



NURSING ACADEMICS' EXPERIENCE IN FACE OF MORAL HARASSMENT
VIVÊNCIA DOS ACADÊMICOS DE ENFERMAGEM DIANTE DAS OCORRÊNCIAS DE ASSÉDIO MORAL
EXPERIENCIA DE LOS ACADÉMICOS DE ENFERMERÍA FRENTE A LAS OCURRENCIAS DE ACOSO MORAL

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ABSTRACT

Objective: to know the experience of nursing students in the face of occurrences of moral harassment. **Method:** descriptive-exploratory study with a qualitative approach, carried out at a higher education institution located in the city of Maringá (PR), Brazil, with 18 students from the 4th year of the nursing course. The data collection was performed with semi-structured interview. The data were submitted to the Content Analysis technique, in the Category Analysis modality. **Results:** from the analysis of the interviews, four categories emerged: "Most common harassing behaviors within the academic universe"; "Acknowledging the venues that presuppose moral harassment"; "Feelings that emerge from moral harassment" and "Consequences of submission to bullying". **Conclusion:** before the reports of participants of this study, it was evidenced that there is understanding of the students about moral harassment, although the reports present some gaps regarding the characteristics that define the practice of harassment. **Descriptors:** Nursing; Nursing Students; Violence; Interpersonal Relations; Nursing Education.

RESUMO

Objetivo: conhecer a vivência dos acadêmicos de enfermagem diante das ocorrências de assédio moral. **Método:** estudo exploratório-descritivo, com abordagem qualitativa, realizado em uma instituição de ensino superior localizada na cidade de Maringá (PR), Brasil, com 18 acadêmicos do 4º ano do curso de enfermagem. A coleta de dados foi realizada com entrevista semiestruturada. Os dados foram submetidos à técnica de Análise de Conteúdo, na modalidade Análise Categrorial. **Resultados:** a partir das análises das entrevistas, emergiram quatro categorias << Condutas assediadoras mais comuns dentro do universo acadêmico >>; << Reconhecendo os locais que pressupõem o assédio moral >>; << Sentimentos que emergem perante o assédio moral >> e << Consequências da submissão ao assédio moral >>. **Conclusão:** diante dos relatos dos participantes deste estudo, evidenciou-se que há entendimento dos discentes acerca do assédio moral, apesar dos relatos apresentarem algumas lacunas quanto às características que definem a prática do assédio. **Descritores:** Enfermagem; Estudantes de Enfermagem; Violência; Relações Interpessoais; Educação em Enfermagem.

RESUMEN

Objetivo: conocer la experiencia de los académicos de enfermería frente a las ocurrencias de asedio moral. **Método:** estudio exploratorio y descriptivo, con enfoque cualitativo, realizado en una institución de enseñanza superior localizada en la ciudad de Maringá (PR), Brasil, con 18 académicos del 4º año del curso de enfermería. La recolección de datos fue realizada con entrevista semi-estructurada. Los datos fueron sometidos a la técnica de Análisis de Contenido, en la modalidad Análisis Categrorial. **Resultados:** a partir de los análisis de las entrevistas, surgieron cuatro categorías << Conductas acosadoras más comunes dentro del universo académico >>; << Reconociendo los locales que presuponen el acoso moral >>; << Sentimientos que surgen frente al acoso moral >> y << Consecuencias de la sumisión al acoso moral >>. **Conclusión:** frente a los relatos de los participantes de este estudio, se evidenció que hay entendimiento de los discentes acerca del acoso moral, a pesar de los relatos presentar algunas lagunas sobre las características que definen la práctica del acoso. **Descriptor:** Enfermería; Estudiantes de Enfermería; Violencia; Relaciones Interpersonales; Educación en Enfermería.

