

# **Swearing: Impact on Nurses and Implications for Therapeutic Practice**

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Philosophy

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## Declaration

*I hereby certify that the work embodied in this thesis is the result of original research and has not been submitted for a higher degree to any other University or Institution.*

Signed: .....

Date: .....

Teresa Elizabeth Stone

## **Dedication**

This thesis is dedicated to my Mother and Pa who have given me a lifetime of love and support.

## Acknowledgments

My list of dramatis personae for this study is long. My principal supervisor, Mike Hazelton, remained unfailingly encouraging and optimistic and his wealth of experience in research was invaluable. He told me he had been caught laughing to himself while reading through the questionnaire, a cameo of him that I treasure. Ed Clayton and Kim Colyas worked wonders with my statistics, and I painfully and slowly learned much and forgot more. Margaret McMillan came in slightly later in the piece, was completely inspirational, and really got me over the line. Jill Valdar is the editor and friend every girl needs, despite language that made her hair curl. Associate Professor Brian Taylor was a wonderful resource for all things linguistic and he gave freely of his own time. Heartfelt thanks to my wonderful husband Scott, who is forever supportive, and to Claudia, my dog, who has patiently accompanied me, snoring, as I wrote. Thanks, too, to the many nurses who participated in the study.

“As the matter stands, [this] poor devil of an author is proposing an expedition into regions that, despite many hundreds of years of literary enterprise, are still remote and untravelled. It were not surprising therefore at the onset that the readers should inquire if [s]he is sincere and reliable, or whether on the contrary [s]he is counterfeiting honesty with a sanctimonious face. It were perhaps right they should be assured that the trip is really intended for their welfare, and that the skipper is not given to risk the safety of [her] craft for a mere capful of wind.”

(Sharman, 1884, p.11).

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*Readers who are likely to be offended by swearwords are advised that the thesis contains many words which might be considered offensive.*

## Abstract

Swearing is a subject largely ignored in academic circles but impossible to ignore in the health workplace. Despite its prevalence there has been little academic research into swearing, and certainly none on its impact on nursing staff. Nurses are, of all health workers, most likely to be targets of verbal aggression with up to 100% of nurses in mental health settings reporting verbal abuse. Nurses encounter swearing from patients and their carers, staff, and managers, and use swearwords in communication with each other, but there is no reference in the literature to the effects on nurses of exposure to swearing.

This study set out to rectify that lack of research into swearing by answering three main questions:

1. What is the extent of swearing /verbal aggression in a health care setting?
2. What are the implications of swearing for a therapeutic encounter?
3. What is the impact of swearing on nurses?

A mixed methods approach was employed. Phase one of the study explored the context of care, utilising the Overt Aggression Scale to describe the nature and extent of swearing and verbal aggression across a range of acute and long-term inpatient mental health settings. Data were derived from 9,623 reports spanning a 10-year period. The sample comprised 384 (72.1%) males and 148 (27.9%) females aged between 9.5 years and 93.3, mean age 45.6, SD=21.00 years. Most frequently reported over the 10-year period was verbal aggression; incidents involving females occurred mainly in connection with the more severe levels of verbal aggression. "Psychosis" was recorded as the main perceived cause of verbal aggression, in itself an insufficient explanation. A rising tendency to cite psychosis emerged as the level of aggression rose and, on average, 1.9 interventions were recorded for each aggressive incident.

Phase two surveyed 107 nurses across three health care settings – paediatrics, adult mental health, and child and adolescent mental health – by means of a questionnaire designed to elicit a combination of both qualitative and quantitative data, the Nursing Swearing Impact Questionnaire, which included three standardised instruments. The quantitative data were subjected to descriptive and inferential statistical analysis.



High levels of swearing were reported, 29% of nurses being sworn at 1 to 5 times per week and 7% “continuously.” A similar incidence occurred within the nursing team, but being sworn at in anger by another staff member was rare and the major use was in jest or in conversation. The study failed to find significant differences between mental health and paediatric settings in the frequency of swearing but did find gender-based differences.

