

ORIGINAL ARTICLE

The impact of workplace harassment on the level of mental disorders: the moderating role of gender

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BACKGROUND

Studies prove a positive relationship between mobbing in the workplace and the level of mental disorders. In the present research, it was decided to test whether gender is a moderator of the relationships under consideration. It is well known that women and men experience differences in the general clinical manifestations of certain disorders such as depression, anxiety and addiction. Furthermore, women are more likely to experience mobbing than men. Therefore, it was decided to test whether gender could be a moderator of the relationship between workplace harassment and the level of mental disorders.

PARTICIPANTS AND PROCEDURE

Accordingly, a survey was conducted with 220 people aged 22-65 years employed in various Polish workplaces with at least one year of work experience, including 108 women and 112 men, using tools with verified psychometric properties. These were the Negative Action Questionnaire (NAQ) and the General Health Questionnaire (GHQ-28).

RESULTS

The analyses conducted showed that gender significantly alters the relationship between mobbing and general mental health, levels of somatic disorders, anxiety and insomnia, and symptoms of depression. In terms of psychological wellbeing, men, compared to women, have a much stronger reaction to harassment, both of a personal nature and directly aimed at the work sphere.

CONCLUSIONS

The aforementioned relationships may find practical application in the development of effective methods for the prevention and treatment of the effects of workplace harassment.

KEY WORDS

gender; mental disorders; workplace harassment

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BACKGROUND

The problem of workplace harassment has been present in the scientific discourse for almost 50 years, since the first edition of Carroll M. Brodsky's book *The Harassed Worker* was published in 1976. Even then, in describing behaviors that provoke, intimidate, and cause severe discomfort to the employee, the author was mindful of their destructive impact on the employee's physical and mental health and performance. A special role in this area is attributed to the research of Heinz Leymann. This Swedish scientist not only clarified the criteria of bullying in terms of duration, repetition of the behavior, and negative intent of the persecutors, but also described and classified 45 mobbing behaviors. In fact, Leymann's publications are among the classics of workplace harassment study and provide a starting point for further research and analysis.

One point of contention, for example, is the terminology used. In just one special issue of *Consulting Psychology Journal: Practice and Research* (2009), the authors of the published articles used as many as thirty-three terms to refer to harassment-like behaviors in the workplace. Terms and phrases found in the literature include: mobbing, bullying, oppression, intimidation, moral harassment, psychological terror, and workplace harassment (a term used interchangeably with mobbing in this publication). Despite this diversity, all of these terms refer to situations in which an employee is subjected to repeated, negative behavior from a supervisor, subordinate, or co-worker over an extended period of time, resulting in humiliation, physical and psychological distress, and the creation of a hostile work environment (Einarsen et al., 2003). The duration condition is absent from the U.S. Equal Employment Opportunity Commission's (EEOC) definition, in which workplace harassment is explained as enduring offensive behaviors because it is the only way to maintain employment or when hostile actions are so severe that they create a work environment that a prudent person would find offensive (EEOC, 2023). In addition, the General Conference of the International Labour Organisation enacted in 2019 the Violence and Harassment Convention, which describes harassment as a variety of intolerable practices, whether isolated or repeated, that can cause physical, psychological or economic harm (EurWORK, 2020). This means that what is important is not the duration of the mobbing, but the intensity and persistence of the bullying actions, which are so intense and reprehensible that they contribute to the employee's very strong sense of intimidation.

The purpose of the research presented in this paper is not only to understand how workplace harassment affects the extent of employee mental disorders, but more importantly to examine whether gender modifies the relationship considered. Based on statis-

tical studies conducted in many countries, it is well known that women and men experience differences in the general clinical manifestations of certain disorders such as depression, anxiety and addiction (Frąckowiak-Sochańska, 2011). Furthermore, according to the European Working Conditions Telephone Survey (EWCTS) conducted between February and November 2021, women were the most exposed to the risks of adverse social behaviors at work, such as bullying, harassment, violence or unwanted sexual attention (Drażkowski & Ganclerz, 2022; EWCTS, 2021). In turn, a more recent meta-analysis on the gender of bullying sufferers revealed that women were over-represented (Zapf et al., 2020). Regardless, most such studies indicated that more women are bullied than men (Salin, 2018). However, there are examples of analyses identifying men as the most vulnerable to workplace bullying (Rosander & Blomberg, 2019; Salin, 2018). This illustrates that the results are interesting and at the same time inconclusive enough to make it worthwhile to include gender in the analysis of the moderation between workplace bullying and general mental health and its components. The knowledge gained can be used practically to develop effective methods to prevent and treat the consequences of workplace bullying.

