

Prevalence and Correlates of Bullying in Physiotherapy Education in Nigeria

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Abstract

Background: Bullying is an unexpressed part and parcel of medical education but it is largely unexplored in physiotherapy. This study assessed the prevalence and socio-demographic correlates of bullying in physiotherapy education in Nigeria.

Methods: Two hundred and nineteen clinical physiotherapy students from three purposively selected Federal Universities in Nigeria participated in this study. Following a cross-sectional design, the Students Perception of Professor Bullying Questionnaire (SPPBQ) was used to obtain information on bullying. The SPPBQ includes a working definition of lecturer bullying followed by two sections inquiring about lecturers bullying experiences. Data was collected on socio-demographic characteristics, availability of adequate policy and support and the different forms of bullying experienced. Descriptive and inferential statistics were used analyze data. Alpha level was set at $p < 0.05$.

Results: Lifetime and point prevalence of bullying in physiotherapy education was 98.6% and 99.1% respectively. 94.5% of the respondents had witnessed physiotherapy students bullying and there was a 100% rate of 'no attempt' to stop a physiotherapy lecturer from bullying. There was no significant association between bullying and each of age ($\chi^2 = 0.117, p = 0.943$), gender ($\chi^2 = 0.001, p = 0.974$), university ($\chi^2 = 1.343, p = 0.511$) and level of study ($\chi^2 = 0.000, p = 0.995$).

Conclusion: There is high lifetime and point prevalence of bullying in physiotherapy education in Nigeria, which are largely unchallenged or redressed. Also, being a clinical physiotherapy student makes prone to bullying without necessary contributions of other intrinsic and extrinsic factors.

Background

Bullying is one of the critical stressors students in tertiary institutions around the globe face, especially among those training to become health professionals [1–3]. Bullying is described as the misuse of power or position to persistently criticize and condemn; to openly humiliate and undermine an individual's ability until they become so fearful that their confidence crumbles and they lose belief in themselves [4], leaving the victim[s] feeling hurt, vulnerable, angry or powerless [5]. Bullying exists in various forms and in various places, but the medical student is the worst hit by it [6]. The period of training to become a health professional remains a stressful one; exposing trainees to situations and experiences with appalling implications for their psychological well-being [7].

In this period, while having to put up with the pressure of a demanding and competitive health professional education, many students are harassed and bullied. The disparagement and belligerence that bullying instills may explain the suicidal ideation of some students and account for unprofessional conducts by some health professionals during practice [7]. Though this topic has been in discussion for ages, especially among medical and nursing students [3, 7], it is one of the least prioritized concerns in the education of other health professionals. In all of this, not much is known about bullying in the physiotherapy profession [8].

Lecturer bullying may have severe consequences for student victims, including negative psychosocial and behavioral outcomes such as loss of trust, feelings of hopelessness and depression, oppositional behavior and increased fighting amongst peers [9]. While bullying research has burgeoned over the past two decades, very few studies have explored students' perceptions of lecturers as bullies. Although the topic of lecturer bullying has been described as a "delicate issue", [10] extant literature suggests that lecturer bullying does indeed exist [11–15].

Research assessing lecturer bullying of university students, however, has been largely overlooked in the literature. Increasing knowledge about professor and instructor bullying is important given research findings that university students' perception of rapport with their professors/instructors predicts motivation, perceptions of learning, and perceived grades [16]. A study has assessed the prevalence of lecturer bullying in a university population and the study found that approximately 30% of the sampled university students witnessed another student being bullied by a lecturer at least once [11]. While, there is substantial literature on occupational bullying in the health sector [17–19], especially, among physicians [20–22]; and nursing practitioners and academia [23–25]. There is a paucity of such studies in physiotherapy. Seager [8] submit that there is very limited research on bullying in the physiotherapy profession. Unfortunately, only one United Kingdom study was found on bullying among physiotherapy students [26]. Therefore, this study assessed the prevalence and socio-demographic correlates of bullying in physiotherapy education in Nigeria.

