

PREVALENCE AND DETERMINANTS OF WORKPLACE BULLYING AMONG HEALTHCARE WORKERS IN RIYADH

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Received date: 22 May 2020

Revised date: 12 June 2020

Accepted date: 02 July 2020

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ABSTRACT

Background: Bullying, or moral harassment in a hospital setting has become a concern of many organizations. Bullying on work place can influence the productivity of employees. However, Information Bullying among health care workers in Saudi is limited. **Methods:** A cross-sectional study on 666 health care workers during 2019. We will used Negative Acts Questionnaire to measure exposure to negative behaviors identified with bullying, which is a valid and reliable instrument that has been used globally to assess workplace bullying. It is consisting of 21 specific negative behaviors, which has been adapted among healthcare workers in Riyadh. Data was will be entered and analyzed using SPSS. **Result:** Overall findings harassment Associate in Nursing discrimination of Saudi residents is common with quite three-quarters coverage having had such an expertise. **Conclusion:** Findings can be used to implement programs to eliminate harassment level which consequently impacts their health care, retention and the health care organizational effectiveness. We also recommend assessing Harassment on regular basis.

KEYWORDS: Prevalence and determinants; bullying; healthcare workers; healthcare.

INTRODUCTION

Bullying, or moral harassment, is defined as systematic exposure to humiliation, hostile and violent behaviors, and oppressive unethical communication against one or more workers at least once a week and for at least six months.^[1] In early 90s, studies conducted to investigate workplace bullying particularly in Scandinavian countries, while this subject is relatively new, it received considerable attention because of its significant impact on both individual and institute.^[2] Suicide has been claimed in some Studies as an outcome of workplace bullying, along with stress, depression, psychosomatic problems and cardiovascular disease.^[2] On another hand, absenteeism found to be the most common outcome affecting institute along with staff turnover, efficacy reduction, work quality decline, increased error margins and unsafe workplace.^[3] The incidence of this phenomena varies significantly from one nation to another and even within the same country.^[4] Some researchers have suggested that even a 10% prevalence of workplace bullying warrants strong attention. Nearly 50% of workplace bullying happened in the United States of America.^[5] While in Northern European

countries studies reported of 4 to 5% of workplace bullying.^[6]

LITERATURE REVIEW

Internationally, multiple published articles studied workplace bullying, a study done in Portugal to measure the prevalence of bullying among all healthcare worker within one institute showed estimated 8% prevalence of workplace bullying, with predominantly vertical type of bullying and more frequently among nurses.^[7] While in Australia the most significant reporter type of bullying was horizontal with 49% prevalence.^[8] Among nursing staff in Greek public hospitals, one third of participants experienced bullying in the past six months.^[9] While workplace bullying in Turkey was 21.8% among nurses.^[10]

Regionally limited studies done to measure the prevalence of bullying. In a study done in Palestine found that 27.1% of the nurses reported exposure to workplace aggression and bullying was associated with lower job satisfaction.^[11] in Jordan 55.5% of nurses get abused, and over half of them considered leaving nursing

and felt their quality of work decreased because of the abuse.^[12] While in Oman 96.6% of first-year residents received mistreatment.^[13]

In our nation, few kinds of research have been done among healthcare workers to study violence, harassment, and discrimination. No studies have been done reading bullying, Among residents. At least one of the types of harassment and discrimination was reported by 83.6% of respondents within three training hospitals within the country.^[14] At the level of primary health care in Al-Hassa About 28% of PHC workers were exposed to at least one violent event during the past year.^[15] Also (45.6%) experienced some violence over 12 months, with A significant association of workplace violence with working multiple shifts, evening or night shift in Riyadh.^[16] In a study done at a Saudi university hospital, workplace violence against nurses revealed almost half of the participants had experienced bullying in the professional setting during the year. The majority of nurses perceived workplace violence as verbal abuse and nearly all the subjects identified patients as the leading cause.^[17] In eastern Provinces, a study showed that males nurses were verbally abused significantly more than

females.^[18] While more than two-thirds (67.4%) of healthcare professionals in Riyadh reported they were victims of violence, and the nurses were more likely to be exposed to violent incidents than physicians, males, less experienced, and younger respondents were at higher risk to face violent episodes than other participants.^[19]

Scientific gap needed to fill by conducting this study? Why and How is it important?

