



PATRICIA B. ALLEN

VIOLENCE

in the

EMERGENCY DEPARTMENT

Tools & Strategies to
Create a Violence-Free ED

SPRINGER  PUBLISHING COMPANY

Violence in the Emergency Department

*Tools and Strategies to Create
a Violence-Free ED*

PATRICIA B. ALLEN, MBA, BS, RN

 **SPRINGER PUBLISHING COMPANY**

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Patricia B. “Nikki” Allen, MBA, BS, RN, has spent her entire career in diverse areas of health care management. She has created a violence prevention plan including violence prevention tools to help the multiple Emergency Departments (EDs) with which she has been involved. Since then, Ms. Allen has become increasingly interested in addressing the explosive but underreported incidence of violence occurring in Emergency Departments across the United States. She has been a regular invited speaker about violence in the Emergency Department at the Leadership Conference of the Emergency Nurses Association (ENA). She is passionate about continuing her work in developing strategies to deal with violent individuals, to help protect ED patients, and to help physicians, nurses, and ED staff protect themselves from harm. Ms. Allen’s other passions are her three grown children, her daughter-in-law, and her friends. One of her children is a health care professional in an environment that is high-risk for violence.

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This book is dedicated to my beloved children, Amanda, Andrew, and Jennifer, and to my daughter-in-law, Ashley. I cherish you all very much.

Thank you for being wonderful adults and amazing individuals!

Second, I dedicate this book to my friends Paul Clere, Wendy Fordyce, and Pam King, who enthusiastically supported my passion to help curb violence in U.S. EDs and pushed me toward my goal of writing this book.

I could not have finished the book without my devoted and detailed friend, Marilyn Wright. And to Margaret Zuccarini and Brian O'Connor, my ever-patient editors, thank you; you know what you did!

I dedicate this book to the Emergency Department nurses, directors, and physicians with whom I have had the pleasure to work and for whom I have the greatest respect and utmost admiration.

I further dedicate this book to my ENA speaking partner, Vicki Owens, who as the director of a large suburban ED has experienced violence in her own ED despite being ahead of the curve in protecting their ED environment against intrusion.

Finally, to my former boss, Suzanne Stone-Griffith, who saw a need for hospital Emergency Departments to be made aware of the dangers of violence and who addressed the need for prevention programs.

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Preface

My goal in writing this book is to share the tremendous amount of information that I have amassed over several years of research and practice, and through the Emergency Nurses Association (ENA) forum that allowed me to speak about a subject that is of immense interest to me. During a literature review to update my current information, three themes recurred about violence in the Emergency Department.

First, our dedicated Emergency Department nurses, physicians, and staff are being threatened, spit on, harassed, kicked, punched, and seriously injured by patients and exposed to other types of violence on nearly an everyday basis. Some nurses believe that patient abuse is part of the job, while other nurses just seem reluctant to report abuse. Several resources attribute this trend to the fact that nurses apparently believe there is no logic in reporting any level of patient abuse because of they believe that violence will not be addressed. “We are out there on the front lines without guns, bulletproof vests and mace. We are out there trying to help. When did it become OK to hit or beat us?” (Harmacinski, 2003). Fellow nurses, it is simply not OK to be treated with abuse or violence—no matter what. Please immediately report any violence or abuse!

Second, violence is more than the type of violence that I refer to as walking-in-the-door violence. It can include the violence and abuse delivered by violent street gangs; perpetrators of violence; patients, including psychiatrically ill patients; families; friends; and strangers. I realized that street gangs and abuse to nurses by patients must certainly be discussed but that other forms of violence exist that may present themselves in the ED, such as domestic/intimate partner violence/abuse; teen dating violence/abuse; lateral/workplace violence; and elder violence/abuse. I felt it necessary to expand on the subject matter of *all* violence, although this book is not intended to be a complete resource for each type of violence against patients.

Third, there is scant information about the larger topic of ED violence. I have searched and researched newspaper archives, journals, Web sites, books, academic literature, and personal recollections to little avail. There is inadequate contemporary information in any written source about violence in U.S. EDs. Surprisingly, I found more information from the prior decade and a good bit of journalistic information from Britain, Canada, and Australia, some which is relevant to U.S. EDs and that I will share.

I know that violence has not gone away from the doors of our U.S. Emergency Departments. Quite the contrary; violence is occurring to a much greater extent, and the problem of violence is becoming more complex and difficult to address. I decided to write this book with the intent of sharing what I have learned and with the hope of impeding even one death or disability due to violence in U.S. Emergency Departments.

Violence in the Emergency Department is larger than just workplace violence. It envelopes every facet of violence and is affecting the safety and welfare of our nurses and health care providers and of our patients, who entrust us to care for them.

Patricia B. “Nikki” Allen, MBA, BS, RN

Introduction

Violence in the ED, while an incongruity, is a crisis for U.S. hospitals. Emergency Departments are places that people come to be cared for, and the perception—and the reality—is that no one should encounter danger in the ED.

However, violence in the ED is increasing and is responsible for death, job-ending physical assault, loss of work days, decreased job satisfaction, career change of talented and committed emergency medicine physicians and nurses, and change in the environment of emergency care in the United States and internationally. Violence in the ED may be partially responsible for the closing of hospitals and Emergency Departments across the U.S.

Emergency Departments of all sizes and demographics in the U.S. and in the world are becoming the victims of violence. The incidence and the extent of violence are rapidly escalating. Being a rural or a suburban medical center is no longer an automatic guarantee that violence will not occur. No Emergency Department is immune.

There are five types of individuals who threaten and/or instigate violence in U.S. Emergency Departments:

- The individual or family who becomes volatile and assaults the professional caregiver in the ED for diverse reasons, often due only to long waits to obtain emergency care
- Psychiatric patients, especially those who are not compliant with their medication regimen
- The gang member or other perpetrator who is seeking drugs or revenge or responds in his habitually violent way (Savelli, personal communication, 2008)
- The substance abuser who is seeking drugs or is acting out due to the effects of drugs or alcohol intoxication
- The angry individual who perceives himself as a victim and who seeks out specific individuals to assault or harm; this individual often has a past history of violent behavior

The reasons that these individuals or groups incite violence are many, complex, and varied: overcrowded ED waiting rooms, staffing shortages, untrained triage nurses, limited interpersonal communication, uninitiated ED staff, and the patient's perception of being forgotten in the waiting room are documented reasons for violent outbursts. Individuals who are patients in the Emergency Department may have a psychiatric illness or an acute personality disorder, and such patients are taken to the Emergency Department because there is no other place to go.

When individuals feel threatened (being sick or in pain) or out of control (waiting hour after hour for medical assistance), and perceive inactivity by the ED staff, a normally calm individual can often be incited to explosive anger.

