2019

Faculty Incivility and Academic Nurse Administrator Job Satisfaction

Kimberly S. Lindquist
Walden University

Walden University

College of Health Sciences

This is to certify that the doctoral dissertation by

Kimberly S. Lindquist

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Review Committee
Dr. Leslie Hussey, Committee Chairperson, Nursing Faculty
Dr. Janice Long, Committee Member, Nursing Faculty
Dr. Francisca Farrar, University Reviewer, Nursing Faculty

Chief Academic Officer
Eric Riedel, Ph.D.

Walden University
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Abstract

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MSN, University of Toledo, 2007

BSN, Eastern Michigan University, 2001

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Nursing

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Abstract

Academic nurse leaders hold an essential role in preparing future nurses who have the skills and abilities to meet complex healthcare system. However, vacancies in academic leadership positions are on the rise and may be connected to faculty incivility which affects job satisfaction of academic nurse leaders. The purpose of this descriptive correlational study, guided by Herzberg's two-factor theory, was to explore the relationships between perceptions of and experiences with faculty incivility and job satisfaction in a population of academic nurse leaders. Leader perceptions of and experiences with faculty incivility were measured using the Workplace Civility/Incivility Survey and leader job satisfaction was measured using the Job Satisfaction Survey. Data were collected through an online survey from 142 academic nurse leaders and analyzed using nonparametric correlation testing. The results revealed that academic nurse administrators serving at the associate degree level are victims of faculty incivility and that their experiences with uncivil faculty behavior is significantly correlated to their job satisfaction ($p < 0.01$). Study results suggest that academic nurse leaders will likely encounter uncivil faculty behavior during their tenure as administrators. It is imperative that academic leaders engage in professional development opportunities to address complex and difficult relationships that may occur in the work setting which will foster and advance the skills needed to effect positive social change. Further research that explores the causality of faculty incivility on job satisfaction and other outcomes of the work experience in this and other populations of nursing leaders is warranted.

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Dedication

I dedicate this encompassing body of work to my son, Jack III, as a life lesson that with hard work, persistence, and God's unmerited favor, you can accomplish anything. I hope I made you proud.

Acknowledgments

It took a village. Firstly, I would like to thank the administration, faculty, and staff at Walden University and my dissertation committee, especially Dr. Leslie Hussey and Dr. Janice Long, who were instrumental in guiding me toward success. To my husband, Jack II, for keeping the boat upright over the last four years. To my son, Jack III, who shared his smile when I needed it and gyred and gimbled with me as I met each goal. And to my mom who listens to me every day and has always been my biggest fan. None of this would have been possible without all of my family, friends, and colleagues who were encouraging and supportive and kept me moving forward, personally and professionally, every day. I am forever grateful.

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Chapter 1: Introduction to the Study

Introduction

An essential element in meeting the needs of a complex healthcare system is strong nursing leadership. Emphasized as a key initiative in the Institute of Medicine's (IOM) *Future of Nursing* report (IOM, 2010), leadership development is thought to be an important undertaking to ensure that nursing has a strong voice and is well positioned to contribute as a full and equal partner in transforming the healthcare system. Yet, recruitment and retention of academic nursing leaders is problematic. Little is known about the leader experience creating an opportunity for additional research in this area (Flynn & Ironside, 2018; Mintz-Binder, 2013, 2014; Morton, 2014; Steege, Pinekenstein, Knudsen, & Rainbow, 2017).

Contributing to recruitment and retention issues is the increasing prevalence of incivility in nursing education. Troubled interpersonal relationships often mature into uncivil behaviors, deleteriously affecting job satisfaction and the work experience (Clark, 2017; Clark & Springer, 2010; Clark, Olender, Kenski, & Cardoni, 2013; LaSala, Wilson, & Sprunk, 2016; Lynette, Echevarria, Sun, & Ryan, 2016). As a matter of inquiry, more research is needed to fully understand the prevalence and effect of faculty incivility on academic nurse leader job satisfaction which in turn, enlightens understanding of the leader work experience.

The topic of this descriptive correlational study was faculty incivility toward academic nurse leaders at the associate degree level and the influence on leader job satisfaction examined through the lens of Herzberg's two-factory theory (see Herzberg,

Mausner, & Synderman, 1959/2010). The study addressed a gap in the literature surrounding the work experience of academic nurse administrators and contributes to positive social change by advancing the understanding of work-related factors connected to administrator satisfaction, a concept linked to recruitment and retention.

In Chapter 1, I delineated the plan and design for this research study. Major sections include the background, problem statement, purpose, and research questions and hypotheses for the study set within a theoretical framework. A description of the nature of the study is followed by concise definitions of study variables and explanation of assumptions, the scope, delimitations, and limitations. The section concludes with commentary on the significance of the study and summarizes the contribution the study makes to the advancement of nursing practice and policy and to positive social change.

Background of the Study

The IOM's (2010) *Future of Nursing Report* called to attention the significance of nursing leadership to the advancement of a healthcare system capable of meeting the complex needs of the public in a safe and effective manner. Nursing leadership is thought to have a tremendous influence on the health of the work environment, shaping the atmosphere in which nursing care is delivered (Kelly & Adams, 2018) and impacting the work performance and well-being of employees (Haggman-Laitila & Romppanen, 2018). The same type of influence holds true in academia where strong nursing leadership is vital to the preparation of the next generation of nurses and the integrity of a rigorous and enriching educational environment (Flynn & Ironside, 2018; Morton, 2014). However, in order to promote the development of nursing leadership in all practice

settings, more research is needed to better understand the leader work environment and factors that influence leader recruitment, retention, and attrition (Hudgins, 2016; Mintz-Binder, 2014; Steege et al., 2017).

Effective leadership within nursing education is critical to the preparation of the next generation of nurses who have the skills and abilities necessary to be effective in today's health care environment (Flynn & Ironside, 2018; Mintz-Binder, 2013, 2014; Morton, 2014). Yet, researchers have noted that vacancies in academic leadership positions are on the rise and problematic (Mintz-Binder, 2014; Morton, 2014). Data made available by the American Association of Colleges of Nursing (AACN, n.d.) suggested that full-time faculty positions with 50% or more of responsibilities devoted to administrative duties constituted approximately 10% of vacant full-time positions during the academic year 2016-2017. Likewise, notification of a change in the program administrator constituted the greatest percentage of substantive change reports received by the Accreditation Commission for Education in Nursing (ACEN, n.d.) during the same time frame. Notable are the statistics related to associate degree programs. Of the 486 substantive reports received by the ACEN from associate-level programs, 168 reports (34.57%) related to a change in program administrator (ACEN, n.d.). Stated differently, approximately 35% of associate-level programs experienced a change in academic leader during one academic year.

Problem Statement

Leader longevity and retention are problematic and may be connected to a lack of job satisfaction (Derby-Davis, 2014; Emory, Lee, Miller, Kippenbrock, & Rosen, 2017;

Lee, Miller, Kippenbrock, Rosen, & Emory, 2017; Woodworth, 2016a, 2016b; Yarbrough, Martin, Alfred, & McNeill, 2017). Theoretically, the strength, quality, and characteristics of interpersonal relationships in the work place serve as an antecedent and determinant of job satisfaction (Herzberg et al., 1959/2010). When interpersonal relationships are unfavorable in academia, such as those characterized by uncivil behaviors between colleagues, job satisfaction is negatively affected, perpetuating costly retention and attrition issues at the individual and organizational levels (Clark, 2013, 2017; Clark & Ritter, 2018; Condon, 2015; Emory et al., 2017; Lee et al., 2017).

One factor associated with this ongoing trend is reduced job satisfaction. Research by Mintz-Binder and Fitzpatrick (2009) examined factors related to academic director job satisfaction at the associate degree level in California and identified a statistically significant relationship between social support and job satisfaction. Mintz-Binder (2014) later surveyed a national sample of associate degree program directors and discovered that the rating of interpersonal relationships by leaders was well below expected normal range and that job satisfaction and social support were significantly correlated.

One factor contributing to dissatisfaction with the leadership role is incivility. Clark (2013) described incivility, a relationship-based concept, as rude or disruptive behavior often resulting in physical and/or psychological distress. Incivility crosses generational boundaries for both students and faculty (Ziefle, 2018) and is viewed as a moderate to serious problem within nursing education that often results in long-term and detrimental effects at both the organizational and individual levels (Aul, 2017; Clark,

2017; Clark et al., 2013). Academic nurse administrators are not exempt from instances of uncivil behavior. Recent qualitative research illuminated the lived experiences of academic leaders with faculty incivility and brought to attention the "devastating effects on administrators personally and professionally" (LaSala et al., 2016, p. 124). Yet, faculty incivility toward academic nurse leaders has yet to be quantified and what effect this phenomenon has on leader job satisfaction remains unknown. In response, my study was designed to study the work experience of academic nurse leaders as it pertains to the prevalence and effect of faculty incivility and was conducted against a backdrop of significant academic leader vacancies and turnover (AACN, n.d.; ACEN, n.d).

Purpose

The purpose of this descriptive correlational study was to determine if there is a relationship between faculty incivility (independent variable) and job satisfaction in academic nurse leaders at the associate degree level from ACEN-accredited programs (dependent variable). The study tested the assumptions of Herzberg's two-factor theory that suggests when certain factors, such as interpersonal relationships, are unfavorable, job satisfaction is negatively affected (Herzberg et al., 1959/2010). An exploratory survey methodology was used to quantify administrator perceptions of faculty incivility toward leaders at the associate degree level and explore if a relationship exists between these perceptions and leader job satisfaction.

Research Question and Hypothesis

In addition to the reporting of demographic and descriptive data, I developed two research questions to guide this study.

RQ1: What is the relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs?

$H_0$1: There is no relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

H_a1: There is a relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

RQ2: What is the relationship between experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs?

$H_0$2: There is no relationship between experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

H_a2: There is no relationship between experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

Two instruments were necessary to measure the study variables and conduct the correlational analysis. I used the Workplace Incivility/Civility Survey (WICS) by Clark (2014) to measure administrator perceptions of and experiences with faculty incivility. I used the Job Satisfaction Survey (JSS) by Sluyter, Mukherjee, and Hinkle (1985) to

measure leader job satisfaction. The JSS is based on Herzberg's two-factor theory and measures job satisfaction according to distinct workplace motivating and hygiene factors (Sluyter et al., 1985).

Theoretical Framework

I used Herzberg's two-factor theory, also called the motivation-hygiene theory of job satisfaction, as the theoretical framework for this study. Herzberg's theory addresses the continuum of job satisfaction based on antecedent conditions called motivator and hygiene factors (Herzberg et al., 1959/2010). Motivator factors are intrinsic to the job and when present, are thought to improve an employee's performance and job satisfaction. Factors include achievement and recognition, a sense of responsibility, opportunities for growth and advancement, and the work itself. Relevant to this study are hygiene factors thought to be extrinsic to the job and important elements to job context (Herzberg et al., 1959/2010). Hygiene factors, including work relationships with subordinates, peers, and superiors, prevent job dissatisfaction (Herzberg et al., 1959/2010). Stated differently, when hygiene factors fall to an unacceptable level, job satisfaction is negatively affected. It then follows that incivility, a relationship-based concept, could be considered a hygiene factor that when experienced, leads to job dissatisfaction. Herzberg's theory aligned with the purpose of the study which was to examine the prevalence of faculty incivility toward academic nurse leaders and the relationship incivility has with leader job satisfaction. I presented Herzberg's theory in greater detail in Chapter 2.

Nature of the Study

This study was an investigation into the prevalence of faculty incivility toward academic nurse leaders and the relationship between faculty incivility and leader job satisfaction using a correlational, quantitative, survey approach. Survey methodology provided an opportunity to collect descriptive statistics that quantified the prevalence and perceptions of faculty-to-administrator incivility from the leader perspective and collect data regarding leader job satisfaction. Correlational analysis explicated the relationship between faculty incivility and leader job satisfaction and was useful in testing Herzberg's theory that proposes when interpersonal relationships in the workplace deteriorate, so does an employee's job satisfaction (see Herzberg et al., 1959/2010). Consistent with the purpose of the study, I did not intend to determine a causal relationship between variables. The use of correlational, quantitative methodology helped to facilitate greater understanding of the work experiences of academic nurse leaders at the associate degree level by identifying a potential relationship between study variables, addressing a call for additional research related to issues surrounding leadership in nursing academe (Bouws, 2018; Clark et al., 2013; Hudgins, 2016; Mintz-Binder, 2014; Steege et al., 2017).

Definitions

Academic nurse administrator or leader: A nurse serving in an administrative role with the responsibility and authority to carry out the administrative and instructional activities for a nursing education program (ACEN, 2018a; Mintz-Binder, 2014). An academic nurse administrator or leader carries a title such as dean, assistant dean, associate dean, or program director. In keeping with the definition put forward by the

ACEN (2018a) and to demarcate faculty-to-administrator incivility from faculty-to-faculty incivility, administrators with faculty status were excluded from this definition. The terms *administrator* and *leader* were used interchangeably for this study.

Associate-level nursing program: A 2-year program, generally located within a community or junior college setting, which confers an academic degree upon program completion and prepares students for initial licensure to become a registered nurse ("Associate Degree in Nursing", n.d.).

Civility: A respect for others that is authentic with a demeanor that acknowledges the personal values of others and dissimilar points of view (Clark, 2017; Kaslow & Watson, 2016). The premise of civility "requires time, presence, engagement, and intention to seek common ground" (Clark, 2017, p. 10).

Incivility: A "range of rude or disruptive behaviors or failing to take action when action is warranted; these behaviors and inactions may result in psychological or physiological distress for the people involved – and if left unaddressed, may progress into threatening situations [or result in temporary or permanent illness or injury]" (Clark, 2017, p. 14).

Job satisfaction: An attitude toward work that is uniquely perceived by the employee and influenced by factors intrinsic and extrinsic to the work and work environment (Herzberg et al., 1959/2010).

Assumptions

I designed this study upon the following assumptions:

- While researchers have delineated common themes of variables associated with job satisfaction, perceptions of satisfaction/dissatisfaction are unique and vary from person to person (Almeida de Moura, Bernardes, Balsanelli, Zanetti, & Gabriel, 2017; Herzberg et al., 1959/2010; Mintz-Binder & Sanders, 2012). Therefore, I assumed academic nurse administrators desire to recognize elements of their work and work environment that contribute to their own personal sense of job satisfaction or dissatisfaction.
- All participants were honest in their answers as a reflection of their personal work experiences. Research integrity relies not only on the responsible conduct of the researcher, but also on data that are valid and reliable (The National Academies, 2009; Yang & Huck, 2010).

Scope and Delimitations

The scope of the study encompassed the prevalence of faculty incivility toward academic nurse leaders at the associate degree level from ACEN-accredited programs and illuminated the relationship between these experiences and leader job satisfaction. Incivility within nursing education has been studied extensively, and while researchers such as Clark (2017) and Rawlins (2017) acknowledged that incivility can exist in a variety of different forms, the study of incivility toward academic leaders is scarce. Given the importance of strong leadership in nursing education to the success of its graduates and the viability of the healthcare system (Flynn & Ironside, 2018, Mintz-Binder, 2013, 2014; Morton, 2014), this study was timely and addressed a gap in the research.

I conducted a quantitative study using a descriptive, correlational research design to quantify academic nurse leader perceptions of faculty incivility and establish if there is a relationship between this phenomenon and leader job satisfaction. This methodology is not only useful in determining if a relationship exists, but also helps to ascertain the strength and direction of the relationship, if present (Asamoah, 2014). Regression analysis was not indicated since the aim of this study did not include determining causality between variables. Qualitative methods that focus on understanding beliefs, experiences, behaviors, and attitudes (Pathak, Jena, & Kalra, 2013) did not align with the research purpose; therefore, also fell outside of the scope of this study.

Delimitations of the study included a focus on the work experiences of a particular population of academic nurse leaders. The experiences of leaders from other levels of academia, such as baccalaureate, master, and doctoral programs, or from associate-degree leaders from non-accredited programs fell outside of the scope and were excluded. The study focused on the experiences of academic nurse administrators or leaders that have direct responsibility and authority to carry out administrative and instructional activities for an ACEN-accredited associate degree nursing education program with titles such as dean, associate dean, assistant dean, or program director (ACEN, 2018a; Mintz-Binder, 2014). Responses from nurse educators with administrative responsibilities and faculty status, such as department chairs, violated the faculty-to-administrator relationship of interest; therefore, did not meet the scope of this research and were excluded.

The research sample served as an additional delimitation factor for my study. I used a convenience sample of associate degree academic nurse administrators from ACEN-accredited schools in the United States. E-mail addresses for this population were available through the ACEN website at www.acenursing.org. I sent electronic surveys to all designated program nurse administrators from ACEN-accredited schools; thereby, all administrators fitting the inclusion criteria and with an interest in the study were invited to participate. Random sampling was not feasible since I could not randomly select the sample. Stratification of the population, a sampling method used to ensure a sample reflects the true proportion of characteristics found in the overall population (Creswell, 2014), was not necessary since the entire population was invited to participate in the study. Stratification may be useful in follow-up studies with an interest in predicting the responses of particular profiles of participants.

I chose Herzberg's two-factor theory as the theoretical framework for my study. According to the theorists, job satisfaction and dissatisfaction are dependent upon a variety of factors associated with the work and work environment (Herzberg et al., 1959/2010). Extrinsic to the work itself are interpersonal relationships that when favorable, diminish job dissatisfaction and contribute to a more positive work experience. I chose Herzberg's theory because the model directly links interpersonal relationships (a hygiene factor) to the concept of job satisfaction. I considered Locke's (1968) range of affect theory and Heinrich's (2007, 2010) joy stealing theory as possible frameworks. While both theories acknowledge that interpersonal relationships contribute to an

employee's work experience, the conceptual relations do not directly connect interpersonal relationships to job satisfaction, the outcome variable in my study.

Limitations

Considered one of the most common and useful types of research, studies using correlational methods allow researchers to determine if a relationship exists between two or more "naturally occurring" variables (Asamoah, 2014, p. 46). No attempt to influence or manipulate the variables is made when engaging in this type of quantitative research. In this study, external validity was promoted using descriptive, correlational methodology which is the proper statistical method in nonexperimental research aimed at establishing the relationship between two or more variables and verifying theoretical underpinnings; therefore, causal inference was not intended (see Curtis, Comiskey, & Dempsey, 2015). Findings were limited to the disclosure of descriptive statistics for each variable, to exploring the strength and direction of the relationships between them, and to evaluating the predictability of Herzberg's two-factor theory in explaining the relationship between faculty incivility and academic nurse leader job satisfaction. Curtis et al. (2015) put forward that assuming a causal relationship is one of the most common mistakes made when analyzing and interpreting correlational data. Therefore, the study methodology served as a limitation due to the constraint associated with finding causality.

Another limitation is the potential for confounding variables that could influence the relationship between study variables. Asamoah (2014) argued there is always a possibility that an unknown factor or variable better explains the relationship between two otherwise correlated research variables. Herzberg's theory (Herzberg et al.,

1959/2010) asserts that a variety of motivational factors, such as recognition for achievements in the workplace, a sense of responsibility, opportunities for growth and advancement, and the work itself, may influence an employee's job satisfaction. Likewise, additional hygiene factors unique to job context, such as working conditions, salary, status within the organization, a sense of security, and company policies, administration, and supervision, may precipitate feelings of job satisfaction. Each of these factors represents a potential confounding variable that falls outside of the scope of this study. However, Herzberg's theory also purports a relationship between interpersonal relationships and satisfaction/dissatisfaction in the workplace, promoting confidence in the results of this correlational analysis when guided by a theoretical framework that predicts a relationship between them (Asamoah, 2014).

The use of a convenience sample limits the ability to make inferences about the general population. Researchers are encouraged to use caution in making generalizations of findings to other populations when using this method of sampling due to the possibility that the sample may not adequately reflect all of the characteristics of the population in general (Asamoah, 2014; Creswell, 2014; Curtis et al, 2016; "Generalizability", 2018). Random sampling is preferred in quantitative research; therefore, when using a convenience sample, replication of the study with other populations, such as academic leaders at the baccalaureate and graduate level or from non-accredited programs, is necessary to establish greater generalizability (Warner, 2013). In my study, a large sample size helped to ensure the study had the statistical power necessary upon which to draw accurate conclusions regarding the population of interest (see Warner, 2013).

Furthermore, the strategy to collect data using an anonymous and confidential online platform eliminated the ability of the researcher to influence how participants respond, advancing the reliability of findings when analyzed using applicable descriptive and correlational methods (Asamoah, 2014). Given the sample strategy and research design, I do not profess that my findings will be reflective of the experiences and opinions of other populations of nursing leaders. Future research is necessary to validate if my findings are reflective of the work experience of other types of academic nurse leaders and to improve generalizability.

Internal validity of my research was threatened by the concept of maturation that occurs when participants mature or change over the course of the study (see Creswell, 2014). In response, I collected data at only one point in time, thereby minimizing limitations associated with maturation. Also of concern to internal validity is the selection of participants that share certain characteristics; therefore, predisposing them to certain outcomes (Creswell, 2014). While I planned the use a convenience sample of participants who shared similar roles, responsibilities, and titles within their designated nursing programs, participation was not limited according to other qualifiers, such as years of nursing/administrative experience, professional background, gender, institutional longevity, or institutional type (private versus public) that would predispose a more common demographic, therefore ensuring a more diverse participant pool.

Instrumentation also presents a challenge to internal validity. Given the nonexperimental nature of the study, pre- and post-testing instrument changes were not a concern. Quality research depends on reliable data that is objective and accurate, using

tools that are valid and reliable (Curtis et al., 2016). To address this limitation, I used the WICS by Clark (2014) and the JSS by Sluyter et al. (1985) that have both been well-tested and analyzed for reliability and validity, disclosing important statistics such as the Cronbach α to ensure that concerns with construct validity were addressed and minimized as a study limitation.

Bias

There was a risk of research bias in this study. Research bias is thought to exist in all study designs, can occur at any step of the research process, and may influence the researcher's ability to critically evaluate findings and conclusions (Smith & Noble, 2014). As an associate-level academic nurse leader, I have had interest in this topic for several years, recognizing the influence my own professional experiences may have on my view of the topic and propelling me to research it further. However, strict adherence to well-designed quantitative research protocols pertaining to sample size and selection, objective testing, and full disclosure of analytical processes and findings helped to minimize researcher bias and promote valid and reliable results (see Smith & Noble, 2014).

Significance

This study addressed a gap in the literature by quantifying the prevalence of faculty-to-administrator incivility, fostering a greater understanding of how this behavior is related to job satisfaction in a population of academic nurse leaders. Researchers have recognized the importance of additional studies aimed at better understanding the work experiences and issues surrounding academic nurse leaders (Flynn & Ironside, 2018;

Haggman-Laitila & Romppanen, 2018; Hudgins, 2016; LaSala et al., 2016; Steege et al., 2017). Mintz-Binder (2013, 2014) specifically emphasized the importance of studying the work experience of associate-level administrators and put forward an argument that the stability, longevity, and recruitment of these leaders may be in trouble if left unchecked.

Findings from this study may help academic institutions develop programs, policies, and procedures aimed at preventing incivility experienced by academic nurse administrators, directly addressing problems associated with leader recruitment, retention, and attrition in academia. A greater understanding of how incivility influences the leader experience empowers academic institutions and leaders to create and amend policies aimed at promoting leader job satisfaction in that setting, and establish consequences for behaviors that fall outside of expectations (Clark, 2017; Clark et al., 2013; Goldberg, Beitz, Wieland, & Levine, 2013; LaSala et al., 2016; Muliira, Natarajan, & Van der Colff, 2017). Although a study of this nature does not directly enlighten patient care practices, the results can affect positive social change since academic nurse leaders have an indirect role in the care provided to patients and communities through their efforts to produce nursing graduates with the skills and abilities to provide safe, quality, and competent care (Emory et al., 2017; Flynn & Ironside, 2018; Haggman-Laitila & Romppanen, 2018; Kelly & Adams, 2018; Mintz-Binder, 2013; Morgan, 2014).

Summary

Despite the importance of the role, recruitment and retention of nurse leaders is problematic. Academia is not exempt from these concerns with vacancies in academic

leadership positions on the rise. Research aimed at better understanding the work experience of leaders in this area is lacking, representing a notable gap in the knowledge and the basis for future studies. Although limited, research examining job satisfaction of academic nurse leaders suggests there are multiple factors that affect this important determinant of retention and attrition including the quality and nature of interpersonal relationships encountered in the workplace. Research by LaSala et al. (2016) revealed that faculty incivility toward academic nurse leaders is problematic and suggested a connection to leader job satisfaction. Yet, the prevalence of faculty incivility and the extent of the relationship between faculty incivility and leader job satisfaction remained unknown.

The introduction to research delineated in Chapter 1 explicated the background of recruitment, retention, and attrition issues afflicting nursing leadership in academia. Within this chapter, I outlined the study's problem statement, purpose, and research questions. I proposed a theoretical framework that proved useful in determining and defining study variables, study design, and methodology. Other important research essentials, including scope and delimitations, limitations, and scholarly and social significance, were established.

