

***AN ANALYSIS OF BULLYING WITHIN THE HEALTH CARE SYSTEM
AND ITS IMPACT ON HEALTH SERVICE DELIVERY***

BY

BONGANI INNOCENT DLAMINI

951854

A thesis submitted in partial fulfillment for the requirement
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Promoter: Professor

H.S.B Ngcobo

DECLARATION

I declare that ***an analysis of bullying within the health care system and its impact on health service delivery*** is my work and that all the sources used or quoted have been indicated and acknowledged by means of complete references and that this work has not been submitted before for any other degree at any other institution.

Signature

Date:.....

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LIST OF ABBREVIATIONS

ILO	International Labour Organization
EEA	Employment Equity Act
EEO	Equal Employment Opportunities
MBO	Management by Objectives
CBT	Cognitive Behavioural Therapy
PMMH	Prince Mshiyeni Memorial Hospital
KZN	KwaZulu-Natal
OHSA	Occupational Health and Safety Act
PTSD	Post-Traumatic Stress Disorder
DSMIV-TR	Diagnostic and Statistical Manual of Mental Disorders
OCD	Obsessive Compulsive Disorder
OB Mod	Organizational Behaviour Modification
NPD	Narcissistic Personality Disorder
PSC	Public Service Commission
LRA	Labour Relations Act
N.D	No Date

SUMMARY OF THE THESIS

This research project was undertaken to investigate workplace bullying and its effect on health service delivery. Research participants were drawn from Prince Mshiyeni Memorial and Mosvold Hospitals; the aim was to compare the experiences of public health employees in rural and urban areas of KwaZulu-Natal.

The employees have a right to be treated with respect and dignity and, most importantly, to work in a harmonious and supportive environment. Bullying behaviour breaches the employer's duty under common law to provide a safe and a secure work environment both physically and psychologically. What makes it difficult for managers to manage bullying is that it has no tangible results but it leaves the victim with psychological and emotional problems which lead to anxiety, stress and depression if not properly attended to. The results of this research project further reveal that the majority of bullied employees are reluctant to speak out or end up not reporting the incidences because when they do report problems they believe that they will not be taken seriously.

The results also prove that bullying is not a once-off event but a continuous cycle aimed at humiliating and belittling the

victim and that it is present in both health institutions. Though many factors were indicated as contributing to bullying, the low-self-esteem and personality factors of the bully were mentioned as the main factors, followed by inadequate training for the managers. If managers are serious about combating bullying in their workplaces they need to be in touch with what their employees go through when they execute their daily duties and they need to devise some means of ensuring that the grievance procedure is adequate and that it caters for bullying problems.

CHAPTER 1

1.1 INTRODUCTION

Workplace bullying is a form of harassment that is becoming recognized as a management problem for employers. Smith (1999) argues that the increased recognition of workplace bullying has brought out the need for employers to review or change their employment policies and their grievance and disciplinary procedures to ensure that all employees are aware and educated about the effects of bullying. Bullying has become a serious concern for the health of employees who are being bullied either by those in positions of power or by colleagues. In South Africa those employed in hospitals do not only face violence in the form of bullying from their superiors but they also face violence from the members of the public. (See appendix: A and Appendix: B). It should, however, be taken into consideration that there are also forms of psychological violence from nurses directed at the members of the public (See Appendix: C). The latter article indicates that certain forms of psychological violence or harassment are prevalent from both sides.

The issue of violence and harassment in the workplace affects a substantial section of the workforce and this psychological violence and harassment represents the greatest threat to the health and wellbeing of most employees, if not all, bearing in mind employees spend 70%-90% of their time at work. Also, employers should be aware that workplace bullying may not always be committed by an employee, but it may be perpetrated by a client, customer or anyone in a position of authority. Employers may ultimately remain responsible for the consequences of such behaviour even if committed by people other than employees. Bullying is regarded as an inefficient way of maintaining the upper hand, resulting in disenchantment, demoralization, demotivation, disaffection and alienation. Bullies run dysfunctional and inefficient organizations where labour turnover and sickness are high and staff morale and both productivity and profitability are low. An aspect of special concern to the study of workplace bullying is the personal meaning that work has for the individual.

Mullins (2002) argues that, from the psychological point of view it can be an important source of identity, self-esteem and self-actualization. It can provide a sense of

fulfillment by giving an employee a sense of purpose and by clarifying his or her value to society. However, it can also be a source of frustration and boredom and can give rise to feelings of meaninglessness, depending on the nature of the task. People tend to evaluate themselves in terms of what they have to accomplish. If they see their job as hampering the achievement of their full potential, it often becomes difficult to maintain a sense of purpose. Bullying has a negative effect on the organization and individual as well as for society.

1.2 MOTIVATION FOR THE RESEARCH

Human dignity is one of the fundamental rights entrenched in chapter II section 10 of the South African Constitution and it must be respected and protected. Everyone in the workplace, irrespective of their position, deserves to be treated with dignity and respect. No one should suffer bullying or harassment while going about their work. Many employees find themselves on the receiving end of bullying and have little or no help available; For example, when everything they commit themselves to accomplish does not amount to anything in the eyes of their superiors; also, when an employee dislikes the co-worker for personal

reasons he or she may incessantly criticize everything that the co-worker does. Such actions are not necessarily illegal and may not even be against the organization's policies and regulations. However, the damage they cause, both to the targeted employee and to the workplace morale is obvious, and this negative attitude may eventually destroy or cripple the employee's self-esteem (Namie: 2003).

In South Africa workers in the health care sector bear the brunt of workplace violence, and over a twelve month period, a survey conducted in 2005 indicated that nine percent of those employed in the private health sector and up to seventeen percent of those in the public sector experienced physical violence. (Retrieved August 24, 2007 from World Wide Web: <http://bullyinginstitute.org>) To elaborate on that, in September 2007 the Sunday Times published claims that the National Minister of Health bullied the staff at the hospital where she was admitted for a shoulder operation.

1.3 STATEMENT OF THE PROBLEM

A 1999 International Labour Organization report on workplace violence emphasized that physical and emotional violence is one of the most serious problems facing the workplaces in the new millennium. The psychological violence in South Africa is not a myth but a reality and many organizations have not taken any initiative to develop policies that specifically deal with the effects of psychological violence in the workplace. As a result, they continue to lose talented and competent employees because of the failure of employers to protect them. In addition, in South Africa there is little Occupational Health and Safety legislation that addresses the problem and protects employees from being bullied in the workplace.

Tehrani (2001) argues that, an organization that condones or ignores a bullying management style or bullying within teams not only increases the likelihood that bullying will spread but also increases the potential for more serious physical violence to occur.

Most people identify so strongly with their jobs that their self-esteem derives from the position they hold. "You are

your position and nothing more.” A dangerous self-assessment! That is why the effects of workplace bullying are so far-reaching and likely to trigger Post Traumatic Stress Disorder when a person is subject to Work Trauma. Despite the recent surge of interest in the study of workplace bullying, there is still a lack of understanding and recognition of what it really is and how it affects individuals and organizations (Mullins: 2002).

1.4 OBJECTIVES OF THE STUDY

The objectives of this study include the following:

- to examine the role of organized business and organized labour in the prevention of bullying in the workplace.
- to review the provision of OHSA in the protection of an employee's physical and psychological wellbeing in the workplace.
- to review current literature on workplace bullying.

1.5 RESEARCH METHODOLOGY

1.5.1 POPULATION AND SAMPLING

The ideal (target) population will include the nursing staff (all ranks and categories) and administrative staff (Human Resources, Finance and Systems) from Mosvold Hospital (a hospital in the rural areas of Ingwavuma) and Prince Mshiyeni (a hospital in the urban areas of Durban-uMlazi). The reason for choosing these two hospitals is to compare the experiences of health care employees in rural areas and the experiences of those in urban areas. The researcher is aware of the large number of employees in these two hospitals, therefore the researcher intends to make use of random sampling when selecting participants.

1.5.2 INSTRUMENTATION

Multiple sources of data collection will be used, especially qualitative research methods which is greatly informed by narrative analysis. According to Holloway and Freshwater (2007) narrative research is an increasingly popular way of carrying out qualitative research; that is, by analyzing the stories or experiences of the participants. Narrative analysis is an analysis of a

chronologically told story with a focus on how elements are sequenced, why some elements are evaluated differently from others, how the past shapes perception of the present and how both shape the perception of the future. Cortazzi (1993) argues that narrative analysis is seen as a more in-depth alternative to survey research using psychological scales. It is also an empowering social science methodology in so far as it gives participants the venue to articulate their own viewpoint and evaluative standards. Also, narratives will have an advantage of focusing research on a respondent's specific experience of bullying (Gillham, 2000 and Henning: 2004).

To a large extent survey research will also be used in the form of structured questionnaires and interviews as data collection methods for the purpose of comparing responses for evaluation because some participants feel more comfortable presenting their experiences in writing rather than talking about them. These will be used to collect data from participants in the study. All responses will be systematically recorded. The researcher also intends to obtain information from the management staff through interviews; this is for the purpose of obtaining information about how they deal with complaints associated

with bullying or harassment. The policy document regulating employment in the health sector in South Africa will also be reviewed to examine the extent to which it protects the psychological well-being of those employed in the health sector and to establish whether or not there are any grievances and what disciplinary procedures are used by both employees and employers when dealing with bullying.

1.5.3 ETHICAL CONSIDERATIONS

All interviews conducted will be held with the participants who remain anonymous. Participants will not be asked to reveal their names but their categories and ranks. Confidentiality will be upheld throughout the study.

1.5.4 LIMITATIONS OF THE STUDY

In social sciences research it is not always easy to receive co-operation from the participants. However, the researcher does not foresee threats to internal validity with respect to the location, loss of the subjects, extraneous events or maturation because of the duration of the study.

1.5.5 ANALYSIS OF DATA AND RESEARCH FINDINGS

When analyzing data, the life story method of narrative analysis will be used as provided by Riessman (2004). It involves interviewing participants and then retelling their story as if written by them. The contextual analysis will also be used. As noted by Labov and Waletzky (1967), narratives, particularly the evaluative elements of narratives, are social phenomena; narratives vary according to social context (work, home and school) within which they are collected. Labov and Waletzky (1967) further argue that, consequently, it may be fruitful to gather narratives on the same reference subjects from otherwise similar participants in varying social contexts.

Flick (2005) maintains that, likewise one can gather narratives on the same subjects from the same participants at different points in some development process; for example, different career points will yield differences in evaluative components and consequent insight into the process. Descriptive statistics and content analysis or discourse analysis will also be used because they serve as techniques for gathering and analyzing the content of the text. In content analysis the researcher will use

objective, systematic counting and recording procedures. Maree (2007) states that discourse refers to expressing oneself using words and it also refers to the variety and flexibility of the language actually used in ordinary interaction. Discourse analysis tries to eliminate ways in which the dominant forces in society construct versions of reality that favour their interest and to uncover the ideological assumptions that are hidden in the words of written text or speech.

1.6 VALUE OF THE STUDY

The National Department of Labour and Trade Unions in South Africa, including the International Labour Organization, are fighting for the physical, emotional and psychological wellbeing of all employees in the workplace. This study will assist in identifying the causes of bullying and to highlight best practices i.e. examples from governments around the world that have successfully implemented zero tolerance policies, and a violence prevention programme to map out the degree of bullying and how it impacts on the morale of the employees. The study will also look at finding solutions.

1.7 CONCEPTUAL CLARIFICATION

1.7.1 BULLYING / PSYCHOLOGICAL VIOLENCE

According to Einersen (2000) bullying emerges when one or several individuals persistently, over a period of time, perceive themselves to be on the receiving end of negative actions from one or several persons in a situation where the target of bullying has difficulty in defending himself or herself against these actions. It can also be defined as any behaviour that is repeated, is systematic and directed towards an employee or group of employees that a reasonable person, having regard to the circumstances, would expect to victimize, humiliate, undermine or threaten and behavior which creates a risk to health and safety. According to Tehrani (2001) a bully is a person who

- has never learnt to accept responsibility for his or her behaviour.
- does not want to know of any other way of behaving.
- is unwilling to recognize that there could be better ways of behaving.
- is unable and unwilling to recognize the effects of his or her behaviour on others.

1.7.2 WORKPLACE HARASSMENT

Ayling (2002) defines workplace harassment as offensive, belittling or threatening behaviour directed at an individual worker or group of workers. Harassment is often focused on the sex or racial background or disability of an individual or group. Harassment is behaviour that is unwelcome, unsolicited and usually unreciprocated and usually repeated (but not always). Workplace harassment should not be confused with advice or counselling on work performance or work-related behaviour of the individual or the group; this advice might include critical comments indicating performance deficiencies. For harassment to occur there does not have to be an intention to offend or harass. Moreover, harassing behaviour may be of a minor nature. Individual incidents may seem too trivial to warrant attention or the person subject to harassment may seem unaffected. Where the behaviour continues over a period of time and it is not addressed, such behaviour can undermine the standard of conduct within the workplace.

1.7.3 STRESS

Silverman (1982) defines stress as the internal and external responses of the individual to pressure, and when that pressure is experienced as excessive. When the demands are greater than the person's ability to adapt to the pressure they then experience a state of stress.

1.7.4 WORKPLACE AGGRESSION

Baron, Neuman and Gedes (1999) classify workplace aggression as overt or covert. In overt aggression, aggressors make no attempt to conceal their identity or their actions from the targeted person. In covert aggression, aggressors seek to hide their identity or their actions. This classification of behaviour serves as a reminder that, while bullying behaviours may be obviously and directly aggressive, they can also be extremely subtle, so much so that even the target may not realize it is happening.

According to Aronson, Wilson and Akert (1994) workplace aggression is the behavior aimed at causing either physical or psychological pain; it is not to be confused with assertism, even though sometimes people loosely refer to

others as aggressive if they stand up for their rights, display a great deal of ambition or if a person is a real "go getter". From this definition it is clear that aggression is an intentional action aimed at doing harm and causing or inflicting pain.

1.7.5 SOCIAL DIALOGUE

Social dialogue refers to all types of negotiations, consultation or exchange of information between representatives of governments, employers and workers on issues of common interest relating to economic and social policy. The International Labour Organization has been at the forefront of driving the concept of social dialogue as a tool for furthering democracy, social justice and a productive and competitive economy; social dialogue is seen as a key to improvement of conditions of work for employees in what is called global drive for decent work (Finnemore: 2006).

CHAPTER 2

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1 INTRODUCTION

On December 10, 1948 the General Assembly of the United Nations adopted the universal declaration of Human Rights; Article 1 of the declaration states that "***all human beings are borne free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood***".

According to the International Labour Organization (ILO) workplace bullying and physical and emotional violence is the single biggest threat in the workplace in the new millennium and it is an alarming phenomenon, though the drive for dignity and respect is high on the agendas of countries like Great Britain and those in Europe. Research, however, indicates that in countries like Australia, the United States of America and South Africa the problem is increasing and the International Labour Organization encourages member states to ensure that physical and psychological violence of any kind is totally eradicated.

For example, in South Africa, chapter 11, section 5(3) of the Employment Equity Act No.55 of 1998 regards harassment of employees as a form of discrimination and it is prohibited. The Act further encourages employers to take reasonable steps to end discrimination or provide a discrimination free environment or workplace (Nel, Van Dyk, Haasbroek, Schultz, Sono and Werner: 2004).

Workplaces are hostile and society's support systems are eroded sometimes because of fear of victimization and victims therefore continue to suffer.

Tehrani (2001) argues that work can be extremely unpleasant when colleagues backstab, spread malicious gossip and give fellow colleagues the "silent treatment". The negative aspect of this whole scenario is that the downfall of a "competitor" is planned and career executions are commonplace. That is one of the reasons ILO refers to bullying as "violence"; it is because there are no scars but, in essence, this behaviour leaves the victim with invisible scars and it is therefore nothing less than violence. According to Gabriel (2005) work does not only take place in workplaces and this is not always rewarded with payment; it is also a large part of people's domestic

lives and can be partly voluntary. In short, work can be pleasurable and life-enhancing or it can be alienating and oppressive.

2.2 THE RELATIONSHIP BETWEEN PERSONALITY AND BULLYING

According to Gabriel (1999) "*our perceptions and ideas about our social reality are not neutral. They are shaped by feelings, such as pride, anxiety and pain as well as by earlier experiences in our lives which, unknown to us, have left deep marks on our mental personality*". The question many researchers, including psychologists, try to answer is whether there is any relationship between bullying behaviour and personality. Or do people bully others because of their psychological make up? According to Silverman (1983), no two people are the same; each of us is distinguished by a set of characteristics, attitudes and values and these attributes function as a kind of organized system that is known as personality. Silverman (1983) further argues that all of us share certain characteristics in common with others despite none of us having exactly the same characteristics as anyone else. In 1973 the psychologist Raymond Catell argued that 'personality' is like love in that everyone agrees that it exists but disagrees on what it is. The commonly acceptable

beliefs often overlap and blend in with other more reflective and theoretically-based views. The latter views include pathological and deviant personality traits identified in a psychopath. The role of personality in explaining workplace bullying has largely been informed by research into school bullying which has increased over the past years. Rayner (1997) believes that, as in harassment, bullying in schools can be both direct and indirect and that aggressive behaviour results in the person being unable to relate to others, neither can he or she understand feelings of others or comprehend the anxiety caused. Arising from this research, bullies are recognized by their high levels of aggressiveness, writes Huisman in the Sunday Times 2009. Olweus (1997) points out, that in contrast, victims often appear to be anxious and to have low self-esteem and that these findings have predominantly been explained with reference to early childhood. Randell (1997) argues that both aggressive as well as submissive personalities may be as a result of poor or unsuccessful parenting. The aggressive person or the bully appears to come from a home environment where inconsistent patterns of discipline are prevalent. Authoritarian behaviour or rejections on the part of parents are regarded as normal. In addition, such parenting styles seem to stimulate aggression and

opportunities for development of social skills needed for normal interaction with others is reduced.

2.3 PERSONALITY AS STRIVING AND COPING

Several influential personality theories have emphasized motivation in their conceptions of the reasons people behave as they do. Kowalski and Westen (2009) maintain that social motivational systems described by Murray in 1938 and Mclelland in 1971 have played an important role in theories of personality; for example, need for achievement, power, affiliation and dominance are all described as important motivators which produce individual differences in behaviour.

Morgan, King and Robinson (1979) argue that by far the most complete, the most accepted and perhaps the most influential theory of personality, but in some respects the least substantiated, is psychoanalysis. Long before psychologists were giving much attention to personality, Sigmund Freud was at work in his psychiatric practice in Vienna constructing a conception of personality based on his observations of patients. He was able to explain many aspects of behaviour of both normal and disturbed people, or aspects of behaviour

that were inconsistent with what a normal human being would do. Olsen (2007) maintains that it is important to understand the typical personality make up of the bully in order to understand what motivates such people to victimize their victims. He further states that another surprising feature of those who have been targeted by workplace bullies in management positions is that they do not usually question what is actually happening to them in that they do not understand the clear difference between an acceptable management style and abusive behavior. They often blame themselves for the bullying because they imagine their personality is incompatible with that of the bully and they think they have somehow brought this on themselves because they lack personality traits that other normal people may have.

2.3.1 FREUD'S PSYCHOANALYTIC THEORY

"Psychoanalysis can provide a deep understanding of many features of organizations, even those that appear perfectly straightforward and ordinary. It does this by examining not so much the behaviour of individuals in organizations, but rather the meaning of their behaviour and the deeper motives for their actions. When we address ourselves to the meaning

of events and the motives of actions, we find that the mundane disappears and that even apparently ordinary events arise for reasons that are not evident. The distinctions between the rational and the irrational may become a bit blurred" (Gabriel: 1999).

Psychoanalysis is a set of theoretical ideas about personality and a method of psychotherapy developed by three parts: firstly, a ***theory of the structure of personality*** in which the ego, the id and the superego are principal concepts. With this theory Freud developed a model of personality with three parts: the id, the ego and the superego. According to Freud the id is best thought of as a sort of storehouse of biologically-based motives and instinctual reactions for satisfying motives. Left to itself, the id satisfies fundamental wants as they arise without regard to the realities of life or to morals of any kind. Does it mean then that, people in the workplace bully others because of their desire to satisfy their id's demands or wants? Freud further pointed out that the id is, however, unable to function on its own but is controlled and managed by the ego. The ego consists of elaborate ways of behaving and thinking which constitute the executive function of person; this concept of ego is close to the concept of

"self". Freud postulated that the ego delays the satisfaction of id motives and channels behaviours into socially-acceptable outlets. In fact the ego keeps a person working for a living, getting along with other people and adjusting to the realities of life. According to Gabriel (1999) this is something that is accomplished at considerable cost and constant vigilance. The ego seeks to maintain the integrity of self in the face of inner and outer threats through defence mechanisms; an individual initiates a set of psychological processes aimed at averting the danger. The following are the types of defence mechanisms available to the ego:

- Introjection or identification: an individual identifies another person either as an object of admiration or as an object of persecution.
- Regression: the wholesale replacement of a set of instinctual impulses and desires from an earlier stage of development; for example, reversion to childhood or adolescent configurations.
- Reaction-formation: the obliteration of powerful impulses (i.e. especially hostile ones) through a transformation into their opposites.
- Denial: the refusal to acknowledge external reality or stimuli, however threatening.

- Isolation: an idea or memory is acknowledged in consciousness, but the accompanying emotion is rejected; alternatively, an idea or a memory, however painful, may be acknowledged but only if it is dissociated from other related ideas.

Freud also characterized the ego as working in the service of the reality principle.

The third part of Freud's personality structure is the superego; this, according to Freud, corresponds with what is known as conscience. The superego consists of mainly prohibitions learned from the surrounding environment such as parents and other authorities and it is often overly strict. The superego may condemn as wrong certain things which the ego would otherwise do to satisfy the id. It also keeps a person from striving towards the ideals called the ego ideals which are acquired in childhood. The personality structure suggests that almost all humans would otherwise intentionally inflict psychological pain or bully others in their attempt to satisfy their id but are unlikely to engage in behaviours that are intended to psychologically harm others because of their ego and superego. Here the reality principle would suggest to the person that it is wrong, as for example, to spread malicious lies about another person

or to intentionally exclude someone from the activities of the department or to undermine or deliberately impede the work of a colleague.

