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Male Nurse Educators' Lived Experiences With Nursing Student Incivility

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MALE NURSE EDUCATORS' LIVED EXPERIENCES WITH

NURSING STUDENT INCIVILITY

A Dissertation

Submitted to the School of Graduate Studies and Research

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Requirements for the Degree

Doctor of Education

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Indiana University of Pennsylvania

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Title: Male Nurse Educators' Lived Experiences With Nursing Student Incivility

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Incivility in the nursing literature is a term used to identify situations where distractions or discord invade the learning atmosphere. Nursing student incivility is an ongoing problem in nursing education and may cause disruption or conflict in the learning environment. Students deserve a learning environment free of distractions or harassment. Additionally, the instructor should be able to teach in a productive, positive learning environment.

Many researchers have examined the impact of incivility but the lived experience of male nurse educators has not been examined. This study examined incidents of incivility to study the lived experiences of male nurse educators, as well as the effect nursing student incivility has on pedagogy and job satisfaction.

A qualitative phenomenological approach was used to evaluate the data. Nine male nurse educators in the northeastern United States met the inclusion criteria for the study. Interviews were conducted and transcribed verbatim by the researcher. Codes were assigned and were analyzed into themes. Themes were used to describe and understand the lived experiences of male nurse educators who have experienced nursing student incivility.

The results of the study revealed that male nurse educators experienced many of the same uncivil events with the similar physical and emotional symptoms as found in previous studies. Intuitively, or through trial and error, the study participants implemented many of the comparable techniques to prevent or control student incivility as found in the literature. Where the study findings differed, though, was the aftermath of student incivility. Male nurse educators

did not take the same ownership responsibility nor have as many physical and emotional symptoms as female nurse educators. Nursing student incivility did not impact job satisfaction or inspire any participant to leave nursing education. This study discovered that many of the male nurse educators acted as unofficial mentors to male nursing students to promote male student retention in the nursing profession.

These study findings provide a better understanding of the lived experiences of the male nurse educator who has experienced nursing student incivility. This information may be used by faculty and administrators to improve their understanding and management of nursing student incivility. The study results suggest a need for further research in the impact of a male nurse educator mentor on the retention and graduation of the male student nurse.

DEDICATION

This dissertation is dedicated to my grandmother, Ruth Rocca, who supported and encouraged me even though she couldn't understand why I kept going back to school. I also dedicate this dissertation to my mother, Lory Schorting, whose help at the beginning of the project was invaluable. Her role as my editor and my support ended when she lost her life after a sudden serious illness. I dedicate this dissertation to these two hard working women who were instrumental in my life.

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CHAPTER 1

STATEMENT OF THE PROBLEM

A critical element in any learning environment is an atmosphere where the student can learn free of distractions or harassment. Additionally, the instructor should be able to teach in a productive, positive learning environment. Clark and Springer (2007a) identified the importance and necessity of a safe teaching and learning environment, and the current nursing research suggests that the learning environment is negatively impacted when there is uncivil behavior from one or more parties (Carr, Pitt, Perrell, & Recchia, 2016; Clark, 2008d; Kolanko et al.,2006; Luparell 2003, 2004; Williamson, 2011).

Incivility in the nursing literature is a term used to identify situations where distractions or discord invade the learning atmosphere. This behavior is not a new problem at colleges and universities. For example, in the 1800s college students threw stones at professors' classroom windows or they might drench a professor in ink and water to express their displeasure (Holton, 1999). Today, many believe uncivil acts are increasing on college campuses. Typically, uncivil behaviors are not violent but they are still disruptive. Uncivil behaviors disrupt the learning environment for the teacher, for the student, or for both. Although these behaviors typically are non-violent and are more of an irritant or annoyance, some behaviors may erupt in anger and have the potential to incite violence.

Early nursing researchers did not use the term incivility. The terms used by Gaberson (1997) and Hilbert (1987, 1988) were academic dishonesty or unethical classroom and clinical behaviors. The behaviors identified by these researchers were behaviors related to cheating, copying, plagiarism, students working together, and the like. Nearly all the behaviors identified by these researchers were later also identified by Clark (2008a, 2008b, 2008c, 2008d) Luparell

(2003, 2004, 2005, 2011) and Clark and Springer (2007a, 2007b). Additionally, these researchers identified behaviors by students that could be considered discourteous and disruptive which may include, but not be limited to talking during class, use of cellular phones, use of computers, eye rolling, arriving to class late, leaving class early, and moaning. Potentially disruptive behaviors are now identified as academic incivility or student academic incivility.

As reported by early nursing researchers incivility is increasing on college campuses (Lashley & deMenses, 2001). Additionally, in several studies Clark (2008a, 2008b, 2008c, 2008d) reported consistently that incivility was a moderate to severe problem. Further studies by Clark and Springer (2010) also supported earlier findings that nursing student incivility was a moderate to a severe problem. Most common uncivil behaviors included distracting conversations, computer use, requests for make-up exams or changes in grades, and cheating.

Ramifications of nursing student incivility may extend beyond the nursing classroom. Nursing students have clinical experiences to further their education, allow the student to connect theory with practice, and to develop professional attitudes (Anthony & Yastik, 2011; Clark & Springer, 2010; Fontana, 2009; Hunt & Marini, 2012; Levitt-Jones, Lathlean, Higgins, & McMillan, 2009; Marchiondo, Marchiondo, & Lassiter, 2010, McCabe, 2009). McCrink (2010) studied uncivil student behaviors in the clinical environment and found students reported vital signs that were not taken, medications that were not given, or treatments that were not completed. These omissions have the potential to jeopardize a patient's safety and recovery. Although clinical experiences are necessary and important these experiences should never compromise the safety of a patient (Clark & Springer, 2010; Ehrmann, 2005; Krueger, 2014). An important factor in student clinical experiences is the behavior of the student. A case could

be made that if a student is unethical, decisions made on behalf of the patient may be compromised (Anthony & Yastik, 2011; Fontana, 2009; Kececi et al., 2011; McCabe, 2009).

The future of the profession of nursing may also be impacted by nursing student incivility. Many nursing researchers have expressed concerns that a student who is unethical may display behaviors as a nurse that are unethical (Boykins & Gilmore, 2012; Condon, 2015; Clark & Athen, 2012; Clark & Springer, 2007a, 2007b, 2010; Kureger, 2014; Langone, 2007; Luparell, 2005, 2011; Suplee, Lachman, Siebert, & Anselmi, 2008). In a review of relevant literature Simpson (2012) suggests that if students are uncivil, then their actions as practitioners can be adversely impacted. Langone (2007) proposed that fostering ethical behaviors in students is essential to safeguard the veracity of the nursing profession.

Few studies include male nurse educators' perceptions; therefore, this study sought to identify those perceptions. This study attempts to fill this gap in the research by examining the lived experiences of male nurse educators. The aftermath of an uncivil event may have long-lasting effects upon the victim. Many researchers have examined the impact of incivility but the lived experience of male nurse educators has not been examined. This study examined incidents of incivility, its impact on the male nurse educator, as well as the effect on teaching pedagogy and job satisfaction. The information will be documented in a first-person perspective from male nurse educators who have experienced student incivility.

Theoretical Framework

In 1958, Fritz Heider introduced the concept of attribution theory. Per Heider, attribution theory flows from the term "interpersonal relations." He described interpersonal relations as interactions between at least two people. Heider (1958) expanded his idea by illustrating interpersonal relations as, "how one person thinks and feels about another person, how he

perceives him and what he does to him, what he expects him to do or think, how he reacts to the actions of the other" (p. 1). Gaier (2015) summarized attribution theory as a framework that can be used to identify, explain, and understand why people act or behave in a certain way. Therefore, through the use of attribution theory, one can begin to understand why people behave in certain ways. It is important to understand one's behavior and the behavior of others because these experiences can influence our future thoughts and actions. Heider (1958) describes the conclusion one comes to as a result of a person's behavior as attributions.

Attribution theory is based upon three assumptions (Allen, Long, O'Mara, and Judd, 2008; Heider, 1958). The first assumption is that as humans we attempt to understand the behavior of our self and of others. The second assumption is that when one observes behavior of self or of others one spontaneously ascribes a meaning to the behavior. Lastly, based upon previous experiences, we come to an understanding of the behavior. Attribution theory supposes that when a student behaves in an uncivil manner, a nurse educator attempts to understand or make sense of the behavior. For example, a student arrives late to class. The nurse educator responds to the incident, reviews the incident, and develops a conclusion or understanding of the incident. The conclusion or understanding of the situation is the attribute. In this case, the nurse educator may believe that the student was too lazy to arrive on time or perhaps the student is indifferent to the class and is not motivated to arrive on time. The actual problem could have been a flat tire, the student stopped to help a stranded motorist, or actually there are many possible valid or invalid reasons for the late arrival. The attribute that the nurse educator may ascribe to the situation could be correct or incorrect; but, if the nurse educator views the event as invalid, the event may then be perceived as uncivil. The conclusions that are made because of nursing student incivility are important to recognize so that when the nurse educator is faced

with student incivility on another occasion, the response of the nurse educator will reflect this understanding (Tipper & Bach, 2008). Exploring the lived experience and gaining insight on the experience of male nurse educators will result in a greater appreciation of how the male nurse educator views the behavior and how he may respond to the behavior in the future.

Significance of the Study

Incivility in nursing education can have a negative impact on both the teacher and the student. Uncivil behavior may cause a disruption in the learning environment which can diminish the student's ability to learn, as well as to increase the dissatisfaction of the teacher (Barrett, Rubaii-Barrett, & Pelkowski, 2010; Boice, 1996; Thomas, 2003). Disrupted student – faculty relationships may also result from student incivility and have a negative impact on the teaching learning environment (Clark & Springer, 2007a, 2007b). Feldman (1999) goes as far as to suggest that civility in the classroom is a requirement for student learning.

Nursing researchers have identified the disruptive consequences of incivility to the learning environment (Backer, 2015; Barret et al., 2010; Boice, 1996; Carr, et al., 2016; Clark, 2008d; Clark & Springer, 2007a, 2007b; Kolenko et al., 2006; Luparell, 2003, 2004; Williamson, 2011; Thomas, 2003), and nursing students and faculty have identified incivility as a moderate to severe problem (Clark & Springer, 2007a, 2007b; Clark, 2008c). Some researchers have significant concerns that student incivility could negatively affect patient safety (Anthony & Yastik, 2011; Clark, 2011; Clark & Davis Kenaley, 2011; Condon 2015; Griffin & Clark, 2014).

The literature search of this research identified many studies surrounding the topic of nursing incivility. Many of these studies were quantitative in nature, and, the results in the quantitative studies identified various uncivil behaviors, as well as the frequency of the uncivil behaviors as well as the severity of the problem of incivility. In some studies, open-ended

questions have been included to solicit comments not conducive to Likert type scales. Responses that describe the lived experiences have been limited in these quantitative or mixed method studies. There have been two qualitative studies that have looked at the lived experiences of nurse educators; however, each researcher has approached the problem from a different perspective (Luparell, 2003; Williamson, 2011). The male nurse educator perspective remains missing because the majority of the qualitative studies have queried female nurse educators. There is a gap in the literature with respect to the male viewpoint on student incivility. This study attempts to fill the gap and gain insight on male nurse educators' experiences with student incivility. In addition, this study attempts to understand similarities and differences between the experiences of male nurse educators and female nurse educators to improve the management, prevention, and understanding of student incivility.

Purpose of the Study

The purpose of this qualitative study was to explore the lived experiences and the impact of nursing student incivility on male nurse educators in the northeastern United States. A phenomenological approach was used to explore in depth the experiences of incivility of the participants. The purpose of this study was also to understand the experiences of male nurse educators to improve the management, prevention, and understanding of nursing student incivility.

Methodology

A qualitative phenomenological approach was used in this study. Phenomenological approaches are often used by nurse researchers when study of the lived experience of more than one person is desired (Creswell, 2007; Mc-Connell-Henry, Chapman & Francis, 2009). This approach allows participant's to describe in their own words their lived experiences in great

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detail. Then, the researcher attempts to find the commonalities in the lived experiences of the participants.   Data with this rich level of detail are difficult to capture using a quantitative approach.

As stated earlier, an extensive review of the literature was conducted and most of the research on student incivility centered on female nurse educators. The viewpoint of male nurse educators was missing. To fill a gap in the literature and examine the similarities and dissimilarities between male and female nurse educators, the researcher sought to study the lived experiences of male nurse educators. Requests were sent via e-mail to male nurse educators in the northeastern United States. Names and e-mail addresses were obtained from nursing school websites. If the educator met the inclusion criteria and he was willing to participate in the study, personal interviews were arranged at the convenience of the participant.

Personal interviews were conducted with nine male nurse educators in the northeastern United States. Interviews were conducted using an interview protocol. A journal was kept by the researcher with personal reactions to each interview. This journal was labeled as personal responses and kept separately from interview data.   Interviews were audiotaped and were transcribed verbatim by the researcher. Transcribed interviews were read and re-read; codes were identified and kept as a part of a master list. The codes were eventually clustered into themes that described the lived experiences of male nurse educators. Interviews continued to the point of saturation. As a form of member checking, interviews were sent to the participants to check for accuracy or correct any misinformation. After the themes were developed, data were entered into Nvivo. Each theme, or as it is referred to in Nvivo, each "node" was printed. Each node retained the identifying data allowing only data about that theme to be printed and

analyzed. The researcher used the information from the nodes/themes to describe, interpret, and understand the lived experiences of male nurse educators.

Research Questions

The central question in this research study was "What is the lived experience of a male nurse educator who has experienced nursing student incivility?" Sub questions were:

1. How do male nurse educators describe their experiences with nursing student incivility?

2. Does nursing student incivility impact the classroom teaching strategies of male nurse educators? If so, how?

3. Does nursing student incivility impact the job satisfaction of male nurse educators? If so, how?

Limitations

Limitations to this research study included:

1. This study was limited to male nurse educators in the northeastern United States and their responses may not reflect all male nurse educators.

2. All participants were Caucasian males and their responses may not reflect responses of males of other races or ethnic groups.

3. No information was sought regarding the institutions incivility policies or codes of conduct, or if the institution had incivility policies or codes of conduct.

4. This study is limited to students of the millennial generation. Students from generation Z haven't yet had an impact on nursing faculty at this point. The impact of generation Z students on student incivility is unknown.

5. The participants taught in three different program types—RN to BSN, traditional BSN, and second degree BSN. Experiences of the nurse educators may not be consistent

through the different program types. In addition, there was no representation was available from associate degree programs.

6. The responses are one-sided, student perspectives of incivility of nurse educators have been sought in other studies, but no study has looked at student perspectives of male nurse educators.

7. Male nurse educators in this study did not always remember past uncivil experiences in great detail and the descriptions of the events at times reflect abbreviated versions of the experiences.

8. The researcher is a nurse educator and in contact with nursing students in the classroom and clinical environments. The researcher has experienced student incivility in the class room (sleeping and using a computer for non-class related activities) and in the clinical environment (yelling and disrespectful behavior). These behaviors have been uncomfortable and disturbing.

Operational Definitions and Terms

Incivility has been defined by Gallo (2012) as "the disrespect for others, the inability or unwillingness to listen to other's points of view and seek common ground, and not appreciating relevance of social discourse" (p. 62).

Classroom incivility or academic incivility is defined by Feldman (2001) as "any action that interferes with a harmonious and cooperative learning atmosphere in the classroom" (p. 137).

Incivility in nursing education is defined by Clark, Farnsworth, and Landrum (2009) as "rude or disruptive behaviors which often result in psychological or physiological distress for the people involved," (p.7).

These definitions guided the researcher in the development of this research study. Other terms found in the literature are congruent with student incivility. Examples of terms that are congruent with student incivility include academic misconduct, academic dishonesty, academic fraud, unethical behaviors, aggressive behaviors, bullying, and antisocial classroom behavior among others. There are a wide range of terms used in that literature that describe student incivility and the terminology has not been standardized. These definitions were used as a guide for the researcher, but the participants were the ultimate decision makers when it came to the definition of student incivility. As a part of the phenomenological research process, it was important to allow the words and the lived experiences of the participants determine the meaning of the term student incivility. The term nursing student incivility was used in this study, but research was not excluded because of a lack of consistency in the literature with regards to a definition. In order to understand the participants' operational definition of incivility and the impact of incivility on them, their responses were used to guide the researcher in the quest for understanding on how men may be impacted by nursing student incivility.

Chapter Summary

This chapter addressed the following subject areas: statement of the problem, theoretical framework, significance of the study, purpose, methodology, research questions, limitations, definitions, and summary. The purpose of this study was to investigate male nurse educators' lived experiences and perspectives in college or university settings with regard to nursing student incivility. This study attempts to fill the gap of previous research which examined primarily female nurse educators. It is unclear how student incivility impacts male nurse educators, if at all. Responses and feelings about nursing student incivility by male nurse educators will add to the body of knowledge on this topic.

Chapter two consists of a literature review which focuses on the qualitative and quantitative studies to date on student incivility, the frequency of uncivil behaviors, the behaviors that make up incivility, and the aftermath of student incivility. The second chapter will also focus on the need to address incivility for the future of nursing and safe patient care. Generational issues that may impact incivility will also be considered. Chapter three will discuss the research design with a goal of examining the topic of student incivility from the viewpoint of the male nurse educator. The focus of chapter four will be the words and of the experiences of the male nurse educators. Findings from the participants will be detailed. Chapter five will include a discussion of the results from the participants, conclusions, and implications for future research. These findings will expand the body of knowledge from the male perception about nursing student incivility.

CHAPTER TWO

REVIEW OF THE LITERATURE

The primary purpose of this study was to explore the lived experiences of male nurse educators with nursing student incivility. By describing the lived experience, it is hoped that a greater understanding of the male nurse educator's experiences with regard to uncivil events will be gained, as well as an improved understanding of the nature and causation assigned to the uncivil event to male nurse educators. Nursing student incivility is not a new occurrence and it has been studied by many researchers (Lashley & deMeneses, 2001; Olive, 2006; Clark, 2008a, 2008b, 2008c, 2008d; Williamson, 2011). This review provides a context for understanding the concept of incivility from current information and acquired from studies of primarily female nurse educators.

A literature search was conducted using the following electronic databases: Cumulative Index for Nursing and Allied Health (CINAHL), Education Resource Information Center (ERIC), EBSCO Host, and full text ProQuest. Search terms included incivility, academic incivility, academic dishonesty, nursing incivility, workplace incivility, lateral violence, horizontal violence, bullying, academic bullying, millennial students, and generation Z students. The preliminary literature search revealed little published empirical research that specifically addressed the experiences of male nursing faculty educators with regard to incivility. There is a gap in the literature related to the experiences of male nurse educators. In an attempt to understand nursing student incivility in greater depth, the experiences of male nurse educators were studied.

This chapter will review the literature related to student incivility with a primary focus on nursing student incivility. The first section will review the significance of student incivility and provide a general overview of student incivility. Then, the current empirical research will be

summarized with results of perceptions of student incivility and faculty perceptions of student incivility discussed. Next, the potential impact on patient care will be summarized. Lastly, the theoretical framework will be reviewed.

General Overview

Health care professions are vocations where the public relies on the health care provider to behave in an ethical manner. Simpson (2012) describes several characteristics of a health care professional which include practicing with ethical and professional standards. According to Simpson (2012), students need education regarding professional characteristics. Even with efforts to educate students; sometimes, the behaviors of student will be uncivil, unprofessional, and/or unacceptable. Ongoing uncivil behavior is not inconsequential and may interfere with safe professional practice.   Incivility in all forms is not congruent with ethical behavior.   Nurses are one of the largest and most visible of health care providers. The profession of nursing has been listed in the most recent US Gallup polls (2014) as the most trusted profession every year since 1990 except in 2001 when fire fighters were voted as number one. Patients who receive care from nurses expect the nurse to act in a professional manner which includes acting ethically when providing patient care. Patients expect the nurse to act with integrity, honesty, and to always put the best interest of the patient first.

Clark and Springer (2007a, 2007b), Kececi, Bulduk, Oruc, and Celik (2011), Krueger (2014), Langone (2007), Williams and Lauerer (2013) all stress the importance of standards and principles that are necessary for nursing student and nursing graduates. They propose that a student who is responsible as a student will also likely be a responsible graduate. Halstead (2012) and McCrink (2010) also discuss the importance of the profession of nursing that is structured based on an ethical practice. Kececi et al. (2011) and Langone (2007) suggest that the

training itself is an important element in the development of the student to acquire professional standards and ethics. The student must have a commitment to act in an ethical way when caring for patients.

McCrink (2010) studied the attitudes and behaviors of nursing students regarding what she termed "academic misconduct." The survey tool used in McCrink's (2010) study was developed by the author and included 64 items on a Likert scale. A variety of topics were covered in this survey which included ethics, caring, behaviors, and frequency of behaviors. Composition of the study group included students from two associate degree nursing programs in the northeastern United States. In total, 192 students participated. Of note, the behaviors were self-reported behaviors by the student participants. These behaviors were not witnessed or reported by the faculty. Some of the uncivil behaviors reported by students in McCrink's (2010) study included discussing patient information in public places, paraphrasing or copying materials, working together, and obtaining test questions. Although these behaviors are not appropriate and are considered uncivil by the nomenclature today, none of these behaviors have the direct impact of physically harming a patient. It should be noted under current HIPAA law discussing patient information in public places is a violation of the law (Health Insurance Portability and Accountability Act, 1996. Unfortunately, some students reported recording vital signs that were not taken and administering medications when they were not given. These last two incidents occurred in the clinical environment and have the potential to directly harm patients. Students did self-report that some of the behaviors they knew were unethical but working together, paraphrasing, and obtaining test questions were not perceived by this group as being unethical. Although some of the behaviors were viewed as unethical by students, the behaviors still occurred. McCrink (2010) has concerns based upon this study about the way in

which academic misconduct by students might impact the profession of nursing. In addition to academic misconduct, one should consider the impact student incivility could have on the clinical experiences students encounter in their education.

Clinical Experiences

An important element in the training process of nursing students is opportunities for students to care for patients at various clinical sites (Anthony & Yastik, 2011; Clark, 2011; Ehrmann, 2005; Hunt & Marini, 2012; Levitt-Jones, Lathlean, Higgins, & McMillan, 2009). While these experiences may be stressful, they are a necessary requirement in the educational preparation of nursing students. Many researchers discuss the current health care environment with words such as high-tech, fast paced, complex, life and death situations, life and death decisions, and dynamic situations (Levitt-Jones et al., 2009; McCabe, 2009; Morrow, 2009). Although these are the terms used, many scholars also identify the experiences as an important element for students to apply classroom learning to live patients (Clark & Springer, 2010; Fontana 2009; Kececi, et al., 2011; Marchiondo, Marchiondo, & Lasiter, 2010). These clinical sites can be advanced practice settings with very ill patients. The settings can also be described in terms of life or death situations, complex, and fast paced (Marchiondo, et al., 2010; McCabe, 2009; Morrow, 2009). Many nursing leaders stress the importance of these clinical experiences but also caution that the experience must not place any patient in danger or compromise patient safety (Clark & Springer, 2010; Ehrmann, 2005; Krueger, 2014). Clinical experiences are opportunities where the student can begin to experience what it means to practice in the profession of nursing. The time students spend caring for patients are opportunities to apply didactic theory into practice. Students are socialized into behaviors of the profession. Key elements in clinical experiences are the behaviors of students. It is theorized that if a student is

unethical, decisions in the patient's best interest may be compromised (Anthony & Yastik, 2011; Fontana, 2009; Kececi et al., 2011; McCabe, 2009).

Impact on Patient Care

The potential impact on patients must not be excluded. Many nursing leaders are concerned that at some point incivility will negatively impact patient care (Anthony & Yastik, 2011; Clark, 2011; Clark & Davis Kenaley, 2011; Condon 2015; Griffin & Clark, 2014; Krueger, 2014). Student integrity and honesty in the clinical environment was studied by Langone (2007). She hypothesizes about a clinical situation where a student provides false or inaccurate information about a patient's vital signs, treatments, medications, or observations. Erroneous data about any of these items could severely impact the hospital course for a patient. Students must behave ethically and failure to behave in an ethical manner may result in negative consequences for the patient. Conversely, Langone (2007) theorizes that when a student does behave ethically, there is a possibility that health of the patient will be improved. Langone's (2007) writings are congruent with studies by McCrink (2010) whose research on attitudes and behaviors indicate that at times students may falsify care provided to a patient with potential negative outcomes. Health care decisions and physician orders may be based upon fictitious vital signs or misleading information. It is important for safe patient care to base decisions on accurate data.

