



## WORKPLACE BULLYING AND HARASSMENT AS BARRIERS TO MENTAL HEALTH PROMOTION IN NIGERIAN - A REVIEW

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### Abstract:

Workplace bullying and harassment are a critical barrier to mental health promotion in Nigerian workplaces. This paper highlights how persistent negative behaviours such as verbal abuse, intimidation, exclusion, and sexual harassment undermine employee well-being, organizational productivity, and the broader goals of workplace health promotion.

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Drawing from global frameworks by the World Health Organization (WHO) and the International Labour Organization (ILO), the paper identifies major obstacles, including policy gaps, stigma, inadequate human resource structures, and limited empirical research, which collectively sustain toxic work environments. This finding underscores the psychological, organizational, economic, and societal implications of unchecked workplace bullying and harassment, arguing that sustainable mental health promotion requires integrated interventions at the policy, organizational, and individual levels. The paper concludes that fostering dignity, respect, and psychological safety is essential for achieving healthy and productive Nigerian workplaces.

**Keywords:** workplace, bullying, harassment, health promotion, mental health, Nigeria

## 1. Introduction

In today's competitive work environment, employee well-being has become central to organizational success. Yet beneath the surface of many Nigerian workplaces lies a silent crisis, such as bullying and harassment, which erodes mental health and undermines efforts to promote healthy work cultures (Dartey *et al.*, 2026). Workplace bullying in Nigeria is a rampant, underreported problem, with 59.7% of medical residents in one study experiencing it, hindering mental health promotion by fostering anxiety, depression, and low self-esteem. These behaviours, including verbal aggression and intimidation, create high-stress environments that directly cause poor mental health, low productivity, and high turnover rates, creating a significant, often ignored, obstacle to employee well-being (Afolaranmi *et al.*, 2022).

The growing emphasis on employee wellness, toxic behaviours such as verbal abuse, intimidation, and exclusion in various workplaces, threatens both productivity and human dignity (Aleke *et al.*, 2023; Chinnah & Nwankwo, 2025). Thus, addressing this hidden epidemic is essential for creating wellness, mentally healthy and sustainable workplaces in Nigeria.

Workplace health promotion (WHP) refers to the combined, proactive efforts by both employers and employees to improve physical and mental well-being. It involves going beyond basic safety to foster a healthy life and reducing injuries, absenteeism and enhancing a productive work environment (Andersen *et al.*, 2015). This is achieved through policies, programs, and practices designed to create supportive environments that foster physical, mental, and social health. Koinig and Diehl (2021) stated that workplace health promotion extends beyond traditional occupational safety to include initiatives that encourage healthy lifestyles, stress management, and positive organizational culture. It recognizes that the workplace is not only a site of economic activity but also a vital setting for influencing health behaviours and preventing illness (Koinig & Diehl, 2021; Bosma *et al.*, 2022). This is evident in a study that reported that

healthy employees experience fewer absences, higher engagement, and greater job satisfaction (Zhenjing *et al.*, 2022).

Organizations that invest in workers' well-being benefit from high labour turnover, reduced healthcare costs, and stronger performance outcomes. Moreover, promoting well-being at work supports national goals for sustainable development by building a resilient and productive workforce. In Nigeria, where workers often face stressful conditions, long hours, and limited access to mental health support, workplace health promotion provides a strategic means of improving both employee quality of life and organizational success (Andersen *et al.*, 2015).

However, bullying and harassment threaten the realization of these goals. Bullying and harassment involve repeated, unreasonable actions directed at an employee or group of employees that endanger their health and safety (Okechukwu *et al.*, 2014). Such behaviours include verbal abuse, humiliation, intimidation, exclusion, sexual harassment, or psychological manipulation. Workplace bullying may manifest as persistent negative acts such as gossiping, spreading false rumours, or deliberately withholding vital work information, while harassment involves unwanted conduct, verbal, non-verbal, or physical, that violates an individual's dignity or creates a hostile work environment (International Labour Organization [ILO], 2019).

In Nigeria, the mentioned behaviours frequently go unreported due to hierarchical power dynamics, fear of job loss, and inadequate organizational mechanisms for redress (Mehmood *et al.*, 2024). The consequences of bullying and harassment for mental health are profound. Exposure to such behaviours is consistently linked to anxiety, depression, burnout, emotional exhaustion, and low self-esteem (Nielsen & Einarsen, 2018). Victims often suffer chronic stress, sleep disturbances, and difficulty concentrating, which may lead to long-term psychological trauma if unaddressed. These experiences reduce job satisfaction, weaken organizational commitment, and impair productivity (Mehmood *et al.*, 2024). In severe cases, they may even trigger post-traumatic stress symptoms and suicidal thoughts (Okechukwu *et al.*, 2014). Within the Nigerian context, where mental health remains stigmatized and institutional support is limited, the psychological toll is particularly severe.