This quantitative, descriptive correlational study filled a gap in the knowledge by quantifying the prevalence of faculty incivility toward academic administrators at the associate degree level from ACEN-accredited programs and investigated how this type of interpersonal relationship relates to leader job satisfaction. This knowledge heightens understanding of how incivility influences the leader experience, empowering academic

institutions and leaders to create and amend policies that promote leader job satisfaction and address issues associated with recruitment, retention, and attrition. Furthermore, the results have the potential to promote positive social change given the role of academic nurse leaders in producing nursing graduates that have the skills and abilities necessary to provide safe, quality, and competent care within the healthcare system.

Chapter 2 provides a detailed description of the theoretical framework for this study, Herzberg's two-factor theory. In addition, Chapter 2 outlines an extensive literature review that examines the nature and existence of faculty incivility within nursing education, as well as the state of job satisfaction as it exists for nurse leaders serving in academia.

Chapter 2: Literature Review

Introduction

Leadership within nursing education is critical to the preparation of the next generation of nurses. National initiatives emphasize the role of leader across the nursing spectrum, including within academia, to optimize the position of nursing in meeting complex healthcare needs (IOM, 2010). Retention and development of today's academic nursing leader is thought to be a strategic step in promoting the advancement of higher education and health, yet recruitment and retention of academic deans, directors, and administrators is problematic. A particular challenge for this group of academic professionals is reduced job satisfaction (Adams, 2007; Flynn & Ironside, 2018; Mintz-Binder, 2014). One factor thought to have a negative impact on academic nurse administrator work experience is faculty incivility (LaSala et al., 2016); however, while incivility within nursing education has been well studied, the extent of faculty incivility toward academic nurse leaders and the relationship between faculty incivility and leader job satisfaction has not, representing a significant gap in the literature.

The purpose of this descriptive, correlation study was to determine if there is a relationship between faculty incivility and job satisfaction in academic nurse leaders at the associate degree level. The study tested the assumptions of Herzberg's two-factor theory that proposes a correlation between the interpersonal relationships one encounters on the job and job satisfaction (Herzberg et al., 1959/2010). This section includes a review of literary evidence as it relates to the current study, supporting the use of

Herzberg's theory as a theoretical framework, and focusing on primary concepts including faculty incivility and academic nurse leader job satisfaction.

Literary Search Strategy

My literature search strategy included an extensive inquiry into electronic databases for peer-reviewed articles, dissertations, and resources pertaining to the study variables and theoretical framework. I searched multiple databases in nursing, education, business and management, and psychology made available through the Walden University Library including ProQuest Nursing & Allied Health Source, ProQuest Health & Medical Collection, Ovid Nursing Journals, CINAHL plus, MEDLINE, PsycINFO, Business Source Complete, ScienceDirect, ERIC, PubMed, and SAGE Journals. Additional searches for relevant systematic reviews related to faculty incivility and academic nurse leader job satisfaction included the Cochrane Database of Systematic Reviews, JoAnna Briggs Institute EBP database, and the Annual Reviews database; no systematic or integrative reviews on these topics were located. I searched for relevant dissertation studies using two databases powered by ProQuest, Dissertation and Theses Global and Dissertation and Theses at Walden University.

Key words for the literature review included *Herzberg, two-factor theory, motivation-hygiene theory* or *model*, *incivility, faculty incivility, faculty-to-faculty incivility, faculty-to-administrator incivility, nursing education* or *academe* or *academia, job satisfaction, antecedents* and *outcomes, administrator, dean, director, leader*, and *chair*. Not surprisingly, I located only one article pertaining to faculty incivility toward academic nurse leaders written by LaSala et al. (2016) and very few pertaining to

academic nurse leader job satisfaction. I used Boolean operators to form combinations of keywords to enrich the search. The most common combinations included *incivility* and *nursing education*, *faculty incivility* and *nursing education* or *academe* or *academia*, *faculty-to-faculty incivility* and *nursing education*, *faculty incivility* and *administrator* or *dean* or *leader* or *director* or *chair*, and *job satisfaction* and *administrator* or *dean* or *director* or *leader* or *chair*.

With few exceptions, the scope of the literature review focused on peer-reviewed resources, including several dissertations published between 2013 and 2018. I carefully reviewed resources dated prior to 2013 to ensure the literature provided historical context and heightened understanding of the concepts under study. I used a literature review matrix to organize the resources and to provide a mechanism to search important research elements pertinent to each study. I excluded studies related to faculty incivility toward students and limited the search surrounding job satisfaction to the experience of leaders in nursing. Two books aided in the literature review. Clark's (2017) book, *Creating & Sustaining Civility in Nursing Education*, enhanced understanding of civility/incivility as it exists in nursing education. *The Motivation to Work* by Herzberg et al. (1959/2010) is considered a seminal piece in the area of job satisfaction research and provided a detailed description of the theoretical framework used to guide my study.

Theoretical Framework

Theoretical Propositions and Assumptions

The theoretical framework for my study was Herzberg's two-factor theory (Herzberg et al., 1959/2010), also called the motivator-hygiene theory (see Figure 1).

The theory, originally proposed in the 1950's, was an attempt to explain factors that affect employee attitudes toward their work and determine what kind of variables explain an employee's job satisfaction and dissatisfaction (Herzberg et al., 1959/2010). According to the theory, employees experience distinct events of a duration (Herzberg et al., 1959/2010). A short-range sequence of events pertains to instances in which exceptional feelings are tied to a "narrowly delimited" occurrence or set of events (Herzberg et al., 1959/2010, p. 23). A long-range sequence of events pertains to a persistent event that spans weeks to months to years. In either case, overall feelings and attitudes about a person's job are affected and can be classified as good or bad. Events that result in good feelings, termed high sequences, are thought to stem from factors different from those originating from bad feelings, or low sequences (Herzberg et al., 1959/2010). As a result, the theorists attempted to explicate these feelings within the model in terms of factors that can be examined through the lens of job satisfaction.

Herzberg et al. (1959/2010) defined factors according to situations and their applied meaning. First-level factors, defined as objective situations that produce good or bad feelings about a person's job, include a variety of work-related elements or influences such as recognition received from a supervisor, opportunities for advancement, company policies, working conditions, and job security (Herzberg et al., 1959/2010). Pertinent to this study is the first-level factor termed *interpersonal relations*. According to the theory, interpersonal relations refers to any relationship or interaction between two individuals: (a) employee and peer; (b) employee and subordinate; or (c) employee and superior, a concept most fitting to the relationship between faculty and administrator

(Herzberg et al., 1959/2010). Second-level factors describe a person's response to the event and range from feelings of recognition to feelings of inadequacy or guilt (Herzberg et al., 1959/2010). Second-level factors related to feelings of lack of belonging, isolation, unfairness, or lack of interest in job performances are perhaps most concerning when examining the concept of incivility (see Clark, 2017).

Herzberg furthered the theory by delineating factors according to those that relate to the job itself and those that relate to job context, each having a different influence on employee job satisfaction (Herzberg, 1968; Herzberg et al., 1959/2010). Factors associated with the actual job were thought to directly influence an employee's job satisfaction. The theorists termed these factors *motivators* or *satisfiers* which included achievement, recognition, the work itself, responsibility, and advancement (Herzberg et al., 1959/2010). When suitable to the employee, a variety of positive changes occur, including higher morale and a more affirmative job attitude, both contributing to greater job satisfaction (Herzberg et al., 1959/2010). Other factors, termed *hygiene* factors, contribute to a person's job dissatisfaction. Hygiene factors including company policies, administrative practices, physical working conditions, salary, and interpersonal relationships, define the employee's job context and when unsuitable, job dissatisfaction may occur (Herzberg et al., 1959/2010). While hygiene factors are not thought to directly increase a person's job satisfaction, Herzberg et al. (1959/2010) cautioned that if left unattended, job attitude, therefore job satisfaction, is reduced.

Figure 1. Model of Herzberg's two-factor theory of job satisfaction demonstrating the correlation between motivation and hygiene factors to job satisfaction and dissatisfaction based on writings from Herzberg (1968) and Herzberg et al. (1959/2010).

The two-factor theory (Herzberg et al., 1959/2010) provided useful information my study because it purports a direct relationship between interpersonal relationships and job dissatisfaction. The theory provided a solid framework upon which to explore the relationship between faculty incivility, a relationship-based concept, and academic nurse leader job satisfaction. When applying Herzberg's theory, academic nurse leaders are likely to experience a change in job satisfaction when the target of faculty incivility. The theory provided a strong foundation upon which to hypothesize an interaction between variables, faculty incivility and leader job satisfaction, and around which to design a correlational study.

Herzberg and his team originally founded the theory on qualitative research exploring the motivation and job satisfaction of 203 professionals working in industry, namely engineers and accountants in managerial and professional positions (Herzberg et al., 1959/2010). The theory was later expanded through 12 additional studies to include professionals from other disciplines, including nursing (Herzberg, 1968). In each instance, researchers were careful to consider distribution of factors or effects across demographic groups and concluded, "The general lack of individual differences in the occurrence of factors and effects argues the applicability of our findings beyond the immediate bounds of the small sample with which we worked" (Herzberg et al., 1959/2010, p. 102). While the research team noted differences in how positive (high) motivating factors were perceived, the perception of negative (low) motivating and hygiene factors was similar (Herzberg et al., 1959/2010). Furthermore, characteristics of interpersonal relationships were equally perceived across groups which led the team to conclude, "Apparently, anyone in almost any situation can run into trouble with his relationships with other people…and thus develop a period of low morale" (Herzberg et al., 1959/2010, p. 98). In summary, the research team's methodology strengthened generalizability of the theory to other research and provided a framework upon which to generate research questions that explore incivility issues, a relationship-based concept, and job satisfaction.

Application in Other Research

Use of Herzberg's theory as a framework for exploring job satisfaction within nursing education is notable. According to a recent systematic review by Arian,

Soleimani, and Oghazian (2018), Herzberg's theory is mentioned as the most applicable theory for studying faculty job satisfaction in the nursing literature. However, I did not locate any studies using Herzberg's theory as a framework specific to academic nurse leader job satisfaction, an expected result given the lack of research in this area. Consequently, I used the research related to nursing faculty to position the usefulness of the theory within studies situated in nursing academe.

Several recent studies supported Herzberg's theory as a framework for my study. Shockness (2015) conducted a qualitative dissertation study to examine work-related factors impacting nurse educators through the two-factor lens and identified motivating and hygiene factors consistent with those outlined in the model. Derby-Davis (2014) identified several motivator and hygiene factors affecting associate degree clinical adjunct intent-to-stay in academia. Using Herzberg's framework, Woodworth (2016a, 2016b) concluded that statistically significant relationships exist between intent-to-stay scores and motivator ($F[6, 45] = 5.34$, $R^2 = .34$, R^2 Adjusted = .42, $p < .01$), hygiene ($F[6, 45] = 3.71$, $R^2 = .33$, R^2 Adjusted = .24, $p < .01$), and motivator-hygiene factors in combination ($F[7, 44] = 4.88$, $R^2 = .44$, R^2 Adjusted = .35, $p < .01$). Furthermore, Woodworth's work ascertained a relationship between job satisfaction and intent to stay ($F[1,50] = 20.34$, $R^2 = .29$, R^2 Adjusted = .28, $p < .01$). The statistically significant relationships between intent-to-stay and hygiene factors identified in these two studies validate the underpinnings of Herzberg's theory and were useful in further explaining the importance of interpersonal relationships, such as between faculty and administration, and job satisfaction within an academic environment.

I examined additional research exploring the work experience of nurse educators through Herzberg's two-factor lens and found supplementary evidence of theoretical validity. Studies by Berent and Anderko (2011) and Westphal, Marnocha, and Chapin (2016) uncovered concepts attributable to interpersonal relationship as factors impacting faculty work experience. Westphal et al. used descriptive methodology to survey 32 nurse educators from a program in the Midwest offering undergraduate and graduate curricula and identified several satisfier and dissatisfier factors. Most relevant to my study was the importance of feeling safe which was found to be highly valued by full-time faculty and an element to their job satisfaction. While this concept was not expressed specifically in terms of interpersonal relationships, the relationship between two individuals could result in concerns for personal safety (Clark, 2013; Clark, 2017; Clark et al., 2013; Condon, 2015; Etienne, 2014). Herzberg's theory attributes this factor to the potentiality of undesirable effects, resulting in job dissatisfaction (Herzberg et al., 1959/2010). Using a descriptive, exploratory design and factor analysis, Berent and Anderko concluded that the sense of community experienced within the academic work environment and with other nursing faculty were key factors in determining professional satisfaction with a faculty member's identity ($M = 4.5$, $SD = 0.7$). In this instance, themes of community and belonging are attributable to Herzberg's concept of interpersonal relationships, furthering the utility of the theory as a model to explore job satisfaction.

Rationale for Use

The assumptions of this theory surpassed those of other job satisfaction theories. For example, Mintz-Binder (2014) used Locke's range of affect theory as a framework to conduct a nationwide study related to the job satisfaction of associate degree nursing program directors. Locke (1968) purported that overall job satisfaction is "the sum of the evaluations of the discriminable elements of which the jobs is composed" (p. 27). Refuting the tenets of Herzberg's two-factor theory, Locke argued that job satisfaction is composed of value achievements, needs, emotions, and unique experiences that differ from person to person and represents a "function of satisfaction with the separate elements" (Locke, 1968, p. 30). This theory allowed Mintz-Binder to postulate a list of job-related concepts upon which to focus in her study; however, failed to directly acknowledge interpersonal relationships as a factor in job satisfaction.

Clark referred to Heinrich's concept of joy stealing as a framework for studying uncivil interpersonal relationships between faculty members (Clark, 2013; Clark et al., 2013). According to Heinrich (2007, 2010), joy stealing occurs when the relationships between colleagues, including between faculty and administrators, become disconnected, resulting in hurtful behavior such as shaming, braking professional boundaries, betrayal, and lying. As a result, victims are left with a loss of "zest, clarity, productivity, feelings of work, and desire for more connection" (Heinrich, 2007, p. 38), concepts attributable to the concept of job satisfaction. Academicians that avoid joy stealing behaviors are thought to have the power to transform nursing education into more positive teaching-learning environments and workplaces (Heinrich, 2010). While Heinrich's model speaks

to the importance of preserving interpersonal relationships, it was not intended to speak directly to factors influencing job satisfaction as a general concept. Indirect conclusions and assumptions are necessary to delineate clearly the connection between the variables proposed in my study.

Advancing the Research Question using Herzberg's Theory

Herzberg's two-factor theory (Herzberg et al., 1959/2010) informed my research process by providing a framework that specifically correlates the relationship of interpersonal relationships within the work environment to job dissatisfaction. Incivility, a relationship-based concept, aligned with the hygiene factor of interpersonal relations. The research question focused specifically on the relationship of faculty incivility as a factor of job satisfaction in a population of academic nurse educators. Results of the study were intended, therefore, to build upon the existing two-factor theory, furthering the understanding of this type of interpersonal relationship as a hygiene variable to job satisfaction.

Literature Review Related to Key Variables and/or Concepts

Incivility Defined

Incivility has been defined a variety of different ways in the literature. Yet, at the foundation are similarities that cross disciplines. From a layman's perspective, incivility is often simply equated with rude or demeaning behavior ("Incivility," n.d.). In the disciplines of organizational behavior and management, the definition is extended to include "low intensity deviant workplace behavior" with an indistinct intent to cause harm (Schilpzand, De Pater, & Erez, 2016, p. S57). Similarly, in the business world,

researchers have referred to incivility as rude, belittling, and insulting behaviors that affect a variety of individuals within the workplace, and in some cases, entire work units (Porath & Pearson, 2013). While many of the tenets mentioned previously pervade the understanding of incivility as it exists within educational environments, nursing researchers have advanced the definition to more adequately reflect the unique processes and atmosphere associated with nursing academe.

Peters advanced a definition of incivility that implies deliberate and discourteous action toward another that harms a victim's self-esteem and confidence (Peters 2014, 2015). Through her work, Peters likened incivility to other concepts found in the literature, such as bullying, harassment, lateral violence, and horizontal violence, terms often used interchangeably when describing uncivil-like behaviors. Likewise, Peters' definition of incivility complements the work of Clark who has spent considerable time and effort studying incivility from a nursing education perspective.

Clark's (2017) definition of incivility has evolved over time; however, constitutes a reputed explanation that is frequently cited in scholarly literature. Clark defined incivility as "rude or disruptive behaviors often resulting in psychological or physiological distress for target faculty, which, if left unaddressed, may progress into threatening situations" (Clark, Farnsworth, & Landrum, 2009, p. 7). Ongoing research prompted Clark to amend and expand her definition a few years later. The concept of psychological and physiological distress was extended not only to targets, but to offenders, peers, bystanders, stakeholders, and organizational units (Clark, 2013). Furthermore, "threatening situations" evolved to include consequences of greater

significance such as temporary or permanent injury or illness (Clark, 2013, p. 98). Over the years, qualitative and quantitative research alike molded Clark's definition of incivility to include a spectrum of intentional and unintentional behaviors ranging from rude and disruptive comportments to failing to act when action is indicated (Clark, 2017; Clark & Kenski, 2017; Clark & Ritter, 2018). Incivility in nursing education is contrary to civil behaviors otherwise associated with authentic respect for others, engagement, presence, and an intention to find mutual understanding, and is grounded in an academic environment that represents "anywhere teaching and learning occur" (Clark, 2017, p. 11). In the end, Clark (2017) put forth the following definition of incivility:

> A range of rude or disruptive behaviors or failing to take action when action is warranted; these behaviors and inactions may result in psychological or physiological distress for the people involved – and if left unaddressed, may progress into threatening situation (or result in temporary or permanent illness or injury) (p. 14).

Clark's definition adequately informed this study and is implied when discussing faculty incivility within nursing education. The behaviors and actions (or lack thereof) alluded to in the definition represent the behavior and actions of nursing faculty at the associate level when engaging in uncivil conduct.

Faculty Incivility

According to the *Civility in America 2018* report (Weber Shandwick, Powell Tate, & KRC Research, 2018), 69% of Americans report incivility is a major problem in today's society. Contrary to this general civility report that suggests incivility is less of a

problem in the workplace (Weber Shandwick et al., 2018), nursing research suggests incivility is entrenched in nursing education to a larger degree. Despite initiatives to curtail uncivil behaviors within the discipline, incivility continues to be problematic, affecting many across the nursing continuum (Lynette et al., 2016).

As "a microcosm of the greater American society" (Clark, 2017, p. 35), incivility manifests itself in many forms. Researchers have recognized several types of incivility in their narratives, including student-to-faculty, student-to-student, faculty-to-student, faculty-to-faculty, and administrator-to-faculty behaviors (Clark, 2017; Lynette et al., 2016; Rawlins, 2017). Nevertheless, faculty-to-administrator incivility is rarely mentioned. Recent research by LaSala et al. (2016) places faculty-to-administrator incivility at the center of the leader experience; however, this phenomenon had yet to be quantified or thoroughly examined from the leader perspective.

Nursing faculty are expected to exhibit a greater amount of professionalism, collegiality, deference, and support when working alongside other academic colleagues and when engaging in uncivil behaviors, they fail to meet their responsibilities as academicians and professionals (Muliira et al., 2017; Peters, 2015). Under this line of thinking, understanding how faculty treat one another may enlighten how faculty treat colleagues of authority.

Incidence. The concept of faculty incivility has been well quantified within the literature. Early research by Clark and Springer (2010) determined that of 126 academic nurse leaders attending a statewide nursing conference, 80% (n = 120) had witnessed uncivil faculty behaviors toward faculty and/or administrators. Later research by Clark et

al. (2013) revealed similar findings that the majority of nursing faculty across 40 states (67.5%, *n* = 588) perceived faculty-to-faculty incivility to be a problem. More specifically, 37% of respondents viewed faculty-to-faculty incivility to be a moderate problem, while 30% indicated it was more serious.

Eka, Chambers, and Narayanasamy (2016) also established incivility as problematic within nursing education as 100% of nursing faculty at a private institution (*n* = 6) and approximately 84% of faculty at a public institution (*n* = 19) in Indonesia perceived incivility to be a moderate to serious problem within nursing education. However, further examination of the data indicated that faculty respondents felt students and faculty were equally responsible for incidences of incivility in the classroom and skill laboratory settings. Fifty percent of faculty (*n* = 3) in a private institution and almost 37% in a public institution (*n* = 7) responded that students and faculty were equally likely to engage in uncivil behavior in the classroom. Likewise, approximately 67% of faculty in the private institution (*n* = 4) and 35% in the private institution (*n* = 7) responded that students and faculty were likely to engage in uncivility behavior in the skills laboratory. In each instance, the percentage of respondents of the opinion that students and faculty were "about equal" in likelihood to be uncivil was greater than any other category (Eka et al., 2016, p. 105). Given these findings, the research team concluded that not all instances and perceptions of incivility can be attributed solely to faculty behavior and may not be as big of an issue as reported in other studies. It is noteworthy that the sample size for Eka et al.'s study was small, therefore, generalizability to other populations should be made with caution.

Muliira et al. (2017) also examined nursing faculty incivility, exploring the perceptions and extent of faculty incivility within a nursing program in a country in the Middle East. The research team surveyed 40 nursing faculty from a bachelor of science (BSN) program in Oman, asking how often they had experienced or witnessed uncivil faculty behaviors in the past 12 months. A mean score of 2 and above for each behavior was considered to be significant for faculty incivility. The highest mean score for any specific uncivil faculty behavior was 1.8 (arriving late for scheduled activities) and the average mean score for all behaviors was below 2 (M = 1.5). The research team concluded, therefore, that the incidence of faculty incivility was low (Muliira et al., 2017). Like Eka et al. (2016), these findings are in contrast to other studies previously mentioned that suggest faculty incivility is a significant problem within nursing education.

The final study of interest is more in line with the earlier work of Clark and her associates. In an effort to explore the relationship between faculty incivility and resonant leadership, Casale (2017) measured perceptions of faculty incivility, termed horizontal incivility, in a sample of 139 nurse educators from 17 universities in the United States offering diploma, associate, bachelor, and graduate level nursing education. Like Clark (2013) and Clark et al. (2013), Casale determined that the majority of faculty (53.6%) perceived faculty incivility to be a moderate (31.9%) to serious (21.7%) problem. Only 12 respondents (8.7%) did not consider faculty incivility to be problematic within the work environment. These studies further the argument that faculty incivility is a serious problem within nursing education, yet are in contrast with national statistics that suggest

only 8% of American workers consider their place of employment to be very or somewhat uncivil (Weber Shandwick, et al., 2018). Given the discrepancy in findings within the literature, the utility of a study that further examines and quantifies this important phenomenon is evident. However, understanding extends beyond quantifying a phenomenon. Further review of the literature is necessary to better understand what faculty incivility is, from where it originates, who it affects, and in what ways.

Behaviors. Incivility represents a wide range of behaviors and actions. According to Clark (2017), uncivil behaviors fall within a continuum that extends from lower level (disruptive) behaviors to higher level (threatening) behaviors, as depicted in Figure 2. What constitutes uncivil behavior between nursing academicians is unique to each individual (Clark, 2017), yet researchers have provided some insight into common themes.

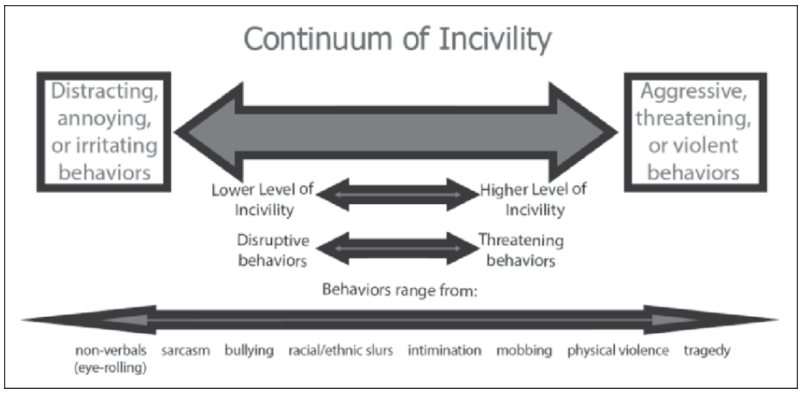

Figure 2. Continuum of incivility model by C. Clark, 2017, *Creating and sustaining civility in nursing education* (2nd ed.), Indianapolis, IN: Sigma Theta Tau International, p. 15. Copyright 2017 by Sigma Theta Tau International. Reprinted with permission.

Using a mixed-method design, Clark (2013) and Clark et al. (2013) explored faculty-to-faculty incivility as perceived by a large sample of nursing faculty from across 40 states (N = 588). Several major themes of uncivil faculty-to-faculty encounters were identified and categorized according to the following behaviors:

- berating, insulting, and allowing – verbal and nonverbal;
- setting up, undermining, and sabotaging;
- power playing, derailing, and disgracing;
- refusing, not doing, and justifying;
- blaming and accusing;
- taking credit (ripping off) the work of others; and
- distracting and disrupting meetings (Clark, 2013, p. 99).