Freud's theory of **personality dynamics** alludes to the management of the personality's energy systems in which conscious and unconscious and ego defense mechanisms are important concepts. According to this theory Freud initially did not intend to separate personality theories into three components but rather wanted to convey the dynamic as lively, ongoing interplay of its components. Freud further suggested that one of the main functions of the personality system is to manage psychic energy, that is, to satisfy instinctual drives in ways which are congruent with both the demands of the environment and the standard of one's conscience. This is possible by active control and compromise and it does not always happen smoothly. To explain why an individual always acts in ways which seem to be irrational, Freud developed the notion of unconscious motivation and to explain this notion, Freud proposed three states of consciousness or awareness: the conscious and the preconscious. In the conscious state, persons are aware of things around them and their thoughts. The pre-conscious state consists of memories or thoughts that are easily

available within a moment's reflection. In contrast, the unconscious state consists of memories and thoughts which persons cannot easily tap. Some of these, according to Freud, are unavailable because they are preverbal ideas which have never become conscious and may be difficult for a person's conscious, rational state to accept. Others have been pushed from consciousness (repressed) because they are unwanted and disturbing. All of the id and much of the superego are unconscious. According to Morgan *et al* (1979) another aspect of the dynamic interplay of a person's personality component is seen in the defence mechanisms that people use to protect themselves against unpleasant emotions which may be aroused as the primitive id urges seek expression.

Thirdly, a theory of **psychosexual development**, in which different motives predominate at different stages of growth with effects persisting in an adult's personality traits. In this theory Freud put a heavy emphasis on biological development in general and on sexual development in particular. Morgan *et al* (1979) point out that one of Freud's major contributions was to recognize the importance of early childhood; childhood had been considered a matter of waiting until adulthood and child rearing practices had

been given little thought. In this theory Freud emphasized development through a succession of stages focused upon body zones and he believed that if the child's needs were either under satisfied or unsatisfied during a specific stage of development fixation would take place. This fixated period would be reflected in the adult personality. One should therefore be able to recognize the stage at which there had been childhood problems by spotting hold-over behaviours in adults (Baron, 1996).

2.3.2 HUMANISTIC THEORIES

According to Huffman (2002) humanistic theories of personality state that people are motivated by the uniquely human need to expand their frontiers and to realize as much of their potential as they can. Humanistic psychology stresses the creative aspect of people and argues that they are driven by the desire to reach their full true potential. Worchel and Shebilske (1983) point out that often society serves only to force people to act in a conforming, conventional way and inhibit them from reaching their true potential; they further argue that the study of personality should include human virtues which consist of humour, creativity, joy and personal growth.

According to humanistic personality theorists such as Carl Rogers and Abraham Maslow, the motive to develop one's basic potential can take precedence over other motives including motives related to basic biological needs. Also, humanistic theorists rejected the position that humans are inherently evil savages who must be controlled by society; instead, the humanists argued that people are basically good and worthy of respect.

2.3.2.1 CARL ROGERS'S SELF-CONCEPT THEORY

Carl Rogers conceives of the personality as a function of self concept which is the manner in which the person conceives of himself as a whole; this is in contrast to the Freudian theorists. Rogers believed that "we choose our behaviour ourselves in the context of our struggle to find meaning" and in this struggle to find meaning individuals may find themselves abusing others. Furthermore Rogers believed that people have to accept themselves first; this includes their feelings and behaviours. This, according to Worchel and Shebilske (1983), sounds simple, but Rogers maintained that most people deny or hide parts of their own personality and behaviour. This is because of the rules or norms in society which outline a wide range of behaviours

and thoughts that are allowed or permissible. As a result, when people fail to act or conduct themselves in an acceptable manner, they are scorned by those around them. According to Rogers all of us have a need for positive regard from others, that is, to be liked and valued by others. Not only do people try to think and behave in the proper manner or correct way but in the process may deny or reject those parts of themselves that do not conform to the way they think they ought to be; they therefore develop self-concept by accepting certain values and behaviours and rejecting others. The self-concept is crucial because it actually determines who we are and how we act and how we perceive our world. Rogers, however, points out that in the process of balancing the person's inner world against the person's external reality, an individual sometimes shuts out entire areas of experience by rejecting or deliberately misinterpreting perceptions and relationships that conflict with his or her own self-concept (Huffman: 2002).

2.3.2.2 ABRAHAM MASLOW'S SELF-ACTUALIZATION THEORY

Maslow believed that to strive for self actualization is an aspect of human nature which means that people have an innate, inborn drive to be good, to be creative and to grow.

According to Maslow, the role of society should be to create an environment which will encourage these natural tendencies and that if the environmental conditions are right and if people are willing to take the risks to achieve their full potential then personal growth will result (Silverman:1982).

Maslow's theory of self-actualization lies in the notion that each individual has a purpose in life that goes beyond their needs. In fact, individuals seek to fulfill themselves in their own way; that is, to be themselves, to realize their own potential and to find their ideal selves. Maslow further stated that there are external and internal factors that interfere with this striving at different stages of their lives. These factors may block individuals from fulfilling their potential or they may actually serve to strengthen their determination to actualize themselves. In most cases people behave aggressively towards others if they experience difficulties in fulfilling their true potential and sometimes there are people who intentionally inhibit others from fulfilling their true potential. Maslow maintained that as people move towards self-actualization they will experience periods of increased insight and feelings of completeness and of being in harmony with their surroundings. According to Baron (1996) these are the

feelings which Maslow called peak experiences; they are fleeting moments in people's lives where they feel truly spontaneous and unconcerned with time or other physical constraints.

According to Huffman (2002) to extend this theory, Maslow felt that research in personality should focus on studying and examining biographies of people like Albert Einstein, William James, Abraham Lincoln and Eleanor Roosevelt, all of whom Maslow admired and regarded as the only individuals who fully self-actualized. Maslow then drew up the following list of the type of people who have characteristics of self-actualization:

- They have clear perceptions of reality and are able to accept the ambiguities in their environment.
- They are accepting of both themselves and others and have little or no guilt or anxiety about themselves.
- They are imaginative and spontaneous in their thinking and behaving, but not totally unconventional.
- They are problem centred rather than self centred.
- They can be objective about life, but at the same time they can enjoy it.

- They are independent, but not deliberately rebellious.
- They can have powerful ecstatic and even mystical experiences in which they appear to be on the brink of something new.
- They are socially involved and sympathetic to other people, but protective of their privacy.
- They are able to have deep personal experiences but usually only with a few people.
- They are knowledgeable about the differences between means and ends, and not annoyed by having to endure the means to arrive at the end.
- They have a sense of humour that is playful but without hostility towards others.
- They are uniquely creative, that is, uniquely capable of making a major contribution to some field of thought or endeavour.
- They can avoid being controlled by their culture.

2.4 NARCISSISM AND WORKPLACE BULLYING

Freud created the term narcissism to denote self-love, viewing it as a natural component of the human psyche. Board

and Fritzon (2005) argue that the bullying phenomenon fits well with the psychological theory of narcissism. Baron, Byrne and Branscombe (2006) point out that narcissists are particularly attracted to managerial roles. A narcissistic manager expects his subordinates to provide narcissistic supply, thus helping to support his deluded self-sense of self. Consequently he or she likes to be surrounded by sycophants. Clearly, a narcissist is a flawed and inadequate person. The false self image of a narcissist is that of a perfect and superior person who can do no wrong. Narcissistic managers are therefore often be referred to as "control freaks".

The narcissistic rage is synonymous with bullying and allows a narcissist to offload a sense of shame and negative feelings about self on others by blaming them, and thus deluding herself or himself. This process is known as psychological projection. Elliot (2002) points out that when aggression is projected outwards and deflected on to others through projective identification it rounds back upon itself in a persecutory manner. Also, a narcissist manager often treats gifted subordinates and peers as a threat and is envious of them, fearing the risk that their abilities expose his or her own inadequacies. A narcissistic injury

can be triggered by criticisms of the narcissistic manager which in turn causes narcissistic rage simply because the criticism has reminded the narcissist of his or her true self; already the person is in denial and a resultant narcissistic rage can manifest itself on an ongoing basis. For example, the serial bully's victims are selected on the basis of perceived vulnerability. The negative impact of a narcissist on a victim is likely to result in the victim's loss of self-confidence, depression or post-traumatic stress disorder (Board and Fritzon: 2005).

2.5 NARCISSISTIC PERSONALITY DISORDER (NPD) AND WORKPLACE BULLYING

Namie (2006) states that according to DSMIV-TR, the narcissist exhibits a pervasive pattern of grandiosity, and has a need for admiration; the lack of empathy begins by early adulthood and presents in a variety of contexts. Also, some psychoanalysts hold that this disorder is rooted in a dysfunction during the formation of the parent-child bond, beginning in infancy. NDP is often cited by psychologists and criminologists as the source of overabundance of antisocial behaviours and violent crimes. These are indicated by the following characteristics:

- has a sense of entitlement such as unreasonable expectations of especially favourable treatment or automatic compliance with his or expectations.
- is interpersonally exploitative by taking advantage of others to achieve his or her own ends.
- lacks empathy in that he is unwilling to recognize or identify with the feelings and needs of others.
- is often envious of others or believes that others are envious of him or her and shows arrogant and haughty behaviours.
- preoccupied with fantasies of unlimited success, power and brilliance.
- has a grandiose sense of self-importance and expects to be recognized as superior without commensurate achievements.
- requires excessive admiration.
- believes that he is special and unique and can only be understood by or should associate with other high status people or institutions.

2.6 ANTISOCIAL PERSONALITY DISORDER AND WORKPLACE BULLYING

The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR) defines Antisocial Personality Disorder as encompassing pervasive pattern of disregard for and violation of rights of others that begins in childhood or early adolescence and continues to adulthood as indicated by:-

- Deceitfulness as indicated by repeated lying or conning others for personal pleasure.
- Irritability and aggression as indicated by repeated assaults or conflicts.
- Reckless disregard for the safety of others or lack of remorse as indicated by being indifferent to or rationalizing after having hurt or mistreated another person.
- Failure to conform to social norms with respect to lawful behaviours as indicated by repeating acts that are grounds for arrest (Namie: 2006).

2.7 WORKPLACE BULLYING AND THE PSYCHOPATH

According to Hare and Babiak (2006) bullies react aggressively in response to provocations or perceived insults. It is unclear whether their bullying gives them pleasure or is just the most effective way they have learned to get what they want from others. However, psychopaths who bully do not feel remorse, guilt or empathy; in fact they lack insight into their own behaviour and seem unwilling to moderate it even if it is to their own advantage. They seem unable to understand the harm they do to themselves.

Hare and Babiak (2006) believe that not all bullies are psychopathic though this may be of little consolation to their victims. Bullies come in many psychological or physical shapes and sizes. In most cases bullies have deep-seated psychological problems including feelings of inferiority and difficulty in relating to others. Hare and Babiak (2006) further state that some may simply have learned at an early stage that their size, strength or verbal talents were the only effective tool they had for social behaviour.

2.8 THE RELATIONSHIP BETWEEN MACHIAVELLIANISM AND WORKPLACE BULLYING

Machiavellianism is another important personality traits named after Niccolo Machiavelli, a sixteenth century author. Machiavellianism is a personality trait that results in behaviour directed at gaining power and controlling the behaviour of others. Moorhead and Griffin (1995) provide that Machiavelli explained how the nobility could more easily gain and use power. Wilson, Near and Miller (1996) maintain that, the Machiavellian character believes that other people can be manipulated in interpersonal situations and actively engages in manipulative, exploitative behaviour for his or her own gain and this manipulative tendency appears to be accompanied by a cool detachment in interpersonal relations and indifferent to conventional standards of morality. According to Namie (2006) Machiavellians manipulate and exploits others to advance their perceived personal agendas but he emphasizes that they are not mentally ill. They do not have a personality disorder, schizophrenia and neither they are psychopaths. Machiavellianism represents the core of workplace bullying.

Greenberg and Baron (2003) state that Machiavelli required those who desired power to adopt an approach based totally on expedience and not be swayed by friendship, loyalty or beliefs about decency and fair play. A truly successful leader, he suggested should always be above these factors. Greenberg and Baron (2003) further point out that the following are the guiding principles of Machiavellianism:

- Never show humility: Arrogance is far more effective when dealing with others.
- Morality and ethics are for the weak: Powerful people feel free to lie, cheat and deceive others when it suits them.
- It is much better to be feared than loved.

Among other things, high Machiavellians may be expected to do the following:

- Neglect to share important information.
- Find subtle ways of making another person look bad to management.
- Fail to meet their obligations.
- Spread false rumors about another person.

A scale known as Machiavellianism personality scale was created by the psychologist Richard Christie who believed that Machiavellians demonstrate the following:

- A distorted view of human nature: they show a relative lack of effects on interpersonal relationships and they view others as objects to be manipulated rather than as humans with whom to have empathy.
- No conventional morality: all interactions are viewed as utilitarian ("what's best for me") regardless of immorality or amorality.
- No gross psychopathology: Machiavellians are reality-based, however the evaluation of others and situations can be distorted by emotions.
- Low ideological commitment: Machiavellians are not idealistic people driven by high-minded principles, instead they focus on tactics.

2.9 A TYPOLOGY OF BULLYING

Recent bullying research has sought to explain bullying by the types of behaviours practiced by bullies. Egan (2005) in Kelly (2006) suggests that, bullying behaviour moves along the continuum with three clearly identifiable types thus indicating differences in bullying behaviours. The basis for the typology reflects the motivation, intentionality, responses to challenges and capacity for coaching. Egan

(2005) in Kelly (2006) further argues that narcissistic bullying is further along the continuum of severity. It is often evident in highly-motivated or talented individuals and is characterized by destructive, self-absorbed attitudes and behaviours, a lack of empathy, blaming, nitpicking, devaluing others and lying, including taking credit for the work of others. The most destructive behaviour is that of a psychopathic bully who deliberately wishes to destroy others through fear, whispering campaigns and destabilization. Furthermore, Egan (2005) in Kelly (2006) points out that psychopathic bullies have considerable capacity to bring about widespread confidence in their abilities and are highly effective at managing upwards meaning that their destructive behaviours do not become apparent for some time. Here is the table depicting a typology of bullying according to Egan (2005) in Kelly (2006).

Types of bully/ Attributes and response	Under pressure (accidental)	Vulnerable insecure (Narcissistic)	Psychopath
Motivation	Achievement Following orders Survival	Praise Recognition Entitlement	Self-interest Power Money
Degree of intentional harm	Harm to others is unintentional A lesser evil in service of organizational goals Expert resilience	Justifies harm to others for own psychological survival; shame prone, may pay back for humiliation	Plans harm to others in interest of self; gratuitous violence and covert assaults
Fragmented Responses to effective challenges	Anxiety Rages Depression Agitation	Rage, anxiety Defends grandiose view of the self Tragi-comic, ridiculous claims	Threats including litigation; plays the victim; criminality unmasked, risks exposure, bullying behaviour intensifies
Coachability	May have lost sight of both goals and humanity Can be confronted and coached Can change with acceptable costs	Counselling can develop with considerable personal development work; Organization must uphold vision and values; uphold strong limits and considerable but talents may be worth it	Cannot change with counselling or therapy Self interest predominates; resists accountability; costs will always outweigh imagined benefits; Organization should seek exit

2.10 THE DIFFERENT TYPES OF BULLYING

2.10.1 CORPORATE BULLYING

Corporate bullying occurs when the employer abuses employees knowing that punishment is unlikely because of the weak laws

of the country, job security or the high rate of unemployment. Corporate bullying includes the following:-

- Forcing employees to work long hours a day then making life unpleasant for anyone who objects.
- Introducing absence management to deny employees annual or sick leave to which they are genuinely entitled.
- Encouraging employees to fabricate complaints about their colleagues with promises of promotions or threats of disciplinary action.
- Dismissing anyone who looks as though he or she is stressed as it is believed that it is cheaper to pay the costs of unfair dismissal at the Commission for Conciliation Mediation and Arbitration (CCMA) or Labour Court than the risk of facing a personal injury claim for stress.
- Deeming any employee suffering from stress as weak and inadequate whilst aggressively ignoring and denying the causes of stress (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.2 INSTITUTIONAL BULLYING

This type of bullying is similar to corporate bullying and arises when bullying becomes entrenched and accepted as part of the culture of the organization. With this type of bullying, employees are usually moved around the organization. In addition long existing contracts are usually replaced with new short-term contracts on less favourable terms with the accompanying threat of job loss if terms are not accepted. With institutional bullying employee workload is increased without consulting employees concerned, work schedules are changed, roles are changed, and worse still, those employees with a desire to hold top management positions sometimes find that their career paths are intentionally blocked and sometimes their contracts are even terminated (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.3 UNWITTING BULLYING

With this type of bullying, the perpetrator tends to bully others because of pressure exerted on the individual. Here the bully becomes short-tempered and irritable and sometimes he or she shouts or swears at others. It is argued that everybody from time to time is subjected to pressure of some

sort, but when the pressure is removed the behaviour returns to normal. Thereafter the individual recognizes the inappropriateness of his or her behaviour makes amends and may apologize. The unwitting bully learns from the experience so that next time the situation arises he or she is better able to deal with it. Unwitting bullying corresponds with one of the determinants of personality which involves situational factors where the situation an individual finds himself in determines the personality. In other words bullying is not intentional but it is perpetrated when in a particular situation (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.4 ORGANIZATIONAL BULLYING

Organizational bullying occurs when the organization struggles to adapt to changing markets, reduced income and lowered budgets. It is in fact a combination of unwitting bullying and corporate bullying. From time to time people at work are subjected to pressures because of the challenges of change; this in most cases occurs when employees are not sure of whether they will form part of the future plans of the organization or not (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.5 CLIENT BULLYING

Bullying is not only entrenched in the relationship between the employer and the employee, but it also occurs where employees are bullied by those they serve. For example, nurses are bullied by patients and sometimes their relatives; teachers are bullied by students and sometimes their parents. Clients bully when they claim their perceived right "the customer is always right"-even if they abuse those who serve in a derogatory manner. For example, in 2007 it was reported in the Sunday Times that the National Minister of Health abused her powers when she demanded to be served with alcohol while in hospital. McCarthy and Mayhew (2004:24) argue that, across industrialized countries, the incidents and the severity of client-initiated violence appears to be increasing. The causes for the increase in aggression are complex and include, among other aspects, the polarization of the population in many countries where there are small minorities of very wealthy individuals and larger groups of welfare-dependent working class poor families or groups.

2.10.6 SERIAL BULLYING

Research shows that serial bullying is the most common form of bullying; the bully picks one employee after another with the aim of destroying them. Here the perpetrator becomes the source of all that is dysfunctional in the section or department of the organization. The serial bully exhibits the characteristics of a social psychopath. They also gain a great deal of gratification from encouraging others to engage in conflict, especially those who might otherwise pool negative information about them (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.7 SECONDARY BULLYING

This type of bullying is similar in some ways to unwitting bullying and it usually occurs when there is a serial bully in the department or section of the organization. As a result the pressure of trying to deal with a dysfunctional and aggressive serial bully may cause everyone's behaviour to decline in trying to protect themselves from the bully. (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.8 PAIR BULLYING

This is serial bullying with a colleague where one often does the talking whilst the other observes or watches and listens. In most cases it is the quiet one that needs to be watched. Usually they are of opposite genders and frequently they are having an affair (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.9 GANG BULLYING

Gang bullying is often called mobbing and usually involves scapegoating and victimization. Gang bullying is a serial bully with colleagues; it is true that gangs can occur anywhere and even flourish in a corporate bullying climate. A common tactic of gang bullying is for the bully to tell everybody a different story about others. For example, about what others are alleged to have said about that person and he or she encourage each person to think that they are the only ones with the correct story. Also, if the bully is an extrovert, he or she is likely to be leading from the front. In fact they may also be a shouter and screamer and thus easily identifiable. Research indicates that if the bully is an introvert, he or she is usually in the background initiating disorder and confusion and probably not taking an

active part in that confusion and it may be difficult to identify those individuals. Research further indicates that introverted bullies are probably the most dangerous bullies because of the nature of their personalities; they can be relaxed and withdrawn (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

Some of the people in the gang gain gratification from the feeling of power and control and enjoy the patronage, protection and reward from the serial bully whereas others are coerced into joining in, usually through the fear of being the next target if they don't.

2.10.10 VICARIOUS BULLYING

With vicarious bullying, two parties are encouraged to engage in adversarial interaction or conflict. This is similar to gang bullying, although the bully may or may not be directly connected with either of the two parties. With this type of bullying one party becomes the bully's instrument of harassment and is deceived and manipulated into bullying the other party. For example, vicarious bullying is where the bully creates conflict between the employer and the employee. The person may participate

occasionally to stoke the conflict but rarely actually takes part in the conflict; the aim mainly is to create tension between parties (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.11 REGULATION BULLYING

Regulation bullying is where a serial bully forces their targets to comply with rules, regulation and procedures or laws regardless of their appropriateness or necessity (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.12 RESIDUAL BULLYING

This is the bully who continues to bully even after the serial bully has left. He or she recruits and promotes like the serial bully (Retrieved July 17, 2007 from World Wide Web <http://www.bullyonline.org>).

2.10.13 CYBER BULLYING

Cyber bullying is the misuse of e-mails or internet for sending aggressive mails aimed at belittling others or inflicting psychological pain. In the workplace where

bullying is a norm, most employees eventually either become bullies or become targets. It is about survival; people either adapt to bullying tactics and then survive by not becoming a target or they stand up to bullying and refuse to join in. On the other hand a person can be bullied, harassed and victimized until his or her health is so severely impaired that he or she has a stress breakdown which is considered a psychiatric injury rather than mental illness. Sometimes a person may be forced to consider taking retirement because of ill-health or finds himself or herself unexpectedly selected for redundancy or is unfairly dismissed (Retrieved July 17, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.10.14 HIERARCHICAL BULLYING

The majority of bullying cases involve the individual being bullied by those in a position of power such as line managers and supervisors. Sometimes peers may bully their colleagues and it becomes a problem when the manager refuses to take action against the bully and in some cases the manager may even be involved in the act. Other cases involve the subordinate refusing to co-operate with the manager or supervisor by intentionally refusing to take orders from the

manager. In South Africa hierarchical bullying is very common, especially where female employees are in the position of power; they usually encounter resistance from male subordinates who believe that a women's place is in the kitchen (Retrieved July 17,2007 from World Wide Web: <http://www.bullyonline.org>).

