

WORKPLACE BULLYING IN NURSE WITHIN BAGMATI PROVINCE

Dhruba Lal Pandey, Ph.D.

Associate professor

Central Department of Management,

T.U., Nepal

Abstract

Workplace bullying is frequently pronounced phrase in the world. Nursing staffs have pressure in the workplace in Nepal as one nursing staff has to care for 2000 population. Thus, the study intends to assess the level of stress and know which bullying either work-related or personal bullying is high. The population of the study covers the whole nursing staffs working within Bagmati Province. Only 332 nurses were selected as sample on the basis of the samples considered by previous studies in the similar issues. As it is descriptive study so the percentage and mean value were used to analyze the data. Percentage was used to assess the overall position of bullying and Mean value was used to assess the position of work-related and personal bullying. The study found that overall bullying among nurses is high in their workplace. Simultaneously the work-related bullying is more prominent in the nursing staffs than personal bullying but personal bullying is also significant.

Keywords: Work, Bullying, Nepal, Bagmati Province, Nurses

JEL Code: L20, L29.

Introduction

Bullying is the repeated actions and practices that are directed to one or more workers, which are unwanted by the victim, which can be done on purpose or unintentionally, that cause embarrassment, offense and pain, which may interfere with work execution and cause an terrible working environment (Einarsen & Raknes, 1997). Bullying is a bad practice as it will results to negative organizational outcomes such as higher absenteeism (O'Connell, Calvert, & Watson, 2007) and also greater voluntary turnover (Tepper, 2000). Workplace bullying doesn't have a universally accepted definition as it is a subjective concept. There is no universally recognized terminology either, and several terms are used to describe the same phenomenon (Matthiesen & Einarsen, 2007)

Workplace bullying is an abuse or hurtful conducts from others within the work environment that intend to outrage, scare, or embarrass a selected individual or group of individuals that causes either physical or passionate mischief. Bullies can be peers, occasionally subordinates or seniors (someone who has authority over the victim). Kohut, (2007) states that workplace bullying is the repeated mistreatment of one employee who is targeted by one or more employees with a intend of humiliation, intimidation and sabotage of performance.

To study workplace bullying in nurses in Bagmati state we selected two variables which are work related and personal bullying. Work related bullying is a form of bullying that is related to an individual's professional career. Work-related bullying can be excessive workload, excessive supervision or inadequate support at the workplace. Every job has certain responsibilities and duties. But when workload beyond their capacity or job requirement is expected from an individual, it is taken as bullying. Similarly, when there is no confidence in an individual's capacity to work and their ability to take on responsibilities, there is excessive supervision

without valid reasons or constructive criticism. Inadequate support at workplace can be lack of opportunities for real involvement in work- and work-related projects (Quine, 2001).

Personal bullying is a form of bullying that is related to an individual's personal identity which may be their appearance, their gender or their sexuality and their general personality. Personal bullying can take the form of social exclusion, physical abuse, verbal abuse or sexual abuse. These forms of bullying intend to bring down victim's self esteem and their confidence (Nwaneri, Onoka & Onoka, 2017). Workplace bullying creates stress among employees that reduces the service delivery effectiveness of organization. Bullying can be made in the process of doing work or personal assignments. Nursing staffs are frontline workers and bearing of 1 nursing staff is 2000 population in Nepal (Human resource for health Nepal country Profile, 2013). It means workload of the nursing staff is high in Nepal. Thus study of level of bullying at workplace considering work-related bullying and personal bullying is high but the study over such issues is very few. This study attempted to the personal and work-related bullying issues of nurses in the Bagmati Province of Nepal. The study intends to study the position of bullying in the nurses working within Bagmati Province, Nepal.

Workplace bullying in Nepal

Bullying in Nepal has seen in different sectors. (Coyle, Shrestha, & Jung, 2014) focused on Banke and Bara districts, where they found harassment in public spaces and workplaces is a common but underreported experience for women.

