The Relationship Organization's Climate and Workplace Bullying Among Nurses

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ABSTRACT

Introduction: Bullying in the workplace is one of the psychological problems often experienced by nurses in the workplace that hurts individuals and organizations. Incidents of workplace bullying are common in highly stressful jobs. Objective: This study aims to find out the relationship between organizational climate and workplace bullying among nurses. Method: This study used a cross-sectional, descriptive study design. There were 235 nurses involved as participants taken with a proportional random sampling technique. To assess bullying among nurses in Bengkulu by using a Negative Action Questionaire-Revised (NAQR) instrument. Results: The results showed that of 235 nurses, there were (37.4%) of nurses who experienced workplace bullying. Three bullying actions most frequently reported were experienced by nurses; getting excessive workload, given work tasks that are not following their competence, and given the job by the target deadline is not possible. A total of (44.3%) of nurses said working in an environment with a less good organizational climate. There is a relationship between the organizational climate of bullying to nurses in the workplace with a value of p = 0.000. Discussion: An excellent organizational climate accompanied by a clear division of tasks can avoid conflicts and can prevent bullying in the workplace.

Keywords: Organizational Climate, Workplace Bullying, Nurse.
INTRODUCTION
Workplace bullying has become a problem that affects individuals' performance and organizations. Bullying in the workplace is repeated negative actions performed on one or more workers (Einarsen et al., 2011). According to Etienne (2014), workplace bullying is repeated harassment that makes the victim suffer physically and psychologically. Based on the above definition, bullying in the workplace is harassment and repeated negative actions make the victim suffer physically and psychologically.

The appropriate policy would be helpful to reduce the incidence of bullying in the workplace. World Health Organization (WHO) in 2010 warned about the increased incidence of bullying in the workplace. In Japan, the Ministry of Health, Labor, and Welfare (2012) has made efforts to prevent bullying in the workplace. So bullying in the workplace is a serious issue of concern to the government and the world health organization.

Bullying in the workplace is more common in the nursing environment, and it is because the job characteristics of nurses working in the health service are quite intense stress (Yokoyama et al., 2016). The above opinion is supported by Johnson (2015), who states bullying at work is related to the type of work, where people who work in service are affected more frequently by bullying than those who work in research and production. The nurses working in health care are more susceptible to bullying. This matter is evidenced by the increased incidence of bullying among nurses in the health service.

Incidents of bullying experienced by nurses in the health service have been reported nationally and internationally. Bullying among Australian nurses was reported by 38%, in The United States by 31%, and in Korea, as much as 23% (Yokoyama et al., 2016; Yuseon & Kang, 2016). Indonesia's research on bullying is still limited to nurses. According to Handika (2016), the incidence of bullying at Hospital Dr. Padang Rasilin by 51.2%, and at Dr. M. Djamil Padang was 42.2% (Dewi, 2013). So the problem of bullying is still a problem faced by nurses in the workplace.

Forms of bullying experienced by nurses at the workplace, there are three, namely: 1) bullying work-related, 2) bullying related to personal and 3) bullying related to physical intimidation (Einarsen, Hoel, & Notelaers, 2013). The above opinion is also supported by Etienne (2014), who states that bullying in the workplace includes; 1 bullying related to work, 2) bullying pertaining to personal, and 3) bullying related to physical bullying.

Several factors that can affect workplace bullying are the organizational climate, reward systems, and competition, as well as individual factor characteristics, including age, gender, level of education and length of employment (Salin & Hoel, 2012).

Organizational climate can be defined as a set of measurable properties of the work environment that is felt directly or indirectly by people who live or work in the organizational climate and are assumed to influence the behavior of corporate members (Litwin & Stringer in Fajri 2016). If the above factor are having problems then it would have the potential occurrence of bullying in the workplace.

