

Factors Associated with Incivility Behaviors, Coping Strategies and Level of Engagement among Post Graduate Nursing Students.

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Abstract

Background: Incivility is a multidimensional and growing behavior; it is one of the serious challenges of learning environments. Thus, failing to identify contributing factors and managing students' incivility behaviors would eventually produce employees with uncivil behaviors. **Aim of the study:** To determine the relationship between factors associated with incivility behaviors, coping strategies and level of engagement among post graduate nursing students. **Subjects & Methods: Research design:** A descriptive correlational research design was used. **Setting:** The study was conducted at the Faculty of Nursing -Zagazig University, Egypt. **Subjects:** 107 post graduate nursing students. **Tools:** three tools were used for data collection: First: The Incivility in Nursing Education Tool, Second: Ways of Coping (Revised) Questionnaire, and Third: The Community College Survey of Student Engagement Tool. **Results:** The highest mean score of factors associated with incivility behavior was for nursing academic environment, and the highest mean score for incivility coping strategies was for positive reappraisal. The majority of post graduate nursing students had high level of engagement. In addition, there were negative strong correlations between factors associated with incivility behavior, incivility coping strategies and engagement, and both of the two variables were predictors of post graduate nursing student's engagement. **Conclusion:** Factors associated with incivility behavior were significantly and negatively correlated to incivility coping strategies and level of engagement among post graduate nursing students. In addition, factors associated with incivility behavior and incivility coping strategies were predictors of level of engagement among post graduate nursing students. **Recommendation:** Develop training workshops to increase post graduate nursing students' and faculty members' awareness of incivility behavior and its potential consequences.

Keywords: Coping Strategies, Engagement, Incivility Behaviors.

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I. Introduction

Incivility is one the major challenges facing nursing education and learning processes in the classroom, clinical, and online for distance education programs⁽¹⁾. Incivility in nursing education has been defined as a social behavior, that lacks kindness attention or politeness on a scale ranging from rudeness or lack of respect for elders to vandalism and disturbance of the peace through public attentions and threatening behaviors⁽²⁾.

In the academic setting incivility can be any action that impedes the development of a harmonious and cooperative learning atmosphere, and can be initiated by either the nursing students (NS) or nursing faculty (NF). Regardless of the source, incivility in nursing education undermines the culture of safety⁽³⁾, and jeopardizes welfare and goal attainment by all the stakeholders (NS, NF, other staff members, and patients).

Faculty members play a vital role in awareness of cultures' density that have adopted incivility into the work place and in maintaining a culture of civility⁽⁴⁾. This is usually achieved through increasing awareness in the different educational settings, assisting graduate as well as post graduate nursing students to perceive the life-long benefits of civility can have on their future success, helping new nurses to the profession, and helping the academic and non- academic to better manage with incivility^(5,6).

Moreover, they are inhibiting and addressing incivility behaviors because these behaviors can negatively affect learning, performance and outcomes and harm faculty-student relationships, patients' safety during clinical practice, competence acquisition, professional behavior as well as society as whole⁽⁷⁾. Early detection and management of incivility behaviors in turn, leads to conserving and raising the quality of nursing education, efficiency - effective of teaching process, and excellence of physiological and psychological health of nursing faculty members and safety to society⁽⁸⁾.

So the challenge for the faculty members is to understand the factors contributing to the students' incivility and its reflection on their learning process and how to create optimal learning environments for the students to overcome these behaviors⁽⁹⁾. Coping is a dynamic behavioral and cognitive effort to manage the internal and external stress. Each individual commonly used problem-focused and emotion-focused coping strategies, depending on the stress situation, previous beliefs and their feedback. Nursing students used various coping strategies such as; feeling sad, crying, chatting, walking, sports engagement and ignoring the stress situation^(10,11).

Moreover, increasing the students' awareness of their coping strategies as they apply different planned and adaptive coping strategies depending on their situations, lead to improve positive ways for decreasing stress and helping them to exclude maladaptive coping strategies as drug consumption and avoidance by instructors. The most coping approaches used among nursing students are problem solving, emotion-focused, transference and optimism. Therefore, identifying coping strategies of nursing students is important for early interventions⁽¹²⁻¹⁵⁾.

