Workplace Violence in Applied Behavior Analysis: Prevalence and Victimization Response Training

By

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Abstract

Workplace victimization involves an employee performing an act of violence towards another employee within the work environment. Prevalence data of workplace victimization within the field of behavior analysis do not currently exist. Additionally, workplace victimization literature focuses primarily on preventing the occurrence of such incidents. Therefore, the purposes of this study were to (a) collect data regarding the prevalence of workplace victimization within the field of behavior analysis and (b) use remote behavioral skills training to teach responding to workplace victimization. Results indicated that those working within applied behavior analysis experience workplace victimization resulting in negative outcomes (e.g., decreased job satisfaction) and have limited training and policies regarding workplace violence. In addition, remote behavioral skills training was effective in teaching all three participants a response to workplace victimization. This study expands the literature on the prevalence of workplace victimization in applied behavior analysis and training victimization responses in the workplace.

Keywords: workplace violence, workplace victimization, behavioral skills training, applied behavior analysis

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Training

Between the years of 2011 and 2018, the United States Bureau of Labor Statistics (2020) reported an increasing trend in workplace violence within the healthcare field from 11,690 incidents to 20,790 incidents. Incidents of workplace violence often result in increased anxiety (Hauge et al., 2010; Verkuil et al., 2015), decreased job satisfaction (Hauge et al., 2010), increased absenteeism (Hauge et al., 2010; Nielsen et al., 2016), and increased health problems (Park & Ono, 2017; Xu et al., 2018). Workplace violence can be perpetrated by consumers with intent for criminal acts (e.g., robbery), consumers receiving services from the target workplace (e.g., hospital patients, students), and current or former employees of the targeted workplace (e.g., workplace bullying; LeBlanc & Kelloway, 2002; Shier et al., 2017). The Occupational Safety and Health Administration (OSHA) provides guidelines and recommendations for preventing workplace violence focusing on healthcare and social service workers (2015a) and safety in hospitals (2015b). However, few direct measures of workplace violence currently exist, thus the efficacy of policies and procedures to address incidents of workplace violence is unknown.

Data regarding workplace violence is primarily collected through surveys and descriptive measures specific to fields such as healthcare (Hader, 2008; Kowalenko et al., 2005) and education (Pihl et al., 2018). The surveys and descriptive measures typically focus on physical or verbal aggression committed by consumers. Within healthcare, Kowalenko et al. (2005) surveyed emergency physicians and found 74.9% of respondents reported at least one verbal threat from a patient or patient's family and friends in the previous 12 months, and 28.1% of respondents reported being victims of physical assault. Additionally, Hader (2008) reported

survey findings of workplace violence towards nurses in a variety of settings including long-term care, outpatient services, community health, and rehabilitation. Data indicated 75.9% of respondents experienced intimidation, 59.8% experienced bullying, 51.6% experienced harassment, and 38.9% experienced threats of physical violence. Additionally, data also indicated that 71% of respondents experienced "severe criticism from supervisors, physicians, colleagues, and patients" (p. 17). Regarding perpetrators, 51.9% of respondents indicated experiencing workplace violence from a nursing colleague, 49% from a physician, and 37.7% from another healthcare worker. Forty-two percent of respondents indicated receiving education and training in workplace violence. Within education, Pihl et al. (2018) conducted group interviews with personnel working in special education schools regarding their understanding and use of violence prevention in the school setting. Results indicated that it may be important to create prevention strategies that interrelate conceptual understandings (theoretical concepts and mind-frame regarding violence prevention), support structures in the workplace (professional relations between employees), and strategies for use in direct interactions (strategies employed between teachers and students; Pihl et al., 2018). Overall, these studies suggest that workplace violence involving a variety of types and perpetrators is prevalent across different work environments.

These data are useful in understanding the prevalence of workplace violence; however, there are limitations. Published studies on workplace violence have focused on violence perpetrated by consumers receiving services from the targeted workplace. Data involving workplace violence perpetrated by current or former employees are not frequently reported (hereafter referred to as workplace victimization). The limited reported data use a variety of definitions and phrases to describe and refer to workplace victimization. Namie and Namie

(2004) defined workplace victimization as "interpersonal mistreatment that is sufficiently severe as to harm a targeted person's health or economic status" (p. 315). Agervold and Mikkelsen (2004) defined workplace victimization as "a social interaction in which the sender uses verbal and/or non-verbal communication that is characterized by negative and aggressive elements directed towards the receiver's person or his or her work situation" (p. 337). Additional definitions include behavior directed toward one or a few select victims, and a power imbalance between the victim and perpetrator (LaVan & Martin, 2008). The variation in definitions increases interpretations of workplace victimization and leads to ambiguity as to the behaviors being studied, which may preclude researchers from evaluating workplace victimization.

The Workplace Bullying Institute (WBI; 2021) reported that 39% of employed Americans are or have been victims of workplace victimization and 22% have witnessed workplace victimization. Due to the significant percentage of Americans that have been affected both directly and indirectly, it is important to understand workplace victimization such that it can be addressed. There is little evidence regarding the efficacy and development of policies, procedures, and trainings for responding to and preventing workplace victimization. Published studies mention the importance of policies, procedures, and training (e.g., Hader, 2008; Kowalenko et al., 2005, Pihl et al., 2018); however, little research has been conducted on the efficacy of such policies, procedures, and training.

Responses to workplace violence surveys often indicate ineffective policies and procedures exist in the workplace (Hader, 2008) and a desire for increased resources or trainings (Kowalenko et al., 2005). Direct interviews with employees conducted by Keashly (2001) found that typical company responses to workplace victimization included working around the problem, promised action with no discernible outcome, and direct action with no noticeable

improvement. These responses often led the victim to not report and simply 'do nothing' regarding incidents of workplace victimization due to a lack of follow through by supervisors. The data from Keashly suggest that current workplace policies, procedures, and training, or lack thereof, and an individual's position may affect an employee's response to victimization. Additionally, employees desire a change in policies, procedures, and training regarding workplace violence. Therefore, it is important to evaluate the efficacy of workplace policies, procedures, and trainings and their effects on employee behaviors.

Despite the limitations and gaps in research regarding policies, procedures, and training for workplace victimization, emerging research is promising for developing a response to workplace victimization. Peterson et al. (2021) used behavioral skills training (BST) with multiple exemplar training (MET) and in situ training (IST) to teach young adults with intellectual and developmental disabilities (IDD) to recognize and respond to coworker victimization from aggressors. A multiple probe design was used to evaluate the effects of BST with MET and IST. During in situ probes in the participant's classroom or worksite, the confederate presented a victimization statement, which consisted of theft, infantilization or calling the participant by a childish pet name, or assuming the participant's inability to complete tasks due to disability. The researchers taught the participants to abstain from retaliation, decline the request, acknowledge the person was attempting to victimize them, and walk or turn away. Two participants engaged in the response at mastery criteria following BST with MET, and two participants engaged in the response at mastery criteria following IST. Three of the four participants maintained the response across 2 months and generalized the response to novel victimization statements across exemplars. These data demonstrate that BST with MET may be useful in teaching responding to coworker victimization to mastery for some individuals;

however, the results of the study are limited to individuals with IDD and workplace victimization scenarios in which an individual is being taken advantage.

Although it has been recognized that workplace violence is prevalent, there are gaps in the literature. It is unclear whether and to what extent workplace victimization occurs within behavior analysis. Additionally, it is important that interventions are created to address incidents directly and provide employees with skills to effectively respond to workplace victimization. Therefore, this study attempted to address this. First, we conducted a survey to understand the prevalence of workplace violence among Registered Behavior Technicians (RBTs) and Board Certified Assistant Behavior Analysts (BCaBAs). Second, we evaluated the effects of remote BST on teaching a response to workplace victimization. For this study, workplace victimization was defined as a current employee performing a violent act (e.g., threats, physical or verbal aggression, harassment) toward another employee within the workplace. We excluded cyber bullying and stalking.

Study 1

The purpose of Study 1 was to conduct a survey to understand the prevalence of workplace violence among RBTs and BCaBAs in the field of behavior analysis.

