Eating The Young: The Reality of Smart Shaming Amongst New Staff Nurses

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ABSTRACT

Eating the young, or as others would say, nurses eat their young, is an infamous idiom that nurses worldwide understand and use. The study investigates the phenomena of "eating the young" and the unpleasant practice of humiliating new staff nurses. Smart shaming or anti-intellectualism is when someone humiliates an individual solely for their brilliance. Several studies have been conducted over the last few years to define and understand smart shaming. However, there is not enough research focusing on smart shaming of new staff nurses, therefore, the researchers explored the reality of smart shaming amongst new staff nurses. Qualitative phenomenological research was done among new Filipino nurses who were selected through purposive snowball sampling method. An interview was done using a semi-structured questionnaire among Filipino, single, female, ages 23-26. Data were analyzed using Colaizzi's method to determine the lived experiences, challenges and coping mechanisms used. Triangulation was done among friends and family members to ensure consistency of the data provided. The study found that the said phenomenon resulted in a negative impact on new nurses creating a significant emotional and psychological strain making novice nurses feel unprepared and overwhelmed. The lack of mentorship, dismissive attitudes, and unequal workloads highlight systemic issues in how new graduates are treated. Respondents emphasized the importance of support from friends, colleagues and family members to manage workplace stress and smart shaming. Coping mechanisms such as leisure activities, having adequate rest and sleep and some social interactions are essential for mental well-being. Self-care activities and for some, spiritual and reflective practices play a vital role in maintaining a balanced life. The study recommends that healthcare organizations should implement structured mentorship programs designed to support new nurses and promote a nurturing workplace culture. Hospital administration should promote a zero-tolerance policy on senior staff nurses to stop belittling the novice nurses and lastly, studies should broaden their scope to examine the challenges of new staff nurses of how they experienced being smart-ashamed of their seniors in the clinical area.

Keywords: *Belittling Intelligence, Workplace Bullying, New Nurses*

INTRODUCTION

The phrase "eating the young," is an infamous idiom that nurses worldwide understand and use, refers to the unpleasant behavior of an expert nurse who mistreats novice colleagues. Gillespie (2017) defines bullying in a way that encompasses negative behaviors within both professional and personal contexts. Under the pretense of a traditional initiation procedure, these actions include strategies of bullying such as spreading gossip, shunning others, concealing facts, and promoting fear. Brunworth (2018) was already knowledgeable of this dirty little secret. Some people even see it as a sign of pride or a testament to their toughness, which is unfortunately a sad reality. This is also seen among expert nurses who tend to put novice nurses in such situations.

This research is driven by an increasing incidence of smart shaming, notably in the Philippines (Secapur, 2023). Smart shaming, also known as anti-intellectualism, is the practice of insulting somebody because of their intelligence. This conduct has become more common in therapeutic settings, when expressions like "Ang galing mo," "Ikaw na ang matalino," and "Edi ikaw na magaling!" are used sarcastically to dismiss and discourage bright minds (Del Villar, 2021; One Down, 2023). The issue is that smart-shaming has a negative impact on both individuals and professions, suppressing creativity and decreasing knowledge-sharing. Despite its increasing use, empirical research on smart shaming in nursing is scarce, particularly regarding its influence on freshly licensed nurses.

To increase awareness of the harmful impacts this regrettable practice of disparaging intelligence has on both the victims and the nursing profession, this study aims to investigate the existence and consequences of this behavior in clinical settings. The goal of the study is to discover mitigation techniques for smart shaming as well as the reasons for this behavior.

Using a phenomenological approach and qualitative approaches, the research collects firsthand accounts from novice nurses regarding their encounters with this regrettable act of devaluing intelligence. The study gathers information on the frequency and characteristics of this regrettable practice of devaluing intelligence in therapeutic settings using surveys and interviews. The results show that this regrettable practice of disparaging intelligence is, in fact, a serious problem in the nursing field, adding to a toxic workplace that inhibits both intellectual and professional development.

The study's findings indicate that smart shaming must be addressed if a welcoming and inclusive environment in healthcare is to be fostered. The research offers prospective strategies to lessen the prevalence of this behavior and lessen its detrimental impact on newly licensed nurses by identifying its underlying causes.

LITERATURE REVIEW

A harmful social phenomena known as "smart shaming" occurs when someone is made fun of or ridiculed for their perceived wisdom or knowledge. This causes the victim to feel inadequate and degraded. This conduct appears in social media, the workplace, households, and educational settings, among other areas. Within the nursing field, one particularly pernicious manifestation of this conduct is encapsulated by the expression "nurses eating their young," which alludes to the severe mistreatment that novice staff nurses frequently encounter from more seasoned peers. The belief that new nurses need to be "toughened up" in order to fit in with the team justifies the use of initiation ceremonies, bullying, and hazing as forms of treatment (Alexis, 2021).