Teaching-learning approach, which enhances students' engagement in their learning process, objective evaluation methods for the students, appropriate clinical training competence skills, and student's activities and recreations are ways for attraction and motivation. All of these should be used as the effective strategies to prevent and manage with incivility as well as the nurse educators' behaviors as a role model. Also, exposure of students to incivility in the classroom can result in reducing their engagement during the learning process^(16,17).

Engagement is the degree of student's contribution or interest in their learning process as well as collaboration with others, their studies, and their institutions⁽¹⁸⁾. Their engagement has many components such as, activities, feeling, time, effort, and resources, which have been associated with student learning success⁽¹⁹⁾. Therefore engaging students in learning environment is a vital part in their education process and has its own challenges and rewards to provide the chances to develop cognitive, psychomotor and affective skills, improve critical thinking skills, respect others perspectives to achieve learning outcomes⁽²⁰⁾.

1.1. Significance of the study

Incivility is a multidimensional and growing behavior⁽²¹⁾ a hotly-debated issue in nursing education⁽²²⁾, and one of the serious challenges of classrooms or clinical environments. Incivility refers to students' or professors' disruptive and rude behaviors violating mutual respect. Thus, failing to identify contributing factors and manage student's incivility behavior would eventually produce employees with uncivil behaviors. Managing incivility in academic settings is among the basic concerns and challenges of most educational systems, including nursing education, and this will be achieved by using planned coping strategies based upon the students' perspective to encourage their engagement in the learning and clinical environment. Therefore, the universities and educational training hospitals should have system to create an open communication environment to discuss the incivility prevention and management ways with nursing students confronting and any circumstances affected negatively on this positive learning environment should be considered⁽²³⁾.

Aim of the study:

To determine the relationship between factors associated with incivility behaviors, coping strategies and level of engagement among post graduate nursing students at the Faculty of Nursing, Zagazig University.

Research questions:

1. What are the most factors associated with incivility behaviors as perceived by post graduate nursing students?
2. What are the most coping strategies used by post graduate nursing students to deal with incivility behaviors?
3. What is the level of engagement among post graduate nursing students?
4. Are there relationships between factors associated with incivility behaviors, coping strategies and level of engagement among post graduate nursing students?
5. Are factors associated with incivility behaviors and coping strategies predictors of post graduate nursing students' engagement level?

II. Subjects and Methods

2.1 Research design:

A descriptive correlational research design was used in this study.

2.2 Setting:

This study was conducted at the Faculty of Nursing, Zagazig- University Egypt .

2.3 Subjects:

All post graduate nursing students who were actually enrolled in the program during the period of data collection in spring semesters 2018 and 2019, in the above mentioned departments, and accepted to participate in

this study. Each semester is consisting of 15 weeks. They were classified as follows: post graduate nursing students in the master program (n=47) and in the doctorate program (n=60).

2.4 Instruments:

Three tools were used to collect data for this study namely; The Incivility in Nursing Education Survey, Ways of Coping (Revised) Questionnaire, and Community College Survey of Student Engagement [CCSSE].

Tool I: The Incivility in Nursing Education Survey

It was adapted from **Clark et al.**⁽⁸⁾, necessary modifications were done by the researchers to suit the Egyptian culture. It consists of two main parts:

Part 1: Post graduates nursing student's personal characteristics as age, gender, and specialty, program and residence.

Part 2: Incivility in Nursing Education: It consists of 52 items grouped under three main domains:

A. *Behavior in Nursing Academic Environment:* It was used to measure post graduate nursing student's perception regarding incivility behaviors that have been experienced/seen by them in their academic environment. It includes 19 items.

B. *Faculty Members Incivility Behavior:* It was used to measure post graduate nursing student's perception towards faculty members' incivility behaviors. It includes 20 items.

C. *Threatening/disruptive behavior:* It was used to measure post-graduate nursing student's experienced or seen incivility behaviors in their program. It includes 13 items. The responses of post graduate nursing students to the questionnaire were measured on 4 point Likert scale ranging from (4) always to (1) never. The total scores of the scale ranged from 19-76. The student's score was considered a high of incivility behavior if it was ranged from (58-76), moderate incivility if it was ranged from (39-57) and low if it was ranged from (19-38). The reliability of the tools was estimated using Cronbach's alpha, it was 0.97.

Tool II: Ways of Coping (Revised)* Questionnaire.

