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ORIGINAL RESEARCH REPORTS

Academic Dishonesty Among Health Science Students In Chennai

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Abstract

Purpose: Academic dishonesty is not only a serious threat to academic integrity but also to the late professional life of a health science professional. Lack of professionalism leads to decreased treatment outcomes thereby leading deterioration of reputation.

Objective: To find out the prevailing academic dishonest behavior among health science students in Chennai.

Method: A cross sectional study was conducted among 200 health science students of both the genders in Chennai and their level of academic dishonesty was assessed using a self-administered questionnaire.

Results: The study results were analyzed in general and the dishonesty behavior was compared between both men and women using independent sample t test. Men tend to be highly deviant in academic behavior than women students ($p = 0.000$).

Conclusion: Students of health care profession are highly involved in the academic dishonest behavior despite the student ethics and academic integrity.

Keywords: Academic dishonesty, Health science, Malpractice, Professionalism

1. Introduction

Academic dishonesty is a serious threat to academic integrity and professional behavior of an individual and it is not confined to land borders and is pandemic. Higher incidence of dishonest academic behavior being recorded in health science students when compared to non – health science students, traces its reason to the higher levels of burden and responsibilities that is laid on the health care student which is no less than the stress faced by an health care professional [1–6].

By definition Academic dishonesty is a behavior that does not comply with stated assessment requirements and other institutional policies; when students behave in ways intended to gain undue benefit in relation to their assessment [7]. Any unethical act that the students do to get good grades in an assessment or evaluation process may be called as academic dishonesty [8].

Academic deviance and the deviant behavior prevails almost in all institutions, organizations and countries around the world [6,7]. There is a controversy on the influence of gender over the deviant behavior in the academics [2,9–11]. The deviant behavior ranges from completing assignments with the notes of others, helping friends in exam, forging a sign to plagiarism [6,12,13].

Key character expected from an individual in any field is professionalism and its importance is far higher in the field of health sciences as health professionals are going to deal with human beings [14,15]. To be a professional in the field of medical practice one should not only master in knowledge and skills but also be adherent to the ethical norms and values [14].

Being professional is a key factor in any profession because professionalism is positively related with the patient satisfaction and the outcome of the treatment procedure, thereby it increases the reputation of the practitioner [14]. One primary

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responsibility of the college education is to lay a strong foundation to the professional behavior of the student [16]. Professionalism among students has to be inculcated by the university and their professors. Academic integrity and honest educational behavior especially during bachelor degree is directly related to the work place professionalism [17]. This makes the sense why ethical behavior and following of ethical norms as a student is more important [2,14].

These makes it important to know about the prevalence of academic dishonesty among health science students especially in undergraduate program [4] as it lies the strong foundation on his professional life and his reputation as a professional [9,16].

There are several studies conducted across the world but studies in India regarding this issue are sparse. To correct the defects in the academic integrity, it is essential to know the prevalence of deviance.

The main objective of the study is to find prevalence of academic dishonesty among health science students in Chennai. And the study also aims to find out gender variation in engagement of dishonest behavior.

2. Methodology

2.1. Overview

It was a cross sectional observational study to find out the academic dishonesty among health science students in Chennai.

2.2. Participants

Based on selection criteria around 200 students were selected based on prospective sampling method and explained in detail about the need and the requirements of the study and the students those who were willing to take part were included.

200 undergraduate students of both the sexes belonging to various disciplines of health sciences in Chennai including Allopathy, Homeopathy, Siddha, Ayurvedha, Nursing, Physiotherapy, Occupational therapy, Imaging technology, Lab technology, Clinical nutrition, Microbiology and Renal dialysis voluntarily participated in the study. 90 male students and 110 female students of age group between 18 and 25 years were participated in the study.

2.3. Materials and procedure

A self-administered questionnaire was used in this study. The questionnaire consisted of 16

scenarios that were related to the academic dishonesty. It was a self-reported closed ended questionnaire where the students were asked to rate themselves to the scenarios given. The questionnaire was circulated directly to the participants and filled with prior consent of the subjects. The scoring was based on five-point likert scale. The answers ranged from strongly agree (5) to strongly disagree (1).

