

The Faust Syndrome: Do negative moral emotions leave marks on employees' health?

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The paper is aimed at evaluating the incidence of the Faust Syndrome indicators and examining the effects of this syndrome of work relationships on employees' psycho-physical health mediated by negative moral emotions towards others induced in such relationships. The sample consisted of 611 participants (64.5% women), employed at various positions (83.3% executive), of the average age of 37.13 (SD = 11.94), and the average length of service of 8.09 years (SD = 8.75). In order to measure toxic work relationships in the form of the Faust Syndrome (FS), the Faust Syndrome Questionnaire (FSQ-2) was used to assess five dimensions: Loyalty to the employer, Subversive behaviour, Manipulation of the decision-making system, Ostracism and Negative attitudes towards colleagues. The incidence of negative moral emotions at the workplace scale (SUMO) measured the following negative moral emotions towards others: Anger, Disgust, Rage, Envy, Belittling, Malice, Jealousy and Contempt. The scale of psycho-physical health (SPFZ-1) was used to assess Physical health disorder, Fear and anxiety, Depression reactions, Fatigue and Social behaviour disorder. The results indicate that the Faust Syndrome has a significant effect on the increased expression of negative moral emotions towards co-workers, that these emotions most likely have a significant effect on the employees' psycho-physical health, as well as that these same emotions act as mediators between toxic work relations and the employees' health. It is concluded that negative moral emotions towards others, which are probably induced by the Faustian Syndrome, do leave marks on employees' health.

Keywords: The Faust Syndrome, toxic work relations, negative moral emotions towards others, psycho-physical health, employees

Introduction

If an organization tolerates “persistent and repetitious pattern of abuse, harassment or discrimination over time” (Shain, 2009, p. 45), then we have a toxic work environment. This environment “permits workplace stressors to reach a critical dose and hence have detrimental effects on workers’ well-being” (McCulloch, 2016, p. 10). What are the roots of work toxicity and how can we explain the dynamics of such a phenomenon? One approach tells us that toxic work environment occurs “when employees experience a breach in their psychological contract and bring negative emotions into the workplace” (Harder et al., 2016, p. 208). The conditions that lead to a breach in the psychological contract include poor work organization, difficult work conditions, and interpersonal conflicts leading towards reduced trust, a sense of obligation and work performance. This, in turn, produces negative emotions in employees such as anger, disgust and contempt, and builds them into the organizational culture. In terms of work conditions, it seems that toxic organizations are strongly profit-oriented, with a fast work pace, and view their employees as production costs rather than as their most precious asset. These conditions create a toxic work environment in which conflicts grow into frequent bullying practices, thus tearing apart an organization’s profitability, as well as the employees’ productivity and their health.

McCulloch (2016) found empirical evidence that toxic work environment developed from “higher pressure to produce, more abusive supervision, lower civility, less voice, and less involvement” (p. 95). According to this author, the emotional consequences of work toxicity include lower organizational commitment, low job satisfaction and a low intention to stay. She also noted that abusive leadership in the profit-driven organization was the strongest predictor of the employees’ appraisal of their work environment as toxic. We use this statement to develop a new concept of toxic work relationships and name it as the Faust Syndrome (FS).

The Faust Syndrome: a new conceptual framework for toxic work relationships

As mentioned already, this new framework is built on abusive leadership as the main driving force in creating and maintaining a toxic work environment. Namely, toxic leaders create a hostile environment in which, due to induced subversive behaviour towards their own organization, the followers develop the feelings of helplessness and insecurity. Since they have lost organizational support and employment security, they start acting subversively against their own organization, rather seeking security and protection in loyalty to an abusive leader within his/her toxic clique. A key event is establishing a psychological contract between a toxic leader and his/her followers in the

form of an asymmetric relationship, as the one existing between a patron and a client. In this relationship, the followers (clients) want security and protection, while the patron uses everything he/she can take from a client to fulfil his/her egoistic goals. This reminds of the contract signed between Faust and Mephistopheles as described in Goethe's play, where Faust asks for Mephistopheles' help to obtain and enjoy all the pleasures of this world, but gives everything away in return (i.e., his soul). Within the organizational context, we assume that the Faust Syndrome may indicate a corrupt clientelistic subculture built on an imaginary psychological contract in which the employee (client), due to induced helplessness and insecurity in his/her own organization, surrenders his/her fate into the hands of a toxic leader (patron, corruptor). This leader is influential and prone to abusing his/her power to achieve his/her particular objectives, certainly at the expense of the organizational business mission and image.

