



*Original Article*

# Mobbing in nursing students: characteristics and frequency of harassment behaviors

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## ABSTRACT

**Introduction.** Mobbing in nursing is a problem with such a huge magnitude due to its high prevalence. This study is written in order to conduct a research study whose objective is to describe the characteristics and frequency of mobbing behavior in nursing students of the Faculty of Nursing and Physiotherapy of the University of Cádiz.

**Material and Methods.** To achieve the mentioned objective, we have developed a descriptive study to follow up one cohort, who is the 106 second year students of the four year degree of nursing, for a year. They have already done the Cisneros Questionnaire twice: one after finishing the second year and the second one after the third one.

**Results.** The results obtained show a progressive increase in frequency of harassment behaviors perceived by the students. The aspects that have been most highlighted are the nurses' limitation of communication to the students and the lack of difficulty of the work that the nurses demand from the latter.

**Conclusions.** Students feel that the activities they do in their placements are far below their abilities or that they hardly assign them tasks. This makes that their placements are a period that can be described as a monotonous and boring work with almost no learning. They also feel that they do not listen to them, ignore them and do not value their arguments or proposals. This makes them feel frustration, insecurity and vulnerability, which are three adjectives are felt by victims of mobbing

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## Introduction

Since the beginning of the conceptualization of Mobbing by Leymann (1990) (1), many investigations have been carried out to highlight its impact in different professional fields, especially in the ones that work bringing you into contact with the public, with the health care professions presenting one of the most prevalence of mobbing (2).

This problem has a huge impact on the mental health of employees (3), since in many cases it does not come to light until the situation of harassment has been established for a long period of time (2) and this results in various mental health (4) disorders such as anxiety or depression (5,6), among others, that can mask the diagnosis of mobbing if an adequate assessment of the etiology of the symptoms is not made (7,8,9,10).

For all these reasons, this situation is being considered as a public health problem (2,11), as well as for the high absenteeism that it causes and for the responsibility of companies which have to ensure the health of their workers, as stated in various current laws in Spain (Royal Legislative Decree of the Statute of workers 1/1995 of 24th March and in the Law on Prevention of Occupational Risks of 31/1995 of 8th November).

The age range which nursing professionals are most likely to be suffering from mobbing is between the ages of 20 and 22, coinciding with recent graduates of the degree (12,13) with another peak between 35 and 45 years old (14).

The lack of work experience, a precarious work situation and in a context -the hospital environment- with excess bureaucratization, role indefiniton and high level of stress (5,15,16) make that the recent graduates are the target group to suffer harassment behaviors.

This Project investigates whether or not this problem, which is witnessing or being victims of harassment in their placements in the different health centres, is experienced in students who have not yet finished their degree. The objective is to study if this situation is occurring in nursing placements and to determine its characteristics and frequency in order to establish guidelines for action and prepare future nurses to be more resilient and to be able to detect bullying in its beginning, to establish adequate coping strategies.

## **Material and methods**

### *Study design, population and sample.*

This is a descriptive study of longitudinal case series or follow-up of a cohort. This type of study aims to describe the characteristics of mobbing behaviors and the frequency to which the second-year nursing student of the Faculty of Nursing and Physiotherapy of Cádiz may have been exposed during the period of clinical placements studied (96 days)

The population is made up of second-year nursing students from the Faculty of Nursing and Physiotherapy at the University of Cádiz (106 students), who were surveyed in the 2017/2018 academic year.

The sample is made up of 76 second-year nursing students (2017/2018) and 81 students from the same population but in their third-year (2018/2019) of a four-year degree.

### *Ethical aspects*

To carry out the research, the right of decision, confidentiality and anonymity of all the students who participated in the Cisneros scale have been taken into account at all times, in addition to the personal data obtained from them (Organic Law 15/1999 on data protection and Law 14/2007 on biomedical research), in accordance with the provisions of the Declaration of Helsinki revised in 2013.

### *Variables and measurements*

To assess the impact and consequences of mobbing, the Cisneros scale, which was created by Piñuel (9,17,18) and whose objective is to periodically detect the state and the consequences of violence in the work environment, has been used. It is based on the guidelines of the questionnaire created by Leymann; LIPPT2 (19,20,21).

In order for the questionnaire to reach all students, a link to the Cisneros questionnaire has been created on a free Access web platform, in which the students could access from any electronic device with internet. Also, it has been the possibility of doing it in paper if they did not have any devices.

