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Exploring antecedents and outcomes of organisational bullying in a Norwegian healthcare setting

BACKGROUND

- Avoiding bullying is crucial for the delivery of hospital services, and for securing a good and safe psychosocial work environment for hospital workers.
- Levels of bullying may vary in different contexts, and empirical research on the field is necessary.
- Knowledge within the research field of bullying can be applied to **increase understanding** of factors associated with bullying, and to **design bullying prevention programs**.

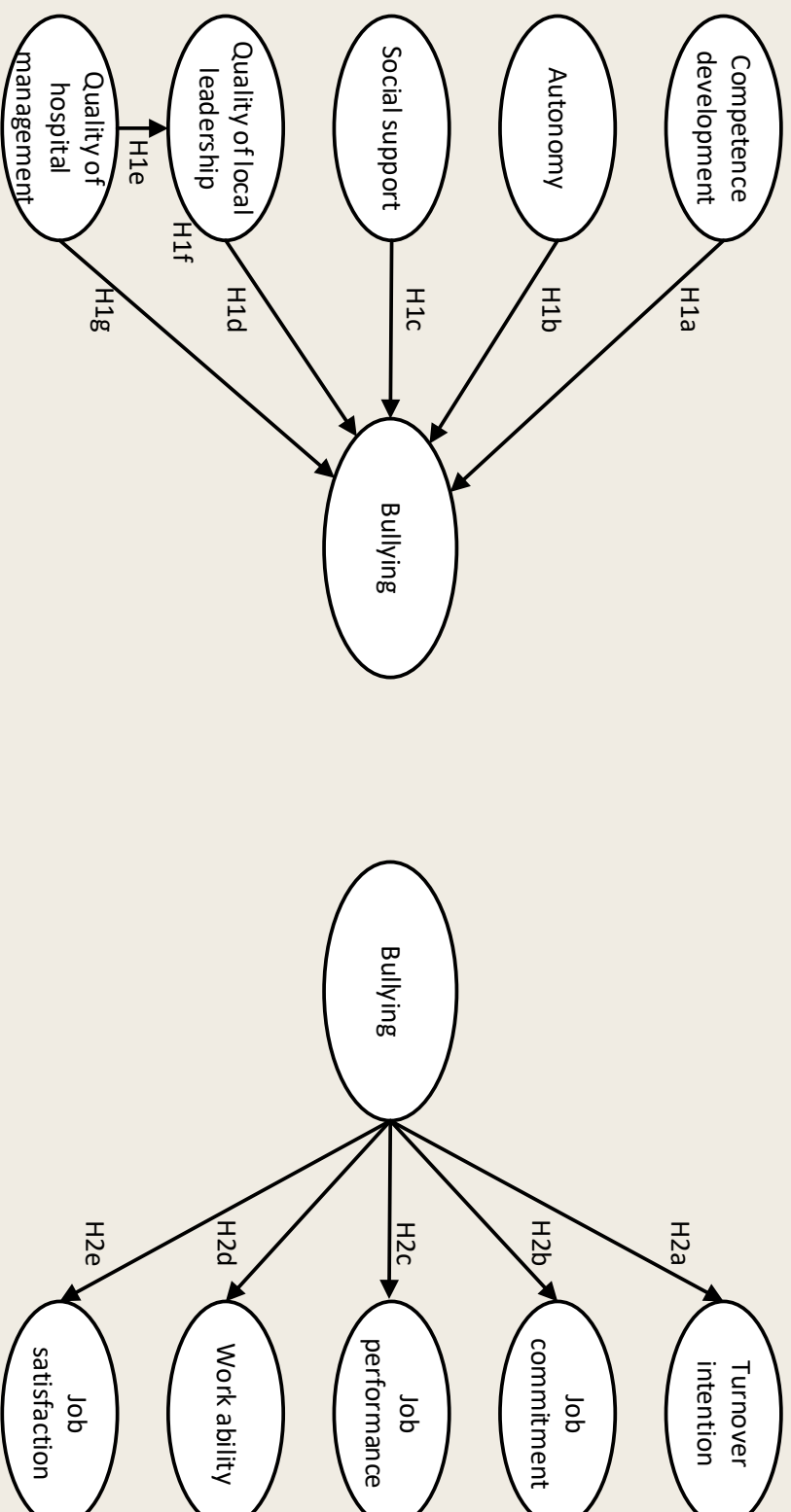
AIMS

- The aim of the current study is to explore antecedent and outcomes of organizational bullying in a Norwegian healthcare setting.
- Further, two theoretical models is developed and tested.
 - The first model incorporates **preventers of bullying**, while the second model incorporates **outcomes of bullying**

