I’m being bullied by a colleague: what should I do?

Kathy Oxtoby asks what action doctors should take when they are being abused while at work

“Bullying is sustained negative behaviour and can be physical or psychological. Although physical abuse is rare, emotional abuse is relatively common and often subtle.

“Bullying will erode self confidence, which is key to a successful career—particularly when you’re working in surgery. Bullying results in doctors not enjoying a job they’ve worked hard to get. That lack of enjoyment can lead to deeper problems, such as work related anxiety or even clinical depression.

“It’s easier to suffer in silence and not cause a fuss. But the chances are that if you’re being bullied, someone else is too, and there’s a pattern to the bully’s behaviour. As a doctor on duty you need to speak up—it’s your responsibility. In the first instance speak directly to the person and explain the ways they are acting that are causing you concern.

“If you feel unable to talk to the person, talk to your educational supervisor or programme director, who is likely to be discreet, empathetic, and able to offer solutions. However, if, say, your educational supervisor is the bully you should go to your associate dean for advice. The only option that is not acceptable is to say nothing.

“The BOTA has introduced the Hammer It Out campaign with the British Orthopaedic Association and other royal colleges, to highlight that bullying can be a problem and that it’s everyone’s responsibility to fight it.”

“It is not acceptable to say nothing”
Vitty Bucknall, vice president, British Orthopaedic Trainees Association

“Bullying can sometimes be covert. It might involve physical or verbal abuse, either directly attacking or ridiculing you. Or it could be being ignored or excluded from meetings and events. It can be about making derogatory or offensive remarks about a person’s gender, disability, sexual orientation, or age. It can also involve constant criticism, excessive scrutiny, or sexualised comments.

“Some environments have a culture of bullying as the norm. This is not acceptable.

“The most difficult step is talking to somebody about it and a lot of people are concerned about raising the problem because of fears about their career. But you should talk to somebody, such as a friend or another colleague. You can also talk to a BMA adviser—we are there to support you.

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“The most difficult step is talking about it”
Anthea Mowat, chair, BMA’s representative body

“If you’re being intimidated, imposed upon, threatened, ignored, or shamed at work by someone or a group of staff, then consider whether you’re being bullied.

“Bullies are often in a position of authority, but they can also be your peers, junior to you, or other healthcare professionals. It can happen to anyone, particularly at times of increased vulnerability, which bullies can pick up on. It can make you feel anxious, irritable, angry, depressed, and ashamed. It can affect your concentration, your family life, your career progression, and even lead to you leaving medicine altogether.

“It is crucial to face up to the situation and consider all the options, depending on the nature of the bullying. Being assertive and communicating concerns may help to resolve certain types of bullying, such as being put under pressure to work extra shifts or clinics.

“Shining a light on bullying behaviours can sometimes help to stop them. Writing down your thoughts can help to clarify the main problems. A letter to the person bullying could make them reflect and change their behaviour. Avoid e-communications, however, as it’s easy to make hasty remarks on email and regret them afterwards.

“Having a support network is helpful, it can include colleagues, friends, and family, as well as your union, medical defence organisation, and your medical royal college.”

“A support network will be helpful”
Irene Cormac, adviser for psychiatrist support service for the Royal College of Psychiatrists
What was your earliest ambition?
I’ve always wanted to discover something that makes the world better—a song, a fashion statement, or a cure.

What was your best career move?
Building the Duke ALS Clinic.

What was the worst mistake in your career?
Not learning to say “no” sooner.

How is your work-life balance?
I work a lot, but I feel fortunate because I now love most of what I do, and my family is very supportive.

How do you keep fit and healthy?
I walk every morning, and I swim and play golf several times a week.

What single change would you like to see made to the NHS?
I’d like to see patients have a greater role in defining research priorities.

What do you wish that you had known when you were younger?
That there’s only so much I can control. The rest, I have to accept.

Do doctors get paid enough?
Most of us are not in this for the money, but it’s hard to understand why actors and athletes can make so much more than doctors and teachers.

To whom would you most like to apologise?
Life is short: I make amends as I go, so I don’t have any outstanding apologies.

What do you usually wear to work?
I try to wear the craziest, most colourful outfits I can find, they help me to stay positive. Also, they make patients smile and are a great icebreaker.

Which living doctor do you most admire, and why?
James McNamara at the Duke Institute. He’s been a great neurologist whose patients and residents admired his bedside manner and thoroughness.

What unheralded change has made the most difference in your field?
The multidisciplinary model for ALS care. Our teams can always find multiple options for improving the quality and length of life for these folks.

What is the worst job you have done?
Fry cook at a fast food restaurant. I had to wear a cowboy outfit.

Where are or when were you happiest?
I’m pretty happy every day. The best days of my life were marrying on the Twilight Zone Tower of Terror and walking the runway at Men’s Fashion Week in Paris.

What new technology or development are you most looking forward to?
A cure for ALS. I think that this is coming in the next few years.

Is the thought of retirement a dream or a nightmare?
It depends on whether we find that ALS cure. If we do, riding off into the sunset is the greatest ending I can imagine. If we do not, retiring will be pretty frustrating.

If you weren’t in your present position what would you be doing instead?
Rock star.

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