

# Assessment of Gaslighting Tactic by Narcissistic Leaders among nurses

Mona Khalil Eldardir Hegazi <sup>1</sup>, Lamia Ismail Keshk <sup>2</sup>, Waffaa El Sayed Hassan Helal <sup>3</sup>

<sup>1</sup> MSc of Nursing Administration, Faculty of Nursing Helwan University, Cairo, Egypt

<sup>2</sup> Professor of Nursing Administration, Faculty of Nursing Helwan University, Cairo, Egypt.

<sup>3</sup> Assistant professor of Nursing Administration, Faculty of Nursing Helwan University, Cairo, Egypt.

DOI: <https://doi.org/10.5281/zenodo.15736867>

Published Date: 25-June-2025

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**Abstract:** **Background:** Gaslighting is a psychological manipulation tactic causing the victim to question their perception of reality, memory, and sanity. This form of manipulation works through a combination of subtle and overt techniques, designed to disorient and weaken the victim's self-trust, making them more dependent on the manipulator. **Aim:** The aim of this study was to assess gaslighting tactic by narcissistic leaders among nurses. **Setting:** The study was conducted at Ain Shams university hospital. **Design:** A descriptive research design was used in this study. **Subject:** Convenient sample was composed of all nurses who were available (n=118). **Tools:** One tool, namely, workplace gaslighting scale was developed by the researcher. **Results:** The majority of participants reported low levels across all dimensions. Specifically, Denial had the highest proportion of low-level responses (93.2%), followed by Misdirection (86.4%), Manipulation (84.7%), and Intimidation (83.9%). Deception and Isolation were also predominantly low (81.4% and 78.0%, respectively). Superiority had the lowest proportion of low-level responses (72.0%), with relatively higher moderate (15.3%) and high (12.7%) levels compared to other dimensions. All chi-square ( $\chi^2$ ) tests were statistically significant ( $p = 0.000$ ). **Conclusion:** Based up on the results of the current study, it is concluded that nursing personnel have a low level of gaslighting tactic, while the minority of them have a high level. In addition to that, there is a presence of a highly significant difference between level of gaslighting tactic. **Recommendation:** Establish confidential and accessible systems for reporting gaslighting or other psychological abuse without fear of retaliation. Encourage studies in different healthcare settings to explore the prevalence and impact of gaslighting, helping to tailor future interventions.

**Keywords:** Gaslighting Tactic, Nurses.

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## I. INTRODUCTION

Nursing is a profession characterized by high-stress situations, with nurses frequently experiencing emotional, physical, and mental exhaustion. Understanding the impact of dark leadership styles, particularly narcissistic leadership and their behaviors such as gaslighting, is essential for understanding the full scope of nursing burnout (Joseph, 2024).

Gaslighting as a psychological manipulation tactic defines how the victim doubts their thoughts, memory, and identity, which is designed to disorient and decrease the victim's self-confidence, making them more dependent on the manipulator (George, 2024).

one of the primary psychological manipulations of gaslighting is denial, in which the gaslighter' decreases the victim's identity, experiences, or memories. This tactic is often used in gaslighting to undermine the victims' confidence in their reality, leading them to doubt themselves. The denial of reality is a manipulation tactic used by manipulative individuals, especially narcissistic leaders, to maintain control over their victims by altering their sense of truth and increasing dependency on the manipulator's events (Hayes, 2023).

In the workplace, leaders that deny information from their employees create an environment in which employees are unable to make decisions and encourage dependency on the manipulator. For example, a manager may omit disclosing changes in a project's objectives, only to blame the employee later for not fulfilling the new requirements. This creates an environment in which the employee feels incompetent, although acting on insufficient information (**Key, 2021**).

Scientists recommend multiple strategies that include increasing self-awareness to enhance self-confidence, Clear communication, adjusted policies, and accountability measures to address the problem of denial tactics (**Caprar et al., 2022**).

Distorting facts or altering a scenario in order to confuse or mislead the target and influence the victim's perspective of reality. This method typically confuses victims regarding the reality, resulting in self-doubt and cognitive dissonance. For example, your boss may blame someone else for what he is aware he did (**Rosner, 2023**).

Misdirection or gaslighting damages employees' confidence, causing them to question their abilities even when they are competent. A leader may alter events or assert that their actions were not as severe as the victim remembers. This manipulation creates a narrative of unreliability, where the victim feels their memory is flawed (**Mannu, 2020**).

Both withholding and manipulating facts can have a severe psychological impact on the victim's mental tiredness. This emotional effort causes perplexity, anxiety, and self-doubt. The repercussions of various types of manipulation include lower self-esteem and increased emotional dependence on the manipulator, this can lead to fatigue, low job satisfaction, and a toxic workplace (**Bieńkowska & Tworek, 2023**).

## II. SIGNIFICANCE OF THE STUDY

Understanding the psychological manipulation tactic of gaslighting employed by narcissistic leaders is crucial in today's organizational environments. Research indicates that narcissistic leaders often create toxic work environments, characterized by manipulation and a lack of empathy. They may engage in abusive supervision, leading to increased employee stress, burnout, and turnover intentions (**Booker, 2024**).

