

## A Mixed Method Study to assess the Perception of Nursing Faculty on Uncivilized Behavior among Nursing Students

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### Abstract

**Background:** Uncivilized behavior is a concern in higher education especially in professional education and which is predominantly seen in Nursing and Medical education. However, most recently faculties have complained of a steady increase in more disturbing behavior such as yelling at faculty, and physical hostility. There is an area of significance, leading nurse educators to believe that the level and seriousness of incivility has increased and it is having impact on teaching and learning environment.

**Objectives:** (1) To assess the perception of nursing faculty on uncivilized behavior among nursing students. (2) To describe the lived experience of nursing faculty regarding uncivilized behavior among nursing students.

**Methodology:** Mixed method research approach with the embedded research design was used for study. Data was collected from 20 nursing faculties of Rajasthan. Non probability purposive sampling (criterion sampling) techniques was used for selecting the samples. Incivility in nursing education survey (INR-R) developed by Clark was used to assess the nursing faculty perception about the uncivilized behavior of nursing students.

**Results:** Findings related to assessment of level of disruption among students in classroom/clinical showed that majority of (56.56%) students had fall in to "Sometimes" level of disruption, (17.50%) belongs to "Usually" level of disruption. Findings related to assessment of faculty experience regarding threatening

behavior of student's in classroom in past 12 months showed that the highest 80% of faculties were most frequently observed threatening behavior of students faced by the faculty were doing property damage by the students & general taunts or disrespects to others, lowest percentage (5%) and less frequently observed threatening behavior faced by the faculty were making inappropriate mails or message to the faculty and statements about having assess the weapons. Four themes emerged from the data were Factors contributing incivility among students, Types of student's incivility in classroom & clinical settings, Faculty incivility, Strategies for reduce incivility.

**Conclusion:** Nursing is a profession regarding humanity & caring aspects; inappropriate training or improper lifestyle or uncivilized behavior will affect the human life & professional life. Hence teachers are having a contributory role to assess and limit the incivility among their students.

**Keywords:** Mixed Research; Assess; Perception; Nursing faculty; Uncivilized behavior; Nursing student.

### Introduction

Nursing education is the formal learning and training to promote team based interprofessional health care which includes roles and responsibilities in the physical, emotional, and spiritual care of patients, as well as a mix of disciplines that helps the patient

recover and maintain his or her health.<sup>1</sup>

When politeness is the only thing that connects us to others, incivility takes on a new meaning. Incivility exists in many aspects of society, obstructs effective communication, and has negative consequences for interpersonal relationships and the learning environment.<sup>2</sup>

Uncivilized behavior is a concern in higher education especially in professional education and which is predominantly seen in Nursing and Medical education. This serious concern of incivility is seen as different forms such as use of offensive language, impolite behavior, hostility behavior in campus, malpractices during examinations, inattention in classes, absenteeism etc.<sup>3</sup>

Uncivilized behavior is defined as rude or disruptive behavior which include lack of courtesy, rudeness of manners and impoliteness or behavior which may range from misuse of cell phones, sarcastic comments that disrupts the teaching-learning environment and often result in psychological and physiological distress of the people involved and if left unaddressed may progress to threatening situation.<sup>4</sup>

Natarajan J, Muliira JK, Van der Colff J(2017) conducted a quantitative cross sectional survey on incidence and perception of nursing students, academic incivility in Oman. The data was obtained from a sample of 155 nursing students and 40 nursing faculty using the incivility in nursing education survey. The finding showed that the most common uncivil behaviors were acting bored or apathetic in class, holding conversations that distract others in class, using cell phones during class, arriving late for class, and being unprepared for class. There were significant differences between Nursing faculty and Nursing students perceived incidence of uncivil behaviors such as sleeping in class ( $p = 0.016$ ); not paying attention in class ( $p = 0.004$ ); refusing to answer direct questions ( $p = 0.013$ ); leaving class early ( $p = 0.000$ ); cutting or not coming to class ( $p = 0.024$ ); and creating tension by dominating class discussions ( $p = 0.002$ ).<sup>5</sup>

With the professional and personal experiences, the investigators felt that incivility is an area of increased concern in nursing education. Many times nursing educators complain about uncivilized behavior in their students which can weaken professional relationship and it can hinder teaching learning process. Uncivilized behavior can be minimized if proper action has taken by nurse educators. Uncivilized behavior can cause physical and psychological illness. There is lack of empirical studies on uncivilized behavior among nursing

students in Indian scenario. Hence the investigators felt that it is an emerging issue in nursing education to look at phenomenon of incivility among nursing students from nursing faculties' perspectives.

