CULTURAL ADAPTATION AND SEMANTIC EVALUATION OF INCIVILITY IN NURSING EDUCATION – REVISED SURVEY: BRAZILIAN VERSION[a]

ADAPTAÇÃO CULTURAL E EQUIVALÊNCIA SEMÂNTICA DO INCIVILITY IN NURSING EDUCATION – REVISED SURVEY: VERSÃO BRASILEIRA[a]

ADAPTACIÓN CULTURAL Y EQUIVALENCIA SEMÁNTICA DE LA INCIVILITY IN NURSING EDUCATION REVISED SURVEY: VERSIÓN BRASILEÑA[a]

Vanessa dos Santos Ribeiro[1]
Cristina Mara Zamarioli[2]
Danielle Cristina Garbuio[3]
Margareth Yuri Miyazaki[4]
Claudia Benedita dos Santos[2]
Emilia Campos de Carvalho[2]

[1]Universidade de São Paulo - USP, Discente do Programa Interunidades de Doutoramento da Escola de Enfermagem de Riberão Preto. Ribeirão Preto, SP - Brazil.

[2]Universidade de São Paulo - USP, Docente do Programa de Pós-Graduação da Escola de Enfermagem de Riberão Preto. Ribeirão Preto, SP - Brazil.

[3]Centro Universitário Central Paulista. São Carlos, SP - Brazil.

[4]Universidade de São Paulo - USP, Enfermeira, Escola de Enfermagem de Riberão Preto. Riberão Preto, SP - Brazil.

Corresponding author: Emilia Campos de Carvalho
E-mail: ecdcava@usp.br

Authors' contributions:
Statistical Analysis: Vanessa S. Ribeiro, Claudia B. Santos, Emilia C. Carvalho, Cristina M. Zamarioli, Danielle C. Garbuio; *Fundraising*: Vanessa S. Ribeiro; Data Collection\: Vanessa S. Ribeiro, Margareth Y. Miyazaki, Danielle C. Garbuio; *Conceptualization*: Vanessa S. Ribeiro, Emilia C. Carvalho, Claudia B. Santos, Cristina M. Zamarioli, Margareth Y. Miyazaki, Danielle C. Garbuio; *Resource Management*: Vanessa S. Ribeiro; *Project's Manager*: Emilia C. Carvalho, Vanessa S. Ribeiro; *Investigation*: Vanessa S. Ribeiro, Margareth Y. Miyazaki, Danielle C. Garbuio; Methodology: Emilia C. Carvalho, Vanessa S. Ribeiro, Claudia B. Santos; *Redaction – Preparation of the Original*: Emilia C. Carvalho, Vanessa S. Ribeiro, Claudia B. Santos, Cristina M. Zamarioli, Margareth Y. Miyazaki, Danielle C. Garbuio; *Redaction – Review and Editing*: Emilia C. Carvalho, Vanessa S. Ribeiro, Claudia B. Santos, Cristina M. Zamarioli, Margareth Y. Miyazaki, Danielle C. Garbuio; *Supervision*: Margareth Y. Miyazaki, Danielle C. Garbuio, Cristina M. Zamarioli; *Validation*: Emilia C. Carvalho; *Visualization*: Vanessa S. Ribeiro, Emilia C. Carvalho, Claudia B. Santos.

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Luciana Regina Ferreira da Mata

ABSTRACT

Objective: to culturally adapt and verify the semantic equivalence of Incivility in Nursing Education – Revised Survey for the Brazilian culture. **Method**: a methodological study was conducted in a nursing school in *São Paulo*, Brazil, according to the following steps: translation, reconciled translated version, back-translation, expert committee, test in the target population, and final version was presented to the author of the original version. The semantic assessment of the Brazilian Portuguese with the target population followed the DISABKIDS method®. **Results**: the translated version presented few divergences from the original one. The semantic equivalence assessment indicated a few problematic items, and the suggestions of 21 nursing students who participated in this stage were essential for adjusting three items. The Brazilian version comprises 24 items concerning the students' behaviors, and another 24 concern the professors' behaviors, representing high and low levels of incivility. The final version also comprises multiple choice questions and descriptive-type questions to characterize the phenomenon at the institution and propose alternatives to deal with it. This version is very similar to the original one and was approved by the original author. **Conclusion**: the adaptation to the Brazilian culture and semantic evaluation were satisfactorily concluded, resulting in a version that can be submitted to psychometric proprieties and contribute to identifying and managing the incivility phenomenon in Brazilian Nursing institutions.

Keywords: Nursing; Incivility; Validation Study; Education; Behavior.