The qualitative portion of the study (Clark, 2013) explicated specific faculty behaviors under each major theme. Uncivil behaviors, such as making rude and demeaning remarks or gestures, screaming, door slamming, misrepresenting the truth, ganging up on others, shunning, falsely accusing someone of wrongdoing, stealing intellectual property, and intentionally using media devices to distract or disrupt others during meetings, represented a few examples of inappropriate faculty behavior. In addition, Clark identified *allowing* behavior as a component of uncivil behavior. Allowing behavior results when faculty members knowingly ignore, tolerate, and allow uncivil behavior to occur. Failing to intervene when an uncivil encounter occurs is the equivalent to other uncivil acts along the continuum and often results in similar negative outcomes (Clark, 2013, 2017). Themes of the study (Clark, 2013) revealed that resisting change (n = 411,

70% of respondents), intentionally failing to perform job responsibilities (*n* = 394, 67%), distracting others during meetings through the use of media (*n* = 376, 64%), refusing to listen and communicate openly (*n* = 370, 63%), and making rude remarks (*n* = 370, 63%) occurred most often. The median years in teaching for respondents in both studies was 10 years, while 95% of the respondents were women from the United States, limiting the generalizability of the study.

Looking to the encounters of novice nursing faculty, Peters (2014) used qualitative methodology to describe the lived experiences of eight full-time nursing faculty members with less than five years of experience from a Mid-Atlantic college. From this demographic, Peters identified several themes of uncivil faculty behavior, including rejecting, intimidation tactics, belittling, ignoring colleagues, and dismissing ideas. Participants also described a variety of unprofessional behaviors equated to acts of incivility, such as acting in a juvenile or "catty" manner (Peters, 2014, p. 223). Muliira et al. (2017) explored perceptions of and extent of nursing faculty academic incivility in an undergraduate nursing program in the Middle East and, although the team determined the incidence of faculty incivility to be low, multiple behaviors were considered disruptive and uncivil when displayed. The faculty (*N* = 40) surveyed found general taunts or disrespect toward other faculty (*n* = 16, 43.2%) and challenging faculty credibility or knowledge (*n* = 11, 28.9%) most problematic. Ziefle (2018) examined generational differences between 71 associate degree nursing faculty representing Baby Boomers (*n* = 50) and Generation X (*n* = 21). Both groups admitted to having experienced disruptive faculty behavior, such as being inflexible or attempting to exert

power over others, a finding consistent with the other researchers. However, there were no statistically significant differences between groups in the amount of faculty-to-faculty incivility experienced.

Using descriptive analysis, Casale (2017) explored the frequency of interfaculty incivility among nursing faculty from 17 universities (*N*=260) and identified five uncivil behaviors experienced most frequently. Results showed that engagement in secret meetings, resisting or creating friction, failing to perform workloads, demonstrating an attitude of entitlement, and being inattentive during meetings were problematic (Casale, 2017, p. 179). Three of these behaviors are consistent with the top uncivil behaviors noted by Clark et al. (2013), including resisting change, failing to perform, and being inattentive during meetings. Similarities are noted among themes of uncivil faculty behavior and enhance understanding of how faculty incivility is displayed.

Perhaps the most compelling evidence of faculty incivility relevant to this study are the research findings of LaSala et al. (2016). LaSala et al.'s research is unique in that it examined experiences of faculty incivility from the academic nurse administrator perspective. In an earlier phenomenological study, Clark and Springer (2010) examined academic nurse leaders' perceptions of uncivil behaviors displayed by faculty in general and identified two subcategories of uncivil behavior, rude and disruptive behaviors such as bullying and hazing, and avoidant, isolating, and exclusionary behavior. However, Clark and Springer's work but did not examine faculty-to-administrator incivility directly. Using similar methodology, the purpose of LaSala et al.'s study was to illuminate the experiences of academic nurse leaders who encountered nursing faculty

incivility directly. After interviewing 14 academic nurse administrators from nationally accredited nursing programs representing all regions of the United States, the team isolated 7 faculty behaviors commonly experienced by academic administrators. Under the suppositions of Clark's conceptual model for fostering civility in nursing education (E. Sprunk, personal communication, June 23, 2017), rude and disrespectful behavior, threatening and intimidation, making false accusations and allegations, ganging or mob behaviors, intentional sabotage, manipulation, and passive-aggressive behaviors were identified (LaSala et al., 2016, p. 121). Although the sample was small, each theme closely replicates those identified by other researchers, acknowledging and furthering a general understanding of what constitutes uncivil faculty behaviors, and more importantly, providing a platform upon which to focus further research.

Bullying or other related concepts. The concepts of incivility, bullying, and horizontal violence are often thought of as interchangeable terms within nursing literature and their differences are difficult to discern. Lachman (2015) labeled these concepts collectively under the one heading, *disruptive behaviors*, pointing out subtle distinctions that center on intention, frequency, and intensity.

Vagharseyyedin (2015) conducted a concept analysis and identified a notable difference between incivility and bullying. Incivility refers to low intensity behaviors with ambiguous intent to harm. Conversely, bullying involves a power imbalance between victim and perpetrator manifested by systematic, repetitive, and clear attempts to harm. While studying social bullying, defined as a behavioral and experiential phenomenon that involves a variety of inappropriate behaviors such as intimidation,

abuse of power, insults, and persistent criticism, Goldberg et al. (2013) and Wieland and Beitz (2015) acknowledged that while uncivil behaviors and bullying share similar traits, incivility lacks the concept of persistence and is not invoked according to the power differential germane to social bullying. While these research teams emphasized differences between incivility, bullying, and horizontal violence, much of the research refers to them as like concepts.

Incivility, bullying, horizontal violence, and other related terms are often referred to as synonymous terms. Aul (2017), Clark (2013, 2017), Clark et al., (2013), Clark and Ritter (2018), Condon (2015), LaSala et al. (2016), Matt (2012), and Peters (2014) mentioned incivility and bullying as similar concepts and appeared to have treated them as such within their studies. Hunt and Marini (2012) posited that linking incivility and bullying conceptually promotes greater understanding of the dynamics of the practice environment, given the concepts share similar underpinnings. Furthermore, while the American Nurses Association (ANA, 2015b) defined incivility and bullying separately in their 2015 position statement, the authors considered the concepts collectively when making recommendations for preventive actions. It is notable that recommendations put forward by the ANA (2015b) for preventing workplace violence, as opposed to incivility and/or bullying, were handled separately as the threshold for violence tends to be much higher and punishable by law. For the purpose of this study, I used the term *incivility* to reflect the range of behaviors prepositioned in Clark's (2017) definition outlined previously, knowing that some of the behaviors otherwise equated to bullying and horizontal violence may be similar.

Antecedents. Research scientists suggest there are a variety of factors that contribute to incivility in the workplace. Nationally, civil work environments are equated with effective leadership, feeling safe to report concerns, managerial trust, and avoidance of difficult topics of conversations, such as politics and race relations (Weber Shandwick, et al., 2018). Nursing scientist, however, have isolated specific antecedents to faculty incivility which are discussed here.

How one behaves towards a coworker is influenced by many variables. Antecedents to workplace incivility can be categorized into two distinct factors, individual and organizational (Vagharseyyedin, 2015). Following an extensive Walker and Avant concept analysis of literature pertaining to workplace incivility, Vagharseyyedin concluded that personal characteristics, such as an individual's degree of narcissism, neuroticism (marked by anxiety, nerves, and insecurity), and anger, contribute to the likelihood of engaging in uncivil behavior or, conversely, becoming a victim. In similar fashion, Phillips, MacKusick, and Whichello (2018) concluded that a person's spiritual make-up and the ethical lens through which work is approached were also responsible for explaining an employee's behavior. Moreover, organizational factors that contribute to empowerment, distributive justice, and perceived fairness are also to blame (Vagharseyyedin, 2015). In general, underlying every act or behavior is an explanation, often times associated with work, home, or life-related stress (Clark, 2017).

According to nursing education literature, stress is a major factor preceding faculty incivility. Clark (2017) described stress as a "crippling and contributing factor" (p. 37) to bad behavior and uncivil acts. According to Clark's conceptual model for

fostering civility in nursing education (Clark, 2017; Clark, Olender, Cardoni, & Kenski, 2011), when stress is (a) coupled with contributing factors, such as demanding workloads, a sense of faculty superiority, information/technology overloads, competing work obligations, and demanding workloads, (b) is met head-on by a student or colleague managing their own stress issues, and (c) is not remedied in a timely manner, civil behavior spirals out of control, catching both parties in a "dance of incivility" (Clark, 2017, p. 51) that perpetuates itself (see Figure 3). Within the model, antecedents to faculty incivility are labeled *contributors to stress* and are unique to each individual. For example, Clark et al. (2012) studied faculty incivility within nursing education in the People's Republic of China and determined that faculty stress is related to moodiness and dissatisfaction with the faculty role. Moreover, a large-scale national survey of 588 nursing faculty revealed the top five factors contributing to faculty-to-faculty incivility, including stress, demanding workloads, role ambiguity and power imbalances, volatile and stressful organizational conditions, faculty superiority, and the juggling of multiple roles (Clark et al., 2013). While the researchers labeled the categories of stress differently between the two studies, the conceptual assumption that stress, in whatever shape or circumstance it is experienced, may contribute to the development of incivility is consistent.

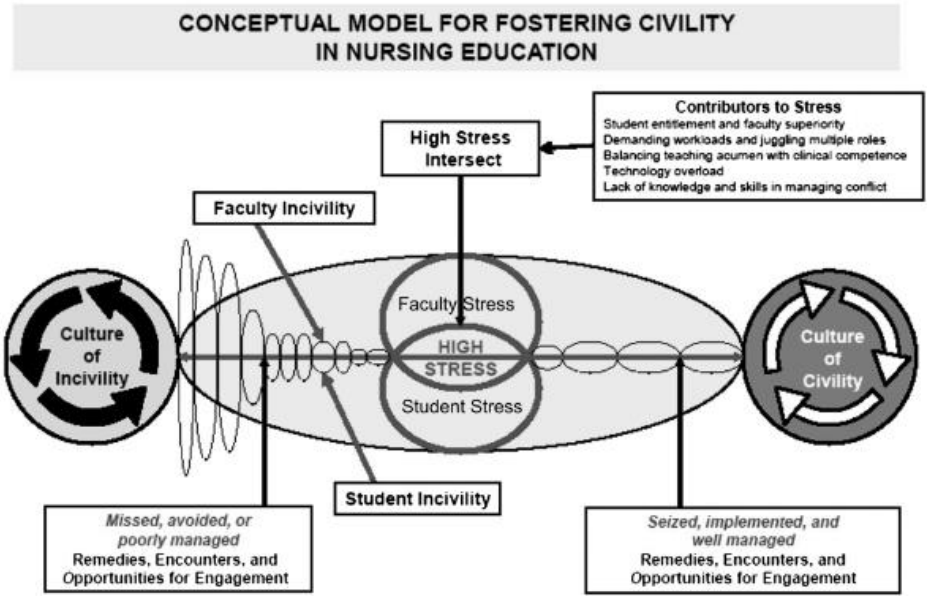

Figure 3. Depiction of Clark's conceptual model for fostering civility in nursing education delineating stress as an antecedent to faculty incivility by C. M. Clark, 2017, *Creating and sustaining civility in nursing education* (2nd ed.), Indianapolis, IN: Sigma Theta Tau International, p. 15. Copyright 2017 by Sigma Theta Tau International. Reprinted with permission.

Other nursing researchers have made similar conclusions regarding antecedents to faculty incivility. Using Walker and Avant's methodology, Peters (2015) isolated an extensive list of antecedents to faculty incivility including the following: workload/time management issues, stress, difficult working conditions, power issues, a need for verbal release or to obtain something of value, and workplace informality (p. 159). Cultural and generational issues contribute to instances of faculty-to-faculty incivility (Peters, 2015), as well as the strength and type of leadership style by supervisors. For example, Casale (2017) found that resonant leadership built on concepts of reciprocation, emotional

intelligence, and mentorship was found to mitigate the frequency of faculty-to-faculty incivility in a university setting (r = -.560, p < .01).

In summary, antecedents to faculty incivility are numerous but represent a collection of behaviors and conditions well founded within nursing education. Having a solid intellect of what constitutes uncivil faculty behavior and how it is exacerbated lays the foundation for greater understanding of what can be expected as a result.

Consequences. Faculty incivility affects individuals personally and professionally. At a minimum, engagement in uncivil behavior violates ethical and professional codes and standards that guide nursing practice and may place the perpetrator at risk for legal prosecution (Matt, 2012). Faculty behavior and nursing education as a discipline are equated with ethical and professional principles mandating respect and civility and violations may be equated to intrafaculty abuse and exploitation (Fowler & Davis, 2013). In these instances, professionals turn to national standards and guidelines for direction when a better understanding of what is expected is necessary.

A variety of codes and standards guide nursing practice, including nursing practice within academia. Nursing educators are held to high ethical and professional standards under the opinion that educators have a unique responsibility to create a teaching-learning environment that models how professional nurses should value and behave in practice (Halstead, 2012). Essential elements from the International Council of Nurses (ICN, 2012) *Code of Ethics for Nurses* emphasized professional values such as respectfulness, compassion, trust, collaboration, and the promotion of ethical behavior (pp. 2-4). Similarly, the ANA's (2015a) *Codes of Ethics for Nurses with Interpretive*

Statements called on nurses to maintain professional relationships and treat each other with respect and caring in order to create an ethical work environment founded in a culture of civility and dignity. Nursing academia is not exempt from comparable expectations. For instance, nursing educators are charged with integrating into their curricula principles that promote professional confidence, maturity, and nursing practice that values the ethical concepts of altruism, human dignity, and integrity (AACN, 2008). The National League for Nursing (NLN, 2012) specifically called on nursing educators to base their practice on the core values of caring, integrity, diversity, and excellence. Caring actions foster positive learning environments that embrace various points of view and curiosity. The concepts of integrity and diversity involve treating others fairly and with respect in a positive, courteous manner regardless of their background, beliefs, or experiences. Excellence in nursing education practice involves the promotion of a healthy work environment that embraces collegiality and support for professional growth. Implementing strategies aimed at promoting civility and inclusivity within the workplace creates a learning environment that allows faculty and staff to thrive and provides students the opportunity to develop the skills necessary to be impactful clinicians upon graduation (NLN, 2018). According to Clark (2017), a person's moral and ethical make-up is often measured by how well one abides by ethical codes and standards of practice. When lacking, incivility thrives resulting in consequences that can be disturbing and wide-spread (Clark, 2017).

In addition to consequences associated with professional standard violations, perpetrators may also be at risk for legal persecution. Recalling that incivility is often

associated with bullying, common law generally fails to adequately address this type of inappropriate behavior in the workplace (Clark & Ritter, 2018; Matt, 2012). Egregious and inappropriate behavior to the level of harassment or protected-class discrimination exposes the perpetrator to penalties under civil and criminal statutes, including penalties for harassment and defamation (Matt, 2012). Workplace initiatives at the federal level, such as the Occupational Safety and Health Act of 1970, mandate employers to provide a place of employment free from hazards that cause harm (Matt, 2012). The perpetrator(s) and employer alike are at risk for penalties when creating or failing to provide a safe work environment.

Personal consequences for victims of incivility are plentiful and affect psychological, emotional, and physical well-being. Several researchers have documented psychological distress as a consequence to incivility, including depression, anger, anxiety, avoidance behaviors, nightmares, and to the extreme, post-traumatic stress disorder (Clark, 2017; LaSala et al., 2016; Peters, 2014; Peters, 2015; Vagharseyyedin, 2015). Physical symptoms, such as chest pain, cardiac problems, insomnia, lack of energy, weight loss, and nausea, have also been documented outcomes (Clark, 2017; LaSala et al., 2016; Peters, 2015). How a victim responds to instances of uncivil behavior is unique and is exhibited in a myriad of ways. Yet, psychological and physical health are not the only things that suffer as a result of faculty incivility. Professional and organizational health suffer as well.

Organizations endure considerable losses and costs when dealing with incivility. The ANA (2015b) summarized that the cost of incivility, bullying, and workplace

violence within the work environment is costly to the organization in terms of decreased productivity and employee retention. Resources needed to supervise the uncivil employee, manage the situation, investigate instances of inappropriate behavior, respond to potential litigation, and recruit and train new employees cost organizations thousands of dollars annually (ANA, 2015b, p. 5). This summary is consistent with what was reported by Porath and Pearson (2013) who acknowledged that incivility can be wide-spread within an organization and infect entire departments. The research team polled 800 managers and employees from 17 different industries on their reactions to incivility and determined that consequences including decreased work effort (n = 48%), deduced commitment to the organization (n = 80%), and lost work time due to worrying about the uncivil incident (n = 80%) were common and expensive for organizations to address. Likewise, in a survey exploring bullying in the workplace, the Workplace Bullying Institute [WBI] (2017) documented significant retention and attrition issues. According to the survey, 54% of targets were driven to quit, transferred, forced out, or fired due to bullying in the workplace, equating to significant costs and expenses for employers.

Studies examining costs of incivility within nursing and nursing education are consistent. Incivility harms the work environment. Conceptual analyses by Peters (2015) and Vagharseyyedin (2015) demarcated common themes such as absenteeism, reduced organizational commitment, and turnover, all affecting organizational effectiveness. LaSala et al. (2016) came to a similar conclusion when the team surveyed current and former academic nurse administrators (N = 14) and determined that many of their respondents questioned their desire to remain in academic nursing administration. Eight

of their respondents were no longer in the administrator role and several had left nursing education altogether, citing issues with faculty incivility as an underlying cause. This study is significant because it represents the only research that specifically examined faculty incivility toward academic nurse leaders. LaSala et al.'s findings advance the conclusion that faculty incivility is a significant issue for academic leaders that has serious consequences for this population of professionals. Furthermore, incivility upsets organizational hierarchy and culture (Peters & King, 2017) creating a caustic environment that is unpleasant and professionally detrimental (Clark, 2017).

From an individual perspective, the literature is laden with evidence that incivility negatively affects a person's professional well-being. According to Porath and Pearson (2013), individual creativity, performance, and "team spirit" deteriorate (p. 117). In addition, burnout, reduced job satisfaction, low motivation, concerns over reputation, impaired professional relationships, and feelings of alienation and distrust are potential (LaSala, et al., 2016; Peters, 2015, Vagharseyyedin, 2015). Using a Heideggerian hermeneutical approach, Peters (2014) extracted that novice nursing faculty ($N = 8$) often struggle with feelings of being overwhelmed in the workplace, commonly engaging in avoidance behavior as a strategy to cope with uncivil behaviors. In the end, the faculty member's professional life is negatively affected which, in turn, negatively affects the organization as a whole (Peters, 2014).

In summary, a review of the literature revealed that incivility in any form within academia has detrimental effects. According to Clark (2017), "The costs and associated consequences of incivility are vast and troubling. And the toll it takes on individuals,

teams, and organizations can be disturbing" (p. 33). Professional and legal standards prohibit uncivil behavior and nursing faculty are not exempt from these expectations. While research delineates the incidence, antecedents, and consequences of faculty incivility, I did not find any studies that support or promote behaviors categorized as uncivil according to the definition put forward in this section. With the knowledge that faculty incivility has serious detrimental consequences at both the individual and organizational level, an opportunity emerges for future research. What remained to be studied was the prevalence and effect of faculty incivility on a population of academic nurse administrators, particularly on how this unfortunate variable influenced leader job satisfaction.

Job Satisfaction

The definition of job satisfaction was drawn from Herzberg et al.'s (1959/2010) two-factor theory. According to the theory, job satisfaction and dissatisfaction originate from a multitude of intrinsic and extrinsic work factors, uniquely experienced by each employee. Motivating factors, such as achievement, recognition, responsibility, opportunities for advancement, and the work itself, contribute to *job content* and are the primary causes of job satisfaction that motivate employees in their work (Herzberg, 1968; Herzberg et al., 1959/2010). To the contrary, job dissatisfaction is thought to stem from hygiene factors, such as company and administrative policies, supervision, working conditions, job status and salary, security, and interpersonal relationships that influence *job environment* and have the potential to decrease unhappiness in an employee's work. It is noteworthy that Herzberg did not put forward a formal definition of job satisfaction.

Instead, he wrote about the concept as a "composite of the factors" unique to job content and environment that influence the attitudes taken toward an employee's work (Herzberg, 1968, p. 56).

Locke's (1968) description of job satisfaction is similar to the two-factor theory (see Herzberg et al., 1959/2010) in that Locke also recognized the interaction between an individual and the environment as a determinant of job satisfaction. Locke posited that job satisfaction is a culmination of a person's perceptions and values resulting in emotional reactions such as preference and satisfaction, and defined job satisfaction as the "sum of the evaluations of the discriminable elements of which the jobs is composed" (p. 27). However, contrary to Herzberg's theory, Locke argued that work-related factors cannot be neatly isolated into categories associated solely with job satisfaction or dissatisfaction. Instead, modifying factors can be bidirectional (both satisfying and dissatisfying) and are firmly rooted in an employee's values and the degree of fulfillment obtained by the employee.

Other definitions have been used by researchers when studying job satisfaction in academia. For example, when studying preparation and job satisfaction of college and university presidents, Travis and Price (2013) utilized Evans' (1998) definition of job satisfaction that pertained to a "person's attitude toward his or her workplace" (Evans, 1998, p. 4). Jung and Shin (2015) studied administrative staff member job satisfaction in a Korean research university and described job satisfaction according to the definition put forth by Kalleberg (1977) which read, "Job satisfaction refers to an overall affective orientation on the part of individuals toward work roles which they are presently

occupying" (Kalleberg, 1977, p. 126). In each of these instances, references to affect and attitude underpin job satisfaction, connecting this concept to a person's unique job experience.

A review of the literature suggests there are concepts similar to job satisfaction that depict a person's work experience. Concepts such as *thriving* and *joy* share similar antecedents and outcomes as job satisfaction; however, represent specific elements of the work experience. For instance, Liu and Bern-Klug (2013) used Spreitzer's model to describe thriving as a "subjective experience and a psychological state" influenced by a person's social surroundings (p. 129). In this interpretation, thriving encompasses and surpasses satisfaction because of embedded elements of vitality and learning not typically germane to satisfaction. According to the Institute of Healthcare Improvement's white paper entitled *IHI Framework for Improving Joy in Work* (Perlo et al., 2017), joy also surpasses job satisfaction and influences employee engagement, as well as organizational performance. Yet, joy is thought to be "generated (or not) by the system and occurs (or not) organization-wide" (Perlo et al., 2017, p. 5), unlike job satisfaction which arguably is situated at the individual level. Kelly and Adams (2018) examined joy, also termed compassion satisfaction, in parallel to engagement and workplace satisfaction among nurse leaders in the acute care setting, also recognizing the distinction of joy as a separate entity in molding a person's work experience.

Wellbeing is a concept sometimes mentioned when examining nurse leader work experience and job satisfaction. Haggman-Laitila and Romppanen (2018) conducted a quantitative systematic review using the Cochrane Collaboration procedure to explore

interventions intended to improve nurse leader well-being. For the study, wellbeing was defined as a "complex entity" involving physical, mental, behavioral, and occupational elements, in addition to social, community, financial, and professional variables that affect a person's work experience, much like the variables used to define job satisfaction (Haggman-Laitila & Romppanen, 2018, pg. 36). Mintz-Binder and Sanders (2012) engaged in exploratory, descriptive correlational research with the intent to examine work demands in relation to job satisfaction of associate-level program directors, taking into account multiple work variables associated with the work environment. Interestingly, the research team studied measures of health and well-being such as physical functioning, emotional exhaustion, tension, irritability, and potential sleep patterns as determinants of job satisfaction, suggesting a close proximity of the two concepts as if they were the same.

Isolating a universal definition of job satisfaction was challenging. Almeida de Moura et al. (2017) acknowledged that job satisfaction is interpreted a multitude of different ways, and admitted that while researchers have attempted to isolate work factors relevant to job satisfaction, there is "no gold standard indicating which aspects of work should be taken into account when job satisfaction is measured" (p. 447). Therefore, drawing from Herzberg's theory (see Herzberg et al., 1959/2010), I defined job satisfaction as an attitude toward a person's work that is uniquely perceived by the employee and influenced by factors intrinsic and extrinsic to the work and work environment. Factors that promote job satisfaction foster self-actualization, happiness, motivation, and increased morale (Herzberg et al., 1959/2010). Deleterious factors

perceived by the employee impede job satisfaction and can result in employee unhappiness and job dissatisfaction (Herzberg et al., 1959/2010).

Factors. Herzberg et al. (1959/2010) labeled variables contributing to job satisfaction and dissatisfaction as motivation and hygiene factors. Motivator factors were thought to define job content and precede job satisfaction. These factors include a sense of achievement, recognition and responsibility, opportunities for growth and advancement, and the work itself. Conversely, hygiene factors were thought to be extrinsic from the work and define the job environment. Included are variables such as company and administrative policy, supervision, specific working conditions, salary, status, security, and interpersonal relationships. When unfavorable, job dissatisfaction may result. Several nursing researchers have used Herzberg's theory as a basis for studying job satisfaction in academia. The results were informative and contributed to a greater understanding of factors associated with this important concept.

Berent and Anderko (2011) explored reasons why nursing faculty leave academia and identified 33 factors that make up the variance of factors contributing to the work experience of tenured nursing faculty (n = 1,171) working in AACN accredited universities. Three factors accounted for approximately 35% of the variance, including professional satisfaction with faculty identity (21.9%, Cronbach α = .824), resource management skills (7.1%, Cronbach α = .77), and satisfaction with research-related activities (6.4%, Cronbach α = .84). Under each of these categories, Berent and Anderko determined that motivational and hygiene factors, such as having a sense of enrichment and satisfaction in the role, autonomy, feeling valued as a faculty member, having

manageable workloads, and having a sense of community within academia and with other nurse educators, were all important in defining the work experience of nursing faculty, furthering the argument that Herzberg's theory has merit in explaining job satisfaction.

