

PSYCHOLOGICAL HARASSMENT IN THE AMBIT OF NURSING: AN INTEGRATIVE LITERATURE REVIEW

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ABSTRACT: The aim was to synthesize the scientific production regarding the practice of psychological harassment in the ambit of Nursing, in periodicals available online, in the period January 2005 – November 2012. This is an integrative review of the literature, undertaken using the following databases: the Latin American and Caribbean Center on Health Sciences Information, the Spanish Bibliographic Index on Health Sciences, and the International Literature in Health Sciences. The analysis of 15 articles revealed that the prevalence of the practice of psychological harassment in Nursing has grown significantly, particularly among female workers. The investigations showed that psychological harassment entails serious consequences for the worker's health, most of which are of a psychological nature. Thus, the need is verified for creating proposals for the prevention and even elimination of this practice.

DESCRIPTORS: Stress psychological; Occupational health; Nursing.

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INTRODUCTION

The transformations which occur in the world of work, caused by economic and political factors, have led to the exploration of human labor, which exposes the professionals to stressful situations, and wounds the human condition of the subject-worker. Since the advent of capitalism, the owners of the capital spare no efforts to obtain profit and productivity, this system's essential aims. Thus, this conduct from a proportion of the human species, and the neglect regarding the dimension of the subjectivity resulting from it, have promoted the appearance of suffering and violence at work⁽¹⁾.

It is appropriate to emphasize that this violence is characterized as psychological harassment, which in its turn refers to practices of humiliation, persecution, and threats in the workplace, to which the workers are exposed. The phenomenon occurs through subtle, disguised, intentional psychological violence, which occurs repeatedly and over a prolonged period of time, with the intention of humiliating and socially excluding the worker from her professional activities⁽²⁾.

As a result, it may be observed that psychological harassment occurs insidiously, with disastrous implications for the victim and for society, violating the human dignity of the person harassed. In this way, the fact is shown as an ethical problem, as it permeates the fundamental rights of the human being. These points must be rigorously considered, as they tend to increase in parallel with the increase of the psychological aggression suffered by the worker⁽³⁾.

It is noteworthy that the practice of psychological harassment affects the individual's physical and/or psychological integrity, which can cause depression, distress, insecurity, insomnia, lack of initiative, stress, pain and respiratory dysfunctions, which can even put the victim's life at risk⁽⁴⁾.

Psychological harassment can occur in four distinct ways, which vary depending on the hierarchical position of the victim and the harasser in the work process: 1) vertical harassment, in which the subordinate is harassed by a superior, this being considered the most serious and frequent; 2) horizontal harassment, in which the aggression is from a work colleague of the same hierarchical level; 3) bottom-up harassment, when the superior is harassed by one or more subordinates; and 4) mixed harassment, when more than one form of harassment occur simultaneously⁽⁵⁾.

This study describes that the practice of psychological harassment has been observed in widely va-

rying health work settings, both in public and private services, and above all in the field of Nursing; it may be undertaken by work colleagues, by the heads of services, or by other professionals who make up the health team⁽⁶⁾.

It should be emphasized that discussion regarding psychological harassment is gaining popularity in the current context due to the intensification and worsening of the phenomenon, given that this event occurs markedly in other types of social relationships outside the sphere of work. The practice, however, remains poorly dimensioned in these scenarios. Thus, considering this issue's relevancy in the ambit of Nursing, the need is asserted to undertake further research regarding this practice, which could contribute to increasing the social stability of this problem, which is increasingly affecting workers' health, silently and irreversibly.

In the light of the considerations presented, this study aimed to synthesize the scientific production regarding the practice of psychological harassment in the ambit of Nursing, in online periodicals, in the period January 2005 to November 2012.

METHOD

So as to achieve the objective proposed, the integrative literature review was selected as the research method. This allows a broad and systematic scientific investigation, so as to present the knowledge produced by previous studies⁽⁷⁾. For this, the following methodological stages were specified: undertaking of sampling (selection of the articles); categorization of the studies; definition of the information extracted from the publications reviewed; evaluation of the studies selected; and interpretation and presentation of the research's results⁽⁷⁻⁸⁾.