It was developed by **Lazarus and Folkman**,⁽¹⁰⁾; **Clark, et al.**⁽²⁴⁾ and **Foreman**⁽²⁵⁾. To assess post graduate nursing student's thoughts or actions about coping strategies, which were used to cope with incivility behaviors in their nursing education program. It consists of 50 items grouped under eight dimensions namely: confronted coping (6 items), distancing (6 items), self-controlling (7 items). Seeking social support (6 items), accepting responsibility, escape-avoidance (4 items), planful problem-solving (8 items), positive reappraisal (7 items). The responses of post graduate nursing students to the questionnaire were measured on four-point Likert scale: 0 = Not used; 1 = Used somewhat; 2 = Used quite a bit; and 3 = Used a great deal. The total scores of the scale computed to the percentile and then categories to three levels. The student's score was considered a high of coping strategies if it was >75%, moderate if it was ranged from (50%-75%) and low if it was <50%. The higher scores indicated that the higher coping strategies used by the students. The reliability of the tools was estimated using Cronbach's alpha, it was 0.90.

Tool III: The Community College Survey of Student Engagement (CCSSE) :

It was adapted from **Center for Community College Student Engagement**,⁽²⁶⁾. It was used to determine the students' engagement in the classroom. It consisted of 34 items divided into four categories namely: active and collaborative learning (19 items), student effort (5 items), academic challenge (8 items), and student - faculty interaction (4 items). They were rated on a 4-point Likert-type scale as follows: 4=very often, 3= often, 2= sometimes, and 1= never. The total scores of the scale computed to percentile and classified into 3 categories. The student's score was considered a high of engagement if it was >75%, moderate if it ranged from was 50%-75% and low if it was <50%. Higher scores indicated that high degree of students' engagement. The reliability of the tools was estimated using Cronbach's alpha, it was 0.87.

2.5 Field work

Data collection conducted during first semester at academic year 2019-2020, and took about two months from mid-September till mid-November, 2019. Data were collected in between lectures. The researchers explained the aim of the study to students through group meetings each department separately, who were already enrolled in the educational program during the period from spring 2018 to spring 2019. Then the tools of data collection were distributed to all available students before their lectures, and collected back after one week from every department, they spent from 25 to 30 minutes completing the questionnaire.

2.6 Pilot study

Pilot study was carried out before starting the actual data collection to confirm understanding, clarity, and applicability of the tools. Additionally, to estimate the time required for filling the questionnaire sheet. The pilot study was carried out 11 (10%) post graduate nursing students). Students were selected randomly and excluded from the main study sample, and the results of pilot sample were excluded from the main study results. The necessary modifications were done.

2.7 Content validity:

Data were collected using a self-administered questionnaire, after the translation of the instrument to Arabic. The content and face validity were established by a jury of experts (5 professors & assistant professors) from academic nursing staff, Zagazig University. According to their opinions all necessary modifications were done.

2.8 Ethical Consideration

The study was approved by Ethics Committee and Dean of the Faculty of Nursing, Zagazig University. Verbal and written explanation of the nature and aim of the study have been explained to students included in the study sample. They were given an opportunity to refuse or to participate, and they were notified that they could withdraw at any stage of filling in the questionnaire, without giving any reasons; also they were assured that the information would be utilized confidentially and used for the research purpose only. Confidentiality was confirmed by not writing their names. The researcher assured to participants that the participation is absolutely voluntary.

2.9 Statistical analysis

Data entry and statistical analysis were performed using the Statistical Package for Social Science (SPSS), version 21.0. Cleaning of data was done to ensure that there was no missing or inappropriate data existed. Data were displayed using descriptive statistics in the form of frequencies and percentages for categorical variables, and means and standard deviations for continuous variables. Pearson correlation analysis was used for assessment of the inter-relationships between total scale scores. Multiple Linear inner regression analysis was used to assess the prediction effect. Percentages for categorical variables, and means and standard deviations for continuous variables. ANOVA F test and Independent t-test were used to detect the relation between the variables. Pearson correlation analysis was used to assess the interrelationships between total scale scores. Correlation between variables was evaluated using Pearson's correlation coefficient (r). Significance of the obtained results was set at the 5%.

III. Results

Table (1): Distribution of Personal Characteristics of Post Graduate Nursing Students (n=107).

