

Mobbing in Turkish health institutions

Ozgur Kokalan · Elvin Yelgecen Tigrel

Published online: 30 October 2013
© Springer Science+Business Media Dordrecht 2013

Abstract People at workplace always face with stress and feel it in their lives. There are many factors that create stress and mobbing is one of them. Mobbing is a psychological terror, conducted systematically toward an individual by others at the same workplace. Mobbing started to become a famous subject last years in U.S and Europe. In Turkey, it is a new concept not because it does not occur, because of human nature that does not allow confessing it. Mobbing is being ignored by people, organizations and also government in our country. Because mobbing methods change according to sectors and occupations, it is important to analyze each sector to understand the methods used in mobbing and the reactions of victims to these actions. The focus of this study will be workplace mobbing in Turkish health institutions. The main population of this study consists of employees of state and private hospitals in Turkey. In this paper, both qualitative and quantitative methods will be used to describe the mobbing at Turkish health institutions.

Keywords Mobbing · Turkish health institutions · Workplace problems · Job satisfaction

1 Introduction

Since people spend most of their time at workplaces, being happy and comfortable in workplace is essential. Social environment is important in workplace to be motivated to work. If supportive and comfortable conditions are missing, this creates an unfriendly workplace and makes people stressful. Especially, if this situation is created by other colleagues, it makes the situation even worse. That is the reason why workplace problems gained importance in

O. Kokalan (✉)

Department of Business Administration, The Faculty of Business and Management Sciences,
İstanbul Sabahattin Zaim University, Halkalı Yerleskesi, Kucukcekmece, 34303 Istanbul, Turkey
e-mail: ozgur.kokalan@iszu.edu.tr

E. Y. Tigrel

Department of Business Administration, The Faculty of Economics and Administrative Sciences,
İstanbul Bilgi University, Istanbul, Turkey, Turkey

recent years, in any kind of organization, industry and country. One of the most important and wide workplace problems is mobbing.

2 Definition of mobbing

Mobbing is defined as the practice of violence by a group or a single person. It can be also explained as a psychological terror, emotional attack or being against to something or someone (Yüçetürk 2002). It is conceptualized as an attempt to force a person out of workplace through unjustified accusations, humiliation, general harassment, emotional abuse and terror (Davenport et al. 2003). Mobbing can be any anywhere in social life; any type of organization because it is a human action (Tinaz 2006). In other words, anyone in workplace can be potential victim of mobbing activities and the probability of a person to be mobbed can be calculated by counting the ways in which that person creates comparison with his/her colleagues for any kind of issue like specific skills, abilities, physical appearance, connections, performance scores, salary, social class, sex appeal, even age (Westhues 2006).

Conceptually, mobbing was used to define the bird's behaviors in nineteenth century firstly. Biologists found out that birds are flying around their enemy to protect their nest and named this behavior as mobbing (Tinaz 2006). Konrad Lorenz, an Australian scientist, generalized this term to explain the joint attacks of small group of animals toward their enemies or hunters to refuse them or to defend themselves (Davenport et al. 2003). It does not have to be a group activity but it starts as an individual activity and attracts others rapidly; then it becomes a group action (Ehrlich et al. 1988). Animals learn from and encourage each other to attack the enemy, in other words to mob the enemy.

Peter-Paul Heinemann was the first to use this term to explain human behavior. He observed harmful behaviors of a group of children toward an alone child (Leymann 1996). However the mobbing term was conceptualized as a human behavior by Heinz Leymann in 1980s. He defined mobbing as the pressure, violence and bullying behaviors in workplace and analyzed the organizations in Sweden firstly. He pointed out that people who were thought as "difficult to work with" by others were not like that at the beginning. In other words, he indicated that these people did not have inherited personality problems instead the structure of work and culture of the organization made these people difficult to work with. Once they were thought as difficult, others were trying to find other reasons to make them fired (Davenport et al. 2003). This was the thing that Leymann defined as mobbing which includes an emotional harassment and a psychological terror, systematically practiced by an individual or a group of people toward another person with unethical and unfriendly methods. Usually, mobbing begins with one person, who thinks that he/she is threatened by a colleague and after a while, others attend this action which aims to drive the victim out of organization, like birds' mobbing activities (Halbur 2005). Leymann also claimed that mobbing, like a disease, spreads by infecting other people in workplace and he pointed out that mobbing is conducted as a desperate campaign to cover up the mobber's weaknesses and deficiencies (Leymann 1993). However, it is not easy to clarify the effects of these actions on individuals because there is not a clear and exact definition or border of mobbing at workplace. People usually cannot be sure about an action whether it is a kind of mobbing action or not. Every one defined mobbing in a different manner and named new behaviors as mobbing actions for example Leymann included sexual allusion and harassments into mobbing behaviors.

