Mental disorders due to work-related mobbing in Abruzzo: analysis of the phenomenon between 2003-2013

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Abstract

Introduction: the Authors have attempted to show the real effect in the Abruzzo region of mobbing incidents and work-related stress currently assessed in the insurance department handled by INAIL. For this propose, the evaluations completed by INAIL between 2003-2013 on the compensation claims for certain effects on the health of the employees stemming from conduct attributable to workplace mobbing have been examined.

Materials and Methods: all the results of cases submitted to the Medical Superintendent of the Abruzzo region from January 2003 to November 2013 were taken into consideration. The cases were subjected to the following diagnostic procedure: complete medical history, inspections of the workplaces, psychiatric visits, psychodiagnostic assessment.

Results: the total number of applications received in the period under review amounted to 226, of which 140 were by males and 86 were by females. It is evident that the prevalence of applications from males in comparison to females is due to the prevalence of male employment in our region. One-hundred and sixty requests have been examined and defined. At present, 66 of the 226 reported cases are still under investigation.

Discussion: work-related stress seems to strongly affect the working environment, activities, performance and life of people. When stress manifests itself in clinical form, it influences and affects not only the lives of individual workers but also those of colleagues and any company involved which manifests itself in repeated absences from work, low productivity, conflicts, increase in accidents at work. The effects on workers exposed to mobbing actions or, more generally, exposed to a stressful or hostile atmosphere that can lead to severe psychological distress, and therefore the onset of clear clinical situations, are of undisputed importance.

KEY WORDS: mobbing, occupational diseases, psychiatric disorders, work related diseases.

Introduction

Article 1 of the Italian Constitution, in addition to formally confirming the referendum results from June 2, 1946, affirms the ethical-social-political value of work as a basic element of the Republic itself. Through work, citizens can become participants in social life and express their potential, not only in productive ways but also in creative and proactive ways, for the interests of themselves and their community. The assignment of ethical and social value to work is a common asset of all modern societies which consider work to be a fundamental instrument for the affirmation of individual personalities, a way of participating in the economic and social development of the state and personal emancipation.

Even if work undoubtedly fills these positive roles, it has also represented a source of suffering to the extent that it can induce the onset of “occupational diseases,” pathological situations where the effect of work is not a “chance” accident but real strain on the body of the worker “diluted” over time. The rapidly changing world of work, technology, and materials used including the terms and time tables under which work takes place appears to foster the emergence of new and insidious illnesses sometimes far removed (in terms of symptomatic and functional manifestations) from the classic, universally acknowledged occupational diseases.

The new risks in the working world do not seem to be related to the classic, harmful environmental agents but rather to the changing physical conditions under which work is realized, including the uncertain nature of employment, from new forms of contracts to the organization of the production cycle, and, more generally, work-related stress.