Personal characteristics of Faculty members	N	%
Program		
• Master Science in Nursing (M.Sc.N.)	47	43.9
• Doctorate in Nursing Science (D.N.Sc.)	60	56.1
Specialty		
• Medical - Surgical Nursing	19	17.8
• Pediatric Nursing	16	15.5
• Obstetrics & Gynecology Nursing	8	7.7
• Gerontological Nursing	23	21.5
• Psychiatric & Mental Health Nursing	11	10.3
• Nursing Administration	12	11.2
• Community Health Nursing	18	16.8
Gender		
• Male	26	24.3
• Female	81	75.7
Age (years)		
• <30	57	53.
• 30- <35.	50	46.7
Mean± SD	35.46± 8.50	
Residence		
• Urban	34	31.8

• Rural	73	68.2
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Table 1: Clarifies that 53.3% of post graduate nursing students' age was <30 years, with a mean age of 35.46 ± 8.50. As well, the highest percentages of them were female and working in Gerontological Nursing Department (75.7% & 21.5% respectively). As well more than two thirds of post graduate nursing students reside rural areas and less than three fifth (56.1%) are registered for doctoral degree.

Table (2): Distribution of study variables' mean scores as reported by studied post graduate nursing students (n=107)

Study variables	Mean	±	SD
Incivility in nursing education domains			
• In nursing academic environment	31.915	±	6.284
• Faculty members incivility behavior	30.523	±	8.274
• Threatening/disruptive behavior	3.411	±	4.499
Total mean score	65.850	±	15.177
Incivility coping strategies domains			
	Mean	±	SD
• Confronted coping	5.588	±	3.018
• Distance	6.056	±	3.826
• Self-controlling	10.233	±	5.229
• Seeking social support	11.046	±	3.893
• Accepting responsibility	7.392	±	4.412
• Escape/avoidance	10.018	±	5.549
• Planful problem solving	9.579	±	5.355
• Positive reappraisal	13.504	±	5.491
Total mean score	73.420	±	25.889
Student engagement domains:			
	Mean	±	SD
• Active and collaborative learning	51.775	±	7.655
• Post graduate student effort	9.112	±	3.385
• Academic challenge	21.373	±	4.390
• Student - faculty interaction	11.102	±	2.406
Total mean score	93.364	±	13.446

Table 2: Displays the distribution of study variables' mean scores as reported by studied post graduate nursing students. As shown from the table, the highest mean score of factors associated with incivility behavior in nursing education was for nursing academic environment followed by faculty members incivility behavior (31.915 ± 6.284, & 30.523 ± 8.274 respectively). While the lowest mean score was for threatening/disruptive behavior (3.411 ± 4.499). As well, the totals mean score incivility behavior in nursing education was 65.850 ± 15.177.

Concerning incivility coping strategies domains, the highest mean score was for positive reappraisal, followed by seeking social support (13.504 ± 5.491, & 11.046 ± 3.893, respectively), while the lowest mean scores were for confronted coping and distance (5.588 ± 3.018, & 6.056 ± 3.826 respectively). Additionally, the total mean score of incivility coping strategies was 73.420 ± 25.889.

As for student engagement domains, the highest mean score was for active and collaborative learning, followed by academic challenge (51.775 ± 7.655, and 21.373 ± 4.390, respectively), whereas the lowest mean score was for post graduate student effort (9.112 ± 3.385) and the total mean score of student engagement was 93.364 ± 13.446. (In response to research questions 1 & 2).

Figure 1. Illustrates the level of factors associated with incivility behavior among post graduate nursing students. It is clear from this figure that 75% of post graduate nursing students had a moderate level of factors associated with incivility behavior.

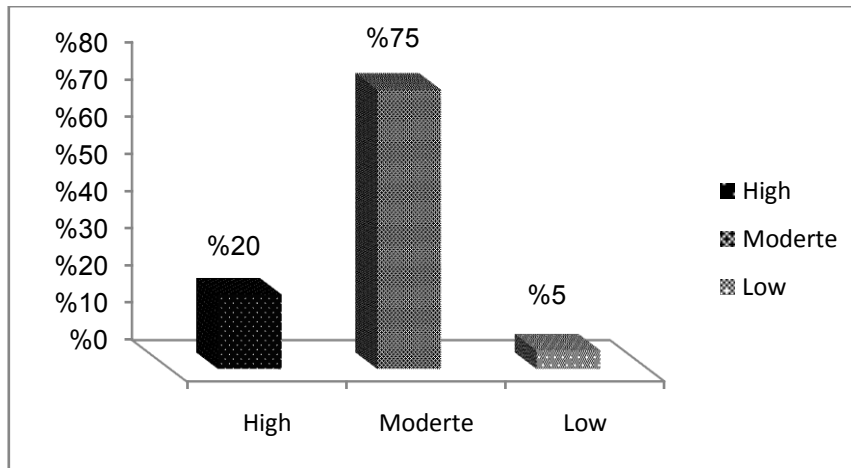


Figure (1): Level of Factors Associated with Incivility Behavior Among Post Graduate Nursing Students (n=107)