RESUMO

Objetivo: realizar a adaptação cultural e a equivalência semântica do Incivility in Nursing Education - Revised Survey para a cultura brasileira. *Método*: pesquisa metodológica realizada em uma escola paulista de enfermagem e que contou com as seguintes etapas: tradução, síntese das traduções, retrotradução, análise por comitê de especialistas, teste na população-alvo e apresentação da versão final à autora. A avaliação semântica para o idioma português do Brasil com a população-alvo seguiu o método DISABKIDS®. *Resultados*: obteve-se uma versão traduzida com poucas divergências da versão original. A equivalência semântica apontou poucos itens de dificuldade, e as sugestões dos 21 estudantes de enfermagem que participaram dessa etapa foram essenciais para ajustes em três itens. A versão brasileira é composta por 24 itens referentes a comportamentos de estudantes e outros 24 a comportamentos de professores, representando os níveis alto e baixo de incivilidade. A versão final também conta com questões de múltipla escolha e questões descritivas para caracterizar o fenômeno na instituição e propor alternativas de enfrentá-lo. Esta versão apresenta grande similaridade à versão original e foi aprovada pela autora original. *Conclusão*: a adaptação à cultura brasileira e a equivalência semântica foram concluídas satisfatoriamente, resultando numa versão com condições de ser submetida à análise de propriedades psicométricas e contribuir para identificação e manejo do fenômeno incivilidade nas instituições brasileiras de ensino de Enfermagem.

Palavras-chave: Enfermagem; Incivilidade; Estudo de Validação; Educação; Comportamento.

RESUMEN

Objetivo: el propósito es llevar a cabo la adaptación cultural y la equivalencia semántica de la Incivility in Nursing Education - Revised Survey para que sea aplicable a la cultura brasileña. *Método*: se llevó a cabo una investigación metodológica en una escuela de enfermería en el estado de São Paulo, que abarcó diversas etapas: traducción, síntesis de traducciones, retrotraducción, análisis por parte de un comité de expertos, prueba en la población objetivo y presentación de la versión final a la autora original. Para evaluar la equivalencia semántica en el idioma portugués de Brasil con la población objetivo, se siguió el método DISABKIDS®. *Resultados*: se logró obtener una versión traducida con mínimas discrepancias respecto a la versión original; el análisis de equivalencia semántica reveló algunas dificultades en determinados ítems, y las aportaciones de los 21 estudiantes de enfermería que participaron en esta etapa resultaron esenciales para realizar ajustes en tres ítems. La versión brasileña consta de 24 ítems vinculados a comportamientos de estudiantes y otros 24 relacionados con comportamientos de profesores, que representan niveles altos y bajos de incivilidad. Además, se incluyen preguntas de opción múltiple y descripciones para caracterizar el fenómeno en la institución y proponer alternativas para hacer frente a el. Esta versión guarda una notable

semejanza con la original y recibió la aprobación de la autora original. **Conclusiones:** *se logró llevar a cabo la adaptación exitosa a la cultura brasileña y la equivalencia semántica, lo que dio lugar a una versión que está lista para someterse a un análisis de propiedades psicométricas y contribuir a la identificación y manejo del fenómeno de la incivilidad en las instituciones educativas de enfermería en Brasil.*

Palabras clave: *Enfermería; Incivilidad; Estudio de Validación; Educación; Comportamiento.*

INTRODUÇÃO

Acts of incivility, identified as a problem of moderate severity in the school environment, characterize a global phenomenon and have concerned faculty and managers due to the consequences to the well-being of individuals experiencing or witnessing such events. Incivility also harms the educational institution and its purposes, impairing learning and the performance of employees and faculty, resulting in absenteeism and dismissals[1,3].

In 2009, the notion that incivility reflects a problem that occurs on a continuum was disseminated, the extremes of which range from irritating, annoying, or distracting behaviors, called disruptive behaviors (lowest level of incivility), up to aggressive, threatening, or violent behaviors (high level of violence). This variation in ascending order can be exemplified by nonverbal behaviors, facial expressions, bullying, racial/ethnic prejudice, intimidation, physical violence, and tragedy[4,5].

In the academic context, incivility concerns verbal and non-verbal behaviors that degrade, belittle, or exclude an individual. Such behaviors arise from a culture of incivility and levels of power, causing psychosocial and physiological suffering[6].

Incivility in Higher Nursing Education occurs between students and faculty, faculty and students, and even among peers[7]. In field practice, incivility may be expressed by educators, tutors, healthcare team members, or even patients and their families. There has been an increase in the frequency of acts of incivility in certain situations and environments. For example, situations include assessments[7], and the environments in which such acts most frequently occur include the surgical center[8], classrooms with a large number of students[9], and virtual learning environments[10,11].

Incivility in the classroom environment is defined as any action that interferes with learning. Uncivil behaviors are linked to rude and disruptive behaviors in the relationship between student and faculty, or any dialogue or behavior that adversely affects the well-being of students or faculty, weakening professional relationships and the teaching-learning process[1,12].

The consequences of such behaviors harm all those involved, affecting academic performance, self-esteem, and the training of future professionals[13]. Additionally, incivility contributes to job dissatisfaction[14], distancing professionals from their field of work[1]. Uncivil behaviors are often perpetuated in the work environment of newly graduated students and are subsequently associated with errors, accidents, wear and tear, absenteeism, low job satisfaction, and irresponsible practice[15].

