Incivility in Nursing: From Raising Consciousness to Taking Action

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- I do not have any conflict of interest or any relevant relationships with any commercial interest to declare.
Objectives

- Define incivility
- Frame the concept of incivility in nursing
- Describe the magnitude of the problem
- Offer solutions

Operational Definition:

- Workplace incivility as defined by Andersson and Pearson (1999):
  Lower intensity offensive behavior, with overt or covert intent to harm the recipient and with disregard of established workplace standards for mutually respectful behavior.

- Uncivil behaviors are disrespectful and devalue the person targeted.

- The intentionality of harm may be less apparent in lower intensity incivility and is often unacknowledged by the perpetrator or the target.
Gallo (2012) has summarized incivility as consisting of:

- “disrespect for others, the inability or unwillingness to listen to others points of view, and seek common ground, and not appreciating relevance of social discourse (p. 62).”

Background

- Workplace incivility across the country from physical aggression to harassment is reported in the literature to be increasing.

- Incivility is distinguished from other forms of deviant behavior and is considered to be a serious problem with rising incidence.
Behaviors Associated with Incivility

- Condescending speech or attitudes (Kolanko et al., 2006)
- Bullying
- Challenging a colleague publically, students challenging professors during class (Clark & Springer, 2007)
- Texting or using computers for non-class or [meeting] purposes and inappropriate emails (Clark & Springer, 2007)

Behaviors (continued)

- Eye rolling
- Tardiness
- Lack of use of scholarly etiquette and “netiquette”
- Intentional exclusion of a colleague out of an activity
- Breech of confidence
- Interrupting the speaker
- Taking credit for another’s work
Magnitude of Problem

- 24.1% of nurses stated they were verbally abused either by a nurse colleague or manager (Luparell, 2011).
- In a recent national nursing faculty survey, 68% of participants reported that faculty-to-faculty incivility was a moderate to severe problem in their institution (Clark, 2013).

Magnitude of Problem (continued)

- Horizontal violence and bullying among colleagues, considered to be negative workplace behaviors, have been studied and linked to higher turnover rates among nurses in acute care settings (Spence-Laschinger et al. 2009, Hogh et al. 2011, Wilson et al. 2011).
- In hospital environments incivility has been associated with unsafe working conditions, poor quality of patient care, and increased medical costs (Clark et al., 2011).
Paradox

- A paradox exists as we think about incivility occurring within the context of nursing as a caring profession.

Problem/Phenomenon of Interest

- Research spans the past decade regarding nursing faculty-to-faculty, faculty to student, student to student, nurse administrator to nurse or faculty, and nurse to nurse incivility.

- Incivility in nursing education among colleagues is increasing and impacts on the entire organization.

- Nursing faculty shortage is a significant problem, research points to incivility as one cause for faculty to leave teaching.
**Historical Perspective**

- Nurses experiencing oppression came to the forefront with Susan Roberts (1983) sentinel article based on Freire’s (1970) Social Critical Theory dealing with the concept of oppression:


- Over the years the name for the behaviors associated with oppression may have changed from horizontal to lateral violence, from bullying to “mean girl games” (Heinrich, 2007) to incivility but the phenomenon continues.

- Incivility among nurses suggests the perpetuation of oppression.
Literature Review:

- Vertical incivility is common in nursing education between faculty and students.
- Incivility has several forms: vertical, top-down and bottom-up, and lateral
- Supports the relationship of power imbalances and incivility, the toxic nature of incivility and its impact on both the individual and the organization.
- Describes the presence and fluid nature of power in organizations.
- Fails to offer solid reasons for the perpetuation of incivility.
- Few studies offer concrete means to prevent and/or stop incivility.

Personal Experience with Incivility Research

- Study #1 completed with doctoral dissertation
- Study #2 co-collaborated with a University of Massachusetts Nursing Professor
Study #1: The Lived Experience of Incivility Between Nursing Faculty: A Heideggerian Hermeneutic Study

- The aim of the study was to reveal the meaning embedded in the everyday lived experience of incivility between nursing faculty members.

- The significance for nursing included the need for nursing faculty to acknowledge that the phenomenon exists, understand the meaning of the experience and to begin a serious dialogue in the community to address the problem of incivility between nursing faculty.

Methodology

- The study used a Heideggerian hermeneutic (interpretive) phenomenological approach to uncover the shared or common meaning of nursing faculty-to-faculty experiences of incivility that were embedded in participant consciousness.
Participant Selection

- Purposive (selective) sampling was used to select participants with stories that reflect the aim of the study which is having had an experience of incivility with another nursing faculty.

- Snowball (chain) sampling was used for convenience.

