

Expressions of violence in the university environment: the view of nursing students

Manifestação de violência no ambiente universitário: o olhar de acadêmicos de enfermagem

Zeyne Alves Pires Scherer¹, Edson Arthur Scherer², Paloma Tamaris Rossi³,
Kelly Graziani Giacchero Vedana⁴, Luciana Aparecida Cavalin⁵

¹ Nurse, Doctor of Psychiatric Nursing. Professor, Ribeirão Preto College of Nursing, University of São Paulo (EERP/USP). Ribeirão Preto, São Paulo, Brazil. E-mail: scherer@eerp.usp.br.

² Doctor, Doctor of Experimental Pathology. Psychiatrist, University Hospital, Ribeirão Preto School of Medicine, USP. Ribeirão Preto, São Paulo, Brazil. E-mail: egascherer@hcrp.fmrp.usp.br.

³ Nurse. Ribeirão Preto, São Paulo, Brazil. E-mail: paloma.rossi@usp.br.

⁴ Nurse, Doctor of Psychiatric Nursing. Professor, EERP/USP, Ribeirão Preto, São Paulo, Brazil. E-mail: kellygiacchero@eerp.usp.br.

⁵ Psychologist, Master of Psychiatric Nursing. Federal Institute of São Paulo, UNED Sertãozinho. Sertãozinho, São Paulo, Brazil. E-mail: lucavalin@bol.com.br.

ABSTRACT

The aim of this qualitative descriptive exploratory study was to investigate the perception of nursing undergraduate students on the forms of expression of violence in the college environment. Data were collected using semi-structured interviews. The collected data were submitted to the thematic content analysis, and led to the construction of three categories: “interpersonal violence in the relationships established in the course”, “participation as a victim or perpetrator” and “reasons for the incidence of violence”. The findings highlight inequalities in the relationships of power, the incidence of different types of violence and the tendency to naturalize them. Results point to the need to create a system to make it easier to report cases of abuse and offer support to the victims; to invest in intervention programs to raise awareness on the subject, improve academic relationships and prevent mistreatment; and to include the violence subject in the course program.

Descriptors: Violence; Education, Higher; Education, Nursing; Students, Nursing; Mental Health.

RESUMO

Estudo qualitativo, descritivo, exploratório que investigou a percepção de estudantes de enfermagem sobre as formas de manifestação de violência no ambiente universitário. Para a coleta de dados, utilizou-se entrevista semiestruturada. Os dados submetidos à análise de conteúdo, modalidade temática, permitiram construir três categorias: “violência interpessoal nos relacionamentos estabelecidos no curso”, “participação como vítima ou perpetradora” e “razões para a ocorrência da violência”. Os achados destacam desigualdades nas relações de poder e ocorrência de diferentes tipos de violência e tendência na naturalização desses. Os resultados apontam necessidade de criação de sistema que facilite a denúncia de abusos e ofereça apoio às vítimas; investimento em programas de intervenção que conscientizem sobre o tema, melhorem as relações acadêmicas e previnam maus-tratos; inclusão do tema violência nos currículos.

Descritores: Violência; Educação Superior; Educação em Enfermagem; Estudantes de Enfermagem; Saúde Mental.

INTRODUCTION

In recent decades, violence has become object of study of scientific research and ongoing discussions by society. Violence in the workplace is one of the situations that have been receiving increasing attention. It may affect any professional category in virtually any sector. Due to the characteristics of the service provided and the work environment, professionals in the health sector are subject to pressures for reform, the necessity of overtime and extended work shifts, and demoralization⁽¹⁾.

In addition, the results of increased domestic and street violence are reaching health facilities. As a consequence of this widespread violence, deterioration in the quality of patient care occurs, and professionals end up quitting their jobs; this may lead to reduced services and increased healthcare costs. Given this reality, in 2002 the International Labour Office, the International Council of Nurses, the World Health Organization and Public Services International jointly developed the "Framework Guidelines for Addressing Workplace Violence in the Health Sector," which provides important strategies for dealing with violence⁽¹⁾.

