

# TOXIC WORKPLACES AS A FACTOR IN THE REDUCTION OF THE QUALITY OF WORK LIFE<sup>1</sup>

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## Abstract

The classification system for the factors which make up a toxic workplace is based on previous research. Some researchers state that organizational stress is affected by such factors as a toxic work environment, negative workload, isolation, number of hours worked, role conflict, role ambiguity, lack of autonomy, career development barriers, difficult relationships with administrators and/or co-workers, managerial bullying, harassment, as well as the overall organizational climate. While others point out that some of the reasons include relentless demands on workers, extreme pressure, as well as managerial ruthlessness. Furthermore, the researchers believe that the current level of employee health deterioration and the attendant reduction in the quality of their lives is caused by growing inequality in salaries and other benefits, workplace cliques, increasing uncertainty and job insecurity. This paper aims to highlight the various aspects of toxic workplaces, and to examine this phenomenon by means of a survey conducted by the authors. For the purposes of this study, the workplace atmospheres of Russian and Czech companies will be compared. The study will also propose some measures which are designed to lessen the negative impact of toxic workplaces on the quality of employees' work life, and health in general.

**Key words:** Toxic workplace, health, work, quality of work life

**JEL Code:** JEL I31, JEL J28, JEL M12.

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## Introduction

Identification of the theoretical framework of the toxic workplace concept came into existence from the accounts of research which was carried out by scientists working in different fields. The scientists described certain characteristics of the working environment as being factors of

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toxicity in the workplace. There are studies confirming the clear links between work-related stress and a variety of physical and mental disorders (Campbell, Lawrence & Hurrell, 1992; Daniels, 2000). Workplace stress is defined as: “the change in one’s physical or mental state in response to the workplace that pose a clear challenge or threat to that employee’s wellbeing” (Colligan & Higgins, 2005, p. 90), which means a number of factors in the work organisation, such as a negative workload, isolation, the number of hours worked; as well as working conditions; employee role ambiguity and conflict; lack of autonomy; career development barriers; difficult relationships with administrators, and/or co-workers; managerial bullying; harassment, and a generally bad organizational climate; are recognised ‘components’ of a toxic working environment. Researchers have been studying occupational stress for several decades, with their primary focus being the stressor–strain relationship. ‘Stressor’ describes the environmental conditions, or situations, that give rise to negative emotional manifestations. ‘Strain’ is a consequence of the ‘stressor’, and can be of a physical, psychological or behavioural nature. Research conducted over a long period of time has shown how stressors affect people in a wide variety of jobs (Mazzola, Schonfeld & Spector, 2011; Schulte, Wagner, Ostry & al, 2007).

Most of the literature on working time, and work-life balance, focuses on the effect of the number of hours worked per week. Extensive research has been carried out on the links between long working hours and employee health and overall well-being. Several studies indicate the increased risk to employees’ physical health posed by long working hours. Fagan has identified a long working hours as an important predictor of work–life imbalance (Fagan, Lyonette, Smith & Saldaña-Tejeda, 2012).

According to the job strain model, also known as the demand-control model, high job demands, low job control, and a combination of high job demands and low job control, referred to as job strain, poses a health risk (Virtanen, Vahtera, Pentti & al., 2007). Recently, Pouliakas & Theodossiou (2013) published an interdisciplinary survey of the current state of knowledge related to the theory, determinants and consequences of occupational safety and health. Parboteeah & Kapp (2008) have investigated how specific local ethical climate types are linked to incidences of injuries, as well as two types of safety-enhancing behaviours: safety compliance and safety participation.

We will attempt to contribute to increasing the amount of scholarship which is devoted to examining the aggregated elements of the workplace, and which create toxicity at work

(Fedorova, Menshikova, Dvorakova & Parsiukevich, 2013). We believe that a toxic workplace is not the only reason for the existence of a toxic working environment, which has a negative impact on the personnel. The toxic intra-organizational environment is generated due to a combination of factors. Examples of these factors include, but are not limited to, toxic management practices, toxic leadership and toxic employees. The current research studies in greater depth the factors of toxic workplaces, and their effects on the physical and psychological health of the employees of Russian and Czech companies.

