

A Study on Workplace Bullying of Non-Medical Staff in Healthcare Industry in Kemaman Terengganu, Malaysia

¹Noor Malinjasari Ali, ²Nor Hasmaarniza Hassan, *¹Siti Fatimah Mardiah Hamzah, ¹Suzila Mat Salleh, ³Roszainora Setia, ¹Raslina Mohamed Nor, ¹Ruzaidah Sulong @ A. Rashid, ¹Hasmida Mohd Noor, ³Rahayu Izwani Borhanuddin

¹Faculty of Business Management, Universiti Teknologi MARA Cawangan Terengganu, Malaysia, ²Hospital Kemaman, Terengganu, Malaysia, ³Academy of Language Study, Universiti Teknologi MARA, Cawangan Terengganu, Malaysia, ⁴Faculty of Accountancy, Universiti Teknologi MARA Cawangan Johor, Malaysia

*Corresponding Author Email: sfatimah@uitm.edu.my

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Abstract

Workplace bullying is a concerning issue in healthcare services, lead to serious consequences for healthcare staff well-being, job and organizational performance. Many previous study has focused on medical staff, but little attention has been given to non-medical employees who also contribute in healthcare delivery. This cross-sectional study examined factors contributing to workplace bullying among healthcare staff. The research investigated how leadership quality, organizational culture, job insecurity, and workload influence workplace bullying, and identified which factor has the strongest impact. Data were collected from 92 non-medical staff at Kemaman Hospital, Terengganu, using convenience sampling from a population of 120 employees. Multiple regression analysis was employed following reliability and validity testing. The findings revealed that leadership quality, workload, and job insecurity significantly influenced workplace bullying, while organizational culture did not demonstrate a significant effect. Among the predictors, job insecurity emerged as the strongest factor, emphasizing how employment uncertainty contributes to bullying vulnerability in the workplace. The model accounted for 61.7% of the variance in workplace bullying, suggesting that organizational and employment-related factors play a substantial role in shaping staff experiences. These results highlight the need for healthcare organizations to implement targeted strategies such as strengthening employment security, managing workloads effectively, and strengthening leadership practices to cultivate respectful and supportive work environments. Future research should extend to larger and more diverse samples across regions and employ triangulation methods to enhance validity and generalizability.

Keywords: Work bullying, Workload, Organizational Culture, Leadership, Job Security

Introduction

Workplace bullying represents a global concern with significant implications for individual well-being. Malaysian bullying research remains limited, beginning only in the early 2000s, considerably later than Western studies. Despite this delayed research focus, workplace bullying cases in Malaysia's healthcare sector are increasing. A 2023 Code Blue survey revealed that 41% of house officers (77 out of 187 respondents) in Malaysian public healthcare facilities experienced workplace bullying, highlighting the prevalence of this issue within the industry.

According to the Vice President of Malaysian Institute of Human Resource Management, Mohd Rafizi Rahmad, workplace bullying has become an issue that is serious enough to warrant scrutiny, and it does not only happen to top-down workers but also there are other group of workers who are a target of workplace bullying (Khalil, 2022). Understanding its impact, workplace bullying is now garnering more research focus. Even so, at present, there is no exclusive legislation regarding workplace bullying in Malaysia and there is no particular law under which the victim can lodge a complaint against the perpetrator. In a country with diverse cultures and values such as Malaysia, workplace bullying dynamics might be contextually significantly different from those in the West and thus study on this area would be beneficial for the societies (Khalil, 2022).

What constitutes work bullying? According to Mustaffar, associate professor of Law at University Sains Islam Malaysia (USIM), in Khalil 2022, workplace bullying could be defined as unprofessional conduct that could threaten an employee's ability to perform at work and could affect an organizations' productivity. Workplace bullying can create detrimental working environment where the victims cannot focus on their job effectively and the perpetrators can be anyone such as the manager, employer, co-workers or even third parties like customers or clients.

