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Abstract | Armed robbery exposes workers to serious harm in an environment where day-to-day safety is not normally a concern, and can have a wide range of negative consequences for employees. Victims may find it difficult to return to or cope at work.

This research examined a sample of 93 victims of armed robbery in the workplace from the AIC's Database of Victimization Experiences to determine what helped or hindered their return to work. The results are discussed in the context of enhancing how small businesses respond to and support victims of armed robbery in the workplace.

Returning to work after armed robbery in the workplace

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Most robberies in Australia occur on the street or footpath (Borzycki & Fuller 2014). However, just under a third of all robberies in 2014 were committed against businesses (ABS 2015). Small or medium-sized businesses such as retail stores, service stations, corner stores and takeaway restaurants are common targets for armed robbery because of their cash holdings and less-complex security measures (Fuller 2014).

The cost of the robbery and its impact on staff were identified as the two most serious consequences for small businesses at the most recent National Armed Robbery Research Forum (NARRF) held at the Australian Institute of Criminology (AIC) in 2014. The difficulties business owners face in appropriately responding to and supporting the needs of traumatised employees returning to work were of particular concern. The generic nature of information provided in currently available return-to-work guides meant stakeholders attending the forum struggled to tailor the recommendations to the needs of their businesses and employees.

This research examines the factors that can hinder or help an employee's successful return to work after an armed robbery. The experiences of victims of armed robbery in the workplace who did and did not return to work were compared using data from the AIC's Database of Victimization Experiences (DoVE). This

study will inform the return-to-work practices of Australian businesses by identifying what causes victims the most difficulty and where extra employer support may be required.

The impact of armed robbery victimisation

An individual's physical, psychological, emotional and social functioning may be affected by the trauma of armed robbery to varying degrees and for varying periods (Elklit 2002; Harrison & Kinner 1998), though certain risk or protective factors can influence the severity of any effects. For example, a victim's emotional strength, resilience and access to social support may positively mediate the negative impacts (Brewin, Andrews & Valentine 2000; Yap & Devilly 2004). Alternatively, personal vulnerabilities and fears, as well as the type of traumatic event and the effects of any physical injuries, may negatively impact post-crime functioning (Cook, David & Grant 1999). To determine how best to support and meet a victim's needs, we must understand how risk and protective factors influence the degree, frequency and duration of negative post-crime outcomes.

Those who work in customer service roles, such as cashiers and security guards, are particularly vulnerable to armed robbery victimisation due to the frequency of their interactions with the public (Mayhew 2000). The barriers to and facilitators of return to work post-robbery include the severity of the incident, its psychological impact on the victim and how much support their employer provides.

Hindering return to work: Psychological impact of armed robbery

Armed robbery in the workplace can have serious psychological consequences for the victim. This traumatic experience has been linked to the development of mental health issues like major depressive disorder (Belleville et al. 2012), acute stress disorder or ASD (Elklit 2002; Hansen & Elklit 2011), and its more severe and protracted variant, post-traumatic stress disorder (PTSD; Fichera et al. 2014; Hansen et al. 2014). The trauma and stress-related symptoms associated with disorders like ASD and PTSD can have particularly serious impacts on a victim's post-crime functioning. For example, victims who develop ASD or PTSD may find themselves dealing with intrusive memories or experiencing dissociation (feeling detached from their thoughts, emotions and surroundings). They may also experience flashbacks, intense psychological or physiological reactions to reminders of the trauma, and persistent negative emotions like guilt, as well as negative beliefs about themselves, others and the world (see APA 2013 for specific criteria for each disorder). These symptoms are also linked to hypervigilance (a constant state of alertness related to real or perceived threats to the self), irritability, anger, self-destructive behaviour and sleep difficulties. Victims may try to avoid memories, feelings, situations and locations that remind them of the trauma in an attempt to cope with these symptoms (ACPMH 2013). The psychological and emotional impacts of the robbery may endure for an extended period of time; victims in one UK study were still experiencing the negative effects of street robbery up to nine months after the event (Gale & Coupe 2005).