THEORY AND EXPECTATIONS

- In the current study we wanted to explore both **antecedents** and **outcomes** of bullying.
- Since job design is considered among the most powerful contextual factors associated with worker well-being (Pinder, 2008), we further draw on the Job-Demands Resources model (JD-R model; Bakker & Demerouti, 2007) to investigate work characteristics as antecedents of bullying, and focus **primarily on job resources**.
- Specifically, we anticipate that higher levels of **competence development, autonomy, social support, and quality of management/leadership** will **reduce** bullying.
- Further, we investigate how bullying relates to certain outcomes, including **turnover intention, job commitment, job performance, work ability** and **job satisfaction**.

Current study: Theoretical models and hypothesis



Antecedents of bullying

Outcomes of bullying

Method

- Self-completion questionnaire data from hospital workers at four different hospitals was collected.
- A sample of 9162 hospital employees from four public Norwegian hospitals were part of the study.
- Data was analyzed using descriptive statistics, confirmatory factor analyses, correlation and structural equation modelling (SEM).
- The response rate was 40 percent (N=9162).
 - 78.4% were female
 - 40.5% were less than 40 years
 - 87.4% had a fixed position

Data analyses

- To test the hypothesized research models, we used structural equation modelling (SEM).
- A, two-step analytical approach was used as suggested by Anderson and Gerbing (1998).
 - First the measurement models is tested and assessed with regard to validity
 - Thereafter the structural models is performed to estimate the fit of the hypothesised model to the data.
- Moreover, to reduce the complexity of the model estimation, the theoretical model was divided into an antecedent model and one outcome model, as presented in Figure 1.
 - This corresponds well with hypotheses being investigated, without exaggerating and challenging to much the complexity of the model estimations which is not recommended (Hays, 2013).
- Hence, the measurement model was also divided and performed separately for the antecedents and structural model constructs.