It is very normal in every workplace that people can be angry to their colleagues, they can discuss, say disrespectful words to each other, or they can manipulate the situation by criticizing their colleagues in front of the manager to influence him. It would not be true to classify such current or temporary behaviors or attitudes as mobbing because these things

come from human nature. To pronounce such behaviors as mobbing, they should be in a systematically and continuously practiced manner toward a person not an occasion (Neidl 1996). Therefore, it is very important to state the characteristics of mobbing as Leymann identified: mobbing should be practiced consciously, systematically, repeated at least once in a week, and should be continuous, at least six months. It is a kind of process that has various dimensions and includes different psychological factors (Tutar 2004). The frequently and continuously practiced mobbing behaviors harm the victim psychologically, psychosomatic, physiologically and socially. Because mobbing behaviors, which aim to keep away people from workplace, involve unfair accusations, emotional harassment, disgracing and psycho-terror (Tutar 2004). These unethical and unfriendly behaviors at workplace make the individual insecure and weak (Laçiner 2006). However, according to Bultena and Whatcott (2008), it would be a mistake to think that mobbing victims are weak, shy or passive instead they are generally good performers, intelligent, competent and creative people who can be dangerous for less successful colleagues. The researches showed that mobbing victims are generally the ones who promote human rights, whistleblowers, married women, high achievers, the minority whose religion and cultural features are different than the majority and people who do not penetrate into “group” (Gates 2004a).

3 Hierarchical position of mobbers

Mobbing is a multi-dimensional, multi-disciplined and a complex subject which can be implemented by the peers or less powerful individuals as well, the mobber/s can choose victim from peers, subordinates or supervisors (Tmaz 2006). Mobbing which is exposed by managers on junior individuals is called as downward; by peers on the colleagues at the same level in the authority is called as horizontal and by subordinates on managers or leaders is called as upward. The last type of mobbing has different methods than others like slowing the jobs, consciously made errors, sabotaged projects, etc. It is important to cite Foucault (1976) at this point who said that power never belongs to a certain class in the organization. So no matter the position or title of the individual, people can be mobbing victims by anyone at the workplace (Leymann and Gustafsson 1996). The occurrence of downward mobbing at workplace is the result of a failure of authority or failure of legitimate power. In other words, it is hierarchical abuse of power to prevent subordinates' performance and to damage the self-respect of the subordinates (Vandekerckhove and Commers 2003).

4 Reasons driver to mobbing at workplace

Leymann identified five reasons that drive mobbing either by just one of these reasons or more than one reasons with more impact. These reasons are; psychological situation of mobbers, the structure and culture of organizations, the conditions, psychological situation and personality of the victims, social values and norms and finally any conflict or disagreement as a motive of mobbing (Davenport et al. 1999). On the other hand, researches showed that there are various reasons such as incorrect personnel selection and hiring process, hiring seasonal employees, competition within the employees to reach limited positions in organization, lack of organizational discipline, high level of hierarchical organization structure, lack of communication within the organization, lack of or ineffective conflict resolution strategies in organization, untalented management, lack of or low level of team work, limited human resources budgeting, sudden and radical changes in organization, lack of established ethical values and emotional intelligence, stressful and monotone working environment can be the

alternative reasons of mobbing activities at workplace. Some of these reasons can be created within the organization consciously by management as a strategy to decrease the number of employees to overcome financial problems, for downsizing, to replace old personnel with younger and more educated ones or just for getting rid of an unwanted employee (Neidl 1996).

5 Mobbing as a process

Mobbing can be called as a process due to its characteristics as a disease or virus which infects others silently and insidiously and grows like a snowball over the victim in a period of time. Leymann (1996) divided this process into five phases in order to analyze more detailed because as told earlier the mobbing is very complicated and difficult phenomenon to understand both by the victim and others in the organization.

