

# Examination of the Relationships between Mobbing and Psychological Symptoms in Teachers

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**Abstract** The aim of this research is to examine the relationships between mobbing and psychological symptoms in teachers and determine the impact of mobbing levels on psychological symptom levels. The study was carried out with 185 teachers in total – 116 female and 69 male – working in Burdur Province. Research data was collected using mobbing scale for teachers and Symptom Check List. In data analysis, Mann Whitney U test was conducted to determine whether gender and marital status vary according to mobbing and psychological symptoms. In addition, correlation analysis was conducted between mobbing and psychological symptoms and the model established for the relationship was tested with Structural Equation Modelling (SEM). In the analyses, it was determined that there is significant difference only on psychological symptom levels of teachers according to their genders. Relationships were identified between prevention of teachers' professional applications and situations such as somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, anger and hostility, phobic anxiety, paranoid thoughts, psychoticism, sleep, appetite and guilt. Furthermore, it was determined that there is a low-level positive significant relationship between mobbing and psychological symptom levels of teachers and mobbing levels have direct high-level impact on psychological symptom levels.

**Keywords** Mobbing, Psychological Symptom, Structural Equation Model, Teachers, Psychosomatic Diseases

productivity of teachers have increased. Thus, mobbing, which not only affects individual health of teachers, but also the society and country's economy, has become an important research subject.

Mobbing means the behaviours applied by one person or several people towards another person using a systematic, hostile and unethical means of communication for at least six months [1]. In terms of its effects on the victim, mobbing can be classified in five categories as attacks on communication, social relationships, personal image, professional career and health [2].

Some individual factors determine the individual's behaviour of confronting the mobbing behaviour or resisting mobbing. These include personality characteristics, sociodemographic variables (gender, age, education, marital status, etc.) and features which determine commitment to the workplace (term of employment, experience, educational status, etc.) [3]. However, the factors which cause mobbing include organizational factors such as leadership, organizational culture, work stress and organization of the work and social factors such as hostility, jealousy, group pressure and being scapegoat as well as personal characteristics and abilities of the perpetrator and the victim [4]. For that reason, it is necessary to consider that personality characteristics which make the person a target for mobbing are not known exactly [5], mobbing incidents cannot be connected to a single cause, many factors may cause mobbing, for that reason it must be considered as a whole [4]. In addition, different profession groups, the way of doing the job and different procedures cause that mobbing incident occurs in different ways [3]. According to all these, it can be said that although mobbing varies according to time, culture and professions, it is a common problem in many countries and business fields and it affects the behaviours, social and economic structure, physical and mental health of the individual and social and economic structure of the society.

Mobbing behaviours are explained in three stages as first degree mobbing that the person tries to resist or escapes, second degree mobbing that the person could not

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## 1. Introduction

Today, in the 'Information Age', the importance of schools which are one of the organizations where information spreads the fastest and the teachers who constitute majority of school workers is understood better. For that reason, researches on factors affecting the

resist and escape and experienced temporary or prolonged mental or physical disorders and third degree mobbing that the person could not fix with rehabilitation and go back to work and that requires special treatment [6]. In the Italian-Aegean model, mobbing is explained in six stages. In these stages, intended conflict situation occurs first in which a front is created against the victim. In the second stage, mobbing starts with verbal abuse, accusation and assaults. In the third stage, initial psychosomatic disorders occur such as lack of appetite and insomnia. In the fourth stage, symptoms occur such as coming late and absenteeism, but mobbing is neglected as a result of the faulty attitude of the management. In the fifth stage, victim's situation, psychological and physical health deteriorates and symptoms such as depression, etc. occur. In the sixth and last stage of mobbing, the victim quits the job [7]. In these two separate models, the victim is at risk of having trauma, depression or important psychosomatic disorders depending on adverse situations experienced on the stage which is expressed as deterioration of psychological and physical health.