Three indices are obtained from this questionnaire, which will be used to determine the frequency and characteristics of harassment behaviors perceived by students (17,22):

Total number of bullying strategies (NEAP): are the different bullying behaviors experienced by the respondent. In order to calculate it, those items that obtained non-zero responses must be added.

Global psychological harassment index (IGAP): assesses the intensity of the harassment suffered. To obtain this index, it is necessary to add the score of the items (from 0 to 6) and it is divided among the 43 items that the scale has.

Average Index of Harassment Strategies (IMAP): it offers a global average to measure the severity and degree of harassment at the time the survey is conducted. It is obtained by adding the score of the items and dividing the result by the value already obtained in the NEAP index.

To obtain the necessary data for the investigation, the Cisneros scale was carried out twice in the same group over two courses (2017/2018-2018/2019).

The first survey ("Cisneros 1") was carried out during the course (2017/2018), after having a first contact with sanitary placements (25 June 2017). This first contact refers to Practicum I, with a duration of 32 days and in which it is rotated by general hospital plants (vascular surgery, infectious, urology, traumatology ...). It was held on June 25th, 2017 and was completed by 76 students.

The second survey ("Cisneros 2") was carried out in the same group, but in a later course (2018/2019). In this case, it is practicum II and III, with a duration of 64 days and in which the units of pediatrics, maternity, delivery room, hospitalization facility and health center rotate. It took place on April 9th, 2019 and was completed by 81 students.

### *Statistical methods*

Once we obtain the results of the NEAP, IGAP and IMAP indices of the different surveys, we will proceed to study their distribution. The Kolmogórov-Smirnov test (K-S test) was used to verify whether the distribution of the indices was normal or not normal (17) . These statistical tests are included with the SPSS statistical software.

Regarding the comparison of the means of the index employees, after performing the Kolmogórov-Smirnov test (KS test), it will be seen that, due to the p-values and results less than 0.05, we reject the null hypothesis, for what we cannot assume normality in the data.

Media comparisons between groups are not possible. Within “Cisneros 1” and “Cisneros 2” it is possible to compare means between certain variables of interest (age, sex and access). Because these are non-normal variables, we performed the Mann-Whitney U test, to detect if there are specific differences between men and women, under 25-over 25 and selectivity-FP or higher grade within each group. Observing that the p-values are greater than 0.05 in all cases, we can conclude that there are no statistically significant differences (Table 1).

**Table 1: Values for the NEAP, IGAP and IMAP indices according to sex, age and form of access to university for “Cisneros 1” and “Cisneros 2”.**

			Cisneros 1		
			NEAP	IGAP	IMAP
<b>Years old</b>	Under 25	Average	6.31	0.23	1.57
	Over 25	Average	6.88	0.28	1.88
<b>Sex</b>	Woman	Average	6.51	0.24	1.65
	Man	Average	5.55	0.20	1.34
<b>Access way</b>	Selectivity	Average	6.76	0.25	1.70
	FP	Average	4.88	0.17	1.12
	Senior access	Average	7.25	0.36	2.43
			Cisneros 2		
			NEAP	IGAP	IMAP
<b>Years old</b>	Under 25	Average	11.05	0.44	1.69
	Over 25	Average	12.86	0.45	1.73
<b>Sex</b>	Woman	Average	10.38	0.38	1.47
	Man	Average	17.10	0.86	3.30
<b>Access way</b>	Selectivity	Average	11.00	0.46	1.75
	FP	Average	11.80	0.41	1.57
	Senior access	Average	12.00	0.28	1.07

