



PREVALENCE OF MOBBING IN THE NURSING STAFF OF A PRIVATE HEALTH INSTITUTION IN THE CITY OF CULIACÁN, SINALOA, MEXICO

*Dr. Jesús Roberto Garay Núñez, Dr. María Isabel Santos Quintero,
Dr. María Araceli Felix Amézquita and Dr. María del Carmen Beltrán Montenegro

Escuela Superior de Enfermería Culiacán, Universidad Autónoma de Sinaloa, Culiacán, Sinaloa, México

ARTICLE INFO

Article History:

Received 20th December, 2017
Received in revised form
06th January, 2018
Accepted 22nd February, 2018
Published online 30th March, 2018

Key Words:

Prevalence, Mobbing, and nursing.

ABSTRACT

This research work is non-experimental quantitative, cross-sectional description aims to determine the prevalence of mobbing in the nursing staff of a private health institution of the City of Culiacan, Sinaloa, Mexico. As well as determine the main aggressor agent of mobbing. The sample is composed of 44 nurses obtained under a non-probabilistic design for convenience, who agreed to participate in the application of the 60-item Heinz Leymann (mobbing) questionnaire. Respecting the code of ethics, under informed consent. Analyzing the results with the statistical program SPSS version 22. According to the analysis carried out, it was found that the nursing staff reports that their co-workers are the main agents of Mobbing with 50%, 25% is caused by the relatives of the patients, 18.2% by the medical staff of the hospital and 6.8% is performed by the patients.

Copyright © 2018, Dr. Jesús Roberto Garay Núñez et al. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Citation: Dr. Jesús Roberto Garay Núñez, Dr. María Isabel Santos Quintero, Dr. María Araceli Felix Amézquita et al., 2018. "Prevalence of Mobbing in the nursing staff of a private health institution in the City of Culiacán, Sinaloa, Mexico", *International Journal of Development Research*, 8, (03), 19194-19197.

INTRODUCTION

Mobbing or psychological terror in the workplace consists of hostile and unethical communication, systematically directed by one or several individuals against another, which is thus dragged into a position of helplessness and helplessness, and actively maintained in it. These activities take place frequently (as a statistical criterion, at least once a week) and for a long time (statistical criterion: at least six months). Because of the high frequency and duration of hostile behavior, this mistreatment ends up resulting in considerable mental, psychosomatic and social misery (González, et al., 2005). In the 21st century, workplace violence is indirect and passive, among the most common forms of violence is the psychological, as the isolation and emptiness that is made to the victim, which can destroy him psychologically. Such passive violence may consist of "accusations of incompetence, manipulation of the facts so that the employee may appear demented, so that he loses his tools; in other words, minor pettinesses" (Marzoan, 2002).

*Corresponding author: Dr. Jesús Roberto Garay Núñez

Escuela Superior de Enfermería Culiacán, Universidad Autónoma de Sinaloa, Culiacán, Sinaloa, México.

In this regard, the World Health Organization (cited in Peña, Ravelo and Sanchez, 2007) defines violence at work as a series of malicious expressions harmful to the emotional state of the personnel of companies, among which the lack of dialogue to develop relationships in a positive way; any aggressive and insulting behavior likely to cause psychological harm or discomfort to its victims; any type of individual behavior that threatens, intentionally inflicts or inflicts emotional damage to others; as well as the abuse of power that culminates in suffering, torture, degradation and even death. Being the repetitive behavior of assaults of sexual harassment, intimidation, abuse, and mainly moral harassment, a form of extreme labor violence due to its cumulative effect on workers. FIRST STAGE: Initiation of psychological harassment. In this phase the victim subject to mobbing experiences initial pressures of psychological harassment in the workplace and one of the first reactions of the victim is disorientation or bewilderment with respect to the behavior of the harasser. Said disorientation causes in it the loss of sleep and recurrent ideation. In this period the victim begins to seek help from his friends, relatives commenting on the problem and wondering why it is happening to me or what he has done to deserve this. SECOND STAGE: Opening of the problem. In this stage the problem is opened where the victim of mobbing experiences