Educational institutions, in turn, play an important role in society; they constitute a place for education, socialization and professional formation of individuals. The adjustment of students to the academic environment is a complex, multidimensional, multifaceted process based on the daily relations established between students and institutions; it can be enhanced or impaired. Higher education institutions in particular constitute an educational system that is linked to the enhancement of self-assertion expressed in relations of power, control and domination (prevalent standards in our society), based on competitive and coercive behavior rather than cooperation. The reproduction of social inequalities between students, professors and other professionals in the university environment facilitates the occurrence of violence, which is often seen as a natural behavior and often underestimated or ignored⁽²⁻³⁾.

Among healthcare professionals, nurses are often exposed to violent situations in their workplace, negatively affecting their performance. They occupy the first position in the ranking of victims of such violence in comparison to other professions in the healthcare area. Some professionals even quit their careers. The literature shows that from the beginning of their formation, while they are still nursing students, they are victims of various acts of aggression^(1,4-6).

At the university, affection in the professor-student relationship and practicing skills in controlled situations may contribute to preparing students to deal with professional requirements and responsibilities. On the other hand, coercive actions perceived as violent may result in damage to the development of learners, expressed by lack of interest, reduced willingness to learn and work, absenteeism, delays, dropouts and symptoms of anxiety and depression⁽⁷⁻⁸⁾.

Therefore our question is: How do professor-student, professional-student and student-student relationships occur? Are students able to identify the types of violence that occur in the academic environment? What is the impact on their learning, professional performance and health condition (physical and mental)?

In this sense, knowledge about what nursing undergraduate students know or experience in terms of violence in different environments within the university may provide material to facilitate understanding of how it happens. Likewise, clarifying the objectives behind it will enable future professionals to develop the competencies and skills necessary to manage the social reality that they will face, that is, the operation in healthcare services of recognition, assistance and care for victims of violence.

Given the above, in this study we investigated the perception of nursing students about different expressions of violence in the university environment.

METHOD

Qualitative descriptive exploratory study⁽⁹⁾ with the participation of 13 unmarried female students between

20 and 31 years old who are attending the third year of the nursing bachelor course of a public higher education institution in the state of São Paulo, Brazil.

The selection of the participants was random. From the attendance list for the third-year class (total of 76 students), we used the criterion of arithmetic progression of ratio 5 counted from the first name of the list. When any of the selected students declined to participate in the study, we selected the following or previous name on the list, respectively. The definition of this purposive sampling was based on closure by the theoretical saturation technique⁽¹⁰⁾, that is, the inclusion of new participants was suspended when the obtained data became redundant or repetitive, adding no relevant information to the understanding of the phenomenon under study. Third-year students of the course were chosen because they presented greater experience in the academic environment and contact with the profession. There were no exclusion criteria.

A semi-structured interview⁽⁹⁾, previously developed and submitted to appraisal by three judges, was used to collect the data. The questions included identification data for the participants and their knowledge about violence and its occurrence in the university context. The individuals were interviewed from June to September 2010 in private rooms and on previously set schedules, without any loss in participation of the students in their academic activities. The duration of each interview ranged from 20 to 45 minutes.

The interviews were recorded and subsequently transcribed and submitted to thematic content analysis⁽¹¹⁾. We read the transcripts and tried to identify the meaning units, sorting them into conceptual categories according to analog reunification. Subsequently, we articulated the empirical material with the literature.

In order to provide a representative view of the studied contents and support the discussion, we introduced excerpts from the interviews, identified with the letter "E" followed by the number corresponding to

the order in which they were conducted. This procedure aimed to ensure the anonymity of the individuals.

The project that originated the research was approved by the Research Ethics Committee of the studied institution (Protocol 1033/2009), and all the participants signed the Free and Informed Consent Form.

RESULTS AND DISCUSSION

All 13 students interviewed identified the occurrence of interpersonal psychological violence in their course. Four of them also mentioned episodes of physical violence, and one mentioned a situation of self-inflicted negligence. The content analysis of the transcribed material allowed the identification of empirical categories that were configured as major themes of analysis. Thus, the three categories were: "interpersonal violence in relationships established in the course"; "participation as victim or perpetrator"; and "reasons for the occurrence of violence." These were described and exemplified with excerpts from the speech of the interviewed students.