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INTRODUCTION

Daily work is surrounded by several stressors that are increased with the development of moral harassment, currently discussed as a result of the human rights approach in the work environment, and recurrent mainly in work activities with a predominance of women, as is the case of nursing.¹⁻³

The term *assédio moral* (moral harassment) is used in Brazil to represent violence at work, but other countries use different denominations. In France they use *harcèlement moral*; in England *bullying*; in the United States and Sweden *mobbing*; in Japan *Murahachibu*, *ijime*; in Spain *psicoterror laboral* and *acoso moral*.⁴⁻⁶

Bullying is a set of abusive behaviors that can be a gesture, a word or behavior, which are made repetitively, affecting the physical or mental dignity of an individual, leading to the threat of loss of employment or change in their work environment.⁶

The practice of harassment can be classified according to the profile of the harasser, being assigned as horizontal harassment that occasioned by his or her co-workers; vertical harassment is divided into descendant, that starts from the hierarchical superior against his/her subordinate, and the ascending moral harassment, that is provoked from the subordinate to his/her superior.^{4,6}

Moral harassment arises from psychic suffering, which despite being difficult to verify as it manifests itself in an "invisible" way, has been highlighted as a relevant subject that deserves attention of health organizations, health professionals and society in general, since it can lead to serious psychological damage to workers.⁷

The development of moral harassment can occur in a variety of ways, including harassing the employee, meeting to talk about him/her without inviting him/her to participate and providing the chance to defend himself/herself. In the academic world, this type of harassment has become common due to the stressful environment reproduced by higher education institutions.^{4,8}

The victims of harassment develop psychic sequels that stay marked in their psychological aspect and it can evolve to a post-traumatic stress and bring feelings of shame, humiliation and persistent modifications of personality in the individual, making them fragile, fearful and unbelieving with everything and everyone.⁶

Due to the fact that this subject is little studied in the academic context, this study might bring knowledge of the repercussions that harassment develops in higher education institutions so that health promotion actions that empower and strengthen the subjects are implemented. In addition, this study might support the training of nurses to avoid harassment practices and train professors not to carry out such practice.

In view of the exposition of this reality, this study had as objective to know the experience of the nursing academics before the occurrences of moral harassment.

METHOD

This is an exploratory-descriptive study with a qualitative approach. The subjects that participated in the research were 18 students from the 4th year of the Nursing course enrolled and actively participants in the academic activities of a Higher Education Institution (HEI) located in the city of Maringá-PR, Brazil. Only 2 students did not accept to participate in the study. The inclusion criteria were being over 18 years old, regardless of gender; being enrolled in the nursing course; and accepting to participate in the study.

The data collection took place from August to October 2013. A questionnaire was used containing closed questions for characterization and discursive questions that led the interviewees to report on the subject in order to reveal their knowledge and perception on the subject in a comprehensive manner.

The application of the questionnaire was done through a recorded interview, in which the objectives and purposes of the study were briefly presented at the beginning, and then, participants were asked to sign the Free and Informed Consent Form.

Due to the difficulty of establishing a time and a place for data collection, at the time of the individual invitation, a previous appointment was made with the interviewee so that, based on the availability and accessibility of the interview, they could establish an appropriate time and place, taking into account that the chosen place could offer privacy and silence for the effectiveness of the research and comfort for the interviewee and the researcher.

After the data collection, readings and re-readings of the speeches were done in order not to lose any content relevant to the good development of the research.

The reading of the material allowed to understand the content and to group the

fragments that were repeated and/or had semantic similarity in the different speeches, considering the thematic axes. Subsequently, the constitutive elements of each theme were categorized, analyzed according to the Content Analysis Technique in the Thematic Modality.⁹ To do so, the following steps were performed: pre-analysis; exploration of the material; and treatment of the results obtained, with the definition of categories of analysis, inference and interpretation.

Thus, working with the thematic analysis consists of discovering the nuclei of meaning that make up the communication and whose presence or frequency of appearance can mean something for the chosen analytical objective.⁹

Thus, through this process, four thematic categories emerged: Most common harassing behaviors within the academic universe; Acknowledging the venues that presuppose moral harassment; Feelings that emerge from moral harassment; and Consequences of submission to moral harassment.