Method

Participants

An e-mail containing the survey link for participation was sent via the Behavior Analyst Certification Board's (BACB) mass email service to those registered as RBTs and BCaBAs. Participants also reported other roles such as BCBA, or no longer working in applied behavior analysis (ABA). Thus, participants for Study 1 were RBTs, BCaBAs, and individuals certified as either an RBT or BCaBA with other roles. The survey was sent to 45,001 individuals certified as

RBTs and BCaBAs. One hundred seventy-eight emails could not be delivered, four were marked as spam, and 54 individuals were unsubscribed resulting in a total of 44,765 delivered e-mails, 20,432 of which were opened. The link for the survey was used by 1,434 people, and 284 of those responded. One individual did not complete the survey resulting in 283 surveys for data analysis.

Survey Instrument and Procedures

A 29-question survey (Appendix A) was developed using Qualtrics by adapting the Workplace Violence in the Health Sector Country Case Study – Questionnaire (International Labour Office et al., 2003), and the Work Place Violence Program – Employee Survey (Oregon Association of Hospitals and Health Systems, 2016). Questions asked participants about (a) demographics (e.g., gender, age, certification level, work setting), (b) experience with workplace victimization, (c) information regarding their experience (e.g., type of victimization, if the incident was reported, resulting impact of the incident), (d) frequency with which they witness workplace victimization, (e) policies and trainings regarding workplace violence, and (f) knowledge of how to respond appropriately when witnessing or experiencing an incident of workplace victimization.

The survey was e-mailed via the BACB mass email service on January 27, 2022. The survey was opened on January 27, 2022 and closed on February 17, 2022. The last response was received on February 15, 2022. The survey was open for 22 days.

Results

Table 1 depicts the reported demographics of participants. Of the 283 respondents, 258 respondents were RBTs (91.17%), 11 were BCaBAs (3.89%), and 14 reported other roles (4.94%). One hundred and nineteen respondents were aged 18-25 (42.05%), 111 were aged 26-

35 (39.22%), 35 were aged 36-45 (12.37%), 11 were aged 46-55 (3.89%), and seven were aged 56 or older (2.47%). Of the 240 respondents that reported a gender identity, 194 reported female (80.83%), 37 reported male (15.42%), three reported non-binary (1.25%), three reported gender fluid (1.25%), two preferred not to answer (.83%), and one reported transgender (.42%). Thirty respondents reported in behavior analysis for less than 6 months (10.60%), 66 for 6 months to 1 year (23.32%), 105 for 1 to 3 years (37.10%), 42 for 3 to 5 years (14.84%), 30 for 5 to 10 years (10.60%), and 10 for 10 or more years (3.53%). When asked if respondents were currently supervising others, 233 reported that they were not (82.33%), and 50 reported they were (17.67%). Respondents worked in a variety of settings. One hundred and thirty worked in clinics (45.94%), 86 provided in-home services (30.39%), and seven provided remote services (2.47%). Additionally, 60 participants reported working in other settings (21.20%). Of the 60 participants who reported other, 28 worked in schools (46.67%), 24 in a combination of settings (40%), five in residential or childcare facilities (8.33%), two were no longer practicing (3.33%), and one reported being a volunteer (1.67%).

Table 2 depicts workplace victimization within ABA. Of the 283 respondents, 189 reported not experiencing workplace victimization (66.78%), and 94 reported experiencing workplace victimization (33.22%). When asked about the frequency with which they experienced workplace victimization, 182 respondents indicated they had never experienced workplace victimization (64.31%), 30 experienced it once a year or less (10.60%), 18 experienced it a few times a year (6.36%), 18 experienced it weekly (6.36%), 17 experienced it monthly (6.01%), and eight experienced it once a day (2.83%). Ten respondents indicated other frequencies of experiences (3.53%), including four respondents having previously experienced but not currently experiencing workplace victimization, one experiencing victimization all the

time, one experiencing it twice, one experiencing it once, one reporting not currently working in the field, and one reporting not having been in the field long enough to respond. One hundred and sixty respondents responded to the type of victimization they had experienced. Eighty-three respondents experienced emotional/psychological (51.87%), 43 experienced verbal aggression (26.87%), 18 respondents reported experiencing physical aggression (11.25%), 15 experienced sexual assault/harassment (9.38%), and one reported other which included experiencing racism, discrimination, and tribalism (0.63%). Thirty-two respondents indicated one or more of the following as a result of workplace victimization: retaliation by a coworker or supervisor (21.88%), leaving the position (18.75%), an inability to complete job duties (18.75%), and missed days of work (12.50%). No respondents indicated personal retaliation (0%). An additional nine respondents reported other including anxiety and PTSD, their position being terminated, leaving the field of ABA, and no resulting effects (28.13%). In addition to experiencing workplace victimization, respondents indicated witnessing workplace victimization. One hundred and forty-nine respondents reported never witnessing workplace victimization (52.65%), 27 once a year or less (9.54%), 43 a few times a year (15.19%), 17 monthly (6.01%), 27 weekly (9.54%), 14 once a day (4.95%), and six reported other amounts (2.12%). Other responses indicated fluctuating amounts of workplace victimization based on setting type or changes of setting.

Table 3 depicts reporting and responding to workplace victimization. Of the 94 respondents who reported experiencing workplace victimization, 54 respondents reported the incident of workplace victimization to someone at their place of work (57.45%), and 40 did not report the incident (42.55%). Of the 54 respondents that indicated they reported the incident, 23 reported the workplace victimization to their direct supervisor (58.97%), nine reported to human

resources (23.08%), five reported to others in their workplace (12.82%) but did not indicate to whom, and two reported to another supervisor at their place of work (5.13%). Respondents indicated that one or more of the following contributed to reporting the incident: severity of the incident (26.32%), support of their supervisor (18.95%), support of their coworkers (18.95%), current reporting procedures at their workplace (14.74%), fear of retaliation (13.68%), someone else reported the incident (3.16%), and other factors (4.21%). When asked if they knew how to respond to workplace victimization, 171 respondents responded yes (60.42%), 59 responded no (20.85%), and 54 responded unsure (18.73%). When asked if participants knew how to respond when witnessing an incident of workplace victimization, 167 respondents responded yes (59.01%), 53 responded no (18.73%), and 63 responded they were unsure (22.26%).

Table 4 depicts data regarding workplace policies and training for workplace violence. Of the 283 respondents, 147 responded yes (51.94%), 43 responded no (15.19%), and 93 responded unsure (32.86%) when asked whether their place of employment had a policy regarding workplace victimization. Respondents indicated their place of employment had one or more of the following policies for other types of workplace violence: active shooter (21.21%), harassment from a consumer (20.76%), assault from a consumer (18.97%), robbery (7.37%), and other types of violence (3.57%). One hundred and twenty-six respondents were unsure whether their workplace had other policies related to workplace violence (28.13%). Of the 152 respondents that indicated their place of employment offered training in workplace violence, eight responded yes (5.27%), 64 responded no (42.11%), and 80 responded unsure (52.63%). Of the eight respondents that indicated their workplace offered training in workplace violence, two indicated workplace violence prevention, one indicated workplace violence responding, and five indicated both trainings were available. When asked if they had participated in workplace

violence training, 130 respondents responded yes (46.27%), and 151 participants indicated no (53.74%). Of the 130 respondents that had participated in training, 23 indicated that they had participated in workplace violence prevention, 14 in workplace violence responding, and 93 indicated that they had participated in both trainings. Methods of training involved one or more of the following: classroom computer based learning (26.15%), provision of written policies or manuals (21.16%), on-the-job training (16.77%), instructor-led classroom training (12.97%), training including modeling (11.58%), and classroom training including rehearsal and feedback (11.38%). When evaluating the social validity of workplace violence training, participants indicated the training outcomes included one or more of the following: to recognize and handle threatening, aggressive, or violent behavior (27.95%); to ask for assistance if confronted with an incident of violence (25.48%); to know what workplace violence is (24.93%); and to know what resources are available to employees for coping with workplace violence (21.64%). When asked if they should attend a training on workplace violence, 211 respondents responded they should attend training for both responding and prevention (75.63%), 37 responded that they should maybe attend training (13.26%), 18 responded they should not attend training (6.45%), seven participants responded they should attend training for responding (2.51%), six indicated they should attend training for prevention (2.15%), and four participants did not respond to this question.