The consequences of the toxic work environment are numerous, and they include psychological distress, such as anxiety disorders (e.g. Appelbaum & Roy-Girard, 2007), depression (e.g. Flynn, 1999; Kimura, 2003; Reed, 2004), decreased self-esteem (e.g. Pelletier, 2010), deteriorated physical health (e.g. Brown, 2004), decreased quality of work life and employees' work capacities (e.g. Abbasi et al., 2017), and the feelings that come with a toxic environment that can be detrimental and lead to unnecessary stress, burnout, depression, and anxiety among workers (Rasool et al., 2021; Larasati & Prajogo, 2022). It was found that toxic work relationships could be seen as more unacceptable to females and could be more detrimental to higher educated employees (Fedorova, 2020; Singh et al., 2017). Also, it is reasonable to assume that a toxic work environment causes frequent moral violations (e.g., harmful, unfair, impure behaviour) and elicits emotions towards others that follow them (such as anger, contempt, disgust, etc.). Moral emotions towards others are those that are linked "to the interests or welfare either of society as a whole or at least of persons other than the judge or agent" (Haidt, 2003, p. 853). They occur as an automated response (moral intuition) to a perceived social pattern that violates social (here, organizational) values and become a good-bad or like-dislike feeling state, usually followed by the approval or disapproval of such a pattern. However, besides this 'whole number categorical approach' that follows one-to-one mapping of moral situations and the corresponding emotions (Cameron, et al., 2013), the Moral Foundation Theory (MFT; Haidt & Joseph, 2004; Graham et al., 2013) argues for a more complex experience of a moral situation (such as the 'flavour of betrayal', 'flavour of cruelty' or 'subversive behaviour'). In the current study, we asked the participants to rate the quality of work relationships (i.e., the incidence of the Faust Syndrome indicators) and to estimate the frequency of certain moral emotions towards others (e.g. the 'flavour of cruel relationships'), expecting that toxic work relationships would generate more negative moral emotions towards

co-workers, as well as that these emotional states would have detrimental effects on employees' psycho-physical health.

According to the US National Institute of Mental Health, chronic stress brings about negative emotions, such as sadness, anger or fear, which affect our mental health by inducing anxiety and/or depression. Negative emotions are also linked to compromised physical health and the disorders such as high blood pressure, heart diseases, diabetes, digestive disorders or muscle tension and aches, which may affect our immune system, making us prone to infective diseases. Some researchers have found that individuals high on negative affectivity trait stated two or three times more physical illness symptoms than those low on negative affectivity (Costa & McCrae, 1980). Previous studies have also found that negative moral emotions, such as shame, guilt, and self-blame, are linked to the major depressive disorder (MDD) in clinical and subclinical populations (e.g. Bryan et al., 2013; Pulcu et al., 2013). Tangney et al. (2007) discussed self- and other-oriented moral emotions and concluded that gratitude (a positive moral emotion which arises when receiving unexpected benefits from others) promoted psychological resilience, and had positive effects on individual's well-being and physical health. Some studies have also indicated that induced positive emotions reduce blood pressure, improve the condition in patients with heart failure, improve hormonal balance, and reduce lipid levels (e.g. Xu & Roberts, 2010). Neglecting the significance of positive moral emotions and tolerating negative moral emotions towards others may have a negative impact on employees' work ethics, motivation, and well-being.

