Incivility Experienced by Nursing Students in Clinical Settings: A Literature Review

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Purpose

- Review the existing data on incivility experienced by nursing students during clinical education

Key Terms

- Incivility – Behaviors that violates social norms including rudeness, intentional isolation, dismissiveness, hostility and disregard (Andersson & Pearson, 1999; Clark & Kenaley, 2011)
- Nursing Students – Focus on persons engaged in pre-licensure nursing education
- Clinical Education – Learning setting that exists within patient care environments under the direction of practicing nursing personnel
- The American Nurses Association (ANA) Code of Ethics assigns nurses the responsibility for cultivating an ethically competent workplace and identifies students as key stakeholders (2015).
Clinical experience has been a longstanding part of nursing education. It provides exposure to clients and skills. Students begin the process of professional socialization, which includes:

- Begin to professional role expectations and behaviors

(Spector, 2009) (Brennan, McSherry, 2007)
Problems

Faculty at CSUSB have reported student concerns about treatment by hospital personnel during clinical

Rudeness and dismissive actions are commonly sited issues (Thomas, Jinks, & Jacks, 2015)

Students that are victims of incivility were found to develop cynicism and emotional exhaustion (Babenko-Mould & Laschinger, 2014)
Methods

- **Search Engines:** EBSCOhost Academic Search Premier, and PubMed
- **Key words:** “nursing student,” “incivility,” “rudeness,” and “clinical practice.”
- **Searching Process:** Peer reviewed articles were written in the English language between the year 2007-2017
- **Data collection:** February 28, 2018 — March 21, 2018.
- Among the 82 only 7 Articles were identified for the Literature Review
- Table was used to document this process
### Methods (continued)

<table>
<thead>
<tr>
<th>#</th>
<th>TITLE OF ARTICLE</th>
<th>YES, NO, MAYBE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>“A bi-national survey of clinical faculty members’ experiences with student incivility.”</td>
<td>No. Doesn’t seem like it is about students.</td>
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<tr>
<td>3</td>
<td>“Becoming inclusive: A code of conduct for inclusion and diversity.”</td>
<td>No. More about diversity in nursing profession.</td>
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<tr>
<td>4</td>
<td>Nursing Students’ Experiences with Incivility in Clinical Education</td>
<td>Yes. Talks about incivility in clinical setting. It’s a qualitative study.</td>
</tr>
<tr>
<td>5</td>
<td>입상실습 중 갈등대학생의 경험에 대한 무례함, 소임, 진료판도 및 자기효능감과의 관계</td>
<td>No. Not in English.</td>
</tr>
<tr>
<td>6</td>
<td>Student Perceptions of INCIVILITY in Nursing Education: Implications for Educators</td>
<td>Yes, if it can include incivility in classroom and clinical setting.</td>
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<tr>
<td>7</td>
<td>Nursing Graduates’ Ability to Address Incivility: Kirkpatrick’s Level-3 Evaluation</td>
<td>No. About graduate students.</td>
</tr>
<tr>
<td>8</td>
<td>An Intervention to Promote Civility Among Nursing Students.</td>
<td>Maybe, Need further review. It’s about civility within nursing students. Not sure if it’s in the clinical setting.</td>
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</tbody>
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2-28-18 meeting

1. Reviewed search engines to find articles from peer reviewed journals that were published by 2007-2017. Anything related to the key terms of nursing students and incivility or rudeness and clinical setting.
2. First meeting: discuss possible research topic and research method
   - Has to be incivility in the CLINICAL SETTING, NOT THE CLASSROOM!!!!!
   - Just read through the abstracts and see if the article is related to the topic we have.

Reviewed search engines to find articles from peer reviewed journals that were published by 2007-2017. Anything related to the key terms of nursing student and incivility or rudeness and clinical setting.

Sum total of articles found was 82.

3-7-18 meeting

It’s incivility toward student in clinical setting. For example, doctor, student, nurse, faculty staff, family, etc. (anyone) is rude to the student.
Has to be published in English.
Doesn’t matter what country. Can be anywhere.
Discussed the criteria for each article we are going to use
1. Has to be in a clinical
2. Students and professor determined what criteria needed to be met to have articles included in research.