Workplace bullying (WPB) among healthcare workers especially trainee doctors is a concerning problem in Malaysia. However, there is still a limited understanding regarding the influence of trainee doctors' personality traits on workplace bullying. Furthermore, the impact of contract employment status on workplace bullying among trainee doctors is not yet well-defined. While there are many studies focus on workplace bullying on medical staff in healthcare industry, there are limited studies on workplace bullying on non-medical staff in healthcare industries. To address these gaps, this study aimed to determine the prevalence of workplace bullying among non-medical staff and to examine the association of leadership quality, job insecurity, workload and organizational culture with workplace bullying among non-medical staff in Malaysia particularly in Terengganu (Fang et al., 2025; Ismail et al., 2024; Gordon, 2018; Leon-Perez et al., 2014). Moreover, research on workplace bullying generates crucial insights to inform interventions, identify at-risk individuals, and foster supportive organizational cultures. Therefore, the need for this study stems from the devastating effects bullying has on the well-being individuals and the overall health and performance of an organization. In summary, studying workplace bullying is important because the following:

- *Prevalence and impact*: workplace bullying is a serious and pervasive issues with long-lasting negative implications

- *Lack of awareness*: many individuals may underestimate the severity of bullying especially when it occurs in subtle forms. Studying it raises awareness and encourage appropriate action
- *Improving work environment* – the knowledge gained from studying workplace bullying can be used to implement better management practices and create supportive organizational culture that promote employee well-being.

In addition, studying workplace bullying is crucial, as it leads to various individual harms such as anxiety, depression, and physical health problems. Therefore, it is important to bring greater attention to this issue. The significance of examining workplace bullying can be summarized as follows:

- *Individual well-being* – bullying leads to several psychological disaster including depression, anxiety, and feeling worthlessness. It can also manifest as physical health problems such as stress
- *Organizational performance* – organizations suffer from a range of negative outcomes due to bullying including lower job satisfaction.
- *Legal and ethical responsibility* – organization have a legal and ethical responsibility to protect employees from harm.
- *Research and intervention* – studying bullying provides the necessary data to develop and evaluate interventions. This includes understanding the causes, identify at-risks individuals and create targeted support.

Based on these considerations, this study aims to:

1. examine the relationship between workplace bullying and job insecurity, workload, leadership quality, and organizational culture among non-medical healthcare staff, and
2. identify which factors most significantly contribute to workplace bullying.

Accordingly, the research questions for this study are:

- Do leadership quality, job security, workload, and organizational culture significantly relate to workplace bullying among non-medical healthcare staff?
- Which independent variables have the strongest effect on workplace bullying in this population?

Literature Review

Workplace bullying represents a major stressor that many organizations need to confront and deal with because it can lead to health risks towards the victim with both physical and psychological health problems such as anxiety, high blood pressure and/or lacking of self-esteem. Serious cases can lead to suicide and thus who had been bullied at workplace often having trouble making good decisions and sometimes lead to absenteeism creating a hostile working environment and affect not only the workers but also the organization as a whole.

Work Bullying

Workplace bullying is an abuse in the form of verbal, physical and psychological by individual or group of people such as manager, colleague or other person at work. In addition, workplace bullying is a perpetually growing worry in modern organization, it is a serious issue embedded in the communication of employees(Kassing & Waldron, 2014; Ismail et al, 2024; Kim, 2024). It gives severe negative impact on physical health and mental health of the victims such as a

person who regularly being mocked might cause loss of confidence, anxiety or even suicidal tendencies.

Bullying is pervasive in health organizations, and it became institutionalized in which a victim is forced to accept such behaviour. Besides that, workplace bullying caused health risks towards the victim with both physical and psychological health problems such as anxiety, stress and high blood pressure (Gordon, 2018;sochosa & Rossiterb, 2024; Mota, 2025). It is important to reduce workplace bullying as it could create toxic work environment which could affect organization in the long run.