Gaslighting, a form of psychological manipulation where employees are made to doubt their own perceptions, is commonly used by such leaders to maintain control. This behavior can result in emotional distress and decreased job satisfaction among employees. Furthermore, organizations led by narcissistic individuals often experience diminished collaboration and integrity, as these leaders' behaviors permeate the organizational culture (**Mace, 2022**).

By assessing the use of gaslighting tactics by narcissistic leaders, this study contributes to the existing literature on toxic leadership and organizational psychology. The findings can inform human resources policies, leadership development programs, and employee support systems, ultimately promoting healthier and more productive work environments (**Khorram-Manesh et al., 2024**).

## III. AIM OF STUDY

The aim of this study was to assess gaslighting tactic by narcissistic leaders among nurses.

### Research question:

What is the level of gaslighting tactic by narcissistic leaders among nurses?

## IV. SUBJECTS AND METHODS

### Research design:

Descriptive research design was used in this study.

### Setting:

The study was conducted at Heart Academy hospital in Ain Shams university in Cairo. The Hospital consisted of seven floors, including Heart surgery and blood vessels unit (4 bed), Thoracic ICU (32 bed), Pediatric ICU (11 bed) , Cardiac ICU (37 bed) and Inpatient units in floors (5-6-7) .

**Subjects:**

The convenient sample was composed of all nurses who were available at the time of data collection and in the previously mentioned hospital and who were present at the time of the study in their workplace. The total number of nurses was (n=118).

**Tools of data collection**

This study included one tool as the following

**Workplace gaslighting scale.** It consisted of two parts:

**Part 1: Personal characteristics Data.**

This sheet included personal characteristics data of nursing personnel included (age, education, job title, years of experience, department, job title, previous training).

**Part 2: Workplace gaslighting scale.**

This tool was developed by the researcher based on review of the related literatures (*Cotter, 2023; and Sweet, 2019*). It was used to assess gaslighting tactic by narcissistic leaders among nurses. It included dimensions such (denial and misdirection (5) items, manipulation (7) items, deception (4) items, isolation (8) items, intimidation (3) items, and superiority (5) items).

**The total scoring system.**

This tool consisted of **(32 items)** with a total grade **(160)**. According to *Sweet (2019)* subject responses were calculated in the scoring system and classified into low level of gaslighting when the total score was less than 60%, corresponding to a score of less than 96 points. A moderate level was defined as a score ranging from 60% to less than 75%, meaning a score equal to or greater than 96 but less than 120 points. A high level was identified when the total score was equal to or greater than 75%, corresponding to a score of 120 points or more.

A 5-point Likert scale was used to ratify the studied nursing personnel 's responses as (1) strongly disagree, (2) disagree, (3) neutral, (4) agree and (5) strongly agree. Negative items are reversed. Additionally, 1-2 on the 5-point Likert scale (< 60%) are classified as low, 3 on the 5-point Likert scale ( $\geq 60\%$  to < 75%) as moderate, and 4 & 5 on the 5-point Likert scale ( $\geq 75\%$ ) as high (*statistics*).

**Validity of the study:**

Validity of the tool was done, face validity and content validity. It was translated into Arabic and tested by five experts of specialized nursing administration from different nursing faculties in Egypt (one professor from Helwan university, two professors from Ain shams university, two professors from Cairo university) through an opinionnaire sheet to measure the validity of tools. Jury opinions were elicited regarding the tools format, layout and clarity of its parts.

**Reliability of the study tool:**

Is the consistency of measuring instruments. Moreover, it is a degree to which the used tools measure what was expected to be measured in the same way each time & under the same condition with the same subjects (*Cheung et al., 2023*). Reliability for the utilized tools was tested to determine the extent to which the items of the tools are inter-correlated to each other. The Cronbach's alpha model is one of the most popular reliability statistics in use today and considered as a model of internal consistency that is used to estimate reliability of test scores. The statistical equation of Cronbach's alpha reliability coefficient normally ranges between (0 -1), (*Malkewitz et al.,2023*). Alpha Cronbach for the tool that was used was (0,982).

**V. ETHICAL CONSIDERATIONS:**

Prior study conduction, approval was obtained from the Scientific Research Ethical Committee in Faculty of Nursing, Helwan University (N 35\10-7-2023). In addition, an approval was obtained from the nursing director of the hospital. Participation in the study was voluntary, and subjects provided full information about the study. The ethical considerations included explaining the purpose and the nature of the study, the possibility to withdraw at any time and confidentiality of the information of the participants. Ethics, values, culture and beliefs were respected.

### VI. PILOT STUDY

After reviewing the tool by the experts, the researcher conducted a pilot study before administering the final questionnaire. The purpose of the pilot study was to evaluate the clarity, relevance and applicability of the study tool and to determine obstacles that may be encountered during data collection. It also helped to estimate the time needed to fill out the questionnaire. The pilot study was carried out by nurses which presented (10%; 11 nurses) of the total sample size based on the result of the pilot study, rephrasing some questions was done to ensure clarity of the questions and to be easily understood by nurses and the final version was proposed for distributing to the nurses. However, it helps in estimating the time needed to collect data and determine the obstacles. Accordingly, no necessary modifications were needed and the nurses who participated were included in the study sample.