Likewise, Derby-Davis (2014) used an instrument based on Herzberg's theory as a basis for examining and measuring factors that predict nursing faculty job satisfaction and intent to stay in academe. While Derby-Davis did not disclose descriptive results of each factor tested, she was able to calculate motivational and hygiene factor scores for a sample of 127 baccalaureate and graduate nursing faculty in Florida. The author determined that the overall mean job satisfaction score for the group was 105.20 (SD = 30.7). A maximum overall score of 168 indicated complete job satisfaction. A minimum overall score of 24 indicated the respondent was not satisfied. Based on her calculations, Derby-Davis concluded that motivational and hygiene factors were factors of overall job satisfaction, supporting the application of Herzberg's two-factor theory in this population of professionals.

Woodworth (2016b) also used Herzberg's two-factor theory to explore job satisfaction and intent to stay for adjunct clinical nursing faculty (n = 52). Like Derby-Davis (2014), Woodworth did not disclose statistical data for each motivator or hygiene factor, nor did she report an overall job satisfaction score for the sample. However, Woodworth used Derby-Davis' instrument to measure job satisfaction, motivator, and hygiene factors in this sample and cited strong reliability statistics for the instrument, strengthening her argument that the motivator and hygiene factors identified in her study influence job satisfaction. Studies using Herzberg's theory to examine job satisfaction in

nursing academia informed my research by providing empirical evidence that factors representing job content and context influence the work experience and job satisfaction of employees working within nursing education.

Other researchers in nursing academia have identified additional variables associated with a person's work experience that are useful in further the understanding job satisfaction. McErlane (2014) advanced the idea of work-life balance as a determinant to job satisfaction in her qualitative dissertation that examined work-family balance in deans of nursing at the baccalaureate level. Support from family, colleagues, faculty, and mentors, as well as a sense of spirituality, contributed to a positive work-family balance, therefore, contributed to satisfaction in the role. Conversely, dealing with a nonfunctioning faculty team, stressful student situations, and juggling family pressures tended to detract. Albeit the small sample size, McErlane emphasized the importance of balance in an employee's work life as a measure to promote satisfaction in the role. Similarly, Owens (2017) linked job satisfaction, measured in terms of compassion satisfaction that reflects pleasure derived from doing one's work, with the concept of life balance in a mixed-method study of nurse educators in the state of Washington ($n = 32$). Quantitative statistics correlated concepts of health ($r = .371$, $p < .05$), work-related challenge ($r = .391$, $p < .05$), and role identity ($r = .415$, $p < .05$) with a lower life balance inventory score leading Owens to conclude that stressors in these three areas contribute to greater job dissatisfaction. Qualitative results suggested that issues with administrative and peer support, high work demands, heavy workloads, and time management challenges all contributed to negative life balance, therefore, contributed to feelings of

greater job dissatisfaction. While the underlying variables identified in Owen's (2017) work differed slightly from those by McErlane, the overall conclusion was the same that a balance between work and life contributed to greater satisfaction.

Arian et al. (2018) concluded through a systematic review of literature related to the job satisfaction of nurse educators that a variety of factors contribute to job satisfaction and dissatisfaction. Factors such as organizational support and leadership, communication, participatory activities, a sense of teamwork, organizational culture, student characteristics and relationships, and higher levels of education all contributed to job satisfaction. Arian et al. also validated a premise of Herzberg's theory to be true that salary is the most important factor for dissatisfaction. However, the research team disputed Herzberg's notion that factors either promote job satisfaction (internal motivation factors) or promote job dissatisfaction (external hygiene factors). Instead, they concluded that some factors, such as opportunities for promotion, can be linked to both, a finding more consistent with Locke's (1968) range of affect theory discussed previously.

Several researchers have specifically examined the work experience and job satisfaction of nursing leaders in academia, including deans and directors, and made similar conclusions. Early research by Princeton and Gaspar (1991) of first-line nursing academic administrators (n = 56) at the division and program levels of baccalaureate and graduate programs marked issues with the administrator role, issues that continue to be problematic today. Prominent were concerns over setting priorities, work overload, and role conflict, leading the research team to advocate for strategies aimed at addressing

"career drag" and problems associated with the administrative role (Princeton & Gaspar, 1991, p. 86). Adams' (2007) work surrounding nursing academic administration uncovered variables thought to persuade and dissuade faculty from pursuing a leadership position. From a sample of nursing faculty and administrators from nationally accredited nursing programs in the United States, the idea of additional challenges and variety of work (administrator *n* = 26, 56.1%, faculty *n* = 110, 42.5%), the opportunity to lead change (administrators *n* = 24, 54.5%, faculty *n* = 145, 56%), and facilitate growth and development (administrators *n* = 19, 43.2%, faculty *n* = 122, 47.1%) encouraged pursuit of an administrative role. The top three discouraging factors included workload (administrator *n* = 23, 52.3%, faculty *n* = 128, 49.4%), budget constraints (administrator *n* = 19, 43.2%, faculty *n* = 67, 25.9%), and conflict with faculty within the department (administrator *n* = 18, 40.9%, faculty *n* = 122, 47.1%). Based on these findings, Adams concluded that 63% (*n* = 161) of faculty would not consider moving into a position with additional administrative responsibility due to variables equated with the overall work experience of academic nurse administrators and enlightened readers of factors that could influence satisfaction with the role.

Bittner and O'Connor (2012) studied barriers to job satisfaction of nursing deans and directors of NLN-member schools in the New England area (n = 226). The top five barriers to job satisfaction, reported here according to significant and moderate impact respectively, included issues with a sense of accomplishment (57.4% and 19%), role autonomy (50% and 23.9%), support for professional growth (49.3% and 27.4%), relationships with colleagues (49.3% and 21.5%), and an atmosphere of academic

freedom (48.6% and 25.5%). The research team argued strongly that if these factors were more prevalent in the work lives of nursing deans and directors, greater role satisfaction would be experienced, leading to greater job satisfaction.

Recent work by Emory et al. (2017) revealed interesting results regarding variables to academic nursing administrator workplace satisfaction. Analyzing data from a large secondary source, Emory et al. revealed five work factors positively related to job satisfaction, including personal and family policies ($r = .60$, $p < .05$), institutional leadership ($r = .22$, $p < .05$), shared governance ($r = .54$, $p < .05$), departmental engagement ($r = .34$, $p < .05$), and collaboration ($r = .53$, $p < .05$). Respondent age ($r = .10$, $p < .05$), gender ($t = .33$, $p > .05$), race (categorized as white [non-Hispanic], black, Hispanic/ Latino, Asian/Asian-American/Pacific Islander, and other, F [2, 114] = .61, $p > .05$), tenure status (nontenure track, tenure-track not tenured, and tenure-track tenured, F [2, 157] = .92, $p > .05$), academic rank (assistant, associate, and full professor, F [2, 124] = .06, $p > .05$), and institutional type ($t = .60$, $p > .05$) were not statistically related to job satisfaction. Like Bittner and O'Connor (2012) and consistent with the underlying premise of the two-factor theory (see Herzberg et al., 1959/2010), Emory et al.'s study supports the opinion that factors that relate to job satisfaction are both intrinsic and extrinsic to the work and work environment and uniquely experienced by each academic leader.

Perhaps most informative for my research were studies that specifically examined the work experience of academic nursing leaders at the associate degree level. To address the shortage of future academic leaders, Mintz-Binder and Fitzpatrick (2009)

conducted a preliminary study of associate degree registered nursing program directors in California to better understand the relationship between social support and job satisfaction in this population of professionals. The research team planned a correlational study with a convenience sample of associate degree nursing program directors (n = 61) with titles including nursing director with administrative rank, nursing director with faculty rank, dean, department chair, and assistant and associate dean. Multiple factors related to job satisfaction, including the nature of the work (M = 19.62, SD = 3.07), supervision (M = 18.43, SD = 4.90), and relationships with co-workers (M = 17.48, SD = 3.89). Overall daily stress was high (M = 8.03 on a scale of 0 to 10, SD = 1.55) and respondents indicated that dealing with department operations, paperwork, and "red tape" were particularly challenging, leading the team to postulate that dealing with these types of situations may decrease job satisfaction and contribute to unfavorable outcomes, such as high turnover rates and problems with recruitment (Mintz-Binder & Fitzpatrick, 2009, p. 302). Mintz-Binder (2014) conducted follow-up research using a national sample of associate degree program directors (n = 242), this time measuring job satisfaction through subscales of the Copenhagen Psychosocial Questionnaire II (COPSOQII) Middle Version instrument. Job satisfaction of program directors was statistically correlated to work and family factors (r_s = .33, p < .01), role clarity (r_s = .36, p < .01), role conflicts (r_s = .36, p < .01), social support (r_s = .30, p < .01), and recognition (r_s = .45, p < .01). Mintz-Binder's findings are particularly important to this study because they emphasize the importance of positive, interpersonal relationships based on feelings of appreciation, respect, and support academic nurse leader job satisfaction.

Mintz-Binder and Sanders (2012) studied the associate degree program director work experience as a factor of overall well-being. Well-being, a concept closely associated to job satisfaction, was measured according to physical and emotional parameters. Based on nonparametric data analysis, emotional and quantitative work demands were significantly correlated to a variety of health and well-being factors such as stress levels, sleep problems, self-rated health, work pace, and burnout. All correlations were statistically significant at the 0.05 level (two-tailed) or less with Spearman rho statistics ranging from 0.15 to 0.54. Mintz-Binder's (2013) literature review explicating work-related issues facing front-line nurse managers and program directors in academia revealed several variables associated with job satisfaction. Variables such as autonomy and empowerment, relationships and support, personal factors, rewards and resources, leadership variables, work climate, and work environment functioning were noteworthy. Furthermore, personal variables including stress, workload, concerns with social support, and feeling overwhelmed in the position also contributed issues with job satisfaction. Burlingame (2016) made a similar determination when conducting research for her doctoral dissertation. Using qualitative research methods, Burlingame interviewed mid-level nursing leaders of two-year institutions of higher education in Minnesota (n = 10) and determined that satisfied leaders reported feeling empowered and supported by their supervisors. Other factors contributing to leader satisfaction included having the skills and abilities necessary to advocate for additional resources when necessary, being mission oriented, and inheriting healthy nursing education cultures and programs from predecessors. Factors associated with job

dissatisfaction included the lack of adequate resources to lead change, a lack of support from supervisors or faculty members, inheriting unhealthy, resistant program cultures, and losing the opportunity to engage in the faculty-student relationship. Despite the small sample size, Burlingame's findings explicate what was previously proposed through quantitative methods and reemphasize the notion that job satisfaction is deeply rooted in a person's work environment and in the work itself.

Researchers have used a variety of different methodologies, instruments, and theoretical frameworks to study job satisfaction in nursing academia. However, as proposed by Herzberg et al. (1959/2010), the literature supports that underlying the perception of job satisfaction are variables related to the employee, the work environment, and the work itself. Job satisfaction is a complex concept that is uniquely experienced and perceived and can be measured using a number of different tools (Almeida de Moura et al., 2017). However, the literature also revealed that job satisfaction, or the lack thereof, has important consequences and the potential to affect individuals and organizations in a variety of different ways.

Job satisfaction levels. Creating and sustaining strong leadership is essential in nursing in order to move the profession forward and protect the integrity of the healthcare system (IOM, 2010; Morton, 2014). Nursing leaders in academia play a vital role in preparing the next generation of nurses capable of meeting the challenges of today's healthcare needs and shaping the future of tomorrow's healthcare systems (Bouws, 2018; Flynn & Ironside, 2018; Haggman-Laitila & Romppanen, 2018; Mintz-Binder, 2013; Perlo et al., 2017). Healthy work environments promote the viability and success of an

organization (American Association of Critical-Care Nurses, 2016) and are often dependent upon nursing leaders that are satisfied and engaged with their work (Perlo et al., 2017). Yet, the attitudes nursing leaders hold toward their work do not exist in a vacuum. The health of the organization often depends on these attitudes which, in turn, trickles down to others and influences outcomes at both the individual and organizational levels (Haggman-Laitila & Romppanen, 2018; Kelly & Adams, 2018; Steege et al., 2017).

Researchers suggest that job satisfaction varies among nursing faculty and leaders. Several studies indicated that job satisfaction is relatively high in this population of professionals. Using descriptive, quantitative methodology, Bittner and O'Connor (2012) found that 87% of nursing faculty surveyed in the New England area (n = 226) reported overall satisfaction with their primary role. Owens (2017) measured compassion satisfaction in associate (ADN)- and baccalaureate (BSN)-level nursing faculty (n = 32), a concept closely related to job satisfaction and defined as the pleasure a person derives from being able to do their work well, and noted high compassion satisfaction scores across both groups (M = 41.53, SD = 6.34). Based on these statistics, Owens concluded that nursing faculty reported having positive feelings about their work and felt as if they were doing their jobs well. In both of these studies, the researchers determined that the vast majority of nursing faculty were satisfied with their work. Arian et al. (2018) concurred that the literature indicates job satisfaction in this population is relatively high. However, Arian et al. also argued that job satisfaction and dissatisfaction have not been adequately quantified which potentially impedes interpretation of the data and lays the

foundation for contrary findings such as the NLN report released in 2014 that suggested almost half of nurse educators (45%) were dissatisfied with their current workload (NLN, 2014a).

The American Organization of Nurse Executives (AONE) conducted large-scale sequential studies of overall nurse leader job satisfaction and noted promising results. In 2013, the AONE reported a 91% job satisfaction rating by nursing leaders overall (AONE, 2013; Thrall, 2014). However, in 2016, the overall job satisfaction rating fell by 10% to only 81%. The classification of professors and deans saw a significant drop in overall job satisfaction rating between survey periods as well. Professional and dean job satisfaction dropped from 92% in 2013 (AONE, 2013) to only 72% in 2016 (AONE, 2016). Of interest to my study are the statistics related to satisfaction with direct report relationships. In both reports, this category of satisfaction was the lowest across respondent groups with only 65% of professors and deans reporting being somewhat or very satisfied with direct report relationships in 2013 and 75% satisfied in 2016. These findings are consistent with those of Mintz-Binder (2014) who determined that associate degree nursing program directors rated their psychosocial work environments below that of the national average. Although the AONE reports do not propose cause and effect, the authors did suggest that relationships with co-workers and the ability to find joy and meaning in work were most commonly associated with higher job satisfaction scores, a conclusion carried across reports (AONE, 2013; AONE, 2016).

Outside of academia, Warshawsky and Havens (2014) and Hudgins (2016). calculated descriptive statistics from a 2011 secondary data set reflecting nurse managers

working in U.S. acute-care hospitals and concluded that approximately 71% of total respondents (*n* = 291) were satisfied or very satisfied with their jobs. Furthermore, 68% indicated they were likely or very likely to recommend a career as a nursing manager to others. In contrast, however, almost 62% of respondents reported intentions to leave the position with approximately half reporting stress and burnout as the primary reason (*n* = 63, 30%). More recently, Hudgins used a resilience framework to study the job satisfaction of 89 nursing leaders from a multi-hospital healthcare system in southwestern Virginia. Descriptive statistics revealed that nursing leaders, including clinical team leaders, nurse managers, supervisors, directors, executives, and educators, had a mean job satisfaction score of 3.5 on a 5-point Likert scale (*SD* = 1.14). Based on this statistic and further correlation analysis, Hudgins concluded that while nurse leaders were seemingly satisfied, they were not highly satisfied, placing them at risk for anticipated turnover (*r* = .51). Once again, despite favorable overall job satisfaction ratings, concerns surrounding elements of the position surfaced complicating interpretation of the data as a whole.

Morris and Laipple (2015) conducted a large-scale study of leadership skills and job satisfaction in the university setting and made several interesting conclusions. Surveying a national sample of 1515 university administrators in the United States including academic deans, department chairs, associate deans, and directors from a variety of disciplines including nursing, the research team discovered an overall job satisfaction composite score of 20.89 (*SD* = 4.24) using a six item, 5-point Likert survey tool with an overall range from 0 to 30. Higher scores represented greater job satisfaction. Overall job satisfaction was not statistically different between men (*M* =

20.96, *SD* = 4.18) and women (*M* = 20.72, *SD* = 4.35; *F* = .97), yet was higher among administrators with more experience (*M* = 21.64) than those in their first administrative role (*M* = 19.93, *F*(1, 1459) = 60.74, *p* < .001) suggesting that first-time administrators were not as satisfied in their roles. This conclusion is contrary to the qualitative analysis of White (2014) who found that 23 of 24 associate deans experienced very high levels of job satisfaction during the first year. Despite the favorable job satisfaction ratings noted by Morris and Laipple, the study also revealed that over 76% of participants became less interested in their work over time, while over 77% reported being less enthusiastic since assuming administrative responsibilities. Only 20.5% of participants reported feeling good about their work every day leading to concern about the impact and negative "ripple effect" across the organization (Morris & Laipple, 2015, p. 249).

Flynn and Ironside (2018) had similar concerns when studying elements of job satisfaction and burnout among midlevel academic nursing leaders (*n* = 146). Using Maslach's theory of burnout, the research team measured job satisfaction using subscales of a highly reliable tool, entitled the Maslach Burnout Inventory (Cronbach α = .95), intended to examine emotional exhaustion as a measure of job satisfaction with a variety of work-related variables. The authors concluded that almost 30% (*n*= 43) of respondents were dissatisfied with their workload and approximately 23% (n = 34) were dissatisfied with their work-life balance. Flynn and Ironside's results are in stark contrast to the qualitative dissertation findings of McErlane (2014) who determined that despite reports of stress and challenges in the position by baccalaureate nursing deans in a Midwest

region, 100% of participants (n = 12) reported a sense of personal satisfaction with the role.

In the face of conflicting results regarding levels of job satisfaction in nursing leadership, there is consensus among researchers that satisfaction with work-related factors influences the work experience and the dynamics of the organizations in which they serve. Failure to address issues with job dissatisfaction can be detrimental on an individual and organizational level, and bring to light a variety of negative outcomes worth examining.

Outcomes. An examination of the literature for outcomes of job satisfaction and dissatisfaction revealed interesting results. Consistently, researchers have established that issues with job satisfaction are connected to retention and attrition, and are attributable to an employee's intention to stay or leave the role. Important to my study is the work of Derby-Davis (2014) and Woodworth (2016b) who used Herzberg's two-factor theory as a theoretical foundation for qualitative research in this area. Using correlation and regression strategies, Derby-Davis hypothesized that job satisfaction and the intention to stay in academia of nursing faculty (n = 127) teaching in baccalaureate and graduate programs in Florida were related (Derby, 2010; Derby-Davis, 2014). This researcher determined that motivator factors associated with job content (r = .58, p < .01) and hygiene factors associated with job context (r = .55, p < .01) were positively related to intent-to-stay scores (Derby-Davis, 2014). A predictor variable, motivation-hygiene factor, was significantly related to the criterion variable, intent to stay (F(4, 94) = 13.196, p < .00) and predicted approximately 36% of the variance (R = .60) of the intent-to-stay

score in the sample. Based on these statistics, the author postulated that motivation-hygiene factors, indicators of job satisfaction under the two-factor theory (see Herzberg et al., 1959/2010), positively influenced job attitudes and could be used as a predictor of faculty intention to remain in academe (Derby-Davis, 2014).

Woodworth (2016b) discovered similar results when studying job satisfaction and intent-to-stay teaching in adjunct clinical nurse faculty at the associate level (n = 52). Like Derby-Davis (2014), Woodworth used Herzberg's two-factor theory and correlation and multiple regression strategies to reveal a statistically significant and positive relationship between job satisfaction and intent-to-stay teaching. Motivator (F[6, 45] = 5.34, R^2 = .34, R^2 Adjusted = .42, p < .01) and hygiene (F[6, 45] = 3.71, R^2 = .33, R^2 Adjusted = .24, p < .01) factors scores explained a significant amount of variance in respondent intent-to-stay teaching scores. The predictor variable, motivator-hygiene factors, predicted a significant amount of variance (19%) of the criterion variable, intent-to-stay (F[7, 44] = 4.88, R^2 = .44, R^2 Adjusted = .35, p < .01). Once again, motivation-hygiene factors as indicators of job satisfaction were attributed to faculty intention to remain in academe (Woodworth, 2016b).

Bittner and O'Connor (2012), and Jeffers and Mariani (2017) also linked job satisfaction to retention in studies examining the work experiences of nursing faculty. Bittner and O'Connor determined that while the majority of New England nurse educators (n = 226) surveyed expressed satisfaction with their workload, 19% reported intentions to leave the position within one year, while 52% reported intentions to leave within five years citing dissatisfaction with compensation and work-life imbalance as

primary factors. Jeffers and Mariani engaged in correlational research and discovered a statistically significant difference in intent-to-stay attitudes of novice full-time nurse faculty (n = 124) teaching in undergraduate and graduate programs across the United States based on career satisfaction (t = 4.83, p < .001). The research team determined that faculty who intended to stay in the position reported having a higher total career satisfaction score (M = 97.94) than faculty who did not (M = 74.8).

Outside of academia, Warshawsky and Havens (2014) used survey data collected electronically from nurse managers working in U.S. hospitals to identify a positive correlation between intent-to-stay and job satisfaction. Nurse managers who intended to remain in their positions for longer than five years reported more satisfaction with their jobs (X^2 (3, n = 291] = 25.59, p < .001), suggesting that job satisfaction is positively linked to leader retention. Seventy-two percent of respondents (n = 210) reported plans to leave the position within 5 years. Thirty percent (n = 63) cited burnout as the primary reason for their intent-to-leave. Interestingly, 146 of these respondents reported being very satisfied or satisfied in their work, calling into question the conclusion that intention-to-leave is strictly attributable to some negative aspect of the job. Warshawsky and Havens' study brings to light other variables such as retirement, promotion, or career change that may affect longevity in the role. Hudgins (2016) studied the relationship between resilience, job satisfaction, and anticipated turnover among nurse leaders (n = 89) from a multi-hospital healthcare system in Virginia and identified a statistically significant relationship between job satisfaction and anticipated turnover (r = .68, p < .01); the higher the job satisfaction, the less likely the leader was to leave the position.

Regression analysis revealed that the relationship between the two variables was strong (*R2* = .47) and when combined into a single component for additional posthoc analysis (eigenvalue = 1.68), job satisfaction and anticipated turnover measured the same construct which was labeled *intent-to-remain*. Unlike Warshawsky and Havens' conclusions, Hudgins' findings suggested that job satisfaction and anticipated turnover are so closely related, they represent the same construct, leaving little room for the effects of other variables otherwise attributed to retention/attrition, such as retirement or career trajectory.

Burnout, a condition associated with high workloads and demands and characterized by fatigue, anxiety, and emotional exhaustion (Flynn & Ironside, 2018), has also been attributed to job dissatisfaction. The Institute of Healthcare Improvement (Perlo et al., 2017) recognized the importance of finding joy in a person's work. Burnout is thought to be counterintuitive to a healthy work environment and impede employee engagement, productivity, and job satisfaction. Building on the IHI's report (Perlo et al., 2017), Kelly and Adams (2018) argued that if nursing leaders are able to derive greater joy from their work, satisfaction will increase as burnout decreases. Flynn and Ironside examined burnout more closely in midlevel academic nurse leaders from 29 accredited schools of nursing in the United States and uncovered evidence that burnout and workload dissatisfaction are empirically related ($X^2[1, n = 139] = 35.985$, $p = .000$). Further analysis led the team to conclude that midlevel academic nurse leaders who reported dissatisfaction with their workload were almost eight times more likely to experience occupation burnout (*OR* = 7.84, 95% *CI* [3.31, 19.64], $p = .000$) than those

who were satisfied. In addition, leaders who were dissatisfied with their work-life balance were over six times as likely to experience occupational burnout (*OR* = 6.33, 95% *CI* [2.35, 17.15], $p = .000$) than those who were satisfied. Owens (2017) put forward a similar argument when she concluded that nurse educators from associate and baccalaureate programs in the state of Washington who experience moderate life balance also experience greater perceived job satisfaction ($r = .419$, $p < .05$). In each study, empirical evidence places occupational burnout as an outcome to job dissatisfaction, furthering the argument that having a sense of satisfaction in one's work is important.

Researchers overwhelmingly agree that job satisfaction is connected to work experience and when unfavorable, may contribute to untoward outcomes. I did not find any articles promoting unhealthy work environments or that did not find a relationship between job dissatisfaction and an untoward outcome. Instead, research suggests that job dissatisfaction attributed to disapproving work environments and experiences instigates a variety of negative connotations, including instability and reduced longevity in the role (Mintz-Binder, 2014), difficulty with recruitment and retention (Derby-Davis, 2014; Mintz-Binder, 2014; Jeffers & Mariani, 2017), issues with work-life balance, and burnout (Flynn & Ironside, 2018; Kelly & Adams, 2018). Morris and Laipple (2015) advised academic institutions to foster positive work environments as a measure to increase interest and engagement in the leadership role, warning that without effective programs and strategies aimed at mentoring and supporting leaders, negative outcomes, such as stress, have the potential to have a "deleterious impact or derail an administrative career" (p. 249). The literature informed my study by delineating variables that contribute to job

satisfaction or dissatisfaction, clarifying levels of job satisfaction among nursing leaders, and describing outcomes that underpin job satisfaction using research methods consistent with my study design. The literature also supported the use of Herzberg's two-factor theory (see Herzberg et al., 1959/2010) as a theoretical framework suitable for studying faculty incivility, a relationship-based concept, as it relates to job satisfaction in academic nurse leaders at the associate level.

