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Mobbing at Workplaces and the Mental Health Effects on Employees

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1. Introduction

Nowadays, rapid technological changes in the workplace, heavy workloads, role conflicts, problems relating to career development, senior–subordinate relations, undefined borders of the working area, etc. lead to a number of problems in the work environment. Such changes may be reflected in the mental health of an individual either positively or negatively. Any situation perceived by the brain and evaluated to be a danger triggers the stress reaction. WHO (Leka et al., 2003) mentioned that stress is the leading cause adversely affecting the mental health of individuals in business life. Stress in the workplace may affect individuals differently. This effect may be witnessed either as psychological violence or in other ways (e.g., smoking, alcohol, sexual abuse, etc.).

A safe, peaceful work environment increases the productivity of the employees and the efficiency of the establishment. Although, nowadays, work provides men and women a place, status, economic power in the society, it also brings certain negative physiological and psychosocial factors, among which mobbing can create undesired results with the heavy individual, organizational and social damages it creates. The fact that discouragement creates more intense and destructive effects than all the stress sources requires considering the process with a special sensitivity (Gül, 2009; Agervold, 2009; Lawa, R., et al., 2011).

Discussions on whether the basic factor in the case of mobbing is the "person with bad personality" or the organizational and social structure, what feeds mobbing must be made. It is very important to determine the reasons behind this social exclusion process leading people to resignation, depressive and obsessive behavior, loss of their health and even suicides, and to understand this psycho-violence spiral, to determine the factors affecting the process. Research must be focused on the conditions leading to the occurrence of mobbing and the determination of the organization's social structure.

In this section, the effects of mobbing on mental health, the personality characteristics of persons faced with mobbing and those who apply mobbing will be analyzed. In short, through discussions on the eventual factors providing a basis for mobbing, the aim is to ensure the development of awareness in workplaces and contribute to the reduction of the risk of realization of such behavior and its frequency.

2. Mobbing

2.1 Frequency

Psychological intimidation leads to a number of inconveniences both for the victim and the entity (Nielsen, M. B. et al., 2010; Ortega, A. et al; 2009). Problems suffered by the employer are essentially of an economic nature. Besides economic losses, severe social outcomes in organizational terms become inevitable as well. The victims, on the other hand, suffer physical or psychological disorders. It should be taken into consideration that attitudes of psychological intimidation in workplaces may increase atrociously day by day particularly nowadays when the effects of the global crisis are being experienced more severely. This situation highlights the importance of the issue once again. In this context, 73.3% of the respondents in a study conducted among finance sector employees in Istanbul/Turkey by Gül (Gül et al., 2010) reported that they had been exposed to psychological intimidation. The high rate of psychological intimidation in this research may be attributed to the respondents comprised of private banking employees and mid-level executives. Rates obtained in other research that has been conducted in Turkey are as follows: 55% of 877 respondents in the research conducted among public sector employees working in health, education and safety fields in Bursa by Bilgel (Bilgel et al., 2006) reported that they had been exposed to psychological intimidation while 47% reported that they witnessed their workmates being exposed to the same. In similar research conducted by Yıldız (Yıldız et al., 2008) among private sector employees working in the education and health fields, 47.5% of the respondents defined themselves as having been exposed to psychological intimidation, and no meaningful difference was observed between males and females in terms of exposure to psychological intimidation. Yılmaz (Yılmaz et al., 2008), reported after a study conducted in state hospitals that 29.8% of 121 respondents had become victims of psychological intimidation. Kök (Kök, 2006) discovered in a survey conducted among 189 employees working in the private and public banking sectors that the rate of exposure to psychological intimidation was higher in private banks than public banks. A research conducted by Yıldırım (Yıldırım &Yıldırım, 2007) among 505 payroll nurses revealed that the rate of exposure to psychological intimidation was higher among the nurses working in private hospitals than those working in public hospitals, where the overall rate was found to be 86.5%. In a study conducted in Portugal (Ferrinho et al., 2003) on the health sector, on average 60% of 218 respondents working in a health center were found to have been exposed to psychological intimidation, whereas it was 38% among those 1100 employed person in a healthcare foundation (Quine, 1999).