Interpersonal violence in relationships established in the course

Of the total of participants, 7 reported having witnessed situations of violence involving colleagues, and 6 mentioned having just heard such reports. They mentioned professors, professionals in internship fields and colleagues as perpetrators.

The university environment is different from the environment that the students had contact with in their previous formation in elementary school and high school. In the university, students are closer to what their professional lives will be, and consequently they are exposed to particularities, pressures and major requirements by professors and other professionals involved in the teaching process, colleagues and themselves⁽⁸⁾.

The students reported the occurrence of hazing, teasing, vulgarity, insults, contemptuous attitudes and even physical aggression. Various violent events may

generate exclusionary behaviors by both aggressors and victims. These findings confirm those in the literature about peer violence in higher education institutions, where it has been observed that victims of hazing, including solidarity hazing, tolerate such situations in order to avoid being excluded, and that female students use insults in an indirect manner, that is, for spreading rumors (gossip) or socially excluding others^(5,12).

There is verbal abuse and hazing, which is also a form of violence. (E9)

I have heard reports of verbal abuse in the classroom. Students cursing others, you know, mocking others, the person thinks the other will not be annoyed, but you see that the person is a bit annoyed with the insult. (E5)

Among the students, the individual comes out with a loud voice, altered tone of voice, unusual words that really offend the other. (E8)

I think that there is moral violence through offenses by means of words between colleagues. (E12)

I have seen humiliation among the students, saying that the person was a bit fatter in an insulting manner. There is also the case in which a colleague asks a question, and people whisper: "Again! Hey, this way we'll never get out of the classroom! It will never end!" One day she looked behind her and noticed this situation. It was embarrassing. She swallowed her questions, and just quit asking. I have never seen her raise her hand to ask any questions again. (E1)

I believe that there is physical violence between students; it often happens at parties. Sometimes we notice that there is some group that drinks to excess and expresses all their feelings, sometimes using violence, physical and psychological aggression. (E7)

The scientific literature has shown that in the first contacts of students with practice in clinical training they are often victims of academic and verbal abuse. They feel oppressed and confronted by professors^(3,13-14). Such situations may be considered abuse of power and

degradation; they are humiliating in nature and tend to be expressed in public, in front of others, diminishing the capacities of the victims and ridiculing their identity⁽⁵⁾. The form of treatment expressed in communication may create barriers to empathetic relationships, which are so necessary to protect, care for and develop the students, often making the school environment a frustrating and inappropriate place for a meaningful teaching and learning process⁽¹⁵⁻¹⁶⁾. Furthermore, the perception of a given professor as a punisher may lead the students to avoid contact with that professor, increasing the absenteeism, delays and even dropouts^(8,17).

I think hierarchy is a form of violence. I think the way professors treat the students here at the university really affects their psychological condition. It affects their progress in academic activities. There was a situation that I considered as violence toward a student that was doing the internship. She went to get a pair of gloves and the professor grabbed her arm and shouted in the middle of the hall, asking her if she or her father were the owners of a glove factory. The professor insisted that she was wasting gloves, and asked her what she thought the university was. How could the student return the following day for the internship? How will the student continue the internship activities and take care of a patient? The individual will feel bad and be affected psychologically. I think it is the height of absurdity, a qualified professor doing this to a student. Does he know this is a form of violence? Aren't they literate, scholars? Wow, that's ridiculous! (E4)

Verbal abuse expressed by professors through authoritarianism. I think this depresses students. (E9)

I have seen professors calling students "girl," "sonny," "slowpoke"; in my opinion this is derogative. (E13)

When students chat, some professors become a little nervous and rebuke them, not in a positive way, but humiliating them. The professors really humiliate the individuals. It is annoying to the students when they are

scolded in this way. If students doze, the professors mock them. (E2)