Despite global recognition of workplace bullying and harassment as serious occupational health challenges, these issues remain under-recognized, underreported, and poorly addressed in Nigeria. Many organizations lack clear policies or grievance systems for handling psychosocial hazards, leaving employees exposed to mistreatment (Andersen *et al.*, 2015). Often, such behaviours are trivialized as normal aspects of managerial discipline rather than as violations of human dignity and threats to mental well-being. The prevailing culture of silence and fear of victimization discourages reporting (Tiesman *et al.*, 2023), allowing toxic practices to persist unchecked and corrode trust within the workplace.

This neglect poses a major obstacle to mental health promotion efforts in Nigerian organizations. The absence of awareness and institutional action against bullying and harassment undermines employee morale and contradicts the core principles of workplace health promotion, which emphasize respect, inclusion, and psychological safety (WHO, 2010). Without addressing these psychosocial risks, wellness programmes risk becoming superficial, focusing on physical health while ignoring the mental and emotional foundations of true well-being. Therefore, this paper argues that addressing workplace bullying and harassment is essential to achieving sustainable mental health promotion in Nigerian workplaces, as no effective health strategy can thrive in a climate of fear, hostility, and psychological distress.

## 2. Conceptual and Policy Clarifications

Workplace bullying refers to persistent, negative acts directed toward an employee or group of employees, which cause psychological harm and create a hostile or intimidating work environment. Such acts may include repeated verbal abuse, social exclusion, intimidation, humiliation, or deliberate obstruction of work tasks (Nielsen *et al.*, 2023). Unlike isolated conflicts or managerial discipline, bullying is characterized by its repetitive and patterned nature, which leads to psychological distress and diminished self-worth among victims. The WHO (2010) recognizes bullying as a psychosocial hazard that threatens workers' mental health and well-being. Within organizations, bullying often thrives in environments where power imbalances, poor communication, and weak organizational justice mechanisms prevail. In Nigeria, where workplace hierarchies are often rigid and authoritarian, bullying behaviours may be normalized or misinterpreted as legitimate supervision, making the phenomenon particularly insidious (Nkporbu & Douglas, 2016).

Workplace harassment, though closely related to bullying, is a broader concept encompassing any unwanted conduct, verbal, non-verbal, or physical, that violates an individual's dignity or creates an intimidating, hostile, or degrading work atmosphere (ILO, 2019). Harassment can take various forms, including sexual advances, gender-based discrimination, ethnic or religious slurs, and psychological manipulation. ILO's Violence and Harassment Convention (2019) defined workplace harassment as a human rights violation and a threat to equal employment opportunities. It emphasizes the employer's duty to prevent, monitor, and address all forms of violence and harassment within the work environment. Unfortunately, many Nigerian organizations lack clear policies and reporting structures to identify and manage harassment cases. Moreover, cultural taboos, gender power imbalances, and limited enforcement of labour standards further silence victims and allow harassment to persist with little accountability (Nkporbu & Douglas, 2016).

Mental health promotion refers to strategies and actions designed to enhance psychological well-being, prevent mental disorders, and create supportive environments

that enable individuals and communities to thrive (Kobau *et al.*, 2011). In the workplace context, mental health promotion focuses on building resilience, reducing stressors, encouraging work-life balance, and fostering a culture of respect and inclusion. The WHO's Healthy Workplaces Framework and Model (2010) outlines four key avenues for promoting health at work: the physical work environment, the psychosocial work environment, personal health resources, and enterprise-community involvement. Under this model, mental health promotion is seen not merely as an individual responsibility but as a collective organizational commitment that integrates policies, leadership, and supportive culture. In other words, a mentally healthy workplace requires systemic efforts to eliminate psychosocial risks such as bullying and harassment that undermine emotional safety and well-being.