3-21-18 meeting

From 1:30-3:05

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<table>
<thead>
<tr>
<th>Author</th>
<th>Article</th>
<th>Instrument Validated</th>
<th>Sample Characteristics</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthony and Yusik (2011)</td>
<td>&quot;Nursing Students' Experiences with Incivility in Clinical Education&quot;</td>
<td>Used a questionnaire; Qualitative research</td>
<td>Private Midwestern University; 21 volunteer participants; 16 females and 3 males</td>
<td>Incivility has affected students in the clinical setting by impacting self-confidence and attitude towards future career. Three behavioral themes that were identified were: &quot;hostile or rude,&quot; &quot;exclusionary,&quot; and &quot;dismissive.&quot; Positive experience occur when students were included. Students believe that school faculty cannot change incivility from occurring.</td>
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<tr>
<td>Allmiller (2012)</td>
<td>&quot;Student Perceptions of Incivility in Nursing Education: Implications for Educators&quot;</td>
<td>Questionnaires were used during the four focus groups and students' responses were documented</td>
<td>248 RN students; 1 state university and 3 private universities in a major metropolitan area in the mid-Atlantic states</td>
<td>Study shows that nursing students interpret as uncivil many of the same behaviors identified as uncivil by faculty. Students shared similar concerns as faculty when it came to the increasing frequency of uncivil behaviors by students in learning environment.</td>
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<td>Anthony et al. (2014)</td>
<td>&quot;Development and validation of a tool to measure incivility in clinical nursing education—UBONE Development&quot;</td>
<td>Cross-sectional design; Uncivil Behavior in Clinical Nursing Education (UBONE) tool; Principal Components Analysis (PCA)</td>
<td>106 participants; 88 were females; 16 were males; 233 were females; 3 were males</td>
<td>Indicated high degrees of reported stress correlated with high levels of perceived incivility. Suggest that the UBONE is an easy-to-administer tool with good internal consistency.</td>
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<td>Balower-Mould and Laschinger (2014)</td>
<td>&quot;Incivility in Clinical Practice Settings on Nursing Student Burnout&quot;</td>
<td>Cross-sectional design; Incivility in clinical setting had a negative effect on students.</td>
<td>190 were recruited; Only 126 students participated; 133 were females; 3 were males</td>
<td>Incivility in the clinical setting had a negative effect on students. Recommendations: students should practice how to respond to incivility. Clinical instructors should advocate for students.</td>
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<td>Themes et al. (2016)</td>
<td>&quot;Finessing incivility: The professional socialisation experiences of student nurses’ first clinical placement, a grounded theory&quot;</td>
<td>Focus group method; Students were asked to journal their clinical experience and then they were reviewed for patterns of psychosocial effects of incivility</td>
<td>30 students who were exposed to 30 clinicals; Only 16 students completed a diary</td>
<td>Most of the participants experienced early in their clinical placement &quot;dissatisfaction and/or disappointment with the reality of the clinical environment.&quot; Students learned to navigate the issue of incivility by recognizing stress and difficulties of the nurses’ job and being understanding and forgiving. Students found alternate personnel to observe and shadow (sometimes outside of nursing), quietly stayed their ground, and retained strong ethics while implementing evidence-based learning skills despite actions in the clinical environment that were contrary to those teachings. Students need to be allowed access to staff conversations to gain meaningful access to nursing/specialty culture and have a beneficial learning experience. Conclusion: Learning to be a nurse is not simple and can be &quot;unpleasant.&quot; Students displayed resilience and finess in the face of adversity.</td>
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<td>Wallace et al. (2018)</td>
<td>&quot;Perceptions of Clinical Stress in Baccalaureate Nursing Students&quot;</td>
<td>Quantitative research; A survey was used and open-ended questions was used to analyze themes</td>
<td>65 RN students; Midwestern University; At least 1 year of clinicals</td>
<td>There are many stressors in a clinical setting including fear, incivility, inconsistency, time constraint, being unprepared, making a mistake and behaviors of healthcare staff and instructors/teachers toward students.</td>
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<td>Binks et al. (2019)</td>
<td>&quot;Uncovering degrees of workplace bullying: A comparison of baccalaureate nursing students' experiences during clinical placement in Australia and the UK&quot;</td>
<td>Used the Student Experience of Bullying during Clinical Placement (SEBDCP) questionnaire; The questionnaire consisted of 13 main questions with more than 80 items which included a rating to determine frequency of occurrence; IBM/SPSS 23 tool used to analyze data from both countries</td>
<td>869 Australian students and 661 United Kingdom students; For Australian participants, there were 271 females and 96 males; For UK participants, there were 587 females and 44 males; Participants were drawn from heads of Schools of Nursing across Australia and the rest were from one third of nursing schools in the UK</td>
<td>Various occurrences of incivility among nursing students in the clinical setting were observed. Most stemmed from RNs, staff from hospital, and patients. Demographics seem to affect the rate of which students are harassed. Males, black nursing students, and those who do not speak English as their first language face more incidences of bullying. Australia had a significantly higher rate of bullying than UK.</td>
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Discussions

Limitations:
- Small sample size
- Lack of alternative perspective
- Absence of different settings
- Degree level
- Accuracy of self report

Demographics
- Men exposed to increased bulling
- Persons who spoke English as second language were subject increased incivility

Suggestions:
- UBCNE tool (Anthony et al., 2014)
- Rasch Model tool (Wallace, 2015)
Conclusions

**Incivility in Nursing Clinical Education**

- There is a high correlation between students experiencing incivility and dissatisfaction in the clinical experience and disillusionment.

- The idealized practice environments from the lecture setting and the harsh, “dog-eat-dog” nature of the environments experienced by students creates incongruities and confusion.

- The ANA and The Joint Commission have identified hostilities in the workplace as a pervasive issue contributing to sentinel events and poor patient outcomes.
  - Examining root causes to prevent future occurrences is key. This becomes more abstract when discussing incivility as a cause.

- While our study examined incivility from all healthcare personnel, the greatest number of offenses directed at nursing students came from registered nurses.
  - The effects of eating our young – nursing shortage; teaching and ingraining incivility as a social norm within nursing.

- Clinical instructors must be cognizant of the nurses with whom their students will be working. It should be made clear to the students early that incivility on the part of hospital staff is inappropriate and should be reported to the clinical instructor.