WORKPLACE HARASSMENT AND THE LEVEL OF MENTAL DISORDERS

There is no generally accepted definition of mobbing in the literature. Leymann (1996) defined mobbing as psychological fear that follows hostile and immoral exchanges and leads to an increased sense of subordination of the victim to the perpetrator. The approach advocated by Einarsen and Hoel (2001) is at the heart of the research discussed here. In their view, workplace harassment is far more destructive to health, strength and willpower than any other stressor. Like Leymann (1996), the aforementioned researchers identified two important characteristics of mobbing, namely, repetition and persistence. However, contrary to Leymann, they intentionally set no limits, as it is sometimes difficult or even impossible to refer to specific criteria (6 months and once a week). For example, spreading a hurtful rumor is only one event, but the consequences of that behavior continue to affect the victim. Thus, bullying can also take the form of conditioning rather than just a series of negative behaviors. In Einarsen and Hoel's (2001) concept, it is important to distinguish between two categories of harassment: (a) directly related to work and (b) affecting the personal sphere. The former refers to behaviors such as setting impossible deadlines, constant scrutiny, withholding important information, and imposing obligations that are difficult to meet. The second category – personal mobbing – refers to behavior

such as derogatory remarks, teasing, spreading rumors, constant criticism and intimidation.

Analysis of its consequences is an important element of mobbing research (Akar et al., 2011; Rosander et al., 2020). Among the consequences of workplace harassment, particular attention is paid to those that have a significant impact on workers' health and productivity (Gale et al., 2019; Nabe-Nielsen et al., 2016). However, employees' mental sphere is most affected by mobbing, as contact with the aggressor can cause a lot of stress, and its effects can be observed in the form of lowered general well-being, mental illness or psychosomatic disorders (Matthiesen & Einarsen, 2004).

The author of this study was interested in mental states and the assessment was based on the theory of Goldberg and Williams. The questionnaire they created can be applied to assess two broad categories of phenomena, the inability to maintain normal and "healthy" function and the occurrence of psychological stress. According to Goldberg and Williams, the absence of physical symptoms, anxiety and insomnia, impaired social functioning, and depressive symptoms in the past few weeks is an important indicator of mental health (Merecz & Makowska, 2001).

OWN RESEARCH

Gale et al. (2019) surveyed 4,459 US and Canadian participants in the Harvard Flight Attendant Health Study using multivariate logistic regression. They assessed episodes of workplace abuse over the past year and several mental and physical health outcomes, including depression, fatigue and general workplace injuries. They found that workplace abuse was associated with depression, sleep disturbance and musculoskeletal injuries among male and female crew, with a trend towards increasing odds ratios (OR) with a higher frequency of events. In turn, Nabe-Nielsen et al. (2016) used questionnaire data from 7,650 co-workers over 15,040 2-year follow-up periods. Workplace bullying, unwanted sexual attention, disturbed sleep and difficulties with long-term sickness absence (LTSA) were measured at three time points over consecutive 2-year periods. The likelihood of LTSA was significantly increased by workplace bullying and unwanted sexual attention. Together, disturbed sleep and difficulties awakening mediated the association between bullying and long-term sickness absence.

The research results presented above (Gale et al., 2019; Nabe-Nielsen et al., 2016) allowed the following research hypotheses to be formulated:

H1: Workplace harassment worsens overall mental health and exacerbates the following: H1a – somatic disorders; H1b – anxiety and insomnia; H1c – impaired social functioning; H1d – symptoms of depression.

H2: Workplace harassment aimed at the personal sphere worsens overall mental health and exacerbates the following: H2a – somatic disorders; H2b – anxiety and insomnia; H2c – impaired social functioning; H2d – symptoms of depression.