Situating these concepts within the Nigerian context reveals both policy gaps and implementation challenges. While Nigeria has developed certain frameworks addressing occupational health and safety, such as the Labour Act in 2004 and the National Policy on Occupational Safety and Health in 2020, explicit provisions for psychosocial hazards, including bullying and harassment, are still limited. The focus of most workplace safety programmes remains on physical risks like accidents and injuries, rather than on mental health or psychosocial well-being (Jain *et al.*, 2018). Moreover, mental health promotion in workplaces is not yet integrated into mainstream occupational health strategies, leaving employees with minimal institutional protection against emotional abuse or workplace-related stress. As a result, many Nigerian organizations rely on ad hoc interventions, if any, to address mental well-being, often without trained professionals or standardized procedures.

### **3. Mental Health of Employees in Nigeria Workplace**

The mental health of employees in Nigerian workplaces remains a growing public health concern that has received limited institutional attention. Although global awareness of mental health in the workplace has increased significantly, many Nigerian organizations continue to operate in environments that undermine psychological well-being. According to WHO (2022), one in every eight people globally lives with a mental disorder, with depression and anxiety ranking among the leading causes of disability and reduced productivity. In Nigeria, where workplace structures are often characterized by high stress, job insecurity, and poor working conditions, the burden of work-related mental health problems is particularly acute.

Several structural and organizational factors contribute to the poor state of mental health in Nigerian workplaces (Aleke *et al.*, 2023). Job insecurity is a pervasive challenge, especially within the private and informal sectors, where workers often face unstable employment contracts, unpaid wages, or arbitrary dismissals. Such insecurity fosters chronic anxiety and reduces employees' sense of control and belonging. Similarly, poor remuneration and delayed salary payments undermine financial stability and increase

psychological distress among workers who struggle to meet basic needs (Ani *et al.*, 2024). The situation is compounded by toxic leadership practices, where authoritarian supervision, favouritism, and lack of empathy create hostile environments that erode morale and trust. These toxic dynamics are frequently reinforced by hierarchical workplace cultures that discourage open communication and feedback (Ahmed *et al.*, 2024).

Another major challenge is the stigma surrounding mental illness, which discourages employees from seeking psychological support. In Nigerian society, mental health conditions are often misunderstood and associated with weakness, spiritual affliction, or moral failure (Ahad *et al.*, 2023). This stigma extends into workplaces, where employees who disclose mental health difficulties risk discrimination, social exclusion, or loss of employment opportunities. As a result, mental health challenges often remain hidden, leading to presenteeism, absenteeism, and eventual burnout. Studies among Nigerian health professionals and civil servants reveal high rates of occupational stress, anxiety, and depressive symptoms, often linked to workload pressure, poor management support, and lack of mental health resources (Nwobodo *et al.*, 2023; Olude *et al.*, 2022).

Despite these realities, most Nigerian organizations lack structured mental health promotion programmes or anti-bullying policies. While multinational corporations and select public institutions have begun to adopt wellness initiatives, such efforts are typically fragmented and limited to periodic health talks or fitness events that do not address deeper psychosocial issues. The absence of workplace counselling services, employee assistance programs, and formal grievance mechanisms for bullying and harassment leaves workers vulnerable to chronic stress and emotional exhaustion. Furthermore, Nigeria's labour and occupational health systems have historically focused on physical safety, with minimal attention given to mental well-being (Mbada *et al.*, 2025). Consequently, mental health remains a neglected dimension of occupational safety, and organizations are often ill-equipped to recognize or manage psychological risks.

#### **4. Workplace Bullying/Harassment and Mental Health Promotion**

Workplace bullying and harassment pose significant barriers to effective mental health promotion by undermining organizational trust, psychological safety, and employee participation in well-being initiatives. Their effects are multifaceted, influencing both individual and organizational outcomes. The following points highlight how these behaviours obstruct the goals of workplace health promotion, particularly within the Nigerian context.

##### **4.1 Creation of a Hostile and Unsafe Psychological Environment**

Bullying and harassment foster an atmosphere of fear, intimidation, and emotional distress that directly contradicts the principles of a supportive work environment. Victims experience heightened stress, anxiety, and loss of self-confidence, which

diminishes their capacity to engage positively with health promotion activities (Nielsen & Einarsen, 2018). In Nigeria, where many workplaces operate under rigid hierarchies, subordinates may feel powerless to challenge abusive superiors. Such power asymmetry perpetuates a climate of silence, discouraging open dialogue about well-being or mental health (Nkporbu & Douglas, 2016). When employees perceive the workplace as psychologically unsafe, they disengage emotionally, undermining organizational trust and cohesion, which are key foundations for successful health promotion.

