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MORAL HARASSMENT IN THE WORKPLACE: ASSISTANCE NURSES' SPEECH

ASSÉDIO MORAL NO AMBIENTE DE TRABALHO: DISCURSO DE ENFERMEIROS ASSISTENCIAIS

ACOSO MORAL EN EL AMBIENTE LABORAL: DISCURSO DE ENFERMEROS ASISTENCIALES

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ABSTRACT

Objective: to investigate the nurses' comprehension about the practice of moral harassment in the workplace. ***Method***: this is an exploratory research of qualitative nature conducted in a public hospital of the city of João Pessoa/PB/Brazil. Participated in the investigation twenty assistance nurses. Data were collected in the period of September to October 2011, utilizing a form and analyzed by the Technique of the Analysis of Collective Subject Discourse. The research project was approved by the Ethic Committee in Research Hospital *Universitário Lauro Wanderley*, CAEE 0048.0.462.126-11. ***Results***: this study has showed three central ideas: conduct that exposes the worker to embarrassment and humiliation, attempting against the dignity of the worker, abuse of power. ***Conclusions***: the study evidenced that although nurses have understanding of moral harassment, they didn't mention that the practice of this phenomenon occurs in a repetitive and prolonged way, which indicates the need of a better comprehension of these professionals on the subject. ***Descriptors***: Social Behavior; Moral Harassment; Nursing.

RESUMO

Objetivo*:** investigar sobre a compreensão de enfermeiros sobre a prática do assédio moral no ambiente de trabalho. ***Método: pesquisa exploratória, de natureza qualitativa, realizada em um hospital-escola público federal da cidade de João Pessoa/PB/ Brasil. Participaram 20 vinte enfermeiros assistenciais. Os dados foram coletados no período de setembro e outubro de 2011, utilizando-se um formulário e analisados mediante a Técnica de Análise do Discurso do Sujeito Coletivo. O projeto de pesquisa foi aprovado pelo Comitê de Ética em Pesquisa do Hospital Universitário Lauro Wanderley, CAEE 0048.0.462.126-11. ***Resultados*:** evidenciaram-se três Ideias Centrais: conduta que exponha o trabalhador a constrangimento e humilhação, atentado contra a dignidade do trabalhador, abuso de poder. ***Conclusão*:** embora os enfermeiros tenham compreensão acerca do assédio moral, eles não mencionaram nos relatos que a prática desse fenômeno ocorre de forma repetitiva e prolongada, o que vislumbra a necessidade de melhor compreensão desses profissionais sobre a temática. ***Descritores***: Comportamento Social; Bullying; Enfermagem.

RESUMEN

Objetivo: investigar la comprensión de enfermeros sobre la práctica del acoso moral en el ambiente laboral. ***Método***: se trata de una investigación exploratoria de naturaleza cualitativa realizada en un Hospital Público de la ciudad de João Pessoa/PB/Brasil. Participaron de la investigación veinte enfermeros asistenciales. Los datos recolectados en el período de septiembre y octubre de 2011, se utilizó un formulario y analizados por medio de la Técnica de Análisis del Discurso del Sujeto Colectivo. El proyecto de investigación fue aprobado por la Comisión de Ética en Investigación del Hospital Universitário Lauro Wanderley, CAEE 0048.0.462.126-11. ***Resultados***: este estudio mostró tres Ideas Centrales: conducta que exponga el trabajador a la vergüenza y humillación, atentado contra la dignidad del trabajador, abuso de poder. ***Conclusión***: el estudio hizo evidente que aunque los enfermeros tengan compresión del acoso moral, ellos no comentan que la práctica de este fenómeno ocurra de forma respetiva y continuada, lo que demuestra la necesidad de una mejor comprensión de estos profesionales sobre la temática. ***Descriptores***: Comportamiento Social; Bullyng; Enfermería.