H3: Workplace harassment aimed directly at the work-related sphere worsens overall mental health and exacerbates the following: H3a – somatic disorders; H3b – anxiety and insomnia; H3c – impaired social functioning; H3d – symptoms of depression.

In terms of gender, the EWCTS revealed that, on average, 14.6% of women workers in the EU compared with 10.8% of men experienced more often some form of adverse social behaviors at work, such as bullying, harassment, violence or unwanted sexual attention. In addition, the majority of studies showing gender differences in bullying revealed that a greater number of women are bullied than men. While studies from Belgium and Italy found no statistically significant gender disparities, studies from Finland, Ireland, Spain, Germany, Greece and France reported higher prevalence rates for women (Salin, 2018). However, there were examples of analyses, in South Africa, presenting men as the most vulnerable to workplace bullying (Salin, 2018). Considering differences in the general clinical manifestations of certain disorders – which are diagnosed more frequently in women, such as depression, anxiety disorders, or addiction syndromes and antisocial personality in men (Frąckowiak-Sochańska, 2011; OECD, 2018) – it was decided to test whether gender could be a moderator of the relationship between workplace harassment and the level of mental disorders. Given the scarcity of research on the moderating effect of gender in the relationships considered above, the following research question was posed:

Question 1. In the case of workplace harassment, aimed at both the personal sphere and the work-related sphere, will women, compared to men, experience more severe disorders in the form of: (a) somatic disorders; (b) anxiety and insomnia; (c) social functioning disorders; (d) symptoms of depression?

PARTICIPANTS AND PROCEDURE

PARTICIPANTS

The survey was conducted in 2021-2022 among 220 Polish employees (108 women and 112 men) with at least one year of work experience, employed under a contract of employment. Those surveyed represented a variety of work environments, such as service, trade, manufacturing and public administration. The age of the participants ranged from 22 to 65 years ($M = 36.35$, $SD = 11.26$). The mean age of women was around 36 years ($SD = 11.36$), while that of men was 37 years ($SD = 11.21$). Most people worked in medium-sized organizations with 50 to 249 employees

(37% of respondents); 34% of respondents represented large companies, while 29% were hired in small companies. As regards the level of education, more than half of the group (54.1%) had higher education, 34.1% had secondary education, and 8.6% had basic vocational education. More than 3% of those surveyed did not respond to this socio-demographic survey item.

PROCEDURE

The survey was conducted using the snowball method in accordance with the principles of the Declaration of Helsinki. They are based on direct contact with participants. After agreeing to participate in the prepared procedure, the respondents were asked to complete questionnaires and place them in a sealed envelope to be collected by the researcher (87% response rate).

MEASURES

To verify the previously formulated research problems and hypotheses, the following paper-pencil toolkit was used: the Negative Acts Questionnaire (NAQ) and the General Health Questionnaire (GHQ-28). Before completing them, the respondents were given a questionnaire to collect socio-demographic data. These specific instruments were chosen due to their short form and high rates of reliability and validity, along with the ability to make cross-cultural comparisons.

Negative Acts Questionnaire (NAQ). To assess the level of harassment in the study, the Negative Acts Questionnaire (NAQ) by Einarsen and Hoel (2001), in the Polish adaptation by Warszevska-Makuch (2007), was used. The tool consists of 23 items, 22 of which relate to unethical forms of behavior in the workplace. The person surveyed is asked to indicate – on a scale of 1 (*never*) to 5 (*every day*) – how often he or she has been subjected to particular types of harassment at work over the past six months. Cronbach's α in the present study reached high values (Cronbach's α for the total score was .91, for subscale 1 – .87, for subscale 2 – .81).

Goldberg's General Health Questionnaire (GHQ-28), in the Polish adaptation by Merecz and Makowska (2001), was used to assess the mental health of the employees by estimating the likelihood of the following disorders: somatic (scale A), anxiety and insomnia (scale B), social functioning disorders (scale C) and symptoms of depression (scale D). The subjects were given a 4-point scale, ranging from *not at all* to *definitely more than usual*. Cronbach's α in the present study reached high values for the GHQ-28 ($\alpha = .94$), for the somatic disorders scale (α for scale A = .85), for the anxiety and insomnia scale (α for scale B = .89), for the social disorders scale (α for scale C = .78) and for symptoms of depression (α for scale D = .92).