Another view of student behavior in the clinical setting is described by Burger, Kramlich, Malitas, Page-Cutrara, and Whitfield-Harris (2014), as well as Clark and Ahten (2012). These authors studied the impact of students observing incivility between nursing staff at the clinical site. They propose students who observe incivility among nursing co-workers at clinical sites will begin to think the uncivil behavior is normal or a part of day-to-day activities. Altmiller's

(2008) qualitative study also supports the concern that observation of incivility between faculty, students, and staff may be a learned behavior that is considered acceptable or part of the job. This exposure may be a gateway to the student behaving in an uncivil manner after graduation.

Hinchberger (2009) also studied student exposure to incivility at the clinical site. The focus of this study was to determine the incidence and types of bullying or horizontal violence on student nurses. Although the bullying or horizontal violence were not addressed as incivility, the discussion of the behavior certainly matched uncivil behaviors described in the literature. Hinchberger surveyed 126 nursing students and found that 100 percent of the students either observed or experienced violence or bullying and, therefore, incivility in clinical settings. The most common (90%) uncivil actions were described as verbal abuse or bullying. Although the focus of this research was not specifically about incivility experienced by the student, the students in this study are victims of incivility; and, consequently, the student may erroneously believe that incivility is a normal or expected behavior in the clinical environment. Hinchberger (2009) suggests that students may repeat the behaviors of nurses. Clark and Athen (2012) and Kolanko, et al. (2006) describe incivility as a continuum, which supports the inclusion of Hinchberger's work as a component of incivility. The range of behaviors discussed fall along the continuum described by Clark and Athen (2012) and Kolanko, et al. (2006) fit into the continuum described by these authors. The left side of the continuum describes uncivil behaviors as annoying or disruptive. But as one moves to the right in the continuum, the behaviors become more serious and actually intensify. Behaviors on the right side of the continuum include such events as bullying, abuse, violent behaviors, and even homicide. Burger et al. (2014) and Clark and Davis Kenaley (2011) suggest understanding the range of expressed uncivil behaviors may be important for the nurse educator to consider. This understanding may

allow the nurse educator better manage student behaviors. Student incivility may impact the professional role of the nursing profession. The next section will discuss the possible impact that student incivility has on the professional nursing role.

<center>**Professional Role**</center>

Nursing education should include content to help the student gain understanding of the professional role and that incivility should not be tolerated. Burger et al. (2014), as well as Del Prato (2013), also suggest that it is important to have good faculty-to-faculty relationships with students. Socialization of the nursing student begins with good faculty relationships. Clark (2009), Clark and Athen (2012), and Clark and Davis Kenaley (2011) describe the important role of the nurse educator in the promotion of civility. Baxter and Boblin (2007) also stress the importance of the nurse educator in the development and transition of the nursing student into the profession of nursing. Reviewing the behaviors that promote ethical behaviors through discussion, role play, and reflection should be encouraged. The nurse educator plays an important role in preventing incivility and to promote a positive learning environment. Peters (2012) goes as far to suggest that by allowing incivility in nursing education to continue is to negate the notion of the profession of nursing.

Randle (2003) also looked at the impact that staff nurses at a clinical site might have on the student nurse. This mixed-method study was a three-year longitudinal study of nursing students at a number of different clinical sites. Results of the qualitative portion of this study indicated that students often witnessed what was described by Randle (2003) as bullying behaviors by the nursing staff to not only students but also to patients. Initially, the students were upset at the behavior they witnessed and experienced. But over the course of the semester they became accustomed to the actions and performed all the tasks they needed to do to pass the

course to pass the course. The author describes that there is a disconnection on the part of the student—the student initially believed that the nursing staff would be caring and supportive, but the reality of the situation was contradictory to what was observed. Randle (2003) noted from the interviews that the students began to assimilate what they saw at the clinical site with the students beginning to adopt many of the behaviors they previously described as bullying. One of the most concerning findings of this research was the lack of awareness on the part of the student that they began to integrate the uncivil behaviors. Not only did the student integrate the behaviors but by their actions they began normalize the behavior of incivility. The professional role and the outlook on the nursing profession are interrelated.

Outlook on the Nursing Profession

Another area closely aligned with the professional role is the impact that incivility may have on the future of the nursing profession. If student incivility has the potential to negatively impact the teaching/learning environment, if student incivility may negatively impact patient care; and, if student incivility could harm the professional role of the nurse, as previously suggested, the future of nursing and the impact of nursing student incivility is an important area for consideration.

Many nursing researchers have concerns regarding unaddressed and unethical student behaviors. The graduate nurse may also behave unethically (Boykins & Gilmore, 2012; Condon, 2015; Clark & Athen 2012; Clark & Springer, 2007a, 2007b, 2010; Krueger, 2014; Langone, 2007; Luparell, 2005, 2011; Suplee, Lachman, Siebert, & Anselmi, 2008). Simpson (2012) reviewed pertinent literature and she draws inferences from the literature that if students have problems with misconduct there may be an association with their behavior as practitioners. Langone (2007) goes as far to suggest that instilling ethical behaviors in students is important to

protect the veracity of the nursing profession. Olive (2006) conducted a qualitative study of "extreme" student incivility with 16 female nurse educators. In this study, two of the participants identified cases where uncivil students later behaved in an uncivil manner as practicing nurses. Clear proof of this type of connection may be difficult, but the potential for learned behavior of a habit of incivility to continue into a professional situation seems logical.

Vessey, Demarco, Gaffney, and Budin (2009) studied nurses in the workplace and behaviors they called bullying. Although the term bullying was used, the behaviors described by Vessey et al. (2009) included any situation where the recipients of bullying feel humiliated or threatened. The behaviors were also described as "repeated, offensive, abusive, intimidating or insulting." Some of the precipitating events were similar to the information described in academia as incivility. The main difference appeared to be that the bullying behavior seemed more intentional or deliberate than most encounters of academic incivility. Common bullying behaviors identified by Vessey et al. (2009) included excessive criticism, unreasonable requests, verbal abuse and threats to report the nurse to a supervisor. Stress was a common problem experienced by the victims of the bullying, as well as trouble concentrating, changes in sleep patterns, and irritability (Vessey et al., 2009). Luparell (2003, 2004) describes similar problems which included sleep disturbance issues and self-doubt and a lack of confidence align well with those described by Vessey et al. (2009). Vessey et al. (2009) stress bullying may negatively impact the confidence level of the nurse. One has to wonder if the seeds were planted while the student was in school, first by observation and participation at the college, then by observation and perhaps participation at the clinical site. These behaviors may become acceptable to the student, and the nurse graduate, thereby continuing the cycle. Anthony and Yastik (2011), Clark, 2011, Clark and Davis Kenaley, 2011, Condon, 2015 all suggest that incivility has the potential

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to impact the quality of patient care. Condon (2015) and Vessey, et al. (2009) have significant

concerns that bullying can negatively affect the quality of care and may result in increased staff

turnover.

In addition to behaving in a professional manner, caring is also an important element in

the nursing profession. Few would argue that nursing is a profession built upon the tenant of

caring. Clark and Davis Kenaley (2011) and Hinchberger (2009) describe caring as the

foundation of nursing. Hinchberger (2009) suggests that caring should not be a term just used

when treating patients. Caring should encompass patients, co-workers, peers, and other health

care professionals. The term "incivility" is used in this chapter to communicate/convey many

different types of behaviors that are considered uncivil. Some uncivil behaviors may be

described as annoyance behaviors, while other behaviors could be considered dangerous or life

threatening. Annoying behaviors might include checking e-mail or sending text messages.

Examples of more serious behaviors could be stalking or threatening the instructor. This

information provides a foundation as to support incivility as a critical topic to the future of

nursing and the safety of patient lives.

Academic incivility in nursing has been discussed or researched in many ways. Nursing

incivility can occur between students—student-to-student incivility. Faculty members may be

uncivil to other faculty members or to students. Students may behave in an inappropriate manner

to faculty members. Other variables worthy of study include the site where incivility occurs, the

program type as well as the, age, gender, or ethnicity of the participant could be variables that are

examined. In addition, the perception or frequency of incivility may also be studied. This

section of the literature review will focus on empirical studies of faculty perceptions and

incidents of student incivility in a number of environments. Empirical studies of student

incivility toward nursing faculty will also be reviewed. Following the review of faculty and student perceptions of student incivility, a discussion of millennial students and generation Z students will follow. Lastly, the theoretical framework will be reviewed.

Student Incivility Research—Faculty Perspective

Hilbert (1987) was one of the earliest nursing researchers to study student incivility. In 1987, she labeled unacceptable student behaviors as academic misconduct. According to Hilbert (1987), academic misconduct could be any number of behaviors in the clinical setting or the classroom setting that could be considered either false or deceitful. This study was conducted in 1987 with 210 senior nursing students from four universities. A group of 21 behavioral science majors from one of the universities acted as a comparison group. All participants identified behaviors using a survey tool developed by Hilbert. Hilbert's Unethical Behavior Survey (HUBS) was used to solicit self-reported behaviors of what was then referred to as academic misconduct.

Hilbert (1987) found a number of behaviors from the survey tool were selected by the students to represent academic misconduct.   In the classroom, students admitted to obtaining exam or quiz questions before taking a test, copying from another student's exam, allowing a student to copy from his/her exam, copying from a source without providing a reference, and adding references to a bibliography that were not included in the written work.   Unethical clinical behaviors reported by Hilbert (1987) included calling in sick when the student was not sick, taking hospital equipment, and perhaps the most concerning behavior was that of recording of medications, assessments, or treatments as completed when these procedures were not done. This study did not note any differences between nursing and non–nursing students. The findings of the study supported the finding that there was a significant positive relationship between

unethical classroom and unethical clinical behaviors. The most common reason given by the student for academic misconduct was that the student felt pressure for good grades. Students also related that they did not realize that the behavior was unethical.

An additional study by Hilbert (1988) added to the body of knowledge about student incivility by studying 63 junior and senior nursing students with the goal of examining the relationship between moral development and unethical behaviors in the classroom and clinical settings. Hilbert's (1987) definition of unethical behaviors was unchanged from previous work—the behaviors could be any number of activities in the clinical setting or the classroom setting that could be considered either false or deceitful. In this study, students self-reported behaviors using the Hilbert Unethical Behavior Survey (HUBS) while moral judgment was measured from a shortened tool which was modified by Hilbert called the Rest Defining Issued Test (DIT). Many of the previous unethical behaviors were also identified in this study which included obtaining test or quiz questions, copying without citing an appropriate reference, adding to a bibliography list, and working with another student on an assignment when group efforts were not permitted. Unethical clinical behaviors included taking hospital equipment, discussing patients in public places, and again perhaps the most concerning was the documentation of medications, treatments, or assessments that were never actually performed.

Hilbert (1988) found in the classroom setting there was no correlation between the level of moral development and cheating, meaning that essentially anyone will cheat regardless of the level of moral development. In the clinical environment, an inverse relationship was found between the level of moral development and unethical clinical behaviors, meaning that the lower the moral development, the likelihood increased for the student to cheat. Hilbert (1988) suggests that the findings indicate that students are more likely to cheat in the classroom where students

rationalize no one is really hurt; while, conversely, in the clinical environment, the patient may be harmed or impacted by the unethical behavior. As a result of this study, Hilbert (1988) recommends that educators watch students carefully in the classroom and clinical settings for inappropriate behaviors. Education of the factors that constitute unethical behavior should be provided by the professor.

Building on the work of Hilbert, Gaberson (1997) added to the body of knowledge about academic incivility. Gaberson (1997) used the terms dishonesty, deceptive practices, cheating, academic dishonesty, classroom dishonesty, and dishonesty in the clinical setting in her discussion about academic dishonestly among nursing students. These terms are congruent with the behaviors associated with academic incivility. Gaberson (1997) discussed possible explanations for these types of behavior which included competition, the need to excel, pressure to not make mistakes, threat of punishment, and possibly compromised moral development. Regardless of the reason, she suggests that nursing is a profession that has an impact of a vulnerable population—the patient. Gaberson (1997) suggests that dishonestly, if not addressed while in training, could have a negative impact on patients. Failure to address while in school could also have negative consequences on the profession of nursing.

Gaberson (1997) proposes it is the responsibility of the nurse educator to be a role model for the student.   Clark (2009), Clark and Ahten (2012), Del Prato (2013), Ehrman (2005), Halstead (2012), Suplee et al. (2008), and Williams and Lauerer (2013) also support the importance of the nurse educator as a role model.   Connelly (2009) suggests that civility must be expressed as an important concept to students and should be modeled in every course. Students can learn from observing their teachers acting in a professional manner. Frey Knepp (2012) also describes the importance of the faculty role model. Students can learn professional behaviors

through observation of a positive faculty role model. Williams and Lauerer (2013) suggest that students be instructed in methods to handle situations where they may encounter uncivil behavior. Role play is one method suggested to assist the student deal with difficult and often uncomfortable situations. Nurse educators must make a part of the curriculum moral decision making skills.

Clark and Springer (2007a, 2007b) surveyed faculty and students in an attempt to obtain perceptions of the types of behavior that are considered uncivil and the frequency of these behaviors. This work was ground breaking because the perceptions of both students and faculty were captured. In addition, a tool was developed by Clark that could solicit information about student and faculty incivility. This tool was called the Incivility in Nursing Survey (INE) and allowed one tool to be used for both nursing faculty and nursing students. Previously tools from other disciplines had been used, but this tool was designed to solicit data specific to nursing. The INE survey was composed of three sections: one section contained demographic information, one section contained a list of behaviors and the frequency of the behaviors, and the last section contained open ended questions.

Clark and Springer (2007a, 2007b) surveyed nursing faculty and nursing students at a public university in northwestern United States surveyed using the INE survey tool. Students completed the survey during classes and participation was voluntary. A total of 324 students participated, 32 faculty members participated, with one male faculty member participant. Findings of the survey were reported as an aggregate with faculty and student responses reported together. Some of the most frequent behaviors identified by students and faculty identified as uncivil included cheating, cell phone use, conversations during class, unsolicited remarks during class, sleeping in class, computer use during class not related to classroom content, and requests

for make-up exams, assignments, or other requests. These responses were identified as always or usually uncivil. A Likert scale was used to describe the degree of uncivil behaviors with the terms always, usually, sometimes, and never. Next, the student and faculty respondents reflected on the frequency of the identified uncivil behaviors. Again, a Likert scale was used for the frequency of the behaviors with the terms often, sometimes, rarely, or never. Results by both students and faculty identified that uncivil behaviors occurred sometimes or rarely. Finally, the majority (> 70%) of students and faculty identified incivility in nursing education as a moderate to severe problem.

Clark and Springer (2007b) discussed the qualitative results of their study of nursing faculty and nursing students at a university in the northwest United States. Approximately 41 percent of the original faculty participants and 36 percent of the original student participants completed the qualitative section of the INE survey. Two themes of uncivil behaviors emerged when the results were interpreted—in class disruptions and out of class disruptions. Faculty described specific in-class student behaviors they found to be uncivil. These behaviors included talking during class, negative comments, arriving late or leaving early, and cell phone use as the most common concerns. Out of class disruptions by students included gossip about faculty, late assignments, and inappropriate e-mails. The authors conclude that both nurse educators and nursing students find incivility a problem in and out of class.

Building upon the Clark and Springer's earlier work, Clark (2008c, 2008d) expanded the knowledge base about faculty and student perceptions of incivility by using a larger sample of nursing faculty and nursing students. A group of 500 participants, 194 nursing faculty and 306 nursing students from two national meetings, were asked to respond to the INE survey. Of the total participants, 8.9% were men (faculty and students), with 4 male nurse educators

participating in the study. The goal of the study was to compare perceptions of incivility to the earlier study using a larger multi state sample. Again, the INE survey tool was used with a demographic section, a section of student and faculty behaviors, frequency of behaviors, and a section for open ended comments.

Results from the quantitative portion of Clark's (2008c) work identified that both student and faculty participants identified incivility as a moderate to severe problem. This finding was consistent with the earlier study by Clark and Springer (2007 a, 2007b). Behaviors that were considered uncivil in the current study were categorized by faculty responses, student responses, and combined responses. In this study, the behaviors that the faculty identified as uncivil when demonstrated by students included leaving class early, students controlling the classroom discussion, and cheating. Combined student and faculty responses of uncivil student behaviors from this study included talking during class, using the computer in class for non-related lecture material, requesting changes in assignments or grades, and being unprepared for class.   Finally, students identified behaviors that they considered uncivil. Disruptive student behaviors included skipping class, being unprepared for class, sleeping during class, arriving late, and using the computer that was not related to the lecture material. All participants reported that they considered incivility to be a moderate to a severe problem. Although students and faculty identified slightly different behaviors, overall, the results were consistent with previous findings on student incivility.

The qualitative portion of the national Clark's (2008d) study of nursing students and nursing faculty was collected using the third section of the survey tool which included open ended questions allowing for a free text by the respondents. Questions about factors that contributed to student incivility, as well as specific student behaviors that were found to be

uncivil, were sought. These responses were open ended to allow for feelings and expression not possible in the Likert scale portion of the survey. Also, the open-ended questions allowed for options that may not have been included in the list and frequency of behaviors that were listed in the quantitative portion. Of the 504 conference attendees, 289 participated in the qualitative portion of the study. A total of 125 nursing faculty and 164 nursing students participated in the qualitative portion of the INE survey.

Clark (2008d) prefaced the results of the qualitative portion of the study by describing the interaction between students and faculty by using the metaphor of a dance. She describes that one rarely dances alone, and during a dance one leads and the other follows. She likens the act of dancing to incivility between nursing faculty and nursing students. Incivility on the part of one participant can provoke incivility on the part of another, while civility on the part of one participant promotes civility on the part of another. Clark describes incivility as rarely one sided. Morrisette (2001) and Thomas (2003) also suggest the act of behaving in an uncivil manner will trigger incivility in the recipient resulting in a sequence of back and forth cycle of incivility.

Faculty responded to the first question in the qualitative portion of Clark's (2008d) study about the factors nurse educators thought contributed to student incivility. Results by faculty centered around two themes—stress and entitlement. Study results suggested that stress encompasses many factors which include being overworked, having too many roles between family, school, and work, and competition to stay in a difficult program of study. As far as the theme of entitlement is concerned, faculty respondents identified several areas where incivility may be triggered. These areas include an attitude of "I know it all," a consumer mentality the students pay for the education and think they can do what they want, they are owed an education, and, finally, the inability to accept their failures and frequent excuses for their mistakes.

The second question in the qualitative portion of Clark's study (2008d) asked the faculty

participants to identify specific uncivil behaviors that students' exhibit. The faculty participants

identified three major areas. These areas included rude disruptive behaviors, a lack of respect for

differences which might include culture, ethnicity, or class, and finally responding to perceived

faculty incivility. The most common issue reported was rude or disruptive behaviors which

could occur in either the classroom environment or the clinical environment. The behaviors

might include cell phone use, texting, using the computer for non- class related activities and are

also consistent with other studies regarding student incivility (Clark &Springer, 2007b; Clark

2008c; Lashley & DeMenses, 2001; Luparell, 2003, 2004; Thomas, 2003)

Clark and Springer (2010) continued to expand the knowledge base about student

incivility in their study of academic nurse leaders. Clark and Springer sought the perceptions of

academic nurse leaders regarding stress on students and faculty, uncivil behaviors, and the role

of the academic nurse leader to manage incivility. A convenience sample of academic nurse

leaders at a state-wide conference responded to a request to participate in this study. Five

questions addressed perceptions regarding stress on students and faculty, uncivil behaviors on

the part of students and faculty, and steps academic leaders can institute in response to incivility

in the academic environment. Academic nurse leaders identified five major areas of student

stress. These areas included managing many responsibilities, issues related to finances and

managing time, lack of faculty support, and issues related to mental health. Observed uncivil

student behaviors were also reported and included class distractions such as talking, cell phone

use, computer use, leaving early, sleeping, bullying behaviors, anger, cheating, and a sense of

entitlement. Overwhelmingly, the academic nurse leaders reported a responsibility to promote

an environment to support civility and respect. A number of ideas were suggested and included

modeling of professional behaviors, coaching, mentoring, ongoing education, and appropriate policies. Clark concludes that it is the obligation of nursing leaders to support and promote an environment of civility to encourage positive interactions between the nursing student and the nursing faculty. Positive interactions are important to promote a positive learning environment and to promote civility. Clark (2008d) and Kolenko et al. (2006) conclude that negative effects of incivility harm the learning environment.

Hunt and Marini (2012) conducted a study involving clinical nursing instructors. Only instructors at the clinical sites were surveyed and the goal was to study the participant's experience with and frequency of incivility in the clinical educational setting. The study did not identify the perpetrators of the incivility, but all of the 37 clinical nursing educators identified at least one episode of incivility. These instructors described the uncivil incidents as hurtful, disruptive, and impolite. Again, although the perpetrators of the incivility were not identified as a part of this study, it can be assumed that at least some of these uncivil events were the result of student-faculty incidents at the clinical site and this study does support the ongoing nature of incivility directed at nursing faculty. Hunt and Marini (2012) suggest other possible offenders could be staff nurses, physicians, administrators, and even patients.

Fontana (2009) researched incivility from the perspective of confronting students and the meaning and impact of the confrontation experience on the nurse educator. Semi-structured interviews with telephone follow up of 12 female nurse educators in five baccalaureate nursing programs in the eastern United were conducted. Participants of this study identified a number of concerns related to reporting of academic dishonesty. Many participants felt it was a tremendous burden to report and address academic dishonesty. Participants worried about damaged bonds between the student involved in the misconduct but also with other students who may have

observed or heard about the incident. Also of concern was the possible damage to relationships with other faculty members. Friendships between faculty members were harmed when a disagreement of a student's guilt was questioned.   The participants worried about damaged relationships in two ways—damage between the faculty and the student and damaged relationships from one faculty member to another. Participants described how students looked at them differently when the student was asked to place a backpack at the front of the room during an exam. One participant described how students' faces changed and how she had to look away. When students were found cheating, the faculty participants intentionally distanced themselves from the students. Relationships from one colleague to another at times were harmed by student incivility or academic misconduct. Participants in Fontana's (2009) found a lack of support from their faculty peers. The peer faculty may have not approved or agreed with a student investigation which resulted in damaged faculty to faculty relationships. All of the participants of Fontana's (2009) study expressed that the damage to faculty and student relationships were the most painful part of confronting student incivility.

Participants noted perceived risk or actual risk. Fear of damaged reputation, retribution in the form of law suits, and negative impact on reappointment and tenure were some of the issues raised by the participants. However, the nurses in the study consistently related the importance of the reporting. They described the need to be a gatekeeper of the profession; these participants were driven to report these issues because of their concern about patient safety. Fontana (2009) identifies perhaps the most important finding of this study where the participants identified concern surrounding patient safety. Educators in this study were of the opinion that students who will cheat as a student will also cheat as a practicing nurse. All participants

expressed commitment to the profession of nursing, to patients, and to the health care system that overrode any concern for self.

As important as the uncivil behaviors, the frequency of the uncivil behaviors, and the impact these behaviors may have on the profession of nursing, there is another important area that has been studied, and that is of the effect of the uncivil actions on nurse educators. Certainly, there are those experts in the nursing field who suggest the student-faculty relationship is impacted by uncivil behaviors (Suplee et al., 2008). The impact on the faculty member is also important and perhaps the most important information after the identification of the problem of incivility itself. Luparell (2003, 2004) was perhaps the first researcher to look at the impact of incivility on the nurse educator. She conducted semi-structured interviews of 21 nurse educators where they were asked to describe a critical incident of student incivility in their career. She sought information surrounding the incident, their short and long term reactions to the incident, any impact on teaching pedagogy, and their attitude toward nursing.

During the interview process, Luparell (2003, 2004) did not give a concrete definition of incivility or critical incident of incivility. Each interviewee determined what constituted an uncivil encounter because the researcher did not want to influence participants' responses. One participant was a male nurse educator, while 20 participants were female nurse educators. As a result of the interviews, 36 critical incidents of incivility were identified. Some of the events occurred more than 15 years prior to the interviews, while others occurred only weeks before the interviews. The researcher found that despite the amount of time that had passed between the incident and the interviews strong reactions to the critical incidents. Examples of critical incidents varied from one participant to another. What one participant felt was a critical incident, another participant might not identify as a critical incident. One participant identified

taping of an exam review and later selling the recording to other students as a critical incident.