I witnessed psychological violence. We were in a teaching laboratory, learning to collect blood. The professor said: "Not this way, you're doing it wrong, it is not this way. You're not competent, you should not be in this area, you should choose another profession". Then she took the instrument from the student's hand, and the student started to cry in the lab, with everyone there. It happen not only to this one, but also to others. I considered it rude, there was no need to say that. It was clear that the professor didn't care, no matter if you were nervous, wrong, of if you didn't know how to do something. You felt incompetent. After the student began to cry, the professor apologized. (E5)

An internship colleague was a little slow to gain confidence. I believe she remains that way, that's how she is, she needs more time. She was having difficulty giving an intramuscular injection to a very emaciated patient. The professor was rushing the student to do everything fast. The student was very nervous and did it too fast, and the professor pulled her ear, I don't know if it was hard, I don't know what she felt physically. But everything happened in front of the patient. I thought that was wrong, because if you want to rebuke the student, you should do it elsewhere, not in the presence of the patient. It was very embarrassing, I was embarrassed for the professor and my colleague in the presence of the patient. I know it was pressure, in fact, it was psychological torture. My professor also humiliated her students a lot if they made a mistake. And that was just the good students. (E6)

I have seen professors behave inappropriately, saying thing like: Oh, you will never be able to learn this; you have not improved up to now, you will never improve. This embarrasses the students, leaving them completely lost and embarrassed. I believe this is a very serious form of psychological violence. An attempt to make the individual feel embarrassed. I believe that there is a time to correct people, but has to be performed carefully. I believe that

this kind of situation still happens in the university. Such situations are embarrassing, speaking loudly to students in front of a healthcare team. Even using insulting words: "Gosh, you're stupid, haven't you learned that you can't do that?" So, as it is a learning process that takes some time, sometimes people just can't feel confident. Maybe the way you prepare a medication takes a little longer, you are being more careful, then the professor scolds you, gets your attention, uses bad words that embarrass you. This is very bad. Sometimes a mistake that was not so serious is so maximized that the student feels bullied. (E7)

According to the individuals in the study, the existing hierarchy of faculty and students of the institution favors the occurrence of abuse. The students expressed their feelings of significant loss, humiliation and even failure in the development of tasks due to evaluations (sometimes derogatory) by their professors. They spoke of dissatisfaction in relation to embarrassing and aggressive attitudes of some professors in teaching-learning situations. They considered nonsensical the fact that professors, with all their experience and performance as educators, who should be models, abuse and expose their students in front of colleagues, patients and healthcare teams.

Students are expected to develop skills and competencies that are desirable for their chosen careers. They are subjected to a continuous evaluation process in order to measure the skills they have acquired. This generates conflict with their peers and teachers. Competitiveness among colleagues was identified. Regarding professors, they have a responsibility to evaluate learning and assign scores, a relationship that does not represent reality and may lead to the creation of distorted assessments. In the opinion of the interviewees, professors may make use of retaliation when they are contradicted or questioned about their knowledge. In turn, students tend to avoid exposing their ideas or discontentment, as they fear being retaliated against by professors, who can give them a lower ranking.

The results of our study conform with the literature, revealing the use of coercion by professors by means of punitive scores^(5,8,15,17). Such attitudes and forms of control are seen as natural in the university environment to punish those who disagree or think differently. It happens subjectively and may lead students to exhibit anxiety, anguish, fear, lack of self-confidence, discredit, discouragement, resignation, depression and aggression. Low levels of motivation may lead to absenteeism, delays, failures and dropouts, identified as real and counterproductive^(5,8). On the other hand, students may react by assuming a passive, dependent and submissive attitude, as reported by the interviewees and described in the literature^(8,15,17).

This form of power used by professors may contribute to the development of uncritical individuals because students end up accepting and assuming without question the rules imposed by such professionals and the educational institution⁽¹⁵⁻¹⁶⁾.

