Emotional problems experienced by mobbing victims and a research model proposal in terms of cognitive behavioral model

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Abstract

This study aims to review the literature about the emotional problems experienced by mobbing victims in the workplace and present a research model. Defined as a severe source of social stress in the workplace, mobbing systematically involves protracted and escalating conflicts with frequent abusive acts against the target person. Mobbing significantly impacts a victim’s emotional health, which can cause various psychiatric, psychosomatic, and psychosocial issues. Studies have shown that mobbing victims often suffer from anxiety, depression, irritability, psychosomatic symptoms, and sleep disturbances. In addition, they may experience low self-esteem, a lack of social skills, and a sense of submission. The consequences of mobbing go beyond the individual and affect their families and relatives. In this research, a literature review is conducted about the causes, manifestations, and consequences of mobbing. A research model is designed to emphasize the importance of cognitive behavioral techniques in combating emotional problems caused by exposure to mobbing behaviors in the workplace.

Keywords: Mobbing, employee problems, emotional problems, emotional disorders
Introduction

Mobbing is psychological violence that creates a negative atmosphere within the organization, affects the psychological health of employees, and includes unpleasant behaviors. It is systematically applied by someone or some people to remove a person or persons from the workplace. The mobbing phenomenon, which can potentially cause irreparable consequences for the individual, the organization, and society, has become increasingly important daily. The increase in its importance in practice has led researchers to investigate the mobbing phenomenon more. In the literature on mobbing, quantitative and qualitative studies have been conducted and continue to be conducted. Although many researchers have addressed the concept of mobbing, it remains unknown in some aspects. We encounter new information about the antecedents and consequences of mobbing every day. In this respect, continuing research on the subject is very important [1].

In order to draw attention to the concept of mobbing, European Union countries frequently express the issue’s importance in the media. In France, psychological harassment in the workplace is recognized as a crime and is punishable by one year’s imprisonment [1,2]. From the perspective of clinical psychology, the self-perceptions of individuals who are victims of psychological violence, or, in other words, their sense of self, can be damaged [3]. The wound to their self-perception will bring about negative emotions [4]. Considering the Cognitive Behavioral Model, the main action will be to bring the thoughts of the individuals whose thoughts about themselves are harmful due to mobbing to a more realistic level and replace distorted thoughts with realistic ones. In this study, the concept of mobbing will be examined in detail, examples from the literature will be given of the emotional problems experienced by mobbing victims, and then a research model will be proposed. As a result of the literature review on the consequences of mobbing, it can be stated that no study deals with mobbing in terms of Cognitive Behavioral Techniques for combating it. In this study, the research results on the emotional problems experienced by the employees exposed to mobbing will be given, and a research model proposal will be presented in terms of coping with mobbing in the Cognitive Behavioral Model.

Theoretical Framework

Mobbing

Ethologist Konrad Lorenz first used the word mobbing to describe aggressive animal gang behavior [5]. In the 1970s, physician Peter Heinemann used the term in his study analyzing the hostile behavior of a group of children toward a single child. In the 1990s, Leymann borrowed the term to describe similar workplace behaviors and started researching the phenomenon [3]. In organizations, mobbing can be defined as a form of psychological harassment with severe consequences for the target person. Leymann defined mobbing as a type of conflict in which victims are subjected to stigmatization and their civil rights are violated [3]. Leymann says this should be done at least once a week and for at least six months. This traumatizing experience can lead to an individual’s complete withdrawal from the labor market, as victims may eventually become unable to cope with work.

The phenomenon of mobbing is seen in several manifestations within the workplace, including but not limited to psychological fear, emotional lynching, harassment, bullying, and intimidation [6]. According to Zacharová and Bartosovic, individuals who experience mobbing often exhibit indications of submissiveness, anxiety, neuroticism, deficient social aptitude, and diminished self-esteem [7]. According to Minibas-Poussard and Idig-Camuroglu individuals may also have sleep disturbances, difficulties with focus, and preoccupations [8]. The adverse effects on the mental and physical well-being experienced by individuals subjected to mobbing may substantially impact their overall health and general quality of life [9].