The idea of this regrettable practice of devaluing intelligence raises concerns since it creates a poisonous work atmosphere in professional settings such as the healthcare industry. This type of behavior, which is aimed not just at individuals at different organizational levels but also at peers, is frequently displayed by nurses and certified nursing assistants (CNAs). The animosity is often rationalized by the conviction that suffering through such treatment is a necessary rite of passage for novice nurses to demonstrate their fortitude and competence. Sadly, for far too long, this kind of bullying has been tolerated, which has resulted in a general lack of civility in healthcare settings (Alexis, 2021).

The significance of tackling behaviors such as smart shaming is emphasized by research arranged under the National Unified Health Research Agenda (NUHRA), especially when it comes to health and wellness. The study links smart shaming to concerns of fairness, stigma, and prejudice in healthcare by classifying it as part of a larger investigation of behaviors and views among new staff nurses. According to Cuizon (2017), smart shaming in clinical settings has a negative impact on new staff nurses by lowering their self-worth and raising awareness among their peers. These depressing outcomes may impede their career advancement and exacerbate a hostile work environment.

Furthermore, this unfortunate habit of discounting intelligence has consequences outside of the office. The Sustainable Development Goals (SDGs), in particular the objective of ensuring excellent health and well-being, are linked to the phenomena. This aim establishes a strong emphasis on adhering to all significant medical problems while maintaining a focus on elements that affect people's health and wellbeing, such as the psychosocial environment at work. The United Nations (n.d.) states that smart shaming prevents efforts to develop healthy, supportive, and inclusive workplaces in healthcare by encouraging a culture of fear and humiliation.

The University agenda also names this unpleasant behavior of belittling intelligence as an important area of concern within the larger scope of whole-person wellness, in keeping with these global health priorities. The agenda asks for improvements in mental health measures to counteract the negative impacts of this terrible habit of devaluing intelligence, including meditation, stress management methods, and counselling approaches. By fostering emotional and mental well-being among new staff nurses and lessening the negative effects

of this unpleasant practice of devaluing intelligence, these interventions seek to support people in building resilience, useful coping strategies, and a positive outlook (AUP, n.d.).

In conclusion, it should be noted that the regrettable habit of disparaging intelligence is widespread, harmful, and has repercussions in both personal and professional settings. In order to promote a more encouraging and inclusive culture in healthcare, where everyone may flourish without fear of embarrassment or mockery, this issue must be addressed.

METHODS

The researchers used a qualitative approach to explore new staff nurses' experiences with "this unfortunate practice of belittling intelligence" in clinical settings. They employed phenomenological research to gain an in-depth understanding of these experiences from the nurses' perspectives, focusing on their "lived experiences."

For sampling, the researchers utilized purposive and snowball techniques. Purposive sampling involved selecting participants based on the researchers' judgment, while snowball sampling relied on participants referring to others who met the study criteria. Participants were new staff nurses from private hospitals, specifically those who graduated from the institute's College of Nursing and had worked for 3 to 6 months. They were Filipino, single, aged 23-30, and included both males and females. Data was collected using a semi-structured questionnaire with open-ended questions about this unfortunate practice of belittling intelligence. The questions explored participants' awareness, personal experiences, emotional impacts, and coping strategies related to this unfortunate practice of belittling intelligence.

Ethical considerations included obtaining approval from the department chair and dean, informing participants about the study's purpose, and ensuring confidentiality. Participants were supported if recalling their experiences caused distress, with a psychologist available if needed. Data collection involved face-to-face interviews with Zoom as an alternative if necessary. The study applied various types of methodological rigor to ensure the trustworthiness of its findings. Credibility was established by using phenomenological research to deeply explore the real experiences of new staff nurses facing smart shaming. Dependability was achieved through purposive sampling, which ensured participants were carefully selected based on specific criteria relevant to the study. Transferability was supported by using snowball sampling to reach hidden groups and by providing detailed descriptions of participants and the hospital settings, allowing others to assess whether the findings could apply to different situations. Confirmability was maintained by documenting the methods clearly and focusing on participants' perspectives, reducing researcher bias and ensuring the study's reliability and objectivity. Together, these strategies reinforced the overall rigor of the research. The data was recorded, transcribed, and analyzed using narrative analysis, which focused on understanding participants' personal stories and experiences. Triangulation was done among friends and family members.

RESULTS AND DISCUSSION

Table 1 presents the identified themes, sub-themes and literature support on the lived experiences of nurses who are smart-shamed.

