INCIVILITY IN THE WORKPLACE: IMPLICATIONS FOR NURSING EDUCATION

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OBJECTIVES

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Learning Objectives:

• Discuss current literature addressing the issues of incivility, ageism and intent to quit in nursing education programs and the workplace.

• Describe the results of the research study.

• Explore future directions for nursing education to include content on incivility, ageism, and intent to quit as it relates to generational cohorts.
DISCLOSURE

Conflict of Interest Statement

This author declares no conflict of interest

Employer

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Support

No employer, sponsorship or commercial support was given to this author
TOPIC INTRODUCTION

Incivility

A “speech or action that is disrespectful or rude and ranges from insulting remarks and verbal abuse to explosive violent behavior” (Tiberius & Flak, 1999, p.3).

Workplace Incivility

A “low-intensity deviant behavior with ambiguous intent to harm the target, in violation of workplace norms for mutual respect” (Andersson & Pearson, 1999, p. 457).
TOPIC INTRODUCTION

Personal involvement of incivility
Can anyone remember if they were personally exposed to incivility?

• Student (in your basic program)
• Graduate (a new nurse or working RN)
• Academia (as an educator)
TOPIC INTRODUCTION

Ageism

a discrimination and rejection based on one’s age which entails a comprehensive capacity to include any prejudgment or intolerance against or in favor of an age group (Palmore, 1999).

Possible reasons for ageism in nursing practice

• Older nursing workforce
• inability to perform their job physically and mentally
• Increase in absenteeism
• Staying in their jobs longer
TOPIC INTRODUCTION

Causing younger nurses to possibly

• work harder and longer hours
• be frustrated with the situation
• could ignite incivility between older and younger nurses
SIGNIFICANCE OF THE STUDY

Incivility

• In society and within organizations (Andersson & Pearson, 1999).

Incivility in Nursing

• Workplace (Roberts, 1983; Laschinger, Finegan, & Wilk, 2009).

• Higher Education - Faculty & Students in both classroom and clinical settings (Clark & Springer, 2010; DelPezzo & Jett, 2010).
SIGNIFICANCE

Nursing has a multigenerational and aging workforce

- Baby Boomers largest group employed and are beginning to retire (William & Nussbaum, 2001; Swearingen & Liberman, 2004).

- Workforce that includes Baby Boomers, Generation X & Millennials

Because of this combination

- Generational differences occur
- That incivility and ageism occurs between nurses
POPULATION FOCUS

RN to BS Student Population

• Memories of incivility from pre-licensure programs
• Organizations and employers requiring BS in Nursing
• Possibly working as an RN in healthcare (exposure to real life issues in the workplace)
• Multiple responsibilities (working/school/families)
POPULATION FOCUS

Could the RN to BS student population be dealing with incivility, ageism, and generational differences in the workplace?

Could this incivility, ageism, and generational differences add to the growing concern of nurses’ intent to quit their employer or the profession, which adds to the current and future nursing shortage.
RESEARCH QUESTIONS

• Is there a relationship between RN to BS nursing students’ perceptions of incivility and ageism?

• Is there a difference in the degree of perceived ageism of RN to BS nursing students based on gender or age?

(Balko, 2013)
RESEARCH QUESTIONS

• Is there a difference in the degree of perceived incivility of RN to BS nursing students based on gender or age?

• Is there a relationship between RN to BS nursing students’ perceived incivility, ageism, and intent to quit?

(Balko, 2013)
FRAMEWORK TO GUIDE STUDY

Oppression Theory

• Is a dominant group’s capability to overpower and suppress an inferior subservient group (Freire, 1970).

Generational Theory

• A “cohort group whose boundaries are fixed by peer personality that include one’s chronology, attributes, and awareness” (Strauss & Howe, 1991, p. 60).