2.11 MOTIVES FOR BULLYING

2.11.1 FEAR OF BEING OUT-PERFORMED

The fear of being out-performed is one of the common reasons for bullying in an office setting but it is by no means limited to the office. A person who is afraid of a more capable and competent colleague will often use obstructionist tactics to impede that person's performance. Examples include withholding important information, refusing to train new employees and sometimes the bully will try to monopolize supplies or resources to be used in the production process. Hoel, Zapf and Cooper (2005) argue that the bully may try to hide his or her incompetence by harshly and constantly criticizing the performance of a more competent worker.

2.11.2 PREJUDICE

Greenberg and Baron (2001) define prejudice as negative attitudes towards members of specific groups, based solely on the fact that they are members of those groups. Baron, et al (2006) point out that prejudice comes into play when less desirable jobs and special forms of mistreatment are reserved for certain groups of employees based on race, gender, religion, political affiliation or opinion, disability or sexual orientation. Gender stereotypes are common in most workplaces.

2.11.3 LAZINESS

This motive for bullying occurs when a productive or an efficient worker is forced or coerced into performing the work of one or more less productive co-workers. A lazy worker will try to avoid work by coercing his co-workers into performing his duties for him. This in turn causes a decline in productivity as more productive team members must spend a substantial amount of their time or workday performing the lazy worker's tasks. It also causes predictable personality conflicts as the more productive team members complain about the work load and the less productive member tries to defend his or her actions. In

fact, the most basic motive for bullying in this case is to enjoy the rewards of having a job without doing the work (Hoel et al: 2005).

2.11.4 DEMONSTRATION OF AUTHORITY

With this motive, a manager or a supervisor may assign meaningless or unrewarding or even humiliating tasks to an employee just to prove that people must obey him or her (Peyton: 2003).

2.12 TACTICS OF BULLIES

2.12.1 CONSTANT CRITICISM

This is an attempt by the bully to undermine the victim's self-confidence. Pearson (2001) states that, by exaggerating the victim's mistakes, the bully intends to make the victims look incompetent in the eyes of co-workers; this makes his or her own work look better by comparison or divert attention from his own mistakes. Often the bully will expand his criticism to the private and social life of the victim. The victim will simply be criticized by the bully no matter how well he performs his duties.

2.12.2 ISOLATION

This, according to Peyton (2003), is a tactic intended to separate the victim from the social circles and information networks. Being cut off from all social and business interaction, the victim is more vulnerable to the bully's threats and verbal assaults. The bully, in this case, makes use of the divide and conquer strategy.

2.12.3 MONOPOLIZING

With monopolizing the bully works himself or herself into a position in which he or she is the only source of certain important information; the victim is then left with a choice of submitting to the bully or doing without the necessary information, facts and supplies. The victim gets what he or she needs only if the bully gets what he or she wants (Pearson, 2001).

2.12.4 FALSE DOCUMENTATION

False documentation is an effective tool for the bully when the bully claims that complaints have been brought forward about the victim's behavior. Leichtling (2007) provides that the bully will either fabricate an incident or misdocument

regarding a real event in order to place the blame on the victim. The bully will also refuse to identify the complainants citing the organization's confidentiality policy and saying that he or she wants to prevent retaliation. In reality, the bully is preventing the victim from investigating the complainant to disprove the allegations. Peyton (2003) further states that, the bully uses the organization's policies to achieve control over his co-workers. False documentation is most common in organizations that do not have at will hiring or dismissal policies, since the manager needs not give a valid reason for dismissing employees he or she personally dislikes (Pearson: 2001).

2.12.5 GOSSIP

This is a form of mobbing and perhaps the most common tactic of workplace bullying. Leichtling (2007) argues that, with gossip the bully starts a rumour about the victim. As the rumor spreads through the workplace the victim finds himself or herself the subject of suspicion. Gabriel (1999) points out that this is where psychoanalysis can make a contribution. Non-psychoanalytic approaches may content themselves by arguing that, to defend their interests,

bullies lie, distort and disregard inconvenient facts. On the other hand the psychoanalytic approach envisages a possibility where individuals deceive themselves without actually lying or being devious or disingenuous. Since the bully often controls the victim's contact with co-workers, he/ she has no way of knowing what is being said behind his or her back. Colleagues who have little information or were hired after the victim may judge him or her by the bully's gossip rather than by performance. This correlates with what Robbins, Odendaal and Roodt (2003) called performance expectations, and where they argue that there is an impressive amount of evidence that demonstrates that people will attempt to validate their perceptions of reality, even when those expectations are faulty. The rumours that are spread by the bully are about turning the co-workers against the victim.

2.12.6 STEALING THE CREDIT

With stealing the credit the bully places himself in a position in which he can claim credit for the victim's efforts and ideas especially if the victim is not in a position to record or document his or her efforts. As a result, the bully gets the rewards while the victim is stuck with all the work (Pearson: 2001 and Leichtling: 2007).

2.12.7 VERBAL ABUSE

Verbal abuse is often used by the bully to attack the victim personally. Leichtling (2007) points out that verbal abuse includes, but is not limited to, shouting, profanity and racial or ethnic slurs. Pearson (2001) states that it may also include giving the victim or target a disrespectful nickname or subjecting him or her to a constant stream of insults.

2.13 MANAGEMENT MISTAKES WHEN DEALING WITH BULLYING

2.13.1 BELIEVING THE GROUP

Believing the group means taking the word of multiple employees over that of the victim under the assumption that the majority is always right; the Abilene Paradox comes into play when the bully gets into conflict with colleagues. According to Harvey (1988) the Abilene Paradox is a paradox in which the limits of a particular situation force a group of people to act in a way that is directly the opposite of the group's actual preferences. This is a phenomenon which occurs when the group continues with misguided activities which no member desires because no member is willing to raise objections.

2.13.2 BLAMING BOTH PARTIES

This according to Rayner, Hoel and Cooper (2002) is an even more serious mistake committed by management. The manager usually punishes the bully for aggression, but also punishes the victim for failing to get along with the bully. The manager ignores the possibility that the bully is to blame for creating conflict in the workplace.

2.13.3 BLAMING THE VICTIM

Smith (2007) points out that when blaming the victim, instead of acting against the bully the manager may simply order the victim to stop complaining. If the victim continues to lodge complaints about the bully's behavior, the manager may discipline the victim or sometimes may come to the bully's defense. As a result the victim may suffer at the hands of the bully and at the hands of management. Olsen (2007) states that the temptation that many in senior management positions face when a complaint surfaces, is to protect the bully and further victimize the complainant. The complainant leaves shortly after and this may appear to have resolved the problem; however, the opposite is true. The bully has been rewarded and the message to other employees

is, "Don't complain or rock the boat" meaning put up with it or leave.

2.13.4 ENCOURAGING TEAM WORK AND IGNORING INDIVIDUAL EFFORT

Usually the victim is an independent thinker, creative, productive and innovative whose ideas often produce positive results for the organization. However, in today's world of work the emphasis is on team effort rather than individual effort. Rayner *et al* (2002) point out that management tends to dislike subordinates who think for themselves regardless of how good their ideas are. This mistake makes it easy for the bully to accuse the victim of not being a team player.

2.13.5 IGNORING THE ISSUE

By ignoring the issue, management may believe that the problem will automatically vanish if the bully's behavior goes unpunished. A bully who goes unpunished, according to Rayner *et al* (2002), has no logical reason to act in a less severe way towards the victim and it may even escalate to physical violence. Ignoring the issue may represent or involve wishful thinking on the part of the manager.

2.13.6 APPEASEMENT

This approach assumes that the bully's aggressive behavior will cease when given what he wants or desires. According to Rayner *et al* (2002) history has proven this approach to be counter-productive. A person who uses aggression to satisfy his desires has no logical reason to stop being aggressive. The bully may calm down for a while when given what he or she wants, but may resume, and possibly escalate his or her aggressive behavior when he or she wants something.

2.14 SITUATIONS AT SPECIAL RISK

In 2002 the ILO/ICN/WHO/PSI published situations that have been identified as being at special risk in the workplace and further pointed out that health-care workers are exposed to the entire range of such situations of risk and this makes this category of workers unique in terms of the importance and spread of workplace violence. According to Di Martino (2003) some situations of work-related violence highly correlate with stress.

2.14.1 WORKING ALONE

Employees working alone are at special risk of suffering from physical and sexual abuse. Di Martino (2003) further points out that this is more evident in the health sector where nurses in particular are expected to render their services to the patients in the form of night shifts. These types of abusive behaviours can be perpetrated by either the supervisor or an employee's colleague.

2.14.2 WORKING IN CONTACT WITH THE PUBLIC

A wide range of occupations, including many in the health sector, involve direct contact with the public. This exposure to the public may generate higher risks of violence directed at the employee (Di Martino: 2003).

2.14.3 WORKING WITH PEOPLE IN DISTRESS

Frustrations and anger arising out of illness, pain and psychiatric disorders, alcohol and substance abuse, can affect behaviour and make people verbally and physically violent. The incidence of violence faced by employees in contact with people in distress is so common that it is often considered part of the job. Health care employees are

usually at the forefront of this situation (Di Martino: 2003).

2.14.4 WORKING WITH OBJECTS OF VALUE

Wherever valuables are or seem to be within easy reach, there is always a risk that crime, and increasingly violent crime, may be committed. Employees in the health sector such as cashiers and those dealing with the dispensing and storage of drugs are exposed to such a risk (Di Martino: 2003).

2.14.5 WORKING IN AN ENVIRONMENT INCREASINGLY OPEN TO VIOLENCE

Violence in health care settings, which was traditionally concentrated in a few areas such as emergency services, is now progressively spreading to all areas of work (Di Martino: 2003).

2.15 THE NATURE OF AGGRESSION

According to Baron and Byrne (2003) many explanations for aggression have been offered but none has as yet been universally adopted by social psychologists. They therefore

define aggression as any form of behaviour that is directed towards the goal of harming or injuring another living being, who is, or may be motivated, to avoid such treatment. However, bullying is different from aggression in that aggression may involve a single act whereas bullying involves repeated attacks against the target, creating an ongoing pattern of behaviour. For example, tough or demanding managers or supervisors are not necessarily bullies as long as their primary motivation is to obtain best performance by setting high expectations (Hewstone, Stroebe and Jonas: 2008).

2.15.1 CHARACTERISTICS OF AGGRESSION

2.15.1.1 AGGRESSION IS BEHAVIOUR

Aggression is not an emotion, need or motive but a form of behaviour. It is therefore important to distinguish it from emotions that may or may not accompany it such as anger. This brings to mind the question of whether people behave aggressively towards others because of anger or because they enjoy seeing others suffer. Motives may or may not underlie it. Is the motive or the desire to inflict pain or is eliciting a negative reaction from the victim a reward for the bully (Myers: 1993).

2.15.1.2 AGGRESSION AND INTENTIONS

From the definition, Baron and Byrne (2003) argue that aggression limits application of term to actions in which an aggressor intends to harm the victim. The notion of intent raises questions and several difficulties. Baron and Byrne (2003) states that intentions are hidden and private events, and as such they must be inferred from events that both precede and follow the event of aggression. They further point out that, firstly, if all mention of intent were eliminated, it would be necessary to view instances in which one individual accidentally harms another as aggression. This explanation makes little sense. Secondly, if the notions of intent were excluded, it would be necessary to view, for example, actions of the dentist, the surgeon and even parents when spanking their children, as aggression since the actions by such persons are designed to help rather than harm the recipients. Baron and Byrne (2003) argue, however, that it would be unreasonable to describe these actions as aggressive in nature. Lastly, if the notion of intent was excluded, instances in which attempts to harm or injure others are made, but fail, would not be labeled as aggression, this too makes little sense.

2.15.1.3 AGGRESSION IS DIRECTED TOWARDS A LIVING RECIPIENTS

When aggression is directed towards a live recipient, the definition provided by Baron and Byrne (2003) suggest that an assault against a living being qualifies as aggression; this assault could be psychological, physical and emotional.

2.15.1.4 AGGRESSION INVOLVES AVOIDANCE-MOTIVATION

The final part of the definition states that aggression occurs only when the victim is motivated to avoid/accept such treatment by the aggressor; this, in most cases, according to Baron and Byrne (2003) is true-with exceptions. For example, some individuals enjoy being hurt by their lovers and may invite, rather than shun, this kind of treatment.

2.16 THEORETICAL PERSPECTIVE ON AGGRESSION

Aggression has always been one of the central mysteries of human behaviour; for example, the question that has troubled many social psychologists, scholars, researchers and philosophers is how creatures capable of love, kindness, loyalty and gratitude can be capable of so much cruelty

towards others. Certain people feel so little for their fellow human beings that they act cruelly and even seem to enjoy the victim's discomfort (Olsen: 2007).

Baron and Byrne (2003) indicate that the roots of violence can be attributed to the following:-

2.16.1 AGGRESSION AS INNATE BEHAVIOUR

The best known explanation for the occurrence of human aggression is the instinct theory. This theory suggests that human beings are somehow programmed for such behaviour. The famous supporter of this view was Sigmund Freud who believed that aggression stems from a powerful death instinct and these instincts are possessed probably by all human beings. Penrod (1983) states that, according to Freud, human beings have a natural disposition to aggression that must be controlled in a socially acceptable manner. Freud further argued that these instincts are initially directed towards self-destruction but can ultimately be redirected outwards and serves as a source of hostile impulses towards others. Freud believed that such impulses build up with the passage of time. If these instincts are not released periodically in safe ways they soon reach dangerous levels capable even of

producing strong acts of violence in the workplace because of the nature of the environment; this aggression may not necessarily involve physical violence but manifest itself in psychological harm. Sears, Freedman and Peplau (1985) point out that another explanation that is related to innate tendencies is proposed by ethnologist Konrad Lorenz. Lorenz maintains that aggression springs mainly from what he labelled as a built-in fighting instinct that human beings share with other species. Lorenz argues that this instinct developed during the course of evolution as it produces benefits for the species. For example, fighting serves to disperse a population over a wide area thus ensuring maximum use of available resources; this helps to strengthen the genetic make up of the species by assuring that only the strongest and most vigorous individuals survive. How does Konrad Lorenz's explanation relate to violence in the workplace? It relates to violence in the workplace by suggesting that as people struggle to maintain their position in the workplace they are likely to push others out of their way or to be seen as alpha beings in the work environment by belittling others (Aronson, et al: 1994).

2.16.2 AGGRESSION AS AN ELICITED DRIVE

Many Social Psychologists tend to favour an alternative view that aggression stems mainly from an externally-elicited drive aimed at harming or injuring others. Drive theories suggest that various external conditions which include, but are not limited to, frustration and physical pain, serve to evoke a strong motive to engage in harm-producing behaviours which in turn lead to the performance of overt assaults against others (Baron and Byrne: 2003).

2.16.3 AGGRESSION AS LEARNED SOCIAL BEHAVIOUR

A third theoretical explanation of the nature of human aggression, which has gained popularity in recent years, is the social learning view and this explanation has gained increasing acceptance. This explanation was supported by Bandura in 1973, Baron in 1977 and Zillman in 1979. Aronson, *et al* (1994) state that the social learning view emphasizes the fact that aggression should be viewed as a learned form of social behaviour. Contrary to the instinct theory, social learning theory argues that human beings are not born with large arrays of aggressive responses at their disposal, but they learn these in much the same way that they learn other complex forms of behaviours. Supporters of this theory

further suggest that in order to fully understand it attention should be paid to the following three basic issues:-

- the manner in which such behaviours are acquired.
- the rewards and punishment associated with its performance.
- the social and environmental factors that influence the perpetrator.

For example, some males in an organization find difficulty in receiving instructions from a female supervisor; the root causes of such behaviour can be traced back to the learning in society where males are encouraged to be strong, while dominating females, and sometimes white employees, who were raised to believe that they were superior to blacks, often find it difficult to receive instructions from black managers or supervisors.

2.17 WORKPLACE BULLYING AND LAW: INTERNATIONAL

EXAMPLES

2.17.1 BULLYING LAWS IN CANADA

On 1 June 2004, the Canadian province of Quebec introduced pieces of legislations aimed at addressing psychological

violence in the workplace. In an act representing labour standards, it is clearly stated that psychological harassment is prohibited and the commission Des Normes du Travail is the organization set up and tasked with the responsibility for the application of the Act. Also, the Ontario Occupational Health and Safety Act passed in 1979 encourages all employers to take every reasonable precaution in the protection of employees in the workplace. This Act calls for the establishment of joint Occupational Health and Safety Committees for large organizations (Retrieved October 25, 2007 from World Wide Web: <http://www.en.wikipedia.org>).

2.17.2 BULLYING LAWS IN THE UNITED KINGDOM

In the United Kingdom bullying is not specifically mentioned in its labour legislations. There are, however, means put in the country's labour legislation to obtain legal redress for bullying. For example, the Protection from Harassment Act passed in 1997 is said to be the most recent addition to the more traditional approaches using employment legislation. Also, in every employment contract in the United Kingdom, parties to the contract have a legal duty of trust and confidence in each other; as a result, bullying or an employer tolerating bullying typically breaches that

contractual term. This breach creates an environment which enables the employee to terminate his or her contract of employment without notice. Consequently this can lead to a finding by a Labour Court of unfair dismissal referred to as constructive dismissal. In the United Kingdom an employee bullied in response to asserting a statutory right can be compensated for the detriment under part V of The Employment Right Act passed in 1996 and if dismissed Part X of the same Act also provides that the dismissal is automatically unfair (Retrieved October 25, 2007 from World Wide Web: <http://www.en.wikipedia.org>).

2.17.3 BULLYING LAWS IN SWEDEN

The ordinance of the Swedish National Board of Occupational Safety and Health Act covers workplace bullying and it contains measures against victimization at work. This Act provides that it is the responsibility of the employer to plan and organize work so as to prevent victimization and to make it clear to employees that victimization of other employees is not acceptable. On the other hand, the employer must be able to detect early signs of bullying behaviour; employers are obliged to have prompt counter measures to deal with victimization and to ensure that support measures

are put in place to assist employees who have been targeted
(Retrieved October 25, 2007 from World Wide Web:
<http://www.en.wikipedia.org>).

2.17.4 BULLYING LAWS IN THE UNITED STATES OF AMERICA (U.S.A)

Research shows that in the U.S.A court action based on the workplace bullying is problematic at best; this is because a plaintiff must prove that bullying actually occurred, that the bully's action falls into at least one form of bullying and, lastly, that the plaintiff's subsequent problems stemmed from the bully's actions. Moreover, in America only five states have legislation against workplace bullying pending. To date no state has ever passed laws against it or laws against creating or maintaining a hostile work environment. (Retrieved October 25, 2007 from World Wide Web: <http://www.en.wikipedia.org>).

2.17.5 BULLYING LAWS IN AUSTRALIA

In Australia each state has its own pieces of labour legislation which address bullying in the workplace. In Queensland there is no law against workplace bullying but anti-discrimination and stalking laws could be used to

prosecute if appropriate (Retrieved October 25, 2007 from World Wide Web: <http://www.en.wikipedia.org>).

2.18 THE EFFECTS OF BULLYING

Bullying behaviour is one of the most destructive forces eroding the professional lives of men and women who have to go to work everyday to support their families and themselves. The unpredictable behaviour and conduct, including the often unseen aggression of a bully boss, engenders fear and paranoia in large numbers of employees. In fact it makes their lives miserable and leaves them full of self doubt. It also contributes to their poor work performance, prolonged sick leave and is a high source of absenteeism. Workplace bullying can harm the health of the victims with the most common conditions being stress-related. Work is generally beneficial to mental health and personal wellbeing as it provides people with structure, purpose and a sense of identity. It also provides opportunity for people to develop and use their skills to form social relationships and to increase their feelings of self-worth. However, there are circumstances in which work can have adverse effects on the health and wellbeing of those who are on the receiving end of bullying behaviour.

According to Hoel, Sparks and Cooper (2001) contrary to many views, some employees can react to bullying by working harder; it is as though to demonstrate commitment and performance in the face of the threat posed to their self-esteem and position in the organization.

2.18.1 THE INDIVIDUAL EFFECTS OF BULLYING

According to Poilpot-Rocaboy (2006) several studies indicate that bullying has extremely negative effects for the individuals concerned. She further points out that there are three individual consequences: Firstly victim's physical and mental health can deteriorate. Also, the health problems experienced by victims of bullying result in a sense of helplessness and negative emotional states among employees. Low self-esteem and a negative organizational climate suppress creativity and hampers employees' abilities to respond to difficult situations or challenging goals.

Einarsen and Mikkelsen (2003) state that typically, research points to increased stress levels and reduced physical and psychological wellbeing with the most frequently identified negative health-related outcomes being anxiety, depression and psychosomatic symptoms, aggression and the inability to

concentrate or think clearly. Einersen and Mikkelsen (2003) further argue that workplace bullying not only affects the target but also colleagues or bystanders and that witnesses of bullying reported more mental stress reactions than workers who had not witnessed anyone being bullied in their departments. Also, witnesses may suffer due to a real or perceived inability to help the targets.

According to Leymann and Gustafsson (1996) and Namie (2003) in the most severe cases of bullying, victims have been diagnosed with post-traumatic stress disorder which is the pinnacle of stress symptoms typically displayed by victims of exceptionally traumatic events.