RESULTS

DESCRIPTIVE STATISTICS

Statistical analyses were carried out in SPSS version 28 using the PROCESS v4.0 method by Hayes (2015). The data presentation begins with a summary of selected survey items which verify the 'profile of an oppressor at work'. When answering the question: "Who is the perpetrator of mobbing?" 74.1% of the respondents pointed to a supervisor, 15.5% to a co-worker, 8.2% to a subordinate, and 2.3% to a group of employees. As for issues related to the gender of oppressors, more than 76% of the respondents unanimously stated that there were no gender differences, with 16.4% of the respondents singling out a man and 7.3% a woman. The distribution of results was similar for the question about the age of the mobber. Approximately 74% of the respondents indicated no age difference, 14.1% indicated people between 36 and 45 years old, and 7.3% indicated people over 45 years old.

The next step involved testing the presence of gender differences in the levels of workplace harassment and mental disorders. Student's *t*-test results show that women, compared to men, experienced stronger mobbing aimed directly at the work sphere ($t(218) = 1.87, p = .032$), worse overall mental health ($t(218) = 2.55, p = .006$), more severe somatic disorders ($t(218) = 1.99, p = .024$), anxiety and insomnia ($t(218) = 3.65, p < .001$), and impaired social functioning ($t(218) = 2.33, p = .010$). Cohen's *d* effect sizes ranged from weak to moderate.

WORKPLACE HARASSMENT AND THE LEVEL OF MENTAL DISORDERS

Pearson's *r* correlation analyses were performed to verify the three research hypotheses. The coefficients in Table 1 indicate that workplace harassment was strongly or moderately related to overall mental health and its individual dimensions. Mobbing – taking the form of gossiping, constant criticism or imposing burdens difficult to cope with – exacerbated somatic disorders, insomnia and anxiety, and impaired social functioning and symptoms of depression (all three main hypotheses were confirmed).

THE IMPACT OF WORKPLACE HARASSMENT ON THE LEVEL OF MENTAL DISORDERS. THE MODERATING ROLE OF GENDER

The main research problem, which concerned the moderating role of gender, was tested using the PROCESS v4.0 macro method by Hayes (2015). It is based on regression analyses and a bootstrapping proce-

Table 1*Workplace harassment and the level of mental disorders*

	1.	2.	3.	4.	5.	6.	7.
1. Workplace harassment (overall score)							
2. Workplace harassment aimed at the personal sphere	.72***						
3. Workplace harassment aimed directly at the work-related sphere	.75***	.72***					
4. General mental health status	.53***	.42***	.34***				
5. Somatic disorders (scale A)	.41***	.32***	.29***	.85***			
6. Anxiety and insomnia (scale B)	.40***	.30***	.29***	.91***	.72***		
7. Social functioning disorders (scale C)	.34***	.24***	.25***	.73***	.62***	.54***	
8. Symptoms of depression (scale D)	.56***	.47***	.26***	.76***	.43***	.61***	.39***

Note. *** $p < .001$.

ture. In this case, bootstrapping based on drawing 5,000 samples with returns was used. Model 1 was applied in the study. The centering of the variables was carried out before the calculations. In order to eliminate the collinearity error, analyses were conducted separately for the overall outcome, mobbing aimed at the personal sphere and mobbing aimed directly at the work-related sphere.

The moderating role of gender was confirmed in the associations of general mental health with workplace harassment ($F(3, 216) = 36.99, p < .001$), personal mobbing ($F(3, 216) = 25.75, p < .001$), and mobbing aimed at the work-related sphere ($F(3, 216) = 19.53, p < .001$). All models were a good fit to the data, explaining between 21% and 34% of the variation in the dependent variable, with the introduction of a moderator in the form of gender improving this fit by 4% to 8% (see Table 2). Further analyses of interaction effects among men and women revealed that the more severe the harassment experienced by the respondent at work, the worse was his or her mental health, especially among men ($\beta = .66$) compared to women ($\beta = .42$). There was a similar pattern of results regarding the impact of harassment aimed at the personal sphere and the work-related sphere on the mental condition of employees. The mentioned effect was stronger in the male group (personal mobbing – β men = .63, β women = .22; work-related mobbing – β men = .54, β women = .24).