Methods

Respondents for this cross-sectional study were purposive clinical physiotherapy students from the three out of the six Nigeria's Federal Universities where Physical Therapists are being trained, these are University of Ibadan (UI), University of Lagos (UNILAG), and the Obafemi Awolowo University (OAU). Respondents in this study were students in the clinical levels (i.e. year three and above) of the current five year baccalaureate programme in Nigeria. Based on available sample frame of all students in the clinical level of the selected university, a population of 379 was obtained. A sample size formula by Yamane (1967) - $n = N / (1 + N(e^2))$ was used to calculate the sample size. Where n is sample size, e is level of error tolerance and N is the population size. Thus, n = 181, however, allowing for 10% non-response, a total of 189 was estimated.

Students Perception of Professor Bullying Questionnaire (SPPBQ) was used to assess bullying among the respondents. The SPPBQ contains a working definition of lecturer and lecturer bullying followed by three questions inquiring about lecturers bullying experiences [11]. This questionnaire encompasses three underlying factors: personal, work-related (revised to academic-related) and physically intimidating forms of bullying and has been found to generate a single item measure of bullying [27]. Questions address specific behaviors and answer choices are on a Likert scale for frequency, from never to daily. Ethical approval for this study was obtained from the Human Research and Ethics Committee of Institute of Public Health, Obafemi Awolowo University, Ile-Ife, Nigeria.

Statistical analysis

Descriptive statistics of mean, standard deviation, frequency and percentages was used to summarize data. Pearson Chi-square was used to investigate factors associated with bullying. Alpha level was set at $p < 0.05$. SPSS version 16.0 (Chicago, Illinois: SPSS) was used to analyse data.

Results

Table 1 shows the socio-demographic characteristics of the respondents in the study. Most of the respondents were single (98.2%) and within the age bracket of 20 to 25 years (94.5%), of Yoruba ethnicity (85.8%), of Christian religion (79.9%) and were of the female gender (51.1%). The result showed that the mean age of respondents was 21.8 ± 1.50 . Table 2 shows the frequency distribution on policy and support on bullying. From the result, 37.5% and 42.7% of respondents from Obafemi Awolowo University, Ile-Ife, Nigeria responded in the affirmative (i.e. yes) to having adequate school policy and support on bullying. Responses on having adequate 'policy' and 'support' on bullying from respondents from University of Ibadan, Nigeria and University of Lagos, Nigeria were 30% and 48%, and 45.2% and 45.2% respectively. In sum, 38.4% and 44.7% of the respondents believed there was adequate school policy and support available on bullying.

Table 1
Socio-Demographic Characteristics of the Respondents

Variable	OAU n(%)	UI n(%)	UNILAG n(%)	χ^2	p-value	All respondents n(%)
Gender Male Female	55(57.3) 41(42.7)	17(34.0) 33(66.0)	35(47.9) 38(52.1)	7.175	0.028	107(48.9) 112(51.1)
Age >20 20–25 <25	2(2.08) 91(94.8) 3(3.13)	6(12.0) 44(88.0) 0(0.00)	1(1.37) 72(98.6) 0(0.00)	14.067	0.007	9(4.11) 207(94.5) 3(1.37)
Ethnicity Yoruba Igbo Others	85(88.5) 10(10.4) 1(1.04)	44(88.0) 5(10.0) 1(2.00)	59(80.8) 12(16.4) 2(2.74)	2.493	0.646	188(85.8) 27(12.3) 4(1.83)
Religion Christianity Islam Others	83(86.5) 6(6.25) 7(7.29)	41(82.0) 6(12.0) 3(6.00)	51(69.9) 10(13.7) 12(16.4)	8.510	0.075	175(79.8) 22(10.1) 22(10.1)
Educational Level 400 500	51(53.1) 45(46.9)	29(58.0) 21(42.0)	29(39.7) 44(60.3)	4.733	0.094	109(49.8) 110(50.2)
Marital Status Single Married	94(97.9) 2(2.08)	50(100) 0(0.00)	71(97.3) 2(2.74)	1.305	0.521	215(98.2) 4(1.83)
OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.						

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OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.						