## **1 Methodology**

The theoretical study has allowed us to develop five hypotheses on the basis of previous literature and desk-data on toxic management practices, and their negative impact on the physical health and psychosocial wellbeing of employees.

The hypotheses research list includes following assumptions:

H1 – Organizational activities have both positive and negative effects on the psychosocial health of employees;

H2 – Adverse effects are connected with the negative factors (toxins) of the working environment;

H3 – Toxins in the working environment are a consequence of toxic workplaces, as well as toxic HR-management technologies, as well as being caused by toxic managers and staff;

H4 – There is a causal link between the toxins' adverse impact on the organizational environment, as well as their contribution to the deterioration of the physical health and psychosocial wellbeing of employees at work;

H5 – The impairment of workers' physical health and psychosocial well-being increases with the reduction in quality of their life as a whole.

The verification of our hypotheses has been achieved by conducting an empirical analysis, consisting of a questionnaire survey which was carried out to discover and compare the most significant components of the toxicity in Russian and Czech workplaces.

The research methodology covers the collection of primary data, their analysis and interpretation. Data were obtained by interviews with randomly selected respondents, as well

as from the respondents' answers contained in structured questionnaires. We designed 2 groups of questions for measuring: 1) how the employees assess the causal link between their work and the state of their physical health and psychosocial well-being, and: 2) what are the key factors with the greatest effect on their health and well-being, as well as their quality of life.

In Russia, interviews were conducted with 87 employees from 2 factories which operate in the Ural region, over the period of February and March, 2014. The aggregate sample of the respondents includes: 38 manual workers (43.7%), 29 specialists (33.3%) and 20 senior managers (23.0%). In the Czech Republic the interviews were conducted in the second half of March and the beginning of April, 2014. 54 employees participated in the survey, of which 18 were senior managers (33.3%), 18 were specialists (33.3%) and 18 were manual workers (33.3%). All the respondents were employed in the food industry.

## 2 Results

The comparative characteristics of the survey's results of the Russian and Czech respondents were based on the generalization of their responses, and were grouped into tables 1-6. Among other questions, respondents were asked to give their own assessment of the work's impact on their physical health. It should be noted, that in the tables, under the heading "*total respondents*"; the amount calculated may exceed 100% because respondents could give certain answers simultaneously.

**Tab. 1: The responses given to the question: "*How does your work affect your physical health?*"**

| Response options   | Average for all respondents,<br>% |      |
|--|-----------------------------------|------|
|  | RF                                | CR   |
| Does not affect it at all                                | 31.1                              | 13.0 |
| Sometimes I feel worse due to stress at work             | 39.5                              | 7.4  |
| Sometimes I feel worse due to the high intensity of work | 21.8                              | 11.1 |
| I always feel worse at work                              | 3.4                               | 24.1 |
| Sometimes I feel better at work                          | 7.6                               | 46.3 |

Source: Authors own research.

It can be argued that the Czech and Russian respondents have marked differences in their assessments of the impact of work on their physical health. So, the majority of Czech employees, who participated in the survey, claim that their health often improves in the workplace, while a fifth of the respondents suffer a constant deterioration of their health at work. Whereas more than half of Russian respondents indicate a temporary worsening of their physical well-being for different reasons to those given by the Czech respondents.

**Tab. 2: The responses given to the question: “How exactly does the deterioration of your health manifest itself?”**

| Response options                    | Average for all respondents,<br>% |      |
|-------------------------------------|-----------------------------------|------|
|                                     | RF                                | CR   |
| Sleep disturbance, insomnia         | 26.1                              | 16.3 |
| Headaches                           | 40.5                              | 12.2 |
| Cardiovascular diseases             | 12.6                              | 10.2 |
| Disorders of the respiratory system | 1.8                               | 14.3 |
| Disorders of the nervous system     | 14.4                              | 38.8 |
| Diseases of the circulatory system  | 0.9                               | 8.2  |
| Overeating and/or obesity           | 10.8                              | 16.3 |
| Weight loss                         | 5.4                               | 0.0  |
| Diseases of digestive system        | 9.0                               | 10.2 |
| Others                              | 29.7                              | 2.0  |

Source: Authors own research.