There are several other notable types of violence whose victims may present as patients in the ED:

- The victim of domestic abuse, now commonly called intimate partner violence or IPV (both male and female)
- Victims of dating violence that has become rampant among teenagers and adolescents
- The coworker, the so-called lateral abuser, who victimizes a cohort in the workplace
- Elder abuse victims, a blight on the U.S. that exists in alarming numbers
- The child who is the victim of violence or abuse.

Street gangs present a powerful challenge for Emergency Departments. When a gang member is injured, it is characteristic for other members of his gang to follow the injured person to the ED and take up residence in the waiting room. The act of cutting off a shirt or taking off a hat or gang beads, which may be necessary for emergency treatment, is considered disrespectful to the gang and can provoke violence.

Identifying the potential risk for violence in *your* ED is the *critical first step* to prevention. Each hospital must recognize and address the potential for violence in its own Emergency Department with the ultimate goal of protecting the physicians, nurses, staff, and other patients who are customers of the hospital.

Hospitals need to anticipate that violence will occur and have a plan to prevent it. Each staff member, whether employed full-time, part-time, or PRN, needs to be trained in de-escalation tactics and to have the tools,

support, and empowerment necessary to know how to act rapidly when a violent episode does erupt in the Emergency Department.¹

Hospital leaders must recognize the risks that may be inherent within their hospitals, such as multiple access points into the Emergency Department and hospital, limited security personnel, unmanned video surveillance, untrained ED staff, and so forth and work toward correcting these deficiencies.

Limited data are published about violence in U.S. Emergency Departments often due to the conflict between the need to attract and retain patients in a hospitable way and the reality of caring for individuals who may have a violent lifestyle. Staff generally underreports violence because many staff perceives assaults or abuse by patients as part of the job. In a 2008 position statement, the Emergency Nurses Association (ENA) tells hospitals that “healthcare organizations have a responsibility to provide a safe and secure environment for their employees and the public. Emergency Nurses have the right to take appropriate measures to protect themselves and their patients from injury due to violent individuals” (ENA, 2008).

Violence prevention can become a core competency for a hospital Emergency Department if violence prevention is employed consistently, is successful, and is communicated to the community.

So, why isn't violence in the Emergency Department the new hot topic of the year, constantly on the mind of every red-blooded American, discussed around the water cooler or before football games? The reason is that no one outside of the business of health care—most especially those in hospital emergency services—is aware of the significant impact that violence in the Emergency Department is creating. Violence in the ED may be well-known and recognized among hospital administration. The problem of ED violence may be insufficiently admitted, perhaps due to the fact that hospital administrators must do everything possible to generate one more customer/paying patient to ensure their hospital's—and their own—longevity and success.

This book is a guide for Emergency Departments, hospitals, and for health care professionals involved in the care of patients in the Emergency Department. *Violence in the Emergency Department* is designed to help you become aware of the potential for violence and to identify risk in your Emergency Department. This book will help you take the critical first steps toward implementing a violence defense strategy and program to protect your hospital and your invaluable Emergency Department staff. Additionally, this book will assist you in creating a violence-free

ED and help create a core competency to enable your hospital to market *your* Emergency Department to patients as the safe place to come for emergency services.

Violence in the Emergency Department is also a primer for non-health care individuals who want and/or need to understand the complex nature of violence in U.S. Emergency Departments. It is my hope that this information will provide the insight and knowledge necessary to make crucial decisions for yourself and your family when emergency care is needed.

NOTE

1. PRN is a hospital staffing strategy and refers to staffing on an as-needed basis.

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The Emergence of Violence in Society and Health Care Settings

PART I

We used to wonder where war lived, what it was that made it so vile. And now we realize that we know where it lives, that it is inside ourselves.

—Albert Camus

1

The Sociology of American Violence

The past two decades in the United States have been met with an amazing amalgam of change: sophisticated technological change; change in transportation methods; change in how goods and services are manufactured, advertised, and delivered; and dramatic population and demographic change. Much of the change in the U.S. has been negative and toxic, threatening individuals and communities. I recall the innocent America of my youth and in contrasting the 1950s and 1960s to the escalating international and social tensions of today, I have questioned the onset of violence in contemporary society and I have attempted to identify even one source for the arrival and acceleration of violence into our previously untouched lives. How and when did violence begin to creep into our perfect American world?

The naiveté that many of us experienced in our youth often was created by the shield of a small-town existence. Around us—yet far away—the rumblings of social and racial tension was beginning. Civil rights, the Bay of Pigs, and Vietnam were introduced into every U.S. living room as radio and television broadcasting technology improved. Mothers canned and prepared food and clothing for bomb shelters and in school; we practiced shielding ourselves beneath our desks in the event that the *red alert* was sounded. Singers and songwriters captured the social change that the U.S. was experiencing, notably in the anthem dedicated to the

students at Kent State University (Ohio) who died from violence, and tributes to Martin Luther King and Bobby and President John Kennedy, who were violently assassinated by U.S. citizens. The remoteness and inaccessibility of the rest of the world were disappearing as images of the political and social change in allied and in hostile countries became part of the fabric of everyday American life.

HOW DID VIOLENCE BEGIN?

It is a vast and difficult challenge to interpret the various theories and analyses of political, social, and economic thinkers and to decipher and assimilate one or several theories into a causal agent for the beginnings of violence as a social voice.

There are three key factors that may have been responsible for the formation and function of society and that may help to explain a foundation for violence in the late 18th-century U.S.

The first key factor, the structure of the economy, such as the presence of or lack of a democracy (Barrington Moore, n.d.), may be a significant factor in whether a society embraces—or rejects—violence as a way to express displeasure. Individuals who live in tyrannical societies, who do not have a vote in how their taxes are spent or in the making of governing rules, can become frustrated and angry. U.S. democracy has based its foundation on *by the people, for the people*, and as in other democratic governments individual citizens define the policies and laws. Autocracy, by its very nature, appears to fuel frustrated and violent action in the form of coups or demonstrations. The basis of democracy is to promote and encourage independent thinking and accomplishment, empowering people with jurisdiction over their own lives, resulting in less frustration and violent behavior.

