A summary of international research on the consequences of workplace bullying and suggestions for upcoming research

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What is bullying?

• Negative acts
• Repeated – systematic.
• Persistent – long-lasting, not one-off incidences.
• Power imbalance.
• Something one should not expect to experience at work.
  – Not within legal frameworks
  – Dissatisfaction is not necessarily bullying.
Research on workplace bullying

Number of hits on "workplace bullying" in Google Scholar
A research field in bloom

• Early stages:
  – Descriptive correlational survey studies with cross-sectional designs
  – Nature and prevalence

• Last few years:
  – Prospective studies, multilevel studies, and meta-analyses
  – Comparison with other work factors
  – Causes and consequences
  – Interventions
A subjective phenomenon

• Workplace bullying is a subjective experience and cannot be measured with "objective" methods
  – Targets may experience the same exposure differently
  – Perpetrators may have another interpretation
  – Witnesses will seldomly perceive and understand everything that happens
The consequences
What the targets tell:

• What I struggle with is anger and hatred, injustice. I'm tired of people, tired of things and is depressed and tired of it all. I'm afraid to face former colleagues and have difficulties driving past my previous workplace, go to the store or other places where I can meet THEM. I am terrified everything that has to do with employment. Meetings with the National Welfare service is just full of tears, panic and anxiety attacks. I am terrified everything called bosses/ authorities." (Woman, 49 years)

• "I struggled for a long time with depression and negative feelings. The effects of the conflict that I encountered were many. I had nightmares and periods of sleeplessness, I jumped at sudden noises. If I saw a car belonging to one of the people involved (in the conflict) I was scared and I feared any encounter with them." (Woman, 53 years)
Consequences for health

• Acute reactions
  – Unease
  – Worrying
  – Confusion and dispair

• Reactions after prolonged exposure
  – Mental complaints (anxiety, depression)
  – Somatic complaints

• Long-term effects
  – Posttraumatic stress reactions
  – Sickness absence
  – Disability retirement
  – Suicidal ideation and actual suicide
A theoretical model

So, is this model supported by research?

Let’s find out.......
Cross-sectional correlations health

Nielsen & Einarsen, 2012
Hershcovis & Barling (2010)

![Bar Chart showing psychological aggression and sexual harassment across various measures: Job dissatisfaction, Lack of commitment, Distress, Turnover, Job stress, Withdrawal.](chart.png)
A cautionary note:

Bullying – a cause or a consequence?
Cross sectional  

Bullying  

Health  

Longitudinal  

Bullying  

Health  

Time
Review of longitudinal studies

- Significant associations between bullying and subsequent mental complaints in 15 of 16 studies
  - Short (6 months) and with long time-lags (5 years)
  - Adjusted for existing complaints
  - Consistent across occupational groups
  - Large probability samples in majority of studies
- Workplace bullying more strongly associated with mental health than other occupational exposures.
  - Leadership, safety, demands, and control
- Also associated with later somatic complaints
- No studies on mediators and few that included moderators
Prospective studies (Odds Ratio)

Nielsen, Magerøy, Gjerstad, & Einarsen (2014)
Somatic complaints

• Less research on associations between bullying and somatic complaints:
  • General pain (Saastamoinen et al., 2009)
  • Headache (Tynes, Johannessen, & Sterud, 2013)
  • Chronic neck pain (Kääriä, Laaksonen, Rahkonen, Lahelma, & Leino-Arjaas, 2012)
  • Fibromyalgia (Kivimäki et al., 2004).

• Lack of studies on mechanisms
  • Psychosomatic model?
Suicide

- Leymann

- **Nielsen et al (2015; 2016):**
  - Bullying associated with an increased risk of suicidal ideation two and five years later (OR=2.05).
  - Physically intimidating bullying strongest predictor of suicidal ideation.

- **Leach et al (2016), systematic review:**
  - Longitudinal, population-based research, adjusting for potential covariates, is needed to determine the level of risk that workplace bullying independently contributes to suicidal ideation and behaviour.
Sleep difficulties

• Increasing evidence for bullying as precursor of sleep problems
  – Bullied persons and witnesses report more sleep difficulties than those who were neither bullied nor witnesses to bullying
  – Findings somewhat mixed (Hansen et al., 2016)
  – Worries and need for recovery potential mediators (Munoz et al., 2011)
Sickness absence

• Bullying is associated with increased absence rates
  • 95% from Nordic countries

• Meta-analysis (Nielsen et al 2016):
  • Registry and prospective studies
  • OR=1.58, 95% CI 1.39–1.79
  • Lack of studies on moderators and mediators
  • No studies on the impact of absence on bullying!

• Also some research on presenteeism (Conway et al, 2016).
Eriksen et al. (2016).
Disability retirement

• Leymann:
  “Unless that a managerial intervention takes place, a bullying process will continue to escalate until it reaches a final “expulsion stage” where the target is forced out of his or her job or current position”.