Given the impact of uncivil behaviors, several strategies are proposed to prevent and manage incivility. The literature suggests recognizing, characterizing, and explaining institutional expectations toward such behaviors and encouraging a culture of civility[16]. Educators and students should develop interpersonal skills and psychological coping strategies. Hence, interactive pedagogical strategies have been reported, such as e-learning[15], videos[5], scenarios, semi-virtual reality simulation[16], discussions about self-efficacy and trust, and how to increase the perception of civility and decrease uncivil behaviors[15].

Given the potential harm to learning and, possibly, future professional practice, uncivil behaviors must be identified to avoid or minimize them; hence, a validated instrument is needed. A search for a comprehensive instrument to characterize such a phenomenon enabled the Incivility in Nursing Education (INE) Survey creation. It was developed in 2004, and its development and review process up to editing is described in the literature[4,5].

The revised American version of the instrument has already been used on different continents. For example, a multicenter study intended to map this phenomenon among nursing professors from 10 countries reinforces the instrument's usefulness[17]. Additionally, an American study used it to measure the effect of an e-learning module developed to educate students about incivility and showed that it is sensitive to identify changes[15]. Furthermore, Chinese nursing professors and students completed the Survey so that the researchers could identify their perceptions of uncivil behavior, the factors contributing to it, and how to approach the problem. Consequently, a proposal emerged to promote civility in Nursing education[18].

Given the qualities reported in the literature about the INE-R Survey[5], and intending to contribute to the development of new studies on incivility in Nursing education, we found pertinent to adapt this instrument to the Brazilian culture and make it available.

OBJECTIVE

To perform the cultural adaptation and semantic equivalence of the INE-R Survey into the Brazilian Portuguese.

METHOD

This methodological study was conducted in a Higher Education nursing institution in the interior of *São Paulo*, Brazil. It was developed in two stages: i) cultural adaptation of the INE-R Survey[5] according to the steps described in a model known in the literature[19]; and ii) semantic assessment, according to the DISABKIDS® method[20], adapted for Brazil by the Health Measures Research Group (GPEMSA)[20]. The DISABKIDS® group[20] works with instruments that assess the quality of life of children and adolescents with chronic health conditions; however, the method has been used to evaluate different instruments among people of varied ages, speaking different languages, and in different countries[21].

The following stages[19] were adopted in the cultural adaptation conducted from November 2019 to January 2020: translation of the original version in English into Brazilian Portuguese by two Brazilian translators fluent in English. This process resulted in Translation 1 and Translation 2; both versions were reconciled to produce one single version (Translation 12); back-translation of the Portuguese version into English by two native American translators, resulting in Back-Translation 1 and Back-Translation 2; both versions were reconciled, and one single version remained, Back Translation 12; a committee assessed Back Translation 12, resulting in the final (adapted) version; the adapted version was tested in the target population.

The committee comprised two Brazilian translators and three nurses - the research evaluation group members. The author invited these nurses because they met the criteria of being a professor with a doctoral degree and having experience in instrument validation or related knowledge. After establishing rapport, the committee members signed two copies of free and informed consent forms. The experts assessed the translated content regarding its usability, understanding, relevance to the topic, and equivalence between the instruments in both languages, adapting the final version according to the model adopted[19]. The method recommends sending the final adapted version to the author of the original instrument and/or the study coordination committee to confirm agreement with what was proposed[19].

The version approved by the committee (adapted version) must be tested on the target audience[19]. This step is intended to verify whether the instrument is easily understood and provide valuable suggestions, if applicable. With this purpose in mind, we performed the semantic assessment[20,21] among undergraduate Nursing students from February to March 2020.

The INE-R Survey[5] consists of 48 items on uncivil behavior, distributed in two blocks: 24 items directed to students and 24 to faculty. In both blocks, 15 items are considered to have a lower level of incivility and nine a higher level of incivility. This theoretical structure is supported by exploratory factor analysis, which suggests two factors (high incivility and low incivility) and was reiterated by confirmatory factor analysis; satisfactory reliability was found (Cronbach's alpha ≥0.94)[5]. Sixteen of the items are identical in both blocks (e.g., item 22 – Ameaças de danos físicos a outras pessoas [Threats of physical harm against others]) and eight are similar (item 15 student version – Exigir provas substitutivas, extensões de prazos ou outros favores especiais [Demanding make-up exams, extensions, or other special favors]; item 15 faculty version – Recusar-se a discutir sobre provas substitutivas, extensões de prazos e alterações de notas [Refusing to discuss make-up exams, extensions, or grade changes]. The level of incivility is assessed for each item and the frequency with which it occurred in the last 12 months. Thus, there is a Likert scale with the following options: "not uncivil," "somewhat uncivil," "moderately uncivil," and "highly uncivil," and another with the options "never," "rarely," "sometimes," and "often." The scores in both scales range from 1 to 4 for each item. Furthermore, it presents a set of questions for the respondents to give their opinion on the institution's level of incivility, the predominant source of uncivil behavior (students or faculty), the institution's degree of civility, and the priority of strategies to increase civility levels. Finally, there are discursive-type questions in which the respondents are asked to describe the situations and consequences of academic incivility.

