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WORKPLACE HARASSMENT AND PSYCHOLOGICAL WELLBEING AMONG PRIVATE AND PUBLIC SECTOR WORKERS: DOES SENSE OF COHERENCE MATTER?

BY

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THIS THESIS IS SUBMITTED TO THE UNIVERSITY OF GHANA, LEGON IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF MPHIL IN INDUSTRIAL &ORGANISATIONAL PSYCHOLOGY DEGREE.

DECLARATION

I Hilda Aba Ewure Abrabra, declare that the dissertation titled "Workplace Harassment and Psychological Wellbeing Among Private and Public Sector Workers: Does Sense of Coherence Matter?" is my own work which is being submitted to the Department of Psychology University of Ghana, for examination in partial fulfilment of the requirements for the degree "Master of Philosophy in Industrial and Organizational Psychology". All sources used are acknowledged as references. I further declare that this dissertation has not been presented at any other institution in and outside Ghana for the same qualification.

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DEDICATION

This piece of work is dedicated to my sweet husband and children.

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My sincere appreciation goes to God Almighty for extending His unfailing love and mercies towards me during my post graduate studies.

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LIST OF ABBREVIATIONS

PWB……Psychological well-being

WPH……Workplace Harassment

WRH……..Work-related harassment

DC……...Defamation of character

PH……Physical harassment

SOC…… ...Sense of Coherence

SLM……Self-Labelling Method

LCM……..Leymann Criterion Method

OCM……..Operative Criterion Method

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ABSTRACT

Over the years, research interest in harassment at the workplace has grown, with the exploration of the impact of workplace harassment on health and well-being being a dominant theme. In this study, the differences in the prevalence of workplace harassment between employees in private and public sectors in Ghana was explored. In addition, the association between workplace harassment and psychological well-being and the moderating role of the sense of coherence in this relationship was investigated. Participants completed a questionnaire comprising of various socio-demographic questions (Gender, age, Educational Qualification, Industry, Sector, Employment Type and Length of Service), and measures of workplace harassment, sense of coherence, and psychological well-being. Participants for the study were 280, made up of 98 females (females = 35%, ages 18-50 = 94.3%) and 182 males (males = 65%, ages 18-50 = 90%). Data were analyzed using correlation, independent *t* test, and multiple regression of the Statistical Product and Service Solution (SPSS). From the analysis, it was found that there was no statistically significant difference in workplace harassment for employees in private and public sectors. However, there was a negative association between workplace harassment and psychological well-being. When the dimensions of workplace harassment and their relations with psychological well-being was examined, physical harassment (but not work-related harassment and defamation of character) was associated with psychological well-being. The sense of coherence was positively associated with psychological well-being but its moderating role in the relationship between workplace harassment and psychological was not statistically significant. These findings have implications for the design of interventions to prevent and curtail harassment at the workplace. These implications have been discussed, together with the limitations of the research and suggestions for future studies.

CHAPTER ONE

INTRODUCTION

1.1 Background of the study

In the past two decades, workplace harassment has become a topical issue in organizations (Einarsen, 2000). Due to its negative consequences for both organizations and employees, most organizations have tried to address harassment or to protect themselves from being sued because of it since the 1970s (Harlos, 2001). With mandatory training programs, formal grievance procedures and often public punishments of perpetrators, organizations have tried to eliminate or at least curb such occurrences. Despite continuous efforts and investments in attempts to combat it, researchers report a year-on-year increase in harassment incidents in workplaces around the world (MacDermott, 2020).

Non-physical violence such as verbal abuse and sexual harassment still continue to be a key challenge facing organizations across developed and developing nations. Studies from Germany, Turkey, Switzerland, USA, Hong Kong, Jordan, and Iran have all reported increasing rates of harassment dimensions including verbal abuse and sexual harassment in professions such as nursing (AbuAlRub & Al-Asmar, 2014; Celik & Celik 2007; Esmaeilpour et al. 2011; Franz et al. 2010; Gerberich et al. 2004; Hahn et al. 2010; Li et al., 2006). Estimates from other parts of the world and other professional areas do not paint any better picture. For example, it is estimated that as many as 50% of women in the USA, 6.2 % of workers in Norway, 26.9 % of workers at public agencies in Finland, and 25 % of all workers in the U.S. suffer some form of harassment at least once during their working lives (Das, 2008; Nielsen, 2009). In addition, some 1,000 killings are reported within organizations every year attributed to different causes with homicide induced by

WPH reported to be the primary cause of death on the job for American women, and the second leading cause of death for men (ILO report, 2013).

Data on the issue of workplace harassment in Africa remains sparse. However, few literature exist to provide some perspective on the issue. For instance, while reports show that approximately 77.8% of South Africans are reported to experience workplace bullying, media reports in Ghana suggest that violence against workers such as healthcare professionals is widespread and, on the rise, (Cunniff, & Mostert, 2012). In a study investigating harassments in the hospitality industry, Otoo (2014) observed that name calling and extortion have been reported by volunteer tourists to Ghana as the most common form of harassment they see among workers in the industry. Within the Ghanaian organizational context, Boateng and Ganu (2013) discovered that while harassment is still predominant, incidence report is very low due to many Ghanaians perceiving harassment as a non-serious matter that infringes on the right of individuals. Thus, the issue is not openly discussed and often regarded as trivial. Consequently, the research further revealed that about 95% of harassment cases in organizations in Ghana go unreported (Andoh, 2001).

The concept of harassment as it pertains to the workplace or organizational context, has been viewed from many different angles in the extant literature. According to the International Labor Office (ILO), Harassment refers to any conduct unreciprocated or unwanted and that affects the dignity of men and women (Taniguchi et al., 2016). The term work harassment, was first used by the researcher Kaj Björkqvist, and is defined as "repeated activities, with the aim of bringing mental (but sometimes also physical) pain, and directed toward one or more individuals who, for one reason or another, are not able to defend themselves" (Björkqvist, Qsterman, & Hjelt-Back, 2004). The World Health Organization's (WHO) definition of Workplace Harassment (WPH), which is the definition relied on in this study, describes it as any behaviour by a staff member that

is directed at and is offensive to others, which that person knows or should reasonably know would be offensive, and which interferes with work or creates an intimidating, hostile or offensive work environment (ILO/ICN/WHO/PSI, 2003). From this viewpoint, WPH is defined to encompass not only intent but effect. Therefore, if a specific action by a person or group is reasonably perceived as offensive by another person(s), that action might constitute harassment, whether intended or not. The interpretation of workplace harassment also effectively depends on the context in which it occurs and on perceptions of threat (McDonald, 2012). For example, the Equal Employment Opportunity Commission (EEOC) of United States of America states that harassment becomes unlawful when enduring the offensive conduct becomes a prerequisite to continued employment, or the conduct is severe or pervasive enough that a reasonable person would consider the workplace intimidating, hostile, or abusive. Plus, if a supervisor's harassment results in an obvious change in the employee's salary or status (United States. Equal Employment Opportunity Commission, 1992).

Researchers observe that some forms of harassment often originate from unresolved conflict in the workplace which is often prolonged and malicious. It may involve a group or team and may occur among and between all levels of employees (Einarsen, 2000). However, Yecies (2020) notes that globally, majority of the victims of WPH are often women and junior staff such as interns, mandatory service personnel, among others. Harassment at work can take many different forms including sexual harassment, bullying, intimidation, assaults, verbal harassment, offensive jokes and pictures, retaliation, discrimination, among others (Cullinan et al., 2020). As a result of this diversity in the manifestations of harassment, scholars have measured workplace harassment differently. For example, while Samani (2012) categorized workplace harassment into six specific themes: i) harassment based on a misuse or abuse of power; ii) harassment for a discriminatory

reason; iii) harassment due to a personality clash; iv) harassment arising as a result of poor management practice; v) harassment based on characteristics of the victim; vi) harassment borne out of an interaction between individual and situational factors (uncomfortable work environment), Lee et al. (2016) categorized the concept into three broad dimensions namely Work-related harassment, Defamation of character and Physical harassment. In explaining this categorization, the authors state that Work-related harassment concentrates on excessive workload, unjust work-related threatening, monitoring, injustice in work assignment, work-related defamation of character, exclusion from the work process by colleagues and supervisors. Defamation of character also looks at inappropriate appearance-related statements, sexual humiliation and negative rumors. Finally, Physical harassment comprises of corporal punishment, physical threat and exclusion from fellows. This present study utilizes this three-dimensional approach to WPH.

The extant literature shows that WPH results in negative workplace outcomes including organizational-culture, long-term health and psychological impacts on employees, damage to worker integrity and a costly loss of skilled workforce (Feldblum &Lipnic, 2016). It has also been reported that being a victim of WPH can cause physical and psychological health problems, including anxiety, higher blood pressure, panic attacks, stress, trouble sleeping, ulcers, post-traumatic stress disorder, etc. (Gale et al., 2019; Marsh, 2009). Researchers observe that in the long run, the negative repercussions of WPH affects employee performance and organizational productivity especially when victims experience an incapacity to work or concentrate, loss of self-esteem and trouble making decisions. This decrease in productivity may also be due to the loss of time spent by victims trying to defend themselves, avoiding the bully, networking for support, ruminating about the situation and planning how to deal with the situation (Gordan, 2020). Aside the consequence of reduced productivity, WPH also has the potential of making the organizational

environment hostile which may promote further negative consequences such as absenteeism and presenteeism. WPH may also impact workers' compensation claims, result in costly and possibly embarrassing legal issues, bring additional costs to recruit and train new employees, erode employee loyalty and commitment, increase health care claims and staff turnover, result in poor public image and negative publicity for the organization (Salin & Notelaers, 2020).

1.1.1 Workplace Harassment and Psychological Wellbeing

Among the negative employee outcomes orchestrated by WPH, its impact on employee mental health or psychological wellbeing seems more profound. Psychological well-being (PW) refers to inter- and intra-individual levels of positive functioning that can include one's relatedness with others and self-referent attitudes that include one's sense of mastery and personal growth (Vaingankar et al., 2013). The concept is both multidimensional and value-laden, but it is usually considered to include such features as favorable self-evaluation, growth and learning from new experience, a realistic freedom from constraints and some degree of personal success in valued pursuits (Vaingankar et al., 2013).

As a result of the malleability of PW, researchers have operationally defined it from different perspectives to suit their study. Its portrayals over the years have ranged from Psychological, Physiological or Social emphasis to being seen as a State or Trait well-being. The concept has further been perceived as a Scope of measurement; Positive or Negative emphasis; Affective well-being and Cognitive-affective syndromes; Measuring affective well-being; Measuring syndrome well-being; Examining Ambivalence among others (Warr, 2013). For the purposes of this research, PW will be studied from the Psychological, Physiological or Social Emphasis perspective. By its very nature as a wellbeing dimension, psychological wellbeing may rationally be influenced by

any factor or issues that has general implications for wellbeing either directly or indirectly. In this sense alone, WPH, which has been shown in the existing literature to negatively impact employee wellbeing can safely be perceived as negatively influencing psychological wellbeing.

In-depth research has shown specific relationships between WPH and PW. For example, Rokonuzzaman et al., (2014) investigated the effect of workplace harassment on job performance and concluded that, poor concentration to this issue in organizations has resulted in ill mental health of workers. Marsh et al., (2009) also studied the Prevalence of workplace abuse and sexual harassment among female faculty and staff and found that, compared with women reporting no experience with workplace abuse or sexual harassment, those who reported experiencing both workplace abuse and sexual harassment had an increased risk of depression. In a meta-analysis study conducted by Verkuil et al., (2015), it was reported that dimensions of workplace harassment such as workplace bullying had positive associations with symptoms of depression, anxiety and stress-related psychological complaints. The researchers also reported that baseline mental health problems were associated with subsequent exposure to workplace bullying.

1.1.2 Sense of Coherence as a possible moderator of relationship between WPH and PW

During the process of experiencing a stressful situation, individuals utilize varying forms of coping to try to help alleviate the impact of the experience. Individuals' perceptions of possible stressors, as well as their perceived coping capabilities, may be influenced by personal qualities, which can either amplify, attenuate, or prevent stress reactions (Spector et al., 2000). One such personal quality is the Sense of Coherence (SoC). Propounded by Antonovsky (1987) in his theory of Salutogenesis, researchers who have explored this concept of SOC in various contexts including work contexts report that it is an important disposition to understanding individual differences in

stress reactions at the workplace. The SOC is described as a global orientation to viewing the world and the individual environment as comprehensible, manageable, and meaningful. Comprehensibility is described as reflecting a perception that the world or an individual's environment is predictable and that there is some form of order in that environment, Manageability reflects a belief that resources exist in the environment to deal with prevailing stressors and Meaningfulness reflects a belief that the stressors that confront an individual in their environment are worth engaging (Eriksson & Lindstrom, 2006; Hammond & Niedermann, 2010).

The idea behind this concept is that the way people view their lives and their capacity to respond to stressful situations has a positive influence on their health (Eriksson & Lindstrom, 2005). Thus, the three components come together to form a sort of rational interpretation of an individual's environment the understanding of which buffers the individual against stressors in the environment. It is also a stable global construct, which cuts across lines of gender, social class and culture. According to its proponents, SOC stabilizes at approximately 30years of age after which it is assumed to have considerable stability over time and situations (Eriksson & Lindstrom, 2005). The core hypothesis of the concept is that the stronger the person's sense of coherence, the better the person's capacity to cope with psychosocial stressors in general. Thus, applied to the work context, the assumption is that an individual with a strong SOC would likely cope better with prevailing stressors in the work environment as compared with one with a weak SOC (Antonovsky, 1987). This is because, employees with a weak SOC may tend to experience their environments as without order and less predictable, struggle to identify and utilize resources available and find less meaning in the work they do of happenings in the work environment which in turn may weaken their motivation and willingness to engage stressors that confront them in that environment. This may make them less successful in dealing with issues such as with workplace

conflicts, potentially increasing their chance of being subjected to violence. Furthermore, they may be less capable of dealing with other work-related stressors, resulting in higher levels of stress than other employees (Söderfeldt et al., 2000).

In workplaces, significant positive associations have been established between SOC and a variety of employee and employment outcomes. For example, the work SOC (W-SOC) has been found to predict outcomes like work engagement, mediate the relationship between job resources and work engagement and have a reciprocal relationship with job resources (Albrecht et al., 2021; Vogt, 2014; Vogt et al., 2013). The SOC has even been positively correlated with re-employment success after job loss. This has been attributed to the tendency for people with strong SOC to adopt problem-focused coping instead of emotion focused-coping (Vastamaki et al, 2011). Several researchers have also connected SOC to self-reported health and illness absence in women but not in males (Feldt et al., 2018). Accordingly, female workers with a higher SOC have better physical and psychological wellbeing than their female counterparts with a low sense of coherence.

1.2 Statement of the Problem

The existing literature shows that workplace harassment has negative impacts on the health and wellbeing of victims. Particularly, there has been consistent reporting of the negative impacts that workplace harassment can have on psychological wellbeing of employees. There seems to be no doubt that symptoms of common mental health problems such as depression, anxiety and stress seems to be integral parts of the plethora of negative mental health consequences that WPH can have on employees in an organizational environment. However, theoretical arguments such as those from the theory of Salutogenesis and other popular theories such as the Job Demands-Resource Model (Bakker et al., 2005) suggests that employee's personal interpretations, beliefs and perceptions could serve as important resources that can help buffer employees against stressors

prevalent in the work place. In the case of Salutogenesis theory which is used in this present study, it identifies an individual's Sense of Coherence (SOC) as a major individual characteristic that can enable individuals to comprehend, manage and find meaning even in work environments where stressors are prevalent.

The ability of the SOC, as demonstrated in the literature, to help a person cope with and even thrive in the face of stress and adversity and the potential of WPH to affect psychological wellbeing of individuals raises certain questions regarding what then happens when SOC is present in a workplace where WPH occurs. The rational assumption would be that the presence of a strong SOC would likely either soften or prevent WPH from affecting PW in the way it does. However, this assumption would be superficial and simplistic considering that (1) empirical research testing this assumption is rare, (2) such assumptions may not account for the individual and collective roles of the different dimensions of WPH in affecting PW and, (3) whether the potential influences of SOC on the relationship between WPH and PW differs by dimension. However, despite the fact that a considerable amount of research attention has been dedicated to investigating WPH and its impacts on different employee and organizational outcomes, there appears to be a lack of insight into the dimensionality of WPH, its impacts on PW and the potential roles that resources such as SOC could play in this relationship. This lack of research insights into these relational dynamics between these important factors in the workplace, constitutes a gap in scientific knowledge and also bodes ill for potential interventions or assistance programming design. The present study was conceptualized, designed and carried put to try to contribute to efforts aimed at plugging this knowledge gap.

1.3 Aims and Objectives

The overall aim of this study was to investigate the potential relationships that exist between workplace harassment, Sense of Coherence and psychological wellbeing. Specific objectives were to:

1. Examine the relationship between workplace harassment and psychological wellbeing
2. Investigate whether the different dimensions of workplace harassment predict psychological wellbeing differently
3. Determine if Sense of Coherence might moderate the relationship between workplace harassment and psychological wellbeing.
4. Investigate whether Sense of Coherence has any role in how the individual dimensions of workplace harassment predict psychological wellbeing.

1.4 Significance of the study

The significance of this study lies in its provision of insight into the complexities and nuances of how the personal resource of Sense of Coherence helps explain the relationships that exist between workplace harassment, its dimensions and its relationship with psychological wellbeing. Most importantly, the findings provide insight into how the dimensions of workplace harassment individually and collectively predict psychological wellbeing. This insight, added to already existing literature deepens scientific understanding of the channels through which workplace harassment can influence employee and organizational outcomes. This insight can help inform guidelines regarding the design of interventions aimed at addressing WPH. With WPH seen by organizational researchers as one of the most pervasive risk factors for employee health and organizational success in the modern organizational arena, the findings obtained in this research may be valuable in helping address the canker.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The chapter describes and evaluates theory and empirical studies in the areas of workplace harassment and bullying, sense of coherence, and psychological health and distress. The chapter begins with a description and review of the sense of coherence theory, a core component of the salutogenic approach, and its application to the current study. The prevalence of workplace bullying and harassment within and outside the African continent is presented, while discussing methodological issues in the estimation of workplace harassment. Additionally, the consequences of workplace harassment/bullying and sense of coherence for psychological health and distress are covered. The review of related studies concludes with the sense of coherence as a potential moderator of the relationship between workplace harassment and psychological health.