No known representative data are available regarding the prevalence of workplace bullying in Saudi Arabia among health care workers. Considering that health care workers are an occupational group with known exposure to bullying.^[20] To establish a preventive measure, assessing the prevalence of the problem which could minimize the consequences of bullying at both individual and institutional levels is needed.^[6,21] In particular, this phenomenon has only been studied in nurses with no data available for other health care workers.^[22] To design and implement effective prevention and intervention programs it's crucial to understand workplace bullying as well as its associate factors.^[22]

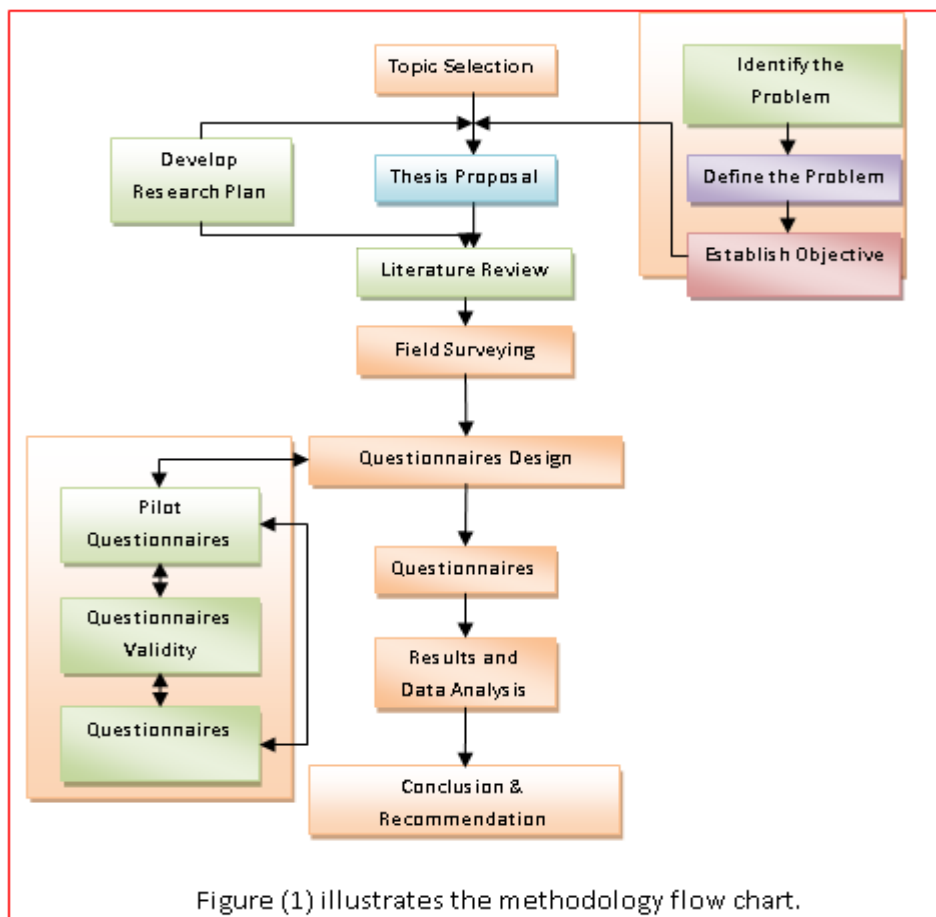


Figure (1): Shows the methodology flowchart, which leads to achieve the research objective.