Workplace bullying especially in healthcare industries is an open secret and sometimes the action of bully is even more subtle as the bullies often do not realize that their action is such a form of bullies such as emotional abuse, victimization or psychological terror. Unfortunately, bullies are not easy to identify, and the incidents are rarely isolated. Bullying is defined as unwanted and recurring negative acts as one or more individual, which involve a perceived power imbalance and relative inability on the part of the victim to engage in self-defence, resulting in some degree of psychological harm to the victim (Begjani et al., 2025). Bullying at workplace means harassing, offending and socially excluding someone or negatively affecting someone's work tasks and it occurs repetitively or regularly (Blomberg et al., 2025; Kim et al., 2025)). Many researchers have tried to identify organizational factors or situational factors which are associated with workplace bullying and looking for an explanation in deficiencies in the work environment (Salin & Hoel, 2011; Riduan et al., 2024; An et al., 2023; Divayani & Darmawan, 2024; Pattali et al., 2024; Kim et al., 2025;Fang et al., 2025)

Workload

Workload can be defined as number of activities that must be completed by an employee or firm in unit and at certain duration of time (Nasrul, Zainal & Hakim, 2023). Workloads also could be measured as responsibilities given to employees and need to be carried out at a certain time by using the skills and potential of the workforce which can be further alienated into groups: workload quality and workload quantities (Nasrul et al., 2023; Lee, Seo & Macphee, 2024). Workload could also be defined as a disorder for meting out job descriptions that must complete within a certain period of time or jobs given to workers or employees to be completed at a certain time by using the skills and potential of the workforce (Riduan et al., 2024). Based on some meaning above, basically, workload can be defined as a number of activities/tasks that assigned and must be completed by an employee or organizational unit in a certain period using their knowledge and skill.

Job Insecurity

Job insecurity refers to "supposed helplessness to uphold wanted steadiness in vulnerable job situation" and also could be defined as an one's complete worry regarding their tasks and its constant presence in the future (Darvishmotevali & Ali, 2020; Sriyakul et al., 2024). Later job insecurity being measured as qualitative and quantitative aspects. Qualitative job insecurity is labelled as worry regarding the future of a job situation, whereas the quantitative aspect of job insecurity refers to the penalties of losing a job and its valued features, such as the lack of job opportunities, the loss of insurance or a decrease in wages (An et al., 2023). Both quantitative and qualitative aspects of job insecurity significantly influence on employees'

attitudes and performance (Darvishmotevali & Ali, 2020; Sriyakul et al, 2024). Sverke and Hellgren (2002), explained job insecurity from different perspectives: cognitive and affective. They believe that cognitive insecurity is related to the employees' perception of the organization; on the other hand, affective insecurity refers to the individual-level assessment of the situation. The importance of distinguishing between cognitive and affective aspects of job insecurity refers to their consequences. Affective insecurity is correlated with psychological strain, while cognitive insecurity is more associated with job attitudes such as engagement, commitment or satisfaction (An et al., 2023). In this study, we aim to examine the consequences of job insecurity from the cognitive perspective.

Employees experiencing job insecurity are less expressively devoted in organizations due to financial worries and limited chances for career growth. The potential of losing monetary and nonmonetary benefits increases nervousness and reduces structural commitment. Uncertainty is further propelled by organizational restructuring, failures and bankruptcies, as these factors intensify the threat perception. Such negative appraisal is indeed a form of workplace bullying and induces work stress and may lead to increased turnover intention. Furthermore, workplace bullying occurred by inducing job stress that increased by underlying fear and insecurity concerning the prospect of realizing future career goals, increasing autonomy, self-efficacy, and achieving personal growth. It encompasses a prominent worry over losing social support, status, performance feedback, and acquisition of additional resources. When employees perceive that they had been bullied and their current job is threatened and that their future employment opportunities are reduced, they engage in self-doubt, feel anxious, depressed, exhausted, drained, and stressed (An et al., 2023). Workplace bullying lead to exhaustion and significantly affect job performance, as they lower employees' job satisfaction and deprive workers of valuable resources, thus diminishing their productivity and effectiveness (Mohamed & Bendjakhdel, 2025).