In this study, the 48 items, with eight items from both levels of incivility, were randomly distributed into six subsets (A, B, C, D, E, and F) in the semantic evaluation stage. Each subset of items was assessed by a group of three students from different academic semesters. The questions at the end of the instrument were composed of subset G and were examined by another group of three students.

Two instruments were used to assess the adapted INE-R Survey, one for a general evaluation by the target audience and another for the specific and more detailed evaluation of each item. Therefore, all seven groups of students (from A to G) provided their general impressions of the instrument using the General Assessment Questionnaire. The specific analysis was performed using the Semantic Assessment Form, in which each group of students assessed a subset of items (from A to G).

Semantic equivalence considered the answers provided by the students to the components of the general and specific assessment instruments to verify the instrument's relevance and understandability. Results equal to or greater than 80% in each element of the general and specific assessments were considered valid for this study stage. The committee assessed potential adjustments to the remaining items.

All students regularly enrolled at the host institution were considered eligible, except those in the first academic year. This selection is intended to meet the recommendations of the original instrument's authors that students must have 12 months of experience in the program to be able to assess content[5]. The students were recruited through a non-probabilistic sampling, the Snowball or network technique;[22] there was no loss of participants.

Data were collected after obtaining the Institutional Review Board's approval. The students were informed in advance of the study's objectives, and those who agreed to participate signed two copies of free and informed consent forms. The final version, which incorporated suggestions after the semantic evaluation, was sent to the original version's author, who authorized the version

RESULTS

Two Brazilian versions (Translation 1 and Translation 2) were produced in the process of cultural adaptation[19] of the INE-R Survey instrument[5]; the meaning of the instrument items remained the same in the translation process. However, one of the Brazilian versions presented an item beginning with the definite article ("The" incivility in teaching…) and the other without it (Incivility in teaching…). Additionally, there were two different terms, in which "ensino" [teaching] was chosen over "*educação*" [education], and the word "*estudante*" was translated as "student." Next, the two versions were reconciled (Translation 12) and back-translated. Again, two back-translation versions resulted, Back-Translation 1 and Back-Translation 2. These versions showed no divergences - except regarding the terms "profanity" and "condescending."

The committee determined that the terms "*profanar*" [profane] and "*condescendente*" [condescending] to be respectively replaced by "*praguejar*" [swearing] and "*humilhante*" [humiliating], which would better represent the meaning of the original instrument. Furthermore, the committee suggested small adjustments to facilitate the instrument's comprehensibility, such as replacing "*em relação*" [in relation to] with "*sobre o conteúdo*" [about the content]; "*assunto*" with "*matéria*" [subject]; "*relacionado*

ao nível de incivilidade" [related to the level of incivility] with "*considerando o nível de incivilidade*" [considering the level of incivility] and "*comentários aviltantes*" [demeaning comments] with "*comentários humilhantes*" [humiliating comments]. Agreement (100%) was consensual among the committee members.

The original instrument's author assessed the version adapted to the Brazilian culture and supported the decision to replace "condescending" with "demeaning." She also suggested replacing the term "color" with self-reported ethnicity" in the sociodemographic form. Finally, she requested complementing the options of answers in one of the multiple-choice questions at the end of the instrument. Such inclusion concerned strategies that contribute to improving civility in the teaching of Nursing.

The semantic assessment was performed after these adjustments were implemented. At this stage, 21 students participated, 23.8% of whom were male and 76.1% female. Regarding ethnicity, 66.6% self-reported being Caucasian, 14.2% were mixed-race, 14.2% Afro-descendent, and 4.7% Asian-descendent; no participant reported being indigenous. Age ranged between 19.3 and 24.8 years.

As recommended by the method adopted in the semantic assessment, all students first completed the INE-R Survey General Assessment Questionnaire adapted to Brazilian culture. Most considered it very good (90.4%), with no difficulties in using it (95.2%), found the items comprehensible (100.0%), and very relevant (95.2%) (Table 1).

Still regarding the general assessment, when asked if they would like to change anything in the content of the adapted instrument, eight students responded affirmatively (Table 1). However, only seven suggestions were provided (Table 2).

When asked if they would like to add anything to the instrument, 11 students responded affirmatively (Table 1). The suggested items or questions were:

- Uncivil relationship between student-employee, faculty-employee, student-health service's patient, and faculty-health service's patient, considering these are actors involved in the teaching field;

- Having witnessed punishment resulting from uncivil behavior, whether among students or faculty members;

- Faculty members discouraging students during the learning process;

- Reason (cause) students present certain uncivil behaviors in the classroom;

- Students' responses when facing a situation of incivility:
- Support received by faculty and peers to perform an action when there is an uncivil action.

