

## **MEDICAL STUDENT ABUSE – A Malaysian Perspective**

### 1. Introduction:

- On a bright morning in late August in the early 1980s, a senior member of a medical school faculty attended an orientation session being held for incoming freshmen medical students.
- It made him feel good when he looked around the large lecture hall and saw the eager, alert, enthusiastic men and women from various walks of life and a variety of educational backgrounds.
- When the dean of the medical school spoke to them and indicated that they would have to work harder than they ever had to before, the Faculty Member could almost sense them saying “That’s OK! Let us at it. Medical school will be an exciting and rewarding experience and we’re ready. We’ve been waiting for this for years.”
- As the faculty member sat looking at the students, he was saddened when he thought of the gradual transformation that would take place in them over the next several months...
- ...many would become cynical, some dejected, other frightened or depressed and a few filled with frustration. The joy, the ‘eager beaver’ anticipation they now had, might never return.
- The faculty member was a paediatrician, and as he sat there, he happened to think of similar changes he had seen in some children who had been placed in foster homes. As he thought of these children, he pondered, “ If I were to become aware of this group of eager, happy, alert children who started out being spontaneous and joyful, but became dejected, depressed, frightened and frustrated after being placed in foster homes for a period of few months... I would be concerned that something terrible had been done to them.”

- He knew that parents and sometimes foster parents abused children, and he wondered whether some (or many) medical students were also abused after they entered medical school.

2. Medical student abuse:

- “... to treat in harmful, injurious or offensive way, to attack in words, to speak insultingly, harshly and unjustly to or about a person; to revile...”
- “... unnecessary or avoidable acts or words of a negative nature inflicted by one person on another person or persons...”

Silver and Glicken, 1990

3. Related term:

- Student cynicism
  - “... well-known attitudinal changes of deflation, pessimism and loss of humanitarian and enthusiasm that characterize many students as they progress through the curriculum.”

Kay, 1992

- Need to idealise is important
- Student abuse leads to “... lowering of students’ ideals about their teachers and medicine itself.”
  - Traumatic deidealisation.

4. Effects of student abuse:

- Student cynicism
- Traumatic deidealisation
- Loss of self-esteem
- Interfere with emotional health
- Increased problem drinking, hostility, anxiety and depression
- Inferior learning, less effective patient care, avoidance of academic careers, reduced class attendance.

## 5. Questions

- Is it culture related?
  - Do asian students perceive themselves as being abused?
  - What is the incidence?
  - What are the sources?
- What are our students' attitudes towards perceived student abuse?
  - Does our culture affect our thinking?
- Is there evidence of student cynicism?

## 6. Methodology:

- Questionnaire
- 3 parts:
  - First part
    - Type of abuse
      - Verbal abuse
        - Yelled or shouted at
        - Inappropriate nasty, rude or hostile
        - Belittled or humiliated
        - Cursed or swore at
      - Physical abuse or threats
        - Threatened with physical harm
        - Subjected to physical harm
        - Placed at unnecessary medical risk
      - Psychological mistreatment
        - Assigned tasks as punishment
        - Threatened an unjustifiable bad grade
        - Took credit for student's work
        - Threatened to be failed unfairly in class
        - Privileges taken away that would normally be enjoyed
        - Competed with maliciously or unfairly

- Put at unfair disadvantages by cheating on examination or papers
- Hostility after significant academic or research accomplishment
- Tried to turn supervisor against student
- Made negative remarks to student about becoming a physician or pursuing a career in medicine
- Made to feel uncomfortable by telling jokes or passing comments that are sexual in nature
- Made to feel uncomfortable by telling jokes or passing comments that are racist in nature
- Made sexual advances to
- Frequency of abuse
  - During your study here, how often people have done the following:
    - 0 = never
    - 1 = rarely : 1 or 2 times
    - 2 = sometimes : 3 or 4 times
    - 3 = often : 5 or more times
- Source of abuse
  - Colleagues
  - Preclinical academic staff
  - Clinical academic staff
  - Medical officer/ house officer
  - Nurses
  - Patient
- Second part
  - Attitudinal statements
    - Mistreatment by one's supervisors is a necessary part of professional education

- To be verbally attacked in one's training helps one to deal more effectively with difficulty patients
- Teachers and elders have the right to teach students in any way see fit as long as their intention is correct
- Mistreatment is a form of test of our patience
- Students will be better doctors if they learn how to be humble and control their emotions during mistreatment
- Students are mistreated as a result of their own misbehavior
- Inconsiderate treatment of one's junior colleagues is a sign of professional incompetence
- Inconsiderate treatment of one's junior colleagues is a sign of professional insecurity
- Ritualized maltreatment in training could lead one to change to a profession not known for such behaviour
- Insensitive treatment by one's instructors could lead one to treat patients in an insensitive manner
- Agreement by Likert scale
- 1 (SD) – 7 (SA)
- Third part:
  - Perceived changes in attitude
    - Have you change in any way as a result of going through the medical training?
      - Empathy
      - Helpfulness
      - Concern for patient
      - Concern for making money
      - Cynicism
      - Anxiety
      - Condescencion

- Sensitiveness
- Emotionally
- Compared to entry
- 7 (more) – 1 (less)
- Administration:
  - Administered to final year students SMS 2001/2002
  - Pre-houseman workshop

## 7. Result

- Return rate 77.1%
- Demographic
  - 22.9% males
  - 83.9% Malays
  - 12.6% Chinese
  - 3.5% Indians
- Frequency and source
  - Highest reported type:
    - Verbal abuse:
      - Yelled or shouted at
        - 81.4% reported at least one incidence
        - 62.1% cited nurses as source
      - Belittled or humiliated
        - 69.4% reported at least one incidence
        - 35.4% cited nurses as source
    - Psychological mistreatment:
      - Negative remarks
        - 32.6% reported at least one incident
        - 15.3% cited clinical staff as source
      - Racist jokes
        - 32.6% reported at least one incident

- 17.4% cited clinical staff as source
- Failed to find significant difference according to race or gender

## 8. Discussion

- Limitation
  - It is student perception; no cross checking done
  - Contamination of memory, 'nostalgic effect'
  - No comparison with other group
- Student comment:
  - "Actually I have already forgotten what had happened to me last 6 years. I want to leave this place with peace and harmony. Thanks for teaching me to be a doctor..."
- Incidence similar to US studies; verbal abuse most reported
- Lower racial and sexual abuse reported
- Similar cited source esp. nurses
- Our student also reject 'benefit' of mistreatment
- However, ambivalent about respect of elders and virtue of patience
- Attitude change:
  - Less cynical on exit; contrasting US studies
  - Also less concern about money
  - Effect of culture?
  - Observer effect?