#### **4.2 Reduction of Employee Participation in Health Promotion Initiatives**

A hostile environment caused by bullying and harassment reduces motivation to participate in organizational wellness programmes. Employees who feel victimized or marginalized are less likely to attend stress management workshops, counselling sessions, or peer-support groups. Health promotion relies heavily on employee participation, shared responsibility, and collective action (WHO, 2010). When fear and mistrust dominate workplace culture, these participatory mechanisms collapse.

#### **4.3 Increase in Absenteeism, Presenteeism, and Staff Turnover**

Bullying and harassment contribute to high rates of absenteeism (workers avoiding the workplace due to distress), presenteeism (attending work while mentally disengaged), and staff turnover (leaving the organization altogether). These outcomes reduce overall productivity and weaken the sustainability of health promotion efforts. The ILO (2019) identifies psychological violence as a major cause of work-related absenteeism worldwide. In Nigeria, reports show that employees subjected to harassment or humiliation often take unplanned leaves or resign without formal complaints, especially in the private and banking sectors (Nwobodo *et al.*, 2021).

#### **4.4 Decline in Morale, Motivation, and Organizational Commitment**

Employees exposed to continuous bullying or harassment experience emotional exhaustion and loss of motivation, leading to lower morale, reduced productivity, and decreased commitment to organizational goals. Mental health promotion requires a workforce that feels valued, respected, and motivated. However, in toxic environments where aggression is normalized, workers disengage and adopt self-preservation behaviours rather than collaboration (Rasool *et al.*, 2021). The demoralizing effect of bullying extends beyond direct victims; witnessing colleagues being harassed also breeds fear and helplessness among others, creating a culture of learned silence that hinders collective well-being.

#### **4.5 Normalization of Toxic Behaviour and Contradiction of Health Promotion Values**

Bullying and harassment normalize aggression and disrespect as part of workplace culture, contradicting the values of empathy, inclusivity, and participation central to health promotion. In many Nigerian organizations, particularly within public

institutions, verbal abuse or intimidation by superiors is seen as a legitimate management tool rather than a psychosocial hazard. Such normalization erodes the moral foundation of workplace wellness programs, making them appear superficial or hypocritical when underlying toxic behaviours remain unaddressed (Olude *et al.*, 2022). The result is a cycle where health promotion messages lose credibility and employees become sceptical of management's commitment to their well-being.

## 5. Cultural and Structural Factors Sustaining Bullying and Harassment in Nigeria

- **Hierarchical Workplace Culture:** Many Nigerian organizations follow rigid hierarchical systems where authority is seldom questioned. This structure allows bullying by those in higher positions to persist unchallenged, as subordinates fear retaliation or job loss (Ahmed *et al.*, 2024).
- **Gender Norms and Power Imbalances:** Female employees, especially in sectors like banking and healthcare, are disproportionately affected by sexual harassment and gender-based discrimination. The combination of gender inequality and workplace patriarchy creates vulnerability for women and discourages reporting.
- **Weak Reporting and Redress Systems:** Few organizations have functional grievance procedures, confidential reporting mechanisms, or anti-bullying policies. Even when such mechanisms exist, they are often poorly implemented, with perpetrators shielded by institutional politics or seniority.
- **Cultural Stigma:** Mental health and psychosocial complaints are often dismissed as personal weakness or spiritual problems. This cultural lens trivializes the psychological effects of bullying, allowing toxic behaviours to persist unchecked.

By fostering fear, distrust, and emotional distress, bullying and harassment fundamentally disrupt the psychological foundations necessary for health promotion. They shift workplace focus from collaboration and well-being to survival and compliance. Without confronting these toxic behaviours, mental health promotion in Nigerian workplaces will remain superficial, addressing symptoms rather than the structural roots of psychological harm. Therefore, workplace bullying and harassment are antithetical to the core principles of mental health promotion, corroding psychological safety, suppressing employee engagement, and normalizing aggression as an organizational norm.

## 6. Challenges in Addressing the Problem

Efforts to address workplace bullying and harassment in Nigeria face multiple interrelated challenges that hinder progress toward effective mental health promotion. These barriers include:

### **6.1 Policy Gaps**

Nigeria's labour and occupational health policies remain largely silent on psychosocial hazards such as bullying and harassment. The Labour Act of 2004 and related workplace regulations focus primarily on physical safety and contractual rights, with limited provisions for mental health protection (Onu, 2024). Unlike many developed countries that have enacted workplace anti-bullying or mental health promotion laws, Nigeria lacks a national workplace mental health policy or legal framework that explicitly addresses emotional abuse, harassment, or toxic work climates. This policy vacuum leaves organizations without clear guidance or accountability structures, allowing abusive practices to persist unchallenged.