2.2 Theoretical Framework

2.2.1 Salutogenic model: Sense of coherence theory

The sense of coherence theory provides a framework for understanding the relation among stress, coping, and health. Sense of coherence is a critical aspect of Aaron Antonovsky's (1979, 1987) salutogenic model. The term salutogenic comes from the Latin word *salus* and Greek word *genesis*, which means health and origin, respectively. The salutogenic model seeks to explain the origins of health and it adopts the orientation of health promotion. World War II and its aftermath significantly influenced Antonovosky's work. In particular, Antonovsky like Viktor Frankl was interested in how people survived living in Nazi concentration camps, which later led to his interest in less extreme situations such as daily hassles. This work is part of the movement away from the

pathogenic model which focuses on the causes of disease and focuses primarily on the prevention of disease.

There are two fundamental assumptions of the salutogenic model (Antonovsky, 1979, 1987). The first of the assumptions is that humans constantly encounter various stimuli that throw them into a state of imbalance (heterostasis). The other assumption is that inability to handle and cope with these stimuli results in the move toward disorder and disease (entropy). Any stimulus that elevates the entropy is defined as a stressor. In this regard, stressors were classified into broad categories: life events (e.g., death of a relative), chronic stressors (e.g., debility from diseases), and daily hassles (e.g., argument and harassment at work).

Coping is essential for obtaining adaptational outcomes. Adaptation is the extent to which life events and situations are responded to adequately and appropriately. Within the salutogenic model, there is the concept of generalized resistance resources that is relevant to coping. Generalized resistance resources include several factors such as material resources (e.g., money), knowledge (e.g., coping strategies), ego identity, intelligence, social support, and cultural stability. These resources allow a person, group, or society to effectively cope with and make sense of countless stimuli (Antonovsky, 1979). Over the course of one's life, through the repeated use of generalized resistance resources, the sense of coherence (SOC) emerges, albeit the relationship is bidirectional (Antonovsky, 1979; Idan et al., 2017).

Sense of coherence, which is the central concept in the salutogenic model and this thesis, is defined as

> a global orientation that expresses the extent to which one has a pervasive, enduring though dynamic feeling of confidence that: (1) the stimuli deriving from one's internal and external

> environments in the course of living are structured, predictable, and explicable; (2) the resources are available to one to meet the demands posed by these stimuli; and (3) these demands are challenges, worthy of investment and engagement. (Antonovsky, 1987, p. 19)

There are three important components of the sense of coherence in the definition: comprehensibility, manageability, and meaningfulness. These three components represent a coherent understanding a person has of the world. The sense of coherence is seen in holistic light, rather than as individual dimension (Antonovsky, 1987, 1993a). Thus, researchers have commonly used composite scores on the sense of coherence scale. However, there is evidence that supports a multidimensional view of the sense of coherence (e.g., Feldt et al., 2000).

Comprehensibility is cognitive in nature and refers to making sense of life events in a manner that brings order, clarity, and structure to these events (Antonovsky, 1979). Manageability refers to the perceived availability of resources to cope and deal with demands of life. The perception that the demands of life are worth one's commitment and investment is what is referred to as meaningfulness. The manner in which people construct their understanding of events in the world is crucial to coping and ultimately health and well-being. The sense of coherence is a rich resource for the promotion of health and well-being. A person who has a strong sense of coherence is cognitively and emotionally capable of organizing the nature of problems and is willing to face them (Antonovsky, 1992). On a continuum of health and disease, this person is likely to be on the healthy side. In addition, an unhealthy person with a strong sense of coherence is more likely to cope with illness better than a person with a weak sense of coherence. This person may struggle to cope with the illness, leading to a lack of improvement or possible exacerbation of their condition.

Antonovsky (1993b) notes that although the sense of coherence is central to the regulation of stimuli one encounters in life, the construct does not refer to a specific coping strategy for tackling problems. Instead, the sense of coherence refers to factors that facilitate coping with stressors. A stressor can be defined as any occurrence or event that has the propensity to induce stress (Lazarus, 1993). Stress is the product of the person-environment transaction, wherein the appraisal that environmental demands exceed a person's personal and social resources leads to the experience of stress (Lazarus, 1999).

The sense of coherence is thought to develop throughout childhood, adolescence, and young adulthood, after which—starting from the age of 30 years—it becomes relatively stable in the course of a person's life, barring any radical life event (Antonovsky, 1987; Sagy, et al., 1990). This position on the stability of the sense of coherence has received empirical support (e.g., Feldt et al., 2000; Forsberg, 1996). But there are studies that dispute the stability of the construct, with Volanen et al., (2007), for example, finding no stability of the sense of coherence over a five-year period, regardless of whether a person had an initially strong or weak sense of coherence. Moreover, a systematic review showed that the sense of coherence increases with age (Eriksson & Lindström, 2005).

In many studies, the sense of coherence is examined as a predictor of psychological health and distress (e.g., Pallant & Lae, 2002). Despite the argument that the primary purpose of the sense of coherence is not as a stress buffer variable (Antonovksy, 1993a), several studies have explored the stress buffering role of the sense of coherence (e.g., Jorgensen et al., 1999). This assessment of the sense of coherence applies to this thesis which investigates the stress-buffering potential of the sense of coherence in the relationship between workplace harassment and psychological well-being.

The experience of workplace bullying and harassment is unpleasant and is linked to a wide range of negative outcomes, including depression, anxiety, and stress (e.g., Gómez-Salgado et al., 2020; Pallant & Lae, 2002). Here, workplace harassment could be understood as a stressor due to its potential to cause stress to the victim. However, the development of stress or negative psychological outcomes is not merely a function of the nature of the stressor, its length and severity (McVie 2014; Mikkelsen & Einarsen 2002). Coping resources are important in determining whether a person progresses to negative psychological outcomes or not. The sense of coherence may buffer the relationship between workplace harassment and psychological health in such a manner that those who possess strong sense of coherence would experience little or no detrimental effect of the stressor on their well-being. As previously mentioned, those with strong sense of coherence tend to understand their problems and deal with them in an adaptational fashion. Thus, they should be capable of coping with workplace harassment. In contrast, persons with weak sense of coherence would struggle and this may lead to a heightened experience of the negative consequences of workplace harassment.

Despite the strength of the theory, there are some limitations. The first limitation relates to the stability of the construct, which has been already mentioned. Available evidence does not support the view that the sense of coherence stabilizes after 30 years (Eriksson & Lindström, 2005). However, this limitation is not relevant to the present study, as it does not explore this issue. Lazarus and Folkman (1984) have offered critiques of the concept of sense of coherence. One of the criticisms pertains to the sense of coherence as a global orientation to a person's experiences in life. They suggest that the concept implies a pattern of beliefs that are monolithic despite the fact that people's belief and assumptions about the world are often contradictory. However, this

belief may be unfounded, especially as the dimension of comprehensibility refers to threading life, which is suffused with complexities and conflicts, into a comprehensible whole (Griffiths, 2010).

In summary, the concept and theory of sense of coherence within the salutogenic model provides a way of understanding how the experience of workplace bullying and harassment affects people. In particular, the theory would predict that a stressor like workplace harassment would have less impact on persons with strong sense of coherence than those with weak sense of coherence.

2.2.2 The Challenge - Hinderance -Threat Framework

The mere mention of stress introduces the Challenge-Hindrance-Threat Framework (Tuckey et al., 2015). The theory posits that workplace stressors can be grouped into two categories. Hindrance stressors will interfere with performance or goals, while challenge stressors contribute to performance opportunities. These two categories of stressors are theorized to exhibit differential relationships with strain, with hinderance stressors being more consistently linked to psychological, physical or behavioral strain compared to challenge stressors. Research within the challenge-hindrance framework (Cavanaugh, Boswell, Roehling, & Boudreau, 2000) has, however, revealed that responses to work stressors, and in turn employee and organizational outcomes, differ according to the type of stressor being evaluated. Challenge stressors are "work-related demands or circumstances that, although potentially stressful, have associated potential gains for individuals", whereas hindrance stressors are "work-related demands or circumstances that tend to constrain or interfere with an individual's work achievement" (Cavanaugh et al., 2000, p.68).

Challenge and hindrance stressors show different relationships with key organizational criteria and measures of health and well-being, with the former having mostly positive effects and the latter having mostly negative effects (e.g., LePine, Podsakoff, & LePine, 2005; Podsakoff, LePine, &

LePine, 2007). The impetus for the challenge-hindrance distinction arose largely from an interest in resolving inconsistencies in relationships between work stressors and positive individual and organizational outcomes (e.g., development and challenge, Cavanaugh et al., 2000; job satisfaction, Podsakoff et al., 2007; performance, LePine et al., 2005; and work engagement, Crawford, LePine, & Rich, 2010). Perhaps because of this grounding, the potential for future personal harm/loss (i.e., threat to the self), does not feature in the challenge-hindrance framework. In this paper, we draw on this fundamental aspect of the transactional model of stress (Lazarus & Folkman, 1984) to advance knowledge of the dimensionality of work stressors and their appraisal. In this study, workplace harassment is viewed from both perspectives. It serves as a hinderance because empirically it's been proven to result in negative workplace outcomes including organizational-culture, long-term health and psychological impacts on employees, damage to worker integrity and a costly loss of skilled workforce (Feldblum &Lipnic, 2016). It has also been reported that being a victim of WPH can cause physical and psychological health problems, including anxiety, higher blood pressure, panic attacks, stress, trouble sleeping, ulcers, post-traumatic stress disorder, etc. (Gale et al., 2019; Marsh, 2009). Inversely, it motivates its victims to work hard at changing jobs either by advancing educationally or becoming an entrepreneur.

2.3 Review of Related Studies

2.3.1 Prevalence rate of workplace harassment

A large body of research in workplace harassment has revealed that it is common across different parts of the world. Most of these studies have been conducted in Western countries, particularly those in Europe, Australia, and the US. Estimates of the prevalence of workplace harassment, bullying, and other related constructs have been done using varied methods of estimation. The differences in estimation methods have implications on the reported prevalence rate of workplace

harassment. In a review conducted by León-Pérez et al., (2021), three methods of estimation were enumerated. These methods were self-labeling method (SLM), operative criterion method (OCM), and statistical criterion method (SCM). The SLM involves enquiring directly from respondents whether they perceive themselves as victims of bullying or harassment. The OCM is subtle (i.e., devoid of references to bullying and harassment) and requests from respondents to indicate how frequently and severely they have experienced a number of negative work acts. The SCM refers to respondents' scores on exposure to negative behaviors, and then uses a set of criterions to classify respondents based on their scores.

In addition to the use of different estimation methods, sociocultural and contextual factors influence prevalence estimates of workplace bullying and harassment. Individuals make use of existing cultural norms and societal contexts in making sense of their experiences (León-Pérez et al., 2021). In the sense making process, victims identify causes and severity of harassment, which ultimately influences the direction and magnitude of the reactions of victims (D'Cruz & Noronha, 2010; Samnani et al., 2013; Zabrodska et al., 2016). Sociocultural norms as they relate to nations, profession or sector, and gender are relevant in this regard. In this review, prevalence rates of workplace bullying and harassment will be presented, highlighting the nations and professions/sectors involved as well as gender differences.

Most studies about the prevalence of workplace bullying and harassment have come from Scandinavian countries, including Denmark, Norway, and Finland, where large, representative samples are commonly used. A meta-analysis conducted by León-Pérez et al. (2021) found that generally workplace bullying was lower in these countries (N = 15) than Mediterranean countries (N = 24; e.g., Spain, France, Italy, Greece, etc.). In a study conducted based on a random sample of Danish workers, Török et al., (2016) investigated whether depressive symptoms differed for

bullied respondents as a function of the type of perpetrator. The researchers used two data sources, namely the Danish Working Environment Cohort Study (DWECS 2010) and the Work and Health Study (WH 2012), which are cross-sectional surveys that cover issues pertaining to work environment, health, and safety. The DWECS 2010 and WH 2012 surveys were based on the Danish general population and working population, respectively. There was a total of 27,017 employed persons in both datasets. Out of this figure, 3543 which represents 13.1% labeled themselves as victims of bullying. In this study, self-labeling as a victim of bullying was one of the inclusion criteria and thus the non-bullied were excluded. After excluding based on other criteria such as not having a leader, self-employment, and assistance of spouse, there were 2478 individuals who self-identified as being bullied (DWECS 2010: n = 958, mean age = 43.4 years; WH 2012: n = 1520, mean age = 46.0 years). Assessment of exposure to workplace bullying was for a 12-month period.

In both surveys, there were more female bullied victims than male bullied victims. Some have suggested that men are less likely to report being bullied not only because they may feel weak by doing so, but they may feel less threatened by bullying behaviors because they perceive aggression to be acceptable. In terms of perpetrator type, for DWECS 2010, clients (41.5%) were the most reported perpetrators, whereas subordinates (4.2%) were the least mentioned perpetrators. The proportion of those bullied by colleagues and leaders was 30.5% and 23.8%, respectively. Work colleagues were the most commonly reported perpetrators, and subordinates, were the least commonly reported perpetrators. Reports of bullying by leaders and clients were 26.3% and 9.0%, respectively.

In terms of occupation, most of the bullied workers were from the social and health sector (DWECS 2010 = 23.9%, WH 2012 = 25.4%). Similar patterns of representation for the other

occupation sectors were observed. Specifically, for both survey data, industry, transport, and education and research sectors had the most bullied victims after the social and health sector (sectors are arranged in the order of frequency). Prevalence of victim bullies was lowest in the farm and graphical occupations; in the order the occupations are presented. The authors did not provide any reason for these findings, as this was not the focus of their paper. One explanation may be that occupations with high level of internal competition may report more workplace bullying (León-Pérez et al., 2021). Although this explanation is plausible for the education and research sector, it is unsuitable for other sectors such as transport and social and health. Perhaps sectors with frequent engagement with clients, one of the frequent sources of bullying in the study, increases the likelihood of experiencing harassment in these sectors. That being said, a major limitation of the study lies in the exclusion of respondents who reported multiple perpetrators from the WH 2012 survey. It is possible that their inclusion may have resulted in a different result. Another limitation pertains to the use of the self-labeling method. This method is subjective and does not account for the nature of behavior involved, while also failing to uncover the subtle gradations of bullying. Sociocultural norms may influence self-labeling and thus the approach used may have resulted in the exclusion of persons who experienced bullying but did not disclose it for whatever reason.

Unlike the Török et al. (2016) study which covered different sectors, Chatziioannidis et al. (2018) as part of the objectives of their study investigated the prevalence of bullying behavior in Greece. They used 20 neonatal intensive care units in 17 hospitals as the research setting. In total, there were 398 participants, including 160 (40.7%) physicians and 233 (59.3%) nurses. Different methods were used to estimate the prevalence of bullying. Specifically, participants were provided a definition for bullying and later asked whether they labeled themselves as victims of bullying.

This definition comes from the Negative Acts Questionnaire (NAQ-R; Einarsen et al., 2009), saying "bullying is a situation where one or several individuals persistently over a period of time perceive themselves as being the receivers of a series of negative actions, from one or more several persons, in a situation where the target of bullying has difficulty in defending him or herself against these actions. We will not refer as one-off incident as bullying". The second method was to categorize participants into whether they were victims of bullying using cut-off scores. There are 22 items on the measure and a response range of 1 (never) to 5 (daily), resulting in a total score of between 22 and 110. Participants who scored greater than or equal to 33 were regarded as victims of bullying behavior. The timeframe used for the experience of bullying was 6 months.

The prevalence of bullying was less when self-labeling rather than researcher-determined cut-off scores was used. For the self-labeling method, 27.9% regarded themselves to be victims of bullying. More male participants indicated that they were not bullied (n = 32, 64%) than bullied (n = 18, 36%). In contrast, more female participants indicated that they were bullied (n = 195, 56.4%) than not bullied (n = 151, 43.6%). Physicians (n = 53, 34%) labeled themselves more commonly as victims of bullying than nurses (n = 52, 23%). Using the cut-off score, 53.5% were estimated to be victims of bullying behavior. Female participants reported greater experiences of bullying than male participants. Estimates of the experience of bullying for physicians (53.1%) and nurses (53.6%) were similar.

In the meta-analysis previously mentioned (i.e., León-Pérez et al., 2021), studies from North America were also included. Prevalence rates from these studies (n = 14) were low, except those that used the Leymann criteria and samples from healthcare sector. Majority of the studies followed this pattern: self-labeling method (SLM), 7.6–19.4%; Leymann criterion method (LCM), 33.0–51.0%; and operative criterion method (OCM), 7.8–14.7%).

One of the studies in the meta-analysis was conducted by Lippel et al. (2016). This study examined psychological harassment (workplace bullying) using data from the Québec Survey on Working, Employment and Occupational Health and Safety Conditions. The survey was on working conditions. There were 5071 workers who were randomly selected for the study. Self-employed persons were excluded from the analysis. Questions that were specific to psychological harassment enquired about exposure, frequency, and perpetrators of harassment in the past 12 months. This study employed the self-labeling method, opening with the question "During the past 12 months at your current main job, were you subjected to psychological harassment, that is, repeated verbal harassment or actions that affected your dignity or personal integrity?" The prevalence of psychological harassment was 16.3%, which is a total of 496,000 workers. For these people, 32.3% of them reported that their harassment occurred frequently or very frequently. A greater proportion of women (18.9%) than men (13.8%) indicated that they were exposed to psychological harassment. Those who worked in the public or para-public sector reported more psychological harassment than those who worked in the private sector, regardless of whether the data was analyzed by sex or not.

Like the above study, Cullinan et al., (2020) found workplace bullying was higher in the public than private sector. This study was based on the data from the National Workplace Survey (NWS) conducted in 2009 among Irish employees and employers. In addition to the observed difference in workplace harassment, it was found that the negative consequences of workplace harassment were greater in the public sector. There were more employees absent from work in the public sector than private sector.