Gender also acted as a moderator in the relationships of mobbing with particular disorders: somatic, anxiety and insomnia, and symptoms of depression (see Tables S1-S3, Supplementary materials). No significant interaction effects were observed only for social functioning disorders. As can be seen from the data in Table S1, gender exacerbated the association of harassment aimed at the personal and work-relat-

ed spheres with the level of somatic disorders. Additional regression analyses conducted in subgroups revealed a stronger impact of negative behaviors, taking the form of constant criticism or setting impossible deadlines, on a higher number of somatic disorders primarily in the male group (personal mobbing – β men = .43, β women = .22; work mobbing – β men = .42, β women = .23) (see Table S1, Supplementary materials).

The moderating role of gender was also confirmed in the associations of insomnia and anxiety and depressive symptoms with workplace harassment in the overall dimension and its subscales. All models were a good fit to the data and explained between 19% and 24% of the variation in anxiety and insomnia, while the introduction of a moderator in the form of gender improved this fit by 3% to 7% (see Table S2, Supplementary materials). As for the symptoms of depression, the obtained models explained between 14% and 39% of the variation of the mentioned disorder. Gender as a moderator improved model fit by 8% to 12% (see Table S3, Supplementary materials). Further regression analyses of interaction effects between men and women indicated a stronger impact of mobbing on the level of anxiety and insomnia and the intensity of symptoms of depression in the group of men compared to women (β for men ranged between .44 and .72, while β for women ranged between .19 and .41).

DISCUSSION AND CONCLUSIONS

The main purpose of the research conducted was to determine whether gender moderates the relationship between workplace harassment and the degree of mental disorder. In addition, the author reviews issues that sometimes accompany this analysis, such

Table 2*Gender as a moderator of the relationship between workplace harassment and overall mental health*

	General mental health status				
	<i>B</i>	<i>SE</i>	95% CI	<i>R</i> ² (ΔR^2)	<i>F</i> (3, 216)
Constant	23.54***	0.65	[22.26; 24.82]	.34 (.04)	36.99***
Workplace harassment (overall score)	2.41***	0.24	[1.93; 2.88]		
Gender	-1.78***	0.65	[-3.06; -0.50]		
Workplace harassment (overall score) × gender	0.82***	0.24	[0.34; 1.29]		
	General mental health status				
	<i>B</i>	<i>SE</i>	95% CI	<i>R</i> ² (ΔR^2)	<i>F</i> (3, 216)
Constant	23.51***	0.68	[22.15; 24.85]	.26 (.06)	25.75***
Workplace harassment aimed at the personal sphere	2.93***	0.38	[2.17; 3.68]		
Gender	-1.92***	0.68	[-3.27; -0.57]		
Workplace harassment aimed at the personal sphere × gender	1.65***	0.38	[0.90; 2.41]		
	General mental health status				
	<i>B</i>	<i>SE</i>	95% CI	<i>R</i> ² (ΔR^2)	<i>F</i> (3, 216)
Constant	23.99***	0.72	[22.58; 25.41]	.21 (.08)	19.53***
Workplace harassment aimed directly at the work-related sphere	4.11***	0.57	[2.96; 5.24]		
Gender	-1.21	0.72	[-2.63; 0.19]		
Workplace harassment aimed directly at the work-related sphere × gender	2.73***	0.57	[1.60; 3.85]		

Note. ****p* < .001.

as the 'profile' of the bully or the oppressed. The research carried out revealed only some regularities in this regard. On the other hand, the overall study provides insights into the moderating role of gender, which can be used to develop methods to prevent and treat the effects of workplace harassment.

