

English summary SBU Evidence map

Workplace harassment, and violence or threats and its associations with mental ill health - An Evidence Map

May 2026. The full report title in Swedish (www.sbu.se/411)

Main message

SBU has conducted an umbrella review based on 19 systematic reviews that were published between 2015 and 2025. These systematic reviews examined associations between workplace bullying, sexual harassment, or discrimination, as well as threats and violence, and mental ill health outcomes. The outcomes include symptoms of depression, anxiety, burnout, and PTSD.

Main results

The main result showed that workplace exposures (including bullying, sexual harassment, discrimination, threats, and violence) were associated with mental ill health (depression, anxiety, burnout, and PTSD). However, substantial heterogeneity between reviews and primary studies within the reviews precludes firm conclusions regarding the magnitude and consistency of these associations. Moreover, the certainty of the results is limited. SBU rated the risk of bias as moderate or high for the majority of the included reviews. There is also insufficient evidence to draw conclusions regarding gender differences or the impact of exposure duration based on this umbrella review.

Aim

The aim of this evidence map was to identify the available scientific evidence and evidence gaps within predefined areas of interest by systematically assessing and categorizing all systematic reviews that meet the inclusion criteria. The map focuses on systematic reviews evaluating associations between workplace bullying, sexual harassment, or discrimination, as well as threats and violence, and mental ill health. The outcomes include symptoms of depression, anxiety, burnout, and PTSD.

Background

In Sweden, a considerable proportion of gainfully employed people report symptoms such as depression, anxiety and burnout. This burden is also reflected in sickness absence statistics, where mental disorders represent the leading cause of long-term absence, and in particular stress-related conditions.

Although occupational exposures are not the sole causes of sickness absence, 88% of individuals on sick leave due to stress-related diagnoses in Sweden, report that work has contributed to their condition. Contributing factors in the work environment include high workload, stress, workplace harassment, and conflicts. This underscores the relevance of examining exposures in the psychosocial work environment and its association mental ill health outcomes.

Method

A study protocol for this project was made a priori.

Inclusion criteria:

PECO

Population: Gainfully employed people between 16 and 69 years.

Exposure: Workplace bullying, sexual harassment, discrimination, violence and threats.

Control: Non-exposure or lower rate of exposure.

Outcome: Symptoms of depression, anxiety, burnout or PTSD.

Study design: Umbrella review including systematic reviews with quantitative study designs. Systematic reviews including primary studies using both cross-sectional and longitudinal study designs were considered for inclusion.

Language: English, and Scandinavian languages.

Search period: From year 2015 to 2025. Final search November 2025.

Databases searched: PsycInfo, Embase, Medline, International HTA Database, Epistemonikos and Scopus were searched in November 2025.

The PECO for this map, as well as the categories used to classify the content in the map, were outlined by the project group. To make sure that a relevant map was drafted, representatives from the relevant field were given the opportunity to review the draft. After considering their comments, the draft was finalized.

A systematic literature search was thereafter designed and performed by an information specialist to identify all published systematic reviews potentially relevant for the PECO. After the literature search was performed, two reviewers independently screened the abstracts and full text articles and selected the relevant systematic reviews. The risk of bias in the included systematic reviews was assessed independently by two reviewers using the ROBIS tool. Any disagreement regarding relevance or risk of bias was solved by discussion.

Depending on the research questions addressed in the identified systematic reviews, they were classified according to the prespecified categories and are presented in the evidence map.

The report was reviewed by an external reviewer.

