Workplace bullying of social workers

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Abstract

Workplace bullying has become a topic of international interest in recent years, but remains under-researched in social work. This paper reports on a qualitative study of 17 social workers who reported being bullied in the workplace. The participants told of being persistently targeted with escalating oppressive behaviours, generally by superiors such as supervisors and managers. The bullying had a negative impact on work-related confidence and led to increasing anxiety and stress that was manifested emotionally, socially and physically. Most participants left the workplace in which they encountered bullying, generally following attempts at seeking and negotiating change. Contrary to their fears, most were able to find new employment in another social work agency. Amongst the most lasting impacts on participants was a change in 'worldview' including a change in general levels of trust and perceptions of caring professions. The overwhelming impression is of resilient workers, who have reflected on their experiences and are now striving to contribute, from what they have learned, to the building of positive workplaces.

Introduction

The topic of workplace bullying has gained prominence over recent years, and recognition of the phenomenon has led to some changes in employment law. In New Zealand, relevant legislation includes the Health and Safety in Employment Act 1992; the Health and Safety in Employment Amendment Act 2002; the Employment Relations Act 2000 (amended in 2005); the Human Rights Act 1993; and the Harassment Act, 1997. Legislation now recognises that 'workplace stress' is a 'potential workplace hazard' (Scott-Howman, 2006a), albeit that legal actions against bullying have to date most frequently been unsuccessful, this being due to such cited reasons as there being 'no evidence of bullying' (Brookers Online, 2006b); 'unpleasant tone does not constitute bullying' (Brookers Online, 2006c); and complainant appears 'prone to over-dramatisation' (Brookers Online, 2006a). Furthermore, in one case, which involved the Schizophrenia Fellowship, the Judge stated that the application was dismissed because, amongst other reasons, the complainant was 'well aware of conflict in workplace when appointed' (Brookers Online, 2006d). Cases are complicated in part by the difficulty of distilling 'facts' where there are conflicts in perceptions and recollections.

The popular literature that has emerged around the subject is typically less equivocal. Bullies are chided and may be typecast (Maida, 2006), whilst a target is typically described as '…an individual who … has the desirable qualities of competence, networking and emotional intelligence' (Needham and Olsen, 2003). Over recent years, scholarly research into

collegial violence in professions has been undertaken, focusing in particular on nurses in the public health sector (Farrell, 1996, 1999, 2001; Hesketh et al., 2003; Lewis, 2006).

With respect to social work, however, whilst there is a significant body of literature relating to violence perpetuated by clients against social workers, and the effects of such violence are widely recognised (Beddoe, Appleton and Maher, 1998; Macdonald and Sirotich, 2001; Newhill, 2003; Spencer and Munch, 2003), there remains a paucity of literature and research on collegial violence in all forms. In particular, there is a gap in the literature with respect to workplace bullying of social workers.

Beddoe, Appleton, and Maher (1998) reported on a survey of members of the Aotearoa New Zealand Association of Social Workers (ANZASW) in which they found that 18% of social workers had experienced violence from staff in their own agency, and 8% from staff in another agency. It is not clear if these percentages are additive.

The project upon which I report explored the relevance of the topic of workplace bullying and in particular the impact on those who consider that they have been targets of such violence. This being an exploratory study, it is not possible to determine the prevalence of bullying of social workers. Due to space constraints this paper does not set out to explore theoretical explanations of causes of bullying in any detail. This will be done elsewhere.

