



Assessment of Anxiety Induced By Bullying Among BS Nursing Students

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ABSTRACT

Introduction: In nursing education, bullying is a persistent problem that causes a negative impact on students' mental health, which can lead to emotional embarrassment, anxiety, and deprived academic performance.

Aim: To assess the level of anxiety caused by bullying among BS nursing students in Rashid Latif Nursing College, Lahore.

Method: This study utilized a correlational study design, and 135 students were selected using a simple random technique. There are two adopted scales used (a 30-item bullying questionnaire and a 7-item GAD-7 anxiety scale) to collect data from BS nursing students. The results analyzed through descriptive and inferential statistics.

Results: The results of this study exposed that 80% of BS nursing students had mild to severe anxiety symptoms, and 68.8% of BS nursing students reported having been bullied. There was a significant positive correlation between the anxiety and bullying ($r = 0.334$, $p < 0.01$).

Conclusion: This study found that there is a strong positive correlation between anxiety and bullying in BS nursing students. This study highlights the need for mental health treatments, awareness initiatives, and institutional policies to promote a safe and healthy learning environment.

Background

In the world there is elevated level of students are being bullied. According to United Nations International Children's Emergency Fund (UNICEF), 67 of her 100 students in 18 different nations have been bullied. A study conducted by Latitude News in 40 countries and this study found that most cases of bullying occur in Japan, Indonesia, Canada, South Korea, the United States and Finland. In Indonesia up to 50% of her 13–15year olds in experience bullying. Bullying is included in the 10 health problems that fear teenagers. According to UNICEF the major causes of bullying are 25% physical appearance, 25% gender, 25% ethnicity or country of origin, and 25% other reasons e.g. academic weakness, race etc. Bullying causes psychological problems such as 60.17% experiencing emotional mental disorders (44.54% feel lonely, 40.75% feel anxious, and 7.33% have constantly wanted to commit suicide) (Yosep et al., 2023).

Worldwide, bullying at work is a common problem that disturbs many diverse occupations, but it is especially more common in healthcare settings, especially in workplaces of academics. It has been studied that more than 30% of healthcare professionals, including nurses, meet bullying. The bullying is varied according to gender; in female nurses, bullying is at a higher rate of 36% than in male nurses (22%). Bullying can happen due to a lack of support networks and anxiety; these are some common reasons for bullying. Due to bullying, nurses have a negative impression of patient care and well-being (Jang et al., 2022).

Bullying in nursing students happens due to different factors, including power dynamics, stress, anxiety and lack of support. In Spain 2021 almost 50-60% of female nursing students and 30-40% of male nursing students face bullying (Fernandez et al., 2021). In 2023 a cross-sectional study in Saudi Arabia emphasizes that, the majority of nursing students (57%) claimed that bullying had no detrimental effect on their admiration for the field. However, 23.8% said they were doubtful, and 19.2% said they agreed (AbuAlula et al., 2023).

Bullying among nurses is an extensive problem that has a harmful impact on mental health and often results in anxiety, sadness, and low self-esteem. It is defined as repeated acts of violence including an unequal authority in which the victim is constantly threatened or hurt. Bullying is triggered by a variety of individual, social, and environmental variables, for instance peer relationships, family problems, and cultural values (Hutson et al., 2021). Bullying is a pervasive issue in educational institutions worldwide, characterized by repeated, intentional harm inflicted by one individual or group upon another, where there is a power imbalance. Among nursing students, bullying is a particularly pressing concern due to the high-stress nature of their education and clinical practice environments (Fernández-Gutiérrez et al., 2021).

Anxiety is a strong emotional reaction that can damage interpersonal and intellectual affairs. It has been studied that, nearly 40% of nursing students reported having anxiety, with female students being unduly impacted. This highlights the serious necessity for educational environments to deliver intervention and care in order to report these mental health issues (porhola et al., 2019).