## Methodology

Mixed method research approach with Embedded research design was used in present research. Quantitative data was embedded within a qualitative methodology in the design. Phase one of the study was formed by quantitative paradigm by using non experimental, descriptive, exploratory approach. Phase two of the study was formed by qualitative paradigm using phenomenological approach. The present study was conducted in Rajasthan. The sample for the present study was nursing faculty who are working in Rajasthan. Non-probability purposive sampling (Criterion sampling) technique was used for the present study. Since the study is predominantly focused on qualitative approach, hence the sample size was 20. Nursing faculties who were having minimum 1 year of teaching experience was included in the study.

The tool consisted of section A included baseline variables such as age, gender, qualification, teaching experience, designation, classes conducted, teaching program, number of students etc, Section B included incivility in Nursing Education Survey developed by Clark Revised 2010 (INE-R)<sup>6</sup> which consisted of nursing faculty perception about uncivilized behavior of nursing students and list of student behavior. Section C was consisted of open ended questions about their live experience with incivility in nursing education. Institutional ethical approval was obtained and data was collected from Institutional Ethical and Research Committee. Data was collected through semi structured questionnaire and direct interview as it included open ended questions as well. Data was collected from 2nd January to 23rd January. In phase 1 ie quantitative analysis, data was analyzed by using descriptive statistics. In phase 2, ie qualitative analysis, data was analyzed by using Colaizzi's method. The data was organized and transcribed. Each statement were read and significant statements were extracted and spelt out the meaning of each significant statements (i.e formulate meanings). Finally the formulated meanings were organized into cluster of themes and subthemes.

## Results

### *Description of baseline variables*

Highest percentage (70%) were in the age group of 26-30 years, majority of (70%) faculties were male,

maximum of them had qualified M.Sc. Nursing (45%), highest percentage (55%) were having 1-3 years of teaching experience, maximum (50%) of them were tutors, maximum (85%) the faculty were teaching B.Sc. Nursing course, majority (85%) of them had worked previously in 1-2 institution, maximum(75%) faculties had 5-10 hours of classes per week.

**Assessment of faculties experience regarding student's incivility in classroom.**

a. Level of disruption among students in classroom/clinical.

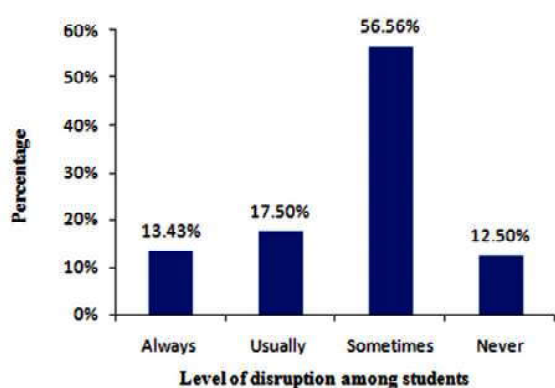


Fig. 1: Bar diagram showing percentage wise distribution of level of disruption among students in classroom/clinical.

Percentage wise distribution of level of disruption among students in classroom/clinical showing that highest percentage (56.56%) had fall in to "Sometimes" level of disruption, (17.50%) belongs to "Usually" level of disruption, (13.43%) had fall in "Always" level of disruption and only (12.50%) faculty said they "Never" felt level of disruption.

b. Uncivilized behavior of students experienced by faculty in past 12 months.