DISCUSSION

Alzahrani (2012) in his study agreed with our study results, where he found the overall Prevalence of

workplace bullying among healthcare workers is higher than 8% at significant level.^[23] In addition, the overall rate of bullying within the current study is twenty eighth

that is far under rates according in developed countries. In USA, forty second of medical students according harassment and eighty-four belittlement throughout their keep in graduate school compared to five hundredth in European country. it's additionally under a number of geographical region countries' rates like Jordan sixty-one and Asian country fifty-two. Almost like most of previous studies, the most common sort of bullying within the current study was the verbal abuse which has shouting, humiliation and belittlement. harassment 's rate is comparatively abundant lower in our study compared to prevalence rates according in industrialized countries (18-60%). solely half dozen females and three males were exposed to such sort of abuse and failed to report the incidents.

Some researches agreed with our study where their study stress that 21.8% of the nurses were exposed to bullying behaviors.^[24,25] within the literature, the speed varies from one study to a different. Whereas in another study twenty first of the nurses were exposed to bullying.^[26] In Quine's (1999) study, thirty eighth of health care employees encountered bullying behaviors a minimum of once inside the last twelve months, and therefore the perpetrators were principally managers.^[27] In a very study of nurses in North American country, 20.4% of nurses explicit that they encountered negative behaviors within the geographical point within the last six months.^[28] These results of this and alternative studies within the literature indicate that worldwide, nurses square measure at serious risk of being exposed to bullying behavior. These results in agreement with our study findings.

The overall rate of bullying within the current study is twenty eighth that is far under rates according in developed countries.^[29] One in 3-5 Dutch feminine medical students had toughened unwelcome sexual attention from patients, colleagues or supervisors. the present rate is even under rate according in Jordan that shares some common cultural backgrounds with Kingdom of Saudi Arabia (6% vs 33%). solely half-dozen females and three males were exposed to such type of abuse and didn't report the incidents. The discussion of bullying and notably molestation is sensitive and embarrassing in native culture. this could result in underreporting of the cases.

Rutherford, A., & Rissel, C. (2004) and Samnani, A. K., & Singh, P. (2012) agreed with our study where about half of the staff of organization according that that they had knowledgeable about one or a lot of kinds of bullying behavior within the last twelve months.^[29,30] Despite employing a broad definition, the amount of bullying according was unexpectedly high and has currently resulted within the development of a variety of methods to handle the difficulty.

It has been discovered that twenty-seven (27%) of PHC employees were exposed to violence throughout the past

year. Denial of the violent acts is also a determinant issue.^[31,32] The Saudi culture has its own distinctive characteristics of segregation of each gender publicly places and its conservative society supported Islamic rules that discourage violence. Medical personnel, particularly doctors, area unit control in high regard and area unit absolutely revered by the community. it had been expressed that incidents of violence area unit doubtless to be underreported, maybe due partially to the persistent perception among the health care trade that assaults area unit a part of the work. Underreporting of work violence against health care employees is incredibly common, starting from forty sixth to eightieth.^[32,33] Most violent events occurred on Saturdays once come from the weekend, particularly on early operating hours. At these times, overcrowding with long waiting is common. molestation during this study is low as a result of segregation in most PHC activities. Women's concern of speaking publicly on this subject might contribute to low coverage. No specific gender or age patterns were known among the victims. Rather, violence perceived to mirror the extent of exposure to shoppers with higher-risk demographic, specific atmosphere, and supplier characteristics.

CONCLUSION

Harassment Associate in Nursing discrimination of Saudi residents is common with quite three-quarters coverage having had such an expertise. Identification of the danger factors may be a necessary beginning in elucidative this issue and will be used once designing ways for hindrance. Bullying behaviors hurt motivation, structure commitment, attending and culture. Entrepreneurs and managers ought to remember of the construct, types, reasons, methods, consequences and remedies of bullying for his or her organizations. they need to look at behaviors of their staff to diagnose bullying behaviors, develop structure culture and bullying policy to forestall bullying behaviors, penalize and find eliminate bullies in their organizations.