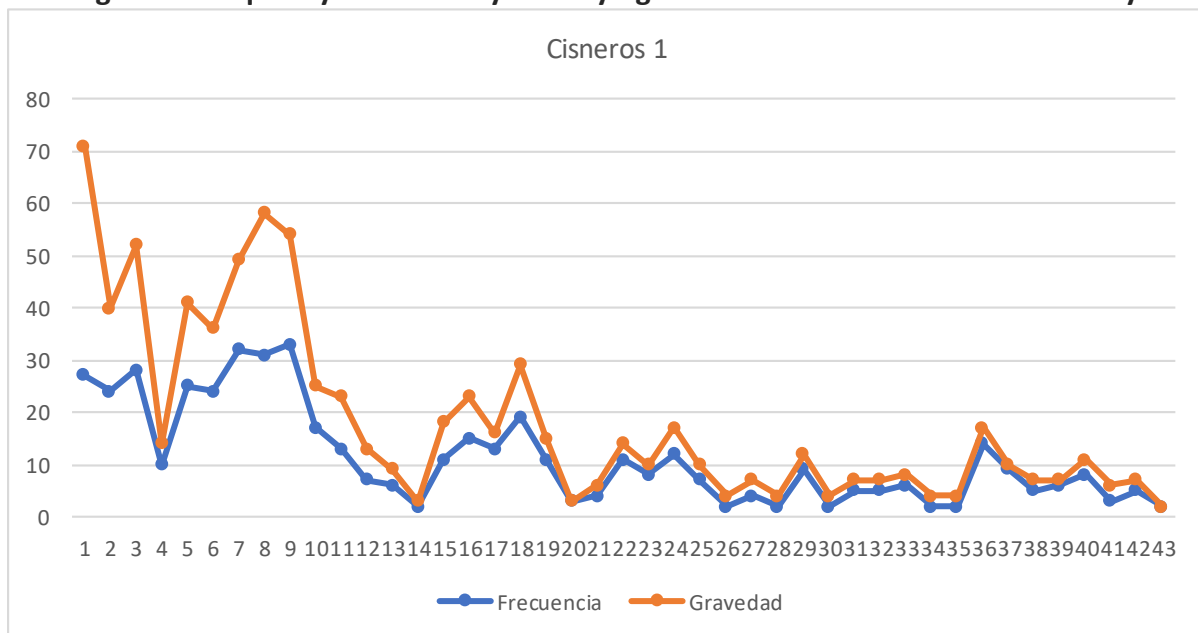
## Results

Figure 1 represents the information obtained in the “Cisneros 1” survey. At first glance it can be seen that some of the behaviors mentioned in the survey are more frequent than the rest. For the “Cisneros 1” survey, we based ourselves on the items that obtained more than 40 points. The items with the highest severity were:

- 1: communication restriction.
- 2: ignore.
- 3: continuous interruptions.
- 5: biased evaluation.
- 7: absurd jobs.
- 8: tasks below competence.
- 9: routine tasks.

The hostile behaviors detected in this survey are related to the assigned tasks (5, 7, 8 and 9) and personal treatment (1, 2 and 3).

**Figure 1. Frequency and severity of bullying behaviors in the “Cisneros 1” survey.**

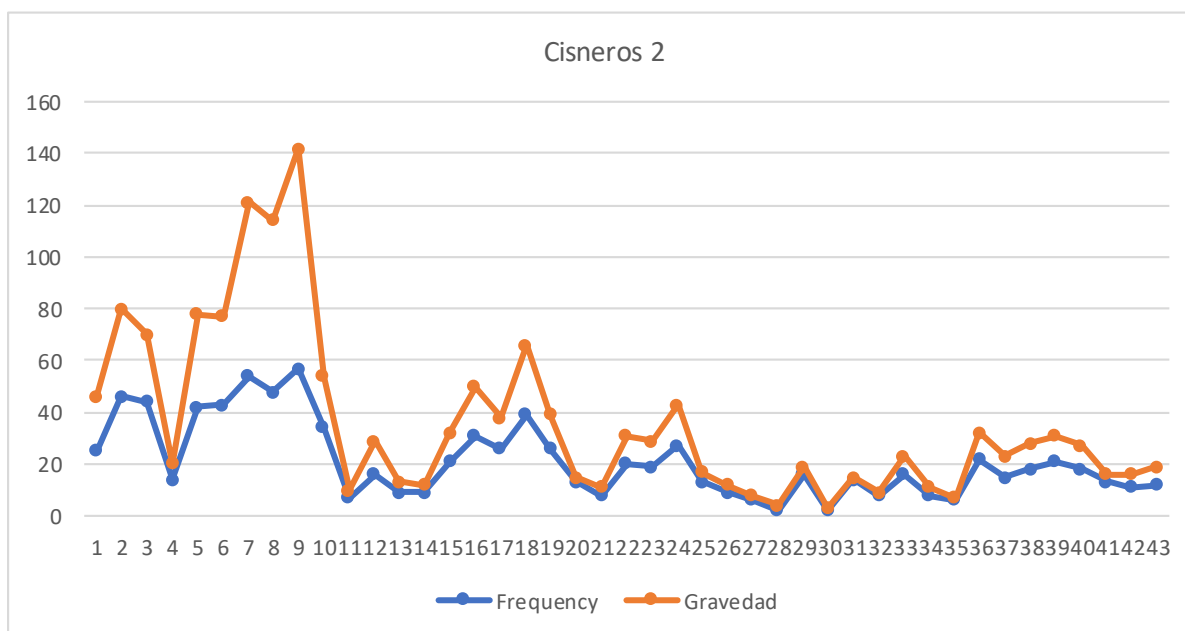


In the “Cisneros 2” survey, the results of which can be seen in detail in Figure 2, we focused on the items that obtained more than 50 points.