Table 2
Frequency Distribution on Adequate Policy and Support on Bullying in University

Variable	Respondents Institution			χ^2	p-value	All respondents n(%)
	OAU n(%)	UI n(%)	UNILAG n(%)			
Policy on bully Yes No	36(37.5) 60(62.5)	15(30.0) 35(70.0)	33(45.2) 40(54.8)	6.558	0.161	84(38.5) 135(61.6)
Availability of support on bullying Yes No	41(42.7) 55(57.3)	24(48.0) 26(52.0)	33(45.2) 40(54.8)	2.220	0.695	98(44.7) 121(55.3)
OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.						

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Yes	60(62.5)	35(70.0)	40(54.8)			
Availability of support on bullying	41(42.7)	24(48.0)	33(45.2)	2.220	0.695	98(44.7)
Yes	55(57.3)	26(52.0)	40(54.8)			
No						121(55.3)

OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.

Table 3 shows the distribution of bullying characteristics of the respondents. 94.5% of all respondents had witnessed a physiotherapy student been bullied by a physiotherapy lecturer. 98.6% of all respondents have experienced bullying by a physiotherapy lecturer. 99.5% of all students who had experienced bullying neither stopped or attempted to stop a physiotherapy lecturer from bullying them. 99.1% of the respondents had a recent positive history or experience of bullying in their present level by a physiotherapy lecturer, while none of the respondents (100%) of the respondents stopped or attempted to stop a physiotherapy lecturer from bullying. Table 4 shows the association between lifetime prevalence of bullying and socio-demographic characteristics of the respondents. The result showed that there was no significant association between bullying and each of age ($p = 0.92$), gender (0.07), ethnicity (0.50), religion (0.06), university (0.22), educational level (0.33), marital status (0.064) of the respondents. Table 6 shows the association between points prevalence of bullying and socio-demographic characteristics of the respondents. Similarly, the result showed no significant association between bullying and each of age (0.94), gender (0.97), ethnicity (0.85), religion (0.16), university (0.51), educational level (0.99), and marital status (0.85) of the respondents. Figure 1 shows the total bullying scores of all the respondents. 82.2% has experienced a mild form of bullying, 15.5% has experienced a moderate form of bullying while 2.28% has experienced a severe form of bullying.

Table 3
Frequency Distribution on Bullying Characteristics among the Respondents

Item	Respondents Institution			χ^2	p-value	All respondent n(%)
	OAU n(%)	UI n(%)	UNILAG n(%)			
Ever seen student been bullied? Yes No	91(94.8) 5(5.21)	47(94.0) 3(6.00)	69(94.5) 4(5.48)	0.040	0.980	207(94.5) 12(5.48)
Have you ever experienced bullying? Yes No	95(99.0) 1(1.04)	49(98.0) 1(2.00)	72(98.6) 1(1.37)	0.223	0.894	216(98.6) 3(1.37)
Attempts by student to stop lecturer bullying? Yes No	1(1.04) 95(98.9)	0(0.00) 50(100)	0(0.00) 73(100)	1.287	0.525	1(0.46) 218(99.5)
Have you been bullied in present level? Yes No	95(98.9) 1(1.04)	49(98.0) 1(2.00)	73(100) 0(0.00)	1.343	0.511	217(99.1) 2(0.91)
Ever stopped or attempted to stop bullying other students? Yes No	0(0.00) 96(100)	0(0.00) 50(100)	0(0.00) 73(100)	-	-	0(0.00) 219(100)
OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos						

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Ever stopped or attempted to stop bullying other students? Yes No	0(0.00) 96(100)	0(0.00) 50(100)	0(0.00) 73(100)	-	-	0(0.00) 219(100)
OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos						

Table 4

Test of Association between Lifetime Prevalence of Bullying and Socio-Demographic Characteristics of Respondents

