ORIGINAL ARTICLE

Equality between Incivility among Nurses and Psychological Well-being in Three Main Hospitals in Southeast Iraq

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ABSTRACT

Background: It is impossible to emphasize or ignore the widespread problem of incivility behavior in nursing workplaces. To the best of the knowledge of the present studies, no comprehensive research on this subject has been carried out in Iraq. Inconsiderate incivility-behavior in the nursing workplace has never been subjected to exhaustive research, despite its potential impact on the mental health of nurses hailing from various cultural traditions.

Methods: In this descriptive research, 250 nurses in three main hospitals in Southeast Iraq were questioned using the nursing incivility scale (NIS) and Ryff's psychological well-being measure (PWB).

Results: results indicate that 63.6% of nurses show a moderate, 24% showed a low level, and 12% show a high level of nursing incivility at the workplace (M±SD= 123.01±29.544). Psychological well-being indicates that nurses have low to moderate in which 67.2% of them show moderate level and 32.4% show low level (M±SD= 59.36±11.222).

Conclusion: in this study level of nursing incivility at the workplace is the most important factor that can affect the psychological well-being of nurses. This study's conclusions may help build human resource strategies to meet nurses' requirements, reduce workplace incivility, and improve psychological well-being.

Keywords: nursing incivility, psychological well-being, nurses, workplace

INTRODUCTION

Incivility affects nurses everywhere. Nurses often offer care 24/7. Uncomfortable working conditions are inevitable. Doctors, nurses, patients, or employers may bother you. When nurses are often exposed to improper conduct, they may assume it is part of their job and not report violence[1]. Nurses' mental health may suffer if forced to work in unpleasant environments, which will affect patient care and may inspire aggression. Globally, workplace incivility hinders individual and organizational success[2]. Rudeness may affect employee engagement and performance. Incivility at work causes sorrow, anxiety, and other destructive emotions, threatening mental and physical health. It might reduce employee enjoyment, loyalty, and turnover. Mental health should be prioritized at home, at work, and in emergencies[3]. Stress relief is vital for preventing and treating mental and behavioral illnesses. Mental health should be prioritized at home, at work, and emergencies. Stress relief is vital for preventing and treating mental and behavioral illnesses[4]. Psychological well-being includes healthy interpersonal interactions and job conduct. Incivility in the workplace may lead to stress and inadequate emotional reactivity, harming employees' mental health. Workload and harmful workplace conduct affect employees' mental health. The results show the necessity to study workplace incivility[5]. Workplace incivility should be seen organizationally.

By leaving a lasting imprint, one may avoid workplace incivility by building strong structures and deploying human resources[6]. Understanding the problem helps spot and handle workplace incivility[7]. Several health stakeholders, independent of culture, may be able to provide light on the magnitude and relevance of workplace incivility, especially regarding how nurses conduct professionally at work. Rudeness at hospitals is an all-too-common problem that worries the medical sector. Incivility must be handled since it may affect patient care and staff attrition if left unchecked[8]. It took much research to establish human resource approaches that might meet nurses' requirements, reduce workplace incivility, and promote psychological well-being. This research examines the workplace incivility nurses confront in southern Iraqi hospitals and its influence on their psychological well-being [9].

MATERIAL AND METHOD

This study adhered to the (Creswell) guidelines and is a correlational, descriptive study. The research was conducted in three main hospitals in Southeast Iraq. All nurses were registered in hospitals, and they had suitable experience months. Nurses in Iraq can write and read in English and Arabic, so the study design was adapted to these languages. Sample size of this study was calculated according to the guides of Baghdad university-college of nursing, and the final number of nurses who took part in this study was 250. The Nursing Incivility Scale (NIS), developed by Guidroz, Burnfield, Geimer, Clark, Schwetschenau, and Jex (2010), and Ryff's psychological well-being scale, was used to evaluate the parts of the investigation. Data were collected on a specific date at a continuous rate.

Ethical approval: Baghdad University's approved the research protocol. Before collecting data, each institution's management gave permission. Good coordination with nursing administration was also seen. Before obtaining informed permission, participants were given enough research information and a thorough explanation of their rights. Confidentiality was ensured by not sharing or reporting data that may identify participants and by locking up all surveys. No incentive was given to participants.

Statistical analysis: In this particular investigation, the data was evaluated using a statistical computer package designed specifically for social science research (IBM SPSS version 24.0). In order to conduct an analysis of the findings of this investigation, statistical methods were used.