There are some obvious differences in the estimates of the two groups of respondents regarding the effects of specific forms of the negative impact on their physical health. While the largest number of Russian respondents complained of headaches, sleep disturbances and insomnia; more than one third of Czech workers, who participated in the survey, claimed they suffer from diseases of the nervous system.

**Tab. 3: The responses given to the question: “Do you consider your current state of health to be the result of your work?”**

| Response options        | Average for all respondents,<br>% |     |
|-------------------------|-----------------------------------|-----|
|                         | RF                                | CR  |
| No, I am in good health | 41.2                              | 8.0 |

|  |      |      |
|--|------|------|
| Possibly; I have some minor health problems                  | 41.2 | 20.0 |
| Possibly; I have more noticeable health problems             | 5.9  | 20.0 |
| I am sure that my health problems are connected with my work | 12.6 | 22.0 |
| It can be said that I “got into bad health at work”          | 0.0  | 30.0 |

Source: Authors own research

The Czech respondents are more categorical than their Russian counterparts in their assessments of the causal relationship between their work and the state of their physical health. So, more than half of the Czech workers, who participated in the survey, are confident that their work directly affects their health. At the same time, only a little over one third of Russian respondents admit to the possibility that their health problems are due to their jobs, or working environment. The same number of Russian respondents denied any connection between their work and the state of their health.

**Tab. 4: The responses given to the question: “How does your work affect your psychological well-being?”**

| Response options   | Average for all respondents,<br>% |      |
|--|-----------------------------------|------|
|  | RF                                | CR   |
| My work calms me and gives me confidence in the future                       | 25.8                              | 14.8 |
| My work gives me a sense of confidence in the future to some extent          | 32.5                              | 20.4 |
| My work does not give me a sense of protection, nor confidence in the future | 25.0                              | 7.4  |
| Sometimes I have feelings of fear and hopelessness at work                   | 5.8                               | 35.2 |
| Instability and uncertainty constantly worry me                              | 14.2                              | 22.2 |

Source: Authors own research.

There are significant differences in both groups of respondents' assessments concerning the spectrum of emotions felt by employees in respect of some basic needs, such as a sense of security in their jobs. The Czech respondents are much more worried about fear and hopelessness, instability and uncertainty of the future, than were their Russian counterparts. Slightly over a third of the Czech respondents calmly perform their professional duties at work because they have varying degrees of confidence in the future. Over half the Russian respondents are of the same mind as their Czech counterparts in this regard.

**Tab. 5: The responses given to the question: “Which situations have negatively affected your personal state of health?”**

| Response options                                 | Average for all respondents,<br>% |      |
|--|-----------------------------------|------|
|  | RF                                | CR   |
| There were no such situations                    | 38.8                              | 15.7 |
| Conflicts with managers                          | 28.4                              | 19.6 |
| Conflicts with colleagues                        | 20.7                              | 3.9  |
| Conflicts with clients                           | 19.8                              | 11.8 |
| Voluntary resignation                            | 0.9                               | 21.6 |
| Redundancy/dismissal                             | 4.3                               | 7.8  |
| Transfer to another job by order of the employer | 4.3                               | 15.7 |
| Retirement                                       | 0.9                               | 11.8 |
| Others   | 3.4                               | 3.9  |

Source: Authors own research.

The most pronounced differences in the responses of both groups of respondents to the question regarding the type of frustrating situation which has the greatest negative impact on their well-being; is discernible in the "voluntary resignation" column. The Russian respondents are the least bothered by it, while a fifth of Czech respondents said that it worries them to a greater degree. However, Russian employees are much more often involved in conflict situations with their supervisors, colleagues and clients than are their Czech counterparts. Czech employees, on the other hand, are much less likely to be in conflict with their colleagues, than are Russian employees. One fifth of Russian respondents have said that they are parties to such conflicts.