• Existing studies support this claim:
  • Berthelsen et al (2011) and Glambek et al (2015): bullying significantly associated with disability retirement two (OR=5.71) and five (OR=2.95) years later.
  • Leinonen et al. (2011): bullying significantly predicted disability retirement among both men and women.
  • Dellve et al (2003): home-care workers receiving disability pension were twice as likely to report prior exposure to workplace bullying, both five and fifteen years earlier compared to a control group.
Work-related outcomes

• Many cross-sectional studies on job-related outcomes, but relatively few longitudinal studies:
  – Job insecurity and intent to leave (Glambek et al., 2014)
  – Turnover (Høgh, Hoel, & Carneiro, 2011)
  – Job satisfaction (Skogstad et al, 2015)
Bullying

Role ambiguity

Role conflict

Role overload

Bullying

Role ambiguity

Role conflict

Role overload

.12**

.15**

.07*

Hauge, Skogstad & Einarsen (2010)

24 months
Preliminary summary

• We know bullying is associated with subsequent risk for health problems, decreased well-being, sickness absence, and disability retirement.

• There is a lack of knowledge about the mechanisms and conditions that explains how and when bullying is related to these outcomes!
Social exclusion
Moderators: When is bullying detrimental.....

....or why the story about the three little pigs is wrong!
Personality dispositions

Research hypothesis: Employees that have a hardy personality will be less influenced by bullying compared to less hardy employees.
What the research shows

Health complaints

- Low hardiness
- High hardiness

Bullying

Low

High
Explanation

• Situational incongruence (Diener, 1984):
  – Individuals experience heightened negative affect in situations that are incompatible with their personality characteristics.

• Cognitive dissonance:
  – Inbalance between the self-perception of targets and how they are treated by the bullies
  – Requires adaption of perceptions.
The evidence

- Sense of coherence (Nielsen et al., 2008)
- Agreeableness (Ilies et al., 2010)
- Self-labeling as victim (Vie et al., 2011)
- Optimism (Britton et al., 2012)
- Coping styles (Reknes, 2016)
- Ability to defend (Nielsen et al., under review)
Situational factors are protective

- Conflict management climate (Einarsen et al., 2016)
- Psychosocial safety climate (Bond et al., 2010)
- Social support (Schat & Kelloway, 2003)
What about mediators?

• Few prospective studies. Longitudinal designs necessary to establish indirect effects.
  – Perceived stress (Grynderup et al., 2016)
  – Basic psychological needs (Trepanier et al., 2016)
  – Leisure time physical activity (Hansen et al., 2016)
Some important limitations
Methodological concerns

• Neall, A.M & Tuckey, M.R. (2014)
  1. Overuse of cross-sectional designs
  2. Overuse of self-report surveys
  3. Reliance on one source of data
  4. Analysis at the individual level
  5. One-sided focus on the antecedents and outcomes
  6. Overuse of behavioral checklists
  7. Overuse of field/survey studies
  8. Lack of information about perpetrators
  9. Non-representative sampling

Our theoretical model

Exposure to bullying

Acute reactions
- Attributions
- Worries
- Activation
- Emotions

Reduced health
Health complaints, reduced workability

Moderators
Protective and vulnerability factors

Long term effects
- Sickness
- Absence
- PTSD

Disability, exclusion
Suicide
Key knowledge challenges

• Causality and ”objective” data
  • Registry studies
  • Biopsychosocial basis?
• Bullying as a process
• Understanding mechanisms
  • What are the mediators and moderators?
• Interventions and their effectiveness
• Treatment and rehabilitation
• Methodology
  • Longitudinal and experimental designs
  • Animal models
  • Witnesses and perpetrators
  • Group and organizational level
Toppforsk 2016 -2021

Workplace bullying: From mechanisms and moderators to problem treatment

Project manager
Ståle Einarsen
Toppforsk

- "Toppforsk" grant
  - One of 8 grants to the University of Bergen
- Funding: 33 million Norwegian Kroner
  - Norwegian Research Council
  - University of Bergen
  - Faculty of Psychology
Criteria

• Ground-breaking nature and potential impact of the research project
  • High risk projects

• Scientific approach

• Principal investigator – Intellectual capacity and creativity

• The research group

• Overall assessment
Main aims

• 1) To determine mechanisms (mediating and moderating factors) that influence and explain how and when workplace bullying occurs and develops, as well as how and when it impacts those targeted.

• 2) To develop and evaluate sound and effective methods to prevent and manage cases of bullying at the workplace and to rehabilitate and treat targeted individuals.

• 3) To build and maintain an internationally leading research team
Theoretical model
Subprojects

• Explaining the workplace bullying process by group dynamics
  • Social identity theory
  • Models of conflict development
  • Social rules theory

• Individual and psychosocial antecedents of workplace bullying: Identifying mechanisms and moderators

• Consequences of workplace bullying: Mechanisms and moderators
  • Situational incongruence
  • Conservation of resources
Subprojects

• The biopsychosocial basis for workplace bullying and health effects
  • Animal models (social exclusion, aggression)
  • Genetic variability (DNA, RNA)
  • Epigenetic modifications may have negative health effects related to both hypothalamic pituitary adrenal (HPA)-axis attenuation and inflammation.

• Organizational interventions against workplace bullying

• Clinical assessment and treatment of victims of bullying
  • Jobbfast
Design and methods

• Multidisciplinary
  – Psychology, medicine, physiology, epidemiology and law
• Multi-method;
  – Survey, cross-sectional and longitudinal with multilevel data
  – Registry data
  – Experimental designs and animal models
  – Qualitative interviews
  – Diary studies
  – Clinical assessments
Partners

• Department of psychosocial science
• National Institute of Occupational Health
• Haukeland University Hospital
• International partners:
  – Denise Salin (Finland),
  – Elfi Baillien (HUBrussel),
  – Helge Hoel (UiM)
Questions?