2.2 Conceptual framework

Mobbing can be defined as a systematic creation of opposition to an individual, exercise of pressure, suffocation, frightening, emotional attack (Leka & Jain, et al., 2010). Moral and material losses in this process containing a torture which begins insidiously and develops rapidly are very high. The fact that mobbing activities, which spread all over the world, targets honest, reliable, devoted and hard-working persons, and time and productivity costs reach incredible dimensions. Creative persons in particular are more prone to be subject to mobbing, as the new ideas they develop disturb others. In most cases, victims are chosen due to the fact that they create a threat for persons at higher positions. If we make a classification, those who resort to mobbing are:

Antipathic persons: They are excessively controlling, afraid and nervous. They always want to be powerful. They do not refrain from malicious and fraudulent actions.

Narcissist persons: They are considered as social-handicapped clinically and they are persons who use power to keep persons they fear under their control, who always see themselves as superior to other persons, which is a defect of behavior.

Egocentric under threat: If the discouragement actor has an inflated ego, he/she can display a strong reaction when faced with an undesirable situation, because his/her inflated ego conception bears the potential to increase his/her reaction coefficient.

Attempt to make its own norms organization policies: Those who take on psycho-terror and conceive discouragement as a policy, opt for obedience instead of initiative, in order to take others under control, discipline instead of autonomous behavior, fear instead of motivation. They continuously remind rules, establish new rules.

Prejudiced and emotional: The behavior of discouragement actors has no rational basis and explanation.

Those who exposed to mobbing are:

The victim can be subject to violence due to a religious, ethnic reason, or the fact that he/she displays a high performance, acquires an opportunity, promotion or reward may be sufficient to set the "mobbing" actors into motion. According to the findings obtained from researches on discouragement, discouragement victims have no distinctive particularity, discouragement can happen to anyone. However, some researchers indicate that the victim's character and psychological status are efficient on the appearance of discouragement. Clinic psychologists in particular underline that the victims have a high level of fear and anxiety. In this context, it is observed that persons who cannot seek their rights and defend themselves and who fear conflicts that are honest and have good will are subject to discouragement. The fact that victims have good will, are introverted makes the discouragement actors act. After the interviews with the victims of discouragement, it appears that those persons are intelligent, skillful, creative, success-focused, honest, reliable, and non-political. They attract the attention for being persons who do their work well, have solid working principles and values and do not sacrifice them, are honest, reliable and devoted to their work. Some researches made on victims of mobbing consider as responsible for this unfavorable process the behavior of the victims. Characteristics which increase the probability to be subject to discouragement disturb the others by way of creative and independent thinking and putting forth new ideas and methods. In certain cases, the reason may be that the target is of another type. As is known, a person has characteristics which he/she cannot change. For example, his/her color, sex, accent, the class he/she represents, the fact that he/she is less or more well-educated compared to his/her friends. Such characteristics increase the probability to get under the control of those who intend to discourage that person.

Findings of the research conducted by Gül (Gül et al., 2010) revealed that it was mostly the mid-level executives stuck between the expectations of over-performance and tolerance of seniors and subordinates who had been exposed to psychological intimidation. More than half of those (55.1%) who reported to have been exposed to psychological intimidation were mid-level executives. In this research, respondents prioritized the probable reasons for

psychological intimidation to be inadequate management skills, and disguising their own failure and jealousy. Individuals exposed to psychological intimidation who suggested that the personality of the victim was the reason for psychological intimidation specified this reason more frequently than those who were not exposed to psychological intimidation at all. It is worth noting that most of the respondents, particularly those who were exposed to psychological intimidation, specified the personality of the victim. This evidence, although not supported by other research, requires further development of this dimension of the issue. In their research on 363 employees working in the private education and health sectors, Yıldız (Yıldız et al., 2008) have stressed that psychological intimidation originates from the job rather than personality in Turkey. Similarly, Aydın and Özkul (Aydın et al., 2007) have concluded, on the basis of comments made by 427 hotel employees that psychological intimidation originates from the work environment to a great extent. Results of the research conducted by Zapf (Zapt et al., 2001) on 149 victims of psychological intimidation and 81 controls reveal that the act of psychological intimidation affects professionals specialized on their respective fields rather than unskilled workers.