Several participants identified yelling and the use of profanity or foul language as a critical

incident. Another participant identified a critical incident when a student threatened to run her

down with a car. Another participant was threatened when a student followed her home and

parked outside of her house. Arguing over grades was also identified by several faculty

participants in Luparell's (2003) study. Powerful words were used by the participants to

describe how they felt after the incidents and these words included attacked, injured, "wounded,

and assaulted, to name a few examples.

Luparell (2003, 2004) organized the results of the interviews using an unfolding

battlefield plan as a comparison. The following three metaphors were used to organize the

results: before the events, on the battlefield, and the aftermath. Each area was further

subdivided into specific elements as they related to the battlefield metaphor. In summary, the

participants could, in many cases, identify triggering or precipitating events to the "battle" of the

uncivil event. In most cases, the event that triggered the uncivil behavior on the part of the

student was criticism or a failing grade. In these situations, many of the faculty members

rehearsed their thoughts before they counseled the student. The faculty members knew that it is

hard to take criticism or receive a poor grade so they did this rehearsal to try to provide support

and encouragement to the student while delivering bad news. Despite these efforts, there were

many students who responded with behavior that the faculty members considered uncivil. The

event was called an ambush because the faculty members were not expecting the encounters to

be uncivil. Words that described the ambush included stunned, unbelievable, and shocked. Some

of the student behaviors that elicited these words included taping or selling an exam review

arguing loudly about grades, disrespectful remarks. Some clashes escalated into foul language

with threats to personal safety. Many of the emotions the participants described after the events were as threats to their well-being. Some faculty felt panic and fear. The threat was related to job security, reputation, and physical possessions. After the event, the student often sought the help of a spouse, an administrator, or a legislator to assist in the disagreement, which resulted in more negative emotions for the nurse educator. The faculty participants used words like intimidation or pressure when talking about the additional efforts the student undertook to support their position.

Costs were described by Luparell (2003, 2004) after the event occurred. Aftermath was the battle metaphor for this area. Participants described a huge cost to their physical and psychological well-being. Sleep disturbances, ongoing self- doubt, anxiety, and a lack of confidence in teaching abilities were described by the participants. Time and money was also identified as a large cost related to the uncivil event. Participants described a significant amount of time was spent in follow-up. Reports needed to be written, meetings with students, staff, and college administrators were often necessary. Time was also spent by many educators counseling students involved in the uncivil event. Costs related to legal fees were identified. Many felt there was a direct threat to their personal safety and installed or upgraded security systems in their homes. Others were fearful because of ongoing harassment by the students.

Lastly, the participants in Luparell's (2003, 2004) study identified a toll noted on nursing education and the profession of teaching. Several participants described their feelings as post-traumatic stress. A few nurse educators changed their teaching pedagogy to prevent similar events from occurring. Three nurse educators lost their excitement for teaching and left their positions at their universities. Several participants continued to relive the experiences, and often

second guessed themselves, trying to figure out how they could have done things differently to prevent the event.

As a result of Luparell's (2003, 2004) work, the knowledge base about the harmful impact of student incivility on the nurse educator was recognized. Findings from this study demonstrated that for this group of nurse educators the impact of student incivility was significant and long lasting. Three of the 21 participants left the field of nursing education. Many participants incurred financial and time costs. Yet, many of these nurse educators dealt with the situation and continued to teach. Most of the participants expressed a responsibility to the profession of nursing and to society as a whole. The driving force for these educators was the determination that only competent students should graduate and enter the profession of nursing. Documentation of the types and frequency of uncivil behavior is important, but this work broke new ground in the effort to understand another component of student incivility.

Olive (2006) studied the lived experiences of nurse educators who felt a perceived threat to their physical or psychological well-being as a result of student incivility. Sixteen female nurse educators were interviewed and they described uncivil interactions with nursing students. An overwhelming number of the respondents expressed shock, feelings of threat, and a lack of support after the incident. These results are consistent with those of Luparell (2004, 2004). Respondents in Olive's study (2006) described many similar behaviors that were identified in Luparell's (2003, 2004) work. A full range of student behaviors were identified in Olive's (2006) research from yelling, to arriving late, to use of poor language, to threats of lawsuits, to poor evaluations, and in some cases physical contact. These uncivil student behaviors have been previously reported and are consistent with the literature. After the data were scrutinized, it was noted by the researcher that faculty respondents experience a predicable sequence or pattern of

feelings as a result of their exposure to incivility. Respondents initially identified the event of incivility, then they experienced a potential for violence. Next, the participants spent time trying to make sense out of the experience and surprisingly they found that they grew as nurse educators as a result of the experience and of the self-reflection about the experience. One of the last findings of this study discussed the feeling of aloneness experienced by the nurse educators as a gatekeeper for the nursing profession. The last theme identified by the researcher was a theme she entitled "something to learn." The participants developed new roles as nurse educators through their experiences with student incivility.

Olive's (2006) study was in many ways consistent with the previous research on nursing student incivility. The types of behaviors identified and the responses of the faculty in Olive's study (2006) were consistent with the literature. New information was obtained in that the participants of this study gained an understanding of how to improve the teacher-student relationship. Also, a method to reduce the frequency of nursing student incivility was identified that was not known before. Participants also described how they grew as teachers with two important components identified as important by the faculty—student accountability and the socialization process into professional nursing. Participants expressed that by allowing incivility to continue in school sends a message to the perpetrator and the other students that inappropriate behaviors are acceptable. By making students accountable and responding to uncivil behavior, the participants believed student incivility would decline. Results also identified open communication between the student and the nurse educator was essential for this process to occur.

Lampman, Philips, Bancroft, and Beneke (2009) conducted a quantitative study at the University of Alaska Anchorage to review the experience, impact, and frequency of contrapower

harassment of faculty. Contrapower harassment was defined as a wide range of negative student behaviors which may include classroom disturbances, threatening behaviors, or sexual advances. This study involved all departments in the university and examined a number of faculty variables including gender, tenure, and tenure track positions. A total of 399 educators participated in the study and the participants were nearly equally divided by gender. This study sought to increase the knowledge surrounding the faculty experience with incivility, bullying, and sexual attention.

Lampman et al. (2009) developed a three-part survey tool that included demographics, a section to document type and frequency of negative student behaviors, and a final section which included a method for the participants to indicate their reactions to the negative student behaviors. This tool was developed based on a literature search, as well as feedback from colleagues and pilot interviews. Over 95% of male and female participants in this study had experienced at least one episode of student incivility. The most common behaviors reported were sleeping during class, requesting a change in an exam or assignment, engaging in a non-class activity, frequently interrupting faculty and peers and use of a cell phone. Nearly half of the participants (45%) felt that students recorded hostile comments on student evaluations. More females than males experienced challenges to their authority and hostile and threatening comments. Male faculty experienced more students sleeping, working on non-class activities, and had more requests to change grades or exams. Across the board, though, in all categories, more female educators reported all types of incivility and experienced more negative consequences more frequently than male educators after experiencing negative student behavior. The most common consequences experienced by the study participants included anxiety, stress, difficulty sleeping, avoidance of the student, depression, and problems concentrating. Findings of the study did not identify any difference in the total number of uncivil events by gender, and

rank did not appear to impact the number of events. In fact, the opposite occurred: the investigators theorized that newer, non-tenured faculty would report more incidences of incivility, when in fact the tenured faculty reported the greatest number of uncivil events. It was reported that one out of ten participants changed their assignments or pedagogy as a result of the uncivil event. This study involved the entire university of which the nursing department was a participant. No specific information from Lampman et al. (2009) can be directly connected to nursing, but male responses made up 50 percent of the findings.

Williamson (2011) conducted an interpretative phenomenological study of student incivility examining the lived experience of ten faculty participants. Williamson (2011) conducted semi-structured interviews with the participants. The participants were all employed at associate degree nursing programs a southeastern state. Many of the results from Williamson's (2011) work aligned with work in other qualitative and quantitative studies. All participants in the study agreed that student incivility was a growing problem. Baxter and Boblin (2007) also identify student incivility as an ongoing problem in nursing education. The emotions described in this study include such feelings as shock, surprise, disbelief, and disappointment. Luparell (2003, 2004) also identified shock as a common emotion in her battlefield metaphor descriptions. Some of the behaviors described by the participants of Williamson's (2011) study included threats, stalking, yelling, lying, intimidation, as well as annoyance behaviors. These behaviors are congruent with the findings of many other researchers including Clark and Springer, 2007a, 2007b and Luparell, 2003, 2004.

Burnout was a common theme identified, as well as worry and stress, by the participants in Williamson's (2011) study. Shirey (2006) expresses concern that unchecked stress will result in burnout and should be addressed for the health and well-being of the individual. Two nurse

educators from Williamson's (2011) study conveyed significant job dissatisfaction and their intent to leave nursing education. Williamson (2011) suggests that the profession of nursing educators cannot afford to lose experienced and accomplished nurse educators. Luparell (2007) expresses this very thought about the need to retain experienced nurse educators. Two participants in Williamson's (2011) study had over 31 years of experience in nursing education. Williamson (2011) describes the importance of retaining knowledgeable and skilled educators. She suggests the loss of experienced educators could have a negative impact on the educational process. Luparell (2007) describes concerns based upon the data from the American Association of Colleges of Nursing (AACN). In 2007 a nursing faculty shortage was described as pressing. Luparell (2007) goes on to describe the ideal candidate for a nurse educator as a person who is motivated to share their knowledge on nursing to students. Loss of individuals because of disillusionment related top student incivility can be costly to the future of nursing education. In Luparell's study (2003, 2004) three participants left academia related to student incivility, in Williamson's (2011) study two participants indicated a desire to leave nursing education. It is unknown how many more qualified educators will leave or have left the field making the issue of faculty disillusionment more complex and even more important is the ongoing shortage of nursing faculty. Since 2000 the AACN has collected data from schools of nursing to assess current nursing faculty shortages. AACN conducted a special faculty vacancy survey for the 2016-2017 academic year. The 2016-2017 survey was sent to 965 schools with a response rate of 85.6 percent. A total of 7.9 percent vacant faculty positions were reported. An inability to recruit qualified faculty related to competition for jobs in other areas was measured at 38 percent. Critical issues related to faculty recruitment were discussed with the top two reasons being non-competitive salaries and a limited number of candidates prepared at the doctoral level.

With a faculty shortage spanning at least the years from 2007 to 2017, the loss of any qualified, committed faculty is concerning.

Williamson (2011) discusses findings by two participants who compared their experiences in nursing school with the behavior of students today. These participants discussed the importance of respect for their professors and the importance of professional behavior. These two participants felt the behaviors of students today are disrespectful. Earlier generations of nursing students had more respect for their professors and at least for these participants the behavior exhibited by today's student is unacceptable. Concern for the future of the nursing profession was expressed, as well. Williamson (2011) discusses how eight study participants planned to stay in nursing education despite their experiences with nursing student incivility. These participants expressed little job dissatisfaction. Williamson (2011) concluded from these responses that each participant viewed the uncivil events differently. Those that chose to stay in the field of nursing education had more contentment with their work than discontentment with the uncivil event.

Common to findings from larger quantitative studies, Williamson (2011) found that the participants were more cautious, guarded their actions with students, and had concerns about trusting students. Participants reported changing exams, assignments, and teaching methods to avoid potential conflicts with students. A lack of confidence and a negative perception of the teaching role were also reported. Finally, all participants believed that student incivility impacted the teaching-learning environment in a negative way, with similar findings noted in Luparell's (2003, 2004, 2005, 2007) work. Williamson (2011) was unable to address the impact that gender or race might have on the findings of this study as all participants were white

females. Williamson (2011) suggests gender or race may be an important area for future research.

The next section of the literature review will focus on the student's perspective of student incivility. Students are often present and observing students who perpetrate episodes of incivility. Studies demonstrate students are uncomfortable when students perform acts of incivility in the classroom. These acts may also be disruptive to the learning environment for these students (Altmiller, 2008; Clark & Springer, 2007a, 2007b; Thomas, 2003).

Student Incivility Research—Student Perspective

Nursing students have also been studied about their opinions of incivility in nursing education. There have been many studies about nursing faculty to nursing student incivility, as well as nursing student-to-nursing student incivility; however, these areas are not the focus of this literature review. The area of interest for this review is students' perceptions of student incivility towards educators with a primary focus on nursing students and nursing educators. Students may have different perspectives on the behaviors they consider to be uncivil and these perspectives may vary from nurse educators' views of incivility. Olive found in her study (2006) that faculty members varied from person to person on which situations might cause concern of student incivility and the potential for violence. Clark (2008c) and Hoffman (2012) also found that faculty and students may have different opinions about what behaviors are considered uncivil and how often the uncivil behaviors occur.

Altmiller's (2008) qualitative study queried 24 students on their perspectives about student and faculty incivility to compare and contrast their responses to established faculty perspectives on student incivility. Students in this study identified inattentiveness in class, cheating, arriving late, lack of preparation, and side conversations as uncivil and distracting

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behaviors by students as uncivil. These results are congruent with behaviors that have been identified in studies by nurse educators (Clark & Springer, 2007a, 2007b; Clark, 2008 a, 2008b, 2008c, 2008d). One strong theme that was identified in this study was the student's desire that the nurse educator address students' uncivil behaviors. Distracting behaviors like those identified in this study made it difficult for some students to pay attention during class. Students also identified that unprofessional behavior is uncivil. Altmiller (2008) concludes that students and faculty interpret many of the same behaviors as uncivil. Students also identify uncivil behaviors as disrespectful. Study respondents stressed the importance of clear communication to promote civility.

In one study involving a convenience sample of over 3600 students at a Midwestern public university, Bjorklund and Rehling (2010) sought to obtain information about students' perceptions of student incivility, as well as the frequency of uncivil student behaviors. This large-scale study included students from all majors using an e-mail list serve. Students who chose to participate followed a link to a Survey Monkey to complete an on-line survey. The tool consisted of 23 uncivil behaviors and two civil behaviors, as well as an ability to assign a degree of incivility to the selected behaviors. The responses were students' perceptions of uncivil behaviors. The results of this survey indicated that five behaviors were listed in the top half of the responses for both frequency of behaviors and degree of incivility of the behaviors. The five behaviors with the most frequency and the highest degree of incivility were use of cell phones in class, use of computer for non-class related activities, arriving late and leaving early, students packing up materials early, and texting in class. Many of these same behaviors are also found in nursing only research (Clark & Springer, 2007a, 2007b; Clark, 2008a, 2008b, 2008c, 2008d; Clark & Springer, 2010). This study is important for several reasons. First, at this university,

incivility would appear to be an issue that spans all majors. Next, students recognize that uncivil behaviors occur. Lastly, a large-scale student perspective on uncivil behaviors has been identified. The results can be compared with other studies to determine if issues in a specific discipline are different than the results of this study.

Clark (2008a, 2008b) also queried students for their perceptions of student incivility. The participants were recruited from a national meeting. Participants were asked to complete the INE Survey. In addition, students were asked to answer several open ended questions that addressed factors that the students believed contributed to incivility and examples of behaviors that the students felt were uncivil. A total of 164 students responded to the quantitative portion of the survey. Stress and student entitlement were the two factors that the students identified as issues that contributed to student incivility. Coincidentally, faculty participants in this study also identified these as areas that contribute to student incivility. Student responses about stress were similar to faculty responses. Responses by the student describing stress included being overworked and burned out, dealing with competition in a rigorous program, and the need to cheat for good grades to stay in the program or to maintain placement in the program. Students explained student entitlement as a consumer mentality with belief that they are owed an education because they were paying for it. Students also identified a refusal to accept personal responsibility and excuses for failure as another theme that supports student entitlement.

Students in Clark's (2008a, 2008b) study identified specific behaviors that the students identified as uncivil. Four main themes were noted and included disruptive behaviors in the classroom and clinical site, rude remarks, pressure on faculty to make changes in assignments or tests, and speaking negatively about others. The most frequent problem identified by the students was disruptive behaviors and these behaviors included cell phone use, computer use not

related to classroom activities, and side conversations. One student comment from the study

summed up the disruptive behaviors as a lack of respect for the learning environment. These

responses by the students help to affirm that the problem of uncivil student behaviors exists and

students recognize the behaviors.

Studies regarding student perception of student incivility support the existence of student

incivility, as well as the need to understand student incivility. Behaviors identified by students

as uncivil are similar to the behaviors identified by nursing faculty but the behaviors can vary

slightly with regard to frequency and the ranking of some of the specific behaviors (Clark

2008c). Examining the experiences of male nurse educators will continue to add to the body of

knowledge surrounding incivility.

Some of the faculty in Williamson's (2011) study identified a new generation of students.

This student generation is often referred to as a millennial student.

Millennial Students

Currently, the largest cohort of students in traditional baccalaureate nursing programs is a

group of students born in the 1980s and beyond often referred to as generation Y or the

millennial generation (Gibson, 2009; Johnson & Romanello, 2005). It is important to consider

the millennial cohort when it comes to student incivility because their uniqueness as a generation

may be a factor in the problem of student incivility. Mangold (2007) discusses the importance of

teacher-student relationship in the success of the nursing student and that generational issues

may impact this connection. The millennial group may have different learning needs, styles, and

responses than non-traditional or older students (Pardue & Morgan, 2008; Suplee et al. 2008;

Walker et al., 2006). Simpson (2012) stresses that although millennial students may have a

diverse view of the world and see the world around them differently from the baby boomer or

Gen X generation; it is not necessarily bad, just different. It is important for the professor to

acknowledge these differences, learn about these differences, and, when necessary, adapt to the

new generation of students. Mangold (2007) also suggests it is the obligation of the professor to

create a learning environment that supports learning, and faculty may have to modify teaching

practices to appeal to the millennial student.

Millennial students tend to be comfortable with technology and are used to instant

communication with one another with constant stimulation by visual media, as well as the

characteristic of an upbeat and questioning attitude (Johnson & Romanello, 2005; Pardue &

Morgan, 2008; Roehling. Vander Koii, Dykema, Quisenberry, & Vandlen, 2011; Walker et al.,

2006). Computers have always been in these students' lives and millennial students do not

remember a time without the internet (Arhin, 2009; Pardue & Morgan, 2008). Roehling et al.

(2011) conducted a small study consisting of focus groups of sophomores and juniors found that

the student participants required high levels of stimulation to prevent boredom. If these students

were not stimulated, they would often transfer their attention to some form of electronic media

which might include the internet or their phones.

Gibson (2009) discusses that millennial students prefer a balance between work and life.

These students are vocal with their opinions and they also like to have their opinions validated.

Understanding this generation may be an important factor to understanding uncivil student

behaviors which from time to time center on electronic media. Although Gibson (2009) does not

discuss incivility, she does suggest that the basis for a successful relationship today is improved

by the faculty learning about the millennial generation.

Walker et al. (2006) found in a quantitative study of junior and senior nursing students in

a large southern metropolitan university that there was only a moderate interest in learning

because learning is important or interesting. Walker et al. (2006) found that most study participants were more interested in the grade obtained rather than learning. This finding may also be important for the nurse educator to understand because it may be diametrically opposed to the mindset of the educator. Pardue and Morgan (2008) describe student behaviors of disinterest, disrespect, and boredom from vignettes of freshman nursing students. They also describe the confusion and exasperation of nurse educators in dealing with these attitudes. Misunderstandings centered on learning, classroom behaviors, and grades could be triggers for incivility on the part of the student or perceived incivility by the nurse educator. Pardue and Morgan (2008) and Suplee et al. (2008) describe the necessity of developing a rapport between the student and the educator connection between the student and the educator to promote a rapport.

Luparell (2003, 2004) noted that it takes two individuals for an uncivil interaction and that understanding the qualities of the student might be helpful to the teacher to reduce incivility. Thomas (2003) supports this idea and expands upon it by discussing that the different generations of the professor and the student may strain the student/teacher bond. Hoffman (2012) and Walker et al. (2006) describe the millennial students or Generation Y students as those students who were born after 1980. These students are primarily being taught by the baby boomer generation, those individuals who were born between 1946 and 1964. Walker et al. (2006) further discusses the diversity of the millennial student. The millennial generation is comfortable with multiple types of technology. A limited attention span has been a characteristic attributed to the millennial student (Thomas, 2003). Millennial students tend to prefer team or group work and they often become bored easily and need stimulation to maintain their interest (Roehling, et al., 2011). Walker et al. (2006) also suggests there is evidence that these

generational differences should be considered when selecting teaching methods. Focus group results from Roehling et al. (2011) identified that millennial students preferred active learning. If these students are not stimulated, the student may turn to uncivil behaviors in the form of electronic media as a distraction. The on-line environment is a place where millennial students may flourish because of their knowledge of technology. Boykins and Gilmore (2012) have concerns that the on-line environment may provide these students with greater chances for academic dishonesty—or incivility. Technology influences communication with this group and this same technology according to Boykins and Gilmore (2012) may promote cheating.

Hoffman (2012) found that a student's perception of incivility may be different from the faculty view on the subject. Hoffman surveyed participants from the ages of 20 to 50, with the majority (73%) between 20 and 30. Hoffman (2012) studied students from various nursing programs (diploma, associate, and baccalaureate) to determine their feelings about classroom incivility. Hoffman (2012) used the Incivility in Nursing Education (INE) Tool to survey a convenience sample of students at each type of school. One research question attempted to determine if there was any difference in the perception of student incivility based upon the student age. This study did not demonstrate a statistical correlation between age and the student's perception of the occurrence of incivility although qualitative responses in this study indicated age was a contributing factor. This study used the age of 30 and under as an age group, rather than those students who were less than 25 years old. Faculty responses were not sought in Hoffman's (2012) study. Hoffman (2012) suggests that more research is needed regarding age differences due to the conflicting responses between the quantitative responses and the qualitative findings in this study.

There may be no clear link between the millennial generation and the frequency or perception of uncivil behaviors, but because the attitudes, ideas, and needs of this generation are unique, it makes understanding this generation important. Through the recognition of the distinctive characteristics of the millennial student, the nurse educator may have a better understanding of their actions. Generation Z students are the next generation of students who will be entering college.

Generation Z Students

Following the Millennial cohort is the generation Z student. Depending upon the source, the individuals from this generation were born sometime in the 1990s to as late as 2005 (Brotheim, 2014; Dupont, 2015; Kick, Contacos-Sawyer, & Brennan, 2015; Smith-Trudeau, 2016; Taylor, 2016; Turner, 2016; Vergin, 2015). The first of these students are just entering or will be entering college within the next few years. The impact of generation Z on student incivility is unknown, but faculty will soon be teaching this cohort of students and dealing with the uniqueness of this new generational group. This group of students is the first generation who never lived in a world without internet and smart phones, instant messaging, and texting (Brotheim, 2014; Lohman, 2016; Rickes, 2016; Smith-Trudeau, 2016: Vergin, 2015). Each generational group has different characteristics, behaviors, or attitudes and these differences are based upon the life experiences of the individuals as children and young adults. The characteristics, behaviors, or attitudes are not good or bad, right or wrong, favorable or unfavorable, but they are diverse. Understanding the generational characteristics may be helpful in working with generation Z students (Rickes, 2016; Smith-Trudeau, 2016; Vergin, 2015). The common experiences unique to the generation Z cohort include the economic uncertainty of the recession beginning in 2008, school shootings, the events surrounding 9-11, parents on active

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military duty, natural disasters, and lockdowns or evacuation drills in school. Much of this information was communicated through real time ongoing coverage through television, tablet, or smart phone information feeds (Dupont, 2015; Smith-Trudeau, 2016; Taylor, 2016; Turner, 2015).

Although there are a lot of unknowns about generation Z (Rickes, 2016), what is known or believed is that this cohort is well-informed (Kick et al., 2015; Rickes, 2016; Vergin, 2016), have entrepreneurial spirit (Rickes, 2016; Turner, 2016; Vergin, 2016), are responsible with money (Taylor, 2016; Turner, 2015), value education, family, and friends (Smith-Trudeau, 2016; Turner, 2016), and, finally are practical (Rickes, 2016; Taylor, 2016). Rickes further suggests that generation Z may be well-behaved in the classroom while others suggest this generation is the consummate multitasker, with an even shorter attention span than millennials and a need to be digitally connected at all times (Dupont, 2015; Lohman, 2016; Turner, 2015).