For bringing together the bibliographic material on the issue suggested for undertaking this study, searches were made in the following databases: Latin American and Caribbean Center on Health Sciences Information (LILACS), the Spanish Bibliographic Index on Health Sciences (IBECS), and the International Literature in Health Sciences (MEDLINE). These databases were chosen because they include national and international publications. For the search, the following Health Science Descriptors (DeCS) and Medical Subject Headings (MeSH) - were used, in Portuguese, English and Spanish: "Stress", "Occupational Health" and "Violence", which were combined using the Boolean operator "AND," with the descriptor "Nursing".

It should be noted that the following inclusion criteria were adopted: articles published in the period January 2005 to November 2012, in the Portuguese, English and/or Spanish languages, whose titles and/or abstracts covered aspects relating to psychological harassment in the ambit of nursing and which were made available in full, free of charge, and online. Editorials, letters to the editor, reflexive studies, experience reports, and duplicated publications were excluded, as were studies which did not address the issue relevant to the object of the review. Data collection occurred in November 2012.

Following analysis of the publications, in which it was sought to meet the criteria of relevancy and consistency of content, 22 publications were found which met the previously-established criteria; of these, seven were excluded because they were cited in more than one database. As a result, the effective sample was composed of 15 articles.

In the next phase, the data obtained through the assembled material (from extracts from the publications) were organized in spreadsheets, with information grouped in accordance with relevancy and equivalency to the thematic categories which make up this study's main aim. Following this planning and organizing, the thematic analysis of the above-mentioned data was undertaken.

RESULTS

Of the 15 publications found, eight (53.33%) were issued in Portuguese, five (33.33%) in English, and two (13.33%) in Spanish. Regarding databases, eight studies (53.33%) were found in LILACS, five publications (33.33%) were selected using MEDLINE, and only two articles (13.33%) were found in IBECES.

Regarding the year of publication, it was observed that 2011 and 2012 were the periods with the highest number of scientific articles published, with four productions (26.66%) each, followed by the years 2005 and 2008, with two studies (13.33%) each. The years 2006, 2007, and 2009 had only one article (6.66%) each. It was observed that in 2010 there were no publications on the issue proposed.

In relation to the periodicals, important Brazilian journals stood out, among which the *Revista Gaúcha de Enfermagem* and the *Revista Brasileira de Saúde Ocupacional* deserve mention, with two productions (13.33%) each, as shown in Table 1.

In relation to the articles' methodological design, it is noteworthy that, of the 15 articles selected, 12 (80%) are original articles, as shown in Table 2.

Table 1 - Distribution of the articles on psychological harassment in Nursing, by scientific periodical. January 2005 to November 2012. João Pessoa-PB-Brazil, 2012

PERÍODICAL	n	%
Revista Brasileira de Saúde Ocupacional	2	13,33
Revista Gaúcha de Enfermagem	2	13,33
Caderno de Saúde Pública	1	6,66
Cogitare Enfermagem	1	6,66
Revista da Escola de Enfermagem da USP	1	6,66
Acta Paulista de Enfermagem	1	6,66
Nursing Research and Practice	1	6,66
Journal of Nursing Scholarship	1	6,66
Revista Latino-Americana de Enfermagem	1	6,66
Journal of Clinical Nursing	1	6,66
International Journal of Environmental Research and Public Health	1	6,66
Index de Enfermería	1	6,66
Revista de la Sociedad Española de Enfermería Nefrológica	1	6,66
Total	15	100

Table 2 - Distribution of the scientific articles on psychological harassment in Nursing, by type of study. January 2005 to November 2012. João Pessoa-PB-Brazil, 2012

TYPE OF STUDY	n	%
Quantitative	2	13,33
Qualitative	1	6,66
Documental	1	6,66
Case study	1	6,66
Multi-centric	1	6,66
Retrospective	1	6,66
Exploratory cross-sectional	1	6,66
Descriptive cross-sectional	3	20,00
Descriptive	1	6,66
Review	3	20,00
Total	15	100

Regarding the content, the knowledge documented by the literature investigated was synthesized into two thematic categories: Psychological harassment in the ambit of Nursing: prevalence and risk factors; and Psychological harassment: consequences for the health of the Nursing worker.