The Bibi et al. (2021) research exposes shocking patterns in bullying and anxiety among Pakistani university students. Around 30% of individuals whispered they had been bullied, and a staggering 40% said they had considered suicide. These regarding statistics highpoint the demanding need to treat this population's anxiety crises, particularly in light of bullying, which significantly aggravates their spiritual suffering as well as underscores the quality of clinical performance.

Deciding these glitches is crucial to refining students' wellbeing and stopping any possible long-term effects (Hussain et al., 2024).

Research Objective

To assess the level of anxiety induced by bullying among BS nursing students.

Hypotheses

H₀: There is negative association between bullying experiences and anxiety outcomes among nursing students.

H₁: There is positive association between bullying experiences and anxiety outcomes among nursing students.

Material & Method

This correlational research study was designed to explore the relationship between bullying and anxiety among nursing students. It was conducted at Rashid Latif Nursing College in Lahore, Pakistan, and included 135 first-year to final-year undergraduate Bachelor of Science in Nursing (BSN) students, ages 18 to 26. Simple random sampling was used to choose students, and Google Forms and emails were used to ask them to join.

Participants have to be willing to participate and enrolled in the BSN program in order to meet the inclusion requirements. Students enrolled in other nursing-related programs or those unable to participate were excluded. The purpose of this study was to measure the prevalence, intensity, and possible influence of bullying episodes on anxiety symptoms. A bullying questionnaire consisting of thirty items was used to quantify bullying, which is defined as recurrent acts of hostility or violence including an imbalance of power. Each response was ranked from never (0%), Seldom ($\leq 25\%$), Sometimes (26-50%), frequently (51-75%), and Always (76-100%). The seven-item GAD-7 questionnaire, a validated screening instrument for anxiety symptoms during the previous two weeks, was used to measure anxiety. Levels of anxiety were categorized as minimal ($\leq 25\%$), mild (26–50%), moderate (51–75%), and severe (76–100%). Careful planning went into the data gathering process to guarantee accessibility and clarity. Prior to distribution, participants were given an explanation by researchers of the surveys, their importance, and potential advantages. Although there was no time constraint on completing the questionnaires, which were sent electronically, most took at least fifteen minutes to complete. Using SPSS version 23, data analysis was carried out with an emphasis on descriptive statistics, such as means, standard deviations, and percentages, which were shown in tables and charts for simple comprehension. The study's primary focus was ethical issues. All participants gave their informed consent and gave their permission to use the instruments. Throughout the study, confidentiality and anonymity were upheld, and no personal information was shared with anybody outside of the research team. Throughout the study, participants' autonomy and dignity were upheld, and they were fully informed of their ability to discontinue participation at any moment without incurring any fees.

Results

The results showed that moderate to severe anxiety was present in a large percentage of BS Nursing students, especially those who reported being bullied often. Further we generate the tables and calculate the percentages given below.

Table 1: Demographic Characteristics of the BS Nursing Students

Variable	Frequency (n)	Percentage (%)
Age Group		
18–20	39	29%
20–22	28	21%
22–24	60	44%
24–26	08	06%
Gender		
Male	68	50%
Female	67	50%
Marital Status		
Single	129	86%
Married	06	05%
Level of Education		
BSN 1st Year		
BSN 2nd Year	32	24%
BSN 3rd Year	32	24%
BSN 4th Year	17	12%
	54	40%

This study involves 135 BS nursing students who are willing to participate and completed the online questionnaire (Table 1). The majority of participants were aged 22–24 (44.4%), followed by 18–20 (28.9%) and 20–22 (20.7%). Only 5.9% were aged 24–26. Overall, 94.1% of respondents were under the age of 24. Male participants represented 50.4% of the sample, while females made up 49.6%. The gender distribution was nearly equal. This indicates a balanced representation of both genders. A vast majority of respondents were single (95.6%), with only 4.4% being married. This shows that nearly all participants were unmarried. It reflects a youthful and possibly student-based population. The largest group was 4th-year students (40.0%), followed by 1st and 2nd-year students equally (23.7% each). Only 12.6% were in their 3rd year. This shows a diverse academic level among participants.

