The concept of incivility: A case study

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Abstract
It is clear that a culture laden with incivility creates a difficult work environment. Incivility has not excluded nursing academe. Uncivil interactions in the academic workplace may deter qualified nurses from entering academia and encourage current faculty to leave. The concept of incivility was examined using Walker and Avant’s method of concept analysis and clarified with a case study. The discussion illuminates ways to diminish uncivil behaviors between and among nursing faculty.

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1. Introduction
Arguably, today’s culture applauds whim over self-control and inflammatory behavior over civility. At best, a culture fitting this description would be a difficult working environment. Although traditionally, a caring profession, nursing, and nursing academe are not immune to incivility in the workplace. The American Nurses Association Code of Ethics and Interpretive Statements (2015, 16) compels nurses to “maintain compassionate and caring relationships with colleagues” and “precludes… disregard for the effect of one’s actions on others.” Rich literature detailing incivility, precipitating factors, and costs to individuals and organizations exist (American Nurses Association, 2015).

Researchers in a variety of specialties have provided discipline-specific descriptions of incivility. As indicated during a session on incivility (Luparell, 2014) at the National League for Nursing (NLN) 2014 Education Summit, defining incivility in connection with nursing academe is a necessity in order to introduce policies into schools of nursing related to civil behaviors and to recruit and retain qualified faculty. The nature of incivility will be illuminated by relevant literature review, concept analysis, and demonstration of the concept in a case study. Discussion of incivility in nursing education, research, and practice will be provided.

2. Organizing Framework
The concept of incivility among nursing faculty was examined using Walker and Avant’s (2005) method of concept analysis. For the purposes of this article, a modification of the eight-step procedure for concept analysis was used: concept selection, determination of analysis purpose, identification of concept uses, determination of defining attributes, identification of a model case, contrary case, antecedent and consequence identification, and empirical referent definitions. Step 6, identification of borderline, related, invented, and illegitimate cases, was excluded.

3. Concept
A review of the literature was conducted using the following electronic databases: Cumulative Index for Nursing and Allied Health, MEDLINE, Education Resource
Information Center, Humanities International Index, PsycARTICLES (psychology references), SociINDEX (social science references), Business and Management Practices (BusManagement), and Academic Search Premier from 1995 to 2013. The primary search word was *incivility*. The term *faculty-to-faculty incivility* was also searched in an effort to locate those articles specific to nurse faculty incivility. Articles were limited to English-only and peer-reviewed publications. Nearly 400 articles were obtained. A review of these articles revealed that a concept analysis of incivility had not been performed. Upon reviewing the abstracts and an ancestral review of relevant articles, 46 references incorporating quantitative, qualitative, and theoretical research were utilized. Literature from the disciplines of education, nursing, business/management, psychology, sociology, and government was included in this concept analysis.

### 3.1. Purpose

The major purpose of this concept analysis was to develop an operational definition of incivility and to clarify how incivility and uncivil encounters between and among nursing faculty affected their quality of life and decision to remain in academia. Commonalities that nursing faculty face related to incivility in academia were elucidated through the concept analysis process.

### 3.2. Definition

Incivility has been defined as a deliberate discourtesy toward another that wounds one’s self-esteem and creates doubt about his or her abilities (Peters, 2014). Incivility may have an impact on nursing when uncivil behaviors filter to patient care. When nurses in the health care setting do not work collaboratively and continue to “eat their young” (Meissner, 1986, p. 51), the problem of newer nurses not remaining in nursing is perpetuated. A lack of qualified nursing faculty ready to replace retiring faculty has been noted to exist.

### 3.3. Origin

The word *incivility* has roots in the ancient Latin word *incivilitas* meaning a lack of civility, which means community or city. It may be expected that people who belong to a community treat each other with some degree of respect and courtesy. In the absence of respect and courtesy, incivility prevails.

### 3.4. In Higher Education

Incivility in higher education may be demonstrated by rude, discourteous speech or behavior that disrupts and shows disregard for a cooperative learning environment (Connelly, 2009; Feldmann, 2001). Students and faculty may each be affected by uncivil actions. Feldman suggested that incivility is rooted in as many as three psychological factors: “a need to express power over another, a need for verbal release due to frustration over an apparently unsolvable situation, or a need to obtain something of value” (p. 137).