High levels of distress caused by being subjected to swearing were evident, particularly when the aggressor was a relative or carer of a patient. Moreover, the respondents appeared to have only a limited range of interventions for use in dealing with the experience of being sworn at. However, what emerges strongly from the data is the extent to which swearing is culture- and context-bound, and the fact that nurses share many of the views and attitudes about swearing held by society at large.

The culmination of the findings suggests that swearing is both widespread and under-reported in a range of health contexts. The implications of swearing are poorly understood by nurses. These, and the magnitude of their distress in being subjected to it, render them ill-equipped to deal with the experience. The concomitant negative effects on empathy result in the nurses’ distancing themselves from the patient when confronted and implementing only a restricted range of interventions and detrimental effects on the quality of the therapeutic relationship will have negative effects on patient outcomes. Given the levels of swearing reported and its consequences on the therapeutic relationship, further research is warranted.

## Glossary of Terms

Abbreviation	Full term	Definition
	Arvo	Australian slang term for “afternoon” as in <i>see you Saturday arvo</i> . “Arvo” is an example of a special feature of Australian English, the habit of adding “o” to an abbreviated word (Australian National University, 2007). Lacks the social stigma attached to “youse.”
ASQ	Attributional Styles Questionnaire	Seligman’s self-report instrument which measures explanatory style for good and bad events, using three causal dimensions: internal versus external, stable versus unstable and global versus specific cause.
	Blasphemy	A deliberate vilification of religious symbols or names.
	Clonazepam	Clonazepam (Rivotril) is in the benzodiazepine class of drugs. It is an anticonvulsant and anxiolytic and may be used as a sedative.
	Connotative	Refers to the emotional nuances commonly associated with a word. The meaning of a word incorporates both denotation and connotation.
	Coprolalia	Refers to the involuntary compulsive utterance of swearwords and is a type of verbal tic. (From the Greek, <i>kopros</i> = ‘dung’, <i>lalia</i> = ‘to chatter’).
	Coprophagia	The uncontrollable performance of obscene gestures.
	Denotative	Refers to the literal meaning of a word.
	Dozens	Refers to verbal duelling in which deliberately provocative insults are exchanged. Recorded in use by Black American youths; participants taunt each other in a variety of savagely imaginative ways.
	Dysphemism	The replacement of an inoffensive term by an offensive or disparaging term.
Empathy		Empathy is the capacity to understand another person’s subjective experience from within that person’s frame of reference (Bellet

Abbreviation	Full term	Definition
		& Maloney, 1991), and encompasses both affective and cognitive domains (Stueber, 2008).
	Euphemism	The replacement of an offensive term by an inoffensive or acceptable term.
<i>Prn</i>	Pro re nata (Latin)	Abbreviation for <i>pro re nata</i> meaning “as needed” or “when necessary.” In the present context this refers to <i>prn</i> psychotropic medications (medications given with the aim of changing the patient's mental state on an “as needed” basis).
GHQ	General Health Questionnaire	A brief self-report screening test designed to detect psychiatric disorders in community and non-psychiatric clinical populations.
GTS	Gilles de Tourette Syndrome	Gilles de Tourette Syndrome is a neurological disorder characterised by motor and phonic tics; coprolalia, probably the most socially handicapping symptom of GTS, may accompany it.
LOC	Locus of Control	First posited by Rotter in 1966, LOC refers to the degree to which individuals perceive themselves as having control over outcomes.
NSIQ	Nursing Swearing Impact Questionnaire	The NSIQ [Appendix 5] totals 22 pages and comprises five parts, Items included both rating scales and open-ended short answer questions seeking information on frequency and nature of, and responses to, exposure to swearing. The NSIQ also included a number of standardised instruments assessing respondents' general health using the GHQ, internal versus external control of reinforcement using the LOC instrument, and explanatory style using the Attributional Style Questionnaire.
OAS	Overt Aggression Scale	A standardised behavioural checklist developed for inpatient psychiatric units by Yudofsky, Silver, Jackson, Endicott and Williams (1986) measuring the frequency and severity of four categories of aggression.
	Profanity	Refers to a worldly and careless irreverence in treating things with a religious connotation in a disrespectful manner Sometimes used interchangeably with “swearing.”