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INTRODUCTION

Bullying is a problem socially constituted through history. [1] It started in Brazil in the colonial era, with emphasis on the lines of slavery regime, when the reporting relationships between Indians, blacks, and settlers reached its culmination.[2] Currently, the phenomenon covers all classes and professions. Also known as moral violence at work is defined as exposure of the worker during the performance of their professional activities, situations involving, repeatedly and for prolonged periods, humiliation, embarrassment and discrimination. This practice can result in physiological disorders and psychological victims, withdrawal, isolation and embarrassment of a person so evil and abuse of power, leading to lose self-esteem assaulted and possibly suicide. All this points to a public health problem.[3]

The moral violence in health care represents a multidimensional psychosocial syndrome that causes the professionals, regardless of rank, illness, impairment of their mental health and often their performance at work. Although the phenomenon is to meet all the categories, it is emphasized that nurses are professionals who have a higher risk to suffer violent acts, especially those working in the hospital, especially the emergency departments and psychiatry.[5-7]

Are exposed to several factors that will inevitably involve the improper performance of their work, putting at risk the quality of care provided to clients at the expense of interpersonal relationships. Also involve problems of mental and physical health. The excessive workload, the hospital sector in which they fall, the stress that comes from a number of functions assumed, and still fragile interpersonal relationships, these are all factors that lead to the practice of bullying. [3]

It is noteworthy that many of these professionals are unaware of the subject, which makes them unable to distinguish the defining characteristics of this humiliating practice or associate to symptoms to psychological suffering in everyday work.

In the case of current issues of great importance in many areas of knowledge, particularly for nursing, the interest in developing this study is justified by the need for further research in the area, in view of the scarcity of studies about the phenomenon harassment moral.

Given this reality, as researchers at the Center for Studies and Research in Bioethics, we are interested in developing this study that involves the practice of bullying in nursing. With the following objectives:

- To investigate the understanding of nurses about bullying in the workplace.
- To identify what measures recommended by the study participants to curb the practice of bullying in the workplace.

METHOD

This exploratory, qualitative approach. The scene investigation was a federal public hospital in the city of João Pessoa (PB) whose period of data collection occurred in September and October 2011.

The study sample consisted of 20 professional nurses in that hospital, given to the following criteria: be in daytime at the time of data collection have at least one year of hospital work and agreeing to participate in research from the signature on the expiry of consent.

To facilitate the collection of empirical data, we used a form with questions about the nurses' understanding about bullying. The collected data were analyzed qualitatively by a combination of discourse analysis of the collective subject. [8] This is a technique for organizing data that enables rescue the discursive understanding of a phenomenon in a given universe. The empirical analysis involved the following steps:

1st step - selection of the key expressions of each individual speech, obtained for each question proposed for the study.

2st step-identifying the main idea of each of these key expressions, forming the synthesis of the content of these expressions.

3st step-grouping of central ideas similar or complementary.

4st step-construction of speech-synthesis, or the collective subject discourse, through the grouping of similar central ideas.

Because it is a research involving human subjects, we followed the ethical observances contemplated in Resolution 196/96, in force in the country, the Ministry of Health, particularly with regard to the consent of the participant study.9 Researchers have also considered ethical observances covered by the Code of Ethics of Professional Nursing - Resolution no. 311/2007, Chapter III. This addresses the responsibilities, duties and prohibitions concerning the teaching, research and scientific production. The survey was submitted to the Ethics Committee in Research of Hospital Universitário Lauro Wanderley (HULW) and approved under No. 414/2011, CAEE 0048.0.462.126-1.

RESULTS

To better understand the data analysis will be presented below, the core ideas and the collective subject discourse, constructed from the questions proposed for the study.

Question 01. What is your understanding about the practice of bullying in the workplace?

