

Experience of Workplace Incivility and Its Impact on Stress and Turnover Intention among the Nurses Working at a Hospital: Cross-Sectional Survey Approach

Abstract

Background: Incivility in the workplace drowns the mental health of the nurses and hampers the daily routine. The majority of the nurses working at hospitals were experiencing incivility. It affects the physical and psychological health of the nurses. Experience of workplace incivility and its impact on stress and turnover among nurses was discussed in this study. **Materials and Methods:** Cross-sectional survey approach was used to select 50 nurses by simple random sampling technique. Standard scales for incivility, stress, and pre-tested scale for the turnover intention was used to collect the data. **Result:** Nurses experience incivility in their workplace almost from all the sources. The majority (64%) of the staff nurses had a moderate level of stress and 30% had average intention to leave the present job. There was a positive relationship found between the experience of incivility and stress ($r = 0.43, p < 0.002$), stress, and turnover intention ($r = 0.40, p < 0.004$). **Conclusions:** Experience of incivility provokes stress among the nurses, and this may influence turnover intention.

Keywords: Incivility, nurses, personnel turnover, workplace

Introduction

Incivility is expected in the workplace now a day. Nursing is primarily a female-dominant profession. Their frustration and suppressed emotions are redirected to other nurses working along with them who have less dominance. So, they perform uncivil behavior as a routine job. Incivility is a mild form of workplace deviance nurses' not recognizing that neither they are recipients nor are instigators of workplace incivility. Nurse experiencing workplace incivility affects both psychological such as stress, job dissatisfaction, depression, burnout, and physical symptoms such as headache, sleeplessness, and loss of appetite. In extreme conditions, it increases the turnover among the nurses. Incidence of workplace incivility has a range between 67.5% and 90.4%.^[1] Furthermore, disrespect among peers account for values higher than 75%.^[1] Reported incidences are like the tip of the iceberg because many nurses are unaware of incivility; on the other hand, the majority of the nurses are not willing to report the incidence of incivility. Organizations and

leaders must be vigilant to prevent the conditions leading to disempowerment, stress, and turnover intentions as nurses are constantly challenged to adapt to complex and chaotic healthcare environments.^[2] In India, there is a lack of studies regarding the experience of incivility and its effect on the nurses. Hence, the study was conducted to assess the workplace incivility and its relationship between stress and turnover intention among the nurses.

Materials and Methods

This is a descriptive cross-sectional research aimed to assess the experience of workplace incivility among the staff nurses and find its relationship with the stress and turnover intention at a selected hospital, Bangalore, India in 2019. A Probability simple random sampling technique was used to choose the samples. After receiving the administrative approval from the hospital chosen, the researcher obtained the list of staff nurses. From the sampling frame, 50 participants were selected by simple random sampling using the lottery

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method. Selection criteria included nurses who had at least one year of experience in the hospital and registered nurses practicing in the selected setting. Exclusion criteria consisted of nurses working in the administrative post and supervisory category. Demographic variables such as age, sex, qualification, work experience, type of employment and work area were collected. Used the Nursing Incivility Scale (NIS) developed by Guidroz *et al.* (2010) to assess the experience of workplace incivility among the staff nurses after obtaining formal permission from the author^[3] and the stresses by using the Modified Nursing Stress Scale (MNSS) for the Indian population.^[4] The researcher prepared a six-item Turnover Intention Scale (TIS) ranging from 0 (never) to 3 (very frequently) that was used to assess the turnover intention.^[5] Study tools were given to the experts in nursing, psychiatry, and statistics for validation and incorporated their comments and suggestion. The reliability test indicated that all the variables were reliable ($r = 0.8$ to 0.9). Collected data were analyzed using IBM SPSS statistics for windows V.21.0. Demographic variables were analyzed using descriptive statistics, correlation, and Chi-square to determine the variables' relationships. Statistical significance was set to $p < 0.05$ (two-tailed).

Ethical considerations

The Institutional Ethics Committee approved the present study (YUEC Protocol No: 2017/038) and obtained written informed consent from all the participants after explaining the study's purpose and assuring confidentiality.