Work-related stress, the result of modernization of the working world and the economic dynamics that affect
work itself, can be defined as the perception of an im-
balance experienced by the worker when the de-
mands of the work environment exceed the individual
skills needed to cope with such demands (1).
In 1936, the Austrian physiologist Hans Selye defined
stress as the “non-specific response of the body to
any demand made on it” (2).
Since then the concept of stress has evolved to further
explore the relationship between man and his environ-
ment: Richard Lazarus, for example, uses the term
“stress” to describe any particular interaction between
the body and the environment when environmental
demands are perceived by people to be excessive,
thus putting their own personal well-being at risk (3).
Article 3 of the European Agreement from October 8,
2004 – as acknowledged by the Interconfederal Agre-
ement of 9 June, 2008 – defines work-related stress
as “a condition that may be accompanied by disorders
or dysfunctions of a physical, psychological or social
nature and is a consequence of the fact that some
individuals do not feel able to meet the requirements or
expectations placed on them” (4). In the workplace
such an imbalance can occur, as already noted, if the
employee does not feel able to meet the demands of
work. However, not all manifestations of stress at work
can be considered “work-related stress”. Work-related
stress (organizational) is caused by various factors
specific to the context and content of the work.
On the other side of the coin is organizational welfare,
which should always be the highest goal.
This “can be understood as the ability of an organiza-
tion to promote and maintain the highest degree of
physical, psychological and social well-being of its
employees, but moreover, it is connected to a series
of organizational variables that complicate and, at
times, enrich the definition”. “In literature, there is a
broad consensus that the well-being of an organiza-
tion derives from a set of parameters which must in-
clude the organizational climate (the prevailing atmos-
phere surrounding the organization), the level of morale
and level of intensity of feelings of belonging, affection,
and good will that occur among employees” (5).
Climate appears to be crucial in influencing the atti-
dude of employees to focus on their work performance
and productivity, accidents caused by hu-
man error, employee turnover and neglect, discipli-
nary problems, increased medical expenses, damage
to the image of the company itself, absenteeism, etc.
(7).
Today, organizational stress – mobbing, bossing,
burnout and straining – represents the modern deter-
mining factors in the working environment and on the
health of the worker.
So much has been written about mobbing, and today,
in the scientific community, it is a part of the common
cultural heritage. This phenomenon is attributed to a
combination of moral and psychological violence car-
rried out over time against an employee in order to iso-
late the victim from the working environment. It is ca-
pable of inducing a state of psychological distress,
 marginalization and the onset of psychosomatic ill-
nesses due to intentional acts and repeated over time
(8, 9).
Mobbing – according to the concise definition of the
Constitutional Court “that complex phenomenon con-
sisting of a series of acts or oppressive behavior, pro-
tracted against an employee by members of the work-
ing group of which the employee is a part or by the
employee’s boss, characterized by an intent for perse-
cution and marginalization aimed at the primary objec-
tive of excluding the victim from the group” – is cov-
ered by the term “Uncategorized Occupational Dis-
eses” upheld by the law. Moreover, occupational dis-
ees are the pathological consequences and the pathogenic effect of mobbing (Constitutional Court.,
19 December 2003, no. 359).
Mobbing, therefore, is not an occupational disease but
an etiopathogenetic cause; it is a pathogenic factor attribu-
table to the workplace that is etiologically relevant to
the Consolidation Act.
In the “Mixed System” the pathological consequence
of mobbing, claimable as an injury of personal psy-
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chophysical integrity, is attributed to an uncategorized occupational disease. In this situation, in order to obtain any benefits payable, the employee must prove that the origin of their disease stems from the workplace. The employee is responsible to prove the causal relationship between their disease and their working conditions.

INAIL ultimately protects occupational risks arising also from “organizational dysfunction of work” when it results in an appropriate risk in qualitative and quantitative terms regardless of whether subjective responsibilities, whose proof is beyond the scope Institute, exist.

Some recent judgements (Trieste Appeal Court judgment of 06.10.2010, the Court of Ariano Irpino judgment of 01.12.2008) have differentiated the damage resulting from the action of mobbing as physical injury (covered by INAIL) and as “differential damage” (moral, existential, etc.) attributable to the mobber. In particular, the Court of Appeal of Trieste considered that what is relevant in the objective coverage of social protection is the working life of the subject and not the single and specific tasks to which he is assigned. Therefore, when it is possible to prove the professional etiology of any illness contracted during an employee’s working life (whether or not it is due to mobbing activities of the employer in violation of art. 2087 of the Civil Code), the employee is entitled to compensation from INAIL excluding any compensation from the employer if there is none assigned from “differential damages”.

In turn, the Court of Appeals of Rome (judgement of 12.12.2011) established mobbing behavior (demotion) through the employer and the subsisting contractual liability of the latter (Art. 2087 of the civil code) when it failed to adopt all appropriate measures to protect the health of the worker. The Court found that the physical injury should be covered by INAIL. For the Court, in fact, the concept of insurance for occupational diseases pursuant to art. 3 of consolidation act 1124/1965 is part of any risk associated with work, even if it is not specific risk and directly related to the employee’s tasks. Therefore harassment or any demotion suffered at work that has produced a stress-related disease for the employee is included.

Among the reasons, the Court has also “stressed” the presence in the jurisdiction of existential damage understood as an “injury done to an individual which causes a negative change and as a consequence, there is a disruption of life and, particularly, the lifestyle with alterations in the social life and relationships of the individual, both in external relationships and those within the family”.

Even the Court of Reggio Emilia (judgement of 16.11.2011) held INAIL directly obligated to compensate employees for physical injuries suffered in accordance with the provisions of Art. 13 in Presidential decree from February 28, 2000, n. 38.

The regulatory gap that unfortunately still characterizes these dramatically current issues seems to only be destined to find definition (as is often the case) in court.