2.4. Statistical analysis

The data collected were analyzed using SPSS software. Analyzes were carried out on the responses from 200 fully completed surveys.

3. Results

The study results were analyzed in general and the dishonesty behavior was compared between both men and women. According to [Table 1](#) the study result shows that students agreed that they copied from notes (2.48), had written some notes (2.43) and mnemonics (2.42) in hand. Students also reported copying from neighbour's answer without (2.52) and with permission (3.53).

On enquiring about class works and assignment submission, majority of the students (3.82) borrows the assignment from their peers but does not copy it directly. A few group of students copies peers assignment without their knowledge (2.42) whereas few copies with their permission (3.46) On the other side majority of the students received assignments from seniors (3.36) and provided to their juniors (3.28). Students were also found to be reported on copying from internet (3.22) whereas others copied from internet but does not involve in mentioning citations of the journal from which they are copying (3.27).

Regarding practical exams maximum number of students were found to be involved in providing (3.53) and receiving details (3.66) about the exams. On analyzing the academic behavior and performance students reported that they do not take active participation in group activities (2.84) and also presents false medical reasons to gain an extension (2.80). [Figure 1](#) shows the mean values of self-reported academic dishonesty behavior.

[Table 2](#) shows the comparison of academic dishonesty behavior between men and women. According to the study results, male students reported high dishonest behavior than female students in all aspects including copying notes, copying or providing assignments, sharing the practical exam details and also in academic performances

Table 1. Self-reported academic dishonest behaviour among health science students.

Scenario	N	Minimum	Maximum	Mean	S.D
1. Copies from notes in exam.	200	1	5	2.48	1.470
2. writes some notes in hand	200	1	5	2.43	1.409
3. Writes mnemonics in hand.	200	1	5	2.42	1.451
4. Copies from neighbour's answer WITHOUT their permission.	200	1	5	2.52	1.439
5. Copies peer's answer WITH permission.	200	1	5	3.23	1.479
6. Borrows an assignment from peer but does not copy it directly.	200	1	5	3.82	1.235
7. Copies peers assignment without their knowledge.	200	1	5	2.42	1.365
8. Copies peers assignment with permission.	200	1	5	3.46	1.239
9. Provides details about the practical exam.	200	1	5	3.53	1.307
10. Receives details about the practical exams.	200	1	5	3.66	1.237
11. Copies from internet	200	1	5	3.22	1.292
12. Copies from journals and does not refer them	200	1	5	3.27	1.219
13. Receive assignments from seniors	200	1	5	3.36	1.397
14. Provides assignments to juniors	200	1	5	3.28	1.453
15. Does not actively take part in group activity.	200	1	5	2.84	1.276
16. Presents false medical reasons to gain an extension.	200	1	5	2.80	1.396