Discussion

The purpose of this survey was to identify the prevalence of workplace violence in ABA. Overall, survey data indicated a significant amount of those working in the field of ABA, primarily as RBTs, to be affected either directly through experiencing (33.22%) or indirectly through witnessing (total of 47.35%) incidents of workplace victimization. The most reported

types of workplace victimization were emotional/psychological (e.g., manipulation, intimidation, criticism, inappropriate use of authority) and verbal aggression (e.g., threats, name-calling, blaming, yelling). These incidents resulted in individuals leaving ABA, retaliation of a coworker or supervisor, inability to complete job duties, leaving the position, and missed days of work.

In other survey studies conducted on workplace victimization, prevalence of workplace victimization ranged from 2% to 10% (Agervold & Mikkelson, 2004). A greater number of individuals, almost a third of respondents, reported experiencing workplace victimization, suggesting workplace victimization may be occurring at a higher rate in ABA as compared to other fields. There may be a couple of reasons why these differences occurred. First, participants were primarily RBTs. Given previous research, it is possible those who work as direct line therapists (e.g., RBTs) experience workplace victimization at a higher rate particularly in workplaces where victimization is perpetrated by management or a supervisor. In fact, Beasly and Rayner (1997) reported that the majority of victims identified a supervisor as the perpetrator for victimization, indicating a "sense of power" over the victim while displaying behaviors of personal or work criticism, excluding the victim from meetings or projects, and micromanaging the victim's work. Given the most reported type of victimization was emotional/psychological victimization, it is likely many respondents in the current study experienced workplace victimization from management or a supervisor. Reporting these behaviors can result in being fired or being labeled as a 'problem' in the workplace. However, given this survey was disseminated to RBTs and BCaBAs, it is unclear whether and the extent to which BCBAs and BCBA-Ds also experience workplace victimization. Second, respondents represent 0.63% of the delivered e-mails and 19.74% of those who clicked on the link. Therefore, it is unclear how well these data represent the entirety of RBTs and BCaBAs. Third, due to the sensitive nature of

workplace victimization, some participants may not have wanted to report an incident of workplace victimization. Additionally, questions/answers included on the survey may have been ambiguous and open to interpretation which may have also influenced responding. For example, questions about responding included the use of the phrase "responding appropriately." The use of the term "appropriate" is open to interpretation and not objectively defined. Although these data may not represent the field as a whole, they are important nonetheless as they suggest workplace victimization is occurring.

Individuals reported experiencing many negative side effects of workplace victimization including job dissatisfaction, inability to complete job duties, leaving the position, and missed days of work. These side effects likely have more broader impacts on the individual, workplace, and clients the individual serves. For the workplace, although not directly related to workplace violence, it is possible incidents of workplace victimization contribute to the high rate of burnout and turnover of RBTs when incidents result in missed days of work (Cymbal et al., 2021) or are accompanied by a decreased satisfaction in job training (Kazemi et al., 2015), thereby increasing the need for additional training resources and potentially decreasing available services to clients and revenue generated by the company. For the clients, high turnover and burnout of staff affect the continuity and quality of services, ultimately reducing client progress (Kazemi et al., 2015).

While most respondents indicated knowing how to respond to workplace victimization, it is unclear how they respond to workplace victimization. It is possible participants that responded "yes" to knowing how to respond when experiencing victimization may take the 'do nothing' approach, which is largely ineffective (Keashly, 2001). Additionally, a significant number of respondents indicated they did not know or were unsure how to respond to victimization,

indicating a clear need for workplace trainings. It may be important to develop trainings that focus on preventing and reducing the future likelihood of workplace victimization.

Approximately half of the respondents who indicated they had experienced workplace victimization reported it. Factors such as the severity of the incident as well as the support of the supervisor and coworkers were the most reported factors that led to reporting. It is important to note that approximately half of respondents were unsure of or did not have policies regarding workplace victimization at their place of employment. Despite this, these data may suggest that workplace cultures with supportive environments may increase responding to victimization by reporting incidents. The effects of workplace culture on the occurrence of and response to victimization should be evaluated and may be useful in developing workplace policies to address victimization. In addition to the workplace culture, the workplace should have policies in place to support reporting and responding to incidents and to protect those who report from retaliation.

Workplace violence, specifically workplace victimization, affects a large number of those working in ABA, resulting in negative effects such as leaving their position or the field, missing days of work, retaliation of a coworker or supervisor, and an inability to complete job duties. Behavior analysts have an ethical obligation to maintain their own biases (Code 1.10) and to create environments that are free from harassment or hostility towards others (Code 1.09) and free from discrimination (Code 1.08; BACB, 2021a). Similarly, the RBT Ethical Code (BACB, 2021b) also states that RBTs must act in a professional manner (1.02 and 2.03), not harass or discriminate against others (1.08), and be honest and accurate in all communications (3.02). By responding to victimization in the workplace, those working in behavior analysis may create an environment free from harassment, hostility, and discrimination while also decreasing the risk and future occurrence of workplace victimization.

Study 2

Given the limited research on teaching a response to workplace victimization (e.g., Peterson et al., 2021), the purpose of Study 2 was to evaluate the effects of remote BST on teaching a response to workplace victimization.

Method

Participants and Setting

Three females that previously worked or were currently working in ABA were recruited for this study from both graduate and undergraduate ABA programs. Participants were recruited via e-mail sent to various college ABA programs. No incentives were provided by the researcher; however, one participant, Talia, was required to participate in research studies as part of her undergraduate class. Participants were asked to complete two surveys. The first survey (Appendix B) consisted of eight questions. Participants reported how often they were exposed to workplace victimization, as well as the types of victimization to which they were exposed. The second survey (Appendix C) consisted of five demographic questions.

Margaret was a 25-year-old female, worked as a Behavioral Health Technician in a clinic setting, and was enrolled in a master's program for behavior analysis. She had worked in ABA for 4 years. Prior to beginning the study, Margaret reported having experienced workplace victimization within the last 6 months on a monthly basis. Her experiences included blaming, manipulation, intimidation, criticism, and inappropriate use of authority resulting in increased anxiety, decreased job satisfaction, negative perceptions of the work environment, and increased absenteeism. Margaret also reported that she was not comfortable responding to or reporting incidents and that her typical responses to workplace victimization included doing nothing and

walking away from the aggressor. She had never previously received formal training on workplace victimization from her current or past employers.

Callie was an adult female that worked in a clinic setting and was enrolled in a master's program for behavior analysis. Prior to beginning the study, Callie reported having experienced workplace victimization on a daily occurrence, but has since left the company. Callie reported experiencing blaming, manipulation, criticism, and other unspecified types of workplace victimization resulting in increased anxiety, decreased job satisfaction, and negative perceptions of the work environment. She was comfortable in responding to and reporting incidents and would typically respond by walking away from the aggressor. She had never previously received formal training on workplace victimization from her current or past employers.

Talia was a 25-year-old female, previously worked in an in-home setting for 2 years, and was enrolled in an undergraduate program. Prior to beginning the study, she reported having experienced workplace victimization on a monthly occurrence. Talia reported experiencing blaming, manipulation, criticism, and inappropriate use of authority resulting in increased anxiety, decreased job satisfaction, and negative perceptions of the work environment. Talia reported not being comfortable responding to or reporting incidents and would often respond by doing nothing. She had never previously received formal training on workplace victimization from her current or past employers.

All sessions took place remotely over Zoom. Participants and the researcher were in separate locations of their choosing free of distractions that allowed for appropriate responding. Zoom links with a corresponding password were sent to participants via e-mail prior to all sessions.

Materials

Materials for this study included 24 videos of workplace victimization containing situations to which the participant should respond (see Appendix G for more detailed information on video probes). Eight videos depicted criticism, eight depicted blaming, and eight depicted intimidation. Videos were distributed across conditions such that six videos were used during baseline and post-BST, six during remote BST, and six during generalization. Videos ranged between 9 and 21 s and were embedded within a PowerPoint that was shared by the experimenter using the share screen function on Zoom. Other materials included a computer with Zoom and video/audio capabilities, data collection sheets (Appendix D), and procedural fidelity checklists (Appendix F). Participants were also provided an electronic survey prior to beginning the study (Appendix B), a demographics survey (Appendix C), and a social validity survey (Appendix E).