Psychosomatic disorders are physical disorders in which psychological and physical results complement each other and become integrated and psychosocial stress and psychological conflicts play significant role in their aetiology [8]. In other words, they are somatic disorders which indicate structural change or disfunction in the body and psychosocial factors take a significant part among their causes of occurrence, fulminant and healing. Psychological factors play a significant role in psychosomatic disorders, but it is not easy to diagnose that [8]. Moreover, it is hard to find a reliable instrument to determine psychological symptoms and complaints of individuals. In Turkey, "Symptom Check List" (SCL 90-R) is used most commonly for this purpose [10].

Mobbing is a type of organizational psycho-violence and as the individual suffers mobbing, various psychological factors interact and damage especially psychological health of the victim and cause personality disorder and psychological-mental disorders [11]. In literature review, the impacts of mobbing on individual's health are seen. According to the results obtained in these research, mobbing causes psychological problems in the individual such as insomnia, various nervous disorder symptoms, melancholia, apathy-insensibility, concentration impairment, social phobia, social isolation, social dissonance, self-depreciation and self-contempt, various psychosomatic disorders, depression, hopelessness and despair, irritation, rage, unease and deep sorrow [1]. Disorders such as depression, anxiety, post-traumatic stress disorder and obsession are seen more commonly in mobbing victims than nonvictims [4]. Post-traumatic stress disorder [12, 13], dissatisfaction with the job, stress symptoms, psychosomatic complaints, depression, cardiovascular disorders, absenteeism and use of sleeping pills and sedatives increase [12]. Mobbing

causes depression, anxiety, aggression, post-traumatic stress disorder, irritation and psychosomatic complaints in workers [14] and increases psychological disorders by 27% and psychosomatic disorders by 10% [15]. Mobbing victims get less social support from their superiors and colleagues and display somatization, depression, anxiety and negative affectivity compared to nonvictims [16]. Throughout these researches, it is seen that mobbing causes post-traumatic stress disorder, anxiety, depression and psychosomatic disorders.

The researches conducted indicate that like mobbing, bullying is also related to adverse medical conditions such as anxiety, depression, headache and musculoskeletal system problems [17]. For example, it was seen that workplace bullying is a strong risk for both men and women in terms of causing depressive symptoms in a research conducted with 3132 male and 4562 female workers in France and it was emphasized that preventive studies must be focused on [18]. In another research conducted in America, it was concluded that 41% of bullying victims are in depression, over 80% have symptoms such as severe anxiety, loss of concentration and insomnia and 31% of men and 21% of women could not go back to the workplace and are incapacitated as diagnosed with post-traumatic stress disorder [19].

When the studies in the field of education are examined, the relationships between mobbing and job satisfaction [20], exhaustion [21], stress [22] and problem-solving skills [23] are identified. In a research conducted with teachers, it was determined that mobbing has an impact in causing physical symptoms and exhaustion in teachers [24]. In researches on mobbing conducted in the field of education, it was determined that mobbing causes problems such as unease, exhaustion, silence, lack of motivation, stress, low self-confidence, discontent and affecting social health and family life adversely [25]. It was determined that teachers use "fighting" method the most to cope with mobbing [26]. It was seen that mobbing affects teachers' performance, respect to the education institution and their self-confidence adversely [27] and the psycho-violence that they experience results in motivational problems, unwillingness to go to work, unease, depression and reflecting to students [28]. It was determined that job satisfaction levels of teachers decrease in parallel with the increase in mobbing experiences in relation to their profession and social relationships and therefore their exhaustion levels increase [29]. It was identified that mobbing affects stress and exhaustion positively and satisfaction with job and life negatively [30].

