TARGET HEALTH IMPACT

40% of targets are believed to suffer adverse health consequences from bullying

The power of the workplace bullying movement is derived principally from the impact on the health of targeted individuals. Bullying is the dominant psychosocial stressor in the work environment of targeted workers. That stressor triggers the human stress response. In turn, with prolonged exposure to frequent incidents, targets risk the onset of stress-related diseases. In other words, bullying is an occupational health hazard.

This question queries the American public about whether health harm from bullying manifested. [N = 479; no experience respondents deleted.]

Wording of the Question: Was the health of the targeted person adversely affected by the mistreatment?

Table 5.

<table>
<thead>
<tr>
<th>Health impact observed</th>
<th>Proportion</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes though it was not apparent to others</td>
<td>.1816</td>
<td>18%</td>
</tr>
<tr>
<td>Yes and it was apparent to others</td>
<td>.2171</td>
<td>22%</td>
</tr>
<tr>
<td>Yes</td>
<td>.3987</td>
<td>40%</td>
</tr>
<tr>
<td>Not sure</td>
<td>.2818</td>
<td>28%</td>
</tr>
<tr>
<td>No health harm</td>
<td>.3194</td>
<td>32%</td>
</tr>
<tr>
<td>Health impact doubted</td>
<td>.6013</td>
<td>60%</td>
</tr>
</tbody>
</table>

The split between respondents (targets and witnesses only) who were certain bullying had created health harm was 40%:60% with the latter being those who could not be certain.

Several factors could account for the 60% of uncertain respondents. Targets rarely publicly share their health problems with colleagues. Personal shame suppresses an outpouring. Also targets can endure bullying for long periods of time without awareness that the source of the ill health is their workplace with an attacking bullying in it. That is, the causal links take time to be recognized by targets themselves. Target-respondents could have been part of the 60% of doubters.

Witnesses, too, rarely get into conversations about medical maladies with targets. They, too, may be unwilling or unable to perceive the causal factors which contribute to their friends’ ill health.
Figure 4.
ABOUT MAPE – MAJOR SPONSOR OF THE SURVEY

MAPE is a public-sector labor union which promotes the welfare and advances the interests of its members while acting as their exclusive representative concerning terms and conditions of employment.

Members are probation officers, analysts, scientists, foresters, psychologists, zoologists and so much more. MAPE members work in all segments of state government to provide Minnesotans with the vital services they need. MAPE is proud to contribute to the high quality of life in Minnesota!

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ABOUT WBI

The Workplace Bullying Institute is the first and still the only U.S. organization dedicated to the eradication of workplace bullying that combines help for individuals, research, books, public education, training for professionals-unions-employers, legislative advocacy, and consulting solutions for organizations. The founders, Dr. Ruth and Dr. Gary Namie, began their work in Benicia California in mid-1997. WBI is once again located in the San Francisco Bay Area.

The 2017 WBI U.S. Workplace Bullying Survey is the fourth national scientific survey done by WBI. Additional WBI studies can be found at the WBI website.

workplacebullying.org

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