First phase this phase is not yet mobbing but can trigger it (Leymann 1996). It is characterized by any kind of conflict or critical issue. If the organization has effective conflict resolution strategies then this conflict is resolved by negotiating the colleagues to meet in a common point. However, if the organization is not effective with conflict resolution then this “consciously created” conflict, such as accusation of the victim for not doing duties or being careless and disturbing, lingers and compounds and becomes a critical issue (Davenport et al. 1999). In a short time, other colleagues start to confirm this critical issue as their steady thought about the victim and they think that something should be done to prevent this situation (Gates 2004b).

Second phase in this phase, mobbing dynamics vary such as leaving the victim outside of the group, delaying or canceling certain duties of victim and assigning meaningless tasks, providing insufficient or confusing information to the victim (Davenport et al. 1999). Aggressive manipulations, assailant actions and psychological offences with increasing isolation are observed in this phase and if it is thought that the victim is subjected to these actions everyday for a period of time, it is not difficult to guess the negative effects on the victim (Gates 2004a).

Third phase management, although does not get directly involved in the second phase, goes into this phase without having full information about the situation. Due to the fact that a period of time passed until this phase and many people agreed with blaming the victim, the management will misjudge the situation and most probably will make a wrong decision. After management involved in it, the critical issue transforms into a critical problem and they need to get rid of the problem or the victim (Leymann 1996). Especially, if the management is more dependent on the duties of mobbers than the victim’s role in organization, information about the conflict can be biased in favor of the mobbers (Zapf et al. 2003).

Fourth phase in this phase, the victim is blamed for incorrect personality, difficult to work with and even mentally unstable to mislead management. The process gain more speed in this step and generally concludes with firing or obligatory reassignment (Leymann 1996).

Fifth phase the process of mobbing ends with the departure of victim because although the victims prove their truths to everyone in the organization, they do not want to stay in such a negative and harmful working environment. Unfortunately, on the other side of psychological and physiological damages, the victim lives other problems after leaving or being fired from the organization. The mobbers continue to harass the victims by disturbing their reputation and image in the labor market to justify or legitimate the rightness of their own decisions (Davenport et al. 1999).

6 The indicators of mobbing

As it is mentioned above, the mobbing is not easy to understand since it is a cumulative group activity. Also the victim is not able to understand the situation very well because he/she is under the stress and in a traumatic occasion (Davenport et al. 1999). That is why many researchers tried to point out the indicators of mobbing at workplace to clarify the situation. For instance Leymann (1996) also identified 45 indicators or the behaviors of mobbing but these behaviors and activities can be gathered into five categories according to type of behavior and their effects on victim (Davenport et al. 2003). There is no strict rule about that each stage will happen in the same order with the same behaviors, each mobbing case can have different process and features (Table 1).

These are classified as mobbing if they are conducted systematically for a period of time. However many of these behaviors are difficult to prove, so it is not possible to say that victims can protect themselves from such behaviors completely (Davenport et al. 1999).

7 The negative effects of mobbing on the victims and organization

Researches showed that people who were subjected to mobbing had psychological problems like depression, nervous problems, psychomatic disabilities and physiological problems like dermatologic damages, cardiovascular diseases and they tend to more depressive than others who were not subjected to mobbing (Garvois 2006). Mobbing behaviors lead to post-traumatic stress disorder which damages the social networks and marriages of the victim (Hartig and Frosch 2006). In other words, continuous harassments damage the victim's normal reasoning and the communication abilities. They feel insecure and doubt their own sanity and they start to behave irrationally and erratically. The study proved that 43.9 % of mobbing victims became ill, 30.8 % changed their position in the same organization, 22.5 % left the job and 14.8 % of them were dismissed as a result of the mobbing behaviors (Gates 2004b). Leymann (1996) claimed that the reason of 12 % of the suicides in Sweden was being subjected to mobbing and 25 % of the early retirement can be sourced from the mobbing. Another study showed that 10 % of suicides were derived by workplace mobbing (Gates 2004a). Mobbing destroys not only the victim but also the organization; however the effects for the each side differ. Mobbing can be applied by the organization consciously because of many reasons such as to eliminate someone for downsizing or to get rid of anyone in the organization. However, either consciously or not, mobbing influences the organizations, the society and even the national economy. The damages for the organizations are economic in usual such as absenteeism, high turnover, increasing number of sick leaves, the loss of skilled workers, the cost of new workers' training, decline in productivity, quality and motivation, compensation payments and the early retirement payment. Rather than the economic damages, mobbing destroys the social environment within the organization.