The second individual effect of bullying is the economic consequence for the victim; this includes a real loss of income. Bullying may generate coping strategies and health effects which can develop into sickness absence, a lessening of productivity, resignation from the organization and work incapacity due to loss of self-confidence. The third individual effect of bullying is the family and social implications. The consequences of being a victim of bullying are likely to affect several important spheres of life such as relationships with family and friends, household duties

and sex life. This is because people who are bullied tend to be withdrawn or become less interested in life because of the fact that they are always depressed. Einersen and Mikkelsen (2003) report that in German national study of bullying a total of 20 % of the sample reported conflicts with partners or family, with 8.2% of these eventually leading to separation from their spouses. Bullying can disrupt work to the extent that action has to be taken to restore order and confidence. The implications are even more serious if bullied employees suffer ill-health and stay away from the workplace. The reactions of the individual employees will vary according to the nature of the bullying. It is possible that employees who are bullied may experience some of the following:

- Stress, anxiety or sleep disturbance.
- Panic attacks or impaired ability to make decisions.
- Incapacity to work, concentration problems, loss of self-confidence and self-esteem or reduced output and performance.
- Depression and a sense of isolation.
- Physical injury
- Reduced quality of home and family life.

2.18.2 THE ORGANIZATIONAL EFFECTS OF BULLYING

According to Poilpot-Rocaboy (2006) bullying is very costly for the organization and therefore not only a problem for the individual but also for the organization as a whole (See Appendix: D). Where bullying is accepted as good robust management, it filters through from top down. Leymann (2003) points out that in a study of bullying at two Finnish hospitals it was estimated that the annual cost of absence from bullying was equivalent to 195 to 495 thousand euros per annum. The cost to the organization also includes direct costs relating to absenteeism, sick leave, reduced productivity and costs in relation to potential litigation. The organizational effects of bullying may include the following, bearing in mind that many of these points may be as a result of internal or external factors:

- Increased costs associated with recruitment and training.
- Costs resulting from failure to meet legislative provisions including civil and criminal actions.
- Legal costs incurred defending a claim of workplace bullying.
- Potential increase to insurance and workers' compensation premiums.

- An unsafe work environment and potential fines for breaches of the occupational health and safety legislation.

It is therefore in an organization's interests to maintain a bullying-free workplace rather than having to intervene or mediate during an established pattern of bullying. Another organizational effect of bullying is presenteeism which refers to employees who, although present at work, may be less productive, either due to reduced commitment or due to ongoing health problems or their suffering from psychological and physical distress. Brun and Lamarche (2006) argue that the costs arising from presenteeism are linked to impaired performance due to decreased output, and or reduced standards of production including additional training and other mistakes.


2.18.3 SOCIETAL EFFECTS OF BULLYING

The direct and indirect costs to society of bullying are difficult to estimate; this is due to the fact that it is not possible to estimate costs by simply adding up all individual costs and all the organizational costs. Several consequences of bullying, however, may translate into an economic burden in society. Absenteeism costs arising from

long term illness, premature retirement on the grounds of ill-health and unplanned losses of productivity are some of the examples of societal effects (Poilpot-Rocaboy: 2006).

2.19 ORGANIZATIONAL HEALTH MODEL

Leadership and Management	Work team climate	Employee emotions and wellbeing	Performance and behavioural outcomes
Supportive leadership and other leadership capabilities	Organizational values Appraisal and feedback Professional development Goal alignment Co-worker relations	Morale Job satisfaction Distress	Discretionary performance Task performance Withdrawal behaviour



This model is adapted from (Cotton:2004)

The Organizational Health Model becomes more apparent when the behaviours of supportive leaders are considered as is indicated in the latter table. Organizational Health Model suggests that supportive leaders

- are approachable and responsive when dealing with staff concerns.
- demonstrate an understanding of issues faced by their staff.

- clarify work expectations, objectives and priorities and treat people with consideration and respect and encourage team members to do the same.
- are fair and equitable in their dealings with their staff.
- provide frequent informal development-oriented feedback.
- delegate and encourage staff to take initiatives.
- can be relied on under pressure
- can provide opportunities and encourage staff to collaborate with others on related tasks.

According to Cotton and Hart (2003) workgroups with high morale and supportive leaders are much less likely to perceive workloads as excessive; people have a personal coping limit in relation to the amount of work they can reasonably be expected to undertake in a safe, healthy and productive manner over time. However, where workgroups have supportive leaders that encourage a caring and concerned culture, have mechanisms for early reporting of problems and a proactive attitude to addressing bullying problems, poor health outcomes are much less likely especially in jobs where there is a heavy workload. Also, performance problems

are often associated with work-related psychological injury claims; poor performance may be a symptom rather than a cause. Identifying the underlying causal factors behind a claim may be complicated by the fact that employees who are experiencing stress will tend to disengage psychologically from the workplace. Indicators of process include a decline in performance, increased conflict and grievances and an increase in absenteeism or sick leave.

2.20 STEPS IN THE PREVENTION AND MANAGEMENT OF PSYCHOLOGICAL HARASSMENT

In applying a risk management framework it is important to appreciate that organizational and combined organizational/individual level interventions to address the causes of bullying or psychological injury are more effective than approaches that only aim to increase an employee's ability to manage their own stress responses. Poilpot-Rocaboy (2006) points out that employee-focused approaches can assist employees to develop greater resilience to work-related stress. Before introducing or starting the programme to prevent and minimize the risk of psychological injury to employees, it is crucial to clarify accountabilities and gain the commitment and participation of all stakeholders in

the organization. In addition, management commitment and involvement in safety programmes has been found to be associated with good safety performance and successful stress management interventions.

Neuman and Baron (2003) provide that, there are a number of ways to foster leadership commitment and accountability for safe, healthy and supportive workplaces. These include the following:

- Providing managers with information about their roles and responsibility in relation to duty of caring for their employees as a valuable asset.
- Clarifying roles and responsibilities in job descriptions and workplace agreements.
- Setting workplace targets for improving workplace safety.
- Providing managers with information on how their workplaces are performing in relation to targets and other indicators such as the rate of unplanned absence.

Finnermore (2002) states that in South Africa the Labour Relations Act (LRA) No. 66 of 1996 provides for the establishment of Workplace Forums which is a basis for employees and their representatives to provide input into

decision making that affects their occupational health and safety. In most cases people work more effectively when they are involved in the decision-making process and have specific responsibilities and feedback about their work. Management styles characterized by openness and encouragement of employee participation are likely to be more effective in promoting a safety culture, especially in relation to work-related stress. There are a number of ways to engage employees in maintaining safe, healthy and supportive workplaces. These include the following:

- Involving employees in corporate committees or processes that impact on occupational health and safety.
- Involving employees in the development, implementation or evaluation of injury prevention and management programmes and systems.
- Providing information and training to employees regarding their roles and responsibilities in maintaining safe and healthy workplaces.

2.20.1 IDENTIFY SOURCES OF POTENTIAL HARM

Workplace bullying is often subtle or hidden and there may be no obvious signs of workplace bullying; it does not mean,

however, that negative behaviour does not exist. The first step in the process involves identifying the sources of potential harm to employees; psychological injury is in many respects more difficult to detect than physical injury. This is because most of the risk factors, for psychological injury cannot be observed by a physical inspection of the workplace. Some of the risk factors however, may be identified by auditing the nature of the work and the way it is organized. Research techniques such as employee surveys, focus groups and interviews can be used to identify sources such as unsupportive leadership, lack of participation in decision making and poor relationship with co-workers. Cotton and Hart (2003) maintain that absence and turnover data may help to indicate hotspots but reveal little information about underlying casual factors. Research shows that no one survey tool is favoured, but it is important for organizations to ensure reliable and valid tools are used to assess the risk of work-related stress. The onus is upon the employer to actively take reasonable steps to help identify whether workplace bullying exists or has a potential to exist by considering the work required and the relevant work procedures. Factors in the workplace that make it likely that bullying can occur should be noted and feedback from exit interviews or feedback given directly

from managers or supervisors or any internal or external parties should be monitored. Deteriorating relationships between employees, clients and managers ought to be identified.

2.20.2 ASSESS THE RISK

Having identified sources of potential harm to psychological health and wellbeing in an organization, the next step is to systematically assess the risk in order to prioritize areas or issues for action. An important action to be considered is to analyze organizational and work team information in order to understand the nature, extent and causes of bullying in the workplace (Cotton and Hart: 2003).

2.20.3 DEVELOP AND IMPLEMENT A PLAN

According to Leyman (1990) work context and work content factors differ between organizations and workgroups and any plan to prevent and manage stress and psychological injury must be based on specific risk identification and assessment processes and the plan should include interventions aimed at:

- Addressing the workplace factors that are risks of psychological injury and developing solutions to treat the identified risk factor.
- Implementing safe and effective rehabilitation and return to work strategies which include tertiary interventions.
- Minimizing the impact of stress on employees by responding to warning signs and intervening early to ensure that individuals who are not coping receive assistance and support.

Cotton and Hart (2003) believe that employees should be consulted about ways of improving the situation with a view to securing their support and commitment to the remedial action required. In this step employees and focus groups may need guidance and assistance to ensure that their action plan targets those factors that are most likely to result in significant improvement; they need to improve the effectiveness processes in place and to ensure quality and accountability such as by assisting workgroups with poor quality plans in order to improve them and thereby help them to achieve better outcomes. Following up to ensure that managers and their work teams implement agreed action is important as is measuring and reporting improvement by

comparing work teams' surveys and adapting to new standards compared with previous periods.

2.20.4 MONITOR AND REVIEW

According to Cotton and Hart (2003) at this stage it is important that organizations consider how the plan and associated activities will be monitored and reviewed. This is crucial to the development of a continuous improvement approach to stress risk management. Monitoring and reviewing programmes involves, among other aspects, the following:

- Stating clear programme objectives.
- Setting targets and performance indicators.
- Monitoring and reviewing the effectiveness of the programme's implementation.
- Reviewing the effectiveness of the programme.
- Using the review findings to inform refinements and improvements.

If the strategies have not been effective, it is important that further analysis of the situation occurs in order to determine how the employer can rectify the situation. Recognizing and removing the risk is not a once-off process; employers should ensure that the four-step process is a

continual cycle with their workplace in order to prevent workplace bullying from recurring.

2.21 THE DIFFERENCES BETWEEN A MANAGER AND A BULLY

MANAGER	BULLY
Has a good appreciation of short, medium and long term needs, goals and strategy.	Rigidly short term, often no more than 24 hours.
Learns from experience and applies knowledge gained from experience to improve business, communication, language and interpersonal skills.	Has a learning blindness, cannot apply knowledge gained from experience except how to be more devious, manipulative and how to better evade accountability.
Seeks and retains people more knowledgeable and experienced than self.	Favours weaker employees, recruits henchmen and toadying types.
Fair and treats all equally.	Inconsistent, always critical, singles people out and shows favouritism.
Allows and trusts people to get on with the job.	Constantly interfering, dictating and controlling.
Only addresses genuine performance issues and then focuses on performance and	Makes false claims about alleged underperformance and focuses on the person not the

behaviour.	behavior.
Rarely uses the disciplinary procedures.	Frequently imposes verbal warnings and written warning without justification.
Cares about staff and the business.	Cares only about self.
Uses influencing skills.	Alienates, divides, creates fear and uncertainty.
Shares information freely.	Withholds information, releases selectively and uses information as a weapon.
Gets on well with people at all levels and from all backgrounds.	Identifies only with clones of himself or herself.
Has honesty and integrity.	Exhibits hypocrisy and publicity.

(Retrieved October 5, 2007 from World Wide Web: <http://www.bullyonline.org>).

2.22 FACTORS CONTRIBUTING TO WORKPLACE BULLYING

2.22.1 POWER

Ellis (1994) provides that the issue of power is central to the theme of workplace bullying. A bully is a person who uses his power or a person who uses his physical dominance

over those who are perceived to be weaker. The bullying is often dependant upon the perceived power of the bully over the victim. In most cases those who bully others are often in a position of power with poor interpersonal skills. Kellerman (n.d) provides the following tips for those in power in order to help them avoid falling into bullying behaviour:

- Limit your tenure; when leaders remain in power for too long they tend to acquire bad habits.
- Share power. When power is centralized it is likely to be misused and that puts a premium on delegation and collaboration.
- Get real, and stay real. Virtually every bad leader loses touch with reality somehow.
- Know and control your appetites. These include the hunger for power, money, success and sex.
- Be reflective. Virtually everyone of the great writers on leadership emphasizes the importance of self-knowledge, self control and good habits. Acquiring such virtues is hard. Intent is required, but so is time for quiet contemplation.
- Encourage a culture of openness in which diversity and dissent are encouraged.

- Bring in advisors who are strong and independent.
- Establish a system of checks and balances.
- Avoid groupthink. Groupthink discourages healthy dissent and encourages excessive cohesiveness.

2.22.2 SELF-ESTEEM

Bullies may put down others to boost their own self-esteem and confidence in order to help them deal with personal feelings of inadequacy (Tehrani: 2001).

2.22.3 DIFFERENCE

An individual or group may become the focus of workplace bullying because others perceive them as being new or different (Retrieved June 12, 2007 from World Wide Web: <http://stopbullyingsa.com>).

2.22.4 PERCEIVED THREAT

Some people bully others because the other person is perceived as being a threat to them personally or a threat to their position within the workplace. Sometimes they engage in this kind of behaviour because they feel threatened by their subordinates who come to work with

higher qualifications than they do; sometimes the subordinate has the potential to quickly advance within the organization's hierarchy (Retrieved June 12, 2007 from World Wide Web: <http://stopbullyingsa.com>).

2.22.5 ORGANIZATIONAL CULTURE

According to Martin (2005) the culture of a workplace is often shown by its values and what is considered to be normal behaviour. When the culture is positive it encourages individuals to adopt appropriate behaviours that promote respect for others. But if management condones a negative culture where inappropriate behaviours and attitudes are encouraged, bullying can be seen as normal behaviour by the majority of people in the workplace.

2.22.6 ORGANIZATIONAL FACTORS

People may harass or bully others due to dissatisfaction with organizational arrangements. These factors include the following:-

- Job insecurity
- Restructuring or downsizing.
- Inadequate supervision.
- Change in ownership.

- Inadequate support or training.
- Poor skills and practices in people management.
- Introduction of new technology (Retrieved June 12, 2007 from World Wide Web: <http://stopbullyingsa.com>).

2.22.7 WORKING ARRANGEMENTS

Some working arrangements suggest that individual employees or workgroups may

- work in isolated environments for periods of time.
- work in different geographical locations other than a central place of work.
- work shift work or hours that isolate them from other staff.
- work in isolated areas of the building or office.
- work in rural or remote areas of the country.
- have working arrangements that can sometimes put employees at increased risk of bullying and other types of inappropriate workplace behaviours such as sexual harassment; it is therefore important that employers have a strategy in place for all of their employees who might be at risk because of their isolated working arrangements (Retrieved June 12, 2007 from World Wide Web: <http://stopbullyingsa.com>).

2.22.8 CLIENT CONTACT

In some organizations it is the client or customer who can pose a threat to employees being exposed to bullying behaviour and if it is identified as a risk, then it should be controlled in the same way as other identified risks (Ellis:1994).

2.23 FIVE STEPS TO A BULLY-FREE WORKPLACE

These five steps to a bully-free workplace are adapted from <http://www.une.edu.au> and retrieved from the World Wide Web on August 28, 2008 and they are aimed at creating a workplace with a culture of respect and dignity for the human side of the organization.

2.23.1 WORKPLACE CONSULTATION

The employer is required to set up appropriate mechanisms which involve employees and their representatives (unions) in order to develop the institution's code of dignity and respect in the workplace charter. Employees must be involved in the development of this code and this code should reflect the needs and the nature of the organization. A risk assessment should be conducted to ensure that the

organization is not at risk of fostering a culture that encourages, or tacitly condones, harassment and bullying.

2.23.2 WORKPLACE AWARENESS CAMPAIGN

All employees from senior management down to the lowest rung of the hierarchy should be made aware of the meaning and the application of the code embracing dignity and respect in the workplace, including the zero tolerance policy, and be given the ability to identify workplace bullying or other circumstances including:

- How to recognize bullying
- The possible effects of bullying
- Where to get further information

The organization should do this through induction and other training, posters, stickers and flyers explaining the code on respect and dignity in the workplace.

2.23.3 TRAINING AND DEVELOPMENT

The organization should establish an effective programme for managers and supervisors specially tailored to the needs of the organization and to achieve the zero tolerance objectives. Also, management and supervisors need to be trained on how to create a workplace culture that encourages

dignity and respect consistent with the code relating to dignity and respect and zero tolerance objectives. The training should include the skills necessary to manage the issue, including mediation and negotiation. These skills are useful when they engage in negotiations with employee representatives and government representatives in what is known as social dialogue.

2.23.4 PROCEDURES TO DEAL WITH COMPLAINTS

The organization needs to establish a complaints mechanism that includes the following:

- A time frame for complaints; complaints must be investigated immediately after being filed.
- A process that includes a record of the problem and any other relevant information about the allegation, which should then be forwarded to a designated responsible person and acted upon immediately.
- A trained, designated and impartial mediator who has the authority to act to resolve the problem to ensure a fair and equitable outcome. In some instances it may be appropriate for the mediator to be sourced from outside the organization.

- Support for parties involved including counselling, formal apologies and any other appropriate action.

2.23.5 CONSULTATION AND FEEDBACK

An organization is encouraged to review its dignity and respect code and its grievance procedures after six months to ensure that it remains effective and relevant. This review should involve consultation between senior management and staff representatives. The purpose of this review is to ensure that any strategy or performance targets and any other relevant matter are identified for inclusion in the code for the next six months. This ensures that the organization is committed to the wellbeing of the entire workforce and has agreed to meet the objectives in the code pertaining to respect and dignity in the workplace.

2.24 HUMAN RESOURCES RESPONSES TO WORKPLACE BULLYING

The following responses were retrieved on October 25, 2008 from World Wide Web: <http://www.scottishboomerangpress.com>.

2.24.1 THE MAFIOSO

This occurs when the Mafioso Human Resources Department is aware of a bullying problem in the workplace and actively participates or supports the abuse by bringing false, fabricated or unnecessary proceedings against the targets of bullying, supporting the culprits, and generally joining in "the fun". Their typical way is to issue threats to targets and they abuse workplace procedures.

2.24.2 THE OSTRICH

The Ostrich is identified by somewhat sandy and muffled responses to questions on respect and dignity at work. "We don't have problems with workplace bullying, nor are we ever going to have one", or even, "We take respect at work seriously". The muffled responses get all the fainter when anyone tries to identify how, exactly, they are taking it seriously. They achieve the same result as the Mafioso except that it is done passively, not actively.

2.24.3 THE FIREFIGHTER

This Human Resources position involves leaping from crisis to crisis, from formal discipline/grievance proceeding to proceeding, from court room to court room. There's no time

to implement good practice - they are too busy putting out fires.

2.24.4 THE BUREAUCRAT

The Human Resources team enjoys putting together policies that look good and then stuff them in a drawer. The bureaucrats also delight in scheduling expensive training which does not tackle bullying problems in the workplace. This failure to monitor and audit proper procedures may lead to failure in implementation of the policies.

2.24.5 THE THINKER

The Thinker is perhaps the least glamorous respondent to the challenges of workplace bullying. They might not look good, patching here and there; they only step in occasionally when a rare crisis emerges. For the most part, their conflict resolution and workplace harassment policies and procedures work so well they can get on with other issues- like hiring, succession planning, and increasing the firm's knowledge base. They do this by practicing preventative medicine in the work place, continually monitoring and checking for signs of bullying and workplace toxicity. They actively work

to reduce the number of grievance and disciplinary proceedings.

2.25 CONCLUSION

It is evident from the literature reviewed that workplace bullying is a world-wide phenomenon and can adversely affect the safety and health of employees; for this reason it should be managed like any other workplace safety and health hazard. The fact that the suffering and the humiliation resulting from psychological harassment and bullying can lead to a lack of motivation, low or loss of self-confidence should not be overlooked. Employers therefore have a duty to find out if bullying happens in their workplaces and to take the necessary steps to stop it from happening. It is also a fact that many acts of bullying in the workplace go unnoticed and sometimes unpunished, but it remains the responsibility of all organization's stakeholders, including the clients or patients, to ensure that workplace bullying is rooted out of the system and discouraged. Also, organizational cultures that encourage bullying or psychological harassment should be censored at all costs. Organizations should prioritize the making of provision for the protection of human dignity as provided for by the South

African constitution and International Labour Organization. The social dialogue, as provided for by the Labour Relations Act of 1996 and the International Labour Organization, should be encouraged in that employees ought to be provided with an opportunity to voice their concerns and feelings about the policies of the organization. It should be taken into consideration that social dialogue creates a sense of belonging and commitment to the goals of the organization.

Social science researchers agree that workplace bullying should be recognized as a potential hazard in all workplaces because it can occur in any workplace and under certain conditions most people are capable of bullying. That is why it is advisable for the relevant management teams to create a work climate that minimizes the risks and secures psychological safety through zero tolerance of harmful behaviours, and this requires the full commitment of management teams and staff. It is rightly said that where there are human beings the survival competition is inevitable and in the process employees and employers sometimes may unwillingly push others to the edge. Also, when bullying behaviours are not attended to by management and relevant structures are established not to look after the health and safety of employees there may be a

detrimental effect on what is called "organizational citizenship". This, according to Moorhead Griffin (1995), refers to the behaviour of individuals who make a positive overall contribution to the organization. Khubedu (2003) points out that taking a real interest in the personal development of employees helps establish a relationship based on trust, but communication between staff and management is often difficult. Organizational communication, including magazines or newsletters, can be used to bridge this gap. He further points out that, "It is important that workers do not feel that they are an isolated function in a big organization". Hence, according to Randall (1997), "Whatever else managers must be committed to, they must be committed to maintaining workplace environments that foster trust, respect, dignity and security for each employee".

CHAPTER 3

RESEARCH METHODOLOGY AND DESIGN

3.1 INTRODUCTION

This study is both qualitative and quantitative in approach but its greater part is informed by narrative analysis. It focuses on the issues related to bullying within the health care system and its effects on health service delivery. Collecting information through people telling stories about their work life experiences has gained legitimacy in education research. According to Polkinghorne (1988) the narrative is regarded as the primary scheme by which human existence is rendered meaningful. Bruner (1990) points out that telling stories helps people to think about, and understand their personal or another individual's thinking, actions and reactions; that is why, according to Connelly and Clandinin (2000) it is not surprising that collecting stories has emerged as a popular form of interpretive or qualitative research because narrative is the type of discourse that draws together diverse events, happenings and actions of human lives.