The impact of bullying in the workplace there are six that is psychological disorders, increased job stress, decreased job satisfaction, increased attendance, increased turnover, and increased work accidents (Vessey, 2012; Hoel, 2011). Research on the impact of bullying on the
job site for the nurse, among others: The results showed that among nurses who were victims of bullying in the workplace, 74.1% decreased work motivation (Zonedy, 2014), 74.63% experienced work stress (Akar, 2013) and 34% has the intention to leave his job (Tambur, 2012). According to Neyens et al. (2007), bullying is more common in organizations without anti-bullying policies in the workplace.

The results of the phenomenology study at the Emergency Installation of the Bandung Adventist Hospital found that the impacts caused by the bullying experienced by nurses were: it could increase the burden of the mind, lack of focus, not carrying out tasks, silent, physically tired, difficult to sleep and felt uneasy. Comfortable (Christlevica, Joan & Ricky, 2016). From some of the studies above, it can be concluded that there are many impacts caused by the incidence of bullying experienced by nurses in the workplace. Bullying in the workplace has several signs and symptoms.

There are several signs and symptoms of bullying in the workplace; there are six kinds of signs and symptoms of bullying in the workplace, namely: 1) Employee complaints against their managers 2) Decreased work performance 3) Increased tension between staff 4) Workers' fear of other workers 5) Symptoms of depression and 6) absenteeism of workers (Ontorio, 2010). So if there are some of the signs and symptoms above, it is suspected that there is an indication of bullying in the workplace.

Results of preliminary interviews researcher with several nurses in six hospitals in the city of Bengkulu found that nurses often earn a high workload, and sometimes nurses also have to work outside the duties and responsibilities. In addition, the rewards nurses receive are not comparable with their workload. The results of the initial interview with the head of space research at hospital X obtained the head had trouble scheduling room service and a lot of exchange between the official schedule for the nursing staff, and some staff nurses often permit because of illness. According to nurses at the hospital, there is no policy on preventing bullying at work.

In an initial survey that researchers do with using the instrument Negative Action Questionnaire-revised (NAQ-R) on 24 nurses in Hospital X Bengkulu from 28 July - 31 March 2016, obtained from 24 nurses 15 nurses experienced bullying at work. Based on the background and the phenomenon described above, researchers are interested in conducting a study entitled "The relationship organizational climate and workplace bullying among nurses".

METHODS
Research Design
This study is conducted to determine the relationship between organizational climate and bullying among nurses in the workplace. This research is quantitative with a correlational descriptive. The sampling technique used was proportional random sampling.

Population and Sample
The sample of this study was 235 respondents who were calculated based on the Lameshaw formula from 604 populations. The sampling technique used was proportional random sampling. The sample criteria in this study are nurses willing to be respondents and nurses who have worked for 12 months. While exclusion criteria are nurses on leave or sick during the study and continuing their education and training for a long time.

Instrument
The instrument used in this study was to measure Organizational Climate using the Fajri instrument (2016) and workplace bullying using the Revised Negative Action Questionnaire (NAQR). The organizational climate instrument was adopted from Stringer and Litwin. This instrument has been used and translated into Indonesian by Fajri (2016). The executive climate instrument in this study consisted of 18 questions. This variable is categorized as less good
organizational climate if the value is < 65 and good organizational climate if the value is > 65.

The bullying instrument for nurses in the workplace consists of 22 Negative Action Questionnaire-Revised (NAQ-R) items adopted from Etienne's (2014) research. The instruments consist of 22 questions that the respondent answers by choosing one of the answer options that are considered the most correct (never given a value of 1, once every 2-3 months is given a value of 2, Every month it is given a value of 3, every week it is given a value of 4 and Every day is assigned a value of 5). Nurses are said to experience bullying if they experience two items from the NAQ-R that are experienced repeatedly, every day or every week for six months. The NAQ-R instrument has been used in Indonesia by Handika (2016), and Cronbach's Alpha result is 0.93.

Research Procedure

Data collection was carried out offline by distributing questionnaires and assisted by one enumerator. The researchers selected respondents according to inclusion and exclusion criteria, gave informed consent, and explained the purpose and description of the research. After reading the information and asking for approval/approval as respondents, they became respondents in the study whose identity was guaranteed to be confidential.