Methodology

The study was approved by the University of Canterbury Human Ethics Committee. Participation in the research was invited through Social Work *Noticeboard* and *Social Work Review*, from members of ANZASW who had completed the equivalent of two years' full time social work education and who self identified as having been targets of workplace violence from colleagues. For financial reasons, the invitation was directed to social workers in just five towns or cities. Just over 20 potential participants made contact and 17 useable semi-structured interviews formed the base data. All interviews were audio taped, transcribed and entered into qualitative research analysis software package N5 (later upgraded to NVivo). The method of analysis was grounded theory (Glaser and Strauss, 1967; Kendall, 1999; Walker and Myrick, 2006). The method was chosen as an appropriate means of accessing a broad range of information about a relatively unexplored topic. Grounded theory provides the means to engage in a structured, yet reflexive approach to 'bottom up' information and theory building that engages with alternative perspectives from inception to analysis and beyond. Inevitably, many informal discussions, and more formal delivery of preliminary research results to participants and to other parties, generated ideas that fed into the project. Relevant themes included transition, social exclusion, difference, resilience and status anxiety, not all of which will be pursued in this paper.

Preliminary concerns relating to the potential re-traumatising of participants in the research were assuaged. Although participants would at times become tearful during the course of the interviews, they indicated that they considered their participation in the process to be part of their journey to recovery and an opportunity to contribute to more systemic intervention into the problem of workplace bullying. I ascertained that participants were in receipt of supervision, and /or had access to appropriate support as required. Some com-

municated with me following the interview, and continued to collaborate in reflecting on the work in this way.

Definition

In seeking participation, I made no attempt to define the type of collegial violence I would be researching, be it sexual, physical or psychological. Nor did I specify a level of violence required for participation. Despite this, all participants reported that they experienced a type of psychological violence that conforms to standard definitions of bullying:

> Bullying at work means harassing, offending, socially excluding someone or negatively affecting someone's work tasks. In order for the label bullying to be applied to a particular activity, interaction or process it has to occur repeatedly and regularly (e.g. weekly) and over a period of time (e.g. about six months). Bullying is an escalating process in the course of which the person confronted ends up in an inferior position and becomes the target of systematic negative social acts. A conflict cannot be called bullying if the incident is an isolated event or if two parties of approximately equal 'strength' are in conflict (Einarsen, et al., 2003b: 15).

> [The bullying behaviours] clearly cause humiliation, offence and distress, and … [they] may interfere with job performance and/or cause an unpleasant working environment (Einarsen et al., 2003b, 6; also cited in Rylance, 2001: 27).

The participants

Contrary to research reports that find inexperienced nurses are most likely to be bullied (Duncan, et al., 2001), most of my participants were experienced social workers at the time they were bullied, with eight being in supervisory and middle management roles. A majority had more than seven years' post-qualifying professional experience. This was reflected also in the current age composition of the sample, with only one participant under 36 and the majority 45 and older. Thirteen participants were women, and four were men. All bar perhaps one participant had been bullied exclusively or predominantly by women. All bar one had been bullied primarily by individuals who were hierarchically senior to themselves, in upper management or supervisory positions, and who most often were social workers (in nine or 10 cases) or nurses (in three cases). Bullying was persistent and enduring, with only one participant, who was still in post, having experienced this for less than six months. The majority of participants (12) were bullied for between one and four years, with an even spread.

At the time of the interviews, 12 participants had left the workplace in which they had been bullied. More than half had exited less than one year previously. The remainder had left up to eight years prior to the interview, but continued to rate the experience, which was invariably their only significant experience of workplace bullying, as formative in their development as a social work practitioner. Of the remaining five participants still in position, three were currently planning to exit.

Nine of the 17 participants identified as New Zealanders of European descent. Four identified as Maori, and four were immigrants, with three having come from Commonwealth countries and one from a non-English speaking country.

It should be noted that the people who agreed to take part in the research were able to narrate their story, and reflect on their experiences. The study does not tell us about bullied social workers who are unable to do this, perhaps because they feel themselves to be trapped without recourse, too unsafe or too unwell.

Forms of bullying

A review of studies considering the forms taken by workplace bullying suggests that these may be grouped into categories of harmful behaviour directed at organisational function- ing, impacting directly on the target's tasks and competency; social connectedness, where the impact is on communication and relationships at work; and personal esteem, where the private person is attacked. Increasing or decreasing the amount or complexity of work, supervisory invasiveness, verbal aggression, gossip and withholding of information are typical features, but physical violence is rare (Daniel, 2004; Einarsen, et al., 2003b; Einarsen and Mikkelsen, 2003; Exline and Lobel, 1999; Farrell, 1999; Quine, 1999; Rylance, 2001; Salin, 2003; Thomas, 2005; Zapf et al., 2003).