A victim's gender (being female) and role in the business (ie working as a cashier) have been linked with an increased likelihood of developing a mental health condition post-robbery (Fichera et al. 2014; Hansen & Elklit 2011; Semb et al. 2009). However, the severity and level of exposure to traumatic elements during the robbery also play a role (Jones 2002). The presence of physical violence or injuries, and the experience of fear, terror and hopelessness during the incident, have all

been correlated with poor subsequent psychological functioning (Fichera et al. 2014). The strength of this correlation is compounded; the higher the number of stressors experienced during the armed robbery, the greater the risk that a victim will develop depressive or traumatic symptoms (Elklit 2002). Harrison and Kinner (1998) found that a combination of pre-trauma factors (eg age, socioeconomic status and education), the severity of the trauma, and post-trauma factors such as a perceived lack of social support, were related to the likelihood of developing PTSD post-robbery.

The impact of armed robbery on and subsequent mental health issues associated with the occupational functioning of victims was explored by Belleville and colleagues (2012) using a sample of Canadian convenience store employees who were victims of armed robbery. Those diagnosed with PTSD reported more frequent visits to healthcare services and more trauma-related absences from work than those who did not suffer the condition. This may be because the victim wished to avoid reminders of the traumatic incident (Belleville et al. 2012). Jones (2002) also found that psychological stress affected victims' interactions with customers and colleagues; for example, victims were more anxious when dealing with customers. Decreased occupational functioning not only affects the individual employee, but has flow-on effects on the workplace and other employees.

Assisting return to work: Employer responses

Informal social support from family, friends and colleagues, along with formal support from healthcare services and employers, alleviates stress and trauma and helps victims express themselves post-incident (Elklit 2002; Harrison & Kinner 1998; Jones 2002; Reavley et al. 2012). However, very little research has examined how these support mechanisms help victims return to work.

A review published by the Australian Institute for Primary Care and La Trobe University (Foreman, Murphy & Swerissen 2006) found internal, workplace-based factors were just as important as external influences. Internal factors included adequate support from colleagues and supervisors and a flexible and positive workplace.

Employers supported victims by providing emotional support, allowing flexible working arrangements like varied start and finish times, providing additional personal leave, offering part-time and at-home work options, and facilitating access to appropriate counselling and health care (Centre for Youth Mental Health 2011; Fichera et al. 2014; Foreman et al. 2006; ReturnToWorkSA 2015). It is yet to be determined however, what kind of support produces the best outcomes for victims of armed robbery in the workplace (Foreman, Murphy & Swerissen 2006).

Available support services and information

Work health and safety legislation and workers compensation schemes vary between states and territories, and are regulated by the respective government agencies. These statutory agencies ensure employers comply with work health and safety regulations or workers compensation/rehabilitation regulations, or both. They also provide guidance for employers on how to facilitate successful return to work—for example, by developing return to work programs (eg WorkCover NSW nd).

Many states and territories provide a range of support services for victims of crime. These services offer an additional avenue of assistance and may be useful if employers are unable to provide adequate support—for example, due to financial issues. Services generally include free counselling

(face-to-face, telephone or online), referral to health and other services, financial support and assistance with the criminal justice process.

This literature review identified a number of barriers to and facilitators of return to work, but it is still unclear which factors most influence an employee’s successful return to work. To better understand this issue, this research explores the experiences of 93 victims of armed robbery in an Australian workplace and what shaped their decision to return, or not to return, to work.

Method

The Database of Victimization Experiences (DoVE) is a qualitative database comprising 730 psychological evaluations of victims of violent crime in New South Wales who sought compensation from NSW Victim Services. The database contains information on the experiences of victims of four types of violent crime—physical assault, sexual assault, domestic violence and robbery—and their nature. For more information on the methodology behind the DoVE, see Fuller (2015a).

Data on a total of 193 cases of robbery are contained in the DoVE. Only those involving the victim of an armed robbery at work, or during the course of their employment, were included in the final sample (N=93). Table 1 summarises selected characteristics of the final sample.

	Number	Percent
Gender		
Male	53	57
Female	40	43
Age at time of evaluation		
18 to 19 years	1	1
20 to 29 years	22	24
30–39 years	20	21
40–49 years	15	16
50–59 years	20	21
60 years or greater	11	12
Not specified	4	4
Position within workplace		
Owner/manager	25	27
Employee	68	73
Return to work status		
Yes	68	73
Returned to same/similar job	55	59
Returned to a different job/industry	13	14
No	25	27
Did not return to work at all	16	17
Returned to work but left within 4 weeks	9	10

Source: AIC DoVE database

The sample comprised slightly more men (n=53; 57%) than women (n=40; 43%) and was split between those aged under 40 years at the time of evaluation (n=43; 46%) and those aged over 40 years (n=46; 49%). A third (n=31) were over 50 at the time of evaluation, with 11 individuals aged over 60. This number of older victims may be a function of their role within the business, as 13 were owners or managers.

