Workplace mistreatment: Health, working environment and social and economic factors

Margaret Hodgins

Health Promotion Research Centre, National University of Ireland, Galway, Ireland; margaret.hodgins@nuigalway.ie

Received 5 November 2013; revised 11 December 2013; accepted 20 December 2013

Copyright © 2014 Margaret Hodgins. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited. In accordance of the Creative Commons Attribution License all Copyrights © 2014 are reserved for SCIRP and the owner of the intellectual property Margaret Hodgins. All Copyright © 2014 are guarded by law and by SCIRP as a guardian.

ABSTRACT

Objective: To explore patterns of workplace mistreatment, relationships with health and with selected workplace, economic and social factors in 34 countries. Methods: Secondary data analysis of the European Working Conditions Survey. Results: Patterns of ill treatment (across occupational groups, and sectors) were broadly consistent with smaller, less representative studies. Prevalence was lower than many studies but corresponds with estimates of serious mistreatment. Mistreatment increases the risk of both physical and mental ill health and is associated with a range of work environment factors. Mistreatment is more prevalent in countries with smaller gender gaps, better performance on the GINI index for income inequality and for countries with specific anti-bullying legislation. Conclusions: Mistreatment in work is complex, and interventions are required at the level of the organization. Implementation issues need to be addressed, as specific anti-bullying legislation does not appear to provide sufficient protection.

KEYWORDS

Workplace Bullying; Mistreatment

1. INTRODUCTION

The workplace has been identified as one of the priority settings for health promotion in the 21st century [1], due to its influence on the physical, psychosocial, and economic well-being of workers. Changing the conditions of work is one of three principles of action identified by the World Health Organization in order to lead global action on the social determinants of health [2].

How workers experience their workplace, or in particular how they are treated is an aspect of the working environment that potentially impacts on health and wellbeing. Workplace mistreatment is the focus of this paper. Drawing on archived data from the European Working Conditions Survey (EWCS), the paper aims to explore mistreatment across 34 countries, and in particular its association with health and well-being, aspects of the work environment and broader economic and social factors. The four variables in the survey that measure mistreatment; verbal abuse, threats and humiliation, bullying or harassment and physical violence, are employed in the analysis.

2. WORKPLACE MISTREATMENT

Workers can be exposed to treatment in their workplace, by clients, co-workers or managers that is unsought, unwanted, distressing and harmful to health. There are a number of forms of mistreatment, most of which have been researched independently of one another. These usually include bullying, physical violence, incivility and sexual harassment or discrimination. All these forms of mistreatment are measured in the EWCS, although this paper explores only bullying, physical violence and incivility, as the prevalence of sexual and racial mistreatment was considered too low for secondary analysis.

Workplace bullying is a complex phenomenon, best understood as caused by an interplay between individual, organizational and cultural factors. Numerous definitions have been offered in its name, although that employed by Einarsen and associates is now usually well-accepted; "the systematic mistreatment of a sub-ordinate, a colleague, or a superior, which if continued and long-lasting, may cause severe social, psychological, and psychosomatic problems in a target" [3]. Bullying is better construed a process, rather than one or more specific behaviours, and is usually characterized by the systemat-

ic intimidation and demoralization of a target. Bullying can be very subtle in nature, for example it may include unreasonable assignment of duties, applying impossible deadlines, not providing relevant information for tasks etc., in addition to what are termed person-related behaviours such as shouting, criticism, intimidation, threats, humiliation or spreading rumors [4,5]. The term has proved problematic in the literature [1,6,7], perhaps because of its early exposure in school settings, and the possibility that people associate it with "ganging up on" or beating up a selected target, which is, relative to individualized mistreatment, infrequent in workplace settings, but also because people have real difficulty disentangling bullying from what is perceived as "tough" management practices. Explicit and overt actions are usually not in dispute, however more subtle and covert dimensions may be viewed with less certainty and as a result go unreported.

Incivility in the workplace is defined as "low-intensity, deviant behaviour with ambiguous intent to harm the target, in violation of workplace norms for mutual respect" [8]. It includes rude, discourteous behaviour, for example belittling or humiliating other employees in public, interrupting and disregarding the opinions of others, swearing or making disparaging remarks. Incivility is usually generalized rather than personalized; many workers may be on the receiving end of rude or discourteous behavior. However, when unambiguous intentions and expectations to harm a target are present, incivility then overlaps with psychological aggression, or bullying [9]. The item measuring experience of verbal abuse is considered here to be an indicator of incivility.

Physical violence in the workplace refers to an incident or incidents where a worker is physically attacked or threatened in the workplace or the course of their work. Exposure to physical violence appears to be associated with situational factors, which in turn are linked to the type of work undertaken [10].

It is evident that there is considerable overlap between these terms, and in recent years there have been calls for conceptual clarity and synthesis, given the co-occurrence of exposure and the correspondence with regard to outcome [6,7,11]. The ECWS data therefore offer a unique opportunity to explore prevalence, patterns of exposure and risk, simultaneously across four forms of mistreatment and across 34 countries.

2.1. Impact on Health

The negative impact of incivility, bullying and physical violence on psychological and physical health is well established. Physical violence is associated with stress and reduced well-being as well as injury [10,12]. Incivility is associated with psychological distress [13,14], including burnout, anxiety, depression and hostility [15]

and diminished emotional well-being [16].

Early studies on workplace bullying in large scale surveys found associations between being bullied at work and a poor psychological health [17,18], a finding to be confirmed in many later studies. Indeed, this is one of the most consistent findings in the workplace bullying literature. Bullying has repeatedly been shown to be associated with higher levels of self-reported stress [19-23], depression [19,22,24] and with increased likelihood of taking psychoactive drugs [20,22]. Bullying has particularly negative effects for some targets, whom experience symptoms akin to post traumatic stress disorder [25,26] and even suicide [27]. Given the association with stress, it is not surprising to find that bullying ultimately impacts negatively on physical ill-health, with negative impacts on somatic problems and sleep [22,28] and on heart disease [29]. The uncontrollable nature of the process [30] and the personal directedness of it make it unique as a stressor and in the way it affects psychological wellbeing and functioning. The usual coping strategies for stress such as actively tackling the source do not work. Negative impacts have been recounted in respect of lowered self-confidence and self-worth, feelings of selfcontempt, guilt, isolation and vulnerability [20,31,32]. The words used by participants in qualitative studies are alarmingly graphic, for example; "The bully may have shredded your self-confidence" [33], "He has left me scarred" [34], "She has actually cracked my health" [31]. This gives voice to the claim that exposure to bullying in work is a more crippling problem for employees than all other kinds of work-related stress put together [34].