Summary

The purpose of this research was to determine if there is a relationship between faculty incivility and job satisfaction in academic nurse leaders at the associate degree level. The theoretical framework, Herzberg's two-factor theory (Herzberg et al., 1959/2010) postulates a connection between intrinsic and extrinsic work-related variables, termed motivator and hygiene factors, and a person's job satisfaction, or lack thereof. Of importance is the correlation between interpersonal relationships, a hygiene factor, and the potential for job dissatisfaction. Using this model as a theoretical foundation for my study, I developed a definition of job satisfaction suitable in aligning the research variables, faculty incivility, a type of interpersonal relationship, and academic nurse leader job satisfaction. The definition explicates job satisfaction as a unique experience, modified by factors inherent to the work, as well as factors that establish the work environment.

To better understand the research variables, faculty incivility and academic nurse leader job satisfaction, I conducted an extensive review of juried and reputed resources. Ample research exists surrounding incivility within nursing education, including faculty-

to-faculty incivility and faculty-to-student incivility. Antecedent and outcome research make clear that faculty incivility is problematic and contributes to unfavorable work environments (Clark, 2017; LaSala et al., 2016; Vagharseyyedin, 2015). Unfortunately, little is known about the prevalence of faculty-to-administrator incivility, representing a significant gap in the research and an opportunity for future study.

The literature review also revealed that job satisfaction is displaced by a variety of factors, including the quality and nature of professional support and collegial relationships experienced by academic nurse leaders (Burlingame, 2016; Emory et al., 2017; McErlane, 2014; Mintz-Binder, 2013, 2014). Outcomes are unfavorable at both the individual and organization levels when leaders are dissatisfied in their work and are often associated with retention and attrition issues (Bouws, 2018; Emory et al., 2017; Mintz-Binder & Sanders, 2012; Morris & Laipple, 2015). However, research that explores the relationship between faculty incivility toward academic nurse leaders as a factor in leader job satisfaction is scarce, further contributing to the gap in the literature surrounding the work experience of nurse leaders in academia.

The prevalence of faculty-to-administrator incivility at the associate degree level and the relationship between faculty incivility and academic nurse leader job satisfaction is unknown due to a lack of quantitative research in this area. However, Herzberg's two-factor theory (Herzberg et al., 1959/2010) provided a theoretical foundation upon which to explore the relationship between variables. The literature review contributed to a greater understanding of the research variables and provided a solid backdrop upon which to engage in descriptive, correlational research, the intention of this research study.

Chapter 3 describes the research plan for quantifying the prevalence of faculty-to-administrator incivility at the associate degree level and for exploring the relationship between faculty incivility and leader job satisfaction. Preliminary qualitative research suggests that faculty incivility toward academic nurse leaders is problematic (LaSala et al., 2016); however, studies exploring administrator job satisfaction is limited, compounded by a lack of understanding of how faculty incivility affects the leader work experience. The proposed descriptive and correlational research design outlined in Chapter 3 aligns with other studies that heighten understanding of the relationships between a variety of work-related variables and job satisfaction, such as research by Derby-Davis (2014), Flynn and Ironside (2018); Jeffers and Mariani (2017), Mintz-Binder (2009, 2014), and Woodworth (2016s, 2016b). In this study, I addressed a gap in the knowledge through the pursuit of research that quantifies a particular work-related factor, faculty incivility toward academic nurse administrators, and examined how this phenomenon relates to leader job satisfaction.

Chapter 3: Research Method

Introduction

Strong nursing leadership at every level and in every practice setting is an essential element in meeting the needs of patients seeking care within the complex healthcare system (IOM, 2010). Within academia, nursing leaders serve a critical role in preparing a nursing workforce that has the skills and abilities necessary to meet the complex healthcare needs of patients now and in the future (Flynn & Ironside, 2018; Morton, 2018). Recruitment and retention of academic nursing leaders are problematic, often compounded by a variety of factors that negatively impact job satisfaction (Emory et al., 2017; Flynn & Ironside, 2018; Mintz-Binder, 2014; Mintz-Binder & Sanders, 2012). Theoretically, the quality and nature of interpersonal relationships in the workplace are associated with varying degrees of job satisfaction or dissatisfaction (Herzberg et al., 1959/2010). Civil or uncivil exchanges between colleagues often define the nature of these relationships (Clark, 2013, 2017; Clark et al., 2013) and shape the work experiences of nursing academic administrators (LaSala et al., 2016). The purpose of this descriptive correlational study was to determine if there is a relationship between faculty incivility and job satisfaction in academic nurse leaders at the associate degree level and to test the assumptions of Herzberg's two-factor theory that suggests when certain factors, such as interpersonal relationships, are unfavorable, job satisfaction is negatively affected (see Herzberg et al., 1959/2010).

In Chapter 3, I delineated essential elements of the research design and methodology. I included a description of the study population, sampling, recruitment and

participation procedures, instrumentation and operationalization of constructs, data collection procedures for each study variable, and threats to validity. I concluded the chapter with a discussion of ethical concerns and strategic undertakings aimed at protecting the anonymity, privacy, and confidentiality of study participants.

Research Design and Rationale

This descriptive correlational study aimed to determine if a relationship exists between faculty incivility and job satisfaction in associate-level academic nurse leaders from ACEN-accredited programs. The research design accommodated two study variables, administrator perceptions of faculty incivility and associate-level academic nurse leader job satisfaction. The use of descriptive analysis provided an opportunity to summarize information (see Warner, 2013) and was useful to quantify perceptions of and experiences with faculty incivility in a population of nursing leaders. A correlational design allows a researcher to identify and describe the relationship between two quantitative variables (Warner, 2013) and has been used in multiple studies exploring job satisfaction or related notions within nursing education to identify factors affecting these important workplace variables. Previous studies using correlational methods include the works of Derby-Davis (2014), Flynn and Ironside (2018), Jeffers and Mariani (2017), Mintz-Binder (2014), and Owens (2017). Likewise, the use of correlational methodology was appropriate in this instance given the study's research questions that were designed to determine the relationships between administrator perceptions of and experiences with faculty incivility and leader job satisfaction.

Time constraints were minimized through the use of electronic surveys to collect pertinent data. Creswell (2014) summarized that quantitative research using a survey design is advantageous due to the "economy of the design" and the potential for rapid data collection (p. 157). Additional advantages associated with electronic surveys include reduced costs due to the elimination of paper-and-pencil instruments and postage, faster survey and data retrieval, the ability to reach large, geographically diverse samples, and the ability of respondents to share sensitive information anonymously and in a private setting (Cope, 2014). Given the accessibility of a repository of e-mail addresses made available through the ACEN website that is specific to the population of interest, the use of an electronic survey design in this study was reinforced as a method to collect the data necessary to answer the study's research questions. Yet, despite the advantages, I planned adequate time for data collection and analysis (see Rudestam & Newton, 2015), allowing at least 4 weeks to distribute the online surveys and receive the number of responses necessary to proceed with data analysis. Quantitative research analysis bypasses "number crunching" (Albers, 2017, p. 215). Instead, effective data analysis requires critical thinking and close examination of the data to explicate underlying data trends, patterns, and relationships upon which to draw accurate and valid conclusions, a process that requires enough time and attention by the researcher.

The research design included the use of two survey instruments, the WICS by Clark (2014) and the JSS by Sluyter et al. (1985). I obtained permission to use each instrument from the respective developer. Mukherjee provided permission to use the JSS without cost. Boise State University (BSU) holds the copyright for the WICS and

required a licensing agreement be signed at the cost of $250. Given the value of the tool in answering the research question, I decided to proceed with the licensing agreement and paid the required fee. This licensing agreement and expense could represent a potential resource constraint for other researchers who do not have the means to meet these obligations.

Methodology

Population

The target population for this study were academic nurse administrators from associate degree programs accredited by the ACEN in the United States. Academic nurse administrators, also termed leaders, serve in administrative roles and have the responsibilities and the authority to carry out administrative and instructional activities for nursing education programs at the associate degree level (ACEN, 2018a; Mintz-Binder, 2014). I anticipated members of the target population would carry titles such as dean, assistant dean, associate dean, or program director and hold responsibilities at the associate degree level. Administrators or leaders from other levels of nursing education or with faculty status were excluded. The ACEN accredits over 700 associate degree programs in the United States (M. Stoll, personal communication, October 26, 2018) and each program must designate one nurse administrator to manage the administrative and instructional activities for the nursing program (ACEN, 2018a), thereby constituting a large and adequate sample size.

Sampling and Sampling Procedures

The target population for this study was academic nurse administrators from associate degree programs accredited by the ACEN. The ACEN manages and makes available to the public a comprehensive list of designated nurse administrators for all ACEN-accredited programs in the United States, including their credentials, official title within the organization, and contact information containing e-mail addresses and phone numbers. Given the ease of access to the names and contact information for a large, nationwide sample, I used a nonprobability convenience sampling strategy for this study. Use of a convenience sample minimized the amount of groundwork necessary to collect contact information for nurse administrators from non-accredited programs, likely accessible only through extensive website searches and/or contacting programs directly via the phone or generic program e-mail addresses. Including nurse administrators from accredited associate programs also minimized the risk of inadvertently omitting a nurse administrator from the participant list and provided a large sample size upon which to base the study, promoting the likelihood that the response rate was high enough to ensure I had enough power to reject the null hypothesis if the null hypothesis was actually false (see Warner, 2013). Random or other types of probability sampling were not warranted in this study.

Inclusion and exclusion criteria. To be included in the study, participants had to be designated nurse administrators with responsibility and authority to manage administrative and instructional activities within an accredited associate degree nursing and recognized by the ACEN. These inclusion criteria were consistent with the definition

of *nurse administrator* put forward by the ACEN (2018a). According to Criterion 1.6 of the *ACEN 2017 Standards and Criteria* for associate degree programs (ACEN, 2017), the nurse administrator must be a nurse who holds a minimum of a graduate degree with a major in nursing who is experientially qualified and meets the requirements set forth by the program's governing organization and state oversight body. The ACEN professional staff review the qualifications and credentials of all nurse administrators to determine if administrators meet the minimum criteria (ACEN, 2018b). Nurse professionals deemed eligible by the ACEN to serve in the role carry titles such as dean, associate dean, assistant dean, or program director. Participants had to be recognized by the ACEN as an associate degree program nurse administrator to be included in the study. There are instances in which an administrator may be the designated nurse administrator for more than one program at a time and at other educational levels, including practical nursing, diploma, baccalaureate, masters, and doctoral levels. Having responsibilities at other levels of nursing education, in addition to responsibilities at the associate degree level, did not exclude a participant; however, administrators had to have responsibilities at the associate degree level to align with the target population of the study. In addition, I excluded nurse administrators holding faculty status since this classification of employee violated the notion of the faculty-to-administrator relationship under investigation.

Power analysis. To determine an appropriate sample size, I reviewed the literature and noted consistency in the methods used by other researchers who examined factors related to job satisfaction, including Derby-Davis (2014), Hudgins (2016), and Yarbrough et al. (2017). In these instances, researchers used power analyses based on

similar effect sizes, power, and level of significance to determine the sample size necessary to obtain a test statistic large enough to reject the null hypothesis when the null hypothesis is actually false (see Warner, 2013). According to Dorey (2010), a priori calculation of sample size based on these three factors is imperative in preventing erroneous judgments related to the null hypothesis. Modeled after these studies, I calculated an appropriate sample size using G*Power analysis, setting statistical power at 0.80 (80% chance of correctly rejecting the null hypothesis), a medium effect size of 0.30 representing the strength of the relationship between the two variables (see Cohen, 1992; Warner, 2013), and a level of significance (alpha, α) of 0.05, allowing for a 5% chance of rejecting the null hypothesis when actually true. Based on this analysis, I determined the resulting sample size should be at least 84 for this correlational study.

Recruitment, Participation, and Data Collection

Recruitment. The study sample included all nurse administrators (without faculty status) of associate degree programs accredited by the ACEN in the United States. Participants were recruited from the complete list of associate-level nurse administrators recognized by the ACEN. Information pertaining to each designated administrator is published on the ACEN website under the *Search Accredited Programs* link located on the agency's homepage (www.acenursing.org); the information was a matter of public record (M. Stoll, personal communication, October 24, 2018). Contact information includes the administrator's name, name and address of the organization, credentials, title within the nursing education unit, e-mail address, telephone number, facsimile number, and accreditation status. The ACEN accredits over 700 associate degree programs

nationwide (M. Stoll, personal communication, October 24, 2018). All participants were invited to participate via distribution of an electronic survey sent directly to the e-mail address on file with the accreditation agency. I made the survey available to participants for a period of 4 weeks and sent reminder e-mails to nonrespondents at the beginning of Weeks 2, 3, and 4 to encourage participation and ensure an appropriate response rate.

In order to report a comprehensive profile of the sample, I collected the following demographic information for each respondent (see Appendix B): age, gender, race/ethnicity (White/Caucasian, Black or African American, Asian/Pacific Islander, American Indian or Alaskan Native, Hispanic, Other), total years of academic administrative experience, and years of experience as the nurse administrator at the current institution. I asked respondents to disclose the title of their administrative position offering choices including *dean, associate dean, assistant dean, program director,* or *other,* and asked respondents to verify administrative responsibility at the associate degree level. I also asked respondents to disclose whether he or she held faculty status within their organization. I excluded responses from administrator that denied administrative responsibility for an associate-level program or that indicated employment under faculty status.

Informed consent. To obtain informed consent, I disclosed in the body of an e-mail sent to all respondents the purpose of the study, an explanation of how the data would be used and stored, confidentiality measures to protect the privacy of participants, an estimated time commitment to complete the survey, and the voluntary nature of participation. The e-mail also informed potential participants that no personal identifying

information would be collected, and participation could be withdrawn at any time. Nurse administrators with continuing interest in participating in the study were directed to a link that when opened, forwarded the participant to the survey.

Data collection. I collected data using an online survey platform, SurveyMonkey, over a period of four weeks and exported the data to IBM SPSS Statistics for Windows, version 25, for data analysis. Any reference to a subject's name or identifying information such as an Internet protocol (IP) or e-mail address was separated from the survey data through an option available in the SurveyMonkey platform, thereby ensuring anonymity. The collection and analysis of de-identified data prevented researcher bias that could occur when the researcher is able to identify participants and their responses (Creswell, 2014; Kennedy, 2011). The raw data were stored in a password-protected electronic format in three separate locations, including on flash drive, external hard drive, and on a cloud storage system (Dropbox), each controlled, accessible, and maintained only by the researcher according to the requirements and timeframe set forth by the Walden University Institutional Review Board (IRB).

Participants could exit the survey at any time. The survey included mostly Likert-style questions with a small number of check-all-that apply and fill-in-the blank questions. The later types of questions were included in the survey to maintain the integrity (validity and reliability) of the measurement tools; however, were not the primary questions of interest given the research purpose. While I examined the responses to the alternative format questions for interesting and apparent themes, a decision

whether to report this information in the results section of the study was made postdata collection. Data from submissions with incomplete participation in the Likert-style portion of the survey were excluded.

I provided my name and contact information to participants in the body of the introductory e-mail and at the end of the survey. At each interval, I encouraged participants to contact me with any questions or if they wished to communicate with me pre- or post-survey completion. Unlike other research methodologies, quantitative studies using a survey design do not require debriefing (Creswell, 2014); therefore, I did not automatically contact respondents post participation. However, I did encourage participants to contact me if interested in being sent the results upon conclusion of the study.

Instrumentation and Operationalization of Constructs

Incivility instrument. I used the WICS, formerly known as the Faculty-to-Faculty Incivility Survey (BSU, 2018; Clark, 2014), to measure the independent variable, faculty incivility. Use of the WICS measures a variety of variables related to incivility in the workplace, including respondent perceptions of uncivil behaviors, frequency of experiences with uncivil behaviors, levels of confidence in addressing workplace incivility, factors associated with incivility, and perceived civility in the workplace. Also included on the survey were opportunities for respondents to share an example of uncivil behavior experienced in the workplace and suggestions for how to promote or address civility in the work environment. Of particular importance to this study were the Likert-style questions that measure perceptions of and frequency of experiences with uncivil

behaviors. The WICS is copyrighted by BSU. Authorization to use the tool was secured through a licensing agreement and payment of a licensing fee payable to BSU.

Clark originally designed the Faculty-to-Faculty Incivility Survey (F-FI Survey) in 2011 (BSU, 2018) and used the instrument initially in a national study examining faculty-to-faculty incivility within nursing education (Clark, 2013; Clark et al., 2013). Clark created the instrument to measure faculty perceptions of incivility, to measure the frequency with which faculty experience incivility, and to collect information regarding effective ways to address the problem of incivility within nursing education (Clark et al., 2013). Clark and her team (Clark, 2013; Clark et al., 2013) pilot tested the instrument to determine content validity, readability, and sensible flow. As a result, revisions were made, followed by further critique by a panel of eight nursing faculty who determined the items to be a reflective measure of faculty-to-faculty incivility. Since its original development, the tool has been slightly revised to allow for the examination of incivility from a broader perspective of co-workers (BSU, 2018; C. Clark, personal communication, September 13, 2018), thus making use of the instrument applicable to my study.

The WICS includes a list of 23 potentially uncivil faculty behaviors measured according to a 4-response Likert scale and several questions that ask (a) whether incivility is perceived as a problem in the work environment, and (b) reasons why the respondent might choose not to address the incivility, if experienced. The Likert-portion of the instrument asks respondents to categorize behaviors as *always*, *sometime*s, *rarely*, or *never* perceived as uncivil, then indicate the frequency with which each respondent has

experienced the behaviors within the previous 12 months; response potentials included *often*, *sometimes*, *rarely*, or *never*. The final questions on the survey are qualitative in nature, asking respondents to describe an uncivil faculty encounter and provide suggestions for remediation of the problem.

Clark conducted an exploratory factor analysis and preliminary item response assessment to establish construct validity and identified three underlying constructs appropriate to measure faculty-to-faculty incivility: hostility toward individuals, self-serving behaviors, and hostility toward the work environment (Clark, 2013; Clark et al., 2013). Internal consistency reliability of the instrument was established by calculating interitem coefficients. The Cronbach's alpha (α) was 0.965, indicating excellent inter-item reliability (Clark et al., 2013; Warner, 2013).

According to Clark, BSU has issued over 20 licenses for the WICS (C. Clark, personal communication, November 2, 2018) which has been used to measure incivility in several studies in academic and practice settings within the United States and Canada (Clark, 2018). For example, the tool in its original form was utilized by Grust (2013) in a dissertation study examining the relationship of faculty-to-faculty incivility to faculty role satisfaction and persistence in a sample of teaching faculty working in nursing programs at the associate and baccalaureate levels. The revised instrument has been used by researchers such as Casale (2017) who used the tool to identify a statistically significant negative correlation between faculty-to-faculty incivility and perceived resonant leadership of immediate supervisors (r = -.560, α = .01) in a convenience sample of nurse educators working at a variety of program levels. Chihak (2018) used the WICS most

recently to survey a sample of nursing faculty from one Midwest state and validated incivility as a problem in nursing education, particularly for tenured faculty and faculty teaching in undergraduate and graduate programs. According to Clark, other publications using the WICS are in progress (C. Clark, personal communication, November 2, 2018); however, I did not locate any studies that used the tool to measure perceptions of faculty incivility by academic nurse administrators. Recent instrument modifications allow for the inclusion of a wider perspective of co-workers, making the tool ideal for measuring the perceptions of and experiences with faculty incivility in a population of academic nurse leaders.

Job satisfaction instrument. I used the JSS initially proposed by Sluyter et al. (1985) to measure the outcome variable, academic nurse leader job satisfaction. The research team originally developed the tool as an alternative to the widely used and recognized Job Descriptive Index (JDI) created by Smith, Kendall, and Hulin in the late 1960's to measure job satisfaction in the areas of business and industry (Sluyter et al., 1985). Desiring an instrument more applicable to areas associated with human service, Sluyter et al. developed the JSS to measure the job satisfaction of employees working in residential care facilities. Permission to use the JSS for this study was granted by Dr. Mukherjee, one of the original authors.

The JSS is based on Herzberg's two-factor theory and consists of 24 items intended to measure job satisfaction according to hygiene and motivator factors delineated in Herzberg's model (Sluyter & Mukherjee, 1986; Sluyter et al., 1985). The instrument measures six motivator factors intrinsic to the job, including advancement,

recognition, a sense of achievement and responsibility, a sense of growth, and the work itself. The instrument also measures six hygiene factors extrinsic to the job, including salary, supervision, company policies, working conditions, interpersonal relationships, and a sense of security in the workplace (see Appendix A). Each of the 12 factors are measured by a pair of questions scored according to a 7-point Likert scale with responses ranging from *not satisfied* (1) to *completely satisfied* (7). Scores may range from a maximum score of 168, indicating that the respondent is completely satisfied, to a minimum score of 24, indicating the respondent is not satisfied. Final scoring of the survey is reported according to three global measures (*M* and *SD*), including overall job satisfaction and for the hygiene factors and motivator factors collectively.

According to Sluyter et al. (1985), factor analysis and other correlational techniques demonstrated that the JSS provided a global assessment of job satisfaction in residential-care workers, had a high degree of internal consistency, and is a useful tool for assessing job satisfaction within an organization. Interitem correlation analysis revealed that each pair of items chosen to measure Herzberg's constructs were highly related to each other. Pearson's *r* values ranged from 0.51 to 0.86, each statistically significant at the 0.01 level. The research team determined that the instrument had a high degree of internal consistency in measuring job satisfaction with a Cronbach alpha of 0.96. Factor analysis to test the validity of Herzberg's theory as an underlying basis for the tool indicated that overall, the instrument measured the same global construct, job satisfaction. Furthermore, while the pairs of questions on the instrument were intended to

measure distinct motivator and hygiene factors delineated in Herzberg's theory, in reality, the factors are highly related and part of a single, complex phenomenon.

Later testing by Sluyter and Mukherjee (1986) to establish validity of the instrument included a concurrent validity analysis. The research team tested the JSS against three other previously validated scales, including the JDI by Smith et al. and the Kunin's Faces Scale by Dunham and Smith, both published in 1979, and the Self-Diagnostic Survey (SDS) measuring burnout, designed by Pines and published in 1981. Sluyter and Mukherjee conducted a canonical correlation to study the differences between the JSS and the JDI and concluded that the 12 variables of the JSS and the five variables of the JDI measured similar job satisfaction constructs. The research team then used Pearson correlation methods to examine the relationships between the JSS and the other two instruments. Sluyter and Mukherjee identified a statistically significant correlation between the JSS and the SDS scale which measured job burnout ($r = -.50$, $p < .01$), and a statistically significant correlation between the JSS and the Kunin Faces Scale measuring job satisfaction ($r = -.63$, $p < .01$). As a result, the team concluded that the JSS is a valid measure of job satisfaction for residential-care employees that could be useful to researchers examining job satisfaction in other areas.

The JSS has been used in a variety of studies examining job satisfaction in healthcare workers. Outside of nursing, Curnow (1990) and Mulvey (1990) used the JSS in early studies to examine job satisfaction in direct care staff working in non-acute, mental-health facilities. Citing extensive validity and reliability testing by Sluyter et al. (1985) and Sluyter and Mukherjee (1986), Mulvey concluded that the instrument was

"sound" and no further testing was completed (p. 36). Curnow, however, measured test-retest reliability using a sample of 33 direct care participants. In this analysis, Curnow calculated a Pearson correlation coefficient (*r*) of 0.66, suggesting moderate to near-high correlation. The researcher also calculated a Cronbach alpha (α) of 0.923, establishing a high level of internal consistency reliability in this population of direct care workers.

In nursing, Bell (1993) and Hansen (2001) both examined job satisfaction as it related to nurses' perceptions of a clinical ladder using a modified version of the JSS. Bell (1993) used pretesting with a sample of 12 nurses and noted the instrument was easily understood and could be readily completed in less than ten minutes. Hansen further modified the instrument to include a 5-point Likert scale; however, completed no further testing for validity and reliability, citing previous measures completed by Sluyter and Mukherjee (1986) and Bell as sufficient.

Most recently, Derby-Davis (2014) used the JSS in its original version to examine job satisfaction and intent to stay in academe for full-time nursing faculty teaching in baccalaureate and graduate nursing programs in Florida. Noting that the tool had not been previously used to measure job satisfaction as a predictor of intent to stay, Derby-Davis calculated a Cronbach alpha (α) of 0.968, concluding that the tool offered a high level of reliability in measuring job satisfaction in this population. According to my research, the JSS had not been previously used to measure job satisfaction in academic nurse leaders. While the literature suggests that the JSS will likely be a reliable measure of job satisfaction in this population nursing professional, I estimated the internal

consistency reliability for my study sample by calculating and reporting the Cronbach alpha value.