Most of those in the sample returned to work post-robbery. Only 25 (27%) did not return to any form of work post-robbery. This included nine cases where the victim returned to work but left soon after, and one where the victim's employment was terminated.

Analysis was conducted using NVivo 10 (hereafter referred to as NVivo). NVivo is a software tool that facilitates the coding and exploration of qualitative data. These data comprised comprehensive psychological evaluations of victims conducted by trained psychologists, which were used to determine the veracity of the subject's claim for NSW Government compensation. As a result, they contain detailed information about the crime itself and the victim's reaction to it. The reports also contain information around the subject's physical, psychological and social functioning pre- and post-disclosure as well as their familial, educational and occupational histories.

The nature of the data and the small sample size limited options for quantitative analysis. However, where appropriate, differences between the two groups (those who returned to work and those who did not) were examined using Pearson's chi-square tests of association. When cell expected frequencies were less than five, Fisher's exact test was utilised instead.

Limitations

As the sample is drawn from those who sought compensation, a potential issue regarding generalisability must be acknowledged. There may be inherent qualitative differences between those in the sample, who sought assistance from a government agency, and other victims who did not engage with government or other services, or chose not to seek compensation. In the absence of similar data and given the rich qualitative information contained in these reports, however, the DoVE data are a suitable measure of the nature and impact of victimisation.

These data were not collected to explore return-to-work issues, and the transcripts outline discussions between the psychologist and the victim. The absence of data on a particular issue may not, therefore, reflect its absence from the victim's experience but rather that it was not discussed. Further, while efforts were made to examine the consequences of armed robbery more broadly, the interviews were focused on the psychological impacts, and these impacts may dominate the results.

For ethical and privacy reasons, direct quotes from the material contained in the dataset will not be reported. Instead, information from the Authorised Report Writers' reports will be paraphrased.

Results

The general pattern of robberies experienced by those within this sample aligned with those of robberies described by previous research (see Fuller 2014). The majority occurred during business hours, and the primary target was cash. Seventy-five percent (n=70) involved one or two offenders,

and 98 percent (n=91) were violent, involving threats and physical harm. In two-thirds of incidents (66%; n=61), the victim was alone at the time of the robbery.

Return-to-work patterns

Reasons for returning

Most victims returned to work post-robbery (n=68; 73%), though how this occurred varied. Eighty percent (n=55 of 68) returned to the same or a similar job, while the remaining 20 percent (n=13) took up completely new employment unrelated to their previous position or job. One woman was the victim of a robbery while working at a bar and, post robbery, retrained as an assistant in nursing because she felt she could no longer work in a bar environment (AR0513). In another case, the victim was psychologically unable to return to bar work and instead became a part-time accountant (AR10169).

Most victims returned to work for financial reasons. The majority of individuals in the sample were employees as opposed to business owners and held lower-income positions such as cashiers, bar staff, security guards and front-desk personnel. These victims may not have had the financial resources necessary to take extended time off. The casual nature of these victims' employment may also have limited their ability to access paid personal or sick leave.

One man stated that if he did not work, his family would not eat (AR0659). Another woman, who owned the business with her husband, felt she had to return to work because the business did not have enough money to hire extra staff (AR0537). Two other victims said they returned to work because they refused to allow the robbery to dominate or curtail their lives (AR10144 & AR0504); these were the only other stated motivations for returning to work.

However, returning to work did not mean that the victim was coping. Those who returned to work reported high levels of anxiety and fear, with 57 percent (n=36) still experiencing these symptoms one to three years after the robbery. One woman could only work in certain areas of her workplace (a hotel); she was constantly hyperaware and unable to relax and focus on the task at hand. She also reported having difficulties using knives, as the offender was armed with a knife during the robbery (AR0638). Other victims described feeling jumpy (AR0641), panicky (AR0645), fearful (AR1196 & AR10181), trapped (AR1194) and constantly on guard (AR0665 & AR0659). One man stated that, at the time of the evaluation, he was planning on resigning his management position at a football club because he noticed he was becoming angry with customers and was no longer able to interact with them with the same ease as before (AR0514).

