MENTAL HEALTH AND HARASSMENT IN THE WORKPLACE

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Contribution to Emergency Nursing Practice

- What is already known about this topic? Harassment experienced by emergency nurses in the clinical setting, can be detrimental to their mental health.
- What does this paper add to the currently published literature? This article adds to the current published literature the importance of supporting emergency nurses who are experiencing harassment in the workplace.
- What is the most important implication for clinical practice? The most important implication for emergency nursing is to be empowered to take action to stop harassment in the workplace when witnessing uncivil behavior and bullying.

Abstract

Harassment in the workplace has become all too common in today's society. Acts of uncivil behavior and bullying create stressful and difficult working environments. Individuals or groups are targeted without legitimate cause, thus creating feelings of stress, fear, anger, and anxiety that can affect mental health. Fear of speaking up owing to retaliation allows the uncivil behavior to continue. Emergency nurses should take action to stop the behavior and may need to seek professional help for mental health care.

Key words: Harassment; Mental health; Workplace; Employees; Employers; Emergency nursing

Introduction

Workplace environments including emergency departments should promote a culture of safety and respect. Unfortunately, that is not always the case for many individuals. Workplace bullying is noted in various settings, from healthcare to office workers. It has been reported that up to 94% of the workforce within the preceding 5 years was subjected to toxic working environments, with 64% still working in such conditions. The stress of dealing with a toxic working environment can put a toll on the physical and mental health of the emergency nurse. Daily stress affects their job performance, productivity, and lack of interest in daily functions. Absenteeism is common, because the emergency nurse can find it difficult coping going to work on a daily basis; mental health signs of depression, anxiety, and posttraumatic stress disorder are common in toxic working environments. Working environments suffer owing to uncivil behaviors; the loss of well-qualified nurses within the emergency department can contribute to job turnover, and many times leadership either is not aware of the reason employees leave or looks the other way to avoid confrontations.

Case Study: You Are Not Welcome Here

Kim Chan had worked in 3 Magnet teaching hospitals over the course of her 25 years of nursing practice within emergency nursing. She was excited to begin a new position as a nurse educator at the emergency department of a small...
West Coast hospital after completing her master’s in education degree 1 year earlier.

Upon arrival to her new position, Kim was introduced to the emergency department staff. The charge nurse Nancy was abrupt with Kim upon meeting her. Kim decided to give Nancy the benefit of the doubt, because she may have been busy. Nancy had worked in that emergency department for 15 years and had applied for the nurse educator position that was awarded to Kim. Nancy resented Kim for obtaining the job instead of her and made derogatory remarks to other staff members about Kim’s suggestions on nursing education and in-services. During Kim’s first in-service to the ED staff, Nancy mocked her teaching methods and did not accept the new practice, because “her ED did things their way and they were not going to change their practice.” One of the emergency nurses explained to Kim the reason Nancy did not like her, disclosing she was a tough nurse and gave the new nurses a hard time.

Owing to the toxic work environment created by Nancy, Kim had difficulty performing her role and began developing anxiety about going to work. Her stress level negatively affected her sleep pattern and appetite, and she considered resigning from her position. Kim decided to speak with the nurse manager regarding the situation. The nurse manager listened to Kim’s concerns and stated she would speak to Nancy; however, she was newer to the emergency department although Nancy had been there for an extended time and had a reputation for being difficult.

After speaking to the nurse manager, the toxic work environment did not improve. Kim reached out to Human Resources regarding the situation, and she asked to be transferred out of the emergency department, because her physical and mental health were being adversely affected. Human Resources was able to offer Kim another position within the hospital. The nurse manager received additional training on harassment in the workplace, and Nancy received a verbal warning and counseling. If additional complaints of harassment were to be made against Nancy, the next steps, per Human Resources, would be a written warning and possible termination.

The emergency department lost an experienced emergency nurse and qualified nurse educator owing to a toxic workplace environment. Kim attended counseling offered by the hospital’s employee assistance program (EAP) to help her cope with the emotional distress she endured during her employment in the emergency department. Kim transferred to her new position as a nurse educator on a medical-surgical unit and remained in the position for 2 years before securing a position at another hospital working as an emergency nurse educator.

