

The Perception of Psychologically Violent Behaviors in the Workplace



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Introduction

- Internationally, the impact of bullying on nurses has been shown to be negative in nature with far reaching implications for interpersonal relations, work relations, personal health and overall productivity.
- Last decade research conducted in many different cultures has shown that workplace psychological violence is a very widespread and serious problem (Johnson, 2009; Yildirim, 2009; , Quine 1999, Fox & Stallworth 2003, Rutherford & Rissel 2004, Bilgel et al. 2006, Hansen et al. 2006).
- The concept of workplace psychological violence (mobbing) was defined for the first time in the 1980s by Heinz Leymann (Davenport et al. 1999)

Introduction

- Psychological abuse has become more widespread because of legal regulations, particularly in public facilities, against physical violence (Leymann, 1990)
- The individual or individuals acting psychologically abusive, mount an organized front against the individual with systematic, long term, frequently occurring bullying behaviors that also affect others (Leymann 1990; Einarsen 2000; Cowie et al. 2002; Tutar 2004).
- In a study, Hutchinson et al. (2010) found that bullying of nurses leads to erosion of professional competence , increased sickness absence and employee attrition.

Rational

- Registered Nurses (RN's) in the medical units of a general hospital expressed that they are being bullied, "taken advantaged of" and "verbally abused" with a subsequent high absenteeism rate.
- No research done on the topic at the time that could have verified the incidence of bullying in our local setting.
- In arriving at a better understanding of the problem of bullying, it is imperative that true facts are established, so action can be taken to mitigate the ill effects of bullying in the nurses' workplace.

Purpose

The purpose of this study was to determine the rate and nature of workplace bullying, and the relationship between bullying behaviors and selected demographic variables by Registered Nurses who practice in a general hospital in Trinidad and Tobago.

Research Questions

- What is the perception of psychologically violent behaviors experienced by Registered Nurses (RN's) who practice on medical units in a selected hospital in Trinidad and Tobago?
- Sub-questions:
 - What is the incidence of workplace bullying experienced by RN's who practice in the medical units of the selected hospital?
 - What are the most common workplace bullying behaviors identified by the RN's practicing in the medical units of the selected hospital?
 - Are there any relationships between bullying behavior and the demographic variables of the RN's who practice in the medical units of the selected hospital?

Hypothesis

There is no relationship between bullying behaviors and the demographic variables of Registered Nurses who practice in medical units in a selected hospital in Trinidad and Tobago.

Operational Definitions

Bullying/ Psychologically Violent Behaviors/Mobbing

- A type of psychological terror that arises in the form of systematic, directed, unethical communication and antagonistic behavior by one or more individuals towards one individual (Yildirim & Yildirim, 2008).

Demographic Variables

- For the purpose of this study these variables refer to gender, marital status, tenure of service, religion and absenteeism.

Literature Review

- Bullying in the workplace is a worldwide phenomenon (Lowenstein, 2013).
- A study of nurses in Taiwan by Pai and Lee (2011) used a workplace violence questionnaire, a total of 521 nurses participated; 19.6% subjected to physical violence, 51.4% had experienced verbal abuse, 29.8% had been victims of bullying/mobbing.
- American study by Vessey et al (2009) found that bullying was reported by a wide range of staff. Bullying occurred most frequently in medical surgical care (23%), critical care (18%), emergency areas (12%), operating room/post anaesthesia care unit (9%) and obstetric care (7%).

Literature Review

- Alspach (2008) who reported on the Association of Critical Care Nurses online survey stated that the forms of bullying in the nursing workplace from most frequent to least frequent included (a) sarcastic comments, (b) complaints and false information shared with others, (c) gossip, (d) withholding support, (e) elitist attitudes, and (f) discounting the nurses' input.
- Hinchberger (2009), at the Southern California University, a total of 126 students completed a survey. Findings suggested that 100% of the student nurses had either observed some form of bullying or experienced it during clinical rotations.
- Research by Hutchinson et al. (2006) and Moayed et al. (2006) identified workplace bullying as a significant source of social stress at work resulting in absenteeism and increased usage of sick leave.

Theoretical Framework

Hutchinson, Jackson et al.'s (2008) Explanatory Model of Bullying in the Nursing Workplace

The three constructs that constitute model are

- organizational antecedents of bullying,
- **bullying acts**, and
- the consequences of bullying.