Reasons for not returning

Psychological issues were the main reason victims were unable to return to work, with anxiety and feeling unsafe at work the most common issues mentioned. Two victims returned to work the next day or shortly after the robbery but found themselves unable to cope with the trauma and so left. One of these stated that when she went back to work she found herself unable to let people into the shop (AR10147), while another had a breakdown when an unrelated life event occurred shortly after the robbery, leaving him psychologically incapable of working (AR10166). Another two victims stated that injuries sustained as a result of the robbery prevented them returning to work (AR10135 & AR10178).

The impact of other factors

The literature review identified a number of factors that may influence the likelihood of returning to work. These were the severity of the robbery, the psychological impact and the employer's response. These factors are explored in more depth below.

Severity of the robbery

Severity is a highly subjective term, as individual reactions may vary despite the presence or absence of specific factors. For the purposes of this research, severity was measured by the presence of aggravating factors such as injury, the use of physical violence and the weapon used. These factors have been described previously as indicators of more serious forms of armed robbery (see Borzycki & Fuller 2014; Fuller 2014).

Ninety-one of the 93 robberies were violent, and 37 percent (n=34) involved actual physical harm; 63 percent (n=57) involved threats of harm, but no violence. Physical violence involved the punching, kicking and assault of victims, while threatened harm predominately involved threats of physical violence or death to the victim or other employees. In one case the victim and his colleagues were tied up by the offenders, who threatened to kill them if they resisted or did not do as they were told (AR0501).

In line with other research (see Fuller 2014), physical injury was rare among victims in this sample. Only 14 percent (n=13 of 93) of victims received any sort of injury during the course of the robbery but, of these, seven sustained serious injuries. One victim had her head repeatedly bashed into the ground by three offenders (AR1073), while another man was stabbed in the hand as he tried to defend himself (AR10178).

Many victims were threatened with weapons which left them fearing for their lives. Thirty-nine (42%) were threatened by offender/s armed with a firearm. In one case, the victim was forced to watch as the offenders put a gun to the head of her manager and accused him of lying about the whereabouts of and access to the safe. She stated that she genuinely believed they were going to kill him (AR0512).

In another six incidents the offenders were armed with a firearm and another weapon, most commonly a knife (n=5). Though knives are the most common weapon used in armed robbery in Australia generally (Borzycki & Fuller 2014), firearms are more commonly used during armed robberies against businesses (Borzycki & Fuller 2014; Fuller 2015). Knives were the second-most common weapon used during the robberies experienced by this sample (n=27; 29%).

The difference between the two groups was not substantial. Seventy-six percent (n=19) of those victimised by an offender armed with either a knife or a firearm did not return to work; while, of those who did return to work, 83 percent had been threatened with a knife or firearm (n=57).

The only significant difference between victims who returned to work and those who did not was the presence of a serious injury ($C^2(2)=8.13$, $p<0.05$, $V=0.3$). Though the numbers are small, 22 percent (n=5 of 23) of those who did not return to work received a serious injury, compared with only three percent (n=2 of 70) of those who did.

Physical injuries caused both functional and psychological impediments to returning to work. For example, two victims were unable to return to work because they sustained knife to their hands

that impaired the fine motor skills necessary to do their jobs (AR10135 & AR10178). The other three all sustained concussions as a result of being assaulted and were unable to return to work due to psychological issues.

Psychological functioning

Prior to the robbery, six percent (n=6) of the sample had a history of mental illness. Three of these did not return to work while the remaining three did, suggesting that, within the small number of cases examined here, a history of mental illness was not a defining characteristic of those who did not return to work.

Though psychological illness was the most commonly cited reason for not returning to work, many victims who did return to work also reported developing mental health issues in the aftermath of the robbery. Results of a chi-square test found no significant difference between the two groups in terms of psychological impact ($C^2(1)=2.78$, $p=0.183$). All but 13 of the total sample (n=80; 86%) were diagnosed with a mental health issue by the psychologist who evaluated them, based on the victim's responses during the semi-structured interview and the results of psychometric tests.

The negative mental health consequences for victims in this sample were broad and included depression, PTSD and panic attacks. However, the most common mental health issue reported among victims in this sample was anxiety. Eighty-eight percent (n=82) discussed feelings of anxiety during their evaluation compared with approximately 59 percent (n= 55) who discussed depression, though it should be noted that the two conditions often co-occurred. A subset of the sample was assessed for depression and/or anxiety using psychometric tests such as the Depression Anxiety Stress Scale (DASS) or the Beck Depression or Anxiety Inventory. Of those assessed for depression, over half (31 of 56; 55%) were found to have only mild to moderate levels of depression. Of those assessed for anxiety (n=36), 61 percent (n=22) produced scores that put them in the severe range.

