Intimate Partner Violence and the Workplace
Consequences and Disclosure

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This article examines the context and consequences associated with intimate partner violence (IPV) when it traverses the workplace. It reports the findings of a study of 34 employees in one workplace pertaining to the prevalence of recent IPV, the consequences of batterers’ actions on employees’ work performance, the context associated with the disclosure of IPV in the workplace, the types of workplace supports that were received, and the effects of supports on employment outcomes. Implications for social work practice are discussed.

**Keywords:** intimate partner violence; employment; workplace supports

According to data from the National Violence Against Women Study, a national telephone survey on violence against women conducted from November 1995 to May 1996, 22.1% of women and 8% of men experience intimate partner violence (IPV) sometime in their lives, and 1.3% of women and 0.9% of men experienced IPV in the previous year (Tjaden & Thoennes, 2000). These figures suggest that approximately 1.3 million women and 834,732 men are subjected to IPV annually in the United States alone (Tjaden & Thoennes, 2000). Although these numbers are alarming, researchers believe that IPV is underestimated because victims may underreport such incidents on surveys and because data sources may not identify victim-perpetrator relationships (Bachman & Salzman, 1995; Straus & Gelles, 1990).

In addition, research has found that IPV not only disrupts home life, but can have serious implications in the workplace. According to the National Crime Victimization Survey, between 1992 and 1996, an average of 18,000 people were assaulted at work by intimate partners each year (Warchol, 1998). Women were five times more likely than men to be attacked at work by a current or former intimate partner (Bachman, 1994). The spillover of IPV into the workplace has major ramifications for victimized employees and the workplaces in which they are employed. For instance, one study of female IPV victims (Swanberg & Logan, 2005) found that nearly all the participants reported some form of job interference resulting from IPV. The short-term consequences of IPV on employment may include increased absenteeism, reduced productivity, or job loss. For some victimized women, holding a job for a long period becomes difficult; hence their hourly earnings over the long term may be gravely affected. Furthermore, over time, potential employers may become skeptical of a victimized employee’s inconsistent work history, making it difficult for her to obtain meaningful work.

At the organizational level, IPV results in significant costs to the employer in the form of increased production, medical, and liability costs (Moe & Bell, 2004). Yet workplaces...
have been slow to consider IPV a serious form of workplace violence. As a result, few employers have taken the necessary steps to prevent IPV from spilling over into the workplace and to address the issue effectively when it does spill over to reduce its potential negative ramifications.

Organizations may be slow to recognize IPV as a workplace problem because many workplaces have failed to consider how gender assumptions influence workplace practices, policies, and cultures. The mainstream view of waged work in the 20th century was that men were the paid workers and women, who were unpaid, met the needs of family members (Ferree, 1995; J. Williams, 2000). According to this perspective, women’s paid employment was a strain on the family (Acker, 1989, 1990) and men’s paid employment was the usual practice (Pleck, 1977). This perspective established an organizational norm that presumed that employees had few or any family responsibilities. This gendered perspective was the backdrop against which contemporary organizational policies and practices were created. In fact, some feminist theorists have argued that gender is integrated into the ongoing processes at work, including the organizational culture and norms (Acker, 1990; Connell, 1993; Fenstermaker, West, & Zimmerman, 1991; West & Zimmerman, 1987). Acker (1990) posited that gender assumptions consciously or unconsciously underlie many of the practices and policies that are evident in modern-day workplace cultures. Swanberg (2004) further argued that gendered assumptions have prevented organizations from developing workplace cultures that are responsive to female employees’ work and family needs. IPV that traverses the workplace is an extreme form of work-family conflict that organizations have essentially ignored until recently.

Likewise, considering the economic impact of IPV on its victims and their workplaces is a fairly new area of inquiry for the social work profession. Social workers have historically focused on the individual, rather than the societal-organizational, ramifications of IPV (Pyles & Postmus, 2004). Specifically, the profession has viewed IPV predominantly as an individual mental health issue, not within the larger economic, public health, criminal justice, and social justice context (Danis & Lockhart, 2003). Consequently, social workers’ primary approach to addressing IPV has been through individual mental health counseling (Danis & Lockhart, 2003). Furthermore, social work research pertaining to IPV has focused predominantly on the prevalence, causes, risk factors, assessment, and treatment (Pyles & Postmus, 2004) of IPV, particularly in the areas of child welfare, drug and alcohol abuse, and diversity. Although social work research on IPV and diversity has included impoverished and unemployed participants, it has rarely focused on individuals who are employed or on their workplaces. Only since the recent changes in welfare legislation, with its work requirements and time limits, has IPV been recognized as a barrier to work, thus requiring attention from the social work profession. The limited focus on employed IPV victims is particularly disconcerting, because IPV may decrease victims’ employability (Tolman & Rosen, 2001) even though employment can provide the financial self-sufficiency that women often need to overcome violent relationships (Campbell, Rose, Kub, & Nedd, 1998).