Dependent Variable and Measurement

The dependent variable was the number of correctly implemented steps of the participant's response to workplace victimization. A three-step response to workplace victimization was developed using examples from Peterson et al. (2021) and Stannis et al. (2019). Appropriate responding was defined as: (1) abstaining from retaliation, (2) stating a short comment of disapproval, and (3) walking away or engaging in other activity in the environment. Responses to workplace victimization were measured using a checklist (Appendix D). Each step implemented was marked correct (Y) or incorrect (X). A percentage of correct responding was calculated by dividing the total number of correct steps by three and multiplying by 100.

Abstaining from Retaliation

Abstaining from retaliation was scored as correct if the participant refrained from vocal responding for the duration of the video probe. Vocal responding included sounds such as

gasping, crying, sighing, scoffing, or speaking or yelling words. Involuntary sounds such as sneezing or coughing were not included. Abstaining from retaliation was scored as incorrect if the participant engaged in vocal responding during the video probe.

Stating a Short Comment of Disapproval

Stating a short comment of disapproval was scored correct if the participant vocally stated disapproval within 5 s of the completion of the video probe. This included statements such as "I do not appreciate the tone you used" or "That is not true." Stating a short comment of disapproval was scored as incorrect if the participant did not vocally state disapproval within 5 s of the video probe ending. Statements of "Stop talking to me" were scored as incorrect.

Walks Away or Engages in Other Activity in the Environment

Walks away or engages in other activity in the environment was scored as correct if the participant walked away from their computer screen for a minimum of 5 s to simulate walking away from an aggressor. Based on the probe, if the participant was unable to walk away from the aggressor (e.g., if they were working with a client), then the participant angled their body at least 40 degrees away from their computer screen while they simulated engaging in another activity within the environment for at least 5 s (e.g., parallel play with their client). Simulating engaging in another activity included a vocal statement by the participant to indicate that the participant was no longer engaging with the aggressor (e.g., "What a cool blue cup!") as well as for the purpose of data collection due to the remote nature of the study. Walking away or engaging in other activity in the environment was scored incorrect if the participant did not walk away or angle their body away from the computer screen for a minimum of 5 s. The step was also marked incorrect if the participant did not include a vocal statement while angled away from the computer when simulating engaging in another activity.

Interobserver Agreement and Procedural Fidelity Measurement

A second, trained independent observer evaluated 33% of probes for interobserver agreement (IOA) across each participant. For IOA, an agreement was scored when the observer and the experimenter both scored the step as either correct or incorrect. A disagreement was scored when the observer and the experimenter did not score the step the same (e.g., the experimenter scored step three as correct, and the observer scored step three as incorrect). IOA was calculated by dividing the number of agreements plus disagreements and multiplying by 100. Mean agreement was 100% across all participants.

Additionally, an average of 48.15% (range, 44.44%-50%) of sessions across participants were scored for procedural fidelity by a trained independent observer. Scored behaviors included (a) stating the purpose (remote BST) or instructions (baseline, post-BST, generalization) of each session, (b) presenting descriptions of and responding instructions for each video, (c) delivering corrective feedback and descriptive praise when necessary, and (d) thanking participants for their time and participation. Procedural fidelity measures were scored using a yes or no checklist (Appendix F) during each condition of the study to evaluate the extent to which all experimental phases were implemented with accuracy. A "yes" was scored with a "Y" and a "no" was scored with an "N." Procedural fidelity was scored for 50% of probes for Margaret, 50% of probes for Callie, and 44.44% of probes for Talia. For Margaret, mean agreement was 93.81% (range, 80%-100%). For Callie, mean agreement was 98.81% (range, 95.24%-100%). For Talia, mean agreement was 97.62% (range, 90.48%-100%).

Procedures

The study consisted of three conditions: baseline, remote BST, and post-BST. During each condition, video probes were implemented in a pseudorandom order as determined by a

random number generator such that each video was used as a probe before being repeated. Generalization probes were administered following baseline and post-BST conditions to test for stimulus generalization to novel scenarios. All sessions were recorded via the Zoom recording function.

Across all probes, the experimenter stated, "Please respond as you would at your current place of employment." Then a description of the scenario and instructions as to who to respond as were given. For example, "In this video you will see an RBT playing with a client in the playroom when a supervisor walks in. You will respond as if you are the RBT here in the flannel shirt." The video probe was then played for the participant.

Baseline

During baseline, participants were instructed to respond to one video probe that simulated workplace victimization during a variety of work tasks. No programmed consequences were delivered following the participant's response and no feedback was given.

Remote BST

One remote BST session was used to teach the three-steps to responding to workplace victimization.

Instruction. BST sessions began with the definition of workplace victimization and types of workplace victimization (criticism, blaming, intimidation) which included one video example for each type of workplace victimization. Participants were then presented instructions on how to respond to workplace victimization by engaging in three steps: (a) abstaining from retaliation, (b) stating a short comment of disapproval, and (c) walking away or engaging in another activity in the environment. Instruction was provided verbally and textually by the experimenter using a PowerPoint shared via screen share on Zoom.

Video Modeling. Following instructions, participants were asked to watch one video of the experimenter modeling the response (i.e., abstaining from retaliation, stating a short comment of disapproval, and walking away or engaging in another activity in the environment) to each type of workplace victimization. Video models were embedded into PowerPoint following the instruction portion.

Rehearsal and Feedback. Following video modeling, participants were instructed to practice responding to workplace victimization. During rehearsal, the experimenter used six videos different from those used in baseline and post-BST conditions for the purpose of role-playing situations in which victimization may occur. Two videos depicted criticism, two depicted blaming, and two depicted intimidation. Videos were embedded into PowerPoint following the video models. Descriptive praise and corrective feedback were given for correct and incorrect responses, respectively. For example, if the participant turned away from the screen rather than walking away as they were not working with clients, then the experimenter stated, "You did a great job abstaining from retaliation. While you could turn away, in this situation you would want to walk away in order to prevent the perpetrator from further engaging with you by leaving the environment." Immediately following feedback, the next video probe was conducted. After a minimum of six video probes, the participant needed to complete all three steps of responding in the absence of corrective feedback for three consecutive probes to move to the post-BST condition.

Post-BST

Post-BST sessions were conducted in the same manner as baseline to assess responding post-training. Videos used during post-BST sessions were the same as baseline videos and were conducted in a different pseudorandom order. Once the participant completed a minimum of six

probes and achieved 100% responding on at least three consecutive video probes, mastery criteria were met.

Generalization

Generalization probes were conducted to assess stimulus generalization during responding to novel workplace victimization situations. Participants responded to novel situations depicting the trained types of victimization. Six novel video probes were administered in a pseudorandom order using procedures similar to baseline and post-BST sessions. Two videos depicted criticism, two videos depicted blaming, and two videos depicted intimidation. Three generalization probes (one intimidation, one criticisim, one blaming) were administered following baseline and three were administered following post-BST conditions.

Social Validity

Following participation in the study, each participant was e-mailed an optional nine question social validity survey created using Qualtrics (Appendix E). A five-point Likert scale was used in which 1 represented strongly disagree and 5 represented strongly agree. Questions were adapted from Erath et al. (2021), Egemo-Helm et al. (2007), and Harriage et al. (2016). The social validity survey contained items addressing (a) the acceptability of the training methods, procedures, and victimization response; (b) side effects of the training; and (d) whether they would recommend this training for others.

Experimental Design

A multiple probe design was used in this study. Multiple probe designs administer intermittent probes during baseline as opposed to continuously administered assessments. This is well-suited for skill sequences that are unlikely to improve without the intervention occurring and for reducing exposure to baseline probes. Due to the sensitive nature of statements during

administration of the probes (e.g., "Are you stupid? No wonder your kids are having problems in school."), a multiple probe design ensured unnecessary, prolonged exposure to the content of the probes did not occur (Ledford & Gast, 2018).

A minimum of three consecutive sessions over a minimum of two days or until data were stable is recommended prior to introducing the independent variable for multiple probe designs (Ledford & Gast, 2018). For this study, all six video probes were administered prior to generalization and introducing remote BST as well as in the post-BST condition to ensure that responding was stable across all three types of victimization. Similarly, one video probe of each type of victimization was assessed during generalization after baseline and post-BST. Additionally, introduction of the independent variable was staggered to ensure that participant behavior remained stable until remote BST was implemented.

Results

Figure 1 depicts the results from Study 2. Probes are scaled to the x-axis, and percentage of correct responses is scaled to the y-axis. Closed circles denote baseline and post-BST probes, and open circles denote generalization probes. Margaret's data are depicted in the top panel, Callie's in the middle panel, and Talia's in the bottom panel.