The results from Brunetto et al., (2016) were generally in line with the foregoing results. They studied nurses in private and public hospitals in Italy and Australia. For nurses in Australia, those

in public sector reported higher workplace harassment as well as lower satisfaction with supervision, engagement and psychological well-being than those in the private sector. Similarly, nurses in the public sector in Italy reported lower engagement and psychological well-being than nurses in the private sector. However, no difference was found in the experience of workplace harassment.

One explanation for lower prevalence of workplace harassment in the private sector relates to the ease of leaving one's job (Zapf et al., 2011). In the private sector, it is relatively easy to leave one's job. For example, when an employee faces persistent bullying in the accommodation and food industry, where short-term contracts may prevail, this person would find it easier leaving the job than if this person worked in healthcare service. There is greater job security in the health sector. However, the specific nature of the knowledge gained in the health sector (as a physician and nurse, for example) is not easily transferrable to the private sector should one decide to leave. In addition, moving within the same organization (e.g., being transferred) is not easy. Even when a nurse, for example, moves to another hospital, because information travels fast, his superior may receive biased information which could lead to the increased likelihood of experiencing harassment.

The difficulty of leaving one's job as well as frequent engagement with clients/public may help explain the finding in this study that psychological harassment was commonest among workers in the healthcare sector than the other sectors. The other sectors include accommodation and food, commerce, manufacturing, transportation, and education. Similar to the public versus private result, it did not matter the sex of workers. Transportation and education were the second and third highest reporters of psychological harassment, respectively. A limitation of the study lies in the

use of the self-labeling method which is likely to underestimate the prevalence of workplace harassment.

In another study, Fullerton et al., (2018) focused on emergency medical service providers—specifically local transport agency that provides transportation service to approximately 50,000 patients/years to six hospitals in the US. In this study, there were 155 participants (mean age of 33 years SD = 10) and the sex distribution was almost even (about 50% males). The study employed self-labeling and operative criterion methods. For the self-labeling method, participants were asked about whether they had experienced bullying over the past six years at least once a week, which was prefaced by the definition of bullying. For operative criterion methods, two approaches were used. First, scores of participants on Einarsen et al., (2009)'s Negative Acts Questionnaire (NAQ) was used to classify the bullying victimization status of participants using the cut-offs supplied by the original scale designers (i.e., Einarsen et al., 2009). Their cut-off points were based on a receiver operating characteristic (ROC) curve. For a score below 33, a participant is classified as unlikely to be a victim, while scores between 33 and 44 and those above 45 were classified as sometimes a victim of bullying and victim of bullying, respectively. The second approach was the Leymann criterion method (Leymann, 1990), in which a positive response to any of the 22 questions results in classifying a participant as a victim.

Using the self-labeling method, it was found that 10.5% of the participants identified themselves as victims of bullying. The use of cut-off scores yielded 33% of the participants classified as victims of bullying, but the Leymann criteria yielded a greater proportion of 51%. The findings with respect to gender were mixed. On the one hand, there was no gender difference in terms of the total proportion of participants that reported one or more types of bullying. On the other hand,

female participants scored higher on the total or composite bullying scores than their male counterparts.

Studies conducted in Asia have mostly focused on the healthcare sector. The meta-analysis used 13 studies and their prevalence estimates followed this pattern of results: SLM, 6.1–40.2%; and LCM/OCM, 14.8–18.5%. These rates are much higher than those from the studies based on American samples (León-Pérez et al., 2021). This is not surprising given that the Asian studies were conducted in the healthcare sector, where the prevalence of workplace bullying and harassment is substantially higher. One of such studies was conducted by Sun et al., (2017) in China with a sample of 2617 doctors. Unlike the studies reviewed thus far, this study employed the workplace violence (WPV) designed by Zhang et al. (2016). The measure has seven dimensions: verbal violence (e.g., abuse and sarcasm), made difficulties (e.g., unreasonable requests), smear reputation (e.g., slander), mobbing behavior (e.g., booing), intimidation behavior (e.g., oral or written threats), physical violence (e.g., biting and pushing), and sexual harassment (e.g., rape or rape attempts). Respondents rated their experiences on a scale that had "never", "rarely", "occasionally", "often", "frequently", and "every day". The responses "never" and "rarely" were coded as 0 while the rest were coded as 1. This coding process works in a similar manner like the Leymann criteria method (LCM). It was found that 83.4% of participants indicated that they had experienced one or more types of workplace violence within the previous 12 months. The prevalence of specific types of WPV were in this order: verbal violence (76.2%), made difficulties (58.3%), smear reputation (40.8%), mobbing behavior (40.2%), intimidation behavior (27.6%), physical violence (24.1%), and sexual harassment (7.8%). Gender differences were not tested in this study.

Compared to the study conducted by Sun et al. (2017), Yokoyama et al. (2016) analyzed their data for gender differences. This study was conducted among 825 nurses in Tokyo, Japan. The NAQ-R was used in the study. Participants' responses on the measure were dichotomized. Those who reported experiencing at least one of the 22 negative acts weekly or daily were classified as bullied, whereas the rest were classified as not bullied. Like Sun et al., this study follows the logic of the LCM, albeit with slight variation. One hundred and fifty-three (18.5%) were classified as bullied, which is substantially smaller than what was reported in Sun et al. There were 37 male and 785 female participants, a proportion that is reflective of the nursing field. Out of the 37 male participants, only 7 were classified as bullied. For the female participants, 145 were deemed to be bullied. This gender difference was not statistically significant. It may have been due to the small sample of male participants in the study.

Studies on the prevalence of workplace bullying and harassment are uncommon in Africa. The few exceptions include studies conducted in Ethiopia (Likassa et al., 2014), South Africa (Cunniff & Mostert, 2012), and Ghana (Amponsah-Tawiah & Annor, 2017). In the South African study conducted by Cunniff and Mostert (2012), a convenience sample of 13,911 participants from six sectors, including financial mining, manufacturing, government, academic, and call centers, was used. To assess workplace bullying, the researchers used a measure from the South African Employee Health and Wellness Survey (SAEHWS). The measure has four dimensions, namely direct bullying by supervisors, indirect bullying by supervisors, direct bullying by colleagues, and indirect bullying by colleagues. The items on each dimension were rated on a 4-point scale, ranging from 1 (never) to 4 (always). A score of 3 (often) or 4 was taken as an indication of workplace bullying. In this regard, the overall experience of workplace bullying was 4% and 31.1% for being bullied often and always, respectively. In terms of the individual dimension, the sample reported

being directly bullied often (20.5%) than always (7.9%). This result was similar to that of indirect bullying, in which 16.3% and 7.5% reported being bullied often and always, respectively. Bullying by supervisor was more frequent than by colleague overall, directly, and indirectly. The findings in terms of gender differences contradict those of the reviewed studies as well as other studies not reviewed here. Except for indirect bullying by colleague where the difference was not statistically significant (but was greater), male participants reported greater levels of being bullied on the three other dimensions of bullying. The authors surmised that the finding may be due to context. Here, gender differences may differ as a function of countries and thus in South Africa men may experience more bullying than women. The gender of the perpetrator is important here. The authors noted that same-sex harassment is likely to be higher. Given this and the fact that management positions in South Africa are filled predominantly by men, workplace harassment is likely to feature predominantly male-to-male workplace bullying.

Unlike the South African study, a Ghanaian study (i.e., Amponsah-Tawiah & Annor, 2017) used the widely used NAQ-R. However, the sample size was smaller. Specifically, the study was composed of 631 participants from diverse sectors (not stated specifically) in junior staff, middle management, and senior management positions. The researchers reported that 6.8% of the participants were victims of workplace bullying during the last 6 months. The estimation method is unclear, as the researchers did not explicitly state how the estimation was done. The correlation between gender and workplace bullying was statistically significant, indicating that female participants experienced greater workplace bullying than their male counterparts. The researchers did not explain this finding. Given that gender was a minor part of the study, it is unsurprising that no explanation was offered. Instead, they state that less research has been conducted exploring the issue. That being said and as previously indicated, men are likely to perceive negative and

aggressive acts as acceptable. This situation may translate into the lower reported prevalence of workplace harassment.

Darko et al. (2019) also studied a Ghanaian sample. Specifically, the researchers sampled 1273 workers from three public institutions in Ghana. Workplace bullying was measure using work harassment scale (WHS-24; Björkqvist & Österman, 1994), which is rated on a 5-point scale (0 = never to 4 = very often). Factor analysis was conducted, leading to the reduction of the items to 7. In this study, those with mean score of at least 3 were deemed to be bullied. Using this estimation method, a prevalence rate of 19.1% was found. The study found no statistically significant gender difference in workplace harassment. However, there was a statistically significant difference in workplace harassment as a function of occupational status. Specifically, it was found that junior staff members reported greater levels of workplace harassment than senior staff members.

The reviewed studies thus far have a common feature: the use of workplace bullying measures that were designed for the general working population. A few other measures assess workplace bullying within specific professional and occupational contexts. In this regard, McCormack et al. (2006) designed the first scale to assess workplace bullying for teachers (i.e., Negative Acts Questionnaire Reduced for Teachers (NAQ-R-T)). Other scales developed include the Psychological Harassment at Work for Nurses Scale (Fomés et al., 2008) and the Workplace Harassment Questionnaire for Finance and Service Workers (WHQ-FSW; Lee et al., 2016). The strength of these measures is that they tap into work-related experiences that are common features of the specific professions and occupational context being examined. Persons in the working population have different professional and occupation profiles and thus do not necessarily share the same experiences, which is how the generic measures assess workplace bullying and harassment.

2.3.2 Workplace harassment and psychological health

The experience of bullying and harassment at the workplace has implication for health. A large body of the literature on the consequences of workplace harassment has commonly examined various indices of psychological health as outcomes. Such studies have assessed the consequences of workplace bullying and harassment for psychological health outcomes such as depression (e.g., Kivimäki et al., 2003), anxiety (e.g., Reknes et al. 2016), suicidal ideation (e.g., Nielsen et al. 2015), and stress-related conditions (e.g., Laschinger & Nosko 2015). Other studies have assessed work-related outcomes such as job satisfaction, organizational commitment, and burnout and turnover intention (e.g., Bernstein & Trimm, 2016; Grevenstein et al., 2018). Aside psychological health outcomes, some studies have explored the implications of workplace harassment for physiological outcomes such as sleep disorders and musculoskeletal problems (Hansen et al., 2016; Lallukka et al., 2011). Quite audaciously, a few studies have researched into the potential contribution of bullying in the development of coronary heart disease (e.g., Kivimäki et al., 2003). In this section, the review of studies will be focused on the relationship between workplace bullying/harassment and psychological health.

Like the studies conducted on the prevalence of workplace bullying and harassment, majority of studies on its implications for psychological health have been conducted in non-African settings, especially in European and American countries. Many of these studies have assessed emotional aspects of well-being such as depression and anxiety. For example, Niedhammer et al., (2006) investigated the impact of exposure to workplace bullying on depressive symptoms. This study was based on survey data from the National Institute for Health and Medical Research (INSERM) in 2004, in which there was a large sample of 7694 employees (3132 men and 4562 women) in France who had at least 3 months of work experience. The average age of participants was 40

years. The Leymann criterion method was used for the estimation of the prevalence of workplace bullying. The results were stratified by gender. That being said, overall, more than 60% of the sample that were victims of bullying experienced depressive symptoms. In addition to exposure to bullying, observation of bullying and its implications for depressive symptoms was examined. This yielded mixed results for men and women. In particular, the highest prevalence of depressive symptoms was observed for women who were both victims and observers of bullying, but this relationship for men held only for those exposed to bullying.

In a Malaysian study conducted by Chan et al., (2019), the impact of workplace bullying on socioeconomic factors and psychological distress was examined in a large sample of 5235 participants (62.3% were females). These participants who were members of the general working population with average employment length of 6.17 years and aged between 18 to 85 years. A self-labeling method was used to assess workplace bullying, wherein the following statement was used: "I am subject to bullying at work'. Participants rated their response on a five point-response scale ("never", "seldom", "sometimes", "often", and "always"). Those who responded with "never" were classified as "never bullied", while the rest were classified as "ever bullied" For the measure of psychological distress (that is, Kessler screening scale (K6); Kessler et al., 2002), a cutoff score of greater than or equal to 13 was used to detect the presence of psychological distress. There were 2045 (39.1%) participants who indicated they were ever bullied. The findings showed that exposure to bullying was associated with greater odds of psychological distress (OR = 1.15, 95% CI 1.13–1.16). In terms of differences, persons classified as "never bullied" had statistically, significantly lower psychological distress than those classified as "ever bullied".

Bernstein & Trimm, (2016) studied a small, non-random sample of 100 white collar workers from a large construction company in South Africa in their examination of the impact of workplace

bullying on several psychological outcomes. These outcomes were psychological well-being, workplace self-esteem, job satisfaction, and turnover intention. Unlike some of the previous studies, the study only treated workplace bullying as a continuous variable. In this regard, bullying was positively correlated with psychological well-being and self-esteem. Here, higher scores on psychological well-being (as measured by the General Health Questionnaire (GHQ; Goldberg, 1972) and self-esteem (as measured by the Self-Esteem at Work Scale, Quinn & Shepard, 1974) indicate poorer outcomes. As such, greater exposure to bullying is linked with poorer psychological well-being and self-esteem. Workplace bullying was negatively associated with both job satisfaction and turnover intention, indicating that greater exposure to workplace bullying was related to lower job satisfaction and greater turnover intention.

In another South African study conducted by Nel (2019), the impact of workplace bullying on flourishing among 1102 workers in a higher education institution was investigated as well as the potential moderating role of emotional intelligence. The construct of flourishing subsumes psychological, emotional, and social aspects of well-being. The NAQ-R (Einarsen et al., 2009) was used to assess workplace bullying, finding that both its dimensions and composite were negatively correlated with flourishing. But these correlations were small, with the largest being -0.20. A regression analysis with workplace bullying (composite) as well as emotional intelligence statistically significantly predicted flourishing.

In Ghana, the literature on workplace bullying and harassment is limited. Only a few studies have explored the consequences of harassment. For example, Annor & Amponsah-Tawiah, (2020) examined the relationship between workplace bullying and subjective well-being. Subjective well-being was assessed with the WHO-5 well-being index, which is a measure of emotional functioning. The study had a total of 631 employees from different organizations in Accra, Ghana.

Similar to the South African study (i.e., Bernstein & Trimm, 2016), workplace bullying was treated as a numeric variable. After controlling demographic variables such as age, gender, job tenure and education, bullying negatively predicted the subjective well-being of participants.

In another study in Ghana by Darko et al., (2019) conducted among 1273 workers in three public institutions investigated the relation between workplace harassment and psychological distress, which was measured with the general health questionnaire (GHQ-12; Goldberg, 1988). Correlations between workplace harassment and psychological distress were .45 and .52 for men and women, respectively, meaning increases in workplace harassment leads to greater psychological distress.

The two Ghanaian studies (i.e., Amponsah-Tawiah, 2020 and Darko et al., 2019) did not specify the sectors from which the participants were employed. In contrast, Kumako, (2019) studied the oil and gas industry using 326 employees across three quantitative-based studies. The consequences of workplace bullying were investigated by assessing a variety of outcomes such as psychological distress, work attitudes, mistakes and errors, and turnover intentions. The results showed that workplace bullying was detrimental, leading to increases in mistakes and errors, turnover intentions, psychological distress, and poor work attitudes.

Longitudinal studies have been conducted to address the weaknesses from using cross-sectional designs. For instance, cross-sectional designs do not permit the disentanglement of reciprocal association. Indeed, past studies have shown that the relationship between exposure to workplace bullying and psychological health is bi-directional. For example, Reknes et al. (2014) investigated the relationship between workplace bullying and mental health problems (anxiety, depression, and fatigue) at two time points—that is, baseline (2008-2009) and follow-up (2010) with approximately one year difference. The longitudinal data used came from the Norwegian Survey

of Shiftwork, Sleep, and Health (SUSSH) which focuses on the health and work situation of nurses in Norway. As is expected in the nursing field, most of the participants were females (90.2%). Exposure to bullying at time 1, as measured with the NAQ (Einarsen et al., 2009), positively predicted anxiety and fatigue at time 2 but not depression, after controlling for anxiety, depression, and fatigue symptoms at time 1. When symptoms of anxiety, depression, and fatigue at time 1 were used as predictors, they positively predicted exposure to bullying behavior at time 2.

To disentangle the possibility of a bi-directional relationship, Loerbroks et al. (2015) used data from a three-wave study to study the relationship between workplace bullying and depression. Although questionnaires were sent to 1000 randomly sampled junior physicians working in hospitals in Southern Germany, only 621 of them participated at the three points. Time 1 (2004) was the baseline, time 2 (2005) was 1.2 years after time 1, and time 3 (2007) was 2.8 years after time 1. The self-labeling approach was used in the examination of workplace bullying. The results supported the bi-directional relationship between workplace bullying and depression. Being a victim of workplace bullying at the baseline (time 1) predicted depressive symptoms at time 2 and time 3. Depressive symptoms at baseline assessment (time 1) was associated with increased risk of bullying at time 3 but less pronounced at time 2.

Gullander et al. (2014) similarly conducted a longitudinal study to examine the relationship between workplace bullying and depressive symptoms. It differs from other studies in its assessment of workplace bullying. Specifically, a self-labeling approach and reports by witnesses about the occurrence and intensity of bullying at work-unit level were used. Participants were recruited from two Danish cohorts (i.e., the Workplace Bullying and Harassment cohort and Prisme cohort). Participants were assessed three times (2006 to 2007, 2008 to 2009, and 2011) with an approximately two-year interval between the examination points. There were 5198

respondents who participated in at least two points of assessment and were included in the study. These participants were affiliated to 1 of 455 work units, with the number of employees ranging from 1 to 161. A three-level variable for exposure to workplace bullying was created from participant's response (5 kinds of responses) to whether they had been victims of workplace bullying within the last 6 months. The "never" was categorized as "no bullying", whereas "now and again" and "monthly" were categorized "occasional bullying" and "weekly", and "daily" were categorized as "frequent bullying". For witnesses, there were four categories: 0, 1%-20%, 21%-30%, and over 30%. In total, there were 147 new cases of depression identified. Using the self-labeling method, it was found that those categorized as "occasionally bullied" and "frequently bullied" had odd ratios of 2.17 and 9.63 for new cases of depression, respectively. The odd ratio for depression for those who witnessed workplace bullying was 0.91, 0.81, and 0.89 for the 1%-20%, 21%-30%, and over 30% groups, respectively.