8 Mobbing in different occupations

Some of the occasions or jobs have higher risk of exposure to mobbing at workplace. Mobbing can be toward one or more people in any hierarchical level of the organization but it is more predominant in bureaucratic organization such as public service offices, health, education authorities (Hartig and Frosch 2006). Zapf et al. (2003) claimed that people who work in government offices, health services, schools and general office works are more potential mobbing victims than the people who work in low complex and less task control works such as industrial workers.

Table 1 Five categories of mobbing behavior

First group—the victim's self-expression and the way of communication
The chances of the victim's self-expression is limited by subordinates, supervisors or peers
The victim is not allowed to talk
The work or performance of victim is criticized
The private life of victim is criticized unjustifiably
The victim is disturbed by telephone
The victim is threatened orally and written
The victim is yelled directly
The relationship with victim is rejected by mimics, sighs or intimation
Second group—the attacks to the victim's social relations
Mobbers do not talk with the victim
Others are prevented to talk with the victim
A separate working place is given to the victim
The victim is ignored
Third group—the attacks to the victim's reputations
The gossip circulates the victim
The victim is thought as mentally unstable
The victim's religious and political thoughts, private life, nationality are mocked
The victim is obliged to do jobs that damage the self-confidence
The victim's decisions and performance are always judged
The victim is called with disrespectful nicknames
The victim is tried to convince for mental treatment
The gossip circulates the victim
The forth group—the attacks on the victim's professional and life quality
There is no special duties for the victim
The victim's duties are delayed or cancelled
The victim is given unimportant and unnecessary duties that do not need specific skills
The duties and responsibilities of the victim are changed continuously
The office or home of the victim can be attacked or damaged
The fifth group—the attacks on the health and well-being of the victim
The victim is obliged to do difficult physical duties
The victim is threatened for physical violence
Petty harassments are subjected to the victim
The victim is subjected to the physical harm
The victim is subjected to the sexual harassments

A research was conducted in the Netherlands between 1995 and 1999 by [Hubert and Veldhoven \(2001\)](#) who found out the occurrence of undesirable behaviors and mobbing differs between the sectors. The quality and quantity of work output is less clear in education, government and public administration and health care sectors than the sectors that are less prone to unpleasant situations such as financial institutions, transport, trade and construction industry. As a result, the interpersonal relationships with colleagues and boss play important role in evaluation and judgment of one's job and working conditions. Moreover, according

to study of [Chappel and Martino \(2006\)](#), librarians, teachers, social service officials and healthcare workers are more being exposed to mobbing because these jobs are less stable and includes high pressure.

Another important claim about mobbing is that people whose jobs need co-operation with others are less likely to be isolated and mobbed. [Jackson \(1996\)](#) also pointed out that people work more efficiently, quickly and motivated in workgroups, so the innovation levels increase in the organization. But this does not mean that they will not be subjected to mobbing behaviors instead the mobbers should use other ways of mobbing such as verbal aggression. However, beside of these factors another important factor is the characteristics of the mobbers because no matter what type of an organization and the job, there are people who tend to mob in each organization ([Zapf et al. 2003](#)).

9 Mobbing in health institutions

There is limited number of studies on mobbing in health institutions. The study of [Jelic et al.](#) showed that mobbing behaviors reduce the performance level of health personnel and negatively affect their social relationships ([Jelic et al. 2005](#)). Another study, conducted with 535 health personnel, showed that there is a positive relationship between the psychological situations of personnel and their tendency to mob others ([Girardi et al. 2007](#)).

This situation is not different in Turkey as well. Many factors that lead mobbing behaviors in Turkish health institutions were defined by [Cobanoglu](#) as: limited human labor and resources, heavy and busy work environment due to excessive patient numbers, low wages, highly-bureaucratic structures and unfair promotions ([Cobanoglu 2005](#)). Moreover, another study which compares Kazakhstan and Turkey in terms of mobbing in health institutions concluded that health personnel in Kazakhstan are more prone to mobbing behavior than in Turkey.

10 Methodology

10.1 The purpose of the study

This study is framed by grounded theory which allows researcher to focus on research concerns and to construct hypothesis rather than hypothesis testing. It allows participants to talk about their experiences ([Auerbach and Silverstein 2003](#)). Therefore, the focus of this research is to choose employees of health institutions and understand if they are either victim or witness of mobbing behaviors, to what extent it exists, by whom and their reactions.