Feeling of job insecurity had impacted on anxiety that has been linked to depression, work-family conflict, and other negative outcomes that may result in severe illness or adverse actions such as violence and suicide (An et al., 2023). In the organizational context, it arises when employees perceive a lack of resources to meet the prescribed job requirements. An et al (2023), also explained that how job uncertainty leads to emotional exhaustion, fear, and anxiety. Job insecurity acts as a significant stressor when employees perceive the environment as being threatening to their well-being or when they perceived they had been bullied at work. When employment is considered uncertain, individuals feel uneasy as they begin to expect their resources for coping with the demands of their work role are insufficient. This leads to a struggle to manage the threat and coping, such as excessive worry, depression, and anxiousness. Consequently, all these factors contribute to an overarching climate of insecurity. Therefore, we conclude, there is a significant positive relationship between job insecurity and workplace bullying (Sverke & Hellgren, 2002; Darvishmotevali & Ali, 2020; An et al., 2023)

Organizational Culture

The organizational culture of an organization, including the culture of their workers and often influenced by various factors. It encompasses the shared values, beliefs, practices, and behaviours within the community.

It is difficult to define culture as one concept, since it can be variedly perceived according to perspective or purpose, but culture can be referred to as a collective term of all the things acquired by acquired learning. Accordingly, organizational culture means a culture formed in accordance with organizational goals by sharing the things acquired by learning, and comprises all the values, activities, philosophy, ideals, etc of an organization. Once formed, it does not change easily and affects the values and behaviours of organization members and organization performances greatly. Indeed, organizational culture can be seen as one culture represented as a summary of individual cultures in macroscopic terms, but it is not the same as the culture of each member.

Organizational culture is an important component in a company, because it is a value that will determine the behaviour of all employees in the company and is a component that can differentiate between one organization and another (Quinn et al., 2025; Divayani & Darmawan, 2024). According to Lubis et al., (2024) organizational culture is an invisible social force, which can move people in an organization to carry out work activities. If an organization's values and norms align with an employee's individual values, this can create a strong emotional bond between the employee and the organization. Value misalignment between employees and organizations generates dissatisfaction and turnover intentions due to workplace discomfort. Organizational cultures promoting social support and collaboration foster positive work environments where employees experience greater job satisfaction and reduced stress. When employees feel supported and maintain positive colleague relationships, workplace bullying decreases, resulting in enhanced well-being and reduced turnover pressure. Similarly, if the workers feel that they had been bullied in the workplace and no one understand them at work, they will be dissatisfied and could lead to serious turnover intention (Ismail et al, 2024) By understanding and managing organizational culture well, organizations can create an environment that supports employees, reduces organizational stress and reducing their intention to leave the organization (Divayani & Darmawati, 2024; Lubis et al, 2024, Quinn et al, 2025)

Leadership Quality

Leadership is part of management process, and it is defined as an act of directing the employees in an organization. Usually, leaders ought to encourage employees and allocate duties to personnel or groups toward overall goal attainment (Pattali et al., 2024). As leaders is an individual with different personalities, their leadership will also be different according to their personalities, mentality and their personal view (Georganta et al., 2025). The manager employs different leadership styles to bring workplace changes (Trembley et al., 2024). To withstand in the globally competitive world, leaders experiment with varying types of leadership to achieve organizational goals and motivate employees (Pattali et al., 2024; Tremblay et al., 2024). Leadership in hospitals is aligning the employees with the leaders' view in achieving organizational goals (Pattali et al., 2024). In hospitals, nurses are directly involved in the patient's care, so there is a need to create a manager-friendly environment to enhance the nurses' commitment (Pattali et al., 2024). In this case, leadership style determines whether the nurses stay in the same hospital, request transfer to other units, or seek jobs elsewhere (Batool et al., 2024). Non-medical staff also required the same concern of their leaders. If the employees feel that the leader is bullying them, it will create tension in the workplace and similarly if the leaders' showed no indication of power abuse or bullying their subordinates, employees will be happy with their current tasks (Fang et al, 2025). The leaders

can create an enjoyable work environment that enhances management transparency, information disclosure, internalizing moral ideals, and encourage positive working environment (Pattali et al., 2024). When an organization values employees' work, workers' well-being and socioemotional needs are met. Perceived Organizational Support (POS) will make employees feel the organization considers their values (Trembely et al., 2024). In healthcare organizations, employees (administrators, doctors, and nurses) play a vital role in ensuring the social system. Recently, the scarcity of healthcare workers has become a significant concern (Batool et al., 2024).