Authorization was obtained from the coordinator of the nursing course. The study was submitted and approved by the Ethics and Research Committee under the light of Resolution 466/12, and was approved under opinion no. 347.827 and CAAE no. 18631513.0.0000.5539.

To ensure confidentiality, respondents were represented by the letter "I" in capital letters, followed by their respective numbers that represent the order in which they were interviewed.

RESULTS AND DISCUSSION

Initially, the characteristics of the interviewed students are presented, followed by the four thematic categories that emerged from the study.

The age group of the 18 students of the 4th year of the Undergraduate Nursing Course who participated in the study was between 20 and 31 years old. Of these, 16 were female and only 2 were male.

♦ Most common harassing behaviors within the academic universe

This study showed that behaviors related to disrespect, inferiorization of the individual, exposure of the other to ridicule, overload and persecution are inserted not only in the scope of work, but also in the academic universe, because in most reports, despite the work environment is not mentioned, the practice of bullying occurs in the internship fields and within the classroom.

This reveals that bullying is extensive and not selective, as it does not choose appropriate place to manifest, nor the type of aggressor, who can be a professional, a professor or a student.¹⁰

In the reports of I2, I3 and I12, the role of harasser is conferred to the professor. According to the statements below, contrary to what is expected of a professor, it was observed total disregard and contempt of the professor towards students, who, once morally harassed, feel inferiorized and incapable.

As a student, when a teacher came to assess me, he said he did not know why I had taken it, he did not understand why my grade was low. But he told me that it could be because of my age, since I am not in the age group to attend the first graduation. (I2)

We say something and the person pretends not to listen; it is annoying when you try to express yourself and in fact the person does not listen because they have something against you or because they think you are not capable of saying anything. (I3)

A study addresses that bullying is usually carried out by the aggressor hierarchically superior to the victim, either a worker or a student. In the case of the academia, the aggressors may be the teachers or other students.¹⁰

In the internship field there are numerous harassing behaviors. From the testimonies given by the students I1, I4 and I16, it was observed their devaluation within the field of practice training, where they carry out a series of activities within the service, as a worker, and as such they should be respected. However, the institutional hierarchy positions the students as subordinates to the team.

I found a lack of respect of a doctor in the operating room. He made a joke where he said that the guilt for everything that was wrong in there at the time was mine because I was a trainee who was there. He was an arrogant person, did not know how to talk, did not expose his work at any time, on the contrary, he only used his position to exalt himself as he was the best there and we were nothing! (I1)

The head nurse there, I think she did not believe in my potential, she told me: you cannot do it, you cannot do that; I do not want you to deal with such patients, because I do not trust you. She would go in the front of the staff and speak like this: Oh! Be careful with what you do because I can get you out of here in a minute. Putting me under pressure. (I4)

In the hospital, I was going to do an internship in the sector and the nurse asked me to withdraw the contrast for the patient to take and then we would take him to

make an examination. She told me to get a syringe and a needle. But since in the hospital the materials are released in the pharmacy, she told me to look in a box, and I only found some needles and syringes. Then she took it and had me withdrawing with a 10ml syringe and a super thin needle a glass of, I do not know, 100ml or so, and then one of the employees arrived and asked what I was doing, since it was to take orally; it was to just open the cap and take off the part that blocked withdrawing and put everything to the patient [...] and she let me stay there for two hours and found it funny; she would tell everyone that I was withdrawing with the small syringe, which it was not necessary; it was just to open; how could I do not know that? (I16)

In the workplace, some behaviors characterize bullying, such as humiliation, criticism, offenses, threats, disqualification, work overload, intimidation, pressure and disrespect.¹¹

As regards the field of internship or in the classroom, bullying is carried out not only by professionals of a high hierarchical level, but also from student to student, making the situation even more worrying.