In relation to the scores, I sometimes feel that the professors also commit violence. We cannot contradict anything, use a contrary argument or argue about something the professor says, particularly for fear of the evaluation. Before I complete the discipline term, I am afraid of talking to the professors because they haven't set the scores yet. They have the power and I end up being submissive because I fear being the victim of a different kind of aggression through a low score. (E7)

There are many students and colleagues that try to outsmart each other. Anything goes to be the best. One wants to better than the other, wants to be the best, wants to harm the other. There is too much selfishness, too much lack of character. (E6)

Some of the students reported suffering abuse from nursing team professionals in the internship fields, expressed through lack of receptivity, indifference, rejection and absence of collaboration in the learning process. According to the literature, such attitudes arise

from the inequality of power between professionals and students^(1,6). In one study, students pointed out 4 types of injustice: "we are undesirable and ignored," "they do not believe in us and distrust our analysis/findings when we examine the patients," "we were undeservedly accused" and "I was publicly humiliated"⁽⁶⁾.

In their turn, professors cannot monitor all the situations of abuse against their students. However, they are expected to encourage students to report incidents and not explain the attitudes of the nurses as being the result of overload or stress. Also, the inclusion of abuse in the work environment in the curriculum of the undergraduate nursing program is indicated in order to prepare the students for such inevitable events⁽⁶⁾.

In some places we are well received, there is nice interaction; but there are other places where people are arrogant, antipathetic, acting as if you are disturbing them. In fact, you are trying to learn, and since they know more, they could help more, but they just don't do it, they don't collaborate. (E1)

Most nurses just don't care, they are indifferent. (E4)

I think some sectors are very disturbing, the team does not accept students, so it is very difficult. But in general, I think it is also positive. (E9)

Participation as victim or perpetrator

The students revealed that they had been victims of violence by professors and colleagues. They complained of accusation, pressure, harassment, embarrassment, humiliation and derogatory treatment by professors. In turn, colleagues mocked, insulted, underestimated them. Cases of intrigue were also reported. One of the participants reported a situation in which she failed in a given subject and a colleague questioned her participation and use of the professor's time, demonstrating the individualistic attitude that configures competitiveness among peers.

Results of other research show that college students in the area of health may be victims of hostile, abusive,

coercive or humiliating behaviors perpetrated by colleagues, professors or other professionals involved in the teaching process. Among the forms of abuse, the verbal and academic types are the most recurrent^(5,14,18-21).

As a consequence of aggression –also mentioned in the literature – the participants in our study felt offended, diminished, discouraged, hurt and depressed^(15,20). One of the interviewees reported having sought support from friends to overcome these incidents. According to research, there is a tendency to naturalize abuse in the academic environment. Students end up ignoring such situations because they fear possible retaliation; they do not report the cases^(5,14,18-20).

I was insulted, diminished by a professor in the second year. She was stern with me, oppressed me, she did not accept it if I made a mistake, she humiliated me. That professor really discouraged me. I almost quit the course because of her, but I had support from some friends; they said I had to overcome that and I would have to overcome even worse obstacles. So I decided to come out on top. (E6)

A colleague told me that since I was repeating the term, I had to know everything and I couldn't waste the professor's time. It is moral abuse, an insult, aggression. (E10)

You see the person talking about you, whispering, gossiping, mocking you. That really affected me. (E12)

I was called "sonny" once in the internship, and I did not like it. (E13)

In the internship field, sometimes there are words that humiliate you, it is embarrassing. Depending on how it is said, it really hurts, depresses, makes you stop and think: What am I doing here? Is it worth continuing? This discourages students. (E9)

The students realized that they had been agents of violence when they mocked or expressed themselves inappropriately, tried to impose their opinions or were

negligent. Fatigue, impatience, intolerance, stress, overload, reaction to personal problems, intimacy and banalization of violence were presented to justify such attitudes. The naturalization of the phenomenon of violence in the academic environment has been confirmed in other studies^(5,15,18).