Of the 22 cases where the individual was assessed as having severe anxiety, half (n=11) involved victims who did not return to work. While this means half of those with severe anxiety did return to work, these 11 cases represent 44 percent of people who did not return to work, compared with 16 percent of those who did. Victims who suffered severe anxiety and did not return to work reported that they experienced high levels of paranoia, anxiety and panic when they were near their workplace, at home or in the community.

The anxiety symptoms common to both groups were flashbacks (n=62; 66%), hypervigilance (n=41; 42%) and panic attacks (n=19; 20%). These symptoms were strongly related to fear of and paranoia about being in public. Some victims linked these symptoms with a fear of re-victimisation, while for others it was more about fear of the unknown and a lack of control. Examples included becoming fearful and anxious in crowds (AR06162 & AR06127), becoming tense when encountering people wearing hoodies (AR11181) and re-experiencing the feeling of the gun against their head (AR10176).

One significant difference between those who did and did not return to work related to their reactions during the robbery. Approximately 64 percent of those (n=16) who did not return to work described feeling helpless or out of control during the robbery, compared with 34 percent (n=23) of those who did return to work ($C^2(1)=8.13$, $p<0.01$, $V= -0.27$). One victim stated that in addition to intense fear, he felt vulnerable and helpless when the offender held a knife to his back (AR0506).

Another stated that the offender's actions during the robbery left him feeling as though his basic human rights had been stripped away (AR06107).

Employer response

A subset of 39 victims described their employer's response to the armed robbery. These victims described either a positive (n=17; 44%) or negative employer response (n=22; 56%) and how that influenced their behaviour or return to work. More of those who did not return to work reported negative workplace responses (n=7 of 10), while this was more evenly split across those who did return to work post-robbery, with 15 of 29 victims describing a negative workplace response. This difference, however, was not significant ($C^2(2)=0.82$, $p=0.665$).

Victims reported employer practices that had a negative impact on their post-robbery functioning, including being inflexible about shifts and work duties, failing to address risks of re-victimisation and applying undue pressure to the victim to resume the level of occupational functioning they maintained prior to the robbery. In five cases victims felt that management did not take employee safety seriously, doing nothing to rectify identified vulnerabilities in the business's security to adequately (in their mind) avoid another robbery. This included failing to employ more security staff at the club (AR10139) or adopt security protocols and upgrade equipment (AR05161).

In another five cases, it appeared that the employer was actively attempting to get rid of the victim. While it should be noted that the evaluation reports present only the victim's perspective, examples of employer behaviour included deliberately reducing the victim's hours until they were not getting enough shifts to be financially viable (AR10141 & AR0641) and being inflexible about alterations to duties or hours (AR0663). In one case a man who was assaulted by an offender armed with a hammer during a robbery reported that his employer pressured him to return to work within two days of the crime. When he failed to do so, his employment was terminated (AR0667). In another case, the victim was demoted when he returned to work, and his employer subsequently blamed him for the robbery. This employer also told the victim that his negative psychological response was due to a family matter and not the robbery, implying that he would not receive assistance or support from the employer (AR0507).

However, negative employer responses were not necessarily the norm across both groups. Victims in this sample viewed a number of responses as helpful, ranging from employers simply acknowledging that the victim was struggling and needed help, to arranging more flexible working arrangements and assisting the employee to access rehabilitation and counselling. In one case, the victim told his employer that he was apprehensive about making deliveries to the suburb where the robbery had taken place. In response, his employer ensured the victim never made deliveries to that suburb alone, assigning another employee to accompany him (AR1077). In another case, the victim was allowed to return to work on restricted shifts and resume full-time employment gradually (AR119). He reported that, a few months prior to his evaluation, he was functioning at the same level he maintained prior to victimisation (AR119).

Four victims reported that their employer helped them to access counselling. One employee, in particular, detailed a very structured approach to return to work, with the employee having access to doctors and counsellors, as well as workplace rehabilitation providers. He ultimately was placed on a graded return-to-work program and did return to the same employer, albeit working in a different

location (AR1078). It is important to note, however, that the employer in this case was a large multimillion-dollar corporation whose outlets were common targets for armed robbery and so likely had the necessary policy infrastructure to adequately respond to this type of trauma. Finally, among those who returned to work, three victims referred to the valuable informal support they received from their colleagues and, in one case, from their customers (AR0665).