Ultimately, the state and the legal situations (especially the court rulings) which have been defined so far – in reference to the question of who should be responsible for the compensation of damages resulting from physical injury due to mobbing behavior of the employer – do not really address the heart of the problem. The central argument equates the physical injury of mobbing to the physical injury referenced in article 13 of presidential decree 38/2000 and distinguishes “differential damages” from damages due to mobbing, allocating responsibility to INAIL furthermore, it retained that, as it is no longer the principle of a “Typical Disease Found in the Table” and it is “Typical of Work”, any disease etiologically connected with work must be compensated by INAIL.

Bossing is a variant of mobbing characterized by the goal of eliminating one or more undesirable people in accordance with to an organized business strategy accomplished by management personnel. This behavior, sustained over a period of time, turns out to be harmful to personal and professional dignity and the mental and physical health of the victim. Bossing or job-bossing is implemented by an immediate superior to a subordinate. It is a persecution programmed down to the details, often with the complicity of others, which aims to put a person in a position of having to be fired. The boss systematically implements aggressive behavior to achieve the desired objective. The practice of bossing appears to be the result of a desk-designed business strategy which is carried out with targeted and programmed behaviors. Burnout syndrome is the clinical manifestation of a process stressor that affects people who work in assistance professions; employees have a dual source of stress – stress due to personnel/staff matters and the stress of caring for or assisting another person. Burnout particularly affects doctors and other health professionals that revolve around patients including volunteers and students, those in emergency services, psychologists, social and religious workers, teachers, educators, etc. These professionals may be overloaded by the problems of people who they are looking after; they may not be able to discern the difference between their own lives and a developing marked emotional exhaustion, possibly leading to depression or suicide (10).

Straining only differs from mobbing in the way the harassment is implemented by the mobber. Straining is less focused on continuing harassment than, even if through segregation of the individual, causing demotion, disqualification, physical isolation and/or deprivation of workplace tools. All of these specifically stressful actions are able to cause the onset of severe psychosomatic disorders. Straining is not, therefore, actions repeated over time but specifically discriminating actions that the victim perceives as intentional and discriminatory with the objective of professionally disqualifying the victim (Court of Bergamo, judgement 21 April 2005, n. 286).

Group behavioural phenomenons identified by INAIL as work-related disease identifies an intermediate
area between the conditions of organizational stress and mobbing. The position taken by the Institute on the subject of mental illness caused by organizational/environmental conditions in the workplace has its legal basis in the Judgment of the Constitutional Court no. 179/1988 and Legislative Decree no. 38/2000 (art. 10, par 4 according to which they are considered professional illnesses, not only those listed in the appropriate tables, but also all the others which are shown to be caused by/at work). The notion of work-related causes provides insight into the harmfulness of operations in which the corporate production cycle is developed as well as any harm attributable to the business organization.

Mental disorders, therefore, will be considered of occupational origin only if they are caused or prevalently caused by specific and particular conditions of work activity and organization of work.

The list of diseases for which there is an obligation to report incidences, in accordance with article 139 of the consolidation act 1124, contains diseases related to work disorders (through mobbing) in List II (limited probability): Chronic Adjustment Disorders (AD) which lead to anxiety, depression, somatoform disorders, abnormal behavior and emotions and chronic posttraumatic stress disorders (PTSD chronic). As mentioned, these clinical conditions for employees complaining of mobbing will be assessed by the Institute only if it came about through workplace dysfunction. Contraversely, the Institute retains that it should not and could not assess cases related to subjective behavior that constitutes as harassment (whether sexual, verbal or physical) to the insured party common both in workplaces and in life.

Data collected in 1998 by the European Foundation for the Improvement of Living and Working Conditions on violence in the workplace showed that, in Europe, 8.1% of employees are victims of all kinds of psychological violence in the workplace (11). This percentage is equivalent to no less than 12 million European workers who report that they have been victims of mobbing.

Analyzing the research data in some of the EC countries, it appears that working victims of mobbing are 16.3% of the total workforce in Great Britain, 10.2% in Sweden, 9.9% in France, 9.4% in Ireland, 7.3% in Germany, 5.5% in Spain, 4.8% in Belgium, and 4.7% in Greece (Fig. 1).

According to estimates by leading national experts, currently, percentage of this phenomenon in Italy is between 4-6% of the workforce for a total of about a million to a million and a half people.

