Incivility impacts on sense of belonging in undergraduate nursing students

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Implications for practice and research

- Professional nursing bodies should provide guidelines promoting positive relationships and cases of incivility should be addressed through Fitness to practice procedures.
- Further research is required to examine different clinical placement models to identify those which best promote a sense of belonging in students

Context

There is a chronic international shortage of nurses and those in the profession are ageing. There is increasing evidence of incivility within nursing defined as perception of verbal/nonverbal actions that demean, dismiss or exclude an individual resulting in psychosocial or psychological distress¹. Incivility within student nurse programmes can increase attrition and loss to the future nursing workforce. Nurse educational programmes need to be inclusive and promote a sense of belonging to prevent this from occurring. This study aimed to examine the frequency of incivility experienced by undergraduate nursing students and the relationship this had with the students' sense of belonging².

Methods

This was a cross-sectional study with 123 participants (power level of .80 with a .05 significance). Participants were recruited through convenience sampling of students based at a university and community college in New Mexico between Feb-May 2021. Data was collected using an online survey incorporating; Uncivil Behaviour in Clinical Nursing Education (UBCNE) scale³ and Sense of Belonging in Nursing School (SBNS) scale⁴. Both scales have good internal consistency reliability (UBCNE α =.88; SBNS α =.91). The study received ethical approval from the university and community college involved.

Demographic data on age, ethnicity, race, gender, marital status, self-reported height and weight, institution, semester, type of nursing programme and speciality location of placement was collected. Data was exported into SPSS (version 27) and analysed using non-parametric tests (Spearmans and Fisher's r-to-z transformation).

Findings

The findings identified a statistically significant inverse correlation between incivility and sense of belonging (r_s = .358, p= .001) with incivility from staff nurses in the clinical setting identified as the

most statistically significant (r_s = .586, p= .001). American Indian or Alaskan native students reported the highest mean frequency of incivility (1.25 ± .421) with Asian and male students reporting the lowest frequency of incivility (.367 ± .427 and .554 ±,493 respectively). There was also a significantly significant inverse relationship between incivility, sense of belonging and semester (semester 3: r_s .531, p= .023; semester 4: r_s = .373, p= .003; semester 5: r_s = .329 p = .031. The findings on Body Mass Index (BMI), incivility and sense of belonging did not highlight any significant differences (z= .654, p = .257).

Commentary

This research identifies an important link to student nurses' experiences of incivility (from staff nurses) and sense of belonging. Incivility is more associated with clinical practice (placements) related to increased staffing issues, burn out and frustration by nurses, which is then passed onto students. Clinical placements are complex in nature, as such developing collaborative placement models to create a better sense of belonging for students need to be considered⁵. The research notes that peer support systems increase a sense of belonging² as such these collaborative placement models need to incorporate aspects of peer support. Preparation of nursing students to manage incivility is important, not only requiring a focus on identifying unacceptable behaviour and coping mechanisms, but also challenging this behaviour in terms of professional ethical practice. However, we also argue there is a responsibility for us, as a nursing profession, to identify, call out and condone incivility. We argue that nursing professional bodies need a stronger stance in promoting civility and respect as part of our nursing values and when these are breeched it is managed as part of fitness to practice procedures. What is clear, is that incivility in nursing remains a prominent issue and prompt action is required. Developing a more robust approach to this, would increase students self-belonging and improve attrition in nursing education, ultimately boosting recruitment and retention in the nursing workforce.

References

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