Some studies have examined the behavioral consequences of exposure to workplace bullying (e.g., Hansen et al., 2016). These outcomes include absenteeism and performance decline (e.g., Magee et al., 2017). From theories on revenge and response to perceived injustice (e.g., Moreno-Jimenez et al., 2009), one of the expectations is that experiences of bullying in a work context that supports and tolerates it could culminate in the withdrawal or disengagement of the efforts of the victim. Additionally, productivity may decline as a result of the victim shifting focus to avoiding bullying or thinking about how to respond. The evidence is, however, weak. In a meta-analysis study by Nielsen and Einarsen (2012), they found weak and non-statistically significant associations between workplace bullying and outcomes such as absenteeism and performance. There is the possibility that the relationship may be indirect, through the influence of psychological well-being. Psychological well-being as defined by Ryff and Keyes (1995) is characterized by autonomy,

environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. For instance, exposure to workplace harassment/bullying may lead to diminished autonomy and personal growth as well as negative relations with others, which in turn would lead to these behavioral outcomes. Therefore, the study of psychological well-being as an outcome of exposure to workplace bullying is important. However, as noted previously, the literature is dominated by studies that examine affective aspects of well-being, including depression, anxiety, and subjective well-being.

2.3.3 Potential moderating role of sense of coherence

Although exposure to workplace harassment is detrimental to psychological health, this effect is not only as a result of the length and intensity of the exposure. Appraisal and coping resources are also important. However, only a few studies have examined potential moderators of the relationship between workplace harassment and psychological health and related outcomes. These studies that have looked into individual characteristics and resources (both personal and organizational) that may buffer the effects of exposure to workplace harassment and bullying. Examples of individual characteristics and resources examined include resilience (e.g., Annor & Amponsah-Tawiah, 2020), coping style (e.g., Bernstein & Trimm, 2016; Reknes et al., 2016), emotional intelligence (e.g., Nels, 2019), sense of coherence (e.g., Nielsen et al., 2008), and organizational support (e.g., Livne & Goussinsky, 2018; Naseer et al., 2018).

Sense of coherence, which is the focus of the present research, has received much less attention as a moderator as well as an outcome of exposure to workplace harassment and bullying. Furthermore, studies on moderator of the harassment-outcome relationship are uncommon in the Ghanaian context. The study conducted by Annor and Amponsah-Tawiah (2020) which investigated the moderating role of resilience is one of the few exceptions. In this section, studies

that examine associations between sense of coherence and psychological health and related outcomes will be reviewed. Given that there are fewer studies that have explored the moderating role of the sense of coherence, this section will also examined moderators that are similar to the sense of coherence.

2.3.4 Sense of coherence and psychological health

From the salutogenic model proposed by Antonovsky (1979, 1987), the sense of coherence is important for the maintenance of psychological health in the face of stressful experiences. However, theorization about the sense of coherence is not limited to its stress-buffering effect. Instead, the sense of coherence has direct relation with mental and physical health outcomes. For example, Pallant and Lae (2002) studied the relationship between the sense of coherence and multiple outcomes. The original aim of their study was to examine the construct and incremental validity of the short-form of the sense of coherence scale (SOC-13). There were 439 community-based participants (average age = 37 years, 58% female) sampled for this study conducted in Melbourne, Australia. Partial correlations, wherein social desirability was control, were conducted between the sense of coherence and important psychological and physical health outcomes. The results showed that the sense of coherence was positively correlated with positive affect, life satisfaction, optimism, self-esteem, and mastery. In contrast, the sense of coherence was negatively correlated with perceived stress, negative affect, and physical symptoms (high scores mean greater physical symptoms).

Gómez-Salgado et al. (2020) examined the psychological distress and sense of coherence of health professionals in Spain during the COVID-19 pandemic. In total there were 1459 healthcare professionals who participated in the study. The sample was composed of psychologists,

physiotherapists, pharmacists, nurses, and physicians. A cut-off point was used to categorize participants into those with or without the presence of psychological distress. Gómez-Salgado et al. found that the sense of coherence was lower for those with psychological distress than those without psychological distress. The same outcome was found when the data was analyzed in terms of the type of care, which is primary and specialized care.

Grevenstein et al. (2018) were interested in mindfulness (i.e., "paying attention in a particular way: on purpose, in the present moment, nonjudgmentally"; Kabat-Zinn, 1994, p.4) and sense of coherence and their relation with psychological outcomes such as psychological distress, life satisfaction, and burnout (emotional exhaustion, cynicism, and personal accomplishment). Importantly, they examined whether the two variables of interest could predict the outcomes beyond the Big Five personality. To investigate this, 1033 participants (average age = 41.83, 75.2%) in Germany were sampled. A variety of strategies were used to recruit participants, including email list, flyers, and social media platforms. After statistically controlling demographic variables (age, sex, and education), meditation practice, and big 5 traits, mindfulness explained additional variance in the outcomes and predicted all the outcome variables. The inclusion of sense of coherence explained additional variance in the outcomes. All the outcomes were predicted by the sense of coherence but mindfulness did not predict psychological distress, life satisfaction, and cynicism. However, mindfulness significantly predicted emotional exhaustion and personal accomplishment.

Another study by Nilsson et al. (2010) investigated the relationship between sense of coherence and psychological well-being, as measured general health questionnaire (GHQ-12; Goldberg et al., 1998). The participants were 43598 respondents who were sampled in five Swedish counties, including Uppsala, Sörmland, Västmanland, Värmland, and Örebro. The average age of the

participants was 52.8 years. The results showed that the sense of coherence was negatively correlated with psychological well-being. Here, low scores on the measure of psychological well-being indicates higher levels of psychological well-being. In regard to the finding, higher levels of the sense of coherence are associated with higher levels of psychological well-being. In terms of gender, the sense of coherence and psychological well-being was higher among men than women. The sense of coherence and psychological well-being were stronger among older participants.

Moksnes et al. (2013) studied a relatively young sample compared to the previously mentioned studies. In their study, they recruited 1239 adolescents between 13 and 18 years from Norway to investigate the relation between the sense of coherence and life satisfaction. As was expected, the sense of coherence was positively associated with life satisfaction. Neither the interaction between age and the sense of coherence nor gender and the sense of coherence significantly predicted life satisfaction.

2.3.5 Sense of coherence and coping strategies

An important aspect of the sense of coherence as a buffer against stress, as articulated by Antonovsky (1992), lies in the choice of coping strategies. The sense of coherence itself is not a coping strategy. Instead, it is related to various kinds of coping strategies. Several studies have investigated how the sense of coherence relates with coping strategies. For instance, the previously described study by Pallant and Lae (2002) conducted partial correlations (controlling for social desirability) between the sense of coherence and a variety of coping styles. Dispositional coping was assessed using the abbreviated version of the COPE inventory (Carver et al., 1989). Importantly, the sense of coherence was correlated with some of the types of coping examined. In particular, the sense of coherence was positively correlated with problem-focused coping strategies such as active coping, planning, and seeking instrumental social support. In addition, the sense of

coherence was positively correlated with positive reinterpretation, which is an emotion-focused coping strategy. The sense of coherence was negatively correlated with behavioral disengagement, mental disengagement, and denial.

Pisula and Kossakowska (2010) investigated the association between the sense of coherence and coping strategies among parents of children with autism and parents of typically developing children. The differences in the sense of coherence and coping strategies between these two groups of parents was also examined. There were eight categories of coping strategies, namely confrontive coping, distancing, self-controlling, seeking social support, accepting responsibility, escape-avoidance, planful problem-solving, and positive appraisal. In total, there were 26 and 29 couples who were biological parents of children with autism and typically developing children. Overall, the sense of coherence as a composite and its individual dimensions were lower among parents with children with autism than their counterparts (i.e., control group). Importantly, the sense of coherence was positively correlated self-controlling (i.e., actively regulating one's feelings and actions) and seeking social support, which are positive patterns of coping, for both groups. The magnitude of the correlations was stronger for the control group. The sense of coherence was also negatively associated with accepting responsibility (i.e., recognizing that one's contribution to a problem and taking steps to address it).

Other measures of coping styles have been used in other studies. In a study conducted by Calandri et al. (2017), a scale specifically for coping with multiple sclerosis (see Pakenham, 2001) which had three dimensions (i.e., problem solving, emotional release, and avoidance) was used. The researchers examined the influence of coping strategies on adjustment, which was assessed in terms of depression, affective well-being (i.e., positive affect and negative affect), and health-related quality of life. The mediating role of the sense of coherence was investigated in this study.

There were 102 patients who participated in this study and they were recruited from a Multiple Sclerosis Clinic Center in Torino, Italy. Correlational analysis showed that the sense of coherence was positively associated with all the three coping strategies. The results in terms of the associations between the sense of coherence and the two coping strategies, namely emotional release (like catharsis) and problem solving, are in line with conventional knowledge about the adaptiveness of emotion-focused and problem-focused coping strategies. In contrast, the positive correlation between the sense of coherence and avoidance is surprising, deviating from what is expected. However, avoidance seems to be beneficial temporarily, helping individuals to turn off negative thoughts about the future progression of their conditions. This may be especially important in times of severe stress, wherein one's capability to actively control the outcome is unlikely. Perhaps this is the case for people living with multiple sclerosis. Looking at the relation between the sense of coherence and avoidance coping from the other direction (i.e., sense of coherence→avoidance), it could be said that a global orientation of a meaningful, comprehensible, and manageable life infuses a person with flexibility in selecting coping strategies that are suitable to encountered situations. Ultimately, this is beneficial to their well-being, as demonstrated in this study.

Kristofferzon et al. (2018) examined a similar relation as Calandri et al. (2017) did, except that in their study coping rather than the sense of coherence was the mediator. Their sample was composed of 292 patients who lived with chronic illness such as chronic heart failure, multiple sclerosis, stroke, and end-stage renal disease. They were patients from a regional and rural hospital in Sweden. In this study, emotion- and problem-focused coping were examined. In addition, the perceived efficiency of coping was an additional mediating variable. The outcome variable here was the mental health component of self-rated health. Correlation analysis showed that higher

sense of coherence was associated with greater use of emotion- and problem-focused coping and perception of coping efficiency. Interestingly, the correlation was stronger for emotion-focused coping than problem-focused coping. This suggests that in times of uncontrollable stress, emotion-focused coping is more adaptive.

2.3.6 Sense of coherence and related constructs as moderators

The moderating roles of the sense of coherence and other related constructs have been explained in varied settings. In the previous section, the studies did not focus on coping strategies in the workplace. The role of coping strategies in the context of workplace bullying and psychological health has been investigated. For instance, Reknes et al. (2016) investigated the differences between bullied and non-bullied people on the use of negative coping styles. In addition, Reknes et al. examined the moderating role of coping in the relationship between workplace bullying and anxiety symptoms. Data for the study was from the Survey of Shift work, Sleep and Health (SUSSH) that looked into the work situation and health status of nurses who were members of the Norwegian Nurses Organization. Data was collected at two different points, specifically in 2008/2009 (T1) and 2010 (T2). In total, there were 2059 and 1582 who participated at T1 and T2, respectively. Self-labeling method and researcher-determined methods were used in categorizing participants into bullied and non-bullied. In T1, the NAQ-9 was used. The coping style measure (i.e., Utrech Coping List) used has three dimensions (i.e., active problem solving, depressive reaction pattern, and avoidance and passive expectancy) but after factor analysis it was collapsed into a unidimensional scale that represented a continuum of passive and active coping. Coping strategy was only assessed at T1. The results showed that self-labeled victims of bullying were more likely to use passive coping style than their non-bullied counterparts. With regards to the moderating role of coping strategy, the benefits of active coping were limited to when exposure to

bullying was very low. Beyond this, the use of active coping was not beneficial, with its value diminishing in relation to the increasing intensity of workplace bullying.

From the Reknes et al. (2016) study, it can be gleaned that there are limits to the value of personal resources, at least in the context of workplace bullying. A similar result was found in a study conducted by Annor and Amponsah-Tawiah (2020). To test the potential protective role of resilience, Annor and Amponsah-Tawiah studied a sample of 631 workers across various sectors in Ghana. In particular, the study tested the moderating role of resilience in the relationship between workplace bullying and subjective well-being. The results showed that higher levels of resilience were associated with greater subjective well-being under low bullying. As bullying increased, the benefits of resilience diminished.

In one study conducted by Nielsen et al. (2008) that is directly related to this study than the previously mentioned studies. In the study, the role of the sense of coherence as a moderator was investigated. The relationship of interest in this study was that of exposure to workplace bullying and symptoms of posttraumatic stress. A sample of 221 employees participated in the study; they were recruited from two support associations for victims of bullying in Norway. The correlation between workplace bullying and posttraumatic stress was negative and moderately strong. Similarly, there was a moderately strong negative correlation between the sense of coherence and posttraumatic stress. For the moderating role of the sense of coherence, the results of Reknes et al. (2016) and Annor and Amponsah-Tawiah (2020) were replicated. Overall, posttraumatic stress was lower among those with high than moderate and low sense of coherence across different levels of bullying. However, posttraumatic stress increased as bullying increased for all the three groups. This suggests that the benefits of the sense of coherence is limited, especially in regard to exposure to workplace bullying and harassment.

2.4 Rationale of the study

The literature on workplace bullying and harassment has grown, extending beyond Western countries, especially those in the Scandinavian. However, there remain gaps in the literature. First, most of the studies on the prevalence of workplace harassment have been conducted in non-African context. In Ghana, one study conducted Amponsah-Tawiah and Annor (2017) reported a prevalence rate of 6.8%. The method for estimating the prevalence in this study was unclear. In addition, the study did not assess the relative prevalence of workplace harassment in private and public sectors. The nature of these sectors may impact the prevalence of workplace harassment. For instance, the relative ease of leaving of leaving a job in the private compared to the public sector may be implicated in prevalence statistics. Of course, prevalence may be determined by a more proximate factors such as job type (e.g., nurse and physician).

The second gap in the literature pertains to the lack of studies that have investigated buffers of workplace harassment. The few studies that have done so have explored individual characteristics such as coping style, emotional intelligence, and resilience, as well as organizational factors such as organizational support. In addition, studies that have examined the sense of coherence as a buffer of workplace harassment are limited (e.g., Nielsen et al., 2008). In the Ghanaian context, to the knowledge of the researcher, there is no study that has explored this. Appraisal of behaviors and actions as workplace harassment is influenced by sociocultural and contextual factors (León-Pérez et al., 2021). For instance, negative acts in some settings may be regarded as management tools, whereas in other settings they are perceived as unacceptable practices and workplace harassment (Escartín et al., 2009; Escartín et al., 2011). This study therefore aims at addressing the identified gaps in the literature. This is done through the study of workers from private and

public sectors in Ghana. In addition, the potential buffering role of the sense of coherence is explored.

2.5 Statement of hypothesis

Following from the study objectives, the following hypotheses are generated. These hypotheses are based on theoretical and empirical works reviewed in this thesis. There are three main hypotheses (i.e., 1, 2, and 4). The third hypothesis with sub-hypothesis is exploratory, as there was no strong basis in the literature for using the dimensions separately in the study. That being said, these dimensions are different aspects of workplace harassment that may differ in their impact on psychological well-being and thus it is important to examine this.

1. Workplace harassment will be higher in the public than private sector.
2. There will be a negative association between workplace harassment and psychological well-being
3. Dimensions of workplace harassments will be negatively related to psychological well-being
    a. Is there a negative relationship between work-related harassment and psychological well-being?
    b. Is there a negative association between defamation of character and psychological well-being?
    c. Is there a negative association between physical harassment and psychological well-being?
4. Sense of coherence will be positively associated with psychological well-being.
5. High sense of coherence will moderate the association between workplace harassment and psychological well-being

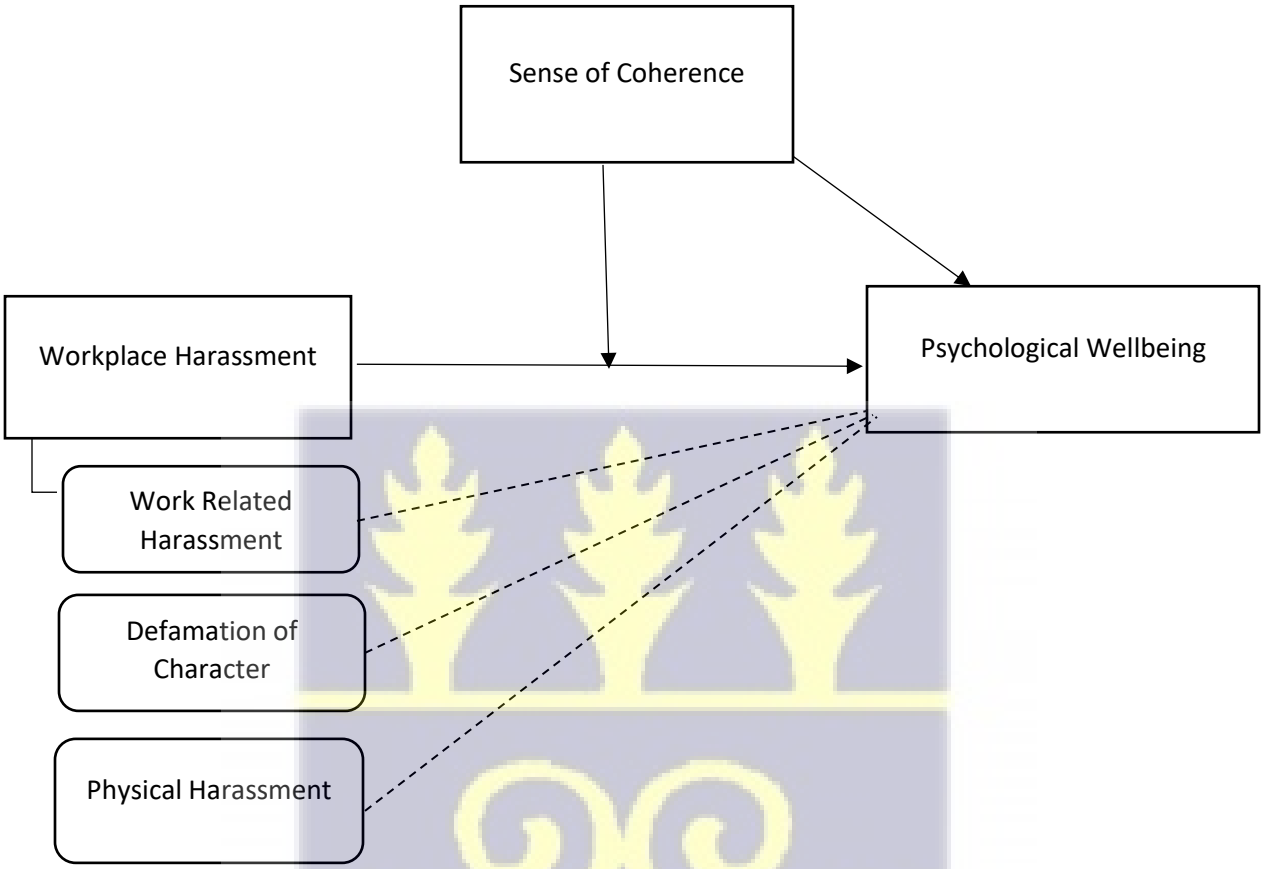

Figure 1: Hypothesized model

CHAPTER THREE

METHODOLOGY

3.1 Introduction

In this chapter, the methodological approach of the study and associated issues are described. The research design is described, in addition to the techniques and procedures for recruiting participants as well as the characteristics of the participants in this study. The procedures for data analysis are also described.