The purpose of this report is to highlight the actual effects of one of the manifestations of work-related stress by examining the evaluation that INAIL performed in the decade-long study (from 2003-2013) regarding compensation claims for specific effects on the health of the worker arising out of conduct involving mobbing in the Abruzzo region.

Methods and Materials

As mentioned in the introduction, risk factors for workers cannot currently be attributed only to the harmful-

![Figure 1 - Prevalence of the phenomenon in Europe.](image-url)
ness of the work, according to the classical standards of occupational medicine, but must take into consideration all situations of discomfort related to the organization of company work, “mobbing.”

In order to evaluate the incidence of these problems in the Abruzzo region, all the results of cases submitted to the Medical Superintendent of the Abruzzo region from January 2003 to November 2013 aimed at obtaining compensation for damages suffered through “mobbing” actions in the workplace were taken into consideration.

The cases under evaluation at the Centro Polidiano gnostico of INAIL by Regional Medical Superintendent were subjected to the following diagnostic procedure:

1) complete medical history with particular attention to employment activities carried out at the time of onset and the nature of any reported incidences and problems connected to the incidences, both in terms of repetition over time and in terms of intensity of the symptoms reported by the worker.

In particular, relationships with the employer were analyzed — those with the direct manager and those with co-workers and, in broader terms, relationships within the workplace;

2) inspections of the workplaces under evaluation;

3) psychiatric visits;

4) psychodiagnostic assessment
   - Personality Test (MMPI)
   - Assessment scales of psychiatric symptoms:
     a. HAM-D and HAM-A Ratings (evaluation of anxious-depressive symptoms)
     b. STAY Y1 and Y2 (evaluation of trait and state anxiety)
     c. SCL-90 (general psychopathological evaluation)
     d. DISS (evaluation of the degree of impairment determined by the mental illness under investigation in the three main sectors of life-work life, social life and family life).

The findings listed above have a diagnostic pathway suitable for establishing the presence of unhealthy, pre-existing (or concomitant), psychiatric situations from causes outside of work, the consistency and coherence of the situations reported, and any link between mental disorders and the denounced alleged aggressive actions.

All of this is in order to determine whether, and to what extent, the work history that the subject reports meets the requirements set out by INAIL and case law for being framed in an actual situation of moral harassment that can cause damage to the individual’s health.

INAIL believes it should exclude, in the assessment of risk protected, organizational/management factors related to the ordinary course of employment (reassignment, transfer, dismissal). Situations brought about by psychological and relational dynamics are common to work environments and those in life (interpersonal conflict situations, relationship difficulties or conduct which in any way relates to purely subjective behavior that, as such, lends itself inevitably to the discretion of interpretation).

Results

The total number of applications received in the period under review amounted to 226, of which 140 were by males and 86 were by females.

It is evident that the prevalence of applications from males in comparison to females is due to the prevalence of male employment in our region.

One-hundred and sixty requests have been examined and defined. At present, 66 of the 226 reported cases are still under investigation. In the future, standardization of implemented procedures will certainly lead to a reduction in the definition times of cases (which is already much less time than in the beginning) even though it predictably takes some time because of the uniqueness and complexity of each assessment.

The applications were subdivided by the home province of the worker. The different percentages evident among the provinces are in relation to the number of employees and their respective employment rates and not to a prevalence of a particular phenomenon in each of the four provinces (Fig. 2).

The province most affected by the phenomenon is that of Pescara with 31% of questions, followed by Chieti with 27% and L’Aquila with 25%. The province of Teramo stands out with only 17%.

As shown in other studies, situations of occupational stress seem to affect subjects 45 years or older and particularly the range between 45 and 55 are well-represented in our study, 47% of all cases (Fig. 3).

With regard to the level of schooling obtained by the employee, the data showed that a large percentage of them have a high school diploma (51%) or a junior high diploma (28%); the remaining 20% is in possession of either elementary school education (5%) or a university degree (16%) (Fig. 4).

The employment sectors most affected by dysfunctional working conditions appear to be in government (36%) and services (33%) (schools, banks, local health authorities, universities, post offices, etc.), followed by the industrial sector (24%) and those working in craftsmanship (7%). No worker belonging to the agricultural sector has ever complained of being a victim of mobbing (Fig. 5).