Variables	Bullying Response		χ^2	p-value
	YES n(%)	NO n(%)		
Gender	104(47.5)	3(1.37)	3.184	0.07
Male	112(51.1)	0(0.00)		
Female				
Age	9(4.11)	0(0.00)	0.176	0.91
<20	204(93.2)	3(1.37)		
20–25	3(1.37)	0(0.00)		
>25				
Ethnicity	185(84.5)	3(1.37)	0.502	0.77
Yoruba	27(12.3)	0(0.00)		
Igbo	4(1.83)	0(0.00)		
Others				
Religion	174(79.5)	1(0.46)	10.84	0.060
Christianity	20(9.13)	2(0.91)		
Islam	22(10.1)	0(0.00)		
Others				
University	95(43.4)	1(0.46)	0.223	0.894
OAU	49(22.4)	1(0.46)		
UI	72(32.9)	1(0.46)		
UNILAG				
Level	108(49.3)	1(0.46)	0.329	0.566
400	108(49.3)	2(0.91)		
500				
Marital Status	213(97.3)	2(0.91)	16.839	0.064
Single	3(1.37)	1(0.46)		
Married				

OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.

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Test of Association between Lifetime Prevalence of Bullying and Socio-Demographic Characteristics of Respondents

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	YES n(%)	NO n(%)		
Gender	104(47.5)	3(1.37)	3.184	0.07
Male	112(51.1)	0(0.00)		
Female				
Age	9(4.11)	0(0.00)	0.176	0.91
<20	204(93.2)	3(1.37)		
20–25	3(1.37)	0(0.00)		
>25				
Ethnicity	185(84.5)	3(1.37)	0.502	0.77
Yoruba	27(12.3)	0(0.00)		
Igbo	4(1.83)	0(0.00)		
Others				
Religion	174(79.5)	1(0.46)	10.84	0.060
Christianity	20(9.13)	2(0.91)		
Islam	22(10.1)	0(0.00)		
Others				
University	95(43.4)	1(0.46)	0.223	0.894
OAU	49(22.4)	1(0.46)		
UI	72(32.9)	1(0.46)		
UNILAG				
Level	108(49.3)	1(0.46)	0.329	0.566
400	108(49.3)	2(0.91)		
500				
Marital Status	213(97.3)	2(0.91)	16.839	0.064
Single	3(1.37)	1(0.46)		
Married				
OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.				

Table 5
Test of Association between Point Prevalence of Bullying and Socio-Demographic Characteristics of Respondents

Variables	Bullying Response		χ^2	p-value
	YES n(%)	NO n(%)		
Gender	106(48.4)	1(0.46)	0.001	0.974
Male	111(50.7)	1(0.46)		
Female				
Age	9(4.11)	0(0.00)	0.117	0.94
<20	205(93.6)	2(0.91)		
20–25	3(1.37)	0(0.00)		
>25				
Ethnicity	186(84.9)	2(0.91)	0.333	0.847
Yoruba	27(12.3)	0(0.00)		
Igbo	4(1.83)	0(0.00)		
Others				
Religion	174(79.5)	1(0.46)	3.636	0.162
Christianity	22(10.1)	0(0.00)		
Islam	4(1.83)	1(0.46)		
Others				
University	95(43.4)	1(0.46)	1.343	0.511
OAU	49(22.4)	1(0.46)		
UI	73(33.3)	0(0.00)		
UNILAG				
Level	108(49.3)	1(0.46)	0.000	0.995
400	109(49.8)	1(0.46)		
500				
Marital Status	213(97.3)	2(0.91)	0.038	0.846
Single	4(1.83)	0(0.00)		
Married				
OAU- Obafemi Awolowo University; UI- University of Ibadan; UNILAG- University of Lagos.				
Figure 1: Bullying Score of all Respondents				

Discussion

This study investigated bullying and its socio-demographic correlates among clinical physiotherapy students in selected federal universities in south-western region, Nigeria. From the findings of this study, the responding physiotherapy students were mostly female and were between the ages of 20 and 25 years. The lifetime prevalence of bullying in this study was 98.6%, while the point prevalence was 99.1%. The prevalence of bullying observed in this study was comparable to 88.7% rates reported in a study among Canadian clinical undergraduates' nurses. These results are consistent with Clarke and

colleagues [28], who found that the majority of nursing students (88.72%) surveyed, reported experiencing negative behaviors, otherwise recognized as bullying behaviors in the clinical setting. Other international studies where upwards of 90% of nursing students reported experiencing bullying behaviors in the clinical setting [29–31]. On the other hand, it is much higher than a Turkish and UK. studies that stated only more than half of the respondents were exposed to bullying during their education (60%, and 53%), respectively [32, 33].