There is also evidence that those who witness the bullying of others suffer compromised health, not to the degree those who experience bullying directly do, but significantly more so than employees who are not exposed to bullying [20,22], demonstrating the scale of costs to health as well as organizational productivity.

2.2. Environmental Influences

Theoretical approaches to the study of bullying posit an interplay of individual, situational and cultural factors [1,10,35,36]. Less theoretical study has been undertaken in relation to violence and incivility. Individual contributors to bullying include vulnerabilities on the part of targets or aggressive tendencies on the part of perpetrators. This is a common view amongst lay people, that targets are people who are weak or unable to defend themselves. The traits of low social competence and poor assertiveness have been identified in studies of those targeted by bullying but these constitute a small subgroup of those targeted, implying that personal vulnerability does not constitute a general explanation for the

phenomenon [34]. Another common interpretation of workplace mistreatment is that it occurs "under pressure"; when various parties have heavy workloads, or have to meet tight deadlines, for example. Changes in the workplace, such as new management, cuts, re-structuring, and technological change have been identified associated with bullying although the effects may only be moderate [37], indicating that other factors are at work.

These work environment factors form a work context that is related, in turn, to broader social, cultural and economic factors. Reviewing the evidence, Di Martino *et al.* find that workplace violence is associated with levels of violent crime in society, economic change in the form of downsizing and restructuring, rapid social change and the rise of the informal economic sector [10]. However few studies have had the capacity to explore these factors, despite the not unreasonable assumption that factors such as economic development, legislative framework, cultural values, religion and technical development will impact on work environment and hence potentially workplace treatment.

The recent economic upheavals across the Eurozone have affected some States more than others, and given the relationship between downsizing and workplace bullying, it is possible that in countries where the economy has been particularly negatively affected, or where income inequality is high, all forms of workplace mistreatment could be more common. Similarly, given the observation that bullying is usually perpetrated by persons in positions of power over the target [3,5,7], inequality at a societal level may influence levels of mistreatment, although this is a relatively unexplored area. The role of power, although implicit in many discussions of workplace mistreatment is relatively under-researched in the literature [38].

Mistreatment, in most countries is addressed within health and safety legislation, within the general duty of care provision. However in recent years there has been a move to develop a more specific provision, in particular with regard to workplace bullying [39]. It is recognized that specific legislation may contribute to the prevention of bullying, insofar as it may provide an impetus for prevention at an organizational level [40,41] and regularize relief and compensation for targets [40]. A number of European countries have introduced specific legislation to prevent and protect workers from psychological violence, six of which participated in the EWCS. It is not known if bullying or mistreatment generally is reduced as a result of anti-bullying ordinance, although difficulties have been identified in relation to developing appropriate laws [5]. The ECWS [42] affords an opportunity to compare mistreatment rates in countries with and without anti-bullying legislation.

3. METHODS

The European Working Conditions surveys are undertaken by the European Foundation for the Improvement of Living and Working Conditions every five years. The 2010 survey includes 34 countries. Multi-stage, stratified, random sampling is employed, representative of those employed in each country. The 2010 survey yielded overall response rates of 44% [43]. Data are collected by interview, with respondents answering approximately 100 items. The mistreatment items considered here include single item measures of exposure to verbal abuse, threats and humiliating behaviour over the past month and experience of physical violence or bullying and harassment over the past 12 months. The analysis here also introduced a composite measure of exposure, using these four items to indicate any (bullying, incivility etc.) exposure vs. no exposure, terms "index of adverse behaviour".

Descriptive statistics were employed to explore levels of exposure for occupational groups and sectors. Occupational groups are based on the ISCO-08 categories, re-grouped to 5 categories. Similarly, the NACE Rev.2 sectoral classification was condensed to 10 categories for ease of use, as per the EWCS main study [43]. Exposure was considered for the public sector and the health sector by collapsing other responses categories accordingly, and for type of employment contract (indefinite, temporary etc.).

The EWCS contains items measuring exposure to 13 specific health conditions. Two new variableswere constructed as a "physical event" index (backache, muscular pains in upper limbs, lower limbs and headaches) and a mental event index (depression or anxiety, fatigue and insomnia) for the purposes of this study. Odds ratios were then employed to explore the relative odds of the health conditions, as outcomes of exposure to each of the mistreatment variables.

In terms of broader social, cultural and economic factors, exposure to mistreatmentwas compared for the EU 15 and all other countries. The Global Gender Gap Index (GGI), developed by the World Economic Forum as a way of capturing the magnitude and scope of gender-based disparities¹ [44] was employed as an indicator of equity and efficiency. The GGI for each country was identified and then the sample was dichotomized (above/below median) and the risk of mistreatment calculated for each grouping. The 34 countries were similarly divided, using the median, for the GINI Index, commonly used as a measure of inequality of income or wealth [45], and the risk of mistreatment considered for each group. Finally mistreatment risk was calculated for six countries with specific anti-bullying legislation (Belgium, France,

¹Based on indicators of economic participation and opportunity, educational attainment, health and survival and political empowerment.

Finland, Norway, Netherlands and Sweden) compared to countries without such ordinance.

4. RESULTS

The weighted data set, obtained from the UK data archive contained 43,816 cases, across 34 countries. The overall response rate was 44%, with some variation across countries. Country-level response rates are shown in **Table 1**. Response rates range from 31% (Spain) to 74% (Latvia).

For the purposes of this study, analysis was conducted on a sub sample of 35,142 employed respondents (*i.e.* selecting out self employed and other). Overall, 14.4% (n = 5053) of respondents experienced at least one adverse "event", *i.e.* either physical violence, verbal abuse, bullying/harassment or threats and humiliating behaviour. Of these, verbal abuse was the most common at 10.8%, followed by threats/humiliation and bullying at 5% and 4.2% respectively. Physical violence was experienced by less than 2% of the population. Female respondents were slightly but significantly more likely to experience mistreatment in the form of bullying and harassment (see **Table 1**) (OR = 1.71, CI = 1.05 - 1.30). The likelihood of experiencing any type of mistreatment declines with age.