Data Analysis

Data analysis in this study used univariate and bivariate analysis. The univariate analysis consisted of respondent characteristics (age, gender, Organization Climate, workplace bullying). Bivariate analysis in this study used the chi-square test.

Ethical considerations

This study was approved by the Research Ethics Committee of the Faculty of Medicine, University of Andalas Padang (191 / KEP / FK / 2017). Before data collection, the researchers asked for the written consent of the participants, including an explanation of the study, and carried out by the voluntary commitment of the participants. Participants have the option to accept or reject, and all personal information is kept confidential. The information is only used for research purposes and will be discarded after the publishing of research results.

RESULTS

Bullying in the workplace

Of the 235 nurses who obtained 88 votes (37.4%) experienced bullying in the workplace. Three negative actions most frequently reported every week experienced nurses are nurses who experience negative action shortly get excessive workload, given work tasks that are not in accordance with their competence, and given the task by the target, the deadline is not possible. None had the threat of violence, physical harassment, or abuse of the truth, and no nurses were categorized as having bullying related to physical intimidation.

Table 1. Respondent’s characteristics

<table>
<thead>
<tr>
<th>No</th>
<th>Characteristics</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Young adult</td>
<td>150</td>
<td>63,8</td>
</tr>
<tr>
<td></td>
<td>2. Old adults</td>
<td>85</td>
<td>36,2</td>
</tr>
<tr>
<td>2</td>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Male</td>
<td>65</td>
<td>27,7</td>
</tr>
<tr>
<td></td>
<td>2. Female</td>
<td>170</td>
<td>72,7</td>
</tr>
<tr>
<td>4</td>
<td>Organization Climate</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Less good</td>
<td>104</td>
<td>44,3</td>
</tr>
<tr>
<td></td>
<td>2. Good</td>
<td>131</td>
<td>55,7</td>
</tr>
<tr>
<td>5</td>
<td>Workplace bullying</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Bullying</td>
<td>88</td>
<td>37,4</td>
</tr>
<tr>
<td></td>
<td>2. Not bullying</td>
<td>147</td>
<td>62,6</td>
</tr>
</tbody>
</table>

The individual nurse characteristics include age, gender, organization climate and workplace bullying. The age group most young adults aged (63.8%), predominantly female (72.3%), most nurses are juniors (69.4), most expressed a good organizational climate (55.7%) most nurses do not experience bullying at work (62.6%).

The results Chi-square showed that value p <α (p = 0.000) means that there is a significant relationship between organizational climate that is unfavorable to the incidence of bullying in the workplace and obtained the value of OR = 4.61,
which means nurses working in an environment with the organizational climate less goodwill have the chances of bullying in the workplace 4.61 times compared with nurses who work with a good organizational climate.

<table>
<thead>
<tr>
<th>Table 2. Relationship Organizational climate and workplace bullying</th>
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<tbody>
<tr>
<td><strong>Type of Organisation Climate</strong></td>
</tr>
<tr>
<td>- Less good</td>
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<tr>
<td>- Good</td>
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</tbody>
</table>

**DISCUSSION**

1. **Incident workplace bullying**

   Based on the research that has been made known, the incidence of bullying experienced by nurses in Bengkulu City in 2017 that as many as less than half of the caregivers (37.4%) experienced bullying in the workplace.

   The results of this research is similar to a study conducted by Yuseon & Kang (2016) which showed as many (31%) of nurses in the United States experienced bullying in the workplace, and in Australia, as many (38%) of nurses who experienced bullying in the workplace (Yokoyama et al., 2016), in the hospital Dr. M. Djamil Padang earned as much (42.2%) of nurses experienced bullying in the workplace (Dewi, 2013).

   The results of this study is more remarkable than studies conducted in several countries in Asia, such as that conducted by Yuseon & Kang (2016) to nurses in Korea, which showed that as much as 15.8% of nurses experienced bullying in the workplace, as many as 18.5% nurses in Japan to experience the action bullying in the workplace (Yokoyama et al., 2016). According to the researcher's assumption, this happened in Korea and Japan has no government policy that requires all agencies to have anti-bullying prevention policies in the workplace.