Results

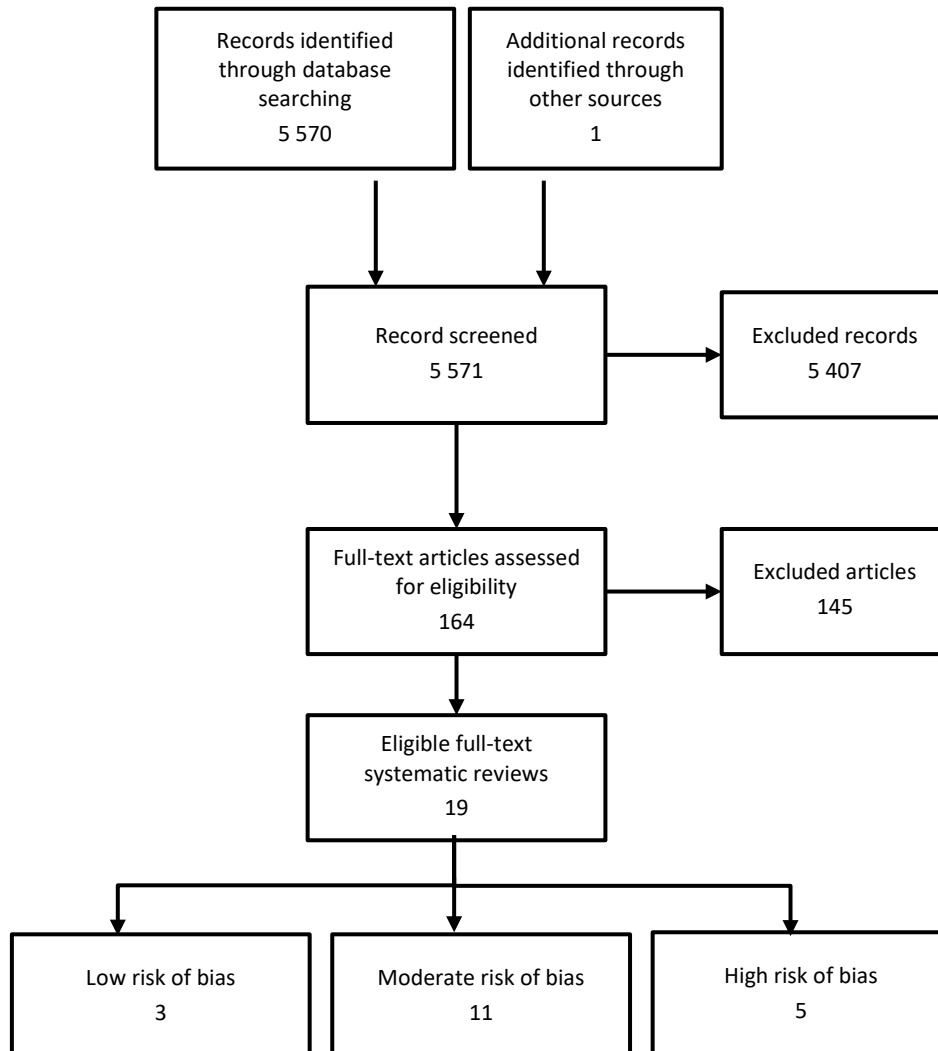
Nineteen relevant systematic reviews were identified and provide the basis for this SBU Evidence Map. Out of these, fourteen were judged to have a low or moderate risk of bias. All systematic reviews are presented in the evidence map.

Of the 19 included systematic reviews, eight addressed the general working population and eight focused on healthcare workers. Five reviews examined sector-specific populations, such as military personnel, emergency services, and the hospitality sector.

Exposure to threats and violence and workplace bullying were examined in nine systematic reviews each. Sexual harassment was addressed in six reviews, and discrimination in three. Outcomes most frequently assessed were symptoms of depression and burnout (12 reviews each), followed by symptoms of anxiety (six reviews) and PTSD (five reviews).

Note that lack of evidence does not mean absence of an association between exposure- and outcome variables. It simply means that there is a scientific uncertainty about the certainty of an association, and that more studies or systematic reviews are needed to provide a reliable measurement.

Link to the [The evidence map](#)

Figure 1 Flow Chart.

Conflicts of Interest

In accordance with SBU's requirements, the experts and scientific reviewers participating in this project have submitted statements about conflicts of interest. These documents are available at SBU's secretariat. SBU has determined that the conditions described in the submissions are compatible with SBU's requirements for objectivity and impartiality.

Appendices

- Search strategies (länk)
- Excluded studies (länk)