### VII. FIELD WORK

Data was collected within 2 months starting at the beginning of January 2024 and completed by the end of February 2024. After securing all official permissions the researcher met the nursing director of the hospital to explain the aim of the study to gain the approval of data collection. Before beginning to collect data from the study subjects. The researcher introduced herself to the study subjects, explained the aim of the study and informed them that their information will be treated confidentially. The researcher assured that information will be used only for the purpose of research and used codes in the questionnaire sheets because they were worried about anyone knowing their answers.

In addition, each participant was notified about the right to accept or refuse to participate in the study and obtaining verbal consent to participate in the study or withdraw from the study at any time. The researcher collected data 2 days per week. Data was collected in the morning and afternoon shifts and the subjects filled in the questionnaire in the presence of the researcher to explain all questions were answered. Completion took(5-10) minutes.

### VIII. STATISTICAL ANALYSIS

Data entry and analysis were performed using SPSS statistical package version 26. Categorical variables were expressed as number and percentage while continuous variables were expressed as (mean ±SD). Chi-Square (x<sup>2</sup>) was used to test the association between row and column variables of qualitative data. The ANOVA test was used to compare mean in normally distributed quantitative variables in more than two groups. Pearson correlation test was used to assess the relationship between gaslighting dimensions. **IX. Results:**

**Table (1): Frequency distribution of personal characteristics among the studied nursing personnel (n=118)**

Personal characteristics	No	%	
▪ Age (in years)	< 20	0	0.0
	20- < 30	103	<b>87.3</b>
	30- < 40	13	11.0
	40- < 50	2	1.7
	<b><math>\bar{x} \pm SD</math></b>	<b>25.85±3.5</b>	
▪ Education	Technical institute	16	13.6
	Bachelor's degree	99	<b>83.9</b>
	Master's degree	3	2.5
▪ Job title	Staff nurse	78	<b>66.1</b>
	Charge nurse	25	21.2
	Head nurse	12	10.2
	Supervisor	3	2.5
▪ Year of experience	1 < 5 years	91	<b>77.1</b>
	5 years < 10 years	18	15.3
	≥ 10 years	9	7.6
	<b><math>\bar{x} \pm SD</math></b>	<b>3.75±3.04</b>	
▪ Department	Heart surgery & Blood vessels unit	20	16.9
	Thoracic ICU	34	28.8
	Pediatric ICU	17	14.4

	Floors	23	19.5
	Cardiac ICU	21	17.8
	Nursing office	3	2.5
▪ Previous training	Yes	0	0.0
	No	118	100.0

**Table (1)** describes (87.3%) of age's the studied nursing personnel were ranged from 20 < 30 years with a total mean of (25.85 ± 3.5). Moreover, it shows that (83.9%) and (66.1%) were holding a pervious qualification of a bachelor's degree and were staff nurses. Additionally, (77.1%) have a year of experience in nursing field lasting for 1 < 5 years with a total mean of (23.75±3.04). Also, (28.8%) of them were working at Thoracic ICU. Finally, 100% of them didn't attend a previous training course.

**Table (2): levels of gaslighting dimensions among the studied nursing personnel (n= 118)**

Gaslighting dimensions	Low		Moderate		High		χ <sup>2</sup>	P-value
	N	%	N	%	N	%		
Denial	110	93.2	5	4.2	3	2.5	190	0.000**
Misdirection	102	86.4	8	6.8	8	6.8	149	0.000**
Manipulation	100	84.7	8	6.8	10	8.5	140	0.000**
Deception	96	81.4	12	10.2	10	8.5	122	0.000**
Isolation	92	78.0	14	11.9	12	10.2	105	0.000**
Intimidation	99	83.9	11	9.3	8	6.8	135	0.000**
Superiority	85	72.0	18	15.3	15	12.7	79.6	0.000**

\*Significant p ≤ 0.05

\*\*Highly significant p ≤ 0.01

Table (2) illustrates the distribution of gaslighting dimension levels (low, moderate, high) among the 118 nursing personnel studied. The majority of participants reported **low levels** across all dimensions. Specifically, **Denial** had the highest proportion of low-level responses (93.2%), followed by **Misdirection (86.4%)**, **Manipulation (84.7%)**, and **Intimidation (83.9%)**. **Deception** and **Isolation** were also predominantly low (81.4% and 78.0%, respectively). **Superiority** had the lowest proportion of low-level responses (72.0%), with relatively higher moderate (15.3%) and high (12.7%) levels compared to other dimensions. All chi-square (χ<sup>2</sup>) tests were statistically significant (p = 0.000).