**Tab. 6: The responses given to the question: “What impact does the company, in which you work, have on your quality of life?”**

| Response options   | Average for all respondents,<br>% |      |
|--|-----------------------------------|------|
|  | RF                                | CR   |
| It has no impact   | 40.8                              | 14.8 |
| It has a positive impact; my job gives me everything I need                      | 45.0                              | 31.5 |
| It has a negative impact; my job adversely affects my health                     | 9.2                               | 33.3 |
| It has a negative impact; try as I might, I get nothing in return for my efforts | 6.7                               | 20.4 |

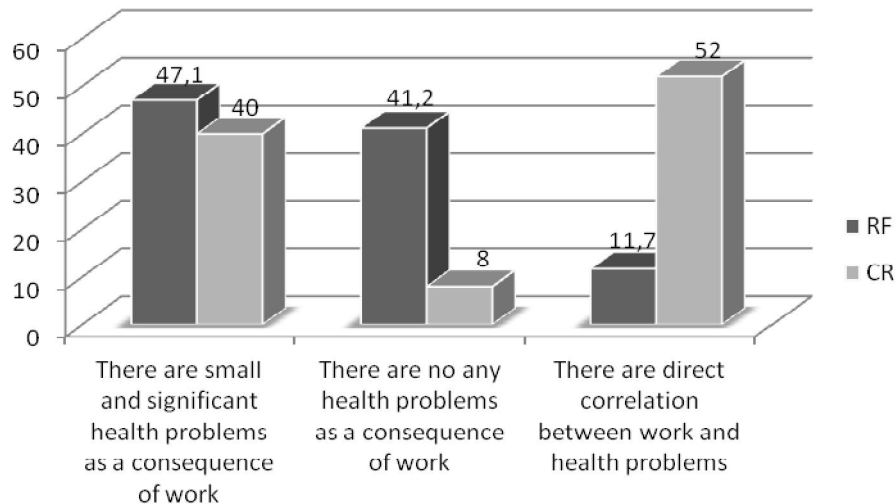
Source: Authors own research.

The majority of the Russian respondents either believe that working in a particular company does not affect their quality of life at all, or, they believe that working there has a

positive impact on their quality of life. More than a third of Czech respondents agree with the latter statement. However, more than half of Czech respondents [working in Czech companies] have said that their jobs have a negative impact on their quality of life.

Comparing the cross-country survey data allows us to identify the differences and general patterns, which manifest themselves in companies, regardless of their nationality. This reflects currently prevailing trends in the phenomenon which forms the subject of our survey. So, the aggregate results of our survey show that a large number of employees perceive their work as having an adverse effect on their physical health (Fig. 1).

**Fig. 1: Estimates by Russian and Czech employees of the impact of their work on their physical health**



Source: Authors own research.

The survey data indicate that the employees of Czech enterprises, who participated in the interviews, suffer from destructive emotions, which are caused by instability and uncertainty about the future at work, to a significantly greater degree than do their Russian counterparts. Also, from our research it can be seen that the majority of workers; who participated in our study; associate the changes in the quality of their lives with their jobs in the company. It should be noted, that 45.0% of Russian respondents said that their work has a positive impact on their quality of life, compared to 31.5% of Czech respondents who said the same thing. 15.9% of Russian, and 53.7% of Czech respondents claimed that their work has a negative impact on their quality of life.



## Conclusion

Comparative analysis of the answers given by Russian and Czech respondents, gives us reason to assert that there are clearly marked differences in the estimates given by the employees in these countries. Nevertheless, it is possible to identify common patterns: 1) a high proportion of employees feel the negative impact of the workplace on their physical health; 2) a large number of personnel believe that their health problems are a direct consequence of their work; 3) the majority of workers associate such health problems as headaches, insomnia, as well as diseases of the nervous system with negative factors arising from the working environment; 4) a large number of employees feel that their psychological problems are caused [in large part] by their workplace's inability, or unwillingness, to satisfy their psychological needs, such as a sense of protection, job security and confidence in the future; 5) a high percentage of staff suffer from severe disturbances which arise from the background of instability and uncertainty about the future, as well as from the pressure born of fear and hopelessness; 6) a significant number of workers have said that their place of work causes a reduction in the quality of their lives, overall.

Thus, as a result of our study, we can confirm our hypotheses. A relationship of conflict with managers, colleagues and clients, dismissal from work for various reasons, disparity between employees' efforts and rewards, instability and uncertainty about the future; are some of the features of the toxic workplace. Closer investigation of the above mentioned phenomenon should continue in the direction of discovering causal relationships between working environment toxins, and the deterioration of the health and wellbeing of employees at work, in order to find ways of eliminating, or drastically reducing the adverse effects of workplace toxicity on employees.

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