When the limited number of researches conducted on mobbing and psychological symptoms in Turkey are examined, it is seen that there is significant and positive relationship between psychosomatic symptoms and mobbing score of white-collar workers in the field of health, education and security [31]. In another research conducted with people working in public organizations, it

was determined that the rate of participants who stated to be subject to mobbing acts is 66% and there are significant relationships between mobbing and psychosomatic disorders. In addition, according to the results obtained in the study; the rate of psychosomatic symptoms, obsessive-compulsive characteristics, sensitivity in interpersonal relations, depression, anxiety, hostility, phobic anxiety, paranoid thoughts and psychoticism is higher in mobbing victims compared to other workers [32].

In many international researches, it is seen that the number of mobbing victims is higher than the number of other victims of violence and abuse [33]. In the researches conducted, it was stated that one out of five workers in business life experienced mobbing [34]. For that reason, it can be said that mobbing is a common problem among workers. However, mobbing is above average between managers and workers in the fields of industry and education, local administrations and public sector [35]. In the report drawn up by Turkish Grand National Assembly Committee on Equality of Opportunity for Women and Men, it was stated that although it is more common in non-profit organizations, schools and health sector, mobbing can be seen in every workplace and all kinds of organizations and it is common in Turkey [36]. In literature review, it can be said that mobbing in teachers draws attention of many researchers, but the psychological symptoms in teachers are not in the same situation. In addition, no research was found on the relationship between mobbing in teachers and psychological symptoms. For that reason, it is thought that the research will provide significant contribution to the field. The research aims to determine mobbing and psychological symptom levels, investigate the relationships between mobbing and psychological symptoms in general and subdimensions thereof and determine the direction and level of impact of mobbing levels on psychological symptom levels.

## 2. Materials and Methods

### 2.1. Study Group

The study group of the research consists of teachers working in Burdur city centre in spring semester of 2017-2018 academic year and the sample of the research consists of 185 teachers included in the research with simple random sampling method. Data collection tools were applied to volunteering teachers at schools. In the study group, 116 (62.7%) of the teachers are female and 69 (37.3%) are male. In addition, 165 (89.2%) of them are married and 20 (10.8%) are single.

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### 2.2. Data Collection Tools

The data of the research was collected using two Likert type measurement instruments. These are Mobbing Scale for Teachers [37] and Symptom Check List (SCL 90-R). according to the first validity and reliability study results, mobbing scale has a structure consisting of 33 items and five components. Total variance explained by this form of the scale was calculated as 52.07% and Cronbach's Alpha internal consistency coefficient was calculated as 0.89. In the revision study of the scale, it was determined that the scale has a structure consisting of 29 items and five components. In the revision study, total variance explained by this form of the scale was calculated as 55.31% and Cronbach's Alpha internal consistency coefficient was calculated as 0.92. The scale has 5 subdimensions: preventing professional application, preventing potential, assaults on the person's esteem, direct insult towards the person and preventing social relationships. In implementation of the scale, teachers are required to indicate how often they are subject to the mobbing behaviours in the scale within the last 6 months. For that reason, this point is taken into consideration while categorising the scale and scale items are scored as (1) Never, (2) Seldom, (3) Sometimes, (4) Often and (5) Always. In this study, it was determined that Cronbach's Alpha internal consistency coefficient of mobbing scale for teachers is 0.92.

SCL-90-R [38], which is used as the second data collection tool in the research, consists of 90 items and 9 subtests containing psychiatric symptoms. Subtests in the scale are: somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, anger and hostility, phobic anxiety, paranoid thoughts, psychoticism and additional scale (sleeping and appetite disorders, feelings of guilt). The scale is scored as No (0), Mild (1), Moderate (2), Much (3) Extreme (4). The average of points given to all items except for the ones left empty gives the "Global Symptom Index". SCL-90-R is implemented as a whole without being separated to subtests. Before the implementation of the scale, the participants are informed that they should mark the scale thinking about to what extent each item made them feel disturbed and annoyed within the last one month including the day when the scale is implemented. The higher score that the individual gets from the scale makes us think that the individual has further psychological symptoms. Scores higher than 1 mean that there is a mental problem and scores lower than 0.5 means that there is no problem. In a study conducted on university students, Cronbach's Alpha internal consistency coefficient of the scale was found 0.97 [10]. Similarly, it is

calculated as 0.97 throughout the scale.