2.3 Health effects

Mobbing, as an attenuated form of violence, attracts the attention more with its psychosocial aspects. Therefore, mobbing can create more durable psychosomatic effects than violence. According to the results of the research conducted by Gül (Gül et al., 2010), the main psychological intimidation act disturbing the victims of mobbing most is assaults on their quality of life and career status (43.5%), followed by self-assertion and affecting formation of communication (33%). Other acts of psychological intimidation include assaults on social relations (16.3%), personal esteem (6.2%) and the direct personal health of individuals (1.0%).

Mobbing is a behavior which can create such unfavorable consequences that we speak of persons on whom it is applied, as "victims" (Gökçe, 2009; Rodríguez-Carballeira et al., 2010; Helkavaara, M. et al., 2011). At the beginning, there is a dispute between the two parties. As the victim refuses to obey, displays resistance to being under control, he/she is faced with a person who is getting angry, rude. Sometimes, when the competency at work of the victim is higher than that of the tyrant, if this threatens his/her position, jealousy can initiate the tyranny. "The aim of mobbing is to exercise superiority on the victim, to take him/her under his/her control. The most important is that it ensures that the victim quits work, loses his/her personality and identity. For this reason, certain means of communication without words (Such as whispering, fleeing the eye, inconvenient laughing, tears, the sudden dispersion of a group upon his/her approach, or sudden interruption of the conversion) are applied. The harassment can turn into an agreement of the harasser with the other employees and an isolation of the target. The behavior of those who are aggrieved and observe this can deteriorate; they may start escaping from the organization. Harassment can lead to the deterioration of peace at work. The person who is faced with harassment gets away from social communication networks which play an important role in promotion and advancement. The fear to be misunderstood by others, to be accused, to lose his/her job leads the victims to silence. Persons who are the target of harassment have the feeling of humiliation, shame and faultiness, insecurity, anger and anxiety. Related with this, victims can also be faced with important problems in their private life. Harassment can cause the person feel like a stranger to his/her work and lose his/her will to succeed. It is argued that

persons faced with mobbing are more inclined to be involved in accidents and are more frequently on sick leave. In the majority of the cases, this ends up with the victim of harassment changing his/her job where he/she worked for years or being transferred to a more passive job. It is evident that such a result affects persons' careers and opportunity to be promoted. The person, who is harassed for the first time, starts crying alone, suffers from insomnia from time to time, susceptibility and lack of concentration. As long as the effect lasts, the person loses his/her power of resistance, cannot escape, suffers from mental/physical troubles and does not want to go to work. He/she suffers from high blood pressure, permanent insomnia, tummy and intestinal problems, gains or losses weight, suffers from depression. Alcohol or drug addiction begins requests permission to leave work very often. The requirement for medical help is inevitable. At the last stage, he/she becomes unable to work, cannot return to active life. His/her physical and spiritual harm cannot be even cured with rehabilitation. The person lives in great anxiety as if he/she suffered from a great traumatism due to an earthquake or an important traffic accident, violent depression, panic attacks, cardiac attacks, serious diseases, accidents, tentative of suicide and violence against third persons. Medical and psychological aid is required (Virtanen M et al., 2007; Niedhammer I et al., 2009; 2011). Even if storms of feelings are attenuated in time with the treatment applied, such an event causes deep traces in the person. Many feelings, such as the feeling of defeat, anger, vengeance, lack of confidence to people, leads the person to new behavior. To work is now much more difficult for this person. If the person cannot risk leaving his/her work, he/she suffers physically and mentally and continues to be harmed every day. Now, he/she lives with anxiety, lack of self-esteem, pains, difficulty to breath, high blood pressure, depression. The point to be emphasized is that harassment is a process which causes more pain in time. It is observed that the majority of mobbing victims lose their health due to the Post-Trauma-Stress Deficiency, and become unable to work.