Sometimes we play, saying: Hey, you're chubby, you're skinny, starving. This happens with those we are closer to. (E5)

I think sometimes I instigate, yes, anyone may get angry. I am a naturally explosive person. I have almost taken it out on patients, I did everything reluctantly, unwillingly, and I think both the patient and my colleagues noticed. But I try my best to avoid this. (E6)

I believe my words may cause violence. Refusal to listen to others, imposing your opinions, giving no chance for others to say what they think, and everything else that is due to insignificant things, everyday discussions, all of these represent forms of violence. It is a moment of stress, overload, and it ends up exploding. But I have always tried to fix things through talking. (E7)

Unfortunately we cannot separate our personal problems, especially when we are tired, stressed, impatient, intolerant, facing difficulties. Maybe I can't express myself well and the person feels annoyed. (E11)

Reasons for the occurrence of violence

The participants point out that stress and fatigue – common to professors, professionals and students – are among the causes of violence in the academic environment.

In relation to professors, the participants believe that personal characteristics, such as personal and professional frustration and personality traits, combined with academic competitiveness, are factors that lead them to be aggressive and humiliate students so that they can feel superior.

The university is a place that favors competitiveness. Professors compete for prestige and academic

recognition, positions, publications and ability to obtain funding for research⁽²²⁾. Abusive, hostile or humiliating behaviors are often described, and the perpetrators are people who are in higher positions or have been at the institution for a longer time; this creates a vicious circle in which violent behavior is passed down from one generation to the next^(14,20-23).

There are also data that show a significant correlation between frequency of meeting and reports of abuse⁽²³⁾. In turn, exposure to abusive situations, such as rudeness from students, violence from colleagues and abuse of power by administrators, may generate physical, psychological and emotional harm for professors⁽²⁴⁾. It may also affect their permanence in the educational institutions and facilitate aggressive attitudes towards their students⁽²³⁾.

Moreover, according to the students, professors do not understand the overload of the course, do not recognize differences between students, are not tolerant when students don't meet their expectations, are not friendly, and do not offer support. They are authoritarian and averse to questioning and criticism. These findings are supported by an article that reveals that asymmetrical relationships in the academic context, marked by power and its use, produce inappropriate management of the teaching-learning process by professors, creating verticalization that does not allow the professors to bond with individuals interested in learning⁽¹⁵⁾.

Positive affective relationships established between professors and students seem to favor the learning process. However, they have often been neglected, both in classroom practice and in the formation of educators⁽⁷⁾.

One of the interviewees mentioned her perception in relation to the difficulty of the insertion of professors and students in internship fields. Pressure, criticism and unwillingness to help on the part of professionals explain her statement. Professors pressured by this situation end up taking it out on students. It is difficult to define such behaviors by professionals because of their subjective nature and the variable tolerance among individuals.

Many students accept it as a "rite of passage," only to mask and repeat the behavior later in their careers, that is, "The nurses learn to eat young beginners and each other as part of their profession"⁽¹⁾.

It depends on the temperament of the professors, on what is going on with them. They end up taking it out on the students somehow. Some want to be demanding and end up having violent attitudes. (E3)

I am not sure, but maybe it has to do with dissatisfaction with themselves, a need to hurt someone. A need to humiliate others in order to feel superior. (E1)

I think it is fatigue. I think some people do not like the area in which they work; they are there by chance. (E2)

Among professors, it has more to do with existing competitiveness in the academic environment. Inability to understand our differences. Professors are too authoritarian, they think they are the best; there is no humility in their relationship with us. Instead of talking, they prefer to impose their opinions and do not accept what others think. (E8)

I believe that professors have the best intentions in relation to our learning process, to teach us, but sometimes they do not understand our difficulty. They do not understand that individuals have their peculiarities, that some learn faster than others. They think everything has to happen within their time, and things are not like that. That's why we are here, to learn, and it's up to them to be patient with us, because if you are not patient you are not able to be a professor; it requires a lot of patience, I think. (E6)

The professors see themselves as owners of the knowledge; they are unapproachable, distant, and do not perceive or support us. (E7)

When the students are not meeting their expectations, professors lose their minds. The service professionals sometimes do not help the students, and often do not include the professors. All the actions of the students become a target: If we use too many gloves they complain that we are wasting money; if we take too few gloves they

say we do not care about hygiene and that we will infect the whole hospital, that we have no notion of what we are doing. The professor is stressed and ends up taking it out on us. But for a graduate person, I think they should at least sit and talk. (E4)