Gudmundsdottir (2001) maintains that the narrative approach is situated within qualitative or interpretive research method. A qualitative approach to the field of investigation means that researchers study phenomena in their natural settings and attempt to make sense of, and interpret the phenomena in terms of meaning people bring to them. This understanding of qualitative research shifts the researcher's focus to the concept of voice. Researchers refer to this voice as the participant's voice. Also, qualitative research methodologies therefore allow researchers to know people personally, to see them as they are and to experience their daily struggles when confronted with real-life situations. This allows or enables the researcher to interpret and describe the actions of people. What can be discovered by qualitative research is not sweeping generalizations but contextual findings. This process of discovery is basic to the philosophic underpinning of the qualitative approach

Moen (2006) provides that many scholars within the narrative approach use the voices rather than voice as they recognize and acknowledge that narratives are, in part, personal stories shaped by the knowledge, experiences,

values and feelings of the persons who are narrating or telling them.

According to Sikes and Gale (2006) narrative research analysis is research that is concerned with stories. These can be stories told by participants and they can be stories that researchers enquire into, such as narratives as data and data as narratives. Silverman (1998) argues that what matters is to understand how and when the stories are produced, which sort of stories they are and how researchers can put them to intelligent use in theorizing about social and work life experiences and it is clear, according to Sikes and Gale (2006) that narrative is unavoidable; in fact it is everywhere and is fundamental to human understanding, communication and social interactions. Czarniawska (1997) argues that a narrative is central to organizational life. People enact stories and these stories provide legitimacy and accountability for their actions. He further argues that in any given context, people's experiences, expectations for appropriate service management and decision making can be characterized as typical stories which guide their understanding of the situation. Bruner (1990) identified features of a text that mark it as narrative.

- **SEQUENCE IN TIME**

Narrative should include a clear beginning, middle and end, although even fragmentary stories can still represent events in sequence. Narratives do not need to present events in sequence; they are frequently re-arranged for dramatic effects. However, chronological order is a central device. The events or actions referred to in a narrative are understood to happen in a sequence.

- **EVALUATIVE FRAME OF REFERENCE**

Narratives carry meaning and cultural value because they encode, implicitly or explicitly, standards against which actions of the characters can be judged. In fairy tales the moral is often explicit; it may even have a privileged section that isolates it from the actual events in the narrative even without any explicit moral; a narrative embodies a sense of what is right and wrong, appropriate or in appropriate.

- **FOCAL ACTOR OR ACTIONS**

Narratives are always about something or someone. There is a protagonist and frequently an antagonist as well. The participants or characters may not be developed or even identified by name but along with sequence, they provide a thread that ties the events in a narrative together.

- **IDENTIFIABLE NARRATIVE VOICE**

A narrative is something that someone tells and therefore there should always be an identifiable voice presenting the narrative.

3.2 THE STRUCTURE OF NARRATIVES

Stories link and make connections and they provide a framework for comprehension; a key way in which researchers do this is through the structure provided by a plot. Plots usually follow a linear time ordered sequence, having a beginning, middle and an end. In some sense, plots often involve the reduction of a tension, crisis or problem although this does not have to be something negative or serious. A plot determines what gets included in any particular narrative and there can be sub-plots; the telling of the latter is associated with the main plot and adds further depth and interest. It is considered by some researchers to be possible to carry out an analysis of the structure of narrative, and according to Riessman (2004) this approach forms part of the field that is referred to as narrative analysis.

According to Labov and Waletzky (1967) narratives can be seen as being structured around the following six functional elements:

- the abstract, which summarizes the point of the narrative.
- the orientation, which summarizes the information about the time, the place, situation and the overall setting of the narrative.
- the complicating action, which provides details to do with the context, sequence and the focus of the narrative.
- the evaluation, which is the narrator's interpretation of the events of the narrative.
- the resolution, which describes the way in which the narrative works towards its conclusion and how issues within it might be resolved.
- the coda is designed to end the narrative by returning the listener to the present.

3.3 NARRATIVE THEMES

Plots are closely associated with themes and themes are sets of patterns, but Labov (1972) points out that there is no agreed upon methodology in narrative analysis to derive

themes from patterns. According to Sikes and Gale (2006:27) themes organize content in order to bring out the key messages and the interpretations that the narrator or participant wishes to get over. However, themes are more general than plots because they usually relate to concepts and theories as opposed to providing a sequence and structure. As part of this approach to narrative analysis, Riessman (2004) describes the narrative analysis as its most common form; in the analysis the researcher attempts to interpret the themes that exist within the text of the narrative in an attempt to give meaning to what is expressed by the narrator. Labov (1972) encourages researchers to look for sequences of core phrases which are repeated across interviews as indicators of themes.

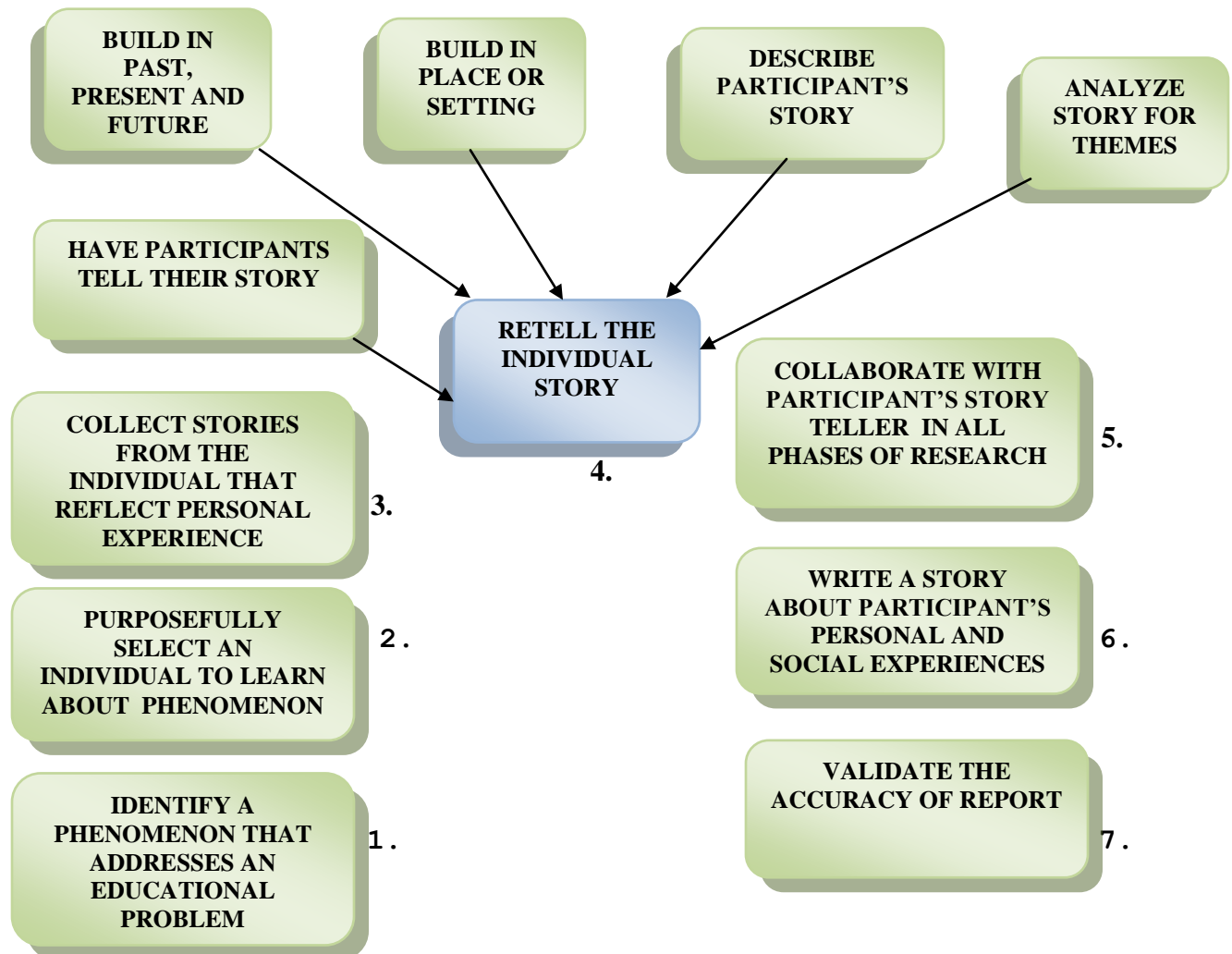
3.4 BRACKETING

Bracketing is done in order to understand the experiences of the participants as they truly are. Bracketing is a preparation for deriving new knowledge, but also a process of setting aside prejudices and predispositions. Valle and King (1978) state that in order to achieve this, the researcher has to be prepared to enter the world of the participants with an open mind, free of preconceptions.

This is done by making the presuppositions and assumptions explicit by laying them out so that they appear in as clear a form as possible to the researcher.

As the researcher brackets the assumptions and presuppositions, it is believed that more emerges at the level of reflective awareness. Regular practice of bracketing is believed to increase the researcher's competence in achieving this state. It should, however, be noted that certain entities, such as life experiences that are intensely ingrained so that they are not part of conscious awareness, are not easy to bracket Moustakas (1994). Once the researcher has obtained a thorough description of the phenomenon under investigation, and after the formal and scientific explication has been completed, the stance might then change to an interpretive stance, where the researcher moves beyond what is immediately evident.

3.5 THE SUMMARY OF STEPS IN NARRATIVE RESEARCH



Adapted from PowerPoint slides by (Shope and Creswell, n.d) .

3.6 DATA COLLECTION METHODS

3.6.1 NARRATIVE INTERVIEWS

Narrative interviewing is a research methodology. Gubrium and Holstein (2003) provide that narrative interviewing can

be more aptly described as employing a post-structured approach to research practice. Narrative interviewing has emerged not only as a new methodology but also as what Atkinson and Silverman (1997) called the interview society; they argue that in this society the interview has discursively established itself as a mental method of data collection that provides accurate results within the context of a relationship between the interviewer and interviewee which is unbiased and fair. The popularity of a structured or semi-structured interview as a preferred method of data collection can also be seen to reflect the emergence of evidence-based practices; the research being carried out will be seen to have certain outcomes that are measurable and conveniently susceptible to other approaches or forms of analysis.

3.6.2 QUESTIONNAIRES

In order to obtain clarity about the research questions, a questionnaire will be submitted for completion to the participants. The reason for questionnaires in this study is because there are people who feel more comfortable putting their experiences in writing than talking about them. In this way the researcher is in the position to

obtaining information which participants are not comfortable expressing in a face-to-face situation. Probably no other data collection tool is used more frequently in social research than the survey questionnaire. Surveys give the researcher a picture of what participants think about the subject. It allows for the accumulation of ideas from individuals at relatively low cost to the researcher. Survey research, however, has some limitations.

These limitations include the inability and unwillingness of research participants to participate. Non-responses in mailed questionnaires are a significant factor that limits the generalizability of the findings. Those that do not respond might (consciously or unconsciously) withhold information that is threatening or in some way destructive to their egos. Participants might also be unable to provide certain information such as subconscious motivators. Memory bias is another factor that renders a respondent's inability to provide accurate answers or information.

3.7 CONSTRUCTION OF THE QUESTIONNAIRE

The drawing up of the questionnaire is an activity that should not take place in isolation. The researcher should

seek advice from specialists at all times during the construction of the questionnaire. Questions to be included in the questionnaire should be tested to eliminate errors. A question may appear correct to the researcher when written down but can be interpreted differently when presented to another person. There should be no hesitation in changing the questions several times before the final formulation, but at the same time keeping the original purpose in mind. The important factor to be taken into consideration when designing a questionnaire is that it takes time and effort before being finalized (Bailey: 1987).

Furthermore, Bailey (1987) argues that the use of a questionnaire in a study of this nature has the following advantages:

- It is the most commonly-used research instrument. It is assumed that participants will not have a problem in filling it in, provided they are fully informed about the purpose of the study.
- It is a useful tool for collecting data from a widely-dispersed population as cheaply, rapidly and efficiently as possible.

- Participants express their views more freely in questionnaires as compared to interviews, where anonymity may be doubtful.
- The questionnaire gives the participant time to contemplate his or her responses to questions. This is important when investigating sensitive issues such as the reasons for resigning from work.
- The absence of a researcher when the questionnaire is filled in encourages honesty and prevents bias.
- Measurement is enhanced because participants respond to the same questions.

The researcher usually considers the questionnaire, particularly the open-ended questionnaire, as the best tool to probe below-the-surface attitudes, feelings and reactions of participants. Leedy (1993) argues that data is sometimes buried deep within minds and reflects attitudes, feelings or reactions of individuals.

3.7.1 A BASIC GUIDE FOR RECORDING NARRATIVES

- Inform the narrator in advance of the conditions and the subject of the interview.
- Test the equipment before going to the interview.

- Set up the interview in the best location for low noise, sound and reflection including interruptions.
- Explain procedure of the interview and answer clarity-seeking questions.
- Watch the time; do not exceed the time limit set for narrator or yourself (researcher).
- Review interviews at the end of the recording with the narrators. Thank them and inform them of what feedback or other support you will give (Retrieved February 02, 2008 from World Wide Web: <http://web.apu.ac.uk/narratives>).

3.8 RESEARCH DESIGN

Miller (1991) defines research design as the plan and structure of the investigation used to obtain evidence to answer research questions. In addition research design is the consideration and creation of means of obtaining reliable, honest, transferable and valid data by means of which pronouncements about the phenomenon of education may be confirmed or rejected.

This study has adopted an interpretive approach which makes use of a qualitative research method. It is concerned with

how the social world is viewed, understood and interpreted. The interpretive approach is, in addition, the systematic analysis of socially-meaningful action through the direct understanding of people in their natural setting; in other words, the researcher strives to understand and interpret how people create and maintain their social world.

Furthermore, qualitative research is based on methods of analysis and explanations which include the understanding of the context. It is aimed at producing a well-rounded understanding on the basis of contextual and rich data. Qualitative research methodology provides descriptions and accounts of the processes of social interaction in their natural settings and it is based on the combination of observation and interviewing of the participants in order to understand their perspectives.

3.9 EXPERIENCES OF THE RESEARCHER DURING THE RESEARCH PHASE

The researcher acknowledges the co-operation from the research unit of the Department of Health in terms of making it possible for the research to be conducted in their hospitals. Furthermore, the cooperation of senior

management in getting the staff to participate in the study is also appreciated but trying to get them (management) to answer interview questions for them and for them to be interviewed was impossible. As a result the researcher ended up analyzing what was available to him without the participation of management, which is why only two interviews with HR managers was conducted and included in the analysis of data. Among other problems the following are the difficulties experienced when the research was conducted:

- It was almost impossible to obtain the co-operation from the university's ethics committee. Eventually the clearance was obtained.
- Though participation was good, participants were somehow reluctant to divulge information pertaining to their experiences of bullying or to freely talk about their experiences of bullying.
- Though questionnaires were returned for analysis, the stories the researcher was most interested in were not all provided in full.
- The researcher also noted that at Mosvold the participants were either reluctant to share their experiences of bullying or they did not understand the concept, though it was clearly defined in the

questionnaire. That led to the rejection of incomplete questionnaires with only biographical information provided and nothing beyond that.

3.10 PARTICIPANTS

Administrative staff (HR, Finance and Systems) and nursing staff (qualified and student nurses) of Mosvold and Prince Mshiyeni Memorial (PMMH) hospitals participated in this research. Participants included nursing staff (qualified and student nurses). All participants were assured of confidentiality of their participation and their responses. A statement describing the study was provided for participants to read. Van Kaam (1969) as cited in Rahilly (1993) recommends six important criteria for participants in the research:

- The participants must have a capacity to express themselves with relative ease.
- They must have the capacity to sense and express their inner feelings and emotions without shame and inhibitions.
- They must have the ability to sense and to express the real experiences that accompany these feelings.

- The participants must have experienced the phenomenon or situation under investigation at a relatively recent date.
- An atmosphere that the participants find sufficiently relaxing to enable them to put the necessary time and orderly thought into reporting or writing about what was happening to them, should be created.
- A spontaneous interest in their experiences ought to be evident.

3.11 ETHICAL CONSIDERATIONS

Ethical considerations taken into account when conducting this study include:

3.11.1 PERMISSION FOR THE STUDY

Permission to conduct the study was sought from the employing authority, the management of both hospitals and the Provincial Department of Health (See Appendix: E and F).

3.11.2 INFORMED CONSENT

Bailey (1987) states that informed consent means giving a full explanation to participants and ensuring that the participants have adequate information regarding the study. They are at liberty to comprehend information and make a choice as to whether they voluntarily consent to participate or to decline participation in the study. Participants were also informed that they can withdraw from the study at any time without adverse consequences to them and their work or other circumstances. The full explanation of this study was given to the prospective participants and it was emphasized that participation was voluntary. (See Appendix: G).

3.11.3 ANONYMITY AND CONFIDENTIALITY

The participants were told not to indicate their names anywhere in the questionnaire but their ranks and categories. They were also assured of complete confidentiality (See Appendix: G).

3.11.4 ETHICAL CLEARANCE

Ethical clearance was sought and received from the University of Zululand's Ethics Committee, Prince Mshiyeni

Memorial, Mosvold hospitals and the KwaZulu-Natal
Provincial Department of Health.

CHAPTER 4

DATA ANALYSIS

4.1 INTRODUCTION

This chapter focuses on the presentation of the data collected from research participants. Participants were approached in their work environment at the hospitals. Questionnaires were distributed and participants were asked to fill them in and return them after three days.

4.2 ANALYSIS OF DATA

Each question presented in the questionnaire is evaluated independently. The data is presented in the form of tables. Responses to open-ended questions are summarized and categorized into appropriate classifications through the process of content analysis.

4.3 ANALYZING NARRATIVES

Flick (2005) provides that narratives are stimulated and located in the narrative interview in order to construct biographical processes, and more generally, life is recognized as narrative in order to analyze the narrative construction of reality. In narrative interviews the researcher invites participants to talk

about their experiences and allows them to speak uninterrupted until the story ends. Hampet (1991) in Flick (2005) provides that as a preparation for the actual final analysis the researcher first draws up the narrator's short biography, which includes a chronological display of the events identified as meaningful in life history. This is followed by the segmentation of the interviews. The next step involves the identification of the sequential thematic and the attachment of quotations explaining it. Flick (2005) further argues that paraphrases of statements from the text and the explanation of the context of the interviews and the milieus lead to further abstractions. Narrative interviews are qualitative data and can be approached by using any mainstream method for analyzing text. But narrative analysis per se takes the story as a whole rather than segments of the text as its focus.

4.4 THE QUESTIONNAIRE

- An anonymous questionnaire was sent out to nursing and administrative staff (qualified and student nurses) of both Mosvold and Prince Mshiyeni Memorial hospitals (See Appendix:I).
- 200 questionnaires were distributed at Prince Mshiyeni Memorial hospital and 125 were distributed at Mosvold hospital.

- 98 questionnaires from Prince Mshiyeni Memorial hospital were returned to the researcher for analysis.
- 63 questionnaires from Mosvold hospital were returned to the researcher for analysis. 08 questionnaires were returned with only section A completed and therefore were not considered for analysis. The questionnaires collected information about the participant's age, gender, race, marital status, ethnic group and language. These were presented with a definition of workplace bullying and participants were asked if they had been bullied in the past twelve months and whether they had witnessed others being bullied. More questions on the bullying subject were presented to participants.
- Participants were made aware of the extra space available towards the end of the questionnaire should their story be longer than the space provided in the questionnaire (See Appendix:I).

4.5 WRITTEN STORIES

In connection with the questionnaire, all those who had been subjected to, observed or taken part in bullying in their work environment were encouraged to write down their stories in their own words. Participants were kindly requested to describe

typical bullying situations that had occurred and ponder upon what might have contributed to bullying in that case. In the questionnaire it was emphasized that all stories and reflections were welcome and that the information was to be treated with confidentiality. In the questionnaire some space was reserved for the stories. Also, in the questionnaire participants were encouraged to freely continue their stories on the separate sheet of paper provided at the end of the questionnaire.

SECTION A

DISTRIBUTION OF PARTICIPANTS

TABLE 1: EMPLOYMENT CATEGORIES

CATEGORY	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Qualified Nurse	49	50	37	58.73
Student Nurse	16	16.33	02	03.17
Admin (HR)	10	10.20	07	11.11
Admin (Finance)	12	12.24	09	14.29
Admin (Systems)	11	11.22	08	12.70
Total	98	100%	63	100%

Table 1 depicts the employment categories at both Mshiyeni and Mosvold Hospitals. From Prince Mshiyeni Memorial hospital (PMMH), 50% of the qualified nursing staff, 16.33% of the

student nurses, 10.20% of the Admin staff (Human Resources), 12.24% of Admin (Finance) and 11.22% of Admin (Systems staff) participated in the study. At **Mosvold**, 58.73% of the qualified nursing staff, 03.17% of the student nurses, 11.11% of Admin (HR), 14.29% of the Admin (Finance) and 12.70% Admin (Systems) participated in the study.

TABLE 2: YEAR OF EMPLOYMENT

YEAR	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
1970-1975	01	1.02	03	04.76
1975-1980	10	10.20	07	11.11
1980-1985	08	08.16	11	17.46
1985-1990	14	14.29	18	28.57
1990-1995	16	16.33	09	14.29
1995-2000	09	09.18	04	06.35
2000-2005	12	12.24	09	14.29
2005-2009	28	28.57	02	03.17
Total	98	100%	63	100%

The information on table 2 will help to track participant's experiences of bullying within their work environment over the years of service in the health service environment in both hospitals.

