Leaders were as likely to suffer negative effects as more frequent behaviour had similar levels of effect, indicating a widespread problem. Those who had contacted personnel, trade union representatives and occupational health (the contact group) clearly identified greater levels of negative effect.

Aggression was present in the two organisations, but at a much lower incidence than incivility and was always classed as bullying, as was behaviour reported by the contact group. Aggression correlated with much higher levels of negative effect.

In the random sample group the most common negative behaviours identified from a list of 27 were:

- Claiming credit for someone else’s work;
- Setting out to make a member of staff appear incompetent and/or make their lives miserable through persistent criticism;
- Deliberately withholding information/providing incorrect information;
- Isolating/deliberately ignoring/excluding someone from activities.

In contrast, the most common negative behaviour experienced/witnessed by contact group respondents (n=11) was: “Putting someone’s physical, emotional or psychological health at risk by making them upset, frightened and/or ridiculed.” Four of these 11 had changed jobs within their PCT and another two had left their trust. Five identified the presence of aggression.

The random sample comments identified that the experiences had deeply affected people. There were feelings of isolation, insecurity, fear, worthlessness and lack of value. People felt undermined, powerless and vulnerable:

- “Completely incapacitated/ineffective at both work and in my private life. Suicidal”;
- “Stupid, lonely and vulnerable”;
- “Powerless, small, embarrassed”;
- “Demoralised, low, unhappy to attend work”.

People experienced similar feelings on witnessing negative behaviour but, in contrast, many also felt angry and frustrated. They felt helpless and unable to help or unsure of what to do. Many expressed concern for those who were the target of negative behaviours.

The contact group’s comments indicated a much greater intensity of negative effect and emotional turmoil than the random sample group. They reported feelings of great anxiety, extreme anger, of being let down and frustration at their situation, using words such as “destroyed”, “paranoid”, “hopeless”, “worthless” and “hostile”.

Combining the figures, most respondents considered they had been negatively affected in some way (74%). The perpetrators were colleagues (54%), managers/team leaders (47%) and people on lower levels in the hierarchy (9%); 10% of respondents received negative behaviour from two sources.

There was a negative impact on job satisfaction, motivation, commitment and cooperation. Those affected also avoided communication and direct contact with perpetrators. Some admitted to retaliating (21%) and some moved jobs within their organisation (14%). As Fig 1 shows, a significant percentage experienced increased stress levels (58%).

Most of the behaviour in the random sample group was defined as incivility (67%). Of this group, 52% described the behaviour as incivility and bullying; 37% as incivility and not bullying; 9% as incivility, aggression and bullying; and 2% as incivility with no response regarding the perception of bullying.

An extremely important finding was that incivility that was not perceived as bullying had very similar levels and patterns of effect as incivility also classed as bullying (Fig 2). The majority of the negative behaviour was at “now and then” frequency (51%).

Another key finding was that this low frequency behaviour had similar levels of negative effect as more frequent behaviour. Isolated incidents appeared not to affect people, although there were exceptions. One person in the contact group experienced only one negative event, but this resulted in them having three months away from work and changing their job.

Witnesses also experienced negative effects, although to a lesser extent. Managers/team leaders were as likely to suffer negative behaviour (70%) as non-managerial staff and at similar levels of effect, indicating a widespread problem. Those who had contacted personnel, trade union representatives and occupational health (the contact group) clearly identified greater levels of negative effect.

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