### 2.3. Data Analysis

Descriptive statistical analyses for variables were used in data analysis. Mann Whitney U test was conducted to determine whether gender and marital status vary according to mobbing and psychological symptoms. In addition, correlation analysis was conducted between mobbing and psychological symptoms and the model established for the relationship was tested with Structural Equation Modelling (SEM). LISREL 9.30 and SPSS 24 programs were used in analyses.

The aim of SEM model [39] which allows determining direct and indirect impacts between the variables used in the research is to present whether the relationship patterns which are identified before and for which theoretical infrastructure is created by the researcher are verified by the data or not [40]. No lost data was found in the examination before data analysis. Then, mistaken data entered by the researcher was checked and corrected. In addition, univariate outliers were checked. When z values calculated for this purpose are examined, no data was found with a value higher than  $\pm 3.00$ . Analyses were conducted with the data of 185 participants. In the analyses; preventing professional applications was expressed as MOB1, preventing potential as MOB2, assaults on the person's esteem as MOB3, direct insult towards the person as MOB4, preventing social relationships as MOB5 and grand total of the mobbing scale as MOBT. In SCL-90-R scale; somatization was expressed as SCL1, obsessive-compulsive symptoms as SCL2, interpersonal sensitivity as SCL3, depression as SCL4, anxiety as SCL5, anger and hostility as SCL6, phobic anxiety as SCL7, paranoid thoughts as SCL8, psychoticism as SCL9, additional scale as SCL10 and grand total of symptoms as SCLT.

In this research; arithmetic mean, median and mode values were examined on SPSS and Lisrel programs to test normal distribution of the data before structural model analysis. When the results on normal distribution of the data obtained in the research are examined; it was seen that mean, median and mode, skewness, kurtosis values calculated for overall mobbing scale is (1.32; 1.14; 1.17; 2.01; 4.31) respectively and (0.53; 0.41; 0.00; 1.41; 2.63) for SCL90-R. When related values are examined, it was seen that mean, median and mode values are close to each other, but skewness and kurtosis values are not in the range of ( $\pm 1.96$ ). Conducting a nonparametric test was decided due to reasons such as examining the obtained data, the thought that being subject to mobbing and psychological symptoms may vary significantly between people and the sample number is low. In that scope, the following are done respectively: reliability analyses of scales; Mann Whitney U test; calculating the correlation, mean and standard deviation values among variables; measurement model

analysis and structural equation model analysis. In the research, the theoretical model established in relation to the relationship between mobbing and psychological symptoms was tested and verified in the structural equation model stage. Results are presented in this order.

## 3. Results

### 3.1. Mobbing and Psychological Symptom Levels of Teachers According to Their Genders

Results obtained in Mann Whitney U test conducted to determine mobbing and psychological symptom levels of teachers according to their genders are given in Table 1.

**Table 1.** Teachers in Result to Mobbing and Psychological Symptom Levels According to Genders

	Gender	N	Mean Rank	Sum of Ranks	U	P
Mobbing	Female	115	92.96	10597.50	3823.500	0.752
	Male	70	90.41	6238.50		
Psychological Symptoms	Female	114	74.03	7328.50	2378.500	0.024
	Male	71	91.01	5551.50		

