

Prevalence of Bullying in Physiotherapy Undergraduate Students - A Cross Sectional Survey

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Abstract: A cross sectional questionnaire-based study aimed to find out the prevalence of bullying in physiotherapy undergraduates by assessing the existence of bullying in undergraduate students by using validated questionnaire. The study was conducted at VSPM's College of Physiotherapy in the year 2021-22. Out of 239 students, 145 participated conveniently. Significant findings of the study were 86% students liked their institute and the majority of the bullying incidence occurred in the classroom and by the batchmates. 82.8% subjects think bullying needs counteraction among which maximum response was seen from interns. 43.4% was the prevalence of bullying. The study also found that bullying was present in the campus as well as in close vicinity of the institution. At this particular point it did not have profound and adverse effect on student's career. Students did not cross limits of bullying, if it was crossed, could be termed as ragging. Importantly 125 students believed that institute tackles the problem in an appropriate and channelized manner therefore most of the students have liking for their institute.

Keywords: Bullying, physiotherapy, under-graduate students, qualitative.

1. Introduction

¹The Chartered society of physiotherapy defined bullying as 'offensive, abusive, intimidating, malicious or insulting behaviour or abuse of power which makes the recipient feel upset, threatened, humiliated or vulnerable, undermines their self-confidence and may cause them stress.'¹International reporting of bullying in health setting- 70% across the world. 20% for physiotherapy in Australia.²

Workplace bullying has received increased attention in all health related professions in recent years. Evidence suggests that workplace bullying is often repeated, deliberate and subtle behavior that accumulates over time. Strong associations have been identified between workplace bullying and poorer mental health including increased anxiety, low mood, anger, frustration and loss of confidence. Student physiotherapist entering the profession may be particularly vulnerable to bullying due to their lack of experience, position or authority.²The period of medical training is a very stressful time having implications for student's psychological health which lead to depressive symptoms and persistent stress. During their training period the medical students have to bear the pressure of demanding and competitive medical field.²

Bullying exists in various forms and various places but the health education students is worst hit by it.³ There are two types of bullying, one is horizontal and the other is hierarchical bullying. The former is seen to occur between individuals at same level whereas, the latter is influenced by the position of an individual within a setup where abuse takes various forms such as verbal bullying, calling names, physical bullying, written abuse, psychological manipulations that can be forced exclusion from activities of social situation⁵. Bullying has a significant impact on the organization where it occurs, including an effect on

productivity, financial cost and reputational cost, its decreased motivation, job satisfaction and performance and it has negative effect on victims family.² The violent and aggressive behavior are common in health setting, all health care professional including physiotherapist are sensitive to such behavior. There is a limited data on incidence of violent and aggressive behavior among physiotherapists.⁶ Although one recent national survey was done in U.K that showed over a half of mental health of physiotherapists had been assaulted on at least one occasion in their career.⁷ The victims experienced a wide range of negative psychological consequences (e.g. Anxiety, depression, insomnia, mental, emotional, intellectual health) and physical consequences (e.g. Injury).⁷ Education about prevalence of bullying is important in order to provide optimal knowledge about growing numbers of bullying cases in medical profession. Therefore, the aim of this study is to find out the prevalence of bullying in physiotherapy undergraduates by self structured questionnaire.

2. Review of Literature

Study on Physiotherapy students 'experiences of bullying on clinical internship: an explorative study was done by Brendon Stubbs and Andy Soundy in the University of West Midlands, UK. It was a cross sectional survey to consider the prevalence and type of bullying behaviours experienced whilst on clinical placement in a cohort of final year BSC undergraduate students. They included fifty two final year undergraduate students amongst them twenty five percent of students reported at least one incident of bullying behaviour.

Nick Rayment, Brendon Stubbs and Andrew Soundy conducted a study on Physiotherapy students 'experience confidence and attitude on the cause and management of violent and aggressive behaviour in the University of Midlands region of the UK. It was a retrospective survey to

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know about the risk of experiencing violent and aggressive behaviour from healthcare professionals. Sixty four final year students participated in the survey, amongst them over half (52%) of the respondent had experienced at least one incident of violent and aggressive behaviour on clinical placement.

3. Methodology

- **Study Design-** Cross sectional qualitative study
- **Study Setting-** VSPM's College of Physiotherapy
- **Duration of Study-** 18 Months
- **Proposal and Synopsis-** 1Year
- **Data Collection And Result-** 6 Months
- **Sample Size** - n=131
- **Target Population**– Undergraduate students (1st year to 4th year B.P.TH including interns)
- **Sampling Technique-** Sample of convenience

A cross sectional qualitative study was conducted in 2021-22 at VSPM's college of physiotherapy. It determined the prevalence of bullying among physiotherapy undergraduates by using a validated self structured questionnaire. 145 students volunteered in the study. The study included 1st to final students along with interns and postgraduate students were excluded from the study.