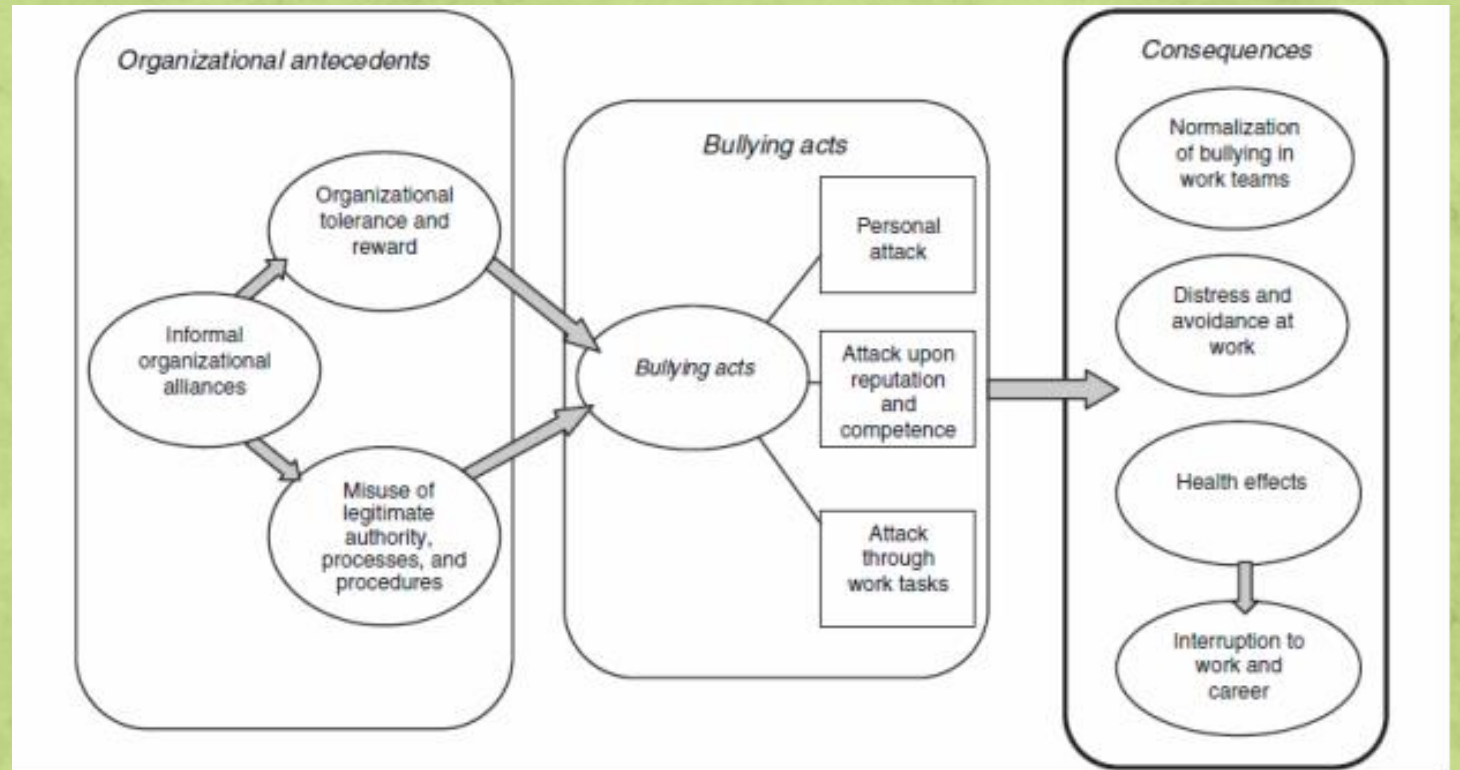


Figure 1. A model for explaining bullying in the nursing workplace.

Research Design & Methodology

- **Design:** descriptive correlational study in the quantitative paradigm
- **Population-** consisted of 127 RN's employed and practicing on the Medical Units, at a selected general hospital within that RHA.
- **Ethical Considerations-**
 - Ethical approval from the UWI and RHA.
 - Informed consent was obtained in writing from participants.
 - Confidentiality- Identification codes was assigned to each participant, maintaining anonymity.
 - No harm to participants, privacy maintained.

Research Design & Methodology

- **Instrument:** Questionnaire which comprised of three parts (A, B and C). **A-** demographic data. **B-** one question quantifies absenteeism past 6 mths. **C-** 33 item tool consisting of four subcategories: 'individual's isolation from work', 'attack on professional status', 'attack on personality' and 'direct attack'. Consent was granted and tool was modified. According to (Yildirim, 2009) the tool's Cronbach's internal consistency in a previous study was determined to be $\alpha = 0.93$.
- **Data Analysis-** descriptive statistics using IBM SPSS (ver. 21) and Analysis of Variance (ANOVA) was used to determine if the mean scores were different.
- **Presentation of Findings:** Narrations, figures and tables are used to present the findings.

Findings (Demographics)

