use reporting systems combined with visible support and action from leaders can help address underreporting barriers, reduce the burden on staff, and prevent further burnout. The key message to workers must be: it is the organization — not the individual — that is responsible for addressing workplace violence. (AHRQ/PSNet, 2023)

6.5 Behavioral Threat Assessment and Management (BTAM)

BTAM is a structured, multidisciplinary process for identifying, assessing, and managing concerning situations. It is not prediction, diagnosis, or a substitute for a criminal or HR investigation. It focuses on observable behavior, context, capability, stressors, targets, access, protective factors, and changes over time.

"People put a lot of effort and funds into target hardening, but that mainly keeps outsiders from coming in and committing violence in your organization. Without BTAM, insiders are not adequately accounted for. You would never tolerate your workers only solving 50 percent of a problem — as security professionals, why would we want to model solving only 50 percent of this problem?"

— FBI Behavioral Analysis Unit Veteran, ASIS Security Management (2026)

"BTAM is not about predicting the future but about preparing for it. It is about staying one step ahead of people on a trajectory toward violence and intervening in ways

that prevent harm and promote healing. The hallmark of effective BTAM teams is the ability to balance legal interventions with compassionate, ethical solutions."
 — Police1.com — Behavioral Threat Assessment and Management in Practice
 (April 2025)

Team function	Minimum practice
Membership	Security, HR, legal, safety, operations, and behavioral-health expertise; law enforcement or external specialists as needed.
Assessment	Gather corroborated information; consider grievance, fixation, threats or leakage, target selection, planning, unusual acquisition or preparation, access to means, escalation, and protective factors.
Management	Use proportionate options such as support, conflict resolution, work adjustments, access changes, safety planning, welfare checks, legal measures, disciplinary action, or law-enforcement referral.
Review	Assign a case owner, document rationale, set review dates and observable conditions, and continue monitoring until risk is acceptably managed or transferred.

IMPORTANT: *A threat should always be taken seriously, but the absence of a direct threat does not mean absence of risk. Conversely, a mental-health condition, protected characteristic, unpopular opinion, or ordinary workplace conflict is not by itself evidence of dangerousness.*

Research by the U.S. Secret Service and the FBI has consistently found that **targeted violence is rarely impulsive**. Perpetrators typically move along a "**pathway to violence**" — from ideation to research to planning to preparation to probing/breach to attack. BTAM's core purpose is to identify individuals on this pathway early enough to intervene effectively. School safety experts, law enforcement, and the U.S. Departments of Education, Justice, and Homeland Security have cited research indicating that warning signs are **usually evident before an act of targeted violence** — and that a collaborative, multidisciplinary approach can identify effective interventions (Michigan MDHHS, DHS CP3, 2024–2025).

6.6 Domestic violence, sexual violence, and stalking

- Provide a confidential disclosure route and individualized workplace safety planning without requiring unnecessary personal details.
- Consider access restrictions, reception alerts, parking or schedule changes, remote-work safety, communication filtering, escorts, leave, and referrals to specialist services.
- Protect survivor privacy while sharing only the information necessary to manage credible safety risks.
- Address alleged perpetrator conduct consistently with law, policy, due process, and safety requirements. Do not penalize a victim for seeking assistance.

CONTEXT: Domestic and intimate partner violence does not stay at home. It frequently follows survivors to the workplace — through calls, visits, threats, and physical presence. Employers have both a legal duty and a moral obligation to plan for this scenario, including individualized safety planning, discrete workplace adjustments, and referrals to specialist services. The survivor — not the manager — should lead decisions about disclosure and safety measures.

7. Response and Recovery

7.1 Immediate response

- Any person facing imminent danger should contact local emergency services and follow the site emergency action plan.
- Activate internal emergency communications, accountability, lockdown/evacuation or other protective actions appropriate to the threat and facility.
- Do not require untrained personnel to physically intervene. Preserve life and avoid actions that obstruct emergency responders.
- Account for remote, mobile, disabled, visitor, contractor, and non-native-language populations in emergency planning.
- Coordinate communications through an authorized incident-management structure; avoid speculation and protect sensitive personal information.