TABLE 3: NATURE OF THE POSITION

NATURE OF THE POSITION	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Permanent	80	81.63	61	96.83
Temporary	01	01.02	00	00
Part-Time	00	00	00	00
Casual	01	01.02	00	00
Contract	16	16.33	02	03.17
Total	98	100%	63	100%

Table 3 indicates that at PMMH 81.63% of the participants are permanently employed and this group is also comprised of the nursing staff. It can also be concluded that they constitute the majority; casual and temporarily employed participants both constitute 01.02% while contract employees constitute 16.33% and this 16.33% consists of student nurses. At Mosvold 96.82% of the participants are permanently employed while 3.17% of the participants are employed on contract.

TABLE 4: GENDER

GENDER	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Male	16	16.33	21	33.33
Female	82	83.67	42	66.67
Total	98	100%	63	100%

Table 4 indicates that the majority of participants at PMMH are female as they constitute 83.67% and males constitute 16.33%. At Mosvold 66.67% of the participants were female and they constitute the majority while 33.33% of the participants were male.

TABLE 5: RACE

RACE	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
African	98	100	63	100
White	00	00	00	00
Coloured	00	00	00	00
Indian	00	00	00	00
Total	98	100%	63	100%

Table 5 indicates that at PMMH only Africans participated in the study as they constitute 100%. No responses were received from

Whites, Coloureds and Indians; this could be attributed to the fact that participation was voluntary. At Mosvold 100% of the participants were African.

TABLE 6: MARITAL STATUS

STATUS	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Married	49	50	47	74.60
Single	43	43.88	16	25.40
Divorced	06	06.12	00	00
Living with partner	00	00	00	00
Total	98	100%	63	100%

Table 6 indicates that at PMMH, 50% of people who participated in the study are married. 43.88% are single and 06.12% are divorced. There is however, no evidence to suggest that bullying effects led to these 06.12% of participants separating from their spouses as pointed out by Einersen and Mikkelsen (2003) that bullying sometimes leads to people separating from their partners. At Mosvold 74.40% of the participants are married and 25.40% of the participants are single.

TABLE 7: ETHNIC ORIGIN

ETHNICITY	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Zulu	97	98.98	63	100
Xhosa	00	00	00	00
Ndebele	00	00	00	00
SeTswana	00	00	00	00
seSotho	01	01.02	00	00
Afrikaans	00	00	00	00
Other	00	00	00	00
Total	98	100%	63	100%

Table 7 indicates that the majority of participants (98.98) at PMMH come from the Zulu-speaking community. Other ethnic groups are not represented in the hospital; however, it could not be concluded that PMMH does not recruit from other ethnic groups as participation was voluntary and the hospital is located in Zululand hence the majority are Zulu-speaking. At Mosvold 100% of the participants are Zulu-speaking; this could be attributed to the location of the hospital that is in a deep rural area of Ingwavuma in KZN.

TABLE 8: AGE

AGE	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>
18-25	23	23.47	29	46.03
25-30	27	27.55	15	23.81
30-35	36	36.73	11	17.46
35 and above	12	12.24	08	12.70
Total	98	100%	63	100%

Table 8 indicates that at PMMH participants aged between 18-25 constitute 23.47%, those aged between 25-30 constitute 27.55%, and those aged between 30-35 constitute 36.73% and staff aged between 35 and above constitute 12.24%. These percentages indicate that PMMH has a diverse range in terms of age.

At Mosvold participants staff aged between 18-25 constitute 46.03%, aged between 25-30 constitutes 23.81%, those aged between 30-35 constitutes 17.46% and those aged between 35 and above constitute 12.70%. These percentages indicate that Mosvold is also diverse in terms of age.

TABLE 9: CITIZENSHIP

SOUTH AFRICAN	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	98	100	63	100
No	00	00	00	00
Other	00	00	00	00
Total	98	100%	63	100%

Table 9 indicates that participants in the study in both hospitals are all South African so they constitute 100%.

TABLE 10: HOME LANGUAGE

LANGUAGE	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
IsiZulu	97	98.98	63	100
IsiXhosa	00	00	00	00
English	00	00	00	00
Afrikaans	00	00	00	00
Other	01	01.02	00	00
Total	98	100%	63	100%

Table 10 indicates that at **PMMH** the majority of participants (98.98%) speak isiZulu as their home language whereas 01.02% was

indicated as the other language spoken by the participant. This does not necessarily mean that isiZulu is the only language spoken at PMMH since participation was on a voluntary basis.

At Mosvold 100% of participants are Zulu-speaking; again this does not mean that all employees in the service of Mosvold hospital speak isiZulu since participation was on a voluntary basis.

TABLE 11: PHYSICAL ATTRIBUTES

DISABILITY	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	98	100	63	100
No	00	00	00	00
Total	98	100%	63	100%

The information contained on table 11 shows that physically-able (100%) participants in both PMMH and Mosvold hospitals participated in the study.

TABLE 12: EDUCATIONAL LEVELS

EDUCATIONAL LEVEL	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Primary	00	00	00	00
Secondary	98	100	63	100
Total	98	100%	63	100%

Data regarding the level of education of participants at PMMH and Mosvold hospitals indicated that 100% of the participants have secondary education, while none has only primary education.

TABLE 13: POST-MATRIC QUALIFICATIONS

POST-MATRIC QUALIFICATIONS	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
University	19	19.39	13	20.63
Nursing College	65	66.33	39	61.90
University of Technology	03	03.06	02	03.17
Technical College	11	11.22	09	14.29
Total	98	100%	63	100%

Data regarding post-matric qualifications at PMMH indicate that 19.39% of the participants have a university education or qualification, while 66.33% have a nursing college education,

3.06% have a university of technology education and 11.22% have technical college education.

At **Mosvold** 20.63% of the participants have a university education, 61.90% have a nursing college education, 3.17% have a university of technology education and 14.29% have a technical college education. It could, however, be assumed that participants in both institutions, because of their educational background, understood the content of the questionnaire. It is interesting to note that about 30% of the responses from participants with qualifications from nursing colleges reported incidences where they were undermined in front of others by those with university qualifications and their narratives further indicate that it was somehow difficult for university graduates to easily receive instructions from those with a nursing college qualification without questioning the status quo despite the level of authority within the institution's structure.

SECTION B

BULLYING EXPERIENCES

- Would you say that you have personally experienced bullying or any behaviour of this nature since you started working in this hospital/public health institution?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	68	69.39	59	93.65
No	30	30.61	04	06.35
Total	98	100%	63	100%

At PMMH 69.39% reported that since they started working at the hospital they had personally experienced bullying; among the participants the percentage is higher from the nursing staff and it cuts across different age groups. At Mosvold 93.65% reported that they had personally experienced bullying since they started working at the hospital while 06.35% responded that they had not experienced bullying since they started working at Mosvold. Looking at the responses of the nursing staff one can conclude or assume that among the nurses bullying is widespread and it also cuts across the different age groups.

- What was the nature of the bullying?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Undermining in front of colleagues	36	36.73	54	85.71
Intimidation/harassment	02	02.04	00	00
Humiliation	25	25.51	00	00
Withholding important work- related information	21	21.43	09	14.29
Blamed for things beyond control	13	13.27	00	00
Treated less favourably	01	01.02	00	00
Sexual harassment	00	00	00	00
Aggression	00	00	00	00
Total	98	100%	63	100%

Reporting on the nature of bullying at PMMH, 36.73% of the participants reported being undermined in front of others and this is the highest percentage, followed by humiliation at 25.51% and withholding important work related information. The figures suggest that there were variations of bullying incidences taking place at PMMH. At Mosvold 85.71% of the participants reported that undermining in front of others was the most common form of bullying followed by withholding important work-related information at 14.29%.

- During the last twelve months, have you experienced a single incident or repeated or multiple incidents of inappropriate behaviour (whether verbal, physical or psychological) ?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Single	32	32.65	04	06.35
Repeated	54	55.10	52	82.54
Multiple	12	12.24	07	11.11
Total	98	100%	63	100%

A total of 55.10% of participants from PMMH indicated that they had experienced repeated incidences of bullying followed by 32.65% who reported a single incidence of bullying and 12.24% who reported exposure to multiple incidences of bullying. This (repeated incidence of bullying) is in line with various definitions of bullying. Of this 55.10% about 18% were from nursing students who reported repeated incidences of bullying from their supervisors.

At Mosvold 6.35% of the participants indicated that they had experienced single incidents of bullying, 82.54% indicated repeated bullying and 11.11% indicated multiple incidences of bullying.

- What was the gender of the bully?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	Frequency	Percentage	Frequency	Percentage
Male	12	12.24	10	15.87
Female	86	87.76	53	84.13
Total	98	100%	63	100%

The data from PMMH indicates that females (87.76%) who constitute the majority in the sample were also actively involved in bullying others compared to 12.24% attributed to men.

At Mosvold 84.13% of the participants indicated that the gender of the bully was female while 15.87% indicated that the gender was male. It should, however, be noted that, traditionally, in both hospitals, nursing in general was an occupation meant for females hence they constitute the majority in the sample.

- What was the race of the bully?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	Frequency	Percentage	Frequency	Percentage
African	97	98.98	63	100
White	00	00	00	00
Coloured	00	00	00	00
Indian	01	01.02	00	00
Total	98	100%	63	100%

At PMMH 98.98% of the participants indicated African as the race of the bully while 01.02% reported that the bully was Indian and this response was indicated in the responses from Admin (Systems). At Mosvold, 100% of the participants indicated African as the race of the bully. These figures suggest that bullying is not always from one race to the other but it could take place within the same race group.

- Please indicate the person who bullied you.

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Supervisor	34	34.69	32	50.79
Colleague	37	37.76	16	25.40
Subordinate	26	26.53	15	23.81
Group of colleagues	01	01.02	00	00
Total	98	100%	63	100

In line with the reviewed literature, at PMMH 37.76% of the participants indicated that a colleague was involved in bullying them and the difference between colleagues and a supervisor was 03.07% which was obviously not a huge difference. At Mosvold, 50.79% indicated that the supervisor was involved in bullying behaviour, 25.40% indicated a colleague as the bully and 23.81% indicated a subordinate as the bully. The figures further reflect that bullying incidences at PMMH cascaded from the top to the bottom of the hierarchy and bottom to the top of the hierarchy and also amongst colleagues themselves (horizontally).

- How has bullying affected you? (Please tick those relevant)

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Loss of self-esteem	12	12.24	18	28.57
Headaches	03	03.06	00	00
Loss of appetite	00	00	01	01.59
Stress and Depression	23	23.47	22	34.92
Loss of sleep	09	09.18	00	00
Increased alcohol consumption	01	01.02	00	00
Irritability	25	25.51	15	23.81
Increased use of tobacco	01	01.02	00	00
More days off work	06	6.12	00	00
Feelings of not wanting to go to work	10	10.20	02	03.17
Unable to concentrate at work	08	08.16	05	07.94
Total	98	100%	63	100%

Responses from PMMH indicate that 25.51% of the participants indicated they experienced irritability when exposed to bullying, 23.47% indicated that bullying caused them stress and depression while 12.24% indicated loss of self-esteem.

At Mosvold, 28.57% reported that loss of self-esteem was the effect of bullying in their workplace, 01.59% reported loss of appetite, 34.92% reported stress and depression, 23.81% reported

irritability, and 3.17% reported feelings of not wanting to go to work, followed by 07.94 being unable to concentrate at work. These percentages from PMMH and Mosvold correspond with the information on the reviewed literature that exposure to bullying affects a substantial part of the employee's psychological, emotional and physical wellbeing.

- What do you think are the causes or what contributes to bullying behaviour in the bully?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Low self-esteem	13	13.27	03	04.76
Position power	36	36.73	22	34.92
Difficulty delegating responsibility	05	05.10	01	01.59
Personality features	23	23.47	23	36.51
Poor organizational skills	00	00	00	00
Poor communication skills	00	00	04	06.35
Difficulty working with others	06	06.12	00	00
Inadequate training for managers	15	15.30	10	15.87
Total	98	100%	63	100%

36.73% of the participants believe that a position power is the main cause of inappropriate behaviour at PMMH, followed by personality features at 23.47%, inadequate training for managers

at 15.30% and low self-esteem at 13.27%. At Mosvold, the majority of participants (36.51%) indicated that personality features contributed to bullying behaviour followed by 34.92% indicating a position of power as the cause or contributing factor. Another factor indicated by participants at Mosvold at 15.87% is inadequate training for managers. This further suggests that participants in both hospitals have observed that people in positions of power tend to abuse the authority vested in their positions while others believe people are born bullies.

- How did you deal with the problem associated with bullying in your work environment? (Please tick those relevant)

	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Confronted the bully	01	01.02	02	03.17
Told a friend/ colleague	53	54.08	32	50.79
Reported the matter to superiors/ management	04	04.08	05	07.94
Reported to the personnel/ HR Department	03	03.06	01	01.59
Reported to union representative	01	01.02	02	03.17
Kept quiet	36	36.73	21	33.33
Total	98	100%	63	100%

At PMMH, 01.02% of the participants reported that they confronted the bully. This low percentage corresponds with the

high percentage reported on a position of power as one of the factors contributing to bullying. The reasons cited for not confronting the bully was the fear of constant victimization by the bully. 36.73% opted to keep quiet whereas 54.08%, which represents the majority, indicated that they had told a friend about their experiences of bullying. Telling a friend about incidences of bullying is an indication that bullying has a serious negative effect on those who experience it.

At **Mosvold**, 50.79% of the participants had reported telling a friend about their experiences of bullying followed by 33.33% reporting that they had kept quiet about their experiences of bullying in the hospital. The reasons given for not informing the authorities at Mosvold were that about 15% were not sure whether those behaviours constituted an abuse or whether it was part of management practices.

- If you reported the matter to the superiors/ management or a union representative were you taken seriously?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	30	30.61	02	03.17
No	68	69.39	61	96.83
Total	98	100%	63	100%

The information tabled above shows that at PMMH 69.39% of the participants reported that they were not taken seriously when they reported incidences of bullying and 30.61% reported that they were taken seriously when they reported bullying to the officials. This corresponds with the data indicating that 54.08% who reported that they had told a friend.

At Mosvold 96.83% of the participants reported that they were not taken seriously when they reported the incidences of bullying and only 03.17% reported that they were taken seriously when they reported the incidences. This corresponds with the large percentage of those who preferred to tell a friend or keep quiet about their experiences as if they believed that reporting to the authorities would exacerbate the situation and make the work environment an unpleasant place to work in.

- Please explain the actions/reactions of the management staff or the union representative when you reported the incidence. If you did not inform management what are the reasons for not informing management?

At PMMH these are some of the reasons given to the question:

- Investigation was conducted into the doctor's mistakes and the supervisor presented the case to the executive of the hospital.
- The supervisor or unit manager acted as if she did not hear my colleague verbally abusing me, but when the matter was discussed the bully was called and profusely apologized for verbally abusing me, and the unit manager also apologized to me but no further action was taken.
- I did not report the matter to the authorities because I am convinced that it would be a waste of time.
- I was actually not taken seriously but we were called together, then our manager asked what the problem was. We explained our side of the story and that is how the matter was resolved.
- I was not taken seriously by management because I believe that they usually undermine student nurses. That is why I found it difficult to report to the authorities.

- I wrote a letter to my supervisor to report the matter; she did not take me seriously since the bully was known to bully other staff members. She was cautioned and she (the bully) tried to apologize. But I could sense that her apology was not sincere; she was just paying lip service.
- The complaint was taken seriously and that helped a lot.
- The person concerned was called, discussions with the bully took place but the bully himself did not show any feelings of remorse nor did he recognize the mistake. I am convinced that reporting the matter to the authorities was just a waste of time.
- I did not report the matter the first time because I told myself that I would just pray and God would punish the bully.
- Most of the time they do not take such matters seriously, and reporting bullying would be a total waste of time.
- The people concerned were consulted and given warnings regarding other cases but at other times you get told to ignore the person.
- No action was taken by management; in fact they ignored the matter, but when I approached the union its representative took it seriously.

- After three years of reporting to management the matter is still pending.
- The bully was very conceited and bossy and the management did not handle this issue properly since to them he was a trustworthy supervisor whereas I knew he was not.

At **Mosvold** these are some of the reasons given:

- A matter was reported about four months ago and I am still waiting for the response from the Personnel Department or my supervisor.
- When I reported the matter there was no action taken against the bully and the painful part is that she is still my supervisor and our working relations are not good at all and I wish I could just go away.
- When I reported I was advised to let it go as everything happens for a reason. I was actually blamed for what happened to me.
- If I had reported the matter management would not have intervened on my behalf and I was not going to be taken seriously.
- Reporting would have created more problems for me personally as the person who bullied me was/is still a friend of my supervisor.

- If anyone reports something he or she is not taken seriously. They just tell the victim to continue with work and that they are going to solve the problem later but they never respond.
- When I reported bullying my supervisor intervened and the matter is still pending.
- The bully reported me first and I was blamed for what had happened.
- My supervisor confronted the bully on my behalf.
- After reporting the bullying incident, how long did it take your superior, personnel or union representative to respond or take action against the perpetrator?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Less than 5 days	20	20.41	04	06.35
After 5 days	38	38.77	06	09.52
Never responded	40	40.82	53	84.13
Total	98	100%	63	100%

At PMMH 40.82% of the participants indicated that management never responded to complaints associated with bullying and 38.77% indicated that management responded after five days.

These two figures show that at PMMH bullying is not taken seriously by management and some of the staff members feel that it would be a waste of time to report it.

At Mosvold, 84.13% indicated that management never responded to their complaints, 09.52% said management responded after five days followed by 06.35% who reported that the response was in less than five days.

- Was the perpetrator formally charged?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	00	00	00	00
No	98	100	63	100
Total	98	100%	63	100%

The data above indicates that 100% of the participants at PMMH and Mosvold reported that the perpetrator was never formally charged. This percentage indicates that the management in both hospitals does not understand what constitutes bullying/psychological harassment. They simply pretend they are not aware of what is happening.

- Have you missed work because of bullying?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	63	64.28	<i>58</i>	<i>92.06</i>
No	35	35.71	<i>05</i>	<i>07.94</i>
Total	98	100%	<i>63</i>	<i>100%</i>

At PMMH 64.28% reported that they had missed work because of bullying whereas 35.71% indicated that they had not missed work because of bullying. At Mosvold 92.06% of the participants reported that they have missed work because of bullying and only 07.94% reported that they have not missed worked because of bullying. These figures suggest that bullying really bothers employees in their workstations.

- If you believe that someone has treated you disrespectfully

	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Do you worry about future interactions with the bully	47	47.96	24	38.10
Do you contemplate changing jobs to avoid recurrence	12	12.24	06	09.52
Do you tell a friend	20	20.41	17	26.98
Keep quiet	19	19.39	16	25.40
Total	98	100%	63	100%

Data shows that 47.96% at PMMH do worry about future interactions with the bully, 20.41% do tell a friend, and 19.39% keep quiet while 12.24% contemplate changing jobs to avoid recurrence.

At Mosvold the data indicates 38.10% of the participants worry about future interactions with the bully, 26.98% told a friend about their experiences of bullying, 25.40% reported that they kept quiet and 09.52% indicated that they contemplated changing jobs to avoid recurrence.

- Would you unreservedly say that the person who bullied you is a well-known bully in this hospital/health institution?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	77	78.57	59	93.65
No	21	21.43	04	06.35
Total	98	100	63	100%

Data from PMMH shows that 78.57% of the participants pointed out that bullies were well-known in the hospital and this was supported by the nursing and student nurses who argue that the reasons some of the bully's actions go unnoticed is because it is mistaken for implementing rules and being strict, and that if reported the matter is not taken seriously as these people are so-called "darlings" of management.

At Mosvold data indicated that 93.65% of the participants reported the bully was a well-known person in their hospital and 6.35% reported that the bully was not a well-known person in the hospital.

- Since you were appointed by this hospital, have you observed any bullying incident in which you were not personally involved?

	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	93	94.90	63	100
No	05	05.10	00	00
Total	98	100%	63	100%

At PMMH 94.90% of the participants indicated that they had witnessed bullying in which they were not personally involved and 5.10% indicated that they had not witnessed bullying in which they were not personally involved. At Mosvold 100% of the participants indicated that they had witnessed bullying in which they were not directly involved. The 94.90% at PMMH and 100% at Mosvold indicate that bullying in these two health institutions is ubiquitous.

- In thinking back about the case of bullying that you witnessed, what was the gender of the bully?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Male	37	37.76	09	14.29
Female	61	62.24	54	85.71
Total	98	100%	63	100%

Data indicates that at PMMH, people who had witnessed bullying pointed out that female was the gender of the person who they had witnessed bullying others; the female percentage was 62.24% with the males at 37.76%. This, however, suggests that both genders are guilty of bullying incidences. At Mosvold 85.71% of the participants pointed out that female was the gender of the person who they have witnessed bullying others, while 14.29% pointed out that male was the gender of the person who they had witnessed bullying others.

- In thinking about the case of bullying that you have witnessed, what was the race of the bully?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
African	98	100	63	100
White	00	00	00	00
Coloured	00	00	00	00
Indian	00	00	00	00
Total	98	100%	63	100%

These percentages at PMMH and Mosvold could be attributed to the fact that responses were only received from African participants.

- Has witnessing bullying bothered you in any way? And if yes, please explain.

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	98	100	63	100
No	00	00	00	00
Total	98	100%	63	100%

At PMMH, 100% of the participants indicated that witnessing bullying had bothered them in that they felt sorry and

sympathized with the victim, especially if bullying was from the top of the hierarchy. They also indicated that it may result in one detaching oneself from the work and may also lead to presenteeism. Other responses indicated that it bothered them because it affected their colleagues' concentration on their work. Other responses indicated that it was an annoying experience to see the abuse of power as it aimed at destroying others' self-esteem and it provoked unnecessary aggression such as anger and hostility in the workplace.

Also at **Mosvold** 100% of participants indicated that witnessing bullying had bothered them and they pointed out that it destroyed respect and trust among staff members and it often resulted in poor service delivery, loss of self-esteem leading to absenteeism while others wondered how they would have reacted or acted if it was done to them. Others at Mosvold pointed out that they wanted to be treated fairly at work and that if bullies subjected other employees to unfair treatment that affected the way people worked as they could not give of their best when they executed their tasks or daily duties.