Disengagement Theory

- Is the “simultaneous withdrawal and defense of a person’s preferred self in behaviors that promote a lack of connections, physical, cognitive, and emotional absence, and passive, incomplete role performances” (Kahn, 1990, p. 694).
METHODOLOGY
Design, Data Collection, and Instrumentation (Balko, 2013)
DEMOGRAPHICS

557 RN to BS nursing students in an online program were approved to be participants in the survey.

80 participants responded to the survey.

76 surveys were at least 95% completed and considered useable.

(Balko, 2013)
DEMOGRAPHICS

Gender
• 90% Women, 11% Men

Age
• Minimum (25), Max (60), Mean (43)
• By Gen Cohort: Baby Boomers (62%), Generation X (32%), Veterans (7%), no millennials.

Employment Status
• 86% Full-time, 15% Part-time

(Balko, 2013)
DEMOGRAPHICS

Shift Worked

• 12 hr (37%), 7-3 (32%), Other (20%), 3-11 (7%), 11-7 (5%).

Years of Nursing Experience

• 62% up to 15 years of nursing experience, 38% had over 16 years of experience.

Nurse Manager Experience

• 57% were not, 43% were managers.

(Balko, 2013)
DEMOGRAPHICS

Work Setting

• 58% Hospitals, 17% nursing homes, 17% other settings, 5% home care 1% Doctor’s office, 1% school setting.

Race and Ethnicity

• 76% Caucasian, 12% Black, 9% Hispanic, 3% Asian.

State of Current Residence

• Northeast Region (41%), South (30%), West (20%), Midwest (9%).

(Balko, 2013)
RESULTS OF THE RESEARCH STUDY
Bivariate Analysis, Descriptive and Inferential Statistics, Parametric and Non-parametric testing

There was a statistically significant relationship between incivility and ageism.

The correlation between incivility and ageism as measured by the summary scores of the WIS and the AS was statistically significant (Spearman’s rho = .375, p = .001).

• incivility was related to ageism and the relationship displayed meant that higher levels of incivility were associated with higher levels of ageism.

(Balko, 2013)
RESULTS

There was a statistically significant relationship between incivility, ageism, and intent to quit.

• Findings indicated that when there are higher levels of perceived incivility, ageism increases (Spearman’s rho = .395, p = .001), and when there are higher levels of incivility and ageism, intent to quit increases (Spearman’s rho = .442, p = .000).

• A linear regression analysis was conducted to determine if turnover intention could be predicted from incivility and ageism. R value for incivility was .465 which indicated a moderate correlation and that 21.6% represented how much turnover intention can be explained by incivility.

(Balko, 2013)
RESULTS

There was a statistically significant relationship between incivility, ageism, and intent to quit.

- When incivility and ageism are together, the R value .490 and indicates that 24% of turnover can be explained by incivility and ageism.
- Analyzing the coefficients also reflects that incivility again can predict turnover.

(Balko, 2013)
RESULTS

There was no significance between
  • gender and age on ageism
  • gender and age on incivility

Findings based in generational cohorts indicated that:
incivility, ageism and turnover showed no difference
  • between groups
  • incivility, ageism and turnover were occurring in all cohorts

(Balko, 2013)
RESULTS

The regions indicated that for incivility all 4 regions were experiencing it.

• Ageism was higher in the Midwest and the West compared to the South and the Northeast.

• Turnover was higher in the South, and the Northeast compared to West and the Midwest.

(Balko, 2013)
RESULTS COULD INDICATE

Fewer nurses obtaining their BS in nursing
Fewer employed nurses
Add to the nursing shortage

(Balko, 2013)
FUTURE DIRECTIONS FOR NURSING EDUCATION

Education at the RN to BS level is needed (since findings revealed incivility, ageism and turnover).

Employee education within the workplace.

Administration and Managers need to defuse these situations before they cause harm to the employee, organization, and nursing profession.

(Balko, 2013)
REFERENCES


Balko, K. A. (2013). Experiences of incivility and ageism in currently enrolled rn to bs nursing students and their intent to quit. Capella University, ProQuest Dissertations Publishing 3603525.


REFERENCES


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Questions