In one of the hospitals that the group was doing internship and in the middle of a procedure, which I had already done more than half, a second student arrives, opens the door and begins to speak out loud that it was wrong, from the door! The companions were outside, there was the patient, there was another second patient hospitalized as well and she was speaking out loud that I was wrong, that I was not supposed to continue. She came and said that I was wrong and left closing the door and banging her clogs in the hallway! (I8)

[...] I ended up taking too long to pass the test and this student, who was behind me, said to me: hurry up! Because I was very slow. Then I asked her to wait a little while and she started cursing me and the teacher did nothing. She simply said that if we were not going to have a fight right away, we'd better stop the fight soon! (I12)

The educational institution is an environment that is propitious to interpersonal relations of violence, either from teacher to student, considered to be descendent harassment, or from student to student, characterized as horizontal moral harassment, which occur because of different reasons and forms and may cause sequelae in the victim.^{11,12}

◆ Acknowledging the venues that presuppose moral harassment

Bullying is a subtle practice that does not choose race, color, age, gender or even place to be practiced. Through interviews with I1,

I3, I6, I7 and I11, it was observed that, in nursing students' view, it is not the work environment that is the most susceptible to bullying, but social interaction in general.

The simple fact of relating interpersonally predisposes individuals to this type of practice, not labeling only the boss as a harasser, but the partner, the friend, the brother, in short, any individual who has a dominant role in the everyday life of another person.

Where there is more than one person, where there is a coexistence group, a boss, a teacher, a mate, anybody, I think it happens everywhere! Both at school and at work, in your life with your friends... (I1)

It can happen both at work and in your normal day to day life; the person talks to you and you feel offended, you feel morally harassed! (I3)

I think that in day to day, there are people who are sometimes in your conviviality and they judge you without knowing you. I think it happens in college, at work, even in among our friends. (I6)

I believe that bullying can be done all the time and at any time, either inside a classroom, within the workplace, within the hospital, at the basic unit, at school, during college, at harassment. It can be done at any time and on any occasion! (I7)

It can happen under any circumstance! When you get along with other people, it can be in the family, at work, anywhere, in college, everywhere! (I11)

Psychological violence is not only restricted to the work environment, the professional ends up bringing it to social and family life, producing detrimental effects to the people who are around them.¹³

The practice of bullying is more linked to the work environment; however, educational institutions are also susceptible to it, which can be carried out by managers, teachers, students and counselors, finding a breeding ground for more subtle to the more explicit atrocities.¹⁴

For the most part, bullying dominates in an environment of excessive competitiveness, sustained by hierarchical relationships that generates rivalry among employees.¹⁵

This study showed that situations of humiliation and embarrassment do not occur only in the work environment, highlighting the extent of its occurrence even within an educational institution, in regard to the nursing course, mainly in the internship fields.

Evaluating what I had once, by my cousin [...] but she suffered harassment by the teacher, inside the classroom. (I16)

Scardoelli MGC, Ferracini CL, Pimentel RRS et al.

Nursing academics' experience in face of...

At the internship, for example, I'm there to learn, but that person, who is there to teach me, also went through this phase of learning and sometimes is ignorant, stupid in front of people without having to be. (I9)

As far as nursing is concerned, bullying can be found in all work environments, from the hospital area to the academic area, and can manifest in the relationships among colleagues of the health team, clients and families, teachers and students. Probably, everyone, at some point in life, has already witnessed and/or suffered this form of harassment by somebody who participates in everyday life.^{10,16}

Since bullying has almost guaranteed presence in the workplace, such place must be mentioned. The institutional hierarchy of any employment relationship already adds in its origin the relations of power together with stereotype of superiors and insubordinates. It was noticed that within the academic environment this type of questioning is not different.

