



## WORKPLACE INCIVILITY AND JOB SATISFACTION AMONG HEALTHCARE PROFESSIONALS

### Psychology

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### ABSTRACT

**Background:** Everyday disrespect may be related to healthcare professionals' attitudes toward their work. **Objective:** To examine the association between workplace incivility and job satisfaction in this sample. **Methods:** A cross-sectional correlational survey used a study-specific online questionnaire. Of 53 responses, three from non-healthcare occupations were excluded, leaving 50 healthcare professionals. Four items formed the incivility composite and three formed the job-satisfaction composite. Descriptive statistics, internal consistency, Shapiro–Wilk tests, Pearson's correlation, and a Spearman sensitivity analysis were reported. **Results:** Mean incivility was 3.71 (SD = 0.79; Cronbach's  $\alpha = .81$ ), and mean satisfaction was 2.60 (SD = 0.87;  $\alpha = .79$ ). Higher incivility was strongly associated with lower satisfaction,  $r(48) = -.706, p < .001, 95\% \text{ CI} [-.823, -.532]$ ; Spearman's  $\rho = -.743, p < .001$ . **Conclusion:** The findings identify a strong inverse association in this sample. The cross-sectional design, convenience recruitment, and newly developed questionnaire preclude causal and broad population claims.

### KEYWORDS

Workplace Incivility; Job Satisfaction; Healthcare Professionals; Workplace Relationships

### INTRODUCTION

Workplace incivility refers to low-intensity breaches of mutual respect for which harmful intent may be unclear (Andersson & Pearson, 1999). In healthcare, dismissive communication, exclusion, and gossip may strain the cooperation required in clinical work. Reviews link healthy work environments with staff satisfaction and retention, although most incivility research concentrates on nurses (Martin & Zadinsky, 2022; Wei et al., 2018).

Prior research has reported an inverse association between incivility and job satisfaction among healthcare workers (Khan et al., 2021; Samad et al., 2020). Affective Events Theory suggests that repeated negative interactions may shape job attitudes through emotional responses (Weiss & Cropanzano, 1996). The present study examined whether workplace incivility was negatively associated with job satisfaction in a mixed group of healthcare professionals.

### Methods

**Design and participants.** This quantitative, cross-sectional correlational study recruited working healthcare professionals by convenience sampling. Eligibility required at least one year of professional experience and voluntary consent. An online Google Forms survey received 53 responses; three respondents employed outside healthcare were excluded, yielding  $N = 50$ . The questionnaire did not collect names or workplace identifiers. Electronic consent was obtained, and the study report states that institutional ethical approval was granted.

**Measures.** The researcher developed a five-point agreement questionnaire, reviewed by subject experts for clarity and relevance. Responses ranged from 1 (strongly agree) to 5 (strongly disagree). The four-item incivility score retained the respectful-treatment item in its original direction and reversed three negatively worded items. Three satisfaction items were reverse-scored. Higher composite scores indicate greater incivility or satisfaction, respectively. These study-specific composites are not established validated scales. Analysis. Means, standard deviations, and Cronbach's alpha summarised the composites. Shapiro–Wilk tests assessed univariate normality. Pearson's correlation was the primary test of association, with Spearman's rank correlation as a sensitivity check. The two-sided significance threshold was .05.

### Results

Among the 50 participants, 25 were women (50%), 24 men (48%), and one preferred not to say (2%). Technicians constituted 42%, doctors 24%, nurses 14%, and other healthcare occupations 20%. Mean age was 30.94 years (SD = 5.90), and mean healthcare experience was 6.84 years (SD = 5.95).

**Table 1. Descriptive statistics and internal consistency of study variables**

| Measure              | Mean | SD   | Cronbach's $\alpha$ |
|----------------------|------|------|---------------------|
| Workplace incivility | 3.71 | 0.79 | .81                 |
| Job satisfaction     | 2.60 | 0.87 | .79                 |

Note. Both composite scores range from 1 to 5; higher values indicate more of the named construct.  $N = 50$ .