Table 1: Table showing percentage wise distribution of uncivilized behavior of students experience by faculty in past 12 months

Items	N=20			
	O	U	S	N
Acting bored or apathetic	0%	30%	70%	0%
Making disapproving groans	0%	40%	55%	5%
Making sarcastic remarks or gestures (staged yawning, eye rolling)	5%	25%	55%	15%
Sleeping in class	5%	35%	40%	20%
Not paying attention in class (doing work for other classes, reading a newspaper, not taking notes)	10%	30%	45%	15%
Holding conversation that distract you or other students	15%	25%	40%	20%
Refusing to answer direct questions	0%	25%	50%	25%

Using computer during class for purposes not related to the class	0%	0%	25%	75%
Using cell Phone during Class	10%	25%	25%	25%
Arriving late for class	10%	30%	50%	10%
Leaving early class	5%	15%	55%	25%
Cutting class	5%	20%	60%	15%
Being unprepared for class	15%	20%	60%	5%
Cheating on Exams or quizzes	10%	30%	50%	10%
Demanding make up exam, extensions grade changes or Other special favors	0%	15%	80%	5%

\*O= Often, U= Usually, S= sometime, N= Never

Table No. 1 showed about the uncivilized behaviors exhibited by students in the last 12 month according to faculty experience showed that 15% of them often hold conversations that distracts, being unprepared for the class & creating tension by dominating class discussion, 40% were usually making disapproving groans and 35% were sleeping in the class.

c. Most frequent threatening behavior of student faced by faculty in classroom/clinical in past 12 months.

Table 2: Table showing percentage wise distribution of most frequent threatening behavior of student faced by faculty in classroom/clinical in past 12 months

N= 20

Threatening behaviors	Frequency	Percentage
General taunts or disrespect to other students	16	80%
General taunts or disrespect to faculty	15	75%
Challenges to faculty knowledge or credibility	9	45%
Harassing comments (racial, ethnic, gender) directed at students.	12	60%
Harassing comments (racial, ethnic, gender) directed at faculty	3	15%
Vulgarity directed at students	11	55%
Vulgarity directed at faculty	5	25%
Inappropriate emails / Messages to other Students	15	75%
Inappropriate emails/messages to faculty	1	5%
Threats of physical harm against other students	13	65%
Threats of physical harm against Faculty	6	30%
Property damage	16	80%
Statements about having access to weapons	1	5%

The most frequently (80%) observed threatening behavior of students faced by the faculty were doing property damage by the students & general taunts or disrespects to others and less frequently (5%) observed threatening behavior faced by the faculty were making inappropriate mails or message to the faculty and statements about having assess the weapons.

**Qualitative analysis of description of lived perception & experience of nursing faculty regarding uncivilized behavior among nursing students.**

**Table 3:** Table showing Thematic representation on uncivilized behavior among nursing students.

Emerging Themes	Subthemes
Factors contributing incivility among Students	Disruption in familial and social environment
	Negative impact of individuality
	Inappropriate relationship among peers
Types of student's incivility in classroom & clinical setting	Negative influence of faculty
	Poor managerial support and policy
	Unruly behavior in the classroom
Faculty incivility	Misconduct behavior of student
	Malpractice in the exams
	Disregard to the faculty
	Negative attitude towards the institution
	Inappropriate behavior in clinical area
Strategies to reduce incivility	Undesirable behaviors towards the students in classroom & clinical
	Dysfunctional relationship with the staff
	Unreliable attitude towards the institution
	Unacceptable personality of faculty
	Institutional plan of proposed action
	Faculties strategies
	Student's positive approach

**Theme 1: Factors contributing incivility among students** - Participants had experienced various factors that contribute incivility among students.

**Subtheme 1.1** Disruption in familial and social environment : *"In my opinion the provoking factors of incivility among student is poor schooling of the students, inappropriate familial and cultural background, locality of the student can also add up to their uncivilized behavior as family is the basic area where the child are grown up. (Transcript no. 14, line no. 63-66, page no. 69)"*

**Subtheme 1.2** Negative impact of individuality: Out of 20 faculties, 3 of them had said that frustration & inappropriate behavior of students were contributing uncivilized behavior.

**Subtheme 1.3** Inappropriate relationship among peers: Out of 20 faculties, 14 had reported that bad company of peer group and peer pressure for wrong habits, attitude and behavior can lead to incivility.