Another assessment provided for in the method adopted here and included in the Semantic Assessment Form concerns a specific assessment of items regarding their relevance and understanding. All evaluators considered 36 of the 48 items relevant; a portion of the evaluators considered 11 items relevant, and one student considered one item irrelevant. Regarding the comprehensibility of the 48 items, all evaluators considered they had no difficulties understanding 45 items, and two students considered three items as having no difficulties.

Regarding the relevance of the four close-ended questions, three were considered totally relevant by the three students assessing them, and two considered one question relevant. All questions presented no difficulties to be answered, so they remained as initially proposed.

The students made some suggestions to reformulate the items. Table 3 shows the version initially proposed, the students' suggestions, and the item's final version after the committee's analysis.

Four items, one of which appears in the student and faculty behavior blocks, were reformulated according to the suggestions proposed by the student groups. Finally, a change suggested by this study's authors concerns an item that did not begin with a verb, which differed from the remaining items. In the first Brazilian version, this item appears as "Método de ensino ineficaz ou ineficiente" [Ineffective or inefficient teaching method]." However, in the final version, it was replaced with "*Empregar método de ensino ineficaz ou ineficiente*" [Using an ineffective or inefficient teaching method].

Table 1 – Percentage frequency obtained in the general assessment of the INE-R Survey adapted version, according to items from the DISABKIDS® method adapted for Brazil by GPEMSA (n=21). *Ribeirão Preto*, SP - Brazil, 2020.

General Assessment		A (%)	B (%)	C (%)	D (%)	E (%)	F (%)	G (%)
1. What did you think of this instrument in general?	Very good	100.0	100.0	100.0	66.7	100.0	100.0	66.7
	Good	-	-	-	33.3	-	-	33.3
	Regular / OK	-	-	-	-	-	-	-
2. Are the items understandable? If not, which items:	Easy to understand	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	Difficulty at times	-	-	-	-	-	-	-
	Not understandable	-	-	-	-	-	-	-
3. What about response categories? Did you have any difficulties using them?	None /no difficulties	100.0	100.0	66.7	100.0	100.0	100.0	100.0
	Some difficulties	-	-	33.3	-	-	-	-
	Many difficulties	-	-	-	-	-	-	-
4. Are the items relevant to your condition?	Very relevant	100.0	100.0	100.0	66.7	100.0	100.0	100.0
	Sometimes relevant	-	-	-	33.3	-	-	-
	Not relevant	-	-	-	-	-	-	-
5. Would you like to change anything in the instrument?	No	33.3	33.3	66.7	100.0	33.3	100.0	66.7
	Yes	66.7	66.7	33.3	-	66.7	-	33.3
6. Would you like to add anything to the instrument?	No	33.3	66.7	66.7	66.7	-	33.3	66.7
	Yes	66.7	33.3	33.3	33.3	100.0	66.7	33.3
7. Was there any question you did not want to answer?	No	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	Yes	-	-	-	-	-	-	-

Source: Study's data

Table 2 – Suggestions to the general assessment of the INE-R Survey – adapted version. *Ribeirão Preto*, SP - Brazil, 2020.

Original items	Suggested reformulation	Final version
Layout with spherical icons to indicate the score	Replace with square icons	Original format was kept
The four Likert scale response categories for levels of incivility range from not uncivil to highly uncivil.	Replace the description with numerical categories from 0 to 4, including an additional alternative	Original format was kept
The four response categories on the Likert scale for occurrence in the last 12 months ranged from never to often	Add the word "always"	Original format was kept
The form asks the participants' "sex"	Replace with gender	Gender: man, woman, both or none
Item-(student) – sleeping or not paying attention in class (doing work for other classes, not taking notes)	It should not be considered incivility. A student can be attentive even when s/he does not seem to be paying attention or is taking notes	The item was kept, with its format changed according to Table 2
The concept of civility was not defined in the survey guidelines	*Re-writing the final questions that request an assessment of the institution's level of civility and strategies to strengthen it; employ the term incivility*	The author suggested including the definition of civility. The questions remained as in the original

Source: Study's data

Table 3 – Students' suggestions provided in the specific assessment of the INE-R Survey adapted version. *Ribeirão Preto*, SP - Brazil, 2020.

Subsets	Original items	Suggested reformulation	Final version
A **Student Behavior**	Expressing disinterest, boredom, or apathy about course content or subject matter	Not showing interest in the subject taught	Original version was kept
	Making rude gestures or nonverbal behaviors toward others (e.g., eye-rolling, finger-pointing) Demanding a passing grade when a passing grade has not been earned	Making impolite and inappropriate gestures towards other people	Making rude gestures or having inappropriate nonverbal behaviors toward other people
	Sleeping or not paying attention in class (doing work for other classes, not taking notes)	Sleeping or working on other tasks in the classroom	Sleeping or working on tasks unrelated to the class work
	Refusing or reluctant to answer direct questions	Refusing or reluctant to answer direct questions Refusing to answer questions about subjects or content	Original version was kept
	Using a computer, mobile telephone, or other media device in a class, meeting, or activity for unrelated purposes	Using an electronic device that is inappropriate for the task at hand	Original version was kept
	Making condescending or rude remarks toward others	Constructs demeaning or derogatory comments directed at others	Original version was kept
	Demanding a passing grade when a passing grade has not been earned	Not agreeing with the assessment methods used in a subject	Original version was kept
C **Student behaviors**	Creating tension by dominating class discussion	Creating discomfort in colleagues and teachers when speaking up Dominate class discussions by creating tension	Original version was kept
	Ignoring, failing to address, or encouraging disruptive behaviors by classmates	Encouraging or failing to confront disruptive behavior by classmates	Original version was kept

...continuation.