Generation Z students are believed to be a larger cohort than millennials (Dupont, 2015; Taylor, 2016; Turner, 2016) and college enrollments could, as a consequence, increase. Faculty will be required to work with this generational group and understanding that although there may be many differences between the current generation (millennials) and the new generation Z, they may likely have some traits in common (Kick et al., 2015; Rickes, 2016). It is possible that generation Z may also behave in an uncivil manner. Mangold (2007) suggests the importance of considering generational attributes to develop a strong teacher-student relationship. As more information about generation Z becomes available, the true impact of this new generation with regards to student incivility will be clearer. Millennial or generation z cohort member, a mentoring program could impact student development. Nursing school faculty should mentor

students to assist them in developing academic and professional skillsets, as well as to help them connect theory with practice.

Mentoring in Nursing

Mentoring is not a new concept to nursing education. Jokelainen, Turunen, Tossavainen, Jamookeeah, and Coco (2011) conducted a systematic review on mentoring of nursing students in clinical practice. Their literature review spanned a 20 year period and concluded that mentoring in the clinical practice helped students learn the connection between theory and practice. In addition, their review supported findings that the professionalism of the student was reinforced as a result of the mentorship program. Finally, the systematic review also supported the importance of the mentor as a role model.

Banister, Bowen-Brady, and Winfrey (2014) described a program to improve the success of racial and ethnically diverse nursing students. This program was developed between a hospital system and a local baccauleraute nursing program. Students were paired with a hospital nurse mentor for up to two years before graduation through the first year after graduation. The authors summarized the results of the program from 2007 to 2012. Some of the racially and ethnically diverse students were male students and in the open survey responses one male student described his thoughts about the importance of having a male nurse mentor. This male student shared that male nursing students face unique challenges and his male mentor helped him to overcome those challenges. Results of the program demonstrated improved retention and graduation rates of students who had been in this program. It should be noted that the mentors were professional nurses at the hospitals not male faculty mentors.

Georges (2012) also described a student mentoring program. One school of nursing in New York City sought to increase the number and retention of Hispanic students. The Hispanic

population in that geographical area was around 26% while Hispanic students in their nursing

program were about 8%. The program encompassed a wide range of strategies to increase and

retain Hispanic students. Some of the components of this program included tutoring, exam

review sessions, recruitment sessions at high schools, financial assistance, and mentoring. Data

collected over a three year period indicated that the number of male Hispanic students increased

by 60%. Mentoring was identified as an important component to the program.

Wilson, Sanner, and McAllister (2010) theorized that mentoring by nursing faculty could

be a possible way to promote student success. A three-year study was conducted to recruit and

retain minority and disadvantaged nursing students. An improvement was noted in the retention

rates and graduation rates of the minority and disadvantaged nursing students. The study did not

identify if gender was a component of the minority population who participated in this program,

but the program was an example of faculty-student mentorship with positive outcomes.

A qualitative study by Hill (2014) examined the lived experience of neophyte male

nurses. Six participants were interviewed about their experiences as new practicing registered

nurses as well as their experiences as a male student. The participants identified a lack a male

mentorship while in school as well as little or no exposure to male nurse educators. Hill suggests

that lack of male mentors and a lack of male support systems were barriers to these participants.

She also recommends the formation of mentor programs for male nursing students.

Le-Hinds (2010) conducted a quantitative study of new male graduates in the state of

California. He had 74 respondents who completed the Inventory of Male Friendliness in Nursing

Programs-short (IMFNP-S). Le-Hinds concluded that male students identified a lack of male

faculty and a lack of male role models as barriers to these students. The students identified that

there was no one to identify with. He recommended recruitment of male faculty although he acknowledged this is a difficult task because of nursing faculty shortages.

In a qualitative study, Lloyd (2013) studied eight millennial male baccalaureate students. He looked at factors influencing the male participant to select nursing as a career. In the course of his study, he found that the participants identified a lack of male mentorship a barrier to enter nursing programs. He also found that the lack of male faculty role models and mentors was also a concern for the participants. Lloyd suggested that if the profession cannot recruit and retain male nurses then the task of recruiting male role models and mentors will be difficult.

Juliff, Russell, and Bulsara (2015) described a qualitative study about the experiences of newly graduated male nurses. Male nurse educators were described as positive influences by the new graduates on the retention and success of the male nursing student. According to Juliff et al. male students felt more comfortable asking questions of the male nurse educator. The authors suggested the importance of attracting male students to the nursing profession. Increasing the number of men in nursing may be a method to decrease the nursing shortage and increase diversity in the nursing profession. AACN (2016) anticipates continued shortages of staff nurses. AACN (2015) also supports the need for increased diversity in the nursing profession.

Although there may not be a clear link between mentoring relationships and civility or uncivility, when the benefits of mentoring are examined, a logical inference can be made that mentoring relationships likely discourages incivility. Mentoring is described as a process between someone who is more experienced and someone who is less experienced that yields benefits to both (Jakubik, Eliades, and Weese, 20016a; Newby & Heide, 2013). Some advantages ascribed to the mentoring process include professional growth, assistance and self-confidence (Jakubik et al., 2016a; Newby & Heide, 2013). Procedures that are a part of the

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mentoring process include such things as being hospitable, being a teacher, and assisting the

mentee in the shift from classroom theory to practice (Jakubik et al., 2016a). Other important

tasks of a mentor are to help the mentee progress through education and skill development by

encouraging the mentee and providing tools to the mentee (Eliades, Jakubik, Weese, & Huth,

2016b). Jakubik, et al. (2016b) discuss specific benefits to the mentee as a part of the mentoring

process. These benefits include activities that assist the mentee, "in the development of

confidence, communication skills, problem solving skills, decision-making skills and an

improved perception of the image of the profession" (p. 252). Exemplary communication skills

may reduce episodes of student incivility and improve the rapport between the student and the

instructor (Altmiller, 2009, Olive, 2006). Mentoring may help the student practice with a more

professional attitude and better ethical behavior. Unethical behavior is not professional or ethical

and not congruent with professional practice standards. Student education in these areas is an

important component of student education (Simpson, 2012).

Attribution Theory as the Framework for the Study

This section will give an overview of attribution theory and will discuss the link between

attribution theory and the focus of this study. The discussion will include a basic description of

attribution theory and examples from academic research that demonstrate the appropriateness

and use of attribution theory in the current study. Attribution theory has been used to help

understand the meaning of human behavior (Mudhovozi, Gumani, Maunganidze, & Sodi, 2010;

Murray & Thompson, 2009; Weiner, 1979). The use of attribution theory may help in

understanding students' uncivil behavior. The theory may also help to understand faculty

members' responses to uncivil incidents. Understanding both student and faculty behavior may

help understand the cause of current behaviors and perhaps prevent future behaviors.

Attribution theory is described by Gaier (2015) as a framework for identifying, explaining, and understanding human behavior. Fritz Heider (1958) introduced the concept of attribution theory, and over time, the theory has been modified and used by researchers to help explain motivation, social psychology, and educational psychology. Weiner (1979) describes attribution theory as a framework to answer "why" questions. For example, a professor might ask, "Why did a student cheat on the test or why did the student yell at me?" Unexpected events like student incivility are likely to lead to "why" questions which make this an appropriate theoretical framework for the current study because the research supports the unpredictable nature of student incivility and the natural response to ask why it occurred

Attribution theory is based upon three assumptions about people and their behaviors (Allen, Long, O'Mara, & Judd 2008; Heider 1958). The first belief is that people attempt to understand the behaviors of self and others. There is a reason or cause for these behaviors that is automatically processed by the observer. Secondly, causes are instinctively attributed to the behavior. Finally, the reactions of the observer to the behavior are based upon previous experiences (Allen et al., 2008; Heider, 1958).

The process of attribution is described by Heider (1958) as a process where one draws a conclusion about another person as a response to the behavior of that person. Tipper and Bach (2008) describe the process of assigning or identifying attributes as an automatic response. Spontaneously emotions, intentions, and traits of people observed are assigned an attribute based upon the observed behavior. Lagnado and Channon (2008) and Weiner (2000) discuss this process of assigning an attribute as a complex process that involves perception. Perception can play a critical role in the assignment of the attribute (Gaier, 2015; Lagnado & Channon, 2008; Murray & Thompson, 2009). At times, an attribution error or misattribution can occur (Rosset,

2008; Tipper & Bach, 2008). This type of error occurs when an individual draws a conclusion that is not the correct reason for the behavior. Gaier (2015) describes how a lack of information or a lack of facts can contribute to errors in the assignment of an attribute. Rosset (2008) and Weiner (2000) also discuss errors in the assignment of attributes. Often an error will occur because the individual is too quick to assign an attribute and then assumes the worst about another. It can also be easy to believe the actions of others are intentional which can result in an attribution error. Gaier (2015) and Rosset (2008) suggest considering other alternatives for a person's actions and to make the assignment of attributions more slowly after considering other alternatives.

Research suggests the actions of uncivil students evoke strong emotions. Emotions, especially strong emotions, are an important component to understand attribution theory (Demetriov, 2011). Gaier (2015) depicts attributions as powerful forces that assist one in future behavior and decision making. Kulinna (2007-2008) suggests that teachers may have their behaviors toward students impacted by the attributions that they assign to the student.

Attribution assignment can be the result of an attribution error as previously discussed. An example of how an uncivil student event might incorrectly be assigned an attribute can be described by the following example. A student turned in an assignment that was clearly haphazardly completed and was found to be unacceptable. Weiner (1979) discusses the potential attributions that can be assigned to a given situation. In this case, the professor may believe that the student didn't prepare adequately, did not care about the value of the assignment, or just intentionally did not complete the assignment. Another interpretation of the same situation could be that the student was ill, suffered a family crisis, or didn't understand the assignment. Both interpretations could be correct, and one could easily assign the wrong attribution to the student.

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Weiner (1979) describes how a professor or any individual for that matter will more quickly forgive an illness or family issues rather than an intentional lack of caring. Illness or family issues may not be considered as student incivility, while the lack of caring or the intentional disregard for the assignment would be perceived as uncivil.

Weiner (1979, 2000) describes three underlying causal properties of attribution theory. These properties are locus, stability, and controllability. Locus has to do with the location of the cause. Locus can be inside or outside the person. An example of internal locus would be a person's innate ability, while an example of an external locus would be the difficulty level of a task. Elements of locus inside or internal to the person include things like ability or effort. External elements of locus include help from others or how difficult or easy a task is to complete. Weiner (1979) suggests that there can be an interpretation on whether a factor is internal or external. For example, if one is sick and is frequently sick, the interpretation could be an internal factor, while if someone developed a cold and had to function with the illness; the element might be interpreted as an external factor. Factors can be stable or unstable. An example of stability is duration or aptitude. Aptitude generally speaking does not change over time. An unstable or temporary element would be chance or luck which would be an element that could change over time. The last causal property of attribution theory is controllability. This property speaks for itself. Either the person can control a situation or he cannot control the situation. Depending on these factors, one may choose to be civil or uncivil. For example, if one does poorly on an exam, one can look to self to see if there is a reason. Did the person fail to study (internal as lack of effort) or did the person find the test very difficult (external causation)? Then, the person can look at controllability. The difficulty of the test may be out of the person's control. Finally, the student may look at stability. Maybe they say that they had poor luck (unstable causation) or

perhaps the teacher was unfair (stable causation). All of these factors make up how the student will respond to their poor performance. If the student feels external issues, a lack of stability and controllability are the primary reasons for the poor response on the test, then their behaviors may reflect this conclusion, and the student may act in an uncivil manner. The student may be correct or incorrect in his assessment of these factors. The process of determining the meanings of the performance is multifaceted and error can sometimes occur (Weiner, 2000).

Weiner (2000) also added two additional elements or what he describes as determinants of motivation. Expectancy is one determinant which is the subjective likelihood of future success. From an incivility perspective, an example of this determinant would be students doing poorly on an exam and then complaining to the professor that the exam was too hard and some of the questions should be discarded, or other answers should be accepted, or other attempts to badger the professor to change the results. As a result of the student's complaints, the teacher may change future exams to avoid the same response. A change of pedagogy as a result of student incivility has been documented by Lampman et al, 2009 and Williamson, 2011. In fact, Weiner (1979) alludes to this very response where as a result of past experiences one anticipates the same response and as a result the professor makes changes to tests or teaching practices so that the student complaints can be avoided. The second determinant is value which is described by Weiner (2000) as the emotional outcome of goal success or failure. Value in the above scenario could be translated by the importance the professor places on the test and the outcomes of the test. If the professor feels that the value of assigning a grade from the test is of more value than dealing with students who are unhappy with the results of the test, then the test will not be changed and the professor will deal with any complaints that may be lodged as a result of poor test grades. It is up to those involved to determine what subsequent behavior will be acceptable

by assimilating thoughts and feelings and by determining the cause and attempting to understand the experience. Weiner (2000) describes the classroom like a court room, where the professor must make judgments on the misbehaviors (incivility) of the students. Causal decisions (attributes) are made about the student—good/bad, right/wrong/appropriate/inappropriate and the like.

Attribution theory has been used in higher education but research suggests little use with regards to the understanding nursing student incivility. As attribution theory attempts to help one to determine the cause of behaviors and can influence future behavior (Heider 1958, Weiner 1979, 2000, 2010). Attribution theory is an appropriate framework for this study because this study focuses on the lived experiences of male nurse educators with student incivility. A better understanding of the perspective and perceptions of the nurse educator will improve the meanings attributed to the uncivil events thus increasing the knowledge of nursing student incivility.

Several studies in the literature have used attribution theory to explain faculty behaviors. Kelsey, Kearney, Plax, Allen, and Ritter (2004) studied undergraduate general education students' perceptions of teacher misbehaviors. The term misbehavior was used, although the behaviors described in the study were congruent with what has been discussed previously as student incivility. Kelsey et al. (2004) surveyed students in an attempt to determine students' perceptions of causal factors for teacher misbehaviors. The premise of using attribution theory as a framework for this study was predicated on the idea that by understanding why a student attributed a specific cause to teacher misbehaviors it would allow the researchers to predict student's subsequent reactions to teacher behaviors. Additionally, the authors suggest the attributions of cause for teacher misbehaviors could influence student motivation to learn and

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evaluation of the teacher by the student. The same thinking could be applied to the current study. The professor attributes a cause to uncivil student behaviors, the attribution may be correct or incorrect, but an awareness of the possible causes will lead to a better understanding of nursing student incivility and perhaps the professor will manage the incident differently and wrought a change in future behaviors.

Kelsey et al. (2004) found that students overwhelmingly attributed the cause of teacher misbehaviors to the teachers themselves. The researchers found the results to be consistent with attribution theory especially when it comes to assigning cause to one's shortcomings. In this case, the students did not consider their behavior as a possible cause for the teacher misbehaviors, the teacher misbehaviors were the result of teacher rather than the situation.

Hoffman (2012) also used attribution theory in a cross sectional mixed-method study of nursing students' perceptions of student and faculty incivility among three different programs of nursing. Hoffman (2012) studied not only students' perceptions of faculty behavior but also students' perceptions of uncivil student behaviors. Hoffman (2012) found that students perceived uncivil behavior as being disruptive to the educational process. Studies by Clark (2008d), Kolenko et al. (2006), and Williamson (2011) support the negative impact student incivility has on the learning environment. The majority of students who participated in the qualitative portion of the study attributed student misbehaviors to causes outside of themselves (external causation). Some examples given for student misbehaviors included issues related to the teacher as in poor teaching skills, ineffectiveness, and hostility. Other issues identified by students included stress, heavy workload, competitive environment, and grades. These results are consistent with the literature, in that, one tends to look for a cause outside the self when the behavior is negative (Allen et al, 2008; Mudhovozi, 2010; Rosset, 2008; Weiner, 2000).

Gillespie (2014) used attribution theory in a phenomenological study of faculty experiences with disruptive undergraduate students. Gillespie (2014) conducted six faculty interviews with faculty of various disciplines which included special education, human trafficking, criminal justice, social work, chef, and a teacher who taught multiple courses with no area of specialization identified to learn about their experiences with disruptive students. Gillespie (2014) describes disruptive behaviors on a continuum of benign incivility (eye rolling, computer use, arriving late) to distressed signaling (unusual behavior, poor hygiene, suspicion of drug use) to threatening behavior (stalking, physical threats, verbal threats), all of which can be combined under the term student incivility. All faculty participants in this study identified disruptive student behavior as widespread. Faculty attributed the cause of disruptive behaviors related to student issues. Some of the causes attributed to disruptive student behaviors included student entitlement, the changing student, and a lack of awareness on the part of the student. Some factors that contribute to the student misbehaviors included improper use of technology in the classroom and a lack of interpersonal skills. In this study faculty did not consider themselves as a factor in student misbehaviors which is consistent with attribution theory.

Finally, Wagner (2014) used attribution theory in a causal comparative study about student and faculty incivility. Perceptions of junior and senior undergraduate students were sought in nursing, business, and education. Student groups by discipline were compared regarding their perceptions of how often uncivil behaviors occurred, the types of uncivil behaviors, and the reasons for the uncivil behaviors. Students in Wagner's (2014) study identified external causes for student incivility. The causes for student incivility were attributed to the teacher or the environment, not the student. This finding was consistent across all disciplines although one interesting finding was unique to nursing students. Nursing students

identified one internal locus of control cause, and that internal cause was that of stress. Nursing students indicated that stress reduction and improvement in self-care could decrease student incivility. The results of this study were consistent with earlier studies of attribution theory in where the individual typically identifies cause external to self when looking for a reason for negative behavior (Allen et al., 2008; Mudhovozi, 2010; Rosset, 2008; Weiner, 2000).

These higher education research examples examined the topic of incivility using attribution theory as a framework. One study focused on student perceptions of faculty incivility, another study examined student and faculty perceptions of incivility across three program types, and a third study reviewed student incivility from the faculty perspective but no nurse educators were a part of the study participants. No studies have been located that use attribution theory in higher education to explain the lived experience of the nurse educator. Although no studies have been located that explore the use of attribution theory and nurse educators, these exemplar studies support the appropriateness for the use of attribution theory in the current study.

Chapter Summary

A review of the literature was conducted to gain a better understanding of issues related to student incivility, with an emphasis on nursing education. Many terms have been used to describe student incivility and include academic dishonesty, student incivility, incivility, academic bullying, and academic incivility, as well as others. The literature review identified incivility as an ongoing problem that is recognized by students and faculty. The research supports the finding that incivility has a negative impact on the learning environment. Some scholars suggest that incivility may compromise patient safety. Review of the literature included a discussion of the impact incivility has on the profession of nursing. Studies that focused on the

faculty perspective of student incivility were examined. Student focused research on student

incivility was also explored. Many college students today are a part of the millennial generation,

so a review of the literature on millennial students was completed. Generation Z is the newest

cohort of students entering college or soon to be entering college so what information is

currently available was included. The last section of the literature review discussed attribution

theory and its use as a framework for the current study. The results of the literature review

revealed that most qualitative and quantitative studies on nursing student incivility were largely

composed of female nurse educators. This study attempts to fill the gap by studying the lived

experience of male nurse educators who have experienced student incivility.

CHAPTER 3

METHODOLOGY

This study was designed to explore the lived experiences and impact of incivility on male nurse educators in the northeastern United States. A phenomenological approach was used to understand the experiences of incivility of the participants. Additional focus areas included improved management, prevention, and comprehension of nursing student incivility by understanding the experiences of male nurse educators.

Although not new, many researchers have documented problems of student incivility to be increasing (Clark & Springer, 2007a, 2007b; Ehrmann, 2005; Lashley & DeMenses, 2001; Thomas 2003; Williamson, 2011). Although these behaviors typically are non-violent, some actions are related to anger and have the potential to incite violence. These violent actions have the potential to result in an emotional toll on both faculty and students. Because students and faculty occasionally behave in a manner considered to be uncivil, the learning environment is often disrupted (Clark & Springer, 2007a) and negatively impacted (Clark, 2008d, Kolanko et al., 2006, Luparell 2003, 2004; Williamson, 2011). Given these factors, it is important to study the effects of incivility. Previous studies have not examined the lived experience of male nurse educators; therefore, this research attempted to fill the gap in the literature by studying male nurse educators who have experienced an event of student incivility.

There was one central research question in this study, "What is the lived experience of a male nurse educator who has experienced nursing student incivility?" Sub questions were (1) "How do male nurse educators describe their experiences with nursing student incivility?" (2) Does nursing student incivility impact the classroom teaching strategies of male nurse educators?

If so how? and (3) "Does nursing student incivility impact job satisfaction of male nurse educators? If so how?"

Research Design

A phenomenological approach was used to guide the study and to evaluate the data. Nursing researchers use phenomenology as an approach to understand nursing phenomenon related to lived experiences (McConnell-Henry, Chapman, & Francis, 2009). McConnell-Henry et al. (2009) described two major types of phenomenology—Hermeneutics developed by Heidegger and transcendental developed by Husserl. Mapp (2008) described Hermeneutics as a process where the researcher interprets data collected using the lens of their own experiences and knowledge. McConnell-Henry et al. (2009) and Dowling (2004) explained that transcendental phenomenology requires the researcher to bracket or put aside any preconceived ideas while Heidegger did not believe in bracketing because he felt the researcher could not put strong feelings aside. Heidegger also described how the research process could be impacted by the literature review, which is another reason bracketing does not work. The researcher selected Heidegger's approach to guide the research process because the researcher, although not a male, has experienced student incivility on many occasions and does not believe it is possible to totally put aside ideas, feelings, or knowledge about student incivility. Since the primary goal of this study was to learn about the lived experience of male nurse educators who have experienced nursing student incivility, a hermeneutical approach was used to guide this study. The hermeneutical approach looks at the lived experiences of the participants, as well as understanding and explaining the phenomenon (Creswell, 2007).

Population and Sample

The population for this study was male nurse educators in the northeastern United States. Male nurse educators were selected because prior studies did not specifically include male participants. Gender diversity was lacking in previous studies. Caucasian females were participants in former studies and a new perspective was sought by surveying male nurse educators.

Purposive and snowball sampling was used to obtain participants for this study. Purposeful sampling was primarily used because through purposeful sampling there was an increased probability that an accurate description of the experience of male nurse educators would be obtained. Creswell (2012) describes snowball sampling as a method of purposeful sampling. Through the snowball technique, the researcher may recruit subjects that the researcher may not be able to otherwise locate using the method of reviewing faculty listings on nursing program websites. School websites from any school approved by the state board of nursing in the northeastern United States were reviewed for faculty lists. Male faculty on the school lists were contacted via e-mail to determine if they were interested in and would meet the criteria for inclusion in this study. A total of 52 requests were sent to potential participants in the states of Pennsylvania, Ohio, and New York. There were no responses from male nurse educators in Ohio. Ten potential participants expressed interest in participating in the study. Nine educators met the inclusion criteria. Participants were then asked if they knew any male nurse educator who may be interested in participating in this study. In addition, the researcher queried professional contacts and asked these contacts if they knew of any male nurse educators who might consider participation in this study. The researcher provided contact information to the study participants and to the professional contacts to share with any potential participant. It

was up to the potential participant to notify the researcher if they were interested in contributing to this study.

Criteria for all potential participants included the following components: 1) male registered nurses who were licensed in a state in the United States and were currently teaching in higher education or 2) retired male nurse educators who were licensed in a state in the United States who lived in the northeastern United States and 3) past experience with student incivility. The sample size consisted of ten participants with nine participants meeting inclusion criteria. Creswell (2007) discussed sample sizes for qualitative research. He described that small sample sizes are often indicated in phenomenological research because each participant provides extensive detail about the phenomenon being studied. It was not necessary to obtain additional participants as data saturation was achieved.

Years of experience in nursing education ranged from five to 30 with an average of 15 years. Ages of participants ranged from 30 to 67 years with an average age of 51. All participants were Caucasian. Pseudonyms were assigned to protect the confidentiality of the participants. In addition, specific position titles, geographic location details, and institutions were not disclosed to help protect participant confidentiality.

