

Incivility in Nursing Education

LET'S PUT AN END TO IT

By Susan Luparell

Have you ever seen a classmate speak or act disrespectfully to an instructor and felt more than a bit uncomfortable about what you've witnessed, perhaps wanting to intervene but not knowing exactly what to do? Perhaps you've thought an instructor has treated you poorly, or you've been the brunt of rude treatment at the hands of a preceptor or a classmate. Unfortunately, too many of us on both sides of the desk have stories to share about poor treatment at the hands of someone else in nursing. And, if you're like me, you find the irony of such treatment by a colleague in the caring profession to be more than a little striking.



HOW BAD IS THE PROBLEM?

Both nursing faculty and students have reported that incivility is a moderate problem in nursing education (Clark & Springer, 2007). Luckily, most faculty will tell you that they experience incivility by only the rare student. Yet, dealing with these rare problem students takes a disproportionate amount of their time and effort, and usually ends up depriving hard working students of good educational experiences.

Several years ago, in one of the first attempts to address this issue, a survey was conducted of nursing faculty nationwide to determine the types of student behaviors they were experiencing (Lashley and deMeneses, 2001). Tardiness, talking in class, and other inattentiveness was experienced by 100 percent of the faculty responding. Unfortunately, faculty also reported more disturbing encounters as well. In fact, a little over half had been yelled at in the classroom, and about 43 percent had

been yelled at in a clinical setting, where, ideally, students should be on their best behavior.

Disrespectful behavior toward faculty is not limited to talking in class, raised voices, and sarcastic retorts. Nursing faculty have also reported being pushed, having items thrown at them, having their personal belongings vandalized, being stalked, and receiving death threats (Lashley & deMeneses, 2001; Luparell, 2004).

Unfortunately, the incivility issue is not one-sided. Students also report being on the receiving end of disrespectful and devaluing behavior. The perpetrators may be fellow students, faculty, or clinical agency staff. It's not surprising to note that students find belittling remarks and taunting by instructors to be uncivil. However, Clark and Springer

(2007) found that students also consider it disrespectful when instructors are unprepared for class, talk too fast in class, cancel class without warning, or are unavailable outside of class.

WHAT'S THE IMPACT?

Disrespectful, mean, or aggressive behavior comes with a considerable price. In the general workplace, incivility leads to negative effects, physical and emotional disengagement, and potential reciprocation. It also results in diminished trust in leadership and decreased productivity (Pearson, Andersson, & Wegner, 2001).

Many instructors who have even one isolated unpleasant interaction with a student report having serious emotional and physical consequences (Luparell, 2007), including lost sleep, lost time, and lost confidence. Some have had to seek restraining orders. Perhaps most importantly in



Courtesy of Harry Butler, Nashville

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this time of extreme faculty shortage, some report a desire to quit teaching altogether and, indeed, some do quit.

Nursing students also are deeply affected by uncivil encounters, experiencing the same types of physical and emotional symptoms as do faculty (Clark, 2006). They report feeling traumatized, powerless, stressed, and experience loss of sleep and depression.

WHAT IS TO BLAME?

Although the cause of incivility is multifaceted, I think one factor in particular merits specific discussion. Unfortunately, a widespread and fundamental distrust exists between many students and faculty. Some students fervently believe that instructors actively attempt to weed them out of the curriculum. Nursing faculty must share much of the responsibility for creating this environment. Although most of us come into

education as expert clinicians, many have little or no formal training as educators. This may result in weak skills in areas that are of utmost importance to students, such as effective teaching, classroom management, evaluation of learning, and providing effective and constructive feedback. Additionally, many faculty seem to believe that some students enroll in class just to cause them grief or that students expect a passing grade without completing the associated coursework. Establishing a safe and trustworthy educational environment, in my opinion, must be a top priority if we are to combat the problem of incivility.

WHY IS IT IMPORTANT TO CURB INCIVILITY?

In addition to the direct ramifications for those who find themselves on the receiving end of it, incivility is disturbing on a grander scale as well. First, nursing is a tough business. On the simplest level, inattentiveness and other disruptions to the classroom environment impede learning in a profession where keen knowledge is the single most important tool a nurse can bring to the bedside. Second, the demands of the workplace on nurses today are hard, to say the least. We need to bolster and

support each other, not add to the stress of the work environment. Intuitively, one must wonder if people who are uncivil in the educational environment ultimately turn out to be uncivil colleagues in other work settings.

