



PATTERNS OF BULLYING BEHAVIOR IN UNDERGRADUATE NURSING STUDENT

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ABSTRACT

Bullying behaviour patterns among undergraduate nursing students are a worrying problem that can negatively affect the classroom, student well-being, and the standard of patient care. The study investigated the patterns of bullying behaviour in undergraduate nursing students. This observational study was conducted with 62 undergraduate students using the purposive sampling technique in 2-4 years nursing students. As a research instrument, the revised Olweus bully/victim questionnaire (OBVQ-R) was administered to students. The data were analysed using descriptive analysis in SPSS version 26.0. The data showed that there were 10 patterns of bullying performed and received by nursing students in this study. In the category of victimisation, the highest pattern performed was spread rumours/lies talk (48.4%), followed by mean names (37.1%). In the aggression scale that represents bullying, the most common complaints are "call mean names" (32.3%), followed by "excluded from group" (25.6%). To address various forms of bullying behaviour in the nursing school environment, it is suggested that nursing schools provide bullying prevention programmes and counselling to nursing students.

Keywords: bullying; pattern; student; undergraduate

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INTRODUCTION

Bullying in modern educational institutions is seen as a pretty prevalent and significant problem today. It was discovered that the development of understanding bullying as a psychological-pedagogical aspect of violence in education institutions, where the school produces the realities of modern life and students imitate a certain model of behavior and interpersonal interaction, results in the development of certain personality's characterological features that can be formed as destructive. The proclivity for the development of harmful behavior in pupils, which is linked to the reasons of modern society's destabilization in numerous ways. (Fernandez, 2021). Bullying in the campus is a major issue these days. There is mounting proof that it occurs in a variety of settings and professions, suggesting that it is a widespread occurrence. One of the nations where research and understanding on workplace bullying are still in their infancy is South Africa. (Amoo,2021).

Campus is a place for someone to pursue science, shape character and place of development of the future successor of the nation, see the importance of school for students then school should be a safe, comfortable, and fun place. But unfortunately, some students who feel uncomfortable or even become scary places, one of them is bullying behavior that happens in campus (Indriyani ,2019). Bullying can be defined as a deliberate aggressive act or behavior, committed by a group of people or someone repeatedly and from time to time against a

victim who cannot defend himself easily (Olweus in Geldard, 2012). Bullying will always involve an imbalance of power, intention to hurt, threat of further aggression, and terror. Bullying is an act or attack given by a bullying perpetrator against a victim that is carried out continuously and at any time without any resistance from the victim, not only the victims and perpetrators but whoever sees will get the impact. Bullying is one of the most common cases among student, however, the case is still underreported as it is often considered a normal occurrence in schools or campus.

In Indonesia itself, there are many victims of bullying that the perpetrators are unaware of, the victims can only be silent, passive and unable to fight. Bullying can affect all students in a variety of ways. When a student becomes a victim, the student will suffer, may suffer physical injuries, may feel unhappy and afraid to go to campus. Over time, the student will lose confidence and self-esteem, even blaming himself for feeling the cause of the bullying that happened to him. Such unhappiness tends to affect the student's concentration and learning patterns. Some students will avoid bullying by absent from school, even some victims have fear of leaving their homes. (Ahkam & Fakri, 2017). Bullying is a serious issue that affects all aspects of nursing students' lives. Harassment has consequences for both the students' live and also quality care for patient in clinical practice (Fernandez, 2021), so it is critical to take action against bullying and to act on behalf of victims, perpetrators, and health organisations. Therefore, it is very important to analyze the pattern of bullying in undergraduate nursing student, so educators can find the best solution to tackle bullying behavior among nursing student and enhance the nursing quality care. Therefore, this study aims to examine patterns of bullying behaviour in undergraduate nursing students.