Three of the nine participants described their area of nursing expertise as critical care and three participants identified pediatrics as their area of expertise. One participant identified medical surgical nursing, one participant identified mental health, and one participant identified public health as their area of expertise. Currently, eight of the participants teach in the clinical environment. Seven participants teach in a lecture course, as well. One participant is solely teaching in an on-line program and is not teaching in the clinical environment now. All participants are currently employed in nursing education and all are still employed at the same

university where the incivility occurred. All participants described more than one episode of nursing student incivility with the events occurring days before the interview to 20 years prior to the interview.   Table 1 outlines the demographic data.

Table 1

Demographic Data

Name	Years in Nursing education	Race	Current assignment	Age	Specialty Area	Public or private school	Tenure or non-tenure track	Highest level of education
Mark	10	Caucasian	On-line RN to BSN	67	Public Health	Public	Non tenure	Doctorate
Chris	8	Caucasian	Trad BSN	52	Critical Care	Public	Tenure track	Doctorate
Bill	22	Caucasian	Trad BSN & Graduate	52	Med-Surg	Public	Tenured	Doctorate
Dave	10	Caucasian	2nd degree BSN	56	Pediatrics	Private	Non-tenured	Doctorate
Ryan	10	Caucasian	2nd degree BSN	60	Critical Care	Private	Non-tenured	Masters
Jim	30	Caucasian	Trad BSN	58	Pediatrics	Public	Tenured	Doctorate
Greg	5	Caucasian	Trad BSN 2nd degree BSN	31	Pediatrics	Public	Tenure track	Doctorate
Ben	20	Caucasian	2nd degree BSN & Grad	54	Critical Care	Private	Non-tenured	Doctorate
Luke	5	Caucasian	Trad BSN	30	Mental Health	Public	Non-tenured	Masters

Procedures

Qualitative research by Williamson (2011) and Olive (2006) studied only responses of female nurse educators to student incivility. Some limitations identified by the researchers included the issue of only female participants and that male participants or participants of a

different race or ethnic group might elicit different responses. The goal of this study was to look at a different population, male nurse educators, to explore the lived experiences of male nurse educators and compare these experiences with information known from current literature.

The interview protocol was based upon the protocol used by Williamson (2011). The protocol was shortened and slight modifications were made for this study to reflect the research questions of this study. Williamson's interview protocol was based upon the literature surrounding student incivility and has been peer reviewed for validity. Since modifications to the interview protocol were made for this study, nurse educators from a local university were asked to review the modified interview protocol to assist in the content validity. Feedback was sought from the faculty volunteers and adjustments in the questions were made when the interview protocol was finalized. The interview protocol is included in Appendix A.   After changes from feedback were incorporated into the interview protocol, the protocol was pilot tested. Faculty volunteers from a local university were interviewed using the revised interview protocol. The pilot testing was recorded and transcribed by the researcher. Pilot testing identified gaps in data collection and allowed for question revision. The content of the questions was improved by pilot testing. In the pilot test, participants were asked to describe an incident of incivility that happened a long time ago and an incident that happened recently. Through the pilot testing, the question was found to be awkward. When analyzing the responses, there did not seem to be value in the responses. Instead, the participants were just asked to describe an incident of student incivility that stood out to them, that was important to them. During the interviews, it was discovered thorough the pilot testing that additional experiences were related without prompting by the researcher. These additional experiences that were shared spontaneously were felt to be of great value because the researcher did not solicit the incidents.

Potential participants were contacted via e-mail. If the candidate had an experience with student incivility and if they were interested in participating in an interview, they were asked to respond to the researcher. Interviews were conducted from May through June of 2016. Interviews were scheduled at the convenience of the participants and lasted from 45 minutes to 90 minutes. Six of the nine interviews were conducted face-to-face at the universities of the participants. Three interviews were conducted via Skype. Distance and preference of the participant dictated the type of interview conducted—in person or via Skype.   Interviews were conducted in a private location to maintain confidentiality of the participant. Open ended questions were used to allow the participant to reveal the lived experiences in their own words. The researcher participated in the interview process by using the technique of active listening. Notes were taken as needed to highlight significant points. Analysis then began.

Analysis of the Data

After each interview, the researcher spent time in reflection by reviewing the field notes and documenting impressions, feelings, and key findings. This documentation was made before any review of the transcript had been completed. Personal reactions to the data were clearly identified during this process and documented separately. The researcher listened to the audiotape several times before transcription began. At any given time, the researcher was interviewing participants and analyzing data concurrently.

Once the data were transcribed, all interviews were sent to the participants for member checking (Creswell, 2012). Each participant was asked to review the transcript to determine if the transcript was a fair and accurate representation of the interview. If there were errors, the participant was asked to correct the transcript and return it via e-mail. If the transcript was a fair and accurate representation of the interview, no intervention was required. Two participants

responded that the interview was accurate and no changes were required, therefore, no changes in the transcript were requested.

After the transcripts were verified, coding began. The interviews were entered into NVivo as they were transcribed. The coding was identified in NVivo as "nodes." Codes were developed as the information from the interviews was read and re-read. Once the material was coded, the nodes were then printed. NVivo allows the researcher to keep the identifying information intact but print in hard copy format each node or code. Once the data were printed, it was manually clustered into common themes by the researcher. Themes are clusters of related codes (Creswell, 2012). Themes were revised as the interviews continued and a master list of the themes and codes were maintained. NVivo was not used to identify commonalities or analyze the data. After themes were identified, an explanation of the participant's experiences was developed. The goal was to describe and to understand the lived experiences of the participants (Creswell, 2007).

After nine interviews were completed, the data were evaluated to determine if any new themes were identified. No new themes were identified, the saturation point was met, and the interview process ceased. If new themes had been identified, then the interview process would have continued until no new themes were found.

Chapter Summary

Incivility in nursing education has been identified as an important issue. This study sought to explore the male nurse educator perspective of student incivility. A qualitative approach was used to articulate the lived experiences and the impact of incivility on the participants. Male nurse educators from the northeastern United States who taught in a registered nursing school or program were sought. Subjects were enrolled in the study using

purposeful and snowballing techniques. Data were collected until saturation was achieved.

Narrative texts were studied to identify common themes. All interviews were recorded. After

the interview, the researcher listened to audiotapes, reflected on the interview, and then wrote a

brief summary of the interview. Personal impressions were identified and documented at that

time. Research questions were used as a guide during the review of the interviews. The next

chapter will provide a discussion of the results of the interviews.

CHAPTER FOUR

DATA ANALYSIS

Chapter four will describe the findings of this study which focused on the lived experiences of male nurse educators who have encountered nursing student incivility. Nine male nurse educators were interviewed for their perceptions of nursing student incivility. From the perspective of the male nurse educators, six major themes were identified from the interviews. The themes were the uncivil event, physical and emotional responses to student incivility, reasons for student incivility, actions to address student incivility, the gatekeeper role, and males mentoring males in nursing. Each individual theme will be examined and discussed. Narratives, reflective of each theme, will be provided.

The research questions identified in this study contained one central question, "What is the lived experience of a male nurse educator who has experienced nursing student incivility?" Specific narrow questions were designed to explore the experience of the male nurse educator. These questions were (1) How do male nurse educators describe their experiences with nursing student incivility? (2) Does nursing student incivility impact the classroom teaching strategies of male nurse educators? If so how? and (3) Does nursing student incivility impact the job satisfaction of male nurse educators? If so how?

During the research process, it was noted that the concept of incivility was important to operationalize. Gallo (2012) defines incivility as "the disrespect for others, the inability or unwillingness to listen to other's points of view and seek common ground, and not appreciating relevance of social discourse" (p. 62). Feldman (2001) describes classroom incivility or academic incivility as "any action that interferes with a harmonious and cooperative learning atmosphere in the classroom" (p. 137). Specific to incivility in nursing education, Clark,

Farnsworth, and Landrum (2009) stated that it is "rude or disruptive behaviors which often result in psychological or physiological distress for the people involved," (p.7). These definitions were shared with all of the study's participants.

Participants were male nurse educators in the northeastern United States whose e-mail addresses were obtained through university websites. Fourteen male nurse educators responded to the initial e-mail request; however only nine participants met all inclusion criteria. Five participants taught in public universities while four taught in private universities. Participants taught in a variety of program types including on-line RN to BSN (two participants), traditional baccauleraute (four participants) and accelerated program or second degree RN program (three participants.) Nearly all participants taught previously in other programs of nursing which included licensed practical nurse programs and associate degree programs. Three of the participants identified that they have taught, or also are currently teaching, at the graduate level. Five of the nine participants teach in more than one program in their current appointment. Seven of the nine participants have completed a terminal degree. Two of the participants were currently enrolled in doctoral programs.

Interviews were conducted from May through June of 2016. Interviews were scheduled at the convenience of the participants and lasted from 45 minutes to 90 minutes. After each interview, the researcher spent time in reflection reviewing the field notes and documenting impressions, feelings, and key findings. The audiotape of each interview was reviewed and additional impressions, ideas, thoughts and feelings were documented. The researcher then transcribed the interviews verbatim. The interviews were entered into NVivo, previously identified codes were identified in as "nodes" in the NVivo program. These nodes are codes developed by the researcher as the information was read and re-read. NVivo allows the

researcher to keep the identifying information intact but print in hard copy format each node or code. Once the nodes were printed, the researcher manually clustered the data into common themes. After reading one or two transcripts, a master list of codes was developed. As more interviews were completed, common themes were identified, and a list of these themes was maintained. After the participants were interviewed, the data were evaluated to determine if new themes were revealed. When no new themes were identified, the saturation point was met and the interview process ceased.

Method of Analysis

To identify themes, each interview was read and re-read in the process described below. After each interview, the field notes were reviewed and initial impressions were documented. Then, the audiotape was reviewed in its entirety before transcription began. After this review, the transcripts were transcribed verbatim. After the transcription was completed, the audiotape was reviewed and compared to the transcription for accuracy. Transcripts were sent to the participants for member checking. Next, each transcript was printed and reviewed. Key words or phrases were highlighted. The interviews were read and reread with thoughts, ideas, and key phrases documented in detail in margin notes. The interviews were imported into NVivo for additional review and identification of important ideas. From these reviews, themes were developed. Each theme was identified by a 'node' in NVivo and each node was then printed from NVivo and analyzed. Tables were developed to concisely reflect the information by subject in each node or theme. Six themes were identified. The themes identified were the uncivil event, physical and emotional responses to student incivility, reasons for student incivility, actions to address student incivility, the gatekeeper role, and males mentoring males in nursing.

Heidegger's Hermeneutical phenomenological approach was utilized in this qualitative interview study of male nurse educators. McConnell-Henry, Chapman, and Francis (2009) describe Hermeneutic Phenomenology and Transcendental Phenomenology as the two major types of phenomenology. Hermeneutical Phenomenology was developed by Heidegger and Transcendental Phenomenology was developed by Husserl. According to Mapp (2008), Hermeneutics is a process where the researcher interprets data collected using the lens of their own experiences and knowledge. In Transcendental Phenomenology, the researcher must bracket or put aside preconceived ideas (Dowling, 2004; McConnell-Henry et al., 2009). Heidegger questioned the process of bracketing because he felt the researcher could not put strong feelings aside. Heidegger also described how the research process could be impacted by the literature review which is another reason he felt bracketing does not work (Dowling, 2004; McConnell-Harry et al., 2009). Heidegger's approach was selected to guide the research process because the researcher, although not a male nurse educator, has experienced nursing student incivility on many occasions and does not believe it is possible to totally put aside ideas, feelings, or knowledge about nursing student incivility. Heidegger, according to McConnell-Henry et al. (2009), places emphasis on the interpretation of data connected to previous knowledge. Consistent with attribution theory, reality is built upon our experiences.

The hermeneutical approach is appropriate to study the lived experiences of the participants, as well as to understand, to explain, and to make sense of the phenomenon (Creswell, 2007). This unscrambling of the data is the final step in the hermeneutical research process (Creswell, 2007).

Themes

The next section will describe the six major themes identified through the data analysis. Participants' interviews will be included to fully describe the experiences. This section describes the uncivil event types identified by the participants. First, an overview of the theme "uncivil events" will be provided. Then, six categories of uncivil behavior will be described: classroom issues, test review problems, cheating, assignment issues, clinical site difficulties, and potential physical threats to the participant. Finally, a summary of the experiences will be examined.

Uncivil Events Overview

Uncivil events described by the participants emerged quickly and clearly as a dominant theme. A total of 62 uncivil events were shared by the participants during the course of the interviews. After obtaining demographic data, each participant was asked to share an incident of student incivility, an experience that stood out for them. All of the participants shared one or two uncivil student experiences. As each interview progressed, more uncivil student events were revealed by the participants. These additional experiences were not necessarily sought by the researcher but they were spontaneously shared by the participants while the participants were responding to other interview questions. Bill shared as many as 15 of what he considered to be incidents of student incivility, while another individual shared four incidents of student incivility. Although Bill was able to relate 15 incidents of student incivility and he suggested he could go on forever, the majority of the participants had trouble identifying more than the initial events asked of them.

Sentiments similar to Nathan were commonly heard from the participants, "I can hardly remember earlier in my career," or "I think for the most, the vast majority of students are respectful." Nathan further suggested that the students who exhibit uncivil behaviors were rare;

and, as a result, he was having difficulty remembering specific incidents of student incivility.

Nathan frequently laughed when he discussed student incivility. He shared that he often teaches

with a female faculty member and the students sometimes call them mom and dad.   He shared

that the students frequently go to the female faculty member and will say, "dad won't let us do

that," and hope that she will give in and let them do whatever they wat to do. Conversely the

students will come to him at times and will say, "mom won't let us do that," and hope that he

will give in. He described the situation of mom and dad as "funny" and he says he keeps in close

contact with his colleague and since they are both parents they are used to the idea of kids trying

to see if a parent will give in on an issue. Although the student behavior might be considered

uncivil by some, Nathan is so used to the back and forth tactics of his students, he finds it more

comic than uncivil.

Nathan went on to say, "if you are a teacher you are kind of in a parental role, you are the

dad, I am the daddy, and there's certain behaviors that are expected around your parents, you

know around your family. I am not your friend, I care very much about you and I want you very

much to succeed, but I am not your friend. I think maybe they get that." Nathan likes to have a

good time in class, he uses movie clips, clinical examples and active learning strategies to keep

the class interesting. He enjoys laughing and strives to keep things light and amusing when

possible. Because his evaluations are good, he things he is doing something right.

Dave remembered an incident from many years ago, but he was unable to remember

many of the details, just that a student had written uncomplimentary comments on an evaluation.

He remembered the incident but could not recall any detail regarding the specific complaint by

the student in the evaluation. Dave shared an incident of student incivility that occurred just a

week before the interview.   He was teaching a pharmacology and pathophysiology class

discussing drug names and how drug companies decide upon names. He asked the class if anyone knew what Premarin® was. One student shouted out that Premarin® stands for pregnant mare's urine. The student went on to describe how horses were kept artificially pregnant and when foals are born they push the foals in a box to die. Dave ignored the response about foals and stated that yes the student was correct that Premarin® is produced for hormonal therapy for women from a pregnant mare's urine. Dave stated he ignored the part of the conversation that he found to be uncivil. He stated the agenda for the conversation was on drug names and drug companies not on the production of the product. He also shared that once he had a student tell him he was doing math "wrong." This student also shared that if he did the problem her way, everyone would understand the calculation process. Dave explained that he taught the class twice a year for seven years and that sometimes students need the problems to be broken down into small steps. Later in the lecture he asked the student to come down to the board and show the class how she thought the problem should be done. Several students asked Dave to explain the problem his way. The student then walked off in a "huff." Dave stated, "we'll have to have a conversation about her behavior at some point but I think we both needed a cooling off period." Later, Dave shared a comment that echoed Nathan. Both participants stated that there were few uncivil students. Dave described that the "vast majority" of his students did not display uncivil behaviors and he would, "be happy with them looking after me because they come with compassion."

Bill and Chris remembered uncivil events in great detail. Bill shared an event that occurred 20 years ago with clarity. Chris, with 8 years of full time experience in his current position, also spoke in detail and with passion about behaviors he found to be uncivil. Jared shared an experience approximately one year ago that was especially poignant to him. He

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related an incident where a student grieved a grade and this experience was described by him as an incident that he would never forget. The student turned in an assignment late and received a poor grade partially because the assignment was turned in late. Jared made many efforts to remind the student about the assignment through the campus e-mail system. Jared related that the student implied that he, Jared, had not made an adequate effort to communicate with her. As a result of the student's grievance, she was allowed to turn in a new assignment which resulted in a passing grade. Jared has taught for 20 years and described this incident as, "the one incident in my career, and there's only been a few things, and that's one of them that stuck with me." As a result of this incident, Jared maintains a folder of student materials documenting any troublesome interactions in the event another student may put him in a similar situation. Other than this one significant incident, Jared was like Nathan and Dave with few events that stood out or were easily remembered. Jared admitted, "I just kind of see the behaviors, and say that's not right, OK let's move on, that's the end of it."

Classroom Issues

The majority of the uncivil student behaviors that were reported by the participants were related to issues in the classroom. Nearly 40% of the uncivil behaviors shared were incidents that occurred in the classroom environment. Every participant, except Mark, had at least one issue with incivility in the classroom. Mark teaches RN to BSN students in an exclusively on-line platform. Mark related prior traditional classroom teaching experiences (non-nursing) where incivility issues occurred. These non-nursing experiences were not included as a part of this study.

Most of the nursing classroom issues reported by the remaining participants related to technology. Issues of lap top use for non–class related activities, checking e-mail, shopping on-

line, or texting were frequently reported. Other common issues of student incivility identified were those of side conversations, not paying attention, acting bored, or making inappropriate or sarcastic remarks. Other classroom issues were related to testing specifically a formalized review of the test questions by the instructor immediately after students completed a test.

Bill related a classroom incident where a student asked to be excused from a class to visit his girlfriend. When the student was advised that the absence would be an unexcused absence, the student became very angry and stated he would come in to catch up during Bill's office hours because, "it is YOUR job, and that is what we pay you for." Bill shared that the student put a finger in his face while he was making that statement. Bill actually raised his voice and shook his finger to demonstrate the student's behavior. Bill did not change his position with regards to the unexcused absence, and the student did not miss the class.

Nathan described a student who "demanded" that class end because, "we've gone past and I don't think we should have to sit here anymore." Nathan shared that this was the last class of the semester and the air conditioning was not functioning appropriately. He described the room as being very hot and the class period was long. The conditions of the room made conducting the class challenging. Nathan advised the student that he was welcome to leave, that anyone could leave if one has other things to do. Ultimately, the student remained in the class and Nathan completed his review of the material. Nathan described the other students in the class as "shocked;" but, during his description of the incident, he frequently laughed.

Nathan described another incident that occurred at the beginning of the year. He was conducting a class with traditional BSN students that started at 9:30 in the morning. The first class was an orientation class and there was one student who had his arms folded and his head down on the desk. Nathan portrayed him as "pretty much out of it." When students sleep,

Nathan stands close to the student and starts talking to the class while next to the sleeping student. That action acts as a stimulus to the student to pay attention. The student during this episode was especially slow to respond so Nathan put his foot out and touched the student's foot. Finally the student looked up and Nathan said, "Are you still with us?" Nathan's approach is to deal with situations directly and he has found this approach to work well with students who are not paying attention.

Jared described students who were talking during a class. When this occurs he stops his lecture and waits for the students to stop talking. If students do not stop talking he will ask them directly if they have a question or have something to contribute to the lecture. If he sees on-line shopping during class he will ask them after class if they understood the lecture because he noticed that the student was getting their shopping done during class time. Jared acknowledged that he, "is a pretty up front guy who addresses behaviors as I see them. I never assume that they can't multitask or they didn't get anything out of the lecture, but I just make sure that they know I've seen this behavior and I'm not really appreciative of the behavior and then we go on from there."

Chris identified classroom issues where students arrived to class late or skipped class, and he also described that end-of-the-semester student behavior is often out of control. Jared referred to end-of-the-semester behavior as "summer-itis."

Test Review Problems

Many uncivil events identified were related to testing and review of the test questions by the instructor after all students completed a test. Luke and Chris reported students asking for specific information about the material on the test. They have also had students request exact test questions. The majority of respondents, though, had issues when it came to test review.

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Many study participants review tests or will answer questions regarding the test in a test review session immediately after the test. During these sessions, Chris shared that students repeatedly argued during the test review about the rationales for the right and wrong answers. He has felt that students were "grilling" him and this student behavior was not appropriate. He described a situation where students argued about test question rationales. Students kept arguing about a rationale despite the fact Chris said that they had to move on. The student kept arguing and then other students started to raise their hands asking about other questions. He stated the, "students continued to badger him for explanations." Chris provided question rationales and the students stated they didn't understand. This process went on for a lengthy period of time until Chris finally stated that if the students wanted to discuss questions in more detail that they would have to make an appointment during office hours. Chris also found that students miss test questions because they miss-read the question. He tells them to look at the question and to try to figure out what the question is asking. He reads the question with the student and often the question is asking what would the nurse do first. All options are things that the nurse might do, but what would the nurse do first. He then talks with the student about why they picked the answer they did and he helps them figure out why the answer is incorrect. This process often takes a lot of time and Chris has found this activity is more effective when working one-on-one with a student during office hours.

Chris continued to describe testing practices in more detail. He freely admitted that his tests were very hard. He wants the student to be successful on the NCLEX examination and he thinks that his tests will help prepare them for the state licensing examinations. He's heard students say that, "Dr. C's exams were so difficult, I hated them so bad." He tells his students,

"these exams are difficult for a reason, because I want you to be so prepared when you get to the NCLEX that you just say this is the easiest exam that I ever had.

Greg had a similar experience with students arguing about test questions and answers. After each examination they do a review of the test materials and share the correct answers. He described his first experience as a faculty member teaching a course and writing examination questions and then administering the examination. The first time he conducted an examination review it turned into a debate between him and the students. He described a "back and forth sort of discussion or argument over various parts of the exam that turned into an unsafe learning environment." Sometimes, the students stated that the questions were poorly worded and confusing. The questions were described as bad. As a result of these behaviors by students Greg set up some ground rules for examination review. He listed, "the exam review is only for you to hear what the correct answers are. It is not to have a discussion." He goes on to say he has students, "write down which items they have questions about, " and when he looks at the statistical analysis those questions will receive special attention. Students may also make individual appointments to go over any questions they might have about the examination. Greg likes individual appointments to avoid the chaos that can occur with big groups.

Nathan described students "fighting for points" and Luke shared a similar sentiment with students, "fighting for every point" during test reviews. The majority of the participants reported test review processes as grueling. While Dave did not have issues about test review, he shared that students want to be "spoon fed" and they expect or request review sheets covering the content that is on the examination with answers to the questions on the review sheets. Dave does not provide these review sheets and tells the students, "I'm testing you for all of the content." Dave shares all assigned content may be included in examinations.

Cheating

Cheating was another uncivil test behavior identified. Luke described a possible test security breach of a book publisher's test bank. Some of his students shared with him that questions on a recent test were posted on a social media test question website. Luke saw the questions posted on this website and he described them as very similar to many of the questions on his test. This potential breach was reported to the publisher of the test bank. Luke cannot prove that the questions were taken from his test or the test bank, but he stated that if the students did this, he would consider it cheating. As a result of the potential breach, Luke will no longer use questions from that test bank or any other test bank and he described the behavior of any student who would participate in this type of behavior as cheating. Luke described another unusual experience he had with regards to testing. A student arrived at a final nearly two hours late. Most of the students had completed the final and were standing and talking in the hallway of the classroom by the time one student arrived. The student entered the room and began to sit, when Luke asked the student if he could speak with her. He asked the student for an explanation of her late arrival and when she had no excuse other than this time was when she thought the final started. Luke explained that he could not give her the final, as she could have overheard students talking or have asked other students for test information when she entered the room. The student appealed Luke's decision denying her the opportunity to take the final. In the appeals process, Luke was supported by his department chair and university administration.

Bill also had an unusual experience while administering a final examination. Bill described a student who asked to use the restroom. While the student was in the restroom, Bill noted a folded paper on the student's chair. This paper contained examination-related notes. Bill stated the student was in the restroom for an excessively long period of time. When the

student returned, Bill excused the student from the examination and the student ultimately failed the test. The student appealed the decision through the university appeals process stating he was not a cheater and should be allowed to retake the examination. Like Luke, Bill was supported by the department chairperson and the university administration and the student failed the examination with no re-take of the examination allowed.