### **6.2 Lack of Awareness and Stigma**

A major obstacle to tackling workplace bullying and harassment is the low level of awareness among both employees and employers regarding what constitutes psychological violence at work. Many victims internalize abuse as part of workplace discipline or normal management, especially in hierarchical settings. Furthermore, the stigma surrounding mental health discourages open discussions or help-seeking behaviours. Employees who report bullying often fear retaliation, job loss, or reputational damage, while managers may dismiss complaints as signs of weakness (Javed *et al.*, 2023). This culture of silence perpetuates psychological harm and erodes trust in workplace systems.

### **6.3 Inadequate Human Resource Systems**

Many Nigerian organizations, particularly in the public and informal sectors, lack functional grievance redress mechanisms or confidential reporting systems. Human Resource (HR) departments are often ill-equipped to handle cases of bullying or harassment sensitively, and investigations are rarely objective or victim-centered. In some instances, HR officers themselves are part of the hierarchical chain that enables such behaviour. Consequently, perpetrators act with impunity while victims suffer prolonged emotional distress, absenteeism, or even resignation.

### **6.4 Cultural and Leadership Barriers**

Nigeria's workplace culture often reflects authoritarian management styles and rigid hierarchies inherited from colonial and military traditions. Deference to authority figures discourages subordinates from challenging abusive superiors, while patriarchal gender norms normalize the mistreatment of women or junior staff (Okechukwu *et al.*, 2014). Leadership behaviours that reward aggression and dominance, rather than empathy and collaboration, further entrench a toxic environment. In many cases, workplace bullying is mistaken for effective supervision or discipline, reinforcing a cycle of emotional harm.

## **6.5 Limited Research and Data**

There is a dearth of empirical research on workplace bullying and harassment in Nigeria, making it difficult to quantify the problem or design evidence-based interventions. Most available studies focus broadly on job stress or burnout without examining the underlying interpersonal or organizational dynamics. The absence of reliable data also means policymakers and health promoters lack the evidence needed to advocate for reforms or allocate resources to mental health promotion in workplaces.

## **7. Implications for Workers and Organizations**

The consequences of workplace bullying and harassment extend far beyond individual discomfort; they have profound psychological, organizational, economic, and societal implications.

### **7.1 Psychological Implications**

For employees, workplace bullying and harassment are major psychosocial stressors that trigger anxiety, depression, and emotional exhaustion. Victims often experience low self-esteem, reduced confidence, sleep disturbances, and even suicidal thoughts (WHO, 2022). Persistent exposure to intimidation, verbal abuse, or exclusion creates chronic stress, impairing cognitive performance and decision-making ability. Over time, the psychological toll can manifest as burnout or post-traumatic stress symptoms, leading to diminished motivation and disengagement from work. In Nigeria, where access to mental health services remains limited, the emotional consequences are often endured in silence, deepening the individual's vulnerability.

### **7.2 Organizational Implications**

At the organizational level, bullying and harassment directly undermine productivity and teamwork. Victims may withdraw from collaborative activities, avoid communication, or become chronically absent due to stress-related illnesses. These behaviours contribute to reduced morale, poor workplace relationships, and increased staff turnover (Koinig & Diehl, 2021). Organizations also suffer reputational damage when hostile work environments become public, leading to difficulties in attracting and retaining skilled talent. Furthermore, toxic workplace cultures discourage innovation and problem-solving, as employees operate in fear rather than trust or mutual respect.

### **7.3 Economic Implications**

From an economic standpoint, workplace bullying and harassment represent a high but often hidden cost to organizations and the broader economy. The financial losses arise from recruitment and retraining costs, absenteeism, presenteeism, and decreased output. Employees facing psychological distress may rely more heavily on medical care, contributing to increased healthcare expenditures and lost working hours. For a

developing economy like Nigeria, already burdened by limited workplace wellness infrastructure, these economic costs further strain organizational sustainability and national productivity.

#### **7.4 Societal Implications**

The societal consequences are equally concerning. When workplace bullying and harassment are left unchecked, they reinforce the stigma surrounding mental health, perpetuating a culture of silence and victim-blaming. This not only weakens social cohesion but also contributes to a decline in the overall efficiency of the national workforce, as capable individuals disengage from employment or emigrate in search of healthier work environments. Over time, these patterns erode Nigeria's human capital base and impede progress toward the Sustainable Development Goals (SDGs), particularly those related to decent work, health, and well-being.