The professionals are under too much stress and worry. They end up taking it out on the students. (E13)

In relation to the students, they mentioned overload of activities associated with lack of time to take care of themselves, different levels of engagement in performing the tasks and competitiveness that arises in the final stage of the course as possible causes for the occurrence of violence. In addition to these factors, they believe that friendship facilitates bullying, and that vanity, pride and envy stimulate feelings of superiority and feed competitiveness. In this regard, some studies point out that worry, overload of theoretical and practical academic activities and interpersonal relationships between students are stressors that may trigger aggressive attitudes^(17,25).

We have no place to vent, no free time to spend with our families, to go out and chat with friends and play sports. There is an overload, a lot of tasks, of things we have to do. Stress comes and you think you will not be able to manage it. You end up taking it out on those who have nothing to do with it, taking problems back home, failing to take care of yourself. I believe there is this violence against ourselves, this lack of care. (E7)

I think it is multifactorial, that there are several causes. I recognize that fatigue, stress, excessive activities, competitiveness for being in the final years, rivalry, differences in how individuals assume responsibilities in the activities—all these situations lead to fights and psychological and verbal abuse. (E11)

I think there is competitiveness, stress, envy. (E12)

Because someone is a friend, they think it is normal to make fun of that friend. (E5)

In relation to violence between students, I believe that it is a matter of vanity, pride, the wish to be better than others. (E6)

The adjustment of students may become harmful when there is discrimination, power over others, or professionals demonstrate poor capacity to develop fair and democratic management mechanisms in school life, thus generating the several forms of violence present in the relationships established in the university context⁽¹⁵⁻¹⁶⁾.

FINAL CONSIDERATIONS

Students spend most of their time in the academic environment. Therefore, it is desirable that this place provide students with stimulating and pleasant experiences, where they can make reflections, critical analysis and findings, and where they are encouraged to take part in cooperative discussions with their peers, professors and other people involved in the teaching-learning process. However, the reality found in higher education institutions is not ideal. Interactions and relationships in the university environment, whether in the classroom or in the internship field, suffer the influence of differences in power. And like a microcosm of society, several types of situations of violence are generated.

The findings of our study provided understanding of the perception of nursing students about the occurrence of violence in the university environment, their participation as victims or perpetrators and possible causes. We confirmed the inequality of power and its relationship with the occurrence of different types of violence and the tendency for naturalization of such situations.

In order to ensure a learning environment, it is necessary to create a system that facilitates the reporting of abuse and provides support to victims. Therefore, it is important that institutions invest in intervention programs aimed at raising awareness of the theme,

improving academic relationships and, consequently, preventive strategies. The inclusion of the subject violence in the academic curriculum may also support this process. In turn, professors need to be made aware of the issue of violence and their participation as perpetrators or victims. As educators and models for future professionals, they should seek knowledge about the subject and attend

training and qualification courses to enable them to face violence in the academic environment. The creation of such mechanisms may prepare students to both recognize and manage situations of abuse in the academic environment and to assist victims of different forms of violence in their professional performance.