3.2 Research Design

A cross-sectional survey design was employed in the present study. The cross-sectional survey is a developmental design employed to compare individuals with different characteristics of a phenomenon, with a one-time data set. Data on variables are always collected at a single point in time. Surveys are widely used in psychological research to assess individual's thoughts, feelings, and opinions. In this study, participants responded to a questionnaire that principally assessed experiences of workplace harassment, sense of coherence, and psychological well-being. Since the research design was cross-sectional, data was collected from each participant at a single point in time—that is, participants responded to the questionnaire at only one point and their different characteristics were compared.

3.3 Sampling Technique

This study employed two sampling techniques, namely purposive and convenience sampling. With respect to the purposive sampling, individuals who worked in public and private sectors in Greater Accra region at the time of the study were sampled. These individuals were conveniently sampled. That is, those who were willing to participate were recruited. These participants were recruited

from multiple sites, including organizations within educational, health, agricultural, consumer goods, and manufacturing industries.

3.4 Sample Size

A total of 400 questionnaires were administered to both public and private sector workers. Out of this number, a total of 280 questonnaires were retrieved. The study followed the rule of thumb provided by Tabachnick and Fidell (2007) for multiple regression, which is $N \geq 50 + 8m$, (where m stands for the number of independent variables). The formula is based on the assumption that the size of the relationship between the independent and dependent variables are medium-sized, confidence interval is 95% ($\alpha = .05$), and power is 80% ($\beta = .20$). In the current study, there were only two independent variables and three control variables, so minimum sample size is 90. But for the exploratory hypothesis, m is 7, making the minimum sample size 106. In accordance to the above stated rule of thumb, the total number of 280 participants is above adequate for generalisation.

3.5 Sample characteristics

Characteristics of the sample is presented in Table 1. Males (n = 182) were more than females (n = 98), regardless of the type of sector. Participants in the age categories of 26-30 years and 31-40 years were in majority for both private and public sectors. In terms of education, the private sector had the greater number of participants with lower education. For example, 43.5% of the participants from the private sector had Senior High School education whereas only 9.5% had this same education in the public sector. In contrast, there were 21.4% participants in the public sector compared to 3.9% in the private sector. The participants from the private sector worked in positions (i.e., junior staff) within industries that low educational qualifications are generally common (e.g.,

manufacturing industry). There were more permanent staff from the public (57.9%) than the private (39.8%) sector.

Table 1. Socio-demographic and work characteristics

	Private Sector (*n* = 154)		Public Sector (*n* = 126)		Combined Sectors (*N* = 280)	
	n	%	*n*	%	*n*	%
Age						
18-25 years	27	17.5	18	14.3	45	16.1
26-30 years	47	30.5	30	23.8	77	27.5
31-40 years	46	29.9	56	44.4	102	36.4
41-50 years	24	15.6	16	12.7	40	14.3
51 years and above	10	6.5	6	4.8	16	5.7
Gender						
Male	103	66.9	79	62.7	182	65.0
Female	51	33.1	47	37.3	98	35.0
Education						
SHS	67	43.5	12	9.5	79	28.2
Diploma or HND	52	33.8	18	14.3	70	25.0
Bachelor's Degree	20	13.0	68	54.0	88	31.4
Master's Degree	6	3.9	27	21.4	33	11.8
Others	9	5.8	1	0.8	10	3.6
Industry						
Health	-	-	3	2.4	3	1.1
Education	21	13.6	21	16.7	42	15.0
Ports and shipping	2	1.3	21	16.7	23	8.2
Agriculture	4	2.6	58	46.0	62	22.1
Construction	1	0.6	-	-	1	0.4
Manufacturing	34	22.1	-	-	34	12.1
FMCG	92	59.7	-	-	114	40.7
Banking	-	-	1	0.8	1	0.4
Employee Type						
Permanent Staff	61	39.8	73	57.9	134	47.9
Temporary Staff	19	12.3	28	22.2	47	16.8
Contract Staff	74	48.1	25	19.8	99	35.4
Length of Service						
Junior Staff	139	90.3	80	63.5	219	78.2
Senior Staff	15	9.7	46	36.5	61	21.8

Note. FMCG: Fast moving consumer goods industry

3.6 Instrument

The questionnaire was in three parts (i.e., Part A, Part B, Part C, and Part D). Part A enquired about the socio-demographic and employee and employer information. The measure of workplace harassment was in Part B, while Part C and Part D had measures for sense of coherence and psychological well-being, respectively.

3.6.1 Workplace harassment questionnaire

In this study, the workplace harassment questionnaire (Lee et al., 2016) was used to assess harassment at the workplace. This measure was designed with principal focus on cases of harassment experienced by office and finance service workers. It has 20 items in total, and these items assess three domains of harassment: work-related harassment, defamation of character, and physical harassment. There are 13, 4, and 4 items for work-related harassment, defamation of character, and physical harassment, respectively. For the work-related harassment domain, a sample item is "I was assigned with work that could not be completed or had close deadlines (including work assigned just before leaving work)." Sample items for the defamation of character and physical harassment domains were "I was insulted with demeaning expressions regarding my appearance or behavioral characteristics" and "I was physically punished (including squat walk)", respectively. The items are responded to on a five-point scale that starts from (1) never to (5) always. The reliability coefficient for the entire measure was 0.93 when it was used among a sample of Korean workers from the finance and service sectors. Additionally, the measure demonstrated suitable validity. Higher scores on the measure indicate greater levels of workplace harassment. In this study, the observed Cronbach's alpha was 0.90.

3.6.2 Psychological well-being questionnaire

Psychological well-being was assessed using Ryff's psychological well-being scale (Ryff, 1989; Ryff & Keyes, 1995) which has six dimensions of psychological well-being: self-acceptance, autonomy, purpose in life, environmental mastery, personal growth, and positive relations with others. Items for these dimensions are: "When I look at the story of my life, I am pleased with how things have turned out so far" (self-acceptance); "I tend to be influenced by people with strong opinions" (autonomy); "Some people wander aimlessly through life, but I am not one of them" (purpose in life); "The demands of everyday life often get me down" (environmental mastery); "For me, life has been a continuous process of learning, changing, and growth" (personal growth); and "Maintaining close relationships has been difficult and frustrating for me" (positive relation with others). The long version of the scale (i.e., 42-item) has been used frequently by researchers. However, there is a shortened-version containing 18 items, and it is this version that is used in the present study. Respondents rate their responses on a seven-point scale, from 1 (strongly agree) to 7 (strongly disagree). Ten out of the eighteen items are reverse-scored. Higher scores on the measure indicate higher levels of psychological well-being. The scale was used among health workers in Pakistan and a Cronbach's alpha of 0.93 was recorded (Irshad et al., 2021). The present study observed Cronbach's alpha of 0.73.

3.6.3 Sense of coherence questionnaire

The sense of coherence was assessed with the sense of coherence scale (Antonovsky, 1987), originally designed as a 29-item but was later suggested that it can be reduced to 13-items. In this study, the 13-item version was used. Like the longer version, this version has three dimensions: comprehensibility (5 items), manageability (4 items), and meaningfulness (4 items). Sample items for these dimensions are: "Has it happened in the past that you were surprised by the behavior of

people whom you thought you knew well?", "Do you have the feeling that you are being treated unfairly?", and "Do you have the feeling that you really don't care about what is going on around you?" for comprehensibility, manageability, and meaningfulness, respectively. But Antonovksy (1987) argued that the scale is a single-factor solution, and that the dimensions are to be treated as such. That is, the scale should be used as a unidimensional measure of sense of coherence rather than using the subscale. However, some studies have found a three-factor solution instead (e.g., Feldt et al., 2000). The sense of coherence scale is used here as a unidimensional measure especially because there was no stated theoretical reason to separate the dimensions in this study. Ten items (i.e., 1, 2, 3, 5, 6, 8, 9, 10, 12, and 13) were reverse-scored so that higher scores reflect greater sense of coherence. Total scores ranged between 13 and 91. Cronbach's alpha for this scale was 0.71.

3.7 Procedure

Before the commencement of the data collection, an application for ethical approval for the study was made to the Departmental Research and Ethics Committee (DREC) at the Department of Psychology, University of Ghana (DREC/003/20-21). The questionnaire for the study was piloted after ethical approval was received. The measure for the study were designed in non-Ghanaian settings and thus it was important to pilot them before the main study. Pilots provide avenues for identifying potential challenges, which in turn helps the researcher to resolve them before the main study.

3.7.1 Pilot study

The pilot study was conducted in Greater Accra Region, involving the recruitment of 19 participants from private and public sectors. A sample size ranging from 10 to 30 is generally

recommended for survey research (Hill, 1998). The participants were recruited from private and public businesses and organizations the researcher was familiar with, and this facilitated the data collection. There were 6 and 13 participants who worked in private and public sectors, respectively. Most of these participants were from the health industry (n = 14). The age categories 18-25 years and 26-30 years had 6 participants each, while there were 7 participants for 31-40 years. There were 10 female and 9 male participants. These participants were mostly permanent staff (n = 10), followed by temporary (n = 8) and contract (n = 1). With the exception of the workplace harassment measure which had a reliability coefficient of .75, the other two measures had reliability coefficients that were below the generally acceptable value of .70. The reliability coefficients for the sense of coherence and psychological well-being were .42 and .53, respectively. The low reliability coefficient may have been due to the small size for the pilot study.

Observations were made in the pilot phase that impacted the conduct of the main study. First, the timeframe of 1 year (12 months) for the experience of workplace harassment was too short, leading to low report of work harassment. Conversations with a few participants after they had completed the questionnaire, it became apparent that a longer timeframe would reveal more cases of workplace harassment. As a result, this change was implemented in the main study. Specifically, a lifetime experience of harassment at the current workplace. Second, participants were unaccustomed to the response format which was somewhat confusing for some. In this response format, only the first (1) and last (7) response options were labelled. Changes were effected in the main study to address the two issues. First, the timeframe for work harassment was changed and made lifetime rather than 12 months. Second, all the response options were labelled, making it easier to the participants to understand.

3.7.2 Main study

Unlike the pilot study, the recruitment of participants for the main study was difficult, especially private sector. In total, 480 questionnaires were printed, with 300 and 180 distributed to the private and public sectors, respectively. As can be seen, many of the distributed questionnaires to the private sector (final sample size = 154) were lost. For the private sector, the questionnaires were distributed to organizations in education (i.e., pre-school), ports and shipping, agricultural, consumer goods, and manufacturing industries in the Tema Municipality, Greater Accra Region. In one of the organizations in the FMCG (manufacturing) industry, the Operations Manager collected the questionnaires to distribute to employees due to the organization's COVID protocols. Most of the questionnaires (67) were neither returned nor completed in this organization, making the researcher to recruit participants from another organization in the FMCG industry. The researcher distributed the questionnaire herself at the close of the work of the employees at this organization. Here the employees were asked to leave their completed questionnaires with the security man at the organization for the researcher to collect later. Overall, the data collection for the private sector industries lasted for approximately two and half months.

For the public sector, the researcher sent a letter of introduction from the Department of Psychology to organizations and institutions in the health (i.e., hospitals), education (i.e., senior high schools), ports and shipping, and agricultural industries in the Tema Municipality, Greater Accra Region. The researcher was granted approvals to recruit participants from these organizations within 1 month. Thereafter, the researcher sent the questionnaires to various offices. Some participants were unavailable to complete the questionnaire at the time it was distributed. Hence, the questionnaires were left with these participants while their numbers were taken. Overall, the data collection lasted for approximately four months. For data collected from

employees within both private and public sectors were entered at the end of the day of collection. There were a few missing data and they were replaced with the mean value of the variable of concern.

CHAPTER FOUR

RESULT

4.1 Data Analysis

Data analysis was conducted using the Statistical Product and Service Solution, (SPSS) version 23.0. Data were entered at the end of each day after receiving the completed questionnaire. The socio-demographic and employee information were analyzed, providing information about the frequency of different categories (e.g., male/female distribution) in the presented participant information. Pearson's Product Moment Correlation was conducted to test the relationships among various study variables, including socio-demographic variables, workplace harassment and its dimensions, sense of coherence, and psychological well-being. The hypothesis about the differences in workplace harassment in private versus public sectors was tested using the independent t test. To test the other hypotheses, multiple regression was conducted in three steps. In the first step, the socio-demographic variables (including age, gender, and employment type) were entered. Workplace harassment and the sense of coherence were entered in the second step. The interaction between workplace harassment and the sense of coherence was entered in third step. These were mean-centered interaction terms.

4.2 Ethical consideration

This study was conducted in accordance with the expected ethical guidelines for research. Participants were provided information about the purpose of the study as well as the procedures that would be involved in the study. They were also informed that participation was solely voluntary and that if at any point in time they decide not to participate, they are free to do so without any penalty. Finally, participants were assured that their information will be treated with confidentiality. This was done by informing them know that, there was no question requiring them

to provide their names. In addition, every single personal information about participants would be securely kept and would not be stated in the study nor be given out to a third party without seeking for permission.

4.3 Descriptive statistics

Information about descriptive statistics for workplace harassment, sense of coherence, and psychological well-being are presented in Table 2. Table 2 also contains the combined sample of employees in the private and public sectors. From this table, it can be observed that the skewness and kurtosis for the three main study variables are within the acceptable range of -3.00 and +3.00, -10 and +10 respectively (Brown, 2006). Inspection of the P-P plot revealed that data for the sense of coherence and psychological well-being were mostly on the diagonal line, from the bottom left to the top right (see appendices C). For workplace harassment, there was a slight deviation from the line. With the exception of workplace harassment which had a mean score less than the midpoint (i.e., 60.00), the mean scores for both the sense of coherence and psychological well-being exceeded their midpoint values. Even for the sense of coherence (*M* = 54.19, *SD* = 10.53), it was slightly above the midpoint (i.e., 52.00).

Table 2. Mean, standard deviation, skewness, and kurtosis

	Min.	Max.	Mean	Std. Deviation	Skewness	Kurtosis
WH	20.00	74.00	36.51	12.02	0.897	0.429
WRH	13.00	48.00	24.93	8.33	0.63	-0.19
DOC	4.00	17.00	7.30	2.76	0.97	0.56
PH	3.00	13.00	4.30	2.12	2.10	4.44
SOC	16.00	83.00	54.19	10.53	0.06	-0.05
PWB	57.00	122.00	94.15	13.87	-0.201	-0.62

Note. WH = Workplace Harassment; WRH = Work-related harassment, DOC = Defamation of character; PH = Physical harassment; SOC = Sense of Coherence; PWB = Psychological Well-being

4.4 Inferential Statistics

There were four hypotheses for this study, although there were additional exploratory hypotheses. The first hypothesis which concerned the differences between private and public sectors in workplace harassment was tested using the independent t test. In conducting this test, the assumption about whether the variance of the scores of the two samples is the same must be examined. The result from the Levene's test for equality of variances showed that the *p* value was greater than .05, indicating that variance is equal. Thus, there was no violation of the assumption. The test for differences in workplace harassment between private (M = 36.70, SD = 12.53) and public (M = 36.29, SD = 11.40) sectors showed no statistically significant difference, t (278) = .29, p = .39, one-tailed. The hypothesis that workplace harassment will be higher in public than private sector was therefore not supported.

The hypotheses about the relationship both workplace harassment and sense of coherence have with psychological well-being were tested using both Pearson's correlation and regression. Table 3 displays the correlations among the study variables. From this table, the relationship between workplace harassment and psychological well-being was statistically significant (r = -.28). Similarly, the relationship between the sense of coherence and psychological well-being was statistically significant (r = .28). These results indicate that higher levels of workplace harassment are associated with lower levels of psychological well-being, while higher levels of sense of coherence was associated with higher levels of psychological well-being. Therefore, the hypotheses have been supported. When the dimensions of workplace harassment and their relationships with psychological well-being was tested, all the dimensions these relationships were statistically significant (see Table 4). Therefore, the exploratory hypotheses were also supported.

	1	2	3	4	5	6	7	8	9
1. PWB	—								
2. Gender	-.01	—							
3. Age	.03	-.18**	—						
4. Education	.00	.14*	.26***	—					
5. Sector	-.01	.04	.03	.42***	—				
6. Employment Type	-.08	.00	-.40***	-.41***	-.26***	—			
7. Length of Service	.03	.11	.27***	.37***	.28***	-.36***	—		
8. Workplace Harassment	-.28***	-.18**	.00	.06	-.02	.05	-.01	—	
9. SOC	.28***	.19**	.07	.17**	.08	-.16**	.03	-.42***	—

Table 3. Correlation among workplace harassment, sense of coherence, psychological well-being, and other study variables

Note. SOC = Sense of coherence; PWB = Psychological well-being

*p < .05; **p < .01; ***p < .001.