Operationalization. The operational definitions for the study variables included:

1. *Job satisfaction*: An attitude toward work that is uniquely perceived by the employee and influenced by factors intrinsic and extrinsic to the work and work environment (Herzberg et al., 1959/2010). I measured job satisfaction using the JSS developed by Sluyter et al. (1985) that measures job satisfaction according to a 7-point Likert scale. Final scoring of the survey was reported according to measures of central tendency and dispersion statistics for three global measures, including overall job satisfaction and for the hygiene factors and motivator factors collectively (Sluyter & Mukherjee, 1986). Interpretation of final scores was based on scale descriptors. For example, a final overall mean (*M*) score of 2.96 indicated an average level of overall job satisfaction, falling somewhere between *somewhat satisfied* (3 on the 7-point Likert scale) and *satisfied* (4 on the 7-point Likert scale).
2. *Incivility*: A "range of rude or disruptive behaviors or failing to take action when action is warranted; these behaviors and inactions may result in psychological or physiological distress for the people involved – and if left unaddressed, may progress into threatening situations [or result in temporary or permanent illness or injury]" (Clark, 2017, p. 14). I measured leader perceptions of uncivil behaviors and the frequency with which leaders have experienced or witnessed uncivil behaviors using the WICS by Clark (2014).

The WICS measured perceptions and frequency of uncivil behavior according to 4-point Likert scales. The instrument did not designate a numerical value for each response; therefore, I assigned a numerical value of 1 to 4 with responses of *Always* and *Often* coded at the lower end of the scale (1) and responses of *Never* coded at the upper end of the scale (4). In this way, questions with lower means (*M*) indicated greater perception of a behavior to be uncivil and a greater frequency of experience with an uncivil behavior in the last 12 months. I used the same numerical scale for both sets of questions.

Data Analysis Plan

Data analysis software and data screening procedures. I used IBM SPSS 25.0 software for data analysis. The use of SPSS software provides a suitable mechanism to calculate bivariate Pearson correlation and is compatible with the data collection platform, SurveyMonkey, allowing for a direct export of survey results to SPSS. To effectively manage the data, I created a codebook for data definitions in SPSS that assists in identifying and defining each variable and prevents confusion during later data analysis (Grove, Burns, & Gray, 2013). The data was cleaned and screened prior to statistical analysis. I examined the distribution of scores to determine if plausible statistical assumptions associated with correlational analysis had been met (see Warner, 2013). Outlier data makes it difficult to evaluate the relationship between variables and may have a disproportionate effect on the correlational test statistic (Warner, 2013). To preserve the integrity of the research design, I planned to remove extreme outlier data from the data set prior to statistical analysis. Finally, I planned to remove cases of

incomplete responses, a strategy consistent with complete case analysis. Respondents that failed to answer the Likert-style questions related to both variables, faculty incivility and job satisfaction, were dropped from the data set. This approach maintained the integrity of the dataset and provided a common basis for inference since the analysis was based on a consistent set of survey completers (see Molenberghs & Verbeke, 2013).

Research questions and hypotheses. I based analysis of data on the following research questions and hypotheses:

RQ1: What is the relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs?

$H_0$1: There is no relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

H_a1: There is a relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

RQ2: What is the relationship between leader experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs?

$H_0$2: There is no relationship between leader experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

H_a2: There is a relationship between leader experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

Analysis Plan

Statistical tests. I used a descriptive correlational design to analyze data collected from academic nurse leaders from ACEN-accredited programs at the associate degree level regarding their experiences with faculty incivility and their job satisfaction. The data analysis plan included calculation of descriptive statistics of demographic variables using SPSS 25.0 software to establish an accurate profile of the study sample. Furthermore, I calculated and reported descriptive statistics, including frequency distributions, measures of central tendency (mean, median, and mode), and dispersion statistics (range and standard deviations) for each Likert-scale item used to measure the study variables. For this study, I measured leader perceptions of faculty incivility and leader experiences with faculty incivility measured separately. To obtain scores for these subsets of the independent variable, I calculated a gross mean (*M*) and standard deviation (*SD*) for all items pertinent to each line of questioning on the WICS by Clark (2014). Job satisfaction was measured using the JSS and reported as the mean (*M*) and standard deviation (*SD*) across all items collectively. In addition, I extracted select items on the JSS to determine individual subscores for motivator and hygiene factors of job satisfaction in accordance with Herzberg's two-factor theory (see Hansen, 2001) as delineated in Table 1.

Table 1

Job Satisfaction Survey (JSS) Questions According to Job Motivator and Hygiene Factors

Item	Motivator Factor Questions
5	The degree of "challenge" I find in my job itself.
6	The appreciation I am shown for the work I do.
7	The opportunities I have for growth and self-improvement with the organization.
8	The opportunities I have for advancement at (name of organization)
10	The recognition I receive for the work I do.
12	The sense of accomplishment I derive from my work.
14	The opportunity I have for creativity and self-expression in my job.
15	The sense of achievement of contribution I receive from my work.
17	The actual duties and tasks inherent in the work I do.
18	The sense of important I get from my job.
23	The opportunities I have for promotion to more responsible jobs.
24	The amount of responsibility I am given in my jobs.

Item	Hygiene Factor Questions
1	The amount of money I make in terms of the type of work I do.
2	The policies and rules of (name of organization).
3	The general surroundings in which I work.
4	The way that people get along with each other on the job.
9	The amount of job security I have.
11	The overall quality of my work environment.
13	The general way in which I am treated by my immediate supervisor.
16	The stability of my employment at (name of organization).
19	The way in which the policies and rules of (name of organization) are administered.
20	The salary in terms of similar jobs in the (administrative) area.
21	The way in which people generally treat each other on my unit or work area.
22	The help and support I receive from my immediate supervisor.

Note: Adapted from "Job Satisfaction: Nurses' perceptions of a clinical ladder" (Master's Thesis) by Hansen, D. W. 2001, ProQuest Dissertation and Thesis Database (1407487), p. 41.

To answer RQ1, I used correlational testing to examine the relationship between leader perceptions of faculty incivility and leader job satisfaction (overall, motivator factors, and hygiene factors). The original analysis plan included the use of Pearson's correlation to determine the strength and direction of the association between leader perceptions of faculty incivility and leader job satisfaction with significance at the (α) 0.05 level (2-tailed). If statistically significant, the plan included calculation of the coefficient of determination, r^2, to describe the strength of the relationship and the proportion of variance in overall job satisfaction that is predictable from perceptions of incivility.

To answer RQ2, I used correlational testing to examine the relationship between leader experiences with faculty incivility within the last 12 months and leader job satisfaction (overall, motivator factors, and hygiene factors). The original analysis plan included the use of Pearson's correlation to determine the strength and direction of the association between leader experiences with faculty incivility and leader job satisfaction with significance at the (α) 0.05 level (2-tailed). If statistically significant, the plan included calculation of the coefficient of determination, r^2, to describe the strength of the relationship and the proportion of variance in overall job satisfaction that is predictable from leader experiences with faculty incivility.

Rationale. Researchers have argued that parametric testing, such as Pearson's *r*, is only appropriate for data measured at the continuous level (interval, ratio) suggesting that this type of analysis relies on calculation of the mean and standard deviation, which are inappropriate measures for ordinal data (Jamieson, 2004; McClure, 2005). Under this

line of thinking, applying the wrong statistical technique to a dataset increases the potential to make inaccurate conclusions regarding the relationship between variables and because normality cannot be assumed, parametric testing is contraindicated when using Likert-style data. Norman (2010) argued that this opinion fails to take into consideration the "robustness" of correlational analysis in addressing potential violations of assumptions (p. 627). According to Norman, Likert scales translate into numerical values that imitate interval data when summed across many items, allowing for the application of parametric testing. While the true distances between Likert scale responses cannot be "theoretically guarantee[d]", statistical computation of this numerical data is insensible to the level of measurement; therefore, is useful in making inferences about their differences (Norman, 2010, p. 627). Norman defended his position through research that applied parametric testing (Pearson's correlation) and nonparametric testing (Spearman correlation) to the same Likert data and determined that these different data analysis strategies yielded nearly identical results, even when the data were not normally distributed and skewed, furthering his argument that Pearson correlation is "extremely robust with respect to violations of assumptions" (p. 628).

Researchers consider Pearson's *r* an appropriate statistical analysis when applied to ordinal data (Norman, 2010) and is "common practice" when the collection of true interval data is not possible (Warner, 2013, p. 268). Application of correlational testing has been used in a variety of studies examining job satisfaction and/or incivility in nursing academe using Likert-type scales, including research by Casale (2017), Derby-Davis (2014), Mintz-Binder (2014), and Owens (2017), thereby providing a foundational

argument for use in this study. The original data analysis plan was consistent with the purpose of the study, to examine if a relationship exists between variables. Causal inference was intended, therefore, application of regression analysis was indicated, yet may be useful in future research.

Threats to Validity

Internal Validity

Threats to internal validity included instrumentation and social threats. The online survey consisted of three parts including a demographic section (see Appendix B), the WICS (Clark, 2014) to measure incivility, and the JSS (Sluyter et al., 1985) to measure respondent job satisfaction. Respondent fatigue is a concern when a survey is lengthy and time consuming to complete, when the questions are boring or difficult to answer, when numerous open-ended questions are asked, or when the questions are repetitive or mundane (Daily, 2017; "Respondent fatigue", 2008). I took this concern into consideration when selecting the instruments, choosing reliable tools that measured study variables using Likert-style questions non-repetitive in nature. In this way, the time needed to complete the surveys by participants was minimized and the likelihood of respondent fatigue was reduced.

Although the study design was not experimental in nature, interaction between participants was possible in that some could have belonged to the same professional nursing organizations or interacted with each other as a result of partnerships that may exist between institutions. Social threats to internal validity are often difficult to control and may be detrimental to data analysis if participants discuss answers to the survey

questions prior to participating in the study, impeding the ability to make accurate inferences about the unique experiences and opinions of the study sample (Maul & Katz, 2018). I addressed social threats by making the survey available to participants for a limited period of time and by encouraging participants to only reflect upon their unique perspectives and experiences when answering the questions.

External Validity

Potential threats to external validity for this study came mainly from respondent participation in the study and the degree to which the respondents represented the target population. In order to make valid inferences using survey data, the characteristics of the sample population needs to be in alignment with the characteristics of the target population (Fulton, 2018). When misaligned, nonresponse bias exists; therefore, the researcher cannot ascertain that the study results are an accurate reflection of the population in general. Threats to external validity are also increased when the researcher attempts to generalize results taken from one population and purport them as if from another population (Mitchell, 2018). To increase external validity regarding appropriate sample selection, I sent the survey to all nurse administrators meeting the inclusion criteria and provided enough time for participants to respond in order to meet the minimal response rate of 84 previously determined by G*Power analysis. Under this selection strategy, I assumed that the responses received would be an accurate representation of the target population. I planned to make recommendations for future research and replication studies in other populations based on my findings. However, I was careful not

to suggest that the results reflected any other populations than the population of interest, associate degree nurse administrators from ACEN-accredited programs.

Construct Validity

Construct validity is evidenced through the use of instruments that accurately and reliably measure the constructs they intend to measure (Creswell, 2014; Markus & Chia-ying, 2010). As a measure to ensure construct validity, I carefully crafted definitions of variables based on what is available in the literature to ensure clarity in meaning and alignment between all elements of the research study. Based on this understanding, I chose instruments deemed valid and reliable through appropriate and extensive statistical testing, thereby, minimizing threats to construct validity. Each instrument is based on established theoretical or conceptual models and have been found to show excellent internal consistency, with Cronbach alphas (α) at or greater than 0.96. Of particular note was use of the JSS by Sluyter et al. (1985) to measure job satisfaction that is based on Herzberg's two-factor theory, the theoretical framework for the study. In this way, the chosen instruments contributed positively to the alignment of the theoretical framework, definition of variables, and construct measurements.

Statistical Validity

Threats to statistical conclusion validity, associated with inaccurate inferences about the relationship between variables, arise when statistical assumptions are violated or when the sample size and statistical power are set too low (Creswell, 2014). To minimize these threats, I took care to determine if the data met all statistical assumptions associated with correlational testing, and that the sample met the appropriate size

determined through G*Power analysis. I set statistical power at 0.80 suggesting an 80% probability of correctly rejecting the null hypothesis which is consistent with the level set by other researchers who have examined factors related to job satisfaction in nursing education, including Derby-Davis (2014), Hudgins (2016), and Yarbrough et al. (2017).

Ethical Procedures

Ethics is at the foundation of good research practice and is critical to the protection of research participants and society at large (Doody & Noonan, 2016). A well planned study includes strategies aimed at reducing the risk of harm to participants through practices that protect participant autonomy, confidentiality, and anonymity. The target population of adult professional nurses serving in administrative roles in associate-level, ACEN-accredited programs did not fit the profile of a vulnerable population (see Creswell, 2014). Yet, I took steps to ensure that participants were not harmed physically, psychologically, socially, economically, or legally, all potential outcomes associated with poorly planned and/or unethical research (see Creswell, 2014; The National Academies, 2009).

Permissions. Contact information for the target population, academic nurse administrators from ACEN-accredited associate degree programs, is a matter of public record. Administrator names, credentials, telephone and facsimile numbers, and e-mail addresses are published on the ACEN website (www.acenursing.org) and searchable by state or country, by name of governing organization, and/or by program type. Each entry is available through free public access; therefore, I did not need to pursue any special agreements or permission to access participant contact information.

Because the study involved a survey of human subjects, IRB approval through Walden University was required (Walden University, Center for Research Quality, n.d.). Any reference to a subject's name or identifying information such as an e-mail address that may indicate place of employment was separated from the survey data through an option available in the SurveyMonkey platform, thereby ensuring anonymity and confidentiality. Permission to proceed with the study was at the discretion of and in accordance with Walden University IRB requirements.

Recruitment. I sent an invitation to participate via e-mail to all associate-level nurse administrators of ACEN-accredited programs. All recruitment e-mails were sent directly to the nurse administrator's e-mail address on file with the ACEN eliminating the need for snowball sampling or referrals, thereby reducing ethical concerns related to confidentiality. Additional measures to minimize ethical concerns related to recruitment included providing potential respondents with materials that clearly delineated the purpose of the study and the study design. Recruitment materials clearly delineated that participation was voluntary and could be withdrawn at any time. Furthermore, I provided my contact information within the e-mail and at the conclusion of the survey to give subjects the opportunity to ask questions about the study or rights as a participant.

Informed consent. According to IRB requirements, I obtained informed consent from subjects prior to data collection. The informed consent form followed the template provided by Walden University and included the following: (a) a brief description of the study, (b) how the participant's contact information was obtained, (c) my name and declaration as a doctoral student, (d) the purpose of the study, (e) a brief description of

the study procedures, including the amount of time data will be collected and an estimation of how long it will take to complete the survey, (f) the voluntary nature of the study with an acknowledgement that subjects may exit the survey at any time, (g) a statement related to risks and benefits of participation, (h) a description of measures to protect participant privacy, (i) my contact information, and (j) Walden University's IRB approval number (02-15-19-0561811) and expiration date (February 14, 2020) for the study. I made the consent form accessible via a web link embedded in the recruitment e-mail. After reading the consent form, respondents were asked to signify consent to participate by clicking on the "*Yes, I agree to participate*" button. Administrators not willing to give consent to participate were directed to click on the "No, I do not want to participate" button. Potential respondents could also close the e-mail or click out of the survey at any time.

Treatment of data. An important ethical concern related to data collection includes protecting a subject's privacy (The National Academies, 2009). I collected data in a manner that ensured confidentiality and anonymity, using a secure online electronic survey system, SurveyMonkey. I stored survey data using a password protected account, separating identifying information from the study's data of interest using an option in the SurveyMonkey platform. Once collected, I exported the data to SPSS for statistical analysis and stored all raw data in a password-protected electronic format in three separate locations, including on flash drive, external hard drive, and on a cloud storage system (Dropbox). In each instance, I put into place measures that limit access to and

maintenance of data in accordance to the requirements and timeframe set forth by the Walden University IRB, after which the data will be electronically destroyed.

Other ethical issues. The target population for the study included associate degree nurse administrators of programs accredited by the ACEN. As the researcher, my professional qualifications and credentials met the inclusion criteria for the study. Therefore, potential participants could have included peer colleagues, particularly from one Midwestern state, who may know me professionally and/or have interacted with me during professional association meetings. The potential for coercion on behalf of the researcher was minimized given the peer (versus supervisory) relationship with potential respondents. In addition, I refrained from discussing the survey questions with any colleagues meeting the inclusion criteria to avoid persuading a response and limited my interaction with all respondents to answering questions regarding the study's purpose, design, and rights of participants.

Summary

In Chapter 3, I outlined a detailed research plan for a quantitative, descriptive, correlational study designed to examine the relationship between faculty incivility and job satisfaction in academic nurse leaders at the associate degree level from ACEN-accredited programs. The target population for the study included a convenience sample of academic nurse administrators serving in administrative roles who have the responsibility and authority to carry out administrative and instructional activities for nursing education programs at the associate degree level. Demographic information and data related to the study variables were collected from a sample population of nursing

professionals meeting the inclusion criteria through the use of an online survey to measure the study variables using the WICS by Clark (2014) and the JSS by Sluyter et al. (1985). Descriptive analysis was planned to more fully understand the perceptions of academic nurse administrators toward faculty incivility and the frequency with which this population of academic administrators experience this phenomenon. I planned correlation testing to determine the relationship between administrator perceptions of and experiences with faculty incivility and their level of job satisfaction.

Also in Chapter 3, I outlined the plan for obtaining IRB approval prior to data collection and detailed important elements including the recruitment of subjects, obtaining informed consent, data security, and measures for protecting the privacy of study participants. The research plan accounted for potential threats to internal, external, construct, and statistical conclusion validity and put forward comprehensive measures to ensure that the study was ethically sound.

In Chapter 4, I provided a detailed explanation of the data collection and an in-depth analysis of the study results as they pertained to the research questions.

Chapter 4: Results

Introduction

The purpose of this descriptive correlational study was to determine if there is a relationship between faculty incivility and job satisfaction in academic nurse leaders at the associate degree level from ACEN-accredited programs. The study tested the assumptions of Herzberg's two-factor theory that suggests when certain factors, such as interpersonal relationships, are unfavorable, job satisfaction is negatively affected (Herzberg et al., 1959/2010).

I developed two research questions and associated hypotheses to guide the study.

RQ1: What is the relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs?

$H_0$1: There is no relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

H_a1: There is a relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

RQ2: What is the relationship between experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs?

$H_0$2: There is no relationship between experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

H_a2: There is a relationship between experiences with faculty incivility within the last 12 months and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs.

In Chapter 4, I explain how the data were collected in comparison to the original data collection plan and describe IRB processes and approval, the time frame allotted for data collection, actual recruitment and response rates, and baseline descriptive and demographic characteristics of the sample. In addition, I discuss the results of the data analysis and summarize the findings as they relate to the research questions and hypotheses.

Data Collection

Institutional Review Board

To ensure the study met ethical standards, I pursued approval through Walden University's IRB. Given the nature of the research design, approval from an outside organization was not necessary. I obtained notification of IRB approval on February 15, 2019 and began data collection shortly thereafter. Once the survey was launched, some potential respondents communicated that in order to participate, IRB approval through their home organization was necessary. In these instances, I provided additional information regarding the purpose of the research and the target population but did not pursue IRB approval through any external entities.

Recruitment and Data Collection

The target population for the study included all nurse administrators (without faculty status) of associate degree programs accredited by the ACEN in the United States. Contact information for all program administrators of ACEN-accredited programs, including administrator names, organizational information, credentials, titles, and contact information (including e-mail addresses), was a matter of public record and accessible through the ACEN website (www.acenursing.org). Prior to data collection, I anticipated manually extracting this information from the ACEN website. However, Dr. Stoll, Chief Executive Officer (CEO) of the ACEN, provided a spreadsheet of information, including the names and contact information of all administrators recognized by the ACEN from associate degree programs (see Appendix C), greatly assisting with the organization of recruitment information.

Due to the large sample size, I conferred with Walden University support staff prior to sending the recruitment e-mail and discovered that student e-mail accounts were limited to a distribution list of 300 or less per e-mail to avoid concerns of spam filtering by recipient accounts. On February 17, 2019, I sent the recruitment e-mail to 730 potential respondents in four separate e-mails. The original data collection plan called for reminder e-mails at Weeks 3 and 4; however, an additional reminder e-mail was sent at Week 2 to ensure all interested participants had adequate access to the survey via the web link. Reminders e-mails were sent on February 24, March 3, and March 11, 2019. Embedded in each recruitment and reminder e-mail was an introduction to the study's purpose and a web link that provided access to the study's consent form. After reading

the consent form, administrators interested in participating in the study were directed to click an affirmative response that provided access to the electronic survey. Administrators not interested in participating in the study could click on a "no" response or close out of the e-mail or survey at any time. The survey web link remained active until Sunday, March 17, 2019, constituting a 4-week data collection period.

Data analysis software, storage, and security. Following the data collection period, I exported the raw data from the SurveyMonkey platform to SPSS for analysis. I de-identified participant responses during the data collection process using an option available in the SurveyMonkey platform and stored the raw data in a password-protected electronic format in three separate locations, including on flash drive, external hard drive, and on a cloud storage system (Dropbox).

Baseline Characteristics of the Target Population

The target population for this study was administrators from ACEN-accredited associate degree nursing programs. According to the spreadsheet of contact information received from the ACEN, the accreditation body recognizes 730 administrators from associate-level programs in the United States, representing the entire target population of the study. Unfortunately, the ACEN does not publish a demographic profile for this population of nursing leaders. Bergquist (2018) conducted a quantitative study examining empowerment, autonomy, and intent to stay for nursing directors in academia from a variety of program and degree levels and from a sample of 76 directors and learned that approximately 88% of the sample were female and 93.5% were over the age of 40 years with the largest percentage falling in the 51 to 60 age category. Bergquist

also learned that the average number of leadership positions held by respondents over their careers was six and the highest percentage of respondents (*n* = 53, 69.7%) were in their current roles between 1 and 10 years. Bergquist did not report on race or ethnicity of the sample. LaSala et al. (2016) engaged in qualitative research, interviewing 14 administrators from nationally accredited nursing programs in the United States. All but one participant served at the baccalaureate or higher level. Demographic data revealed similar results as Bergquist with participants reportedly all female and primarily white with an average age of approximately 59 years. Interestingly, the average number of years serving in the role of administrator was slightly higher than in other studies with an average of 13.5 years which may be explained by the small sample size and limited generalizability of findings (LaSala et al., 2016).

Mintz-Binder (2014) and Mintz-Binder and Fitzpatrick (2009) studied job satisfaction in associate degree nursing program directors specifically and reported similar baseline descriptive statistics as Bergquist (2018). In the 2009 study, the sample demographic for Mintz-Binder and Fitzpatrick's research included 61 associate degree registered nursing program directors. All respondents in the study were female with a mean age of 55.3 years. Seventy-seven percent of the sample were Caucasian (*n* = 47) and reported longevity in the position varied between 1 month to 20 years. In similar research using a national sample of like-administrators (*N* = 242), Mintz-Binder reported that 97.9% of the total respondents were women between the ages of 51 and 60 years old (*n* = 154, 63.6%) with the majority of directors in their positions for less than 5 years (*n* = 143, 59.1%).

Recognizing that many nursing program administrators hold faculty status within their organization or transition into the role from a faculty position, I examined statistics published by the NLN as part of the *NLN Faculty Census Survey of Schools of Nursing 2016 – 2017: Executive Summary* (NLN, 2017) to better understand the demographic foundation of the target population. Reporting data from 55% of 1,195 member schools, the NLN revealed that 96% of full-time faculty members were female with the largest group (approximately 70%) over the age of 45, statistics relatively like those determined by Bergquist (2018). In addition, the NLN found that only 16.2% of respondents were from a minority group with approximately 9% African American, 4% Hispanic, 3% Asian, 0.4% American Indian, and 0.6% described as multiracial. In the absence of more population-specific data, these statistics illuminate the characteristics of nursing educators (in general) working in academia.

Results

Sample

The demographic section of the survey included eight questions to evaluate the characteristics of the sample and to determine whether respondents met the inclusion criteria for the study. Inclusion criteria required a respondent to be a recognized program administrator from an ACEN-accredited associate degree nursing program and hold administrator (not faculty) status within the academic institution. The survey was sent to 730 program administrators from associate degree nursing programs on record with the ACEN. From this population, I received notifications that 18 of the e-mail surveys were undeliverable and eight of the administrators were no longer in the position or with the

academic institution. It is possible that another nursing administrator had assumed the role in these instances; however, in keeping with the list of recognized administrators provided by the ACEN, I did not pursue replacement participants. In addition, I received correspondence from eight administrators indicating that further IRB approval through their home institution was required, of which I did not pursue due to time and resource constraints.

At the conclusion of the data collection period, I received 279 responses. Of these responses, 266 acknowledged being a designated nurse administrator from an associate degree nursing program accredited by the ACEN. To further clean the data, I removed incomplete responses and extracted only those from program administrators that acknowledged holding administrator status within their organization resulting in a sample size of 142, surpassing the sample size requirement of 84 determined by G*Power analysis.