Thus, although greater attention has been paid in recent years to reducing incidents of IPV, as is evidenced by such policy initiatives as the Violence Against Women Act (1994, 2000), and to reducing the risks of violence in the workplace (Brownell, 1996), the consequences of IPV on victims’ employment and the places where they work have received limited attention (Lloyd, 1997; Riger, Ahrens, & Blickenstaff, 2000). Moreover, little research has examined the role of employment, employers, and social workers in helping victims cope with IPV and employment (Lloyd, 1997; Riger et al., 2000; Swanberg & Logan, 2004).
2004). To the best of our knowledge, no study has investigated the prevalence of workplace supports for victims of IPV and the subsequent effect of workplace supports on job performance and job retention, nor has any study used a sample of IPV victims who are employed in one workplace. In response to these limitations in research, the pilot study reported here examined issues pertaining to the intersection of employment and IPV, including whether victims of IPV disclosed their situation to someone at work, the prevalence and types of workplace supports that are available to victims of IPV, and employees’ perceptions of the workplace supports. In light of these findings, implications for social work practice and research are discussed.

Review of the Literature

IPV and Women’s Employment

Perpetrators of IPV frequently hassle their victims at the victims’ workplaces because the work location often remains unchanged even when the residence has changed (for instance, when women leave their partners), so they know where their partners or former partners are located at certain times (Chenier, 1998; Libbus, Sable, Hunke, & Anger, 1999). According to the literature, perpetrators engage in a variety of actions that sometimes act as formidable barriers to employability and job performance. These actions fall into three primary categories of interference tactics: sabotage, stalking, and on-the-job harassment (Swanberg, Logan, & Macke, 2005, 2006).

**Sabotage** consists primarily of actions that prevent the victim from reaching the workplace either on time or at all; as such, these actions predominantly take place in the home. Examples include failing to provide reliable child care, disabling the family car, hiding or destroying the victim’s clothes, depriving the victim of sleep, turning off the alarm clock, and cutting off the victim’s hair to cause embarrassment (Brandwein & Filiano, 2000; H. Johnson, 1995; Shepard & Pence, 1988; Swanberg & Logan, 2004; Zachary, 2000). **Job-related stalking** consists of unwelcomed threatening or harassing behaviors that are directed at one individual, such as lurking just beyond the workplace’s premises (Chenier, 1998; Kinney, 1995; Raphael, 1996; Tjaden & Thoennes, 1998, 2000; Zachary, 2000). Examples include a perpetrator looking into the window of the workplace, waiting for the victim at the end of the workday, or waiting for the victim along her commuting route (Raphael, 1996; Swanberg & Logan, 2004). **On-the-job harassment** consists of the batterer harassing the victim while at work (H. Johnson, 1995; Kinney, 1995; Lloyd, 1997; Raphael, 1995, 1996; Shepard & Pence, 1988; Tolman & Rosen, 2001). Examples include appearing at work, not allowing the victim to complete her or his work functions (Brush, 2002; Friedman & Couper, 1987; Swanberg & Logan, 2004, 2005; Taylor & Smith Barusch, 2004), and making frequent telephone calls to the victim or his or her coworkers or supervisors (Brush, 2000; Friedman & Couper, 1987; Swanberg & Logan, 2004). It should be noted that the primary difference between on-the-job stalking and on-the-job harassment is that with stalking, the perpetrator does not actually appear on the workplace premises or cross the workplace boundary, whereas with on-the-job harassment, the perpetrator physically appears at the workplace or makes telephone calls to the victim or to the victim’s coworkers or supervisors.
As a result of these job-interference tactics, employed victims of IPV may experience (1) lower productivity, (2) higher absenteeism rates, (3) more frequent tardiness, and (4) higher job turnover rates and job losses than may nonvictims (Raphael, 1996; Shepard & Pence, 1988; Tolman & Rosen, 2001; Zachary, 2000). For instance, a few small cross-sectional studies have found that the productivity of employed IPV victims can be compromised by partner victimization because of the victims’ inability to concentrate (East, 1999; H. Johnson, 1995; Zachary, 2000). Research has also found that 23% to 55% of employed IPV victims reported being absent from work because of the abuse, with 4% to 6% reporting that they were frequently absent (Raphael, 1996; Shepard & Pence, 1988; Tolman & Rosen, 2001). Moreover, abusers’ actions can lead to higher job turnover rates for victims, because victims change jobs more frequently than do nonvictims (Lloyd, 1997; Lloyd & Taluc, 1999; Zachary, 2000). The costs associated with the negative effects of IPV on victims’ job performance are estimated to be $18 million in lost annual earnings (Greenfeld et al., 1998) and nearly $1 billion in lost lifetime earnings (National Center for Injury Prevention and Control, 2003).