The Government of Nepal has made specific legislation addressing sexual harassment at the workplace to ensure the right of each person to work in a safe environment. The Sexual Harassment Prevention Act at Workplace, 2015 came into effect on February 20, 2015. The act is unbiased and doesn't simply apply to harassment of women alone. Section 12 of the Act provides that any individual who has committed sexual harassment under the Act may be punished with imprisonment of up to 6 months, and/or fine of up to Rs 50,000. (Acharya, 2020)

As indicated by research on Baglung District, there is a quick need to address workplace violence by concerned authority through presenting suitable arrangement and methodologies, upgrade of occurrence revealing and follow up on reported events also giving satisfactory physical and mental help to casualties of workplace violence (Rajbhandari, Subedi, & Kaphle, 2015).

(Shrestha, 2012), as Nepal is going through political instability, responsibility to deal with sexual harassment at workplace falls on the institutes. To tackle this problem, institute must take this issue seriously and start preventive measures like awareness programs which will bring change in males' attitude towards their female co-workers and help them treat women at workplace with dignity. It should develop and enforce rules and regulation within the organization, develop mechanisms of reporting, and punish the perpetrators if found guilty.

(Gaihre, Regmi, & Shrestha, 2018), Research carried out in 2017 in three private nursing colleges in Kathmandu found that more than 25% of nursing students experienced bullying in the form of sexual harassment where 32% of them experienced sexual harassment from hospital staff and doctors. The majority of the respondents were in the age group of 15-19. These experiences lead to disturbing memories, being on guard at times and super alert. This clearly conveys a negative image of the nursing profession as a whole and has negative impact on the learning experience and negative impact on the profession of the nursing students.

Table 1. Synopsis of related Nepalese literatures

Authors	Research	Published Date	Findings
Coyle, Shrestha, & Jung	Women's insecurities and the workplace in Nepal: A study from Banke and Bara districts	2014	<ul style="list-style-type: none"> Harassment in public spaces and workplaces is a common but underreported experience for women.
Acharya	myrepublica.nagariknetwork.com	2020	<ul style="list-style-type: none"> The Government of Nepal has made specific legislation addressing sexual harassment at the workplace to ensure the right of each person to work in a safe environment.
Gaihre, Regmi, & Shrestha	Experience of sexual harassment among nursing students in clinical settings in private nursing colleges in Kathmandu valley	2018	<ul style="list-style-type: none"> Research carried out in 2017 in three private nursing colleges in Kathmandu found that more than 25% of nursing students experienced bullying in the form of sexual harassment where 32% of them experienced sexual harassment from hospital staff and doctors
Rajbhandari, Subedi, & Kaphle,	Workplace Violence against Health Workers: A Cross-Sectional Study from Baglung District, Nepal.	2015	<ul style="list-style-type: none"> Health workers in Baglung district were exposed to some type of workplace violence Taking no action was the common individual response There is quick need to address workplace violence
Shrestha	Workplace sexual Harassment in hospital	2012	<ul style="list-style-type: none"> To tackle this problem, institute must take this issue seriously and start preventive measures like awareness programs which will bring change in males' attitude towards their female co-workers and help them treat women at workplace with dignity.

Literature Review

A study conducted in a community NHS trust in south east England reported that forty-four percent of nurses had experienced bullying in the past year. This is ten percent higher than the reports of bullying from staffs other than nurses. There is negative relationship between bullying and job satisfaction and positively related to levels of anxiety, depression and propensity to leave. Workplace bullying made the staff lose organizational trust. Backing at work was seen as one of the variables able to protect nurses from the belongings of harassing and an solution for the loss of organizational trust also (Quine, 2001)

(Jackson, Clare, & Mannix, 2002), Nurses experience Workplace violence in different forms like aggression, harassment, bullying, intimidation and assault which comes from patients, relatives, other nurses and other professional groups.

Highly prevalent workplace bullying is from senior to junior nurses which has noteworthy effect on the health, work execution and retention rate of nurses working in tertiary clinics in Enugu (Nwaneri, Onoka, & Onoka, 2017)

Mostly, nurses are exposed to abuse and violence by coworkers and also to the violent acts of patients and their relatives. Nurses are up to three times more likely to be victims of violence than other categories of health personnel (Ovayolu, Ovayolu, & Karadag, 2014). Bullying in the nursing workplace hinders the delivery of quality healthcare and some choose to leave the profession.