- Have you got access to a counselling service?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	67	68.37	53	84.13
No	31	31.63	10	15.87
Total	98	100%	63	100%

Data tabled above indicate that at PMMH 68.37% of participants indicated that they had access to a counselling service, and 31.63% indicated that they did not have access to a counseling service such as EAP. This, according to the Human Resource Manager could be attributed to staff ignorance about services provided by the institution and this ignorance could not only be on the part of the employees but also on the part of management staff who may have failed to divulge information to all employees of the hospital. It should, however, be noted that many participants to this study opted not to report the matter to management hence they had acknowledged the presence of a counselling service available to them. The same applies to responses from Mosvold hospital as 84.13% of the participants acknowledged the presence of a counselling service.

- If "yes", how effective is it in assisting those who have been bullied?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Very effective	14	14.28	04	06.35
Sometimes effective	15	15.31	12	19.05
Of no use/ useless	69	70.41	47	74.60
Total	98	100%	63	100

At PMMH 70.41% of the participants indicated that the counselling service is of no use/useless because once the matter is reported to the counsellors others in the hospital would know what the victim's problems were. 15.31% indicated that it was sometimes effective and 14.28% indicated that it was very effective. In Mosvold, 74.60% of participants indicated that the counselling service provided was of no use to them in dealing with bullying behaviour in their work environment, 19.05% indicated that it was sometimes effective while 06.35% indicated that it was very effective.

SECTION: C
STAFF-PATIENT RELATIONSHIPS

- In your professional career or since you started working in this hospital, have you ever been bullied by a patient?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	65	66.32	39	61.90
No	00	00	00	00
Do not work directly with patients	33	33.67	24	38.10
Total	98	100%	63	100%

At PMMH, 66.32% indicated that they had been bullied by a patient since they started working in this hospital. This 66.32% consisted of both qualified and student nurses. 33.67% did not work directly with the patients. Data from Mosvold shows that 61.90% of the participants indicated that they had been bullied by patients and 38.10% indicated that they did not work directly with the patients.

- If "yes", how often does the bullying happen?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Daily	63	64.29	53	84.13
Weekly	31	31.63	07	11.11
Monthly	04	04.08	03	04.76
Total	98	100%	63	100%

- If "yes", please explain what happened?

At PMMH the following explanations were given:

- Patients pretend to be immobile because they want nurses to give them bedpans; thereafter they will laugh in a cubicle and nurses get humiliated, as they (patients) are aware that nurses are not allowed to scold patients.
- This occurs often as we are short staffed in the wards and patients do realize that there are sometimes two nurses in a ward. Patients then start to demand things from nurses and when they are not able to attend to them they become angry and then verbally abuse us by calling us funny names. Also they say bad things about us to other patients; this practice is humiliating to us. It is not that we just ignore the patients. When we try to explain to them one can see that they do not care but act as if we are undermining them.

- Sometimes patients purposely empty their urine bags on the floor and tell us in a very rude manner that we should clean because it is our job.
- Calling by names and insulting.
- A patient was on her crutches one morning. I asked her to go and take a bath but she refused pointing out that water in that bath was cold. I told her that I was on my way to fetch hot water which I did. Ever since that incident the patient passed bad remarks about me and I tried to ignore her but it is not a pleasant feeling.

At **Mosvold** the following explanations were given:

- A mentally ill patient pulled my leg up and pushed me to the floor. I had to endure that kind of humiliation and did not like what happened to me.
- Patients have a tendency to use abusive language when they seek the nurse's attention and if one does not respond to their demands they want to report one to the hospital's administration.
- Patients insult us almost everyday and they do not appreciate the effort we put into trying to assist them when they need us as nurses.

- Who was the patient who bullied you?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Male	26	40.0	07	17.95
Female	39	60.0	32	82.05
Total	65	100%	39	100%

At PMMH only 65 employees work directly with patients so the percentages that follow are therefore calculated from 65 and at Mosvold 39 participants work directly with the patients; the percentages are also calculated from 39. At PMMH 60.0% of the participants indicated that female patients were involved in bullying them and 40.0% indicated that male patients were involved in bullying them. This further indicates that both genders tend to bully.

In Mosvold, 82.05% of the participants indicated that female patients were involved in bullying them and 17.95% of the participants indicated that male patients were involved in the act of bullying.

- Did you inform your superior about the bullying incident?
And did your superior intervene on your behalf?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	21	32.31	13	33.33
No	44	67.69	26	66.67
Total	65	100%	39	100%

At PMMH 67.69% of the participants indicated that they had not reported the matter to their superiors and 32.31% indicated that they had informed their superiors.

In Mosvold 66.67% of the participants indicated that they did not report bullying to management and 33.33% indicated that they had reported to management. On the second part of the question it was obvious that the victims were told to be careful when dealing with patients as there was nothing that could be done to them as patients. On the basis of management's responses, it seems that when the matter is reported it could be argued that the reasons given by superiors could in fact be the reason that the large percentage of participants did not bother reporting the problem.

SECTION D
HUMAN/PERSONNEL RELATED MATTERS

- When a new employee joins the organization, it is standard procedure for the new employee to be given a copy of the updated conditions of service to enable him or her to know his or her rights and responsibilities in the workplace. In view of the above, were you given a copy of the conditions of service by your Personnel or Human Resources Department?

	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	69	70.40	11	17.46
No	29	29.60	52	82.54
Total	98	100%	63	100%

At PMMH, 70.40% of the participants stated that they had received a copy of the conditions of service or labour relations document. 29.60% participants indicated that they had not received a copy of the conditions of service.

At Mosvold 17.46% of the participants indicated that they were given a copy of conditions of service when they were appointed and 82.54% of the participants reported that they were not given such document

- If you received a copy of the conditions of service, did you read and understand your rights contained in this document?

	PRINCE MSHIYENI MEMORIAL HOSPITAL		MOSVOLD HOSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes, I read and understood the conditions of service	07	07.14	02	03.17
Yes, I read it but did not understand it	53	54.08	07	11.11
No, I did not bother to read it	38	38.78	54	85.71
Total	98	100	63	100%

At PMMH, 07.14% indicated that they had read and understood the contents of the conditions of service. 54.08%, which is the majority, indicated that they had read their copy but did not understand the contents of their employment policies. 38.78% indicated that they had received the copy of their employment policies but they did not bother to read it; this could be attributed to ignorance on the part of both the management and the employees because those who did not understand their employment policies should have been encouraged to come forward so that everything about their employment policies could be explained fully to them. This could have helped them to seek advice in case there were problems associated with their employment, especially with the behaviour of others towards them.

In **Mosvold**, 85.71% of the participants reported that they did not bother to read the document containing the conditions of employment; this, however, contradicts the information on the latter table as the majority indicated that they were not given a copy of the conditions of service upon their appointment.

- Do these personnel policies contain codes aimed at protecting employees against devious behaviours associated with bullying in this hospital?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	00	00	00	00
No	00	00	00	00
I do not know	98	100%	63	100
Total			63	100%

Responses from both hospitals indicate that participants did not know whether their labour relations policies protected them from bullying behaviour in their work environment.

- Do you have unions operating in this hospital?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	98	100	63	100
No	00	00	00	00
Total	98	100%	63	100%

In both institutions responses show that 100% of the participants indicated that there were unions operating in their hospital.

- Are you a member of the union?

PRINCE MSHIYENI MEMORIAL HOSPITAL			MOSVOLD HOPSPITAL	
	<i>Frequency</i>	<i>Percentage</i>	<i>Frequency</i>	<i>Percentage</i>
Yes	79	80.61	51	80.95
No	19	19.39	12	19.05
Total	98	100%	63	100%

At PMMH, 80.61% of participants indicated that they belonged or were members of unions while 19.39% indicated that they did not belong to unions. In Mosvold 80.95% of the participants pointed out that they belonged to unions with only 19.05% having not joined unions.

If "no", please explain the reasons why you have not joined a union. The 19.39% at PMMH and 19.05% at Mosvold who indicated

that they did not belong to unions also did not give reasons why they were not members of unions.

4.6 INTERVIEWS WITH HUMAN RESOURCES MANAGERS

When responding to telephonic interview questions about workplace bullying and its effects, Human Resources Managers in both hospitals pointed out that bullying was never reported to them as Personnel Departments. They also maintained that when employees are appointed into positions they are given a standardized letter prepared by the Provincial Department of Health. This letter contains all the employment relations policies which employees must read and abide by. Both Human Resources Managers agreed that the policies contained in the letter of appointment were silent on bullying matters but it did not however, mean that bullying complaints would not be attended to should they get reported. Both Human Resources Managers agreed that there was a grievance procedure form designed by the Public Service Commission to enable employees with complaints to lodge their grievances. When asked why hospital employees were reluctant to report bullying they both argued that the reasons for not reporting could be attributed to the fear of victimization.

4.7 SUMMARY OF COMMON THEMES FROM PARTICIPANTS

The overall impression the researcher got from analyzing the questionnaires was that workplace bullying was present in both health institutions and the victims felt that their psychological contract had been broken as they expected their employer to protect them. Other responses from Mosvold, in particular, indicated that participants, particularly from nursing categories and ranks did not seem to understand what bullying was. This was indicated in incomplete questionnaires where only biographical information was given. Nurses in both hospitals were also more likely than other staff, to witness the bullying of others and they reported that the exposure really disturbed them. Also, in both institutions the majority of participants were reluctant to report bullying incidents as they believed that they would not be taken seriously. There is a general understanding that the majority of those who bully others are females; this could be attributed to the fact that nursing is traditionally a job for females. This, however, does not suggest that men are excluded from inappropriate behaviours associated with bullying.

When comparing the two health institutions it can be concluded that bullying remains one of the most serious problems in

employment relations and that management needs to go the extra mile in assisting those who are victims; they need to go beyond EAP when providing counselling for both the victims and the bully. The majority of responses from both hospitals indicate that irritability and personality features were cited as the main cause behind bullying. In both hospitals patients were involved in bullying the nursing staff and responses indicated the victims again were reluctant to report the matter. It could be concluded that the reluctance on the part of the victim was due to the nature of bullying which has no tangible results. Usually when the matter is reported it's as though the whole story has been fabricated. This in turn leads to job dissatisfaction and detachment by employees from their jobs and also high perceived levels of injustice and unfairness. The findings on this research project are consistent with the findings in the Finnish study by Bjorkqvist *et al* (1994) who found that employees who had been bullied were especially affected by depression and showed more symptoms of anxiety. Bullying does not only affect those who are bullied but it also affects the performance of the entire organization as it leads to high absenteeism and presenteeism, including the serious intentions to leave the employment of the organization, further, see Appendix

4.8 USING DIVERSITY AS A STRATEGY TO MANAGING WORKPLACE BULLYING

Undoubtedly, bullying puts a lot of strain on interpersonal relationships in any organization as it affects both employees and employers alike. Workplace diversity is about recognizing the value of individuals and managing these aspects in the workplace. The concept of diversity includes the principle of Employment Opportunity and policies aimed at preventing future discrimination and to ensure that there is no discrimination based on race, sex, ethnicity and religious beliefs. Jennings (2003) points out that the following practices must receive regular and deliberate attention and they could be very useful in addressing problems associated with workplace bullying because it indicates that the employer has a general duty to care and to create a work environment that encourages tolerance among its employees. These are:

4.8.1 WELCOMING

Most people think of welcoming as something that happens when an individual joins the organization. People need to feel welcomed regularly throughout their employment lives. Almost everyone wants to be recognized by others and to know that their presence is important to the organization. Employees feel connected when

their presence is acknowledged on a regular basis. Also, employees need to know that people in leadership positions are aware of the work of each section in the organization, recognize that people are working hard and care about the employees' well-being. Focusing on how to make others feel welcome can help to address other issues such as classism or cliques. Ignoring barriers that create divisions will not enhance efforts to foster a workplace supportive of a diverse staff. Activities where staff members meet and converse outside of their own sections or units is another way to encourage interaction and sharing.

4.8.2 VALUING

It is rightly said that employees are an organization's most important asset, an asset which needs to be treated with some kind of delicacy and, most importantly, needs to be valued. Holton and Naquin (2002) provide that managers need to communicate to their employees that they are valued within the organization. Valuing requires an awareness and acknowledgment of employees' roles and responsibilities, hence, managing diversity means acknowledging people's differences and recognizing these differences as valuable; it enhances good management practices by preventing discrimination and promoting inclusiveness. It is therefore expected of management and other

colleagues to take time to let individuals or units of the organization know that their significant contribution is noticed and appreciated. In fact valuing requires management or a colleague to take an interest in others; that is, their activities and their work. This requires colleagues to listen to each other and respond when colleagues share their progress. This type of communication should not demoralize them but offer encouragement when colleagues experience challenges in their efforts. Valuing is demonstrating to others that their presence and contributions are noticed, make a difference and matter in the organization.

4.8.3 RESPECTING

Most people, if not all, believe in the golden rule; treat others as you want to be treated. Meaning that how you want to be treated is how others want to be treated. Jennings (2003) further points out that, in the context of diversity, respecting is finding ways to demonstrate the employee's regard for the quality of work and the contributions others make to their organization. Asking a co-worker about their work or offering observations about what is impressive in their project is a good way to show that one respects another's skills and talents. Also showing interest in another's projects, being aware of their personal work goals or just knowing that a colleague is

attending a seminar, all provide opportunities for dialogue and exchange. It is common practice for supervisors to often expect their subordinates to come to their offices or to make appointments to talk or report about their work; many employees will avoid such meetings because they do not wish to give the impression that there is problem. What employees are actually seeking is acknowledgement that their supervisor is aware of their work and most importantly cares enough to ask how things are developing. Welcoming, valuing and respecting must be applied to the entire organization in an effort to minimize the occurrences of bullying and especially if the organization plans to successfully retain talented and skilled employees in the workplace.

4.9 STRATEGIES FOR COUNTERING WORKPLACE BULLYING

4.9.1 RECRUITMENT AND SELECTION

Ellis (1994) provides that prevention is always better than cure. Employers should try to avoid appointing bullies in their work environment. This is because bullies often present themselves well and look good on paper but the cost to the company will be experienced in the long run. On the other hand Jetson (2005) provides that one cannot just conclude that a

certain individual is a bully and therefore cannot be employed. To ensure that the bully is rooted out in the recruitment and selection processes, the expert advice of a trained, registered psychologist could be utilized in the administering of personality tests. This will ensure that only people with good interpersonal relations and personality are appointed to a position in the organization.

4.9.2 INDUCTION, TRAINING AND SUPPORT

Nel *et al* (2004) provide that "place them and forget about them" is a common approach to recruiting and they further point out that starting a new job is considered to be one of the most stressful life experiences. A proper induction process that is sensitive to the anxieties, uncertainties and needs of a new employee is of utmost importance. Ivancevich and Glueck (1999) also point out that the first few days on the job are crucial in helping the employee get started in the right direction with a positive attitude and feeling. If induction is not properly conducted, new employees may find themselves on the receiving end of bullying. Also, all employees, including those in management should receive annual training in diversity, employment equity/equal employment opportunities (EEO), bullying and codes of conduct and unacceptable behaviours.

4.9.3 LEADERSHIP

According to Jetson (2005) managers need to ensure that performance management is not in any way restricted to achievement of outcomes but to ensure that the behaviour demonstrated on the job is also properly evaluated. Also, effective leadership at all levels is critical to inspiring and motivating employees to engage with the expected values and behaviours. Leaders in their respective positions should not wait until a complaint is made; they are required to also be diagnosticians.

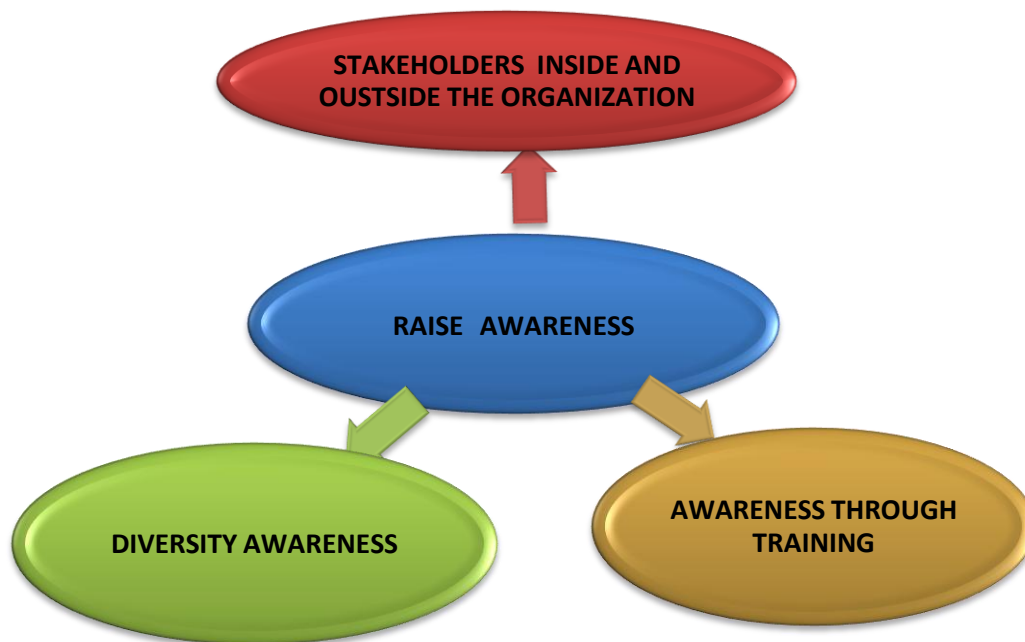
4.9.4 BEHAVIOUR MANAGEMENT

- When dealing with bullying there is a tendency to manage the behaviour and motivations of the target to avoid dealing with the unacceptable behaviour of the bully.
- Managers must be prepared to manage their way through defensiveness, denial, blaming, threats and hostility.
- One way or the other targets will be victimized; managers need to ensure that protection is provided for these people.
- Proper follow-up and monitoring should be provided otherwise manager's efforts will be wasted and actions will further reinforce the bullying behaviour (Jetson, 2005).

4.10 A PROPOSED MODEL TO TACKLE WORKPLACE BULLYING

Workplace bullying seems to be the biggest threat to interpersonal relations in any organization worldwide and it is one of the fastest growing forms of workplace violence. It constitutes offensive behaviour through vindictive, cruel, malicious or humiliating attempts to undermine an individual or group of employees in the workplace.

4.10.1 RAISE AWARENESS ABOUT THE EFFECTS OF BULLYING



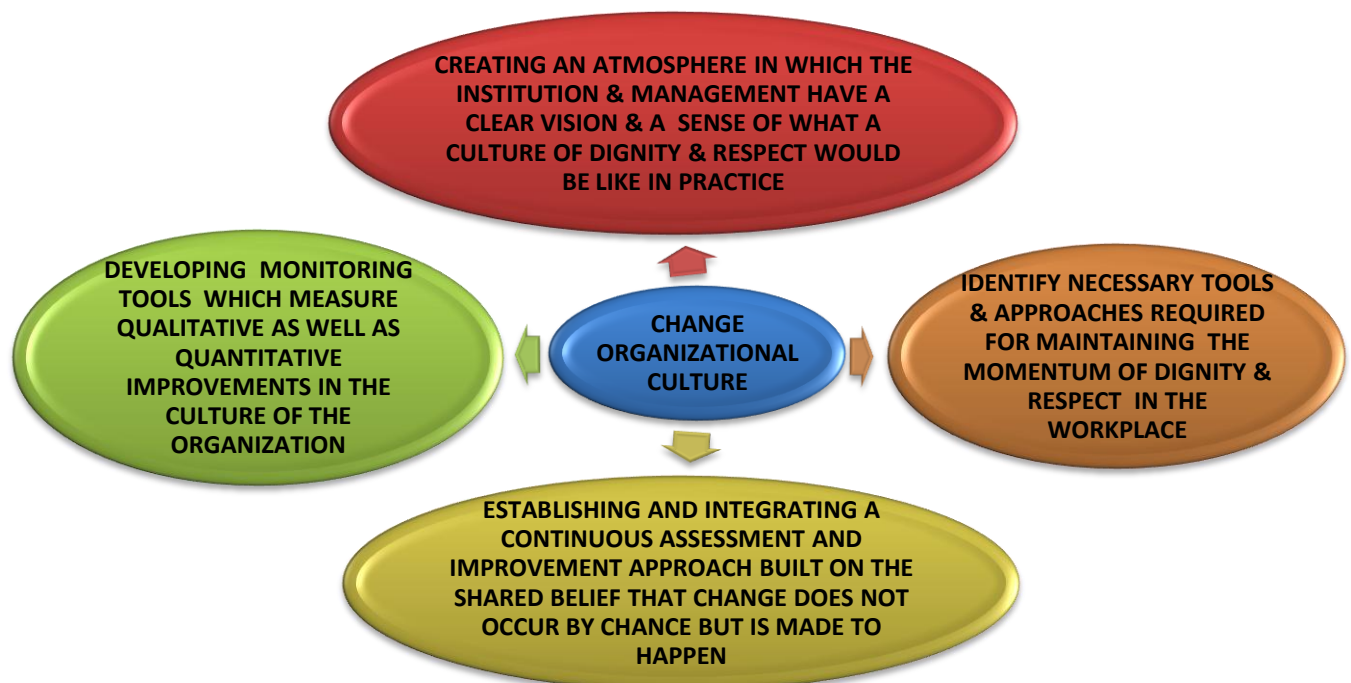
The hospitals under investigation need to increase awareness of workplace bullying and to clearly articulate the kinds of behaviour which will be deemed as unacceptable and in addition they ought to outline the procedures that will be followed in

the event of a complaint. When employees are consulted they will be more committed to:

- Reporting bullying incidents to the employer.
- Adhere to anti-bullying policies.
- Promoting a culture of respect and dignity for their fellow employees.

4.10.2 CHANGE ORGANIZATIONAL CULTURE

Tehrani (2001) makes the following suggestions on change in organizational culture in order to address bullying problems in the workplace.