According to Table 1, it is seen that order average of women and men is close in mobbing and the average of men is higher than women in psychological symptoms. The reason of this result might be the fact that women use anger management and coping with stress skills more effectively, they avoid competition in the workplace as they prioritise their husband and children and men are more affected by the problems at work as they give more importance to their career. While there are researches which show that teachers' perception of being subject to mobbing is higher in men [21,41,42,43]; there are also researches showing that it is higher in women [44, 45, 46, 47]. However, there are also researches which determine that men and women workers are subject to mobbing at a close rate (45% men and 55% women) [2]. For that reason, it can be said that there is no consensus in the researches conducted to determine which gender is subjected to mobbing more. In the research, it is also seen that a statistically significant difference is not identified on mobbing levels of teachers (Mann Whitney U=3823.500; P= 0.75>0.05), but a significant difference is identified on psychological symptom levels (Mann Whitney U=2378.500; P= 0.02<0.05). For that reason, it can be said that gender of teachers does not have a significant impact on mobbing level, but has a significant impact on their psychological symptoms in the research group.

### 3.2. Mobbing and Psychological Symptom Levels of Teachers According to Their Genders

Results obtained in Mann Whitney U test conducted to

determine mobbing and psychological symptom levels of teachers according to their marital status are given in Table 2.

**Table 2.** Teachers in Result to Mobbing and Psychological Symptom Levels According to Marital Status

	Marital Status	N	Mean Rank	Sum of Ranks	U	P
Mobbing	Married	165	93.05	15261.00	1385.000	0.427
	Single	20	82.89	1575.00		
Psychological Symptoms	Married	151	80.79	11391.50	1298.500	0.829
	Single	34	78.34	1488.50		

According to Table 2, it is seen that order average of married and single teachers is close in mobbing and the average of married teachers is higher than single teachers in psychological symptoms. When the researches are examined, it is seen that different results are obtained indicating that perception of being subject to mobbing is higher in single teachers [21, 44, 45, 47, 48] or married

teachers [46, 49]. In a research in which 21 studies are examined with meta-analysis method to determine mobbing behaviours that teachers encounter at school in Turkey, it was determined that there is statistically low-level significant impact size in favour of single teachers according to the marital status of teachers [50]. In this research, it is seen that significant difference is not identified in mobbing levels (Mann Whitney  $U=1385.000$ ;  $P= 0.42 > 0.05$ ) and psychological symptom levels (Mann Whitney  $U=1298.500$ ;  $P= 0.82 < 0.05$ ) of teachers. For that reason, it can be said that marital status of teachers does not have a significant impact on mobbing and psychological symptom level in the research group.

In the analyses in relation to structural models created in the research, 1 external latent variable, 1 internal latent variable, 5 independent observed variables and 10 dependent observed variables were obtained. Correlations, mean and standard deviation values between variables were calculated and given in Table 3

**Table 3.** Correlation, Mean and Standard Deviation Values Between Variables

Variable	$\bar{X}$	SD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Mobbing																			
1. MOB1	1.59	0.55	-																
2. MOB2	1.19	0.37	.603**	-															
3. MOB3	1.16	0.32	.563**	.563**	-														
4. MOB4	1.13	0.31	.493**	.407**	.426**	-													
5. MOB5	1.18	0.37	.507**	.537**	.554**	.387**	-												
Psy. Sym..																			
6. SCL1	0.60	0.54	.180*	.137	.057	.130	.022	-											
7. SCL2	0.80	0.59	.201**	.181*	.126	.150*	.067	.687**	-										
8. SCL3	0.59	0.54	.201**	.270**	.127	.163*	.084	.713**	.852**	-									
9. SCL4	0.64	0.62	.244**	.264**	.095	.150	.026	.737**	.827**	.846**	-								
10. SCL5	0.45	0.49	.261**	.230**	.156*	.169*	.018	.773**	.787**	.766**	.821**	-							
11. SCL6	0.48	0.50	.241**	.302**	.221**	.147*	.039	.665**	.782**	.800**	.813**	.793**	-						
12. SCL7	0.27	0.42	.223**	.148*	.105	.223**	-.004	.653**	.628**	.685**	.687**	.686**	.587**	-					
13. SCL8	0.60	0.55	.308**	.332**	.229**	.184*	.114	.585**	.715**	.731**	.747**	.674**	.724**	.596**	-				
14. SCL9	0.34	0.42	.159*	.193**	.098	.114	-.002	.668**	.731**	.786**	.755**	.779**	.723**	.668**	.702**	-			
15. SCL10	0.65	0.61	.220**	.221**	.117	.167*	.031	.703**	.733**	.728**	.722**	.791**	.689**	.642**	.725**	.700**	-		
16. MOBT	1.31	0.35	.235**	.249**	.109	.140	.043	.835**	.909**	.914**	.929**	.896**	.865**	.746**	.810**	.835**	.840**	-	
17. SCLT	0.55	0.46	.948**	.741**	.692**	.545**	.609**	.170*	.225**	.241**	.257**	.264**	.287**	.226**	.343**	.177*	.233**	.251**	-