The tables on the “Origin of Business Sector” seem to accurately reflect the historical, economic and cultural characteristics of the four provinces. L’Aquila appears to be characterized by a high incidence of applications from the service sector and public administration (respectively 41 and 36%) with a low incidence of applications coming from the industrial and craftsmanship sector.

A comparable condition is found in the province of Pescara while in the province of Chieti and Teramo, complaints in the industrial sector appear to be rising as, respectively, 31 and 35% of applications are in this sector. Data concerning public administration appears constant in all provinces steadily amounting to above 35% with a peak of applications in the province of Chieti (38%).

The province of Teramo is characterized, in comparison to the other provinces, by a low count of applica-
tions in the service sector (20%) and a high level of incidences in the industrial sector (35%). The craftsmanship sector appears poorly represented in all the provinces of Abruzzo showing a peak of only 11% in L’Aquila (Figs. 6-10).

With regard to the type of actions suffered unfairly, 34% of subjects report threats and/or violence and psychological pressures (reprimands, yelling, unjustified criticism) while 35% reports a novation of tasks (demotion, work overloading) and finally, 31% of be-

Figure 2 - Percentage distribution of complaints by home province of workers.

Figure 3 - Distribution of complaints by age.
behaviors in cases are harassment (hostile atmosphere, attacks on the morality of the person, excessive controls), etc.

The overwhelming majority of cases (95%) allocated the unfair actions to their immediate superior.

The psychiatric pathologies caused, through application of the complex evaluation process already mentioned, have highlighted, respectively:
- adjustment disorder (DDA) in 70% of the cases;
- anxiety disorder in 19%;
- mood disorders in 5%;
- personality disorder in 3%;
- other psychiatric disorders in 3% (Fig. 11).

About 40% of the insured individuals reported having lawsuits filed against them by their employer and that they were laid off or about to be.

In order to assess how legislation for the protection of workers against risks arising from abnormal organization, stress and mobbing in general has been received and subsequently used in the working world, we repeated the study which was just reported from June 2007 (a period in which there were 113 applications...
corresponding to half the total examined) so that we could compare the first years of application in the law with following years (until 2013).

The most significant data appear to be linked to the origin of business sector for the workers (Figs. 12-15). Applications coming from the industrial sector appear to be rising only in the provinces of Chieti (+12%) and Teramo, which rose by 18%, while they appear stationary or slightly diminished in the provinces of Pescara and L’Aquila.

On the other hand, applications coming from the service sector appear to be significantly rising in the...
provinces of Pescara (+9%) and L'Aquila (+15%) while remaining stationary or slightly diminished in the provinces of Chieti (-1%) and Teramo (-6%).

With regard to the public administration, it is interesting to note that there is a survey of a constant and widespread decrease of applications in all provinces, with a significant -21% in the province of L'Aquila, -17% in the province of Teramo, -15% in the province of Pescara, and finally, -12% in the province of Chieti. This shows that, in this field of work, there is now a greater knowledge of the regulatory instrument and its most appropriate use.
The craftsmanship sector reaffirms the limited involvement in this phenomenon probably due to the characteristic typical of the sector which allows for good mobility in hardship conditions at work, much sooner than the hardship can manifest itself clinically and cause damage to the worker’s health. The one exception to this is in the province of L’Aquila where an increase in requests of 9% was reported. Table 1 shows the current status of the applications which clearly shows, as already mentioned, that a significant number of them still pending and awaiting definition.
In June 2007, the requests received by INAIL, in the Abruzzo region, accounted for 6% of applications (7 out of 113), while those rejected were 35.4% of the total (40 out of 113). Nationally, the percentage of grants increased to 12.5% (20 out of 160) while the percentage of rejected cases rose to 87.5%.

The percentage of grants measured at the regional level appears to comply with the national trend (12). Compared to 2007, the percentage of cases in preliminary investigation (59% in 2007 compared to 29% currently) is considerably reduced.

The group of 20 workers, where work-related damage
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Table 1 - Application status of the requests in the Region of Abruzzo. Monitoring complaints of mental disorders through the organizational process at work. Period of January 2003 - June 2014.