The notion of mobbing was first introduced into the literature by Heinz Leymann, as noted by Zapf [10]. Leymann is the pioneering researcher who developed the first inventory of the mobbing phenomenon. The Leymann Inventory of Psychological Terrorization, created by Leymann in 1989, evaluates whether certain
behaviors and attitudes are mobbing and the severity of mobbing. Leymann made notable contributions to the scholarly discourse on mobbing and presented a detailed elucidation of the mobbing phenomena [3].

Mobbing refers to unethical conduct whereby individuals are subjected to systematic exposure inside the workplace. The employee has a sense of powerlessness and subsequently adopts a state of helplessness due to mobbing activities. The persistence of these organized acts of harassment may manifest specific psychosomatic ailments inside the affected person [3]. The causes of mobbing can be attributed to various factors, including organizational, workgroup-related, and personal factors. Organizational factors such as power dynamics and ineffective management can contribute to mobbing. Work group-related factors, such as conflicts and competition among colleagues, can also play a role. In addition, personal factors, including personality traits and individual vulnerabilities, can make individuals more susceptible to mobbing [10].

The consequences of mobbing on the psychophysical health of victims have been extensively studied. Employees who are subjected to mobbing often experience decreased emotional stability, increased belief in fairness, low self-esteem, and cynicism [11]. They may also experience anxiety disorders, depression, and concentration problems [8]. The negative consequences of mobbing not only affect the victims but also have negative consequences for their families and relatives [8].

One of the essential points to emphasize about mobbing is which types of behaviors can be considered mobbing. The types of behaviors that can be considered mobbing are listed below [1]: Physical attack, bullying, exclusion, threat, torment, rude behavior, swearing, shouting, scolding, biting, kicking, intimidation, beating, murder, clawing, religious and racial harassment, punching, and unacceptable indirect insinuations name-calling, rape and deliberate silence injury; making work done by shouting and yelling; not authorized by not trusting; behaving in a degrading manner.

When examined in terms of CBT, the individuals are cognitively caused to have negative thoughts about themselves and the situation, and a negative emotional state follows. This emotional state also affects behavior. The next section will discuss the antecedents and consequences of mobbing behaviors. Then, a research model will be proposed by making suggestions to solve the emotional problems of individuals exposed to mobbing in CBT.

While mobbing remains popular as a concept in occupational psychology, there is some confusion regarding its definitions. It is not possible to define every behavior in the workplace as mobbing. Leymann pointed out that in order for a behavior to be considered mobbing, it must meet all of the following criteria [3]:

- It must be applied systematically (for at least six months and at least once a week).
- It must be purposeful (usually to cause the person to leave the job).
- It must cause psychological damage.

Namie says all bullies (mobbing perpetrators) exhibit narcissistic characteristics [12]. Einarsen et al. found that bullies define themselves as aggressive and have high social anxiety [13]. The self-confidence of the victim of mobbing is an essential factor in the mobbing process. The more aggressively aware the individual is of the victim’s lack of self-confidence, the more disturbing it will be. In the mobbing process, no personality structure is a candidate for mobbing, but the profiles as lonely, strange, successful, and newcomer person have the potential to become mobbing victims [1,14]. Mobbing increases stress and psychological and physical complaints in individuals. In this context, individuals who face this situation may experience symptoms such as headache, tachycardia, stomach problems, high blood pressure, sleep problems, physical complaints, impaired concentration, worry, difficulty in starting an activity (inertia), social isolation, etc. [15].

**Emotional Problems and Mood Disorders Experienced by Mobbing Victims**

**Emotional Problems and Mood Disorders**

Mood refers to the average state of our emotions
over a certain period. A person may feel good from time to time, or he or she may feel bad from time to time and be depressed. These fluctuations that occur from time to time in a person's life are normal, but what makes the situation pathological is that these fluctuations can cause severe damage to the person's vital functions. There are two main types of mood disorders [16]: Depressive disorders and bipolar disorders.