Exposure to mistreatmentper occupational group and sector are reported. Occupational groups are based on the ISCO-08 categories, re-grouped to 5 categories. Similarly, the NACE Rev.2 sectoral classification was condensed to 10 categories for ease of use, as per the EWCS main study [43]. A comparison was also made between the health sector and all other sectors, and between public and non-public sector workers (see Table 2). Clerical, services and sales workers and professional, technical and associated professional workers appear to be consistently at greatest risk for all forms of mistreatment, while agricultural and craft workers are at lowest risk. Workers in the health sector are clearly and consistently most likley to report mistreatment, being almost twice as likley to experience verbal abuse, bullying and threats and almost six times more likely to experience physical violence (see Table 2). The transport sector and public administration and defense also report very high levels of mistreatment, with Agriculture, Fishing and Forestry consistently reporting lowest levels. The risk of mistreatment

is greater in the public sector than the private and NGO sector, and in the case of physical violence, over four times more likely (OR = 4.47, CI = 3.82 - 5.24). Employees on apprenticeships, fixed term or temporary contracts report slightly higher levels of each form of ill treatment than those on indefinite contracts or without contracts (see **Table 2**).

In relation to health problems, the health items and the two indices (physical event and mental event) were considered at outcomes in the context of risk of exposure to mistreatment (see Table 3), as was perceived degree to which work posed a risk to health and safety, self reported absenteeism and presenteeism. Those who experienced mistreatment were more likely to report physical and mental health problems. Of the forms of mistreatment bullying posed the greatest risk, with those who were bullied/harassed report being more than 3 times more likely to experience a physical (OR = 3.36, CI = 2.63 - 3.55) or mental health difficulty (OR = 3.36, CI = 3.00 - 3.77). Specifically, skin problems, headaches and eye strain, injuries, and insomnia were about twice as likely for those experiencing mistreatment, with anxiety/depression being three - four times more likely (see Table 3). Of the forms of mistreatment, exposure to bullying/harassment posed the greatest risk.

Those who experienced mistreatment were more likely to consider their health and safety to be at risk due to work, especially those who were threatened, humiliated, bullied/harassed or experienced physical violence. Those ill-treated and were also more likely to be sick from work and work while sick, with the risk of presenteeism being greater than absenteeism.

The EWCS contains a range of items considered to be indicators of psychosocial risk to health and well-being including poor leadership (see **Table 4**). Generally, those who were exposed to mistreatment were significantly less likely to experience a supportive work environment, as evidenced by being consulted about targets, having supportive colleagues, flexibility and clarity regarding role and expectation. The greatest risk was an environment perceived to be stressful, especially with regard to experiencing threats, humiliating behaviours and bullying/harassment. Risks were considerably greater for mistreatment when leadership was poor. Those mistreated

Table 1. Mistreatment levels.

	Index Adverse behaviour	Verbal Abuse	Threats & humiliating behaviours	Bullying or harassment	Physical Violence
ALL	5053	3784	1770	1404	661
	14.4%	10.8%	5%	4.2%	1.9%
Male	2589 13.6%	2055 10.8%	942 4.9%	739 3.9%	330 1.9%
Female	2464 15.3%	1729 10.8%	828 5.2%	725 4.5%	331 1.9%
	OR = 1.15	OR = 1, ns	OR = 1, ns	OR = 1.71	OR = 1.02, ns

Table 2. Ill-treatment by sector and ISCO occupational category.

	Index adverse behaviour	Verbal abuse	Threats and humiliating behaviours	Bullying or harassment	Physical Violen
Managers	263	207	103	87	24
	14.4%	11.3%	5.6%	4.7%	1.8%
Professional, Technical and Associated Professional	1564	1250	615	520	252
	14.4%	11.5%	5.7%	4.8%	2.3%
Clerical Service and Sales	1717	1375	702	585	280
	16.1%	12.9%	6.6%	5.5%	2.6%
Skilled Agri, Craft & Trades	414	332	131	146	27
	9.7%	7.8%	3.1%	3.4%	0.6%
Operators, Elementary, Armed Forces	897	701	346	310	74
	12.3%	9.6%	4.8%	4.3%	1%
Agri, Fish, Forestry	61	4	17	20	5
	8.2%	5.9%	2.3%	1.2%	0.7%
Industry	642	461	220	217	31
	10.4%	7.5%	3.6%	3.5%	0.5%
Construction	232	194	74	76	18
	10.5%	8.8%	3.4%	3.4%	0.8%
W/Sale, Retail, Food & Accomodation	1123	833	363	332	84
	16.2%	12%	5.2%	4.8%	1.2%
Transport	365	289	145	111	41
	19.3%	15.4%	7.7%	5.9%	2.2%
Financial	186	137	57	69	8
	13.7%	10.1%	4.2%	5.1%	0.6%
Public Administration & Defence	492	375	235	154	90
	17.3%	13.2%	8.3%	5.4%	3.2%
Education	576	433	194	153	57
	15.7%	11.9%	5.3%	4.2%	1.6%
Health	918	647	355	262	262
	24.4%	17.2%	9.5%	7.9%	7%
Other services	642	446	230	207	61
	12.3%	8.6%	4.4%	4%	1.2%
Health sector	878	647	355	296	262
	24.4%	17.2%	9.5%	7.9%	7%
All other sectors	4155	3207	1534	1337	394
	13.4%	10.4%	5%	4.3%	1.3%
	OR = 1.99	OR = 1.77	OR = 1.98	OR = 1.88	OR = 5.74
Public Sector	19.7%	15.2%	7.8%	5.5%	4.4%
All other (Private, joint PP, NGO)	9.3%	9.3%	4.1%	3.7%	1%
	OR = 1.70	OR = 1.76	OR = 1.96	OR = 1.51	OR = 4.47
Indefinite Contract	3790	3032	1456	1290	535
	14.2%	11.3%	5.4%	4.8%	2%
Fixed, temp or apprenticeship	762	598	304	266	90
	15.1%	11.8%	6%	5.2%	1.8%
No contract	298	235	133	89	34
	13.9%	7.7%	5.4%	2.9%	1.1%

NB: Shaded areas denote highest \square and 2^{nd} highest \square exposure.