Whereas batterers’ actions negatively affect victims’ employment and job performance, the relationship between IPV and employment patterns is complex; the findings on this issue are inconclusive with regard to the exact effects of IPV on victims’ employability (Tolman & Raphael, 2000). As Tolman and Raphael reported, some victims of IPV struggle to be employed, others manage to obtain employment but fail to maintain it, and still others cannot obtain employment at all. The conclusion that can be drawn at this time is that IPV interferes with employment but does not necessarily prevent it (Tolman & Raphael, 2000). The data suggest that IPV does not affect a victim’s employment status; rather, it affects the victim’s ability to maintain consistent employment (Browne, Salomon, & Bassuk, 1999; Lloyd, 1997; Tolman & Raphael, 2000).

**IPV and Its Effects on the Workplace**

IPV also places a heavy financial burden on employers. It has been estimated that 10,000 to 60,000 IPV incidents occur each year in workplaces (Bachman, 1994; Warchol, 1998). Such incidents, according to the Bureau of National Affairs (1990), cost employers $3 billion to $5 billion annually. Expenditures include lost productivity, employee turnover, and health care-related costs. Separating the costs of lost productivity from paid work and household labor from the medical costs associated with IPV, the National Center for Injury Prevention and Control (2003) estimated that IPV costs nearly $1 billion in lost productivity. Given these high costs, executives are now beginning to recognize that IPV is a workplace issue (Family Violence Prevention Fund, 2003). Despite this recognition, few companies have instituted formal policies for dealing with this social ill (P. Johnson & Indvik, 1999; Kinney, 1995).

In fact, some studies have found that employers sometimes respond to IPV incidents that are perpetrated on the job by firing the victims (Browne et al., 1999; Shepard & Pence, 1988; Swanberg & Logan, 2005). Such actions exacerbate the economic abuse from which the victims often already suffer, because economic abuse inhibits the victims’ ability to leave their abusive partners, and research has documented the importance of financial independence in overcoming violent relationships (Campbell et al., 1998; Gelles, 1976; H. Johnson, 1995; Strube & Barbour, 1984). Alternatively, several private companies, such as Polaroid, Liz Claiborne, and Marshall’s (Brownell, 1996), have pioneered in providing supports to employees who are dealing with IPV issues.
Work, Family, and Gendered Organizations

Research has suggested that when organizations offer workplace supports, such as training supervisors to be responsive to employees’ family caregiving and personal concerns or providing flexible scheduling arrangements, employees are able to respond more effectively to their multiple responsibilities (Bond, Galinsky, & Swanberg, 1998). The same organizational policies have been related to reduced job turnover and absenteeism and enhanced productivity (Bond et al., 1998). Despite the evidence that creating “family-friendly” workplaces is good for employees and employers, the majority of organizations have not integrated policies and practices into workplace cultures that would assist employees in meeting the often-conflicting demands of home and work (Galinsky & Bond, 1998).

As we previously mentioned, organizations still adhere to the workplace structures and gendered norms that were created in the early 20th century. As a result, J. Williams (2000) stated that companies view every employee as the ideal worker, one with little or no family or personal responsibilities who can work unlimited hours. As a result, work-family strain often ensues when employees attempt to respond to the multiple and often-conflicting demands of home and work. Thus, adhering to a gendered perspective encourages the continuation of the misnomer that what happens at home stays at home. Furthermore, the gendered perspective prevents organizations from creating work environments that are responsive to employees’ diverse work, family, and personal responsibilities, including the responsibilities and needs of women who are victimized by their partners.

Although research on the use of workplace supports to assist employees in meeting caregiving and personal responsibilities is growing (see Allen, Herst, Bruck, & Sutton, 2000, for a review; see also Bond et al., 1998), few studies have investigated the use of workplace supports to assist IPV victims. Brownell (1996) suggested that organizations have three types of workplace supports available to IPV victims: prevention, protection, or intervention services. Examples of these services include IPV education programs for supervisors and employees, flexible work hours, relocation of the victim’s work station, screening of telephone calls, security escorts to the employee’s vehicle, counseling services through Employee Assistance Programs (EAPs), referrals to outside IPV services, and assistance with safety planning (Brownell, 1996; P. Johnson & Indvik, 1999; Kinney, 1995; Moe & Bell, 2004; Reynolds, 1997). Some research on informal workplace supports for victims of IPV has suggested that social supports at work may play a significant role in helping employees cope with IPV while at work (Swanberg & Logan, 2004).