Colleges and universities have, or are in the process of, adopting policies regarding incivility. Recommendations have been made for the inclusion of specific language regarding the institution’s policies on incivility in the course syllabus (Connelly, 2009). With the understanding that all colleges may not be able to fund such an endeavor, Connelly addressed the need for a first-year college seminar experience in order to reduce the amount of incivility observed on college campuses.

### 3.5. In Nursing Education

Heinrich (2006) ascertained that the concept of incivility among nursing faculty was “rarely discussed” (¶ 1). During the NLN’s 2005 Education Summit, Heinrich (2007a) collected 261 “free-writes” from nursing faculty regarding their experiences with incivility. These free-writes were treated as qualitative data even though demographic data were not formally collected unless participants volunteered the information. Results showed that the introduction of “faculty-to-faculty incivility” was met with “blank stares” from nurse educators from all levels of academia (Heinrich, 2007a, p. 34). A variety of types of “mean girl” games, such as setting-up, devaluing and distorting, misrepresenting and lying, shaming, betraying, breaking boundaries, splitting, mandating, blaming, and excluding, were identified, and recommendations were made to end such games.

Heinrich (2007b) identified “joy stealing” as those “experiences with students, colleagues, staff and administrators that rob nurse educators of their zest, clarity, productivity, feelings of worth and desire for more connection” (¶5). Joy stealing expressed the way someone felt after having experienced an act of incivility. Although this term was specific to nurse educators, it does not specify faculty-to-faculty encounters exclusively because Heinrich suggested that one’s joy could be stolen by administration, students, or faculty.

Clark, Olender, Kenski, and Cardoni (2013) identified the prevalence of faculty-to-faculty incivility in academic work environments and noted that incivility was a reason given for leaving a teaching position. Recently, 68% of nursing faculty participating in a national survey reported moderate to serious levels of faculty-to-faculty incivility in their schools of nursing (Clark et al., 2013). The most commonly occurring uncivil behaviors included opposition to change, not completing workload, distracting others during meetings with mobile devices, poor communication on work-related issues, and making rude comments. Demanding workloads and stress were most often cited as contributing factors to faculty-to-faculty incivility. Managing multiple and competing demands; handling taxing workloads; obtaining advancement, promotion, and tenure; working with
problematic students; technological advances; and organizational conditions all contributed to stress.

3.6. In Other Professions

Zauderer (2002) argued that incivility is grounded in words or actions that diminish another’s self-esteem. The offending words or actions may be ambiguous, unintentional, and resulted in feelings of alienation and distress. Zauderer recognized snubbing and violating collegial relationships as acts of incivility in the business world. Psychologists Cortina, Magley, Williams, and Langhout (2001) determined that incivility included behaviors that lacked “clear, conscious intentionality” (p. 64). Harm to the object of incivility may be uncalculated and attributed to instigator carelessness or to target sensitivity. These investigators suggested that incivility experienced by individuals may result in stress, depression, and anxiety.

Sociologists Porath, Overbeck, and Pearson (2008) defined status challenge as an act of incivility and “proposed that indirect aggression constitutes a violation of the norms for civil behavior in the workplace and these violations are experienced as challenges by targets of incivility” (p. 1945). Challenges to one’s status were recognized as a continual struggle within a social context. The “tit for tat” strategy was explained as a phenomenon observed when targets of incivility responded to uncivil behaviors with uncivil behaviors (Porath et al., 2008). Status challenges were seen to be problematic in the workplace because individuals vie for “power and status” (Porath et al., 2008, p. 1947). Spreading rumors, general rudeness, exclusion, and “taking him down a notch” were examples delineated by these authors.

4. Defining Attributes

Defining attributes are those characteristics that are “most frequently associated with the concept and that allow the analyst the broadest insight into the concept” (Walker & Avant, 2005, p. 68). Based on the review of the literature, uncivil interactions are those that are disrespectful, belittling, condescending, insolent in nature, threatening or intimidating, undermining, and ambiguous. It would be expected that these attributes may change over time as the concept of incivility evolves.