Table 2: Bullying level among BS Nursing Students

Bullying	Percentage
Never	34%
Seldom	17%
Sometimes	29%
Frequently	14%
Always	06%

Table 2&3 explains that this study used a 30-item, highly reliable bullying questionnaire (Cronbach's alpha = 0.93) to measure the prevalence of bullying among nursing students. The findings showed a range of experiences that the issue is present for a significant number of BS nursing students, even if it is inconsistent, since the majority reported feeling it "never" (34.22%) or "sometimes" (29.23%). The 16.46% of "seldom" replies indicated sporadic occurrences. The issue is consistently present in their lives, as seen by the smaller but significant number who report experiencing it more frequently (14.09% choosing "frequently" and 6% choosing "always").

Table 3: Bullying among BS Nursing Students

Item	Never n (%)	Seldom n (%)	Sometimes n (%)	Frequently n (%)	Always n (%)
1. Angry yelling or shouting	41(30)	23(17)	56(41)	10(7)	5(4)
2. Using offensive language or inappropriate nonverbal signs in front of others	54(40)	19(14)	49(36)	11(8)	2(1)
3. Using teasing against you	44(32)	22(16)	42(31)	26(19)	1(7)
4. Using inappropriate nonverbal signals towards you and others	43(32)	28(21)	43(31)	19(14)	2(1)
5. Using belittling or undermining behavior for your work or efforts	39(29)	20(15)	53(39)	15(11)	8(6)
6. Underestimating the value of your academic efforts or work	35(26)	18(13)	41(30)	24(18)	17(12)
7. Spreading malicious rumors or allegations against you	40(27)	31(23)	40(29)	16(12)	8(6)
8. Threatening to give you a poor rating	56(41)	21(15)	30(22)	19(14)	9(7)
9. Denial of your academic achievement	48(35)	18(13)	38(28)	23(17)	8(6)
10. Threat of disciplinary action against you	47(35)	21(15)	40(29)	15(11)	12(9)
11. Unfair evaluation of your work or effort	40(30)	29(21)	35(26)	24(17)	7(5)
12. Excessive monitoring or constant criticism of your work	43(32)	21(15)	34(25)	26(19)	11(8)
13. Ironically making inappropriate jokes against you	39(29)	25(18)	39(29)	24(18)	8(6)
14. Assigning you tasks beyond your capacity continuously	37(27)	24(18)	42(31)	22(16)	10(7)
15. Setting expectations or impossible requirements for you	41(30)	20(15)	44(32)	17(12)	13(9)
16. Feeling ignored, marginalized, or physically isolated	40(29)	25(18)	39(29)	21(15)	10(7)
17. Changing your duties or tasks without being told	44(32)	27(20)	39(29)	18(13)	7(5)
18. Removing you from	55(41)	22(16)	37(27)	17(12)	4(3)

responsibilities without prior notice					
19. I was physically assaulted	64(47)	14(10)	35(26)	17(12)	5(4)
20. Deliberately humiliating you in front of others	54(40)	25(18)	36(28)	9(6)	11(8)
21. Putting you under undue pressure to produce	44(32)	33(24)	34(25)	15(11)	9(7)
22. Limiting your self-expression	41(30)	23(17)	42(31)	23(17)	6(4)
23. Trying to demoralize you	42(31)	20(14)	46(34)	20(15)	7(5)
24. Repeatedly reminding you of your mistakes	37(27)	21(15)	40(29)	24(18)	13(9)
25. Constant disregard for your opinions and points of view	47(35)	17(12)	43(32)	18(13)	10(7)
26. Hostile behavior	44(32)	22(16)	40(29)	20(15)	9(7)
27. Denial of learning opportunities	45(33)	17(12)	34(25)	25(18)	14(10)
28. I was treated badly or unfairly because of my race	64(47)	26(19)	22(16)	20(15)	3(2)
29. I was treated badly or unfairly because of my gender (i.e., being male or female)	64(47)	18(13)	29(25)	19(14)	5(4)
30. I have been treated badly or unfairly because of my incapacity or weakness	54(40)	17(12)	42(31)	14(10)	8(6)

