

## Bullying and Nursing

Lateral/horizontal violence or bullying has been extensively reported and documented among health care professionals. It has serious negative outcomes for registered nurses, their patients and health care employers.

Horizontal violence is defined as a nonphysical intergroup conflict that is manifested in overt and covert behaviors of hostility. It is psychologically, emotionally and spiritually damaging behavior that can have devastating long-term effects on recipients. These disruptive behaviors are toxic to the nursing profession and have a negative impact on retaining quality staff.

As a profession, nurses must develop a zero tolerance policy toward these behaviors. Only by addressing the behavior head on will there be an impact. Ignoring the behavior will not make it go away. In essence, ignoring it is condoning it!

### References

Duffy, E. (1995) Horizontal Violence: A Conundrum for Nursing. *Journal of the Royal College of Nursing Australia*. 2(2), 5-17.

Modiac, M. B, & Schoessler, M. (2008) The Role of the Preceptor in Minimizing Horizontal Violence. *Journal for Nurses in Staff Development* 24(4), 189-190.

## Wearing the 'Protector Hat' as a Preceptor

Being a preceptor means wearing many hats to be successful in this role. The "protector hat" role is a very active one. As the protector, you must always and foremost protect the patient from the lack of knowledge and judgment of the new nurse because you are, as always, the patient's advocate. And, you also must look out for the new nurse. Protecting the patient is the easy part, but protecting the new nurse from co-workers is where the challenge often lies.

Unfortunately, the old adage "nurses eat their own" still exists. Today, this is referred to as lateral/horizontal violence or bullying. This behavior is responsible for pushing nurses "away from" an organization and the nursing profession. As a preceptor, you can minimize bullying.

1. Know that newly hired nurses, especially if they are new graduates, are in a vulnerable position. Behaviors you have learned to live with or not take personally can feel devastating to a new nurse and get in the way of safe patient care.
2. Be alert to behaviors that indicate horizontal violence or bullying is occurring. Behaviors can include deep sighs, eye rolling, ignoring questions, not offering to help when it is needed, talking behind someone's back, withholding information and scapegoating.
3. Model professional behaviors. Accept your fair share of the work, offer help, listen carefully to others' concerns and answer questions, keep confidences, stand up for the absent member in a conversation and refrain from criticizing others publicly.
4. If someone's behavior looks like bullying, point it out to the individual. Explain that the behavior is not welcome yet be respectful to all involved parties. For nonverbal behavior, you might ask for clarification. For example, "If that were me, seeing you roll your eyes might have put me off from asking you questions. This may get in the way of what a new nurse needs to learn to give the best care to patients." Or, "Your actions tell me this might be a bad time. When might it be a good time to ask you about this?" Rehearse responses in advance to ensure they sound respectful and emphasize that the behavior is not welcome. Then, assist the new hire in learning to speak up respectfully.
5. Talk with your manager and co-workers about the environment on your unit. Set expectations together for creating a healthy work environment, ways to welcome new staff and strategies to minimize horizontal violence and bullying for all. Speaking up is your responsibility both as a preceptor and as a professional.