It is important to note that the original research plan included removal of extreme outlier data in order to meet the statistical assumptions associated with correlational methodology. However, a careful examination of stem-and-leaf and boxplots for data related to respondent perceptions of and experiences with faculty incivility revealed interesting results. Outlier data points were most commonly observed for responses related to perceptions of incivility which was measured using 23 Likert-style questions from the WICS (see Clark, 2014). In many instances, only one response option was heavily chosen by participants, causing SPSS to group together the remaining responses and label them as extreme. In these instances, I argue that in the presence of an adequate

sample size, using nonparametric testing that is less sensitive to outlier data, and because the Likert-style items were measuring participant perceptions that could represent valuable data points, variation is justified (Gill, 2017), therefore, the outlier data points should not be excluded from the study sample.

I also noted a few instances in which a respondent identified a behavior as never uncivil, when in fact, the literature and reason would suggest otherwise. For example, Item Number 10 on the WICS asks whether making physical threats toward someone is always, usually, sometimes, or never an uncivil behavior. According to SPSS output, 22 of the 142 respondents answered that this behavior is not uncivil in some instances, representing outlier responses that vary statistically from the remainder of the sample. While it is difficult to determine the underlying motivation of these outlier responses, it is possible that the respondent's personal experiences and/or interpretation of the question influenced the response and are an accurate reflection of lived experiences and should, therefore, remain in the sample.

Not all items from the WICS contained extreme data points. This trend revealed that in general and with few exceptions, more items were answered deliberately and were not subject to response bias that occurs when participants respond inaccurately or falsely to questions. In addition, the data based on 4- and 7-point Likert scales, further limited response variation. Warner (2013) acknowledged the absence of a uniform rule regarding inclusion/exclusion of outlier data for all research situations. Instead, called upon researchers to make reasonable judgements about how to handle extreme scores and outliers based on common sense. Keeping in mind that the data points represented

subjective responses and that the data were collected using Likert-type questions, I decided to include outlier data in my analysis and amend my research methodology accordingly.

The inclusion of outlier data points also protected the required sample size determined by G*Power analysis. As mentioned previously, 142 respondents who met the inclusion criteria agreed to participate in the study. Excluding outlier data would have reduced the sample size to 45, well below the number needed to meet statistical power. As an extra measure to ensure that inclusion of the outlier data did not inaccurately skew my analysis, I re-examined correlation output with a sample size of 45 excluding the outlier data and arrived at the same results.

A review of the demographic characteristics of the study's sample (N = 142) revealed that the average participant was a White (Caucasian) female between the ages of 55 and 64. Years in academic administration and within the current role as program administrator both revealed issues with longevity. Program administrators who had 5 years or less of academic administrative experience comprised the largest group of respondents (f = 64, 45%). Likewise, the largest percentage of respondents (f = 88, 62%) have served as program administrators within their organization for 5 years or less. The personal and professional profile of respondents for the study was consistent with characteristics of nursing directors in studies mentioned previously and the profile of nursing educators as reported by the NLN (2017). For this study, the sample appears to have consisted of relatively new program administrators with limited administrative

experience in academia. Table 2 outlines the personal and professional profile of the study's sample.

Table 2

Descriptive Statistics of Demographic and Professional Variables

Characteristic	*f*	Percent of sample (*N* = 142)
Gender		
Male	5	3.5
Female	137	96.5
Age		
25 to 24	3	2.1
35 to 44	12	8.5
45 to 54	41	28.9
55 to 64	72	50.7
65 to 74	12	8.5
75 or older	2	1.4
Race/ethnicity		
Asian/Pacific Islander	1	0.7
Black or African American	7	4.9
Hispanic	3	2.1
White/Caucasian	129	90.8
Multiple ethnicity/Other	2	1.4
Years of academic administrative experience		
>1 – 5	64	45.0
6 – 10	42	29.5
10 – 15	14	9.9
16 – 20	13	9.2
21 – 25	3	2.1
26 – 30	5	3.5
31 – 35	1	>1
Years as nurse administrator at current organization		
>1 – 5	88	62.0
6 – 10	35	24.7
10 – 15	11	7.7
16 – 20	5	3.5
26 – 30	3	2.1
31 – 35		
Title of administrative position		
Dean	36	25.4
Associate dean	13	9.2
Assistant dean	1	1.4
Program director	62	43.7
Other	29	20.4

Note. *N* = 142

Descriptive Statistics of Sample Variables

To examine the relationship between faculty incivility and academic nurse leader job satisfaction, I measured the statistical correlation between variables. I collected data using an e-mail-based survey, operationalizing each variable according to an associated scale. I measured perceptions of and experiences with faculty incivility using the WICS (see Clark, 2014) and academic nurse leader job satisfaction using the JSS (see Sluyter et al, 1985). Neither instrument has been used in the target population; therefore, I analyzed factor analysis and Cronbach's alpha statistics for each using SPSS software to establish validity and reliability estimates.

Measuring faculty incivility. The variable related to perceptions of faculty incivility was measured using 23 Likert-style items on the WICS (Clark, 2014). The WICS asks respondents to indicate whether a behavior is *always*, *usually*, *sometimes*, or *never* uncivil. Initially, I examined the factorability of the 23 items. Kaiser-Meyer-Olkin testing revealed adequate sampling (KMO = 0.948), well above the recommended value of 0.600. Bartlett's test of sphericity, which tests the overall significance of correlations within the matrix, was also significant ($x^2(253) = 3552.341$, $p < 0.001$). The communalities explaining the extent to which an item correlated with the other items were all at or above 0.492, further confirming intercorrelation between items. Given these indicators, I determined factor analysis for all 23 items on this dimension to be suitable. The Cronbach's alpha for the items examining perceptions of faculty incivility was $\alpha = 0.97$ indicating excellent internal consistency reliability. This statistic is consistent with reliability statistics previously reported (Clark et al., 2013).

The variable related to experiences with faculty incivility in the 12 months prior to taking the survey was measured using the same 23 Likert-style items on the WICS (see Clark, 2014); however, respondents were asked to indicate whether they had experienced the behavior *often*, *sometimes*, *rarely*, or *never*. I used factor analysis to determine construct validity in this population of nursing professionals. Sampling adequacy was adequate (KMO = 0.901). Barlett's test of sphericity revealed a statistically significant result, indicating overall significance of correlations within the matrix ($x^2(253) = 1580.186$, $p < 0.001$). Intercorrelation of items was verified with all communalities at or above 0.469. Based on these findings, factor analysis was determined to be suitable on this dimension for all items. Like the perception items, the Cronbach's alpha for the experiences items indicated excellent internal consistency reliability ($\alpha = 0.933$) which is consistent with measures previously reported in the literature (Clark et al., 2013). Table 3 shows the descriptive statistics for the WICS.

Measuring job satisfaction. The outcome variable, job satisfaction, was operationalized using the JSS by Sluyter et al. (1985). The tool included 24 items which collectively measured overall job satisfaction. A review of the literature revealed that the instrument had not been previously used in this population; therefore, I examined the validity and reliability of the tool. The instrument's originators, Sluyter et al. extrapolated two subsets of questions thought to measure factors associated with the latent variable, job satisfaction, including motivator and hygiene factors. Factor analysis revealed that subset items for each factor loaded together favorably in this population. The KMO which tested sampling adequacy for the motivator subset of items was

adequate at 0.890. Barlett's test of sphericity for the motivator subset showed a statistically significant correlation ($x^2(66) = 1404.607$, $p < 0.001$) between items. Communalities for all items were at or above 0.611.

The KMO for the hygiene subset of items on the JSS equaled 0.789, slightly lower than the motivator subset; however, still adequate for further factor analysis. Barlett's test of sphericity validated the correlation between items with a test statistic of $x^2(66) = 1325.220$, $p < 0.001$. Communalities for the motivator subset components were adequate at or above 0.557. I determined the factor analysis to be suitable for this subset of items.

For this study, the Cronbach alpha measuring overall job satisfaction was excellent ($\alpha = 0.955$) and consistent with values previously reported in the literature when used in other populations (Curnow, 1990; Derby-Davis, 2014). Table 3 shows the descriptive statistics for the JSS.

Table 3

Descriptive Statistics for Survey Tools and Variables

Variable	Scale	*N*	Items	*M*	*SD*	*α*
Perceptions of faculty incivility	WICS	142	23	38.24	16.20	.97
Experiences with faculty incivility	WICS	142	23	63.20	12.69	.933
Job satisfaction	JSS	142	24	112.16	26.01	.955

Note. WICS = Workplace Incivility/Civility Survey, JSS = Job Satisfaction Survey

Statistical Analysis

Data cleaning and screening. I examined stem-and-leaf and boxplots to screen for outlier and extreme data points as a measure to evaluate the sample size, but also as

part of pre-data screening. After careful consideration and to protect the integrity of the sample size, I decided to amend the original research plan to include nonparametric testing and retain outlier data in my analysis. The final sample size for this study was $N = 142$ with 100% of respondents completing all Likert-style questions. There were no missing cases in the data set. The sample size, therefore, exceeded the sample determined by G*Power analysis which was set at 84.

The original research design included parametric correlation testing to examine the relationship between variables. In addition to the detection of outlier data points evident on stem-and-leaf and boxplots, visual examination of histogram data for the variables revealed that in several cases, the distribution did not meet normality assumptions. Follow-up evaluation using one-sample Kolmogorov-Smirnov testing confirmed that the distributions for all factors did not meet normality assumptions with the exception of the hygiene factor variable related to job satisfaction. Therefore, I performed Spearman correlation analyses to determine the relationship between factors. Spearman rho correlation is a nonparametric test that can be used to assess the strength of the relationship between ordinal variables and is useful when study variables that are not normally distributed (Warner, 2013). In addition, Spearman's correlation is less sensitive to the presence of strong outliers that could otherwise impact the results of parametric testing (Warner, 2013). Although Pearson's correlation testing has been used more frequently by researchers to examine variables associated with job satisfaction and incivility, such as in studies by Flynn and Ironside (2018), Hudgins (2016), Jeffers and Mariani (2017), and Owens (2017), Spearman rho correlation has been used successfully

in this area by scientists such as Mintz-Binder (2014) and Mintz-Binder and Sanders (2012).

Statistical Analysis Findings

Descriptive statistics for variables

Job satisfaction. I measured job satisfaction using the JSS developed by Sluyter et al. (1985). The instrument, based on Herzberg's two factor theory (Herzberg et al., 1959/2010), consisted of 24 Likert-style items centered on six motivator factors (advancement, recognition for achievement, the work, responsibility, and growth/advancement) and six hygiene factors (policy and administration, supervision, interpersonal relationships, working conditions, salary, status, and security). Participants were asked participants to rate their level of satisfaction in each of these areas using a 7-point Likert scale ranging from 1 (*not satisfied*) to 7 (*completely satisfied*). The maximum score possible for the instrument was 168, representing complete job satisfaction (*completely satisfied*). The minimum score possible for the instrument was 24, representing complete dissatisfaction (*not satisfied*). Table 4 outlines descriptive statistics for each item on the JSS.

Table 4

Descriptive Statistics for Items on the JSS

	M (*SD*)	Median	Mode	95% CI	Range
Motivator Factors					
Degree of job "challenge"	4.96 (1.49)	5.00	6.00	[4.72, 5.21]	6.00
Appreciation for work	4.26 (1.67)	4.00	6.00	[3.98, 4.54]	6.00
Opportunities for growth	4.53 (1.65)	4.50	6.00	[4.25, 4.80]	6.00
Opportunity for advancement	4.07 (1.72)	4.00	4.00	[3.78, 4.36]	6.00
Recognition for work	4.32 (1.53)	4.00	3.00	[4.07, 4.58]	4.00
Sense of accomplishment	5.39 (1.21)	6.00	6.00	[5.18, 5.59]	6.00
Opportunity for creativity	5.14 (1.42)	5.00	6.00	[4.90, 5.37]	6.00
Sense of achievement	5.44 (1.27)	6.00	6.00	[5.22, 5.65]	6.00
Duties and inherent tasks	4.71 (1.29)	5.00	4.00	[4.49, 4.92]	5.00
Sense of importance	5.21 (1.34)	5.00	6.00	[4.98, 5.43]	6.00
Opportunities for promotion	4.11 (1.69)	4.00	4.00	[3.82, 4.39]	6.00
Amount of responsibility	5.00 (1.51)	5.00	6.00	[4.76, 5.26]	6.00
Hygiene Factors					
Amt. of money for type of work	3.96 (1.64)	4.00	3.00	[3.69, 4.23]	6.00
Organization policies/rules	4.33 (1.29)	4.00	4.00	[4.11, 4.54]	6.00
General surroundings	5.06 (1.26)	5.00	6.00	[4.85, 5.28]	6.00
The way people get along	4.36 (1.66)	5.00	6.00	[4.09, 4.64]	6.00
Job security	4.74 (1.71)	5.00	4.00	[4.46, 5.03]	6.00
Quality of work environment	4.72 (1.34)	5.00	6.00	[4.50, 4.94]	4.00
Way treated by supervisor	5.29 (1.69)	6.00	7.00	[5.00, 5.57]	6.00
Stability of employment	4.99 (1.63)	5.50	6.00	[4.72, 5.27]	6.00
Admin. of policies/procedures	4.20 (1.53)	4.00	4, 5	[3.94, 4.46]	6.00
Salary in terms of similar jobs	4.03 (1.77)	4.00	4.00	[3.73, 4.33]	6.00
Way people treat each other	4.41 (1.72)	5.00	6.00	[4.13, 1.70]	6.00
Help/support from supervisor	5.02 (1.79)	4.00	6.00	[3.82, 4.39]	6.00

Note: Descriptive statistics for the Job Satisfaction Survey (Sluyter et al., 1985), $N = 142$

The JSS revealed that overall, the sample was relatively satisfied in their role as program administrator ($M = 112.16$, $SD = 26.01$). Respondents reported being most satisfied with the sense of achievement and accomplishment derived from their work, their treatment by the immediate supervisor, the sense of importance achieved from the job, and opportunities to be creative and engage in self-expression. Respondents were

least satisfied with the amount of money earned for the type of work completed, their salary in terms of similar jobs in the administrative area, opportunities for advancement, and the way policies and rules within the organization are administered.

I examined mean scores for the motivator and hygiene factor items according to theoretical construct and determined that respondent satisfaction with motivator factors, such as achievement, recognition, the work itself, responsibility, and growth and advancement opportunities, measured between *satisfied* and *considerably satisfied* (*M* = 4.76, *SD* = 1.15). Mean scores on hygiene factor items, including organization policy and administration, supervision, interpersonal relationships, working conditions, salary, security, and status, measured slightly lower (*M* = 4.58, *SD* = 1.10); however, remained in the *satisfied/considerably satisfied* range.

Perceptions of faculty incivility. I measured perceptions of faculty incivility using the WICS created by Clark (2014). Nearly half of respondents reported faculty incivility to be a moderate (*n* = 40, 28.2%) to serious (*n* = 27, 19%) problem in the workplace (see Table 5). These findings are consistent with previous studies that found a majority of faculty perceived faculty incivility to be a moderate to serious problem in their work environment (Clark, 2013; Clark et al., 2013; Casale, 2017).

Table 5

Descriptive Statistics for Perceptions of Incivility as a Problem in the Workplace

	Frequency	Valid Percent	Cumulative Percent
No problem at all	5	3.6	3.6
Mild problem	66	47.1	50.7
Moderate problem	40	28.6	79.3
Serious problem	27	19.3	98.6
Don't know/Can't answer	2	1.4	100.0
Total	140	100.0	

Note. Descriptive statistics from the Workplace Civility/Incivility Survey (Clark, 2014)

The WICS instrument (Clark, 2014) also included a list of 23 behaviors thought to be uncivil and asked respondents to indicate whether a behavior is *always*, *usually*, *sometimes*, or *never* uncivil using a Likert-style scale. Participants were directed to consider their experiences and interactions with faculty when answering survey items. The maximum possible score for perceptions of incivility indicating all behaviors are uncivil all of the time was 92. The minimum possible score was 23, representing the notion that all of the behaviors are civil all of the time. An analysis of scale statistics revealed a total mean score (M) of 38.24 (SD = 16.20). The mean score across items was M = 1.65 (SD = 0.70). In both instances, the data suggest that perceptions of listed behaviors lie somewhere between *always* and *usually* uncivil.

The five behaviors perceived to be the most uncivil (measured according to item mean) included personal attacks or threatening comments, rude remarks, put-downs, or name-calling, engaging in rumors or gossip, being set up to fail, and rude, non-verbal behaviors or gestures. The five behaviors perceived to be the least uncivil included the use of personal technology to disrupt and/or interrupt interactions, challenging another's

knowledge or credibility, consistently interrupting, invoking religious or political values or beliefs to impose an outcome, and engaging in secretive meetings behind closed doors. The descriptive statistics for items measuring perceptions of uncivil behavior are outlined in Table 6.

Table 6

Descriptive Statistics for Perceptions of Uncivil Faculty Behaviors

	M (*SD*)	Median	Mode	95% CI	Range
Set someone up to fail	1.38 (0.87)	1.00	1.00	[1.23, 1.52]	3.00
Abuse position/authority	1.49 (0.93)	1.00	1.00	[1.34, 1.65]	3.00
Make rude remarks/put-downs	1.34 (0.84)	1.00	1.00	[1.20, 1.48]	3.00
Fail to perform workload	1.88 (0.90)	2.00	1.00	[1.73, 2.03]	3.00
Consistently interrupt	2.00 (0.86)	2.00	1.00	[1.86, 2.14]	3.00
Engage in secretive meetings	2.04 (0.91)	2.00	3.00	[1.88, 2.19]	3.00
Invoke religious/political values	2.03 (1.14)	2.00	1.00	[1.84, 2.22]	3.00
Intentionally exclude/leave out	1.86 (0.89)	2.00	1.00	[1.72, 2.01]	3.00
Personal attack/threat comment	1.33 (0.84)	1.00	1.00	[1.33, 1.19]	3.00
Physical threats	1.43 (1.03)	1.00	1.00	[1.26, 1.60]	3.00
Racial/ethnic/etc. slurs	1.43 (1.00)	1.00	1.00	[1.26, 1.60]	3.00
Refuse to listen/communicate	1.74 (0.90)	1.50	1.00	[1.59, 1.89]	3.00
Resist/friction-prevent change	1.86 (0.90)	2.00	1.00	[1.71, 2.01]	3.00
Take credit for work of others	1.76 (0.98)	1.00	1.00	[1.59, 1.92]	3.00
Gossip/turn other against you	1.36 (0.79)	1.00	1.00	[1.23, 1.50]	3.00
Technology to dis/interrupt	1.90 (0.94)	2.00	1.00	[1.74, 2.06]	3.00
Inattentive/distract at meetings	1.77 (0.88)	2.00	1.00	[1.62, 1.92]	3.00
Breech confidence	1.72 (0.89)	1.00	1.00	[1.57, 1.87]	3.00
Challenge knowledge/credible	1.91 (0.87)	2.00	1.00	[1.76, 2.05]	3.00
Circulate emails w/o permission	1.46 (0.94)	1.00	1.00	[1.31, 1.62]	3.00
Circumvent grievance process	1.69 (0.91)	1.00	1.00	[1.53, 1.84]	3.00
Entitled/narcissistic attitude	1.57 (0.88)	1.00	1.00	[1.42, 1.72]	3.00
Make rude non-verbal gestures	1.39 (0.81)	1.00	1.00	[2.53, 2.86]	3.00

Note. Descriptive statistics related to perceptions of uncivil behavior from the WICS (see Clark, 2014). $N = 142$.

Experiences with faculty incivility. The variable related to experiences with faculty incivility in the 12 months prior to taking the survey was measured using the same 23 Likert-style items on the WICS (see Clark, 2014); however, respondents were asked to indicate whether they had experienced the behavior *often*, *sometimes*, *rarely*, or *never*. Participants were directed to consider their experiences and interactions with faculty when answering survey items. The maximum possible score for experiences with faculty incivility was 92. The minimum possible score was 23, indicating that the respondent had never experienced any uncivil behaviors. An analysis of scale statistics revealed a total mean score (*M*) of 63.20 (*SD* = 12.69), reflecting infrequent experiences with faculty incivility. The mean score across items was *M* = 2.75 (*SD* = 0.55) suggesting that on average, respondents *sometimes* or *rarely* experienced uncivil behaviors by faculty in the last 12 months.

The five uncivil faculty behaviors experienced most frequently by study participants included being consistently interrupted, working with faculty that consistently fail to perform his or her share of the workload, inattentive or distracting behavior during meetings, resisting or creating friction to prevent change, and the use of personal technology in a way that is disruptive. The five behaviors experienced the least included being subject to personal attacks or threatening comments, being discredited by the circulation of private e-mails without knowledge or permission, the imposition of personal religious or political values or beliefs to impose an outcome, being the subject of racial, ethnic, sexual, gender, or religious slurs, and receiving physical threats. The

descriptive statistics for items measuring experiences with faculty incivility are provided in Table 7.

Table 7

Descriptive Statistics for Experiences with Faculty Incivility

	M (*SD*)	Median	Mode	95% CI	Range
Set someone up to fail	3.08 (0.88)	3.00	4.00	[2.93, 3.23]	3.00
Abuse position/authority	2.99 (0.93)	3.00	4.00	[2.84, 3.15]	3.00
Make rude remarks/put-downs	2.75 (1.00)	3.00	3.00	[2.58, 2.92]	3.00
Fail to perform workload	2.11 (0.82)	2.00	2.00	[1.98, 2.25]	3.00
Consistently interrupt	2.04 (0.81)	2.00	2.00	[1.91, 2.18]	3.00
Engage in secretive meetings	2.39 (0.88)	2.00	2.00	[2.25, 2.54]	3.00
Invoke religious/political values	3.45 (0.68)	4.00	4.00	[3.34, 3.56]	3.00
Intentionally exclude/leave out	2.66 (0.91)	3.00	3.00	[2.50, 2.81]	3.00
Personal attack/threat comment	3.14 (0.92)	3.00	4.00	[2.98, 3.29]	3.00
Physical threats	3.81 (0.47)	4.00	4.00	[3.74, 3.89]	2.00
Racial/ethnic/etc. slurs	3.66 (0.61)	4.00	4.00	[3.56, 3.76]	3.00
Refuse to listen/communicate	2.47 (0.90)	2.00	2.00	[2.32, 2.62]	3.00
Resist/friction-prevent change	2.23 (0.79)	2.00	2.00	[2.10, 2.36]	3.00
Take credit for work of others	2.81 (0.86)	3.00	3.00	[2.66, 2.95]	3.00
Gossip/turn other against you	2.46 (1.00)	2.00	3.00	[2.30, 2.63]	3.00
Technology to dis/interrupt	2.34 (0.89)	2.00	2.00	[2.19, 2.48]	3.00
Inattentive/distract at meetings	2.11 (0.84)	2.00	2.00	[1.97, 2.25]	3.00
Breech confidence	2.79 (0.83)	3.00	3.00	[2.65, 2.93]	3.00
Challenge knowledge/credible	2.46 (0.89)	2.00	3.00	[2.32, 2.61]	3.00
Circulate emails w/o permission	3.29 (0.89)	4.00	4.00	[3.14, 3.44]	3.00
Circumvent grievance process	2.76 (0.94)	3.00	3.00	[2.61, 2.92]	3.00
Entitled/narcissistic attitude	2.69 (1.00)	3.00	2.00	[2.53, 2.86]	3.00
Make rude non-verbal gestures	2.89 (0.97)	3.00	4.00	[2.73, 3.06]	3.00

Note. Descriptive statistics related to experiences with faculty incivility in the last 12 months from the Workplace Civility/Incivility Survey (Clark, 2014). $N = 142$.

Correlation

Research Question 1 (RQ1). The first research question (RQ1) asked: What is the relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-

accredited programs? The null hypotheses ($H_0$1) purported there is no relationship between administrator perceptions of faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs. The alternative hypotheses (H_a1) for this research question purported there is a relationship between administrator perceptions of faculty incivility and job satisfaction in this population of leaders. I analyzed the data using nonparametric statistical methods to determine whether to accept or reject the null hypothesis for this research question.

The results of nonparametric testing for this research question revealed there was no statistically significant correlation between perceptions of faculty incivility and overall leader job satisfaction or hygiene and motivator factors. Table 8 illustrates the correlation between variables. Based on the results of the Spearman's correlational analysis, I failed to reject the null hypothesis for RQ1 concluding there is insufficient evidence that a relationship between variables exists.

Table 8

Spearman Rank Order Correlations between Perceptions of Faculty Incivility and Job Satisfaction Variables

	Overall job satisfaction	Motivator factors	Hygiene factors
Perception of faculty incivility	-0.046 (p = 0.584)	-0.061 (p = 0.469)	-0.021 (p = 0.802)

Note. N = 142. Significance was set at the 0.05 level (2-tailed).

Research Question 2 (RQ2). The second research question (RQ2) asked: What is the relationship between administrator experiences with faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs? The null hypotheses ($H_0$1) purported there is no relationship

between administrator experiences with faculty incivility and job satisfaction of academic nurse leaders at the associate degree level from ACEN-accredited programs. The alternative hypotheses (H_a1) for this research question purported there is a relationship between administrator experiences with faculty incivility and job satisfaction in this population of leaders. I analyzed the data using nonparametric statistical methods to determine whether to accept or reject the null hypothesis for this research question.