If the targeted individual succeeds in resisting and gets away from the environment or reaccommodates the situation, the damage from harassment decreases. Otherwise, the individual frays mentally, psychologically, and physically, and suffers difficulty in focusing on his/her job. As long as mobbing continues, professional integrity and the sense of self of the individual is damaged, their level of self-suspicion rises, paranoid attitudes and confusion emerge, self-confidence is lost, the individual isolates himself/herself from the outer world, or feelings of restlessness, fear, shame, rage or anxiety are experienced. The individual who cannot cope with such stresses either needs some special therapy or loses the chance to return to his/her job or may even commit suicide.

There are various opinions on the reasons of mobbing acts (Keim, J & Cynthia McDermott, C. 2010; Laaksonen E. et al., 2009; Lahelma E, et al., 2011). One of these is the lack of social skills in persons performing discouraging acts. Another reason is the structure of tyrants. The main problem with tyrants is observed to be a lower self-esteem and personal incompetence in realizing itself, compared to the victim. On the other hand, they are observed to be persons inclined to conflicts, who have no love, who grew up in an austere environment, who have been disciplined with physical punishment. Mobbing is generally applied to well-educated, promising persons who have a high emotional intelligence (McKay, R& Fratz, J. 2011; Niedhammer I et al., 2007). In this context, discouragement actors are generally persons striving for interest, compliments, have a conception of exaggerated ego and resort to discouragement in order to compensate his/her

own deficiencies, who are weak, unsecure and coward. Mobbing is one of the methods enabling the powerful person to take control of the weak person. In the case of harassment, formal power differences are observed more clearly when the harasser is a superior. If harassment is made by a superior, due to the position of the superior, the consequences of the harassment are more efficient and harmful for both the victim and the establishment. It has been shown that informal power differences between men and women in similar positions can create an environment for harassment. The relationship between the gender of victims and psychological intimidation in the research conducted by Gül (Gül et al., 2010) reveals that females are more exposed to psychological intimidation than males. 43.5% of the respondents reported that they had been exposed to psychological intimidation by males and 39.7% by females, whereas 13.6% reported to have been exposed to psychological intimidation by both genders. Males are exposed to psychological intimidation mostly by their seniors and females by their workmates with similar jobs (p= 0.026). Females are more exposed to permanent criticism of their performance, the people around them not speaking to them, or judgment of their emotional situation or efforts than males. The literature contains conflicting results on this issue. Cemaloğlu and Ertürk (Cemaloğlu and Ertürk found out in their research conducted among 347 teachers that there existed a meaningful relationship between psychological intimidation experienced at the subdimensions of "self-assertion and communication," "social relations," "respect to selfesteem," and "life quality and career status" and gender, and that males apply more psychological intimidation on both genders than females. In his research conducted on 189 bank employees, Kök reported that a significant portion of victims of psychological intimidation was constituted by females and employees below the age of 25. On the other hand, Bilgel et al., did not find any meaningful relationship in statistical terms between age, gender, marital status and working hours and psychological intimidation reported in their research conducted among 877 public sector employees working in health, education and security fields. Except for the gender factor, Gül et al., did not report any relationship between marital status and age and psychological intimidation in their research. Einarsen and Skogstad (Einarsen & Skogstad, 1996) reported no difference between males and females in frequency of exposure to psychological intimidation in their research conducted among 7968 employees from 14 private and public entities. And in the research conducted among 377 white collar employees, Salin (Salin, 2003), concluded that females were more exposed to psychological intimidation in their workplaces than males.

Victims in the research conducted by Gül et al. reported anxiety, unworthiness and lack of motivation, respectively, after being exposed to psychological intimidation. It was further reported that those victims most frequently suffered nervousness and tension (58.4%), followed by lack of motivation and feelings of unworthiness (54.2%). The health complaint most frequently reported was headaches by females (70.1%) and high blood pressure by males (53.85). While there was a meaningful difference between the genders in the frequency of suffering headaches only (p=0.011), no difference was found in terms of other complaints. No meaningful difference was observed in health-related variables according to positions at the workplaces. There was some statistically meaningful difference among headache (p=0.005), lack of motivation to work (p=0.042), decrease in work efficiency (p=0.004), emotional fluctuations (p=0.015) and the term of career presenting health problems after psychological intimidation. 9.8% of the respondents reported that they received professional help after psychological intimidation and 71.5% reported to have received psychological help from immediate relatives and friends, whereas 18.7% reported

