

Student Nurses' Perception of Bulling Experience and Its Coping Strategies During Clinical Training: A Cross Sectional Study

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Abstract

Background: Bullying remains as a disturbing problem in the nursing career. Nursing students may meet bullying behavior during clinical practice. Nevertheless nursing students may not be prepared enough to be acquainted with bullying behavior when faced . Aim: To explore student nurses perception regarding bulling experience and its coping strategies during clinical training. **Subject and Methods:** A descriptive cross-sectional design on 106 student nurses at port-said university , Egypt using three tools as follows: the first tool for student's perceptions assessment sheet regarding bulling experience , the second tool for assessment of students self esteem level while the third tool for student's coping strategies methods of bulling. **Results:** Reflected that there is that there is a statistically significant correlation between student's sociodemographi characteristics and there Rosenberg scale levels of self esteem only in the item related to If they faced bulling situation, what is the reason of not telling any person (Ps= 0. .001) . In addition to , revealed that there is a statistically significant correlation between student's socio demographic data and their dealing methods with bulling situation based on a Kobe scale in the item related to gender (Ps= 0.041) and also in student's thought of leaving the nursing profession and college because of bulling(Ps= 0.004) .**Conclusion & Recommendations:** Based on study results there are a low feeling of self confident and esteem among student nurses during clinical practice and there are an underestimated with unfair criticism negatively affecting their ability to provide care . So, there are needs for implementation of multimedia educational program for students regarding corrective actions of bulling situations during clinical training.

Key Words: Perception, bulling experience, coping strategies, clinical training, student nurses

Introduction

Today, Bullying has been recognized as a serious problem. It is essential that educators understand the

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dynamics and consequences of bullying, as well as what the proper actions should be taken to support students in these situations (*Allen, 2010*)⁽¹⁾. Bullying is identified as one of the most major problems faced also children in the education, as well as one of the most considerable health hazards (*Block.,2014*)⁽²⁾ . Although Bullying in nursing is not a novel phenomenon faced nursing students there is restricted literature that directly deals with bullying faced nursing students in the clinical settings (*Minton & Birks ., 2019*)⁽³⁾.

Perfectly, the culture of nursing should be supportive, caring, kind, and empathetic especially when it comes to interactions between nursing colleagues. While the patient care linked within the culture of nursing and their compassionate, the collegial culture often is aggressive. In nursing profession, bullying has a harmful effects not only on the bullied persons but also on the delivering quality of health care and patient protection (*Obeidat et al., 2018*)⁽⁴⁾.

In Egypt, previous studies of school bullying did not address the both adolescents personality for who bully and have been victimized and their involvement with their behavioral disorders in rural areas (*Galal et al., 2109*)⁽⁵⁾.

Incivility is a form of bullying which impends to cause emotional distress as a negative effect resulting of stressful environment of nursing school. Furthermore, Uncivil students' behavior contradict academic outcomes, affect the professional nursing ethics when students used discourteous symbols during care with their patients (*Ibrahim & Qalawa., 2016*)⁽⁶⁾. While, Indirect bullying involves interaction between the bully and others that then indirectly affects the person being bullied as withdrawal and isolation, lies and making false accusations (*McMahon et al., 213*)⁽⁷⁾.

Psychological health was considered as a hard cognitive and life attitude which bullying is considered as a stressor that negatively affects the psychological health which is needed to improve nursing students abilities to educated successfully and continue their career (*Ren & Kim.,2017*)⁽⁸⁾.

Bullying others was associated with low psychosocial adjustment, which was a composite their psychological disappointment of problem behaviors, social and emotional well-being (*O'Donnell, 2015*)⁽⁹⁾. Consequently, bullying avoidance strategy must be a part of deal with unpollited attitude come again (*Serafin & Czarkowska-Pączek., 2019*)⁽¹⁰⁾.

Justification of the problem:

Nursing students have reported that faculty sometimes low-prepared to address bullying situations which the major role of them that how to give students feedback regarding bullying, recognition and take proper actions which affect learner communication skills (*Seibel & Fehr., 2018*)⁽¹¹⁾. Therefore, the current aim was to explore student nurse's perception regarding the effect of bullying behaviors on their self esteem and clinical Competency.