We consider the Faust Syndrome not only as a toxic work environment that occurs due to abusive managers and unregulated conflicts, but also as a clientelistic subculture that is antagonistic towards its own organization, and, therefore, unethical. It breaches the basic ethical standard of work contribution as a way to improve business and the success of an organization as a whole. Establishing such a subculture is founded on resolving the basic ethical dilemmas in organizations, such as *an individual vs. community* and *short-term vs. long-term* (Kidder, 1995), in favour of individual and short-term interests. Therefore, the Faust Syndrome represents an ethical problem in organizations and demands an intervention (an ethical programme with the implementation of the code of ethics) aimed at improving loyalty towards the organization's mission, not the particular interests of subversive individuals and groups. The difference from the usual concept of a toxic work environment is also in the capacity of the Faust Syndrome to replicate itself on new followers through a relocation of loyalty from an organization to an egoistic patron (corruptor). This syndrome is worth examining since research shows that ethical organizations have economic benefits and contribute to the well-being of the majority of their members (e.g., Paralta et al., 2023).

As such, they need to be preserved. In spite of this, not all organizations are eager to develop and apply an effective ethical programme, especially the organizations in the public sector (Svensson et al., 2009).

The analysis of the latent structure of the Faust Syndrome indicators has revealed that this syndrome is comprised of five dimensions: Loyalty to patron, Subversive organizational behaviour, Manipulation of the decision-making process, Intimidation and exclusion-Ostracism, and Negative attitudes towards colleagues (Majstorović et al., 2025). This structure corresponds with some facets of a toxic work climate when the toxic leader is a primary factor of the work relationships quality (e.g. Schmidt, 2008; Pelletier, 2010; Cellebi et al. 2015). Our preliminary study has shown that some Faust Syndrome (FS) indicators, such as Loyalty to patron, Negative attitudes towards colleagues, Subversive behaviour, and Ostracism contribute directly to a number of symptoms of employees' physical health disorders, depression reactions and social behaviour disorder (Toth et al., 2021).

Since the Faust Syndrome (FS) is a relatively new concept and there is a lack of research on negative moral emotions at work, in this study, we first wish to assess the severity of the Faust Syndrome as perceived by the employees in the sampled private and state-owned organizations in Serbia. Further, we wish to explore the relationships between the FS indicators and the level of negative moral emotions towards others and to examine if higher levels of these emotions correlate with more symptoms of employees' psycho-physical health disorders. To achieve this goal, we have tested the following three hypotheses:

H1: Private companies' employees report the Faust syndrome indicators as less frequent due to greater efforts that these companies invest in work ethics than state-owned organizations do.

Previous studies indicate that public organizations are less ready to develop and apply an effective ethical programme (e.g., Svensson et al., 2009).

H2: More frequent Faust Syndrome manifestations are positively associated with more negative moral emotions towards others and with more symptoms of employees' psycho-physical health disorders.

Some studies find that positive moral emotions, such as gratitude, have positive effects on employees' well-being and health (e.g., Tangney et al., 2007).

H3: Negative moral emotions towards others act as a mediator in the relationship between the Faust Syndrome and employees' health.

This hypothesis is derived from the concept of the Faust Syndrome, specifically from the dimension characterized by the negative attitudes towards colleagues in the workplace.

METHOD

Participants and the data collection procedure

In order to examine the occurrence of the FS and its significance for employees' moral emotions and health, 611 employees were recruited in at-hand samples of employees (64.5% women), with 0.5 to 41 years of service, $M = 12.70$, $SD = 10.26$, from private and state-owned companies (65.5% were the employees from private domestic and foreign companies) in the Republic of Serbia. When it comes to the level of education, 39.6% of participants completed primary and secondary school, 42.5% had a college or Bachelor's degree, while 17.9% held a Master's or a PhD degree. After signing the digital informed consent, the participants anonymously completed online questionnaires via Google Forms, in April and May 2024. All participants took part in the study voluntarily, after signing the digital informed consent. The participation was completely anonymous, and the respondents were informed that they could withdraw from completing the questionnaire at any time. The data were collected through an online survey via Google Forms in April and May 2024.