Gender

N= 102

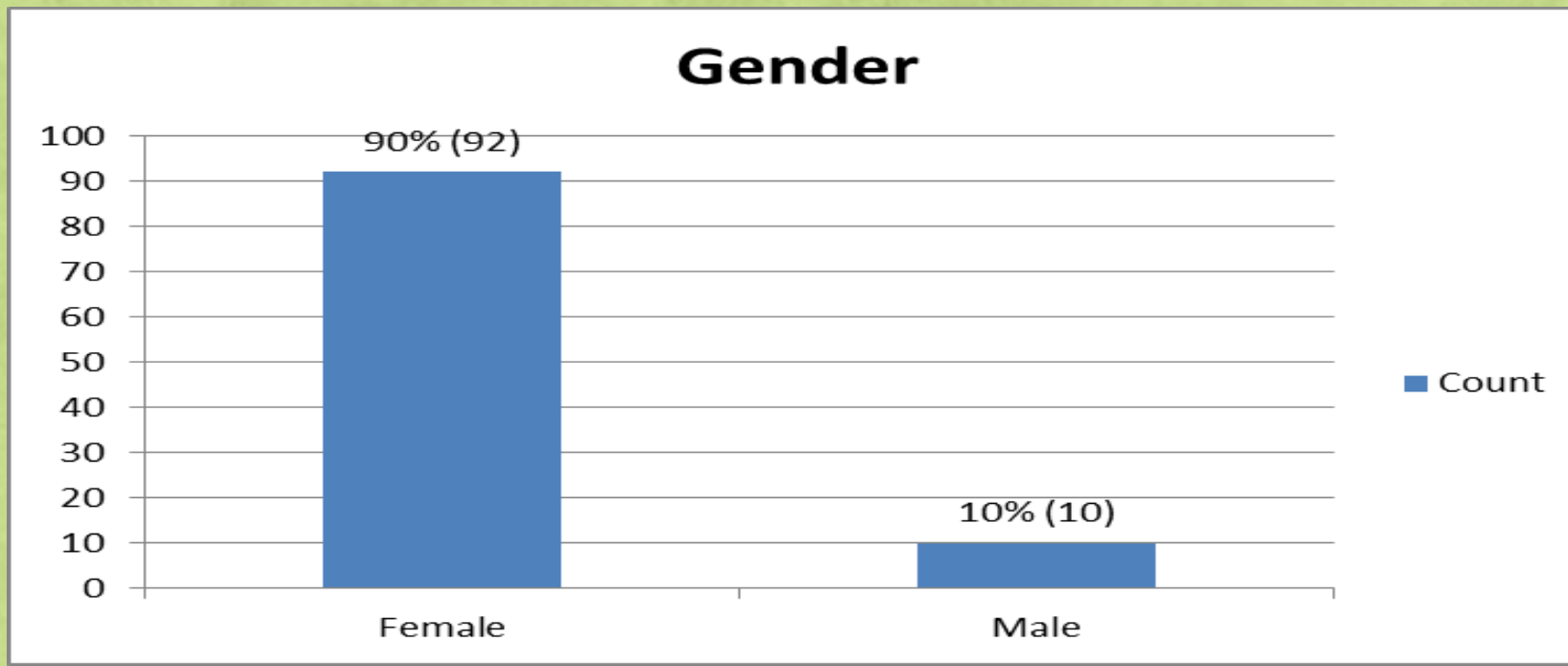


Figure 2. Gender distribution in population. The majority of respondents were females ($n = 90\%$, 92) while the least number of participants were males ($n = 10$, 10%).

Findings (Demographics)

Age

N=102

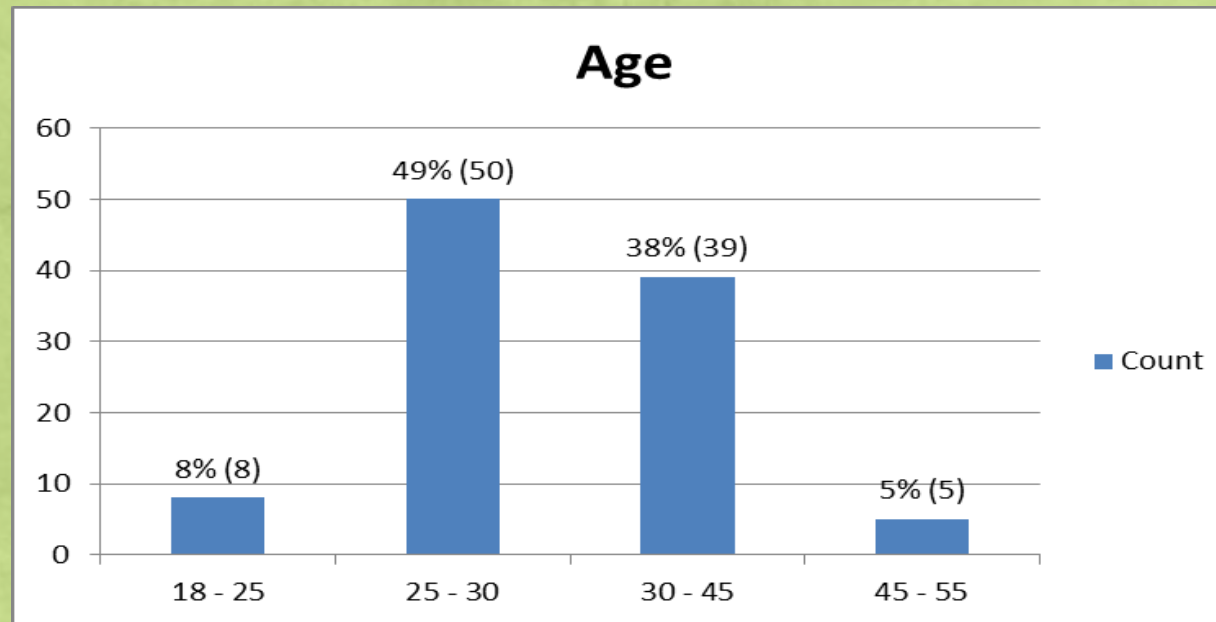


Figure 3. Age Distribution. The majority of participants were from the age group 25-30 years (n= 49%, 50). The second largest category were from 30-45 years (n=38, 39).

While the least amount of nurses were between 45-55 years old (n=5%, 5).

Findings (Demographics)