METHOD

This research was descriptive. Included were students from the 2,3,4-year undergraduate nursing program offered by the Faculty of Nursing at De La Salle Catholic University of Manado. This study involved 62 nursing students as respondent. The Olweus bully/victim questionnaire (OBVQ-R) was the instrument employed in this study, and the nursing student's Cronbach Alpha reliability coefficient was found to be 0.93. Victimization and Aggression each had ten questions on the scale. Regarding the scale item responses, the options are: once every week, twice or more per week, three times or more in two months, and two to three times each month. Researchers collected the questionnaires after distributing them to nursing students. The researcher and their team presented the goal of this study to nursing students prior to the distribution of the questionnaire.

RESULTS

As can be seen from the demographic data of the respondents in table 1 which shows the majority of respondents to this study were women under the age of twenty and second-year nursing students. There are 10 patterns of bullying behavior on victimization and also aggression. Where on victimization the highest pattern performed was spread rumors/lies talk (48.4%) and followed by mean names (37.1%) and the least performed were comments/gestures with sexual meaning (8%). In the aggression scale that represents bullying, the most common complaints are "call mean names" (32.3%), followed by "Excluded from group" (25.8%). The most common behaviours in bullying are physical acts, broken objects, being forced to perform tasks, remarks about race or colour, and remarks or gestures with a sexual connotation (21%).

Table 1.
Respondent characteristics (n=62)

Respondent characteristics	f	%	Mean	SD
Age			19.60	1.59
< 20 year	47	75.8		
> 20 year	15	24.2		
Gender			1.89	0.32
Male	7	11.3		
Female	55	88.7		
Years of Study			2.13	0.86
2nd year	27	43.5		
3rd year	16	25.8		
4 th year	19	30.6		

Tabel 2.
Pattern of Bullying Behavior (n=62)

Pattern of Bullying	f	%	Mean	SD
Victimization				
Call mean names	23	37.1	0.65	1.10
Excluded from group	17	27.4	0.35	0.73
Physical action (hit, kicked, pushed)	11	17.7	0.21	0.52
Spread rumors/lies talk	30	48.4	0.90	1.24
Damaged things	12	19.4	0.26	0.63
Forced to do things	12	19.4	0.37	0.93
Comments about race or color	15	24.2	0.47	1.00
Comments/Gesture with Sexual meaning	8	12.9	0.16	0.49
Cruel messages/photographs/videos by social media	10	16.1	0.27	0.77
Aggression				
Call mean names	20	32.3	0.66	1.13
Excluded from group	16	25.8	0.52	1.02
Physical action (hit, kicked, pushed)	13	21	0.47	1.02
Spread rumors/lies talk	15	24.2	0.52	1.04
Damaged things	13	21	0.47	1.02
Forced to do things	13	21	0.47	1.02
Comments about race or color	13	21	0.47	1.02

Comments/Gesture with Sexual meaning	13	21	0.47	1.02
Cruel messages/photographs/videos by social media	14	22.6	0.48	1.02

DISCUSSION

The patterns of bullying behaviour most commonly found in the study included spreading rumours or liars talk, calling mean names, and exclusions from a group of friends on campus.

Spreading rumours or liars talk

According to the results of this study, 48.4% of nursing students were the victims of this harassment behaviour and 24.2% of perpetrators did in campus life. Based on previous research, rumours and lies can spread rapidly and widely in campus life and especially through social media, where they can affect the social life of nursing students (Gürbüz et.al., 2021). Rumours and gossip are used by college bullying and harassment perpetrators for a variety of purposes, including upholding oppression, expressing jealousy, humiliating their junior or considered weak, and closing or widening the power gap. (Pheko, 2018). The spread of unfounded gossip or rumours offline or online, the perpetrators of bullying to damage the victim's reputation or to destroy friendship. (Sangwan & Bahtia, 2020). The negative impact of the spread of rumours and false stories is misleading judgment, having a negative impact on social order. (Ai et.al., 2021). And this can also have a negative impact on the mental health of nursing students, which will eventually also affect the quality of the care of the patient.

