# Chapter 28 The Search for Support and Healing

#### **Cheryl Green**

Southern Connecticut State University, USA

### ABSTRACT

Chapter 6 provides nurses, nurse leaders, and organizations interventions to understand, confront, and eliminate bullying and incivility from the workplace. Emotional intelligence (EI) and cognitive rehearsal are techniques when taught to nurses via in-services provided by organizations, can build awareness of verbal and nonverbal cues used in their communication as well as those of others. By understanding how we communicate and respond to others and vice versa, insight to what are appropriate and inappropriate responses can hold nurses accountable to how they treat one another. The neuroscience of oxytocin release at a biochemical level supports the benefits of organizations investing in the mental and physical health of their employees by empowering them to grow individually and as a collaborative team.

#### INTRODUCTION

Nurses affected by bullying in the workplace may ask themselves why they were targeted by the bully or bullies. This is a normal reaction. It is important for nurses to insightfully explore patterns of bullying sustained at more than one facility, and if this has been a repetitive issue for them during their career. Meeting with a counselor or therapist to discuss experienced patterns of bullying, can be beneficial to the victim. Blaming one's self for the negative behaviors of others, is not warranted and unproductive. Instead explore ways of self-improvement and self-protection, so that bullying will be recognized and not tolerated in the future.

### Asking Why You

Mental anguish over why one is being bullied will not end the bullying, nor help the nurse's immediate need for self-validation. If you are a nurse that is currently experiencing bullying, because of the risks for the development of health problems and depression and anxiety, it is imperative that help be sought

DOI: 10.4018/978-1-7998-9161-1.ch028

#### The Search for Support and Healing

immediately. The maintenance of one's mental and physical health should be the priority of the affected nurse. Additionally, affected nurses must ensure that the bullying is not compromising their own happiness within their personal life at home or with family and friends.

#### **Never Isolate**

When being bullied in the workplace, the tendency can be to isolate. Nurses working in toxic work environments may use silence and isolation as a means to self-protect. However, over time, this can impact them negatively within professional environments where collegiality and team work is emphasized. Ironically, as nurses attempt to use isolation to protect themselves, their work performance evaluations may identify their isolation as being suggestive of *lack of communication and not being a team player*.

Isolation for a brief period of time to gather one's thoughts and to regroup when a decline in work productivity secondary to workplace incivility has been identified, can be helpful. However, sustained patterns of isolation should be avoided. Nurses can self-protect in toxic work environments by disengaging from incivility during staff meetings and collaborations with negative peers. Nurses however, must maintain a physical presence and acknowledge their peers in a professional manner. Remember, while self- protection is paramount, the work of a nurse is what your health care facility or academic institution has hired you to do.

## **Organizational Strength**

Health care organizations can help nurses experiencing bullying and incivility within the workplace by recognizing symptoms associated with dysfunctional microsystems (clinical units). Microsystems that have patterns of nurse turnover and reports from unions and Human Resources (HR) Departments of complaints of uncivil conduct; can be investigated monthly by administration. By holding managers and directors accountable monthly for reporting nurses resigning from their positions and reports to unions and HR, of unprofessional behaviors on the clinical unit, administration communicates a zero tolerance for workplace incivility.

#### **Emotional Intelligence**

Emotional intelligence (EI) is the ability of a person to recognize the emotions of others as well as their own. Nurses applying EI in their daily nursing practice, can differentiate between the emotional expressions of others in their work environment, and have insight into appropriate and inappropriate responses to others emotions. With this insight, nurses that are taught to apply EI in the workplace, can use it to guide their behavior and thinking in coping with incivility and bullying.

Nurses can effectively use EI to intervene and cope with incivility and bullying (Littlejohn, 2012; Salovey & Mayer, 1990; Meires, 2018) to protect themselves and other nurses in the workplace. Goleman (1997) views people as having two dimensions in the mind, the feeling mind and the thinking mind. Therefore, when nurses are taught to use their intellectual and rational thinking to understand why perpetrators react and respond, EI can be effective in nurses' decision as to how they will or will not respond to co-workers bullying and incivility behaviors and actions. EI can be used to regulate moods, control anger, and bring rational thinking to situations of uncivil conduct by nurses, so that perpetrators can be readily disempowered. 37 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage: www.igi-global.com/chapter/the-search-for-support-and-healing/284383

## **Related Content**

Exploring the ICT Competence and Confidence Among Undergraduate Nurses in University of Lagos: Exploring the ICT Competence and Confidence

Florence Funmilola Folami (2021). Research Anthology on Nursing Education and Overcoming Challenges in the Workplace (pp. 183-197).

www.irma-international.org/chapter/exploring-the-ict-competence-and-confidence-among-undergraduate-nurses-inuniversity-of-lagos/284364

## Determinants of Patient Safety and Trust With Focus on Health Care Information Technology (HIT) and Physicians-Nurses Performance

Mosad Zineldinand Valentina Vasicheva (2021). Research Anthology on Nursing Education and Overcoming Challenges in the Workplace (pp. 311-318).

www.irma-international.org/chapter/determinants-of-patient-safety-and-trust-with-focus-on-health-care-information-technology-hit-and-physicians-nurses-performance/284374

## The Impact of the Attitude of Medical Staff From Burnout on the Level of Ongoing Medical Services

Anita Wójcik (2021). Research Anthology on Nursing Education and Overcoming Challenges in the Workplace (pp. 270-296).

www.irma-international.org/chapter/the-impact-of-the-attitude-of-medical-staff-from-burnout-on-the-level-of-ongoingmedical-services/284372

#### Maintaining a Mature Workforce in the Nursing Profession: An HRD Perspective on Retention

Torrence E. Sparkman (2021). Research Anthology on Nursing Education and Overcoming Challenges in the Workplace (pp. 370-384).

www.irma-international.org/chapter/maintaining-a-mature-workforce-in-the-nursing-profession/284379

#### Workplace Bullying and Violence

(2019). Incivility Among Nursing Professionals in Clinical and Academic Environments: Emerging Research and Opportunities (pp. 21-47). www.irma-international.org/chapter/workplace-bullying-and-violence/226344