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— Short Report

Challenges of Incivility in Dental Practice and Education

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ABSTRACT

Professional collaboration is a key component of patient care and a source of fulfilment for oral health care providers. However, reports of incivility in employment as well as education are increasing impacting individuals in all settings including patients. Uncivil behavior implies a disregard for others and creates an atmosphere of disrespect, conflict, and stress. In contrast, civility towards others implies polite, respectful behavior towards others. This short report presents case studies in dental hygiene clinical practice and in dental hygiene education with strategies for approaching uncivil behavior.

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INTRODUCTION

As a dental team member focusing on patient care, the dental hygiene practice climate offers professional rewards and challenges. Collaborating as part of an oral health care team is professionally satisfying. However, the employment setting can present challenges with colleagues and patients. Oral health care providers are reporting an increase in incivility among colleagues. Incivility is unprofessional behavior that must be acknowledged and addressed. Incivility violates the ethical principles of autonomy, justice, and nonmaleficence.

A simple definition of incivility is rude or offensive comments or behavior. Incivility implies disregard for others, creating an atmosphere of disrespect, conflict, and stress.¹ Individuals demonstrating uncivil behavior lack respect for their colleagues and violate workplace norms that promote respectful interpersonal interaction.² Examples of incivility can include embarrassing people or interrupting conversations in meetings. Incivility can occur between co-workers and patients. Examples of incivility in the employment setting can be found in Table I.

Civility behavior is polite behavior towards others and ensuring their dignity is maintained. Civility is claiming and caring for one's identity, needs, and beliefs without degrading someone else's in the process.³ This behavior concerns disagreeing without disrespect and embracing respect, kindness, and compassion. Civility is a variation of what is considered to be the 'Golden Rule.' It is being kind, courteous, polite, and avoiding overt rudeness. The Institute for Civility suggests civility is more than merely being polite and fosters a deep self-awareness because it is characterized by true respect for others.³

INCIVILITY IN DENTAL HYGIENE PRACTICE

The following cases provide examples of uncivil behavior. The cases include suggestions for the dental hygienist to utilize when faced with similar situations.

Table I. Examples of incivility in the employment setting

- Not listening
- Ignoring a person's presence
- □ Ignoring a person while they are speaking
- Patronizing someone
- Making humiliating remarks about another person
- Invading another person's space
- Acting temperamental
- □ Showing up late for meetings
- □ Sabotaging another person's work
- Name-calling
- Demeaning gestures or facial expressions
- Harming an person's reputation
- Gossiping or spreading rumors

CASE 1

Sarah is a dental hygienist with 14 years of experience working in two practices in the same large office building. Lately, the daily environment in one office has become difficult, with a lack of professionalism among the staff. She often hears disparaging comments and observes dismissive behaviors in front of patients. On several occasions, Sarah has overheard a colleague claiming to a patient that her clinical skills are superior to the rest of the team and that the patient should request her for scaling and root planning in the future. Just the other day the same colleague made a remark stating that one of the other hygienists had attended "that crappy community college" and "doesn't know anything." This behavior is annoying and seems to be increasing. Some of the other team members are clearly uncomfortable but don't want to rock the boat and get this person upset with them. Sarah is frustrated and wonders how to change this atmosphere and cultivate some civility in her workplace.

What Sarah is experiencing are behaviors and qualities that are inconsistent with ethics and professionalism. A culture has emerged in this practice setting which challenges the very essence of professional care. Dental hygienist are professionals because of their education, lifetime dedication and commitment to higher standards and values, and continuous self-improvement.

CASE 2

A colleague in your dental hygiene clinic uses disrespectful language and derogatory remarks about another team member. This colleague makes a point of shunning this team member, causing that person significant distress. For instance, she pointedly invited others for lunch, excluding this person. Other social events have been mentioned at work that she had not been included in. Because this dismissive behavior has gone unchecked, it is beginning to be mimicked by others in the dental practice. What is the role of the dental hygienist in this uncomfortable situation?

What can a dental hygienist do to reestablish the tenants of professionalism in the difficult situations described in these cases?