Table 4: Anxiety among BS Nursing Students

Anxiety	Percentage
Minimal Anxiety	20%
Mild Anxiety	42%
Moderate Anxiety	26%
Severe Anxiety	12%

Table 4&5 explains that most of the BS nursing students (41.2%) are classified as having ‘mild anxiety’, which denotes periodic but controllable symptoms. The prevalence of moderate anxiety is 26.1%, indicating more frequent and significant symptoms that could need treatment. A lesser percentage, 11.3%, suffer from ‘severe anxiety’, which probably interferes with day-to-day functioning and calls for medical assistance. Only 20% of individuals express ‘minimal anxiety’, indicating that the majority are in some form of psychological suffering.

Table 5: Anxiety among BS Nursing Students

Items	Not at all	Several Days	More than half the days	Nearly every day
Over the last two weeks, how often have you been bothered by the following problems?	n (%)	n (%)	n (%)	n (%)
1. Feeling nervous, anxious, or on edge	35(26)	58(43)	29(21)	13(9)
2. Not being able to stop or control worrying	26(19)	49(36)	48(35)	12(9)
3. Worrying too much about different things	16(12)	55(41)	44(32)	20(15)
4. Trouble relaxing	25(18)	61(45)	22(24)	16(12)
5. Being so restless that it is hard to sit still	27(20)	53(39)	40(29)	15(11)
6. Becoming easily annoyed or irritable	34(25)	56(41)	30(22)	15(11)
7. Feeling afraid, as if something awful might happen	27(20)	58(43)	34(25)	16(12)

Table 6: Descriptive Statistics

Variables	Mean	Std. Deviation	n
Bullying	42.3407	23.04899	135
Anxiety	9.0889	4.06196	135

Correlation between Bullying and Anxiety

Variables		Bullying	Anxiety
Bullying	Pearson Correlation	1	.334
	Sig. (2-tailed)		.000
	N	135	135
Anxiety	Pearson Correlation	.334	1
	Sig. (2-tailed)	.000	
	N	135	135

Table 6 reveals the descriptive stats among 135 participants, the mean anxiety score is 9.09 ± 4.06 , and the mean bullying score is 42.34 ± 23.05 . These numbers show that the sample experienced bullying and anxiety symptoms at moderate levels. Anxiety and bullying have a moderately positive connection, according to the data ($r = 0.334$, $p = .000$), meaning that greater anxiety levels are substantially correlated with more bullying encounters. At the 0.01 level (2-tailed), the correlation is statistically significant, indicating a significant association rather than a random event. These findings, which came from a sample of 135 BS nursing students, emphasize the psychological effects that bullying may have and the necessity of support and intervention techniques.

Discussion

Demographic Comparison

In this study, 135 undergraduate nursing students from a Rashid Latif Nursing College, Lahore were asked to rate the prevalence of bullying and how it affected their mental health. This study reveals that the third-year & fourth-year nursing students report more bullying than the other grades of nursing students and the first-year and second-year students report less bullying. This is happening due to a lack of knowledge among first-year and second-year nursing students and some other reasons like fear of abuse, harassment, etc. Similarly, implicit aggression was experienced by 92.11% of nursing students, those from rural areas, and those with greater educational attainment (Zhang., et al 2024). Rutherford et al., (2020) research included a large number of young, unmarried nursing students and comparably balanced gender representation. In Rutherford's study, which had a smaller focus (1st-year 10%, 2nd-year 18%), yours had a bigger proportion of first- and second-year students (23.7% each). In contrast to Chachula et al. (2022), who reported almost 60% female participants, this study displays a virtually similar gender distribution (50.4% male, 49.6% female). The majority of the students in both studies are in their early 20s, and a comparable high percentage (around 40%) is final-year nursing students. According to Bibi et al. (2021), the study's sample consisted of 95.6% unmarried individuals, 94.1% of whom were under 24 years old, and had a virtually equal gender distribution (50.4% male, 49.6% female).