**Table (3): Ranking the dimensions of gaslighting tactic among the studied nursing personnel (n= 118)**

Gaslighting tactic:	$\bar{x} w \pm SD$	Mean %	Degree	Rank	F Test	P value
▪ Denial	1.73±0.71	34.6	1	6 <sup>th</sup>	2.5	0.01**
▪ Misdirection	1.75±0.90	35.1	1	5 <sup>th</sup>		
▪ Manipulation	1.84±0.85	36.9	2	4 <sup>th</sup>		
▪ Deception	1.90±0.91	38.1	2	3 <sup>rd</sup>		
▪ Isolation	2.01±0.91	40.1	2	2 <sup>nd</sup>		
▪ Intimidation	1.73±0.88	34.6	1	6 <sup>th</sup>		
▪ Superiority	2.06±1.1	41.4	2	1 <sup>st</sup>		
<b>Total</b>	<b>1.86±0.86</b>	<b>38.0</b>	<b>2</b>	<b>-</b>	<b>-</b>	<b>-</b>

\*Significant p ≤ 0.05

\*\*Highly significant p ≤ 0.01

F: ANOVA Test

1: Strongly Disagree

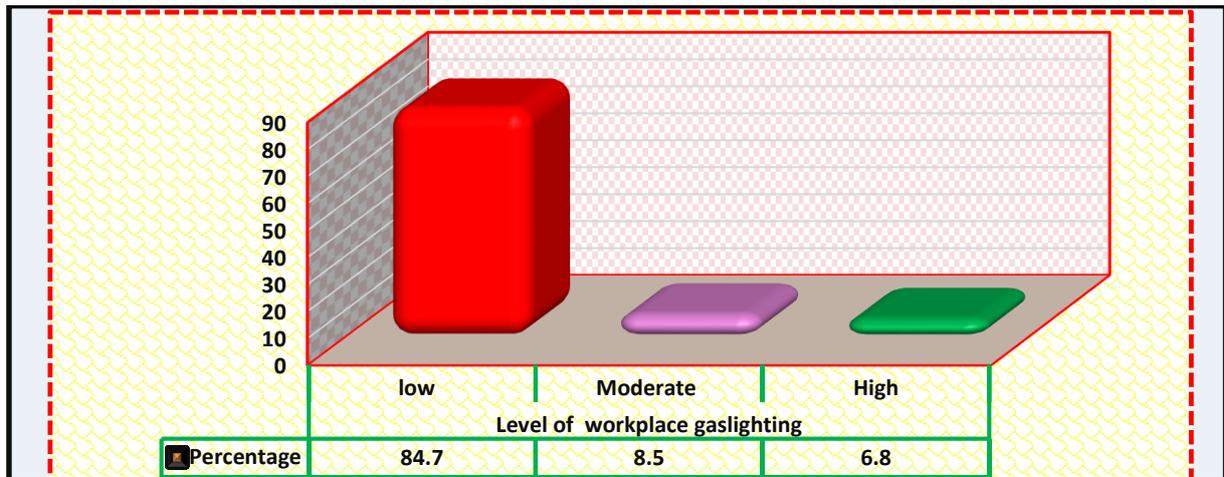
2: Disagree

3: Some-times

4: Agree

5: Strongly agree

**Table (3):** represents the dimensions of gaslighting tactic among the studied nursing personnel. It shows that, superiority gained the higher mean score (2.06±1.1) and higher mean percentage of (41.4%) and ranked as the first dimensions of the gaslighting tactic among the studied nursing personnel. While intimidation and denial gained the lower mean score (1.73±0.88 & 1.73±0.71) and higher mean percentage of (34.6%) and ranked as the last dimensions respectively. In addition to the presence of a highly statistically significant difference between dimensions of the gaslighting tactic, at P = 0.001.



$\chi^2=140, P= 0.000^{**}$

Figure (1): Percentage distribution of level of gaslighting tactic among the studied nursing personnel (n= 118)

Figure (2) illustrates the level of gaslighting tactic among the studied nursing personnel. It describes that (84.7%) of the studied nursing personnel have a low level of gaslighting tactic, while (6.8%) of them have a high level. In addition to that, there is a presence of a highly significant difference between level of gaslighting tactic.

Table (4). Correlation Matrix of Gaslighting Dimensions

Gaslighting dimensions		Denial	Misdirection	Manipulation	Deception	Isolation	Intimidation	Superiority
Denial	r		0.771	0.646	0.810	0.767	0.707	0.858
	p		(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**
Misdirection	r	0.771		0.676	0.754	0.765	0.674	0.816
	p	(p=0.000)**		(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**
Manipulation	r	0.646	0.676		0.656	0.635	0.539	0.647
	p	(p=0.000)**	(p=0.000)**		(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**
Deception	r	0.810	0.754	0.656		0.769	0.727	0.860
	p	(p=0.000)**	(p=0.000)**	(p=0.000)**		(p=0.000)**	(p=0.000)**	(p=0.000)**
Isolation	r	0.767	0.765	0.635	0.769		0.728	0.828
	p	(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**		(p=0.000)**	(p=0.000)**
Intimidation	r	0.707	0.674	0.539	0.727	0.728		0.756
	p	(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**	(p=0.000)**		(p=0.000)**
Superiority	r	0.858	0.816	0.647	0.860	0.828	0.756	
	p	p=0.000**	p=0.000**	(p=0.000)**	p=0.000**	p=0.000**	p=0.000**	

\*Significant  $p \leq 0.05$

\*\*Highly significant  $p \leq 0.01$

r Pearson correlation

Table (4) shows that there was a statistically significant correlation between all dimensions of gaslighting with  $p \leq 0.05$  and  $\leq 0.01$

## IX. DISCUSSION

The long-term consequences of being subjected to gaslighting tactic as a form of manipulation cause diminished self-esteem and increased emotional dependence on the manipulator. Victims may become overly reliant on the narcissists. In the workplace, this can result in burnout, reduced job satisfaction, and a toxic work environment (**Bieñkowska & Tworek, 2023**).

