REVIEW ARTICLE

Global Trends in Bullying among Nursing Students: Implications for Primary Care Practice (2006-2025)

Iyus Yosep[1*], Rohman Hikmat[2], Ai Mardhiyah[3] and Tuti Pahria[4]

[1]*Department of Mental Health, Faculty of Nursing, Universitas Padjadjaran, Sumedang, Indonesia*
[2]*Faculty of Nursing, Prince of Songkla University, Songkhla, Thailand*
[3]*Department of Pediatric Nursing, Faculty of Nursing, Universitas Padjadjaran, Sumedang, Indonesia*
[4]*Department of Medical-Surgical Nursing, Faculty of Nursing, Universitas Padjadjaran, Sumedang, Indonesia*

Abstract

Bullying among nursing students is a global issue that happens in hospitals. This issue can make serious impacts on mental health, learning motivation, and job readiness. The prior knowledge is incompletely mapped, making it difficult to obtain a comprehensive overview of the research and to determine what is already known about these issues. This study aims to map research themes and research development on bullying in nursing students in a hospital. This study used a bibliometric analysis design. We used the Scopus database to identify articles published between 2006 and 2025, restricting inclusion to English-language articles. The analysis used VOSviewer software to map keyword co-occurrence networks, overlay maps, and density maps. Data was analyzed descriptively to map previous research. Based on the 59 articles analyzed, there are fluctuating patterns in the publication period, peaking in 2018, declining in 2019, and increasing since 2024. The dominant document type was journal articles (78.0%), with most of the articles in the nursing field (57.8%) leading the field. Based on VOSviewer analysis, we identified four themes: workplace violence and its impacts; prevalence and forms of violence; perceptions and work readiness; and methodological bridges through clinical practice experiences and conflict management styles. The overlay map shows a shift from descriptive studies to strategies to reduce these problems. The density map highlighted the key hotspots in this bibliometric study, including nursing students, bullying, clinical experiences, and workplace violence. Research on bullying among nursing students remains concentrated in high-income countries, with thematic trends moving from prevalence mapping toward practical and professional transition strategies. These findings suggest the need for greater standardization of terminology, more transparent reporting, stronger cross-regional collaboration, and the development of intervention-based studies to support safer clinical learning environments.

Keywords: *Bullying, hospital, nursing education, nursing students, violence.*

INTRODUCTION

Nursing students are future nurses who will contribute directly to improving the quality of healthcare services [1]. Their education takes place not only in the classroom but also in the hospital, where they gain experience in clinical practice [2]. Practice in hospitals is high-complexity, high-demand, and diverse in social dynamics [3]. Academic pressure, clinical workload, and work pressure can lead to mental health problems among nursing students, which can impact their readiness to become nurses [4].

During clinical hospital practice, nursing students are one of the vulnerable groups who can be bullied. Previous research shows that senior health workers have a power relationship that gives rise to bullying among students who practice [5, 6]. Various forms of bullying, including verbal, psychological, and social, such as verbal comments and intimidating nonverbal behavior, social exclusion, and personal and professional harassment [7]. There is also an issue with the workload: nursing students are being asked to do tasks that are not their responsibility. This causes seniors to feel that they have more experience than students; students are at the lowest level compared to their supervisors, senior nurses, and other healthcare professionals [8]. This situation creates a power dynamic and makes it difficult for students to reject or combat the bullying [9].

Nursing students who have bullying experience can develop mental health problems. One major impact is reducing psychological well-being, such as stress, anxiety, depression, and burnout [10]. Besides reducing well-being and quality of life, bullying can also prevent nursing students from fighting academic and clinical experiences [11]. Furthermore, experiences of bullying among nursing students can reduce motivation, lower self-confidence, and hinder the development of interpersonal skills, which are important for nursing professionals [7].

The impact of bullying can also affect academic performance and the quality of nursing students. The victim of bullying among nursing students is faced with suboptimal clinical performance, mastering practical skills, and facing obstacles in applying theoretical knowledge in practice [12]. This impact can degrade the quality of patient care because students lose focus and confidence in their clinical roles [13]. Furthermore, these problems can make nursing students feel unsafe and cause them to resign from nursing [7].

***** *Corresponding author: Iyus Yosep, Department of Mental Health, Faculty of Nursing, Universitas Padjadjaran, Sumedang, Indonesia, Email: iyus.yosep@unpad.ac.id*
Received: January 14, 2026; Revised: March 18, 2026; Accepted: April 03, 2026
DOI: https://doi.org/10.37184/lnjpc.2707-3521.8.50

Previous studies on bullying in nursing have focused primarily on professional nurses who work in hospitals [14, 15]. While some studies focus solely on the experience of nursing students, using qualitative methods [16, 17]. These limitations make the lack of knowledge about bullying among nursing students in hospitals fragmented and incomplete. Based on this problem, we need to map global knowledge on this phenomenon to identify new directions for future research and strategies for handling these problems. Bibliometric analysis is appropriate for addressing the research gap on bullying among nursing students in hospitals. This method can map publication trends, identify networks of contributing authors, institutions, and countries, and uncover the most dominant research keywords. Accordingly, this study addressed the following research question: What are the global publication trends, thematic clusters, and research developments related to bullying among nursing students in hospital settings during 2006-2025? This study aims to map research themes and research development on bullying in nursing students in a hospital.