Inclusion Criteria:

- Having been a nursing faculty member in an associate, baccalaureate or masters degree nursing education program within the past five years.
- Having had at least one experience of incivility, as defined in this study, with another nursing faculty during that time frame.
Participants

- A total of ten (N=10) participants were recruited.
- 8 female and 2 male
- Participants resided and worked in the Northeast and Mid-Atlantic regions of United States (U.S.).

Method of Data Collection

- One in-depth semi-structured, open-ended interview was conducted either face-to-face, via Skype or telephone and was audiotaped.
Data Analysis

- Data analysis was done through an interpretive approach following a modified version of the process described by Diekelmann, Allen and Tanner (1989) and in Diekelmann and Diekelmann (2009).

- Process included a team approach of re-reading the narratives and taking notes to encourage visual emergence of “essences” within the individual transcripts and among all interviewees to reveal themes and constitutive patterns.

- Analysis followed a hermeneutic process with interpretation and reflection of the texts to reveal the embedded meaning of the lived experience.

Pattern and Major Themes

Incivility is a co-created event in a power filled environment

- Major Themes:
  - a) the unexpected nature- “where’s this coming from”
  - b) the wounding effects of incivility
  - c) difficulty reading the environment- workplace rules are unspoken or unclear
  - d) the depersonalized nature of communication in the workplace
Theme: “Incivility is a co-created event in a power filled environment”

Participants in this study:
- consciously chose to approach colleague with work related issue or concern.
- used a “helping” approach to issue or concern.
- lacked awareness that their approach to “help” was evocative and the catalyst to co-create incivility.
- conveyed the dysfunctional nature of the environment related to presence of unequal power gradients.
- lacked conscious awareness that they were concurrently experiencing power and powerlessness.

Theme: The Unexpected Nature—“where’s this coming from?”

- Barb stated: “It felt very uncomfortable, I wasn’t sure how to respond, it wasn’t something that, it wasn’t a manner that I was used to hearing from my peers or other faculty so I really wasn’t sure how to handle the situation.”
- The unexpected nature of the interaction left faculty frozen, speechless and unable to confront the uncivil peer.
Theme: The Wounding Effects of Incivility

- Leah recalled: “I was embarrassed to be yelled at like that in front of so many people, it’s not something that you usually experience as an adult and so it made me angry, it hurt, it was embarrassing, all of those things.”
- Humiliation felt during uncivil encounters created shame and a sense of vulnerability.

Theme: Difficulty Reading the Environment- Rules are Unspoken or Unclear

Paul conveyed that the instructor who was running the meeting said to him:
“It’s our understanding that you’re dropping the lowest quiz grade, that’s not policy…we’re supposed to maintain the policy, keep things the same…you should let us know when you’re changing the policy around.”

- He later hears at that meeting that the faculty had decided on that “policy” twelve years prior.
- Paul maintained that no one had shown him the policy yet he was responsible for maintaining it.
- He talked about a lot of policy that he considered being “phantom” or invisible to him.
Theme: The Depersonalized Nature of Uncivil Communication in the Workplace

- Examples of depersonalized verbal communication included: yelling and use of intimidating language to demean the faculty member, parent-child interactions, and inflammatory email being sent out to the entire faculty.
- The depersonalized nature of communication experienced by nursing faculty also had the potential for the participant to respond in a like manner.

John talked about becoming angry and inappropriate in response to the following communication:

“I am sitting there, she comes in, she screams, literally at the top of her lung “there’s a meeting now and you need to be in that nursing two meeting” and I said excuse me we’re in the middle of marking the exams for these students (with raised voice) “the meeting needs to be in there now, you need to be in there now, I told you you need to be in that meeting” and I said… I’ve had it with you need to do…you need to get the hell out of here, and I responded as inappropriately because I was angry…"
Summary

◆ Incivility is unexpected, has wounding effects, and there is depersonalized uncivil communication in the workplace. Participants had difficulty reading the environment with unclear or unspoken rules for workplace conduct.

◆ Incivility may have serious implications for nursing education: One motive that five participants (50%) in this study identified as a reason to leave academia was the incivility they experienced with colleagues.

Study #2  Barriers to Civil Academic Work Environments: Experiences of Academic Faculty Leaders
Dr. Anya Bostien Peters and Dr. Lynne King

• The aim of this research was to explore the experiences of academic nurse administrators in Schools of Nursing (SON) to gain an understanding of the experiences these administrators encountered while attempting to maintain a civil academic work environment (Peters, A. B. & King, L., 2016, Barriers Ahead of Print).
A Heideggerian hermeneutic phenomenological approach was used to uncover the experiences of nurse administrators in SONs.