The second key factor, the type of labor or employment system implemented by government, may be a cause. In Japan, employment became “internalized” (Mosk, 2008) in the 1940s through the legalization of labor unions. The government approval of unions resulted in one very important outcome: the loyalty of the workforce that was further strengthened by the offer of high wages and assured employment for both white-collar and blue-collar workers, promised to the workers in the best *and* in the worst of economic times. As a valuable byproduct, the Japanese workers became a very flexible workforce so that when technological opportunity presented itself, the workers were able to capitalize on

the change that we recognize as the just-in-time inventory strategy (Bnet business dictionary, n.d.).¹ While there is no direct evidence that an employment system of this kind was a sustaining feature in creating loyalty and/or reducing worker dissatisfaction—and therefore in decreasing the potential for violence—it is an intuitive leap to assume that employees appreciated this intervention. In the U.S., there is no such mechanism to garner employee loyalty. The U.S. is, and has been, fraught with layoffs, downsizings, and right-sizings. These unemployed individuals are likely to feel disenfranchised and desperate—and far from loyal. All of this has contributed to growing employee *hostility* against the employer, which has, at times, culminated in workplace shootings and other forms of violence from angry and frustrated individuals.

The timing of industrialization of a society (Bendix, n.d.), occurring in the late-19th century in America, represents historical levels of technological advance (Dore, n.d.) that led to a flurry of entrepreneurial investment and great advances by inventors. In the U.S., both the investors and the entrepreneurs enjoyed great wealth. The Gilded Age in the U.S. was an explosion of growth and was thus labeled and intended to imply “outwardly showy but internally corrupt” (David, 1936, p. 12). This phrase sums up the circumstances of the U.S. at the end of the 19th century: the U.S. government was mired in corruption, and great prosperity and wealth was held by only a handful of people, while the remaining citizens were desperately poor and deprived.

We can assume that societal industrialization in other countries has had much the same impact as it had in the U.S., whereas violence in preindustrial societies may be less furious, less intense. The point in time that industrialization and mechanization occur may signal the beginning of change that creates the rationale for irrational behavior that is violence.

CLUES ABOUT VIOLENCE IN EARLY SOCIETY

A growing disregard for the worth of human values during the pinnacle of industrialization (David, 1936), when cities were growing and commerce was spreading westward, may have stimulated the rapid development of labor unions in the U.S. in 1886. The dramatic changes in *industrial technique* broadened the chasm between employer and employee. “Sweeping industrialization” and change and improvement in technology created the opportunity for the extensive exportation of

goods (David, 1936, p. 4). Factory workers were underpaid, underappreciated, and exploited. One employer was said to have remarked to Samuel Gompers, “I regard my employees as I do a machine, to be used to my advantage, and when they are old and of no further use I cast them in the street” (David, 1936, p. 7).

The law of supply and demand affected the U.S. worker and his ability to earn a decent wage. Public and private investment in industrialization and mechanization was rampant, and since machines could do the work of the labor force faster and better, more machines and fewer workers were used. In 1886, Carroll Wright, the Commissioner of Labor, reported that machines had taken the place of one-half of the human workforce that heretofore had been irreplaceable 20 years prior. One account from a small arms manufacturing operation projected that the number of gun stocks that could be manufactured by one laborer using a machine was greater by a factor of 45–50 times than what could be accomplished by a cadre of workers in an entire day. It was estimated that this one operation alone had displaced “44–49” men (David, 1936, p. 5).

The workforce in the U.S. had grown very large because the “stream of cheap European labor entering the country” (David, 1936, p. 4). Competition and the thirst for wealth drove the business owners to pay their workers the smallest wage they could pay so as to pocket more money for themselves. This disparity in wealth “drove a powerful wedge between the workers and the owners” to a degree that had not been seen before” (David, 1936, p. 8). The workers—the *working poor*—were accused of being destitute because of “poor education; drink, laziness, [gambling] and improvidence” (David, 1936, p. 8) rather than as a result of the rapid expansion of mechanization that reduced the need for human manpower. “If one examines the economic and social condition of the United States working class during the ‘eighties, one can understand why labor was restive and discontented” (David, 1936, p. 8). The limitless number of workers who were able and willing to accept insufficient wages fueled a growing economic hardship for a great many people, creating a vast number of poor workers and poverty-stricken families in the U.S. If one man refused to work long hours for a paltry wage, there were two or three other men standing in line who would gladly accept. It is no revelation that extreme discontent among the new working class was mounting to a dangerous level. The men had no control over their environment and had no ability to make change; they were forced to accept intolerable working conditions, deficient wages, and miserable

living circumstances. In 1883, 10% of the population in U.S. cities lived below the poverty level, with the average worker's wages less than \$1.00 a day (David, 1936).

The political system was corrupt, and the politicians flaunted the wealth, privilege, and social status that accompanied their election to office. The workers had much to complain about and accused the employers of being the "destroyers of human rights" (David, 1936, p. 12). The expanding division of social standing and economic assets is perhaps the beginning of the phrase the *haves and the have-nots*, referred to by social scientists as the "frustration-aggression mechanism" (Conflict Resolution Consortium, Staff, 1970, p. 10).

SOCIAL REVOLUTION

By 1881, the social revolutionary movement was growing in the U.S., but there was still only a modest interest in the principles of the movement or support through participation until a German man, Johan Most, arrived in the U.S. in 1882. Johan Most is credited with revving up the quasi-anarchists by providing a rational basis for social-revolutionary action in the U.S.

Most had spent an unhappy, humiliating childhood in Germany. He had a visible physical deformity that may have played a large part in his belief that he was to be relegated to the role of a "martyr for society" (David, 1936, p. 84). Interestingly, Johan Most was a victim of violence himself, having had an "unfortunate experience with a parish priest" during his youth (David, 1936, p. 85). As a young adult in Germany, Most was becoming more radical in his thought. He acquainted himself with Marxist thinking and action and was frequently criticized and questioned by law enforcement regarding his increasingly extremist socialistic views.² Before he was forced to leave Germany in 1878 under antisocialist law, he had managed to serve two terms in the Reichstag, the German Parliament. In London, following his ejection from Germany, he published a weekly socialist newsletter and became actively involved with Russian terrorists, writing in favor of the assassination of Tsar Alexander II. Through Most's publications, the public was confronted with the reality of Most as a violent man, which added to his critical notoriety. Most was a robust and fanatical proponent of violence, defending the "use of violence to achieve the necessary end" (*Johan Most Biographical Sketch*, n.d.).

Upon his arrival in the U.S., Most's anarchist views and his ability to speak with conviction and passion created idol-like curiosity and veneration wherever he visited. Johan Most believed that states (the U.S. and other countries) must be governed by a group of citizens, and he spoke against the structure of a government, rejecting the strength, protection, and involvement of any government in society. Most, in fact, did not believe in formal government and argued for methods to overthrow authority. Initially, Most was able to convince large numbers of U.S. citizens that through the use of force, government could be changed and made to succumb to the wishes of the people, encouraging governance by the people without the influence of an official government. Eventually the influence and power that Most had briefly enjoyed during his time in the U.S. was weakened as U.S. citizens grew increasingly disbelieving of Most and of his radical and unfamiliar ideas. Most died in the U.S. nearly 20 years after he had first arrived and had been welcomed and heralded as a visionary (David, 1936, p. 91). Most may have been successful in influencing his maxim of violence before falling out of favor.