4.1. Case Study

This author chose to present the concept of incivility as a case study. According to Davis (1993), the case study provides a concise and engaging story by raising a thought-provoking issue, contains conflict, promotes empathy with the focal characters, lacks a clear-cut resolution, and provides information about character, location, context, and actions.

Amy Carson, the school of nursing (SON) chair, dreaded calling the monthly scheduled full faculty meeting to order. Dr. Carson has been chair of the 27-member SON for 2 years. Prior to becoming chair, she was an associate professor in the same school where she taught pediatric content in the undergraduate program. She was appointed chair 2 years after obtaining tenure in this research-intensive university. Often times, Amy feels she has much to learn about her new role. She received very little mentoring for it.

Amy is relatively young for nursing faculty having obtained her doctor of philosophy at age 33 and tenure by age 40. She has worked in one university SON. As a pretenure faculty member, she co-taught the pediatric course with Sue Phillips. Dr. Phillips has been an associate professor in the SON for 17 years and has a son the same age as Amy. Sue was assigned as Amy’s mentor when she came to the SON. Initially, Sue was very welcoming to Amy, sharing many “tricks of the trade.” Amy appreciated the insight as she struggled her first year with balancing teaching, service, and scholarship. Despite these challenges, Amy obtained excellent student evaluations, published in her first year, and received a grant to further her research.

Amy began to notice a change in the way Sue treated her in subsequent years. She felt that she was not as forthcoming with information that was vital for successfully running the pediatric course. On more than one occasion during the semester, Sue made changes to the syllabus, such as changing due dates for assignments, without consulting with Amy. With these unknown changes, Amy frequently felt undermined in front of the students. In addition, she discovered that Sue was delegating tasks to her, such as responsibility for designing all examinations, grading examinations, and entering grades, without taking away other course obligations.

Amy felt an enormous amount of stress. She was unsure who to talk to about this new situation because previously she would have confided in Sue. Amy did not want to look like a complainer or suggest that she could not manage the workload. More than once Amy walked into the lunch area and overheard Sue talking about her to another colleague.

The challenges Amy had experienced with Sue are magnified now that she is chair. During faculty meetings, Sue exerts an underlying power that she has because of her length of tenure in the SON. When issues are up for discussion, Sue quickly criticizes Amy’s suggestions, and her demeanor discourages other faculty members from sharing their ideas. Amy definitely feels a power struggle, and it seems obvious to the other faculty as well. Sue is reluctant to change or even discuss making changes. She responds to ideas with, “This is the way we’ve always done it and it has worked...why we would change something that works?” It is common for faculty to vote to implement a new strategy, and Sue will hinder any progress by speaking to individual faculty members.

Amy has become somewhat depressed and discouraged in her role. She loves doing research but feels she spends most of her time navigating around Sue. The constant suspicions of being undercut by Sue are wearing her out, and Amy has
considered stepping down from the role as chair or looking for a position at another institution. Amy has decided to seek assistance with her dilemma. She has scheduled an appointment with the dean of her college to discuss strategies for managing Sue’s uncivil behavior. She feels that receiving coaching from a more experienced chair may give her confidence in her own leadership abilities. Amy has also considered speaking with human resources about options and policies for dealing with faculty.

4.2. Antecedents and Consequences

Although the identification of antecedents and consequences is frequently taken less seriously than other components of concept analysis, Walker and Avant noted that this part of the analysis may “shed considerable light on the social contexts in which the concept is generally used” (p. 72).

Antecedents are defined as elements that must be in place before the concept occurs. The following antecedents for incivility, especially as it relates to faculty-to-faculty incivility in nursing education, have been identified: stress/occupational stress, workload/time management, difficult working conditions, differing cultures/differing perceptions, generational differences, need to express power over another, need for verbal release, need to obtain something of value, and greater degree of informality at work. This combination of antecedents creates a challenging and competitive work environment. Faculty working in these conditions may feel unsupported and undervalued. The case study presented here illustrates several antecedents for incivility. A generational difference between Amy and Sue is established, which may have contributed to the uncivil behavior. It is noted that Amy is experiencing stress in her position as chair and that the underlying power that Sue asserts during faculty meetings contributed to her stress. Sue has also withheld information from her that was important for the success of their co-taught course. This combination has made Amy’s work environment taxing.