an increase in the execution of strategies executed by the harasser directed to the one where threats or intimidation will be manifested, either verbal or punitive, affecting the job stability of the harassed. THIRD STAGE: Intervention of other superiors of the organization or company. It is important to highlight, within this stage, the intervention of other senior managers who make up the organization or company; this consists of the fact that the harassed person resorts to asking for help from other people in order to solve the problem, but those people must keep a certain reserve of the problem, not making it public; Here begins the victim of mobbing to feel the feeling of distance to their work relationship and with the members of it. The person harassed by mobbing can retreat into himself and is prepared to endure whatever is necessary by entering what is called the "mobbing spiral". This spiral consists of a loop with an impact on psychological symptoms and these on the ineffectiveness of the work response, justifying the harassment progressively; In this phase it is observed that the victim loses interest in his work, beginning his consultations with his doctor, often taking him to a psychologist's visit.

The harassed person begins to experience certain crises in his partner, marriage, loss of friends presenting a physical and labor deterioration leading to a massive destruction of his person adopting new behaviors in his person as the consumption of alcohol, tobacco or the ingestion of pills for sleeping. In this phase, the person victim of mobbing needs to be helped because, if it is not on time, voluntary abandonment of their employment accompanied by a new disease that had not previously led to becoming a person incapable of working to obtain a job can take place. new job. FOURTH STAGE: THE FAREWELL OR THE JOURNEY OF THE WORK. In this stage the person victim of mobbing has a deteriorating state of health making untenable a return to his job again after having obtained a license within the organization reflecting in it a loss of his professional potential and irreparable damage to his state of health physical and psychic accompanied by a significant deterioration in personal and family ties (Kingma, 1997). From the point of view of the nursing paradigm this study is framed in the theory of the process of the personal relationships of Hildergard Peplau, of the school of the interaction, which establishes that to do nursing one must take care of the processes of interpersonal relationship between people, and that implies that we must apply the principles of human relations aimed at solving the interpersonal problems that appear in the experience of life. Part of the assumption that we must break the vicious circle in which a person with illness, or in this case, victim of mobbing enters, and that are: loss of balance and stability in all areas, uncertainty, personal insecurity, helplessness, isolation, introspection, lack of support, loss of objectives, and reduction of the capacities to face the problems, which lead to the impossibility of getting out of this situation (Errando, 2013).

MATERIAL AND METHOD

Design: Quantitative, not experimental, descriptive transversal. Location of temporary space: Private hospital in the city of Culiacán, Sinaloa, Mexico. Universe of study: 66 Nurses.

Sample: 44 Nurses.

Sampling frame: Not probabilistic for convenience.

Instrument: Questionnaire of Heinz Leymann (Mobbin) of 60 Items.

Statistical Program: SPSS Version 22

Inclusion criteria: Nursing staff of all shifts.

Exclusion criteria: Nursing staff who do not accept to participate.

Elimination criteria: Personnel who did not make a correct record of the research instrument.

Ethical aspects: Research on human beings should be regulated by the ethical principles set forth in the Nuremberg Code, the Helsinki Declaration and the Belmont Report, as well as by a sensitivity to the ethical principles and the general health law of Mexico. Great importance should be given to the informed consent of the research subjects and therefore to their autonomy.

RESULTS AND DISCUSSION

According to the statistical analysis carried out in the present investigation, it was found that 63.64% had an age range between 25 and 34 years old, 27.27% between 35 and 44 years old, 6.81% between 45 and 54 years old and 2.27% between 55 and 60 years.