This study findings showed that 100% of physiotherapy students experienced bullying behaviours in the clinical settings in forms of being humiliated in connection with their course, being ignored and excluded, spreading of gossip and rumors about them, being shouted at or being the target of spontaneous anger or having an offensive remarks made about them by a physiotherapy lecturer. Consistent with this study is Foster and colleagues [30], who identified that 90% of nursing students reported experiencing some form of bullying while on clinical placement. Alarmingly, 100% of nursing students surveyed in a study investigating the state of abuse in nursing education in Turkey, reported being yelled at or shouted at, were behaved toward in an inappropriate, nasty, rude or hostile way, or were belittled or humiliated. Seventy four percent had vicious rumors spread about them [29]. In this same study, 83.1% of student nurses reported experiencing academic abuse which included being told negative remarks about becoming a nurse, were assigned responsibilities as punishment rather than for educational purposes, were punished with poor grades or were shown hostility following an academic accomplishment [29]. Supporting these results, a U.S. study which revealed that the most frequently reported behaviors perceived to be bullying included cursing or swearing (41.1%), inappropriate, nasty, rude or hostile behaviors (41%) and belittling or humiliating behavior (32.7%) [31]. Moreover, Stevenson and colleagues (32) found that the least frequent negative behavior selected by the students was the threat of actual physical violence which was reported by 2.5% of the sample.

The result of this study has also revealed that a large number of physiotherapy students have witnessed an incidence of a physiotherapy lecturer bullying another physiotherapy student and only a whit of the respondents has ever stopped or attempted to stop a physiotherapy lecturer from bullying them or other physiotherapy students in the college. This is consistent with the findings of Clarke and colleagues [28], who stated that students justified not taking action as a result of experiencing bullying behaviors by making excuses for the poor behavior, minimizing the event and its impact, normalizing the behavior and fearing a poor evaluation. Furthermore, Stevenson and colleagues [32] found that students identified that reporting bullying was not worth the effort, wished not to jeopardize their assessment and that it is something that one must simply adapt with. This is also in line with report by Hoel and colleagues [34] who, in a qualitative study investigating the realities and expectations of nursing students, reported that students defended the poor behavior, to the extent of suggesting that it may serve a purpose or that it was due to pressure and/or workload or previous experiences of bullying.

This study further investigated the availability of adequate support and policies on bullying in the various universities. The result revealed that there is no significant difference between bullying and the availability of support and polices. Findings among the few studies that examined associations between

policy presence and student bullying were mixed, although more non-significant than significant associations were found. At first glance, one may conclude from these findings that the presence of bullying policies does not influence bullying among students; however, the presence of a policy is necessary but is not sufficient to affect bullying behavior. Indeed, after a policy has been adopted, it must be put into practice. The mere adoption or presence of a policy does not mean that it will be immediately and consistently put into practice exactly as intended [35]. However, the veracity of claims on available of policies to curb or limit bullying in education may at best be speculative, as anecdotal information among the students so indicate.

The result of this also revealed that there is no significant association between bullying and gender, age, ethnicity, religion, university and educational level of the participants in the study. The lack of a significant association between bullying and the characteristics of the respondents indicates that those involved in bullying do not tend to choose their targets based on the characteristics of the respondents. This finding is in line with Salin's [36] study indicating that the bullying is enabled by a power imbalance and the low perceived costs of bullying. This study has addressed the prevalence of bullying experience and witnesses among Physiotherapy students in their clinical years. It has identified common issues that physiotherapy students face during their education, which leave them feeling powerless and frustrated and create a hostile environment. There is a dearth of studies on bullying in physiotherapy education with which the findings of this study can be compared, hence, a significant shortcomings of this study.