   Bullying in the workplace has become a problem that is quite interesting because it has proved to be a significant influence on nurses and the hospital. Nurses who are victims of bullying will lead to feeling uncomfortable in the workplace. In addition, the nurse can suffer mental disorders, increased job stress, lower job satisfaction, and improved work accidents. At the same time, the hospital can cause impacts such as increased expenses hospital caused by workplace accidents, recruitment, and orientation of new employees due to the release of nurses who are victims of bullying in the workplace (Vessey, 2012; Hoel, 2011).

   Nursing services is one of the core health services in hospitals therefore, all forms of interference that can interfere with the performance of nurses one conflict that could lead to bullying in the workplace should be reduced so that the nurse can work with the maximum that will ultimately improve the quality of nursing service and quality hospital services.

   Based on the research and theory results above, it was found that bullying is still one of the problems experienced by nurses in the workplace. Therefore, the hospital management must take the causes and symptoms of bullying experienced by nurses in the workplace because if it is not handled, it can cause a decrease in work performance, decrease work motivation, increase work stress, and increase nurse absenteeism. If this happens, it can reduce the quality of nursing services and, in the end, can reduce the quality of health services in hospitals.

2. **Organization Climate**

   Based on research that has been conducted found that as many (44.3%) of nurses said, the organizational climate in which they work is less good. The Results' of this research are similar to research done by Yayah & Hariyanti (2015), which showed that the nurse's organizational climate at military hospitals majority (41.8%) is less good.
Workplace bullying presentation was higher in nurses with an organizational climate of less good 56.7%, compared to nurses with a good organizational climate is 22.1%. The results of the analysis of the relationship of organizational climate with bullying in nurses in the city of Bengkulu using test chi-square showed a p-value <α (p = 0.000), which means there is a significant relationship between organizational climate with bullying in the workplace nurses and obtained the value of OR = 4.611 less good organizational climate will lead to increased risk of bullying in the workplace as much as 4,611 times.

The research result is consistent with research conducted by Linde (2016), which states that an unfavorable organizational climate influences the incidence of bullying in the workplace. The results of the study by Iftikhar & Qureshi (2014) show that a nasty organizational climate factor will cause bullying in the workplace. This means that if an unfavorable organizational climate does not get attention from the leadership, it can cause bullying in the workplace, on the contrary, if it gets serious attention, the organizational climate can reduce the incidence of bullying in the workplace.

Based on the analysis of questionnaires previously known that the climate of the organization adopted by nurses in Bengkulu City is categorized as less well because as much (44.3%) of nurses feel that the division of tasks is unclear. Then the hospital needs to improve the clarity of the existing organizational structure in the hospital and the room. Because of the lack of clarity in the organization structure, the duties and authority of each will be more clear to avoid conflicts and to prevent bullying in the workplace.

Based on the research results and the above theory, researchers assume that there is a relationship between organizational climate and workplace bullying to prevent bullying in the workplace, one of them is to create a good organizational climate; therefore the hospital management should pay attention to an organizational climate that is one of them by emphasizing the clarity of the existing organizational structure in the room so that the roles and responsibilities of nurses become clear which ultimately can minimize conflict

CONCLUSION

There is a relationship between organizational climate and the incidence of workplace bullying. It is hoped that these results will encourage hospitals to improve a less good organizational climate and clarify the division of tasks based on the career nurse level.

REFERENCE


The Relationship Organization's Climate and Workplace Bullying Among Nurses


Hoel, H., Cooper CL (2011). Destructive Conflict and Bullying at Work. Manchester School of Management, UMIST.


Vessey, J.A. et al. (2012). Bullying of staff in the workplace a preliminary study for developing personal and organizational strategies for the transformation of hostile to healthy workplace environments. *Journal of professional nursing*.