*"Another factor which can also contribute can be influence of wrong company of students & substance abuse among them. (Transcript no. 16, line no. 76-77, pageno.69)"*

**Subtheme 1.4** Negative influence of faculty: *"According to my opinion the teacher must go in class with full preparation when the teacher is not ready & strict with the student, the students become uncivilized. (Transcript no.5, line no.21-23, page no.67)"*

**Subtheme 1.5** Poor managerial support and policy:- *"According to my opinion management supports for negative things & institutional poor disciplinary policy can provoke students to contribute incivility. (Transcript no. 4, line no. 19-20, page no.67)"*

**Theme 2:** Types of student's incivility in classroom & clinical setting

**Subtheme 2.1** Unruly behavior in the classroom: 16 faculties have revealed that student never show concentration in class, yawning and sleeping in class hours, checking mobile phone during class, act bored or apathetic, cheating in exam & property damage. *"In my opinion the other behaviors can be making disapproving groans, making sarcastic remarks or gestures and holding conversations that distract faculty or other students. (Transcript no. 3, line no. 120-121, page no.81)"*

**Subtheme 2.2** Misconduct behavior of student: 10 of them have reported that the student were acting rude and being arrogant, aggressive & justify their mistake and not accepting their mistakes.

**Subtheme 2.3** Malpractice in the exams: Majority of the faculty indicated that students did cheating in exams by various methods. *"In my opinion doing cheating in exams & using mobile phones in the washroom during the exams and in classroom are very commonly seen malpractice behavior. (Transcript no.2, line no. 109-111, page no.81)"*

**Subtheme 2.4** Disregard to the faculty: *"In my point of view arguing with teacher, disrespect to female faculty and giving back answers commonly seen. (Transcript no. 2, line no. 108-109, page no.81)"* *"Eoen when the teacher asks something about the topic they don't reply to it and challenge the teacher's knowledge. (Transcript no.8, line no.155-156, page no.82)"*

**Subtheme 2.5** Negative attitude towards the institution: *"In my point of view they do classroom & college property damage E.g. chair, table, switchboard, whiteboard and walls. (Transcript no. 2, line no. 115, page no.81)"*

**Subtheme 2.6** Inappropriate behavior in clinical area: Majority of the faculty had said that student are using mobile phone in clinical and arriving late or bunk from the duty. *"In my opinion they are arguing with the staff nurse in clinical areas and being aggressive. (Transcript no. 2, line no. 113-114, page no. 81)"*

**Theme 3: Faculty contributes to incivility within the academic environment.**

**Subtheme 3.1** Undesirable behaviors towards the students in classroom & clinical: Majority of the faculty also said that faculty handle the student with prior judgment, shares the management confidential decisions, misguide the students, connect with the students on social sites and enter in their personal life. Out of 20 faculties, 14 had said that faculty contribute to incivility by ignoring the students, not being very strict with the students, maintaining lack of discipline, using inappropriate words or language and doing partiality among the students in classroom & clinical. *"In my opinion they sometimes intentionally treat the student in bad ways and take revenge from them and also support the students in negative things and become too much friendly with the students. (Transcript no.2, line no. 251-253, page no. 104)"*

**Subtheme 3.2** Dysfunctional relationship with the staff:- Faculties reported that they are disrespecting them, involve them in wrong activities, criticizing them, not helping the others and take advantage of others.

**Subtheme 3.3** Unreliable attitude towards the institution: Majority of the faculty had reported that the faculty shows incivility towards management by showing negative attitudes towards the institution, misbehavior towards management and not following or obeying the orders and policy.