Table 4. Correlations among dimensions of WH and PWB

	PWB	WH	DC	PH
PWB	—			
WRH	-.24***	—		
DC	-.24***	.74***	—	
PH	-.32***	.59***	.67***	—

Note. PWB = Psychological well-being, WRH = Work-related harassment, DC = Defamation of character, PH = Physical harassment; ***$p < .001$

4.5 Preliminary Analysis

Several preliminary analyses were conducted to ascertain whether assumptions for conducting regression analysis were violated or not. First, the correlation between the independent variables and the dependent variable were checked to determine whether the correlations were strong (preferably .30). From the correlational matrix in Table 3, there were two key relationships that were statistically significant. Specifically, there was a negative correlation between workplace harassment and psychological well-being (r = -.28). The sense of coherence was positively correlated with psychological well-being (r = .28). These findings provide support for the two hypotheses about the relations both workplace harassment and sense of coherence have with psychological well-being, although the hypotheses will be tested further with a multiple regression. The aforesaid relationships were marginally less than the recommended .30 for conducting multiple regression. Despite the apparent absence of statistically significant correlations, five predictor variables were included in the regression analysis (that is, age, gender, employment type, workplace harassment, and sense of coherence) to ascertain whether, together, they could explain the variance in psychological well-being. Another assumption concerns multicollinearity and one way of detecting this is by observing the correlations among the independent variables. It is generally not advisable to include independent variables with .70 or more correlations among them. From the correlation matrix, the correlations were lower than .70, with the highest being .42 and -.42, and these were between education and sector type as well as workplace harassment and sense of coherence, respectively. Additionally, there were no problems with tolerance and VIF, which indicates that there was no multicollinearity problem. The values for tolerance were greater than .10 while the values for VIF were less than 10.

The P-P plot for the residuals of psychological well-being were on the straight diagonal line, although there were slight deviations from at a few points (see appendix D). The scatter plots of standard residuals were distributed in an approximately rectangular manner. These provide evidence for normality of the distribution of residuals. The presence of outliers was not a problem from observing the scatterplot. Indeed, the maximum Cook's Distance was .04, which is less than 1, the cut-off point.

Regression analysis was conducted in three steps (see Table 5). In model 1 where the control variables were included, 1% of the variance in psychological well-being was explained, but this was not statistically significant, F (3, 275) = .65, p = .58. None of the control variables (age, gender, and employment type) made statistically significant contribution to explaining the variance in psychological well-being. In model 2, additional variance of 11% in psychological well-being was explained after the inclusion of workplace harassment and sense of coherence, ΔF (2, 273) = 16.71, p < .001. Here workplace harassment (β = -.20, p = .00) made a statistically significant contribution to explaining the variance in psychological well- being. Therefore, the hypothesis about the negative association between workplace harassment and psychological well-being is further supported. The sense of coherence also made a statistically significant contribution (β = .20, p = .00). Thus, the findings support the hypothesis about the positive association between the sense of coherence and psychological well-being.

The interaction term between the sense of coherence and workplace harassment was included in model 3, resulting in no addition in the variance explained in psychological well-being, ΔF (1, 272) = .5, p = .70. The interaction term was not a statistically significant predictor of psychological well-being (β = -.02, p = .70). Therefore, the hypothesis that the sense of coherence will moderate the relationship between workplace and psychological well-being was unsupported.

	Model 1		Model 2		Model 3	
	β	*t*	*β*	*t*	*β*	*t*
Age	-.00	-.04	-.02	-.27	-.01	-.23
Gender	.01	.19	-.06	-1.08	-.06	-1.07
Employment Type	-.08	-1.28	-.05	-.78	-.05	-.74
WH			-.20**	-3.18	-.21**	-3.14
SOC			.20**	3.18	.20**	4.96
WH × SOC					-.02	-.39
F	.65		7.12		5.94	
R^2	.01		.12***		.12	
Δ*F*			16.71		.15	
ΔR^2			.11		.00	

Table 5. Hierarchical multiple regression for predictors of psychological well-being

Note. WH = Workplace Harassment; SOC = Sense of Coherence, **p <. 01

Table 6 shows the results for the exploratory hypotheses about the dimensions of workplace harassment and their associations with psychological well-being. Like the previous multiple regression analysis, control variables (age, gender, and employment type) were entered into the first model. The results were the same as those in Table 5. In model 2 where the dimensions of workplace harassment were added, the variance explained was 14%, ΔF (4, 271) = .11.36, p <.001. Among the three dimensions of workplace harassment, only physical harassment (β = -.27, p < .001) made a statistically significant contribution to explaining the variance in psychological well-being. Therefore, only one of the exploratory hypotheses received support. Here too, the sense of coherence (β = .22, p < .001) predicted psychological well-being.

	Model 1		Model 2	
	β	t	β	t
Age	-.00	-.04	-.02	-.27
Gender	.01	.19	-.06	-1.08
Employment Type	-.08	-1.28	-.05	-.78
WRH			.02	.18
DOC			-.01	-.08
PH			-.27***	-3.54
SOC			.22***	3.53
F	.65		6.81	
R^2	.01		.15***	
ΔF			11.36	
ΔR^2			.14	

Table 6. Dimensions of workplace harassment as predictors of psychological well-being

Note.WRH = Work-related Harassment; DOC = Defamation of Character; PH = Physical Harassment; SOC = Sense of Coherence. ***p <. 001

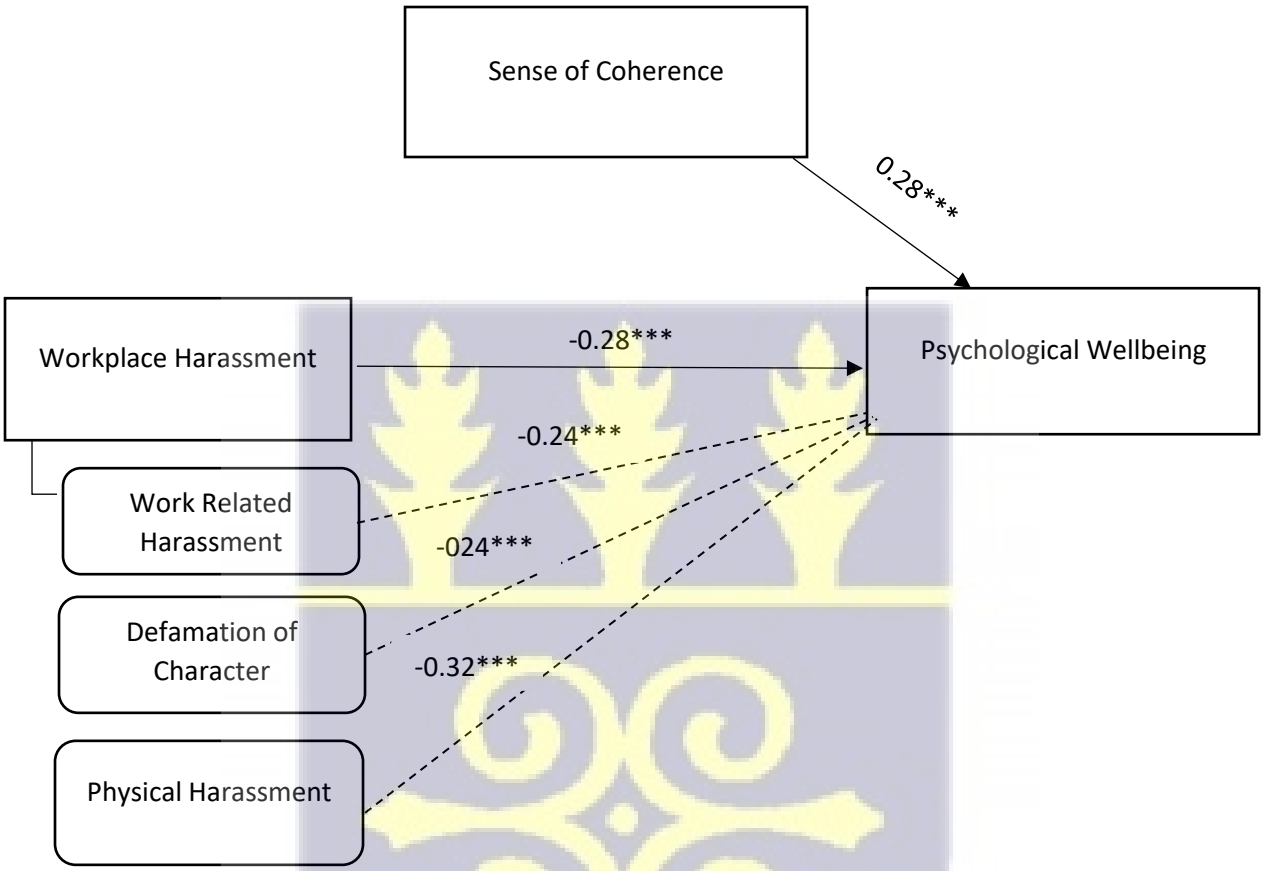

Figure 2: Observed model

CHAPTER FIVE

DISCUSSION

5.1 Introduction

The present study aimed at understanding workplace harassment and sense of coherence and their impact on the well-being of employees in Ghana. In total, there were five hypotheses, with one being exploratory as opposed to confirmatory. In terms of the confirmatory hypotheses, two were supporting. The results showed that workplace harassment was negatively associated with psychological well-being, while sense of coherence was positively associated with psychological well-being. The results for the confirmatory and exploratory hypotheses, both supported and unsupported, will be discussed in this chapter.

5.2 Differences in workplace harassment

The prevalence of workplace harassment thought to differ as a function of sector and industry type (Zapt et al., 2011). León-Pérez et al. (2021) argue that organizational context are proximate factors that may explain the differences in workplace harassment across nations, even better than national culture. In this study, the differences in workplace harassment between employees in the private and public sectors was explored. In particular, it was hypothesized that employees in the public sector will report higher exposure to workplace harassment than their counterparts in the private sector. Working in social, health, education, and public administration sectors which are within the public sector is associated with higher risk of workplace harassment (e.g., Fullerton et al., 2018; Sun et al., 2017; Venetoklis & Kettunen 2016). Zapf et al. (2011) argue that the difficulty of leaving jobs in the public sector compared to the private sector may be responsible for the quantitative differences in workplace harassment. This was the foundational basis for the formulated hypothesis in this study.

Contrary to what was expected, there was no statistically significant difference in workplace harassment between employees in private and public sectors. In fact, the mean score for employees in the private sector was marginally higher than that for the public sector. The non-significant result could be explained by considering macro-level influences on individual behavior. In particular, unemployment and socioeconomic challenges may provide a lens for understanding the finding (Giorgi et al., 2015). Unlike past studies conducted with samples from non-African settings where socioeconomic conditions are relatively better, in many sub-Saharan African countries high rates of unemployment and poor socioeconomic conditions persist. Quitting one's job under this social circumstance without an alternative job could have dire consequences for the person and family. Therefore, tolerance and acceptance of harassment at the workplace may be higher in such settings, regardless of whether it is in private or public sector. In both sectors, it is possible that employees may be accepting of harassment as they may see it as helping their career development and job stability (Yildiz et al., 2008).

5.3 Workplace harassment and psychological well-being

Previous studies have found that harassment at the workplace is detrimental to the well-being of workers (Laschinger & Nosko 2015; Kivimäki et al., 2003; Reknes et al. 2016). This finding has been reported based on different measures of well-being and health as well as cross-culturally (Annor & Amponsah-Tawiah, 2020; Bernstein & Trimm, 2016; Chan et al., 2019). As found in previous studies, a negative relationship between workplace harassment and psychological well-being was observed, both in Pearson's correlation and multiple regression analyses.

From the salutgoenic model (Antonovsky, 1979, 1987), humans constantly encounter various stimuli that throw them into a state of imbalance. This state of imbalance may manifest in poor health and well-being. Workplace harassment is a stressor that constrain the well-being of

employees, aligning with the stimulus approach to understanding (psychological) stress which stipulates that negative stimulus provokes psychological stress that places adaptational demands on individuals. Although the stimulus approach has been critiqued, particularly because of its failure to consider individual differences in appraisal and coping, it is relevant here and in line with one of the assumptions of the salutogenic model that is mentioned here.

The findings from testing the exploratory hypotheses about the dimensions of workplace harassment and psychological well-being were mixed. From the zero-order correlational analysis, the relations were in the predicted direction—that is, negatively associated with psychological well-being. However, when these dimensions were entered into a two-step multiple regression, physical harassment but not work-related harassment and defamation of character was a significant predictor of psychological well-being.

The findings about the dimensions of workplace harassment and psychological well-being highlight the potential role of the conceptualization or perception of workplace harassment by employees. The emergence of physical harassment as the only predictor of psychological well-being possibly suggests that the participants perceived physical harassment as harassment more than the other dimensions which are emotional and psychological. Indeed, there are cross-cultural variations in worker's perception of workplace bullying or harassment, as found by Escartín et al. (2011). Specifically, they found that workplace bullying was defined as psychological phenomenon by South European employees, while employees from Central America emphasized the physical nature of workplace bullying. Although these differences were found, they were not substantial between the two studied regions.

In addition, physical harassment is likely to be perceived as harassment with less ambiguity compared to the other dimensions. In contrast, "work-related harassment" could be deemed to be

a management tool in service of improving the employee and eventual promotion, for example. For instance, one of the excessive workload items "I was assigned with work that could not be completed or had close deadlines" may be understood in that manner. Moreover, the ease with which harassment is identified may differ depending on the cultural context. For example, workers at international call centers in India initially struggled to identify that they were being harassed (D'Cruz & Noronha, 2009). It was the persistence of this behavior that raised their awareness. In contrast, in Europe where the concept of workplace bullying or harassment has its roots, the threshold for the experience of harassment and individuals in such settings are likely to recognize harassment and complain about it (Einarsen, 2000).

Workplace bullying is defined by Keashly (1998) as "emotional abuse" which is characterized by the hostile verbal and nonverbal, nonphysical behavior. This definition may be more relevant in individualistic cultures where there is greater emphasis on emotions. In individualistic cultures, emotions are important because they provide feedback about the fit between one's needs and aspirations and the actual state of affairs (Firjda, 1986; Lazarus, 1991). Therefore, for persons in individualist cultures, emotions provide rich information about their psychological well-being. In collectivist cultures, cultural norms take precedence over maximization of pleasure (Rozin, 1999; Suh et al., 1998), leading to less attention being paid to emotional consequences of events. Defamation of character is verbal and emotional, with the potential of causing emotional distress to the victim. From this cultural perspective, defamation of character would have less influence on psychological well-being in collectivist settings, including Ghana. This is not to say that defamation of character is not influential. Indeed, the correlation with psychological well-being was significant.

5.4 Sense of coherence and psychological well-being

The sense of coherence was positively associated with psychological well-being in both zero-order correlational and regression analyses. This is consistent with findings from previous studies that have found that the sense of coherence is beneficial to health and well-being (Gómez-Salgado et al., 2020; Grevenstein et al., 2018; Pallant & Lae, 2002). Sense of coherence represent a coherent understanding a person has of the world. It has three components, namely comprehensibility, manageability, and meaningfulness. Comprehensibility is cognitive in nature and refers to the capacity to make sense of life events in a manner that brings order, clarity, and structure to these events (Antonovsky, 1979). Manageability refers to the perceived availability of resources to cope and deal with demands of life. The perception that the demands of life are worth one's commitment and investment is what is referred to as meaningfulness. The first component, comprehensibility, is a major component of the meaning in life questionnaire (Steger et al., 2006). Studies that have used this questionnaire have found that finding life meaningful has beneficial impact on well-being (Battersby & Phillips, 2016; Steger et al., 2009).

5.5 Moderating role of the sense of coherence

The stress-buffering role of the sense of coherence has captured the attention of researchers over the years. In the context of the present study, the impact of workplace harassment was seen as only a function of the extent of exposure to workplace harassment. Instead, coping resources are important in buffering the effects of stressors. In general, coping resources allow a person, group, or society to effectively cope with and make sense of countless stimuli (Antonovsky, 1979). In this study, the moderating role of the sense of coherence was not found, suggesting that the sense of coherence is irrelevant in the face of workplace harassment.

This finding raises questions about the role of coping resources in the context of workplace harassment. This may be explained using the challenge- hinderance-threat theory (Tuckey et al., 2015). Workers instead of seeing harassment as a threat or hinderance, they might have seen it as a challenge (positive stress) which motivated them instead of having a negative toll on them. Meaning that sense of coherence had no role to play in this situation.

Additionally, harassment at the workplace is unlikely to be a one-time event. Instead, harassment may be persistent. Persistent exposure to stressors could potentially deplete personal resources. The job demands-resources model (Demerouti et al., 2001; Schaufeli & Bakker, 2004) may be relevant here. It stipulates that when the demands of a job (in this case, dealing with harassment) is greater than one's resources can bear, negative consequences ensue. Another viewpoint which is consistent with the foregoing one is that individuals may cope better with initial occurrences of harassment until it becomes overwhelming. In this study, participants were asked about their lifetime exposure to workplace harassment. This timeline change could be the reason for not observing the buffering role of sense of coherence between workplace harassment and psychological wellbeing. This is because, the workplace harassment scale used during the main study did not allow attaining the period of time the harassment was experienced, possibly obscuring the buffering effect of the sense of coherence.

Findings from another research conducted in the Ghanaian context questions the buffering role of personal resource in the presence of workplace harassment (Annor & Amponsah-Tawiah, 2020). In that study, it was found that not only does resilience not buffer the relationship between workplace harassment and subjective well-being, it is counterproductive. It is counterproductive because it strengthens rather than weaken the relationship between workplace harassment and employee subjective well-being.

5.6 Contribution of the study

The present study makes contribution to the literature in the following ways. Generally, research on workplace harassment in sub-Saharan Africa is limited (León-Pérez et al., 2021). The nature and consequences of workplace harassment may differ across cultures. Even though workplace harassment tends to occur more in the public sector, this study found no differences between private and public sectors. The present study highlights the importance of societal circumstances, especially those pertaining to unemployment and economic development in the prevalence of workplace harassment in private and public sectors, even though this was not tested directly. In addition, the study provides insights into the role of personal resources in the face of workplace harassment. That is, there are limits to the stress-buffering effects of personal resources. This adds to the literature that questions that role of personal resources in the context of workplace harassment and employee well-being (Annor & Amponsah-Tawiah, 2020; Reknes et al., 2016).