Central Idea (IC)	DSC
IC 1 - Conduct that may expose the employee to embarrassment and humiliation	*Any conduct made in the workplace that exposes the employee to embarrassment, making you feel bad physically, emotionally and psychologically, when the fact generates embarrassment, and with unsubstantiated charges that do not match the profile of the victim are all forms of constraints faced by the professional; it's a shame that discriminates and damages the morale of the professional.*
IC 2 - Attack on the dignity of the worker	*Any work-related conduct that infringes on the dignity of the human person; All actions that affect the human being morally; Within the institution is morally any act that impairs the server; A provocation or violation of their rights; Any information or comments that will disqualify the professional, devaluing, deprived of their rights, creating moral conflict.*
IC 3 - Abuse of power	*It is practiced by every act superior or person who holds power over a subordinate; Any kind of humiliation or exposure of a professional by his superior on several occasions; Exposing any individual the authority of power, violence is an evil that causes exposure of a co-worker or friend to ridicule.*

Figure 1. Central Ideas 1, 2, 3, and the collective subject discourse of research participants in response to question 1, Joao Pessoa, 2011.

Question 02. In your opinion, what are the measures to curb the practice of bullying in the workplace?

Central Idea (IC)	DSC
IC 1 – Administrative, ethical and legal measures	*Appeal primarily to the Superintendent of the Hospital; Talk with your boss right away; Browse the top leadership and communicate the fact; Search for their rights under the standard established by ethics; [...] make a formal complaint by the competent body; Communicate to your Council (COREN) to take the appropriate measures; Provide formal complaint against the harasser or Harassers by the Ethics Commission or Ombudsman; Resolving legal way (legislation) [...]; Render the aggressor; Complaint in police station and file a lawsuit against the aggressor.*

Figure 2. Central idea and a collective subject discourse of research participants in response to question 1, Joao Pessoa, 2011.

DISCUSSION

The Collective Subject Discourse of participants enrolled in the study, expressed in a central idea portrays the understanding that harassment refers to conduct that may expose the employee to embarrassment and humiliation, attack on the dignity of the worker and abuse of power.

Bullying is identified as an abusive behavior, psychological nature that exposes the worker to humiliation and embarrassment, which can cause damage to his personality, in order to delete it from your desktop and affect the exercise of their functions.

The humiliation and embarrassment are an invisible risk, but concrete, labor relations and health workers who are victims of this practice, revealing one of the most powerful forms of violence in subtle organizational relationships. A national survey with 4,718 workers, notes that 68% said they suffered some kind of humiliation several times a week.

Bullying can be considered as a consequence of new management policies, ie, the result of the demands of capitalism, as a result of competition as well as oppressive working conditions, pressure to reach predetermined results, rates of exhaustive work, vulnerability employment relations, worker's impairment, severe hierarchical relationships, among others.

The DSC of nurses involved in the study stands as an essential component of the phenomenon of bullying aggression dignity of workers. This practice is revealed as an abusive conduct that undermines human dignity and can lead those who do not support the sick and not expected to make decisions regarding life as resignation or change of position or industry.

Therefore, the practice of bullying in the workplace is considered an act condemned, as a threat to the human dignity and violates the principles provided by the Brazilian legal system, requiring an attitude of respect for the dignity of the institutions of their servers.

Among the principles enshrined in the Magna Carta, one can highlight the Article 1: "The Federative Republic of Brazil, formed by the indissoluble union of States and

Municipalities and the Federal District, is in a democratic state and is based : [...]-III to human dignity. "

The DSC of the nurses entered the investigation reveals, the three central idea, the understanding that the abuse of power is directly related to the occurrence of the practice of harassment, causing a backdrop of discrimination, triggering the rupture of a good working relationship between employer and employee. Thus, it points to the need for the company to reflect organizational forms of their methods of management personnel, following the way that middle managers collect the results of the tasks of their employees in order to reduce the risk of abuse of power.

Stalkers in general, are self-centered people with delusions of grandeur, who feel the need to be admired in their work environments. So they can stand up to others, many uses of arrogance and malice, seeking to denigrate the image of his subordinates with criticisms exaggerated, unfounded and repeated, not considering how people need to be respected in their jobs. Accordingly, use of their hierarchical position to commit abuses and authoritarianism in the relationship with your employees, making it difficult interpersonal relationships.