10.2 Sampling

The population of the study is physicians and nurses working at hospitals in Turkey. There are 69,855 nurses and 59,445 physicians in Turkey working in 1,191 hospitals (355 of them private hospitals) ([Ministry of Health 2010](#)). Since it is impossible to reach all of them, a representative sample (10% precision level and 95 % confidence level) was chosen based on convenience sampling and snowball sampling was used as well. The questionnaire was distributed to 350 personnel who work in four public and two private hospitals operating in Istanbul. However, only 126 of them were proper to analyze.

10.3 Data collection

This study consists of two parts; in the first part, an established and previously used questionnaire of [Pranjic et al. \(2006\)](#) was distributed to respondents. The first part of the questionnaire aimed to identify the degree of mobbing which was measured by a likert-scale (1 for strongly disagree and 5 for strongly agree) for the given statements about 32 symptoms of mobbing. The aim of second part was to find out the mobbers positions (subordinate, peer or supervisor) by asking the respondents by whom. The demographic questions were the subject of third part. In the second part of study, in-dept interviews were conducted to 23 respondents who declared in questionnaire that mobbing occurs and accepted to be interviewed.

After conducting interviews, the next step was defining codes within the data. Themes were identified and then similar codes were grouped under three general themes; mobbing behavior, mobbers and reactions.

10.4 Data analysis

The collected data from questionnaire were analyzed by using SPSS for factor analysis t-test and one way ANOVA. However the results of these analyses were not significant. This can be resulted from the small number of people who were subjected to mobbing. Only 38 of the 126 respondents stated to be victim of different levels of mobbing or witnessed at least. In other words, since the number of mobbing victims is small, the statistical analyses did not give any significant result. Another reason of this can be the abstention of respondents to answer the questions because 47 respondents answered most of the questions as “neutral”. This can be resulted from the suspicious about whether their answers are read by their supervisors and peers.

In the second part of the research, semi-structured interviews were conducted with 23 participants who stated that they had suffered from mobbing or witnessed. Interviewees are professors, assistant professors, physicians and nurses. Seventeen of them are working in public hospitals while six of them work in private hospitals. After transcribing the interviews, a qualitative software program, QDA Miner was employed to organize data and define codes for analysis. As it was explained before, codes were grouped under three general themes. The first theme, mobbing behaviors, include: limited self expression, criticism, no talk, private life abuse, disturbed by telephone, threatened, yelled, mimics, prevented talk, separate place, ignorance, gossip, mentally unstable, mocked, no self-confidence, unfair judgments, nicknames, mental treatment, no specialty, cancellations, unimportant duties, changes, attack, difficult duties, violence, harassment, physical harm, sexual harassment and insult. They are all the symptoms of mobbing at different stages which are defined by Davenport et al. The second theme, mobbers, includes supervisors, peers and subordinates which aims to understand the resource of mobbing behaviors. The last theme, results, includes action; ignorance and nothing change despite of an action.

10.5 Limitations of the study

There are many public and private hospitals in Turkey but only six of them were chosen as the sample of this study. Although the aim of this study is not making general conclusions, this issue can be a limitation for the study. Interviews were the main resources of data but since this study is trying to identify a critical issue respondents can hesitate to confess that they were mobbed or witnessed. Another problem is to find people that want to attend the

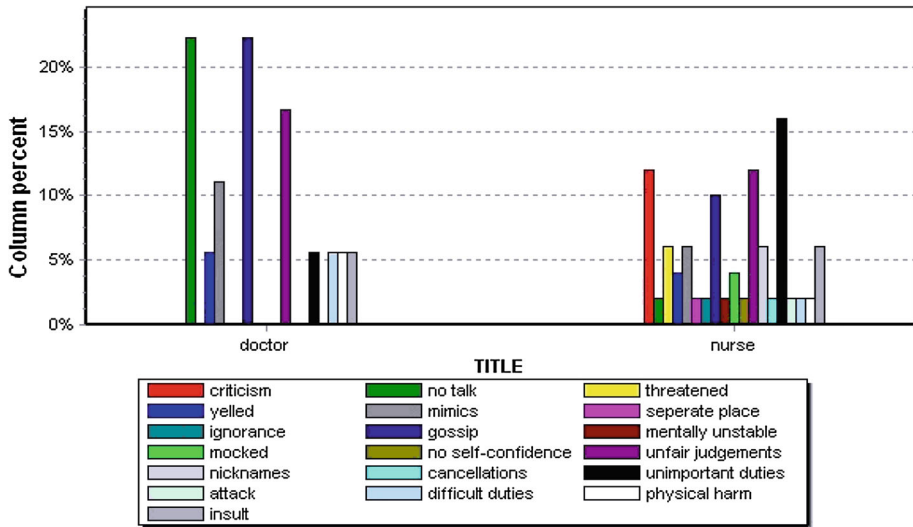


Fig. 1 Frequency of symptoms

survey because everyone is busy with their own works and they do not want to spend time for the questionnaire