This study aimed to assess gaslighting tactic by narcissistic leaders among nurses that the results show that the majority of nurses participating were young, with an average age of 25.85 years, and most had less than five years of experience. Most nurses held a bachelor's degree and worked as staff nurses, indicating they may be in early stages of their careers and more vulnerable to the negative effects of toxic leadership. A large portion of the sample worked in intensive care units.

The current study indicated that the majority of studied nursing personnel have a low level of gaslighting tactics regarding denial and misdirection, while the minority of them have a high level. From the researcher point of view this may be due to many healthcare institutions emphasizing accountability and transparency in leadership, these values may reduce the occurrence of denial and misdirection. The minority experiencing high levels of denial and misdirection may reflect isolated cases in hierarchical structures or toxic leadership environments. Leaders in these settings may lack oversight or act defensively in high-pressure situations, engaging in denial or misdirection.

In the same line, **March et al. (2023)** studied "It's All in Your Head": Personality Traits and Gaslighting Tactics in Intimate Relationships." and emphasized that, both denial and misdirection are key components of gaslighting, used to undermine the victim's sense of reality and create self-doubt. These tactics were found to be more accepted by individuals with dark personality traits. Also, **Hailes et al. (2023)** discussed "They're out to take away your sanity": A qualitative investigation of gaslighting in intimate partner violence" and reported that participants showed experiencing significant psychological distress and questioning their own sanity as a result of these persistent denial and misdirection tactics.

Consistent with the current study **Klein et al. (2023)** studied "A qualitative analysis of gaslighting in romantic relationships." and the study found that these tactics of denial and misdirection were part of a broader pattern of manipulation that combined affectionate and abusive behaviors over the course of the relationship, making it challenging for victims to recognize and respond to the gaslighting. **Cummin (2024)** discussed "Decoding Coercive Control: Advanced Strategies for Proficient Domestic Violence Assessment." And showed the study emphasizes that denial and misdirection are integral to the broader pattern of coercive control, making it challenging for victims to recognize and respond to abuse effectively.

The data presented in the current study showed that a significant majority of the nursing personnel surveyed reported a low level of gaslighting tactic, particularly when it comes to the manipulative behaviors of leaders. However, it is notable that the minority of participants reported a high level of gaslighting tactic, which showed that despite the majority of nurses experiencing a low level, a significant minority still faced manipulative and emotionally distressing leadership behaviors. This finding highlights the need to remain vigilant in monitoring workplace dynamics, particularly for the well-being of those few individuals who may be affected more severely.

Consistent with the current study, in the study of **Şenyuva & Yavuz (2024)** entitled "Assessment of the Relationship between Dark Triad Personality Patterns and Psychological Manipulation: Istanbul Sample." identifies gaslighting as a covert form of psychological manipulation that is often employed by individuals with Dark Triad traits. These manipulative behaviors serve to undermine victims' perception of reality, consolidating the manipulator's control.

Likewise, the study was done by **Espinoza (2024)** about "The Epideictic Rhetoric of "Gaslighting" Victims by Narcissists" and the findings indicated gaslighting as a manipulation strategy leads victims to question their emotions and perceptions, resulting in significant psychological harm, including anxiety and self-doubt. Similarly, a study by **Rietdijk (2018)** entitled "(You Drive Me) Crazy: How Gaslighting Undermines Autonomy" and indicated through misinformation and the manipulation of perceptions, gaslighters affect the victim's autonomy in decision-making, this dynamic is highlighted within theoretical frameworks analyzing gaslighting's influence on individual observation and action.

While the current study's findings show that most nurses reported a low level of gaslighting tactics by their leaders, **Sweet (2019)** discussed that gaslighting is a common occurrence. Despite being subtle, these actions have a negative impact on

psychological health and the work environment for employees. The results of the current study differ from those of earlier research, which could be explained by differences in reporting and awareness levels, leadership styles, or organizational culture.

Considering frequency level of gaslighting tactic regarding deception among the studied nursing personnel, the majority of respondents reported low levels of deception in the workplace across all surveyed behaviors. From the researcher point of view, this may be due to the high prevalence of low-level deception behaviors that the nursing personnel work in an environment with ethical leadership and supportive team structures, which discourage manipulation and deceitful tactics. Leaders trained in transparent communication are less likely to engage in gaslighting. The small subset of respondents reporting high levels of deception may reflect individuals working in specific hierarchical dynamics or toxic environments. Leaders in these cases might engage in deceptive behaviors to maintain control or manipulate relationships.