During baseline and generalization probes, all participants engaged in 33.33% correct responding across all baseline and generalization probes. Following remote BST, Margaret (top panel) immediately engaged in 100% correct responding across all probes. Margaret met mastery criteria following six probes. Correct responding maintained at 100% correct during all three generalization probes. Following remote BST, Callie (middle panel) engaged in 100% correct responding for two consecutive probes followed by variable responding for three probes (range 33.33%-100%) and returned to 100% correct responding for four consecutive probes, meeting

mastery criteria. Callie met mastery criteria following eight probes. Correct responding was variable during generalization (range 66.66%-100%). Following remote BST, Talia (bottom panel) immediately engaged in correct responding for five consecutive probes. She engaged in low responding for the sixth probe followed by 100% correct responding for three consecutive probes, meeting mastery criteria. Talia met mastery criteria following nine probes. During generalization, Talia maintained 100% correct responding.

Table 6 depicts the results of the social validity survey. All participants reported they were satisfied with the web-based training and interactions ($M = 5$), the training was easy to understand ($M = 5$), the feedback was helpful ($M = 5$), and the steps taught were beneficial ($M = 4.6$, range 4-5). Additionally, participants reported no negative side effects during or after the training ($M = 4.6$, range 4-5), feeling more prepared to respond to workplace victimization ($M = 4.6$, range 4-5), and that they will continue to use the steps they learned to respond to victimization ($M = 4.6$, range 4-5). Finally, participants responded that the training would be beneficial for others ($M = 5$) and they would recommend this training to other professionals ($M = 4.6$, range 4-5).

Discussion

The purpose of Study 2 was to evaluate the effects of remote BST on teaching a response to workplace victimization. Overall, remote BST was effective for all three participants. That is, following remote BST sessions, all three participants acquired the response to workplace victimization to mastery criteria. Additionally, all participants maintained responding in the presence of novel video probes. These data are encouraging and add to the literature on training responses to victimization.

Remote BST was effective for all three participants. Margaret met mastery criteria following six probes, Callie met mastery following eight probes, and Talia met mastery criteria following nine probes. These findings suggest that remote BST was effective in increasing correct responses to victimization. The effectiveness of remote BST could be due to a number of reasons. First, it is likely that remote BST was effective due to instructions, modeling, rehearsal and feedback as these components have been effective across a variety of skills (e.g., Miltenberger et al., 1999; Peterson et al., 2021). It is possible that this combination of components promoted rule-governed behavior and aided in the development of stimulus control for future responses (Ledbetter-Cho et al., 2021). Second, it is also likely that BST was effective due to the competency-based approach used in this study. Predetermined criteria used in BST ensures demonstration of the targeted behavior at a high level before applying the behavior to the natural environment (Reid, 2017). Third, a high level of correct responses immediately following remote BST may suggest effective use of feedback during rehearsal portions of BST sessions, allowing participants to maintain high response accuracy in the absence of feedback. Feedback may have acted as a positive or negative reinforcer by increasing the correct response (Peterson, 1982). Finally, this study utilized video modeling during remote BST sessions. Video modeling has resulted in quicker acquisition and has been demonstrated to enhance generalization (Rex et al., 2008) by acting as a stimulus prompt for learners leading to more efficient skill acquisition (Alberto et al., 2005).

Although remote BST was effective for all participants, there were some differences in participant responding during post-BST probes. For two out of three participants, responding maintained at high levels across the majority of probes. For one participant, Callie, responding was more variable, ranging from 33.33% to 100% correct. It is possible Callie's variable

responding occurred due to her prior history of responding to workplace victimization. Prior to the start of the study, Callie reported being comfortable responding to workplace victimization using a 'do nothing' approach. Therefore, her prior history of responding may have competed with the response learned in the current study. Additionally, she may have had some difficulties with the video probes. For example, in some videos the perpetrator was a supervisor and there may have been a history of responding differently to supervisors that may have affected responding. Similar to Callie, Talia's sixth post-BST probe also resulted in lower responding further indicating that it may have been unclear who to respond to during some video probes. It is also possible that the combination of Callie's history of responding and video probes resulted in more varied responding. Given Callie's variable responding, booster sessions or IST may have been beneficial to ensure maintained responding during probes across an extended period of time. It is possible that an individual's changes in response to victimization may function as intermittent reinforcement for the perpetrator. Thus, it may be important that a consistent response is demonstrated across time to reduce or prevent the possibility of additional workplace victimization incidents.

For Margaret and Talia, responding maintained in the presence of novel workplace victimization videos during generalization probes. In addition to video modeling potentially aiding in generalization, it is possible that generalization occurred due to the competency-based nature of remote BST used in the current study. Utilizing a predetermined mastery criteria ensures the participants can demonstrate the skill at high levels before completing the skill in the natural environment, increasing the likelihood of generalization (Reid, 2017). Additionally, video probes were trained across multiple situations and stimuli. MET has been shown to aid in generalization across a variety of skills (Ranick et al., 2013; Peterson et al., 2021) by providing

practice with a variety of response topographies to help aid the acquisition of the desired response form thus promoting generalization (Marzullo-Kerth et al., 2011). For Callie, responding maintained during one generalization probe and occurred at a higher level during two generalization probes as compared to baseline generalization probes. Similar to Callie's responding during post-BST, it is possible her variable responding occurred due to her prior history of responding to workplace victimization, difficulties with video probes, or the combination of variables. This may be evidenced by incorrect responding primarily being made when making short comments of disapproval across both post-BST and generalization probes. Given variability in responding, Callie may have benefited from additional booster sessions or IST. This finding is similar to the safety skills research in which IST is often needed (e.g., Egemo-Helm et al., 2007; Hanratty et al., 2016; Miltenberger et al., 1999). Additionally, generalization probes assessed only for stimulus generalization in that novel presentations of trained behaviors were presented. Researchers should evaluate generalization across untrained types of victimization.

There are several limitations of the current study. First, for some video probes, it is possible that it was unclear who to respond to within the video probe. Additionally, the simulated nature of the study may have contributed to variable responding for both Callie's post-BST probes and Talia's sixth post-BST probe. Although instructions were delivered to orient the participants to the probes, at times participants asked clarifying questions such as "Who do I respond as?" or made statements such as "She wasn't talking directly to me." Additionally, during one video probe, the perpetrator walked off camera making it unclear who to respond to due to the environment in which videos were created. Second, although not a direct threat to internal validity, we did not assess whether the response to workplace victimization occurred in

the workplace environment or whether the response maintained across time. It will be important for researchers to assess whether this response generalizes to the conditions under which participants experience workplace victimization. Additionally, researchers should evaluate long-term maintenance of the response as workplace victimization may not be encountered on a regular basis and booster sessions may be periodically programmed to increase the likelihood of correct responding.

The safety skills literature commonly uses reporting incidents as a step in responding (e.g., Hanratty et al., 2016; Miltenberger et al., 1999). Reporting the incident of workplace victimization was not included in this study. Results of Study 1 indicated that incidents are most often not reported and workplaces lack policies and procedures related to reporting. Some research literature suggests that incidents of workplace victimization are not reported due to a lack of follow through by supervisors resulting in the 'do nothing' approach. Additionally, literature suggests that reporting is ineffective (Keashly, 2001) and may be affected by relationship to the perpetrator (e.g., supervisor; Beasly & Rayner, 1997). Therefore, we did not program reporting the incident as the best reporting method is unclear. Researchers should evaluate a response to victimization that includes a best-practice response for reporting. It is possible the best reporting response is following the workplace's policies and procedures. Researchers may need to address policies and procedures for responding to reports of victimization and reporting practices to identify those that are most supportive in reducing and preventing workplace victimization.