Instruments

The used instruments were the Faust syndrome questionnaire (FSQ-2; Majstorović et al., 2025; $n = 20$ items; $\alpha = .97$), the Moral emotions questionnaire (SUMO; Majstorović & Todorović, 2019; $n = 32$ items; $\alpha = .84$), the Psycho-physical health questionnaire (SPFZ-1; Majstorović et al., 2017; $n = 23$ items; $\alpha = .92$), and a short demographics questionnaire. The FSQ-2 was administered to detect five toxic work relationships dimensions labelled as Loyalty to patron, Subversive organizational behaviour, Manipulation of the decision-making process, Intimidation and exclusion-Ostracism, and Negative attitudes towards colleagues (e.g. "We are suspicious and distrustful of each other"; from 1 - No, it didn't happen to 4 - Yes, it happens very often). The participants were also asked to self-assess their health via the SPFZ-1 survey estimating how often they had symptoms of their health disorder in terms of Physical health, Fear and Anxiety, Depression, Fatigue, and Social Dysfunctionality (e.g. "In the past few weeks, did you have headaches?"; from 1 - No, I didn't to 4 - Yes, daily). Finally, the participants estimated via the SUMO Questionnaire the incidence of negative moral emotions in their work environment, such as belittling, anger, disgust, rage, envy, malice, jealousy, and contempt (e.g., "In the last year, my colleagues have belittled others as persons"; from 1 - Never to 5 - Very often).

Data analysis procedures

In order to analyse the differences in the perception of the Faust Syndrome, gender groups were formed, while organizations were divided into four groups – private domestic companies, private foreign companies, state-owned companies and state institutions. T-test and univariate ANOVA were applied, including Bonferroni and LSD post-hoc testing. The main relations among the Faust Syndrome dimensions, moral emotions and health indicators were analysed by bivariate correlations, while the mediation effect of negative moral emotions towards others was tested by Hayes's SPSS Process macro (Hayes & Rockwood, 2020). Data analyses were conducted using the IBM SPSS v. 23 programme.

Results

The results will be presented in a descriptive form and by the outcomes of the analyses of differences in the perception of the Faust Syndrome regarding the participants' gender, type of organization, and their education level. After that, the outcomes of correlational and mediation effect analyses will be displayed.

Incidence of the FS and employees' demographics

As can be seen from Table 1, the average incidence of the FS is in the zone of '*it happens, but rarely*'; 27.8% of the sampled participants denied the existence of FS, while the remainder admitted that the FS occurred more or less in their organizations. Employees' perceptions of *Loyalty to patron* and *Subversive behaviour towards organization* were the most perceived manifestations of the Faust Syndrome, while the *Ostracism* and *System manipulation* had the lowest occurrence in the workplace.

Table 1

Descriptive characteristics of the Faust Syndrome dimensions (N = 611)

Variable	<i>M</i>	<i>SD</i>	Skewness	Kurtosis	Range	α
Faust Syndrome Total	1.92	.60	.64	.22	2.75	.94
Loyalty to patron	2.29	.81	.17	-.84	3.00	.86
Subversive behaviour	2.17	.67	.39	-.24	3.00	.77
System manipulation	1.46	.60	1.56	2.15	3.00	.80
Ostracism	1.64	.74	1.16	.55	3.00	.87
Negative Attitude	2.01	.77	.57	-.51	3.00	.86

Note: M – mean value, *SD* – standard deviation, α – alpha coefficient of internal consistency.

The results also reveal that there are no significant gender differences in the perception of the Faust Syndrome (Table 2). Furthermore, three educational groups of employees (Primary or Secondary School, College or BA, MA or PhD) do not differ in their perception of the Faust Syndrome ($F_{(2,608)} = .89$, $p = .614$).

Table 2

Gender differences in the perception of the Faust Syndrome at work (N = 611)

Variable	Gender	N	M	SD	t	df	p
Total of the Faust Syndrome	Female	394	1.94	0.61	1.25	609	.211
	Male	217	1.87	0.58			

Note: * $p < .05$ ** $p < .01$

When it comes to the organizational ownership type, it was found that there were significant differences in the perception of all FS dimensions (Table 3 and Figure 1). It is obvious that the employees from private domestic and foreign companies perceive the FS indicators as significantly less frequent than the employees from state-owned organizations. Furthermore, the employees from private domestic companies report the lowest level of the Faust Syndrome compared to all state-owned organizations and private-foreign companies.

