

Chapter 14

Bullying Among Healthcare Workers

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ABSTRACT

In this chapter, the authors comprehensively evaluate the phenomenon of bullying among healthcare workers, along with its prevalence, causes, and consequences. Bullying, which tends to become widespread in society, also seriously affects health institutions and healthcare workers. The high prevalence of bullying in the healthcare sector indicates that it is a problem that needs to be taken into account in organizational life. It is known that bullying in healthcare workers negatively affects both organizations and the victim. Bullying in the healthcare sector has a negative impact not only on the professional and personal lives of healthcare professionals, but also on the quality and scope of patient care provided. Therefore, it is important for authorities to review manpower, workplace design, policies, and organizational structures to identify factors that encourage bullying. In order to control this social phenomenon, there is a need to raise awareness about workplace bullying and to develop and implement prevention programs.

INTRODUCTION

Bullying, like all forms of violence, has increased dramatically around the world in recent years (Kingma, 2001). Leymann and Gustafsson (1996) described bullying as a type of psychological terror and defined it as “a type of psychological terror that includes sad, hostile and unethical attitudes systematically perpetrated by a person or group against a single person”. Galletta et al. (2014) stated that it should be applied at least once a week and spread over a long period of time for at least six months. Although there are many studies on bullying in the literature, the fact that bullying is dependent on the emotions,

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perceptions and reactions of the target person and is also affected by the context causes the subject to continue to be complex (Bayrakci & Dinc, 2020).

Studies have shown that verbal abuse and bullying are quite common, although physical violence is reported less frequently in the workplace. Studies on workplace bullying have attracted the attention of researchers who examine many abusive behaviors under numerous terms such as workplace violence, mobbing, aggression, abuse and harassment (Branch, 2008 Fox and Stallworth (2005) showed in their study that a certain group of employees they followed had been exposed to workplace bullying at least once in the previous five years. According to a study by Einarsen & Nielsen (2015), 11% of the global working population identified themselves as victims of bullying. In the emergence of this situation, various factors have been put forward that can lead to negative work behaviors such as personal factors and organizational factors. It has been argued that while leadership, working conditions, organizational support, job content and working environment are counted under the organizational factors that create negative work behaviors, personality traits of bullies and victims also play a role in the emergence of workplace bullying incidents (Matthiesen & Einarsen, 2010).

Studies on this subject have shown that bullying is more common in the service sector such as health, public service, finance and education services compared to other sectors. Leymann (1996) argued that bullying most commonly occurs in the healthcare sector. The healthcare sector is a sector that requires long working hours, full teamwork and cooperation as a requirement of the work done, and where the human factor still maintains its importance despite the advancing technology (Yilmaz, 2013). Today, bullying in healthcare workers has become an epidemic-sized public health problem with comprehensive consequences for both healthcare providers and healthcare users. Previous research has shown that one out of every four workplace violence incidents occurs in the health sector, and more than half of those working in this sector have experienced at least one incident of work violence (psychological or physical) during their career (Talas et al., 2011; Torshizi & Ahmadi, 2011). In a study conducted in recent years, it has been shown that 61.1% of healthcare workers have been subjected to violence at least once in their professional life, and 39.3% have been subjected to violence in the last year (Er et al., 2021). In another study, it was stated that 52.3% of healthcare workers were exposed to any type of violence at least once during their entire career (Pinar et al., 2017). Studies on this subject report that the prevalence of workplace bullying varies between 6 and 52% for healthcare workers with different levels of experience and different medical specialties (Al-Hussain et al., 2008; Askew et al., 2012; Cheema et al., 2005; Cohen et al., 2008; Daugherty et al., 1998; Gadit & Mugford, 2008; Heponiemi et al., 2014; Keeley et al., 2005; Launer, 2013; Nabi et al., 2013; Quine, 2002). It is thought that the intensity of interpersonal and emotional relationships inherent in the health sector and the hierarchical structure in health institutions may have an effect on the emergence of this situation (Awai et al., 2021). Considering the prevalence of bullying in healthcare workers, it is imperative to determine the causes of the problem and evaluate its scope, and to plan the necessary preventive actions by considering the negative consequences that may arise at the individual and organizational level (Norton et al., 2017).

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