RECOMMENDATIONS

As a result of our research and upon on the literature review, the following are our recommendations to be taken into considerations in the future:

- It is recommended that to train the managers and entrepreneurs to be aware of harms of bullying, train human recourses professionals and all employees about them, prevent and get rid of bullying behaviors and bullies in their organizations.
- A policy against bullying and harassment ought to be adopted altogether of medical schools to observe this development. Bullying rates could also be reduced through employee's development and establishing a system for observance these abuses to medic all students.
- It is recommended that to build active effective student support units in order to decrease this phenomenon

- It is recommended that to explore bullying further in Saudi Arabia and countries of similar cultural backgrounds

REFERENCES

- Cassitto, M. G., Fattorini, E., Gilioli, R., Gonik, V., Fingerhut, M. A., & Kortum-Margot, E. G. Raising awareness of psychological harassment at work. In R. Gilioli, M. A. Fingerhut, & E. Kortum-Margot (Eds.), *Protecting workers' health series*. Geneva, Switzerland: World Health Organization, 2003.
- Farman A. Moayed, Nancy Daraiseh, Richard Shell & Sam Salem. Workplace bullying: a systematic review of risk factors and outcomes, *Theoretical Issues in Ergonomics Science*, 2006; 7(3): 311-327. DOI: 10.1080/14639220500090604.
- Sheehan, M., McCarthy, P., Barker, M. and Henderson, M., (2001), A model for assessing the impacts and costs of workplace bullying. Proceedings of the Standing Conference on Organizational Symbolism (SCOS), Trinity College, 2001.
- Ariza-Montes, Antonio & Muniz R., Noel & Montero-Simó, María & Araque Padilla, Rafael. Workplace Bullying among Healthcare Workers. *International journal of environmental research and public health*, 2013; 10: 3121-39. 10.3390/ijerph10083121.
- Lutgen-Sandvik, P., Tracy, S. J., & Alberts, J. K. Burned by bullying in the American workplace: Prevalence, perception, degree, and impact. *Journal of Management Studies*, 2007; 44: 837-862.
- Nielsen, M.B.; Skogstad, A.; Matthiesen, S.B.; Glaso, L.; Aasland, M.S.; Notelaers, G.; Einarsen, S. (2009). Prevalence of workplace bullying in Norway: Comparisons across time and estimation methods. *Eur. J. Work Organ. Psychol*, 2009; 18: 81-101.
- Norton, P., Costa, V., Teixeira, J., Azevedo, A., Roma-Torres, A., Amaro, J. and Cunha, L. Prevalence and Determinants of Bullying Among Health Care Workers in Portugal. *Workplace Health & Safety*, 2017; 65(5): 188-196.
- Rutherford, Alison & Rissel, Chris. A survey of workplace bullying in a health sector organization. *Australian health review: a publication of the Australian Hospital Association*, 2004; 28: 65-72. 10.1071/AH040065.
- Karatzas, Christine & Zyga, Sofia & Tziaferi, Styliani & Prezerakos, Panagiotis. Workplace Bullying Among the Nursing Staff of Greek Public Hospitals. *Workplace Health & Safety*, 2016; 65. 10.1177/2165079916657106.
- Bardakçı, E., & Günüşen, N.P. Influence of Workplace Bullying on Turkish Nurses' Psychological Distress and Nurses' Reactions to Bullying. *Journal of transcultural nursing: official journal of the Transcultural Nursing Society*, 2016; 27(2): 166-71.
- Jaradat, Yousef & Nielsen, Morten & Kristensen, Petter & Nijem, Khaldoun & Bjertness, Espen & Stigum, Hein & Bast-Pettersen, Rita. Workplace aggression, psychological distress, and job satisfaction among Palestinian nurses: A cross-sectional study. *Applied Nursing Research*, 2016.
- Ahmed, A. 318 Verbal and physical abuse against Jordanian nurses in the work environment. *Eastern Mediterranean Health Journal*, 2012; 18(4): 318-324.
- Al-Shafae, M., Al-Kaabi, Y., Al-Farsi, Y., White, G., Al-Maniri, A., Al-Sinawi, H. and Al-Adawi, S. Pilot study on the prevalence of abuse and mistreatment during clinical internship: a cross-sectional study among first year residents in Oman. *BMJ Open*, 2013; 3(2): e002076.
- Fnaies, Naif & Al-Nasser, Muhammad & Zamakhshary, Mohammed & Abuznadah, Wesam & Al Dhukair, Shahla & Saadeh, Mayssa & Al-Qarni, Ali & Bokhari, Bayan & Alshaeri, Taqreed & Aboalsamh, Nouf & Binahmed, Abdulaziz. Prevalence of harassment and discrimination among residents in three training hospitals in Saudi Arabia. *Annals of Saudi medicine*, 2013; 33: 134-9.
- El-Gilany, A., El-Wehady, A. and Amr, M. Violence Against Primary Health Care Workers in Al-Hassa, Saudi Arabia. *Journal of Interpersonal Violence*, 2009; 25(4): 716-734.
- AlAteeq, M., Al-Turki, N. and Afifi, A. Violence against health workers in Family Medicine Centers. *Journal of Multidisciplinary Healthcare*, 2016; 257.
- Alkorashy, Hanan & Bakheet Al Moalad, Fawziah. Workplace violence against nursing staff in a Saudi university hospital. *International Nursing Review*, 2016; 122-42.
- Al-Shamlan, N., Jayaseeli, N., Al-Shawi, M. and Al-Joudi, A. Are nurses verbally abused? A cross-sectional study of nurses at a university hospital, Eastern Province, Saudi Arabia. *Journal of Family and Community Medicine*, 2017; 24(3): 173.
- M Algwaiz, Waleed & Alghanim, Saad. Violence exposure among healthcare professionals in Saudi Public Hospitals A preliminary investigation. *Saudi medical journal*, 2012; 33: 76-82.
- Zapf, D., Einarsen, S., Hoel, H., & Vartia, M. Empirical findings on bullying in the workplace. In T. Francis (Ed.), *Bullying and emotional abuse in the workplace: International perspectives in research and practice*, 2003; 103-126.
- Nielsen, M. B., Matthiesen, S. B., & Einarsen, S. The impact of methodological moderators on prevalence rates of workplace bullying. A meta-analysis. *Journal of Occupational and Organizational Psychology*, 2010; 83: 955-979.
- Alzahrani, H. A. Bullying among medical students in a Saudi medical school. *BMC research notes*, 2012; 5(1): 335.
- Hoel, H., Cooper, C. L., & Faragher, B. The Experience of Bullying in Great Britain: The Impact of Organizational Status, 2013; 2: 169-190.