Table 3 – Students' suggestions provided in the specific assessment of the INE-R Survey adapted version. *Ribeirão Preto*, SP - Brazil, 2020.

Subsets	Original items	Suggested reformulation	Final version
D **Faculty behaviors**	Making rude gestures or nonverbal behaviors toward others (e.g., eye-rolling, finger-pointing)	Making rude gestures or displaying nonverbal behaviors directed at others or me	Making rude gestures or having inappropriate nonverbal behaviors toward other people
	Refusing or reluctant to answer direct questions	Refusing or neglecting to answer direct questions	Original version was kept
	Using a computer, mobile telephone, or another media device in faculty meetings, committee meetings, or other work activities for unrelated purposes	Using a mobile phone or other electronic media in the work environment, unrelated to the teaching task	Original version was kept
E **Comportamento do professor**	Enviar e-mails inapropriados ou rudes para outras pessoas	People often use informal means to offend (social networks, apps, and messages)	Sending inappropriate or rude e-mails to others

Source: Study's data.

DISCUSSION

The steps taken in the cultural adaptation[19] and semantic assessment[20,21] of the INE-R Survey[5] were adequate to obtain a useful instrument that was easy to understand by most Brazilian students participating in the study. Due to the lack of instruments available, meticulous procedures must be followed to translate and adapt foreign instruments[23].

Incivility within the scope of Nursing education is a phenomenon that occurs in most institutions. However, no instrument was available in this milieu to identify, evaluate, or compare this phenomenon at different times. Controlled intervention studies on this topic are suggested in the literature[24]. In this sense, the version presented here contributes to the field of Nursing in the scope of teaching, research, and management.

The authors of a study adapting the INE-R to the Chinese culture used a method with similar procedures (with slight differences) to ensure the accuracy of the translated version and the identification of biases and loss of sensitivity at this stage[18]. There were no problems with the instrument's content in cultural terms, and only minor adjustments were made to the version translated into Mandarin. A Korean study[25] also used the same method adopted by the Chinese study and obtained successful versions with no reports of divergences. It is worth noting that the steps adopted in this study to adapt it to the Brazilian culture[19] were also adequate and resulted in a few adjustments. The literature points out that adjustments of this nature occur because translation is a complex task beyond vocabulary knowledge, in which

meanings to words are not assigned in isolation[26]. An example in this study concerns the terms "profanity" and "condescending"; they were adopted to keep the meanings of the terms proposed in the original instrument.

In this study, the committee's consensus was reached in the final assessment of the cultural adaptation. The Korean study previously mentioned also adopted consensus among the evaluators[24], and the Chinese study initially submitted the instrument to 10 non-nursing university students[18]. Both tested the comprehensibility of the instrument's content with the target population, similar to what we describe in this study for the Brazilian version, though we adopted the adapted DISABKIDS® method[21].

The literature notes that the semantic evaluation is intended to verify the instrument's understanding and acceptance, and identify whether the target audience has suggestions[19]. The test with Nursing students in the Chinese study was conducted to assess the translation, semantic concepts, and potential divergences in content; few amendments were needed. It is worth noting the fact that these students requested the instrument to be presented in both languages, as many students were fluent in both languages[18]. Ten students participating in the Korean study assessed whether the items were unambiguous and easily understood, and two bilingual experts assessed whether they were relevant. All items were considered adequate in these aspects[24].

The students suggested changing or complementing items in the semantic equivalence stage of the general and specific assessment of the survey's items (described below). These suggestions were submitted to the original instrument's author. Concerning the number and scores

of the scales' responses in the general assessment, the alternatives provided for in the original instrument were kept; changing these aspects would hinder comparisons with other studies[4,5].

Accepting the suggestion to replace "sex" with "gender" in the respondent's identification form is based on the fact that respondents may not recognize themselves in the male or female categories. Hence, we chose to adopt gender identity (man, woman, both, or neither), even though there may be scope restrictions in the participants' recognition alternatives, as they do not include "gender expression" or "gender role."

The students' suggestion regarding the questions mentioning the term "civility" without describing its concept in the instrument was discussed with its author. Considering that their suggestion would require substantial change in the instrument's redaction, we decided that such content should be included in its initial guidelines. Therefore, the definition of civility was added to the Survey, in addition to incivility and academic nursing environment[5].

