Workplace Bullying May Be Linked to Long-Term Health Issues

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A new study links workplace bullying to negative health outcomes for employees, including increases in long-term sick leave and prescriptions for antidepressants.

Rather than relying on physical threats or violence, workplace bullies are far more likely to turn to emotional attacks to humiliate or undermine their targets. These persistent, negative interactions can lead to severe stress-related health issues, such as depression and anxiety.

Bullying doesn't just harm the health of individuals, it also hurts productivity. Research suggests that the adverse health effects associated with bullying lead to increases in absenteeism, sick days, and turnover. Research published in *Psychological Science* found that exposure to bullying in childhood predicted heightened risk of problems related to health, poverty, and social relationships in adulthood. By the time they were in their mid-twenties, people who had been bullied growing up were more than twice as likely to have difficulty in keeping a job compared with peers who had never been bullied.

To find out more about how bullying impacts employee health, an interdisciplinary team including psychological scientist Annie Hogh (University of Copenhagen), economist Tine L. Mundbjerg Eriksen

(Aarhus University), and professor of public health Åse Marie Hansen (University of Copenhagen) examined an unusually rich data set collected from over 3,000 Danish employees.

Their results showed that men and women reported the same types of negative, bullying behavior from coworkers, and similar negative health effects immediately after being exposed to bullying. However, after being bullied, men and women appeared to have very different long-term health outcomes.

There was evidence that bullying had a long-term, negative impact on women's health: Women's rate of sickness absence doubled and their use of antidepressant prescriptions increased after experiencing bullying. Men who reported being bullied were twice as likely to leave their jobs as their non-bullied peers, but there wasn't a significant relationship between bullying and long-term sickness absence or medical treatment.

"For women, we found increases in the use of antidepressant medication in the years after bullying, indicating long-term health consequences of exposure to bullying," the researchers write. "For men, we found no significant effects on long-term health, although there was some indication that men reported higher levels of presenteeism when exposed to bullying."

As a part of the 2006 Bullying Cohort Study, a comprehensive survey was emailed to employees of 60 different Danish companies. The questionnaire included questions gauging respondents' stress, health, sleep, sickness absences, and experience of negative bullying behaviors at work.

In an attempt to obtain more objective measures of bullying, the researchers used a validated assessment that avoided the term "bullying" altogether. Rather than asking participants to self-report their perceptions of whether they had been bullied at work, the Negative Acts Questionnaire-Revised (NAQ-R) asks people to report how frequently they've experienced exposure to 21 specific negative actions such as "being humiliated or ridiculed in connection with your work."

The research team defined an individual as the target of bullying if they had "been subject to a minimum of two negative actions weekly within the past six months." To qualify as bullying, these negative actions had to take place over a long period of time, and had to have been perpetrated by someone with higher rank and authority.

Data from the bullying survey data was then matched with Danish government registry information on employment status, prescriptions, and medical diagnoses. The government employment data included weekly updated information on sickness absenteeism, unemployment, previous labor market history, and previous sickness absence history.

Approximately 7% of the 3,182 respondents reported a consistent pattern of workplace bullying, similar to previously reported prevalence rates. Men and women largely experienced the same kinds of bullying behaviors at work, but the results suggest that men and women had divergent reactions to bullying. Men who were bullied were more likely than women to go into work even when they were sick, but women were more likely to seek out medical treatment and take medical leave.

"While men display no increase in sickness absence or in consumption of antidepressants, they do appear to be less likely to earn higher wages," Hogh and colleagues explain. "The results also suggest

that men, if bullied, may be more likely to leave the labor force completely."

Exactly why male and female employees react to bullying different is unclear, and the authors caution that the effects of bullying are difficult to identify and tease apart from other confounding factors. Overall, the results suggest that bullying can have serious consequences for organizations, and managers should implement strategies to reduce or eliminate bullying.

References

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