

Prevalence of Bullying in Undergraduate Students at a Medical College of Nepal

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ABSTRACT

Introduction

Bullying is a common problem affecting physical and mental health as well as academic performance of students. It also results in harmful coping behaviours like indulgence in alcohol, drug abuse and college drop out. Compared to students from other streams, the proportion of bullying among medical students is very high. The objective of this study was to determine the prevalence of bullying among students in a medical college of Nepal.

Methods

A cross-sectional study was carried out amongst students of Kathmandu University School of Medical Sciences, enrolled in MBBS stream during the period of September 2021 to July 2022. Ethical approval was taken from Institutional review committee of the institute (Approval number: 76/2021). A semi-structured, self-administered questionnaire was used. Descriptive statistics were performed and Chi-square Test was done.

Results

The prevalence of bullying in this study was 78% (203) and 145 (71%) of the victims were male. Verbal bullying by classmates and others was 153 (75%) while non-verbal bullying by teacher/instructor was 120 (59%). Only 50 (24%) had ever complained about bullying and out of 50 complains, 27 (54%) said action was taken but bullying didn't stop in 33 (66%) of the cases. Out of 156 students who didn't complain, 57 (37%) students felt that it was not a big issue.

Conclusions

Bullying is a very common problem among medical students however most of the students take it lightly and no action is taken after complaining. Thus, students should be made aware about bullying and serious action should be taken against it.

Keywords: bullying; medical; undergraduate.

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INTRODUCTION

Bullying is repeated threatening, or showing violent behaviour towards a person or group of people who are thought to be subordinates or having less power.¹ Bullying is one of the common forms of violence occurring among youths i.e. 15 to 24 years of age.²⁻³ Around 42% of boys and 37% of girls are found to be victims of bullying. Bullying often has a long term effect on mental, physical and emotional health like embarrassment, lack of interest, suicidal ideation, poor academic performance etc.⁴⁻⁶ Bullying is a problem commonly affecting students from school to college and the perpetrators range from peers to teachers and instructors.^{5, 7-8} Bullying has also been found among medical students, trainees and junior doctors.⁹⁻¹³ Studies about bullying among college students specifically medical students is scarce in Nepal. Thus, this study aimed to determine the prevalence of bullying in students at a medical college of Nepal.

METHODS

An analytical cross-sectional study was conducted among 410 students in the Department of Community Medicine, Kathmandu University School of Medical Sciences (KUSMS), Dhulikhel, Kavrepalanchok, Nepal from September 2021 to July 2022. Students currently enrolled in Bachelor of Medicine and Bachelor of Surgery (MBBS) stream at the institute from first year to final year were study population. Ethical approval was taken from Institutional Review Committee of KUSMS (Approval number: 76/2021). Written consent was taken from each participant before the data collection. Data was collected using a semi-structured questionnaire. The questionnaire included information about socio-demographic profile, history of bullying at school and at medical college, different forms of bullying by classmates, teacher and others, complaining, action taken after complaining and reasons for not complaining. Verbal

bullying was defined as gossiping, giving nick name, belittling, humiliating, giving destructive or hurtful comments, unproductive criticism, yelling and abusing in front of others. Physical bullying was defined as hitting, pushing, beating, pinching etc. Non-verbal bullying was defined as being left out, neglecting, ignoring, unnecessary monitoring, giving tasks outside academic fields, unreasonably denying leave, pressurizing to do some work, setting impossible deadline and undervaluing of work. Cyber bullying was defined as forwarding private email, text messages, spreading rumour online, sending threatening or offending texts online and sharing embarrassing pictures online.

Collected data was checked for completeness and accuracy and then data was entered and analysed by using SPSS-20. Data was analysed by using descriptive and inferential statistical tools. In the descriptive statistics, frequency and percentage were calculated for categorical variables while mean and standard deviation were calculated for continuous variables. While in the inferential statistics, to find the association between socio-demographic variables with bullying chi-square test were used. P-value <0.05 was considered as statistically significant.