Table 3. Self reported Health Problems and Mistreatment.

	Index adverse behaviour	Verbal abuse	Threats and humiliating behaviours	Bullying or harassment	Physical Violence
No event/any Physical ^a	8.5%/17.2% OR = 2.23	6.8%/12.8% OR = 2.10	2.7%/6.2% OR = 2.59	1.8%/5.3% OR = 3.36	1.1%/2.2% OR = 2.02
No event/any Mental event ^b	10.1%/20.2% OR = 2.25	7.7%/15% OR = 2.10	3.1%/7.7% OR = 2.59	2.2%/6.9% OR = 3.36	1.2%/2.7% OR = 2.26
Hearing problems	22% OR = 1.9	17% OR = 1.71	10.2% OR = 2.11	9.6% OR = 2.31	4.2% OR = 2.49
Skin problems	25.4% OR = 2.24	20.5% OR = 2.27	12.1% OR = 2.73	10.2% OR = 2.59	4.1% OR = 2.49
Backache	17.9% OR = 1.78	14% OR = 1.71	7.3% OR = 1.98	6.6% OR = 1.78	2.5% OR = 1.88
Muscular pains, shoulder neck upper limbs	18.1% OR = 1.73	21.4% OR = 1.69	7.5% OR = 2.03	6.8% OR = 2.30	2.4% OR = 1.71
Muscular pains in lower limbs	18.5% OR = 1.61	14.5% OR = 1.62	7.8% OR = 1.91	6.9% OR = 1.92	2.4% OR = 1.46
Headaches, eye strain	18.6% OR = 2.09	14.7% OR = 1.84	17.9% OR = 2.23	6.8% OR = 2.20	2.4% OR = 1.56
Stomach ache	23.1% OR = 2	18.2% OR = 2.01	10.5% OR = 2.42	9.2% OR = 2.43	3.2% OR = 1.95
Respiratory difficulties	$\frac{23\%}{OR} = 1.82$	17.6% OR = 1.79	10.6% OR = 2.23	9.5% OR = 2.30	3.9% OR = 2.32
Cardiovascular difficulties	21.1% OR = 1.74	17.2% OR = 1.74	9.1% OR = 1.82	7.9% OR = 1.82	2.5% OR = 1.35
Injuries	24.9% OR = 2.21	20.4% OR = 2.26	11.7% OR = 2.60	11.3% OR = 2.96	5% OR = 3.29
Anxiety or depression	29.9% OR = 3.60	23.6% OR = 2.95	15% OR = 4.01	13.3% OR = 4.08	3.8% OR = 2.39
Fatigue	18.9% OR = 2.06	14.9% OR = 1.93	8.2% OR = 2.45	7.2% OR = 2.60	2.4% OR = 1.62
Insomnia sleep difficulties	24.1% OR = 2.63	18.8% OR = 2.33	11.1% OR = 3.05	10.2% OR = 3.35	3.3% OR = 2.27
Yes my H&S is at risk because of my work/no	24.8%/11.1% OR = 2.69	19.3%/8.1% OR = 2.74	11.8%/3.2% OR = 3.65	9.2%/2.6% OR = 3.80	4.5%/1.1% OR = 4.42
Yes worked when sick /No did not (presenteesism)	21.8%/10.8% OR = 2.29	16.5%/8.1% OR = 2.24	8.7%/3.3% OR = 2.81	7%/2.8% OR = 2.65	2.9%/1.5% OR = 2.00
Yes took days(s)due to health problems/No (absenteeism)	17.8%/11.3% OR = 1.70	13.4%/8.4% OR = 1.69	6.5%/3.8% OR = 1.77	5.5%/3% OR = 1.91	2.3%/1.4% OR = 1.61

^aBackache, muscular pains in upper limbs, muscular pains in lower limbs, headaches, eyestrain; ^bDepression or anxiety, fatigue, insomnia; NB: Shaded areas denote highest ☐ and 2nd highest ☐ exposure.

Table 4. Psychosocial risks and mistreatment.

% reporting most or all of the time/sometimes, rarely or never	Index adverse behaviour	Verbal abuse	Threats and humiliating behaviours	Bullying or harassment	Physical Violence
My colleagues help and support me	13.6%/16.1% OR = 1.21	10.3%/11.9% OR = 1.71	4.5%/6.5% OR = 1.41	3.5%/5.7% OR = 1.66	2.1%/1.3% OR = 1.71
My manager helps and supports me	11.4%/18.3% OR = 1.73	8.6%/13.7% OR = 1.69	3.8%/6.7% OR = 1.84	2.6%/6.2% OR = 2.43	1.9%/1.8% OR = 1.01, ns
I am consulted before targets for me work are set	11.8%/16.3% OR = 1.46	8.8%/12.3% OR = 1.46	4%/5.8% OR = 1.46	2.9%/5.1% OR = 1.80	2%/1.8% OR = 1.09, ns
I can take a break when I wish	11.8%/16.2% OR = 1.43	8.6%/12.3% OR = 1.49	4%/5.8% OR = 1.48	3.2%/4.8% OR = 1.54	1.5%/2.1% OR = 1.43
I have enough time to get the job done	11.9%/20.9% OR = 1.95	9%/15.6% OR = 1.87	3.7%/8.7% OR = 2.49	3%/7.3% OR = 2.59	1.4%/3% OR = 2.09
My job gives me the feeling of a job well done	12.3%/22.5% OR = 2.06	9.2%/17.3% OR = 2.06	4.1%/8.9% OR = 2.31	3.3%/7.7% OR = 2.52	1.8%/2.2% OR = 1.24
I know what is expected of me at work	14.2%/16.1% OR = 1.15	10.7%/11.5% OR = 1.08, ns	4.9%/7.2% OR = 1.50	4.1%/4.8% OR = 01.18 , ns	1.9%/1.1% OR = 1.82
I experience stress at work	24.2%/10.6% OR = 2.68	18.9%/7.7% OR = 2.77	10.6%/2.9% OR = 3.94	8.1%/2.7% OR = 3.17	3.4%/1.3% OR = 2.74
I can influence decisions that are important in my work	13.8%/14.7% OR = 1.08, ns	10.6%/10.9% OR = 1.02, ns	5.2%/5% OR = 1.03 , ns	3.7%/4.4% OR = 1.19	2.5%/1.6% OR = 1.55
My immediate manager					
provides me with feedback on my work	13.8%/16.6% OR = 1.24	10.5%/12.2% OR = 1.18	4.8%/6.1% OR = 1.29	3.8%/5.4% OR = 1.43	2%/1.7% OR = 1.15 ns
respects me as a person	12.8%/37.1% OR = 4.01	9.6%/27.8% OR = 3.63	4%/20.9% OR = 6.32	3.1%/20.2% OR = 7.98	1.8%/3.2% OR = 1.82
is good at planning and organizing the work	12.2%/25.4% OR = 2.45	9.3%/18.3% OR = 2.18	3.9%/10.9% OR = 3.01	3%/9.9% OR = 3.60	1.8%/2.4% OR = 1.29
is good at resolving conflicts	11.2%/28.9% OR = 3.22	8.4%/12.7% OR = 3	3.8%/12.6% OR = 3.98	2.5%/11.8% OR = 5.18	1.7%/2.9% 1.66%
encourages me to participate in important decisions	11.8%/19.5% OR = 1.80	8.5%/15.3% OR = 1.94	3.8%/7.6% OR = 2.05	2.8%/6.7% OR = 2.49	2%/1.6% OR = 1.26