Figure 2. Shows the level of incivility coping strategies among post graduate nursing students. It is clear from this figure that 85.7% of post graduate nursing students had a high level of incivility coping strategies.

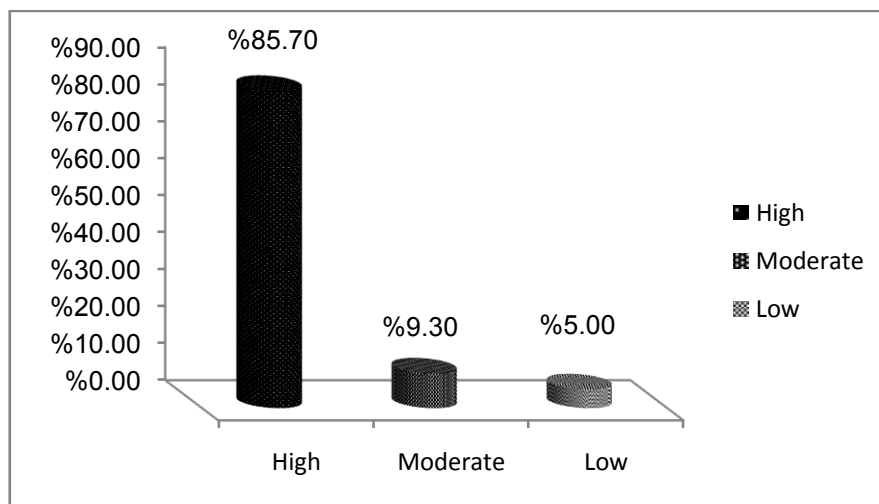


Figure (2): Level of Incivility Coping Strategies among Post Graduate Nursing Students (n=107).

Figure 3. Displays the level of engagement among post graduate nursing students. It is clear from this figure that 60% of post graduate nursing students had a moderate level of engagement (In response to research question 3).

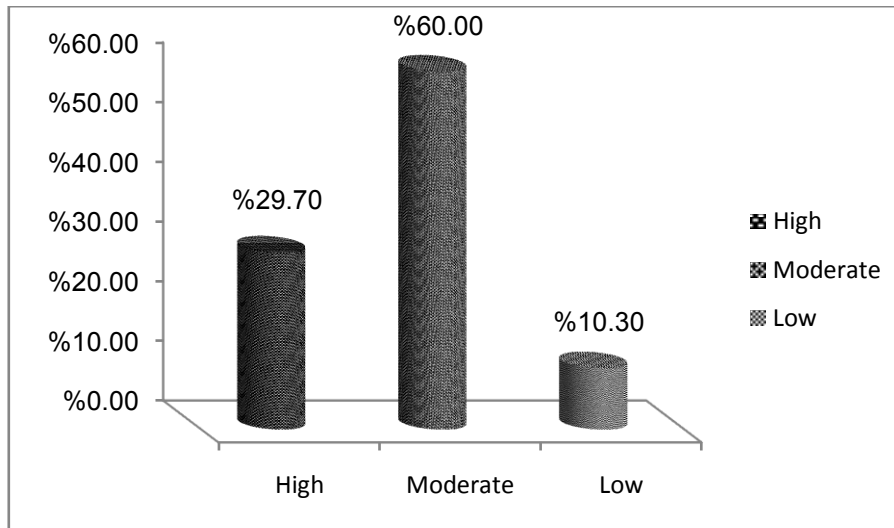


Figure (3): Level of Engagement among Post Graduate Nursing Students (n=107).

Table (3): Correlations Between Study Variables as Reported by Post Graduate Nursing Students (n=107).

Variables	Factors associated with incivility behavior		Incivility coping strategies	
	R	P	R	P
• Incivility coping strategies	- 0.671**	0.002		
• Engagement level	- 0.720*	0.035	0.216*	0.025

*Statistically significant at $P < 0.05$ *, highly statistically significant at $P < 0.01$ **.