no help received from anyone or anything done for this purpose. No difference was found between the genders in terms of psychological support received (p=0.646). A brief examination of the findings of that research reveals that assaults on an individual's quality of life and career status represent the acts of psychological intimidation they most frequently faced. Almost half of the victims reported that opportunities for self-assertion were restricted while other half reported hindered means of communication. Yıldırım et al., (Yıldırım & Yıldırım 2007) discovered that feelings of tiredness and stress (75%) and headache (69%) were the most common health problems reported by victims of psychological intimidation in a study conducted on 210 lecturers. Yıldız & Yıldız, determined what level health person is subject to bullying and what level victims face depression. They determined that victims to bullying experience more level of depression. Especially, 33.7% of bullying person appeared to be medium level, 5.1 % severe depression. In total 66.1% of victims reached the depression level.

International literature contains a number of studies evidencing severe psychological and physical problems that have arisen after psychological intimidation, even reaching the alarming degree of suicide (Dikmetaş et al., 2011; Girardi, P., et al., 2007; Meseguer de Pedro et al., 2007; Rossi, & D'Andrea., 2001; Monaco et al., 2004; Kreiner, 2008). In the research conducted by Gül et al., approximately three-fourths of the victims reported that the acts of psychological intimidation they faced affected their job efficiency adversely, whereas approximately one-fifth of all respondents did not perceive psychological intimidation to be a problem denigrating the work environment. 45.8% of the victims of psychological intimidation said that they reported these attitudes to senior executives, while 54.2% ignored the situation and did not make any complaint thereof. 15.3% of those who reported these acts to senior executives said that those causing psychological intimidation were slightly punished (reprimanded, etc.), 2% said that they were dismissed and 82.7% said that nothing was done with them. When the reason(s) of no report was (were) asked, 78.8% of the respondents said that no result could have been attained even if they had been reported, 21.6% expressed their concern about losing their jobs, 45.5% stated their fear of negative criticism, 26.8% said that they would give no evidence, 55.5% said that they ignored the situation and 27.9% expressed their belief of accomplishing no legal result - all of which indicates that psychological intimidation is not a well-adopted and clear concept which is considered adequately important yet. Although there is no clear reason, when the employee's motivation decreases, managers must be careful. When sudden performance decrease is observed in the most creative employees, who display the highest performance, and when these employees quit the establishment after a while, the reasons behind must be investigated.

3. Conclusion

Mobbing in the workplaces is one of the preventable public health problems. When it comes to mobbing, the necessity of enlightenment and raising awareness is great, in addition to applicable legislation. This malignancy cannot be prevented unless it is given a name. Describing and description of mobbing is essential. Individuals and entities should assume prevention of mobbing to be one of their primary tasks.

Getting aware of mobbing-psychological intimidation which may result in severely adverse outcomes at individual, organizational or even social level and defining the causes as well as

developing appropriate actions are essential for public health. An individual victim of psychological intimidation should be aware that what she/he has experienced is an occupational health and safety issue already defined and scientifically denominated and that being exposed to such an act is not his/her own fault. The victim should refrain from responding against acts of mobbing, inform the senior executives about the situation, collect evidence, be aware of the sanctions set forth in labor legislation and defend his/her rights. It should be remembered, however, that the key factor is the organizational and social structure rather than personality of the individual which encourages psychological intimidation. Assuring a healthy and safe working environment by adopting a holistic approach is an indispensable element of the social policy. Carrying out descriptive and evaluative studies which also aim developing an awareness of the problem shall bring along favorable results for the health of the individual and the community. And those studies may also contribute to making an efficient comparison of findings coming from different cultures and professions.