This study in agreement with the study of **Blackman (2025)**. "Grey Media: Gaslighting, Post-Truth, AI Deception" and revealed gaslighting serves as a method of psychological manipulation within media, becoming a shorthand for more complex deceptive tactics aimed at controlling perception and distorting reality. As well, in a study by **Gerring (2024)** entitled "A Grounded Theory Analysis of Honesty and Deception in Intimate Relationships" identifies gaslighting as a particularly harmful form of deception that undermines partners' confidence in their own perceptions, further complicating the dynamics of honesty and authenticity within relationships. Deceptive actions are framed within broader relational dynamics, where partners weigh the importance of honesty against the perceived benefits of deception, such as protecting a partner's feelings or self-esteem.

Regarding frequency distribution of isolation as gaslighting tactic among the studied nursing personnel, more than three-quarters of the studied nursing personnel have a low level of workplace gaslighting regarding isolation, while the minority of them have a high level. From the researcher point of view, this may be due to policies promoting workplace equality and inclusivity may contribute to the relatively low occurrence of isolation-related gaslighting. Regular feedback mechanisms and team-building initiatives encourage a sense of belonging. While The minority experiencing high levels of isolation-related gaslighting might represent subgroups exposed to toxic leadership, inadequate supervision, or power imbalances. Leaders in such cases may deliberately isolate individuals to maintain control.

This result is consistent with the result of the study done by **Fakunmoju & Bammeke (2024)** "Measuring perception of partner psychological abuse: Development, reliability, and validity analyses in Nigeria and South Africa" indicates Isolation is identified as a deliberate strategy used by abusers to manipulate victims' perceptions of reality. By restricting access to external support systems, abusers create an environment where victims become more reliant on the abuser's narrative, facilitating gaslighting.

Another study by **Akdeniz & Cihan (2023)** about "Gaslighting and Interpersonal Relationships: Systematic Review" and discussed that victims exposed to isolation experience heightened levels of depression, anxiety, and perceived stress. The study underscores how cultural norms and expectations influence perceptions of isolation and its severity in gaslighting scenarios. It suggests that cultural contexts shape both the execution and recognition of such manipulative tactics.

Ongoing with the study results, the majority of the studied nursing personnel have a low level of gaslighting tactic regarding intimidation, while the minority of them have a high level. The low levels of intimidation-related gaslighting may reflect an organizational culture where intimidation is not tolerated. Clear policies on workplace conduct, coupled with active enforcement, can deter leaders from engaging in threatening behavior. factors such as power imbalances, workplace stress, or isolated incidents of poor leadership may be contributing to these negative experiences. Intimidation is often used to exert control, and such cases highlight the need for targeted interventions to address toxic leadership behaviors.

These results agree with the study done by **Hightower (2017)**. "An exploratory study of personality factors related to psychological abuse and gaslighting" and notes that narcissists often use verbal abuse and constant criticism as forms of intimidation. These actions are designed to erode the victim's self-esteem and trust in their own judgment. Through intimidation, narcissists can distort the victim's perceptions of reality, making them question their own experiences and memories. This manipulation deepens the psychological impact of the abuse.

The current study revealed that more than two-thirds of the studied nursing personnel have a low level of gaslighting tactic regarding superiority, while the minority of them have a high level. This may be due to the collaborative and team-based

nature of nursing, which discourages overt displays of hierarchical superiority. While in high-stress environments like healthcare, leaders under pressure may resort to superiority-based tactics to deflect accountability, contributing to higher instances of such behaviors.

This result was in the same line with **Akdeniz & Cihan (2023)**. “Gaslighting and Interpersonal Relationships: Systematic Review” and found that superiority often involves the gaslighter leveraging power imbalances and creating a sense of identity inferiority in the victim. Gaslighters utilize tactics that undermine the victim’s confidence, making them question their competence or worth in the relationship.

As well, **Tongo et al. (2023)** studied “Gaslighting and Employees’ Sustainable Performance: An Empirical Study of Nestle Nigeria” and identifies psychological abuse by superiors as a critical form of gaslighting in the workplace. Superiority-based tactics are highlighted as mechanisms used by leaders to maintain control and influence over employees, often leading to reduced confidence and self-esteem among subordinates.

The current study showed that superiority gained the higher mean score while intimidation and denial gained the lower mean score. This may be due to Superiority-based gaslighting is often prevalent in hierarchical environments like healthcare, where leaders may rely on these tactics to assert authority. This aligns with the interpersonal dynamics of nursing, where roles are interdependent, but leadership structures are clear. While intimidation and denial gained the lower mean score due to stronger policies and cultural norms in nursing that discourage aggressive behaviors.

**Edmonson & Zelonka. (2019)** studied “Our own worst enemies: The nurse bullying epidemic” and revealed toxic leadership identify narcissism and self-promotion as key dimensions, which are closely related to feelings of superiority. They added Nurse leaders, including those in executive positions, may experience bullying from those perceived as higher in the authority gradient, such as executives in operations and finance. This could contribute to a culture where superiority is used as a tool for asserting dominance.