MATERIALS AND METHODS

Design

This study used bibliometric analysis to examine research trends on bullying among nursing students in hospitals. Bibliometric analysis is a quantitative approach used to evaluate scientific literature by identifying publication patterns, citations, author networks, and the interconnectedness of concepts through keywords. This approach can map the structure of knowledge, identify key themes, and analyze trends from authors, institutions, and countries [18].

Data Sources and Search Strategy

The database for finding reports is Scopus (Elsevier) because it provides extensive coverage of peer-reviewed publications and is compatible with the analyzed software, VOSviewer. The search period was limited to 2006 - 2025 (the last 20 years).

The search strategy uses the following strings: ((TITLE-ABS-KEY (“Hospital”) OR TITLE-ABS-KEY (“Public hospital”) OR TITLE-ABS-KEY (“Private hospital”) OR TITLE-ABS-KEY (“Clinic”))) AND ((TITLE-ABS-KEY (“Nursing students”) OR TITLE-ABS-KEY (“Pupil Nurse”) OR TITLE-ABS-KEY (“Professional nursing students”))) AND ((TITLE-ABS-KEY (“Bullying”) OR TITLE-ABS-KEY (“Aggression”) OR TITLE-ABS-KEY (“Cyberbullying”) OR TITLE-ABS-KEY (“Harassment”))). Only articles published in English were included in the analysis.

Inclusion and Exclusion Criteria

Inclusion criteria for this study are based on the Population, Concept, Context (PCC) framework:

Population: Nursing students.
Concept : Bullying and related forms of behavior.
Context : The hospital clinical environment is where nursing students practice.

The exclusion criteria were documents published outside the 2006-2025 period, non-English publications, conference proceedings, book chapters, books, and book reviews. After selecting this paper and following the PCC and inclusion criteria, we identified 59 articles discussing bullying among nursing students in the Scopus database.

Data Extraction and Coding

The extracted data include title, author(s), year of publication, journal, institution, country of affiliation, and keywords, all obtained from the Scopus website. After that, we downloaded the Microsoft Excel file from the Scopus website.

Bibliometric and Network Analysis

The data analysis for this bibliometric analysis was drawn from publication trends, article growth, and research distribution, based on the most productive authors, institutions, countries, and journals. We used VOSviewer (version 1.6.18) to map keyword co-occurrence analysis. Descriptive statistics, including frequencies and percentages, were computed in Microsoft Excel for this study. The visualizations include publication trend maps, co-authorship networks, keyword co-occurrence clusters, and the geographic distribution of research, derived from an analysis of VOSviewer.

RESULTS

Of the 59 articles analyzed in the Scopus database, the corpus was dominated by journal articles (78.0%), followed by reviews (10.2%), letters (5.1%), notes (5.1%), and editorials (1.7%). Most were published in peer-reviewed journals, with a smaller proportion being short articles such as letters and notes. Across scientific fields, Nursing contributed 57.8%, followed by Social Sciences (24.1%) and Medicine (8.4%), reflecting the multidisciplinary character that links clinical practice, organizational dynamics, and psychosocial aspects. The annual publication trend shows relatively low production before 2016, a sharp spike in 2018 as a peak, a decline in 2019, then stability in 2021 to 2023, followed by a moderate increase again in 2024 to early 2025 (**Fig. 1**).

Note. Fig. **(1)** displays the number of publications from 2006 to 2025. Publication output is relatively low, as

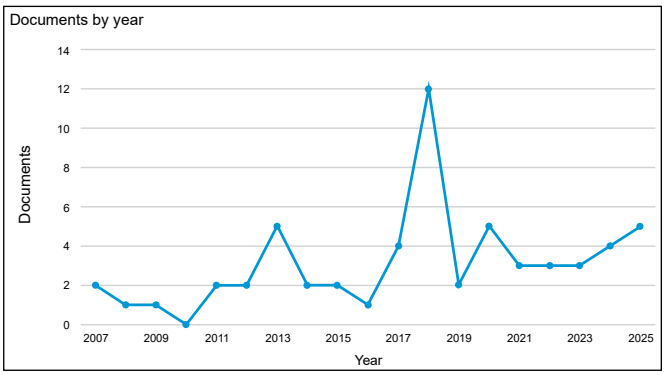


Fig. (1): Documents by year 2006 to 2025.

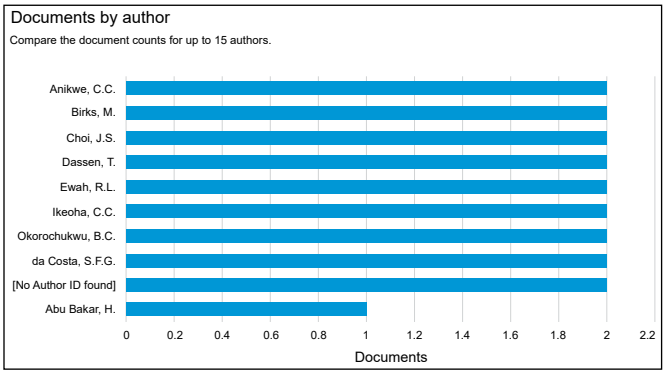


Fig. (2): Documents by author.