Table 3: Presents correlations between the different study variables; this table displays that factors associated with incivility behavior were significantly and negatively correlated to incivility coping strategies and level engagement among post graduate nursing students ($r = -0.671$, $P = 0.002$ & $r = -0.720$, $P = 0.035$, respectively). In addition, there was a significant and positive correlation between coping strategies and engagement ($r = 0.216$, $P = 0.025$). (In response to research question 4)

Table (4): Regression Analysis for Factor Associated with Incivility Behavior Among Post Graduate Nursing Students (n=107)

Variables	R	R ²	Unstandardized coefficient		t	Sig.
			B	Std. error		
• Factors associated with incivility behavior	0.75	0.620	-0.070	0.022	- 4.960**	0.000
• Incivility coping strategies	0.541	0.290	-0.047	0.017	- 3.329**	0.000

*Statistically significant at $P < 0.05$, ** Highly statistically significant at $P < 0.01$.

Table 4. Proves that factors associated with incivility behavior among post graduate nursing students was responsible for 62% of the variation in their level of engagement ($R^2 = 0.620$, $p = 0.000$). Likewise, post graduate nursing students' incivility coping strategies was responsible for 29% of the variation in their level of engagement ($R^2 = 0.290$, $p = 0.000$). Accordingly, factors associated with incivility behavior and incivility coping strategies were predictors of level of engagement among post graduate nursing students. (In response to research question 5).

Table (5): Relation between study variables and post graduate nursing students' personal characteristics

Variables	Factor associated with incivility behavior			Coping strategies			Engagement		
	Mean	±	SD	Mean	±	SD	Mean	±	SD
Program									
Master Science in Nursing (M.Sc.N.)	63.68	±	14.95	72.96	±	25.91	90.41	±	13.11
Doctorate in Nursing Science (D.N.Sc.)	68.61	±	15.16	74.00	±	26.13	97.12	±	13.04

Independent t-test--- P-value	1.68—0.09			0.204—0.83			*2.63—0.01		
Department specialty									
• Medical–Surgical Nursing	61.78	±	10.44	67.52	±	16.06	88.15	±	19.35
• Pediatric Nursing	64.56	±	6.08	49.50	±	18.11	87.31	±	10.94
• Obstetric &Gynecology Nursing	80.50	±	4.80	66.00	±	22.44	83.50	±	12.29
• Gerontological Nursing	48.66	±	8.60	78.50	±	17.97	92.94	±	5.51
• Psychiatric & Mental Health Nursing	75.90	±	26.68	90.63	±	31.42	87.54	±	3.00
• Nursing Administration	69.00	±	13.14	97.00	±	12.89	109.75	±	9.89
• Community Health Nursing	72.00	±	9.43	73.00	±	28.69	99.86	±	1.02
Independent t-test— P-value	0.777—0.450			0.597—0.557			0.162—0.872		
Gender:									
• Male	63.57	±	17.34	68.76	±	26.00	100.53	±	9.48
• Female	66.58	±	14.45	74.91	±	25.83	91.06	±	13.76
Independent t-test--- P-value	0.798—0.340			1.05—0.295			*3.26—0.01		
Age									
• <30	63.94	±	15.67	82.10	±	22.35	91.08	±	13.31
• ≥ 35	68.02	±	14.44	63.52	±	26.28	95.96	±	13.24
Independent t-test--- P-value	1.39—0.165			3.91—0.262			1.89—0.06		
Residence									
• Urban	64.00	±	16.01	71.02	±	25.31	101.47	±	12.32
• Rural	66.71	±	14.80	74.53	±	26.25	89.58	±	12.29
Independent t-test--- P-value	0.835—0.40			0.659—0.512			*4.64—0.01		

*Significant at $p < 0.05$.

Table 5. Shows relationship between study variables and post graduate nursing students' personal characteristics. It is clear from the table that there was a statistically significant relationship between engagement and post graduate nursing students' personal characteristics regarding program, gender and age (p value < 0.05). However, no significant relations were detected with the other demographic variables

IV. Discussion

Incivility behavior has been the focus of increased attention in higher education circles, and is commonly labeled as a growing problem. Incivility behavior typically brings to mind acts of rudeness, disrespect, or other breaches of the common rules of courtesy. It is violate workplace expectations and well-being of all individuals in any educational faculty. The effect of incivility behavior is injurious to community safety and impediment for educational process Mahmoud (2015) ⁽²⁷⁾. Therefore, the aim of this study was to assess relationship between factor associated incivility behavior, coping strategies and level of engagement among post graduate nursing students.