Conceptual framework

A conceptual framework deal with Social cognitive theory (SCT), used in psychology, education, and communication, holds that portions of an individual's knowledge acquisition can be directly related to observing others within the circumstance of experiences, and influence of social communication channels. According to Albert Bandura theory clarified how learner imitate a model behavior through observe and keep in mind the cycle of situation and then use this observation to formulate their consequent behavior. (*Bandura., 2011*)⁽¹²⁾. Although social influences and environmental factors may be highly variable, according to social cognitive theorists, underlying all developmental competencies in adolescence is self-efficacy, which refers to the scope to which individuals suppose they can be successful in their actions. (*O'Donnell, 2015*)⁽⁹⁾.

Research Questions:

Q 1 : What is the student's perceptions of bullying experience.

Q 2 : What are the coping strategies of bullying that student's follow.

Q 3 : Are there a relation between student's self esteem levels and their demographic data

Q 4 : Are there a relation between coping strategies with bullying situations with student's demographic data

Subjects and Methods

A descriptive cross-sectional design on 104 of purposive sampling of all available both sex student nurses in all levels during academic year 2019-2020 distributed as 14 from the first level , 28 from second level , 49 from third level , and 13 from fourth level from faculty of Nursing at Port-said university. Data collected online as a preventive strategies for corona virus at this time by using three validated adapted tools **from Clarke., 2009** ⁽¹³⁾ & **Ümmet., 2015** ⁽¹⁴⁾ as follows: **Tool I : student's perception of bullying sheet** , it includes two parts which part 1 includes 7 questions to assess sociodemographic characteristics such as age, sex, levels , experience of bullying , actions taken when faced bullying situation while part 2 includes 34 questions to assess student's perceptions and attitude regarding bullying experience . **Tool II: (Rosenberg Self-Esteem Scale sheet)** . This tool includes 10 items used to assess the student's self esteem. **Tool III: COPE Inventory sheet.** it includes adopted 25 validated inventory questions to assess actions taken to coping with experiences of bullying during clinical practice.

Ethical Considerations

Online informed consent was obtained from all students before starting the participation on the study through using link of questionnaire after clarification of assured confidentiality and their right of refuse. Ethical approval will obtain from ethical board of Faculty of nursing, Port-said University.

Procedure

Based on literature review the tool was developed and then validated after translated into Arabic through face validity from five professors specialized on Medical- surgical nursing field in port-said faculty of nursing was done , then **Pilot study** on 10% of students was carried out to test possibility of tool application and needs for necessary modifications . Otherwise, these students were then excluded from the

studied sample. Reliability was done using Cronach alpha coefficient test which calculated as 0.94. Data collected through distributing the questionnaire to patient's ; data collected from August 2020 until December 2020 through online questionnaire link as a preventive measures for infection control of corona virus (Covid 19) at this time . Data were analyzed using SPSS software package version 20.0. Mean and standard deviation Significance of data was judged at the 5% level.

Scoring system:

Scoring systems for **Tool I** including assessment of student's perception towards bullying experience and **Tool II** assessment of **Rosenberg Self-Esteem Scale** for perception questions it is ranged from 0-1 scores which zero score for wrong answer and 1 for right answer. For self esteem scale it is ranking from 1 to 4 as Never, often, some time, and all the time respectively. **Tool III** was **COPE Inventory sheet** which scores ranged from 1 to 4 which as strongly agree , Agree , disagree , and strongly disagree respectively , then classified as high level for above 75% , Moderate 50-75% , Low \leq 50% (**Ümmet., 2015**) ⁽¹⁴⁾ .

Results

Table (1) revealed that (71.7%)of students were female , (84.6%) were in age group below 22 year , (47.1%) from third level, .Also, (66.3%) were have thought about leaving the nursing profession and college because of bullying , (34.6%) were response of action if faced bullying that not told any one will (73.5%) of them choice if told person they choice the supervisors of practical training , (41.3%) of them reasons of not told any one others feeling that it is useless.

Table (2) noted that there are (41.3 %) of students agree toward confidently during perform most of the procedures of patient's care, while (43.3%) of students agree that feel being underestimated is negatively

affecting their ability to provide care , (38.5%) feel agree & strongly agree regarding the screaming is negatively affecting their ability to provide care to patients , (39.4%) agree that feel the exclusion is negatively affecting their ability to provide care to patients . Finally , (42.3%) feel that unfair criticism is negatively affecting their ability to provide nursing care

Table (1): Distribution of the nursing students according to their socio demographic data (n = 104)