Calling mean names

Calling mean names is a type of bullying characterized by repeated exposure to physical and/or emotional aggression from the perpetrator to the victim. (Alsuliman et.al., 2022). Calling mean names is the most common form of harassment among students (Amara et.al., 2022). The use of mean names is a type of bullying that negatively affects school attention and academic performance of students (Tekel & Karadag, 2019) even for nursing students can also affect the quality of nurses' care services in health facilities. In this study, 37.1% of students were victims of this type of harassment and 32% of students performed this behaviour as perpetrators, where this number is quite high among nursing students. Bullying can have various effects on individuals, including nursing students who may experience mean name-calling or other forms of verbal abuse. The impact of bullying can be both physical and psychological.

Exclusions from a group of friends on campus

Social exclusion is considered to be indirect harassment behaviour, as it occurs in a way that is less visible and considered less visible than verbal and physical bullying. (Fox, 2020). Despite this, social exclusion and harassment in nursing students can lead to feelings of sadness, loneliness, depression, and a feeling of being a stranger among peers. (Skarstein et.al., 2020). Perceived discrimination, such as the discrimination of exclusion perceived by perpetrators, acts as a mediator between temperamental characteristics and the type of bullying given by the perpetrator to the victim. (Hania et.al., 2022). Friendship groups can increase student confidence by having friends in campus life who can help each other with every task and challenge in learning on campus but if there is a student's expulsion from the group, it will lead to anger and humiliation of students who are victims of social exclusion.

(Jones & Rutland, 2019). This research finds that 27.4% of bullying victims were removed from friendship groups on campus, a large figure that can also lead to the high risk of depression and loneliness experienced by nursing students during their campus life.

Classmates were the most frequently reported bullying perpetrators. Bullying behaviour among students was linked to poor psychological health and perceived stress. A lower grade point average emerged as a significant predictor of bullying behaviour exposure. The policies that define the legal implications of bullying must be developed by nursing institutions in order to protect nursing students. Therefore, faculty and clinical service providers should collaborate to reduce the prevalence and impact of negative bullying behavior among nursing students (Abdelaziz & Abu-Snieneh, 2022). Bullying among students in campus can have a negative impact on them. Bullying can cause anxiety, low psychological well-being, poor social adjustment, psychological distress, and an increased risk of suicide (Yosep, et.al).

In comparison to other professions, nursing has the highest rate of violence and bullying, and nursing students are more vulnerable to bullying and violence within nursing. (Alshawush, et.al. 2022). The prevalence of bullying among nursing students remains a major source of concern for the profession, particularly for nurse educators. It is also a problem in other health-care programs (O'Flynn-Magee, et.al. 2020). Students' self-esteem decreased in many conditions when they were perceived to be bullied. This can result in psychological struggles such as sadness, loneliness, fear, loss of self-confidence, anger, and anxiety, as well as physical symptoms such as sleep problems, fatigue, headaches, and cold sweats. Bullying in undergraduate students can be addressed through techniques such as mentoring and counselling by nurse educators, courses about bullying they may encounter on campus, encouraging nursing students to report inappropriate behavior, and providing opportunities for social support from peers, all of which can support nursing students' professional self-esteem and performance (Koc, et.al. 2022).

Furthermore, providing instructors and nursing staff with teaching, communication, and feedback skills may aid in the prevention of bullying incidents on campus (Fang, et.al. 2020). Bullying has a negative impact on students' health and quality of life. The students, on the other hand, found it difficult to report being bullied. Student complained about the school environment, which can influence bullying behavior, and having a friend was important in dealing with the effects of bullying on students (Kvarme, et.al.2020). Encourage nursing students to report all bullying incidents, provide counselling to nursing students, and arrange bullying prevention courses for students were all important in preventing bullying on campus.

CONCLUSION

As conclusion it is suggested that nursing schools provide bullying prevention programs and counselling to nursing students in order to tackle bullying behavior in the nursing school environment. Therefore, nursing student can focus on achieving their learning objectives, gaining confidence, and developing their personal and professional identity as a nurse.

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