The items that obtained a higher level of severity (according to the sum obtained in “Cisneros 2” for each item) were:

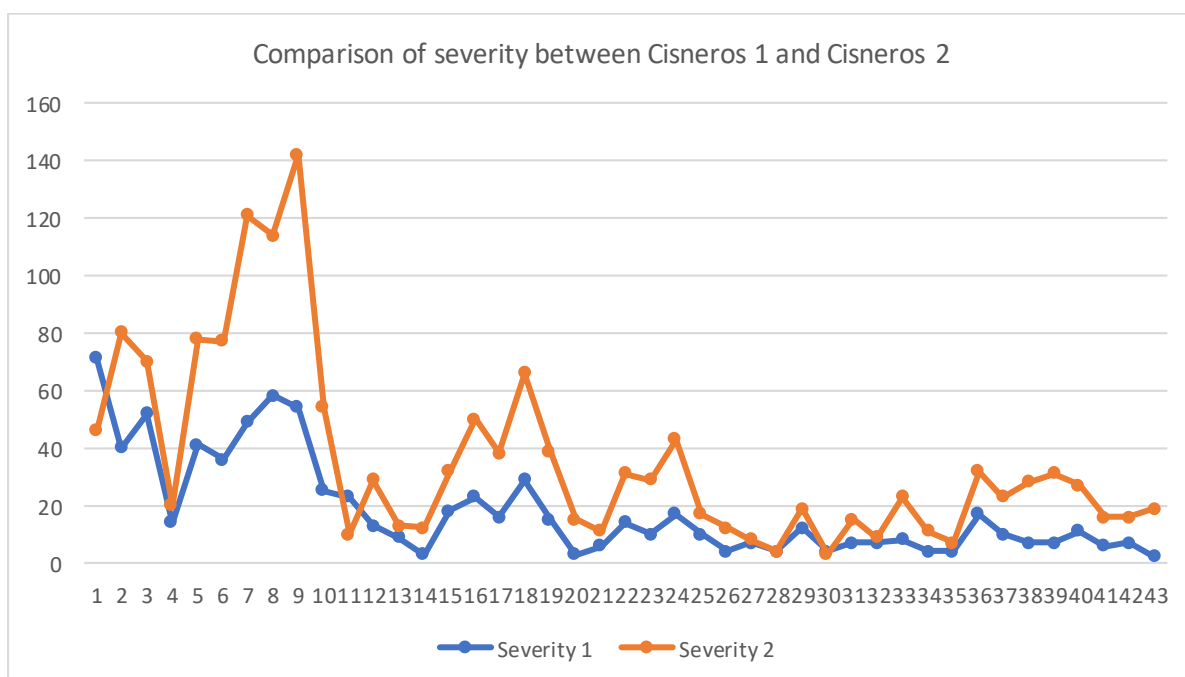
- 2: ignore.
- 3: continuous interruptions.
- 5: biased evaluation.
- 6: forced inactivity.
- 7: absurd tasks.
- 8: tasks below competences.
- 9: routine tasks.
- 10: overload.
- 16: fuzzy accusations.
- 18: amplification of mistakes.

**Figure 2. Frequency and severity of bullying behaviors in the “Cisneros 2” survey.**



In this survey, we again obtained high values in the items related to the assigned tasks (5, 6, 7, 8 and 9) and personal treatment (2, 3, 16 and 18). In Figure 3 we can see the difference between the severity of the behaviors perceived in "Cisneros 1" and "Cisneros 2".

**Figure 3. Comparison of severity (sum of the responses obtained in the surveys) between “Cisneros 1” and “Cisneros 2”.**





## Discussion

Once all the components that surround the term mobbing have been analyzed, it is necessary to reflect on its impact on people and how it may impact on jobs and, in this case, on the experience that a nursing student acquires in their placements.

As Hopkins, Fetherston and Morrison (23) conclude in their research, the experiences and experiences lived in the placements as students, will mark the line that the rest of their lives will follow as professionals, hence the importance of perceived bullying behaviors be minimal.