Qualifications

N=102

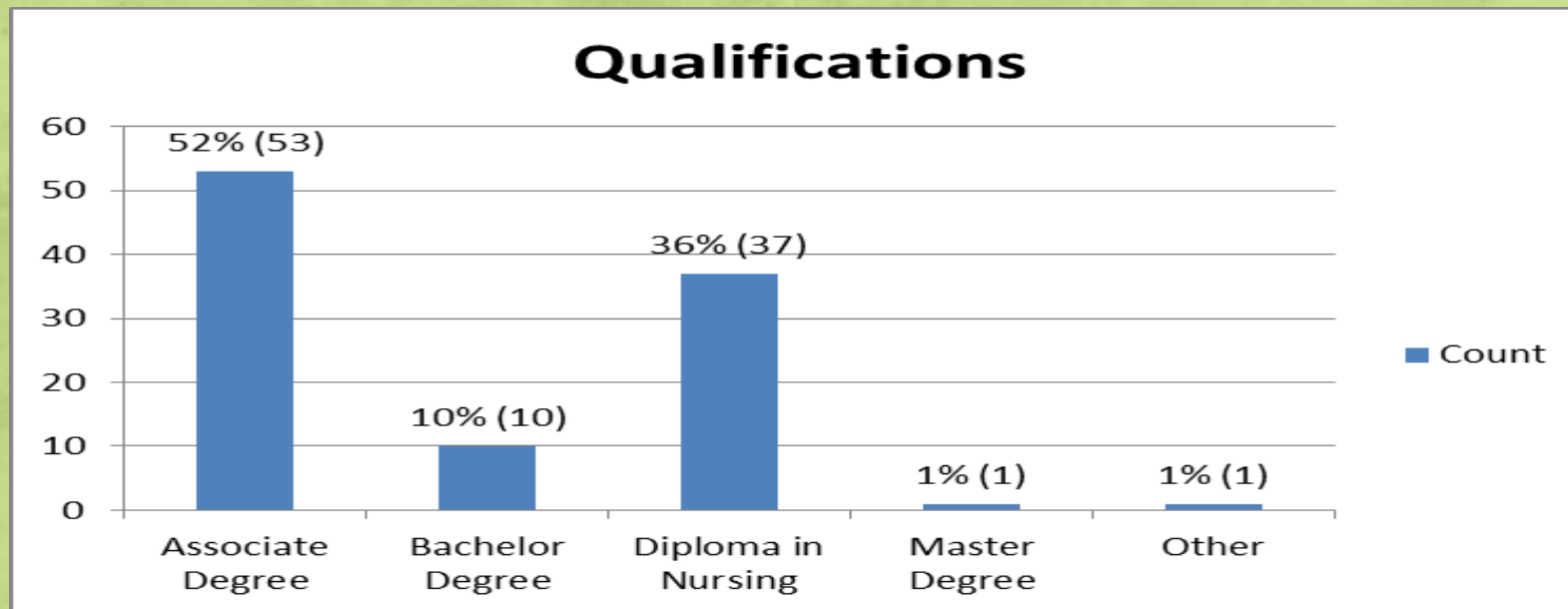


Figure 5. Qualifications of participants in nursing revealed that the largest amount of nurses were qualified up to an associate degree in