Bullying during professional supervision sessions was unfortunately relatively common. It was perpetuated mostly toward frontline rather than more senior-level staff, probably because senior staff had more control over their choice of supervisor and more frequently had external supervisors. Five frontline staff spoke of being yelled at and being called names by their supervisors. These bullies probed personal experiences and sought to provide psychotherapy, whilst branding any questioning of the appropriateness of this as 'problems with authority'. Supervisors were said to talk far more than they listened, took time out to smoke cigarettes in the middle of sessions, discussed their sexual relationships and were generally poor at keeping 'boundaries'. Intrusion was facilitated when there was little or no private work space, and in small agencies where multiple roles meant that bul- lying overseers might spend much time alongside frontline workers. Whilst participants did not complain of sexual harassment, they noted that workplace bullies created complex divisions by employing friends, and entering sexual relationships with colleagues and sub- ordinates. Two were found to be financially dishonest in embezzling funds or goods from the employing organisation.

Social exclusion was common in all settings, and experienced on a daily basis, such as when entering the tea room where nobody responded to a 'hello'.

Deliberate exclusion from meetings and consultations, and humiliation during interdis- ciplinary team meetings by putdowns such as 'Come on, we are just going round in circles girl' were also common at all levels.

Multidisciplinary meetings are more commonly held in the health setting, where hier- archies are reflected in status, respect and pay differences, and it is therefore perhaps not surprising that eight respondents had been employed in a public health setting at the time of being bullied.

Non social work managers who took excessive control over, and interfered with, social work practice were troubling to 11 participants. Whilst not necessarily bullying in itself, this behaviour established a context in which denigration thrived. Where it constituted bullying,

control and criticism were frequent and severe, requiring hour-by-hour accounting for time, intrusive commentary upon notes and reports, prevention of legitimate access to clients, and failure to consult about changes that directly impacted on social work practice, such as the appointment of social work staff.

Eight participants were in middle management and supervisory positions at the time of being bullied, and they tended to be especially concerned about the withholding of information that then prevented them, in turn, from providing support to staff for whom they had responsibility. This resulted in much anxiety in workplaces that were undergoing restructuring. Restructuring has been considered as a potential trigger for workplace bullying (Hoel and Salin, 2003; Godin, 2004; Salin, 2003).

Effects

It is now well documented that bullying results in deleterious consequences to the physical and emotional health of targets, impacts on workplace relationships, and is a frequently hidden cause of staff turnover. An edited text by Einarsen et al. (2003a) provides a comprehensive overview of research relating to these effects.

In my research also, participants had experienced multiple effects on health and confidence. Commonly experienced negative affect states included fear, shame, and once the inevitability of needing to leave the workplace was realised, there was sadness. Participants had cried a lot, especially outside of work, in the car on the way home or in bed at night. Health had been affected, sometimes long term, with participants suffering loss of sleep, changes in appetite (over or under eating), stomach upsets and muscular tension. Five participants had been considered depressed by their GP, but only two had taken prescription medication. Only one participant suggested that she had suffered post traumatic stress disorder, but many others related relevant effects such as hyper-vigilance, avoidance and excessive rumination. Excessive drinking and becoming physically violent were mentioned by only one (female) participant. Several others expressed surprise, however, about the vehement, derogatory, and sometimes violent, thoughts and images that emerged in them when they had felt powerless and put down.

Participants talked about how their confidence had been impacted, especially over time. They had lost confidence that their reports were sound despite reassurances from colleagues and comments from judges. Loss of enjoyment of work was prevalent, and participants had become less willing to take risks, engage in creative projects, or undertake such roles as supervising students on placement. Instead, they had withdrawn into frontline work, although several were conscious that lack of information sharing by colleagues had impaired their capacity to provide comprehensive service.