Within the title of depressive disorders in DSM-V, six dimensions can be listed as disruptive mood disorders, dysthymia, premenstrual dysphoric disorder, depressive disorder caused by substance medication use, depressive disorder due to another medical condition, and depressive disorders not otherwise recognized or described [16,17]: The disorders included in the title depressive disorders in DSM-V [16] are as follows [17]: Bipolar I disorder, bipolar II disorder, cyclothymia disorder, disorders caused by the substance or medicine, bipolar disorders due to another medical cause, unspecified medical disorders not due to any other cause. The main characteristic feature of depressive disorders is that they negatively affect the functionality of the person's life and make the person feel extremely sad and restless. Somatic and cognitive changes accompany this mood. Types of depressive disorders differ due to their cause, duration, and time of occurrence [18].

**Emotional Problems Experienced by Mobbing Victims**

As a severe form of workplace harassment, mobbing has significant effects on the emotional well-being of its victims. This literature review aims to explore the emotional problems experienced by mobbing victims by utilizing relevant research studies and literature. Studies have shown that mobbing victims often suffer from various emotional problems, such as anxiety, depression, irritability, and psychosomatic symptoms [19,20]. Mobbing victims may show signs of submission, anxiety, neuroticism, a lack of social skills, and low self-esteem [19]. They may also experience sleep disorders, concentration problems, and obsessions [8]. Emotional and physical health problems faced by mobbing victims can significantly affect their general health status and quality of life [9].

First, interpersonal relationships and emotional well-being are linked according to well-established psychological theories [21]. Difficulties in close relationships can contribute to emotional adjustment problems, and emotional problems can negatively affect close relationships. This suggests that individuals who experience mobbing behaviors, which include harmful behaviors from others in the workplace, may also experience emotional problems. Second, emotional intelligence plays a role in understanding and managing emotions [22]. Emotional intelligence refers to the ability to recognize, understand, and regulate one's own emotions and the emotions of others. Research has shown that individuals with higher emotional intelligence can better cope with stress and have better mental health outcomes [23]. Therefore, individuals with high emotional intelligence may be more resistant to mobbing behaviors, and as a result, they may be less likely to experience emotional problems.

In addition, childhood trauma experiences were found to affect the perception of intimidation [24] significantly. Childhood traumas such as abuse and neglect may affect individuals' mental health and well-being. The victim acceleration theory suggests that individuals who have experienced childhood trauma may be more likely to perceive and interpret workplace behaviors as mobbing. This perception of mobbing may contribute to emotional problems. Moreover, mobbing behaviors have been associated with emotional and physical health problems [20]. Mobbing victims may experience high stress, sleep disorders, anxiety, and other emotional problems. This suggests that mobbing behaviors may directly contribute to emotional problems.

The consequences of mobbing go beyond the individual and affect their families and relatives. Mobbing victims may experience a decrease in emotional stability, self-esteem, and belief in justice, as well as an increase in cynicism [9]. Studies have also reported that mobbing victims show symptoms of anxiety disorders, depression, and concentration problems [8].
Sleep problems, the use of sleeping pills or tranquilizers, and even suicidal ideation have been detected in mobbing victims [8]. The causes of mobbing can be attributed to various factors, including organizational, workgroup-related, and personal factors. Organizational factors such as power dynamics and ineffective management can contribute to the emergence of intimidation. Workgroup-related factors such as conflicts and competition among colleagues may also play a role [19]. In addition, personal factors, including personality traits and individual vulnerabilities, may make individuals more susceptible to mobbing.