Studies associate the practice of bullying at a higher hierarchical position of the aggressor. In contrast, the practice can take place in a vertical downward, upward vertical, horizontal and horizontal single collective.

The vertical downward bullying is practiced by the employer or supervisor and recognized as the most trivial, by the very organization of work, cataloged by the unbridled pursuit of profit at a lower cost to the company and employer.

The practice of bullying can happen between colleagues. In this case, appears as bullying horizontal, ie, one that occurs between individuals of the same hierarchical level. It's the kind of violence where a worker is harassed by a coworker, or by racism, that is because a person working group has something the others do not have (wealth, beauty, influences) and were then the violation of personal rights and dignity of the victim.

When one or more subordinates harass his superior, which is more often the case, the abuse is called mobbing up. Usually occurs through wrong actions or omissions, such as the detention of mail and messages, loss of documents and processes, as well as private wiretapping. Also can be caused when the top does not fit the reality of the enterprise in question or not imposed on other workers, being pushed or having their orders enforced.

The three central themes discussed above reflect the understanding of participants in this study, however, it is possible to note that the definition of bullying that goes beyond comprehension. Because it is a subject still little discussed in the historical context of Health, noted that nurses do not know the subject in its entirety, since the violence necessarily occurs in a repetitive and prolonged, which was not mentioned in the speeches of the participants. Elements such as the repetition of acts, the intention of denigrating the other, the abusive behavior of the offender with the intention of humiliating and socially excludes the professional work environment, is an attitude that characterizes the practice of harassment moral. Therefore, it is essential that the institution spread this theme, providing a better understanding and prevention of harassment among its employees.

Regarding measures to curb the practice of bullying in the workplace, the DSC nurses involved in research, expressed in Table 02 reveals that professionals consider important measures in the administrative, legal and ethical.

Therefore, to enable the professional to tackle the psicoterrorismo in the workplace, it must report it to the competent bodies. In this context, the agencies outlined in DSC nurses included in the study were the direct leadership, the leadership of industry, the superintendent of the hospital and the Regional Council of Nursing.

Soon, those agencies should be aware of this practice in the practice of nursing, trying to act in a preventive manner, with actions to clarify and work through the interpersonal relationships in the workplace, so that probable cases of bullying do not will happen.

The practice of bullying in the practice represents a confrontation ethical conduct established by the Organ Class. Therefore, to reduce the practice of nursing within the victim may be used as an instrument of the Code of Ethics of Nursing Professionals.

Importantly, the Code of Ethics of Professional Nursing, approved by Resolution No. 311/2007 of the Federal Nursing Council, in its Article 78, prohibits nurses, technicians and nursing assistants employ, "abused the power they gives the position or office to enforce orders, opinions, undermining modesty, sexual harassment or morally, abash people or hinder the work. "

The practice of bullying in the practice of nursing is considered an ethical breach. In this

sense, COFEN Resolution 311/2007, Article 118 provides verbal warning as a penalty, fine, censure, temporary suspension of professional practice and as a punishment more severe the disability the right to exercise professional.

In the legal sphere, the Brazilian federal law, there is so far, related to specific legal harassment moral.6 However, the victim of this practice, you can expect the device to the generic order of protection of their rights, as well as regulations constitutional and legal provisions which assert and claim compensation for damages and injuries.

At the municipal level, there are laws passed against the practice of bullying, and the Law. 1.163/2000, regulated by Decree No. 1134, a pioneer in Iracemópolis County, State of Sao Paulo. In the city said, others have specific legislation on bullying: Cascavel (PR), Guarulhos (SP), Sidrolândia (MS), Jaboticabal (SP), Ubatuba (SP), São Paulo (SP), Natal (RN) , American (SP), Campinas (SP), São Gabriel do Oeste (MS), Ribeirão Preto (SP), Wenceslaus President (SP), Porto Alegre (RS), Santo André (SP) and Catanduva (SP). All laws are modeled after the city of Iracemópolis, small changes occurring in the case of punishments and how to execute them.