Q	Sociodemographic data	No.	%
1	Sex		
	Male	19	18.3
	Female	85	71.7
2	Age		
	Less than 22 year	88	84.6
	More than 22 year	16	15.4
3	Grade		
	First	14	13.5
	Second	28	26.9
	Third	49	47.1
	Fourth	13	12.5
4	Have you thought about leaving the nursing profession and college because of bullying?		
	Yes	12	11.5
	No	69	66.3
	Sometimes	23	22.1
5	If you were bullied during training, would you tell anyone about it?		
	Yes	25	24.0
	No	36	34.6
	Probably	32	30.8
	I haven't thought yet	11	10.6
6	If yes, who would you tell? (N = 104)		
	Supervisor of practical training	39	37.5
	Your colleagues	15	14.4
	Your friends	20	19.2
	the mother	10	9.6
	Brother / Sister	4	3.8
	hospital manager	2	1.9
	Dean of the College	5	4.8
	Last mention	9	8.7
7	. What is the reason (n = 104)		
	the fear	6	5.8
	Shy	12	11.5
	weak personality	1	1.0
	Anxiety over evaluation	6	5.8
	Feeling that it is useless	43	41.3
	I do not want anyone to know anything about me	28	26.9
	I can't find someone to trust	8	7.7

Table (2): Distribution of Students' feeling responses regarding bullying situations during clinical training (n = 104)

Q	Second: Students' feelings about bullying situations during field work	Strongly disagree		Disagree		Sometimes		Agree		Strongly agree	
		No.	%	No.	%	No.	%	No.	%	No.	%
1	Feel confident that i can perform most of the skills needed to care for patients	0	0.0	5	4.8	19	18.3	43	41.3	37	35.6
2	Feel that being underestimated is negatively affecting my ability of patient's care	1	1.0	9	8.7	21	20.2	45	43.3	28	26.9
3	Feel the screaming is negatively affecting my ability of patient's care	2	1.9	9	8.7	13	12.5	40	38.5	40	38.5
4	Feel the exclusion is negatively affecting my ability to provide care to patients	5	4.8	10	9.6	14	13.5	41	39.4	34	32.7
5	Feel that unfair criticism is negatively affecting my ability to provide nursing care	4	3.8	10	9.6	17	16.3	29	27.9	44	42.3

Table (3): Distribution of the nursing students in relation to the Rosenberg scale of self-esteem items (n = 104)

Q	Third: the Rosenberg scale of self-esteem	Strongly disagree		Disagree		Agree		Strongly agree	
		No.	%	No.	%	No.	%	No.	%
1	Generally, I am satisfied with myself	2	1.9	8	7.7	44	42.3	50	48.1
2	Sometimes I feel that I am not feeling well	4	3.8	21	20.2	58	55.8	21	20.2
3	I feel that I have the quality of performance	1	1.0	9	8.7	64	61.5	30	28.8
4	I am able to accomplish tasks like others	0	0.0	6	5.8	59	56.7	39	37.5
5	I feel like I don't have much to be proud of	14	13.5	39	37.5	37	35.6	14	13.5
6	I definitely feel pointless sometimes.	11	10.6	29	27.9	51	49.0	13	12.5
7	I feel that I 'm less worth than others	40	38.5	38	36.5	17	16.3	9	8.7
8	I hope to have more respect for myself	2	1.9	11	10.6	56	53.8	35	33.7
9	In general, I feel like a failure compared to others	32	30.8	34	32.7	29	27.9	9	8.7
10	I take a positive attitude towards myself most of the time	0	0.0	10	9.6	70	67.3	24	23.1

Table (4): Relationship between student's sociodemographic data and their levels of self-esteem

Demographic data	Rosenberg scale of self-esteem Levels						χ^2	MCp
	Low (n =14)		Moderate (n =69)		High (n =21)			
	No.	%	No.	%	No.	%		
Sex								
Male	4	28.6	13	18.8	2	9.5	7.154	0.088
Female	10	71.4	56	81.2	17	81.0		
It is preferable not to authorize	0	0.0	0	0.0	2	9.5		
Age (years)								
Less than 22 year	12	85.7	59	85.5	17	81.0	0.453	0.918
More than 22 year	2	14.3	10	14.5	4	19.0		
Grade								
First	4	28.6	8	11.6	2	9.5	3.870	0.699
Second	2	14.3	20	29.0	6	28.6		
Third	6	42.9	33	47.8	10	47.6		
Fourth	2	14.3	8	11.6	3	14.3		
Have you thought about leaving the nursing profession and college because of bullying?								
Yes	3	21.4	9	13.0	0	0.0	5.484	0.222
No	7	50.0	46	66.7	16	76.2		
Sometimes	4	28.6	14	20.3	5	23.8		
If you were bullied during training, would you tell anyone about it?								
Yes	4	28.6	16	23.2	5	23.8	6.050	0.403
No	7	50.0	25	36.2	4	19.0		
Probably	3	21.4	21	30.4	8	38.1		
I haven't thought yet	0	0.0	7	10.1	4	19.0		
If yes, who would you tell?								
Supervisor of practical training	6	42.9	23	33.3	10	47.6	18.846	0.082
Your colleagues	5	35.7	9	13.0	1	4.8		
Your friends	1	7.1	16	23.2	3	14.3		
the mother	0	0.0	9	13.0	1	4.8		
Brother / Sister	1	7.1	3	4.3	0	0.0		
hospital manager	0	0.0	2	2.9	0	0.0		
Dean of the College	0	0.0	1	1.4	4	19.0		
Last mention	1	7.1	6	8.7	2	9.5		