nursing (n=52%, 53). Only one participant has a master's degree (n=1%, 1).

Findings (Demographics)

Tenure of Service

N=102

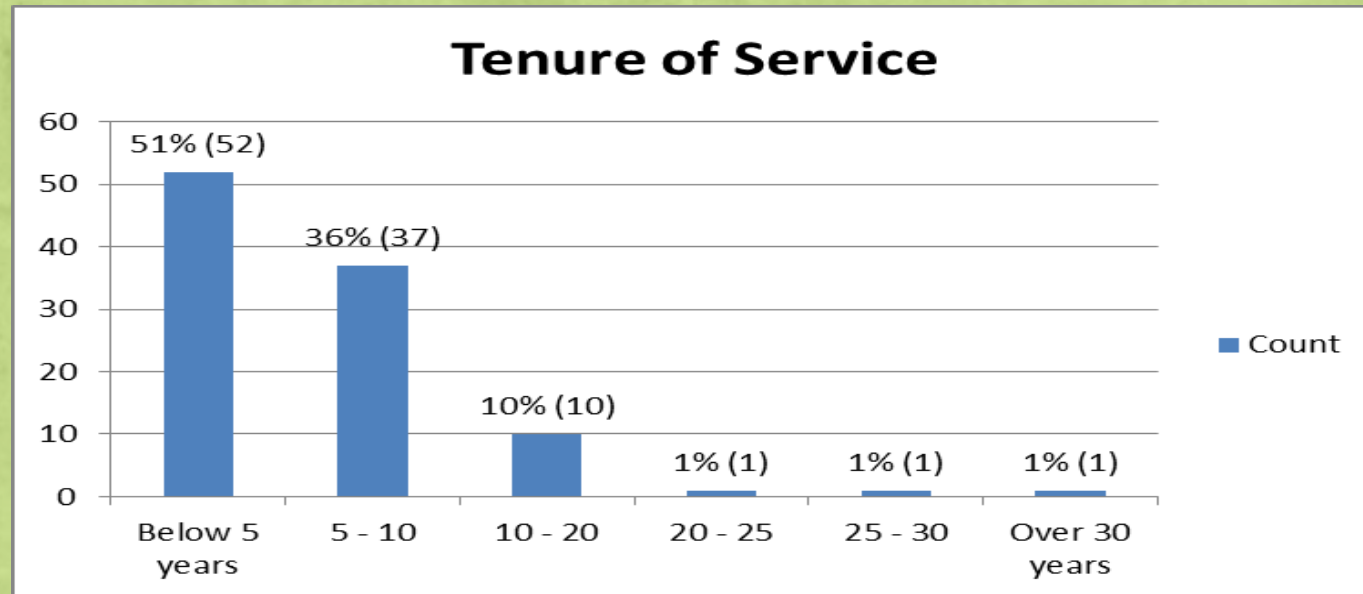
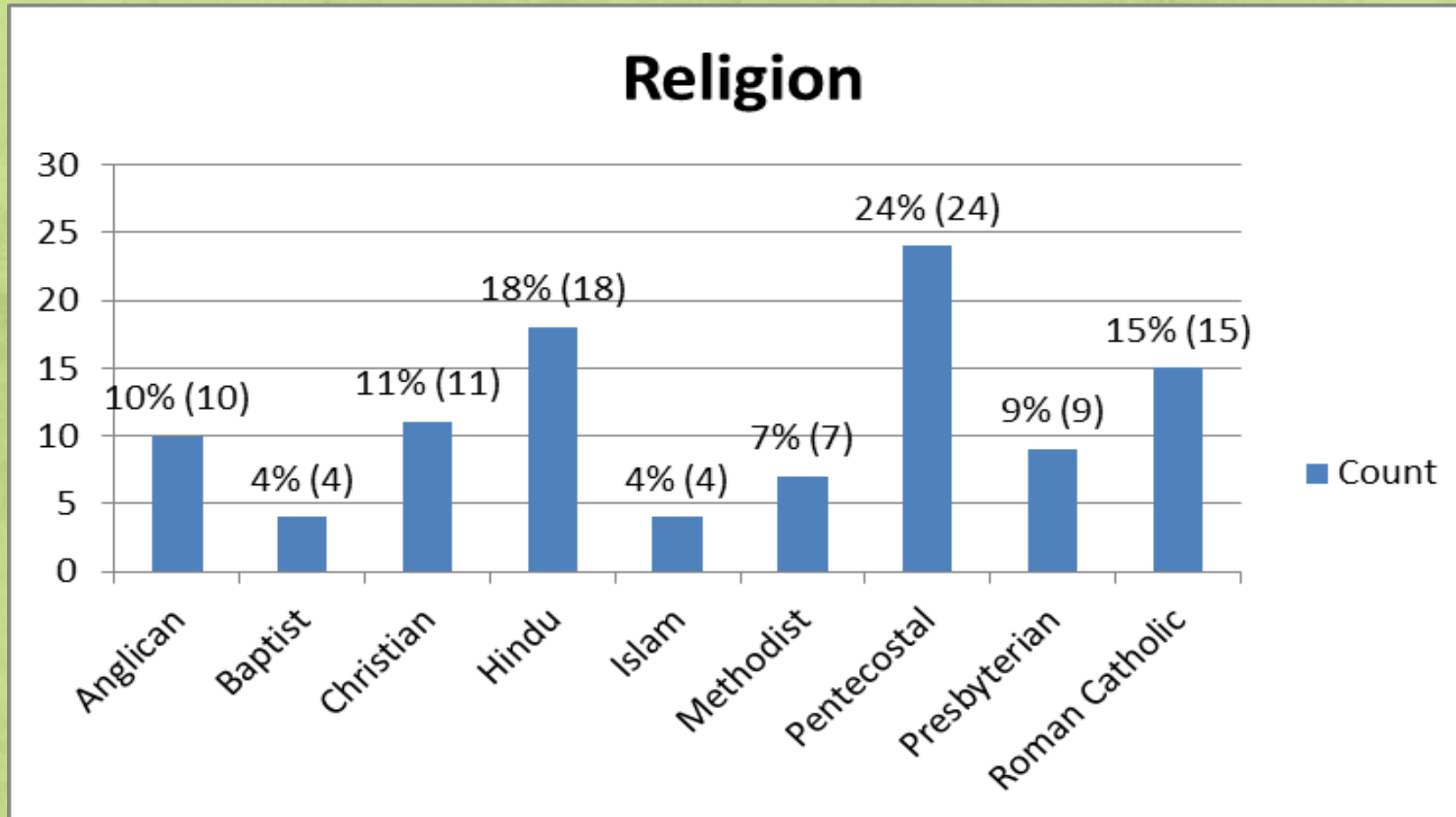