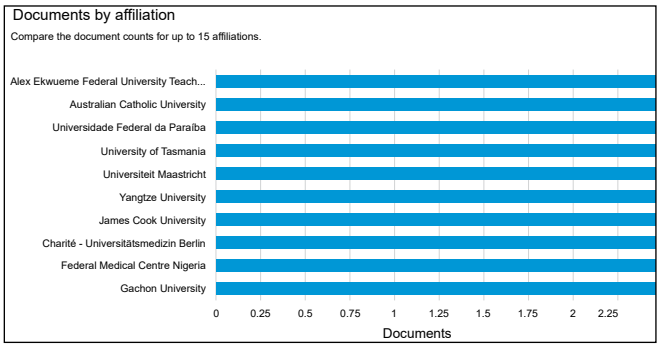


Fig. (3): Documents by affiliation.

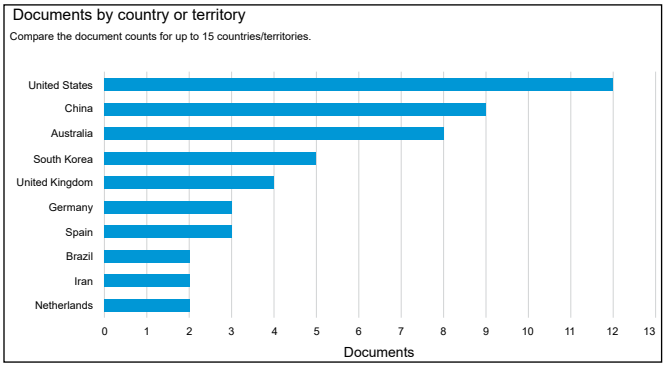


Fig. (4): Documents by country or territory.

it has found only 0-2 documents per year. The largest number of publications is in 2018 with 12 documents (the highest in all times).

Note. Fig. **(2)** shows the distribution of the number of publications per author. The higher number of publications on this issue is Anikwe CC, Birks M., Choi JS, Dassen T., Ewah RL, Ikeoha CC, Okorochukwu BC, and da Costa SFG, which have 2 publications each.

Note. Fig. **(3)** shows the ten affiliates with the highest number of publications on bullying among nursing students, with two publications. These affiliates are Alex Ekwueme Federal University Teaching Hospital, Australian Catholic University, Universidade Federal da Paraíba, University of Tasmania, Université Maastricht, Yangtze University, James Cook University, Charité-Universitätsmedizin Berlin, Federal Medical Center, Nigeria, and Gachon University. No domination of publication from single affiliations for this issue. These

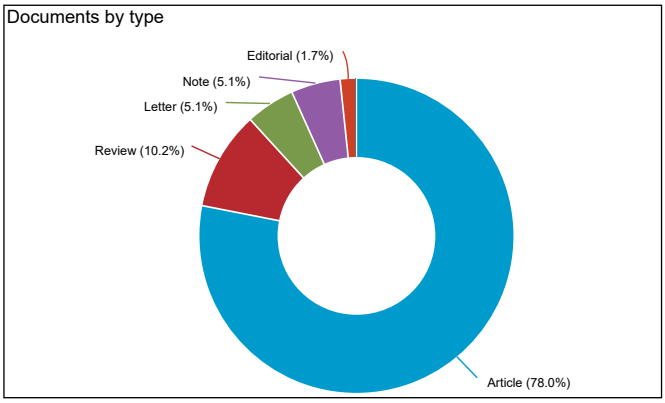


Fig. (5): Documents by type.

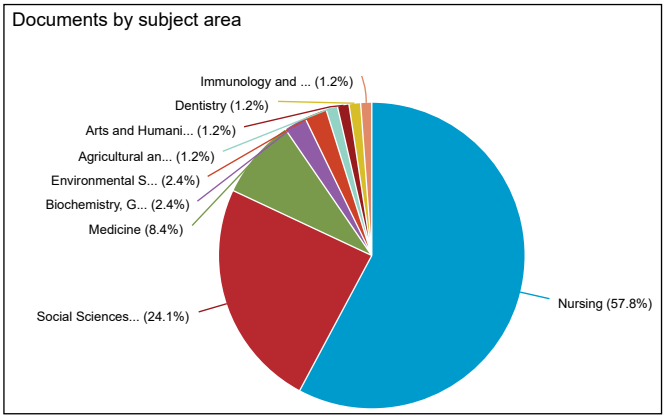


Fig. (6): Documents by subject area.

results show that all affiliations have the same concern about bullying among nursing students.

Note. Fig. **(4)** shows the distribution of publications by country. The top rank is held by the United States, with 12 publications, followed by China with 9 and Australia with 8. This pattern indicates a major concentration of research on bullying among nursing students in the United States, China, and Australia.

Note. Fig. **(5)** shows the distribution of publication types from the Scopus database. Articles or original research make up the largest share of publications, at 78.0 percent.

Note. Fig. **(6)** shows the distribution of documents by Scopus subject category. Because this study focuses on nursing students' populations, the field of Nursing is dominant, accounting for 57.8 percent.