One other testing issue was also shared by Bill. Two students in his class did not take an on-line quiz. This on-line quiz was a part of a larger assignment and accounted for ten percent of the grade. By not taking the quiz, the students received no scores for the assignment. The students discussed the issue with Bill. The students thought Bill would not realize that they had not taken the quiz. Both students appealed the decision of the zero grades. When Bill refused to change the grade, they described him as "unfair and unreasonable." The students notified the dean and ultimately the university attorneys were involved in this situation. The students contacted the State Board of Nursing. Eventually, the situation was resolved and Bill was supported by the school administration. The students received no score for the on-line quiz.

Assignment Issues

Assignment issues were identified as a type of uncivil event. Mark and Greg both shared similar problems. Both participants received requests for help about assignments hours before an assignment was due. Mark stated, "When you call at 5:30 on a Friday evening, don't expect your instructor to be around." Greg responded to a similar situation sharing how students will sometimes call him hours before an assignment is due and they ask questions or ask for help on the assignment. Luke related students "smirking and laughing" and they told him the assignments were too much work. Chris has had issues where students would text him on a

weekend to ask if a certain topic would be on the test. Although this is not an assignment issue it

is an issue of contacting the professor and asking for help at an inappropriate time.

Clinical Site Difficulties

A few clinical site events were reported by the participants. Luke, Bill, and Ryan

described students who were late to the clinical site with some students late on more than one

occasion. Luke and Bill found the students to be untruthful regarding the reason for being late.

Ryan described one student as being unprepared for the clinical day, while Jared reported cell

phone use during post conference. Bill sent a student home from the clinical site because of

inappropriate attire.

Two events involving patients at a clinical site were described by Bill and Luke. A

student was completing an intervention in the presence of her instructor, Bill. The student

reported a finding that Bill knew was not possible because the equipment was not prepared

appropriately. Bill stressed that no harm came to the patient. Bill privately discussed the

situation with the student. During the discussion, the student again reported findings that were

not congruent with the performance of the procedure. Bill related the findings that the student

reported were not possible. The student was removed from the clinical site and later failed the

semester. This experience occurred early in Bill's career and at the time he felt badly about the

student failure. He knew it was the correct decision and Bill stated he had no regrets. Bill

reinforced that the patient was not harmed and he would have stopped the student before any

harm could come to the patient.

Another patient-related uncivil student situation was shared by Luke. This experience,

according to Luke, did have the potential to jeopardize patient safety. Luke described a situation

where a student went to perform an intervention on her patient which was not appropriate. Luke

also shared that the intervention required a physician order. Luke counseled the student and he stopped the procedure so that the patient was not harmed.   Luke shared that the student was tearful and crying for the rest of the clinical day but that he felt it was important to address the issue when it occurred. He feared that the student might not have taken the error as seriously if he addressed the issue at the end of the clinical day.

Physical Threats

Physical threats were another uncivil event reported by the study participants. Two situations approaching a physical threat were shared. Greg was working as an adjunct faculty in a community college program. He reviewed a student assignment and found it to be unacceptable. He provided comments to the student and instructed her to complete and resubmit a new assignment. The student confronted Greg in a conference room. Greg stated the student "started for a lack of a better term to berate me over my feedback." Greg described how other students in the clinical group started to support the confrontational student and these other students were, "adding in or piling on to this behavior and I really didn't know how to address it at all because I would never have thought in my life that I would have three or four nursing students all at once basically ganging up on me."

Even more concerning was an incident shared by Bill. He described this experience as a situation "in the back of his mind." Bill found a student in the hallway looking lost and Bill asked the student if he needed help. The student loudly stated, "NO I don't need your help." Bill immediately sensed trouble and asked the student to step into his office and sit. The student denied the need for any help and Bill related the student stated, "I don't appreciate you sticking your nose into my business." Bill continued to be concerned. He asked the student what was wrong or could he help him, but the student was not willing to discuss any concerns or to accept

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help. The student continued to make inappropriate comments, and he was described by Bill as being "very disrespectful." When the student left Bill's office, the student stated, "You are barking up the wrong tree." Bill described this student as 'unstable" and stated, "did I worry about my safety, a little bit yeah. I think you have to. These students now, I mean look at the increase in the number of campus shootings and that kind of this so it, that thing, is in the back of many people's minds, absolutely." Bill stated this encounter was the only situation where he ever feared for his safety. When pressed about the issue, he responded, "I didn't stay up at night, it wasn't affecting me physically, but I thought this kid could be dangerous."

Uncivil Events Summary

Although many uncivil events were identified by the participants it should also be noted that some participants suggested that a student event could be considered civil or uncivil based upon context. In addition, some of the participants were only able to recall one or two events of student incivility during their entire careers. Many participants, although they were able to remember numerous events, did not seem troubled or disturbed by those experiences. After the participants were asked to recall and describe an experience or two of uncivil nursing student behaviors, then examples from the literature of specific uncivil nursing student behaviors were reviewed with the participants in an attempt to trigger additional memories. The examples given by the participants included non-threatening behaviors such as talking during class, using a computer during class for non-class related events, asking for a make-up assignment, using cell phones, acting bored, groaning, and eye-rolling, as well as more serious, even threatening behaviors, such as yelling, swearing, and physical violence.   Despite these examples, the participants continued to express difficulty remembering uncivil student experiences.   Jared clearly expressed that he had a hard time remembering student incidents although they might

have happened. He said, "I just kind of see the behaviors and say that's not right, ok let's move on, that the end of it. The experiences just don't stand out for me." When pressed, Jared admitted that some of these behaviors do occur in the classroom. If students shop during class instead of listening to the lecture, Jared may question them because he feels it is his responsibility to address the behavior; but, afterwards, he thinks it is important to just move forward. Nathan described the experiences as "rare, that is why I am having trouble remembering." Although he knows sometimes students use computers for non-class use or have side conversations. he said, "I'm not going to create any bans or things like that, the way I look at it is on me to keep a class that is going, to be so engaging that they don't want to be on the internet. And, generally, I think I succeed at that." Dave shared a similar feeling about bans or rules when it comes to classroom behavior. He related, "I tend to think that students have paid to be present that we provide them with a product, but if they choose not to take it then that is their choice. So I will see students using the computer for non-class purposes, the first few times I call them on it, and then I'm done." Bill stated that students use computers at times for non-class related purposes, and he "will not and cannot police student activities on the internet." As long as the student is not disruptive, it is a behavior that he accepts.

Greg had a different perspective on computer use and he believes it is related to his age (31). He encourages his students to use the computer for classroom and non-class purposes. Side conversations can be very disruptive to Greg, so he suggests students use social media or texting to message each other during the class period to talk with each other. Greg freely admitted he may have a different perspective on technology and social media than his other colleagues. Greg encourages the use of cell phones and computers in his classroom, and he has developed policies encouraging the use of cell phones, computers, tablets, etc. He described cell phones as tools

that people use to do business, assist in school work, connect with people, aid in drug

calculations, as well as to serve as a reference tool. His technology policy encourages students to

use the device to benefit the student in an educational way, use it when you need it, but don't

disrupt the class. He stated,

> I think we need to accept the fact that they are a part of our life. There are hospitals out
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> there that still tell me, oh you can't have a cell phone if you are working, that's just not,
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> I don't find that to be feasible or acceptable anymore to say that. I think in healthcare and
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> in nursing education specifically we also probably need to be a little bit more accepting.

Context of the behavior was also described as important by the participants. Student

behaviors, depending upon the context, could determine whether or not the behavior was

considered to be civil or uncivil. Professors may look at context differently than students. Some

professors may see certain behaviors as uncivil while the same behavior might be viewed by

another professor as civil. Dave described one student scenario where he considered one

behavior to be uncivil while the other behavior he considered to be civil. He discussed a

situation where a student was unhappy with a grade. One student asked Dave, "How can you

help me go from a B+ to an A-?" Another student asked Dave, "I have a B+; what would I have

needed to do to get an A-?" Dave considered the first situation to be uncivil and the second to be

civil. The approach of the student may dictate whether the professor considers student behavior

as civil or uncivil.   This example described the way in which context may determine behavior to

be considered civil or uncivil.

Dave stated, "Some things I don't actually consider uncivil," he continued, "it's all in the

way the message is delivered." Greg said that maybe his own perception and his own

preferences may determine if a behavior is uncivil.   Greg has sympathy for the student because

he feels students have to determine what behaviors each professor considers uncivil and then adjust their behaviors from there. Each professor may see uncivil behavior from their own viewpoint and the same could be said for the student. Ultimately, most of the participants described their experiences as minor, with few incidents overall, and a part of the world today. Jared summarizes, "I just kind of see the behaviors, and say that's not right ok, next let's move on, that's the end of it."

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Physical and Emotional Responses to Student Incivility

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When participants were questioned about their physical and emotional responses to nursing student incivility, participants reported a continuum of few symptoms to significant physical and emotional symptoms. Physical symptoms of gastrointestinal update, headache, poor sleep, and problems with concentration and memory were reported. The most common emotions reported were those of anger and anxiety. Emotions that could impact teaching were identified. These emotions were those of a lack of confidence, blaming self, and doubting teaching effectiveness. An overview of these responses will be discussed then each section will be reviewed.

Physical Responses

Participants in studies (Luparell, 2003, 2004; Williamson, 2011) reported physical symptoms such as headaches, gastrointestinal disorders, sleeping problems, and trouble with concentration and memory. Seven of the nine participants in this study denied any of these symptoms or any similar symptoms. Ryan stated, "I am pretty much in the moment, I deal with it and then I walk away." Mark also denied any kind of physical symptoms and said, "Maybe it is because I am a guy, I don't know." Jared rejected any issues with sleeping, stomach, or headache problems, and he suggested like Mark that maybe "it's a male thing." Bill only stated

transient physical symptoms.   He stated, "Physical symptoms kind of gnaw at you for a while but I don't think I would say I had physical symptoms, no trouble sleeping, headaches, stomach problems. or problems concentrating, NO." Dave also denied any problems with sleeping, stomach problems, concentration, or similar feelings.

Luke described stress from student incivility as being manifested in him in him through "GI symptoms" where he gets an "upset stomach." Chris was the most descriptive in his responses discussing trouble sleeping, headaches, decreased concentration, and stated, "I experienced all of that, some short term memory where I had things to pick up, something at the store, go meet someone, missing a whole lot of appointments." Difficulty concentrating was manifested by Chris when he described, "You can't really write or do any types of scholarship," when discussing the after effects of student incivility. The most significant sleep disturbance described by Chris was a nightmare where he had a confrontation with a student. The nightmare was described as being "very clear in my mind."

Emotional Responses

Two common words used by the participants of this study to describe feelings related to student incivility were anger and anxiety. Seven of the nine participants used the word anger while four of the nine used the word anxiety. Both words were often spoken multiple times by a participant during the interview. Mark described one experience where his voice and body language indicated anger. His voice deepened and became louder.   The student was chronically late in completing assignments in an on-line course. Because of her lateness the student was losing points. Mark stated this student was "trying to put the blame on me." In response to this situation, Mark said, "I will not bend over backwards for students who are not motivated," and who "try to put the blame on me." Jared had a similar situation regarding a student assignment.

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Jared's student was unhappy with a grade she received on an assignment. The student submitted a grievance report through the student appeals committee at his university. Prior to the grievance, Jared had as he described extensive e-mail communications to the student about the assignment. According to Jared, the student claimed that the e-mails were not clear and Jared should have contacted her by telephone. Jared felt the student instead of taking responsibility for the assignment she, "put the onus back on me." The student was successful in the appeal process and resubmitted the assignment. Throughout the appeal process, Jared felt "unsupported" by administration, the school, and student affairs. Jared goes on to say, "it's that one incident in my career that, there's only been a few things and that's one of them that stuck with me."

Bill was also vocal about his feelings of anger. He described anger during events of student incivility and dealing with incidents of student incivility. He described anger when students have a lack of understanding of their role in the uncivil event. Most students he stated "don't seem to understand what they are doing wrong," while he sees the situation as, "cut and dry." Although Bill described anger during an episode of student incivility, afterwards he says the incident, "doesn't affect me afterward, I am very comfortable with my decisions." Greg is another participant who described feelings of anger in detail. When angry, he walks away and often talks with a colleague or a friend. He described these situations as an opportunity to "vent a little bit to them." Dave and Ryan did not mention anger but Ryan talked about what he described as a sympathetic response where he thinks his heart rate may increase and Dave stated that "maybe my blood pressure goes up."

Greg also discusses anger during the interview process. He feels anger during and after episodes of student incivility. When he feels this anger he walks away from the situation and talks with a colleague or friend. Greg had less than five years of educational experience when

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many of his experiences occurred. Results from Olive's (2006) study support the challenges faced by the novice professor, where novice professors appear to be more vulnerable to student incivility.

Luke described a situation which caused him a great deal of anger. He described the incident with great detail. It was also an experience that occurred at the end of the most recent semester where he had a guest speaker come in to provide a mental first aid course for the students. He described this as a course he was able to bring in at no cost to the students and all of his students signed up for the course even though attendance at the course was voluntary. The course was a day long course with a lunch break at the noon hour. Co-incidentally there was a booth set up outside the cafeteria where an organization was promoting sexual health practices. Many of the students took condoms from the sexual health booth and brought them back into the classroom. Luke described that the condoms came out during the mental health aid course and that while the speaker was talking some of the condoms were being thrown around and blown up like balloons. Luke tried to provide visual cues to the students to put the condoms away many of the students did put the condoms away. Luke had to talk to the students at one table and tell them. "I can't believe that I have to say to you but can you put the condoms away?" The students rolled their eyes but did put the condoms away, but as the day went on Luke became more angry at the situation, he stated, "not only did I feel disrespected but to have guest speakers from the community and not only did they have a valuable learning experience, it was free to them but it just looked poorly on the university, poorly on me."

Anxiety was also a common feeling expressed frequently by four participants throughout their interviews. Luke expressed anxiety dealing with incidents of student incivility. He asks himself, "Did I handle that situation the right way, could I have done better?" Ryan also used

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anxiety in the same way, wondering if he had done the right thing and expressed uncertainty about if he has the skills to help the student. The word anxiety was also used by Chris, but he described his anxiety as a concern related to tenure, promotion, and student evaluations. He described if an instructor receives poor student evaluations the student can "slam you if they don't get what they want." Chris feels poor evaluations can impact the ability of a professor to obtain tenure and promotion, and his anxiety stems from the power he feels students have over his job security.

Chris shared an experience that he described as a significant emotional event. Chris shared a "nightmare" that he remembered "very clear in my mind," that he doesn't believe that he "ever mentioned to anybody." Chris described the nightmare in great detail about a student who came to his office to appeal a grade. When the student was advised that the grade would not be changed, the student pulled a rip cord and "blew himself up." Chris described talking about this event brought back "very troubling emotions."

Research by (Luparell, 2003, 2004; Olive, 2006; Williamson, 2011) also document feelings where the recipients of student incivility doubt their teaching ability, feel the incident is their fault, question their teaching effectiveness, or feel that they are not doing a good job. Some of the participants of the current study expressed doubts about teaching ability and misgivings about teaching effectiveness. Some even blamed themselves for student incivility. Luke described himself as "tough up front" but afterward he will question if he communicated clearly. He mulls over his lecture notes and he checks to see if the information was available in the book, or he reviews how he handled the situation. After he thinks about his material and his actions he makes "a note to himself" for the future so that he can improve the next time he teaches the same content. He also admitted that he "overanalyzes things a little too much."

When he thinks he is taking too much ownership of a problem, he "quickly stops and says no, the only reason I am doing this is because of the student's response or the student's actions." Luke tries to turn these negative encounters into positive experiences by stating uncivil student events are a trigger for him to figure out how he can be a better teacher. Luke described processing these experiences like the stages of grief; you deal with it, accept it, and then go on.

Greg also occasionally questioned his teaching abilities. His process is to go back and review his teaching methods. Greg ponders if he could have taught the material differently. He does what he calls a "self-check" then he thinks, "Do I know what I am talking about? Am I sufficiently prepared to do this job? Absolutely." After this pep talk, Greg moves forward. Chris provided an emotional perspective when describing student incivility. He appeared to be the participant who was most impacted by it. He used words like "mean person," "bad person," and "lousy instructor" when he described how student incivility impacted his thoughts about his teaching. This type of thinking triggers what he described as "a cascade of doubt." He shared, "maybe I did screw up, maybe I told them something backwards, then I start to think, oh I stink as an instructor, maybe I don't know what I am talking about." Over time and with experience, Chris changed his response to student incivility and he stated, "I am perhaps the type of person who is very sensitive and if I get one or two complaints like that I tend to zero in on that maybe it's a character flaw. I have grown as an individual and I realize that it is coming from a select few."

Chris has also learned to manage the physical and emotional aspects of student incivility by working with his faculty mentor. He says he values the relationship he has with his faculty mentor and doesn't know why he didn't' talk to his mentor sooner. Chris stated,

a lot of times these things don't come up for older faculty but they do come up for younger faculty so just having an opportunity to bounce some of these things off my faculty mentor was very important. I didn't' do it at first, I tried to solve it on my own, but not having a reference point to draw from or to work from, I was really inexperienced with dealing with student incivility.

A few of the participants had some episodes where they doubted their teaching abilities or thought student incivility was their fault, others had no such feelings. Nathan perhaps expressed it clearly when he said, "No, I don't take it personally, I have always thought it was their problem." Nathen went on to say that, "when you have 48 students who said you did a really good job and two students who talk about how terrible you were, I think that obviously you can't make everybody happy. I can live with that." Mark expressed few doubts about his teaching ability but he does admit he reviews the event to determine what went well, what didn't go well, and what could be changed. He described this process that he has used for years when managing projects in a former job. Jared, much like Mark, expressed little doubt about his teaching ability but he also looks at what didn't go well and what did go well. He strives to be as clear as possible and he will consider, "What can I do better the next time." When Ryan was asked if he thought student incivility caused him to doubt his teaching ability, he emphatically said, "Ah no, no." Ryan went on to discuss that every once in a while uncivil student behavior will cause him to think. "Am I handling this appropriately, do I have the training to take care of some of these things?" Ryan concluded, "Overall I do not feel responsible for student behavior." Bill probably was the most unequivocal and emphatic in his denial that student incivility was triggered by poor teaching ability or that student incivility was his fault. Bill explained,

NO, no I do not think student incivility causes me to doubt my teaching ability or it is my fault. I look back on my career and I look at what I have accomplished and what I have done and the many opportunities I have had in my career that I did not ask for, I was chosen, so I know I must be doing something right. I refuse to put doubt in myself because they're messing up. The onus is on them.

Reasons for Student Incivility

Two main reasons for student incivility were identified by the participants in this study. Overwhelmingly, a sense of entitlement and generational issues were identified as common reasons for students to behave in an uncivil manner. Other possible reasons for student incivility identified by participants were a desire to obtain good grades, work responsibilities, stress, and the juggling of multiple roles.

The primary reasons for student incivility identified by the participants of this study were generational and entitlement issues. Dave discussed in detail concerns related to a sense of entitlement and generational issues. These concerns also echoed feelings of Bill, Nathan, and Luke, Jared and Mark. Dave, who teaches in a second-degree bachelor's degree program, described the uncivil students of today by saying,

I think it's a part of them being a part of the helicopter generation. We've got a group of parents that have been telling their children that you are the best. You can do anything you want to, nothing can stop you. You are brilliant. Many of these students really believe that they are the best and I think some parents have handed so many things to them on a plate that they expect us to do the same. They want to be spoon fed; if we are doing an exam they want a review sheet with the answers to the exam. NO, I'm testing you for all the content. Well it's not fair, yes it actually it is. We actually have parents

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calling us and I'm thinking you are an adult, this is your second degree.

Mark echoed Dave's remarks thorough his comments related to entitlement and generational issues. He shared, "Everyone gets the trophy. Nobody is allowed to experience failure, and yet you and I both know that we are better people because we tried something at one time in our lives, maybe multiple times and it didn't work. I don't think they are given that opportunity." Mark believes that today's society encourages uncivil behavior. He shared, "We live in a society today in which common courtesy and decorum is gone. Blame it on reality TV, blame it on a number of different things. I don't like the way we've become." Luke also addressed societal changes as a reason for student incivility. He feels the problem boils down to "a respect issue, and how the students are taught, taught by their parents. Parenting is so important. The students become so involved in their own little isolated world of technology." Luke went on to say, "It is almost like we are coming to be more of an individualized world and more selfish and more self-centered. I think students are just being taught that or picking up those habits as acceptable." Nathan also stressed today's student has an element of what he described as selfishness and self-centeredness. Nathan has had more than one parent he referred to as a helicopter parent and these parents call and want to know why their "little darling" isn't getting a better grade in his course. The parents share with him that his students think he hates them and that is why they have a poor grade. Nathan laughs as he described these telephone calls that he has received and he said, "that's why they got the bad grade, because that's what I do, I hate my students (laugh) and give them bad grades." He thinks that some parents do understand that bad grades are based upon student performance and the students are told by their parents to work harder and go back to class, but he doesn't hear from these parents. He knows that is what students say to their parents, though because his daughter says the same thing to him.

Nathan tells his daughter to work harder and that the teacher is not giving her poor grades because he doesn't like her.

The term helicopter generation was also mentioned by Bill. He shared, "These young kids are like I said very entitled. They have helicopter parents who will believe everything the student says but what actually happens in the classroom is not consistent with what their children have told them." He described his students as being very entitled where "these kids want everything now, they don't want to work for it." He continued, "Students get stressed and upset over things that in the past students would be able to manage without any help." Bill elaborated on his reply, he described,

> if one of their courses gets cancelled and they have to pick another course another day or time they're just so upset and they don't know how to handle the problem. They are on the phone calling their mother and their father and most of the time the problem can be fixed in a matter of minutes but they CANNOT solve a problem to save their soul.

Dave, though not quite as vocal as Bill, echoed some of the same thoughts about students when he said, "I think their expectations are unrealistic. Everything has to work perfectly from the faculty end so when things don't work correctly students get upset. That's life; things don't always go the way you planned." Bill also shared,

> these kids have everything and they want everything now. They don't want to work for it and if they're in nursing very simple rules and regulations are spelled out clearly. We have them sign papers, they know what we mean when we say attendance, deadlines, and when they still don't' meet them it's still our fault.

Nathan shared an interesting theory from one of his colleagues about student entitlement and the attitudes of the current generation of students. Nathan stated,

> one of my faculty members she calls it, the student thinks they are a special snowflake. She's a little special snowflake. That somehow for her, her needs and her issues take priority over all others. If anybody is to blame it is probably my generation, because we raised these kids.

Greg also discussed and expressed frustration over the issue of student entitlement. He shared that this issue is discussed frequently among his colleagues. He disclosed,

> I have had many students that I feel like they just act as if we owe them everything in the world just because they're a student and they pay tuition. They are just allowed to say and do whatever they want because they think it is a business relationship and they are the customer.

Greg continued,

> There has been this sense of entitlement like we owe them something or we owe them everything and we should be doing everything we can for them. They are allowed to just say and do whatever they want because they think it is a business relationship and they are the customer.

Chris also mentioned grades as it relates to entitlement. He shared, "I think many behaviors come from their sense of entitlement, that I deserve this grade, I am a senior and you can't hold me back."

Ryan was the only participant who adamantly believed that the students he works with do not feel entitled. He shared that many of his fellow faculty members do discuss the sense of entitlement for poor student behaviors, but he has not found this to be true in his own

experiences with students. He shared, "I don't think nursing, it isn't one of those things where people who feel entitled come in to."

Aside from generational issues and a sense of entitlement, nearly all participants agreed that a desire to obtain good grades, work responsibilities, stress, and the juggling of multiple roles could contribute to student incivility. Although these reasons were nearly universally identified as explanations for student incivility, these reasons were also identified as unacceptable excuses for the uncivil behavior. Mark was especially vocal when it came to issues of stress, grades, and the juggling of multiple roles. He recounted when he went to nursing school, he had two jobs, two children, and a wife and a nursing school program on the weekends. He recounted, "I do not want to hear it when people tell me about all this, I do not want to hear it. It can be done if you are motivated and you are focused and there is no excuse for acting in an uncivil manner. I just don't buy it."