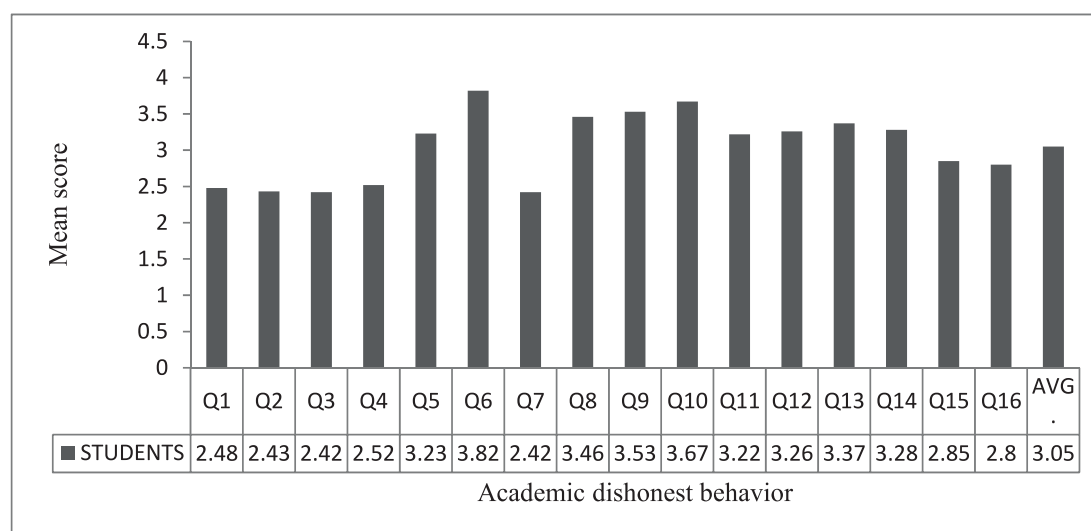


Fig. 1. Self-reported academic dishonest behavior among health science students.

Table 2. Comparison between the self-reported dishonest behaviour between male and female students.

Scenario	Gender	N	Mean	SD	Mean difference	t value	Sig.
1. Copies from notes in exam.	Male	90	2.80	1.52	0.58	2.83	.005
	Female	110	2.22	1.38			
2. Writes some notes in hand.	Male	90	2.71	1.42	0.51	2.59	.010
	Female	110	2.20	1.36			
3. Writes mnemonics in hand.	Male	90	2.70	1.52	0.51	2.50	.013
	Female	110	2.19	1.36			
4. Copies from neighbour's answer WITHOUT their permission.	Male	90	2.89	1.52	0.67	3.36	.001
	Female	110	2.22	1.30			
5. Copies peer's answer WITH permission.	Male	90	3.72	1.33	0.89	4.45	.000
	Female	110	2.83	1.48			
6. Borrows an assignment from peer but does not copy it directly.	Male	90	4.09	1.14	0.49	2.83	.005
	Female	110	3.60	1.27			
7. Copies peers assignment without their knowledge.	Male	90	2.72	1.46	0.55	2.88	.004
	Female	110	2.17	1.23			
8. Copies peers assignment with permission.	Male	90	3.74	1.24	0.53	3.05	.003
	Female	110	3.22	1.19			
9. Provides details about the practical exam.	Male	90	3.86	1.24	0.60	3.32	.001
	Female	110	3.25	1.30			

(continued on next page)

Table 2. (continued)

Scenario	Gender	N	Mean	SD	Mean difference	t value	Sig.
10. Receives details about the practical exams.	Male	90	3.90	1.20	0.43	2.46	.015
	Female	110	3.47	1.24			
11. Copies from internet.	Male	90	3.36	1.31	0.25	1.35	.180
	Female	110	3.11	1.27			
12. Copies from journals and does not refer them.	Male	90	3.57	1.23	0.53	3.13	.002
	Female	110	3.04	1.16			
13. Receives assignment from seniors.	Male	90	3.64	1.33	0.51	2.60	.010
	Female	110	3.14	1.42			
14. Provides assignments to juniors.	Male	90	3.42	1.51	0.26	1.25	.211
	Female	110	3.16	1.40			
15. Does not actively take part in group activity.	Male	90	3.17	1.29	0.58	3.30	.001
	Female	110	2.58	1.21			
16. Presents false medical reasons to gain an extension.	Male	90	3.13	1.45	0.61	3.12	.002
	Female	110	2.53	1.29			
Overall	Male	90	53.42	11.67	8.49	5.13	.000
	Female	110	44.93	11.65			