The novelty of this research is that the sample is made up of students, and can know the evolution of the perception of mobbing throughout the placements and if they will increase over time.

It would be interesting to carry out this same survey in the same group when they are in 4th year, in this way we could detect that the values detected in this study can or may even increase the placement time. Regarding the internship time, it should be noted that it does not exceed 6 months in any of the courses surveyed. For this reason, we could not properly speak of mobbing, since among the characteristics that make it up, it is found that, in order to be aware of such a situation, the victim must have repeatedly suffered bullying at least 6 months. Returning to the analysis of the data obtained, to know the frequency and severity of bullying behaviors, we observe the values obtained for the NEAP, IGAP and IMAP indices in each survey. The items that are most frequently repeated and that score the most are: 2, 3, 5, 6, 7, 8 and 9, as shown in Figure 1 and Figure 2.

These items refer to the assignment of tasks of little value, routine and well below the qualification of the students and to the barriers in communication and expression that students have in placements.

Regarding the first result, it should be noted that it is very common to find units where students carry out routine activities that are worthless for learning, making the student a mere spectator of healthcare practice. This creates negative feelings in students who are more than qualified to perform more elaborate procedures. In many cases they may worry about not having performed a technique and that at the end of the race they will have to face the same situation without having done it once for themselves. This can lead to the student becoming discouraged, worried and frustrated (24) making them more vulnerable to bullying

situations. The aforementioned situation coincides with the consequences on the feelings of the students described by Hopkins, Fetherston and Morrison (23) and by Banda, Mayers and Duma (24).

When these students get their first employment contract, they will be a safe target for bullying behaviors, coinciding with the ages with the highest prevalence of mobbing exposed by Sánchez (14), which indicates a higher prevalence of victims of mobbing among recent graduates.

The other group of items with the highest scores refer to communication. The student feels that they ignore him and interrupt him; it cannot express itself freely. These items coincide with the data obtained in the prevalence study by Chang and Cho (13), in which 59.6% of the respondents reported having been victims of verbal violence.

For all these reasons, as Celebioglu (12) points out, these students may experience negative feelings of contempt, humiliation and undervaluation; reconfiguring the vulnerability that will make them more prone to mobbing.

The increase in mobbing behaviors perceived by the student throughout the course may be related to the difficulty they encounter as they go through the different units (Figure 3). This may be due to the fact that, in certain units, a student is less likely to be able to fulfill the role of nurse, even in a tutored way, due to the complexity and specificity of the care required.

Referring to the data reflected in Figures 1 and 2 and, as we have already mentioned above, the items that obtain a higher score are grouped in the first 10 and specifically, those related to limitations in communication and low load of work and relevance of the tasks performed.

Regarding the results obtained regarding the items related to sexual harassment, we must point out that although it is a relatively small amount, the consequences that these few people who are victims of sexual harassment may experience can negatively affect their entire lives, For this reason, it is an item that we hoped would not obtain the slightest score due to the severity of the type of behavior and the repercussions in every way for the student who suffers from them. They are intolerable behaviors.

Kim, Tilley, Kapusta, Allen and Cho (7) detect impacts on patient care, fear of what could have happened, fear of repercussions and long-term impact on personality, in students who revealed that they suffered bullying sexual in the period of clinical placements.

The statistical data obtained in the Mann-Whitney U test for the sex variable gives us values greater than 0.05, so there are no significant differences between being a man or a woman, but it is true that it is one of the values that most closely approximates the 0.05 in the different indices (Table 2 and Table 3). In this case, it is men who suffer a greater number of bullying behaviors, possibly due to the weight of the woman within the nursing profession. It is necessary to take into account that the sample is made up of very few men and that in order to confirm this fact it would be necessary to carry out an investigation where their participation was higher.

**Table 2. Results for the Mann-Whitney U test for the sex variable (“Cisneros 1”)**

	Test statistics <sup>a</sup>		
	IMAP	NEAP	IGAP
U of Mann-Whitney	292,000	299,000	292,000
W of Wilcoxon	2437,000	2444,000	2437,000
Z	-,971	-,868	-,971
Asymptotic significance (bilateral)	,332	,386	,332
a. Grouping variable: Sex			

**Table 3: Results for the Mann-Whitney U test for the sex variable (“Cisneros 2”)**

	Test statistics <sup>a</sup>		
	IMAP	NEAP	IGAP
U of Mann-Whitney	227,500	232,000	227,500
W of Wilcoxon	2783,500	2788,000	2783,500
Z	-1,833	-1,769	-1,833
Asymptotic significance (bilateral)	,067	,077	,067
a. Grouping variable: Sex			

In our study, very high levels of students who have suffered a mobbing situation at some time during their internship period have been detected.