A fear of being judged incompetent had silenced participants, and had led to a sense of being trapped with nowhere else to go. In addition, participants had commonly feared that they might provoke retaliation if they were to defend themselves. As most of their colleagues had stood by without speaking out in support, targets became uncertain of whom they could trust. This had led to further withdrawal, and ultimately isolation, of which nine spoke as a specifically distressing effect.

Notwithstanding the stress and distress caused to participants, it is striking that participants were far more likely to mention negative impact on confidence than on self esteem. This does suggest that the participants considered their experiences to be extrinsic and work related rather than due to intrinsic factors. Rylance (2002) also notes that most of her 13 social service workers came to attribute bullying to external causes and considered themselves resilient survivors rather than victims. Family, friends, external supervisors and some colleagues provided important resilience-enhancing support to my participants, but they were also commonly distressed that their work situation had negatively impacted on their capacity to be a good parent and partner.

Managing the situation

Nine participants spoke about the time it took to accept the reality of what was happening to them, and the seriousness of its impact. Initially they had simply 'tried harder'. Commonly, early attempts to discuss the matter with the bully had foundered due to denial, abusive responses or refusal to put aside time for discussion. However, it must be noted that people who responded to my request for participation were likely to have experienced relatively intractable problems, and there may be many unreported early resolutions. At times participants discerned that their eagerness to find solutions or make accommodations had been responded to as if it constituted an invitation to persecutory behaviours. Participants stated that they had tried to push the negativity of the bullying out of their awareness, and several had consciously 'put on a front'; not revealing their increasing distress in case this might negatively impact on their professional standing.

Seven participants discussed the support they had received from external supervisors. The practical assistance external supervisors could provide was limited by their outsider status. At least one participant considered that the outside supervisor was actively excluded and devalued. External supervisors could, and did, encourage participants to leave the employing organisation. Internal supervisors, if not the bully, were thought to be entrapped or captured. An exception was found in assertive professional advisors, who take a senior social work practice management role in multidisciplinary settings. Where this role existed in the multidisciplinary setting, the advisor was found to be a source of professional strength with real power to effect change.

Internally arranged mediation was generally found to be unhelpful and tended to be experienced as biased. Other authors have noted that the prejudices and explanations offered by bullies tend to be accepted by upper management, with the result that targets are perceived as possessing difficult or neurotic personalities (Einarsen, 1999). As a consequence, targets may tend to be considered to be problem people, to be managed rather than accorded equal voice in the mediation process (Lewis, 2006). External mediation usually supported a cessation of employment and sometimes successfully secured beneficial exit arrangements, including paid final leave.

Union advice and expert legal advice were appreciated for the way in which these helped to clarify options. However, the journey through formal complaints via workplace, association or court systems (undertaken by five participants) was exceedingly fraught and those who embarked upon it tended not to recommend this:

Participant: It was a kind of a game, it was a charade, it was a farce. It did not feel like it was a process to sort out a very simple issue about right and wrong. There were whole lots of other kinds of agendas. Like it was just a whole kind of, another institutional process that if you didn't know the rules you didn't know the game. So just simple right or wrong kind of didn't matter.'

Irrespective of whether the final decision was to make a complaint, many participants recommended keeping careful written records with concrete details of times and places.

People appear to have been somewhat more likely to consult doctors (at least six) than counsellors (four), including Employment Assistance Programme (EAP) counsellors. Perhaps surprisingly, only four participants, two men and two women, had needed to identify to their employers that they required sick or special leave in order to manage the consequences of workplace stress. Those who had identified the reason for their leave were bewildered when, subsequent to this, they faced an escalation of distressing behaviour toward them. For example, they were now required to document and justify all leave requests in situations where others were given more freedom. It is possible that their employers responded thus because they saw a need to document a situation that might lead to legal ramifications, rather than out of personalised discriminatory or retaliatory intent. Most other participants took annual leave or ensured that sick leave was associated with non work-related causes.