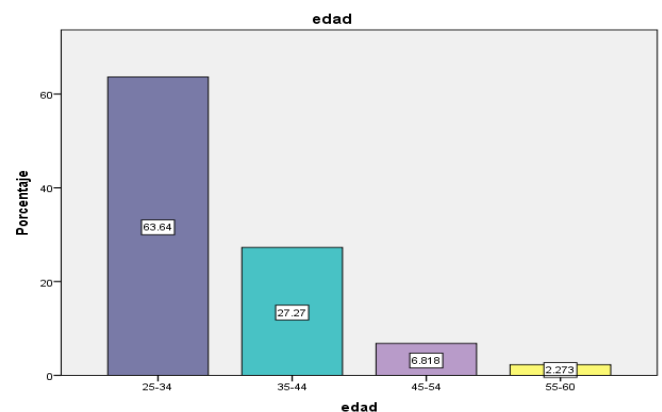


Figure 1. Nursing staff according to their age

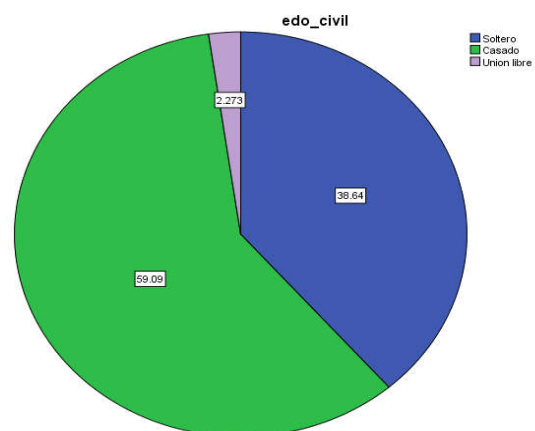


Figure 2. Nursing staff according to their marital status

It is known that environments in which competition is favored or in which authoritarian command styles predominate are conducive to mobbing. Regarding the victims, they are often <30 years old (it is possible that due to overrepresentation in the sample) and there is a greater incidence among casual or

temporary workers than among fixed workers. Most of the victims maintain a passive attitude, without actively facing the situation. Most of the comrades who witness mobbing are also passive and only 1 in 6 support the victim against the aggressor. Mobbing affects both sexes, although the frequency is somewhat higher in women (non-significant difference) (Prieto, 2004). With regard to marital status was found that 59.09% are married people, 38.64% single sun and 2.27% are people who cohabit in a free union.

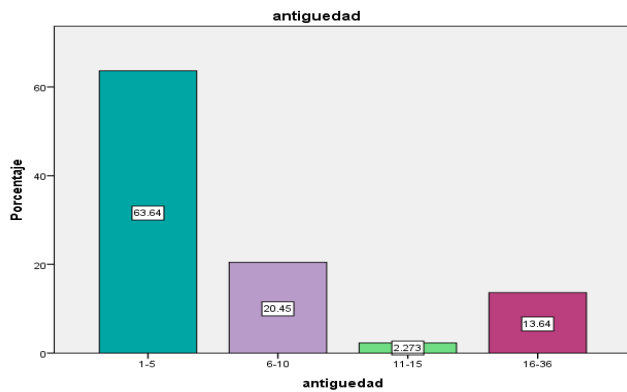


Figure 3. Nursing staff according to their seniority

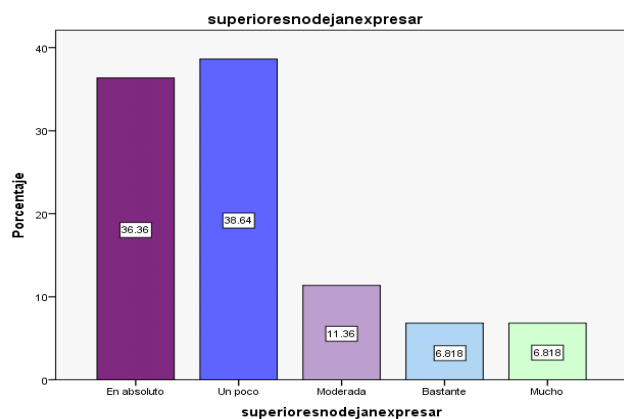


Figure 4. Management staff according to level of emotional expression by staff

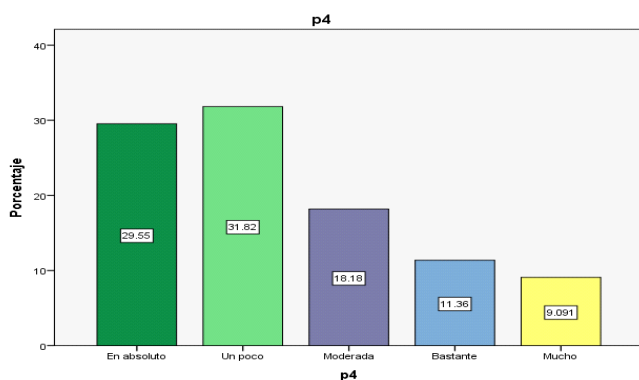


Figure 5. Nursing staff according to verbal aggressions

With regard to the seniority of the workforce, it was found that 63.64% of the staff was only between 1 and 5 years old, 20.45% between 6 and 10 years old, 31 13.64% between 16 and 36 years old and the 2.27% between 11 and 15 years. Regarding the variables related to the presence of bullying behavior among colleagues, reference is made to an increased risk for nurses under 30 years of age, with a short professional career, who work in certain units and in the night shift 38.