It is important to note that mobbing does not only affect certain professions but can occur in various sectors, including healthcare [19,20,25]. For instance, nurses are particularly vulnerable to mobbing and may experience higher anxiety levels, depression, and physical symptoms [20,25]. Workplace intimidation may also affect patient safety and health [25]. Mobbing has been associated with many emotional problems among victims as a form of workplace bullying. Mobbing can create an environment of fear and anxiety, leading to prolonged periods of stress [13]. Mobbing victims often experience feelings of anxiety and depression [19]. These emotional problems may continue even after the end of mobbing [26]. Furthermore, research by Leymann [3] revealed that sustained mobbing often leads to posttraumatic stress disorder (PTSD), underscoring the extreme emotional distress caused by such bullying. A study by Vartia found that even witnessing mobbing can significantly negatively affect employees’ emotional health, intensifying feelings of helplessness, guilt, and fear [27]. Being exposed to mobbing leads to emotional, physical, and psychological consequences. Studies show a relationship between mobbing experiences and stress-related cardiovascular diseases [28]. The impact of mobbing often transcends the victim’s personal life and disrupts social and family relationships [29]. Over time, these emotional pressures can lead to disruptions in social functioning and withdrawal from family activities.

Furthermore, research by Zapf et al. highlights the critical need for preventive strategies and interventions in work environments, pointing out that in severe cases, mobbing can lead to suicidal thoughts and attempts [10]. Emotional problems resulting from mobbing can lead to lower productivity and job satisfaction, increased sick leave, and higher turnover rates, implying significant costs for organizations beyond the personal consequences borne by the individuals subjected to mobbing [13].

From a cognitive perspective, mobbing victims often suffer from impaired concentration and decision-making abilities [30]. These cognitive effects can further affect victims’ job performance and career development. In more severe cases, mobbing victims may even show symptoms of PTSD, where their traumatic experiences interrupt their daily lives [26]. Although the emotional problems experienced by victims of mobbing are severe, it is possible to say that interventions such as psychological counseling, workplace policies, and conflict resolution training can help alleviate the effects and facilitate recovery [31].

In physics, stress defines the pressure on an object and the reaction of the object against this pressure. From this point of view, stress expresses both an effect, an antecedent, and a consequence. Based on this logic, it would not be wrong to say that stress describes a process. Selye also participated in this discussion as a party and emphasized that stress is a reaction and interpreted it as our body’s reaction against the distressing change called a stressor [32,33]. Selye handles the process he expressed about stress under the “General Adaptation Syndrome” title. In Selye’s theory, the stressor is a distressing factor that increases the person’s stress level [34]. In Selye’s General Adaptation Syndrome, when an individual encounters a stressor, he or she goes through three stages [33]:

- Alarm Phase
- Resistance Phase
- Exhaustion Phase

The alarm phase refers to the situation in which the individual first encounters the stressor. It
would be appropriate to explain this with an example. Imagine that you are alone in a forest. No one is near you, and you are confronted with a tiger. What would be your first reaction? This first encounter defines the alarm phase. The role of the individual’s nervous system in the alarm phase is undeniably essential. At this point, the nervous system and its role in stress management will be briefly mentioned. In the literature, it is accepted that there are two types of nervous systems. The peripheral nervous system carries the stimuli it receives directly to the center and sends the information from the center to the muscles, glands, and other related places. Actions that are under the control of the brain and that we perform voluntarily are organized by the somatic nervous system. The autonomic nervous system organizes the functioning of the internal organs by working against our will [33]: In the alarm phase, homeostasis is disrupted because the person encounters a stressor, and some psychosomatic and behavioral symptoms are observed in this phase. These symptoms are as follows [35,36]: eating much food, eating less food, headache, tremors [in hands and legs], inability to sleep or sleeping too much, lack of motivation, low back and back pain, stomach pain, disturbances in the intestines, nausea and vomiting, attention deficit.