Cont... Table (4): Relationship between student’s sociodemographic data and their levels of self-esteem

If the answer is no. So what is the reason								
the fear	2	14.3	4	5.8	0	0.0	31.221*	<0.001*
Shy	5	35.7	6	8.7	1	4.8		
weak personality	0	0.0	1	1.4	0	0.0		
Anxiety over evaluation	2	14.3	3	4.3	1	4.8		
Feeling that it is useless	3	21.4	37	53.6	3	14.3		
I do not want anyone to know anything about me	2	14.3	14	20.3	12	57.1		
I can’t find someone to trust	0	0.0	4	5.8	4	19.0		

χ²: Chi square test MC: Monte Carlo *: Statistically significant at p ≤ 0.05

Table (5): Relationship between student’s socio demographic characteristics and their coping methods with bullying situations based on a Kobe scale

Sociodemographic data	A Kobe scale for methods of dealing with bullying situations						χ ²	MCp
	Low (n =3)		Moderate (n =95)		High (n =6)			
	No.	%	No.	%	No.	%		
Sex								
Male	2	66.7	16	16.8	1	16.7	10.024*	0.041*
Female	1	33.3	78	82.1	4	66.7		
It is preferable not to authorize	0	0.0	1	1.1	1	16.7		
Age (years)								
Less than 22 year	2	66.7	81	85.3	5	83.3	1.554	0.540
More than 22 year	1	33.3	14	14.7	1	16.7		
Grade								
First	2	66.7	12	12.6	0	0.0	8.375	0.102
Second	0	0.0	28	29.5	0	0.0		
Third	1	33.3	43	45.3	5	83.3		
Fourth	0	0.0	12	12.6	1	16.7		
Have you thought about leaving the nursing profession and college because of bullying?								
Yes	3	100.0	8	8.4	1	16.7	13.700*	0.004*
No	0	0.0	64	67.4	5	83.3		
Sometimes	0	0.0	23	24.2	0	0.0		

Cont... Table (5): Relationship between student’s socio demographic characteristics and their coping methods with bullying situations based on a Kobe scale

If you were bullied during training, would you tell anyone about it?								
Yes	2	66.7	20	21.1	3	50.0	7.435	0.164
No	1	33.3	33	34.7	2	33.3		
Probably	0	0.0	32	33.7	0	0.0		
I haven’t thought yet	0	0.0	10	10.5	1	16.7		
If yes, who would you tell?								
Supervisor of practical training	1	33.3	35	36.8	3	50.0	10.143	0.822
Your colleagues	1	33.3	14	14.7	0	0.0		
Your friends	0	0.0	18	18.9	2	33.3		
the mother	0	0.0	10	10.5	0	0.0		
Brother / Sister	0	0.0	4	4.2	0	0.0		
hospital manager	0	0.0	2	2.1	0	0.0		
Dean of the College	0	0.0	5	5.3	0	0.0		
Last mention	1	33.3	7	7.4	1	16.7		
If the answer is no. So what is the reason								
the fear	0	0.0	6	6.3	0	0.0	16.173	0.128
Shy	3	100.0	9	9.5	0	0.0		
weak personality	0	0.0	1	1.1	0	0.0		
Anxiety over evaluation	0	0.0	6	6.3	0	0.0		
Feeling that it is useless	0	0.0	40	42.1	3	50.0		
I do not want anyone to know anything about me	0	0.0	26	27.4	2	33.3		
I can’t find someone to trust	0	0.0	7	7.4	1	16.7		