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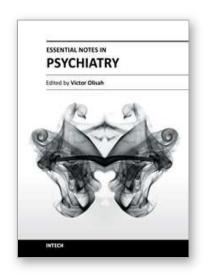
5. References

- Agervold M. (2009). The significance of organizational factors for the incidence of bullying. *Scand J Psychol*; 50:267-276.
- Aydın, Ş., Özkul, E (2007). The nature and dimensions of mobbing at work: 4-5 star hotel establishment case, *Anadolu Üniversitesi Sosyal Bilimler Dergisi*, 7(2):169–186.
- Bilgel, N., Aytac, S., Bayram, N. (2006). Bullying in Turkish White-Collar Workers. *Occupational Medicine*, 56 (4): 226–231.
- Cemaloğlu, N., Ertürk, A. (2007). A study on acts of mobbing suffered by teachers in terms of their gender. *Türk Eğitim Bilimleri Dergisi*; 5(2): 345–362.
- Dikmetaş, E., Top, M., Ergin, G. (2011). An examination of mobbing and burnout of residents. *Turk Psikiyatri Derg.* 22(3):137-49.
- Einarsen, S, Skogstad, A. (1996). Bullying at work: epidemiological findings in public and private organizations. *Eur Work Organ Psychol* 5 (2): 185–201.
- Ferrinho, P., Biscaia, A., Fronteira, I et al. (2003). Patterns of perceptions of workplace violence in the Portuguese health care sector. *Hum Resources Health* 1(1):1–11.
- Girardi, P., Monaco, E., Prestigiacomo, C., Talamo, A., Ruberto, A., Tatarelli, R. (2007). Personality and psychopathological profiles in individuals exposed to *mobbing*, *Violence Vict.*;22(2):172-88.
- Gökçe, A. (2009). Mobbing in the workplace The conceptual framework, *Universite ve Toplum* 9(2):1-9.
- Gül, H. (2009). An Important Psychosocial Risk in Occupational Health: Mobbing *TAF Prev Med Bull* 8(6):515-520
- Gül, H., Alçalar, N., Kayı, İ., Özel, S., Özgülnar, N. (2010). Mobbing in working life and its effects on health: A cross-sectional study among privately –owned bank workers, *Türkiye Klinikleri Journal of Medical Sciences* 30 (6):1917-1927.

- Helkavaara, M. Peppiina, S.; Lahelma; E. Psychosocial work environment and emotional exhaustion among middle-aged employees, *BMC Research Notes* 2011, 4:101.
- Keim, J., Cynthia McDermott. (2010): Mobbing: Workplace Violence in the Academy, *The Educational Forum*, 74:2, 167-173.
- Kök, SB. (2006). Mobbing phenomenon in business life as a psychological violence package and its reasons. *Selçuk Üniversitesi, Sosyal Bilimler Enstitüsü Dergisi* 16 (1): 433–449.
- Kreiner, B., Sulyok, C., Rothenhäusler, HB (2008). Does mobbing cause posttraumatic stress disorder? Impact of coping and personality, *Neuropsychiatr*. 22(2):112-23.
- Laaksonen E, Martikainen P, Lallukka T, et al. (2009). Economic difficulties and common mental disorders among Finnish and British white-collar employees: the contribution of social and behavioral factors. *J Epidemiol Community Health*, 63:439-446.
- Lahelma E, Lallukka T, Laaksonen M, et al. (2011). Workplace bullying and common mental disorders: a follow-up study. J Epidemiol Community Health.
- Lawa, R., Dollarda, MF., Michelle R. Dormannb, TC. (2011) Psychosocial safety climate as a lead indicator of workplace bullying and harassment, job resources, psychological health and employee engagement. *Accident Analysis and Prevention* 43: 1782–1793.
- Leka S. et al. (2003). Work organization and stress. Geneva, *World Health Organization*, (Protecting workers health series, No. 3.
- Leka, S., Jain, A. (2010). Health impact of psychosocial hazards at work: An overview. World Health Organization, Geneva, Switzerland
- McKay, R., Fratz, J. (2011). A Cause of Failure in Addressing Workplace Bullying: Trauma and the Employee. *International Journal of Business and Social Science Vol. 2 No. 7, 13.*
- Meseguer de Pedro M., Soler Sánchez MI., García-Izquierdo M., Sáez Navarro MC., Sánchez Meca J. (2007). Psychosocial risk factors at work as predictors of mobbing, *Psicothema*. May; 19(2):225-30.
- Monaco, E., Bianco, G., Di Simone Di Giuseppe, B., Prestigiacomo, C. (2004). Emergent pathology in occupational medicine: the mobbing. *G Ital Med Lav Ergon*. Jan-Mar;26(1):28-32.
- Niedhammer I, David S, Degioanni S et al. 143 occupational physicians. (2009) Workplace bullying and sleep disturbances: findings from a large scale cross-sectional survey in the French working population. *Sleep*; 32: 1211–9.
- Niedhammer I, David S, Degioanni S. 143 occupational physicians. (2007) .Economic activities and occupations at high risk for workplace bullying: results from a large-scale cross-sectional survey in the general working population in France. *Int Arch Occup Environ Health*; 80: 346–53.
- Niedhammer, I., David, S., Degioanni, P., Drummond, A. Ph,lip, P. and143 occupational physician. (2011). Workplace Bullying and Psychotropic Drug Use: The Mediating Role of Physical and Mental Health Status *Ann. Occup. Hyg.*, Vol. 55, No. 2, pp. 152–163.
- Nielsen, M. B., Matthiesen, S. B. and Einarsen, S. (2010). The impact of methodological moderators on prevalence rates of workplace bullying. A meta-analysis. *Journal of Occupational and Organizational Psychology*, 83: 955–979.
- Ortega, A., Høgh, A., Pejtersen, JH., et al. (2009).Prevalence of workplace bullying and risk groups: a representative population study. *Int Arch Occup Environ Health*, 82:417-426.