THE EARLY 20TH CENTURY AND AMERICA'S GILDED AGE

By 1890, 11 million of the 12 million employed U.S. citizens were earning less than \$1,200/year. The average annual wage was \$380.00 (David, 1936, p. 13) as compared with a projected average wage for U.S. workers in 2009 of \$52,909 (N.D., 2008). Cities offered citizens an opportunity to earn more money than could be earned in rural agricultural areas, which created a massive migration into the cities. Additionally, immigrants continued to arrive in the U.S. in unprecedented numbers. Both groups flowed into the city, hoping to make their fortunes.

An economist of the time is quoted as saying, "a widespread feeling of unrest and brooding revolution . . . violent strikes and riots wracked the nation through the turn of the Century. The middle class whispered fearfully of 'carnivals of revenge'" (*America in the Gilded Age*, 1999). The middle class of the day—the working poor—was the group of workers who were suffering abject poverty and horrendous living conditions in tenements in the cities. The *frustration-aggression mechanism* appears to be recognized by social scientists during this era as an important keystone in the rise of violence (Conflict Resolution Consortium, Staff, 1970, p. 10).

The Gilded Age of the U.S. brought about the formation of a social structure in large urban cities after the U.S. Civil War. The Gilded Age

was characterized by a bifurcation of interests representing a change from the middle-of-the-road sociopolitical viewpoint that had been the prevailing position for most U.S. citizens until the early part of the 20th century. This developing dichotomy of positions was apparent in the surfacing of a class structure producing a high-society faction that became interested in demonstrating the good life with irrepressible displays of wealth, including elaborate houses and excessive material possessions, and an opposing segment representing the lowest of the low society—beggars, thieves, and murderers who lived in hovels often down the street from the opulent, extravagant homes and buildings owned by the other half (*America in the Gilded Age*, 1999). The situation created by this social positioning during the Gilded Age may have been the impetus for the social theorists' discussions—an attempt to put a name to the changes that were occurring. An increase in frustration, anger, and aggression resulted in violence as a means to collectively express displeasure at the disparity of social circumstances.

The early beginnings of change—a division in the group's social interests—was apparent from the political splinter groups that formed on either side of the central political opinion and were based on the driving interests within each group. The group that was right of center (the former, central political position) was gravely concerned about the new, developing culture and the “waning of patrician society and standards,” whereas the group left of center strongly favored correcting “mass poverty and inequality” (Monti, 1999, p. 33). Both groups had a zeal for the evolving social and industrial capitalism of the U.S., each hoping to cash in on fortunes of their own, but the groups were dissimilar in their approach to solving the problems of cities (Monti, 1999, p. 33).

Andrew Carnegie, an immigrant from Scotland, is one of the U.S.'s most illustrious, yet most malevolent, entrepreneurs. He is known as the originator of the sweatshop, in which workers labored many hours a day in dangerous and inadequate buildings, making minute wages. The sweatshops were organized to support his business interests in New York City. In Pennsylvania, Carnegie monopolized the steel industry of the nation. Aside from being known as one of the U.S.'s most important innovators of the Gilded Age, Andrew Carnegie is also known for his ability to engage a “ruthless determination to thwart his rivals by fair means or foul” (Cashman, 1984). Much public anger toward Carnegie resulted eventually in his decision to donate large amounts of the money he had earned. Even today, his generous philanthropy is well-known and well-regarded.

The Gilded Age was tumultuous, creating massive wealth for a few and extraordinary poverty for many. Men, it seems, were out for themselves, a frame of mind captured from the earlier century. A quote from Mark Twain sums up the tenor of the Gilded Age: “what is the chief end of man?—to get rich. In what way? Dishonestly if we can; honestly if we must” (*America in the Gilded Age*, 1999).

Nothing in this historical view or the observation of developing political stylists in cities in the early days of the U.S. points to or explains definitively how violence developed. However, the abject poverty of the working poor coupled with the documented maltreatment by appalling employers can unequivocally explain how frustration and anger can grow and lead to violent emotion and action. The discrepancies in wealth and new opportunities to learn and participate in radical thought and action led to formation of early—and violent—working-class social revolutions within the U.S. The “classic view of the escalation of violence,” says Cheryl Jorgensen-Earp, is “that movements reach a point of frustration” when bargaining or attempts at resolution no longer work; that is when violence occurs (Jorgensen-Earp, 2008, p. 5).

Late in the 19th century and early in the 20th century in the U.S., the development of labor unions played an important role in mobilizing the dissatisfaction of the workers. U.S. industrial workers joined together as collective bargaining units in an attempt to improve wages and to decrease the length of the workday. Aggression may have been the members’ only recourse as a means to express frustration and resentment at their inability to control the work environment, and violence emerged as a demonstration of the workers’ unhappiness.

Jorgensen-Earp in her book *In the Wake of Violence* suggests that “despite the potentially negative weight that it brings to a movement, violence in social protest is more common than generally thought” (Jorgensen-Earp, 2008, p. 18). Jorgensen-Earp tells us that in 1973, William Gamson “spoke of US social protest as ‘liberally speckled with violent episodes’ and estimates (in 1973) that 25% of all social movements had ‘violence somewhere in their history’” (Jorgensen-Earp, 2008, p. 18).³

Paradoxically, while the formations of labor unions may be at the root of collective social activity in the U.S., professional nursing unions have become a growing staple of U.S. health care delivery systems, primarily in hospitals. Professional nurse unions have become a method for nurses to protect their staffing positions and their licenses. Nurses, too—through their unions—have *fought* for fewer hours, improved pay, worker rights (for example, to lower nurse-to-patient ratios), and

as a means to thwart management mistreatment. Professional nurse unions are a tool for compensation negotiation and collective lobbying for the political and legal rights and representation of nurses. The following pages of this book explore another perspective of the protection of nurses' rights—protection from violence in the Emergency Departments in the contemporary U.S.

To absolutely identify and define the reason(s) for a beginning or an upsurge of violence in the U.S. from the beginning of recorded history would require an entire social discourse on U.S. and international social history and philosophical thought. For the purposes of this book, the brief overview that I have provided presents clues about how frustration leads to anger and drives the impetus for individuals to join together, forming collectives of action in an attempt to resolve some of their distressing work and social circumstances, both in the early part of the U.S. 20th century and today.