DISCUSSION

Psychological harassment in the ambit of Nursing: prevalence and risk factors

Regarding the focuses of category I, the articles emphasize the prevalence of psychological harassment among professionals of the nursing team, also emphasizing what the main risk factors are for the appearance of this type of violence at work.

Psychological harassment in the work environment is constituted by aggressive, cruel, threatening and humiliating behaviours, exercised by an individual and/or group against the same person, with the aim of destabilizing her psychologically. It is appropriate to emphasize that nursing staff have a series of characteristics which make them particularly vulnerable to harassment, which results in an increase in prevalence, when compared to other health professionals. Among others, these characteristics are: the continuity of the care; the need to resolve problems which appear unexpectedly (the deterioration or death of patients, accidents); and the high emotional load, due to the nursing team working constantly against pain and death, which creates an atmosphere liable to produce emotional stress⁽⁹⁾.

In this light, one study on violence at work emphasized that the nursing professionals have a probability of being victims of psychological harassment which is three times higher than that of other professionals, as nurses have a high work load (in hours per day and content) and, often, urgency in undertaking the care. Hence it is ascertained that psychological violence arising from the demand from a given form of achieving the work reaches high – epidemic – levels, where 70% of the victims are women⁽¹⁰⁾.

In this regard, it is observed that 30.4% of the victims of violence at work reported suffering psychological harassment, the majority being women⁽¹⁰⁾. This fact is associated with another: that the great majority of workers in the nursing teams are female, and can suffer violence resulting from the authoritarianism and domination of the medical team which often is represented by the male figure; it is also that in the dominant patriarchal culture, women are more vulnerable, and are often impeded from achieving positions of greater responsibility⁽¹⁰⁻¹¹⁾, promoting their remaining in spaces of submission and oppression.

In one emergency service located in the city of Londrina, in the Brazilian state of Paraná, a study

revealed a concerning situation of psychological violence at work suffered by the nursing professionals. The results indicated that, of 33 of these workers and 14 doctors, 33% reported psychological and sexual harassment as the violence committed at work most, with verbal aggression being remembered by 95.2% of the participants. It should be clarified that verbal aggression constitutes psychological harassment when it becomes constant and injures the worker's dignity⁽¹²⁾.

It is also emphasized that the nursing teams with nurses who are aged below 30 years old and over 44 years old, who have spent less time in the job, who are female and with higher levels of anxiety, are considered at-risk groups for psychological harassment⁽¹³⁾.

Regarding shorter periods of work in the job in the place of work, authors⁽¹⁴⁾ mention that 58.4% of recently-qualified nurses are the targets of psychological harassment, the principal harassers being more experienced nurse colleagues. Corroborating these data, the studies⁽¹³⁻¹⁵⁾ mention that the greater the time since graduation, the lesser the degree of aggression suffered. As a result, it stands out that the psychological harassment of recently-qualified nurses is a highly prevalent issue in the health services, where the new staff need to be advised so that they can recognise this type of behavior and contribute to the practice's reduction.

Besides the aspects mentioned above, there are those related to the transformations of the modern world, and which make the work process favorable to the practising of psychological harassment, such as the political, economic, and social models intrinsic to the logic of capitalism, guided by neoliberalism and globalization. Among the more important features of this logic are the incentive to the proliferation of the privatization of services, the deterioration of the interpersonal relationships, the weakness of the employment links, the precarious form of contracting, the intensification of the demand for high productivity and the lowering of the worker's salary^(11,16).

Also indicated as aspects contributing to the appearance of psychological harassment are interpersonal conflicts present in racial prejudice and in xenophobia; issues relating to physical and mental disabilities; issues resulting from political or religious motivations; issues due to being a migrant; issues caused by intolerance of sexual option; and issues caused by the elementary fact of the victim being different or behaving differently from the other members of the work collective⁽¹⁶⁾.