"Active mitigation of workplace violence risks is achievable, especially through interpersonal outreach, active listening, and building connection with at-risk individuals. Investing in behavioral threat assessment and management does cost money — and it is always hard to prove the value of prevention — but it is worth the time and resources."

— FBI Behavioral Analysis Unit, as cited in ASIS Security Management (June 2026)

7.2 Post-incident actions

- Provide medical assistance, psychological first aid, employee assistance, survivor advocacy, and practical support. Do not compel immediate group debriefing.
- Secure and document the scene; preserve CCTV, access, communications, digital records, and other evidence under a defined chain of custody.
- Meet notification duties involving regulators, law enforcement, insurers, worker representatives, customers, or families as applicable.
- Conduct fair, trauma-informed investigations. Separate fact finding, threat management, disciplinary decisions, and root-cause review while coordinating them.
- Complete an after-action review covering people, process, technology, environment, communications, and control effectiveness; track actions to closure.

- Monitor delayed impacts, retaliation, recurrence, team functioning, absence, and return-to-work needs.

CRITICAL: Post-incident psychological support must be offered — not imposed. Compelling workers to participate in immediate group debriefing sessions after critical incidents can be counter-productive. Evidence supports individual-led, survivor-controlled access to mental health resources, employee assistance programs, and specialist counseling. Peer support and trained responders can supplement but not substitute for professional care.

8. Training and Exercises

Training is only effective when it is **role-specific, scenario-based, culturally and linguistically appropriate, and reinforced through regular exercises**. Completion rates alone do not demonstrate competence or control effectiveness. Research finds that **Gen Z workers — the most customer-facing generation — are both the least likely to receive training and the least confident in their ability to manage tense situations** (Traliant, 2025). Organizations must close this gap proactively.

Audience	Required capability
All workers	Definitions, expected conduct, reporting, non-retaliation, situational awareness, de-escalation boundaries, emergency actions, and available support.
Supervisors	Receive reports, recognize escalation, preserve confidentiality, initiate immediate safeguards, document facts, avoid retaliation, and refer cases.
High-risk roles	Scenario-based de-escalation, duress systems, lone-worker protocols, escape options, customer/service-specific risks, and post-incident actions.
BTAM members	Structured professional judgment, information sharing, bias mitigation, legal/privacy boundaries, case management, documentation, and external coordination.
Remote/technology workers	Digital threat recognition, platform abuse reporting, location privacy, secure communication, and escalation procedures for technology-enabled harassment.
Executives/crisis team	Decision authority, emergency management, business continuity, family assistance, communications, and after-action accountability.

"Violence prevention is not only possible but also achievable through diligent collaboration, proactive intervention, and a commitment to community safety. BTAM teams exemplify the power of shared expertise and communication in de-escalating potentially volatile situations."

— Police1.com — Behavioral Threat Assessment and Management in Practice (April 2025)

9. Governance and Responsibilities

Role	Core responsibility
Executive leadership	Set expectations, resource the program, review material risks and metrics, and hold leaders accountable.
Operations/site leaders	Implement controls, consult workers, maintain emergency readiness, and correct local hazards.
Security	Threat intake, physical-security assessment, BTAM coordination, emergency liaison, and evidence protection.
Human Resources	Policy, employee relations, fair process, accommodations, non-retaliation, support, and disciplinary coordination.
Safety/EHS	Hazard assessment, injury reporting, control verification, worker consultation, and regulatory alignment.
Legal/privacy/compliance	Jurisdictional requirements, information sharing, preservation, investigations, and privilege where applicable.
Communications/PR	Internal and external communications during and after critical incidents; reputation and media management.
Workers	Follow controls, report hazards and incidents, participate in training, and seek emergency assistance when needed.

