



Co-Creating a Civility Manifesto



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Our Story where moral distress and incivility met



So What?

- How do these two phenomenon co-exist within nursing as a caring profession?
- Gaps exist between the caring, trust and respect we exhibit when caring for patients and the respect we show for each other as nurses and faculty.





ANA Code of Ethics for Nurses: Provision 6

- ▶ “The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care” (ANA, 2015, p. 23).

- ▶ “Many factors contribute to a practice environment that can either present barriers or foster ethical practice and professional fulfillment” (ANA, 2015, p. 24).



Corley (2002) Theory of Moral Distress

- ▶ High levels of ethics work satisfaction can lower nurses' moral distress (McDaniel, 1995)
- ▶ Nurses who have a good relationship with their peers experience less moral distress (Olson, 1998)
- ▶ Nurses employed in organizations that do not provide policies guiding practice or provide a supportive environment will experience higher levels of moral distress (Baggs & Schmitt, 1997; Hutchinson, 1990; Thibault-Prevost, Jenson, & Hodgins, 2000)



Significance

- ▶ Both topics of incivility and moral distress have been recognized as contributing to decreased retention rates of nurses (Clark, 2008; McKenna et al., 2003; Sauerland, Marotta, Peinemann, Berndt, & Robichaux, 2014; Wilson, Goettemoeller, Bevaan, & McCord, 2013).
- ▶ Incivility and moral distress have been found to be a component in nursing faculty retention in the academic environment as well (King, 2011; Stratton, 2016).
- ▶ American Association of College of Nursing (AACN) reports that 57.9% of nursing schools across the United States have at least one full-time nursing faculty vacancy (Li, Stauffer, & Fang, 2016).

LIVE SKIT



Debrief

Thoughts and Feelings

What is the difference between each interaction?



Common Themes

- Power Imbalance Issues
- Lack of Effective Communication
- Lack of Policies
- Diminished Sense of Self-Worth & Self-Doubt
- Administration/Leadership
- Resignation of Nursing Faculty



Power Imbalance Issues

- ▶ Power imbalances resulted in incidences of incivility and the development of moral distress which led to fear of retaliation and/or punishment (Stratton, 2016).
- ▶ Examples of power imbalances included:
 - ▶ not being awarded tenure
 - ▶ being assigned non-preferred courses
 - ▶ faculty not practicing to the fullest scope of their educational preparation due to administrative limitations
 - ▶ restriction of faculty's academic freedom (King, 2011; Stratton, 2016).





Lack of Effective Communication

- ▶ Ineffective communication was described as hostile, aggressive, passive-aggressive, non-existent and/or non-inclusive leaving participants feeling devalued and invisible (King, 2011; Stratton, 2016).
- ▶ Examples included:
 - ▶ purposefully being left out of communications
 - ▶ openly sharing email messages intended to be private
 - ▶ belittling- aggressive communication (King & Stratton).

Lack of Policies

- The lack of policies for acceptable academic operations and/or workplace behavior contributed to the experience of incivility and moral distress.
- Policies were either absent, inconsistent, unspoken or ambiguous leading to faculty feeling confused with a lack of recourse and/or control with eventual feeling of disempowerment (King, 2011; Stratton, 2016).





Diminished Sense of Self-Worth and Self-Doubt

- ▶ Power imbalances left faculty to experience a cascade of self-doubt and diminished self-esteem leading to decreased self-confidence in the academic environment (King, 2011; Stratton, 2016).
- ▶ Impacted personal and professional life
- ▶ Examples included:
 - ▶ Not feeling qualified to teach in current academic program
 - ▶ "Feeling demoralized, feeling less worthy, less accomplished, less effective (Stratton, 2016)"

Administration/Leadership

- ▶ Nurse educators spoke of attempting to get assistance from the nursing administrator and/or college Dean to halt the incivility and/or moral distress with little to no intervention. Scenarios initiated or facilitated by administrators contributing to moral distress were also discussed (King, 2011; Stratton, 2016).
- ▶ Examples included:
 - ▶ Not upholding nursing professional ethics
 - ▶ Publicly belittling faculty/students
 - ▶ Instigating or ignoring bullying
 - ▶ Misuse of power to overturn faculty decisions
 - ▶ Not supporting faculty during instances of academic integrity





Resignation of Nursing Faculty

- ▶ Nurse educators explained experiencing incivility & moral distress led to a cascade of feelings & behaviors ultimately leading to resignation or considering resignation.
- ▶ Cascade included:
 - ▶ Stress, vulnerability, and lack of control = avoidance
 - ▶ Evaluated well-being
 - ▶ Utilization of coping strategies
 - ▶ Reflected upon personal and professional values
 - ▶ ***50% of participants (in both studies) resigned***



Your experiences

- Sharing experiences attempting to manage incivility/moral distress
 - Success Stories
 - Challenges
- 



Co Creating a Civility Manifesto: A call to action

- Civility Self-Assessment
- Establish a Civility Committee
- A manifesto is a public declaration that typically has three basic components:
 - beliefs
 - goals/aims/policies
 - wisdom of the collective

Final Thoughts

- “Environments constructed for the equitable, fair, and just treatment of all reflect the values of the profession and nurture excellent nursing practice” (ANA, 2015, p. 24).
- “Nurses are responsible for contributing to a moral environment that demands respectful interactions among colleagues, mutual peer support, and open identification of difficult issues, which includes ongoing professional development of staff in ethical problem solving” (ANA, 2015, p. 24).





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