There are many additional directions for research. First, researchers might consider evaluating other types of victimization such as sexual harassment, shifted responsibility, and rumors. Employees working remotely may also experience workplace victimization via e-mails

or other electronic communication software (e.g., Microsoft Teams). There are many behaviors that comprise workplace victimization, so it will be important to identify trainings that generalize to other types of workplace victimization behaviors without additional direct training. Second, research, including this study, primarily focuses on the perspective of the victim and the victim's response to workplace victimization. Very little research into the maintaining variables of victimization has been published. Interventions addressing the behavior of the perpetrator should be explored to further prevent and reduce workplace victimization. It is believed that there is some degree of frequency and duration to victimization (Cowie et al., 2002); however, little direct measurement has been conducted. Although more rigorous, a functional analysis and study of perpetrator motivations may be beneficial to identify maintaining variables of victimization on both the part of the perpetrator and victims (Cowie et al, 2002; Piquero et al., 2013). A better understanding of the function(s) would allow researchers to more effectively identify effective interventions, trainings, policies, and procedures to address workplace victimization. Third, researchers should also assess how the response trained in this study affects future workplace victimization. For example, does this specific response to workplace victimization reduce or increase future incidents of victimization? Again, a better understanding of function would allow for development of the most appropriate response to workplace victimization. Additionally, given the sensitive nature of workplace victimization and risks that may accompany repeated in vivo assessment, researchers might consider training through virtual reality technology. Virtual reality may allow for more simulated training while reducing negative side effects within an individual's workplace environment and potential harm to the participant (Clay et al., 2021).

In summary, workplace victimization is experienced at a higher rate by RBTs in ABA than previously published data in other fields, resulting in negative side effects for the individual,

company and clients, and field at large. Given the prevalence and side effects, researchers should

focus on addressing workplace victimization while developing the most effective and efficient

policies, procedures, and trainings. Remote BST was effective in teaching three individuals who

were currently working or previously worked in ABA how to appropriately respond to incidents

of workplace victimization. Given the importance of addressing workplace victimization, we

hope additional research will be conducted to understand workplace victimization and develop

appropriate resources to provide those affected.

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Tables

Table 1

*Reported Demographics (*N=283)

	n	%
Certification		
RBT	258	91.17
BCaBA	11	3.89
Other	14	4.94
Age Range		
18-25	119	42.05
26-35	111	39.22
36-45	35	12.37
46-55	11	3.89
56+	7	2.47
Gender*		
Female	194	80.83
Male	37	15.42
Non-binary	3	1.25
Gender fluid	3	1.25
Prefer not to answer	2	.83
Transgender	1	.42
Years Working in ABA		
Less than 6 months	30	10.60
6 months – 1 year	66	23.32
1-3 years	105	37.10
3-5 years	42	14.84
5-10 years	30	10.60
10+ years	10	3.53
Currently Supervising Other Employees		
No	233	82.33
Yes	50	17.67
Setting		
Clinic	130	45.94
In-home	86	30.39
Other**	60	21.20
Remote	7	2.47

Note. Gender* *n* = 240; 43 participants did not report a gender identity. The responses in the

*Other*** category reported workplace settings in schools (*n*=28), a combination of settings

(*n*=24), residential or childcare facilities (*n*=5), no longer practicing (*n*=2), and no longer

practicing (*n*=1).

Table 2

Workplace Victimization in ABA

	n	$\%$
Experienced Victimization		
Total	283	100
No	189	66.78
Yes	94	33.22
Frequency of Victimization		
Total	283	100
Never	182	64.31
Once a year or less	30	10.60
A few times a year	18	6.36
Weekly	18	6.36
Monthly	17	6.01
Once a day	8	2.83
Other*	10	3.53
Type Experienced [a]		
Total	160	100
Emotional/psychological (e.g., manipulation, intimidation, criticism, inappropriate use of authority)	83	51.87
Verbal aggression (e.g., threats, name-calling, blaming, yelling)	43	26.87
Physical aggression (e.g., kicking, punching, biting)	18	11.25
Sexual assault/harassment (e.g., inappropriate contact)	15	9.38
Other*	1	.63
Results of Victimization [a]		
Total	32	100
Retaliation of a coworker or supervisor	7	21.88
Inability to complete job duties	6	18.75
Leaving the position	6	18.75
Missed days of work	4	12.50
Personal retaliation	0	0

Other***	9	28.13
Witnessed Victimization		
Total	283	100
Never	149	52.65
Once a year or less	27	9.54
A few times a year	43	15.19
Weekly	27	9.54
Monthly	17	6.01
Once a day	14	4.95
Other*****	6	2.12

Note. ª indicates that participants were able to choose more than one option.

Other* responses indicated having previously experienced but not currently

experiencing workplace victimization (*n*=4), all the time (*n*=1), twice (*n*=1), once

(*n*=1), not currently working in the field (*n*=1), and not having been in the field

long enough to respond (*n*=1). The other** category reported an incident of

racism, discrimination, and tribalism. Other*** responses indicated anxiety and

PTSD (*n* = 1), their position being terminated (*n* = 1), leaving the field of ABA (*n*

= 1), and no results (*n* = 6). Other**** responses indicated fluctuating amounts of

workplace victimization based on setting type or changes.

Table 3

Reporting and Responding to Victimization

	n	%
Incident Reported		
Total	94	100
Yes	54	57.45
No	40	42.55
To Whom the Incident was Reported		
Total	39	100
Direct Supervisor	23	58.97
Human Resources	9	23.08
Other	5	12.82
Other Supervisor	2	5.13
Factors for Reporting [a]		
Total	95	100
Severity of the incident	25	26.32
Support of your supervisor	18	18.95
Support of your coworkers	18	18.95
Current reporting procedures at your workplace	14	14.74
Fear of retaliation	13	13.68
Someone else reported the incident	3	3.16
Other	4	4.21
Response to Victimization		
Total	283	
Yes	171	60.42
No	59	20.85
Unsure	53	18.73
Response to Witnessing		
Total	283	100
Yes	167	59.01
No	53	18.73
Unsure	63	22.26

Note. [a] indicates that participants were able to choose more than one option.

Table 4

Workplace Policies and Trainings

	(n)	Percent
Workplace Policies		
Workplace Victimization		
Total	283	100
Yes	147	51.94
No	43	15.19
Unsure	93	32.86
Other Types of Violence*		
Total	448	
Active Shooter	95	21.21
Harassment from a consumer	93	20.76
Assault from a consumer	85	18.97
Robbery	33	7.37
Other	16	3.57
Unsure	126	28.13
Workplace Trainings		
Availability		
Total	152	100
Yes	8	5.27
Prevention	2	1.32
Responding	1	0.66
Both	5	3.29
No	64	42.11
Unsure	80	52.63
Participation		
Total	281	100
Yes	130	46.26
Prevention	23	8.19
Responding	14	4.98
Both	93	33.10
No	151	53.74
Method		
Total*	501	100
Computer based learning	131	26.15
Provision of written policies or manuals	106	21.16
On-the-job	84	16.77
Classroom - instructor-led	65	12.97
Classroom including modeling	58	11.58
Classroom including rehearsal and feedback	57	11.38
Results		

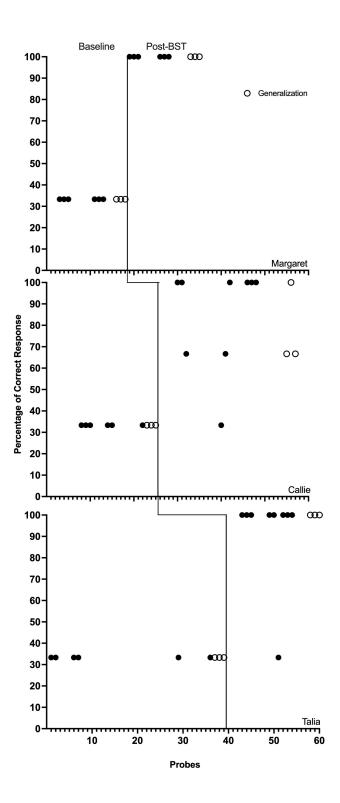|		
Total*	365	100
Recognize and handle behavior	102	27.95
Ask for assistance	93	25.48
Know what workplace violence is	91	24.93
Know what resources are available	79	21.64
Should Attend		
Total	279	100
Both	211	75.63
Maybe	37	13.26
No	18	6.45
Responding	7	2.51
Prevention	6	2.15

Note. * indicate that participants were asked to choose all that apply.