were significantly and substantially less likely to think they were treated respectfully by their manager, or that their manager was good at planning or at resolving conflicts (see **Table 4**).

Those reporting being bullied were 2 or 3 times less likely to feel encouraged by their manager to participate in important decisions or that their manager is good at planning and organization. This group were five times less likely to feel their manager could resolve conflicts (OR = 5.18, CI = 4.65 - 5.79) and almost 8 times less likely to be respected as a person (OR = 7.98, CI = 7.01 - 9.08). Of the forms of mistreatment, those reporting being threatened, humiliated bullied or harassed were at greatest risk. The risk of experiencing poor leadership was lowest for those reporting physical violence (see **Table 4**).

With regard to the risk of mistreatment and broader economic and cultural factors, increased risk is apparent (see **Table 5**). Those in the EU 15 were at greater risk than other countries for all forms of mistreatment, and

almost three times greater for bullying/harassment (OR = 2.74, CI = 2.33 - 3.21). Income inequality, at population level, posed a small but significant risk for verbal abuse and bullying/harassment, while equality and equity posed a greater risk, again particularly for bullying/harassment and physical violence. Finally, reported experience of bullying and harassment was two and half times higher in the two countries where anti-bullying legislation exists (OR = 2.49, CI = 2.20 - 2.81), while the other forms of mistreatment were marginally more likely in these countries (see **Table 5**).

5. DISCUSSION

The EWCS data indicate that of the three forms of mistreatment at work, verbal abuse is the most common at 10.8%, followed by bullying at 4.2%. Physical violence is the least common, experienced by only 1.9%. These exposures are lower than other recorded exposure to physical violence, incivility, and bullying, although do

Table 5. Cultural and economic factors and mistreatment.

	Index adverse behaviour	Verbal abuse	Threats and humiliating behaviours	Bullying or harassment	Physical Violence
EU 15	15.7%	11.6%	5.5%	5%	2.1%
All other countries	10.8%	8.5%	3.7%	1.9%	1.1%
	OR = 1.54	OR = 1.41	OR = 1.52	OR = 2.74	OR = 1.97
GINI Index ^a above Median (Income inequality)	12.9%	9.6%	5%	4%	1.8%
GINI Index below Median (Income equality)	17.3%	13.1%	5.1%	4.6%	1.9%
	OR = 1.41	OR = 1.42	OR = 1 ns	OR = 1.17	OR = 1.05 ns
Global Gender Gap Index ^b above median (Equality & Equity)	16.4%	12.3%	5.8%	5.2%	2.3%
Global Gender Gap Index below Median (Inequality & Inequity)	8.9%	6.7%	3%	1.5%	0.7%
	OR = 1.97	OR = 1.95	OR = 1.95	OR $= 3.60$	OR = 3.48
Countries (n = 6) with specific ordinance	18.6%	13%	6.7%	8.3%	3%
All other countries	13.8%	10.2%	4.6%	3.1%	1.6%
	OR = 1.42	OR = 1.31	OR = 1.49	OR = 2.80	OR = 1.89

not map identically onto the constructs measured elsewhere. Verbal abuse for example was used here as an indicator of incivility. However estimates of incivility are usually based on several items including teasing, criticism, or being put down or excluded [6,14], and exposure estimates converge around one fifth of workers; e.g. 23% [14], 17% [46] and 20% [8]. Similarly, other studies have employed longer scales measuring physical violence; Fevre et al., reporting a level of 5% used a two item measure [6], Schacht et al., a level of 6% using a four item measure [16], and Sprigg et al. [46] a level of 3.7% using an 8 item measure. It may be the case that these longer, more specific measures allow respondents report exposure to behaviours that they would not immediately or without prompting, class as violence, and hence yield higher estimates.

Bullying/harassment was reported by 4.2% of respondents and threats and humiliation by 5%. Threats and humiliation are usually considered part of the bullying experience, although the responses cannot be combined here, given the likely overlap. Wide variation in prevalence estimates for workplace bullying has been at least partly explained by methodology. Estimates are lowest when the method employed requires respondents to indicate if they have been bullied in a direct question (i.e. self label), a direct question with a definition of bullying (10.6%), higher with behavioural checklists (14.7%) and highest again with self-labeling where no definition is supplied (18%) [47], implying that the exposure recorded in the EWCS, by either item, is particularly low. However the method employed here offered only a yes/no response option, while most other studies offer a 4 or 5-point frequency scale. It may be that respondents in the ECWS only responded in the positive if they were certain about bullying having taken place, and there is evidence that people are far from certain when it comes to

classifying what is and is not workplace bullying [5,6,36, 48]. The estimates here in fact do correspond with those for serious bullying (4% - 5%) compiled by Zapf *et al.* [49].

The various patterns of mistreatment reported in the EWCS for gender, age, sector and occupation correspond with those reported in many other studies, lending validity to the findings. Mistreatment is, when measured in large representative samples, similar for men and women [6,48-50], and more common in the public sector [49, 51]. The high risk associated with the health sector for all mistreatment but particularly for physical violence is also a common finding [6,10,51].