\*p&lt;0.05, \*\*p&lt;0.01

According to Table 3, it can be said that mobbing and general symptom average of teachers indicate that there is low-level problem. In addition, it was determined that there is a relationship between preventing professional applications and all subdimensions of SCL 90-R; preventing potential and all subdimensions of SCL 90-R except for somatization; assaults on the person's esteem and anxiety, anger-hostility, paranoid thoughts; direct insult towards the person and obsessive-compulsive symptoms, interpersonal sensitivity, anxiety, anger-hostility, phobic anxiety, paranoid thoughts and additional scales.

As a result of Spearman Rank Difference Correlation performed to present whether there is a relationship

between mobbing and psychological symptom levels of teachers, it was concluded that there is a low-level positive significant relationship between these variables ( $r=0.25, p<0.01$ ). In cases where normality assumption is not met in some analyses conducted with structural equation method or the data is categorical, it is stated that using other methods like Weighted Least-Squares is right [40], using methods like Maximum Likelihood is not right [39]. For that reason, Weighted Least-Squares method is used in the research. Measurement model formed as a result of analyses conducted is given in Figure 1.

In the measurement model, it is seen that validity coefficients of all dimensions vary between (0.70 – 0.98), all of them are valid ( $r>0.30$ ), error variances are not high.

**Figure 1.** Measurement Model



Figure 2. Structural Model

In addition, it is also seen that  $t$  values vary between (10.48- 27.79) ( $t>2,56$ ) and they are significant. Structural model formed as a result of examination of measurement model is given in Figure 2.

When the fit indexes of the model in Figure 2 are examined, ( $X^2 = 262.60; sd = 89; X^2 /sd = 2.95; RMSEA = 0.08; RMR = 0.08; CFI = 0.79; GFI = 0.93; AGFI = 0.90$ ) it was seen that values are high in general. It was determined that the structural model established according to the data obtained has a good fit. When the structural model in Figure 2 is examined, it is seen that the impact of mobbing on psychological symptoms is 0.87. For that reason, it can be said that teachers' mobbing levels have direct and high-level impact on their psychological symptom levels.

### 3. Discussion, Conclusions and Suggestions

In the research conducted, while it was determined that there is significant difference on psychological symptom levels of teachers according to their genders, significant difference is not determined on mobbing levels according to their genders. The result that teachers' gender does not have a significant impact on mobbing is supported by some researches [23, 42, 47, 48, 49,51, 52, 53, 54, 55], while it is not supported by some researches [21, 43, 45,

56, 57].

Factors such as the fact that there are social gender discrimination thoughts such as thinking that teaching is a woman's profession and school administration is a man's profession; there are power and status differences at workplaces and these are considered normal and education policies, managers and therefore management styles change frequently put teachers in risk group in terms of experiencing mobbing and psychological problems. It might be thought that various pressure and stresses arising from students, parents, the concern of fulfilling the curriculum, other teachers and school administration put especially female teachers who have more responsibilities in relation to raising children and family in risk group in terms of experiencing mobbing and psychological problems. In some researches, it was determined that women experience post-traumatic stress disorder (PTSD) due to mobbing more than men [19]. However, it is necessary not to neglect the impact of the history, culture, organization and the employee's position in the organization in which the research is conducted while evaluating the differences in the results obtained in these researches.