Consequences are defined as events that take place after the concept has occurred (Walker & Avant, 2005). Consequences of uncivil behavior are depression, anxiety, avoidance, anger, humiliation, physical illness, absenteeism/decreased time spent at work, retaliation, low motivation, reduced job satisfaction, alienation, distrust, and turnover/decreased retention. Faculty who experience these consequences are more likely to exit nursing academia, compounding the well-documented nursing faculty shortage (American Association of Colleges of Nurses, 2014). In this case study, Amy dreaded leading the faculty meeting because she expected Sue to overpower her authority. From the case, it is also clear that Amy did not trust Sue as her mentor or to support her leadership role as chair. Amy has contemplated stepping down from her role as chair and possibly leaving the institution.

4.3. Empirical Referents

Empirical referents are measurable properties or events that verify the existence of the concept (Walker & Avant, 2005). The personal effects that incivility can have on the targeted faculty is overwhelming and demoralizing. Incivility also affects students and the educational institution. When uncivil behaviors occur between and among faculty, the gravity of the encounter is exacerbated. Nursing faculty expect a greater amount of collegiality, professionalism, respect, and support when working alongside other masters’ and doctoral-prepared nurses. Discovering contradictory behaviors in what has historically been considered a caring profession may encourage departure from academia. The lack of collegiality Amy experienced was disheartening. She was puzzled by Sue’s uncivil behavior. It contributed to the stress of her leadership position. In this instance, uncivil behavior may touch the institution and the SON if Amy decides to leave her role.

5. Discussion

This analysis clarified the concept of incivility, provided an operational definition, and expressed a need for additional research of incivility and how it affects faculty. The literature suggested policy creation as a first step toward incivility prevention in higher education and the workplace. Additional research investigating the effectiveness of policies and their implementation is warranted. Understanding barriers to creating a civil work environment encountered by deans, chairs, and other leaders in academia would add to the body of knowledge.

Incivility’s detrimental effects on nursing as a profession, including the impetus for faculty to leave academia, may be further illustrated with additional investigation. As role models for nursing, faculty should be compelled to take personal responsibility for the civil treatment of colleagues. Clear policies to address uncivil behaviors may be conceived and implemented. Adherence to such policies is important to avoid incivility in academia.

It is anticipated that this analysis will increase awareness of incivility in nursing education. Examining the antecedents of incivility, especially stress, workload, and the need to exert power, may lead to interventions to lessen these variables.

Amy’s story illustrated how the concept of self-care can lead to coping and relief of stressors. After seeking the advice of her dean, investigating her options with human resources, and reaching out to another academic nursing leader for support, Amy elected to schedule a face-to-face meeting with Sue to discuss her perceptions of Sue’s uncivil behavior. She was nervous about the appointment but also optimistic that the outcome would be positive. Amy hoped to use the encounter as a chance to role model civility and the caring behaviors that the profession of nursing holds in esteem.

Amy disclosed to Sue that she missed the camaraderie that they shared when they initially co-taught. She told Sue that she felt hurt and belittled by her actions. Amy was careful to give specific details about the troubling behavior, rather than attacking Sue. She allowed
Sue time to respond to these perceptions. This meeting allowed Amy to make her feelings known to Sue and also allowed for Sue’s response. She learned that Sue experienced jealousy related to Amy’s quick successes and that she had been bypassed for the chair position. Sharing clear and thoughtful dialog allowed Amy and Sue to begin the process of restoring their collegial relationship.

6. Conclusion

Appreciating the concept of incivility and its damaging effects allows nursing faculty the opportunity to consider and implement civil, collegial resolutions. Nursing faculty should continue to work on clear and therapeutic communication to create transparency in their academic work environments. Incorporating and exercising standards for professional comportment within schools of nursing will empower faculty to take responsibility for their behaviors.

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References