Similarly the risk of poorer health reinforces previous studies. What is of note is the extent of the phenomenon; each form of mistreatment increased the risk of every health condition measured. Health conditions more traditionally associated with occupational risk (injuries, gastric, hearing and skin problems) were over twice as likely for bullying, threats and abuse as well as physical violence. Overall however depression, anxiety, fatigue and insomnia were three to four times more likely, underscoring the way in which mistreatment effects self esteem and self worth. Addressing mistreatment in the workplace could offer an important focus for reducing depression and improving mental health at work at work. Problems associated with mental health are the fourth most frequent cause of incapacity for work [52] and mental health promotion in the workplace has been highlighted as a priority are by both the World Health Organization [1] and the European Commission [53].

That those who experience mistreatment perceive their health and safety to be at risk because of work comes as no surprise, however the fact that presenteeism is more likely than absenteeism is of note. This adds to the emerging picture of victimization and stress for those who are badly treated. They may be less inclined to present stigmatized conditions such as depression, anxiety and insomnia to managers or occupational health specialists, fearing that it may add to perceptions of personal weakness or vulnerability. It is also possible that not being given leave when struggling with illness may be part of the experience of those ill-treated, a possibility uncovered by Fevre *et al.* in their survey of mistreatment in UK workplaces [6].

The influence of the working environment has been explored extensively in relation to workplace bullying, although somewhat less so for incivility and physical violence. A criticism of much of the work undertaken is that it is limited to associations, rather than within longitudinal studies, where cause and effect can be demonstrated. The ECWS data reinforce previous findings of association between bully/harassment and an unsupportive, inflexible, pressurized work environment, but also demonstrate that these associations stretch across each of the forms of mistreatment.

The increased risk for stress, particularly for threats and humiliation, is again unsurprising, as poor social relationships have been demonstrated to be source of stress at work [54,55]. However as Hogh *et al.* point out, bullying and abuse are no ordinary stressors, as targets often find that they cannot apply emotion or problem-focus coping. As such organization-wide approaches to stress reduction, such as the Management Standards Approach [56] may be useful to consider.

The risks associated with poor leadership items were higher, with those mistreated being between 4 and 6 times less likely to think their immediate manager treats them with respect, is good at planning or at resolving conflicts. This suggests that organizational-level interventions have greater potential in addressing mistreatment than individual, and that leadership in particular could provide a focus for such interventions. The data add to the emerging evidence that bullying is more commonly experienced by workers from those higher in the hierarchy [57,58], and are consistent with research on the role of destructive leadership in bullying and harassment [59].

The data highlight the possibility that broader, structural factors also play a role in workplace mistreatment. Mistreatment and in particular bullying, is often viewed as dysfunctional interpersonal aggressive behaviour, analyzed and addressed at the level of individual behaviour. Even when organizational factors are implicated, the perception can be that mistreatment is a feature of unstable organizations, with predominantly unskilled workers. This construction of mistreatment was questioned by Fevre et al, based on their findings; "there is no odour of the backstreet about unfair treatment. We find it, in fact, in modernity's shop window" (p. 59) [6]. The data here

demonstrate that the risk of all four forms of mistreatment is greater in the EU 15 countries than later accession countries, and for bullying/harassment and verbal abuse, in countries above the median GINI index. It is interesting that gender equality, at the population level, does not seem to contribute to lowered chances of mistreatment, in fact that both bullying and physical violence are more than three times more likely in the countries that score above the median for the Gender Gap index. The countries, which, at the time of data collection, had anti-bullying legislation, had higher risks.

Taken together, these findings could be interpreted as a greater tendency in stronger economies, or in more egalitarian societies to identify and report mistreatment. The existence of ordinance could in fact raise awareness and expectation, leading to higher levels of self reported victimization. In this context it is worth noting that some intervention studies that focus on negative behaviour awareness classes, find higher rates of bullying [60,61] although results of the few interventions that exist are quite variable. Consistent with this is the finding, from a qualitative study conducted in Sweden, of poor implementation of legislation at an organizational level, and insufficient willingness by employers to acknowledge their role in prevention [41].

6. CONCLUSIONS

The analysis of the mistreatment data from the EWCS study demonstrates that, although single item measures, the reported patterns of mistreatment (across occupational groups, sectors etc.,) are broadly consistent with other studies. Although prevalence is lower than many studies, especially given the use of the self-labeling method, it does correspond with estimates of serious mistreatment.

The data in the ECWS add to the accumulating evidence that mistreatment increases the risks of a range of illnesses and health conditions, and that the risk of mental health being compromised is particularly high. Mistreatment is also seen to be associated with negative features of the working environment and thus organizational intervention, for example, the Management Standards Approach offers opportunities for the development of intervention. There are very few evaluated interventions addressing mistreatment but the data show here that those directed at support and leadership may be fruitful route to follow.

The data demonstrate that mistreatment is a complex phenomenon. The fact that is more common in the stronger and more equitable economies indicates that structure and expectations may play a role in determining self reported exposure, and also that equity at the level of the population may not translate into specific protections for employees at the organizational level.