THE HISTORY AND SOCIOLOGY OF AGGRESSION AND VIOLENCE

Theorists and philosophers who provide an account for the beginning of social aggression and violence in the U.S. have provided much insight into the beginnings and timeline of the emergence of violence in contemporary U.S. society. There is much written information to support theories demonstrating the impact of cultural and societal expectations on the way an individual evolves, the experiences that he has or does not have, the environment in which he lives, and the role models who influence him (Bendix, n.d., p. 1; Katznelson & Zolberg, n.d., p. 12; Staff, 1970, p. 9). The combination of these forces aggregate to shape a potential for *individual* pacifism or for violence.

Cultural factors of a society contribute to what is acceptable behavior and what is not acceptable behavior. We learn ethics and moral values from our parents, teachers, and social peers. The expectations of behavior are formed early and are supported or changed throughout the formative years. Expectations about right and wrong may change depending on the path an individual chooses. For example, if one individual selects a career path that encourages a daily visit to a tavern or bar with his buddies after work or one is employed in an environment that does not prohibit the use of profanity (a form of aggression), the individual will likely have a different view of the world than does the individual who works in

an office environment that commands a completely different set of values and expectations (Moffatt, 2002). Dr. Gregory Moffatt in his book, *A Violent Heart*, believes that if he relocated a white-collar businessman, who had expectations of proper behavior in his daily office environment, into a prison situation, the businessman would “very quickly take on a more aggressive personality” (Moffatt, 2002, p. 3).

The thinkers of the day in the early 20th century must have been confronted with trying to understand the issues that were responsible for the collective aggression that had been occurring in the cities during the Gilded Age and in the prior century. A group of Yale psychologists in the 1930s led by John Dollard first described a rationale for group aggression and violence. They called this theory the *frustration-aggression mechanism*. In summary, this theory says that:

the primary source of the human capacity for violence appears to be the frustration-aggression mechanism. Frustration does not necessarily lead to violence, and violence for some men is motivated by expectations of gain. The anger induced by frustration, however, is a motivating force that disposes men to aggression, irrespective of its instrumentalities. If frustrations are sufficiently prolonged or sharply felt, aggression is quite likely, if not certain, to occur. To conclude that the relationship is not relevant to individual or collective violence is akin to the assertion that the law of gravitation is irrelevant to the theory of flight because not everything that goes up falls back to earth in accord with the basic gravitational principle. The frustration-aggression mechanism is in this sense analogous to the law of gravity: men who are frustrated have an innate disposition to do violence to its source in proportion to the intensity of their frustrations. (Miller, 1941)

Collective aggression or group violence appears to develop not from angry individuals in concert but instead from the group *as a collective*, which decides to act in violent ways. Earl Conteh-Morgan, in his 2004 book titled *Collective Political Violence: An Introduction to the Theories and Cases of Violent Conflicts*, talks about a concept of aggression. Conteh-Morgan argues that the frustration-aggression model does not take *deprivation* into account as a determining factor in the cause of aggression. Deprivation could certainly have been a motivating factor to incite aggression and violence for the have-nots in the 19th- and 20th-century U.S. (Conteh-Morgan, 2004).

Researchers disagree about the definition of aggression. Some believe that aggression is the purposeful causing of pain, while others view aggression simply as unacceptable social behavior, perhaps as simple as

a rude remark. Conteh-Morgan says, “For most people an action is aggressive in nature if the perpetrator had a socially *unjustified* motive” (Conteh-Morgan, 2004, p. 70, emphasis added); in other words, aggressive acts are not considered aggression if the act is socially justified. But what is considered socially justifiable?

It appears that the acceptance or rejection of aggression as a social norm directly correlates to the level of advancement or economic largesse that a society enjoys: aggression is unacceptable in developed societies, whereas less-advanced societies accept aggression. Conteh-Morgan states that the 1960s in the U.S. saw much political change and social upheaval, which drove political scientists, sociologists, and psychologists to rethink, redefine, and reintroduce collective political aggression or violence as linked—once again—to the frustration-aggression model. The U.S. in the 1960s was caught up in revolution against the Vietnam War, against the government, and against the laws prohibiting marijuana, and the youth of the U.S.—excited to make changes and to put their mark on history—were ready for a fight. It seems that I was not totally incorrect in my 1960s assumption that big change was happening.

J. C. Davies suggests that the principle cause of revolution is the “reaction to a short-term economic downturn following a prolonged period of objective economic and social development” (Davies, 1962, p. 5). Conteh-Morgan labels Davies’ assessment *shattered dreams*; when shattered dreams are coupled with the fear of losing everything that an individual has already attained the result can be a revolution (Conteh-Morgan, 2004, p. 71). The goal of aggression or revolution, Conteh-Morgan purports, is “self-enhancement by the group of protesters who perceive themselves to be threatened, challenged or devalued” (Conteh-Morgan, 2004, p. 71).

The way that a specific culture—with its traditions, religious influences, and majority laws and values—helps form our own personal views can differ based on the history and lifestyle of that culture. A perfect illustration of the influence that culture has in the formation of individual values, expectations, and actions—and deprivation—is the modern culture of Iraq and its people. For many years, the Iraqis have lived in a dictator-run country where they have had to witness their quasi-elected leader living a much richer lifestyle than the ordinary Iraqi citizen lives. Iraqis must budget their daytime responsibilities around the hours that they know electricity will be available and live in constant fear for their safety, things that people in the U.S., on the whole, have rarely had to worry about. In Iraq, there is a distinct environment of civil tension

among the many ethnicities, cultures, and religiously diverse groups. Iraqis' perception of acceptable behavior may be skewed with unusual expectations of what appropriate and acceptable behavior looks like. In the U.S., there is no question as to what is the appropriate behavior of its citizens. The culture that Iraq has—and the expectations that Iraqis have of other Iraqis—is very different from American's expectations of other Americans.

It is important to know that a theory is simply that: someone's interpretation of why something is occurring. Understanding the entire spectrum of sociological theory and succumbing to the exploration of the social scientists' and philosophers' evidence in support of their theories with the extensive pro/con arguments that could be made, would take us completely off track in determining a timeframe and possible rationale for aggression and violence in the U.S.

These explanations are solely an overview of some of the important views of the day. This discussion is based on the assumption that one reason for group aggression, revolution, or violence may be partially explained by the frustration-aggression mechanism, and the timeframe for its origin may be the middle to late 1930s in the U.S. Dr. Moffatt (2002) believes that “theories concerning the causes of aggressive behavior can be grouped into three major categories—biological, sociological and psychological” (p. 4). It is from this framework that I present my research regarding the larger subject of violence.

