

Are nurses their own worst enemy?

Nurses are at increasing risk of violence from patients but they also face another threat – from each other. New research shows that although their bully is most likely to be a manager, in almost a third of cases nurses are bullied by colleagues. Mary Hampshire reports

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Whenever Ruth Hadikin's pager beeped, she felt relieved if it was an emergency and not her bullying boss. "I dreaded her," recalls Hadikin, a former community midwife. "She'd call me into her office and explode with anger, waving her clenched fist at me. I thought she was going to thump me. My manager wanted to make my life as uncomfortable as possible because I was a union representative. She threatened me with the sack saying: 'You want to remember what pays your mortgage and it's not being a union rep'."

Bullying is rife within midwifery, according to research by Ruth Hadikin and Muriel O'Driscoll, also a former midwife, whose book 'The Bullying Culture' is published this month. They found that almost half (46%) of 462 midwives had been intimidated, humiliated, belittled and excessively criticised by colleagues. Approximately, 70% of those had lost confidence and 55% were considering leaving the health service altogether. "Most bullying takes the form of persistent, low level psychological harassment that eats away at staff over time, leading to stress and absenteeism," says Ms Hadikin.

She believes that the managerial structure of the NHS lends itself to today's problems. "Hospitals were founded in the army on the principles of servitude and dedication with a rigid hierarchy which breeds authoritarian attitudes. But staff in this day and age are not prepared to work in that kind of culture any more."

The book will be closely followed by new evidence from Lyn Quine, a reader in health psychology at the Centre for Research in Health Behaviour, University of Kent, whose previous research on bullying, based on interviews with 1,100 employees at an unnamed community trust, was published last year in the British Medical Journal. She found 38% of employees suffered bullying during a 12 month period – with their bullying most likely to be by a manager - and 42% had witnessed the bullying of others.

Ms Quine's latest work, focusing on bullying among nurses, is based on responses from 396 nurses in the same sample, and is due to be published in the Journal of Health Psychology. Ms Quine discovered 44% of nurses had been bullied, compared to 35% of other staff, and 50% of nurses had witnessed the bullying of others. The bully was most likely to be a senior manager or line manager although in 38% of cases it was someone of the same seniority. In 26%

of cases, the bully was male and in 66% of cases female. The bully was frequently older than the victim. "The health service remains very hierarchical. Nurses are expected to do as they're told," explains Ms Quine. "Coupled with a huge shortage of staff, they are under pressure to meet impossible demands. Bullying is exacerbated by ever increasing demands on finite resources, and the pressure on middle managers to compete with other trusts and meet targets."

Nurses who had been bullied reported significantly lower levels of job satisfaction and higher levels of anxiety, depression, sleeping problems, stress and propensity to leave. Of nurses who had experienced bullying, 69% had tried to take action, including ignoring the bully, talking to friends and colleagues, reporting it to personnel or to a line manager, making a formal complaint or confronting the bully. Only 22% were satisfied with the outcome.

Roger Kline, head of labour relations at the Community Practitioners and Health Visitors Association, believes bullying can be "devastating." He says: "It most commonly takes the form of isolating, undermining, and publicly humiliating people. A significant number leave the NHS never to return. Others are psychologically damaged for life." Ms Hadikin agrees. "A victim's performance and decision making deteriorates which creates a vicious circle. They feel they can't do anything right. That has alarming consequences not just for the individual being bullied but the patient. The NHS will struggle to recruit and retain staff if it continues to treat them poorly."

Dr Peter Bruggen, a retired psychiatrist and author of 'Who Cares? True stories of the NHS Reforms' believes bullying is also linked to covering up error. "In the NHS, there's a presumption that error is preventable," he says. "When mistakes happen, a scapegoat is found. Those who speak out and refuse to be gagged are picked on."

Andrew Foster, policy director for human resources at the NHS Confederation, which represents hospital trusts, admits the NHS has fallen behind in good practice. "It has been one of the worst organisations for having a pecking order and hierarchy. The 1990s culture of competition between trusts, in particular, also produced a management style which caused a lot of added pressure. The NHS must learn its lesson from this in order to stamp out bullying. The NHS Plan published in July has big implications ... in terms of setting up clinical teams and leaders and developing a new style of thinking."

But Mr Kline says there is too much talk and not enough action. "Most trusts do have policies on bullying but judging by the stories we come across, there's not enough action. We need to make bullying totally unacceptable which means changing the work culture and taking much sterner measures, for example, making it a dismissable offence."