The results of nonparametric testing for this research question revealed there is a statistically significant correlation between administrator experiences with faculty incivility and overall leader job satisfaction, and to both job satisfaction subscales (motivator and hygiene factors). Table 9 illustrates the correlation between variables. Based on the results of the Spearman's correlational analysis, I rejected the null hypothesis for RQ2 concluding there is sufficient evidence to suggest that a relationship between variables exists.

Table 9

Spearman Rank Order Correlations between Administrator Experiences with Faculty Incivility and Job Satisfaction Variables

	Overall job satisfaction	Motivator factors	Hygiene factors
Administrator experiences with faculty incivility	0.355* ($p < 0.01$)	0.324* ($p < 0.01$)	0.368* ($p < 0.01$)

Note. *Correlation is significant at the 0.01 level (2-tailed). $N = 142$.

According to the SPSS output, all correlations were significant at the 0.01 level (2-tailed). Spearman correlation coefficients illustrated small to moderate correlations between the independent variable, administrator experiences with faculty incivility, and

each subscale of the dependent variable including overall job satisfaction, motivator, and hygiene factors. Overall job satisfaction was statistically related to experiences with faculty incivility with a correlation coefficient of $r_s = 0.355$ ($p < 0.01$). The weakest relationship was between experiences with faculty incivility and items that were analyzed collectively as motivators factors of job satisfaction ($r_s = 0.324$, $p < 0.01$) which included a sense of achievement, recognition, and responsibility, the work itself, and opportunities for growth and advancement. The strongest relationship was between experiences with faculty incivility and items analyzed collectively as hygiene factors of job satisfaction ($r_s = 0.368$, $p < 0.01$) which included organizational policy and administration, supervision, the quality of interpersonal relationships, and a variety of working conditions. In each instance, relationships between variables were positively correlated suggesting that as experiences with faculty incivility increase in frequency, overall satisfaction with the job and its associated factors decrease.

Summary

In summary, the results of the statistical analyses for the study were suitable to edify the work experience of a sample of academic nurse leaders serving at the associate degree level. Descriptive statistics revealed that in general, the study sample was satisfied in the role of program administrator and largely satisfied with factors associated with the intrinsic and extrinsic elements of the job. However, when confronted with a list of potentially uncivil behaviors, study participants validated that these behaviors were thought of as always or usually uncivil; however, were experienced with relative infrequence (sometimes or rarely).

The data analyses were also adequate to answer two research questions. Using nonparametric testing, I retained the null hypothesis for the first research question and determined that there is insufficient evidence that a relationship exists between administrator perceptions of faculty incivility and leader job satisfaction. However, the data showed there was a statistically significant relationship between administrator experiences with faculty incivility and their job satisfaction, leading me to reject the null hypothesis for the second research question. Results of the Spearman correlation indicated that there is a small to moderate, positive association between experiences with faculty incivility and job satisfaction, suggesting that as instances with faculty incivility decrease, job satisfaction increases.

The results of the analyses regarding the relationships between perceptions of and experiences with faculty incivility and leader job satisfaction were revealing and contribute to a greater understanding of the work experience of at least one population of academic nurse leader. In Chapter 5, I provide an interpretation of the findings and examine the implications within the context of the theoretical framework and existing literature. Furthermore, I discuss the limitations associated with the study and purport recommendations as they pertain to positive social change, to nursing education, and to the discipline of nursing as a whole.

Chapter 5: Discussion, Conclusion, and Recommendations

Introduction

Strong nursing leadership is recognized as an essential element in meeting the needs of today's complex healthcare system and the patients that use it (IOM, 2010). Leadership in academia is not exempt from this important role given the responsibilities that academic nurse leaders have in the creation of an enriching educational environment that models the professional work atmosphere expected in the clinical setting (Young et al., 2019) and in preparing the next generation of competent nurses (Flynn & Ironside, 2018; Morton, 2014). Yet, little is known about the work experiences of academic nurse leaders, creating an opportunity for research aimed at better understanding the leader work environment and a factor that may influence leader recruitment, retention, and attrition (Hudgins, 2016; Mintz-Binder, 2014; Steege et al., 2017).

The purpose of this descriptive, correlation study was to determine if there is a relationship between faculty incivility and job satisfaction in academic nurse leaders at the associate degree level. Furthermore, I aimed to test the assumptions of Herzberg's two-factor theory that proposes a correlation between the interpersonal relationships encountered on the job and job satisfaction (see Herzberg et al., 1959/2010).

Using nonparametric testing, I concluded that there is no significant relationship between administrator perceptions of faculty incivility and the job satisfaction of academic nurse administrators from associate degree programs accredited by the ACEN in the United States. However, I did find suitable evidence of a significant relationship between administrator experiences with faculty incivility and their job satisfaction. More

specifically, I denoted a positive relationship between variables that suggested when experiences with uncivil faculty behavior increase, job satisfaction ratings decrease. In this final chapter, I will interpret the study findings and examine the implications within the context of the existing literature and the theoretical framework. I will also describe the limitations of the study, as well as present recommendations for future research and discuss implications as they pertain to positive social change, nursing education, and nursing practice at large.

Interpretation of the Findings

Despite the importance of strong nursing leadership in meeting the needs of today's complex healthcare system and shaping the atmosphere in which nursing care is delivered (Flynn & Ironside, 2018; IOM, 2010; Kelly & Adams, 2018; Haggman-Laitila & Romppanen, 2018), little is known about the work experience of nursing leaders and the factors that influence leader recruitment, retention, and attrition (Hudgins, 2016; Mintz-Binder, 2013; Mintz-Binder, 2014; Steege et al., 2017). The findings of this study add to the current body of knowledge by quantifying the issue of faculty-to-administrator incivility and the relationship this phenomenon has to leader job satisfaction, a factor known to influence longevity in the role (Flynn & Ironside, 2018; Mintz-Binder, 2014).

Job Satisfaction

Descriptive statistics from the study help to depict the characteristics of academic nurse leaders at the associate degree level. In general, the average program administrator from an associate degree nursing program is a white female in her upper 50s with approximately 5 years of longevity in the current role. The profile of administrators

participating in this study was relatively unchanged from the profile of administrators and directors studied in the past by researchers such as Bergquist (2018) or Mintz-Binder (2013, 2014), but slightly less in terms of experience as the sample studied by LaSala et al. (2016).

The study design also provided an opportunity to quantify the level of job satisfaction in program administrators from ACEN-accredited associate degree nursing programs. According to descriptive statistics garnered from a suitable sample, the level of job satisfaction in this population is favorable which is consistent with the findings of other researchers who examined job satisfaction in nursing academe (Bittner & O'Connor, 2012; McErlane, 2014; Owens, 2017). An examination of items related to motivator and hygiene factors of job satisfaction revealed that most were satisfied or considerably satisfied with these job elements. These findings are encouraging given the fact that associate degree programs account for a large percentage (58%) of nursing programs in the United States (NLN, 2014b) and the majority of nursing programs accredited by the ACEN (M. Stoll, personal communication, October 26, 2018).

However, it should also be noted that a change in program administrator constituted the largest number of substantive change reports filed with the ACEN according to the *2017 Report to Constituents* (ACEN, n.d.). While it is unclear based on this report why program administrators leave their positions, there is credible research by nursing scientists such as Mintz-Binder (2014) and Flynn and Ironside (2018) that suggest job dissatisfaction is problematic in nursing academe. Given the contradiction in findings, this study is timely in that it makes known the level of job satisfaction in a large

population of academic nursing leader, while exposing a potential problem, faculty incivility, which may affect longevity in the role.

Incivility

The incidence and impact of incivility in academia has been well documented in the literature; however, is commonly thought of in unidirectional terms when speaking of the interactions between administrators and faculty members. Studies by researchers such as Condon (2015), Lynette et al. (2016), and Rawlins (2017) exemplify the seriousness of uncivil administrator behaviors toward faculty. However, studies examining incivility in the reverse direction, from faculty toward administrator, are rare. Early studies by Mintz-Binder (2013, 2014) and Mintz-Binder and Calkins (2012) introduced the notion that a variety of work-related factors, including the quality of interpersonal relationship and social support, influence the psychosocial work environment of academic nursing leaders. Yet, only one study by LaSala et al. (2016) explored administrators as victims of faculty incivility, documenting the devastating effects this phenomenon can have on administrators personally and professionally. Through quantitative methods, my study validated the phenomenon of faculty-to-administrator incivility in at least one population of academic nurse leader, illuminating the relationship incivility has with an essential element of leader longevity, job satisfaction.

To determine which faculty behaviors were perceived to be most uncivil, I examined sample means for each item on the WICS. Response options included *always* (1), *usually* (2), *sometimes* (3), and *never* (4); therefore, the lower the item mean, the

more uncivil the behavior was perceived. The five behaviors with the lowest mean values included personal attacks or threatening comments, rude remarks, put downs, or name calling, engaging in rumors or gossip, being set up to fail, and rude, nonverbal behaviors or gestures. These results were similar to what was determined by Clark (2013) when developing the instrument, and later by Chihak (2018) who used the instrument to measure faculty-to-faculty incivility within nursing education. In each study, the researcher developed a list of behaviors thought to be most uncivil by measuring the percentage of respondents that answered *always* or *usually* for each item. When ranking items according to the corresponding sample mean, all of the top five behaviors from my study were consistent with the lists put forward by Clark and Chihak, including personal attacks or threatening comments, rude remarks or put downs, gossiping and starting rumors, being set up to fail, and rude nonverbal behaviors or gestures. My results, therefore, are consistent with the findings of previous researchers, suggesting that nursing professionals working in academia have similar perceptions regarding what constitutes uncivil behavior.

An examination of mean values for items examining frequently of experiences with uncivil faculty behavior revealed interesting results as well. Response options included *often* (1), *sometimes* (2), *rarely* (3), and *never* (4); therefore, the lower the item mean, the more frequently the behavior was experienced. The five behaviors with the lowest mean values included being consistently interrupted, working with faculty that consistently fail to perform his or her share of the workload, inattentive or distracting behavior during meetings, resisting or creating friction to prevent change, and the use of

personal technology in a way that is disruptive. Comparing these results to those of Clark (2013) and Chihak (2018), I discovered fewer similarities in findings. In all studies, resisting change and failing to perform one's workload were experienced most frequently. However, in Clark's original research, issues with communication and being subject to rude remarks made the top of the list, whereas, engaging in secret meetings was problematic in Chihak's study, but not in Clark's or this study. In the end, while the results suggest there are subtle differences in the frequency with which uncivil behavior is experienced, the underlying lesson reiterates that incivility exists in nursing education and, like faculty, is experienced by academic nurse administrators as well.

The Relationship Between Variables

The research questions for this study aimed to examine the relationship between study variables, faculty incivility and job satisfaction. The data suggested there was no relationship between administrator perceptions of faculty incivility and job satisfaction. Given the lack of research in this area, I was unable to compare my findings to those of other researchers. Additional research, therefore, will be necessary to determine whether the lack of association between variables is unique to this population and to determine the underlying etiology for this noncorrelation.

More compelling is the finding that administrator experience with faculty incivility is statistically and positively related to job satisfaction in this population of nursing professionals. The data suggest that as the frequency of experiences with uncivil faculty behavior increases, satisfaction with the role and elements intrinsic and extrinsic to the job decrease. As suggested in the literature, exposure to uncivil work

environments has serious personal and professional consequences (Clark, 2017; LaSala et al., 2016; Peters, 2015; Peters & King, 2017; Vagharseyyedin, 2015), and while I do not purport cause and effect, the results suggest that uncivil behavior may be more recognizable and have greater meaning when experienced firsthand. In the context of existing literature and based on these results, I concluded that mere thoughts and opinions (perceptions) regarding what is or is not uncivil faculty behavior are not as essential as an actual work encounter. Instead, it is the administrator's lived experiences and direct exposure to uncivil faculty behaviors, as suggested by LaSala et al., which matter the most.

Theoretical Implications

Theorists of Herzberg's two-factor theory (Herzberg et al., 1959/2010) hypothesized that a number of factors contribute to an employee's job satisfaction. This study aimed to test the assumption of Herzberg's theory that proposes when interpersonal relationships are unfavorable, such as those impacted by uncivil work encounters, job satisfaction is negatively affected. While I do not suggest cause and effect, the study findings do support the notion that the quality of the relationships between administrators and faculty members is related to the concept of job satisfaction. The study examined the relationship between faculty incivility and leader job satisfaction, and while I determined that perceptions of faculty incivility and job satisfaction are not related, lived experiences with uncivil faculty behavior are correlated to overall job satisfaction and to factors both intrinsic and extrinsic to the job.

Limitations of the Study

Study Design

Research methodology. I used a correlational research design for this study. Correlational methods were ideal for answering the research questions aimed at examining the relationships between study variables. However, this research method also limits the insight potential of results since questions related to cause and effect remain unanswered.

Confounding variables. The effect of confounding variables also remains a limitation of the study. Herzberg postulated that the quality of interpersonal relationships in the workplace has a connection to the level of job satisfaction experienced by an employee (Herzberg et al., 1959/2010). However, the theorists also suggested the presence of several other factors that have the same potential. Given the research design, the interpretation of the data is limited to an examination of the relationship between variables and stops short of explaining how other variables may influence the correlation.

Generalizability and Sample Size

According to Warner (2013), generalization of results beyond a study sample should be made cautiously and can be affected through the use of a convenience sample, as was the case in this study. However, the sample size was adequate at 142, surpassing the minimum requirement of 84 determined by a priori power analysis, contributing to the reliability and generalizability of findings to the target population. Data were collected at only one point in time and participants were prevented from completing the survey more than once, strategies intended to address limitations associated with

maturation. The study sample lacked ethnic diversity representing a potential sampling error. However, all ACEN-recognized associate degree nursing program administrators holding administrator status were invited to participate, and so the demographic profile of respondents could possibly be an accurate representation of the target population. Furthermore, the demographic descriptive statistics of this study emulate statistics published in other studies and by agencies such as the NLN (2017). Generalizability of results to academic nurse leaders at other educational levels, such as at the baccalaureate or higher levels, is difficult given the lack of research on this topic and from the leadership perspective, therefore, is limited to the group of nurse administrators targeted in this study.

Instrumentation

Prior to conducting the research, I identified instrumentation as a potential limitation based on the length of the data collection tool and the validity and reliability of the component parts which included the WICS by Clark (2014) and the JSS by Sluyter et al. (1985). The final questionnaire included a total of 63 items, including 8 demographic questions, 47 Likert-style questions, and 8 select-all-that-apply, multiple choice, or short-answer questions. The average amount of time spent by respondents to complete the survey was approximately 15 minutes with a favorable rate of 93% for survey completion by all respondents. I calculated Cronbach's alpha values for each component of the questionnaire and discovered excellent internal consistency reliability with all values greater than $\alpha = 0.93$.

Recommendations

In order to meet the requisite for strong nursing leadership, more research is needed to better understand the environments and conditions in which leaders work (Bouws, 2018; Flynn & Ironside, 2018; Mintz-Binder, 2014; Mintz-Binder & Calkins, 2012; White, 2014). Researchers suggest that efficient and successful leadership has a trickledown effect, shaping the environment in which nurses work and influencing organizational and individual outcomes related to quality nursing care provided (Kelly & Adams, 2018; Steege et al., 2017). This effect also applies to the impact potential of academic nursing leaders on the future generation of nurses (Morton, 2014), amplifying the need for additional research in this population as well.

Studies exploring the job satisfaction of academic nurse leaders are limited, particularly at the associate degree level. Earlier research by Mintz-Binder (2013; 2014) and Mintz-Binder and Fitzpatrick (2009) brought to light issues contributing to associate-level leader retention and attrition and the need for additional research to better understand the work environment of this population of nursing leaders. Incivility within nursing education is well established (Clark, 2017); however, little is known regarding how this phenomenon affects leaders at every level. This foundational study builds on qualitative research by LaSala et al. (2016) that established faculty incivility toward administrators as problematic, and quantifies the relationship between this issue and job satisfaction in a population of academic leader. Further research studies that explore the causality of faculty incivility on job satisfaction and other outcomes of the work experience in this and other populations of nursing leaders is warranted. In addition, I

recommend future research that controls for other motivator and hygiene factors associated with job satisfaction, as well as variable work environments, for example private versus public institutions and union versus nonunion organizations, in order to fully understand the impact and influence faculty incivility has on this important population of nursing professionals.

Implications

Practice Implications and Positive Social Change

The importance of strong nursing leadership to the vitality and effectiveness of today's complex healthcare system is well documented. According to the IOM (2010), the development of effectual leadership is thought to be an important undertaking to ensure that nursing has a strong voice in healthcare policy reform and is well positioned to contribute as a full and equal partner in the pursuit of a more efficient healthcare system. In this midst of this discussion remains the importance of leadership development within academia. Thought of as "one of the most critical leadership positions within the profession", the role of academic nurse leader carries with it the responsibilities of preparing competent and qualified graduates who are charged with meeting the "complexities of the health care environment" while leading and shaping the future of healthcare systems (Morton, 2014, pg. 279). Despite this calling and recognition, research into the work experience of academic nurse leaders is lacking, yet may be useful as a measure to address issues with leader recruitment, retention, and attrition.

The results of my study bring to light and quantify the issue of faculty incivility toward academic nurse administrators, illuminating at least one aspect of a leader's work experience. Armed with the knowledge that healthy, civil work environments contribute to heightened job satisfaction, employee engagement, morale, and personal and professional growth (Clark & Ritter, 2018; Young et al., 2019), my findings could be used to further the argument that stronger policies designed to protect all employees, including administrators, and foster a more civil work environment are necessary. Nursing experts suggest that interventions aimed at improving the work environment and experiences of nursing leaders are needed to address problems with recruitment and retention (Institute for Healthcare Improvement [IHI], 2017; Haggman-Laitila & Romppanen, 2017; Mintz-Binder, 2014) and without them, recruitment and retention efforts will be futile (Mintz-Binder, 2013). Academic institutions are urged to create learning environments that foster civility and inclusivity (NLN, 2018). My research could serve as a motivator for educational organizations to examine the work environments of their academic nurse leaders more carefully and put into place measures aimed at promoting a more civil and positive work environment, thereby, supporting recruitment and retention of these key institutional leaders. In doing so, the community benefits through the development of strong nursing leadership working in the academic environment and through the strength of the nursing workforce that is developed as a result.

Finally, nursing professionals that assume leadership positions have a responsibility to develop the skills and competencies necessary to be effective in their

roles. The IOM (2010) report called on nursing leaders to develop foundational leadership competencies that can be used in any setting and tailored competencies that take into consideration the context in which these skills are utilized, as well as time and place. However, Morton (2014) questioned whether enough is being done to adequately prepare future nurse administrators with the "knowledge and skills to deal with complex and unique features of academic organizations and the demands of a rapidly changing health care system" (p. 280). My research results suggest that academic nurse leaders will likely encounter uncivil faculty behavior during their tenure as administrator. With this knowledge, it is imperative that academic leaders engage in professional development opportunities that foster and advance the skills necessary to address complex and difficult relationships that may occur in the work setting and therefore, effect positive social change.

Theoretical Implication

I used Herzberg's two-factor theory (see Herzberg et al., 1959/2010) to test research questions aimed at examining the relationship between faculty incivility and academic nurse administrator job satisfaction. The study provided empirical data that experiences with faculty incivility are statistically correlated to job satisfaction in this population of nurse administrator. The findings support Herzberg's theory that asserts a relationship between the types of interpersonal relationships held with colleagues in the workplace (a hygiene factor), in this case an uncivil relationship, and an employee's job satisfaction.

Conclusion

Although incivility has been well studied within nursing education, this descriptive, correlational study represents the first quantitative study to examine faculty-to-administrator incivility in a population of academic nurse leaders. The study examined the relationship between perceptions of and experiences with faculty incivility and the job satisfaction of administrators from associate-level, ACEN-accredited nursing programs. The data provides empirical evidence that academic administrators serving at this level of nursing education are victims of uncivil faculty behaviors and revealed that administrator experiences with faculty incivility are statistically correlated to their job satisfaction. While the results do not establish a causal relationship between variables, they are useful in raising awareness of a potential workplace factor that researchers suggest is capable of influencing recruitment, retention, and attrition. The study findings validate the theoretical suppositions of Herzberg's two-factor theory and have significant implications at the organizational and individuals levels, illuminating the need to create civil work environments and cultivate leaders with the skills and competencies necessary to address this troublesome behavior and lead in a way that fosters retention and positive outcomes for students and the communities for which they care.

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Appendix A: Job Satisfaction Survey (JSS)

Instructions: This survey is designed to find out, in an anonymous way, how satisfied you are with various aspects of your job at your current organization. Please read each statement below and circle the number that best describes how you feel about each item, according to the following scale:

1	2	3	4	5	6	7
Not satisfied	Slightly satisfied	Somewhat satisfied	Satisfied	Considerably satisfied	Very satisfied	Completely satisfied

In my present job, this is how I feel about…

1. The amount of money I make in terms of the type of work I do.
2. The policies and rules of my organization.
3. The general surroundings in which I work.
4. The way that people get along with each other on the job.
5. The degree of "challenge" I find in my job.
6. The appreciation I am shown for the work I do.
7. The opportunities I have for growth and self-improvement with the organization.
8. The opportunities I have for advancement at my organization.
9. The amount of job security I have.
10. The recognition I receive for the work I do.
11. The overall quality of my work environment.
12. The sense of accomplishment I derive from my work.
13. The general way in which I am treated by my immediate supervisor.
14. The opportunity I have for creativity and self-expression in my job.
15. The sense of achievement I receive from my work.
16. The stability of my employment at my organization.
17. The actual duties and tasks inherent in the work I do.
18. The sense of importance I get from my job.
19. The way in which the policies and rules of my organization are administered.
20. My salary in terms of similar jobs in the administrative area.
21. The way in which people generally treat each other on my unit or work area.
22. The help and support I receive from my immediate supervisor.
23. The opportunities I have for promotion to more responsible jobs.
24. The amount of responsibility I am given in my jobs.

Source. The Job Satisfaction Survey (JSS) adapted from D. W. Hanson, 2001, *Job satisfaction: Nurses' perceptions of a clinical ladder* (Master's thesis), available from ProQuest Dissertation and Theses database (1407487). Used with permission.

Appendix B: Demographic Questionnaire

What is your current age? _____

What is your gender? Female _____

Male _____

Non-binary _____

Prefer not to say _____

What is your race? White/Caucasian _____

Black or African American _____

Asian/Pacific Islander _____

American Indian or Alaska Native _____

Hispanic _____

Multiple ethnicity/Other _____

How many years of academic administrative experience have you earned? _____

How many years of experience do you have as the nurse administrator at your current organization? _____

Are you the designated nurse administrator for an associate degree nursing program accredited by the Accreditation Commission for Education in Nursing (ACEN) in the United States? Yes _____ No _____

What is the title of your administrative position? Dean _____ Associate dean _____ Assistant dean _____ Program director _____ Other _____

What is your employment classification within your organization? Administrator _____

Faculty _____

Appendix C: E-mail Verification of Cooperation from the ACEN

MS Marsal Stoll [redacted]
Thu 1/24, 2:07 PM

Kim

You are welcome. We are always here to assist you and look forward to saying "Dr. Kim" soon!

Marcy

MS Marsal Stoll [redacted]
Thu 1/24, 10:23 AM
Kimberly Lindquist

Reply all

ACEN Accredited Associ...
77 KB

Show all 1 attachments (77 KB) Download Save to OneDrive - Laureate Education - ACAD

Kim

See attached information for all ACEN accredited associate degree nursing programs. Is this what you needed? Please advise.

Marcy

Marsal P. Stoll, EdD, MSN
Chief Executive Officer

Accreditation Commission for Education in Nursing, Inc.
3343 Peachtree Road NE, Suite 850 | Atlanta, Georgia 30326
P. (404) 975-5000 | F. (404) 975-5020
E. [redacted]

KL Kimberly Lindquist
Sun 1/13, 2:07 PM
[redacted]

Reply all

Good afternoon, Dr. Stoll,

I hope this e-mail finds you well in the new year!

A couple of months ago, we met at the Michigan Council of Nursing Education Administrators (MCNEA) meeting held at Macomb Community College in Warren, Michigan, then spoke at the Trends in Occupational Studies conference held in Novi, Michigan. I am the program director of an ACEN-accredited program in southeastern Michigan, but also a doctoral student at Walden University working on my PhD in Nursing - Leadership degree. As we discussed, I am planning a research study exploring the relationship between perceptions of and experiences with faculty incivility and academic nurse administrator job satisfaction. The target population for the study are program administrators from ACEN-accredited associate degree nursing programs in the US and I am planning an online survey that will be sent to program administrators' e-mail addresses on record with the ACEN. While the contact information for the target population is a matter of public record made available on the ACEN website, we had discussed the possibility of getting a list from the ACEN to ensure 1) I get an accurate list of administrators meeting the inclusion criteria, and 2) to bypass the manual retrieval of the information from the website. I am reaching out to you to see if this is still a possibility and, if so, who would I need to contact at the ACEN to get this information. My proposal has been fully approved and I am in the process of submitting documents necessary for IRB review and approval. How I obtain the contact information will need to be disclosed to the IRB in order to provide full transparency. I would be happy to answer any questions you may have regarding my study and thank you for your consideration.

Best,
Kim

Kim Lindquist, MSN, RN, CNE
Student - PhD in Nursing - Leadership