Note. Fig. **(7)** shows a keyword co-occurrence network, with nursing students as the central node; this node relates to experience, bullying, education, clinical practice, and workplace bullying. This map shows four main clusters, as indicated by the node colors. The green cluster focuses on workplace violence and its impact; the keywords are "bullying," "workplace violence," "stress," "clinical practice," "new graduate nurse," and "impact." The blue cluster explains about prevalence and forms of violence, with keywords such as "violence," "sexual harassment," "victim," "workplace," and "prevalence,"

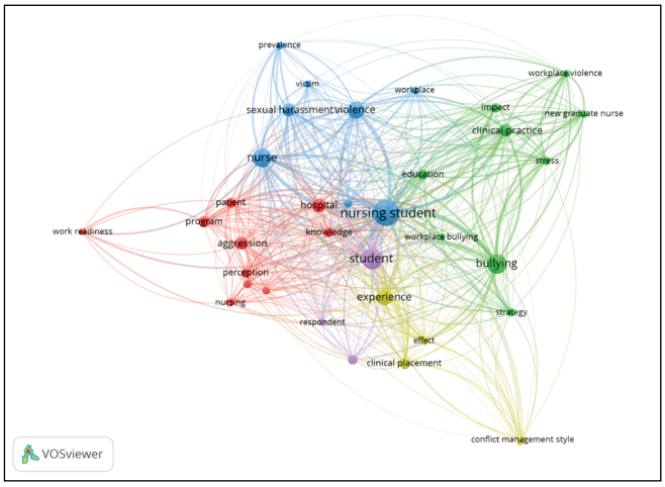


Fig. (7): VOSviewer keyword co-occurrence network.

leading to the "nurse" node. The red cluster focuses on the context of clinical education and perceptions related to bullying among nursing students, with keywords such as "aggression," "perception," "patient," "program," "nursing," and "work readiness." The yellow cluster makes the conceptual bridge between experience and clinical placement in hospitals clear, as seen in the keywords "effect," "strategy," and "workplace bullying." The smaller purple cluster, located in the area of respondents and clinical placement, serves as a methodological link.

Note. Fig. **(8)** shows an overlay map from VOSviewer showing the development of keywords from 2016 to 2022, with a color gradient from blue to yellow. In blue color, keywords are nurse, perception, aggression, and sexual harassment nodes, which show that research focuses on the prevalence of violence, victims' experiences, and nursing students' perceptions in hospitals. In the middle phase (around 2018-2020) (green color), there are clinical learning experiences, interactions in hospitals, and the integration of bullying issues into the nursing curriculum, hospital, clinical placement, and education. In green to yellow (2021-2022), the research focus was narrowed to bullying, workplace bullying, workplace violence, clinical practice, stress, and new graduate

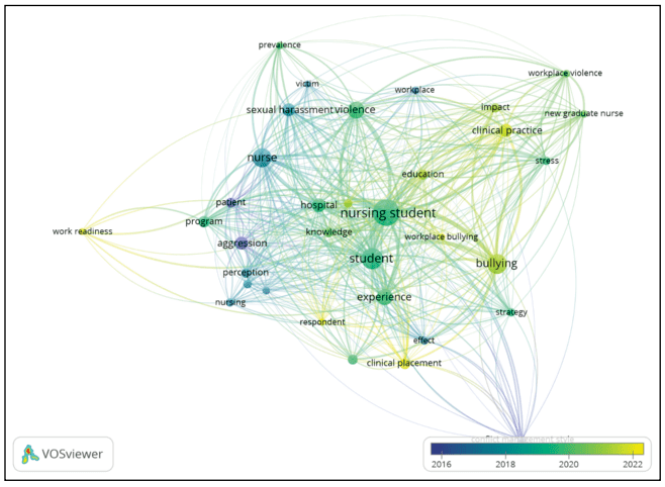


Fig. (8): VOSviewer, the overlay map.

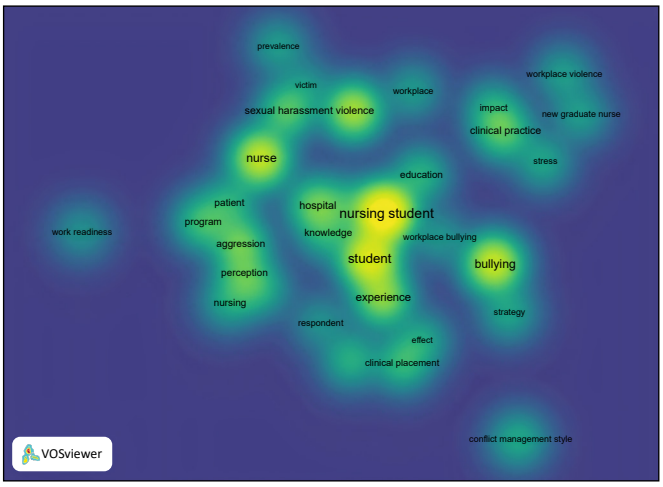


Fig. (9): Density visualization of keyword co-occurrence.

nurses. This indicates a shift in the research agenda from practical implications of bullying, the impact of bullying on stress in nursing students, and educational strategies to improve work readiness among nursing students.