Results

Table 1 summarizes the demographic data of the participants. The mean [Standard Deviation (SD)] age and work experience of the respondents was 29.48 (5.83) and 7.17 (5.30). Regarding the frequency of uncivil behavior, the majority 30 (60%) of the participants rarely explore, 10 (20%) now and then, 6 (12%) several times per week, and only 2 (4%) said that they experienced the incivility almost daily. Maximum 33 (66%) expressed that patients, followed by immediate supervisor 28 (56%) and colleagues 15 (30%), were the perpetrator. Concerning the gender of the perpetrator, 19 (28%) of them said that females were the perpetrator, 7 (14%) said male the remaining 24 (48%) of them expressed that both were engaged in incivility. Table 2 summarized the experiences of workplace incivility among the participants. The study result shows that almost all the nurses perceived a moderate level of incivility from different sources. Mean (SD) of sources of nursing incivility scale, shows that majority of the staff nurses experienced the uncivil behavior from the co-worker (nurses) 34.10 (6.49) followed by patient 30.42 (6.03). The majority of 32 (64%) of the staff nurses perceived a moderate, while 15 (30%) had a moderate intention to leave the present job. Among the participants mean (SD) for the stress and turnover intention was 37.11 (13.55) and 5.72 (3.36), respectively.

Table 1: Demographic characteristics of the participants (n=50)

Demographic variable	Class	n (%)
Age in year	21-30	29 (58)
	31-40	18 (36)
	>40	03 (6)
Gender	Female	40 (80)
	Male	10 (20)
Qualification	GNM	19 (38)
	BSc(N*)	30 (60)
	MSc & above	01 (2)
Experience in years	1-5	25 (50)
	6-10	13 (26)
	11-15	08 (16)
	>15	04 (8)
Type of Employment	Temporary	25 (50)
	Permanent	22 (44)
	Contract	03 (6)
Area of Work	Ward	32 (64)
	Causality	07 (14)
	ICU	09 (18)
	Others	02 (4)

Table 2: Description of experience of workplace incivility among the staff nurses (n=50)

Components of NIS* scale	Mean (SD**)
General incivility	28.84 (4.15)
Nurses incivility	34.10 (6.49)
Supervisor incivility	22.58 (3.97)
Physician incivility	19.04 (3.95)
Patient incivility	30.42 (6.03)

*Nursing Incivility Scale; **Standard Deviation

Experience of incivility had a positive relationship between the stress ($r = 0.43$, $p < 0.002$) and turnover intention ($r = 0.40$, $p < 0.004$) among the nurses. It is also evident that the nurses' stress level due to incivility was positively correlated to turnover intention ($r = 0.40$, $p < 0.004$), which was statistically significant. Demographic variables of staff nurses like years of experience ($F_{1,49} = 542.0$, $p < 0.001$), type of employment ($F_{1,49} = 579.0$, $p < 0.007$) and area of work ($F_{1,49} = 165.5$, $p < 0.012$) were significantly associated with workplace incivility.

Discussion

The present study depicts that majority of the staff nurses experience incivility at their workplace with different frequencies. This result is consistent with the finding that 60.7% of the staff nurses experience some level of workplace incivility in the past year.^[6] Years of experience had a significant association with workplace incivility. It indicates that experienced nurses having unique positions are assertive and more confident to handle the effects of workplace incivility; on the other hand, the junior nurses

are vulnerable to such abuse. This result is similar to lateral violence rates, which were senior into junior nurses junior into senior and female versus male.^[7] It is evident that nurses were experiencing incivility from all sources. Similar findings were seen in another study that stated nurses were experiencing incivility from the co-worker, supervisor, and patients.^[8] Nurses were the core target of incivility within the multidisciplinary health care system. Patients and family members often target nurses.^[9,10] The Correlation matrix depicted a positive relationship between the experience of incivility and stress among nurses. Though incivility is a milder form of workplace violence, longer exposure to it causes stress. Stress leads to mental and physical discomfort among nurses and adversely affects the quality of nursing care. A similar finding was reported that there was a significant positive correlation between lateral violence and work-related stress.^[11] The present study depicted that general incivility and supervisor incivility had a significant relationship with turnover intention. Nurses' stress was positively correlated to turnover intention. Occupational stress was positively associated with turnover intention, and 35% of the staff said that they would move to another job if they found another job opportunity.^[12] The study was carried out in one setting with a limited number of staff nurses. Hence the generalizability of the study findings is limited.

Conclusion

Workplace incivility exists in the health care setting-thus, increasing stress and turnover intention among the nurses. Fostering civility at the workplace is essential to improve the commitment of nurses towards the patients and institute. The study findings have implications for policymakers to ensure the prevention of workplace incivility and promote a favorable work environment.

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Conflicts of interest

Nothing to declare.

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