Academic nurse administrators were in positions to address faculty concerns brought forward regarding faculty-to-faculty incivility.

Demographics

- The 11 participants were women
- Average age of 58.5 years
- Participants averaged 36.3 years of experience as nurses, with 18.5 of those years as nursing faculty.
- On average, participants had been in their current academic nurse administrator position for 6.9 years.
- Nursing programs varied from ASN to MSN
Findings

Four themes emerged that vividly depicted the participants’ interpretation of their lived experiences with managing faculty-to-faculty incivility:

- “imbalance of power”
- “ingrained culture”
- “lack of preparation and support”
- “instigator avoidance/exit when confronted.”

(Peters, A. B. & King, L., 2016, Barriers Ahead of Print).

Imbalance of Power

- In academia imbalance of power gradients is not a new phenomenon (tenure vs non-tenure).
- Tenured faculty or faculty with longevity at the institution was most frequently identified as the instigators of incivility.
- Faculty leaders believed that the power imparted on them based on their position or title was ineffective.
Ingrained Culture

- Incivility was an expectation within these particular institutions.
- Some administrators disclosed they were brought in to the institution to “fix” the problems related to incivility.

They described coming into an established nursing program where uncivil “behaviors had been tolerated for a long period of time” and how the previous nurse administrator “pitted faculty against each other, criticized people at meetings in front of each other; it was a pretty hostile environment that I came in to.” (Peters, A. B. & King, L., 2016, Barriers Ahead of Print).

Lack of Preparation

- Participants lamented the lack of instruction they received in their graduate programs to prepare them to oversee problems with incivility.
- Using traditional leadership skills to manage uncivil behaviors and faculty interactions was frequently ineffective.
- Attempting to deal with incivility is time consuming and takes the administrator away from the work of the nursing education program.
Instigator Avoidance/Exit When Confronted

- When challenged by authority, instigators of incivility left the institution via retirement, securing another position elsewhere, or dismissal. Administrators noted that it was difficult to dismiss the uncivil faculty member but admitted to being “ashamed that I didn’t do anything sooner; that’s what I regret the most. I should have done it a long time ago.”

Discussion

- Academic nurse administrators often lack understanding of the ingrained nature of incivility, the power, and the skills to consistently create positive change in the workplace culture.

- Allowing incivility to persist in academia also allows uncivil faculty to serve as role models for future nurses who will then carry these learned behaviors into the workplace.
Dissemination: Manuscript Accepted for Publication

Peters, A. B. & King, L. (2016). Barriers to civil academic work environments: Experiences of academic faculty leaders. *Nurse Educator. (Ahead of Print)*

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Solutions

- Nurses must take a personal inventory and ask: how do I participate in incivility in my workplace?
- Instances of incivility must be addressed as soon as they occur for best outcomes (LaSala, Wilson, Sprunk E, 2016).
- Nurse administrators and educators must be prepared with skills to prevent incivility and effective tools for early intervention (Gallo, 2012).
Solutions continued:

- Adopting and enforcing zero tolerance civility policies.
- Professional role modeling of civility and respect (Clark, 2014).
- Utilize the Clark Workplace Civility Index ® which allows self-reflection and assessment of one’s civility level (Clark, 2014).
- Staff and management co-creating norms of decorum for organizational functioning (Clark, 2014).

Solutions

- Stress and incivility are linked: nurses encounter change, complex care situations, inadequate staffing, etc. while at the same time expectations include providing safe and quality care (Clark, 2014)
- Institutions should support stress relief and management for nurses and encourage self-care (Clark, 2014).
Encouraging moral courage to speak up when confronted by an uncivil person.

Utilizing problem based learning scenarios (simulation) in nursing education to prepare student nurses to confront incivility in practice (Clark, Ahten, & Macy, 2012)

It is important to investigate civility in nursing workplaces where nurses or faculty report low levels of incivility; where nurses and faculty are thriving rather than merely surviving.

In order to co-create civility it is important to know how nurses and faculty have created a civil workplace environment.

Lastly... further research
New possibility:

- Nursing as a community will consistently act in a civil manner to promote a culture of caring: the basis of nursing practice.

In the words of Cynthia Clark (2014):

- “We have a responsibility to ourselves, each other, our patients, and the profession to ‘look under the hood’ to expose incivility, address it head on, and collaborate to create a workplace where everyone experiences meaning, satisfaction and value (p.46 ).”
References


References


• Peters, A. B. & King, L. (2016). Barriers to civil academic work environments: Experiences of academic faculty leaders. *Nurse Educator. (Ahead of Print)*