Figure 6. Tenure of Service. The majority of participants had below 5 years of experience in nursing (n=51%, 52). This was followed by the second largest group who had 5-10 years' work experience (n=36, 37). Only one participant was from the age group 20-25, 52-30 and over 30 years' experience.

Findings (Demographics)

Religious
Persuasion
N=102

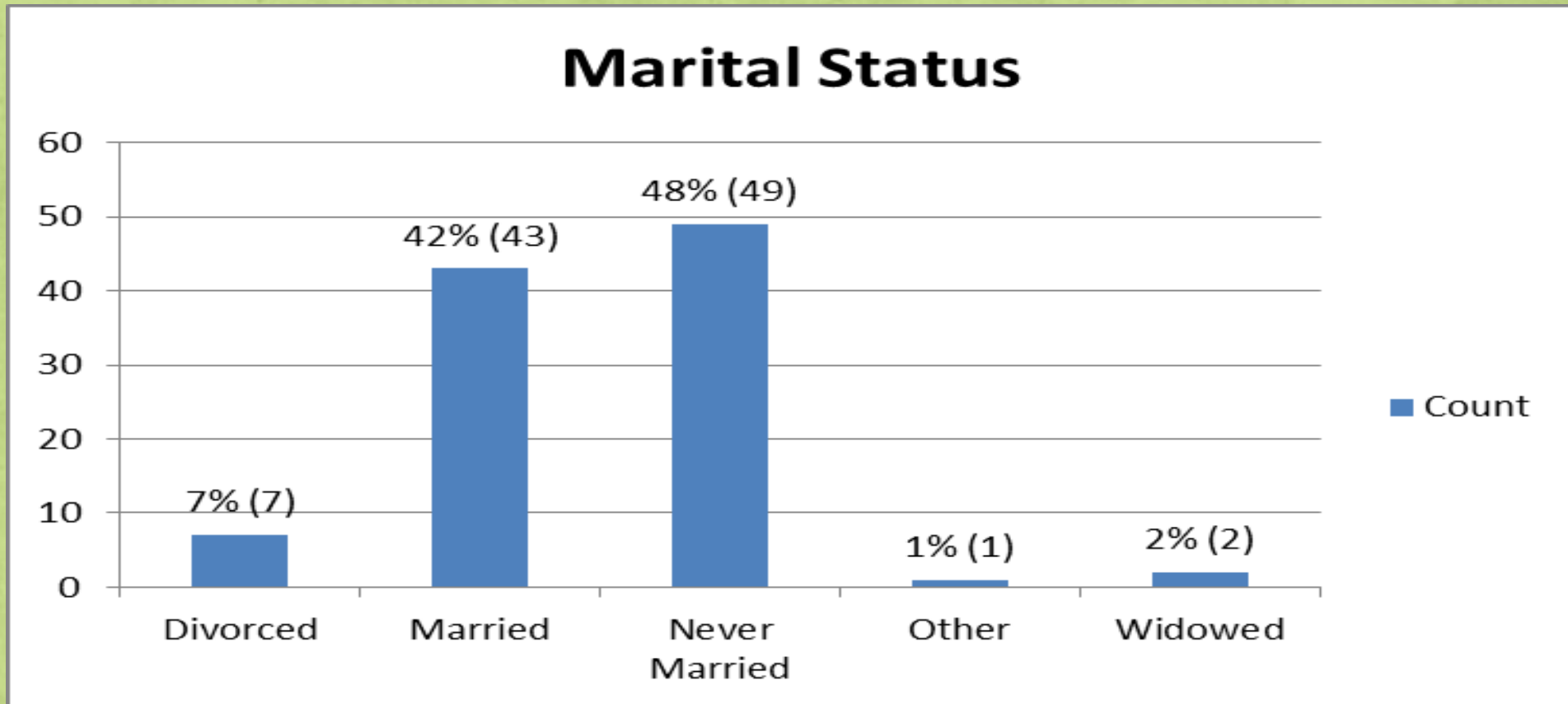


It was noted that Pentecostals accounted for the largest religious group (n=24%, 24). This was followed by Hindus (n=18%, 18), then Roman Catholics (n=15%, 15)

Findings (Demographics)

Marital Status

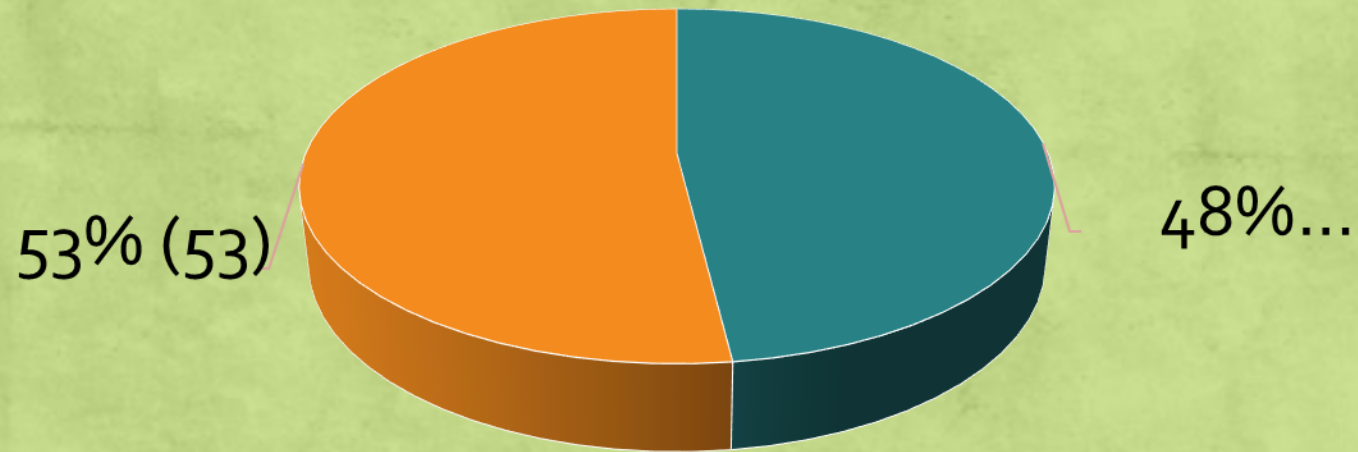
N=102



The majority of participants in this study were never married accounting for (n=48%, 49). A total of (n=42%, 43) were married and thus represented the second largest category.

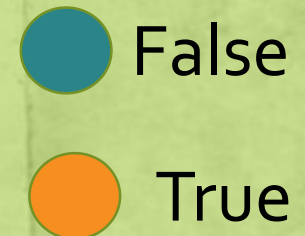
Findings (Data Description)