Also, **Bambi et al. (2018)** showed overt intimidation might score lower, more subtle forms of bullying like social exclusion or withholding information are common. These behaviors might not be perceived as direct intimidation but still contribute to a hostile work environment.

The current study describes that more than four-fifths of the studied nursing personnel have a low level of gaslighting tactic, while the minority of them have a high level. This may be due to healthcare institutions typically having codes of conduct and leadership accountability mechanisms that discourage behaviors associated with gaslighting, such as manipulation or intimidation. These safeguards may play a role in keeping the prevalence of gaslighting low. While leadership deficiencies, or workplace stress create opportunities for manipulative behaviors to occur. These environments might lack sufficient oversight or foster hierarchical power imbalances.

Inconsistent with the current study, **Im & Son. (2024)** studied “Psychological factors affecting nurses' perceptions of gaslighting damage” and revealed approximately three quarters of the variance in nurses’ perceptions of gaslighting damage. Also, **Atta et al. (2024)** studied “Comprehending the disruptive influence of workplace gaslighting behaviours and mobbing on nurses' career entrenchment: A multi-centre inquiry” and revealed a moderate level of gaslighting.

The current study revealed a statistically significant correlation between all dimensions of gaslighting. This may reflect how these behaviors may co-occur as core mechanisms of psychological manipulation. These findings align with prior research that highlights gaslighting as a multidimensional construct where tactics are often used in combination to distort reality and undermine victims' confidence (**Sweet, 2019**). The significant association between all dimensions supports the conceptualization of gaslighting as a complex, systemic abuse strategy rather than isolated acts, reinforcing the need for holistic intervention frameworks in organizational and interpersonal settings.

## X. CONCLUSION

Based up on the results of the current study, it is concluded that nursing personnel have a low level of gaslighting tactic, while the minority of them have a high level. In addition to that, there is a presence of a highly significant difference between level of gaslighting tactic.

## XI. RECOMMENDATIONS

Based on the study results, the following recommendations can be given:

- Establish confidential and accessible systems for reporting gaslighting or other psychological abuse without fear of retaliation.
- Include evaluations of leadership behavior and team dynamics in performance reviews to detect and address toxic leadership.
- Offer periodic psychological evaluations for both nurses and leaders to identify and manage stress or manipulation early.
- Organize educational sessions to help staff recognize gaslighting tactics and understand their effects.

### Further Research:

- Encourage studies in different healthcare settings to explore the prevalence and impact of gaslighting, helping to tailor future interventions.

## REFERENCES

- [1] Akdeniz, B., & Cihan, H. (2024). Gaslighting and interpersonal relationships: Systematic review. *Psikiyatride Güncel Yaklaşımlar*, 16(1), 146-158.
- [2] Atta, M. H. R., Waheed Elzohairy, N., Abd Elaleem, A. E. D. M. H., Othman, A. A., Hamzaa, H. G., El-Sayed, A. A. I., & Zoromba, M. A. (2024). Comprehending the disruptive influence of workplace gaslighting behaviours and mobbing on nurses' career entrenchment: a multi-centre inquiry. *Journal of Advanced Nursing*.
- [3] Bambi, S., Foà, C., De Felippis, C., Lucchini, A., Guazzini, A., & Rasero, L. (2018). Workplace incivility, lateral violence and bullying among nurses. A review about their prevalence and related factors. *Acta Bio Medica: Atenei Parmensis*, 89(Suppl 6), 51.
- [4] Bieńkowska, A., & Tworek, K. (2023). *Leadership Styles and Job Performance: The Impact of Fake Leadership on Organizational Reliability*. Taylor & Francis.
- [5] Blackman, L. (2025). *Grey Media: Gaslighting, Post-Truth, AI Deception*.
- [6] Booker, T. L. (2024). *Employee-Perceived Narcissistic Leaders' Influence on Organizational Behavior: A Qualitative Case Study* (Doctoral dissertation, Amridge University).
- [7] Caprar, D. V., Walker, B. W., & Ashforth, B. E. (2022). The dark side of strong identification in organizations: A conceptual review. *Academy of Management Annals*, 16(2), 759-805.
- [8] Cheung, G. W., Cooper-Thomas, H. D., Lau, R. S., & Wang, L. C. (2023). Reporting reliability, convergent and discriminant validity with structural equation modeling: A review and best-practice recommendations. *Asia Pacific Journal of Management*, 1-39.
- [9] Cotter, K. (2021). "Shadowbanning is not a thing": Black box gaslighting and the power to independently know and credibly critique algorithms. *Information, Communication & Society*, 26(6), 1226-1243.
- [10] Cummin, S. (2024). *Decoding Coercive Control: Advanced Strategies for Proficient Domestic Violence Assessment*.
- [11] Edmonson, C., & Zelonka, C. (2019). Our own worst enemies: The nurse bullying epidemic. *Nursing administration quarterly*, 43(3), 274-279.
- [12] Espinoza, L. (2024). *The Epideictic Rhetoric of "Gaslighting" Victims by Narcissists* (Master's thesis, San Diego State University).
- [13] Fakunmoju, S. B., & Bammeke, F. O. Measuring perception of partner psychological abuse: Development, reliability, and validity analyses in Nigeria and South Africa.
- [14] George, A. S. (2024). The Rise of Emotional Vultures: Exploring Opportunistic Dating Trends in the Wake of Vulnerability. *Partners Universal Multidisciplinary Research Journal*, 1(2), 26-50.