Anti-bullying policies established in isolation are less likely to solve bullying problems unless they are supplemented with

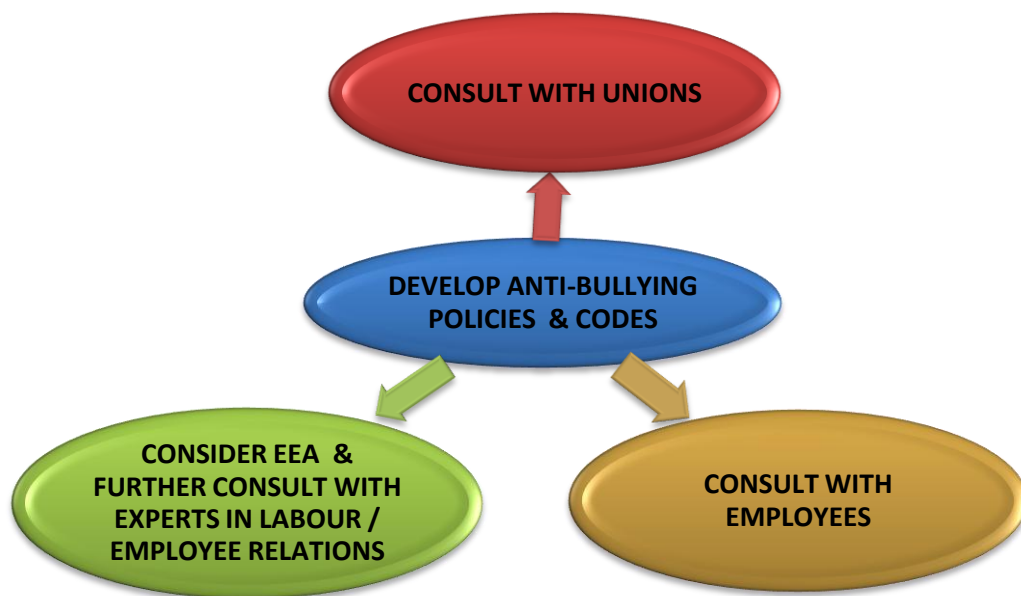
initiatives directed at reducing the environmental pressures and developing a more positive and inclusive organizational culture. When changing the organizational culture, organizations should conduct regular workplace surveys to establish stress and health levels and monitor the prevalence of bullying amongst their employees. When changing the organizational culture the expert advice of professionals such as clinical, occupational and social psychologist should be used as they are skilled in dealing with human behaviour. Changing organizational culture also involves developing a culture of support for employees by:

- Communicating openly at all levels; fostering a more engaging work environment through the involvement of staff in decision-making processes that impact on their work.
- Improving the availability of flexible working arrangements and ensuring fair and reasonable treatment of employees.
- Improving the quality of performance feedback, including informal, developmental-oriented feedback and corrective feedback.
- Increasing accountability of management by setting targets/goals and ensuring effective reporting structures.

It is also crucial to create a culture where victims of workplace bullying are prepared to come forward rather than quitting by leaving the organization and letting the perpetrator

off the hook. Furthermore, Sharpe (2007) provides that by creating a culture of trust and respect in an organization, including creating a work environment where intimidation is not tolerated, and formalizing this through core values and employment guidelines, much can be done to minimize, if not eliminate bullying.

4.10.3 DEVELOP POLICIES AND CODES OF CONDUCT



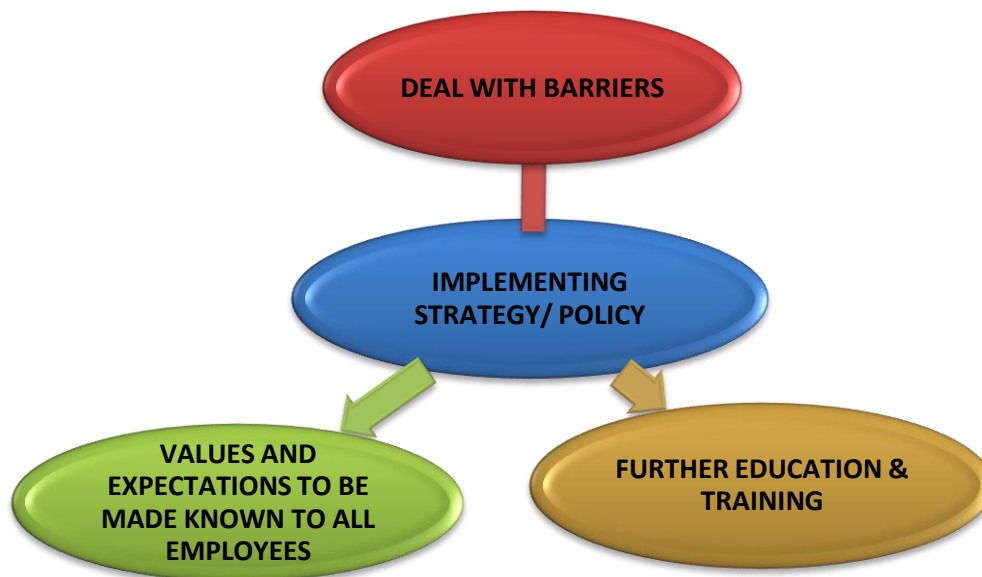
Van Jaarsveld and Van Eck (2005) point out that in any organization employers have a general duty to care and to protect the health and the wellbeing of their employees. Employees have a duty to ensure that they do not create or increase risk of psychological harm to another person. Also,

they need to have effective, safe and fair policies to deal with the problems of bullying, should it arise.

When developing a policy, the following should be taken into consideration:

- Clearly define bullying.
- A Statement about management's commitment to eradicating bullying must be included.
- Employee's rights in relation to bullying must also be included.
- Identify different roles people hold in relation to bullying.

4.10.4 IMPLEMENTATION OF STRATEGIES OR POLICIES



After policies and strategies have been developed they should not only be on paper, but management should demonstrate that they are fully committed to rooting out bullying in their workplace. The actions to be taken against those who are involved in bullying others should be made known to everyone in the employment of the organization.

4.10.5 REVIEWING, EVALUATION AND MONITORING OF THE POLICY

The policy and its related strategies and procedures will need to be reviewed on an ongoing basis to determine the impact it has had and to address any gaps identified during its

implementation. It is therefore crucial to include an evaluation process in the policy that identifies:

- How managers/supervisors will evaluate the success of the policy and its implementation.
- Who will be responsible for the evaluation?
- The timeframe within which the evaluation must occur.

Veale (2008) points out that monitoring feedback from all sources and taking action to influence change in the desired direction in an ongoing way demonstrates the organization's commitment to entrench the "new culture". Essential too are checks and balances for monitoring work climate, assessing whether innovations are on track, ensuring that the organization's values are reflected in practice and allowing early identification of non-alignment; the above reflect the risk areas which need to be considered.

Monitoring tools include, among others the following:

- Anonymous employee climate surveys.
- Performance management practices.
- 360 degree feedback.
- Exit interviews.

4.11 HUMAN RESOURCES APPROACHES TO REDUCING THE EFFECTS OF WORKPLACE BULLYING

4.11.1 JOB ENRICHMENT

Another human resources approach that could be used to ensure that bullying is rooted out of the institution's structures is job enrichment, where staff members at various levels are given more responsibility and control over how to do their jobs. Job enrichment is a type of job redesign intended to reverse the effects of tasks that are repetitive and require little autonomy. Some of these effects are boredom, lack of flexibility, and employee dissatisfaction (Leach and Wall, n.d). The underlying principle is to expand the scope of the job with a greater variety of tasks, vertical in nature, that require self-sufficiency. Since the goal is to give the individual exposure to tasks normally reserved for differently-focused or higher positions, merely adding more of the same responsibilities related to an employee's current position is not considered job enrichment. Martin (2005) identified the following forms of enrichment that designers should seek to include in jobs.



4.11.2 MANAGEMENT BY OBJECTIVES (MBO)

MBO is a systematic and organized approach that allows management to focus on achievable goals and to attain the best possible outcomes from available resources. Mullins (2007) states that this system provides an opportunity for staff to accept greater responsibility and to make a higher level of personal contribution. The principle behind Management by Objectives is to make sure that everybody within the organization has a clear understanding of the aims or objectives of that particular organization. This also includes the awareness of their roles and responsibilities in achieving those objectives. This system ensures that everyone in the organization feels valued and appreciated. MBO was first

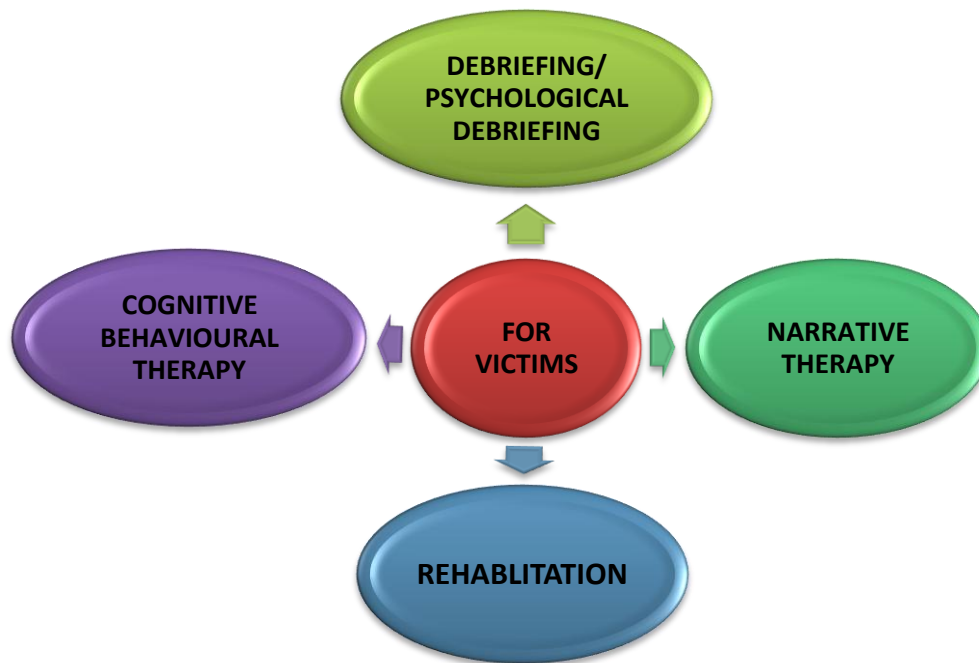
outlined by Peter Drucker in 1954 in his book "The practice of management" and according to Drucker, managers should avoid the "activity trap", that is getting so involved in their day-to-day activities that they forget their main purpose. Instead of just a few top managers, all managers should participate in the strategic planning process in order to improve the implementability of the plan and to implement a range of performance systems designed to help the organization stay on track. Here is the five step MBO process advocated by Peter Drucker.



4.12 PSYCHOLOGICAL APPROACHES TO HELP BOTH VICTIMS AND BULLIES

Victims of bullying, particularly when they have been bullied for a long period of time, may suffer a range of psychological difficulties and disorders such as anxiety, depression as well as post-traumatic stress disorder. Also, Tehrani (2005) maintains that there is a need to help the victims recover confidence and to provide them with the skills to help them gain control of their work and home lives; they need to understand what they may have done that contributed to the bullying and thereby protect themselves in the future. The aid that can be offered includes, but is not limited to, the following:

4.12.1 FOR THE VICTIM



4.12.1.1 DEBRIEFING OR PSYCHOLOGICAL DEBRIEFING

A debriefing or psychological debriefing is a one-time, semi-structured conversation with an individual who has just experienced a stressful or traumatic event. In most cases, the purpose of debriefing is to reduce any possibility of psychological harm by informing people about their experience or allowing them to talk about it (Retrieved 16 November, 2008 from World Wide Web: <http://en.wikipedia.org>).

The victim starts by telling of a time when things were normal, providing a description of his or her working life and other relationships before bullying. The employee is also encouraged

to recall any thoughts that occurred at the time of the bullying experience.

4.12.1.2 NARRATIVE THERAPY

Rich (n.d) provides that Narrative Therapy was developed by Michael White and David Epston. Its central idea is "the person never is the problem. The person has a problem". Narrative Therapy holds that "our identities are shaped by the accounts of our lives found in our stories or narratives". A narrative therapist is interested in helping others fully describe their rich stories and modes of living and possibilities associated with them. White (2000) points out that at the same time, this therapist is interested in co-investigating a problem's many influences, including the influence on the person and on his or her chief relationships. Cooper and Lesser (2005) states that by focusing on problems' effects on people's lives rather than on problems as inside or part of people, distance is created. The narrative therapist, as an investigative reporter, has many options for questions and conversations during a person's effort to regain their life from a problem. These questions might examine how exactly the problem has managed to influence that person's life, including its voice and techniques to make itself stronger (Payne 2000). Narrative Therapy assumes that each story

is ideological and representation of reality and is ideological (White: 2000).

4.12.1.3 COGNITIVE BEHAVIOURAL THERAPY (CBT)

Cognitive Behavioral Therapy is an action-oriented form of psychosocial therapy that assumes that maladaptive, or faulty, thinking patterns cause maladaptive behavior and "negative" emotions. (Maladaptive behavior is behavior that is counter-productive or interferes with everyday living). Davidson and Neale (2001) state that the treatment focuses on changing an individual's thoughts (cognitive patterns) in order to change his or her behavior and emotional state. One of the objectives of CBT typically is to identify and monitor thoughts, assumptions, beliefs and behaviors that are related and accompanied by incapacitating negative emotions, and to identify those which are dysfunctional, inaccurate, or simply unhelpful. This is done in an effort to replace or transcend them with more realistic and useful ones (Beck: 1993).

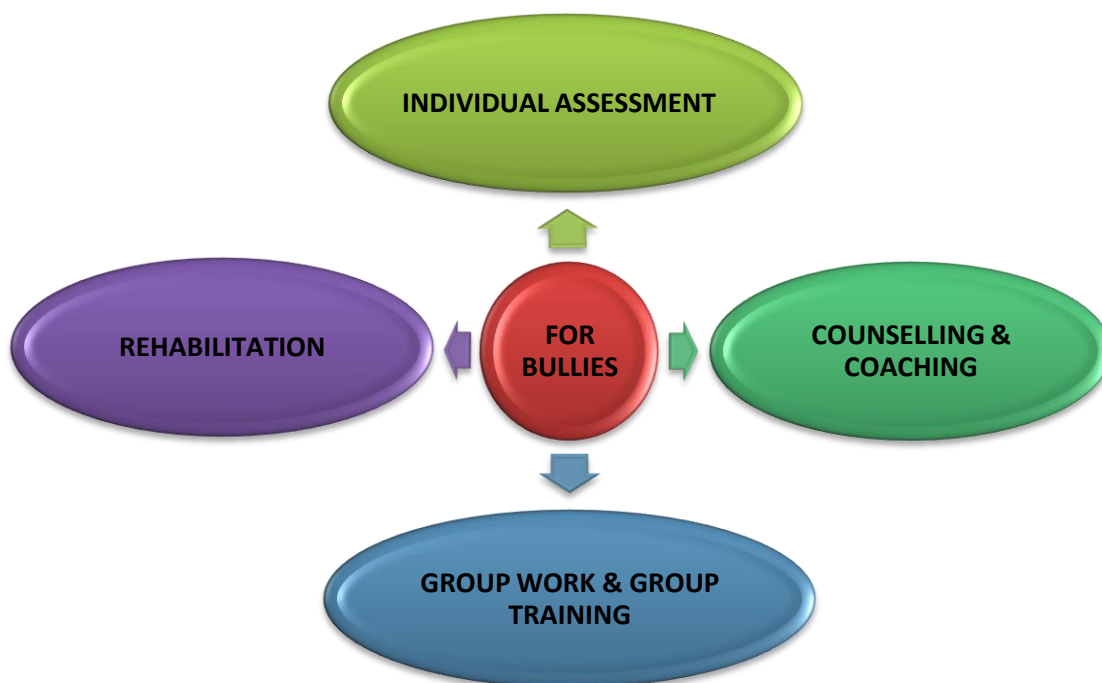
CBT involves learning how to change your thoughts (cognitions) and your actions (behaviours).

4.12.1.4 REHABILITATION

Rehabilitation is part of Behaviour Modification that is used to assist victims of bullying to gain self-confidence and independence

4.12.2 FOR BULLIES

There is a need to help the bully understand and evaluate the impact their behaviour has on others by assisting them in managing their own issues such as stress or anger management. Tehrani (2005) points out that the most appropriate way to deal with the bully is to adopt a behavioral modification approach to their behaviour.



4.12.2.1 INDIVIDUAL ASSESSMENT

During the assessment, the bully will go through a structured interview designed to obtain adequate information on the personal and situational factors involved in the bullying behaviours. Tehrani (2005) further points out that in addition, psychological tests should be conducted to identify personal and motivational styles of behaviour. After the individual assessment, an organization report must be prepared to provide the organization with information on the suitability of the employee for a behavioural modification programme.

4.12.2.2 COUNSELLING AND COACHING

If for example, the individual assessment has indicated that the employee who is the bully had been the victim, of say childhood abuse, counselling would tend to be the preferred intervention. But if the bully lacked certain social skills, a more interactive social-skills training or coaching programmes would definitely be more appropriate (Tehrani: 2005).

4.12.2.3 GROUP WORK AND GROUP TRAINING

According to Tehrani (2005) this is done in an attempt to consolidate the learning and to help the employee demonstrate their new interpersonal skills in a group environment. The group

will work towards building a new realization of what it is like to build respect within their teams and among colleagues.

4.12.2.4 REHABILITATION

For bullies rehabilitation is also similar to Behaviour Modification. This is used to treat Obsessive Compulsive Disorder (OCD), attention-deficit. Behavior modification (OB Mod) is a treatment approach, based on the principles of operant conditioning, which replaces undesirable behaviors with more desirable ones through positive or negative reinforcement

4.13 HOW TO CREATE A MENTALLY-HEALTHY WORKPLACE

- **Recognize** the need for change, and the rights of everyone in your organization (including you!) to work in a safe and healthy environment.
- **Redraft** policies which aren't working; policies such as respect and dignity at work or grievance procedures may need tightening or changing.
- **Review** and monitor your policies. Indicators of workplace bullying include aspects like higher-than-average attrition rates, sickness rates, lawsuits, tribunal hearings, disciplinary hearings and grievance proceedings.
- **Record** all your grievance and disciplinary hearings properly, noting down if personal disputes or conflict in

the workplace is at the source. Pay special attention to these signs of workplace bullying.

- **Retrain** managers and staff who are in mentally-unhealthy teams. Remember that HR also needs this training from time to time.
- **Remove** managers and staff shown to be involved in bullying. This does not mean pushing them sideways; they should not even be promoted but asked to resign. These people make any workplace unsafe and are a liability. Make bullying as serious an issue as theft or assault.
- **Renew** your efforts annually. Audit your workplace bullying. Taking it seriously means doing what's necessary to stop it and keep it out of the workplace (Retrieved October 20, 2007 from World Wide Web:<http://www.scottishboomerang.com>).

CHAPTER 5

CONCLUSION AND RECOMMENDATIONS

In conclusion, bullying is something that manifests itself in many workplaces and it should not be mistaken or disguised as strict management. The problem about bullying is that it is neither tangible nor measurable and it impacts negatively on performance of the entire institution if it is not attended to. As long as there are people with different personalities, bullying is inevitable. However, it remains the responsibility, not only of management to ensure that bullying incidences are minimized, but the responsibility of everyone employed to ensure that the impact of psychological harassment or harm is reduced to a minimum at all costs. The fact that people spend about 90-95% of their lives at work is an indication that harmony and respect for the human factor should exist in work stations and if bullying cases are not attended to this can adversely affect the performance of the institution as employees are subjected to unnecessary physical and psychological pressures.

5.1 RECOMMENDATIONS

It is therefore recommended that the following steps be taken:

- Encourage an open-door policy to ensure access to the management staff at any time.
- To properly deal with the escalating problems associated with workplace bullying awareness campaigns on what bullying is should be held for every employee for the purpose of encouraging employees to freely talk about experiences of bullying.
- HR Practitioners should themselves adopt policies with a human face in fighting workplace bullying. They can successfully do this by undergoing relevant training in human capital appreciation and behaviour modification.
- Workshops on good interpersonal relationships should be organized to enable employees to develop a sense of belonging in their work environment. As many psychologists have suggested, all humans have a basic, motivational drive to form and maintain caring interpersonal relationships. According to this view, people need both stable relationships and satisfying interactions with the people in those relationships. If either of these two ingredients is missing, people will begin to feel anxious, lonely, depressed and unhappy.
- When reported, the bullying behavior should be immediately acted upon; this is for the purpose of assuring the

hospital's staff that bullying will not be tolerated in any way. In addition, when bullying is reported management should listen with an empathetic ear and act swiftly before the problem escalates.

- As part of the Employee Assistance Programmes (EAP), e-therapy could be used to assist those employees who are suffering the consequences of stress due to psychological violence. Greenberg and Baron (2008) state that corporate hotlines defined as telephone lines staffed by corporate personnel ready to answer employees' questions and listen to their comments can be used to supplement EAP.
- Investigate the extent and the nature of the problem and to a large extent attitude surveys should be conducted frequently by registered psychologists or experts to determine the employees' attitudes towards each other, the organization and their jobs.
- Close contacts with members of the public or the local community serviced by the hospitals should be maintained at all times; this will enable patients to understand the nature and the functions of the health care system and to treat those who serve them with respect and dignity.
- An independent investigator should be appointed to investigate reported incidences of bullying; this should be

done for the purpose of maintaining impartiality. Most importantly, the investigator should understand his or her role, the rights of the alleged bully and what the expected outcomes should be.

- The department of health should create a zero tolerance anti-bullying policy which should form part of the wider commitment to a safe and healthy working environment and serve as a guide when hospitals develop their own human resources policies and procedures.
- The representatives of employees should regularly meet with the representatives of the employer to develop or update the grievance and disciplinary procedures in order to ensure that staff complaints are filed properly and the perpetrators are dealt with after the investigation.
- Counselling for the bully is not underestimated, especially where macro management style has been favoured.
- The personnel departments of the hospitals or the Provincial Department of Health should ensure that there are interviews with all employees at the point of departure as it might be possible to access those who are reluctant to speak out while in the employment of the hospitals.

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