REFERENCES

- World Health Organization (2010) Healthy Workplaces: A model for action. World Health Organization, Geneva.
- [2] World Health Organization (2008) Closing the gap in a generation: Health action on the social determinants of health. World Health Organization, Geneva.
- [3] Einarsen, S., Hoel, H., Zapf, D. and Cooper, C. (2011) The concept of bullying and harassment at work: The European tradition. In: Einarsen, S., Hoel, H., Zapf, D., and Cooper, C., Eds., *Bullying and Harassment in the Workplace*, Taylor and Francis, London, pp. 3-40.
- [4] Einarsen, S., Hoel, H. and Notelaers, G., (2009) Measuring exposure to bullying and harassment at work: Validity, factor structure and psychometric properties of the Negative Acts Questionnaire-Revised. Work & Stress, 23, 24-44. http://dx.doi.org/10.1080/02678370902815673
- [5] Caponecchia, C. and Wyatt, A. (2011) Preventing workplace bullying. Routledge, Taylor and Francis Group, London.
- [6] Fevre, R., Lewis, D., Robinson, A. and Jones, T. (2012) Trouble at work. Bloomsbury, London.
- [7] Keashley, J. and Jagatic, K. (2011) North American perspectives on hostile behaviours and bullying at work. In: Einarsen, S., Hoel, H., Zapf, D. and Cooper, C., Eds., Bullying and Harassment in the Workplace. Taylor and Francis, London, pp. 41-71.
- [8] Pearson, C. M. and Porath, C.L. (2006) On the nature, consequences and remedies of workplace incivility: No time for "nice"? Think again. *Academy of Management Executive*, **19**, 7-18.
- [9] Lim, S. and Cortina, L.M. (2005) Interpersonal mistreatment in the workplace: The interface and impact of general incivility and sexual harassment. *Journal of Applied Psychology*, 90, 483-496. http://dx.doi.org/10.1037/0021-9010.90.3.483
- [10] DiMartino., V., Hoel, H. and Cooper, C. (2003) Preventing violence and Harassment in the workplace. European Foundation of Living and Working Conditions, Dublin.
- [11] Hershcovis, M.S. (2010) "Incivility, social undermining, bullying...oh my!": A call to reconcile constructs within workplace aggression research. *Journal Organisational Behaviour*, **32**, 499-519.
- [12] Budd, T. (1999) Violence at work: Findings from the British crime survey. Home Office, London.
- [13] Leiter, M. P., Laschinger, K.K.S., Day, A. and Oore, D.G. (2011) The impact of civility interventions on employee social behaviour, distress and attitudes. *Journal of Applied Psychology*, 96, 1258-1274. http://dx.doi.org/10.1037/a0024442
- [14] Cortina, L.M., Magley, V.J., Williams, J.H. and Langhout, R.D. (2001) Incivility in the Workplace: Incidence and Impact. *Journal of Occupational Health Psychology*, 6, 64-80. http://dx.doi.org/10.1037/1076-8998.6.1.64
- [15] Shannon, H.S. (2007) Workplace incivility and other

- work factors: Effects on psychological distress and health, final project report. http://www.cupw.ca/multimedia/website/publication/Engl
- http://www.cupw.ca/multimedia/website/publication/English/PDF/2007/mcmaster_final_en.pdf
- [16] Schat, A.C.H. and Kelloway, E.K. (2005) Effects of perceived control on the outcomes of workplace aggression and violence. *Journal Occupational Health Psychology*, 5, 386-402. http://dx.doi.org/10.1037/1076-8998.5.3.386
- [17] Zapf, D. Knorz, C.andKulla, M. (1996) On the relationship between mobbing factors, job content, social work environment and health outcomes. *European Journal of Work and Organisational Psychology*, 5, 215-337. http://dx.doi.org/10.1080/13594329608414856
- [18] Einarsen, S. and Raknes, B.I. (1997) Harassment in the workplace and the victimization of men. *Violence*, 12, 247-263.
- [19] Quine, L. (1999) Workplace bullying in NHS community trust: Staff questionnaire survey. *British Medical Journal*, 318, 228-232. http://dx.doi.org/10.1136/bmi.318.7178.228
- [20] Vartia, M. (2001) Consequences of workplace bullying with respect to the well-being of targets and the observers of bullying. Scandanavian Journal of Work Environment and Health, 27, 63-69. http://dx.doi.org/10.5271/sjweh.588
- [21] Mikkelsen, E.G. and Einarsen, S. (2002) Relationship between exposure to bullying at work and psychological and psychosomatic health complaints: The role of state negative affect and general self-efficacy. *Scandanavian Journal of Work*, 435, 397-405.
- [22] Namie, G. (2003) Workplace bullying: Escalated incivility. Ivey Business Journal.
- [23] Mikkelsen, G., Hogh, A. and Puggaard, L.B. (2011) Prevention of Bullying and Conflicts at work. *International Journal of Workplace Health Management*, 4, 84-100. http://dx.doi.org/10.1108/17538351111118617
- [24] Niedhammer, I., David, S. and Degionni, S. (2006) Association between workplace bullying and depressive symptoms in the French working population *Journal of Psychosomatic Research*, 61, 251-259. http://dx.doi.org/10.1016/j.jpsychores.2006.03.051
- [25] Mattiesen, S., and Einarsen, S. (2004) Psychiatric distress and symptoms of PTSD among victims of bullying at work. *British Journal of Guidance and Counselling*, **32**, 335-356. http://dx.doi.org/10.1080/03069880410001723558
- [26] Tehrani, N. (2004) Bullying: A source of chronic PTSD? British Journal of Guidance and Counselling, 32, 358-366. http://dx.doi.org/10.1080/03069880410001727567
- [27] Balducci, C., Fraccaroli, F., and Schaufeli, W.B. (2011) Workplace bullying and its relation with work characteristics, personality, and post-traumatic stress symptoms: An integrated model. *Anxiety*, *Stress & Coping*, 24, 499-513. http://dx.doi.org/10.1080/10615806.2011.555533
- [28] O'Moore, M., Seigne, E., McGuire, L. and Smith, M. (1998) Victims of workplace bullying in Ireland. *Irish Journal of Psychology*, 19, 345-357. http://dx.doi.org/10.1080/03033910.1998.10558195