10. Measurement and Continuous Improvement

Use a balanced dashboard. A temporary increase in reports may indicate improved trust rather than worsening violence. Interpret metrics together and avoid incentives that suppress reporting.

"A culture that rewards zero incident reports is a culture that ensures zero learning. Organizations that suppress reporting in the name of optics are not making their workplaces safer — they are simply making the danger less visible."

— Workplace Safety Research Consensus — adapted from multiple practitioner sources

Measure	Example indicator
Exposure	Incidents and near misses by type, source, location, task, shift, severity, and workforce population.

Reporting trust	Employee awareness of channels; perception of safety in reporting; anonymous-report share; retaliation allegations.
Responsiveness	Time to acknowledge, triage, apply interim safeguards, close investigations, and complete corrective actions.
Controls	Risk assessments current; duress tests; access exceptions; lone-worker check compliance; high-risk action closure.
Capability	Scenario-based competency, supervisor readiness, BTAM case reviews, and exercise corrective-action closure.
Outcomes	Injury severity, recurrence, lost time, absence, turnover, psychological support uptake, and operational disruption.
Financial	Workers' compensation claims, legal costs, productivity loss, recruitment and retention costs attributable to violence events.

11. Implementation Roadmap

Phase	Priority actions
0–30 days	Appoint sponsor and owner; define emergency channels; preserve existing incident data; review serious open cases; map legal requirements and stakeholders.
31–90 days	Adopt policy; establish multidisciplinary team and intake protocol; conduct baseline risk assessments; launch accessible reporting; implement urgent physical/operational controls.
3–6 months	Deliver role-based training; exercise emergency plans; establish domestic-violence support; integrate vendors and contractors; create dashboard and case-quality review.
6–12 months	Verify control effectiveness; audit high-risk sites and shifts; benchmark culture; test continuity and communications; complete management review and improvement plan.
Year 2+	Continuous improvement cycle: annual program review, updated risk assessments, refreshed training, governance reporting, and benchmark against emerging industry standards.

12. Manager Quick-Response Guide

Situation	Manager action
Immediate danger or violence underway	Move to safety, contact emergency services, activate the emergency plan, and notify designated security/incident leadership.
Threat, weapon concern, stalking, or escalating behavior	Do not investigate alone or promise secrecy. Preserve exact words/evidence, implement immediate safeguards, and refer urgently to Security/BTAM/HR.

Harassment, bullying, or customer abuse	Ensure immediate safety, listen without blame, document facts, explain confidentiality limits and next steps, and report through the designated process.
Domestic-violence disclosure	Ask what would increase safety, protect privacy, connect the worker with trained resources, and create an individualized workplace safety plan.
Technology-enabled abuse or digital threat	Preserve screenshots/records, do not attempt to contact the source, escalate to security and IT immediately, and review the affected worker's digital exposure.
After an incident	Arrange care, preserve evidence, prevent retaliation, support affected workers and witnesses, and participate in investigation and corrective-action review.

13. Baseline Self-Assessment

- A written global policy exists and is localized for applicable jurisdictions.
- The organization uses the four-source typology and includes physical, psychological, sexual, and online conduct.
- An executive sponsor, program owner, and multidisciplinary BTAM capability are assigned.
- Risk assessments cover tasks, locations, shifts, remote/mobile work, travel, public contact, organizational change, and domestic-violence spillover.
- Employees and contractors have multiple accessible, non-retaliatory reporting routes.
- Emergency and routine reports are clearly separated and routed.
- High-risk sites have layered physical, operational, and staffing controls.
- Managers and workers receive role-specific training and scenario practice.
- Digital and technology-enabled threats are addressed in policy and training.
- Domestic violence, stalking, sexual violence, and survivor-support protocols are in place.
- Incident response includes medical care, evidence preservation, communications, investigation, recovery, and after-action review.
- Metrics measure reporting trust, response time, controls, severity, recurrence, and corrective-action closure.
- A financial/economic impact metric is tracked and used to make the business case for the program.
- The program is reviewed annually and after serious incidents or major change.

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