Despite recent attempts by large companies to offer various types of workplace supports to employees who experience IPV, no research has explored the outcomes of such supports or the issue of disclosure. In addition, it is not clear what role social workers should play in assisting IPV victims when the violence spills over into the workplace. Providing assistance with victims’ employability is critical, because financial independence is often a prerequisite for escaping the abuse. Therefore, it is necessary for social workers to conduct research on the intersection of IPV and the workplace. Toward this end, the small pilot study reported here examined (1) the prevalence of IPV at one job site; (2) the actions taken by batterers that interfere with victims’ job performance and the consequences of these actions on the victims job performance; (3) the rate at which employed victims disclose abuse at work and to whom; and (4) the types of support offered by the workplace, how the supports were received by the victims, and whether the supports influenced the victims’ ability to maintain employment.
Methodology

Description of the Data

Secondary data from a workplace violence survey that was conducted at one medium-size municipal government were used to determine the prevalence of IPV among an employed population and to determine the consequences of IPV in the workplace. The data were collected in early spring 2001 via a survey of full-time employees of a midwestern municipal government. All 2,428 employees received a copy of the survey in their paycheck envelopes, along with a letter from the municipality’s mayor and chief financial officer requesting their participation. The employees were given 3 weeks to complete the survey and to return it to the researchers in the preaddressed, postage-paid envelope that was provided. Included with the survey were the researchers telephone numbers for assistance or questions pertaining to the survey instrument. Extra surveys were made available to employees at staff meetings and at designated places within their divisions. Follow-up postcard reminders were enclosed in paycheck envelopes 2 weeks later. In addition, flyers reminding the employees to complete the survey were posted in key governmental buildings, and advertisements were included in weekly employee newsletters and division memos during the 3-week period. Of the 876 surveys that were returned, 868 were complete and contained usable data. The response rate of 35%, although limited, was higher than most employee surveys that had been conducted in this organization. That is, over the previous 5 years, employee surveys at this organization resulted in a response rate of less than 10%.

The demographic percentages of the participants were somewhat comparable to those of the entire population of employees in the municipality, according to data that were provided to the researchers at the time of the survey. For instance, of the participants and the total city workforce, 60% were male and 40% were female. Similarly, 83% of the participants and 85% of the total city workforce identified as White; the mean age for the sample was 41, compared to 39 for the total city workforce; and 33% of the participants versus nearly 30% of the total city workforce had supervisory responsibilities at this work site. With regard to educational levels, 18% of the participants completed high school or a general equivalency diploma, 27% had postsecondary school experience, 41% had a 2-year or 4-year degree, and 14% had graduate degrees (information on the educational levels of the total city workforce was not available).

Within the total sample, 34 participants reported experiencing IPV within the previous year. Thus the analyses presented in this article are based on the sample of recent IPV victims ($n = 34$).

Measures and Analytic Procedures

IPV was defined as intentional emotional and/or physical abuse by a spouse, ex-spouse, boyfriend or girlfriend, ex-boyfriend or ex-girlfriend, partner, or date. The employees were asked whether they experienced such violence ever, within the past year, or within the past month. If they had experienced IPV within the previous year, they were asked to note the frequency of the occurrence, from multiple times a day to monthly. The types, prevalence, and frequency of job-interference tactics used by batterers were measured using an adapted scale by Riger et al. (2000). The original 12-item measure has a reliability of .82, whereas the adapted 17-item measure has an internal consistency of .83. The job-interference instru-
ment included items such as job harassment, in-person harassment, threatening the employee at work, threatening coworkers at work, and physically restraining the employee from going to work.

The consequences associated with victimization for job performance were measured using a 7-item scale created by the first author with a reliability of .78. The employees were asked to report how often each item had occurred, if ever, during the previous year, from never to multiple times a day. Examples of items included the inability to concentrate at work because of abuse at home, going home sick because the victim was too upset to work, and calling in sick because of abuse at home.

A binary yes/no item was included to determine if the employees disclosed the victimization to someone at work, followed by a list of possible people at work whom they might have told. An open-ended item was used to glean the employees’ reasons for opting to disclose or not to disclose the IPV and to glean the employees’ perceptions of colleagues’ or supervisors’ reactions to the disclosure. The types of support, both formal and informal, that were offered by the workplace or someone at work were measured by providing the employees with a list of 12 yes/no items. Examples of formal support items were the provision of information about resources, referral to the EAP, and providing a flexible schedule; examples of informal support items were a coworker’s provision of a listening ear, break time spent with coworkers, and a coworker’s assistance with personal matters. The employees were asked to report their level of satisfaction with the supports (from 1 = extremely satisfied to 4 = extremely unsatisfied), whether the supports helped them stay employed at the organization (0 = no, yes = 1) and whether having a job helped them cope with the violence at home (0 = no, 1 = yes).