Results comparison

This study highlights that 66.8% of undergraduate nursing students report bullying, in which 16.46% report seldom, 29.23% report sometimes, 14.09% report frequently, and 6% report always and majority of these face anxiety in their academic career. In line with these conclusions, the previous study conducted in Saudi Arabia highlights that approximately 90.1% of nursing students report bullying (AbuAlula et al., 2023). The author reviews the recent literature of 20 articles. In Egypt 50% of the nursing students reports bullying behavior on a daily or weekly basis during nursing education (Abdelaziz et al., 2021) while in this study 80% BS nursing students shows anxiety symptoms due to bullying actions. International studies have reported that 85.4% of students were female, and 67.9% were at least 20 years old. Students studying nursing (36.6%), public health (15%), and medical laboratory technology (13%) made up nearly half of the respondents (Setiadi et al., 2021). In Bangladesh, 26.5% of nurses “never” experienced bullying, 32.1% “sometimes,” 18.9% “seldom,” 15.3% “frequently,” and 7.2% “always,” indicating slightly higher rates of frequent bullying in the Bangladeshi nurses’ sample as compare to our study 34.22% of nursing students reported “never” experiencing bullying, 29.23% “sometimes,” 16.46% “seldom,” 14.09% “frequently,” and 6% “always” (Cronbach’s alpha = 0.93) (Chowdhury et al., 2023). In this study 66.8% of nursing students reported experiencing bullying at least occasionally ("seldom" to "always"), compared to Johnson et al., (2020), who reported 63.8% experiencing it at least occasionally. In this study, 41.2% of students had mild anxiety, 26.1% moderate anxiety, 11.3% severe anxiety, and 20% minimal anxiety, compared to Johnson et al., (2020), where 38% of nurses reported mild anxiety, 30% moderate, 12% severe, and 20% minimal anxiety symptoms. In comparison Alshawush et al. (2020) reported moderate anxiety in 20–30% of nursing students and severe anxiety in up to 15%, showing generally similar levels of anxiety while according to another study reported similar prevalence rates that is mild anxiety at 43%, moderate anxiety at 25%, and severe anxiety at 12% (Harb et al., 2021).

Conclusion

This study discovered that among Pakistani nursing students, symptoms anxiety was highly prevalent. The majority of those surveyed experienced mild to very severe feelings anxiety. More than half of nursing students reported having been bullied during their academic careers, whereas just about a third did not. Underestimating the value of your academic effort or work, accompanied by unjust assessments of their work and others undervaluing their academic performance, were the most often cited aspects of bullying. This study found that the first-year and second-year BS nursing students cannot report bullying due to fear and lack of knowledge as compared to third-year and fourth-year BS nursing students. Surprisingly, there is an equal percentage of male and female BS nursing student majority of students.

Limitations

The outcomes may not be as widely applicable as they may be because the sample is restricted to BS Nursing students.

The study is limited by including participants from only one institution, which restricts the generalizability of the findings.

Recommendations

Family members, teachers, and nursing instructors should all receive training on how recognize potential emotional indicators of bullying, including as stress, anxiety, and sadness. These groups need to become more conscious of the bullying actions of their students. Policymakers should generate intensive anti-bullying initiatives and mental health support networks to lesser anxiety levels. Using higher and more diverse samples, future researchers should investigate the long-term effects of bullying on nursing students' academic and clinical performance. To stop bullying from arising in the first place, nursing schools must teach their students about the issue of bullying as well as how to recognize and handle it.

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