Typically, leave only temporarily ameliorated stress. Nevertheless, the contrast in well being whilst on leave was stark and this helped participants to realise that they needed to make changes, most often concluding that they should exit.

Several participants found that reading about the phenomenon and naming of their experiences as 'bullying' provided encouragement and hope. Once a degree of shame began to wane, participants began to observe and talk to others. They began to develop courage to telephone the workers they had replaced, and several participants were approached by such workers. Thus, 15 participants came to realise that they were by no means sole targets. They were concerned that despite historical and, at times, documented employment disputes surrounding bullies, it was invariably the target who had resigned, whilst the bully remained in office or was shifted 'sideways' (Lewis, 2006).

In only a small number of cases were more helpful interventions able to be pursued with a resulting improvement in organisational functioning. External audits provided opportunities to report on structures and on the need to document and regulate procedures. A 'whole of organisation' approach with high level management commitment was required to interrupt unhelpful cultures of gossip and to mend procedural inadequacies. This supports the notion that whilst bullying may be carried out by individuals, it occurs in systems that permit or even reward the behaviour (Salin. 2003). One participant emphasised that the application of principles of kaupapa Maori had enabled a mana enhancing process to be pursued that prevented previously destructive gossip and instead required open dialogue to take place between identified bullies and targets.

The aftermath: Changing worldviews

It was evident that some participants were further into their recovery from effects than others. Multiple reasons would appear to underlie this, but important amongst those were the

length of time that had passed since the bullying occurred, and in part related to this, the restorative impact of positive experiences at a new place of work. Somewhat to their surprise, most participants secured good social work positions. They were fortunate in being able to seek references from people other than the bully or, in some cases, the reputation of the bully was sufficiently well known that a negative reference was overlooked by a new employer. Some participants had taken time out from work, or started back to work tentatively on a fixed term or part time basis. In one case, a workplace had provided a substantial recovery programme for a new employee.

Over time, distress and fear waned for most participants:

Participant: It's like any sort of bereavement process – you sort of think about a process and grieve over it and then you get on with a bit and then it comes back … And it might come back in the night, or it might come back at certain times; you might be driving down the road and see a car similar, and you think … how will I manage if I see her? Will I, do I wave? You know. So you think of these things … and that happens less and less.

Grief was associated with missing specific kinds of work with clients or supervisees, and, in a few cases, missing doing social work altogether. New employment was almost always in social work.

Several participants remarked that they had been concerned that they would feel disempowered if they met the bully in a public place such as a supermarket or at a professional gathering, but that when this actually happened they found themselves confident, and to their surprise it was the bully who seemed anxious and unable to meet their eyes.

The experience had a lasting impact on participants' views of social workers and human service agencies. They were disillusioned to find that bullying happens in caring professions and that not all professional people behave as 'adults so that they will sort out problems' or be willing to attempt to do so.

Participant: Basically … we come into social work thinking that because we're already committed to helping people and empowering people, we will demonstrate the best of that in our working environment. Well, my experience is that social service organisations are actually the worst.

Five participants discussed the impact of bystander behaviour in considerable detail, with most finding it distressing that bystanders 'ducked for cover and tried to save their own jobs'. One participant noted that social workers were less supportive to her than members of other disciplines. Another proffered that 'I think they were more pleased that I was copping it rather than them'. This then challenged and changed their views of the social work community at large as a supportive body.

Views of authority also changed, and trust in the benevolence of supervisors and managers diminished. Participants declared themselves quicker to react to put downs, 'opting for a quiet life', 'avoiding being involved in management', or being less trusting of persons who are not professionally qualified.