Table 5

Summary of Social Validity Results

Questions	Margaret	Callie	Talia	Average
I was satisfied with web-based training and interactions.	5	5	5	5
The training was easy to understand.	5	5	5	5
The feedback I was given was helpful.	5	5	5	5
The steps I was taught are beneficial to responding to workplace victimization.	4	5	5	4.6
I experienced no negative side effects during or after training.	5	4	5	4.6
I feel more prepared to respond to an instance of workplace victimization.	4	5	5	4.6
I will continue to use the steps I learned to respond to workplace victimization.	5	4	5	4.6
The training would be beneficial for others.	5	5	5	5
I would recommend this training to other professionals.	4	5	5	4.6

Figures

Figure 1

Study 2 Results

Note. Probes are scaled to the x-axis, and percentage of correct responses is scaled to the y-axis. Margaret's data are depicted in the top panel, Callie's in the middle panel, and Talia's in the bottom panel. Closed circles denote baseline and post-BST probes, and open circles denote generalization probes.

Appendix A: Study 1 Survey

The Department of Applied Behavioral Sciences at the University of Kansas supports the practice of protection for human subjects participating in research. The following information is provided for you to decide whether you wish to participate in the present study. You should be aware that even if you agree to participate, you are free to withdraw at any time without penalty.

We are conducting this study to better understand workplace bullying within the field of behavior analysis. This will entail your completion of the following survey. Your participation is expected to take approximately 10 minutes to complete. The content of the survey may cause some discomfort due to the nature of the content. Participation, however, may be terminated at any time. Incomplete surveys will not be used as part of the study.

Although participation may not benefit you directly, we believe that the information obtained from this study will help us gain a better understanding of how to address workplace bullying within the field of behavior analysis. Your participation is solicited, although strictly voluntary. Identifiable information beyond age and job title will not be collected as part of this survey. It is possible, however, with internet communications that through intent or accident someone other than the intended recipient may see your response. All precautions will be taken to minimize this risk through the secure collection and retention of information.

If you would like additional information concerning this study before or after it is completed, please feel free to contact us by phone or mail.

Completion of the survey indicates your willingness to take part in this study and that you are at least 18 years old. If you have any additional questions about your rights as a research participant, you may call (785) 864-7429 or write the Human Research Protection Program (HRPP), University of Kansas, 2385 Irving Hill Road, Lawrence, Kansas 66045-7563, email irb@ku.edu.

Sincerely,

Molly Malone	Thomas Zane, Ph.D.	Jessica Juanico, Ph.D.
Principal Investigator	Faculty Supervisor	Faculty Supervisor
Department of Applied	Department of Applied	Department of Applied
Behavioral Sciences	Behavioral Sciences	Behavioral Sciences
mcmalone@ku.edu	tzane@ku.edu	jjuanico@ku.edu

1. Gender
   a. Male
   b. Female
   c. Non-binary
   d. Transgender
   e. Gender Fluid
   f. Prefer not to say

       g. Other
2. Age
       a. 18-25
       b. 26-35
       c. 36-45
       d. 46-55
       e. 56+
3. Certification Type
       a. BCBA-D
       b. BCBA
       c. BCaBA
       d. RBT
       e. Other
4. Setting
       a. In-home
       b. Clinic
       c. Remote
       d. Other – Please Specify
5. How long have you worked in the field of behavior analysis?
       a. Less than 6 months
       b. 6 months – 1 year
       c. 1-3 years
       d. 3-5 years
       e. 5-10 years
       f. 10+ years
6. How many hours do you work per week?
       a. Less than 24 hours per week
       b. 24-32 hours per week
       c. 32-40 hours per week
7. Do you supervise other employees?
       a. No
       b. Yes
8. How would you define workplace violence?
9. The following questions may cause mild discomfort due to the nature of the content. The survey may be terminated at any time. Incomplete surveys will not be used in the final evaluation of this study.
10. Please use the definitions provided in the link below to complete the rest of the survey
       a. Link to "Survey Definitions" document
       b. <u>Workplace violence:</u> violent acts (e.g., threats, physical or verbal aggression, harassment) perpetrated by a coworker, consumer, or others directed towards an employee of the workplace
       c. <u>Workplace bullying:</u> when a current employee performs a violent act (e.g., threats, harassment, physical or verbal aggression) toward another employee within the workplace; excludes cyber bullying, and stalking
11. While working in the field of behavior analysis, have you ever experienced an incident of workplace bullying?

a. No
b. Yes

If no skip to question 18

12. Did the incident occur in your current place of employment?
    a. Yes
    b. No

13. Did the incident(s) include any of the following? Check all that apply.
    a. Physical Aggression (e.g., kicking, punching, biting)
    b. Sexual assault/harassment (e.g., inappropriate contact)
    c. Verbal aggression (e.g., threats, name-calling, blaming, yelling)
    d. Emotional/psychological (e.g., manipulation, intimidation, criticism, inappropriate use of authority)
    e. Other – Please specify.

14. Did you report the incident?
    a. No
    b. Yes

If no skip to question 18

15. To whom did you report the incident?
    a. Direct Supervisor
    b. Human Resources
    c. Other Supervisor
    d. Other

16. What factors contributed to whether you reported an incident? Check all that apply.
    a. Severity of the incident
    b. Support of your supervisor
    c. Support of your coworkers
    d. Current reporting procedures at your workplace
    e. Fear of retaliation
    f. Someone else reported the incident
    g. Other – Please explain.

17. Did the incident result in any of the following (check all that apply):
    a. Leaving your position
    b. Retaliation of a coworker or supervisor
    c. You retaliating
    d. Missed days of work
    e. Inability to complete job duties
    f. Other – Please specify.

18. How often do you *witness* workplace bullying?
    a. Once a day
    b. Weekly
    c. Monthly
    d. A few times a year
    e. Once a year or less
    f. Never
    g. Other – Please specify

19. How often do you experience workplace bullying?

      a. Once a day
      b. Weekly
      c. Monthly
      d. A few times a year
      e. Once a year or less
      f. Never
      g. Other – Please specify

20. Is there a policy regarding workplace bullying at your current place of employment?
      a. Yes
      b. No
      c. Unsure

21. Is there a policy regarding any of the following at your current place of employment? Check all that apply.
      a. Robbery
      b. Active shooter
      c. Assault from a consumer
      d. Harassment from a consumer
      e. Other – Please specify
      f. Unsure

22. Have you participated in workplace violence prevention and/or responding training or education at your workplace?
      a. Prevention
      b. Responding
      c. Both
      d. No
If no skip to question 25

23. Check all that apply. Do you feel that this training was adequate to enable you to:
      a. Know what workplace violence is
      b. Recognize and handle threatening, aggressive, or violent behavior
      c. Ask for assistance if confronted with an incidence of violence
      d. Know what resources are available to employees for coping with workplace violence

24. Was workplace bullying included in this training?
      a. Yes
      b. No
      c. Unsure
Skip to question 26

25. Is workplace violence prevention and/or response training or education available at your workplace?
      a. Prevention
      b. Responding
      c. Both
      d. No
      e. Unsure
If no or unsure skip to question 29

26. How often is the training provided?

a. Upon hire
b. Yearly
c. Bi-annually
d. Other

27. Which training methods are used for training or education? Check all that apply.
    a. Classroom – instructor led
    b. Classroom including rehearsal and feedback
    c. Classroom including modeling
    d. Computer based learning
    e. On-the-job
    f. Provision of written policies or manuals

28. Do you feel that you should attend workplace violence prevention and/or response training?
    a. Prevention
    b. Response
    c. Both
    d. No
    e. Maybe

29. Do you know how to respond appropriately when you *witness* a workplace bullying incident?
    a. Yes
    b. No
    c. Unsure

30. Do you know how to respond appropriately when you *experience* a workplace bullying incident?
    a. Yes
    b. No
    c. Unsure

31. Thank You Statement
    a. Thank you for your participation in this survey. Please reach out with any additional comments or questions. – Molly Malone, Principal Investigator, Department of Applied Behavioral Sciences, mcmalone@ku.edu

Appendix B: Participation Survey

Workplace victimization is defined as a current employee performing a violent act (e.g., threats, harassment, physical or verbal aggression) toward another employee within the workplace. Excludes cyber bullying, and stalking.

1. What setting do you currently work in?
   ☐ Clinic
   ☐ Home-based
   ☐ Virtual
   ☐ Education
   ☐ Other – Please Specify

2. Have you experienced workplace victimization in the last 6 months?
   ☐ Yes ☐ No

3. How often do you experience workplace victimization?
   ☐ Never/Rarely
   ☐ 1 or more times a year
   ☐ Monthly
   ☐ Weekly
   ☐ Daily

4. Of the following options which incidents of workplace victimization have you experienced? Check all that apply.
   ☐ Threats
   ☐ Name-Calling
   ☐ Blaming
   ☐ Manipulation
   ☐ Intimidation
   ☐ Criticism
   ☐ Inappropriate use of authority
   ☐ Other – Please specify.