- Quine, L (1999). Workplace bullying in NHS community trust: staff questionnaire survey *BMJ* 318 (7178): 228–232.
- Rodríguez-Carballeira A, Escartín Solanelles J, Visauta Vinacua B, Porrúa García C, Martín-Peña J. (2010). Categorization and hierarchy of workplace bullying strategies: a Delphi survey, *Span J Psychol*. May;13(1):297-308.
- Rossi, M., D'Andrea, R. (2001). Mobbing: a problem in occupational health. *Recenti Prog Med.*Jan;92(1):49-51.
- Salin, D. (2003). Bullying and organizational politics in competitive and rapidly changing work environments. International Journal of Management and Decision Maing, 4 (1), 35-46.
- Virtanen M, Honkonen T, Kivimaki M et al. (2007) Work stress, mental health and antidepressant medication findings from the Health 2000 Study. *J Affect Disord*; 98: 189–97
- Yıldırım, A., Yıldırım, D. (2007). Mobbing in the workplace by peers and managers: mobbing experienced by nurses working in healthcare facilities in Turkey and its effect on nurses. *Journal of Clinical Nursing* 16 (8): 1444–1453.
- Yildiz, S., Tuzunturk, S., Giorgi, G (2008). Workplace bullying in Turkey: Prevalence among private sector employees. *Risorsa Uoma* 14(2):157–170.
- Yılmaz, A., Özler, D.E., Mercan, N. (2008). An empirical study of the relationship between mobbing and organizational climate. *Elektronik Sosyal Bilimler Dergisi*, 7 (26):334–357
- Zapf, D., Gross, C. (2001). Conflict escalation and coping with workplace bullying: A replication and extension. *European Journal of Work and Organizational Psychology*, 10 (4): 497–522.





Essential Notes in Psychiatry

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Psychiatry is one of the major specialties of medicine, and is concerned with the study and treatment of mental disorders. In recent times the field is growing with the discovery of effective therapies and interventions that alleviate suffering in people with mental disorders. This book of psychiatry is concise and clearly written so that it is usable for doctors in training, students and clinicians dealing with psychiatric illness in everyday practice. The book is a primer for those beginning to learn about emotional disorders and psychosocial consequences of severe physical and psychological trauma; and violence. Emphasis is placed on effective therapies and interventions for selected conditions such as dementia and suicide among others and the consequences of stress in the workplace. The book also highlights important causes of mental disorders in children.

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