THE BIOLOGY OF AGGRESSION AND VIOLENCE

Biologically speaking, individuals may inherently carry a violence gene. Dr. Gregory Moffatt (2002) suggests that individuals may have an aggressive nature due to genetics that drive or shape personality, producing “pre-programmed” (p. 5) tendencies toward aggression or violence. Similarly, just as tendencies toward alcoholism or other inherited diseases are built into our genetic individuality, violence, or aggression may also be genetic. Dr. Moffatt (2002, pp. 7–8) points out that the hypothalamus of the brain is a critical organ, and that this minute organ may function to direct an individual's violence potential. The following passage best supports the function of the hypothalamus in the control or jurisdiction of behavior and of rage:

The tiny hypothalamus serves as the Health Maintenance Organization of the body, regulating its homeostasis, or stable state of equilibrium. The

hypothalamus also generates behaviors involved in eating, drinking, general arousal, rage, aggression, embarrassment, [and] escape from danger, pleasure and copulation. It does an amazing number of housekeeping chores for such a small piece of tissue. Its lateral and anterior parts seem to support activation of the parasympathetic nervous system: drop in blood pressure; slowing of pulse; and regulation of digestion, defecation, assimilation, and reproduction in such a way as to contribute on the whole to rest and recovery. The medial hypothalamus and the posterior hypothalamus regulate activation and acceleration of pulse and breathing rates, high blood pressure, arousal, fear and anger. The stimulation of specific groups of cells in these areas can elicit pure behaviors. For example, rats placed in an experimental situation where they can press a lever to stimulate a pleasure center will do so to the exclusion of eating and drinking. Stimulation of another area can produce rage. (Kore Liow, 2001)

A brief discussion of testosterone, a male sex hormone (androgen) and anabolic steroid, may help explain why males are generally more aggressive than females. Testosterone is secreted by the male testes, the endocrine system, and to some degree by specific neurons in the brain. Female testosterone is secreted by the ovaries and the endocrine system and also by the neurons in the brain, the same as males. The key difference is that the level of female testosterone secretion is a relative microquantity when compared with males, as males produce 20 times more testosterone than females do. Testosterone and other hormones are also responsible for the equilibrium of body functions, for libido, for regulation of levels of water, glucose, and electrolytes, and for stimulation of growth. Importantly for this discussion, testosterone functions to help an individual manage stress, especially in the face of changing physical circumstances (Mitchell, 1998).

The fact that males far outnumber females as perpetrators of violence is not disputed (Fonagy, 1999; Ridley, 2005). It certainly seems possible that the huge differential in the amount of testosterone produced by males may lie at the foundation of a heightened level of aggression among males. The elevated natural production of testosterone or taking additional supraphysiologic doses of steroids has been linked to aggressive behavior. Interestingly, hypogonadism, or the production of unusually *low* quantities of testosterone, also is associated with aggressive behavior. The use of alcohol, amphetamines, and phencyclidines have also been shown to increase agitation and may intensify violent behavior (Mitchell, 1998).



Figure 1.1 Through socialization, both man and animal can be docile and aggression-free. Photo courtesy of Vladimir Petrovic (www.bullenfeld.com).

Anyone who owns a rottweiler puppy (see Figure 1.1) can attest to the fact that providing plenty of love and training, and with the proper socialization, the rottweiler's innate sense of aggression will never develop. The puppy will never know that he was bred for aggression. The same may be true for all animals who learn from their human cohabitants about love, respect, and caring. While there doesn't appear to be scientific research to support the theory about the rottweiler, it does appear to be true. The case of the rottweiler, an animal known for violence and aggression, is an example of the influence that culture and socialization can have on both humans and animals.

As for humans, Moffat (2002) suggests that the male physiology may be responsible for a higher tendency toward aggression due to testosterone, although the presence of normal amounts of testosterone, in and of itself, cannot and should not be labeled the culprit of violence.

THE PSYCHOLOGY OF AGGRESSION AND VIOLENCE

The inability to cope, anger, sleeping problems, or posttraumatic stress syndrome, all considered psychological disorders, can create aggression and violence, possibly triggered by the release of high levels of cortisol—the so-called stress hormone—from the adrenal gland (Scott, 2008). Significant psychiatric or mental disorders of psychosis, schizophrenia, and other serious illnesses can create aggressive and violent behavior as a manifestation of the disease state. Disordered thinking that is a hallmark of many mental illnesses can cause a misunderstanding of words or a misinterpretation of the behavior of others. The disordered thinking that is commonplace in psychiatric illness may be especially pronounced if the disorder is severe and not managed by pharmacologic means.

Mental deficiencies, dementia, Alzheimer's disease, or mental retardation can inhibit appropriate social skills and/or coping, which may result in frustration and the potential for aggression and/or violence (Moffatt, 2002; Scott, 2008).

As with the frustration produced by psychiatric disease states, the frustration generated from a lack of control of one's environment—or situational inequity—the feeling or awareness of not being able to control may be characterized as a form of relative deprivation. In simple terms, relative deprivation comes into play when an individual is deprived of what the individual feels is appropriately due to him or her. Although relative deprivation is typically applied to collective violence, there is some evidence that the extent of frustration and anger can generate violence in society (Moffatt, 2002, p. 72).⁴ This type of situational frustration could be the cause of violent outbursts or aggression caused by patients who sit waiting for hours in the Emergency Department to see a provider. The situation is out of their control and as stress builds, so does the potential for the development of aggression, even in the absence of a psychological or psychiatric disease state.

Violence in movies, video games, television, music, advertisements, and athletics and the greater than normal exposure to these media sources create a high likelihood for the development of increased aggressive responses because the message of violence that is communicated becomes an accepted norm, over time.

SOME THEORETICAL VIEWS OF VIOLENCE

Professor Gregory Moffatt introduces Jack Katz's explanation of violent action as the outcome of humiliation. Katz, who is a professor of sociology at UCLA, interprets the act of violent behavior as a skewed emotion created by the perpetrator who believes that his act of violence is justified and that he was in some way provoked and driven to committing violence.⁵ In a simplistic explanation, the provocateur undergoes a process in which he experiences humiliation that transforms to rage *if* the individual is not able to reject the emotion created from humiliation. The individual, in dismissing or suppressing the emotion of humiliation may not even recognize it as humiliation. But, if the individual is humiliated, recognizes that he has been humiliated, and allows the emotion of humiliation to surface, he will likely become enraged. Enraged individuals are the individuals who attack violently and without notice,

perhaps as in the case of the student killer at Virginia Tech (Moffatt, 2002, p. 23).