5. Have you experienced any of the following after an incident of workplace victimization? Check all that apply.
   ☐ Increased anxiety
   ☐ Decreased job satisfaction
   ☐ Negative perceptions of the work environment
   ☐ Increased absenteeism

6. If you are victimized in the workplace, select the option that best represents how comfortable you are in responding:
   ☐ I am comfortable responding and reporting the incident.
   ☐ I am comfortable reporting the incident but not responding.

☐I am comfortable responding, but not reporting the incident.
☐I am not comfortable responding and reporting the incident.

7. When experiencing workplace victimization, do you: (check all that apply)
☐Walk away from the aggressor
☐Report the incident
☐Retaliate against the aggressor
☐Do nothing

8. Have you received any formal training about workplace victimization from current or past jobs?
☐ Yes – current job
☐ Yes – past job
☐ No

Appendix C: Demographics Survey

Please fill in the following information. Information will only be used with your pseudonym assigned for the purpose of this study for manuscript and publication purposes only.

Gender:

Age:

Occupation:

Years working in Applied Behavior Analysis:

Education (current and/or previous):

Appendix D: Data Collection Sheets

Participant: Condition: Data Collector: Primary/Reliability							
Date	**Probe #**	**Video #**	**Step 1**	**Step 2**	**Step 3**	**Total Correct**	**Notes (e.g., emotional responding, termination)**

Scoring	
Step 1	Abstaining from retaliation for the duration of the video probe • Examples of retaliation: gasping, crying, sighing, scoffing, or speaking or yelling words • Nonexamples: involuntary sounds such as sneezing, or coughing
Step 2	Stating a short comment of disapproval within 5 seconds of completion of the video probe • Examples: "I do not appreciate the tone you used." "That is not true." • Nonexamples: "Stop talking to me."

Step 3	Walks away or engages in other activity in the environment
	• Participant walks away from their computer screen for a minimum of 5 seconds
	• Participant angles their body a minimum of 40 degrees away from the computer screen while engaging in another activity within the environment for a minimum of 5 seconds
	    o Examples: parallel play with a client as evidenced by a statement such as "Oh! What a cool blue cup!"
	    o Pretends to take data (e.g., vocal statement "This trial was correct.")
	    o Organizing program materials (e.g., vocal statement "I need alphabet cards.")

Appendix E: Social Validity Survey

Survey Scale:
1 = Strongly Disagree
2 = Disagree
3 = Neutral
4 = Agree
5 = Strongly Agree

1. I was satisfied with web-based training and interactions.
2. The training was easy to understand.
3. The feedback I was given was helpful.
4. The steps I was taught are beneficial to responding to workplace victimization.
5. I experienced no negative side effects during or after training.
6. I feel more prepared to respond to an instance of workplace victimization.
7. I will continue to use the steps I learned to respond to workplace victimization.
8. This training would be beneficial for others.
9. I would recommend this training to other professionals.

Appendix F: Fidelity Checklists

Put a "Y" for each correct step implemented by the experimenter. Put an "N" next to each incorrect step implemented by the experimenter.

Baseline/Post-BST/Generalization

| Participant: | Date: |
| Condition: | Data Collector: |

Step	Y/N	Notes
States to participant: I have begun recording the session.		
Instructs participant: You will now watch a short video of workplace victimization. Please respond as you would at your current place of employment.		
Shares PowerPoint via screen share option on Zoom		
Reads description of video. ("In this video you will see…")		
Tells participant who they will respond as. ("You will respond as if…")		
Plays entirety of video for participant.		
Waits a minimum of five seconds for participant response.		
Does not provide descriptive praise for each rehearsal.		
Does not provide corrective feedback for each rehearsal.		
Makes a thank you statement		

BST

Participant: Session #: Condition:		Date: Data Collector:
Step	**Y/ N**	**Notes**
States to participant: I have begun recording the session.		
States the purpose of the session (see slide 1 of BST PowerPoint)		
Allows participant to ask any questions before or during the presentation (see slide 2 of BST PowerPoint)		
Responds appropriately to participant questions if asked.		
Shares PowerPoint via screen share option on Zoom		
States the definition of workplace victimization		
Describes the types of workplace victimization		
Plays an example of each type of workplace victimization without the responding portion included		
States and describes the steps to respond to workplace victimization		
Plays a video model of responding to each type of workplace victimization.		
Explains rehearsal and feedback opportunities (see notes on slide 23 of BST PowerPoint)		

Practices a minimum of 6 videos.		
Reads description of video. ("In this video you will see…")		
Tells participant who they will respond as. ("You will respond as if…")		
Plays entirety of video for participant.		
Waits a minimum of five seconds for participant response.		
Provides descriptive praise for each rehearsal.		
Provides corrective feedback for each rehearsal.		
Plays a minimum of 3 videos for participant to respond to without providing feedback.		
Terminates session after 60 minutes or participant has completed 100% responding for three consecutive videos without feedback.		
Makes a thank you statement.		

Appendix G: Video Probes

Videos Intimidation	Condition	Behavior/Statement	Perpetrator	Victim	Location	Length
1	BL & Post-BST	*Removes items from staff conducting preference assessment*	Employee	Employee	Classroom	12 s
2	BL & Post-BST	"I'm going to have to tell the program manager you aren't following client protocols."	RBT	RBT	Hallway	19 s
3	BST	"Do I need to call Natasha at the administrative office and tell her you're being unfair with your feedback?"	Supervisee	Supervisor	Classroom	17 s
4	BST	"Hey. I have a parent training report that is due tomorrow. If you don't finish writing it for me, I'll tell Lisa you called off last week because you wanted to hang out with your boyfriend and weren't really sick."	Employee	Employee	Break Room	11 s
5	Gen	*Ignores coworker request when making lunch orders*	Employee	Employee	Break Room	14 s
6	Gen	"I'm your supervisor and you fill these out the way that I taught you."	Supervisor	Supervisee	Employee Desk	12 s
Criticism						
1	BL & Post-BST	"Are you stupid? No wonder your kids are having	Supervisor	Supervisee	Employee Desk	9 s

		problems in school."				
2	BL & Post-BST	"Some people" *looks over at RBT* "don't follow the protocols and then complain that the clients have a ton of problem behaviors"	Supervisor	Supervisee	Classroom	21 s
3	BST	"The RBTs just aren't running any of the programs the way that I've written them, or they don't run them at all. They keep asking me what schedule they're on or what they're protocols are when they can easily find it in central reach. They're wasting my time." *Stated while looking at RBT working in the room*	Supervisor	Supervisee	Classroom	17 s
4	BST	"Do you always run the program like that?"	RBT	RBT	Classroom	5 s
5	Gen	"Why don't you tell us how to do it since you did it wrong yesterday afternoon while working with Jenna?"	Supervisor	Supervisee	Classroom	15 s
6	Gen	"No wonder your kids get in trouble so much for doing whatever they want at school."	RBT	RBT	Playroom	14 s
Blaming						
1	BL & Post-BST	"She's the reason the toys keep	Supervisor	Supervisee	Playroom	10 s

		getting stepped on and broken."				
2	BL & Post-BST	"You're the reason our COVID policies keep getting stricter since you can't follow them."	RBT	RBT	Break Room	16 s
3	BST	"This only happens because you don't follow his protocol the way Devonte wants. We had made so much progress before you started working with them."	RBT	RBT	Hallway	11 s
4	BST	"You're the reason we can't buy any more supplies for running programs."	Employee	Employee	Break Room	10 s
5	Gen	"This is why I keep getting calls from Sam's mom about the amount of injury reports he has."	Supervisor	Supervisee	Playroom	17 s
6	Gen	"You're the reason his mom thinks he hates it here and wants to switch clinics."	RBT	RBT	Walking in from client pick up	8 s

Note. The table depicts information regarding the video probes used during Study 2 including the length of each probe and during which condition the probe was used. Additonal dialogue may have been included in probes but the victimization statement and/or behavior made by the perpetrator are included. Location indicates the simulated work location for each probe.