**Subtheme 3.4** Unacceptable personality of faculty: *"In my opinion the other behavior among the faculty were they are not serious in upgrading themselves, having inappropriate dress sense and sometime using bad language in college premises. (Transcript no. 5, line no. 281-282, page no. 105)"*

**Theme 4: Faculty perception regarding strategies to reduce uncivilized behaviors**

**Subtheme 4.1** Institutional plan of proposed action:- Majority of the faculty have said that the managing strategies can be maintaining discipline & punctuality, feedback system for students & faculty, meditation, yoga, spiritual classes, recreational & educational visit, reward & the reinforcement to students for any good things and having a code of conduct. *"In my point of view disciplinary pattern should be followed to implement by college guidance and counseling can help the student to reduce incivility and regular parent-teacher meeting & faculty meeting should be organized. (Transcript no. 19, line no. 639-643, page no.136)"* *"In my opinion the managing strategies for reducing uncivilized behavior are providing guidance & counseling, providing behavioral & relaxation therapy, various co-curricular activities can be planned, recreational activities, role-play, discussion sessions and*

*communication training. (Transcript no. 10, line no. 528-533, page no. 133)"*

**Subtheme 4.2** Faculties strategies: *"In my opinion the managing strategies can be listen to students with a respectful manner, show empathetic behavior towards students and don't be preoccupied with thought. (Transcript no. 7, line no. 498-500, page no. 132-133)"*.

**Subtheme 4.3** Student's positive approach- Out of 20, 13 of the faculty had advised that the students should communicate with the teachers, follow the discipline, there should be no prior judgment of the faculty, code of conduct should be followed and students should believe on their teachers and should use civil language.

## Discussion

The types of uncivilized behavior exhibited by the students according to faculty experience were 45% were usually doing cheating in exams, 95% were sometimes hold conversation that distract. The finding are also supported by another study conducted by Anil Sharma (2018) who found that 90.9% of nurse educators experienced frequent yawning by student in class 30% were cheating in exams & 80% of them experienced students talking to other students at inappropriate time or during session.<sup>7</sup>

Faculties experienced about 80% of students were doing property damage and general taunts or disrespect to other. The findings are also supported by another study conducted by Liang H, Flisher AJ, Lombard CJ(2007), the finding revealed that over a third 36.3% of students were involved in bullying behavior & property damage and 8.2% as bullies, 19.3% as victims and 8.7% as bully victims.<sup>8</sup>

Factors contributing incivility among students were Disruption in familial and social environment, Negative impact of individuality, Inappropriate relationship among peers, Negative influence of faculty & Poor managerial support and policy. The findings are supported by another study conducted by Vink H, Adejumo O(2015) on factors contributing to incivility amongst students at a South African nursing school indicated that the educators had varying but often similar perspectives on which factor contribute to incivility among nursing students. The three themes that emerged from the data were academic, psycho-pathological and social factors. Nurse educators probably often found it difficult to manage students' behaviours, as they would not be able to identify who the perpetrators were due to the high student numbers per class.<sup>9</sup>

Faculty incivility were another theme emerged in

the study in which the subthemes were Undesirable behaviors towards the students in classroom & clinical, Dysfunctional relationship with the staff, Unreliable attitude towards the institution & Unacceptable personality of faculty. The findings are also supported by another study conducted by Lasiter S, Marchiondo L, Marchiondo K (2011) on Student narratives of faculty incivility the narrative analysis about their "worst experience" of negative faculty behavior. Four categories were identified: "In front of someone," "Talked to others about me," "Made me feel stupid," and "I felt belittled." Incivility had a profound effect on students which causes academic pressure and interferes with their learning and safe clinical performance.<sup>10</sup>

Strategies for reduce incivility in were Institutional plan of proposed action, Student's positive approach & Faculties strategies. The findings are also supported by other study conducted by Patrick J Morrissette (2000) on reducing incivility in the university/college, classroom who found that the strategies are effective communication skills. Spelling out academic & behavioral expectations in the syllabus, arranging for midterm teaching feedback, arranging for peer observation and review, establishing collaborative learning environment, setting a good example, reframing potential conflicts, establishing students grievance process and re-engaging students.<sup>11</sup>

## Conclusion

These days incivility is growing faster and having greatest concern among students since from the childhood, if the child is having inappropriate upbringing by the parents, the parents having lack of awareness about the incivility and poor background of child affects the behavior of child. Recently more high tech approach is used by the student that affects their behavior and involved them in uncivilized behavior. Nursing is a profession regarding humanity & caring aspects; inappropriate training or improper lifestyle or uncivilized behavior will affect the human life & professional life. Hence teachers are having a contributory role to assess and limit the incivility among their students.

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