RESULTS

Total 259 out of 410 (63%) students participated in the study. The mean age of students was 21.51 ± 1.653 years (Mean \pm SD). Total 173 (66%) of the students were male and 90 (34%) were female. Majority of the students 244 (94%) belonged to Hindu religion and lived in a rented room 142 (55%) while 94 (36%) lived in hostel. More than half 148 (57%) belonged to basic sciences and 111 (43%) belonged to clinical sciences. Around 109 (42%) of the students had history of being bullied during school life. It was found that 203 (78%) students had experienced bullying at medical school (Figure 1). Out of 203 students who were bullied, 145 (71%) were male and 58 (29%) were female.

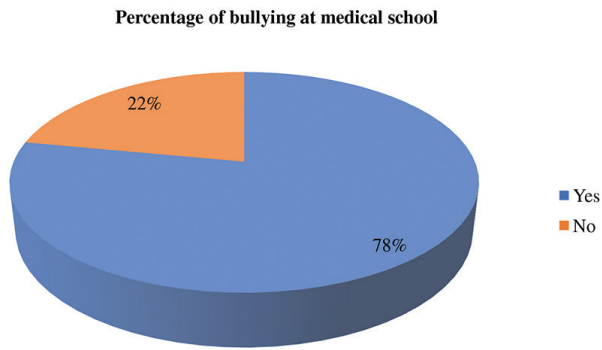


Figure 1. Percentage of bullying at medical school.

Total 101 (51%) of the students were bullied once or twice only while 99 (49%) of them were bullied several times. Most of the times, the perpetrators were male 129 (63%) while female perpetrators were 40 (20%) and 34 (17%) were bullied by both sexes. Classroom 98 (48%) and hostel 94 (46%) were common places where bullying took place. Total 197 (82%) of the respondents had never bullied anyone. Bullying was classified into verbal, non-verbal, cyber and physical bullying and perpetrators were classified into two groups i.e. A) Classmates and others and B) teacher or instructors. Classmates and others included classmates, seniors, residents, nurses, paramedics, administrative/account staff, canteen staff while teacher/instructors included

faculties, consultants and teaching assistants. It was found that amongst all forms of bullying done by classmates and others, verbal bullying was 153 (75%) (Figure 1). In bullying by teachers/instructors, non-verbal bullying was experienced by 119 (59%) (Figure 2).

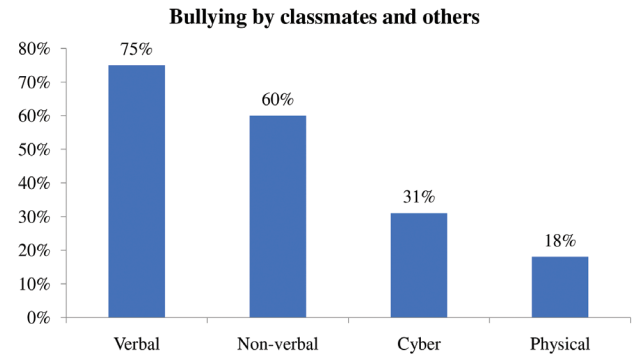


Figure 2. Bullying by classmates and others.

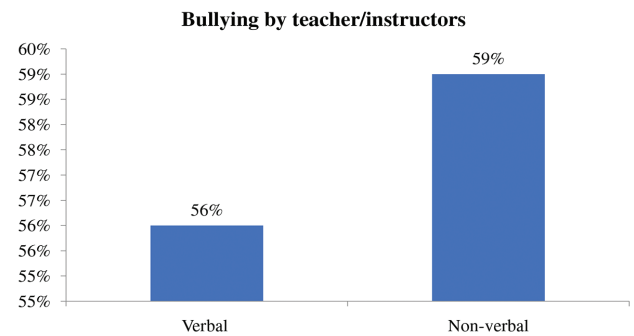


Figure 3. Bullying by teachers/instructors.

Variables		Bullying at Medical College		p-value
		No n (%)	Yes n (%)	
Gender	Male	145 (84)	27 (16)	0.001
	Female	58 (66)	29 (34)	
Level of study	Basic	118 (80)	30 (20)	0.323
	Clinical	85 (77)	26 (23)	
Religion	Hindu	195 (80)	49 (20)	0.024
	Buddhist and others	6 (50)	6 (50)	
Place of residence	Hostel	78 (83)	16 (17)	0.294
	Home	16 (70)	7 (30)	
	Rented room	109 (77)	33 (23)	
Bullied at school	Yes	103 (49)	109 (51)	0.000
	No	100 (40)	150 (60)	

Table 1 shows the association between socio-demographic characteristics of students and bullying at medical college. Gender, religion and previous history of bullying were associated with bullying at medical college (p value <0.05).