Regarding other suggestions emerging from the general evaluation, some had already been included in other items or were out of the survey's purpose. Based on the general evaluation of the INE-R Survey's adapted version, the participants considered it very good (90.4%), having easy-to-understand items (100.0%), having no difficulties in using it (95.2%), and presenting relevant items (95.2%), despite the suggestions for adjustments.

When the items' relevance was verified in the specific evaluation, the evaluators considered 11 items partially relevant or relevant; eight of these items appeared in both the student and faculty forms, and one was not unanimously considered relevant. Given this aspect and the general evaluation's result, the committee maintained the original wording.

Furthermore, only item "Fazer declarações ameaçadoras relacionadas a armas" [Making threatening statements about weapons] was considered irrelevant by one of the participants who examined the set of student behaviors. However, the evaluators of faculty behaviors were unanimous in considering this same item relevant. The original wording was kept considering this aspect and the general evaluation's result.

Another aspect considered was the items' understanding. The same procedure was adopted for the items that did not reach total agreement in one of the groups examining the two scales. Therefore, four items had their content revised based on student evaluations (Table 2). Furthermore, considering the instrument's general

evaluation, the concept of civility was added, and the sociodemographic variables were adjusted.

The previous discussion shows that the steps of cultural adaptation[19] and the DISABKIDS® method adapted for Brazil by GPEMSA to test it in the target population[21] proved adequate to achieve this study's objective. The culturally and semantically evaluated Brazilian Portuguese version is called the INE-R Survey – Brazilian version.

The fact that the instrument was assessed only by students, similar to the Korean study[25], and was conducted in a single institution may be considered a limitation. Even though a more significant number of respondents would provide different contributions in the cultural adaptation phase and the evaluation of the instrument, including faculty and students, would expand the instrument's range of use, it is worth noting that the suggestions enabled to construct a version suitable for the Brazilian Portuguese language.

CONCLUSION

The two stages of the instrument's assessment - cultural adaptation and semantic equivalence - were fully developed, resulting in a revised and culturally adapted version of the INE-Survey for Brazilian nursing students. Therefore, it can now undergo analysis of evidence of validity. The methodological steps adopted here favored the version's success, which, in the future, can be used in studies assessing the profile of incivility in the Brazilian national context of Nursing education.

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REFERENCES

1. Khan MS, Elahi NS, Abid G. Workplace incivility and job satisfaction: mediation of subjective well-being and moderation of forgiveness climate in health care sector. Eur J Investig Health Psychol Educ [Internet]. 2021[cited 2022 Nov 22];11(4):1107-19. Available from: https://doi.org/10.3390/ejihpe11040082

2. Mutchinick A. Las incivilidades en la escuela. Potencialidades y recaudos del uso de la categoría en la investigación educativa. Arch Cienc Educ [Internet]. 2017[cited 2022 Nov 22];11(12):e034. Available from: https://doi.org/10.24215/23468866e034

3. Hachi ME. Faculty incivility: lived experiences of nursing graduates in the United Arab Emirates. Int Nurs Rev [Internet]. 2020[cited

2022 Nov 22];67(1):127-35. Available from: https://doi.org/10.1111/inr.12554

4. Clark CM, Farnsworth J, Landrum RE. Development and description of the Incivility in Nursing Education (INE) Survey. J Theory Constr Test [Internet]. 2009[cited 2020 Dec 2];13(1):7-15. Available from: https://www.proquest.com/openview/1e3cd9398df9982fc82f68e216046252/1?pq-origsite=gscholar&cbl=11511

5. Clark CM, Barbosa-Leiker C, Gill LM, Nguyen D. Revision and psychometric testing of the Incivility in Nursing Education (INE) Survey: introducing the INE-R. J Nurs Educ [Internet]. 2015[cited 2022 Nov 22];54(6):306-15. Available from: https://doi.org/10.3928/01484834-20150515-01

6. Patel SE, Chrisman M. Incivility through the continuum of nursing: a concept analysis. Nurs Forum [Internet]. 2020[cited 2022 Nov 22];55(2):267-74. Available from: https://doi.org/10.1111/nuf.12425

7. Miller RE. Student performance: conduct and behaviour concerns. Int J Learn High Educ [Internet]. 2009 [cited 2022 Nov 20];21(2):248-51. Available from: https://eric.ed.gov/?id=EJ899311

8. Shen H, Wang H, Yan L, Liu W, Zhang J, Zhou F, et al. Incivility in nursing practice education in the operating room. Nurse Educ Today [Internet]. 2020[cited 2022 Nov 22];88:104366. Available from: https://doi.org/10.1016/j.nedt.2020.104366

9. Elder BR, Seaton LP, Swinney LS. Lost in a crowd: anonymity and incivility in the accounting classroom. J Account Educ [Internet]. 2010[cited 2020 Nov 18];20:91-107. Available from: https://aejournal.com/ojs/index.php/aej/article/view/153

10. Farid H, Hasan SJ, Naveed A, Hyder PR, Shaikh GM, Pasha L. Incivility in online learning environment: perception of dental students and faculty. J Dent Educ [Internet]. 2022[cited 2022 Nov 22];86(12): 1591-601. Available from: https://doi.org/10.1002/jdd.13031