It is necessary to emphasize that one of the determinants characterizing psychological harassment is found

in the uncontrolled encouragement of competitiveness at work, which sometimes engenders highly inappropriate and unethical behaviours from hierarchical superiors or even from colleagues^(1,9). Equally, given the current picture of serious unemployment, many workers overlook the occurrence of psychological harassment against themselves due to a reasonable concern that they need the job, which determines the privilege of the right of the stronger person – the boss – and harm to the psychological health of the persons harassed, the workers⁽¹⁾.

In summary, it was observed, through the studies, that psychological harassment is characterized as psychological violence occurring repeatedly against one individual for a prolonged period of time, and that as risk factors, it presents age, sex and the worker's time since professional graduation, as well as the conditions imposed by the intensified and insecure work.

Psychological harassment: consequences for the health of the Nursing worker

Regarding the consequences of the psychological harassment for the nursing worker's health, the selected studies allowed the investigation of the main physical and/or psychological forms of harm. These consequences can appear as "psychosomatic" disorders, which may include: depression; stress; low self-esteem; burnout syndrome; insomnia; fatigue; gastric problems, in particular gastritis and ulcers; cardiovascular disorders, such as tachycardia and hypertension; pains; and, in extreme cases, suicide⁽¹⁷⁾.

As a result, many of the harassed individuals identify their work as the main setting of this practice, which is capable of lowering the workers' quality of life, as they are affected by significant psychological disorders⁽¹⁸⁾.

In one experience report undertaken with narratives from 99 nurses, it was ascertained that among the negative emotional responses engendered by psychological harassment, the following stand out: stress, anxiety, rage, humiliation, fear, loss of control and feelings of impotence⁽¹⁹⁾.

In one study undertaken in Turkey, aiming to establish the psychological harassment experienced by nurses who work in health centers and the effects resulting from it, it was ascertained that the most frequent physiological reactions were tiredness and stress (72.9%), headaches (69.5%), loss of appetite (53.5%) and gastrointestinal complaints (52.9%). In relation to the

emotional reactions, the most emphasized was extreme sadness, related to hostile behaviors (58.8%) and bouts of crying (52.5%)⁽²⁰⁾. Thus, the nurses' tension and permanent state of vigilance are the most frequent and most intense consequences related to this practice⁽²¹⁾.

In this regard, the nurses correlate the harassment with the reduction in the quality of the care given to the patient^(19,21-22). A patient who depends on professionals who are victimized through psychological harassment may be vulnerable to various forms of harm resulting from the inefficacy of the care, given that the nurses' cognitive skills and ability to relate, in these cases, are compromised⁽²²⁾.

It is necessary to emphasize that this practice is against fundamental human rights, which include: the protection of the liberty of the individual rights and guarantees; the attendance to economic, social and cultural needs and rights; and the preservation of rights to fraternity and solidarity⁽¹⁷⁾. In other words, in cases of psychological harassment, the victim is totally unprotected and at the mercy of a destructive phenomenon.

In the light of this, it is observed that psychological harassment entails serious consequences for the worker's mental health, to the extent that this can negatively and definitively mark the life of the harassed person – which demands urgent protective measures. Equally, it is recognized that psychological harassment is an invisible epidemic and that this invisibility results in the failure to mobilize all possible resources in order to combat it efficaciously⁽²¹⁾.

Finally, behaviours of violence in the workplace need to be identified at an early stage, so that new policies, preferably public policies, may be implemented, with a view to improving the quality of life of health professionals, in this case, nursing staff.

FINAL CONSIDERATIONS

It was determined that discussion regarding psychological harassment in the ambit of nursing is occurring on a broad scale, as evidenced in the publications investigated, in which the discussion on this issue has taken place in various countries. The study showed that the prevalence of psychological harassment in Nursing has increased significantly, and that it entails serious consequences, essentially psychological, for professionals in this field.

It follows that this issue deserves further investigation, and that it is necessary for researchers to under-

take studies which allow the in-depth investigation of the elements of the world of work which determine this health problem. Hence, the study sought to contribute to the publicizing of the information addressed here, and to warn about the need to eliminate and prevent this practice. In this respect, it also falls to the nursing workers to be alert and participate in the construction of strategies which may be adopted so as to avert psychological harassment.

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