Out of 203 students who were bullied, 49(24%) responded that they ever complained among which 26 (53%) complained to college official while 15 (31%) complained to teachers and 8 (16%) to parents. Total 27 (55%) of the students said that action was taken after complaint however, 32 (65%) said that bullying didn't stop after complaining. Out of 154 students who didn't complain even after being bullied, 57 (37%) stated that it was not a big issue to be complained (Figure 4).

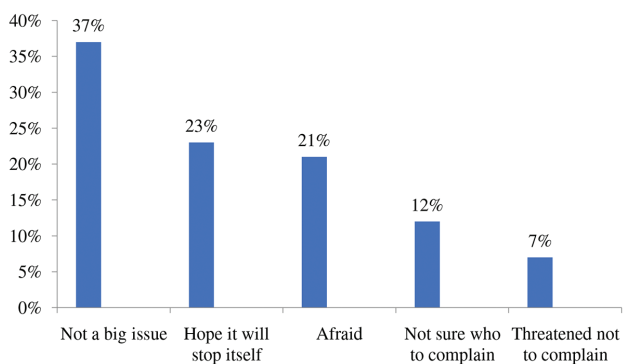


Figure 4. Reasons behind not complaining.

DISCUSSION

This study indicates that bullying among medical students is a common problem with almost 3 out of 4 students being victims. This finding is similar to study from India where bullying was found to be 88.77%.¹⁰ However, prevalence of bullying was lower than finding from Pakistan (52%) and Saudi medical school (28%)¹¹⁻¹² However, bullying in our study is much more higher than other studies from Pakistan (32%) and Saudi Arabia (28%). This study found that bullying committed by students themselves were much lower compared to study from India which found 98.69% bullying committed by victims themselves.¹⁰ Our finding show that males are victimized more compared to female medical students which is in line with study from

medical college of Saudi Arabia and Karachi, Pakistan.¹²⁻¹³ But more female were victims in an American study and study from Lahore.¹⁴⁻¹⁵ This might be due to the difference in male to female students' ratio and cultural difference and perception towards bullying. Almost half of the students had been bullied several times which is similar to finding from Egyptian study where 49% were bullied more than once.¹⁵ This finding highlights how common the problem of bullying is and how often students become its victims. Verbal bullying was the most common form of bullying in our study which was lower than study from India (97%), Saudi Arabia (90%) and Nigeria (93%) but higher than study from Quetta (27%).^{10-12, 17}

Our study showed that verbal bullying was more commonly perpetrated by classmates and others while non-verbal bullying was more commonly perpetrated by teachers and instructors and physical bullying was less common compared to other forms of bullying which is in line with results from Saudi Arabia, Egypt, Lahore and Nigeria.^{12, 15-17} This study also found that gender, religion and previous history of being bullied were associated with being bullied at medical school but no association was seen between year at medical school and bullying. However, in a similar study done in Karachi, Pakistan, association was seen between gender and year at medical school.¹³ Complaining about bullying was extremely less in our study which is similar to study from Quetta, Pakistan were reporting was 31% and more than Egypt were reporting was only 9%.^{11, 16} This difference could be due to the student's lack of knowledge and poor perception regarding bullying and less support from the institution or management against bullying. This study has certain limitations. Medical student bullying has been described as a subjective experience that individuals perceive thus, presence or absence of bullying may vary among respondents and may be under or over reported. Also, participation of the respondents was lower than compared which may be due

to the sensitivity of the study topic. Finally, the report is from a single medical school and therefore the results cannot be generalized for all the medical schools under Kathmandu University or in Nepal.

CONCLUSIONS

This study suggests that bullying among medical students is high. Male students are victimized more and both verbal and non-verbal bullying

is common. Underreporting of bullying event is widely found among the victims as bullying is not taken seriously and action is seldom taken against it.

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