24. Bardakçı, E., & Günüşen, N. P. Influence of workplace bullying on turkish nurses' psychological distress and nurses' reactions to bullying. *Journal of transcultural nursing*, 2016; 27(2): 166-171.
25. Yıldırım, D. Bullying among nurses and its effects. *International nursing review*, 2009; 56(4): 504-5011.
26. Quine, L. Workplace bullying in NHS community trust: Staff questionnaire survey. *BMJ Clinical Research*, 1999; 318(7178): 22832
27. Trépanier, S. Workplace bullying and psychological health at work: The mediating role of satisfaction of needs for autonomy, competence and relatedness. *work and stress Journal*, 2013; 27(2): 123-140
28. Rutherford, A., & Rissel, C. (2004). A survey of workplace bullying in a health sector organization. *Australian Health Review*, 2004; 28(1): 65-72.
29. Samnani, A. K., & Singh, P. 20 years of workplace bullying research: a review of the antecedents and consequences of bullying in the workplace. *Aggression and Violent Behavior*, 2012; 17(6): 581-589.
30. Iftikhar, R., Tawfiq, R., & Barabie, S. Interns' perceived abuse during their undergraduate training at King Abdul Aziz University. *Advances in medical education and practice*, 2014; 5: 159.
31. El-Gilany, A. H., El-Wehady, A., & Amr, M. Violence against primary health care workers in Al-Hassa, Saudi Arabia. *Journal of interpersonal violence*, 2010; 25(4): 716-734.
32. The occupational violence experiences of 400 Australian health workers: an exploratory study. *Journal of Occupational Health and Safety, Australia and New Zealand*, 2003; 19(6): 3-43.