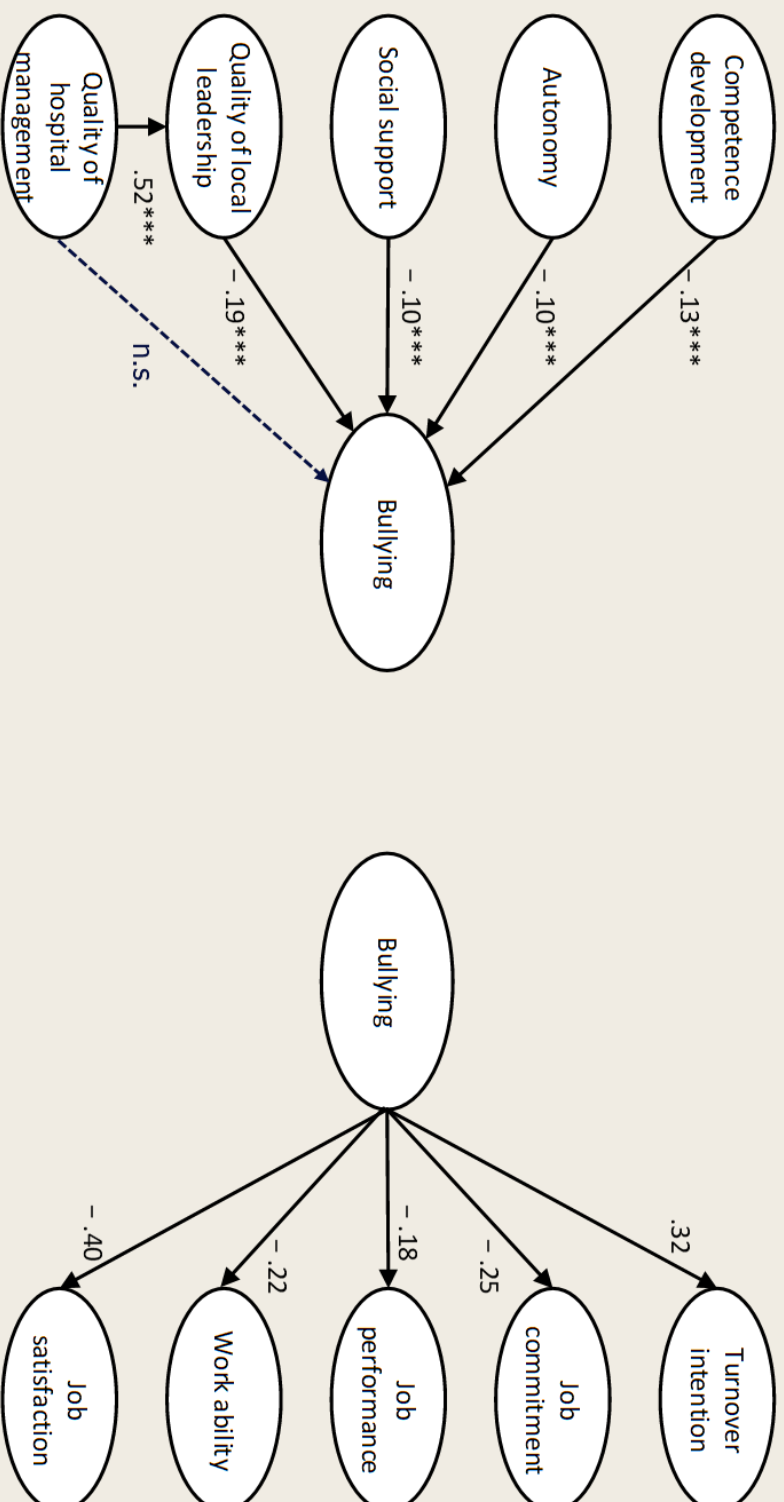
Standardized measures

- **Competence development**
(Kristensen, 2000)
- **Social support**
(Van der Heijden, 1998)
- **Autonomy**
(Dye, 1996)
- **Quality of hospital management**
(Van der Heijden, 1998)
- **Quality of local leadership**
(Van der Heijden, 1998)
- **Negative act questionnaire (NAQ)**
(Einarsen, Hoel, & Notelaers, 2009)
- **Turnover intention**
(Holte et al., 2003)
- **Job commitment**
(Allen & Meyer, 1996)
- **Job performance**
(Elo et al., 2000)
- **Work ability**
(Tuomi et al., 1994)
- **Job satisfaction**
(Kristensen, 2000)

Validity and reliability

- Satisfactory results related to:
 - Cronbach's Alpha
 - Statistical variation on measurement concepts
 - Correlations
 - Confirmatory factor analyses
- Adequate to test structural model based on measurement properties

Results: Structural equation modelling



Antecedents of bullying

Outcomes of bullying

Discussion I

- Findings confirms the unambiguosness message that avoiding and preventing bullying is as important goal for healthcare employees and providers.
- This study contributes to the bullying research field and illustrates the negative outcomes of bullying in relation to:
 - **Higher**
 - **Turnover intentions**
 - **Lower**
 - **Job satisfaction, job commitment, work ability and job performance**

Discussion II

- Results illustrate the importance of developing the work environment
 - Increase/develop job resources:
 - **Possibilities for learning and competence development**
 - **Participation in decision making and foster worker autonomy**
 - **Reinforcing social support between co-workers**
 - Compared to reducing job demands:
 - Increasing job resources is normally a more feasible strategy (Schaufeli, 2015)

Discussion III

- Furthermore, this study provides empirical support for the importance of **leaders** and **managers** in relation to bullying.
- Interestingly, the results illustrate that quality of hospital management have an indirect influence to hinder bullying, via the strengthening of quality of local leadership.
 - Quality of hospital management do not have a direct relation with bullying.