- [29] Kivimaki, M., Virtanen, M., Vartia, M., Elovainio, M., Vahtera, J. and Keltikangas-Ja rvinen, L. (2009) Workplace bullying and the risk of cardiovascular disease and depression. *Occupational Environonmental Medicine*, 60, 779-783.
- [30] Hogh, A., Mikkelsen, E.G., and Hansen, A.M. (2011) Individual consequences of Workplace bullying/mobbing. In: Einarsen, S., Hoel, H., Zapf, D. and Cooper, C., Eds., Bullying and Harassment in the Workplace, Taylor and Francis, London, pp. 107-128.
- [31] Hallberg, L.R.M. and Strandmark, M.K. (2006) Health consequences of workplace bullying: Experiences from the perspective of employees in the public service sector. *International Journal of Qualitative Studies on Health & Well-Being*, 1, 109-119. http://dx.doi.org/10.1080/17482620600555664
- [32] Lewis, S.E. (2006) Recognition of workplace bullying: A qualitative study of women targets in the public sector. *Journal of Community & Applied Social Psychology*, 16, 119-135. http://dx.doi.org/10.1002/casp.850
- [33] Hodgins, M. (2006) Awareness and perceptions of staff of the Anti-Bullying policy in a public sector organization. 5th International Conference: Workplace Bullying—The Way Forward, Trinity College, Dublin.
- [34] Zapf, D., Einarsen, S., Hoel, H. and Vartia, M. (2003) Empirical findings on bullying in the workplace. In: Einarsen, S., Hoel, H., Zapf, D. and Cooper, C., Eds., Bullying and Emotional Abuse in the Workplace, Taylor and Francis, London, pp. 103-126.
- [35] Salin, D. (2003) Ways of explaining workplace bullying: A review of enabling, motivating and precipitating structures and processes in the work environment. *Human Relations*, 56, 1213-1231. http://dx.doi.org/10.1177/00187267035610003
- [36] Omari, M. (2007) Towards dignity and respect at work: An exploration of bullying in the public sector. Dissertation submitted School of Management, Edith Cowan University, Perth.
- [37] Salins, D. and Hoel, H. (2011) Organisational causes of workplace bullying. In: Einarsen, S., Hoel, D., Zapf, D. and Cooper, C., Eds., *Bullying and Harassment in the Workplace*, Taylor and Francis, London, pp. 227-244.
- [38] Hodgins, M. and Griffith, J. (2011) A whole systems approach to working in settings. In: Scriven, A. and Hodgins, M., Eds., *Health Promotion Settings. Principles and Practice*, Sage, London, pp. 35-49.
- [39] Pinkos Cobb, E. (2012) Workplace bullying: A global health and safety issue.

 http://ilera2012.wharton.upenn.edu/refereedpapers/cobbel-len.pdf
- [40] Yamada, D. (2011) Workplace bullying and the law: Towards a transnational consensus? In: Einarsen, S., Hoel, D., Zapf, D. and Cooper, C., Eds., *Bullying and Harassment in the Workplace*, Taylor and Francis, London, pp. 469-484.
- [41] Hoel, H. (2006) The limits of regulations: Assessing the effectiveness of the Swedish regulations against workplace bullying. *The 5th International Conference on Bullying*

- "The Way Forward", Trinity College, Dublin, 15-17 June 2006.
- [42] Eurofound. (2007) Fourth European working conditions survey. European Foundation for the Improvement of Living and Working Conditions, Dublin.
- [43] Eurofound. (2012) Fifth European working conditions survey. European Foundation for the Improvement of Living and Working Conditions, Dublin.
- [44] Hausmann, R., Tyson, L.D. and Zahidi, S. (2011) The global gender gap report. World Economic Forum. http://www3.weforum.org/docs/WEF_GenderGap_Report2011.pdf
- [45] Central Intelligence Agency (2011) The world fact book. https://www.cia.gov/library/publications/the-world-factbo ok/index.html
- [46] Sprigg, C.A., Martin, A., Niven, K. and Armitage, C.J. (2008) Unacceptable behaviour, health and well-being at work. A cross-lagged longitudinal study. IOSH research Report 10.1.
- [47] Neilsen, M.B., Notelaers, G. and Einarsen, S. (2011) Measuring exposure to workplace bullying. In: Einarsen, S., Hoel, D., Zapf, D. and Cooper, C., Eds., *Bullying and Harassment in the Workplace*, Taylor and Francis, London, pp. 149-174.
- [48] Lutgen-Sandvik, P., Tracy, S.J. and Alberts, J.K. (2007) Burned by bullying in the American workplace: Prevalence, perception, degree and impact. *Journal of Management Studies*, 44, 837-862. http://dx.doi.org/10.1111/j.1467-6486.2007.00715.x
- [49] Zapf, D., Escartin, J., Einarsen, S., Hoel, H. and Vartia, M. (2011) Empirical findings on prevalence and risk groups of bullying in the workplace. In: Einarsen, S., Hoel, D., Zapf, D. and Cooper, C., Eds., *Bullying and Harassment* in the Workplace, Taylor and Francis, London, pp. 75-106.
- [50] Salins, D. The significance of gender for work-place bullying.
 http://www.hanken.fi/staff/salin/blog/files/keynote_salin.pdf
- [51] O'Connell, P., Calvert, E. and Watson, D. (2007) Bullying in the workplace: Survey reports. The Economic and Social Research Institute, Dublin.
- [52] European Agency for Safety and Health at Work. (2011) Mental Health Promotion: A good practice report. EU-OSHA, Luxembourg.
- [53] McDaid, D. (2008) Mental health in workplace settings, consensus paper. European Commission, Directorate General for Health and Consumers, Luxembourg.
- [54] World Health Organization (2010) Mental Health Policies and programmes in the workplace. WHO, Geneva.
- [55] Mackay, C.J., Cousins, R., Kelly, P.J., Lee, S. and Mc-Caig, R. (2004) Management standards and work-related stress in the UK: Policy background and science. Work and Stress, 18, 91-112. http://dx.doi.org/10.1080/02678370410001727474
- [56] HSE Management Standards Approach (2009) How to tackle work-related stress. Health and Safety Executive. http://www.hse.gov.uk/pubns/indg430.pdf

- [57] Einarsen, S., Hoel, H., Zapf, D. and Cooper, C. (2003) The concept of bullying at work. In: Einarsen, S., Hoel, H., Zapf, D. and Cooper, C., Eds., *Bullying and Emotional Abuse in the Workplace*, Taylor and Francis, London, pp. 3-32.
- [58] Namie, G. (2007) Workplace bullying institute survey. http://www.workplacebullying.org/wbiresearch/wbi-2007
- [59] Einarsen, S., Assland, M.S. and Skogsstad, A. (2007) Destructive leadership behaviour: A definition and conceptual model. *The Leadership Quarterly*, 18, 207-216.

- http://dx.doi.org/10.1016/j.leaqua.2007.03.002
- [60] Chipps, E. and McRury, M. (2012) The development of an educational Intervention to address workplace bullying. *Journal for Nurses in Staff Development*, 28, 94-98. http://dx.doi.org/10.1097/NND.0b013e31825514bb
- [61] Hoel, H. and Giga, S. (2006) Destructive interpersonal conflict in the workplace. The effectiveness of management interventions. University of Manchester Institute of Science and Technology (UMIST), Manchester.