Harassment and Bullying

When we discuss uncivil comportment, the terms harassment and bullying are commonly used. The terms are indicative of persistent toxic behavior. Actions of harassment and bullying are used for control; they include demeaning verbal, emotional, and physical acts and abuse of power. When the emergency nurse or other individuals are related to a protected class defined by sex, age, race, religion, culture, or disability, the behavior can be defined as harassment.

Bullying is defined as repeated ongoing actions aimed at an individual or group with the purpose to cause harm. Minority groups are often targeted; this can be regarded as unlawful behavior. Workers in various roles and positions are affected by harassment, and the actions perpetrated against affected workers present in various ways. Online bullying is a form of harassment commonly used. Derogatory, blameful, and demeaning emails undermine the emergency nurse’s ability to be productive by causing them to experience embarrassment and low self-esteem. Emails may be sent to only the individual being bullied or may include others in the workplace; the purpose most often is to falsely blame the receiver for errors and humiliate them.

Bullying has been noted as physical harm: pushing, shoving, threatening, stalk, and intimidating. The latter are all actions used to harass coworkers. Gossip, false rumors, and inappropriate comments are conducive to workplace harassment. Sexual harassment and gender-based harassment are common in health care where females are more prone than males to encounter the behavior. Sexual harassment can be experienced by both sexes through physical advances or comments made directly to the individual and derogatory rumors in the workplace, via email or social media.

Harm of Harassment on Mental Health

Harassment or bullying is harmful to mental health; the emergency nurse subjected to the repeated behavior should act to stop it, because it can cause health issues, affect their performance in the workplace, and negatively affect their personal lives. The anxiety of having to face on a daily basis the individual or group can negatively affect coping
mechanisms. The emergency nurse may feel isolated and helpless without support or guidance on how to stop the situation. They also may feel embarrassed and blame themselves for the uncivil behavior.

**Effects of Harassment in the Workplace**

Workplace bullying promotes social isolation; the affected individual may be excluded from meetings at work and information pertaining to their job function or may be criticized on their work performance. Most often, the person that performs the uncivil conduct is popular in the workplace, which can cause challenges for the affected individual wanting to speak up. Unfortunately, when the unhealthy bullying behavior goes unaddressed by coworkers, managers, directors, departments of Human Resources, and administrators, the employees actively engaging in these negative behaviors, unchecked, intensify the frequency and worsen their behaviors.

Harassment can be difficult to cope with in the workplace and impacts affected nurses’ professional and personal lives. Nonetheless, harassment can be quickly identified and intervened upon in workplace settings. The key to ending harassment begins by acknowledging that an unhealthy work environment exists, confronting the employees fostering this environment, and establishing workplace policies that address expectations of professional conduct. Policies also must include consequences for harassment in the workplace that employees will face if their behavior does not change.

**TIPS FOR EMPLOYERS IN CEASING WORKPLACE HARASSMENT**

- Develop workplace policies that provide clear definitions of harassment and bullying behaviors within the workplace and the expectation of employees to demonstrate civility.
- Require all employees to attend annual mandatory training on the identification and reporting of harassment in the workplace.
- Provide orientation for all new hires that includes training about harassment within the workplace.
- Take progressive actions with employees who have been identified as harassing others in the workplace: verbal warning, offer of EAP support (eg, counseling, anger management), warning in writing, mediation (with the affected person), suspension, and termination.
- Provide support to employees (eg, mediation, EAP, time off from work, shift reassignment or transfer within the organization if available as an option and only if requested by the employee) that have been affected by harassment within the workplace.

**Seeking Mental Health Care**

Sometimes after experiencing harassment, mental health treatment is indicated as part of the recovery process. Employees that have been psychologically affected by workplace harassment should be referred to EAP programs at their workplaces. This referral process should be explained to all emergency nurses and other employees when hired and annually during harassment training. By addressing employees’ mental health associated with harassment sustained in the workplace, quality emergency nurses can be retained and the trauma experienced during bullying can be eradicated early. Hence, healing can begin for affected employees and they can successfully move forward in their professions. Unfortunately, interventions were not deployed early enough to retain Kim in the initial emergency department or the hospital.

**Conclusion**

It is unfortunate that harassment is experienced in the workplace. However, when it is not tolerated or ignored, it can be stopped. Healthy workplaces can be easily achieved through the commitment by employers to put the health and well-being of all of their employees at the forefront of workplace behavioral expectations and adherence to policies that do not tolerate uncivil conduct.

**Author Disclosures**

Conflicts of interest: none to report.

**REFERENCES**