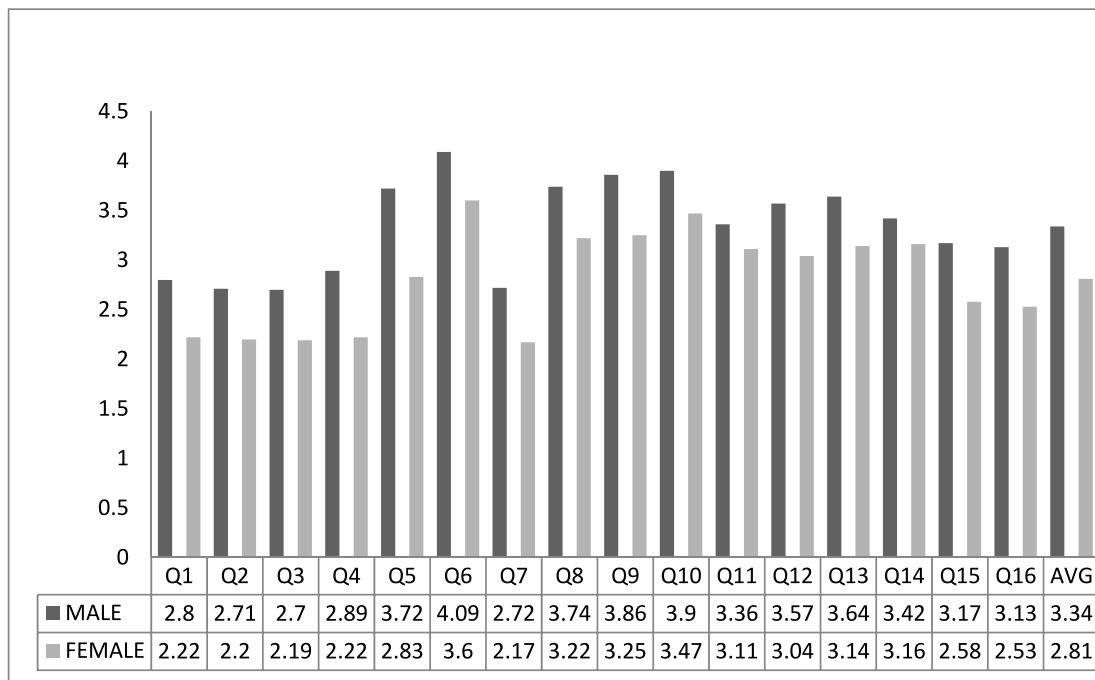


Fig. 2. Comparison between the self-reported dishonest behaviour between male and female students.

such as group activities and also in providing false medical reasons.

Hence the overall dishonesty behavior was found to be higher in male students (11.67) than female (11.65) but the overall difference was found only to be a bit higher than in the respective behaviors. Figure 2 shows the comparison of dishonesty behavior between male and female students.

4. Discussion

Academic dishonesty is a common problem which is more prevalent among college students. There are several internal and external factors that contribute

to the academic deviance of the students where stress tops the list [10]. Stress from family, friends and the overwhelming academic burden predisposes the students to cheat [2,6]. Most students cheat just because their friend circle does and they have never been caught red handed or have a low risk of being found cheating [6,10]. The study results shows that students agreed that they copied from notes (2.48), had written some notes (2.43) and mnemonics (2.42) in hand.

The attitude of the society gives importance to the success than the way they choose and follow to achieve it, Students cheat for good grades [6,7] so they can be placed in a job as soon as they graduate

[18]. Some students cheat because of indifference, time demand and they also feel the work given or the syllabus designed has nothing to do with their profession [18,19]. Lidia Baren (2020) reported that less attention paid in analyzing students personal characteristics and failure of faculties to take formal action against the dishonest students is directly associated with a tendency to cheat.

Students prefer performance learning to master learning to obtain good grades which makes them to opt for malpractice [19]. There is also a negative correlation between the attendance and the academic dishonesty. On analyzing the academic behavior and performance students reported that they does not take active participation in group activities (2.84) and also presents false medical reasons to gain an extension (2.80).

The increasing act of the deviant behavior traces its reason as the increased and wide spread use of net which probably their staffs are not exposed to [2,18]. As students gets easy access to all the information they want to know, they become lazy and becomes more prone for deviance [5]. Students were also found to be reported on copying from internet (3.22) whereas others copied from internet but does not involve in mentioning citations of the journal from which they are copying (3.27) Bernard E. Whitley Jr (1998) reported that admitted cheaters were found to be less intelligent than their non-cheating colleagues [26].