At the state level, there is no specific law 3.921/2002, approved and psychological terror into operation in the field of Public Administration State, State of Rio de Janeiro. Penalize the offender by way of warning, suspension and / or dismissal from office and prohibits harassment caused by the superior. On July 9, 2004, was published Complementary Law n. 63, the State of Paraiba, which conceptualizes bullying in its Article 1. On February 9, 2006, was enacted Law no. 12,250, the State of São Paulo, as well as the registration of Complementary Law n. 12561 of July 12, 2006, the State of Rio Grande do Sul.3

It is important to mention that in the public direct and indirect reality in the legal field, related to bullying is already moving forward, as some states in the south, southeast and northeast have specific legislation to reduce harmful and hostile behavior common in the practice of bullying .19 it is worth mentioning that this regulation protects only the state or local civil servants where there is the law in force. Soon, workers will not benefit from CLT.

Although there are developments on the legal aspects related to bullying, we believe that this issue still needs to have a better legal coverage. The Brazilian legal industry needs to improve standardization in relation to workplace bullying in a more specific and overt, with the disciplining of the behaviors that make up this practice. Despite the discussions, especially on Federal Camera has not yet been approved this year a law that deals specifically with bullying at work. 6 This undoubtedly complicates the benefit they are entitled to workers, according to a specific legislation. Therefore, this issue still requires a better specificity in accordance with law.

In a study on bullying conducted with nursing professionals, it became clear that the victims may have damage to their physical and mental health such as stress, depression, hypertension, headache, insomnia, muscle pain, among others. Even the daily contact with the situation of harassment can cause a person to make hasty decisions, like resignation, and even lead it to attack ideas involving itself life5.

Besides the physical and psychological harm, bullying affects labor relations in the institution for causing incapacity to work, fragility in relations with colleagues, reduced productivity, financial losses can directly affect the structure of the family trabalhador. In addition, the employee must also recognize their own limits and abilities to perform tasks, so that does not suffer exhaustion or pass the other signs and symptoms of physical and mental.

Therefore, the presence of bullying among nursing professionals in health care is something of concern that requires special attention from managers in order to curb this practice, which violates the principle of human dignity, considered by the Brazilian Constitution.

Therefore, we highlight the importance of taking measures to curb such violence, it is clear that professionals are afraid to denounce the practices experienced in the workplace, because they often are threatened with losing their jobs or be punished in more severe by the aggressor. Victims often do not know how to tackle the problem, a living sense of powerlessness. Submit themselves for a long period of time, the situation of oppression they experience in the workplace, no report or seek the help necessary for their defense. Many prefer to remain silent in order to ensure their pay and subsistence, not reporting the incident the unions, the human resources department of that institution, and still less in associations specialized in bullying.

Based on the foregoing, the DSC of the nurses participating in the research evidence necessary measures in order to minimize the

occurrence of the practice of bullying in the workplace.

CONCLUSION

The Collective Subject Discourse of nurses in the survey revealed that the practice of bullying in the workplace, is conduct that exposes the worker to the embarrassment and humiliation, assaults her dignity and utilizes the power to reach the victim. The DSC also highlights administrative, legal and ethical to curb this practice.

Although DSC has shown nurses 'understanding about the practice of bullying in the workplace, they did not mention that the practice of harassment occur repeatedly and extended and that causes serious damage to workers' health. This indicates the need for wide dissemination on the subject and its consequences for the nursing work within the institution, in order that the matter be better understood and living situations of this nature is minimized or resolved.

It is appropriate to clarify that the health institutions in general, does not pay adequate attention to this problem in the company, which hinders the effectiveness of measures to combat this practice in the institutional environment.

Thus, we emphasize the importance of institutional awareness of the workers themselves and the need to promote actions aimed at terminating the phenomenon, in order to improve relationships in professional work environment.

Moreover, we must invest in training and maintenance of healthy professional bonds that generate harmony in the exercise of their functions, as well as in preventing the practice of bullying, from measures that excel the quality of life of the employee's work environment, with in order to exclude from the workplace any kind of demeaning conduct.

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