Relationship between Work Bullying, Workload, Job Insecurity, Organizational Culture and Leadership Quality

This study is to test the relationship of leadership quality, organizational culture, workload and job insecurity with workplace bullying. There are empirical studies that determine which features or work setting that are high related with bullying and the outcomes showed that the importance of quality of leadership (Salin 2015; Nielsen, 2013; Salin & Hoel, 2011). Consistent with past studies that identified the direct relationship between leadership and bullying at work (Francioli et al, 2018; Nielsen 2013), this study expected the components of leadership quality directly influence workplace bullying. A study on numerous leadership styles have increase the level of bullying at work such as autocratic and tyrannical style of leadership. On the contrary, some of the leadership style including authentic leadership style are able to create a sincere sense of caring and promote trust for the subordinates and subsequently reduce the possibility of negative relations at work. The facets of leadership that being observed could be perceived as indication of a supervisor that are not being caring enough to his or her subordinates. Supervisors who rarely smile to subordinates while giving instruction could also being evaluated as being the work bullies (Salin, 2015; Francioli, 2018).

The idea of organizational culture may be classified into two key aspects which are task orientation and relationship orientation. The findings of bullying studies had acknowledged that autocratic management and weak social climate at workplace may encourage the occurrence of higher frequencies of work bullying. Deficiency of mutual discussion about goals and work task among employees as well as poor information flow can lead to bullying activities and organizational culture may promote bullying behaviour at workplace (Tambur & Vadi 2012; Aggrevoid, 2009; Hoel & Cooper. 2000)

While a company having organizational change, employee might face difficulties on getting all their work done due to the additional responsibilities of needing to complete the tasks left by the co-workers who had been missing at work while at the same time, need to get the normal job they are doing being done and thus resulted in higher workload. There are empirical findings that confirmed higher workload could have direct effect on workplace bullying (Riduan et al, 2024; Nasrul et al, 2023)

Workplace bullying may also occur due to job insecurity. Organizational change might cause job insecurity. Job insecurity had been associated with the increased risk of workplace bullying. Job insecurity relates to withdrawal behaviour such as poor performance at work and turnover intention (Cuyper et al., 2009). Workers who interrupt standards that being applied among colleagues may possibly intentionally or not, influenced negative behaviour to the colleague. Under stressful condition, when workers have the feeling of job insecurity, they

might lash out at colleague with the purpose of lessen their frustration (Cuyper et a, 2009). To be precise, perpetrators might bully their colleagues for the purpose of regaining control in an ambiguous condition. Therefore, job insecurity is also another factors of workplace bullying.

Methodology

Primary data was used as measurement tools in this research. A survey questionnaire was conducted using self-administrated questionnaire to non-medical staff in Kemaman Hospital, Terengganu using non-probability sampling. This research was based on cross sectional study. Items in survey questionnaire were demographic profiles and questions on workplace bullying, workload, job insecurity, leadership and organizational culture adapted from various previous literature (Pejtersen et al, 2010; Vadi et al., 2002). Out of 120 population of non-medical staff at Kemaman Hospital Terengganu, only 92 were distributed using convenience sampling to non-medical staff and returned to be analysed.

Table 1

Data Analysis Used

Items	Analysis Used
Demographic Profile	Descriptive Analysis
Variables in Questionnaire	To test hypotheses, using multiple regression analysis
Others	Reliability and validity test

Table 1 shows the analysis test that had been used to determine the results. For simple questions like demographic profile, descriptive analysis was used and for objective 1 and objective 2, multiple regression analysis was used to obtain its results. Other tests such as reliability test and validity test were used to validate the questions in the survey questionnaire.