Table 2: Summary of results		Did not return to work	Returned to work
Nature of the robbery	Offender armed with a firearm	12 (48%)	27 (40%)
	Offender armed with a knife	6 (24%)	21 (31%)
	Subject to a direct or implied threat of harm	21 (84%)	61 (90%)
	Received a serious physical injury	5 (20%)	2 (3%)
	Felt helpless/hopeless	16 (64%)	27 (40%)
Psychological	Prior mental illness	3 (12%)	3 (4%)
	Mental health diagnosis post-robbery	25 (100%)	61 (90%)
	Mild anxiety	0 (0%)	6 (9%)
	Moderate anxiety	1 (4%)	6 (9%)
	Severe anxiety	11 (44%)	11 (16%)
Employer response	Positive employer response	3 (12%)	14 (21%)
	Negative employer response	7 (28%)	15 (22%)
Total		25	68

Source: AIC DoVE database

Discussion

Returning to work after experiencing an armed robbery is important not just for the victim's psychological health and financial security, but also for the continued operation of the business. Understanding the barriers to and facilitators of return to work in these circumstances is necessary in order to assist businesses better shape their response to the needs of victims.

This research examined the similarities and differences in the experiences of individuals who did and did not return to work post-robbery. More of those who did not return to work sustained a serious injury and reported feeling helpless or not in control during the robbery than those who did. While these findings distinguished individuals in the two groups, the impact of psychological functioning cannot be discounted. Rather, these findings support the position that return to work is influenced by compounding factors, such as the emotional experience of the robbery, injury, financial pressure and psychological impact, rather than a single cause.

All employers are required by law to provide a safe and secure workplace and adequate support to injured employees returning to work. This obligation extends to any response to injuries arising

from armed robbery. It is therefore good practice for employers to have a return-to-work program or rehabilitation policy for their employees when such injuries occur.

Employers have very little control over the nature of the robbery or its psychological impact. However, they do have control over how they respond to and support the victim. Given that the majority of victims in this sample returned to work, affected employers are and will continue to be faced with managing how armed robbery in the workplace impacts on employees. Victims in this sample identified a range of employer responses they found beneficial in helping them cope with the experience of armed robbery and return to work. These responses included, in particular, employers showing understanding of and support for the psychological needs of the victim and being flexible about their shifts and hours of work.

It may be helpful for employers to support the psychological needs of employees post robbery by assisting employees to access psychologists and counselling services. Many states and territories provide free support and resources for victims of crime. For example, victims of armed robbery can access counselling, financial support and referral to health and justice services by contacting victim support services. Employers can also help victims access these services by allowing them time off or changing their shifts so they can attend counselling. A key benefit of these services is that they are free and therefore accessible to victims employed by small businesses, which may not have the necessary financial resources to cover the cost of a private counselling service.

Recovering from armed robbery takes time and, even if they return to work, victims can continue to struggle with the impact of violence for a long time. Victims reported that employer flexibility around work shifts and hours was particularly beneficial in helping them return to work. In larger organisations, official return-to-work programs may include a graduated return to duties like that described in the *Results* section. In smaller businesses, this may be less formal and involve temporarily altering an employee's shifts or working hours; for example, by moving them to a day shift until they feel comfortable working at night. However, organisations like WorkCover and WorkSafe advise that changes to working hours or duties should always be made in consultation with the employee.

This research does not address the capacity of employers, especially small businesses, to implement such practices. For example, a business that employs only a small number of staff may not have the capacity to allow a traumatised employee adequate time off.

This issue is further complicated when the owner or manager of the business is also the victim of the robbery. It may be difficult to maintain an appropriate professional distance when the person in charge of employer response is also the victim. Situations like these may require more active intervention by external agencies such as government victim services or peak agency bodies, to ensure that employer-victims receive adequate post-robbery support.

Organisations such as WorkCover, WorkSafe and ComCare provide valuable support and information to help businesses facilitate return to work. In recent years, these organisations have expanded their resources to assist businesses to respond to psychological issues like depression, anxiety, psychosis and PTSD (for example, see ReturnToWorkSA 2015). Yet much of the practical information available still relates to rehabilitation for workplace injury rather than for trauma. This research shows the needs of victims of workplace trauma like armed robbery can be qualitatively different to those

related to other injuries, and thus may require different responses. It may be useful to examine how strategies can be altered to better fit the needs of employees traumatised by armed robbery.

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