Note. Fig. **(9)** shows a density map from VOSviewer, displaying several key hotspots marked in bright yellow, indicating keywords with the highest frequency and connectivity. The analysis shows that nursing students are linked to bullying, experience, hospital, and education. This confirms that the primary focus of the previous study is the context of bullying among nursing students and the experiences in clinical settings. The next hotspot from this analysis is the nursing area, which deals with violence, sexual harassment, and victimization. This area reflects the concern about the prevalence of bullying and violence among nursing students in hospitals.

DISCUSSION

The results section shows a fluctuating annual trend pattern with a prominent peak in 2018 then, a decline in 2019 and a rise again in 2024 to early 2025 (**Fig. 1**). The composition of document types shows the dominance of journal articles indicating a focus on reporting empirical findings (**Fig. 5**). In terms of the field of corpus science, it is led by Nursing followed by Social Sciences and Medicine which emphasizes the multidisciplinary character of the issue of bullying among nursing students in hospitals (**Fig. 6**). Author productivity and affiliation appear relatively even without a very dominant figure or institution, thus indicating a collaborative and distributed publication ecosystem across institutions (**Figs. 2** and **3**).

The conceptual mapping places nursing students and bullying as a core node that reflects power relations in the clinical hierarchy as well as role pressures during practice, in line with evidence that power imbalances between supervising clinical staff and students trigger intimidation and verbal abuse and impact students' well-being and learning performance [10]. This phenomenon

lies at the intersection of psychosocial, professional, and organizational issues, as seen in the interconnectedness of stress, clinical practice, and work readiness, as well as empirical evidence that exposure to bullying during clinical placement is associated with higher psychological stress, decreased self-esteem, and weaker professional intentions [19]. The practical implications extend beyond individual protection to include the design of psychologically safe learning environments through clinical leadership, inclusive preceptorship, and structured organizational interventions to prevent and manage bullying [20].

The workplace violence and its impact cluster positions workplace bullying, workplace violence, stress, impact, and new graduate nurses as a set of mutually reinforcing issues, consistent with evidence that exposure to violence during clinical placement and the transition to new nurses is associated with stress, decreased well-being, and the need for more systematic transition support. The prevalence and forms of violence cluster, centered on nurse violence, sexual harassment, and victimization, indicate that the nature of violence is multifaceted, from verbal to sexual, with variations in exposure documented across survey studies and mixed reviews of nursing students during clinical practice [21]. The perception and readiness cluster, which includes aggression perception, work readiness program, and patient, emphasizes the role of the clinical learning environment and curriculum in shaping work readiness and perceptions of power norms in the ward, which in turn are associated with psychological and academic outcomes [15, 22].

Overlay visualizations demonstrate the dynamics of research, from descriptive to experimental studies. trend which focuses on descriptive study because in 2021, the cases about student perceptions, forms of violence, and the prevalence of bullying exposure in practice settings are heavily [23, 24]. Because the prevalence is higher, the research focuses on how much bullying impacts nursing students' mental health and well-being and its impact on future nursing professionals [25, 26]. The high negative impact of bullying on nursing students has led researchers to focus on creating strategies to reduce this problem and on creating policies that can reduce this problem in clinical practice [27]. The strategic implications of this problem require a learning curriculum in the clinic that is comfortable for students and prepares graduates to work by strengthening conflict management and assertiveness skills to prevent bullying [28].

This study finds that it is necessary to integrate bullying prevention modules into clinical practice curricula and hospital policies, and to train lecturers, clinical instructors, and students in assertive communication and conflict management [29]. A culture of bullying prevention among nurses requires policies that support safe reporting, protection for victims and witnesses, and accessibility [30]. Institutions need to establish measurable performance indicators, such as incident reporting and resolution rates, safety and psychological safety culture scores, student engagement, retention, and clinical outcomes, and to regularly monitor them using standardized safety culture and incident reporting survey instruments [8, 31, 32].

Strengthening supervision and mentoring during clinical placements should be structured as a preceptorship with regular feedback, the setting of learning goals, and the creation of psychological safety within the team, so that students dare to report incidents and ask for help when facing uncivilized behavior [33]. Competencies in assertive communication, conflict resolution, and teamwork can be built through scenario-based training and standardized communication tools [34]. For students and preceptors, conflict management modules and adaptive coping strategies should be embedded in pre-placement and on-the-job sessions, with an emphasis on reflective practice, de-escalation techniques, and role framing to increase work readiness [35]. Mental health support should be available throughout the clinical rotation through regular screening for stress, anxiety, and related symptoms, clear referral pathways to campus or hospital counseling services, and follow-up monitoring [36].

This study shows that the distribution of publications in the United States, China, and Australia suggests a contextual bias that often arises when the funding ecosystem and research infrastructure are centered in high-income countries, so generalizability to other countries with different environments and cultures is limited unless there is an equitable partnership from the start [15]. The principle of equitable partnerships demands equal participation and benefits throughout the research cycle, as well as mechanisms to reduce power imbalances so that teams from middle- and low-income countries share the lead on topical agendas and publications [37]. To reduce the research capacity gap, a coordinated joint funding scheme across institutions is needed, with a focus on strengthening individual institutional and ecosystem capacities to improve research in low-income countries.