Behaviors signify values (Bruhn, 2001). This is a simple precept, one we probably all intrinsically understand, but to which we give little purposeful thought. Simply put, who you are is reflected in your actions. For example, those who drop their extra pennies into a donation jar, or spend time serving meals in a homeless shelter, most likely deeply believe in helping those in need. When we treat others with respect, it reflects our intrinsic value for others and our belief that others deserve good treatment. Alternatively, when we treat others in a manner that is disrespectful or damaging to the psyche, like it or not, it often reflects a lack of value for the dignity of others. The problem is that this type of behavior is inconsistent with one of the basic tenets of nursing, the respect for human dignity (AACN, 1998). More specifically, it is a direct violation of the ANA Code of Ethics (ANA, 2001), which states that “the nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual...” (p.4). Further, these principles of respect extend to all encounters, including colleagues, and prohibit “... any and all prejudicial actions, any form of harassment or threatening behavior, or disregard for the effect of one’s actions on others” (p.9). Simply put, poor treatment of others is not consistent with the foundations of nursing.

WHAT CAN WE DO ABOUT INCIVILITY?

First and foremost, each of us, students and faculty alike, can commit to creating cultures of civility where each and every action contributes to an environment of well being. This

means that when the bothersome classmate in the back asks a question that was just answered, you purposefully refrain from rolling your eyes or making disparaging comments to your neighbor. It means we purposely don't engage in speaking poorly about people who aren't present. It means we say 'please' and 'thank

as though they have little recourse when they are the victim of incivility at the hands of a faculty member. Although difficult, I encourage you to work directly with an instructor who you feel has treated you disrespectfully. You can start by requesting a private meeting after the situation has passed and you've had time

understanding of what was going on?" Of course, the key is to remain calm and discuss the situation in a rational, professional manner.

Because addressing the situation assertively does require skill and can induce anxiety in a novice, I also recommend performing visual imagery or practicing with a trusted friend first. In these scenarios you can imagine yourself saying what you have to say, and then imagine a variety of different responses from the other person. For example, in one scenario, the other person may be very apologetic and even tearful. If you anticipate that potential in advance, you'll be better prepared for how to respond effectively. In another scenario, the person may become defensive and you can be prepared with a more reasoned response if you have anticipated that possibility in advance as well.

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you' even to those of whom we're not overly fond. In short, we treat each other respectfully in all circumstances.

Secondly, we need to get beyond our collective cynicism. According to Stephen Carter (1998), "trust (along with generosity) is at the heart of civility....[and]cynicism is the enemy of civility" (p. 67) since it is based on an underlying distrust of the motives of others. That is, we need to believe in the good intentions of others.

When you think you've been the victim of uncivil behavior, it's important not to escalate the problem. Research suggests that there is a tendency to respond to an infraction in a manner that further propagates the problem, resulting in a downward spiral of incivility (Andersson & Pearson, 1999). It's important to step back from such a counterproductive reaction, thus breaking the downward spiral.

That's not to say that you need to ignore the infraction altogether, however. Dealing with conflict is an important professional skill. Ideally, since much incivility stems from simple misunderstanding, an individual should approach the perpetrator to attempt to understand the situation. Of course, this is easier said than done, but if you can muster the courage to address it calmly, it is well worth the effort.

Additionally, students often feel

to think rationally about what transpired. At the meeting, you might say something like this: "Professor X, I'm wondering if we can talk about something that has been bothering me. The other day when you did/said this, I really felt _____. Can we talk about it so I can get a better



CONCLUSION

Joy-stealing is a term used to describe “experiences with students, colleagues, staff and administrators that rob...[us] of our zest, clarity, productivity, feelings of worth, and desire for more connection” (Heinrich, 2007, online). Perhaps

the single greatest ramification of incivility is that it steals the joy for who we are and what we do. Nursing is a grand profession, one that is capable of producing much joy in our lives. We should never stop feeling that. ☺

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