Results Analysis

The researchers used multiple regression analysis to determine the relationship between variables, workplace bullying as the main study and its independent variables, namely leadership quality, workload, job insecurity and organizational culture, the results are as follows:

Table 2

Model Summary on Workplace Bullying and Job Insecurity, Organizational Culture, Workload and Leadership Quality

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.796 ^a	.634	.617	.45715

a. Predictors: (Constant), Job Insecurity, Organizational Culture, Workload, Leadership

b. Workplace bullying

Table 3

Summary of Multiple Regression Analysis on Workplace Bullying

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	31.514	4	7.878	37.699	.000 ^b
	Residual	18.181	87	.209		
	Total	49.695	91			

a. Dependent Variable: Workplace Bullying

b. Predictors: (Constant), Job Insecurity, Organizational Culture, Workload, Leadership

Table 2 and Table 3 shows Multiple Regression Analysis on this research that is organizational stress and all the independent variables namely job insecurity, organizational culture, workload and leadership quality. The results shows that all the independent variables are connected to organizational stress which contributed to 61.7 percent whereas another portion might be cause by something else. The analysis of variance also shows that all independent variables are significant to dependent variable i.e. workplace bullying therefore objective one of this research i.e. to find the relationship between workplace bullying and job insecurity, workload, leadership quality and organizational culture is achieved as all the independent variables is significant to workplace bullying.

Table 4

The t value and Collinearity Test on Workplace Bullying

Model		t	Significant.	Collinearity Statistics	
				Tolerance	VIF
1	(Constant)	3.456	.001		
	Leadership	2.418	.018	.367	2.724
	Oganizational Culture	.402	.688	.419	2.386
	Workload	4.513	.000	.762	1.313
	Job Insecurity	5.408	.000	.772	1.296

Table 4 shows the different value of t value and its significant value when compared to workplace bullying. The table also shows that only three variables, namely leadership quality, workload and job security make unique statistically significant contributions ($P < 0.05$) to workplace bullying prediction with t-values of 2.418, 4.513 and 5.408, respectively. Therefore, it can be concluded that only hypotheses of leadership quality, workload and job insecurity is significant to work bullying are supported. Organizational culture in our study does not contribute significantly to work bullying. From the table also, this study has no multi-collinearity issue since the tolerance value is not less than 0.1 and the VIF value is less than 10 (Pallant, 2016). From this table, it can be concluded that objective two of this research is achieved also as the highest t value is job insecurity with 5.408 therefore shows the stronger connection between job insecurity and workplace bullying.

Discussion

In our research, four independent variables were used to find significant contributions to workplace bullying which are workload, job insecurity, organizational culture and leadership quality. The overall results shows that 61.9 percent of workplace bullying is contributed by these four factors for non-medical staff at Kemaman Hospital but when we further test the independent variables separately, only three variables remain constant namely leadership

quality, job insecurity and workload whereas organizational culture did not contribute significantly to workplace bullying.

Our findings contrast with previous research demonstrating a significant relationship between organizational culture and workplace bullying. This discrepancy may result from our small sample size and homogeneous participant demographics, as the majority were Malay non-medical staff sharing similar cultural backgrounds and beliefs. A broader geographical scope, such as nationwide or southern region sampling, might yield different results.

Both of our study objectives were achieved. Job insecurity emerged as the strongest predictor of organizational stress, likely reflecting current employment challenges where even graduates struggle to secure suitable positions. This employment uncertainty creates workplace insecurity, as staff perceive their positions as replaceable. Additionally, relatively low salaries among non-medical staff may exacerbate financial concerns, further contributing to job insecurity and associated stress.

Conclusions and Recommendations

This study found that workload, job insecurity, and leadership quality significantly contributed to workplace bullying, while organizational culture did not. These findings partially differ from previous literature, as organizational culture showed no significant contribution in our healthcare setting. Both research objectives were achieved. Future studies should employ larger sample sizes extending beyond a single hospital to the broader east coast region and utilize triangulation methods to provide comprehensive insights into workplace bullying among non-medical healthcare staff.

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