<table>
<thead>
<tr>
<th>APPLICATION STATUS</th>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCEPTED</td>
<td>20</td>
<td>9</td>
</tr>
<tr>
<td>REJECTED</td>
<td>140</td>
<td>62</td>
</tr>
<tr>
<td>PRELIMINARY INVESTIGATION</td>
<td>66</td>
<td>29</td>
</tr>
<tr>
<td>TOTAL</td>
<td>226</td>
<td>100.0</td>
</tr>
</tbody>
</table>

has been acknowledged, consists of 15 men and 7 women. Sixty percent (12 cases) are in the service sector, 25% (5 cases) are from the public administration sector and 15% (3 cases) are from the industrial sector. The province of L’Aquila has 9 cases, Pescara has 7 and Chieti, finally, has 4 cases.

The age group that was most affected was the one between 46-55 years of age (10 cases). It is a group of subjects with medium to high education qualifications (diplomas or degrees) where adjustment disorders were identified as a result of actions characterized by repeated harassment actions characterized by excessive workload and/or controls or demotion as a result of corporate restructuring, change of management and staff reductions. The number of cases accepted seems high (7 out of 20) in the group of workers with a degree considering the reduced number of requests made in that category.

The percentage evaluation of the work-related damage from the Institute has assigned one pension and 10 indemnity claims, considering 9 other cases to be less than 6%.

Discussion

Work-related stress, in all its forms, seems to strongly affect the working environment, activities, performance and life of people. When stress manifests itself in clinical form, it influences and affects not only the lives of individual workers, but also those of colleagues and any company involved which manifests itself in repeated absences from work, low productivity, conflicts, increase in accidents at work, etc.

The effects on workers exposed to mobbing actions or, more generally, exposed to a stressful or hostile atmosphere that can lead to severe psychological distress, and therefore the onset of clear clinical situations are of undisputed importance.

The regulatory tools currently available to protect the health of workers from contracting these type of work-related pathologies are well-known and are rooted in constitutional principles set out in articles 2:32 (fundamental human rights in social groups where personality is expressed, the right to health), articles 4:35 (the right to work) and article 41 (economic initiative cannot harm the dignity of an individual). Even the Civil Code contains numerous references to the protection of the employee, for example, article 2087 which requires the employer to take steps to protect the psychological, physical and moral integrity of the employee.

Articles related to contractual and tort liability are also of equal importance. Legislative Decree no. 626/94 and the most current Legislative Decree no. 81/08 prescribe both important general and specific measures for the protection of workers’ health.

Nevertheless, the state still lacks a specific and current regulatory tool that can identify, evaluate and prosecute the new risk factors related to the evolution of the working world, its unpredictability and procedures for carrying out the work which capable of causing the onset of clinical situations mentioned above.

Pending specific legislation, the protection of workers is left to the judiciary that, as often happens, is obligated to stand in for the legislature and create the sociological definition of “mobbing”. It has identified its components and provided, where required, relevant compensation and suppression.

A crucial role is played by INAIL as it is called upon to check what is happening in the workplace and establish causality in the determinism of psychiatric pathology of for work-related factors attributable to work organization and mobbing itself.

Despite the importance of the legal and economic implications associated with the recognition (or not) of mobbing actions or the organizational process, it is extremely important to identify conflict situations that can evolve into actual clinical conditions right at the onset. To this day, there are many scientific contributions published by public entities regarding the protection of employees or by individual Authors who propose methodologies to detect, investigate and use specific indicators (warning signs) for precursors of evolving conflict situations.

We believe that the use of questionnaires or other similar tools, although strictly and scientifically processed, are not able to elicit real support for workers who continue to view these means of investigation with suspicion and a lack of confidence. The scarcity of the numbers reported (20 cases out of 226 requests examined) allows us to still be optimistic regarding the healthy environments and living conditions in our region.

Nevertheless, supervisory action plays a crucial preventive role and competent doctors remain the primary figure able to see the symptoms of an evolving illness. These professionals need to be entrusted with the lead role in the difficult task of detecting, analyzing and possibly “curing” the illness detected or reported by the employee.
Whatever the outcome of a complaint for an occupational disease from mobbing, whether stemming from the administrative and judicial system, it is clear that these illnesses have to be processed and evaluated especially in the company involved as it could be the first symptom of organizational anomalies or interpersonal conflicts that can also result in more serious events. Such preventive actions and studies are not possible without a total spirit of collaboration that involves top management, the company doctor, trade unions and the entire staff.

References