Research in hospital settings should prioritize testing the effectiveness and implementation of anti-bullying programs during clinical placements. Hospitals remain the main context of nursing students' exposure to bullying because of hierarchical relationships, high workload, and intense supervision patterns [38]. In this setting, anti-bullying strategies such as cognitive rehearsal training, structured preceptor preparation, and psychologically safe reporting systems should be evaluated for their impact on students' stress, self-confidence, clinical performance, and transition to professional roles [20]. Longitudinal studies are needed to assess whether these interventions improve patient safety, work readiness, and safety culture over time [39].

In primary care, the implications should be addressed more specifically rather than being merged with hospital-based practice. Primary care settings require nurses to demonstrate communication skills, continuity of care, teamwork, and strong therapeutic relationships with patients and families [40]. Bullying experiences during training may weaken these competencies by reducing confidence, increasing psychological distress, and limiting students' ability to engage effectively in collaborative and patient-centered care [41]. Therefore, future studies should examine how anti-bullying interventions can be adapted for community clinics, family health services, and other primary care environments, where the relational and communication demands differ from those in hospitals [27].

Future research should also focus on implementation across settings by identifying protective factors at the individual, team, and organizational levels. Conflict management training, supervisory support, and clear anti-bullying policies should be integrated into both hospital and primary care education pathways [42]. In addition, outcome measures should extend beyond prevalence and exposure to include psychological symptoms, interpersonal competence, professional confidence, teamwork, and service-related outcomes [43]. Referral pathways and support systems should also be developed in line with WHO guidance to ensure that anti-bullying interventions strengthen both student well-being and the quality of care delivered across healthcare settings [39].

Nurse educators and preceptors need to take functional leadership in designing, implementing, and evaluating bullying prevention programs integrated with clinical practice and unit policies to foster psychological safety and professional behavior [19]. Co-design with students through participatory workshops and multi-site pilots will result in contextualized, transferable interventions across services, while strengthening accountability and feedback mechanisms [44]. At the same time, organizational literacy should be enhanced through tiered training on digital competencies in conflict management and teamwork for all nursing staff, and through digital competency guidelines for nursing to facilitate communication, coordination, and responses to bullying incidents [45, 46].

CONCLUSION

A bibliometric study shows that research on bullying among nursing students in hospitals is mainly concentrated in the nursing and multidisciplinary fields. Publication trends fluctuated over time, with peaks followed by relatively stable phases and moderate increases in the most recent years. The keyword analysis indicates a shift in research from documenting bullying experiences in clinical practice to identifying strategies to reduce bullying among nursing students. Educational institutions and hospitals need to establish clear policies and supportive clinical learning environments to protect nursing students from bullying during practice. Bullying experiences during hospital-based clinical practice may also influence nursing students' future career choices and weaken competencies required in primary care, particularly communication skills, professional confidence, teamwork, and patient-centered care. Future research is recommended to focus on testing the effectiveness of anti-bullying interventions in preventing and reducing bullying in clinical settings. Action research and multi-site collaboration are also needed to develop practical solutions to reduce bullying among nursing students during clinical practice.

LIST OF ABBREVIATIONS

PCC : Population, Concept, Context

VOSviewer : Visualizing Scientific Landscapes Viewer

SUSSH : Stress, Uncertainty, and Social Support in Healthcare

BMC : BioMed Central

JBI : Joanna Briggs Institute

WHO : World Health Organization

ANA : American Nurse Association

FUNDING

None.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

ACKNOWLEDGEMENTS

The authors would like to thank Universitas Padjadjaran for providing academic support and the opportunity to conduct this study.

GENERATIVE AI AND AI-ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

The authors used an artificial intelligence (AI) tool to assist with translation during manuscript preparation. All final content was reviewed and approved by the authors.

REFERENCES

1. Hosseinnejad A, Rassouli M, Jahani S, Elahi N, Molavynejad S. Community health nursing in Iran: A review of challenges and solutions (An integrative review). Front Public Health 2022; 10: 899211.
DOI: https://doi.org/10.3389/fpubh.2022.899211
2. Atta MHR, Hammad HA-H, Elzohairy NW. The role of empathy in the relationship between emotional support and caring behavior towards patients among intern nursing students. BMC Nurs 2024; 23(1): 443.
DOI: https://doi.org/10.1186/s12912-024-02074-w
3. Nilsson J, Johansson E, Carlsson M, Florin J, Leksell J, Lepp M, *et al.* Disaster nursing: Self-reported competence of nursing students and registered nurses, with focus on their readiness to manage violence, serious events and disasters. Nurse Educ Pract 2016; 17: 102-8.
DOI: https://doi.org/10.1016/j.nepr.2015.09.012

4. Bouchoucha SL, Phillips NM, Lucas J, Kilpatrick M, Hutchinson A. An investigation into nursing students' application of infection prevention and control precautions. Nurse Educ Today 2021; 104: 104987.
DOI: https://doi.org/10.1016/j.nedt.2021.104987

5. Hikmat R, Suryani S, Yosep I, Hernawaty T, Widianti E, Rafiyah I, *et al.* School program integrated with nursing intervention for reducing bullying behavior among students: A narrative review. Environ Soc Psychol 2024; 9(3): 1-10.
DOI: https://doi.org/10.54517/esp.v9i3.2109