Each individual has a preconceived notion of what violence is and what violence looks like, determined by experiences with violence and the unique factors that have contributed to his social and genetic makeup. Katz offers an explanation of how criminal violence may occur within an individual and may also provide the basis for the occurrence of *delayed aggression* as in workplace violence. In most cases of workplace violence, latent emotions erupt suddenly, causing an individual to impulsively return to a former workplace in search of an unfair boss or a cruel and impudent ex-girlfriend, and then to kill. Motivation is the reason that incites a perpetrator or perpetrators to act and provides one clear rationale and explanation for violent behavior (Moffatt, 2002, p. 23). The entire range of factors that join together to make up the emotional being of an individual are responsible for the ways that people act, react, and generally behave. A situation or circumstance that incites motivation, creates momentum, or changes equilibrium can incite one to react violently.

The changes in the range of emotions from humiliation to rage are used by Katz to describe criminal acts of homicide. But the mechanism of emotional change combined with motivation may be one explanation for the triggering of violence and violent acts.

Most individuals who have healthy psyches also have the ability to normally process unpleasant experiences or impassioned emotion, such as humiliation, and are capable of turning the emotion inward, absorbing the experience, and redirecting it in a socially acceptable way.

Leon Festinger, a renowned social scientist, theorized that one of the forces that shapes human behavior is *cognitive dissonance* (Festinger, 1957). Loosely interpreted, cognitive dissonance could be taken to mean conscience, or as Festinger explains, a lack of balance between beliefs and actions. Festinger hypothesizes that individuals will actively work to remove the dissonance, or the psychological discomfort one is experiencing, since the dissonance conflicts with what the individual truly believes. Festinger theorizes that acting in a dissonant way, or against what the individual believes, can only be accomplished by the individual changing his basic belief or opinion—his cognition or understanding of what is true. One way that basic beliefs are changed is through the *social support* of one's new thinking. In applying the theory freely to collective violence, it may be possible that the social network of disgruntled workers in the early 20th century recognized and believed that violence—as

a solution to the horrendous social conditions—was wrong. But, as Festeringer explains, if the magnitude of the conditions or elements to which the individuals were subjected was great, the workers were highly motivated to correct and improve the conditions. This new paradigm—or new thinking—may have been reinforced by others in the group thus providing adequate social support resulting in a change in opinions and beliefs about violence.

From a summary of Ted Gurr's book *Why Men Rebel*, Gurr hypothesizes that the "primary source of the human capacity for violence lies within the *frustration-aggression mechanism*," introduced in an earlier section. Gurr believes that frustration alone does not trigger violence, but if the frustration is protracted, as was the case in the late 19th and early 20th centuries in the U.S., violence can result (Conflict Resolution Consortium, Staff, 1970). Another of Gurr's explanations for internalized frustration and conflict, *relative deprivation*, may help explain the onset or development of individual violence that resulted early in the U.S.'s industrial age, motivated by the disparity between the great wealth of the business owners and the great poverty of the workers. According to Gurr, relative deprivation is the state of mind of an individual based on an understanding of what he thinks he deserves and what he thinks he will get. If the gap between the two is large, aggression, violence, or rebellion can ensue. Gurr believes that the frustration-aggression mechanism is an individual trait, while relative deprivation is an indicator of violent thought and action within a group of individuals and is best explained as *collective aggression* or violence.

"Aggressive behavior develops over time," reports distinguished psychologist Dr. Carl Goldberg. In a review of the book *Speaking With the Devil: A Dialogue With Evil*, Dr. Gregory Moffatt explains that Goldberg believes individuals progress through "six stages in the process of becoming thoughtless, emotionless, and mean" (Moffatt, 2002, p. 23). Goldberg defines the six stages as shame, contempt, rationalization, justification, the inability or unwillingness to self-examine, and magical thinking (Moffatt, 2002, p. 23).

Magical thinking is a type of thinking, according to Goldberg, in which the individual has convinced himself that he is perfect. The process of magical thinking "involves obtaining power over the source of life by creating 'a moral and emotional distance between the perpetrator and victim'" (Goldberg, 1996, p. 155). Magical thinking is a "form of grandiosity in which the person believes that others have failed to recognize his unique qualities and the person or other people must be

forced to see. Self-examination is impossible because it is believed to be unwarranted” (Goldberg, 1996, p. 157).

Dr. Goldberg (1996) is convinced that evil is not a product of mental illness nor is it the influence of the devil; instead, he says that people learn by doing (p. 10), similar to the supposition that I have presented. According to Dr. Goldberg (1996, p. 6), people make choices between good and evil all of the time and that the response to these many decisions “shape our moral—or immoral—choices now and in the future” (p. 10). Furthermore, Goldberg asserts that a “malevolent personality” emerges when the wrong choices—harmful choices—are made that give credence to the individual’s decision to commit bad and evil acts (Goldberg, 1996, p. 15).

THE IMPACT OF 9/11

The occurrence of violence in society, particularly in our contemporary society, can be summed up in one phrase: September 11. The U.S. was unprepared for what happened on September 11, and the events that occurred that day have changed U.S. society and its perceptions of violence and evil. This section will focus on the short-term impact of September 11 on the U.S.’s viewpoint of the accepted, understood, and trusted way of life that U.S. citizens enjoy and how the violence of September 11 tainted the U.S.

The violence that occurred on September 11 was conveyed by an outside force: foreign nationals who violated the U.S.’s ideals and accustomed sense of security.

Until that day in September 2001, the possibility that anything of this magnitude or horror could occur in the U.S. was unimaginable in the current environment of the U.S. as the most powerful, and secure, nation on earth. New York had been turned into a war zone, with images and descriptions of Armageddon. Two thousand seven hundred and twenty-six innocent lives were lost on September 11 (“Deaths in World Trade Center Terrorist Attacks,” 2002), and life as it was known would never be the same again, especially for the victims’ families and the survivors of the massive attack.

Following the events of September 11, the U.S. did not know who or what to trust. Citizens were determined to recapture the pre-September 11 landscape that supported and enhanced our basic and time-honored tenet of freedom, especially freedom from violence. The

U.S. had worked hard for its freedom and for its culture of safety, protection, and for its expansive efforts toward nonviolence, and we were not willing to give it up.

The first human instinct one has when attacked is to attack back, and a great many U.S. citizens experienced this emotion on September 11. Being defensive to the point of attacking back may be an unfamiliar emotion to many; but the response that was elicited after the September 11 violent assault should be recognized as an expected reaction. The U.S. was built on the integration of many immigrants from diverse countries along with its own U.S.-born citizens, and the heterogeneity of the U.S. is one of the many elements that creates exciting and distinctive communities and cultures in our towns and cities. After September 11, the cultures that we enjoyed and with which we were interconnected in our everyday lives suddenly became frightening intruders, not to be totally trusted. Some fear of the anonymous purposes of our neighbors had merit: the motto of *better safe than sorry* was a basis for a significant change in the way a majority of native U.S. citizens viewed neighbors and merchants who were not U.S.-born.

