

The following article is reprinted with permission from the *SC Nurse*

Upstate AHEC Lateral Violence Among Nurses Project

Dianne Jacobs, MSN, RN - Project Director
Susan Kyzer, MSN, RN Curriculum & Training Coordinator

Nurses eat their young – this is something we have known for a long time but much like the 800lb gorilla in the room – we've chosen to ignore it. It now has a name – Lateral Violence. Over 2000 nurses in Upstate SC have been trained to recognize lateral violence and effectively address it.

We have learned the following about lateral violence among nurses in the Upstate through personal experience surveys and feedback in our classes:

- 85% have been victims of lateral violence
- 93% have witnessed lateral violence
- Nonverbal innuendo and backstabbing are the most common forms of lateral violence
- The experienced nurse is most often the perpetrator
- The novice nurse is most likely the victim
- Lateral violence is most often handled by ignoring it

What we also know is that lateral violence is toxic. (This behavior is also known as horizontal violence, workplace incivility, disruptive behavior and bullying-see the article by Karen Stanley elsewhere in this issue for a differentiation of terms) It negatively impacts nurse job satisfaction, retention and ultimately patient outcomes. The Joint Commission implemented a new standard on January 1, 2009 requiring hospitals to define all forms of disruptive behavior and have a process in place for dealing with it – not just in nursing but for all employees.

Upstate AHEC's Lateral Violence in Nursing Project provides a systemic, multi-level approach to addressing the problem. The project targets new graduates, staff nurses, managers and nurse leaders with the goal of establishing and sustaining healthy workplace environments without lateral violence. Three hour workshops were specifically designed for each target audience. We place special emphasis on nurse managers since they are essential to creating and sustaining positive changes in the workplace. Because some perpetrators are unaware of the nature and impact of their behavior, simply raising awareness can eliminate some of the behavior. This outcome is supported in research and has been substantiated in our experience.

One of the most powerful and unique tools we use is a board game designed to develop skills to confront a perpetrator of lateral violence. Responding to scenarios of lateral violence behavior, participants construct their responses and receive feedback from their peers in a non-threatening environment. Providing nurses this tool empowers them immediately to no longer be a victim.

The overall response to the project has been very positive. Nurses and students have many stories to tell – some very compelling and heart wrenching. Stories that go back years but are as vivid as if they happened yesterday. Other nurses have had major “aha moments”, confessing to be a

perpetrator and vowing to change their behavior with the support of their co-workers. We have heard stories of nurses leaving jobs and sometimes the profession because of lateral violence. The trainings have not only given nurses the opportunity to tell their stories but the opportunity to build the skills for effectively addressing these dysfunctional behaviors.

Do you have a story you would like to share? If so, please visit our website at www.upstateahec.org and click on the link "My experience with Lateral Violence." The site is anonymous so please do not use any real names or identifying information.