Table 3

ANOVA results of the differences in the perception of the Faust Syndrome dimensions among the employees from four types of organizations based on the ownership structure (N = 611)

	Mean Square	F _(6,607)	p
Loyalty to patron	5.802 .63	9.24	.000
Subversive behaviour	2.518 .44	5.79	.001
Process manipulation	2.996 .35	8.58	.000
Ostracism	4.802 .52	9.18	.000
Negative attitudes	5.973 .56	10.65	.000
The Faust Syndrome Total	4.140 .34	12.09	.000

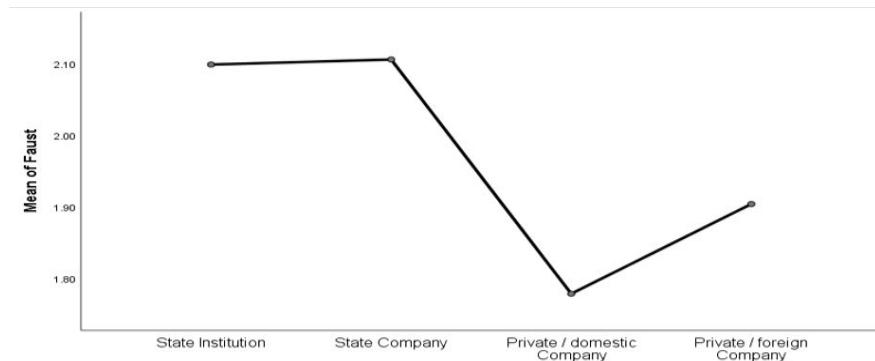


Figure 1. The Faust Syndrome severity in the organizations with different ownership structure (N = 611)

Our results also highlight the role of ownership type (state vs. private organization) in the expression of negative moral emotions towards others. The employees from state-owned organizations reported more negative moral emotions towards others (in total) than the employees from private companies ($t (476.5) = 5.14, p = .000$). All eight negative moral emotions towards others are more frequent in the work environment of state-owned companies (Figure 2). These results confirm H1.

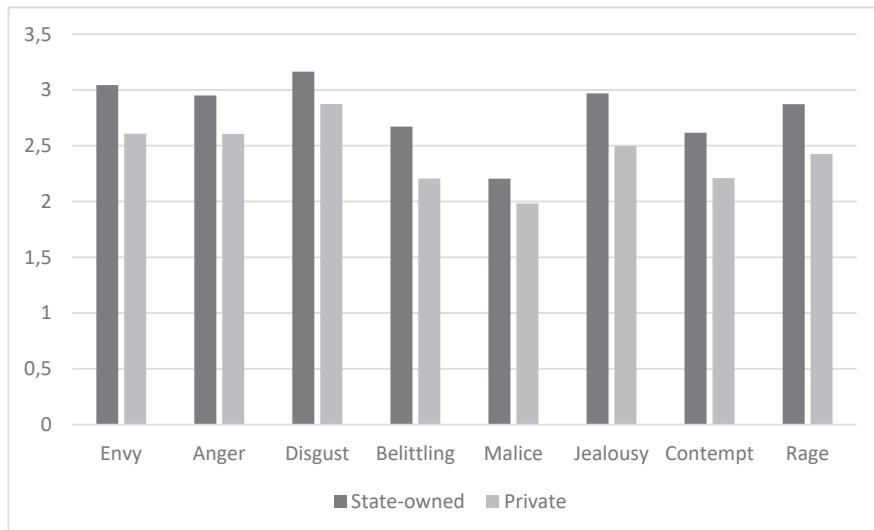


Figure 2. The perception of negative moral emotions in state-owned and private companies (N = 611)

Correlations and the mediation effect

As we can see from Table 5, the employees' perception of the Faust Syndrome as more present in their organizations is positively associated with the perception of more frequent negative moral emotions towards others (67.2% of a common variance), as well as with more symptoms of deteriorated health (12.3% of a common variance). This confirms H2.