As regards total mean score of factors associated with incivility behavior; the highest mean scores were for nursing academic environment and faculty members' incivility behavior, while the lowest mean score was for threatening/disruptive behavior. This might be due to that the majority of post graduate nursing students viewed that tasks required from them were complex, there was disorganization of courses and the academic environment exposes them to high stress level and their competition for grades make this results.

This result is consistent with that of Caroline (2018) ⁽²⁸⁾, who conducted a study to explore student nurses' experiences of incivility and the impact on learning and emotional wellbeing in the context of a pre-registration (pre-licensure) nursing program, in the United Kingdom (UK), Higher Education Institution, and found that the main associated factor incivility behaviors in nursing was related to academic environment. Moreover, Vink and Adejumo (2015) ⁽²⁹⁾, who studied factors contributing to incivility amongst students at a south African, Nursing School, found that the, highest contributing factors to incivility was related to academic environment.

This result is inconsistent with those of Natarajan et al. (2017) ⁽³⁰⁾, who conducted a study in Oman to explore the perceptions and extent of nursing faculty (NF) academic incivility in an undergraduate nursing program of a public university, found that the, highest contributing factors to incivility was related to disruptive faculty behaviors.

Regarding total level of factors associated with incivility behavior; this study results reveals that three quarters of post graduate nursing students had a moderate level of factors associated with incivility behavior. This may be due to freedom of speech and expressions are valued and used a different incivility measurement. As well the nurse educator's role to prepare and generate civility culture among post graduate nursing students

and respect each other's using planned coping strategies to encourage student civility behavior. This results is in agreement with Todd, et al. (2016)⁽³¹⁾ who conducted a study in USA, to examine the effects of faculty incivility on nursing students' satisfaction with their Bachelor of Science Nursing (B.Sc.N) in a rural Southeastern state and found that more than half of students was the highest reported experienced incivility behavior. However this result is in disagreement with Clark (2017)⁽³²⁾, who examined the perceptions of incivility among students in radiography education in the United States, and found the low incivility behaviors occurs among students in radiography classroom.

Concerning total mean score of incivility coping strategies in the current study, the highest mean scores were for positive reappraisal, followed by seeking social support, while the lowest mean scores were for confronted coping and distance. These results may be attributed to the friendly and respectful relationships between post graduate nursing students and nursing educators. Moreover, identifying prevalent uncivil behaviors, and, increasing post graduate students' and faculty educators' awareness of incivility, paved the way for them to rethink their performance and create a constructive environment for teaching and learning. This result is in agreement with Kassem and Mohammed (2019)⁽³³⁾, who conducted a study at the Faculty of Nursing, Mansoura University, Egypt, to determine the relationship between incivility behavior among nursing students and their engagement at classroom, and found that the highest mean scores of coping strategies were for positive reappraisal and escape/avoidance.

These results were in dissimilarity to those of Foreman (2018)⁽²⁵⁾, who conducted a study at King University, USA to identify the behaviors that constituted lateral student-to-student incivility, determine the frequency of experienced student-to-student incivility, and described the coping strategies employed by pre licensure registered nursing students experiencing lateral student-to-student incivility, and found that playful problem-solving (PP) was the coping strategy most often employed by participants.

Regarding total level of coping strategies; the highest percentage representing the majority of post graduate nursing students had a high level of coping strategies. This may be due to that nursing educators' awareness of the prevalence of incivility, and seek to develop the policies and apply strategies to reduce student's incivility and try to cope with incivility positively. These results are in consistent with those of Zhu, et al. (2019)⁽³⁴⁾, who conducted a study aimed to synthesize evidence for the experiences and perceptions of incivility during clinical education of nursing students, and found that total score of copying strategies' level for studied students was moderate

The present study findings revealed that, three fifth of post graduate nursing students had a moderate level of engagement, while the highest mean scores of post graduate nursing student's engagement were for active and collaborative learning, followed by academic challenge, whereas the lowest mean score was for post graduate student effort. This may be due to proper communication skills between the students, interestingly, enthusiastically delivered adding to well organized lectures. As well, feedback on academic performance from students' educators led them to work harder to meet educators expectations. This result is consistent with Fry, et al. (2009)⁽³⁵⁾ who stated that levels of student' engagement was low. However these results are to some extent in agreement with Kassem and Mohammed (2016)⁽³³⁾, who found that the highest mean score of student engagement was for academic challenge.