- In a safe place, ask the individual why he/she is making such comments.
 Acknowledge the difficulty of working in a stressful clinical situation and/or dealing with other challenges.
- Offer support and be a compassionate and caring listener.
- Use a positive phrase to establish an open dialogue.
 - "You have much to offer with your skill set and I don't understand this behavior; can we talk about it?"
 - "This behavior is surprising and uncomplimentary to you, your work, and the profession; what is happening?"
 - "Disparaging comments to one another can affect the entire team; may I offer some thoughts that may be useful?"
- Discuss how each person is responsible for their actions, including asking for help when necessary.

- In a small group or office meeting, reframe the commitment to be the professional person we all strive to be.
- Encourage others to model appropriate behavior and look for ways to improve the clinical or educational environment.
- Encourage investing in professional development and growth as a team, perhaps seeking new courses, meetings, or other educational opportunities.

INCIVILITY IN EDUCATIONAL SETTINGS

Incivility also occurs in the educational setting. Examples of uncivil behaviors can include failure to return phone calls, voicemails, or emails. It can be as simple as failing to speak to others in a hallway or using a cell phone during a staff meeting. Incivility can also occur in the classroom, preclinical or clinic setting. Incivility is any action that interferes with a harmonious, cooperative learning atmosphere.⁵ Both students and faculty may demonstrate incivility in the classroom. Examples of actions by students may include chronic tardiness and absenteeism, refusal to comply with faculty directions, continuous questions and interruptions, or showing a lack of respect for faculty. Faculty may also demonstrate incivility by making demeaning comments to students, public humiliation in front of patients or other classmates, or off-color humor. These examples also demonstrate a lack of professionalism.⁶ Incivility is any rude or disrespectful behavior toward another with or without the intent to harm. Examples of incivility in educational settings are shown in Table II and III.

The following case provides an example of uncivil behavior in the educational setting.

CASE 3

Deval Z is an enthusiastic first-year instructor. She seeks advice from her mentor and reports the following student's behaviors. During class, students are talking with each other. As she walked

Table II. Examples of student incivility in education

- Disrespect toward faculty
- Unwillingness to participate in the learning process
- Being unprepared for assignments or other obligations and ignoring directives.
- Behaviors that negatively impact the learning environment (e.g., talking in class, eating in class)
- Use of cell phones or computers during class
- Packing up books before class is finished
- Not greeting other students
- Not greeting faculty members

Table III. Examples of faculty incivility in education

- Passive-aggressive behavior
- Eye rolling and hand gestures
- □ Ignoring co-workers.
- Spreading rumors
- Name-calling
- □ Failure to respond to emails and telephone calls

around the classroom, she noticed that the students did not have the lecture on their tablets. Instead, she sees students playing computer games or going to on shopping sites. When she says something to the class regarding their behavior, they just ignore her. Finally, she reports to her mentor that what is most upsetting to her is when the students ask her a question, that they mock her accent.

Faculty can address incivility with several approaches. Schroeder and Robertson⁶ offer simple steps:

- Be proactive create classroom norms for behavior.
- Be specific don't assume college students know appropriate behavior.
- Be a model people learn behaviors by observing others.

- Ask why are there underlying reasons for the behaviors?
- Have a plan immediate action is necessary when uncivil behavior occurs.

Educational institutions can address incivility among students and employees by:

- Establishing clear expectations. Create a student and faculty code of conduct that specifically address uncivil behavior.
- Develop classroom conduct policies and incorporate them in course syllabi.
- Include civility within the employee evaluation process.
- Encourage faculty to model good listening and interpersonal skills.
- Require the students to develop a classroom code of conduct.
- Teach students how to disagree with one another and the instructor in a respectful manner.
- Provide education on addressing uncivil behavior at all levels, staff, faculty, and students.

CONCLUSION

Incivility occurs in educational and employment settings. Recognition of incivility is a first step in addressing the issue. A simple approach is to apply the "Platinum Rule" which is to treat others the way they want to be treated. The suggestions offered in this short report are not exhaustive. but provide several thoughtful ways to address the issues. Evaluate the climate in the clinical practice or educational setting and take steps to address the behaviors that show lack of respect that will lead to regaining a professional health care environment.

DISCLOSURES

The authors have no conflicts of interest to disclose.

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