In the research, significant difference is not determined on psychological symptom and mobbing levels according to marital status. While there are researches supporting the result that teachers' marital status does not have a



significant impact on mobbing [23, 43, 48, 51, 52, 54, 55, 57, 58], there are researches not supporting this result [21, 47, 49]. The reason why average of married teachers is higher in mobbing and psychological symptom levels might be the factors that married teachers have more responsibilities such as home and child rising, they cannot spare time to relax, their strength to tolerance stress and cope with problems decreases and they had negative experiences.

In the research, it was determined that mobbing and overall symptom average of teachers indicate low-level problem. The fact that Turkish culture is based on collectivism and belonging, family ties and social support is strong, thus it is prevented that mobbing and psychological problems are experienced intensively and individuals are worn out [59] might have had an impact on these results. When the researches conducted in Turkey are examined, it is seen that different results are found in relation to mobbing among teachers. For example, there are researches which obtained results such as 24,7% of teachers were subject to mobbing constantly in the last six months and 75,3% were not subject to mobbing [54]; the mobbing applied to teachers is mostly aimed at their quality of life and its rate is 50% [42]. In addition, various results were also found indicating that teachers were never subject to mobbing [58], they were subject to mobbing sometimes [26], teachers' mobbing perception is low [47, 52, 57], moderate [46] and high [60]. These differences might be caused by personal and organizational factors such as variance in the scales implemented, the year in which the research is conducted, education level, teacher and school features.

In the research, it was determined that there are relationships between preventing potential and all subdimensions of SCL 90-R except for somatization. In addition, it was determined that there are relationships between preventing professional applications and all subdimensions (somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, anger and hostility, phobic anxiety, paranoid thoughts, psychoticism and additional scale). In another research, it was determined that teachers were subject to mobbing towards profession at the most and then personality. In that case, it can be said that teachers are affected by mobbing that they are subject to in the dimension of preventing professional applications and therefore their psychological health will deteriorate. For that reason, the pessimistic thought of school managers that teachers have a nature which avoids working and taking responsibility should be replaced with an optimistic thought which believes in the potential of the teacher and does not prevent professional applications in which the teacher can display this potential.

In the research, it was determined that there is a low-level positive significant relationship between mobbing and psychological symptom levels in teachers.

In addition, it was determined that mobbing levels of teachers have direct and high-level impact on their psychological symptom levels. When the researches conducted are examined, it is seen that many researchers point out the impact of mobbing on especially psychological health of the individual as well as physical health [1, 4, 6, 12, 13, 14, 15, 16, 31, 61, 62].

By their nature, educational organizations have a higher possibility of being subject to mobbing [46]. For that reason, psychological symptoms which may occur in teachers with the impact of mobbing such as anxiety, depression, etc., absenteeism, resignations and causes thereof should be investigated. As the individual's psychological structure will deteriorate more in the event that the victim adopts the thought that negative situations will not change [7]; protective, preventive and supportive studies should be increased in the public and private sector for preventing the occurrence of mobbing and psychological symptoms. Interdisciplinary studies could be carried out not only in education, but also in management, health, psychology and law in terms of preventing the occurrence of mobbing and turning into psychological symptoms. It might be ensured that teachers are informed about strengthening their psychological health and signs of mobbing and psychological symptoms and raised awareness about their rights and how to apply to take legal actions and managers improve their management skills. Works in that respect might be planned to include preservice and in-service trainings. In addition, works within the scope of creating participative organization climate and strengthening communication and organizational justice can be increased at schools. Units can be created for teachers who are subject to mobbing. Legal regulations can be made for reducing mobbing incidents that teachers are subject to and sanctions can be imposed on managers who make mobbing.

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