The current study findings indicated that, there were statistically significant negative correlations between factors associated with incivility behavior, incivility coping strategies and engagement among post graduate nursing students, In addition, factors associated with incivility behavior and coping strategies are predictors of level of post graduate nursing students' engagement. This may be explained as, when post graduate nursing students have a full view of factors leading to incivility behavior, and use the appropriate coping strategies to deal with such behavior, will lead to encourage and improve their engagement in the learning environment, and these will be achieved through understanding the importance of civility culture and respect among each other's.

In agreement with Kassem and Mohamed (2019)⁽³³⁾, and Lutz (2016)⁽³⁶⁾ who found that there was a negative significant relationship between degree of incivility behaviors and engagement level among the studied students. As well, agreed with Clark (2013)⁽³⁷⁾ who concluded that incivility is minimized when students are engaged in the learning experience. This is in the same line, with Sprunk et al. (2014)⁽³⁸⁾ and Rad et al. (2015)⁽³⁹⁾, who concluded that, the nurse educators have an important role to prepare the post graduated nurses to lead the health care revolution through understanding the importance of civility culture and respect each other's. This was achieved by using planned coping strategies to encourage student engagement in learning environment, this main responsibility of the nursing faculty, institutes and educational training hospitals.

As well, Galo (2012)⁽⁴⁰⁾ who found that, factors leading to incivility behavior are predictors of level of engagement among the studied subjects. These findings support those of several previous research findings at those of Scisco et al. (2013)⁽⁴¹⁾, which has shown that factors contributing with incivility may lead to reductions in engagement level among students. Also, Pyles (2016)⁽⁴²⁾ revealed that there was a statistically significant relationship between the coping responses to, and factors contributing to nursing student's incivility,

moreover, factors contributing to incivility and coping responses to those factors are predictors of engagement level among the studied subjects.

The current study findings presented that, there were no significant relations with factors associated with incivility behaviors and all personal characteristics of post graduate nursing students. This may be due to that, there were other factors which can relate to incivility behaviors rather than age, gender, program, specialty, and residence of post graduate nursing students as the influence of public media, family's educational status, personal life problems, preference of employment overstudying and family life over educational tasks, involvement in economic problems. This in disagreement with Mohammadipour et al. (2018)⁽⁴³⁾ who found that, there were significant relationships between the factors leading to incivility behavior and the students' gender and residence status. However, for other characteristics, no significant relationships were observed.

The present study findings revealed that, there was a statistically significant relation between incivility coping strategies and age only. Also, between levels of post graduate nursing students' engagement and their program and gender. This may be explained that, there were much differences in student's beliefs, attitudes, values, interests, experiences and previous training in strategies for promoting civility in nursing education, commitment to professionalism and accountability.

This in disagreement with Pyles(2016)⁽⁴²⁾, which showed no significant relationship was observed between students' incivility coping strategies and all personal characteristics. However, Lutz(2016)⁽³⁶⁾ found that no significant relationship between students' engagement, and all personal characteristics among the studied students.

V. Conclusion

Factors associated with incivility behavior were significantly and negatively correlated to incivility coping strategies and level of engagement among post graduate nursing students. In addition, factors associated with incivility behavior and incivility coping strategies were predictors of level of engagement among post graduate nursing students.

VI. Recommendations

In light of the findings of the present study, it is recommended to;

- Develop training workshops to increase post graduate nursing students' and faculty members' awareness of incivility behavior and its potential consequences.
- Update policies and strategies that ensure continuous monitoring of potential source of incivility behavior in nursing faculty and the harm that they can cause.
- Faculty and students with administrators must work together to develop and implement comprehensive codes of conduct and effective strategies to prevent incivility.
- Conduct training programs for faculty members, about civility behavior which lead to positive changes in attitudes and behaviors.
- Study factors affecting students' engagement and develop the strategies to increase engagement for students.
- Further researches to examine the optimal strategies prevent and manage student incivility in nursing education.
- Future studies need to conduct with larger sample of students from different universities and geographical areas.

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