Therefore, workplace bullying and harassment are not merely interpersonal issues; they are systemic barriers to organizational health and national development. Addressing them is both a moral and economic imperative for achieving sustainable mental health promotion and workforce resilience in Nigeria.

### **8. The Way Forward**

Advancing mental health promotion in Nigerian workplaces requires a multidimensional approach that operates simultaneously at the policy, organizational, and individual levels. Sustainable change depends not only on introducing new structures but also on transforming workplace culture and national attitudes toward mental health and employee dignity.

At the policy level, the integration of anti-bullying measures and mental health promotion into national occupational health frameworks represents a crucial step toward creating psychologically safe workplaces. While Nigeria's existing labour and occupational safety regulations focus primarily on physical hazards, the growing recognition of psychosocial risks by global bodies such as the World Health Organization (WHO) and the International Labour Organization (ILO) highlights the need for corresponding national standards. Strengthening enforcement mechanisms for labour laws that address psychological harm would not only safeguard employees' rights but also signal institutional commitment to employee well-being as a component of public health. In this regard, aligning national workplace policies with global conventions on decent work and mental health could provide the foundation for a coherent national response to psychosocial hazards.

Within organizations, fostering mentally healthy work environments involves more than sporadic wellness initiatives; it requires embedding respect, empathy, and psychological safety into the organizational culture. Establishing clear anti-bullying frameworks and confidential reporting mechanisms can cultivate trust and

accountability, while internal support structures such as Employee Assistance Programs (EAPs) can provide safe spaces for counselling and mental health support. Equally important is the training of managers and supervisors in emotional intelligence, respectful leadership, and conflict resolution, since leadership behaviour often sets the tone for workplace interactions. Organizations that normalize open dialogue and promote inclusivity tend to witness improved morale, creativity, and productivity, as employees feel valued and protected.

At the individual level, progress depends on building awareness and resilience among employees themselves. Encouraging workers to speak openly about their experiences and to support one another in resisting toxic behaviours can gradually erode the culture of silence that sustains bullying and harassment. Enhancing mental health literacy helps employees recognize early signs of stress or psychological distress, while peer support networks can foster solidarity and collective coping. As employees become more informed and empowered, they contribute to shaping healthier organizational climates that reflect shared responsibility for well-being.

In essence, moving forward demands an integrated strategy that bridges national policy direction, institutional reform, and individual empowerment. The synergy of these levels can redefine the meaning of workplace health promotion in Nigeria, not as a peripheral activity, but as a central pillar of organizational sustainability and human development.

## 9. Conclusion

In conclusion, workplace bullying and harassment represent deeply entrenched barriers to mental health promotion in Nigerian organizations, undermining employee well-being, productivity, and national development. Despite growing global awareness of psychosocial hazards, Nigeria's workplaces remain largely unprepared to address the emotional and psychological dimensions of occupational health. The absence of clear policies, cultural normalization of toxic behaviours, and limited institutional support systems perpetuate environments where fear and silence replace trust and engagement. Sustainable progress, therefore, requires a holistic approach that integrates policy reform, organizational culture change, and individual empowerment to foster dignity, respect, and psychological safety at work. Only through such coordinated efforts can Nigerian workplaces evolve into truly healthy environments that support both employee flourishing and organizational resilience.

### 9.1 Recommendations

Based on the conclusion of this paper, the following recommendations are made:

- 1) Workers should promote mutual respect and support by speaking out against bullying, supporting affected colleagues, and participating in mental health awareness programs.

- 2) Employers and organizational leaders should establish and enforce clear anti-bullying policies, create confidential reporting systems, and train staff in respectful leadership and emotional intelligence.
- 3) Government and policymakers should integrate anti-bullying and mental health promotion into national occupational health policies and strengthen enforcement of laws against psychosocial hazards.
- 4) Human resource and occupational health professionals should implement Employee Assistance Programs (EAPs) that provide confidential counselling, stress management, and early intervention for affected workers.
- 5) Civil society organizations and academic institutions should conduct research, advocacy, and public education campaigns to raise awareness and promote evidence-based workplace mental health practices.

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The study followed the guidelines of the Declaration of Helsinki.

### **Informed Consent Statement**

Informed consent was obtained from all persons involved in the study.

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### **Conflicts of Interest Statement**

On behalf of all authors, the corresponding author states that there is no conflict of interest.

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