Presence of Bullying



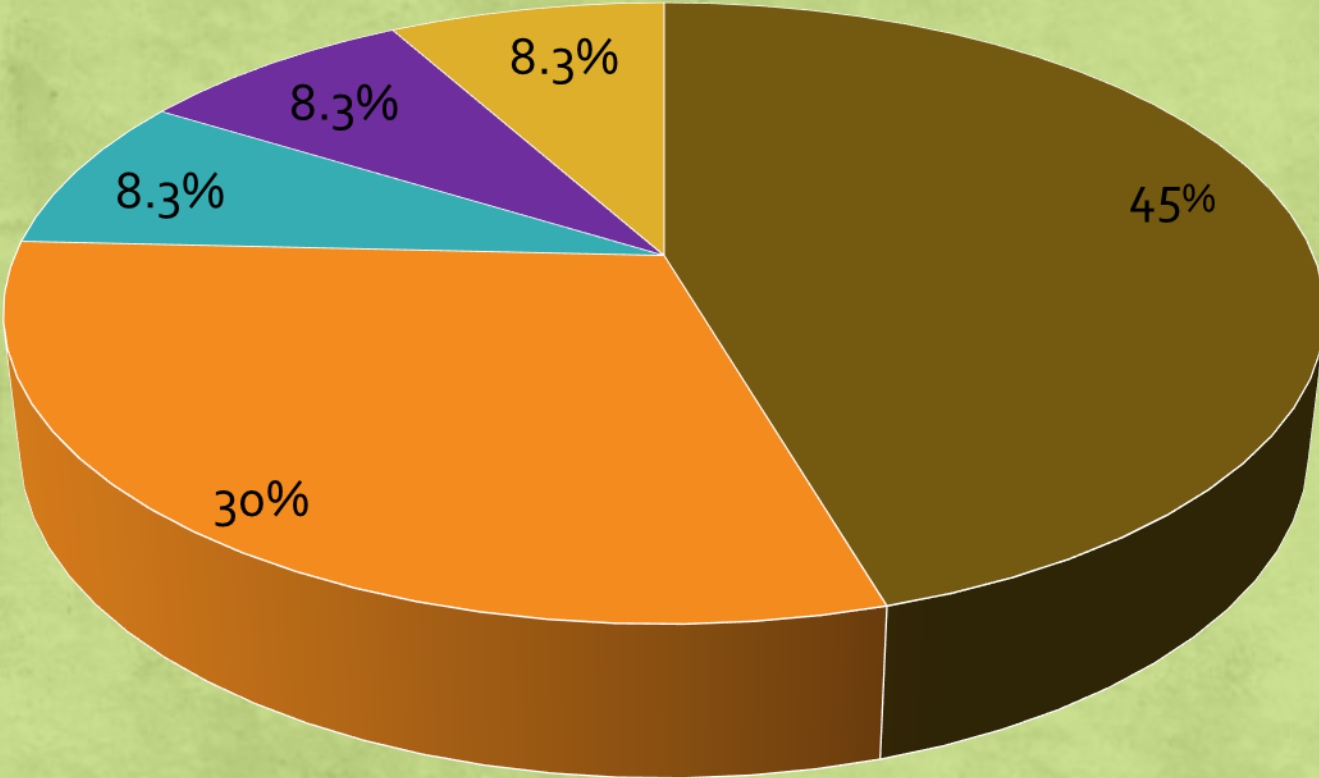
N=102

It was noted that more than half of the participants were bullied (n=53% 53)



Findings (Data Description)

Most Prevalent Bullying Acts



■ Not being informed of meetings

■ Responsible for work more than their capacity

■ Pressured to quit job/change workplace

■ Untrue things said about you

■ Spoken to in a belittling manner

Findings

Gender vs. having the decisions and recommendations you made criticized and rejected.

Criticized Decisions							
Gender	0	1	2	3	4	5	Grand Total
Female	0%	16%	25%	24%	12%	5%	81%
Male	0%	0%	0%	6%	8%	5%	19%
Grand Total	0%	16%	25%	29%	20%	10%	100%

93% significance level (p value of 0.026).

Findings

Correlation of Demographic Variable: Gender

Bullying Acts	Statistical Significance (93%)	Raw Data						
			0	1	2	3	4	5
Being forced to do a job that will negatively affect your self-confidence	p value of 0.047	Female	53%	15%	15%	6%	0%	2%
		Male	4%	1%	2%	1%	2%	0%
Having your honesty and reliability questioned	p value of 0.009	Female	40%	19%	19%	7%	5%	1%
		Male	3%	0%	2%	2%	2%	1%
Always having errors found in work and work results	p value of 0.0109	Female	46%	13%	19%	9%	2%	2%
		Male	3%	0%	3%	0%	4%	0%
Having unfair reports about you	p value of 0.005	Female	53%	15%	10%	7%	5%	1%
		Male	1%	2%	3%	3%	1%	0%

Findings

Correlation of Demographic Variable: Gender

Bullying Acts	Statistical Significance (93%)	Raw Data						
			0	1	2	3	4	5
Frequently being interrupted while speaking	p value of 0.016	Female	47%	10%	17%	13%	2%	2%
		Male	2%	0%	3%	4%	1%	0%
Being treated in the workplace as if you aren't seen and don't exist	p value of 0.044	Female	51%	14%	13%	9%	2%	2%
		Male	2%	2%	3%	2%	1%	0%
Getting personal things harmed	p value of 0.01	Female	74%	7%	5%	3%	2%	74%
		Male	5%	0%	3%	2%	0%	5%

Findings

Marital status vs. absenteeism in the workplace

	Absenteeism						
Marital Status	0	1	2	3	4	5	Grand Total
Divorced	0%	2%	1%	1%	2%	1%	7%
Married	2%	4%	16%	10%	6%	5%	42%
Never Married	5%	17%	13%	7%	4%	3%	48%
Other	0%	0%	1%	0%	0%	0%	1%
Widowed	0%	2%	0%	0%	0%	0%	2%
Grand Total	7%	25%	30%	18%	12%	9%	100%

93% significance level (p value of 0.0005)

Findings

Correlation of Demographic Variable: Marital Status

Bullying Acts	Statistical Significance (93%)	Raw Data						
		0	1	2	3	4	5	
Having your professional adequacy questioned	p value of 0.045	Married	23%	6%	6%	5%	2%	1%
		Never Married	31%	6%	6%	2%	3%	0%
Preventing or forbidding co-workers from talking with you	p value of 0.068	Married	33%	1%	3%	3%	2%	0%
		Never Married	43%	0%	3%	2%	0%	0%
Personal things being harmed	p value of 0.005	Married	33%	4%	2%	2%	1%	0%
		Never Married	38%	3%	5%	2%	1%	0%
Physical violence has been used against you	p value of 0.05	Married	33%	4%	3%	0%	0%	2%
		Never Married	40%	2%	4%	2%	0%	0%