Rajeev Bhargava in his chapter, "Ordinary Feelings, Extraordinary Events" from the book *Understanding September 11* sums it up well: "It is extremely abnormal if self-respecting persons do not experience righteous anger, even hatred, toward those who have wronged them" (Bhargava, 2002, p. 328).

Since that frightening time several years ago, the U.S. has adjusted to the new rules that were adopted for protection from invisible enemies and to quash any opportunity for another September 11. Most Arabs are not dissident or extreme radicals and most Afghanis or Pakistanis do not have bombs hidden in their apartments or car trunks. We have also learned, though, that some are and some do. But there are also native-born U.S. citizens who have very evil intentions and work tirelessly to put the U.S. in harm's way.

Several years following September 11, the New York Advisory Committee and the U.S. Commission on Civil Rights issued the findings of the commission. The report focused on civil rights and racial profiling regarding the groups of citizens and noncitizens of U.S., the racial groups who were blamed for the infiltration and insurgence into the U.S. on September 11. This commission study was not designed to examine the national security controls or the U.S. Department of Homeland Security policies and procedures that had been put into place to protect the U.S. from another unknown and unrecognizable force. This report was

about one thing: the violence and the hate that was the impetus that would shape a segment of U.S. citizens' thoughts and beliefs for years to come (Hanley & Berry, 2003). The commission found that the current policies and practices of various law enforcement agencies in New York City, particularly within communities occupied by Muslim, Arab, and South Asian residents, were reacting with methods that violated U.S. civil rights and liberties. The harsh practices were in response to an interpretation that all Middle Eastern nationals—whether citizens or legal visitors—were violent activists who had the ability and the desire to harm the United States as had been done several years prior, by alleged similar racial and or ethnic individuals. The commission believed that there are several nonproductive outcomes from harsh acts of racial profiling, including, the distrust of law enforcement authorities, hindrance of crime reporting, and lessening of the cooperation between police officials and Middle Eastern and other communities. The commission believes it is essential to “identify and thwart future terrorists” (Hanley & Berry, 2003, p. 1) and recognizes that a spirit of collaboration, trust, and understanding would go far to protect all New York City residents from further terrorist incursion. The agreement to proctor the interactions of these communities of citizens with law enforcement was dubbed the Handschu Agreement.⁶

We have one united goal—to prevent further terror and violence in the U.S. But all citizens and law enforcement professionals need to proceed with a spirit of fairness. Violence took on an entirely new significance on September 11 that would leave the U.S. and U.S. citizens forever changed. We have more reasons than ever to combat all forms of violence with a vengeance that will serve to alter and expel the ever-growing presence of violence in our culture as an accepted way of life in the U.S.

CASE STUDY

This case study is from Dr. Gregory Moffatt's book, A Violent Heart. Dr. Moffatt's rendition and explanations throughout the story and the story itself are surprising communiqués of human nature and violence.

(Continued)

At Yale University in 1963, Stanley Milgram did a fascinating study that portrayed how far people would go, even harming another human being, if they felt justified in their actions. In Milgram's study, subjects were told that they were a part of a research project studying the effects of punishment on learning. The subjects were supposedly given an electrical shock if they did not learn a set of facts properly. In this study, one group of subjects, known as "teachers" would read pairs of words over an intercom to another group, known as "learners" in an adjacent room. The "learners" would be shocked if they recalled the pairs [of words] incorrectly. In actuality, the subjects who were allegedly receiving the electrical shocks were cohorts with Milgram in the study. The terminology for this type of research participant is called a *confederate in research*. Milgram's confederates were never actually (electrically) shocked. The real purpose of the study was to see to what extent the "teachers" would obey Milgram and continue administering electrical shocks to the learners. Milgram had predicted that most subjects would refuse to harm other people, but what he found was quite the opposite.

The panel of 30 switches supposedly ranged from 15 to 450 volts of electricity, with each successive switch representing a more powerful shock. The higher voltages were clearly marked with danger warnings. In the adjacent room, the confederate would make sounds as if he or she was really being shocked when the "teacher" administered the punishment. As the study progressed, the confederate would complain about the pain, ask to be allowed to quit the study, and eventually would stop responding altogether, as if unconscious.

Some of Milgram's subjects refused to continue the experiment when they believed that they were hurting the "learner." However, most of the subjects continued to administer shocks even when the "learner" stopped responding. An astounding 65% of the subjects administered shocks all the way through the 450 volt level. Most of Milgram's subjects were visibly uncomfortable with the study. Some of them argued with him, complaining that the study was unethical, and yet they continued to participate. In follow-up interviews, with the subjects, Milgram asked them to explain why, despite their discomfort with the study, they continued to administer shocks. The most common answer was that they believed he knew what he was doing, so they continued. In other words, they justified their behavior and obeyed Milgram simply because he was in a position of authority. (Moffatt, 2002, p. 10)

NOTES

1. Just-in-time (JIT) is a strategy originated in the Japanese auto manufacturing industry; JIT is an inventory strategy that improves return on investment (ROI) by reducing on-hand inventory and instead initiating a process to have the inventory that is needed, just in time for its use in a process. JIT reduces inventory and carrying costs.

2. *Marxism* is defined as the political and economic philosophy of Karl Marx and Friedrich Engels, in which the concept of class struggle plays a central role in understanding society's allegedly inevitable development from bourgeois oppression under capitalism to a socialist and ultimately classless society.

3. William A. Gamson is a professor of sociology at Boston College, Boston, Massachusetts, where he is also the codirector of the Media Research and Action Project. Gamson, the author of many books on political science and social movements, can be reached at his Web site [http://www2.bc.edu/~gamson/Homepage\(Frames\).html](http://www2.bc.edu/~gamson/Homepage(Frames).html).

4. The term *situational inequity* is linked to many interpretations, from racial inequity to story writing. For the purposes of this book situational inequity refers to the frustration or dissatisfaction of inequity or deprivation.

5. Dr. Katz is the author of a collection of sociology-themed books and articles, among them *Seduction of Crime: Moral and Sensual Attraction in Doing Evil*, published in 1988, and *How Emotions Work*, published in 1999. Dr. Katz's Web site is <http://www.sscnet.ucla.edu/soc/faculty/katz/>.

6. The Handschu Agreement was originally established in 1971 following intensive police surveillance of certain political activists in New York City. The agreement is a "set of guidelines to regulate police behavior in New York City with regard to political activity" (Hanley & Berry, 2003, p. 1).

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