Table 5

Correlations of negative emotions, health and the Faust Syndrome dimensions (N = 611)

Variable	Negative moral emotions towards others - total	Psycho-physical health - total
The Faust Syndrome Total	.82**	.35**
Loyalty to patron	.73**	.28**
Subversive behaviour	.56**	.32**
System manipulation	.65**	.23**
Ostracism	.67**	.29**
Negative attitude	.82**	.32**
Negative moral emotions towards others - total	-	.38**

Note. **p <.001

More specifically, it is indicative that the FS dimensions labelled as *Negative attitudes towards colleagues* and *Loyalty to patron* probably contribute most to the occurrence of negative moral emotions. In terms of psycho-physical health, it seems that the best predictors of more symptoms of deteriorated health include *Negative attitudes towards colleagues* and *Subversive behaviour towards an organization*.

The mediation effect of negative moral emotions towards others was tested by ordinary least square path analysis performed by using the SPSS Process macro (Hayes & Rockwood, 2020). The results support the hypothesis H3 that negative moral emotions mediate the relationship between toxic work relations (the Faust Syndrome) and deteriorated psycho-physical health (Figure 3 and Table 6). As we can see, the severity of the Faust Syndrome has a significant direct effect on employees' health ($c' = .14$), while the indirect effect ($ab = .14$) is also significant estimated on 5000 bootstrap resamples with the values between the lower and upper values of 95% confidence intervals being entirely above zero (.05 to .23). This means that toxic work relationships (i.e., the Faust Syndrome) affect the employees' psycho-physical health, in one part, through developing negative moral emotions towards their co-workers.

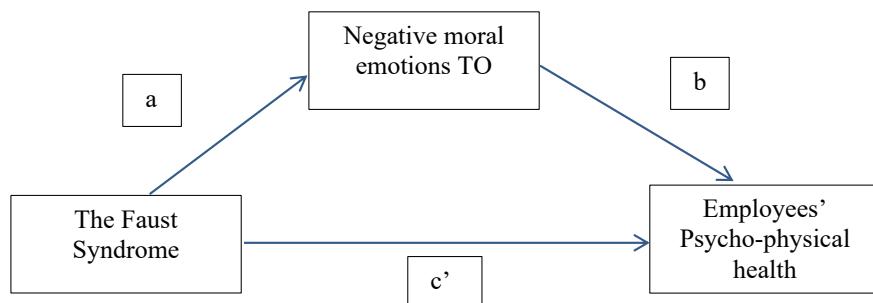


Figure 3. The Faust Syndrome and employees' health mediation model

We have found a very high level of 67.7% of common variance between the FS and negative moral emotions, suggesting that toxic work relationships indeed generate negative moral emotions towards others. The additional bivariate correlations analysis has revealed that the FS is associated most with the occurrence of negative moral emotions, such as *contempt* ($r = .76, p <.001$), *belittling* ($r = .75, p <.001$), and *rage* ($r = .74, p <.001$). Finally, negative moral emotions towards others are correlated with more symptoms of more deteriorated health, especially with the symptoms of fear and anxiety ($r = .36, p <.001$), social behaviour disorder ($r = .33, p <.001$), and the symptoms of physical health disorders ($r = .28, p <.001$).

Table 6
The Results of Mediation Analysis

		M (negative moral emotions TO)				Y (psycho-physical health)			
		B [95% CI]	SE	p	β	B [95% CI]	SE	p	β
Antecedents	X (the Faust Syndrome)	1.28 [1.21, 1.35]	.04	.00	.82 c	.14 [.03, .23]	.05	.01	.17
M (Negative moral emotions)		-	-	-	-	b	.11 [.04, .17]	.04	.00
		$R^2 = .68$				$R^2 = .13$			
		$F_{(1, 609)} = 1268.45, p <.001$				$F_{(2, 608)} = 46.83, p <.001$			

Discussion

In this study, we wanted to describe the severity of the Faust Syndrome (Majstorović, 2023) at the workplace, and to analyse the significance of demographics for the employees' perception of this specific type of toxic work relationships. Additionally, we wanted to explore the significance of negative moral emotions, here assumed to be caused by the Faust Syndrome, in the relationship between toxic work relationships and the employees'

psycho-physical health. We hypothesized that the employees from state-owned organizations perceived the FS more frequently (H1), and that a more frequent perception of the FS in an organization had a negative effect on the employees' health (H2). This effect was assumed to be mediated by negative moral emotions towards colleagues developed in a toxic work environment (H3). In other words, we tested the main assumption that negative moral emotions towards others, such as belittling, anger, disgust, rage, envy, malice, jealousy and contempt, probably caused by toxic work relations, did leave a significant mark on agents' health.