6. Yosep I, Mardhiyah A, Hazmi H, Hikmat R. Exploring nursing interventions in family-based approaches for preventing bullying among children and adolescents: A scoping review. BMC Nurs 2025; 24(1): 601.
DOI: https://doi.org/10.1186/s12912-025-03221-7

7. Chachula K, Ahmad N, Smith N, Henriquez N. Incivility in nursing education: sources of bullying and their impact on nursing and psychiatric nursing students. Qual Adv Nurs Educ 2022; 8: 11.
DOI: https://doi.org/10.17483/2368-6669.1331

8. Normohammadi A, Mohammadi E, Afsordeh N, Vasigh A, Mohammadi I, Nori L. Iranian nursing students' experiences of workplace violence. Shiraz E Med J 2021; 22(6): 1-9.
DOI: https://doi.org/10.5812/semj.105372

9. Abdelaziz EM, Abu-Snieneh HM. The impact of bullying on the mental health and academic achievement of nursing students. Perspect Psychiatr Care 2022; 58: 623-34.
DOI: https://doi.org/10.1111/ppc.12826

10. Wu W-C, Luu S, Luh D-L. Defending behaviors, bullying roles, and their associations with mental health in junior high school students: a population-based study. BMC Public Health 2016; 16(1): 1066.
DOI: https://doi.org/10.1186/s12889-016-3721-6

11. Minton C, Birks M. "You can't escape it": Bullying experiences of New Zealand nursing students on clinical placement. Nurse Educ Today 2019; 77: 12-7.
DOI: https://doi.org/10.1016/j.nedt.2019.03.002

12. Palaz S. Turkish nursing students' perceptions and experiences of bullying behavior in nursing education. J Nurs Educ Pract 2013; 3: 23-30.
DOI: http: //dx.doi.org/10.5430/jnep.v3n1p23

13. Qutishat MG, Kannekanti S. Bullying and harassment perceived by undergraduate nursing students in clinical settings, and its implication to academic strategies and interventions. J Health Sci Nurs 2019; 4: 56-62.
DOI: https://doi.org/10.53555/hsn.v4i9.3216

14. Fry A, Schmer C. Nursing faculty bullying: Concept analysis. J Prof Nurs 2021; 37(6): 1197-202.
DOI: https://doi.org/10.1016/j.profnurs.2021.11.001

15. Piri S, Janatolmakan M, Nouri MA, Khatony A. Exploring nursing students' experience of bullying and its consequences and coping strategies from a qualitative perspective. Sci Rep 2025; 15(1): 18068.
DOI: https://doi.org/10.1038/s41598-025-03437-2

16. Yun S, Kang J. Influencing factors and consequences of workplace bullying among nurses: A structural equation modeling. Asian Nurs Res 2018; 12(1): 26-33.
DOI: https://doi.org/10.1016/j.anr.2018.01.004

17. Pan L, Lei M, Zhang Z, Lei W. Bullying experience of undergraduate nurse students during clinical placement in Henan Province, China. Teach Learn Nurs 2024; 19(2): 139-44.
DOI: https://doi.org/10.1016/j.teln.2024.01.014

18. Öztürk O, Kocaman R, Kanbach DK. How to design bibliometric research: an overview and a framework proposal. Rev Manag Sci 2024; 18(11): 3333-61.
DOI: https://doi.org/10.1007/s11846-024-00738-0

19. Zhang J, Ye J, Zhang R, Liu J, Yanhua N, Wang J. High stress during clinical practicum placement is associated with bullying among nursing students: A mixed-method study. Nurse Educ Today 2024; 142: 106327.
DOI: https://doi.org/10.1016/j.nedt.2024.106327

20. Kumar S. Psychological safety: What it is, why teams need it, and how to make it flourish? Chest 2024; 165(4): 942-9.
DOI: https://doi.org/10.1016/j.chest.2023.11.016

21. Hallett N, Gayton A, Dickenson R, Franckel M, Dickens GL. Student nurses' experiences of workplace violence: A mixed methods systematic review and meta-analysis. Nurse Educ Today 2023; 128: 105845.
DOI: https://doi.org/10.1016/j.nedt.2023.105845

22. Fernández-Gutiérrez L, Mosteiro-Díaz MP, Borges E, Franco-Correia S. Bullying in nursing students: A cross-sectional study. Int J Environ Res Public Health 2024; 21(11): 1431.
DOI: https://doi.org/10.3390/ijerph21111431

23. Bowllan NM. Nursing students' experience of bullying: Prevalence, impact, and interventions. Nurse Educ 2015; 40: 194-8.
DOI: https://doi.org/10.1097/NNE.0000000000000146

24. Zhou J, Wang Y, Zeng Q, Zeng Y, Liu Q, Tan S, *et al.* Global prevalence of bullying and associated factors among nursing students during clinical practice: A systematic review and meta-analysis. Nurse Educ Today 2024; 133: 106090.
DOI: https://doi.org/10.1016/j.nedt.2023.106090

25. Şimşek N, Şahin D, Evli M. Internet Addiction, Cyberbullying, and Victimization Relationship in Adolescents: A Sample from Turkey. J Addict Nurs 2019; 30(3): 201-10.
DOI: https://doi.org/10.1097/JAN.0000000000000296