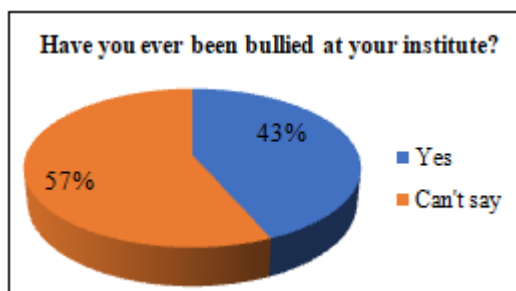
An inductive, cross sectional qualitative approach was adapted after obtaining the permission from head of the institute and the institutional ethics committee. The database of the interns and graduates was prepared. The compilation of consent form and confidentiality agreement was assured to all the participants. Owing to the time and clinical placement constraints the liberty was given to fill the self-structured questionnaire. The students were instructed to return the Self structured questionnaire within 24hrs from the receiving date.

Each participant was requested not to discuss self-structured questionnaire with their known participants to avoid interference effect. Participants were asked to mark their statement in a self-structured questionnaire form which consists of 13 questions, which includes Yes, No and Can't say.

Once the questionnaire came back with the sender, it was documented for further data analysis and result was obtained.

4. Result

There was 43.4% bullying reported in the campus.



125 students liked their institute.

Do you like your institute?	Frequency	Percent
Yes	125	86.2
No	2	1.4
Can't say	18	12.4
Total	145	100.0

5. Discussion

Physiotherapy students volunteered to participate in the study. Out of 145 samples, 84(27.6%) subjects were among 18-21 years age group and 69.7% subjects were among 22-25 years of age group and only 4 subjects were above 25 years of age. Female gender was dominating the study (130 females). 60 students were staying in hostels and rest were day-scholars. 47 (32.4%) volunteers were from 1st year whereas least no. was observed from 3rd year (30). Encouraging response was observed from the question, 'Do you like your institute?', that was 86% students liked their institute. The responses to the question, 'Have you ever been bullied?', was that 43.4% students faced bullying but most of the students were not clear about bullying and the responses were stating the same. 56% subjects could not answer about bullying. Findings from the question, 'I was teased in a hurtful way', was 11.7% among which highest was seen from the intern batch. The most notable observation of the study was ignoring the students or isolating the students from their groups. The bullied students were afraid of being bullied by other students in college again and again so they isolated themselves from rest of the students. Sometimes it was felt that lack of support from the educator was one of the matter of concern. 37% subjects were left out or ignored by fellow batch mates, juniors or seniors among which highest is seen in 3rd year (27.3%) and least was seen in 1st year (23.4%).

The study highlighted that there was very few incidence of manhandling present in the institute. 3.4% subjects were pushed, manhandled or locked indoors by fellow batch mates, juniors or seniors as it was recollected incidences by students from their past memories at the time of filling the questionnaire perhaps these events were not reported to the educators. Even for spreading false rumours about the bullied students was observed in the study. 35(24.1%) subjects have experienced bullying in the form of other students spreading false rumours about them and highest was observed from final year (30%). Similarly damaging the belongings or taking away money was less observed bullying incidence. Few students answered the question, 'I had money or other things taken away from me.' (4.1%)

Few subjects have been bullied over the internet among which least no. was observed in 1st year and 3rd year (3.3%). The analysis of study result showed the maximum incidence of bullying was frequently reported by fellow students. Class mates were the main offenders in the present study. In a study of medical students of United States by Frank, the frequency of harassment reported was 32% by fellow students. 56.6% students were bullied by same grade students which was the highest. Most of the time bullying has happened to be in the classroom and by the batch mates. The identified factors included situational influence of bullying,

students different reactions to bullying, sometimes inability to express the experience of bullying and very few spoke about overcoming of bullying. The students were frequently able to recall the feeling but it is suppressing that the overwhelming majority of sample did not feel the confidence in dealing with bullying. Sometimes students reported feelings of irritation, unworthiness and inferiority. Even they recorded isolation and they were forced to work against their wish (6.9%). The negative impact of this was that the students believed that they were reluctant to express their views and become submissive.³Bullying experience was shared with their batch mates followed by their parents and siblings but never reported to educator or authorities of the college. Some students articulated negative qualities of their superiors. When they were interviewed apart from the questions, the articulation included negative conflicts in the classroom and with their educators.⁶2(6.1%) subjects from 3rd year and 8.6% subjects from interns subjects have taken part in bullying. Therefore, it is observed that 3.4% students have taken part in bullying by teasing them, making fun of them, forced them to do things, ignoring them and spreading false rumours about them without having any intentions. 23.4% volunteers were afraid of being bullied by other students in the college and 82.8% subjects thought bullying needs counteraction among which maximum response was seen from interns (94.3%).

Some studies have demonstrated that bullying affects work satisfaction, increases absenteeism and induces higher level of stress. Such experiences have the potential to impact patient care but the positive point of this study was that no student has reported severe negative impact on their studies. Consequences of bullying were related to fear factor. As such the symptoms of anxiety, stress were not reported to college authorities. Therefore the cognizance is required to make stress free educational competitive healthy environment to have good confident professionals in the society. The students need to feel that there are open and confident channels of communication with either or all stake holders involved making par excellent healthcare professionals.

6. Conclusion

The study found that bullying was present in the campus of the institution. At this particular point it did not have profound and adverse effect on student's career. The reason could be the strict anti-ragging policies of institute that prevents profound effects of bullying.² Therefore it was not brought to the authorities.

Students were well within the limits of institutional behavioural code and ethics.

7. Future Scope

Further study needs to be carried out to find out the prevalence of bullying at multiple educational institutes simultaneously and the preventive measures at institute level apart from anti ragging measures.

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