Jared acknowledged stress and working can be powerful motivators for student incivility. He feels it is his job to encourage and work with students whenever possible. He advises working students to limit work hours and he helps the student to make a successful balance between school and other commitments. Nathan described how he feels students often choose to behave in an uncivil manner, that students can "talk and do whatever they want" and students may behave in an uncivil manner in class, but they probably would not behave inappropriately if they were confronted by a policeman. He feels that the situation that the student is in will impact their behavior and it is important to identify rules and expectations up front. If the rules are clear, he feels most students will behave appropriately.

Grades and grade inflation issues were mentioned by a number of the participants as a reason for student incivility. They described grade inflation that starts in high school and the

students expect it to continue in college. Greg and Nathan both described how grades may impact student behaviors. Nathan shared,

> I think some of them have never had to work hard for their grades, and the students are surprised that they need to work so hard out of class. I think a lot of students have enough natural intelligence that if they come to class, pay attention, they can pass a lot of tests in most courses they have taken. When you get to nursing that no longer works because we are asking them to apply information.

Greg echoed the essence of Nathan's thoughts and described the nursing student of today as having, "a history of being highly successful academically and I think when they come to nursing school and they find it's definitely in many ways a different way of learning compared to other college programs and also compared to how students learn at the secondary education level." He shared that the expectations for grades are not the only changes that the student must manage. In addition, he shared,

> I think we have a high standard of professional expectations of the student. Not just being a student, but how we expect you to act professionally while you are a student. So I think when they are under a lot of pressure, I think when they are not successful to what they are used to or they don't meet their expectations, they want to know why. I think when that happens it triggers an emotional response and then they start to have different behaviors that could be considered uncivil.

Jared also mentioned grades and the importance students place on obtaining good grades. He explained, "I think students are grade focused so they always want that A so they are really driven to get that A, and if they don't get that A then it is a failure." He described the student will believe that the failure can't be their fault, so it must be the fault of the educator. Students

stress, multiple roles, and work were mentioned by many of the participants as possible reasons for uncivil student behavior. Chris shared,

> I think those stressors would promote incivility. I do think it would encourage them to be uncivil because that stress invariably has to come out so it will come out in the classroom where they are texting, arriving late, or their assignments are not on time, or they bring their lap top to the classroom and they are typing on their lap top and they are not paying attention, they are checking their e-mail things like that. I think that personal life stress will promote uncivil behaviors as an outlet for stress. Some people have better ways to manage their stress, but for many people that outlet appears in the form of crying or inappropriate behavior or loud behavior or anger that I think is the way they dissipate their stress sometimes.

Actions to Address Student Incivility

After each participant described an uncivil student event, the participant was asked to describe his response to the incident of student incivility. The participants were also asked to describe the changes, if any, that they implemented to reduce the likelihood and occurrences of further incivility. Together, these responses formed a prominent theme of actions taken by the participants as a result of student incivility. Examples of actions the participants used to discourage student incivility include setting clear expectations, modifying syllabus content, developing and using rubrics, crafting examination review guidelines, using item analysis, and developing techniques for classroom control. Each area will be discussed.

Each participant acknowledged that as a result of student incivility they implemented changes or strategies to reduce future student incivility. Whether referred to as actions, changes, or strategies, these educators employed these strategies using their years of experience,

suggestions from other faculty members, and trial and error. Many of the adjustments made by participants centered on being as specific as possible when they communicate their assignments, expectations, and behaviors they consider acceptable.

All of the participants made changes throughout their teaching careers with many of the changes based on student incivility. According to participants, experiences of student required them to make changes and over time they began to find what worked and what didn't work. Mark summarized, I look at "what went well, what didn't go well, and what could I do better next time." Many other participants echoed similar thoughts.

Setting clear expectations was a common technique shared by the participants to reduce student incivility. Nearly all participants identified areas where they improved their clarity when communicating information about their courses. Many of the participants start at the beginning of the semester by clearly communicating all course requirements. At the beginning of each semester, most of the participants described strategies to provide boundaries for students and limit the likelihood of student incivility. Jared, Greg, Dave, Ryan, and Nathan described setting clear and specific expectations from the start of the semester. Dave shared that after the expectations are communicated and the students still don't adhere to the guidelines provided, "you have to call people on it." Nathan added, "If students know the ground rules, they will behave." Nathan tells his students he "expects them to succeed but it is not going to be easy, here's how, and I give them guidelines for how to succeed." Nathan also emphasized the importance of sharing with students the reasons they are learning specific content and how it will fit in, rather than you must learn this content "because I said so."

Bill has his own approach to setting clear expectations. He stated, "Right off the bat I lay down the law and make things very clear." Before Bill makes that pronouncement, he softens

the statement by saying, "If you are in my classroom or my clinical section, I want it to be something you will enjoy. It should not be something that you dread every week. This is going to be your career, but there also has to be rules and regulations." Bill learned to set these expectations "as he went along."

Jared sets expectations at the clinical environment at the beginning with what he calls "mama rules." He tells them within the clinical setting,

> we are a part of a team and I expect call bells to be answered. I don't' care if it is your patient or someone else's patient." He asks his students "will mama be proud of you? If mama's not proud then I'm not proud. So they know it and at the end of the day I say is your mama proud? Then they say yes, mama's proud. So I set those expectations up front.

Syllabus modification was another common strategy identified by the participants to reduce student incivility. Luke stated that he changed the tone of his syllabus to focus on student learning outcomes. He stresses the importance of assignments and clinical rotations and the way in which these assignments and clinical rotations meet the course objectives. Dave stated he is "more and explicit on his syllabi." Due dates are specific with exact times assignments deadlines; consequences for turning assignments in late are also outlined. Greg also provides clear due dates and often gives his students multiple reminders of the assignment due dates. Bill changed the format of his syllabus "spelling out" everything week by week with specific deadlines for all assignments. Bill also provides test dates to the students in writing. Greg incorporates the above suggestions into his syllabi, but he goes a bit further with specific guidelines related to technology, cell phone, social media, and internet use. He described his policies and his attitudes about today's technology "as probably different from most instructors."

Greg encourages the use of all forms of technology which includes cell phone use and internet use. He feels nursing instructors should move away from the anti-cell phone culture he sees today by many of his colleagues.

Along the lines of syllabi changes, the topic of rubrics was raised as a method to decrease student incivility. Two participants of this study strongly endorse the use of rubrics and use rubrics as one tool to reduce student incivility. Luke and Greg like using rubrics because they are a specific guide for the student. Luke described his efforts in constructing rubrics by saying, "I spend a lot of time on rubrics trying to develop one that guides the student."

The process of examination review was discussed extensively during the interview process. Examination-related interventions were some of the most commonly identified actions by the participants to reduce student incivility. Chris and Greg modified their examination review by setting specific ground rules. Many of the participants make time available during or after class for examination review. Greg and Chris encourage their students to make individual appointments to review examinations during office hours. Mark will discuss examination questions with students as long as the student can clearly and calmly state their concerns about test questions.

Nearly all participants identified the need to use item analysis statistics after a test to help guide the instructor. Everyone who uses item analysis will discard bad questions based upon the item analysis. Nathan, Bill, Greg, Luke, Jared, and Chris all use the item analysis to review each test question and to make adjustments when necessary. Generally speaking, no adjustments are made by the participants to any test score until after the item analysis has been reviewed. As a result of this process, questions may be discarded or eliminated. Jared described himself as a

"stats guy," and he "loves his item analysis." He shared if the statistics like the discriminating index are good, then he feels good about a test, regardless of how the students performed on the test.

A concern was expressed by Nathan and Bill that the student's should know the grading and test process as fair. Bill stated when it was necessary to make adjustments that he "always adjusted things in their favor." Nathan declared, "It's important to students to know that fairness is involved. As long as they feel they are being judged fairly, even if things don't go their way, they don't mind." If necessary he will give everyone credit for a question or throw out a question. If a question is bad he will admit it and laugh about it and discard it. He stated if the students sense equity, "they will relax and move on."

Nathan shared a unique intervention he uses to reduce student incivility in the classroom. He discovered this technique during the process of completing faculty evaluations. When completing faculty evaluations, Nathan sits in the last row of the classroom. He found that between the faculty member conducting the class and the last row of the classroom there was a lot of noise and disruption between him and the speaker. He noted shuffling of papers and belongings, students whispering, air conditioning or heating sounds, and hallway disruptions as he sat in the back row of the classroom. The message from the faculty member was diluted by the time it got to the last row and he felt distanced and distracted. Nathan concluded that if he felt distanced and distracted the student may feel distanced and distracted. To prevent this situation in the classroom, Nathan uses and encourages all of his colleagues to use a lavalier microphone. Even with average size classes, Nathan feels the use of the microphone decreases student incivility because the student stays more engaged when he/she can hear and connect with the instructor.

Nathan also discussed the importance of active learning strategies to reduce student incivility. Earlier this year Nathan was at a conference where he heard about a technique where every few minutes during a lecture one should stop the class and randomly call on a student and ask them a question or ask them to complete an exercise where the student has to answer a question, explain something or do something. Because he plans to call on the students randomly they have to pay attention.   He stated he is going to try this during the next semester. Nathan also finds that embedding sample test questions in his power point slides also improves student involvement and inhibits uncivil behaviors.

Both Nathan and Jared described how important their role is as a leader and as an educator. Nathan further details his role in controlling student incivility during classroom lecture. One important element in classroom control shared by Nathan is the importance of using active learning strategies to reduce student incivility. He strives to keep the class engaged so they won't be as likely to engage in student incivility.   Jared also feels the role of the educator is key component in preventing or reducing student incivility. In class Jared addresses behaviors as they arise if they are disruptive, he states that as a leader in the classroom it is his role to address these issues. After that he moves on.

Chris provided some general advice to deal with student incivility. He suggested that the instructor should,

> stand your ground and be confident in your abilities as an educator and as a content expert, stand your ground and find someone to share with. Latch onto a mentor that you can bounce things off of, especially when you are a new teacher. And I think for men, find a male role model that you can work with. A male collaborator you can talk with.

He also stated, "find someone similar in your background to share with having a faculty mentor to bounce things off of, I think is really important of your growth as a nurse educator."

Although the participants made changes as a result of student incivility, the most common response to student incivility can be concisely and simply expressed by the phrase--deal with it and move on. For the most part participants of this research addressed the incident of student incivility, rarely if ever thought of it again, and in many cases even forgot the incident ever occurred.

It was common during the interview process for some of the participants to have difficulty remembering incidents of student incivility. This difficulty was expressed by Jared when he shared that he had a hard time coming up with incidents, because as he explained, "I just kind of see the behaviors and say that's not right ok, next let's move on, that's the end on it." Incidents of poor student behaviors just didn't stand out for him. He later shared that some student incivility is, "the way we have to do business." He goes on to say, "I think it happens but it doesn't happen," and, "it is just one of those things as a faculty member that must be addressed." Nathan also shared that he had a hard time remembering things that happened early in his career, and he will address issues as they arise, but generally these things just, "don't bother me." Although Chris does remember some incidents with clarity, he shares that he "can't say there are an overwhelming number of uncivil student incidents. The vast majority of my interactions are very positive." Over time his experience as an educator has helped to make the emotions surrounding incidents of student incivility less bothersome. Ryan seems the least impacted of all the participants when it comes to student incivility, he handles incidents, "as they come in. I don't get a lot of them, though." Dave also seems to take things in stride, when he

jokingly remarked that when students make disapproving groans that "I make bad jokes and I expect disapproving groans."

The Gatekeeper Role

Preventing unqualified students from matriculating through the nursing program was identified as an important role of the nursing instructor by the participants. This role was referred to as the gatekeeper role. Six participants of this study discussed their perceptions of being a gatekeeper for the nursing profession.

Of the six participants who did identify with the term gatekeeper, Nathan uniquely described how he protects the profession of nursing. He used what he calls the "mother test." He thinks, "Would I want this person taking care of my mother? That is what I ask myself if I have a student who I am not sure about." Contrary to Dave who described how NCLEX is a gatekeeper for the nursing profession, Nathan doesn't feel that the NCLEX examination or the state boards should be gatekeepers. Nathan's concerned that by allowing the NCLEX examination to be the gatekeeper, the school opens itself up to poor NCLEX scores and he states, "No school administration or faculty want poor NCLEX scores." This feeling about the NCLEX examination and NCLEX scores was also shared by Bill. Bill shared that schools have a "state board pass rate to protect."

Ryan has concern not only for the nursing profession but also for the reputation of his university. Graduates from his program reflect on his university and as such he stated it is the job of the professor to make sure that any student issues are addressed during their undergraduate education. Bill also discussed the role of a gatekeeper. He thinks being a gatekeeper is one part of his job. He described the importance of rules and regulations, as well as consequences for one's actions. Bill stressed that it is important for the students to learn, but they are allowed to

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be uncertain and to need help. He describes this behavior as a part of learning. It is his job to

guide the student and provide clarity when necessary. It is also important for the student to

understand what will happen when something goes wrong and it is his job to assist that student.

He shares,

> but when there are students who can't cut the mustard and I guess I am that gatekeeper
>
> yes, I do close the door and there is not one person who I have failed that if I had to do it
>
> over again would I have passed them. I say no, I would have stuck with my decision.
>
> Bill shared also one of the many reasons he feels so strongly about his gatekeeper role is

that "being a nurse there is a HUGE responsibility. I don't think people realize that." Nathan

also had strong feelings about the responsibility of nurses.   He stated,

> in nursing there is a higher level of responsibility for the outcome. If a history student
>
> doesn't do well and graduates nobody is harmed. No one's going to get hurt from that.
>
> But in nursing we sort of have this feeling that we do have to make sure that people are
>
> acting appropriately, that they're being socialized into the nursing profession,
>
> expectations and ethical behavior and so if you see someone who's acting really uncivil,
>
> you question their ability to be ethical. Are they somebody trustworthy?

Greg related similar feelings in that it is his job to protect the profession, as well as the public. If

necessary, he would be a gatekeeper to the profession if he had concerns that a student would do

harm to the public or the reputation of the nursing profession. He stated, "I absolutely would do

that."

Chris looked at the gatekeeper role very differently than any of the other participants in

this study. He doesn't look at the gatekeeper role as a person who will close a gate, but as a

person who will open a gate. Chris looks at the nursing profession as being difficult for men to

enter and it is his job and his passion to open gates or to tear down obstacles to men who are trying to enter the profession. To this end, he makes himself available to new male students or to male students who are struggling to try to make the path easier. In his work as a staff nurse, he also works with new male hires to help smooth a path for their success.

The term gatekeeper did not resonate with three of the nine participants. One participant, Mark, teaches exclusively in an RN to BSN program, and he indicated that he would not be in a position to be a gatekeeper because his students are already licensed. He shared, though, he had heard the term used during his nursing education. Mark does not feel that it is necessary for nursing instructors to be gatekeepers, though because he thinks "The people who are not mentally cut out will find that out on their own. The curriculum is tough enough." Two other participants of this study, Jared and Dave, also did not identify with the gatekeeper role. Dave said the NCLEX examination and the state boards act as gatekeepers for the profession of nursing. Jared explained his role as a guy who sets a standard or a bar for the students. His students are then held accountable for reaching that bar. It is up to the student to decide to reach the bar. He related, "Some of them might say I'm drawing the line in the sand, which side do you want to stand on? My side or that bad side, you decide. If you decide to continue this behavior, then the writing is on the wall."

Intent to Stay in Nursing Education

Because some participants in Luparell's (2003) and Williamson's, (2011) studies either left nursing education or expressed an interest to leave nursing education, as well as the ongoing shortages of nursing faculty which is documented by the survey of faculty vacancies conducted in 2014 by the American Association of Colleges of Nursing (AACN), all participants were asked if or how nursing student incivility impacted their desire to stay in nursing education.

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None of the participants of this study plan to leave nursing education because of student incivility nor has student incivility significantly impacted their job satisfaction. Participants have considered leaving nursing education for other reasons such as salary, the political nature of the job, committee work, and long hours. Greg, the youngest participant described how student incivility has caused him to occasionally question his decision to work in nursing education but he shared,

> it never made me seriously think about leaving this part of nursing. It is just a factor, but it's not a driving factor, I guess. Because I think my experiences have been for the most part I would say rather mild overall. I don't think I have ever experienced anything that would really push me in the direction of saying I don't want to do this anymore.

Chris indicated that at times he questioned his choice to enter nursing education. Student incivility has not seriously impacted his choice to be an educator, though. Difficulty progressing in rank has been more impactful than student incivility. For Chris, the rank issue is a much greater issue than student incivility. Jared was also very specific in his desire to stay in nursing education. Student incivility did not impact this decision. He shared, "I define myself more by my performance. Student performance is a big part of that, but the student's performance is really based on my performance. So does that make sense? So if students are performing well than I'm doing well as a leader and an educator." Jared considers student incivility as a part of human behavior he stated, "incivility here and there I expect it because it is the nature of humans."

Nathan plans to stay in nursing education. The only reason he would consider leaving has nothing to do with student incivility. He described, "No, it's not the students. I have lots of reasons to leave nursing education. Students are not part of the reason; no, it's everything else -

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the endless meetings and pressures to do things that you don't want to do that kind of thing."

Luke also expressed concerns about the extra job duties that are a part of the nursing education

position. He doesn't like the committee meetings or activities that are not directly related to

teaching students. Bill described how over the years he has become used to dealing with student

issues and he is glad of the choice he made to enter nursing education. Although all of the

participants experienced multiple and various types of student incivility, student incivility has

not significantly impacted their decision to leave nursing education.

Males Mentoring Males in Nursing

Mentoring was a theme was spontaneously and consistently identified by the participants

during the interview process. From the very first interview, every participant identified

themselves as a mentor and role model to all nursing students; but, seven of the nine participants

specifically identified themselves as a mentor to male students.

Dave was one of the participants who did not identify primarily as a mentor to male

students but he did identify himself as a mentor to minority students. The nursing program at his

university actively seeks to recruit minority students and strives to appeal to diverse students. He

described his role as a liaison officer in a grant obtained by his university from the Robert

Woods Johnson Foundation. The Robert Woods Johnson Foundation provided grant funding to

Dave's university to increase the numbers of minority students in their nursing program. Luke

was another participant who didn't think mentoring should be gender specific, but instead thinks

that one has to be a good role model and mentor to all students. He shared that when students

talk to him about male nurses he responds by saying that a male nurse "is a special kind of nurse

and you know I have super powers too as a male nurse." Luke said this statement with a smile

and a bit of a laugh; but, regardless of gender, Luke feels mentoring is important for all students.

Conversely the other participants described their mentoring to male students with passion and in great detail. The participants also described the importance of mentoring male students because they described a disparity between males and females in the nursing profession. Many participants described specific male students who they had mentored. For example, Bill and Mark shared stories about specific male students. Mark described a male student who he introduced to his colleagues, involved him in a poster presentation, and provided a tour of the DNP program facilities. Mark shared that he has a feeling that this nurse "knows where he is going" because this student made statements about his desire to obtain a graduate degree and progress in the nursing field. Mark encouraged him to pursue this degree and reinforced that he has the ability to be successful. Bill described a former male undergraduate student who just completed a PhD program. This student wrote a letter to Bill crediting Bill for motivating him to pursue and obtain his doctoral degree. Bill smiled as he describes the letter as "wonderful."

Nathan and Chris have volunteered to work with male nursing students in their respective nursing programs. Jared described the importance of being a mentor to all students, but "really to male students. I try to connect maybe and help them and guide them in their decisions. I'm always more open to talk to them if they have any issues about trying to get into the role of what problems I've had." Jared also shared that males need different mentoring than females because, "really just how do you deal with being a guy taking care of an 80 year old female who doesn't really want you to do her bath?"

Chris enjoys advising male students and he also has sought to help nursing male students who are struggling in their courses by providing tutoring sessions. Chris even asked his female faculty members to notify him when they have a concern about a male nursing student. He is willing to speak with these male students and help them work through their issues.   He stated, "I

want to work with them; I want to work with troubled students who are guys." He also said that, "I want the guys first because I want to be a role model to them. I want to promote them and encourage them in nursing." Chris discussed his mentoring interest in great depth. Chris went on to say mentoring is "something I am passionate about. I get personal satisfaction from e-mails from my students, you know their success on boards but more importantly when they write or they see me here and tell me how they evolved in things, what I did to promote them." When Chris spoke about his interest in working with male students, he became animated. He leaned in and he spoke with intensity. He talked about the importance of forming relationships with male nursing students "touch bases" with them. He extends this mentorship process to his part-time work at a local hospital. He works with the younger male nurses as an extension of his mentorship with his male nursing students. Chris stated that at the hospital where he works is a female dominated work environment with most of the managers female so he enjoys coaching the guys at the hospital to help remove any barrios that they may encounter. He shared a concern that, "There are not as many men as there could be," and it is important to "focus on the younger guys who are coming up through the ranks." Later he also shared, "I take a particular interest in my male students because I realize that it can be a struggle being a minority in this profession."

Jared also tries to connect with male nursing students to guide them in decision making. Jared shared, "I'm always more open to talk with them, if they have any issues about how, trying to get into the role." Jared discloses to his male nursing students some of the problems he has had as a male nurse in a primarily female dominated profession. Like Nathan and Chris, Jared is available during his office hours to talk with male nursing students. Nathan finds that more male nursing students than female nursing students come to his office especially if the male nursing student has an issue with a female faculty member. Jared, Chris, and Nathan share an interest in

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talking about their nursing journeys as a male nurse in a female-dominated profession. Nathan called himself a "rare bird" as a male pediatric nurse. He enjoys telling male nursing students about his history as a pediatric nurse and stated that the male nursing students seem interested in his story.

Greg also feels strongly about his role as a male nurse mentor. Greg strives to be a "stellar" role model for male nursing students and admits that, "in some ways I hesitate to say this, it's really true, but I honestly feel like I have a greater expectation on male students." Later Greg clarified that he never would, "adversely evaluate a male student," but that he does, "in a general sense have a little bit of a stronger expectation toward them." Greg spoke at length about the importance of being a role model and mentor for male nursing students and male nurses. He feels male nurses, "need to step it as a man in nursing, you need to serve as a strong role model because there are not enough men in nursing. I think that in some ways that men have to prove themselves in nursing a little bit more than women do right now." Greg also mentioned two male nursing groups that he follows. The first group is called the American Assembly for Men in Nursing and at the University of Pennsylvania they have a group he called "man up." Both of these groups support the promotion of men in nursing.

Ryan is another participant who takes his job as a male nursing role model seriously. In one instance Ryan worked with a troubled male nursing student where he conducted role playing with the student to help the student improve his behaviors. Ryan qualified his response in that it is important to be equal to all nursing students but he does tend to pay a little more attention sometimes to his male nursing students. He is more interested in the direction his male students want to take in the nursing profession. Bill summarized the overall tone of what the male participants shared with regard to mentoring of all students. He stated, "I do need to guide them

as they go through the program. What can I do to make this experience better for them and especially men because I tell everyone the men and the women in my program that if they are half as satisfied with their profession that I am that I think life for them will all be good."

Chapter Summary

Nine male nurse educators were interviewed to learn about the lived experience of the male nurse educator who experienced nursing student incivility. The interview approach allowed the collection of extensive, detailed data about the participant's experiences. This chapter discussed the findings of these interviews. Data were analyzed for themes and patterns. Descriptions of nursing student incivility from the perspective of the male nurse educator emerged from the data. Six themes were identified as a result of the analysis of each interview. The themes were the uncivil event, physical and emotional responses to student incivility, reasons for student incivility, actions to address incivility, the gatekeeper role, and males mentoring males in nursing. Each theme was presented from the perspective of the participant by using the participants own words whenever possible.

Chapter five will discuss the themes and examine the relationship of the results of this study with respect to the published literature. Findings of agreement and disagreement with the current literature will be highlighted. Implications for future research and study limitations will also be discussed.

CHAPTER 5

DISCUSSION

The objective of this study was to explore the lived experience of male nurse educators who experienced nursing student incivility. This research sought to study only male nurse educators because a gap in the literature was noted. Earlier qualitative research by Luparell (2003, 2004), Olive (2006), and Williamson (2011) consisted of female nurse educator participants with the exception of one male in Luparell's work. Olive, Luparell, and Williamson suggest that the lack of gender diversity in their studies was a limitation and that by studying a male perspective an additional body of knowledge surrounding nursing student incivility could be enhanced.