26. Hallett N, Wagstaff C, Barlow T. Nursing students' experiences of violence and aggression: A mixed-methods study. Nurse Educ Today 2021; 105: 105024.
DOI: https://doi.org/10.1016/j.nedt.2021.105024

27. Johnson JO, Anwagwa S, Kamara FY. The effects of bullying behaviours among nursing students in Sierra Leone: A qualitative exploratory study. BMC Nurs 2024; 23.
DOI: https://doi.org/10.1186/s12912-024-02623-3

28. Sharif-Nia H, Marôco J, Rahmatpour P, Allen KA, Kaveh O, Hoseinzadeh E. Bullying behaviors and intention to drop-out among nursing students: the mediation roles of sense of belonging and major satisfaction. BMC Nurs 2023; 22(1): 417.
DOI: https://doi.org/10.1186/s12912-023-01584-3

29. American Nurses Association. Position Statement on Workplace Violence. 2021.

30. World Health Organization. Framework guidelines for addressing workplace violence in the health sector. 2002.

31. Dos Santos LM. Stress, workplace bullying, and career decision of male nursing students: a qualitative inquiry of male undergraduate nursing students. J Men's Health 2022; 18: 1-10.
DOI: https://www.jomh.org/articles/10.31083/j.jomh1802052

32. Botha E, Gwin T, Purpora C. The effectiveness of mindfulness based programs in reducing stress experienced by nurses in adult hospital settings: A systematic review of quantitative evidence protocol. JBI Database Syst Rev Implement Rep 2015; 13(10): 21-9.
DOI: https://doi.org/10.11124/jbisrir-2015-2380

33. Hashim N, Aziz HAM, Amran MAA, Azmi ZN. Bullying among nursing students in UiTM Puncak Alam during clinical placement. Environ Proc J 2020; 5: 49-55.
DOI: https://doi.org/10.21834/ebpj.v5i15.2465

34. Kang J, Kim JI, Yun S. Effects of a cognitive rehearsal program on interpersonal relationships, workplace bullying, symptom experience, and turnover intention among nurses: A randomized controlled trial. J Korean Acad Nurs 2017; 47(5): 689-99.
DOI: https://doi.org/10.4040/jkan.2017.47.5.689

35. Ahmady S, Shahbazi S, Khajeali N. Comparing the effect of traditional and role-play training methods on nursing students' performance and satisfaction in the principles of patient education course. J Educ Health Promot 2021; 10: 146.
DOI: https://doi.org/10.4103/jehp.jehp_722_20. eCollection 2021

36. Reknes I, Pallesen S, Magerøy N, Moen BE, Bjorvatn B, Einarsen S. Exposure to bullying behaviors as a predictor of mental health problems among Norwegian nurses: Results from the prospective SUSSH-survey. Int J Nurs Stud 2014; 51(3): 479-87.
DOI: https://doi.org/10.1016/j.ijnurstu.2013.06.017

37. Ridenour M, Lanza M, Hendricks S, Hartley D, Rierdan J, Zeiss R, *et al.* Incidence and risk factors of workplace violence on psychiatric staff. Work 2014; 51(1): 1-10.
DOI: https://doi.org/10.3233/WOR-141894

38. Jeong Y, Jung HS, Baek EM. Effectiveness of cognitive rehearsal programs for the prevention of workplace bullying among hospital nurses: A systematic review and meta-analysis. BMC Public Health 2024; 24(1): 1568.
DOI: https://doi.org/10.1186/s12889-024-18969-x

39. World Health Organization. Helping Adolescents Thrive Toolkit. 2021.

40. Catling C, Donovan H, Phipps H, Dale S, Chang S. Group clinical supervision for midwives and burnout: A cluster randomized controlled trial. BMC Pregnancy Childbirth 2022; 22(1): 309.
DOI: https://doi.org/10.1186/s12884-022-04657-4

41. Le HTH, Tran N, Campbell MA. An Adaptation of the COPE intervention for adolescent bullying victimization improved mental and physical health symptoms. Int J Disabil Hum Dev 2020; 19(4): 197-204.
DOI: https://doi.org/10.1177/10783903221127687

42. Qutishat M. Underreporting bullying and harassment perceived by undergraduate nursing students: A descriptive correlation study. Int J Ment Heal Psychiatry 2019; 5: 1.
DOI: https://doi.org/10.4172/2471

43. Birks M, Harrison H, Zhao L, Wright H, Tie YC, Rathnayaka N. Nursing students' experience of bullying and/or harassment during clinical placement. Nurse Educ Today 2024; 136: 106151.
DOI: https://doi.org/10.1016/j.nedt.2024.106151

44. Anusiewicz CV. How does workplace bullying influence nurses' abilities to provide patient care? A nurse perspective. J Clin Nurs 2020; 29: 4148-60.
DOI: https://doi.org/10.1111/jocn.15443

45. Tuna R, Kahraman B. Workplace bullying: A qualitative study on experiences of Turkish nurse managers. J Nurs Manag 2019; 27(6): 1159-66.
DOI: https://doi.org/10.1111/jonm.12787

46. Yosep I, Hikmat R, Mardhiyah A, Hernawaty T. A scoping review of digital-based intervention for reducing risk of suicide among adults. J Multidiscip Healthc 2024; 17: 3545-56.
DOI: https://doi.org/10.2147/JMDH.S472264