

Measures to prevent ragging in medical colleges.

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ABSTRACT:

Objective: To explore measures to prevent ragging in medical colleges.

Methodology: This cross-sectional descriptive study was carried out from December 10, 2022, to February 10, 2023. A purposive sampling method was employed to select 100 hostel students and 30 faculty members from various medical colleges in Rawalpindi and Islamabad. Prior to the distribution of the semi-structured questionnaire, informed consent was obtained from all participants.

Results: Findings revealed that 42% of students and 18% of faculty endorsed the installation of awareness posters in medical colleges to highlight the risks associated with ragging. Furthermore, 23% of faculty and 84% of students expressed that establishing committees to combat ragging would be beneficial. Counselling services for senior students were advocated by 65% of faculty and 47% of students, while 53% of faculty and 38% of senior students suggested the creation of separate hostels for junior students.

Conclusion: Medical institutions should enforce strict policies to eradicate ragging, which includes establishing specialized committees and displaying informative posters. Additionally, offering separate accommodations for junior students may further reduce the occurrence of ragging. In addition to academic education, institutions ought to cultivate an atmosphere that promotes ethical principles, self-assurance, and character growth among their students.

Keywords: Behavior, Social Behavior, Harassment, Non-Sexual, Bullying, Ragging.

Introduction:

A cultured society reflects the educational attainment of its members. As we advance in civilization, ethical values become more deeply ingrained within our community. Ten years earlier, verbal harassment was employed as a form of hazing for newcomers in college.¹ In the past, ragging involved harmless pranks such as asking juniors to mimic someone or sing songs. However, over time, it has escalated into physical and psychological abuse, with instances of sexual harassment² becoming a severe concern. Unfortunately, many incidents go unnoticed or are ignored by medical college administrations.³ A common misconception is that ragging strengthens students and makes them more confident. However, medical students should prioritize fostering a culture of support and empathy.⁴ In India, anti-ragging movements have been established to protect newcomers from undue stress before they enter medical colleges.⁵ Organizations such as "Stop Ragging" and the "Society Against Violence in Education (SAVE)" have been actively working to address this issue.⁶

In contrast, Pakistan has shown limited concern about ragging. Victims of ragging often develop symptoms of depression, and some studies suggest that the existing patterns of ragging remain unchanged. Ragging-induced stress is

widely recognized, and the fear of experiencing it can create significant anxiety among first-year students. Recognizing the negative impact of ragging, this study aims to identify measures to eliminate this practice in medical colleges.

Objective:

To explore measures to prevent ragging in medical colleges.

Methodology:

The study was conducted between December 10, 2022, and February 10, 2023, in medical university hostels in Rawalpindi and Islamabad. A purposive sampling method was used. The study included two groups: 100 hostel students (both male and female) from the third to final year (ages 18-25) and 30 senior faculty members from different medical colleges (ages 45-60). Written informed consent was obtained from all participants. A semi-structured questionnaire was administered to gather data, which was analyzed using SPSS version 25.

Results:

Findings revealed that 42% of students and 18% of faculty endorsed the installation of awareness posters in medical colleges to highlight the risks associated with ragging.

Table 1: Response of Students and Faculty on Anti-Ragging Measures.

Measure	Students (n=100)	Faculty Members (n=30)
Placement of Posters	42%	18%
Establishment of Committees	84%	23%
Counselling for Seniors	65%	47%
Separate Hostels for Juniors	38%	53%

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Furthermore, 23% of faculty and 84% of students expressed that establishing committees to combat ragging would be beneficial. Counselling services for senior students were advocated by 65% of faculty and 47% of students, while 53% of faculty and 38% of senior students suggested the allocation of separate hostels for junior students.

Discussion:

Globally, various committees are working to eradicate ragging through measures such as expulsion and exam disqualification.⁷ The measures implemented include the revocation of admissions and prohibition from examinations. While the authorities consider the legal implications of addressing this act of ragging, the psychological consequences are of greater significance, as many promising careers are adversely affected by this behaviour.⁸

This study found that 42% of students favoured posters to raise awareness, similar to previous research on stress among medical students in Pakistan. A cross-sectional study with a smaller number of participants conducted among medical students in Pakistan found that those who faced negative life events and had a smaller social circle were linked to higher levels of depression following incidents of ragging.⁹ Research has indicated that male students are more frequently subjected to aggressive ragging. A study conducted in Pakistani medical schools reported that 52% of final-year students had experienced some form of harassment during their education.¹⁰ Originally, ragging was perceived as a means to foster camaraderie between junior and senior students, intended to create a friendly atmosphere within colleges. However, it has now devolved into acts of physical and sexual abuse that occur openly in major cities of Pakistan.¹¹

In other countries, universities have implemented monitoring systems to prevent ragging.¹² It is recommended that faculty members and the hostel warden closely monitor the behaviour of new students and their participation in academic activities, remaining vigilant to assess any signs of stress or anxiety among them. Additionally, continuous communication should be maintained with the parents of new students to gather pertinent information.¹³ These proactive measures aim to create a safe and supportive academic environment. In legal terms, ragging constitutes an act that causes or is likely to cause physical, psychological, or physiological injury, as well as feelings of apprehension, shame, or embarrassment to a student.¹⁴ A comprehensive study, characterized by substantial female involvement, determines that women are equally interested in finding a solution to this problem.¹⁵ In numerous institutions across Pakistan, the student body consists solely of females, and bullying remains a considerable concern.¹⁶

Counselling has been recognized as a vital intervention, with 65% of faculty members and students in this study supporting its implementation. Research in Nepal has shown that certain ethnic groups are disproportionately targeted in ragging incidents, emphasizing the need for cultural sensitivity in anti-ragging policies.¹⁷

In Sri Lanka, a pre-entry planning session was conducted two months prior to the arrival of new students. A brainstorming meeting involving student counselors was organized to evaluate the strengths and weaknesses of the existing anti-ragging measures, as well as to explore new strategies for inclusion in the revised anti-ragging plan.¹⁸ Key stakeholders, who are likely to significantly affect students' behavior and attitudes, have been identified. Forcing someone to pull their ears, subjecting them to public humil-

iation, physically beating or kicking them, stripping them of their clothing, exposing their private parts, or making them stand naked in cold weather is not ragging; it is an inhumane act that reflects a sick mentality. These actions constitute violations of human rights and harm the feelings of individuals.¹⁹

Current students showed that 53% of faculty and 38% of senior students consider the construction/allotment of separate hostels for junior students to be beneficial. The reported incidents highlight a failure on the part of medical institutions to foster ethical principles in their students.¹⁹ It is essential for the media and civil society to raise awareness about this critical issue. Instances have been noted where individuals who experienced sexual harassment sought revenge against their seniors, which further increases the likelihood of suicide.²⁰ Involving students in positive pursuits like sports could potentially lower the rates of ragging.

Ragging represents a type of psychological and physical abuse that can result in long-term effects on individuals. A person's mental health is intricately connected to their physical condition, and ragging erodes self-esteem and impedes character development. It is vital to view ragging as a serious problem instead of dismissing it as a harmless practice.

Conclusion:

Healthcare facilities must implement stringent regulations to eliminate ragging, which entails the formation of dedicated committees and the display of educational posters. Furthermore, providing separate hostel for junior students could further diminish the prevalence of ragging. Beyond academic instruction, institutions should foster an environment that encourages ethical values, confidence, and personal development among their students.

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