Although exploratory, the study provides insights into the relative importance of physical dimension of workplace harassment as it pertains to the psychological well-being of employees. This may indicate that cultures differ in conceptualization of workplace harassment. Research exploring this is, however, limited (see Escartín et al., 2011).

5.7 Practical implication

Workplace harassment is a pervasive problem that is accompanied by significant costs. As shown in this research, exposure to harassment is associated with poorer well-being for employees. It is also associated with job-related outcomes such as job satisfaction and performance (e.g., Kumako, 2019). Moreover, bystanders or witness of workplace harassment suffer significant cost that include poor well-being and productivity (Hoel & Cooper, 2000; Vartia, 2001). Costs are not limited to individual level, but extend to the organizational level, impacting productivity and

revenue (Cullinam et al., 2020; Matthiesen & Einarsen, 2001). These consequences make important the design and implementation of interventions. Interventions should be sensitive to organizational and cultural contexts. In this regard, designers of intervention program should consider the local understanding of workplace harassment in their interventions. Although this kind of sensitivity is essential, it is also important to identify certain kinds of behaviors that constitute harassment, regardless of whether employees emphasized it or not. For example, de-emphasis of the emotional and psychological aspects of workplace harassment does not imply that it does not constitute workplace harassment. Indeed, a study that explored this found that the differences in the emphasis on physical and psychological dimensions of workplace harassment were not substantial between the regions studied (Escartín et al., 2011). Awareness creation about these dimensions should facilitate the detection of harassment at the workplace. Also important is the creation of an organizational culture that facilitates the report of workplace harassment. As seen from this study, personal resources have their limits. Persistent exposure to workplace harassment may potentially impinge employee well-being, regardless of their personal coping resources. Measures should be implemented to address workplace harassment when recognized and reported. That way, its persistence in organizations would be curtailed.

5.8 Limitations and suggestions for future studies

The study has some limitations. The design of the study was correlational which precludes causal inferences. For example, there is the possibility that psychological well-being influences report of exposure to workplace harassment. Perhaps employees with higher psychological well-being are optimistically biased and thus are likely to see more positives than negatives, leading to the underreporting of workplace harassment. Relatedly, the study design does not allow for investigating different stages of exposure to workplace harassment, the impact well-being as well

as the potential moderating role of the sense of coherence. Longitudinal studies would provide clarity on these situations. In particular, the use of experience sampling method wherein participants report their moment-to-moment daily experiences of workplace harassment, sense of coherence and well-being would be revealing.

The study employed self-report measures. The likelihood of socially desirable responses in studies that use self-report measures is high. Besides, the subjectivity of self-report could lead to the underreporting of workplace harassment, especially because participants may not consider certain behaviors to be harassment. The use of objective measures in conjunction with subjective measures should be considered in future studies. Suggested measures include peer nominations, observation by human resource staff, and in-depth interviews (e.g., Cowie et al., 2002; D'Cruz et al., 2016; Fox & Cowan, 2015).

Relatedly, the researcher's conceptualization of workplace harassment may have differed from that of participants. This has implications on the report of exposure to workplace harassment. In the future, qualitative studies that explore meanings of workplace harassment for employees in the Ghanaian context would be useful. This may segue into the design of scales for workplace harassment that are sensitive to the Ghanaian context.

In this study and the one conducted by Annor and Amponsah-Tawiah (2020), the outcome measures were not related to the workplace, although other studies (e.g., Kumako,, 2019) examined work-related outcome. These studies used both psychological well-being and subjective well-being and these measures are general in nature. Other studies in the Ghanaian context should explore work-related measures such as job satisfaction, work commitment, and work performance and the potential role of personal resources. It is possible, for example, that personal resources are useful in coping with harassment as it pertains to work-related outcomes. Perhaps because of the

monetary reward of maintaining one's employment status, people develop personal coping strategies to help them succeed at the workplace. Outside of the workplace, there may be diminished motivation to endure threats to one's well-being and thus reducing the effectiveness of personal coping resources. This idea could be explored in future studies by employing both work-related and non-work outcome measures.

5.9 Conclusion

Since the introduction of the concept of workplace bullying or harassment in the early 1990s, this phenomenon has increasingly captured the attention of researchers, particularly its negative implications for the well-being of employees (Giorgi et al., 2015). Most of the research in this area has come from European and North American settings. There are few studies from Africa. The prevalence of workplace harassment in private and public sectors in Ghana, finding that there was no difference in exposure for employees in these sectors. Like in other studies, the negative impact of workplace harassment on psychological well-being was found. In terms of the dimensions of workplace harassment, physical harassment was more influential in employee well-being. Moreover, the sense of coherence was directly beneficial to employee well-being, although it did not buffer the negative impact of workplace harassment on well-being. Overall, this study highlights the limits of the sense of coherence in the face of harassment at the workplace. This highlights the value of intervention programs for prevention of harassment. In designing interventions, they should be sensitive the context in which they are to be applied.

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APPENDICES

Appendix A: Questionnaire

UNIVERSITY OF GHANA

DEPARTMENT OF PSYCHOLOGY

This study is for academic purposes and your consent is required to participate. The study aims at examining how employees in Ghana's public and private sectors deal with workplace harassment and its psychological effects while leveraging on sense of coherence. My immediate aim is to collect data on the interactions public and private sector employees have on the job and how these experiences impact their health and well-being. Your involvement in this thesis research is entirely voluntary, and you will have complete freedom to leave at any time.

Any personal identifying information will not be required and your privacy and confidentiality are assured. If you need any further clarification, you can reach the researcher on 0245072137. If you are willing to participate, kindly fill this questionnaire about your personal views and perceptions of your organization. Please fill out each the pages until the end where it is stated "**END OF SURVEY"**. Specific guidelines and instructions are provided to guide you. Please do well not to skip any of the questions. There is no right or wrong answer, only respond accordingly to how the items reflect your personal views.

Please sign if you consent to participate

_____ _____

Signature Date

PART A

Employee Demographic information

Instructions: Please answer the following questions by ticking the appropriate box.

- Gender: Female [ ] Male [ ]
- Age: 18-25 years [ ] 26-30 years [ ] 31-40 years [ ] 41-50 years [ ] 51 years and above [ ]
- Highest Educational Qualification: SHS Graduate [ ] Diploma or HND Holder [ ] Bachelor's Degree [ ] Master's Degree [ ] Others [ ]
- Job Industry: _____
- Sector of Organization: Private Sector Organization [ ] Public Sector Organization [ ]
- Employment type: Permanent Staff [ ] Temporary Staff [ ] Contract Staff [ ]
- Length of Service: Junior Staff [ ] Senior Staff [ ]

PART B

Instructions: Please carefully read these statements and consider whether you ever feel this way about your career. Circle the number (from 1-5) that best defines how much you feel that way.

How often did you experience the following situations at your workplace?	**Never**	**Rarely**	**Sometimes**	**Very Often**	**Always**
(Q01) I was humiliated or yelled at in front of others.	[1]	[2]	[3]	[4]	[5]
(Q02) I was insulted with demeaning expressions regarding my appearance or behavioral characteristics.	[1]	[2]	[3]	[4]	[5]

(Q03) I was offended with swearing or sarcastic verbal abuse.	[1]	[2]	[3]	[4]	[5]
(Q04) I was threatened that I would be discharged or have a disadvantage for promotion if I did not obey orders.	[1]	[2]	[3]	[4]	[5]
(Q05) I was not invited for or treated as if I did not exist at meetings or social gatherings with colleagues.	[1]	[2]	[3]	[4]	[5]
(Q06) Someone talked behind my back or spread negative rumors about me.	[1]	[2]	[3]	[4]	[5]
(Q07) I was ordered to work on tasks that were not related to my qualification, skills, or experience.	[1]	[2]	[3]	[4]	[5]
(Q08) My work was replaced by menial tasks or I was rarely assigned jobs.	[1]	[2]	[3]	[4]	[5]
(Q09) I was not informed about important messages related to work or I was not provided with necessary equipment.	[1]	[2]	[3]	[4]	[5]
(Q10) I was forced to apologize or write apology letters for mistakes in my work or other happenings beyond my control.	[1]	[2]	[3]	[4]	[5]
(Q11) Stressful tasks or others' work were assigned to me.	[1]	[2]	[3]	[4]	[5]
(Q12) I was assigned with work that could not be completed or had close deadlines (including work assigned just before leaving work).	[1]	[2]	[3]	[4]	[5]

(Q13) I was forced to participate in meetings, events, and trainings regardless of my intention.	[1]	[2]	[3]	[4]	[5]
(Q14) I was picked on or got involved in arguments for small things.	[1]	[2]	[3]	[4]	[5]
(Q15) My work was monitored excessively.	[1]	[2]	[3]	[4]	[5]
(Q16) I was asked or it was checked in detail what I did outside of my working hours (including checking the CCTV and in-house bulletin board, and tailing).	[1]	[2]	[3]	[4]	[5]
(Q17) I was monitored and controlled for my appearance and the clothes that I wear.	[1]	[2]	[3]	[4]	[5]
(Q18) I experienced physical violence or threats (including threats imposed by throwing things).	[1]	[2]	[3]	[4]	[5]
(Q19) I was physically punished (including squat walk).	[1]	[2]	[3]	[4]	[5]
(Q20) I was sexually humiliated with words or actions.	[1]	[2]	[3]	[4]	[5]

PART C

Instructions: Circle the number 1-7 which represents your response for each statement. It indicates how often you have such experiences.

(1) Do you have the feeling that you really don't care about what is going on around you?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(2) Has it happened in the past that you were surprised by the behavior of people whom you thought you knew well?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(3) Has it happened that people whom you counted on disappointed you?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(4) Until now your life has had

Very unclear goals [1]	**Unclear goals** [2]	**Somewhat unclear goals** [3]	**Neutral** [4]	**Somewhat clear goals** [5]	**Clear goal** [6]	**Very clear goal** [7]

(5) Do you have the feeling that you are being treated unfairly?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(6) Do you have the feeling that you are in an unfamiliar situation and don't know what to do?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(7) Doing the things you do every day is:

A very deep source of pain and boredom [1]	**A deep source of pain and boredom** [2]	**A Somewhat source of Pain and boredom** [3]	**Neutral** [4]	**A somewhat source of pleasure and satisfaction** [5]	**A deep source of pleasure and satisfaction** [6]	**A very deep source of pleasure and satisfaction** [7]

(8) Do you have very mixed-up feelings and ideas?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(9) Does it happen that you experience feelings that you would rather not have to endure?

Very untrue of me [1]	**Untrue of me** [2]	**Somewhat untrue of me** [3]	**Neutral** [4]	**Somewhat true of me** [5]	**True of me** [6]	**Very true of me** [7]

(10) Many people, even those with a strong character, sometimes feel like losers in certain situations. How often have you felt this way in the past?

Very unoften of me [1]	**Unoften of me** [2]	**Somewhat unoften of me** [3]	**Neutral** [4]	**Somewhat often of me** [5]	**Often of me** [6]	**Very Often of me** [7]

(11) When certain events occurred, have you generally found that you:

Very much Overestimated or underestimated	**Overestimated or underestimated their importance**	**Somewhat overestimated or underestimated**	**Neutral** [4]	**Somewhat assessed the situation correctly**	**Assessed the situation correctly**	**Very much assessed the situation correctly**

their importance [1]	[2]	**their importance** [3]		[5]	[6]	[7]

(12) How often do you have the feeling that there is little meaning in the things you do in your daily life?

Very unoften of me [1]	**Unoften of me** [2]	**Somewhat unoften of me** [3]	**Neutral** [4]	**Somewhat often of me** [5]	**Often of me** [6]	**Very Often of me** [7]

(13) How often do you have feelings that you are not sure you can control?

Very unoften of me [1]	**Unoften of me** [2]	**Somewhat unoften of me** [3]	**Neutral** [4]	**Somewhat often of me** [5]	**Often en of me** [6]	**Very often of me** [7]

PART D

Instructions: Circle one response below each statement to indicate how much you agree or disagree.

1. “I like most parts of my personality.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

2. “When I look at the story of my life, I am pleased with how things have turned out so far.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

3. “Some people wander aimlessly through life, but I am not one of them.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

4. “The demands of everyday life often get me down.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

5. “In many ways I feel disappointed about my achievements in life.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

6. “Maintaining close relationships has been difficult and frustrating for me.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

7. “I live life one day at a time and don't really think about the future.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor	A little disagree	Somewhat disagree	Strongly disagree

			disagree			

8. “In general, I feel I am in charge of the situation in which I live.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

9. “I am good at managing the responsibilities of daily life.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

10. “I sometimes feel as if I've done all there is to do in life.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

11. “For me, life has been a continuous process of learning, changing, and growth.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

12. “I think it is important to have new experiences that challenge how I think about myself and the world.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

13. “People would describe me as a giving person, willing to share my time with others.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

14. “I gave up trying to make big improvements or changes in my life a long time ago”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

15. “I tend to be influenced by people with strong opinions”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

16. “I have not experienced many warm and trusting relationships with others.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

17. “I have confidence in my own opinions, even if they are different from the way most other people think.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

18. “I judge myself by what I think is important, not by the values of what others think is important.”

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

Appendix B: Ethical approval

DEPARTMENT OF PSYCHOLOGY
SCHOOL OF SOCIAL SCIENCES
UNIVERSITY OF GHANA

DEPARTMENTAL RESEARCH & ETHICS COMMITTEE (DREC)

9 June, 2021

Hilda Aba Ewure Abrabra
Department of Psychology
University of Ghana, Legon
Ghana

Dear Ms. Abrabra

Protocol number: DREC/003/20-21

Project title: Workplace Harassment and Psychological Wellbeing among selected Public and Private sector workers: Does Sense of Coherence Matter?

Full Approval–Committee Reviewed Protocol

In response to your application received on April 22, 2021, the Departmental Research & Ethics Committee of the Department of Psychology, University of Ghana has considered the above mentioned application and the protocol has been granted **Full Approval**

Any significant alteration(s) to the approved research protocol (i.e. **the Questionnaire/Semi-structured interviews, Informed Consent Form, Title of the Project, Research Approach and Methods)** must be submitted for review and approval prior to implementation. In case you have further queries, please quote the above reference number.

Note: Research data should be **securely stored** at an appropriate location and should only be destroyed after **5 years.**

This ethical clearance certificate is valid for only 12 months from the date of issue. Thereafter, re-certification must be applied for on annual basis.

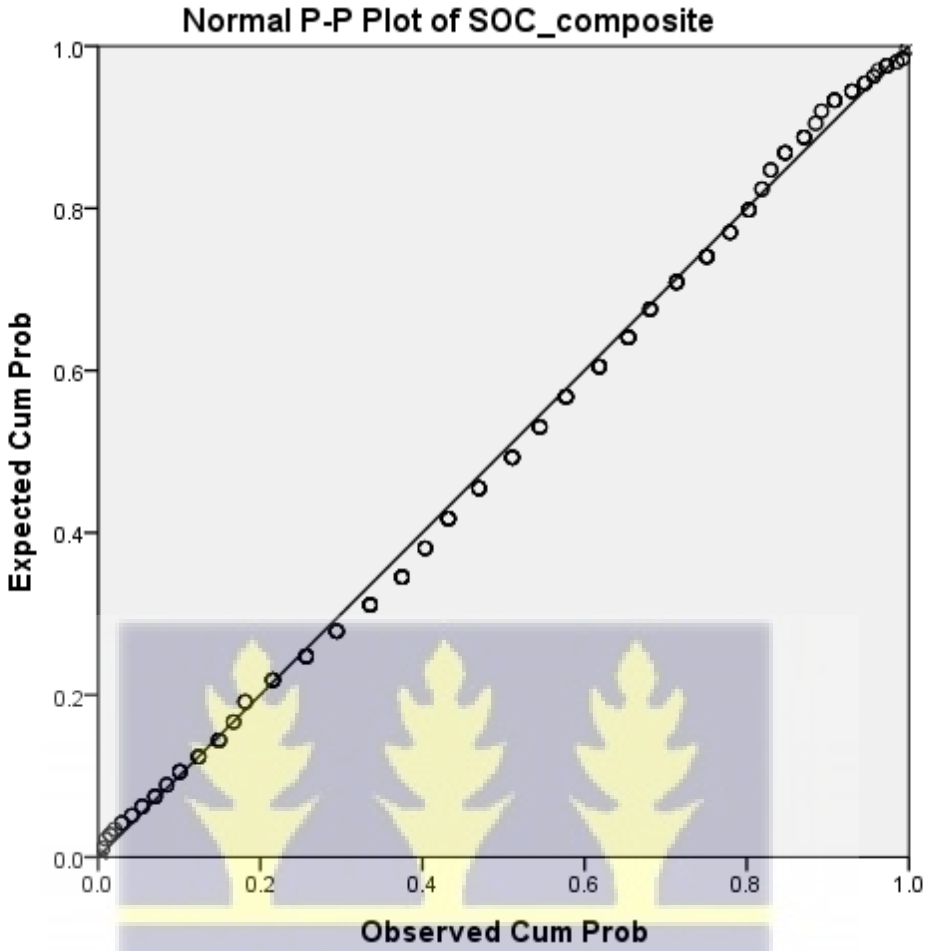
We take this opportunity to wish the very best in your research.