**International Journal of Novel Research in Healthcare and Nursing**

 Vol. 12, Issue 2, pp: (100-110), Month: May - August 2025, Available at: [www.noveltyjournals.com](http://www.noveltyjournals.com)

- [15] Gerring, L. K. (2024). *A Grounded Theory Analysis of Honesty and Deception in Intimate Relationships* (Master's thesis, Brigham Young University).
- [16] Ghaltakhchyan, S. (2024). LINGUISTIC PORTRAYAL OF GASLIGHTING IN INTERPERSONAL RELATIONSHIPS. *Armenian Folia Anglistika*, 20(1 (29)), 61-79.
- [17] Hailes, H. P., & Goodman, L. A. (2023). "They're out to take away your sanity": A qualitative investigation of gaslighting in intimate partner violence. *Journal of Family Violence*, 1-14.
- [18] Hayes, R. (2023). *Narcissistic Abuse Recovery: How to Spot, Overcome, and Heal From Manipulation, Gaslighting, and Codependency*. Rita Hayes.
- [19] Hightower, E. (2017). *An exploratory study of personality factors related to psychological abuse and gaslighting* (Doctoral dissertation, William James College).
- [20] Im, N., & Son, H. M. (2024). Psychological factors affecting nurses' perceptions of gaslighting damage. *The Journal of Korean Academic Society of Nursing Education*, 30(3), 242-252.
- [21] Joseph, L. C. (2024). *Effects of Toxic Leadership in the Armed Forces: A Phenomenological Study Exploring Service Member Experiences* (Doctoral dissertation, Touro University Worldwide).
- [22] Kelley, A. (2023). *Gaslighting Recovery for Women*. Zeitgeist.
- [23] Key, U. M. (2021). *A Phenomenological Research Study of Unethical Leaders' Impact on Follower Moral and Ethical Decision-Making*. Northcentral University.
- [24] Khorram-Manesh, A., Goniewicz, K., & Burkle Jr, F. M. (2024). The Impacts of Narcissistic Leadership on Achieving the United Nations' Sustainable Development Goals—A Scoping Review. *Challenges*, 15(3), 37.
- [25] Klein, W., Wood, S., & Bartz, J. (2023). You Think I'm Insane: An Integrative Review and Novel Theoretical Framework for Studying the Phenomenon of Gaslighting.
- [26] Mace, R. (2022). *Dark Psychology and Gaslighting Manipulation: Influence Human Behavior with Mind Control Techniques: How to Camouflage, Attack and Defend Yourself*. Ryan Mace.
- [27] Mannu, G. (2020). *Ethic and Responsibility in the Anthropocene Era. Environment, Social Justice, and the Media in the Age of Anthropocene*.
- [28] Malkewitz, C. P., Schwall, P., Meesters, C., & Hardt, J. (2023). Estimating reliability: A comparison of Cronbach's  $\alpha$ , McDonald's  $\omega^2$  and the greatest lower bound. *Social Sciences & Humanities Open*, 7(1), 100368.
- [29] March, E., Kay, C. S., Dinić, B. M., Wagstaff, D., Grabovac, B., & Jonason, P. K. (2025). "It's All in Your Head": Personality traits and gaslighting tactics in intimate relationships. *Journal of Family Violence*, 40(2), 259-268.
- [30] Mullen, W. (2020). *Something's Not Right: Decoding the Hidden Tactics of Abuse--and Freeing Yourself from Its Power*. Tyndale House Publishers, Inc.
- [31] Rietdijk, N. W. (2018). *(You Drive Me) Crazy: How Gaslighting Undermines Autonomy* (Master's thesis).
- [32] Rosner, C. (2023). *Manipulating the Message: How Powerful Forces Shape the News*. Dundurn.
- [33] Şenyuva, G., & Yavuz, M. F. (2024). Assessment of the Relationship between Dark Triad Personality Patterns and Psychological Manipulation: Istanbul Sample. *Cyprus Turkish Journal of Psychiatry & Psychology (CTJPP)/Kıbrıs Türk Psikiyatri ve Psikoloji Dergisi*, 6(3).
- [34] Sinha, G. A. (2020). Lies, gaslighting and propaganda. *Buff. L. Rev.*, 68, 1037.
- [35] Sweet, P. L. (2019). The sociology of gaslighting. *American Sociological Review*, 84(5), 851-875 .
- [36] Tongo, N. I., Oloke, E., Aransiola, I. J., Eke, A., & Olowo, S. (2023). Gaslighting and Employees' Sustainable Performance: An Empirical Study of Nestle Nigeria PLC. *Public Administration and Regional Studies*, 16(2), 108-135.