A phenomenological qualitative approach was used to conduct the study in order to obtain rich detailed descriptions of the lived experiences of the male nurse educator. Nine male nurse educators participated in this study. Subjects were contacted via e-mail from lists of faculty from school web sites. Face-to-face semi-structured interviews using an interview protocol were conducted and audiotaped. Audiotapes were transcribed verbatim by the researcher. Member checking was completed to verify the accuracy of the transcriptions. Participants were all currently employed as nursing faculty in accredited schools of nursing in northeastern United States. Each participant met the inclusion criteria of being a male registered nurse licensed in the United States; taught in higher education; and, experienced nursing student incivility.

Three specific research questions centered around one primary question, "What is the lived experience of a male nurse educator who has experienced nursing student incivility?" Specific questions were designed to delve into the experiences of male nurse educators. The

specific questions were (1) How do male nurse educators describe their experiences with nursing student incivility? (2) Does nursing student incivility impact the classroom teaching strategies of male nurse educators? If so how? and (3) Does nursing student incivility impact the job satisfaction of male nurse educators? If so how?

Six themes emerged from the analysis of the interviews related to all three research questions. These themes were the uncivil event, physical and emotional responses to student incivility, reasons for student incivility, actions to address student incivility, the gatekeeper role, and males mentoring males in nursing. The researcher used a reiterative process where the data was reviewed repeatedly with the purpose of each additional review to improve the understanding of the data. This process was used to identify themes and answer the research questions. It should be noted that the majority of nursing educators are females; therefore, when analyzing previous research, the researcher gave consideration to gender perceptions similarities and/or differences. This chapter will discuss each theme as it relates to current literature. Implications and recommendations for further study will also be identified.

Below is a description of the major findings of this research. For clarity each research question is provided with a summary and interpretation of the results from this research.

Research Question One

Research question one posed the question: *How do male nurse educators describe their experiences with nursing student incivility?* Themes that answered this question were uncivil experiences, physical and emotional responses, reasons for student incivility, and actions taken to prevent student incivility. Based upon the findings of previous research, actual uncivil events were found to be congruent with previous qualitative and quantitative research. This finding was an expected finding. It was not expected that gender would have an impact on the types of

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uncivil behaviors experienced by nursing students. However, unexpectedly from this research, there appeared to be fewer uncivil behaviors by nursing students reported by male nurse educator participants. Most of the male nurse educators in this study had a difficult time remembering recent or past uncivil behaviors. Unfortunately due to the small group of sampled male nurse educators, there is not enough data to determine statistical significance nor can the results be generalized. Study results support the finding that these male nurse educators experienced more incivility when they were new to the profession.

Another possible theory regarding the number of uncivil behaviors reported is that male nurse participants in this study just do not recognize as many behaviors as uncivil. This supposition is not supported by research findings. In fact, Lampman, et al. (2009) found that there were no significant differences between gender reporting of uncivil student experiences. When the participants had a hard time recalling uncivil events, the researcher provided a list of common uncivil behaviors. All of the participants agreed that the listed behaviors were considered uncivil; yet, still, the participants could not remember any additional uncivil events. The primary explanation for this disparity may be that the male nurse educators in this study may not have internalized the event in the same way as the female nurse educators in previously published research. Supporting this idea is the finding that male nurse educators in this study did not experience significant physical and emotional distress. Primarily, female responses in published literature indicate significant, ongoing, and disrupting physical and emotional responses (Lampman et al., 2009; Luparell, 2003, 2004, 2007; Olive, 2006; Williamson, 2011). Supporting this theory is an experience described by the only male participant in Luparell's (2007) study.   The male participant described an incident where a student cursed at him. The male nurse educator responded by addressing the incident. He experienced no noteworthy

physical or emotional response.   Results from this study support the finding that male nurse

educators seem to have a better ability to move forward easier than female educators. This

knowledge can direct future research to assist female educators and any educator for that matter

who has difficulty relinquishing ownership of student incivility.

Another theme that answers research question one is reasons for student incivility.   The

primary reason the participants of this study gave as reasons for nursing student incivility is that

of entitlement, generational issues, and the need to obtain good grades to stay in nursing

programs. This finding is not surprising because entitlement, generational issues, and the need to

obtain good grades are also common reason for student incivility that have been identified in the

literature (Clark, 2008a, 2008d; Clark & Springer, 2010; Gillespie, 2014 . An unexpected

finding was the lack of any other reasons by the study participants as to why students may

behave in an uncivil manner. Prior research identified stress, multiple roles, work requirements,

finances, and mental health issues as possible reasons for nursing student incivility (Clark &

Springer, 2010). In the current study, participants agreed that these reasons were possible for

student incivility; yet they did not seem to resonate with the study participants.

The current study group based their experiences on millennial generation students. Based

upon publication dates, prior research findings are also based on experiences with millennial

generation students. It is unclear why findings by the current study group did not identify other

reasons for student incivility. The data clearly revealed the most prevalent reasons students

behave in an uncivil manner was related to generational issues and issues of entitlement.

Actions taken to prevent incivility were part of the description of student incivility.

Although the study participants had not researched student incivility, they unknowingly adopted

many strategies to prevent student incivility found in the literature (Clark, 2008c; Clark, 2009;

Ehrman, 2005; Feldman, 2001). These ongoing efforts may be the reason that these participants reported fewer incidents of student incivility. Their efforts have been ongoing; and, as a result, the number of events have been minimized. The participants may have unknowingly taken a proactive approach to uncivility without even realizing it. The participants suggested that at the beginning of each semester appropriate classroom and clinical behaviors should be reviewed. After the expectations have been established, the participants then described the way in which students must be held accountable for unacceptable behaviors. The participants expressed no unwillingness to respond to and correct inappropriate behaviors in a swift and timely manner.

The participants did not discuss established policies and procedures concerning ways to prevent student incivility or to guide faculty when student incivility occurred. A common recommendation from the literature is the establishment of clear and specific student incivility policies and procedures (Barrett et al., 2010; Condon, 2015; McCrink, 2010; Thomas, 2003). Although the male nurse educators in this study often reviewed behavior and expectation guidelines at the beginning of each semester, it might be helpful to have either student codes of conduct or policies as a part of a student manual which would guide the student and the faculty in the management of student incivility. Although it should be again noted, that for these male nurse educators, incivility was not identified as an overwhelming issue. Student incivility was perceived as a consequence of being human and an issue that occurs as a part of daily life, to be dealt, then to move forward with little thought of the incident again.

One finding expressed by two participants, Greg and Chris, was a request for continuing education about student incivility. Chris stated, "I think it is essential we find effective ways to deal with student incivility, moreover have some discussions, about some different ways that we can bring some civility in some of our experiences so we are better equipped to work with it. I

don't feel personally like I was well equipped to deal with that, I think that would be an area to target in education." He also stated that he didn't feel like he was well equipped to deal with student incivility.

Ongoing education on student incivility was another recommendation made by previous researchers. Greg and Chris both stated student incivility training would be helpful but they had not received any meaningful training on student incivility.   Perhaps incivility education has not been provided because of a shortage of educators who are experienced and knowledgeable in the management of student incivility. Poor administrative support or insufficient financial resources could be additional reasons for a lack of educational programs. Education about incivility for faculty is one part of a comprehensive program to reduce incivility (Nickitas, 2014). Many faculty members may be able to define and identify student incivility but are unclear how to best manage uncivil events. In addition, although the male study participants had administrative support, literature, at times, reports a lack of administrative support. Clear policies and procedures would be a good first step in managing these types of events, but of course to draft and implement incivility policies and procedures requires time and administrative support.

Item analysis was one technique identified by the male participants that was used to reduce student incivility. Item analysis has not been mentioned in the literature as a method to reduce student incivility. Students may not even realize that the professor is using this technique as a method to reduce uncivil events and faculty may not recognize the impact item analysis has on the reduction of student incivility. Consistently, the study participants shared that students needed to feel that the testing processes were fair and equitable. The participants repeatedly shared the importance of reviewing the test questions about the item analysis and of discarding questions if they were poorly written or misleading. The concept of sharing information with

students, admitting that a question was poorly written, or noting that there may an incorrect answer to a question and being willing to discard a question were techniques that the study participants used to promote a sense of equity. The participants felt the use of item analysis and sharing of information resulted in more civil behavior on the part of the student.   Most faculty may use the item analysis is this way, but being open and sharing the process could be an important method to impart that sense of fairness to students. The study participants found less discord around test administration and results when using this technique.

The overall answer to research question one is complicated.   In many ways, male nurse educators in this study experienced many of the same events and emotions consistent with female nurse educators. Based upon the experiences of male nurse educators in this study, the following recommendations were revealed. These recommendations included being proactive at the beginning of each semester by discussing acceptable and unacceptable student behaviors and the consequences of inappropriate behaviors. Although the participants lacked formal training in the prevention of student incivility, their response to student incivility was consistent with the literature. The male educators through instinct, experience, and trial and error found methods to reduce student incivility in their student groups.

Although it may be difficult, nurse educators should avoid taking ownership of the student behavior, address unacceptable behaviors swiftly, and then move forward. Techniques like item analysis should be in a sense "sold" to the students as a mechanism of fairness and equity. Faculty should explain how the item analysis works and that errors will always be modified in their favor. According to the study participants, a sense of equity is the most important tool to convey to reduce student incivility. Although not expressed in the literature, it

would seem to be a technique easy to implement if a professor notices issues with student incivility surrounding examination administration or review.

Research Question Two

In the next research question, this researcher sought to discover: *Does nursing student incivility impact the classroom teaching strategies of male nurse educators? If so how*? This question is answered by the theme that described the actions taken by the male educators to prevent student incivility. The data revealed that classroom teaching strategies were impacted by student incivility. To elaborate on this finding the following classroom teaching strategies were modified, test review procedures were altered, syllabi were enhanced, guidelines were developed, detailed assignment information was provided, multiple reminders were provided, rubrics were developed, and item analysis was implemented. Additionally, it was determined by the participants that implementation of active learning strategies reduced student incivility. These items were implemented by instinct or a trial and error process by male nurse educators. These male nurse educators responded in positive ways to reduce student incivility. The result was male nurse educator study participants reported few classroom or clinical site problems with student nursing incivility.

Qualitative work, at times, indicated a much darker picture when it came to modifications of teaching strategies. Teaching to the test is one such reported negative strategy. Another concerning strategy described by a participant in Luparell's (2003,2004) study was the practice by a female research participant who would not enter a grade less than a B to avoid student incivility. The participants in the current study creatively sought to find methods that improved communication, provided guidelines, and communicated an environment of fairness. According to the male nurse educator participants, these techniques keep student incivility in check. These

techniques are all easily integrated into day-to-day practices of the nurse educator. A trial of any

of these ideas would not be difficult and may result in an improved teaching-learning

environment. Although the participants of this study had not reviewed works on student

incivility, they actually implemented many strategies recommended in the literature (Barrett et

al., 2010; Clark & Springer, 2010; Condon, 2015; Marchiondo et al., 2010; McCrink, 2010;

Suplee, et al., 2010; Thomas, 2003).

Research Question Three

In this final research question, this researcher sought to explore the question: *Does*

nursing student incivility impact the job satisfaction of male nurse educators? If so how?

This question was answered by the gatekeeper role, the intention of the participant to remain in

nursing education, and the mentoring role of the male nurse educator. The findings for this

research question were unexpected. First, it was anticipated that student incivility would have a

negative impact on job satisfaction of the male nurse educator but this finding was not the case.

Secondly, it was anticipated that a nurse educator might express a desire to leave nursing

education. In fact, the findings of this study supported a neutral impact of student incivility on

job satisfaction. Finally, male nurse educators began talking about their roles as mentors. This

discussion was unexpected. The details of these three areas will be discussed.

The gatekeeper role was described by six of the male educators as an important aspect of

their occupation. They described their responsibility of protecting the integrity of the nursing

profession. The strength of this commitment to the nursing profession speaks to the dedication

of these male nurse educators. Acting as a gatekeeper when students behave in an uncivil

manner was described as an obligation and was not a factor influencing a decision for these

educators to leave nursing education. For some participants in published research, the

gatekeeper role was so arduous that they considered leaving nursing education (Luparell, 2003, 2004; Olive, 2006). When questioned, in more depth, the study participants gave two motivations to leave nursing education: non-student related obligations and difficulty progressing in rank. It should be noted that all nine participants plan to stay in nursing education.

Chris had an interesting viewpoint on the gatekeeper role. He uses his influence as an educator to open doors and enhance opportunities for male nursing students. He sees his role as a facilitator for male students. He strives to promote the success of male students to open the gates to the profession. Chris has the ultimate goal of increasing the numbers of male nurses. The viewpoint of opening gates was not found in any literature source.

Previous qualitative studies reported female nurse educators who left or planned to leave nursing education. Why then were the results of this study the opposite of prior studies? A possible explanation was the ability of the male nurse educators in this study, for a lack of a better description, take student incivility in stride. The male nurse educators in this study did not take ownership or responsibility for student incivility. Male nurse educators considered many behaviors as uncivil, but took the perspective that when uncivil behaviors occurred, one must address the behavior calmly and in a matter of fact approach. After addressing the behavior, no further time should be spent on the issue. The only action that is needed is to move forward. Jared perhaps best describes the tone of the male participants, "I just kind of see the behaviors, and say that's not right, OK let's move on, that's the end of it."

The responses of the current study participants supported the finding that incidents of student incivility had transient initial and minimal long term implications for these male nurse educators. It could be inferred that since male nurse educators did not experience significant short or long term after-effects of student incivility, the impact of student incivility on job

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satisfaction was negligible. In contrast, qualitative research of primarily female nurse educators,

long term consequences of student incivility were described (Luparell, 2003, 2004). The

interpretation of these results would conclude that the long term consequences experienced by

female nurse educators negatively impacted job satisfaction and influenced their decisions to

leave nursing education. Conversely, male nurse educators who experienced little in the way of

long term consequences from student incivility were not impacted positively or negatively with

regards to job satisfaction.

During the interview process an unexpected finding was discovered. This unanticipated

discovery was the bond identified between the male nurse educator and the male student nurse.

Mentoring by the male nurse educator to male student nurses was a positive reflection of the job

satisfaction of the male nurse educator. Seven participants of this study identified a connection

with, and the need to, mentor male nursing students. One goal expressed by the study

participants in the course of the interview process was to improve the number of men in a

predominately female profession.   These seven participants used mentoring and role modeling

behavior for male students almost interchangeably. Research by Gaberson, (1997), Clark,

(2009), Clark & Ahten (2012), Del Prato (2013), Ehrman (2005), Halstead (2012) , Suplee et

al. (2008), Williams and Lauerer (2013) also support the importance of the nurse educator as a

role model.

A literature search of male nurse educator mentors or male nursing mentors resulted in

only one match that was specific to the male faculty mentor role. Much information is available

with respect to mentoring nursing students and mentoring minority nursing students; however,

little is available about the male faculty role as a mentor to male student nurses. The information

regarding mentoring of nursing students is focused on the role of the clinical mentor rather than the faculty mentor.

Little research exists with regard to the role of the male faculty mentor and the male nursing student, but it can be inferred from the literature that male faculty mentors may promote the success of male nursing students (Banister et al., 2014; Georges, 2012; Hill, 2014; Juliff et al., 2015; Le-Hinds, 2010; Lloyd, 2013; Wilson et al., 2010). Jakubik et al. (2016b) describe the many benefits of a mentor relationship with the mentee gaining skills that include communication, decision making, problem solving, as well as an improved view of the profession of nursing. In a mentorship relationship both the mentor and mentee benefit from the relationship (Jakubik, et al., 2016a).   The participants of the current study are acting as mentors in many cases in an informal manner to support minority and male nursing students. Mentoring is often initiated informally with the reward being the opportunity to help others (Newby & Heide, 2013). The benefits of the mentorship role may have led to increased job satisfaction and the desire to stay in nursing education. The mentoring process has also been shown at the faculty level to increase job satisfaction and to improve retention (Blauvelt & Spath, 2008). The participants also strived to be positive role models to all students. More research is needed to understand the implications of the mentoring male nursing students. It would seem logical that mentoring male students would result in improved retention rates and graduation rates.

Implications

Through this study, the body of knowledge of nursing student incivility was expanded and the knowledge gap lessened about the lived experiences of the male nurse educator with nursing student incivility. This research was important because the male nurse educator perspective of nursing student incivility was largely unknown. By understanding the similarities

and differences between the experiences of the male nurse educator and the female nurse educator, management, prevention, and understanding of student incivility may be improved.

This research supported the finding that male and female nurse educators both experience incidents of student incivility. The first implication that can be drawn from this research is that male nurse educators appear to suffer fewer physical and emotional consequences of nursing student incivility than do female nurse educators. This finding is also supported by Lampman et al.'s (2009) research where women faculty were found to be more distressed after incidents of student incivility than men. According to Lampman, gender did not play a role in the frequency of student incivility. In the current study, due to the small sample size, it is impossible to determine if there were fewer incidents of student incivility experienced by the male participants. It would stand to reason that when the male participant had a difficult time reporting more than one or two incidents, that person may have experienced fewer incidents of incivility. Whether or not the male study participants experienced more or less episodes of student incivility, this research suggests they were less emotionally and physically impacted by the events and they took less ownership of the events.

A second implication of this research is the possibility that by simply modifying classroom teaching strategies, incivility may be minimized. Study participants utilized a number of techniques that they found effective in maintaining a positive teaching learning environment. The importance of a positive learning environment and the damaging effects that incivility could have on the learning environment has been documented (Clark, 2008d; Clark & Springer, 2007a; & Kolenko et al, 2006). Most of the interventions suggested by the study participants are techniques previously identified in the literature and could be implemented with minimal disruption to current practices. Item analysis was not identified in the literature as a tool or

technique to reduce incivility although the reduction of cheating though multiple testing procedures was described by Palmer, Bultas, Davis, Schmuke, and Fender (2016). Their research also described the importance of equity and fairness which was stressed by male nurse educator study participants. Item analysis was found to be an effective tool to promote equity and fairness thus reducing student incivility by the study participants. Discussion with students could be undertaken to explain item analysis and the impact of item analysis in the testing process. The study participants stressed that the students must perceive a sense of equity in the testing process. In addition, it does not appear that much in the way of education has been provided to the participants of this study. Ongoing educational efforts to improve knowledge, provide support, and suggest options for dealing with and managing student incivility may be helpful to both male and female nursing faculty.

The third implication relates to the mentor role that was revealed during the research process. Although results from the literature are not conclusive, the positive effects of mentoring are supported. Mentoring has been a technique used in nursing for a number of years to help in the acclimation of the student nurse to the nursing profession (Banister et al., 2014; Jamookeah, et al., 2011; Wilson et al., 2010). The role of the male faculty member as a mentor has not been adequately studied. Anecdotal research and the results from this research suggest that male faculty members who mentor male students would result in improved retention and graduation rates of the male student nurse. Without further study, this conclusion can only be inferred, but it stands to reason that male student nurses would benefit from this type of mentorship program.

Recommendations for Future Research

This study provided fundamental knowledge of the impact of nursing student incivility on the male nurse educator. Through the research process, additional areas of study have been identified. Recommendations for future study will be discussed.

As a convenience sample of male nurse educators was used and all of the participants were Caucasian males, the findings in this study may only reflect the perspective of the white male nurse educator and results may not be applied to other races or ethnicities. As a result, studies of this type should be conducted with participants of different racial or ethnic backgrounds.

Exploring the potential differences of generation Z students with respect to student incivility could be a future area of study. The effects of this generation on male and female nurse educators could be examined. As the impact of this generation may not be known for years, these studies will have to be conducted at least five years from now when an entire educational cycle of at least one graduating class of generation Z has been matriculated.

This study was conducted from the perspective of the male nurse educator. Studies have been conducted on students' perceptions of faculty incivility, but no research has been focused on students' perceptions of male nurse educator incivility. It would be interesting to research the similarities and differences between what is known about student perceptions of faculty incivility and student perceptions of male faculty incivility.

This study examined the perceptions of student incivility by male nurse educators from three program types. There is a lack of consistency with student populations in the current study. On-line programs have students who are already licensed nurses returning for a bachelor's degree in nursing. Accelerated programs have students who already have a bachelor's degree in

another field and are returning to become nurses. Finally, traditional programs have primarily students who start college from high school. There are a multitude of differences in the student populations and there may be differences in the types and frequency with student incivility. So, it would be interesting to see if there are any differences in the results between various educational programs.

An unexpected theme of mentoring was revealed in the process of the participant interviews. While this finding is thought-provoking, there needs to be more research to understand the implications of this type of mentoring. Will this type of mentoring improve male student retention? Can this type of mentoring be used to market nursing programs to males? Can this type of mentoring improve job satisfaction among male nurse educators and be used as a way to recruit more male nurse educators?

Chapter Summary

The lived experience of a male nurse educator who has faced nursing student incivility has been explored in this phenomenological study. Prior studies had not addressed the perspective of the male nurse educator. Throughout the study nine male nurse educators discussed their personal experiences with nursing student incivility. Interviews were analyzed using a qualitative phenomenological approach. Six themes became apparent from the analysis of the data. The themes of the study were uncivil events, physical and emotional responses, reasons students are uncivil, actions to prevent incivility, the gatekeeper role, and males mentoring males in nursing.

The study findings support many aspects of the current literature on nursing student incivility. First, student incivility was an experience common to all male nurse educator participants. This finding is consistent with Hanson's (2000) work where she found that all

educators will likely experience student incivility at some point in their career. Lampman et al. (2009) also document the frequency with which faculty experience student incivility. In their research, 96% of female faculty and 99% of male faculty have experienced student incivility. Male faculty members in this study ascribe student incivility to generational and entitlement issues which are reasons for student incivility (Clark, 2008, 2008b, 2008d; Clark & Springer, 2007a; Clark & Springer, 2010; Gillespie, 2014; Thomas, 2003; Williamson, 2011). Male faculty in the study addressed student incivility with strategies that are similar to strategies in the literature (Baxter & Boblin, 2006; Clark & Springer, 2007a; Feldman, 2001; Kolanko, et al., 2006; Luparell, 2003, 2005; Peters, 2012; Steinhoff, 2009; Williamson, 2011). Being a gatekeeper of the nursing profession was also found to be a common finding of this study and which is consistent with findings the literature (Fontana, 2009; Olive, 2006). Where the results of the lived experience of male nursing faculty diverged from the literature are the physical and emotional responses, these responses tended to be less bothersome to the male participants of this research. This study provides new information about male mentoring. Male faculty in the current study practiced mentoring and role modeling to male students to improve male student retention and graduation.

Discussion, implications, and recommendations were presented in this chapter. This study contributed to a deeper understanding of the experiences of male nurse educators who experienced student incivility. The findings extend the research, filling a gap in the literature related to the phenomenological or lived experience of male nurse educators. Continued research is necessary to further knowledge about student incivility, promote a positive learning environment for students and faculty, and control or prevent student incivility.

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Appendix A

Interview Protocol

Demographic Data

1. What is your age?

2. How would you identify your ethnicity?

3. How many years have you been in nursing education?

4. What type of program(s) have you worked in?

5. What is your primary area of expertise?

6. Are you tenured, non-tenured?

Interview Questions

1. Please describe or define your understanding of student to faculty incivility.

2. Describe the situation with uncivil student behavior(s) that stands out for you. Tell me
    what happened starting from the beginning.

3. Describe any physical or emotional impact you experienced as a result of the uncivil
    event.

4. Why do you think the student behaved in this manner? /What was the cause of the student
    behaving in this manner?

5. After your incident(s), tell me how you interacted with the student(s)?

6. Tell me how incivility impacts the way you perceive or relate to other students.

7. How has this experience had on you as a nurse educator (grading, pedagogy, evaluation,
    relationships with students, trust, friendliness, etc.)?

8. Tell me how student incivility has impacted the way you teach in the classroom or
    clinical setting.

9. Tell me how student incivility has impacted or changed your job satisfaction or desire to continue in nurse education.

10. Tell me anything else you would like for me or other nurse educators to know about your experience with student incivility or about student incivility in general.

Research Questions

The central question in this research study was "What is the lived experience of a male nurse educator who has experience nursing student incivility. Sub questions were:

1. How do male nurse educators describe their experiences with nursing student incivility?

2. How has nursing student incivility impacted the classroom teaching strategies of the male nurse educator?

3. How has nursing student incivility impacted the job satisfaction of male nurse educators?

Research Questions	Interview Protocol Questions
Research Question # 1	1, 2, 3 ,4 ,5 ,6, 7, 8, 9, 10
Research Question # 2	7, 8, 10
Research Question # 3	9, 10