

Respect: Beginning to Define the Concept in Nursing

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Respect — Do a Google search on the term ‘respect’ and you’ll find over 349 million hits. Amazon.com lists over 683,000 books on the same topic. In nursing, ‘respect’ is often mentioned in both general conversations and in research concerning issues such as nursing job satisfaction and turnover. But what is respect? What specifically do people mean when they talk about respect? How do you know if someone respects you? How do other people know that you respect them?

Amazingly, there is little definitive research in nursing that addresses what nurses mean when they use the term respect. People talk about respect in the way we used to talk about quality — seeming to believe that you know it when you see it, but having a difficult time articulating what it really means conceptually and behaviorally. In recent years, however, we have identified ways to measure quality and, in doing so, have found ways to improve it. The challenge is to do the same thing with respect.

Background

Theoretical and philosophical discussions often trace the concept of respect to the philosopher Immanuel Kant in the late 1700s and discuss a myriad of variables involved in defining and displaying respect. Recent research has shown the construct to be very complicated and based on the perceptions of the beholder. While everyone may be able to provide their own definition of respect, the definitions will vary greatly from person to person. This is because the construct is multidimensional and it is affected by both environmental cues and culture.

Respect is important in the nursing profession. Beginning in the 1980s both the American Nurses Association and the American Association of Colleges of Nursing included respect in their conduct codes for nurses. The first provision of the ANA Code of Ethics (2001, p. 7) says that “The nurse, in all profes-

sional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.” There is additional discussion of respect with patients, colleagues, and even on the responsibility for self-respect.

Early efforts in discussing respect in nursing were directed mostly at respect for patients and respect for cultures and ethnicity. While these efforts were important in addressing how nurses could show respect to their patients, they did not address how medical professionals share respect among each other. What behaviors and actions do nursing professionals display to indicate respect to their peers, coworkers, and hospital leadership? What behaviors and actions indicate respect from these individuals?

One of the central tenets of research is that terms must be defined so that people can correctly apply the results of the research and so that the research can be replicated. In nursing, given the vast number of discussions on respect and numerous studies that include respect as a variable, it is easy to assume that the term has been defined and that we all mean the same thing.

Our experience and that of other researchers (Browne, 1993; Browne, 1997; DeLellis, 2000; Dillon, 2008; Langdon, 2007; Laschinger, 2004) indicates that this assumption is incorrect.

While working on recent national surveys of registered nurses, one of the authors of this article, Dr. Ulrich, became increasingly interested in the issue of respect and nurses. In the first National Survey of Registered Nurses (NSRN), conducted in 2002, RNs who were planning to leave their current jobs indicated that more respect from



management would cause them to reconsider leaving (NurseWeek Publishing & AONE, 2002). Given those results, the investigators delved further into the respect issue in the follow-up survey in 2004 (Ulrich et al., 2005) and the results stimulated even more discussion. Results from the 2004 National Survey of Registered Nurses indicated that more respect from front line management and from administration continued to be influential in whether RNs stayed in or left their current jobs. In addition, 71% of the RNs responding said that increased respect for nurses would help solve the nursing shortage.

A question was also added to the 2004 survey with seven items that had been suggested by various authors as indicative of respect (i.e., involving nurses in decision-making and listening to nurses' concerns) and asked the participants if these items indicated respect to them. No item was selected by more than 43% of the respondents. Expanded literature reviews yielded very few studies in which respect was defined or conceptualized. In follow-up surveys, more respect from front-line managers and administrators continued to be two of the top four things that RNs say would cause them to reconsider leaving their current positions (Buerhaus, Donelan, Ulrich, DesRoches, & Dittus, 2007). Similar results were also found in two national surveys of critical care nurse work environments (Ulrich et al., 2006; Ulrich et al., 2009).

In presentations on the results of these studies, Dr. Ulrich often asked the audience members about their thoughts on respect. While nurses often cited respect as a key component of retention, job satisfaction, and a critical element in the delivery of safe patient care, few could provide a definition of respect or describe – without prompting — the behaviors that communicate or demonstrate respect. As the lack of clarity continued, the need for more in-depth study on respect in nursing became increasingly apparent. In 2008, Dr. Cindy Lefton and Psychological Associates joined what we now call The Respect Project to determine what RNs mean when they use the term 'respect' and what behaviors demonstrate respect. The plan for this long term research project includes directed interviews with a convenience sample of registered nurses and the development of an online instrument, leading to a large-scale survey of RNs to define respect in nursing and behaviors that indicate respect. This article reports the results of the initial interviews.

Methodology

Using a convenience sample, RNs were interviewed at hospitals and nursing conferences across the United

States in 2008. Interview data included basic demographic information and open-ended questions concerning the definition of respect and the behaviors that indicate respect. Questions were developed through a literature review and discussions with experienced RNs. Sixty-three (63) RNs from 27 different states participated in first round of interviews. Based on the first round results, several questions were modified. Forty-three RNs were interviewed in the second round.

Participants' responses to questions were recorded verbatim. Results were analyzed using content analysis which allows for the discovery of general themes or patterns to emerge.

Results — Respect To and From Colleagues

Participants were asked how they define respect, what behaviors show respect for them, and what actions/behaviors they use to convey respect towards people with whom they work. Five themes emerged (see Table 1). They are listed below along with samples of the direct quotations from the participants.