Neither composite showed a statistically significant Shapiro–Wilk departure from normality (incivility:  $W = .954, p = .052$ ; satisfaction:  $W = .962, p = .104$ ). Incivility and satisfaction were strongly inversely associated, Pearson's  $r(48) = -.706, p < .001, 95\% \text{ CI} [-.823, -.532]$ . Spearman's  $\rho = -.743, p < .001$ , showed a consistent pattern. Item responses also indicated agreement that rumours and unprofessional discussions occurred; many participants disagreed that workload and salary were fair.

The descriptive scores were above the midpoint for incivility ( $M = 3.71$ ) and below it for satisfaction ( $M = 2.60$ ). These are study-specific averages, not clinical thresholds or population estimates. The pattern in individual items was informative: respondents tended to agree that rumours about colleagues ( $M = 1.88, SD = 0.90$ ), unprofessional discussions ( $M = 1.96, SD = 0.95$ ), and direct disrespect ( $M = 2.16, SD = 0.98$ ) occurred. Because those items retain the original agree-to-disagree coding, lower item means signal stronger agreement with a negative experience. In contrast, the salary-fairness item had  $M = 3.90$  ( $SD = 1.02$ ), indicating a tendency to disagree with the positive statement. These item findings suggest additional organisational concerns; they were not entered as covariates in the correlation analysis.

### DISCUSSION

Participants reporting more incivility tended to report less job satisfaction. The direction agrees with healthcare findings reported by Samad et al. (2020) and Khan et al. (2021), and is consistent with the view that repeated negative workplace events may affect job attitudes (Weiss & Cropanzano, 1996). The substantial correlation warrants attention to respectful communication, support, and fair work organisation, while the item responses also point to workload and compensation concerns.

The finding is limited to this convenience sample of 50 respondents. Self-report from a single questionnaire may inflate associations through shared response tendencies; the four- and three-item composites were developed for this study and have preliminary internal consistency, not established construct validity. Professional groups were unevenly represented. Cross-sectional correlation cannot determine direction or causation, and the study did not control for workload, occupation, or other confounders. Larger, diverse samples using validated measures and longitudinal designs are needed.

A practical response would be to review staff experiences of respectful communication alongside staffing, workload distribution, recognition, and channels for raising concerns. These steps are reasonable areas for organisational assessment, but the present data do not test whether any particular intervention changes satisfaction. Future studies could compare occupational groups, account for workload and organisational climate, and repeat the analysis with established instruments. A longitudinal design would help clarify temporal order.

## CONCLUSION

Workplace incivility was strongly and negatively associated with job satisfaction among the healthcare professionals surveyed. The result supports further investigation and workplace review, but cannot show that reducing incivility alone would improve satisfaction.

## REFERENCES

1. Andersson, L. M., & Pearson, C. M. (1999). Tit for tat? The spiraling effect of incivility in the workplace. *Academy of Management Review*, 24(3), 452–471. <https://doi.org/10.5465/259136>
2. Khan, M. S., Elahi, N. S., & Abid, G. (2021). Workplace incivility and job satisfaction: Mediation of subjective well-being and moderation of forgiveness climate in health care sector. *European Journal of Investigation in Health, Psychology and Education*, 11(4), 1107–1119. <https://doi.org/10.3390/ejihpe11040082>
3. Martin, L. D., & Zadinsky, J. K. (2022). Frequency and outcomes of workplace incivility in healthcare: A scoping review of the literature. *Journal of Nursing Management*, 30(7), 3496–3518. <https://doi.org/10.1111/jonm.13783>
4. Samad, A., Memon, S. B., & Kumar, M. (2020). Job satisfaction among nurses in Pakistan: The impact of incivility and informal climate. *Global Business and Organizational Excellence*, 39(4), 53–59. <https://doi.org/10.1002/joe.22004>
5. Wei, H., Sewell, K. A., Woody, G., & Rose, M. A. (2018). The state of the science of nurse work environments in the United States: A systematic review. *International Journal of Nursing Sciences*, 5(3), 287–300. <https://doi.org/10.1016/j.ijnss.2018.04.010>
6. Weiss, H. M., & Cropanzano, R. (1996). Affective events theory: A theoretical discussion of the structure, causes and consequences of affective experiences at work. In B. M. Staw & L. L. Cummings (Eds.), *Research in organizational behavior* (Vol. 18, pp. 1–74). JAI Press.