Wech, Howard, & Autrey, (2020) present a grounded theory model of workplace bullying supported by a qualitative study on bullying at hospitals. It concludes that hierarchy in a hospital influences bullying behaviors and the response to these behaviors. Nurse Managers and physicians deprive nurses of basic employment benefits and demean nurses respectively and lower level staffs are more passive aggressive while bullying nurses. The structure of office and workplace determines the character of harassment and intimidation and therefore the status of employee also plays significant part in being harassed by other employee.. In case of the organization, it is negatively related to the work environment and the safety of both employees and patients. The bullying that takes place in an office adversely affects the operating efficiency of employee and harassed employee takes passive aggressive attitude towards those employees who harassed him/her and might be aggressive to other lower level employee.

Begum, Khan, & Shaheen, (2015) stated that development of preventive skills is a strong weapon to battle harassment at workplace. Safe working environment will also attract the nurses to have a comeback in their profession. Hoel, Notelaers, & Einarsen,(2009) developed the Negative Acts Questionnaire-Revised, which was administered in several nursing studies internationally. Rajbhandari, Subedi, & Kaphle, (2015) Health workers in Baglung district were exposed to some type of workplace violence of both physical and verbal violence. Taking no action was the common individual response towards work place violence reported in this research which results in low self reporting.

Askew, Schluter, Dick, Régo, Turner, & Wilkinson, (2012), conducted a research in Australia where doctors from various parts of the countries were taken for the data collection. The main purpose was to investigate the factors behind retention of the medical workforce. Among various independent variables, self reported bullying was also one of them. The finding showed that doctors who were bullied were less satisfied with their job and had reported taking sick leave more often than the other ones. Hence through the observation of the study it was concluded that workplace bullying hampers mental health of the victim as well as victim's work efficiency and performance decreases.

Table 2: Synopsis of related international literatures

Authors	Research	Published	Findings
Quine	Workplace Bullying in Nurses	2001	<ul style="list-style-type: none"> There is negative relationship between bullying and job satisfaction and positively related to levels of anxiety, depression and propensity to leave. Workplace bullying made the staff lose organizational trust.
Jackson, Clare, & Mannix	Who would want to be a nurse? Violence in the workplace - A factor in recruitment and retention.	2002	<ul style="list-style-type: none"> Nurses experience Workplace violence in different forms like aggression, harassment, bullying, intimidation and assault which comes from patients, relatives, other nurses and other professional groups
Nwaneri, Onoka, & Onoka,	Workplace bullying among nurses working in tertiary hospitals in Enugu, southeast Nigeria: Implications for health workers and job performance.	2017	<ul style="list-style-type: none"> Highly prevalent workplace bullying is from senior to junior nurses Effect on the health, work execution and retention rate of nurses working in tertiary clinics in Enugu
Ovayolu, Ovayolu, & Karadag,	Workplace bullying in nursing.	2014	<ul style="list-style-type: none"> Mostly, nurses are exposed to abuse and violence by coworkers and also to the violent acts of patients and their relatives. Nurses are up to three times more likely to be victims of violence than other categories of health personnel
Wech, Howard, & Autrey	Workplace bullying model: A qualitative study on bullying in hospitals	2020	<ul style="list-style-type: none"> Hierarchy in an hospital influences bullying behaviors and the response to these behaviors
Begum, Khan, & Shaheen	Sexual Harassment against Staff and Student Nurses in Tertiary Care Hospitals Peshawar K.P. Pakistan	2015	<ul style="list-style-type: none"> Development of preventive skills is a strong weapon to battle harassment at workplace. Safe working environment will also attract the nurses to have a comeback in their profession
Einarsen, Hoel and Notelaers	Measuring exposure to bullying and harassment at work: Validity, factor structure and psychometric properties of the Negative Acts Questionnaire-Revised	2009	Developed the Negative Acts Questionnaire-Revised