11 Findings

After collecting and analyzing data, this part of the study discusses the findings of the research. The aim is to explore whether employees of health institutions are being victim or at least witness of mobbing in their work lives. Five phases of mobbing, defined by Leymann, was used to identify mobbing and its level as the first stage as the lowest symptoms and the fifth is the highest. It was found that all participants had frequently encountered second, third and fourth stage mobbing symptoms whether being a doctor or nurse (see Fig. 1). However, symptoms change based on titles which mean that the some of the symptoms declared by nurses were not confirmed by doctors. As a result of the interviews it was observed that the most frequent symptoms that mobbers used on the nurses were “criticism”, “unfair judgments”, “gossips”, “not talking” and “assignment of unimportant duties”. Doctors were being subjected to “not talking”, “mimics”, “gossip” and “unfair judgments” mostly.

Furthermore it was found that some participants had encountered much more serious mobbing behaviors such as being told as mentally unstable or insults. At the end of the interviews it was found that the lightest and the heaviest symptoms like “physical violence” and “sexual abuse” were not being talked by respondents. Two of the participants explained that mobbers could not dare to employ these kinds of behaviors (offences) as these behaviors have heavy legal consequences.

All participants stated that most of these behaviors were conducted publicly. For example a nurse working in a public hospital told that two doctors in her department said that “The only good nurse is a dead nurse” in front of patients. A doctor explained that indecent gossips were made up about him and spread very easily even to the closest friend of him in the department. Another doctor stated that when she saw her coworkers from the same department in the lunch and she greeted them they ignored her even though they looked into each other’s eyes.

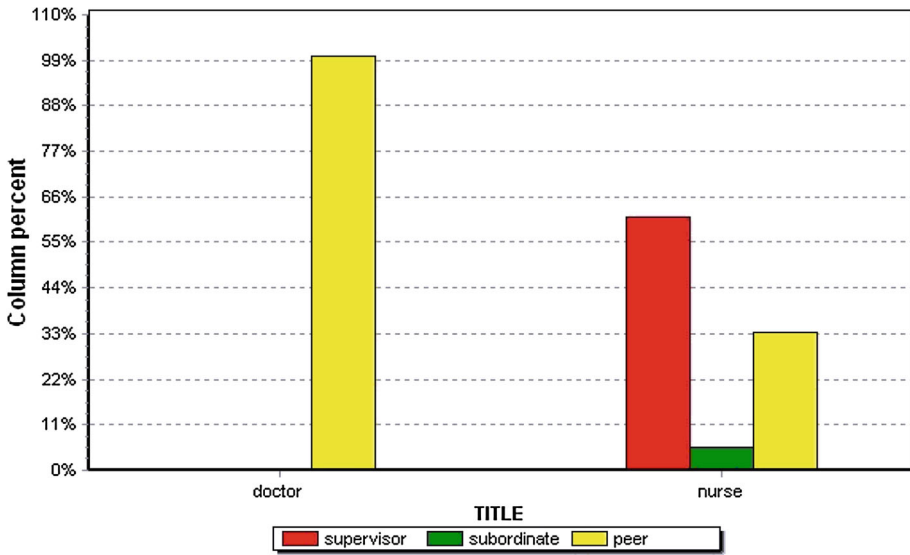


Fig. 2 Frequency of mobbers

The second theme of the research was the question of “who are the mobbers?” As it can be seen from Fig. 2, nurses are being mobbed by supervisors such as chief nurse or department administrator and secondly by peers. However, doctors stated that they are only being mobbed by their peers.

In literature it is shown that the incidence of psychological disorders in mobbing victims is high. In this study it is seen as well. For example, one of the respondents confessed that because of mobbing she underwent a heavy depression and using medicine consequently to deal with the situation. Some of the nurses stated that they had psychological disorders and having therapy.