Findings

Religion vs. having someone suggest that you are not psychologically well

Religion	Unwell Psychologically						Grand Total
	0	1	2	3	4	5	
Anglican	7%	1%	0%	1%	1%	0%	10%
Baptist	4%	0%	0%	0%	0%	0%	4%
Christian	10%	0%	1%	0%	0%	0%	11%
Hindu	11%	2%	3%	2%	0%	0%	18%
Islam	3%	0%	1%	0%	0%	0%	4%
Methodist	2%	0%	5%	0%	0%	0%	7%
Pentecostal	21%	2%	1%	0%	0%	0%	24%
Presbyterian	4%	0%	3%	0%	1%	1%	9%
Roman Catholic	10%	0%	3%	0%	1%	1%	15%
Grand Total	71%	5%	17%	3%	3%	2%	100%

93% significance level (p value of 0.054)

Findings

Religion vs. absenteeism in the workplace

Religion	Absenteeism						Grand Total
	1	2	3	4	5	6	
Anglican	2%	1%	4%	2%	1%	0%	10%
Baptist	0%	0%	3%	0%	1%	0%	4%
Christian	2%	1%	4%	2%	1%	1%	11%
Hindu	1%	0%	6%	5%	4%	2%	18%
Islam	0%	2%	0%	0%	0%	2%	4%
Methodist	0%	4%	2%	0%	1%	0%	7%
Pentecostal	0%	8%	6%	4%	3%	3%	24%
Presbyterian	1%	3%	2%	1%	1%	1%	9%
Roman Catholic	1%	6%	4%	4%	0%	0%	15%
Grand Total	7%	25%	30%	18%	12%	9%	100%

93% significance level (p value of 0.0005).

Findings

Tenure of service vs. holding you responsible for work more than your capacity

Tenure	Work More Than Capacity						Grand Total
	0	1	2	3	4	5	
Below 5 years	23%	3%	11%	8%	4%	3%	51%
5 - 10	12%	1%	2%	11%	6%	5%	36%
10 - 20	6%	3%	1%	0%	0%	0%	10%
20 - 25	1%	0%	0%	0%	0%	0%	1%
25 - 30	0%	0%	0%	1%	0%	0%	1%
Over 30 years	1%	0%	0%	0%	0%	0%	1%
Grand Total	42%	7%	14%	20%	10%	8%	100%

93% significance level (p value of 0.02)

Findings

Tenure of service versus having someone speak about you in a belittling and demeaning manner in the presence of others

	Demeaning Speech						
Work Service	0	1	2	3	4	5	Grand Total
Below 5 years	14%	10%	13%	11%	3%	1%	51%
5 - 10	5%	5%	10%	8%	5%	4%	36%
10 - 20	2%	3%	2%	2%	1%	0%	10%
20 - 25	0%	0%	0%	0%	1%	0%	1%
25 - 30	0%	0%	0%	0%	1%	0%	1%
Over 30 years	0%	0%	0%	0%	1%	0%	1%
Grand Total	21%	18%	25%	21%	12%	5%	100%

93% significance level (p value of 0.06)

Findings

Correlation of Demographic Variable: Tenure of Service

Bullying Acts	Statistical Significance (93%)	Raw Data						
			0	1	2	3	4	5
Being responsible for negative results of work done with others	p value of 0.05	Below 5 years	20%	7%	12%	11%	1%	1%
		5 - 10	5%	5%	12%	8%	6%	1%
Having duties that you are responsible for taken from you and given to others in lower positions	p value of 0.05	Below 5 years	40%	5%	4%	1%	0%	1%
		5 - 10	18%	7%	2%	5%	3%	2%
Considering the work you have done as without value and importance	p value of 0.03	Below 5 years	26%	8%	11%	4%	0%	2%
		5 - 10	14%	3%	3%	9%	6%	2%
Being treated in your workplace as if you aren't seen and don't exist	p value of 0.04	Below 5 years	32%	9%	6%	1%	1%	2%
		5 - 10	14%	5%	7%	9%	2%	0%

Discussion

- The findings represent empirical evidence of bullying occurring (>50%) in our local health care setting. Findings are consistent with research done by Pai and Lee (2011), Vessey et al (2009), Simons (2006) who all found a significant incidence of bullying among the nursing population averaging more than 50%.
- Results of this study identified the most prevalent bullying acts as:
 - (i) Not being informed of social meetings,
 - (ii) Holding the nurse responsible for work more than their capacity,
 - (iii) A three way tie for the third most prevalent bullying act, which were “Pressuring you to quit your job or change workplace”, “Having untrue things said about you”, and “Having someone speak of you in a belittling manner”

Discussion

- These bullying acts are consistent with the studies by Alspach (2008) and Moayed et al (2006) who identified forms of bullying including “complaints and false information shared with others , gossip, withholding support”.
- Statistical analysis identified correlations between the variables gender, marital status, religion, tenure of service, absenteeism and bullying acts.
- More than half of the RN’s were bullied on the medical units as reveled by this study, these results are consistent with the findings by Vessey et al. (2009) who found that while bullying can occur in any area, it occurred most often in medical surgical care (23%).
- Demographic data reveled a nursing population on the medical units that consisted mostly of women from the age group 25-30yrs. The most common entry qualification was an associate degree, with persons having less than 5yrs tenure of service.

Implications for Nursing

- The results of this study validate the presence of workplace bullying while the literature documents its adverse effects.
- Workplace bullying behaviors such as those identified in this study should be recognized and steps taken to address their impact.
- This study identified a relatively young nursing population with less than 5 years nursing experience, this factor have been implicated as a risk factors for being bullied.
- The findings of the current study can be used to implement sensitization workshops and training. At an organizational level, common bullying behaviors can be addressed through policies.

Research Recommendations

- Additional quantitative or qualitative studies should be conducted at major hospitals in Trinidad and Tobago.

Acknowledgements

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Thank You