In the alarm phase, the person is out of their comfort zone; in other words, homeostasis is disturbed. Therefore, the individuals will try to regain this homeostasis, that is, the state of balance. For this reason, they will try to fight or escape from the stressor. The step at which this fight-or-flight decision is made defines the resistance phase. There are two basic options for the individual in the resistance phase. Either the individuals will fight with the stressor and remove it from their lives, or they will escape. If we return to our example, the person faced with a tiger will either fight this tiger or try to escape if he thinks he cannot fight. Whether the person fights or runs away, this endeavor must eventually end so that they can return to their former state, that is, homeostasis. When the individuals can effectively fight or escape from the stressor, they can return to the desired level of homeostasis. However, they become exhausted if they cannot eliminate or escape the stressor. In cases where the stress factor continuously affects the individual, the individual enters a state of exhaustion, and stress becomes chronic. Johnstone [33] calls this situation chronic stress. At this point, the individuals lose confidence to cope with stress effectively and enter the exhaustion phase. When stress is mentioned, negative meanings usually come to mind. However, stress is also a function of motivation. Selye categorizes stress into two types: eustress (good stress) and distress (bad stress), and he noted that the amount of stress a person experiences can significantly improve their performance and harm it. It would not be wrong to say that motivation is zero at the point where the stress level is zero. This point shows that the person does not attach importance to whatever issue. However, when the stress level starts to rise above the optimum level, the individuals will start having difficulty managing their stress, and the intense anxiety in this situation will negatively affect their performance. For example, the point where the stress of a young person who will take the university exam is zero means that people have no expectations and do not attach importance to what they will achieve as a result of the exam. At this point, the person does not show symptoms of stress, but there is no positive performance.

When the stress level increases, some psychosomatic and psychological symptoms are observed. These symptoms can be analyzed in four sub-dimensions [37]:

- Physical Symptoms
- Emotional Symptoms;
- Social Symptoms
- Mental Symptoms

Although many life events that increase the stress experienced by the individual can be mentioned, it should be noted that the process is highly subjective. The life events that will act as stressors for each individual are different. However, research has generally revealed that some life events cause more stress than others, and in this framework, comparisons have been made between some stressors. From this
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perspective, Holmes and Rahe developed the scale of stressful life events [38].

The effect of mobbing on our lives, where the main goal is to make the person leave the job, is better understood when the research is analyzed. The main issue is how the mobbing victims should manage their stress effectively and which strategies should reduce their emotional state. In the following section, some suggestions will be made regarding CBT by mentioning what should be done to reduce the emotional state experienced as a result of mobbing and to combat mobbing.

Coping with Destructive Emotions as a Result of Mobbing: Application of Cognitive Behavioral Techniques

As mentioned in the previous sections, mobbing has some very destructive consequences. If it is necessary to evaluate on behalf of organizations, it may be prudent to provide some information in order to take measures to prevent such processes from starting. Several organizational factors, such as organizational policies, the regulation of authorities, and transparent practices, define the institutions’ duties. This study discusses how individuals exposed to mobbing can cope with the problem individually and which CBT can be helpful.

CBT is a widely used therapeutic approach focusing on the relationship between thoughts, feelings, and behavior. It is based on the perspective that our thoughts and beliefs influence our emotions and actions, and by identifying and challenging negative or unhelpful thoughts, individuals can change their behavior and improve their mental health. Therapists apply concrete and abstract CBT techniques in their practice. Concrete techniques involve using specific CBT strategies to change patients’ beliefs, while abstract techniques involve discussing the cognitive theory of depression and exploring underlying schemas. In treating anxiety in primary care, CBT techniques such as behavioral techniques based on awareness and acceptance, relaxation training, exposure, cognitive restructuring, and behavioral activation are reported to be effective [39].