Some of the participants stated that when they first began to be mobbed they were not aware that they had been being mobbed, that’s why they thought they themselves were responsible for what happened during mobbing period and put the blame on them consequently. They expressed that they developed counter behaviors as afterwards they became aware of mobbing. Whereas some of the participants explained that they developed action against mobbers at the end of the period, some others pointed out that they only engaged in professional business relations with the mobbers and that they never communicated with them in any other ways, they ignored. Some of them stated that although they took action, nothing changed about the situation (see Fig. 3). It is clear from the figure that 43 % of doctors took action and 14 % of them could not solve the problem and also 43 % of doctors ignored the problem. When we look at the nurses, 42 % of them took action but 25 % of them could not solve it. This numbers show that doctors are more successful in solving the problem when they complain than nurses.

12 Discussion

This study aims to explore mobbing behaviors in Turkish health institutions, to what extent and by whom. It is seen that there are differences between nurses and doctors in terms of mobbing behaviors, mobbers and results.

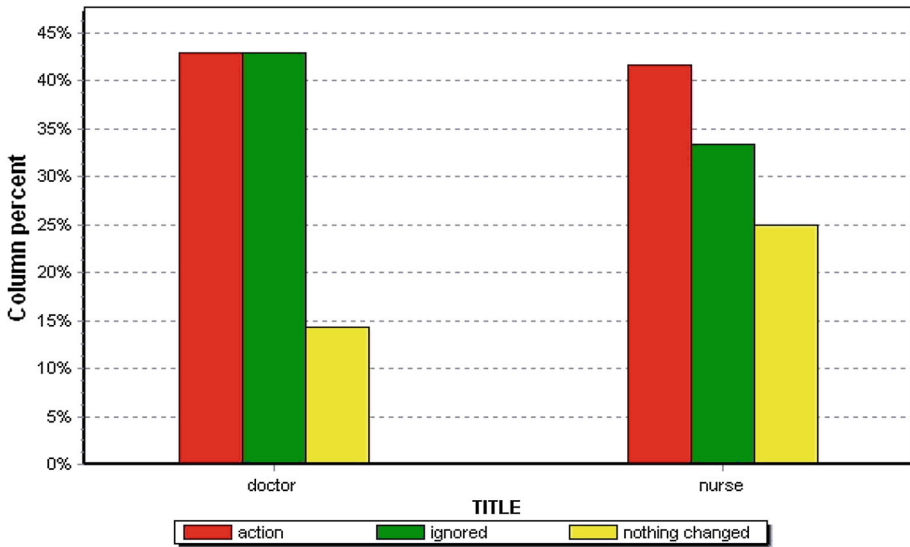


Fig. 3 Results of mobbing

For doctors, eminent mobbing behaviors are seen and they are being mobbed by peers only. Half of them prefer to stay silent against mobbing and half of them take an action but sometimes nothing changes despite of action. For nurses, most of mobbing behaviors are seen and there is no tendency toward some of the symptoms. They can be mobbed by peers and supervisors. Most of them take action against mobbing but only small group of them achieve the result. Therefore, in this study, it is intended that there are some differences among the mobbing practices between nurses and doctors.

References

- Auerbach, C., Silverstein, L.B.: *Qualitative Data: An Introduction to Coding and Analysis*. New York University Press, New York (2003)
- Bultena, C.D., Whatcott, R.B.: Bushwhacked at work: a comparative analysis of mobbing & bullying at work. *Proc. ASBB* **15**(1), 652–666. <http://www.asbbs.org/files/2008/PDF/B/Bultena.pdf>. (2008)
- Chappel, D., Martino, V.: *Violence in the Workplace*. International Labour Organisation, Geneva (2006)
- Cobanoğlu, S.: *İşyerinde Duygusal Saldırı ve Mücadele Yöntemleri*. Timaş Yayınları, İstanbul (2005)
- Davenport, N., Schwartz, R.D., Elliott, G.P.: *Mobbing: Emotional Abuse in the American Workplace*, pp. 50–68. Civil Society Publication, Ames (1999)
- Davenport, N., Schwartz, R.D., Elliott, G.P.: *Mobbing: İşyerinde Duygusal Taciz*, pp. 20–99. Sistem Press, İstanbul (2003)
- Ehrlich, P., Dobkin, D., Wheye, D.: *Mobbing*. <http://www.stanford.edu/group/stanfordbirds/text/essays.mobbing.htm>. (1988)
- Foucault, M.: La Volonte de Savoie. In: Vandekerckhove, W., Commers, M.S.R. (eds.) *Downward workplace mobbing: a sign of the times*. *J. Bus. Ethics* **45**, 41–50 (1976)
- Garvois, J.: Mob rule: in departmental disputes, professors can act just like animals. *Chron. Sec Fac.* **52**(32), A10 (2006)
- Gates, G.: *Bullying and Mobbing (Part 2)*, pp. 31–78. Pulp & Paper Publication, New York (2004a)
- Gates, G.: *Bullying and Mobbing (Part 3)*, pp. 23–74. Pulp & Paper Publication, New York. (2004b)
- Girardi, P., et al.: Personality and psychopathological profiles in individuals exposed to mobbing. *Violence Victims* **22**(2), 172–189 (2007)
- Halbur, K.: *Bullying in the academic workplace*. In: Bultena, C.D., Whatcott, R.B. (eds.) *Bushwhacked at work: a comparative analysis of mobbing & bullying at work*. *Proc. ASBBS* **15**(1), 652–666 (2005).

