Chapter 4
Suffering in Isolation

ABSTRACT

Unhealthy workplace environments have unfortunately been associated with the profession of nursing. Staffing shortages and long hours worked with high acuity patient caseloads can cause nursing professionals to feel overwhelmed, stressed, and anxious. Cultures of incivility can be accepted within some workplace environments as being normal. Nurse leaders that knowingly ignore patterns of disruptive behaviors by the nursing staff contribute to unit-based (and departmental) dysfunction. Perpetrators feel comfortable in continuing bullying behaviors because they have no fear of retribution. In these environments, nurse leaders themselves may engage in bullying and incivility behaviors. Chapter 4 provides nurses with instructions on how to report uncivil conduct that is not resolving and seek action against the perpetrator when mediation is not an option.

INTRODUCTION

Nurses experiencing bullying in the workplace can feel alone and isolated. It can be difficult for nurses to confide in their co-workers that they have been impacted by bullying by another nurse. Fear of being judged by others, may cause the affected nurse to not share their experience of being bullied. It is important for nurses affected by bullying to realize that they themselves are not weak and that incivility is not synonymous with a healthy workplace environment.

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Shame can be a factor in the decision for nurses to maintain silence and isolate themselves when being bullied. Felblinger (2008) noted that some nurses tolerate uncivil conduct and do so without insight into their own pattern(s) of behavior. Perpetrators may utilize unacknowledged threats and attacks on their victim’s self-esteem and self-worth in front of others as a means to promote shaming (Dzurec, Kennison, & Albataineh, 2014). The affected nurse, not responding to the perpetrator’s attack, may inadvertently, give permission for the bullying to continue. Thus permitting incivility to remain in the workplace.

The toleration of unhealthy work environments has unfortunately been associated with the profession of nursing. Long hours and working short staffed while caring for patients with complex medical and surgical problems, can cause nurses to be frustrated and feel disempowered. Workplace violence can also affect nurses and other healthcare worker’s safety, when co-workers, domestic partners, patients and patients’ family members threaten physical harm to nurses working in health care environments (OSHA, 2016). Nurses must be provided education by their employers, on the dangers of not reporting incivility in the work environment, so that they are empowered to protect themselves and other nurses from harm.

Cultures of Incivility

Within workplaces with cultures of incivility, bullying is tolerated and viewed as the norm. Persons who report bullying in these workplaces are treated as if they are a part of the problem and not the solution. It is important that victims of bullying realize that bullying occurring over a period of time, for example, over a year, is not an issue of perception, but one of deliberate targeting of a person or persons with the intention of emotional or physical harm.

When victims of incivility are working within workplaces that tolerate cultures of incivility, it is important to understand that when incidences of bullying are reported, these incidences should be documented in writing. The latter establishes a distinct pattern of incivility. Any persons that observed the bullying should be included in investigations. Although difficult to recall the events of bullying, nurses that are victims can potentially create a dialogue within workplace cultures that have in the past, chosen to ignore issues of incivility.
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