The techniques included in CBT techniques are as follows [40]: Socratic questioning, behavioral experiences, intellectual-emotional role play, basic faith worksheet, imaging, identification of advantages and disadvantages of beliefs, relaxation and mindfulness, exposure, role-playing, share technique. The primary purpose of the above techniques is to provide support by changing the individual’s automatic thoughts and basic and intermediate beliefs with more realistic ones within the scope of psychotherapy and by creating behavioral change. It aims to transform dysfunctional thoughts into realistic thoughts and beliefs by supporting them with behavioral activations. CBT interventions have been reported to reduce sleep disturbances in adults with depression and anxiety effectively. Most CBT interventions target sleep specifically for this sample and effectively improve sleep within the group [41]. Emotional problems can have significant effects on individuals’ mental health and well-being. Research shows that addressing individuals’ emotional and behavioral problems is crucial for long-term results [42]. Emotional problems can manifest as behavioral disorders accompanied by anxiety and hostile attitudes. CBT techniques, such as social and emotional learning, can effectively treat behavioral problems and anxiety [43]. Bowins emphasizes the role of cognitive-behavioral techniques in addressing dysfunctional thoughts and behaviors associated with anxiety disorders and depression [44]. Wicksell et al. investigate the change process in acceptance and commitment therapy, a form of cognitive-behavioral therapy for patients with chronic pain [45]. Egan et al. focus specifically on the effectiveness of cognitive-behavioral therapy in treating depression and anxiety in Parkinson’s disease [46].

Methodology

A literature review was conducted, and research on mobbing and the emotional problems experienced by employees exposed to mobbing were examined. In this context, a research model on the subject is designed.
Proposed Research Model

In the literature, the following research model is recommended to examine the emotional problems experienced by employees exposed to mobbing:

Independent Variable

Exposed Mobbing Behaviors: This variable refers to the emergence and intensity of mobbing behaviors that individuals face in the workplace. It includes various forms, such as psychological harassment, abuse, and social exclusion [19].

Moderator Variable

Cognitive Behavioural Techniques include determining automatic thoughts, intermediate and fundamental beliefs, and CBT techniques to replace these beliefs and thoughts with realistic ones.

Dependent Variable

Depression, Anxiety, and Stress: This variable includes the emotional difficulties, anxiety, depression, irritability, psychosomatic symptoms, and sleep disturbances experienced by individuals exposed to mobbing. It includes symptoms of both psychological and physical pain. Changes in individuals’ social and working lives, which have an essential place in this, affect mental health. The most common effects are depressive and anxious moods and stress experiences [47]. Depression symptoms are characterized by feelings such as sadness, loneliness, and hopelessness, while anxiety symptoms are associated with feelings such as worry and fear [48]. Stress can be considered a tension that pushes physical and psychological limits [48]. Studies indicate that depression, anxiety, and stress can affect each other or be seen together [49-51].

The following research model is recommended in the literature to examine the emotional problems experienced by employees exposed to mobbing.

In terms of the above model, an individual exposed to mobbing behaviors may experience stress, anxiety, and depression. However, the use of cognitive behavioral techniques will reduce the level of stress, anxiety, and depression. Many studies show the relationship between exposed mobbing behaviors and depression, anxiety, and stress. International empirical studies have revealed that bullied workers exhibit a wide range of symptoms and psychopathological illnesses, including anxiety and depression [52] and post-traumatic stress [53-54]. Within the framework of the research model proposed above, the following hypotheses were established:

H1: Being exposed to mobbing behaviors significantly affects stress, anxiety, and depression.

H2: Cognitive behavioral techniques significantly affect the relationship between being exposed to mobbing behaviors and stress, anxiety, and depression.

Mobbing is a phenomenon that many employees, especially young and talented employees, have a considerably high potential to be exposed to. As it is understood from the literature, the primary

Figure 1. Proposed research model.
The purpose of mobbing is to break the victims’ self-confidence and make them move away from the workplace. People who apply mobbing can use such behaviors for many purposes. Some of the antecedents may be having a narcissistic personality and therefore removing all employees who may be competitors in the future or having an antisocial personality and not seeing any harm in exhibiting mobbing behaviors. Some behaviors exhibited by mobbing types in the literature may be compatible with these structures. When the individuals subjected to mobbing have the belief of insecurity and inadequacy desired by the other party, they experience negative situations experienced after mobbing more in the process, which can put the person in a vicious circle. Intervening with cognitive-behavioral techniques to address the inadequacy and worthlessness beliefs that the victim will experience will positively affect the mental health of the employees and the institutions. In this context, employing individuals specializing in clinical psychology in workplaces will be essential to preventing mobbing-like incidents.

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