Conclusion

There was high lifetime and point prevalence of bullying in physiotherapy education in Nigeria, which were largely unchallenged or redressed. Also, being a clinical physiotherapy student makes prone to bullying without necessary contributions of other factors.

Availability Of Data And Materials

The datasets obtained and used for analysis in this study are available on reasonable request from the corresponding author.

Abbreviations

OAU

Obafemi Awolowo University

UI

University of Ibadan

UNILAG

University of Lagos

SPPBQ

Students Perception of Professor Bullying Questionnaire

Declarations

Acknowledgements

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Contributions

CEM, ACO and FF participated in the conception and design of the study. CEM, FOF, ODA and AMO contributed with the acquisition of data. CEM and IPO conducted data analysis. All authors participated in the interpretation of data and drafting the manuscript. All authors approved the final draft of the manuscript.

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Ethics declarations

Ethics approval and consent to participate

This study was approved by the Human Research and Ethics Committee of Institute of Public Health, Obafemi Awolowo University, Ile-Ife, Nigeria. This survey was voluntary and anonymous, every participant signed an informed consent form.

Consent for publication

Not applicable.

Competing interests

There is no competing interest

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Figures

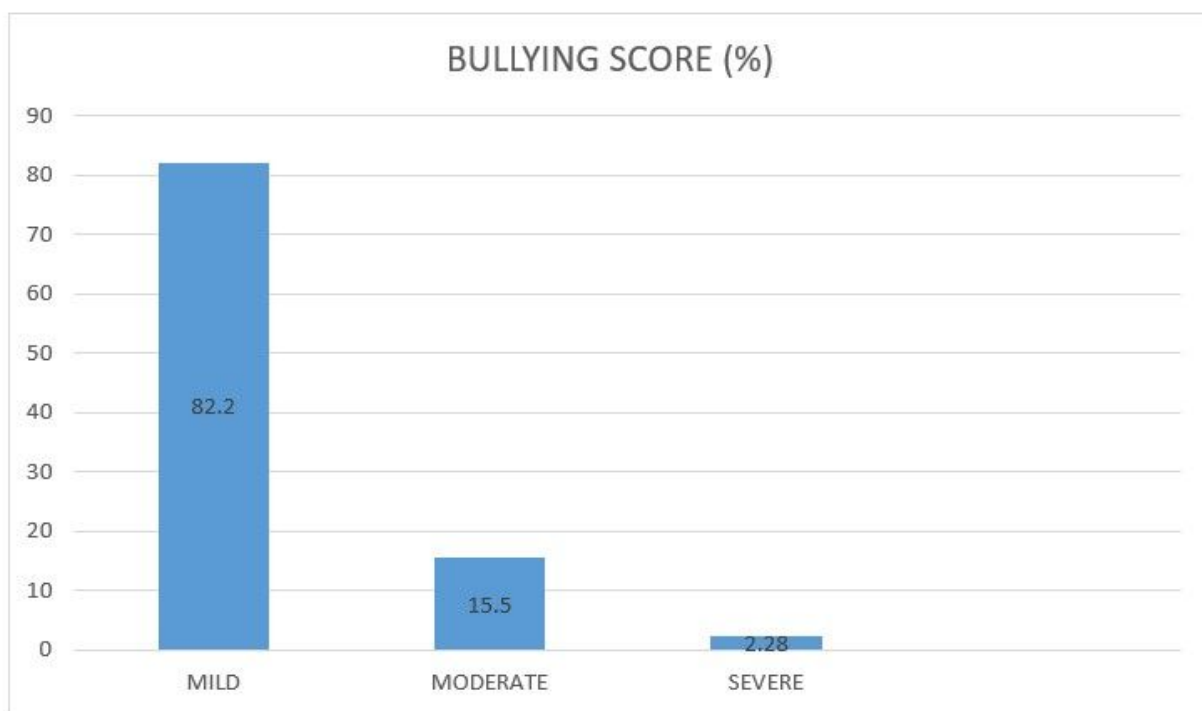


Figure 1

Bullying Score of all Respondents