Abbreviation	Full term	Definition
	Swearing	<p>(a) refers to something that is taboo and/or stigmatised in the culture;</p> <p>(b) should not be interpreted literally;</p> <p>(c) can be used to express strong emotions and attitudes.</p> <p>(Adapted from Andersson and Trudgill, 1990, p.53).</p>
	Taboo	<p>Taboo words are those that are forbidden or unmentionable, either because they are sacred or because they invoke disgust. Taboo in Tonga in its original form referred to prohibited behaviour, and tabooed expressions were avoided in the belief that they were evil or could cause harm, even death (Burridge, 1999b)</p>
	Therapeutic relationship	<p>In this study the term "a therapeutic relationship" refers to the professional relationship between the nurse and the patient/client. The relationship has as its central focus goal-directed activities related to the healthcare needs of the patient; it is a vehicle for therapeutic change, and involves the establishment and maintenance of appropriate professional boundaries.</p>
	Verbal aggression	<p>A communication intended to cause psychological harm to another person or perceived as having that intent (Vissing, Straus, Gelles, &amp; Harrop, 1991, p.225).</p>
	Youse	<p>An Australian slang word. Plural of "you." The English Dialect Dictionary attributes "yous" to Irish English. Possibly the lowly status in Australia of Irish versus British English ensured that youse would be common in colloquial speech but condemned in formal speech and writing; in Australia its use is associated with a lack of education.</p>

## Papers Arising From this Research

### ***Peer-reviewed publications***

Stone, T.E. & Hazelton, M. (2008). An overview of swearing and its impact on mental health nursing practice, *International Journal of Mental Health Nursing*, 17, 208-214.

### ***Conference papers***

Stone, T.E. & Hazelton, M. (2005) *Cursing and nursing: Mapping patterns of verbal aggression and nursing intervention in inpatient mental health settings.*

Paper presented at the International Australian and New Zealand College of Mental Health Nurses Conference, Fremantle.

Stone, T.E. (2005). *Swearing in the workplace.*

Paper presented at CAMHSNET Education, Newcastle, NSW, Australia.

Stone, T. E. & Davis, S. (2006). *Warning: this job contains coarse language, violence, adult themes, nudity and scenes which may offend some nurses.*

Paper presented at the Hunter Branch conference of the Australian and New Zealand College of Mental Health Nurses Conference, Newcastle.

*Awarded the 2006 Hunter Mental Health Award.*

Stone, T.E. & Hazelton, M. (2007). *“Scum and Excrement of the Mouth”: When language itself makes waves.*

Paper presented at the 33<sup>rd</sup> International Australian College of Mental Health Nurses Conference, Cairns.

*Awarded the 2007 Australian College of Mental Health Nurses Research Award.*

Stone, T.E. (2007). *Wounding words: Their effects on nurses and the implications for therapeutic relationships.*

Invited speaker for NSW Branch of the Australian College of Mental Health Nurses Conference, Sydney.

Stone, T.E. (2007). *Remaining therapeutic in the face of bad language.*

Paper presented at the 1<sup>st</sup> Asian International Conference on Humanized Health Care, Khon Kaen, Thailand.

Stone, T.E. & Hazelton, M. (2008). *"That is not appropriate": language, politeness and nursing.*

Paper presented at the 34<sup>th</sup> International Australian College of Mental Health Nurses Conference, Melbourne.

Stone, T.E. (2008). *"Language uncorked: Swearing, demystifying a taboo."*

Paper presented at the 13th NSW Rural Mental Health Conference, Hunter Valley.