I think it happens more in the area where you are working and when you do something wrong or when you have not even done it and the person pre-judges you. (I4)

It happens at work, when the boss shows lack of respect. (I10)

The harasser has abusive conducts with words or behaviors that affect the physical or psychological health of the victim. They commit harassment in a hidden way by using the weaknesses of the victim to make him/her doubt of her/himself, not acting in self-defense, disrespecting him/her and shaking him/her self-confidence.¹⁷

♦ Feelings that emerge from moral harassment

Every action generates a reaction and with the practice of bullying it is not different. I1, I4, I6, I7, I11, I12 and I13, when questioned in relation to what they felt at the time and after the occurrence of bullying, reported both anger and sadness as feelings that manifested when they were subjected to harassment. In the testimonies it was evident the negativity that such violence brings to the individuals, manifesting in them a discontentment that can appear in their professional and personal life.

We get sad to think that there are human beings who do this! And at the same time angry because, at the same, we want to tell the person to get lost! (I1)

After and during the episode I was very sad, very sad indeed! And then I was really stressed about the situation because I saw that she had no reason to do it, then I got really annoyed, really upset! (I4)

Angry! Just angry! (I6)

At the moment I was totally nervous, I was angry, I wanted to fight with everybody, I wanted to go after the person and that's what, I did I called the person and I said a lot of things to her [...] but then I thought I should have, I don't know known, I should have met her and asked, So-and-so why you did that, but [...] I was really annoyed, disappointed with the person. (I7)

My feeling ... Actually, I felt sorry for this person because soon she left the workplace and my feeling was of anger, disgust. (I11)

At the moment I was very angry, I wanted and if I could I would punch her. And then, I got really upset! I was low-spirited, very hurt, very upset, embarrassed, and ashamed. I felt all this! (I12)

I felt very angry; I wanted to confront the person. At the moment I felt very angry and disgusted and this discouraged me a lot, that is, from the moment I went to the internship I had no motivation. (I13)

When psychic aggression in the work environment occurs in a continuous and lasting way, this fact leads the worker to suffer diminished self-esteem, preponderating depressive states, and favoring the appearance of somatic psychic diseases, since workers tend to respond to bullying with moments of crying, sadness, resentment and hurt, as well as rejection to the work environment.¹⁸

Still in the universe of feelings I2, I3, I8 and I9 related the experience of harassment as a triggering sensation of incapacity and great incompetence, thus demonstrating the intensity of feelings that this type of practice brings to its victims, since they end up feeling and labeling themselves as inferior, causing a marked introspection in this individual who becomes isolated.

Feeling of incompetence, because we think we will enter graduation and be well accepted. That is what we expect and suddenly you see yourself so harassed by a teacher who could be giving support. (I2)

If you feel incapable, you also feel restrained because you know that if you say something, the person will not even care for what you are going to say, so you often get quiet, you keep that thought: Oh! I'm not going to talk; there is no use in talking! Then, how can I talk, if I'm not recognized for what I know how to do? (I3)

Well, at the moment of harassment, first you feel inferior, underrated and demoted! (E8)

I think the feeling of incapacity, before and after. (I9)

A study found that the feelings that emerged in the victims of bullying were

Scardoelli MGC, Ferracini CL, Pimentel RRS et al.

Nursing academics' experience in face of...

sadness, disappointment, incapacity and a sense of lack of competence, which reflect in a negative and profound way, triggering psychic sequels.¹⁹

Isolation is a characteristic step in moral harassment, as the aggressor interferes with the communication of the harassed person and maintains his/her contact with the social work environment.²⁰

Humiliation causes pain, sadness, suffering, and leads to drastic consequences, making the person feel vulnerable, fragile and incapable.²¹ This shows that, although mentioned in the speeches as different feelings, anger, sadness and inferiority make up the characteristic aspects of humiliation and embarrassment resulting from moral harassment, thus narrowing the relation of the feelings exposed in the study.

◆ Consequences of submission to moral harassment

The very name of moral harassment brings in its essence reference to the psychological aspect. Of the 18 students interviewed, 15 reported as a consequence of moral harassment the appearance of depression together with stress, and this as a trigger for the feelings of sadness, inferiority, incapacity, illustrated from the statements of I1, I3, I8, I11 and I13.