On the other hand, communication problems are presented as one of the causal factors of mobbing, while in other cases, poor communication among peers in a unit would be considered a form of harassment (Molero *et al.*, 2016). It was also found that 38.64% of the managerial staff allowed only a little emotional expression on the part of the nursing staff, 36.36% at all, that is, it did not favor emotional expression, 11.36% only moderately, and 6.81% allowed quite and a lot emotional expression respectively. 70.45% of the nursing staff reports some degree of verbal aggression and only 29.55% did not report any type of aggression.

According to the analysis carried out, it was found that the nursing staff reports that their co-workers are the main agents of Mobbing with 50%, 25% is caused by the relatives of the patients, 18.2% by the medical personnel. of the hospital and 6.8% is performed by the patients. Mobbing in the Nursing profession is often described in terms of "horizontal violence". Horizontal violence is defined by the International Council of Nurses as "behavior that humiliates, degrades or indicates in some other way, a lack of respect for the dignity and worth of a person". This concept has been used to explain harassment among peers who are at the same level within the hierarchy of the organization and that, as a result, there is low personal self-esteem and a pathological group identity due to the behavior of direct abuse towards the other person. Working conditions in which there is violence between peers have a negative impact on nurses' commitment to the organization (CODEN, 2014).

Conclusion

- Mobbing is a multifactorial problem that affects the psychological stability of workers and minimizes their social and interpersonal repercussions.
- The nurses, we have the mission of taking care of and looking after the health of the "others" from a humanistic perspective, however we continue to be a profession that we constantly perform Mobbing within our guild.

REFERENCES

- Colegio oficial de enfermería de Madrid, 2014, Recuperado de <https://www.codem.es/actualidad/mobbing-entre-personal-de-enfermeria-un-problema-que-tiene-solucion>
- Errando Sunyer Martha. 2012. Mobbing la voz de las enfermeras que han vivido esta experiencia. Escuela Superior de Enfermería del Recuperado de https://repositori.upf.edu/bitstream/handle/10230/20951/Errando_2013.pdf
- Gonzalez de Rivera, JL y Rodríguez-Abuin, MJ. 2005. Cuestionario de estrategias de acoso en el trabajo. El LIPT-60. Editorial EOS, Madrid, Recuperado de <http://www.gonzalezderivera.com/art/pdf/manual-lipt60.pdf>
- Marzoan, J. 2002. Acoso moral - ¿Nuevo azote de la actividad laboral para los sindicalistas? Recuperado, de <http://www.ilo.org/public/spanish/bureau/inf/magazine/43/mobbing.htm>
- Mirelle Kingma: Consejo Internacional de Enfermeras (CIE). Petracci, M.; Kornblit, A.L.: El acoso sexual en el escenario laboral. Corregidor. Buenos Aires; 1997. Recuperado de <http://mediacionyviolencia.com.ar/mobbing-la-nueva-modalidad-de-acoso/>

- mobbing en México” (coordinadores Peña, F., Ravelo, P. y Sánchez S.). Universidad Autónoma Metropolitana Azcapotzalco, Servicio Europeo de Información sobre el Mobbing y Ediciones y Gráficos Eón.
- Molero, Jurado M.M. M.C. Pérez-Fuentes * y J.J. Gázquez Linares. 2016. Acoso laboral entre personal de enfermería. Revista enfermería universitaria. Recuperado de https://ac.els-cdn.com/S1665706316000257/1-s2.0-S1665706316000257-main.pdf?_tid=9007cb98-1a0f-11e8-9cec-00000aacb35f&acdnt=1519551666_fe5087c4d233b145feae3bf30fae7031
- Peña, F., Ravelo, P. y. and Sánchez S. 2007. Introducción, pp. 9-20. En “Cuando el trabajo nos castiga: Debates sobre el
- Prieto-Orzanco A. 2005. SERIES Hostigamiento laboral (mobbing) y sus consecuencias para la salud. Revista Aten Primaria. 35(4):213-6. Recuperado de file:///C:/Users/hp/Downloads/13072593_S300_es.pdf