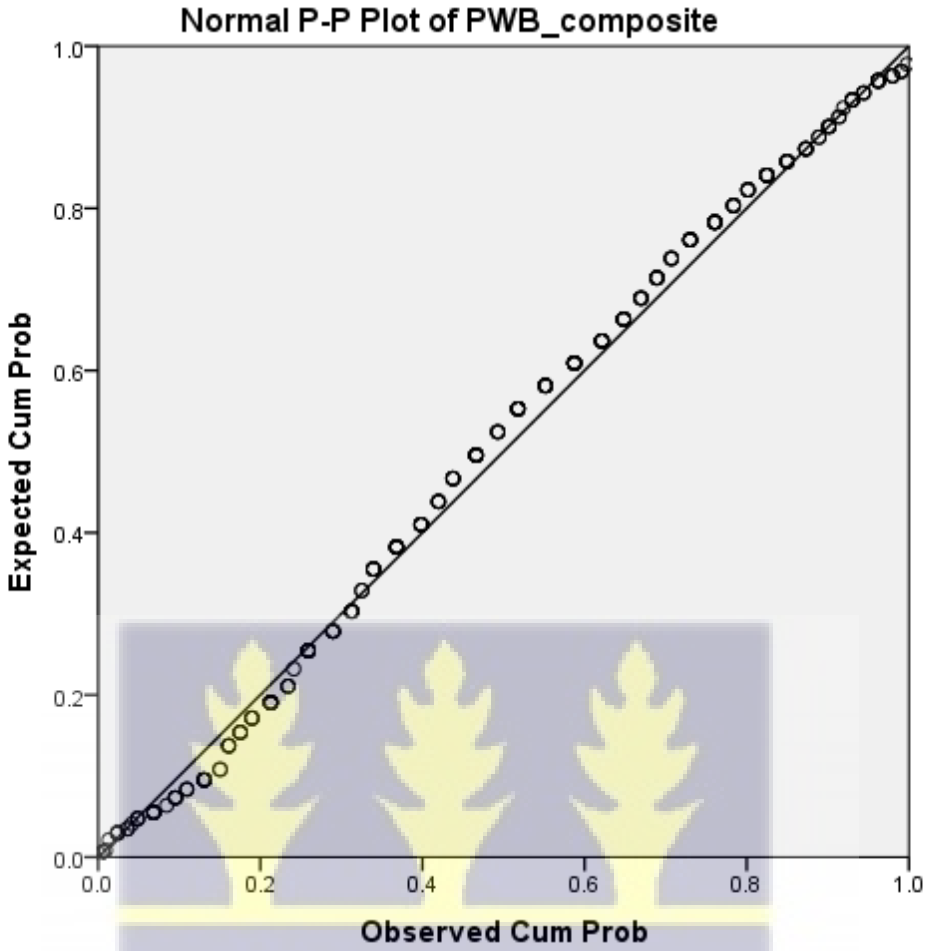
Yours faithfully,

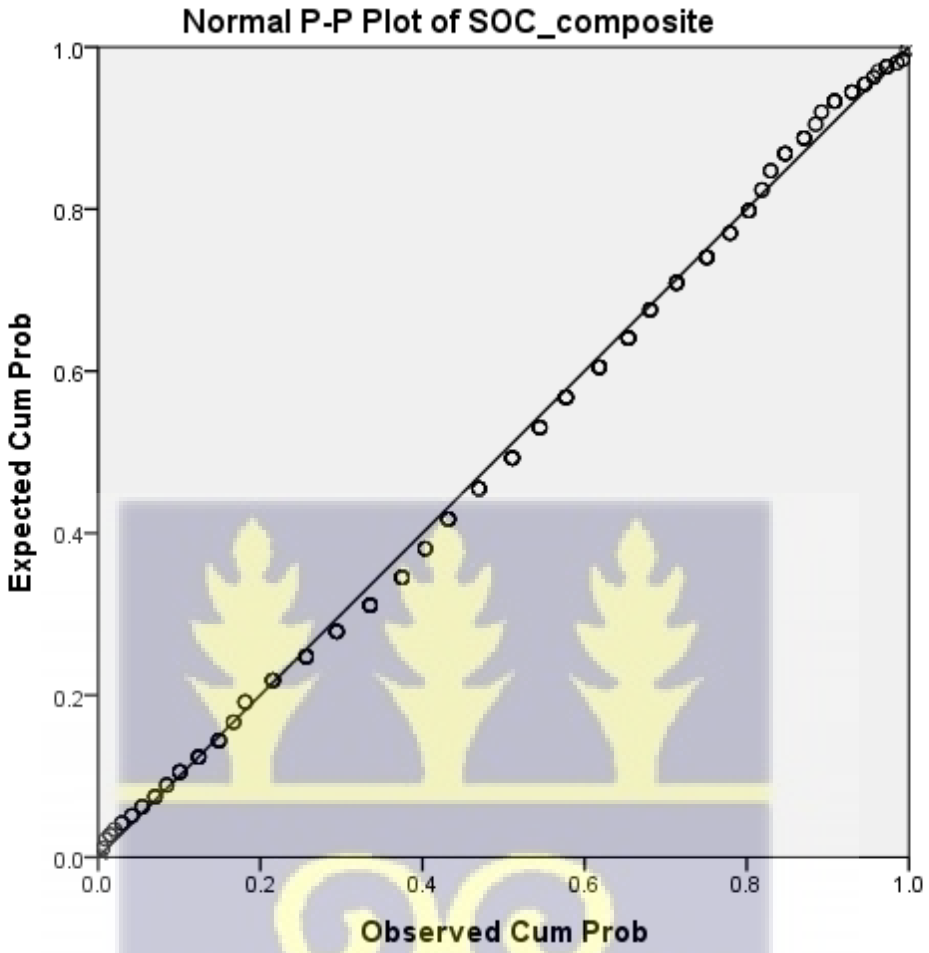
Annabella Osei-Tutu, Ph.D.
Chair, Departmental Research & Ethics Committee (DREC)

Cc: Prof. Joseph Osafo, Head, Department of Psychology, University of Ghana

Appendix C







Appendix E: Independent t test

Group Statistics

	Sector of Org. (PRSO=1, PUSO=2)	N	Mean	Std. Deviation	Std. Error Mean
WPH20	1	154	36.70	12.531	1.010
	2	126	36.29	11.400	1.016

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
WPH20	Equal variances assumed	2.292	.131	.287	278	.774	.416	1.446	-2.431	3.262
	Equal variances not assumed			.290	274.853	.772	.416	1.432	-2.404	3.235

Correlations

		PWB_composite	Gender: (Male=1, Female=2)	Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	Educational Level: (SHS=1, Diploma/HND=2, Bachelor's=3, Master's= 4, Others=5)	Sector of Org. (PRSO=1, PUSO=2)	Employment Type: (PS=1, TS=2, CS=3)	Length of Service: (JS=1, SS=2)	WPH20	SOC_composite
PWB_composite	Pearson Correlation	1	.013	.028	.002	-.005	-.083	.029	-.277**	.281**
	Sig. (2-tailed)		.829	.641	.979	.929	.166	.635	.000	.000
	N	280	280	280	280	280	280	280	280	279
Gender: (Male=1, Female=2)	Pearson Correlation	.013	1	-.178**	.136*	.044	.002	.111	-.178**	.189**
	Sig. (2-tailed)	.829		.003	.023	.467	.972	.063	.003	.002
	N	280	280	280	280	280	280	280	280	279

Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	Pearson Correlation	.028	-.178**	1	.258**	.031	-.401**	.272**	.002	.074
	Sig. (2-tailed)	.641	.003		.000	.600	.000	.000	.971	.215
	N	280	280	280	280	280	280	280	280	279
Educational Level: (SHS=1, Diploma/HND =2, Bachelor's=3, Master's= 4, Others=5)	Pearson Correlation	.002	.136*	.258**	1	.422**	-.410**	.367**	.062	.173**
	Sig. (2-tailed)	.979	.023	.000		.000	.000	.000	.301	.004
	N	280	280	280	280	280	280	280	280	279
Sector of Org. (PRSO=1, PUSO=2)	Pearson Correlation	-.005	.044	.031	.422**	1	-.256**	.278**	-.017	.076
	Sig. (2-tailed)	.929	.467	.600	.000		.000	.000	.774	.205
	N	280	280	280	280	280	280	280	280	279
Employment Type: (PS=1, TS=2, CS=3)	Pearson Correlation	-.083	.002	-.401**	-.410**	-.256**	1	-.356**	.048	-.154*
	Sig. (2-tailed)	.166	.972	.000	.000	.000		.000	.419	.010
	N	280	280	280	280	280	280	280	280	279

Length of Service: (JS=1, SS=2)	Pearson Correlation	.029	.111	.272**	.367**	.278**	-.356**	1	-.011	.032
	Sig. (2-tailed)	.635	.063	.000	.000	.000	.000		.859	.599
	N	280	280	280	280	280	280	280	280	279
WPH20	Pearson Correlation	-.277**	-.178**	.002	.062	-.017	.048	-.011	1	-.417**
	Sig. (2-tailed)	.000	.003	.971	.301	.774	.419	.859		.000
	N	280	280	280	280	280	280	280	280	279
SOC_composite	Pearson Correlation	.281**	.189**	.074	.173**	.076	-.154*	.032	-.417**	1
	Sig. (2-tailed)	.000	.002	.215	.004	.205	.010	.599	.000	
	N	279	279	279	279	279	279	279	279	279

**. Correlation is significant at the 0.01 level (2-tailed).

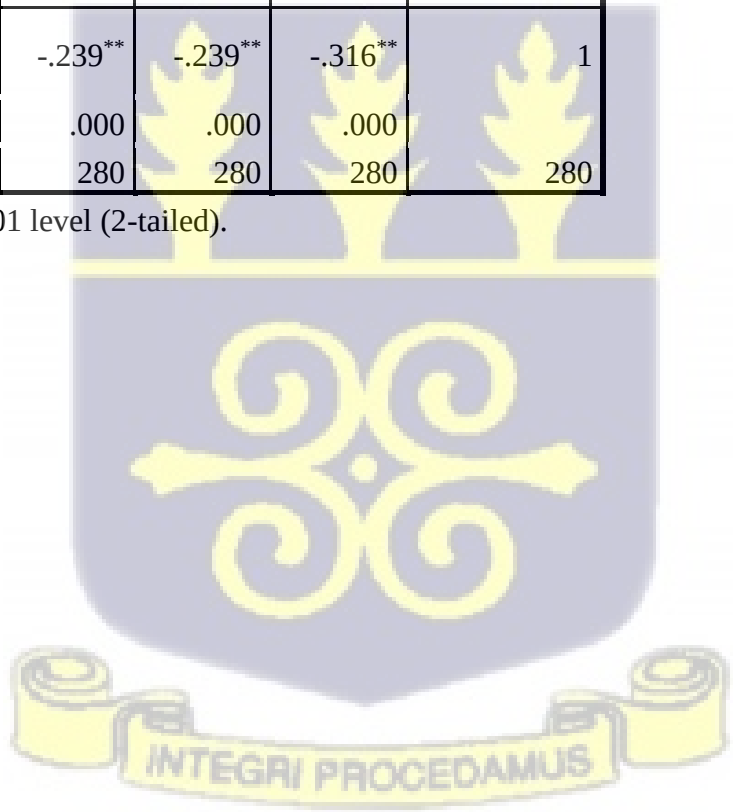
*. Correlation is significant at the 0.05 level (2-tailed).

Correlations

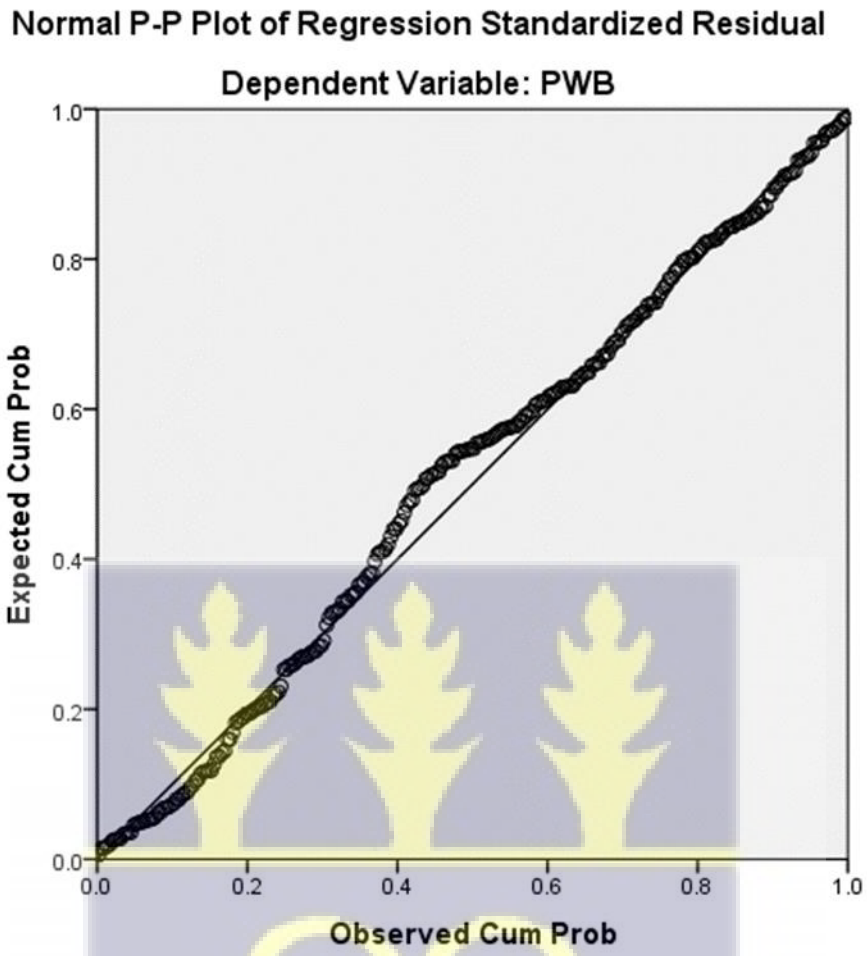
		WRH	DoC	PhyH	PWB_composite
WRH	Pearson Correlation	1	.744**	.588**	-.239**

	Sig. (2-tailed)		.000	.000	.000
	N	280	280	280	280
DoC	Pearson Correlation	.744**	1	.668**	-.239**
	Sig. (2-tailed)	.000		.000	.000
	N	280	280	280	280
PhyH	Pearson Correlation	.588**	.668**	1	-.316**
	Sig. (2-tailed)	.000	.000		.000
	N	280	280	280	280
PWB_composite	Pearson Correlation	-.239**	-.239**	-.316**	1
	Sig. (2-tailed)	.000	.000	.000	
	N	280	280	280	280

**. Correlation is significant at the 0.01 level (2-tailed).



Appendix D: P-P Plot for Residuals



Appendix xxx: Multiple Regression

Model Summary[d]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R Square Change	F Change	df1	df2	Sig. F Change	
1	.084[a]	.007	-.004	13.92287	.007	.651	3	275	.583	
2	.340[b]	.115	.099	13.18973	.108	16.711	2	273	.000	
3	.340[c]	.116	.096	13.21024	.000	.153	1	272	.696	2.045

a. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)
b. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5), WPH20, SOC_composite
c. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5), WPH20, SOC_composite, SOC_X_WH
d. Dependent Variable: PWB_composite

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	378.516	3	126.172	.651	.583[b]
	Residual	53307.749	275	193.846		
	Total	53686.265	278			
2	Regression	6192.752	5	1238.550	7.119	.000[c]
	Residual	47493.513	273	173.969		
	Total	53686.265	278			
3	Regression	6219.396	6	1036.566	5.940	.000[d]
	Residual	47466.869	272	174.511		
	Total	53686.265	278			

a. Dependent Variable: PWB_composite
b. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)

c. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5), WPH20, SOC_composite

d. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5), WPH20, SOC_composite, SOC_X_WH

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	96.188	4.638		20.739	.000
	Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	-.033	.857	-.003	-.038	.970
	Gender: (Male=1, Female=2)	.340	1.782	.012	.191	.849
	Employment Type: (PS=1, TS=2, CS=3)	-1.289	1.008	-.084	-1.278	.202
2	(Constant)	92.577	7.502		12.341	.000
	Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	-.218	.813	-.017	-.268	.789
	Gender: (Male=1, Female=2)	-1.870	1.731	-.064	-1.080	.281
	Employment Type: (PS=1, TS=2, CS=3)	-.747	.963	-.049	-.776	.438
	WPH20	-.232	.073	-.200	-3.181	.002
	SOC_composite	.268	.084	.203	3.181	.002
3	(Constant)	93.120	7.641		12.187	.000
	Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	-.186	.818	-.014	-.227	.820
	Gender: (Male=1, Female=2)	-1.854	1.734	-.064	-1.069	.286

	Employment Type: (PS=1, TS=2, CS=3)	-.712	.968	-.046	-.736	.462
	WPH20	-.241	.077	-.209	-3.137	.002
	SOC_composite	.259	.088	.196	2.949	.003
	SOC_X_WH	-.003	.007	-.024	-.391	.696

a. Dependent Variable: PWB_composite

Model Summary[c]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R Square Change	F Change	df1	df2	Sig. F Change	
1	.084[a]	.007	-.004	13.92287	.007	.651	3	275	.583	
2	.387[b]	.150	.128	12.97967	.143	11.355	4	271	.000	2.084

a. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)
b. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5), DoC, SOC_composite, PhyH, WRH
c. Dependent Variable: PWB_composite

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	378.516	3	126.172	.651	.583[b]
	Residual	53307.749	275	193.846		
	Total	53686.265	278			
2	Regression	8030.386	7	1147.198	6.809	.000[c]
	Residual	45655.880	271	168.472		
	Total	53686.265	278			

a. Dependent Variable: PWB_composite

b. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)
c. Predictors: (Constant), Employment Type: (PS=1, TS=2, CS=3), Gender: (Male=1, Female=2), Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5), DoC, SOC_composite, PhyH, WRH

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	96.188	4.638		20.739	.000
	Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	-.033	.857	-.003	-.038	.970
	Gender: (Male=1, Female=2)	.340	1.782	.012	.191	.849
	Employment Type: (PS=1, TS=2, CS=3)	-1.289	1.008	-.084	-1.278	.202
2	(Constant)	89.770	7.481		11.999	.000
	Age: (18-25yrs=1, 26-30yrs=2, 31-40yrs=3, 41-50yrs=4, 51 and above=5)	-.294	.801	-.023	-.368	.713
	Gender: (Male=1, Female=2)	-1.573	1.729	-.054	-.910	.364
	Employment Type: (PS=1, TS=2, CS=3)	-.829	.950	-.054	-.873	.383

WRH	.028	.155	.017	.182	.855
DoC	-.037	.472	-.007	-.079	.937
PhyH	-1.773	.501	-.271	-3.536	.000
SOC_composite	.296	.084	.224	3.527	.000

a. Dependent Variable: PWB_composite