The data were analyzed using SPSS data-analysis software (SPSS, 2001). Univariate and bivariate analyses were used to describe the sample. Chi-square analyses were conducted for interference tactics, workplace consequences, disclosure, and workplace supports by race and sex. Because of the small sample, the analyses of these two-by-two tables resulted in at least one cell having an expected frequency of less than 5. As a result, the significance figures for these analyses were drawn from the Fischer Exact Test, rather than from the Pearson chi-square value. Conducting chi-square analyses for variables that measure frequency (such as the frequency with which interference tactics occur) was not possible, because at least one cell had an expected frequency of less than 1. In addition, a content analysis was conducted on the open-ended questions pertaining to the context associated with the reasons for disclosing or not disclosing the victimization to someone at work, how work helped the employees cope with the violence at home, and how the employees coped with victimization while at work.

Sample

Of the 34 participants, 22 women and 12 men reported having been victimized by a partner in the previous year. (Given the limitations of the data, it was not possible to determine the gender of the batterers—that is, whether the IPV occurred between a man and woman, between two women, or between two men.) The mean age of these participants was 39, with a range of 18 to 60, and 24 identified as White and 10 identified as non-White. Six employees had a high school diploma or less, 10 had some postsecondary education, 11 had a 2- or 4-year college degree, and 7 had a graduate degree. Eighteen of these recent IPV victims had been employed at this workplace for 5 or fewer years, 8 had been employed for
6 to 15 years, and 8 had been employed for 16 years or more. Women were more highly represented among the participants sample than in the total sample, and compared to the total sample, the participants were slightly younger and more racially diverse and had comparable educational backgrounds.

Findings

Prevalence

The lifetime prevalence rate of IPV among the total sample (N = 868) was 19%, compared to 4% among the participants with recent IPV (n = 34). The lifetime prevalence rates were significantly higher for women than for men (33.7% versus 8.6%), F(1, 868) = 85.2, p = .000. No significant differences were found in the lifetime prevalence rates for the non-White versus the White participants (22.1% versus 18.2%). A significantly higher percentage of women than men reported experiencing victimization in the previous year (6.5% versus 2.3%), F(1, 868) = 8.99, p = .003. In addition, a significantly higher percentage of non-White than White participants reported experiencing recent victimization (7% versus 3.4%), F(1, 868) = 3.93, p = .047. Unless otherwise specified, the findings are presented on the basis of analyses conducted on 34 participants who had experienced IPV within the previous year.

Batterers’ Tactics and Their Consequences

Batterers relied on a wide variety of tactics to interfere with their victims’ professional lives. The most commonly reported interference tactic was harassment over the telephone, with 11 of the 34 participants reporting that phone harassment occurred at least on a monthly basis within the past year. White participants were more likely to report telephone harassment than were the non-White participants ((1, N = 31), p < .05). Other commonly reported interference tactics included: in-person harassment (n = 5), lying to victims’ co-workers (n = 4), undermining victims’ efforts to go to work or look for work (n = 4), and not showing up to care for children (n = 4). The occurrence of additional tactics as well as the frequency with which tactics occurred can be viewed in Table 1.

Participants experienced a range of work-related consequences associated with batterers’ actions including: inability to concentrate (n = 17), inability to perform the job to the best of the individual’s abilities (n = 14), leaving work to go home sick (n = 6), calling in sick (n = 4), and the inability to go to work or to call in sick (n = 4). The frequency with which these consequences occurred can be viewed in Table 2. There were no statistically significant differences by gender or race with regard to the types of workplace consequences experienced by victims.

Despite the negative workplace consequences that are associated with IPV, it is important to note the victims’ feelings and thoughts pertaining to their employment. The following comments from the open-ended questions illustrate that victimized employees are committed to and proud of their jobs: “[My work] made me feel important and needed”; “work was a release. . . . I took pride in focusing on my job”; “my self-esteem was strengthened by my work goals and workplace mission. It also offered me independence.”
Table 1
Number of Participants who Experienced the Following Types of Interference Tactics (N = 34)

<table>
<thead>
<tr>
<th>Type of Interference</th>
<th>Total Occurrence</th>
<th>Occurred Daily</th>
<th>Occurred Weekly</th>
<th>Occurred Monthly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harass on phone</td>
<td>11</td>
<td>1</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Harass in person</td>
<td>5</td>
<td>-</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td>Lie to coworkers about employee</td>
<td>4</td>
<td>-</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Doesn’t show up for child care duties</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>4</td>
</tr>
<tr>
<td>Undermine his/her efforts to go to work/look for work</td>
<td>4</td>
<td>1</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Bother coworkers</td>
<td>3</td>
<td>-</td>
<td>-</td>
<td>3</td>
</tr>
<tr>
<td>Threaten employee to make him/her leave work</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Threaten him/her at work</td>
<td>2</td>
<td>1</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>Steal vehicle keys or transportation money</td>
<td>2</td>
<td>1</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>Damage his/her car</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>Refuse to take him/her to work</td>
<td>1</td>
<td>-</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Lie about children’s well being to get you to leave work</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 2
Number of Participants who Experienced the Following Types of Work-Related Consequences (N = 34)