REFERENCES

- Hinchberger PA. Violence against female student nurses in the workplace. *Nurs Forum*. 2009;44(1):37-46.
- Costa MC, Silva EB, Jahn AC, Dalmolin IS, Santos M, Silva CM. Representações sociais da violência escolar na expressão de jovens estudantes. *Rev. Eletr. Enf. [Internet]*. 2012 [acesso em: 05 ago 2014];14(3):514-22. Disponível em: <http://dx.doi.org/10.5216/ree.v15i4.18905>.
- Scherer ZAP, Scherer EA. Identificação dos pilares da educação na disciplina integralidade no cuidado à saúde. *Rev Esc Enferm USP*. 2012;46(4):985-93.
- Moreno-Cubillos CL, Sepúlveda-Gallego LE. Violence and discrimination against nursing students in a Colombian public university. *Invest Educ Enferm*. 2013;31(2):226-33.
- Miranda MIF, Oliveira TR, Barreto PDT, Ferriani MGC, Santos MAM, Neto DL. Conduta de acadêmicos de uma universidade da região amazônica frente ao bullying. *Enfermagem em Foco*. 2012;3(3):114-8.
- Thomas SP, Burk R. Junior nursing students' experiences of vertical violence during clinical rotations. *Nurs Outlook*. 2009;57(4):226-31.
- Ribeiro, ML. A afetividade na relação educativa. *Estud. psicol.* 2010;27(3):403-12.
- Kienen N, Botome SP. As relações entre controle sobre o trabalho e condições de saúde de alunos universitários. *Interação em Psicologia*. 2003;7(2):11-22.
- Minayo MCS. O desafio do conhecimento: pesquisa qualitativa em saúde. 8th ed. São Paulo: Hucitec; 2010.
- Fontanella BJB, Ricas J, Turato ER. Amostragem por saturação em pesquisas qualitativas em saúde. *Cad. Saúde Pública*. 2008;24(1):17-27.
- Bardin L. Análise de Conteúdo. Lisboa: Edições 70; 2004.
- Costa SM, Dias OV, Dias ACA, Souza TR, Canela JR. Trote universitário: diversão ou constrangimento entre acadêmicos da saúde? *Rev bioét.* 2013;21(2):350-8.
- James A, Chapman Y. Preceptors and patients - the power of two: nursing student experiences on their first acute clinical placement. *Contemp Nurse*. 2010;34(1):34-47.
- Iftikhar R, Tawfiq R, Barabie S. Interns' perceived abuse during their undergraduate training at King Abdul Aziz University. *Adv Med Educ Pract* 2014;5:159-66.
- Cruz GV, Pereira WR. Different configurations of violence in pedagogical relationships between teachers and students of higher education. *Rev Bras Enferm*. 2013;66(2):241-50.
- Ferro JP, Araújo EL. Algumas reflexões sobre o fenômeno da violência escolar. *Interfaces da educ.* 2010;1(2):68-78.
- Cooper JRM, Walker J, Askew R, Robinson JC, McNair M. Students' perceptions of bullying behaviours by nursing faculty. *Issues in Educational Research*. 2011;21(1):1-21.
- Paredes, OL, Sanabria-Ferrand PA, González-Quevedo LA, Rehalpe SPM. "Bullying" en las facultades de medicina colombianas, mito o realidad. *Revista Med*. 2010;18(2):161-72.
- Fnaiss N, Soobiah C, Chen MH, Lillie E, Perrier L, Tashkhandi M, et al. Harassment and discrimination in medical training: a systematic review and meta-analysis. *Acad Med*. 2014;89(5):817-27.
- Soler VM, Meneguesso BM, Santos CEJ, Felice KZ. Fenômeno bullying em instituição de ensino superior. *CuidArte Enfermagem*. 2009;3(1):11-8.
- Zayed M, Ahmed D, Halawa EF. Pattern and predictors of interpersonal violence among adolescent female students in Egypt. *J Community Health*. [Internet]. 2014 [acesso em: 27 jun 2014];39:1-7. Disponível em: <http://link.springer.com/article/10.1007/s10900-014-9855-5>.
- Caran VCS, Secco IAO, Barbosa DA, Robazzi MLCC. Assédio moral entre docentes de instituição pública de ensino superior do Brasil. *Acta Paul Enferm*. 2010;23(6):737-44.
- Beckmann CA, Cannella BL, Wantland D. Faculty perception of bullying in schools of nursing. *J Prof Nurs*. 2013;29:287-294.
- DalPezzo NK, Jett KT. Nursing faculty: a vulnerable population. *J Nurs Educ*. 2010;49(3):132-6.
- Silva VLS, Chiquito NC, Andrade RAPO, Brito MFP, Camelo SHH. Fatores de estresse no último ano do curso de graduação em enfermagem: percepção dos estudantes. *Rev. enferm. UERJ*. 2011;19(1):121-6.

Received: 03/08/2013.

Accepted: 06/05/2014.

Published: 03/31/2015.