I think it leads to stress, to depression. You feel underrated! It can be fleeting, it can be long lasting, but it is a sadness! A psychological damage! (I1)

We get stressed because sometimes we think that it is really like the other person says to us, that she is incapable and everything else. Stress, too much stress. (I3)

Depression, you go through such a stress and stress can lead to other diseases as well, but depression and stress are the main ones that lead to this! (I4)

Let's put it this way: a deep sadness, a depression, depends on the degree of harassment! If harassment is okay it will be an easier thing, but if the harassed person does not have a strong mind, strong opinions, this person will simply give up everything and throw everything up! (I8)

Bullying can bring a lot of bad things, such as depression; a person may get shaken, may not want to work anymore; I think the person may get depressed! (I11)

This person can develop stress, can develop a syndrome, one can even leave the work environment, resign because the person gets it, to know that he/she will be harassed every day, and he/she will not be able to do their work properly! (I13)

Aggression initially generates stress, which will depend on the intensity and limits of the

victim, and when these limits are exceeded, the development of psychosomatic disorders and irreversible chronic problems may occur.²² A study carried out with nursing academics considered that the main consequence reported by the academics was the stress suffered after aggression.¹³

The main psychic reactions developed in victims of moral harassment are anxiety, depressive states, insecurity, fear and lack of initiative.⁸

In the statements of I2 and I18, they established a relation between moral harassment, its psychological damage and its physiological repercussion in the individuals submitted to this harassing approach.

Ah! Many! Because both can affect the physical as well as the psychological aspect, one can develop various pathologies, like me, right? I developed hypertension, obesity, so I believe even in the psychological aspect, too! (I2)

[...] she began to have physical problems but I think it was a psychological issue first, and then the physical issue came. Look, first she did not want to go back to work! She did not want to! She refused to go back to work, then, there came the financial question, like, "I do not want to, but I need to!" Did you understand?! "So I'll have to go!" Got it? Then, she got back, but the productivity, the quality of the work, she did not have it anymore [...] And that jeep going on, going on, she started to ask many sick leaves [...]she started to ask many sick leaves because she said: "oh I have a lot of headaches and I cannot go out", you know? Things like this! Then her productivity was falling and falling! (I18)

A review of the literature shows that the consequences that can be triggered in the victims of harassment are physical, mental and psychosomatic damages, being the most frequent reactions: tachycardia, headache, hypertension, hair loss, asthenia, digestive disorders, among others.⁸

CONCLUSION

Given the above, this study evidences nursing students' understanding of bullying as a practice in which the victim is humiliated, ashamed and underrated in a way that promotes anguish, sadness and anger in an excessive and intense way, interfering directly in their attitudes and behaviors.

This practice is considered, according to the students, an unnecessary and exaggerated attitude committed not only by people who compose a higher hierarchical level, but also by teachers, nursing professionals, employers and even among the academics themselves, in

the workplace, in the academia and in social interaction, with repercussions for the health of the victim. However, of all the mentions, only one of the academic students cited repetitiveness as a characteristic inherent to bullying. There were no other citations that pointed out the main characteristics that define and differentiate moral harassment, which are the intentionality of promoting psychological damage and the constant and repetitive character with which this practice is performed.

Therefore, it is evident that the students included in the research have an understanding on moral harassment in agreement with the literature. However, there are still gaps regarding the characteristics that define harassment. Thus, it is understood the complexity of the theme covered in this study and the reason why it is necessary to inform future nurses about these aspects that define bullying as an intentional, repetitive, subtle and silent violence.

Health promotion actions aimed at avoiding, minimizing and eradicating psychological and physical harm are necessary to empower individuals. There is the need for nursing students to know more about the subject and they are greatly concerned to know how to position before such practice to defend themselves and adopt a stance contrary to bullying.

This study has limitations, among others, there are still many subjects to be explored with this theme, but this can be provided with new researches.

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Scardoelli MGC, Ferracini CL, Pimentel RRS et al.

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