<table>
<thead>
<tr>
<th>Consequence</th>
<th>Total Occurrence</th>
<th>Occurred Daily</th>
<th>Occurred Weekly</th>
<th>Occurred Monthly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inability to concentrate</td>
<td>17</td>
<td>4</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Inability to perform job to best ability</td>
<td>14</td>
<td>4</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Go home sick because of abuse</td>
<td>6</td>
<td>1</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td>Call in sick because upset about abuse</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>4</td>
</tr>
<tr>
<td>Unable to go to work or call in sick</td>
<td>4</td>
<td>1</td>
<td>-</td>
<td>3</td>
</tr>
</tbody>
</table>

The Disclosure of Victimization

Fifteen victims of IPV disclosed the abuse to someone in the workplace, whereas the remaining 19 did not. Those who did disclose reported doing so for various reasons, including the need for support from friend (n = 8), the need for advice (n = 7), the need to express their feelings to someone (n = 6), the need for legal protection or safety (n = 5), the need to inform a supervisor of the reason for seeming “stressed out” (n = 4), and the need to tell a supervisor before someone else did (n = 2). The victims disclosed to the following people at work: a coworker (n = 10), an immediate supervisor (n = 4), a nonimmediate supervisor (n = 3), or another person in the workplace (n = 2). It is important to note that no disclosures were made to human resource professionals, EAP professionals, or security personnel. Furthermore, no significant differences were found in the disclosure of IPV or in those to whom the victims disclosed by race or sex.

The reasons for not disclosing fell into three main categories: The victim (1) thought that IPV was a personal issue and should not be brought into the workplace, (2) felt embarrassed...
and/or shamed, and (3) did not feel that people at work could be trusted. The following comments illustrate these themes: “[IPV is] a personal issue, not professional”; “It’s none of their business”; “It’s a personal problem. . . . I was taught that personal problems belong at home, not at work”; “I was ashamed and embarrassed”; “I was scared and really was shocked. . . . I didn’t think it would happen again”; “I thought it was my fault”; “I don’t trust anyone at work”; and “I didn’t feel as if I could share it.”

**Workplace Supports**

Disclosing participants \((n = 15)\) received a variety of workplace supports, the most common of which included a listening ear, coworker spending break time with victim to get victim’s mind off the situation, coworker assisting with personal matters, the receipt of information about resources, referral to a counselor, and the provision of schedule flexibility. Additional types of workplace supports as well as the number of participants reporting the receipt of each of these supports can be viewed in Table 3. The only significant statistical difference by sex or race in workplace supports was that female workers were more likely than male workers to report that a coworker assisted them with personal matters \((\chi^2(1, N = 15); p < .05)\). Specifically, among the participants who disclosed, 6 women and 2 men reported receiving assistance from coworkers with personal matters.

All the victimized employees who disclosed IPV were extremely satisfied or satisfied with the supports that were offered to them. In general, the participants described their colleagues’ and supervisors’ reactions to their disclosure as sympathetic, helpful, understanding, supportive, and concerned. In addition, 11 of the 15 participants who disclosed the IPV reported that the workplace supports helped them stay at their jobs, and 13 of the 15 reported that having a job helped them cope with the IPV. In qualitative responses, the participants reported that employment helped them cope with abuse because it provided them with (1) a source of income that eventually allowed them to escape the abuse, (2) a support network, (3) a distraction from the abuse, and (4) an empowering experience. These themes are illustrated in the following comments: “I would have never made it on my own without an income”; “working helped me support myself and helped me get out of a bad situation”; “[work provided me with] relief . . . friends were supportive and understanding”; “work helped me keep my mind on something else, or maybe you could say escape from the situation”; and “work made me feel important and needed.”

**Discussion and Implications**

The findings of this study provide further evidence that IPV is a social problem that has serious implications for victimized employees and the workplaces at which they work. The lifetime prevalence of IPV among the total workplace sample and among the total population of female employees was slightly higher than national trends. Consistent with national trends, the women were more likely than the men to experience IPV. However, a somewhat surprising finding was that a significant proportion of the victimized employees were men. Although it is difficult to discern the explanation for this finding, one reason may be that because men are infrequently surveyed about their victimization experiences, male victims may have been more likely to complete this survey because it provided an anonymous venue to report their victimization.
Table 3

Workplace Supports Received by Disclosing Victims (n = 15)