- Hartig, K., Frosch, J.: Workplace mobbing syndrome: the silent and unseen occupational hazard. In: National Conference on Women and Industrial Relations, Darwin. <http://www.qwws.org.au/filestore/OWOL%20Papers/PDF/Hartig%20and%20Frosch%20paper%20FINAL>. (2006)
- Hubert, A.B., Veldhoven, M.: Risk sectors for undesirable behavior and mobbing. *Eur. J. Work Org. Psychol.* **10**(4), 415–424 (2001)
- Jackson, S.E.: The consequences of diversity in multidisciplinary work teams. In: Ayoko, O.B., Callan, V.J., Hartel, C. E.J. (eds.) Workplace conflict, bullying and counterproductive behaviors. *Int. J. Org. Anal.* **2**(4), 283–301 (1996)
- Jelic, Z.J., et al.: The effect of mobbing on medical staff performance. *Acta Clin. Croat.* **44**(4), 347–352 (2005)
- Laçiner, V.: Mobbing (İşyerinde Psikolojik Taciz). www.usakgundem.com/makale.php?id=167 (2006).
- Leymann, H., Gustafsson, A.: Mobbing at work and the development of post-traumatic stress disorders. *Eur. J. Work Org. Psychol.* **5**(2), 251–276 (1996)
- Leymann, H.: Mobbing. In: Vandekerckhove, W., Commers, M.S.R. (eds.) Downward workplace mobbing: a sign of the times. *J. Bus. Ethics* **45**, 41–50 (1993)
- Leymann, H.: The content and development of mobbing at work. *E. J. Work Org. Psychol.* **5**(2), 165–184 (1996)
- Ministry of Health: <http://www.saglik.gov.tr/TR/dosya/172577/h/saglikistatistikleriyilligi2010.pdf>. (2010)
- Neidl, K.: Mobbing and well-being: economic and personnel development implications. *Eur. J. Work Org. Psychol.* **5**(2), 239–249 (1996)
- Pranjic, N., Bilic, L., Beganlic, A., Mustajbegovic, J.: Mobbing, stress and work ability index among physicians in Bosnia and Herzegovina: survey study. *Crot. Med. J.* **47**(5), 750–758 (2006)
- Tınaz, P.: İşyerinde Psikolojik Taciz. Beta Press, İstanbul (2006)
- Tutar, H.: İşyerinde Psikolojik Şiddet, 3rd edn. BRC Press, Ankara (2004)
- Vandekerckhove, W., Commers, M.S.R.: Downward workplace mobbing: a sign of the times. *J. Bus. Ethics* **45**, 41–50 (2003)
- Westhues, K.: The remedy and prevention of mobbing in higher education. In: Bultena, C.D., Whatcott, R.B. (eds) Bushwhacked at work: a comparative analysis of mobbing & bullying at work. *Proc. ASBBS* **15**(1), 652–666. (2006).
- Yüçetürk, E.: Bilgi Çağında Örgütlerin Görünmeyen Yüzü: Mobbing. Available at: www.bilgiyonetimi.org/cm/pages/mkl_gos.php?nt=224. (2002)
- Zapf, D., Einarsen, S., Hoel, H., Vartia, M.: Empirical findings on bullying in the workplace. In Hartig, K., Frosch, J. (eds.) Workplace mobbing syndrome: the silent and unseen occupational hazard. National Conference on Women and Industrial Relations. <http://www.qwws.org.au/filestore/OWOL%20Papers/PDF/Hartig%20and%20Frosch%20paper%20FINAL.pdf>. (2003)