Askew, Schluter, Dick, Régo, Turner, & Wilkinson,	Bullying in the Australian medical workforce: Cross-sectional data from an Australian e-Cohort study	2012	Doctors who were bullied were less satisfied with their job and had reported taking sick leave more often than the other ones.
---	--	------	--

Methodology

The study followed descriptive research design because the study intended to assess the position of workplace bullying among nurses. Quantitative research approach has been used following the survey method. All the nurses working under Bagmati Province were considered as population. Only 332 nurses were selected as sample on the basis of the numbers considered by previous studies. Five point Likert scale questionnaire were developed and administered personally to the nurses on the basis of convenience. Data were analysed using percentage to know the overall bullying position in the workplace of nurses and Mean has been used to see the position of work related bullying and personal bullying.

Analysis and Results

Position of bullying among nurses

Table 3. Overall position of bullying

		Faced bullying or not?		Total
		Yes	No	
Nurses	Count	222	110	332
	% within gender	66.87%	33.13%	100.0%

Most of the nursing staffs are female in Nepal so female nursing staffs only were considered while collecting data. Overall position of workplace bullying among nurses is high in Nepal. 66.87 percent of nurses feel workplace bullying so they have job dissatisfaction and are in stress. Therefore they always provide service with irritation. 33.13 percent of the nurses do not face workplace bullying.

Level of different forms of bullying among nurses

Table 4. Level of different forms of bullying among nurses

Forms of Bullying Faced	Mean	Std. Dev.
Work related bullying	4.44	0.1385
Personal bullying	3.61	0.1517

Table 4 reveals that the majority of respondents agreed that they experienced work related bullying than personal bullying in their workplace. This means work-related bullying is more pronounced in Nepal's nursing sector than personal bullying in comparison but the position of personal bullying is also not low. So, all sorts of bullying is dominated to the Nepalese nursing sector. With this analysis it can be clearly said that workplace of nursing staff is full with ignoring, constantly defending behavior, projection of blame, stealing credit,

seduction, coercion, punishment, deceit, undue criticism, humiliation, gossiping, disrespecting and micromanagement.

Discussion

There different theories related workplace behavior which explain to bullying behavior too. Ecological systems framework, social learning, cognitive behavioral, attribution, lifestyles exposure and resilience frameworks are some theoretical foundation to understand the bullying behavior. This study confirms to all theories and behaviors and frameworks that the behavior of the people is created by some stimulus. This study confirms the high level of workplace bullying among nursing staffs working within Bagmati province of Nepal. The finding is consistent with all most all the studies conducted in the world (Ovayolu, Ovayolu & Karaday, 2014; Nwaneri, Onoka & Onoka, 2017; Wech, Howard & Autrey, 2020; Ghimire, Regmi & Shrestha, 2018; Acharya, 2020 and Rajbhandari, Subedi & Kaphle, 2015). It may be so because female employees are more abused in the workplace. Nurses are female. Another reason might be that the nursing staffs has to work in the public places with all genders so the chances of bullying might be high. Similarly mostly male managers and doctors also may have contributed to bullying in the workplace.

Conclusion and implication

It can be concluded that the overall workplace bullying among nurses working within Bagmati province of Nepal is high. Similarly the personal bullying like teasing, sexual harassment, and personal touch unnecessarily is comparatively less than the work related bullying like punishment, undue criticism, disrespecting in the work place, blaming, coercion and biasness in promotion.

This study may help to the hospitals and other similar organization who deploy nursing staffs to formulate the HR policy and HR strategies so as to retain the nursing staffs in the organizations. As well this study shows the work related bullying so the unions can give pressure to the management to develop HR policy with harder punishment to those who harass the nursing staffs. Further study can be conducted within the different industrial sectors like hotels, hospitality, and banking industries as this study considered to the nursing sector. Future research can be undertaken taking a sizable number of sample so as to test the bullying and employee-related theory robustly and help to develop more concrete remedial measures. Future research can have comparison with the bullying among the South Asian countries so as to know the bullying situation of nursing staffs in Nepal and nursing staffs of other south Asian countries and support to develop common measures for the correction in bullying practices by the superior level exerting power.