Our findings have revealed that over 70% of the sampled employees admit the existence of the FS in their organizations; the participants perceive Loyalty to patron and Subversive behaviour as the most frequent manifestations of the Faust Syndrome, while the Ostracism and System manipulation have been estimated as the lowest in frequency. This is a central point of the Faust Syndrome – subordinates become loyal to their patron and subversive towards their own organization. Contrary to previous studies (Singh et al., 2017; Fedorova, 2020), we did not find gender differences in reporting toxicity at work, or the differences among educational groups of employees. It seems that toxic work relations in the form of the Faust Syndrome affect equally females and males, and all employees regardless of their education level, from secondary school education to a PhD degree. Also, it has been found that the employees from private companies did perceive the Faust Syndrome as less frequent in their work environment (H1 confirmed). We believe that private companies invest more in work ethics, thus preventing toxic work relations from occurring in their environments. This corroborates previous research findings that indicated that state-owned companies (e.g., in China and Sweden), compared to the private ones, were rated poorer on ethical values, citizenship behaviour and attitudes towards the environment (Chun, 2009; Svensson et al., 2009).

In terms of negative moral emotions, we have found that these correlations range between .56 and .82, highlighting Loyalty to patron and Negative attitudes towards colleagues as the main predictors of these emotions. This leads towards the conclusion that the patron creates a hostile context and the relationships of distrust among his/her subordinates, and centralizes the communication networks, avoiding any opposition to him/her. Our findings also indicate that Negative attitudes towards colleagues and Subversive behaviour towards organization probably contribute to more symptoms of agents' poor psycho-physical health. These findings confirm H2, and they are in line with previous studies, such as those on the effects of toxicity at work on the employees' state of anxiety (Appelbaum & Roy-Girard, 2007) or on employees' physical health (Brown, 2004).

The analyses of negative moral emotions mediation effect reveal a clear picture indicating that the FS, besides its direct effect on employees' health,

also has an indirect effect on health, probably causing the agents to develop negative moral emotions towards others (first of all emotions such as rage, belittling and contempt). These findings confirm H3. Significant direct and mediation effects indicate that toxic work relationships leave a mark on employees' psycho-physical health with frequent negative moral emotions as part of the explanation. This conclusion is in line with previous studies (e.g. Abbasi et al., 2017) which have shown that the quality of work life is an important factor of employees' work capacity and, consequently, the overall organization productivity.

Practical implications of these findings are twofold. First, they suggest that fostering positive work relationships can enhance employees' well-being and improve the overall quality of their work life. Second, organizations should take proactive measures to prevent the emergence of a clientelistic culture (the "Faust Syndrome") by implementing ethics programmes that promote and reinforce positive norms of organizational behaviour.

Due to the use of an online snowball sampling technique (self-selection sample bias), one of the limitations of this study lies in the unknown degree of representativeness of the sample in relation to the overall population of employees in private and state-owned organizations in the Republic of Serbia. Another limitation concerns the collection of data from the employees whose specific work contexts are not known; therefore, it cannot be determined whether the reported negative moral emotions stem from the factors other than the quality of work relationships. Additionally, the participants evaluated the frequency of these emotions within their work environment, which may not necessarily reflect their own emotional states. Finally, all data were self-reported, which may introduce biases related to subjective perception and social desirability.

Future studies of this kind should aim at exercising greater control over sampling procedures. Questionnaires should include additional items addressing the ethical climate and other potential antecedents of employees' negative moral emotions (e.g., recent breaches of internal ethical standards, publicly known corruption scandals), as well as whether participants share these emotions with others. Future research could also address previous limitations by incorporating objective measures - such as peer evaluations or organizational records - to complement the self-reported data and mitigate potential biases.