11. Moss SE, Mahmoudi M. STEM the bullying: an empirical investigation of abusive supervision in academic science. EClinicalMedicine [Internet]. 2021[cited 2022 Nov 22];40:101-21. Available from: https://doi.org/10.1016/j.eclinm.2021.101121

12. Clark CM, Davis-Kenaley BL. Faculty empowerment of students to foster civility in nursing education: a merging of two conceptual models. Nurs Outlook [Internet]. 2011[cited 2022 Nov 22];59(3):158-65. Available from: https://doi.org/10.1016/j.outlook.2010.12.005

13. Rawlins L. Faculty and student incivility in undergraduate nursing education: an integrative review. J Nurs Educ [Internet]. 2017[cited 2022 Nov 22];56(12):709-16. Available from: https://doi.org/10.3928/01484834-20171120-02

14. Bence AF, Coetzee IK, Klopper HC, Ellis SM. The association between the practice environment and selected nurse educator outcomes in public nursing education institutions: a cross-sectional study. Nurse Educ Pract [Internet]. 2022[cited 2022 Nov 22];58:103261. Available from: https://doi.org/10.1016/j.nepr.2021.103261

15. Palumbo R. Incivility in nursing education: an intervention. Nurse Educ Today [Internet]. 2018[cited 2020 jun. 13];66:143-8. Available from: https://doi.org/10.1016/j.nedt.2018.03.024

16. Rose KA, Jenkins SD, Astroth K, Woith W, Jarvill M. Lessons Learned: raising awareness of civility and incivility using semi-virtual reality simulation. J Nurs Educ [Internet]. 2020[cited 2022 Nov 22];59(8):461-4. Available from: 10.3928/01484834-20200723-08

17. Al-Jubouri MB, Samson-Akpan P, Al-Fayyadh S, Machuca-Contreras FA, Unim B, Stefanovic SM, et al. Incivility among nursing faculty: a multi-country study. J Prof Nurs [Internet]. 2021[cited 2022 Nov 22];37(2):379-86. Available from: https://doi.org/10.1016/j.profnurs.2020.04.002

18. Clark CM, Juan CM, Allerton BW, Otterness NS, Jun WY, Wei F. Faculty and student perceptions of academic incivility in the People's Republic of China. J Cult Divers [Internet]. 2012[cited 2022 Nov 22]l;19(3):85-93. Available from: https://pubmed.ncbi.nlm.nih.gov/23155894/

19. Beaton DE, Bombardier C, Guillemin F, Ferraz MB. Guidelines for the process of cross-cultural adaptation of self-report measures. Spine (Phila Pa 1976) [Internet]. 2000[cited 2022 Nov 22];25(24):3186-91. Available from: https://doi.org/10.1097/00007632-200012150-00014

20. DISABKIDS Group. Translation and validation procedure: guidelines and documentation form. Hamburgo: The DISABKIDS Group; 2004.

21. Romeiro V, Bullinger M, Marziale MHP, Fegadolli C, Reis RA, Silveira RCCP, et al. DISABKIDS® in Brazil: advances and future perspectives for the production of scientific knowledge. Rev LatinoAm Enferm [Internet]. 2020[cited 2022 Sept 15];28:e3257. Available from: https://doi.org/10.1590/1518-8345.3003.3257

22. Albuquerque EM. Avaliação da técnica de amostragem "respondent-driven sampling" na estimação de prevalências de doenças transmissíveis em populações organizadas em redes complexas [dissertação]. Rio de Janeiro (RJ): Escola Nacional de Saúde Pública Sérgio Arouca, Programa de Pós-Graduação em Saúde Pública; 2009[cited 2022 Nov 8]. 99f. Available from: http://bvssp.icict.fiocruz.br/pdf/Albuquerqueemm.pdf

23. Minton O, Stone P. A systematic review of the scales used for the measurement of cancer-related fatigue (CRF). Ann Oncol [Internet]. 2009[cited 2022 Nov 22];20(1):17-25. Available from: https://doi.org/10.1093/annonc/mdn537

24. Eka NGA, Chambers D. Incivility in nursing education: a systematic literature review. Nurse Educ Pract [Internet]. 2019[cited 2022 Nov 22];39:45-54. Available from: https://doi.org/10.1016/j.nepr.2019.06.004

25. Gagne JC, Kang HS, Hyun MS. Psychometric properties of the Korean version of the incivility in nursing education-revised (INE-R) survey. Nurs Health Sci [Internet]. 2016[cited 2022 Nov 22];18(4):425-34. Available from: http://doi.org/10.1111/nhs.12285

26. Borsatti D, Gabriel R. A tradução automática de textos científicos como suporte pedagógico para o desenvolvimento da compreensão leitora em inglês para propósitos acadêmicos. Organon [Internet]. 2019[cited 2020 Jun. 20];34(66). Available from: https://doi.org/10.22456/2238-8915.93643