The “Cisneros 1” scale reflects that 85.53% of the students have been victims of some mobbing situation throughout their placements, being these with a low severity in most

cases, while on the “Cisneros 2” scale we obtain that 88.9% of students have been victims of mobbing and with a much higher severity. The average of both results gives us 87.22%.

The harassment behaviors obtained in the study by Tee, Üzar and Russell-Westhead (25) were 42.18% in nursing students and Banda, Mayers and Duma (24) obtained 72% of victims of harassment in health professionals. Both studies show lower results than those obtained in our research.

The increase in gravity can be seen in Figure 3, in which we observe that most of the behaviors that were obtained in “Cisneros 1”, are repeated in “Cisneros 2” but with a much higher severity.

If, for example, we compare item 9 “I am assigned routine tasks or with no value or interest”, as it is the one with the highest value for both surveys, we see that in “Cisneros 1” it scores 54, while in “Cisneros 2” it rises up to 142 points.

It would be logical to think that as the practice time increases, the confidence in the students also increases, but in our case it is not so; many more items obtain higher scores in “Cisneros 2” and we can estimate that, the longer the placements are, the greater the exposure to bullying behaviors that decrease the student's self-esteem and increase their impact and intensity is.

Tee, Üzar and Russell-Westhead (25) reconcile their research on the relationship between treatment of patients and bullying, and also describes some of the most recurring thoughts of students who are victims of mobbing; These include the approach of dropping out of nursing, the fear of carrying out an order due to insecurity, the negative effect of working with anyone else, and unjustified absenteeism.

Being able to access the nursing degree is not an easy task, it requires a lot of effort before and during the course of it. A student must be very stressed to consider abandoning it, with all the consequences that this entails.

Anger, humiliation, depression, anxiety, confusion, insecurity, shame and fear are some of the feelings described by Tee, Üzar and Russell-Westhead (25) in their research, coinciding with some of the feelings obtained in the results of our surveys, already described at the beginning of this section.

Coinciding with Hogan, Orr, Fox, Cummins, and Foureur (26), an intervention for the prevention of mobbing is necessary, sensitizing students on the subject and preparing them to react to hostile behaviors.

The levels of mobbing and its consequences for health, work and organizations would decrease, because those who received this training in its prevention, would more easily recognize bullying behaviors and would be better able to avoid the introduction of mobbing.

This intervention would help them develop the necessary skills in social skills, to defend their right to fair and dignified treatment and to be able to detect and support people who are victims of mobbing in their work environment (22,27,28).

### **Limitations**

Because no type of code was assigned to each student and no reference data was requested (due to the decision that the survey was completely anonymous), we found the limitation of not being able to compare the indices between the two groups studied, since in reality it is paired data and the pertinent statistical tests could not be performed.

Regarding the population, we have taken the 106 students enrolled in second nursing, but it has been impossible for us to verify that these same students are the ones that make up the population of third-year nursing students, for the reasons that we have previously explained. It is necessary to take into account that from one course to another there may be students who do not promote or third-year students who remain in the same course and students who can join the course and who come from other universities.

Another limitation found throughout the conduct of the study is the shortness of the internship periods, which makes it difficult to speak of the prevalence of mobbing itself, since they do not exceed the 6 months necessary to be called as such.

Said limitations could be solved if a previous methodological design based on the type of study, we want to carry out is carried out in subsequent studies.

### **Concluding remarks**

Between 85.53% and 88.9% of the students surveyed reported having suffered some of these bullying behaviors during their clinical placements.

The behaviors that obtain a higher score on the Cisneros scale refer to the barriers in communication and expression that students have and to the assignment of tasks of little value, routine and well below the qualification of the students.

The student's perceived mobbing behaviors increase as they carry out the placements, which can cause negative feelings that make them more vulnerable to bullying behaviors and decrease their competence in the development of their nursing activities.

Sexual harassment behaviors detected by a small number of students have been detected but it is important to highlight the seriousness of the subject, emphasizing the still sexualized image of the nurse.

It is men who suffer a greater amount of bullying behaviors, possibly due to the weight of women in the nursing profession.

An intervention is necessary to prevent mobbing, sensitizing students to the subject and preparing them to react to hostile behavior.

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