Participants tended to consider that their perceptions of the workplace had become more realistic, an outcome that was also noted by Rylance (2002). They thought they had allowed

inappropriateness and incivility to pass for too long, and they would not do so again: 'I know what the lesson is: I've had to tell because consequences of not telling outweigh the consequences of telling.' This echoes the words of Cortina and Magley (2003) who stress that, whilst retaliation does occur, the psychological and physical harm that results from restraining oneself from speaking out against injustice is greater.

Why bullying in social work and where to from here?

Whilst the aim of this paper is to present findings rather than explore reasons for why bullying occurs in social work, it seems appropriate to make some mention of the underlying issues that have been identified by other authors and that emerged as relevant factors in the current study.

For the participants in my study, the onset of bullying frequently followed a change of status: from temporary to permanent staff, or from a frontline to a supervisory or middle management position. In making such a transition, participants had often begun to raise questions about conditions of employment and contracts, or about work processes and procedures. These questions were met with defensiveness, or in extreme cases, with shouting or haranguing during a subsequent supervision session.

> Participant: You start out as the golden girl temp, two years later you're out of there because along the way you have seen something you want to make a comment on, and then this process starts.

Participants considered that, as they progressed and developed in their positions, the bully may have envied them. Status envy is often mooted by participants in research and the idea is also considered in the literature (Vandekerckhove and Commers, 2003). Einarsen (1999) considers envy may be an important cause but wonders if, on the other hand, the attribution may be self preserving on the part of the target. It also seems possible that bullies were anxious about their own status in the organisation, feared exposure of inadequacy, and responded to this perceived threat by suppression and denigration.

This proposition fits with concerns raised about inadequate training of managers and supervisors, who may be pressured by those above them, perhaps in the context of restructuring. It makes comprehensible the phenomenon of bullies who are also targets (Lewis, 2006). It also lends weight to the proposition that internal grievance procedures directed through line management will tend to be ineffective, as also noted by the participants (Lewis, 2006).

Another theory related by at least seven participants was that bullying constituted a form of discrimination against people who are different from the dominant workplace culture. Others have noted a tendency for minorities to be bullied (Exline and Lobel, 1999; Fox and Stallworth, 2005; Messinger, 2004; Quine, 2002; Salin, 2003; Zapf et al., 2003). In my study the difference might lie in age, dress code (being more formal), sexual orientation (straight or gay), ethnic identification – but it was the degree of difference from the workplace norm that appeared to matter. Those who felt they were singled out in this way in a specific agency, but who were not so different from other social workers in other agencies, seemed well able to find new positions. But cultural outsiders, and older persons at the end of their career paths, continued to be professionally impeded after exiting.

Participants considered bully personality and personal background, and drive for power and control to be relevant also. It is possible that inherently insecure but status driven individuals are at times promoted to positions of power. But Lewis (2006) cogently questions the centrality of personality traits, and argues in favour of learned behaviour in workplace contexts. Note that learned behaviours are not necessarily easily changed, especially when a context supports their perpetuation and when individuals have few other available modus operandi due to lack of appropriate training. Salin (2003) recognises that bullying is probably multi-causal, but focuses on ways in which workplace structures and processes may enable or even provide rewards (through promotions and other incentives) for bullying. Precipitating processes include restructuring and other major changes. Whilst we may make efforts to select out 'bullying personalities', it would seem that our efforts need to be directed at examining dominant workplace cultures that accept incivility. Sound anti-oppressive policies and practices should be in place if power imbalances are to be overcome (Salin, 2003). Training and supporting managers to adhere to zero tolerance policies and to deal with situations as they emerge are important steps. Outside mediation may be required in order to mitigate the bias that will likely skew the perceptions of line mangers. Support and low shame processes are noted for their resilience building potential (Quine, 1999). No data supports any notion that targets should be left to confront bullies on their own. In the aftermath, rehabilitation support may be required for all parties (Einarsen et al., 2003b). Whilst the way forward is recognised as difficult, the problem of bullying must be addressed if targets are to be convinced that their primary advice to fellow targets need no longer simply be to 'get out' (Einarsen et al., 2003b).

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