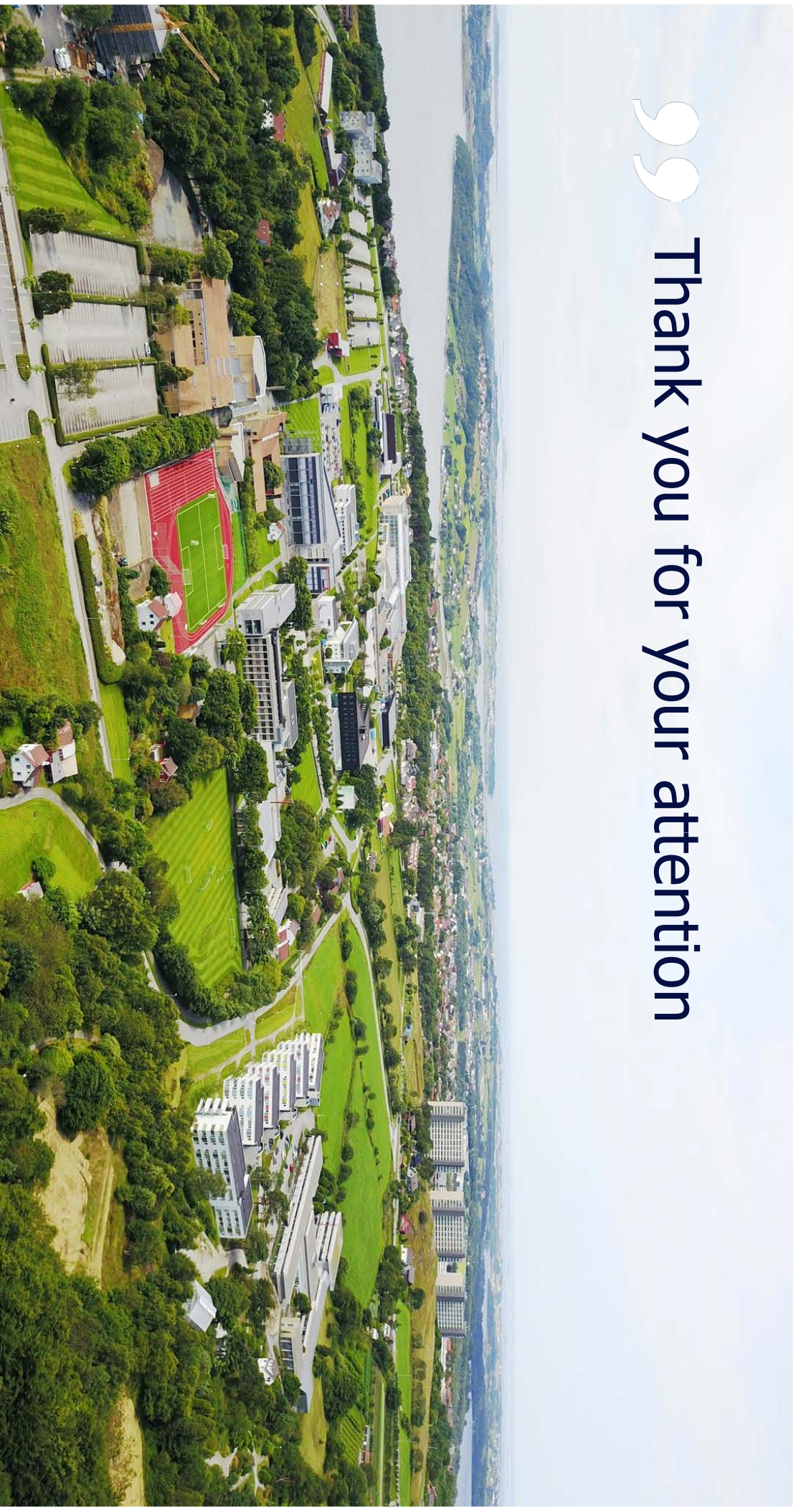
Implication

- Job resources should be monitored at all hospitals levels
 - Benchmarking
 - All levels: Not just aggregated level
- Important to revise and update data related to personnel belonging in hospitals (before conduction surveys)
 - Potential pitfall: Having bias in org. data.
- Important to evaluate risk related to bullying
 - Particularly important to implement risk reducing measures for low performing teams/departments
- Important to measure and monitor work environment
 - Define time intervals
 - Monitor and follow up of bullying prevention programs

Conclusion

- The findings of the present study offers valuable insights in **what types of job resources** might prevent workplace bullying in hospital settings.
 - Emphasizes the importance of **monitoring and managing job resources** as well as **strengthening** the quality of hospital management and quality of local leadership
- The results indicates strengthening of these job resources will **improve the psychosocial work environment** and **reduce** bullying.
- Confirms the **many unwanted outcomes** that are related to bullying in hospital settings.

” Thank you for your attention



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