<table>
<thead>
<tr>
<th>Support Provided</th>
<th>Number of Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>A listening ear</td>
<td>13</td>
</tr>
<tr>
<td>Coworker spending break time with victim to get victim’s mind off the situation</td>
<td>8</td>
</tr>
<tr>
<td>Coworker assisting with personal matters</td>
<td>8</td>
</tr>
<tr>
<td>Provided information about resources</td>
<td>8</td>
</tr>
<tr>
<td>Provided a referral to a counselor or professional</td>
<td>6</td>
</tr>
<tr>
<td>Provided schedule flexibility</td>
<td>6</td>
</tr>
<tr>
<td>Provided an informational brochure</td>
<td>4</td>
</tr>
<tr>
<td>Provided workload flexibility</td>
<td>3</td>
</tr>
<tr>
<td>Helped to create a safety plan should the abuser show up at work one day</td>
<td>2</td>
</tr>
<tr>
<td>Provided an escort to the employee’s car at the end of the workday</td>
<td>2</td>
</tr>
<tr>
<td>Blocked intrusive (harassing) telephone calls from the abuser</td>
<td>1</td>
</tr>
</tbody>
</table>

The data revealed that telephone and in-person harassment were the two primary interference tactics that the batterers used, followed by undermining the victims’ efforts to go to work, failing to provide child care, lying to coworkers, and bothering coworkers. No significant differences were found in the types of interference tactics that the victims experienced by sex or race. The findings also imply that the victimized workers frequently had to contend with the batterers’ behaviors while on the job, because most of the victims had to cope with some form of interference tactic at least once a month. However, we speculate that this frequency may have been an underestimate either because the victims had become so accustomed to these actions that they inaccurately reported the frequency or because they feared the consequences from their employer if they were honest about the frequency of occurrences.

The reported consequences of the interference tactics demonstrate the negative effects that IPV may have on an employed victim’s capacity to fulfill her or his work responsibilities. More than half of the IPV victims reported that they had been unable to concentrate on their jobs at least once within the previous month, and half reported that they went home sick, called in sick, or just did not show up at least once a month. In many work environments, such work habits, prolonged over time, may result in job loss or in lost job opportunities, such as being promoted or receiving a raise. This situation is a special problem for employed women because they may depend on the income from their jobs to leave their abusers. Despite the negative work habits resulting from IPV, the findings also indicate that the victims were highly committed to their jobs. The participants indicated that employment empowers them emotionally and financially and helps them to cope with the violence. These highly desirable outcomes associated with employment, as well as the potential for employment to help victims escape their abusers, should encourage social workers to assist IPV victims with workplace issues.

Within the interdisciplinary field of work and family, workplace supports have been shown to ease the burdens that are associated with managing life on and off the job (Allen et al., 2000; Bond et al., 1998). However, for victims to receive such supports, supervisors or human resource managers must be familiar with the circumstances surrounding IPV and employees must feel comfortable telling a supervisor or human resource professional about the abuse. The stigma associated with IPV, in combination with the gendered workplace assumptions that are prevalent in many organizations, may act as a deterrent to seeking
support at work and therefore may put victims of IPV, most typically women, at risk of further danger. This study’s results suggest that less than half the 34 recent IPV victims opted to disclose their victimization to someone at work. When they did tell someone, they were twice as likely to tell a coworker as a supervisor and, consequently, were more likely to receive informal, rather than formal, supports. Confiding in a coworker or friend at work may be perceived as a safer option for employed victims. That is, telling a supervisor or human resource professional, employees may fear, could jeopardize their employment. This may be true if supervisors or human resource managers are unfamiliar with the issues surrounding IPV. This situation is a significant problem, especially among employees in low-status jobs, because in some communities it is difficult to find meaningful work that pays a living wage. Regardless of why the IPV victims opted to tell friends but not supervisors, the data suggest that the employer’s supports helped them stay employed and that maintaining steady employment, in turn, helped them cope with the abuse.

Among the employees who did not tell someone at work about the abuse, the stigma associated with victimization, lack of trust, and fear may have played a role in not disclosing their victimization. These findings are consistent with previous research (Swanberg & Logan, 2005) that has suggested that employed victims fear that disclosing IPV will result in the automatic loss of their jobs. The participants reported not disclosing their victimization out of the belief that IPV is a personal matter that is not to be shared at work. Although this belief is understandable, it may put the victim and her or his coworkers at risk of a potentially volatile situation should the batterer appear at work. This is an example of how the “ideal worker” expectation places employees and the people with whom they work at greater risk than if IPV victims, most often women, could openly disclose their situation without fearing that they will be perceived as “trouble employees.” These data highlight the importance of educating supervisors and employees, alike, about IPV and creating a workplace violence plan that incorporates the spillover of IPV.