Decreased self-confidence, self-control and increased opportunities to cheat will lead to increased academic misconduct [3]. The other major factor that is related to this behavior is that the institution is not strict enough and the punishment is not severe [5,20]. Students do not complain about others if they are found guilty because of fear and friendship [6,7]. Studies suggest that groupism may reduce the level of competition and can result in a negative impact on cheating as it requires cooperation within the group. On the contrary students who are not involved in groupism are likely to do cheating [27].

Stronger reasons to cheat will make student more deviant. Students desperately desire for success even if it as at the cost of ethical violation [21]. Perceived opportunity may also have direct or indirect influence on cheating behavior [27]. Lenient staffs, small classrooms, competitive nature of the world, and less awareness or acceptance of academic ethics are the other factors accounting for academic deviance [5,18]. Regarding practical exams, maximum number of students were found to be involved in providing (3.53) and receiving details (3.66) about the exams. If the students did not feel guilty about such behaviors then they are more

likely to commit academic dishonesty. This result was also concluded in another study conducted by Wahyu Maulana Firdaus (2018).

Sensation seeking is also a driving factor for cheating [22]. This deviant behavior of a student implies that there is lack of trust and understanding of the classes conducted in the university. There is a lapse in teaching the moral values and ethical norms of academic integrity to the students [1,6,19]. These reason makes them to cheat and they think cheating is wrong but a normal behavior [4,6,10,25]. These results could have been due to the increasing pressure on students towards the course progression in the process of aiming for good grades [4,10].

The more the individual is dishonest in his education, the higher the chances he will be professionally dishonest and will lack patience [9]. When a student is unethical in his college life, there are more chances that he will be unethical in his profession too [4,18]. There is strong positive correlation between academic dishonesty and professional dishonesty [6,9,11,15]. Manar L. Hosny (2014) concluded that students tend to pay someone to do the homework on their behalf which must be considered as a serious offence and should be punished severely by the faculty members as well as the administration. This study also suggested that increasing the awareness of plagiarism and its consequences among students is quite essential [8].

Academic dishonesty will be a challenge for the faculties to assess the exact academic status of students. The reliability of the graduated student becomes inconsistent [23,24]. The qualification will be without sound knowledge [6]. Sarah C Rennie (2003) suggested that the medical profession must focus on the development of strategies to encourage attitude and behavior of students and it must play a key role in preventing dishonesty behavior among students [4]. Bhaktiar Naghdipour (2013) concluded that temptation for cheating will always be present around students and it is considered as a responsibility of faculty members to fight against it by improving the standard and quality of teaching [23].

The results of our study state that, female students are less involved in academic dishonest practices. This is probably because as explained by Hope Witmer et al., (2018) that female counter part show little tolerance towards dishonesty. It depicts that female students are moral and possess a higher level of self-control. This could be owing to the social stigma attached towards female than male when being punished for dishonest behavior.

This makes clear that women are more morally aligned in their student life, which makes them more responsible in the professional practice

compared to men. Thus to prevent this inequality in gender based academic dishonesty, a faculty should be more focused on the gender that is prone for deviance, thus it helps in providing an equal practice and build educational integrity breaking these stereotypes [28,29].

Students should be taught about academic integrity and professionalism and its implications in their career. The higher prevalence of academic dishonesty may be also due to the lapse in ethical teachings and underestimating the consequences of academic dishonesty.

The above mentioned scores and results are based on the self-rated answers which may not reflect their actual behavior in academics which becomes a major limitation of the study. The scores were not compared with their peer and social pressure or academic performance. Future studies should try to make a note on the academic performance, ethical knowledge, perception about academic integrity and dishonesty. Future studies must also concentrate on the pressure and the academic deviance amongst other disciplines and compare it with health science students to know to what extent the health sector is infested with deviant behaviors.

5. Conclusion

The result of this study confirms that the students of health care profession are highly involved in the academic dishonest behavior despite the student ethics and academic integrity that they are supposed to follow.

Ethical approval

Not applicable.

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Other disclosure

None.

Conflict of interest

Authors of the study have no conflicts of interest to disclose

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