Nursing Education Research Conference 2020
Building a Faculty Development Workshop on Gender-Associated Incivility in Nursing Education
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Purpose:
Uncivil behavior in nursing education has been a well-documented. However, the topic of gender-associated incivility has not received much attention. Recent studies have shown that gender does play a role in negative behaviors within groups. This is increasingly present when there is a disproportionate number of one gender type (Gilbert, Raffo, & Sutarso, 2013; Leigh, Robin, Madelyn, & Jenni, 2014; Welbourne & Sariol, 2017). In undergraduate baccalaureate nursing education, men account for approximately 12% of the student population (American Association of Colleges of Nursing, 2019). Therefore, male nursing students are at an increased risk of experiencing negative behaviors directed towards them by their female nursing student colleagues.

Experiencing peer-to-peer uncivil behavior can negatively impact a students' mental and physical well-being, as well as their learning experience (Alu, 2017; Sauer, Hannon, Beyer, 2017). When experiencing gender associated incivility, students rely on faculty to intervene (Sauer et al., 2017). Therefore, nursing faculty must be able to identify gender associated uncivil behaviors and be empowered with strategies to both proactively and reactively address them. Ultimately, these skills will support a healthy and equitable education environment.

The purpose of this study was to determine if an innovative workshop for nursing faculty that focused on gender-associated incivility would assist in the development of skills to identify, prevent, and manage gender-associated incivility in the educational environment.

Methods:
A total of 40 faculty, clinical instructors, and graduate students participated in the workshop. Topics included: 1) fundamentals of civility; 2) implementation of proactive and reactive techniques to address uncivil behavior; and 3) enhancing the learning environment for all students. Strategies utilized during the workshop included the use of trigger films, small group discussions, and interactive theater. Participants were given Likert scale questions immediately post-workshop to evaluate the learning experience and potential for implementation into educational practice. Kirkpatrick’s Model of Evaluation was used as a framework for the evaluation (Kirkpatrick & Kirkpatrick, 2006).

Results:
Results of the survey indicate that the participants gained a better understanding of the impact of gender associated incivility. Participants also felt empowered and better
prepared to manage gender-associated conflict. Additionally, participants reported intent to apply knowledge and strategies learned through the workshop into their own teaching practice.

**Conclusion:**
While the generalizability is limited due to a small sample size and the inclusion of only one nursing school, the results do suggest that similar approaches may be useful for other Schools of Nursing. Challenges experienced by male nursing students are well documented. Therefore, practical strategies to address these challenges are essential in bridging the gap between the current environment of nursing education and the potential for an equitable environment free of gender-associated incivility both in the educational setting and future practice setting.

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**Title:**
Building a Faculty Development Workshop on Gender-Associated Incivility in Nursing Education

**Keywords:**
Gender incivility, faculty development and nursing education

**Abstract Summary:**
Studies indicate that gender plays a role in incivility within groups. Experiencing gender associated incivility can increase students’ stress and negatively impact the learning experience. This study measured the impact of a newly implemented workshop for nursing faculty to identify, prevent, and manage gender associated incivility in the educational environment.

**References:**

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Author Summary: Dr. Benjamin Smallheer has worked with the cardiac-pulmonary population in a variety of hospital settings throughout his nursing career. He became interested in the psychological responses of patients who had experienced acute myocardial infarctions. He has researched the influence of learned helplessness, social support, and self-efficacy on patient outcomes. He continues to practice as a nurse practitioner on the Critical Care Medicine team at Duke Raleigh Hospital in the Medical Intensive Care Unit.

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