c²: Chi square test MC: Monte Carlo

*: Statistically significant at $p \leq 0.05$

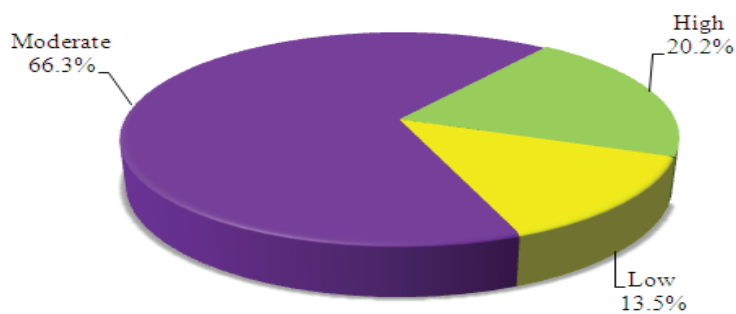


Figure (1): Distribution of the studied nursing students based on Rosenberg levels (n = 104)

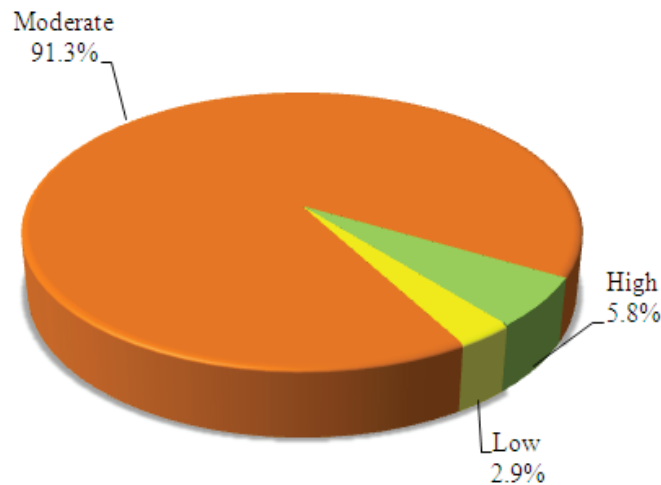


Figure (2): Distribution of the studied nursing students in relation to of Kobe levels for methods of coping with bullying situations (n = 104)

Discussion

Globally, work bullying has critical effects on nursing staff health (*AL-Sagarat et al., 2018*)⁽¹⁵⁾. Otherwise, nursing bullying is implicit phenomenon that negatively impacts the learner's physically, mentally, emotionally and learning outcomes (*Minton & Birks., 2019*)⁽¹⁶⁾.

Regarding sociodemographic characteristics of studied sample, the current study revealed that nearly two-third of students were female, while the majority of them were in age group below 22 year, below half from third level. Also, more than half were have thought about leaving the nursing profession and college because of bullying. These findings supported with *Ontario Ministry of Education., 2009* who concluded that school is a place that is meant to ensure safety, free from harm, and provide a well rounded education. Unfortunately, those experiences have been hindered for some, and it is important that educators have the capacities to help students get on the right track (*Block, 2014*)⁽²⁾.

Regarding student's feeling regarding bullying situation during clinical training, the current study clarified that there are near half of students agree that feel confident when perform most of the patient's care procedures and agree that feel being underestimated is negatively affecting their ability to provide care, while, more than one quarter feel agree & strongly agree regarding the screaming and have unfair criticism which negatively affecting their ability to provide care to patients. These findings supported with *Obeidat et al., 2018*⁽⁴⁾ who found that the majority of Jordanian nurses perceive themselves as victims of unkind workplace bullying.

Whereas, *Minton & Birks., 2019*⁽¹⁶⁾ reported that there were various uncivil behaviours among students during clinical placements which affect student's physical and psychological status that directed them to leave the nursing career. While in New Zealand, *Minton et al., 2018*⁽¹⁷⁾ found that there is restricted literature that dealing with nursing students bullying in the clinical environment.

In Australia , **Budden et al., 2017** ⁽¹⁸⁾ necessitate on that nursing bullying are undesirable behaviours in the work environment . The majority of students experience of being bullied made them feel anxious (71.5%) and depressed (53.6%) with an impact for their education abilities and clinical training outcomes.

Regarding student's quality of clinical performance, the present study demonstrated that there are more than half of students agree that sometimes they feel that not feeling well, agree that they have the quality of performance, agree that they able to accomplish tasks like others , and agree of take a positive attitude towards them self most of the time .These findings supported with **Kassem ., 2015** ⁽¹⁹⁾ who highlighted on that nursing students experience of bullying situation which let them feel anger and unconcentrated , their ability of required achievements. Also a concept of self-confidence is essential to nursing students' performance during the clinical training.