Listen, be fully attentive, and truly hear.

- “When you are talking and the person listening is actually hearing you.”
- “By listening and not talking at the same time I’m talking.”
- “When people listen to you and your opinions and then take into consideration what you have to say and where you are coming from.”
- “I wish they wouldn’t walk away when I am talking to them.”
- “Valuing what they are saying even if it doesn’t mean anything to me and valuing what it means to them.”
- “When you are talking, they don’t talk over you.”
- “Being engaged.”
- “Be present in mind, spirit, and body.”
- “Eye contact.”

Acknowledge and express appreciation.

- “When you walk into a room, say hi.”
- “Acknowledge them, always make sure you say something personal, tell them they are doing a good job and let them know they are appreciated.”
- “If I tell them good things it comes from my heart, I don’t fake it, if I tell good things then it’s really good.”
- “Acknowledge they are doing a good job, congratulate them, and speak highly about good people to

others because we must look out for each other.”

- “Don’t treat me like I am stupid. I may not have the knowledge base senior nurses have, but I’m not a stupid person, because if I was, I wouldn’t be here.”

Exhibit empathy and understanding.

- “Try to be considerate of people’s feelings and try to understand the thoughts and feelings behind their actions.”
- “Courtesy, mutual tolerance of others, and valuing what they are saying even if it doesn’t mean anything to me, valuing what it means to them.”
- “Be inclusive, include everyone, including the quiet folks, and ask opinions of everyone.”

Display courtesy and consideration.

- “With eye contact and by looking at them.”
- “Address people by their names and say please and thank you.”
- “M.D.s during rounds ask me do you have any questions, they acknowledge me.”
- “By overly trying to please people by saying thank you to convey my respect and willingness to be part of the team.”
- “Be available to help.”

Be accountable and professional.

- “Come to work on time.”
- “Follow through on what I say I will do.”
- “Not talking behind your back; if there is an issue, coming to you to discuss it.”
- “They tell me the truth.”

Results – Respect From Managers

In addition to the previously mentioned ways of conveying respect, nurses were also asked what other behav-

iors by their managers indicate respect. Four themes emerged and are listed below with examples of participant responses (see Table 1).

Acknowledge staff.

- “Asking my opinion on things and listening.”
- “Acknowledging you and your accomplishments.”
- “When they come in every morning and go to every room and say good morning to each nurse.”
- “Some managers are too busy to say ‘hi,’ but they should go around and check in with people and acknowledge that they are all there.”
- “Acknowledgement — when managers made it a point to come by and say ‘good morning’ and touch base with you.”

Communicate and provide for information exchange.

- “Following through on what we talk about, doing what they say they will do and having closure on the issue whether it went the way I wanted or not is not important, just that it was dealt with.”
- “I want them to be up front, if I do something I want to know.”
- “Greet me with a positive attitude, listen, be approachable, and easy for you to open up to.”
- “Gets back to you in a timely manner and being generally helpful in needs requests and if they don’t have an answer, they will get back to you.”
- “Returning e-mails in a timely fashion, keeping you in the know, acknowledging you, and sending out global information so we know what’s going on.”
- “Not being so overextended that you don’t have time to participate in your unit, by saying my door is always open but really there is no time for that.”
- “Having an open-door policy and meaning it.”

Table 1: Indicating Respect – Themes

Respect To and From Colleagues

- Listen, be fully attentive, and truly hear.
- Treat others as you want to be treated.
- Acknowledge and express appreciation.
- Exhibit empathy and understanding.
- Display courtesy and consideration.
- Be accountable and professional.

Respect From Managers

- Acknowledge staff.
- Communicate and provide for information exchange.
- Ask staff for their opinions and for what they need.
- Be supportive, fair, consistent, and empathetic.

Ask staff for their opinions and for what they need.

- “When they listen and ask my opinion it means they respect my ideals.”
- “Understand people have different needs, some have more experience or less experience, just be a second resource.”
- “Always ask questions about my concerns.”
- “Asking our opinions on things.”
- “Being open for criticism and honest input.”
- “Listening to problems and suggestions.”

Be supportive, fair, consistent, and empathetic.

- “Manager allows me to function independently and is always there to support me.”
- “Supporting the team as a whole, not just the day shift or the night shift, or senior nurses or less senior nurses, but keeping a good balance.”
- “When they consider my situation sometimes.”
- “Implement and practice what you preach; don’t be fake or plastic.”
- “When there is an issue they do try to listen to the whole issue, they get both sides and try to stay diplomatic.”
- “Do what they say they are going to do.”

Conclusions

Based on these interviews, five themes were identified in describing respect to and from colleagues and four themes were identified in describing respect from managers. These themes offer us further insight into an operational definition of the term ‘respect’ as used by nurses.

The question of what individuals mean when they talk about respect is an important one. This research, though in a preliminary stage, supports the need for nurses to initiate a dialog with each other and with other healthcare colleagues about what respect means and what behaviors best convey respect.

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The Respect Project

We need your help in the next phase of The Respect Project. Beginning July 1, 2009, we will begin using an online version of The Respect Project tool. We would like your input on what respect means to you, what behaviors indicate to you that you are respected by others, and what behaviors you exhibit when you respect others. The survey tool will be available online on the Center for American Nurses website at www.centerforamericannurses.org. Please take a few minutes of your time and fill it out.

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