Obtaining better insights into the dynamics of IPV within the context of the workplace would greatly benefit the field of social work and subsequently victims, especially female victims, because many victims may be dependent on their male or female batterers for financial security, and obtaining and maintaining employment may be a critical factor in leaving their abusers. The intersection between victimization and the workplace is a delicate balance between economic survival and safety. Given this situation, it is essential for social workers to act as a liaison between victims and their employers. At the microlevel, social workers who counsel employed IPV victims can integrate workplace and employment-related factors into their treatment sessions. For instance, safety plans may include strategies for dealing with the perpetrator if he or she appears at the workplace or on the route to work. In addition, social workers may provide guidance with issues pertaining to disclosure at work. Employed victims of IPV may need professional assistance to determine whether telling someone at work may jeopardize their employment or secure their safety. At the mesolevel, social workers, with the employee’s permission, may want to intervene on the employee’s behalf to explain excessive absences, erratic work behavior, or poor job performance. Social workers with expertise in IPV are also well trained to provide consultation to organizations about IPV and ways to create a safe work environment for all employees.

Facilitating the training of supervisors and employees in relation to IPV is another way in which social workers can act as an important resource to workplaces. On the basis of the findings from this study, victimized employees turn to their colleagues for support, which suggests that employees and supervisors need to be informed about the signs of IPV and
community-based resources. Preventive training may prevent IPV from spilling over into the workplace or minimize its effects. Social workers’ involvement at the organizational level as advocates for victims, organizational consultants, and organizational trainers may ultimately result in a degendered workplace that is sympathetic to the conflicting demands of home and work. At the macrolevel, advocating for the passage of local, state, and national policies to eradicate IPV and to protect its victims is an ideal role for the profession because social workers are proficient in linking the microlevel effects with the macrolevel consequences, or vice versa.

The findings of the study call for further research on the effects of IPV on women’s employment. First, a larger and a more rigorous investigation of the effects of IPV on women’s employment and the places where they work is needed (see Swanberg et al., 2005). Inquiry into the short- and long-term consequences of IPV on employed victims’ job performance and economic well-being is needed. Second, a broader investigation of the intersection of IPV and work should also examine the effects that the spillover of IPV has on secondary victims, that is, other people in the workplace who may be directly or indirectly affected by it. Understanding these spillover effects on primary and secondary victims could assist workplaces in creating organizational practices and policies that are aimed at reducing the stigma associated with IPV and strengthening safety in the workplace. Third, an in-depth investigation of employees’ reasons for disclosing or not disclosing their victimization to people at work could enhance the training of supervisors and managers, human resource policies and practices, and workplace-specific IPV educational campaigns. Finally, additional research should further our understanding of the short- and long-term impact of workplace supports on employment patterns of IPV victims, including which workplace supports are most effective in helping victims maintain employment.

Limitations of the Study

Although this study was one of the first to investigate these issues in relation to victims who are employed at one workplace, it was fraught with limitations. First, because the study was of a small sample of employed IPV victims \( n = 34 \), readers should be cautious in generalizing the findings to other situations and should be aware that the investigation was exploratory and the results were preliminary. Moreover, the data were collected at one work site, and thus workplace effects that were not included in the survey design may have influenced the findings. Second, the survey design used a one-item self-report measure to identify whether or not employees had experienced IPV. We suspect that if a more in-depth measure of IPV, such as the abbreviated Conflict Tactics Scale (Straus, 1990), had been used to determine the prevalence of lifetime and recent IPV, the numbers might have been higher. Third, the study used a self-report approach in collecting the data, which may have contributed to biased reporting of certain behaviors. However, a self-report approach has been used before with exploratory research (Edin & Lein, 1997; Schein, 1995; C. Williams, 1996). The fourth limitation of the study pertains to the potential for a selection bias, because the participants may have differed from the nonparticipants in a significant way. Such a selection bias may be partly responsible for the higher prevalence rates of IPV within the previous year among our sample compared to national prevalence rates for both female and male employees. Last, the study did not ask the participants for information about the batterers. Thus, it is impossible to know if violence against both the female and male participants was perpetrated by male or female partners. Nonetheless, the results pro-
vide useful information on the prevalence of IPV within an employed sample at one job site; the types, frequency and consequences of the batterers’ job-interference tactics; and the context and consequences of disclosing victimization to someone at work. Furthermore, the study was one of the first to examine the spillover of IPV into the workplace at one job site, thereby expanding previous investigations by examining employers’ responses to employees’ disclosure of IPV and the presence and effects of workplace supports.

In conclusion, the findings raise serious concerns about the safety and economic security of employed IPV victims and their coworkers. The stigma associated with IPV often silences victims, even when disclosure could enhance their and their coworkers’ safety and security. Furthermore, the findings suggest that social workers could be beneficial in helping employed victims of IPV maintain their jobs and stay safe. Finally, the findings raise questions about whether workplace supports, in combination with social services that are aimed at addressing job retention among IPV victims, could help reduce the economic insecurity experienced by many victims of IPV. Examining these issues in greater depth could improve the safety of victims and their coworkers and the economic security of IPV victims.

References


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