

Men appear to bully more commonly than women in academic medicine

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A greater proportion of men than women exhibit bullying behaviors during medical training and academic practice, and only a minority of victims report their experiences, suggests new research published in the online journal *BMJ Open*.

Previous studies have reported that bullying is common in medicine with likely impacts on mental health, professional interactions, and career advancement. Surveys from the UK's NHS have reported 55% of staff experienced bullying and around a third were doctors in training. The prevalence of academic bullying within medical settings is unknown.

Therefore a team of researchers led by Dr. Harriette Van Spall from McMaster University in Hamilton, Canada, set out to investigate the dynamics and consequences of bullying in academic medical settings and identify useful interventions by reviewing existing studies.

They systematically reviewed 68 suitable studies carried out between 1999 and February 2021 that

represented 82,349 consultants or trainees collectively, based in hospitals or clinics that were affiliated with universities or had trained medical students, residents or fellows.

The included studies addressed either the prevalence of and impact of bullying behaviors, characteristics of perpetrators and victims, barriers and facilitators of academic bullying, or potential interventions. Most of the included studies were set in the US and the UK.

The term "academic bullying" was described as the abuse of authority that impeded the education or career of the victim through punishing behaviors that included overwork, destabilization and isolation in academic settings.

In their review and analysis, the researchers found that among individuals who responded about bullying patterns in 28 studies, the most commonly described (38.2% of respondents) was undue pressure to produce work.

In addition, among individuals in 33 studies who reported the impact of bullying, the most common impact was psychological distress (39.1% of respondents).

Collectively, respondents identified the most common bullies to be consultants (53.6% of respondents in 30 studies), followed by residents (22%), and nurses (14.9%).

Among demographic groups, men were identified as the most common perpetrators (67.2% of respondents in five studies) while women were the most common victims (56.2% of respondents in 27 studies).

Despite being bullied, less than a third of victims (28.9% of victims in 25 studies) reported the bullying and more than half (57.5%) of those who made a formal report did not have a positive

outcome. Fear of career impact and lack of perceived benefit were the most common reasons cited for not reporting bullying.

Institutional factors that perpetuate bullying included hierarchical power structures, normalization of bullying, and a lack of enforcement of anti-bullying policies.

In addition to addressing the hierarchies and permissive environments that make academic bullying common, a range of strategies were described in 49 of the studies reviewed.

These included anti-bullying policies, education, anti-bullying oversight committees, institutional support for victims, and mandatory workshops on mistreatment. The strategies had varying levels of success and the methods used to test these interventions in the studies were not robust.

The authors acknowledge several limitations in the surveys that they analyzed, including the lack of a consistent definition of academic bullying, the variation in questions across studies, suboptimal response rates, the lack of validation of instruments, and selection bias.

Nevertheless, the authors' research was broad in scope with a large, diverse cohort including several specialties of medicine and countries.

They conclude: "Bullies are commonly men and senior consultants, and more than half the victims are women. The fear of reprisal, lack of impact of reporting, and non-enforcement of anti-bullying policies are the greatest barriers to addressing academic bullying. Methodologically robust trials of anti-bullying interventions are needed."

More information: Systematic review of academic bullying in medical settings: dynamics and consequences, *BMJ Open* (2021). DOI: [10.1136/bmjopen-2020-043256](https://doi.org/10.1136/bmjopen-2020-043256)

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