Conclusions

In this paper, we explored the manifestations and the perception of a specific type of toxic work relationship named the Faust Syndrome (FS). Also, we examined the effects of demographics on the employees'

perception of this condition, and analysed whether the FS facets predicted poor employees' health and frequent negative moral emotions towards colleagues. Finally, we tested if negative moral emotions played a mediation role in the relationship between the Faust Syndrome and employees' psycho-physical health.

The four main conclusions are outlined as follows:

1. Over 70% of sampled employees reported the presence of the FS in their organizations; they perceived the Loyalty to patron and Subversive behaviour as the most frequent manifestations of the Faust Syndrome, while the Ostracism and System manipulation frequency were rated as the lowest. There were no gender or educational differences in reporting toxicity at work, and employees from private companies, compared to the employees from state-owned organizations, perceived the Faust Syndrome as less frequent in their work environment (H1 confirmed).
2. We found that the Loyalty to patron and Negative attitudes towards colleagues, as two facets of the Faust Syndrome, were the main predictors of negative moral emotions towards colleagues. Our findings have also indicated that two FS facets, named Negative attitudes towards colleagues and Subversive behaviour towards organization, probably contributed to more symptoms of agents' poor psycho-physical health. These findings confirm H2.
3. Our results have also confirmed H3, i.e., a mediating effect of negative moral emotions in the relationship between the FS and employees' psycho-physical health. Namely, it was found that these toxic work relationships probably induced a series of negative moral emotions towards colleagues in employees, which, if such emotions were more frequent at the workplace, would generate more symptoms of employees' psycho-physical health disorders.
4. As the Faust Syndrome is understood to result from clientelistic work relationships, organizations are advised to establish ethics programmes containing the standards designed to prevent the formation of cliques around toxic and corrupt leaders, who pursue their objectives at the expense of their employees' health and organizational integrity.

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Faustovski sindrom: da li negativne moralne emocije ostavljaju traga na psihofizičko zdravlje uposlenika?

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Cilj ovog rada bio je ispitati učestalost indikatora Faustovskog sindroma i analizirati efekte ovakvih toksičnih radnih odnosa na psihofizičko zdravlje zaposlenih, a preko negativnih moralnih osećanja prema drugima koja su izazvana takvim odnosima. Uzorak je činilo 611 ispitanika različitog pola (64,5% žena), zaposlenih na različitim pozicijama (83,3% na izvršilačkim), prosečne starosti 37,13 (SD = 11,94) i prosečne dužine radnog staža 8,09 godina (SD = 8,75). Za merenje toksičnih radnih odnosa korišćen je *upitnik Faustovskog sindroma* (FSQ-2) koji meri pet dimenzija: *lojalnost patronu, subverzivno ponašanje, manipulacija sistemom odlučivanja, ostrakizam i negativni stavovi prema kolegama*. Skalom učestalosti moralnih osećanja (SUMO) na radnom mestu merena su sledeća negativna moralna osećanja prema drugima: bes, gađenje, ljutnja, zavist, omalovažavanje, zluradost, ljubomora i prezir. Skalom psihofizičkog zdravlja (SPFZ-1) procenjena je učestalost simptoma poremećaja fizičkog zdravlja, straha i anksioznosti, depresivnih reakcija, umora i poremećaja socijalnog ponašanja. Nađeno je da Faustovski sindrom ima značajne efekte na učestalost negativnih moralnih osećanja prema saradnicima, da ovako indukovana negativna moralna osećanja ostvaruju značajne efekte na učestalost simptoma poremećaja psihofizičkog zdravlja uposlenika, kao i da ove emocije ostvaruju značajan medijatorni efekat u odnosu toksičnih radnih odnosa i zdravlja uposlenika. Zaključeno je da toksični radni odnosi u obliku Faustovskog sindroma najverovatnije indukuju kod zaposlenih brojna negativna moralna osećanja prema drugima, što, ako su takva osećanja češća, narušava njihovo psihofizičko zdravlje.

Ključne reči: Faustovski sindrom, toksični radni odnosi, moralna osećanja, psihofizičko zdravlje, zaposleni