When asked who the bully was, the vast majority of respondents pointed to the manager, followed by colleagues, subordinates, and a group of employees. Warszewska-Makuch (2008) obtained similar results in a group of teachers who identified the principal and vice-principal 80% of the time, their colleagues 50% and subordinates 7%. The identification of supervisors as the main perpetrators of workplace harassment may be due to the peculiarities of the organizational culture of Polish companies, which are often characterized by a hierarchical leadership style that allows power to be exercised from positions of strength. When asked about the gender and age of the bully, more than 70% of the respondents said there was no gender or age difference. With regard to gender differences and mobbing – i.e., a specific

aspect of the oppressed 'profile' – women experience more mobbing directed at work-related areas than men, poorer general mental health, somatic disorders, anxiety and insomnia, and impaired social functioning. This is consistent with previously cited findings (Frąckowiak-Sochańska, 2011; OECD, 2018). Organizational cultures that assume men are better suited for leadership positions not only hinder women's career advancement but also make them more vulnerable to workplace harassment (Kocur & Mandal, 2018). This is also congruent with the thesis that a lack of power, or a deficit of power, makes a person more responsive to a perceived threat, and consequently individuals with low power tend to feel more exposed (Salin, 2018).

However, the main point of this study is not only to determine whether mobbing – in the form of constant criticism or imposing irreconcilable burdens – worsens mental health, but more importantly to verify whether gender mediates the relationship considered. While the former question has been repeatedly confirmed (Gale et al., 2019; Nabe-Nielsen

et al., 2016), the latter one adds value to the analyses performed. Therefore, gender appears to amplify the impact of negative behaviors on the level of mental disorders. Contrary to the assumptions, it was not women who responded more strongly to various forms of harassment, both in the private and professional spheres, but men. This was reflected in their greater somatization of mental health issues, more intense symptoms of anxiety and insomnia, and more severe depressive symptoms. Interference in everyday life was the only domain not affected by gender conditioning. Attempts to interpret the results refer to research on the importance of work for men and women (Chuchra & Gorbaniuk, 2017). Researchers have found that men are more likely to experience work stress than women. Based on this, it was concluded that for men, work is on the one hand a stronger source of development and satisfaction, but on the other hand it overburdens them due to lack of leisure and family time. It could therefore be hypothesized that, if it turns out that employees experience a lot of unethical behavior in the workplace, men's high job placement and their values themselves lead to greater mental disorders. It also cannot be ruled out that men handle mobbing situations differently. Eriksen et al. (2016) investigated this issue and analyzed the impact of workplace harassment on sick leave for men and women. The latter not only called in sick less often, but also decided more quickly to leave the company and even withdraw from the labor market for a period of time after being bullied.

In conclusion, the devastating impact of mobbing affects not only the individual targeted, but the entire organization as employees lose health and jobs (Akar et al., 2011; Rosander et al., 2020). When fighting harassment in the workplace, the main goal is not just to eliminate existing abuses, but above all to prevent them from happening at the organizational level. The solution may be to create a supportive organizational climate in which cooperation, accountability and helpfulness are essential to prevent conflict and aggression from escalating. Educational campaigns that promote fair play and constructive coping in the workplace can be a method of prevention. Good work organization and professional adjustment programs can prevent work overload, stress and counterproductive behavior (Lipińska-Grobelny, 2021). On the other hand, psychological competency workshops and psychotherapeutic support as well as monitoring of interpersonal relationships can not only accelerate the detection of disruptive phenomena, but at the same time provide adequate support for those who are bullied at work. This was extremely well put by Litzke and Schuh (2007, p. 160): "mobbing is only possible because it is tolerated. If a common moral line can be drawn that makes mobbing actions seen as something that is not acceptable in an organization, harassment will occur much less frequently".

As regards study limitations and future directions, it should be noted that the entire process was cross-sectional and based on self-reported research tools. However, they were chosen for their short form, high reliability and validity, and possibility of cross-cultural comparison. One indication of the direction of the future analyses is the continued study of larger groups of workers, more diverse by sector and occupation, incorporating other important variables, e.g., methods of addressing harassment in the workplace, while the other is controlling cultural factors as potential confounding variables, especially the organization's results orientation and long-term orientation. The analysis by Power et al. (2013) shows that cultural variables may influence the experience of violence at work. Cultures with a high performance orientation find bullying more acceptable. Finally, the research conducted here required respondents to identify themselves as 'men' or 'women', so it is advisable to continue such research with the participation of people who extend beyond the binary classifications.

Supplementary materials are available at the journal's website.

DISCLOSURES

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