In New Zealand , **Minton et al ., 2018** ⁽¹⁶⁾ emphasized on that nursing students are a vulnerable for bullying from many factors as preceptors, mentors and clinical facilitators which affected clinical performance and 27% of bullied students.

Regarding the relationship between student's sociodemographic characteristics and their self esteem levels , the present study reported that there is a statistically significant correlation between student's sociodemographic characteristics and levels of self esteem using Rosenberg scale only in the item related to the reason of not telling any person if they faced bullying situation. This findings goes in the same way with **Ren & Kim .,2017** ⁽⁸⁾ who recommended utilize proper conflict management and psychological management strategies for coping with bullying behaviors among nursing students and staff nurses and promoting their psychological health.

Moreover, the current study reported that there is a statistically significant correlation between student's

socio demographic characteristics and their dealing methods with bullying situation based on a Kobe scale in the item related to gender and student's thought of leaving the nursing profession resulting from bullying. These findings supported with **Pörhölä et al ., 2019** ⁽²⁰⁾ who found that there are a significant associations have been found between social anxiety and bullying both childhood and adolescence . While **Minton & Birks ., 2019** ⁽³⁾ added that there are an obvious needs for proper preparation regarding preventive strategies of student's bullying experience in the clinical settings

In this regard, **Gillespie et al ,2017** ⁽²¹⁾ stressed on increasing require for nursing professionals, nurse educators to work collaboratively with clinical staff and leaders in health care settings in order to maintain a culture of safety and easiness for bullying situation.

In Jordan , **Al-Ghabeesh & Qattom ., 2019** ⁽²²⁾ revealed that bullying is a significantly predisposed the nurses' perception of their competence and delivered quality of care which these perception affect their identify of bullying situation , reply to it correctly . From another point of views, **Kub & Feldman ., 2015** ⁽²³⁾ highlighted on that schools role are to prevent bullying occurrence , and support positive youth development.

Based on current findings , there are more than half of student's have moderate level of self esteem during clinical training according to rosenberg scale and the most of them have moderate level of competent performance during clinical training according to Kobe scale for dealing with bullying situations. These findings in contrast with **Ebrahim & Elrefaey., 2018** ⁽²⁴⁾ who reported that there was no statistically significant correlation between total bullying perception and total self-esteem, however, coping strategies were recommended for a low level of self-esteem.

Courtney-Pratt et al .,2018 ⁽²⁵⁾ recommended that efforts must be made in academic institutions to pay

attention for guidance of undergraduates with using a great strategies to address this issues. Besides , *Dimitriadou–Panteka et al ,2014* ⁽²⁶⁾ added that the nursing education should enhancing the self-esteem of students through giving the proper knowledge and skills required to practice as a nurse.

Pigozi & Bartoli ., 2016 Found that school nurses have an essential role in helping students to cope with bullying. Nevertheless, there is a need to student training strategies to take proper actions with bulling situation.

Finally, student’s self-esteem is highly affected by teacher interaction and perception of support because teaching staff is considered as a model for the progress of healthcare professionals. Otherwise, teaching staff should replicate on their communication practices, and seek to increase their management skills in order to support student learning (*Pigozi & Bartoli ., 2016*) ⁽²⁷⁾. Thus, activated implementation of staff member’s rules regarding uncivil behaviors and how to deal with both uncivil and bullying students. (*Ibrahim & Qalawa , 2016*) ⁽⁶⁾ .

Conclusion & Recommendations

From the foregoing results, it can be seen that there are a low feeling of self confident and esteem among student nurses during perform patient’s care procedures and there are an underestimated with unfair criticism negatively affecting their ability to provide care . So, there are needs for implementation of multimedia educational program for students regarding corrective actions of bulling situations during clinical training in order to build their self - esteem and competency to dealing with bulling situations in clinical settings. . Also, a guideline needs to sit for those students to diminish bulling effects and proper actions in clinical settings.

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accomplish the study.

Ethical Clearance:

An official authorization was allowed from obtain from ethical board, faculty of Nursing , Port-Said University authority at Egypt as a responsible committee in this institution, to get their authorization to conduct the study after clarifying the reason for the study IRB/ IECs= PSNUR-26-03OBJ . Additionally, Online informed consent was obtained from all students before starting the participation on the study through using link of questionnaire after clarification of assured confidentiality and their right of refuse.

Source of Funding: There are No funding budget from any institution and this research fund are done from researches

Conflict of Interest: There are No conflicts of interest

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