REFERENCES

- Acharya, U. (2020, January 10). *Sexual harassment at the workplace*. Retrieved from myrepublica:<https://myrepublica.nagariknetwork.com/news/sexual-harassment-at-the-workplace>
- Askew, D. A., Schluter, P. J., Dick, M. L., Régo, P. M., Turner, C., & Wilkinson, D. (2012). Bullying in the Australian medical workforce: Cross-sectional data from an Australian e-Cohort study. *Australian Health Review* 36 , 197-204.
- Begum, S., Khan, N., & Shaheen, A. (2015). Sexual Harassment against Staff and Student Nurses in Tertiary Care Hospitals Peshawar K.P. Pakistan. *International Journal of Innovation Research and Development* , 4 (1).
- Coyle, D., Shrestha, R., & Jung, C. (2014). *Women's insecurities and the workplace in Nepal: A study from Banke and Bara districts*.
- Einarsen, S., & Hoel, H. (2001). The Negative Acts Questionnaire: Development, validation and revision of a measure of bullying at work. *10th European congress on work and organisational psychology* .

- Einarsen, S., & Raknes, B. I. (1997). Harassment in the Workplace and the Victimization of Men. *Violence and Victims* , 12 (3), 247-263.
- Gaihre, S., Regmi, S., & Shrestha, P. (2018). Experience of sexual harassment among nursing students in clinical settings in private nursing colleges in Kathmandu valley. *Global Journal of Medicine and Public Health* .
- Hoel, H., Notelaers, G., & Einarsen, S. (2009). Measuring exposure to bullying and harassment at work: Validity, factor structure and psychometric properties of the Negative Acts Questionnaire-Revised. *Work and Stress* , 23 (1), 24-44.
- Jackson, D., Clare, J., & Mannix, J. (2002). Who would want to be a nurse? Violence in the workplace - A factor in recruitment and retention. *Journal of Nursing Management* , 10 (1), 13-20.
- Kohut, R. M. (2007). *The Complete Guide to Understanding, Controlling, and Stopping Bullies & Bullying at Work*. Atlantic Publishing Group, Inc.
- Matthiesen, S. B., & Einarsen, S. (2007). Perpetrators and Targets of Bullying at Work: Role Stress and Individual Differences. *Violence and Victims* , 22 (6).
- Nwaneri, A. C., Onoka, A. C., & Onoka, C. A. (2017). Workplace bullying among nurses working in tertiary hospitals in Enugu, southeast Nigeria: Implications for health workers and job performance. *Journal of Nursing Education and Practice* , 7 (2).
- O'Connell, P. J., Calvert, E., & Watson, D. (2007). Bullying in Workplace: Survey report. Dublin. *Department of Enterprise Trade and Employment. Economic and Social Research* .
- Ovayolu, O., Ovayolu, N., & Karadag, G. (2014). Workplace bullying in nursing. *Workplace Health Saf* , 62 (9), 370-374.
- Quine, L. (2001). Workplace Bullying in Nurses . *Journal of health psychology* , 73-84.
- Rajbhandari, R., Subedi, S., & Kaphle, H. P. (2015). Workplace Violence against Health Workers: A Cross-Sectional Study from Baglung District, Nepal. *International Journal of Health Sciences and Research* , 5 (2), 274-281.
- Rajbhandari, R., Subedi, S., & Kaphle, H. P. (2015). Workplace Violence against Health Workers: A Cross-Sectional Study from Baglung District, Nepal. *International Journal of Health Sciences and Research* , 5 (2).
- Shrestha, N. S. (2012). Workplace sexual Harassment in hospital. *Journal of Kathmandu Medical College* , 1 (2), 69-70.
- Tepper, B. J. (2000). Consequences of Abusive Supervision. *The Academy of Management Journal* , 178-190.
- Wech, B., Howard, J., & Autrey, P. (2020). Workplace bullying model: A qualitative study on bullying in hospitals. *Employee Responsibilities and Rights Journal* , 32 (2), 73-96.