RESULTS

Table 1: Overall Assessment of Nursing Incivility among Nurses at Workplace Environment

Incivility	F	%	M	SD
Low	60	24		
Moderate	159	63.6		
High	31	12.4	123.01	29.544
Total	250	100		

f: Frequency, %: Percentage
M: Mean for total score, SD: Standard Deviation for total score
Low= 43 – 100.33, Moderate= 100.34 – 157.66, High= 157.67 – 215

This table indicates that 63.6% of nurses show a moderate level of nursing incivility at workplace environment (M±SD= 123.01±29.544).

This table indicates that nurses have low to moderate psychological well-being (M±SD= 59.36±11.222), in which 67.2% showed moderate level and 32.4% showed low level.

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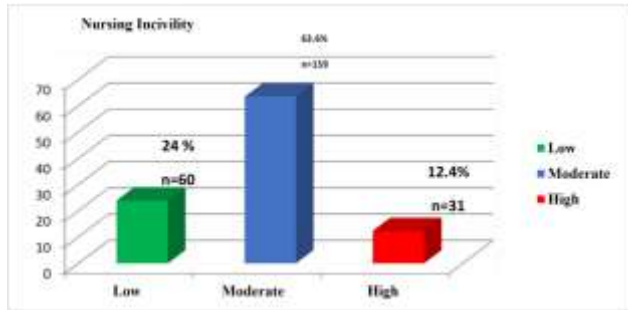
Figure 1: Level of Nursing Incivility among Nurses (N=250)

This figure shows that 63.6% of nurses are associated with a moderate level of incivility.

Table 2: Overall Assessment of Psychological Well-being among Nurses

Psychological well-being	f	%	M	SD
Low	81	32.4		
Moderate	168	67.2	59.36	11.222
High	1	.4		
Total	250	100		

f: Frequency, %: Percentage
M: Mean for total score, SD: Standard Deviation for total score
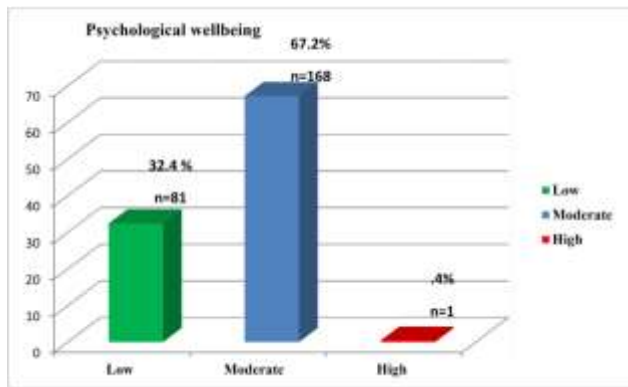Low= 18 – 54, Moderate= 54.1 – 90, High= 90.1 – 126

Figure 2: Level of Psychological Well-being among Nurses (N=250)

This figure shows that 67.2% of nurses are associated with a moderate level of psychological well-being.

DISCUSSION

The investigation of rude conduct shown by hospital nurses resulted in the production of a road map for future development in this sector as well as a road map for prospective solutions that may make the situation more civilized[10]. It is possible that the identification of opportunities for the implementation of training interventions and the design of a policy controlling incivility conduct in the workplace might result from the examination of rude behavior in health care settings[11]. This descriptive study aimed to determine the impact of rude conduct in the workplace on nurses employed at one of three hospitals in the Southeast region of Iraq. According to the findings of this research, there are considerable degrees of incivility in the workplace and relationships between employees' psychological wellness and their own psychological well-being. It is difficult to emphasize or downplay the widespread problem of rude behavior in the workplaces of departments because it is so ubiquitous in these surroundings[12]. This makes it difficult to either emphasize or downplay the problem[13]. According to the best of the present authors' knowledge, there has never been comprehensive research carried out on this subject anywhere in Iraq. The writers have come to this conclusion as a group[14]. Inconsiderate

behavior in the workplace has never been the subject of considerable research, despite the fact that it may have an influence on the mental health of nurses who come from a wide variety of cultural traditions[15]. The workplace department was related to the Nurses' incivility behavior in the workplace, and the workplace department was also connected to the beginnings of such politeness[10]. The Nurses' incivility behavior in the workplace was connected to the workplace department[16]. The results of this study could be a helpful resource that can be used as a reference for formulating policies concerning human resources to satisfy the expectations of nurses and remove incivility from the workplace in their individual departments[17]. Making use of the results of this study as a point of reference would allow for this to be done[18].

CONCLUSION

The incivility that the Nurses displayed in the workplace was connected to the workplace department, and the workplace department was also tied to the beginnings of such civility. The findings of this research might be a helpful resource that can be used as a reference for creating policies about human resources to meet the requirements of nurses and eliminate workplace incivility in their respective departments. This would be accomplished by using the findings of this research as a reference.

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