Lived Experience	Themes	Sub-themes	Literature Support
Negative experience	Psychological strain	• Unrealistic expectations for proficiency • Lack of support and guidance • Criticism and dismissive remarks. • New nurses experience anxiety, self-doubt, and feel pressure to fit in socially.	The unrealistic expectations or high expectations for the new nurse's proficiency and skills lead to anxiety and self-doubt creating an overwhelming assumption that they should be fully proficient right away. Lack of support and guidance has contributed to the psychological strain among new nurses. The insufficient mentorship given, and the structured learning led to a feeling of uncertainty and isolation which add up to the difficulty in transitioning. The respondents feel helpless because they expect her to know everything. According to Hawkins (2022) new graduate nurses can find themselves in vulnerable positions and reliant on collegial support to provide safe and effective patient care, as their skills continue to develop. Harsh criticism and belittling comments undermine confidence and create a sense of inadequacy. When new nurses feel embarrassed and criticized instead of being supported, they become more anxious and often afraid to ask questions. This fear stops them from learning and hurts their confidence. As a result, their growth is slowed, and their stress at work increases (Iheduru-Anderson, 2023; Ali et al., 2021). High expectations cause new nurses to feel the pressure during their duty. Duchscher, (2021). reported that new nurses hide their emotions from colleagues to conceal feelings of inadequacy. At this early stage, new nurses feel the need to fit in socially with the team. Researchers from various countries have reported the need for new nurses to fit in, particularly as they desire respect and acceptance from colleagues and wish to feel like part of the team. (Craig et al., 2023).
	Emotional strain	• Feeling of unequal workload and task assignment • Emotional fatigue due to navigating workplace challenges alone • Resilience and self-reliance are developed but at an emotional cost • Heavy workloads, sarcasm, and inadequate support contribute to feelings of inadequacy • Emotional strain impedes professional growth and increases anxiety and self-doubt	Unequal task distribution and fear of being judged contribute to worsening these problems (Brown & Green, 2019). Nurses' professional growth is impeded by the emotional impact, such as anxiety, self-doubt, and fear of errors, which affects their ability to learn (Taylor et al., 2022). Despite using different strategies like seeking help, getting rest, and prioritizing self-care, nurses still require better workplace dynamics and guidance according to Wilson & Adams (2023). Responding to these worries is vital to cultivate a nurturing work atmosphere that boosts the advancement and mental health of nurses.

The result of this study highlights the negative experience new nurses in the health care settings. Two themes emerged from these experiences in relation to smart shaming and these are Psychological and emotional strain. The first theme psychological strain is observed with the sub-themes, unrealistic expectations for their proficiency, lack of support and guidance, criticisms and sometimes dismissive remarks

Secondly, the lack of support and guidance has contributed to the psychological strain among new nurses. The insufficient mentorship given, and the structured learning led to a feeling of uncertainty and isolation which add up to the difficulty in transitioning. The respondents feel helpless because they expect her to know everything. According to Hawkins (2022) new graduate nurses can find themselves in vulnerable positions and reliant on collegial support to provide safe and effective patient care, as their skills continue to develop. While they deal with the shock of transitioning from a student to registered nurse role, they also face exposure to negative workplace behavior in the acute care setting. This review has shown that new graduate nurses often feel like they do not receive the level of support they require and are at times humiliated.

Thirdly, harsh criticism and belittling comments undermine confidence and create a sense of inadequacy. When new nurses feel embarrassed and criticized instead of being supported, they become

more anxious and often afraid to ask questions. This fear stops them from learning and hurts their confidence. As a result, their growth is slowed, and their stress at work increases (Iheduru-Anderson, 2023; Ali et al., 2021).

Further, new nurses experience anxiety, self-doubt, and feel pressure to fit in socially. The unrealistic expectations or high expectations for the new nurse's proficiency and skills lead to anxiety and self-doubt creating an overwhelming assumption that they should be fully proficient right away. Duchscher, (2021). reported that new nurses hide their emotions from colleagues to conceal feelings of inadequacy. At this early stage, new nurses feel the need to fit in socially with the team. Researchers from various countries have reported the need for new nurses to fit in, particularly as they desire respect and acceptance from colleagues and wish to feel like part of the team. (Craig et al., 2023).

The second theme, emotional strain was observed due to the feeling of unequal workload and task assignment. Resilience and self-reliance are considered as positive qualities; however, these characteristics are developed because of the emotional strain of navigating alone the difficulties experienced in the health care setting which often led to emotional fatigue. McEwen (2016) mentioned that resilience in an environment which demands such as healthcare, is essential in maintaining psychological well-being although it is often associated with emotional cost.

Smith et al. (2021) identified that the main reasons behind these problems are the excessive demands on nurses, lack of proper assistance and direction, and the considerable emotional pressure. Jones & Lee (2020) point out that nurses regularly face criticism and sarcasm, along with heavy workloads and little support, leading to feelings of inadequacy and pressure. Unequal task distribution and fear of being judged contribute to worsening these problems (Brown & Green, 2019). Nurses' professional growth is impeded by the emotional impact, such as anxiety, self-doubt, and fear of errors, which affects their ability to learn (Taylor et al., 2022). Despite using different strategies like seeking help, getting rest, and prioritizing self-care, nurses still require better workplace dynamics and guidance according to Wilson & Adams (2023). Responding to these worries is vital to cultivate a nurturing work atmosphere that boosts the advancement and mental health of nurses.

New nurses cope with the negative effects of smart shaming with the utilization of coping strategies such as having good social support by reaching out to colleagues, family and friends. Spending time with friends, hanging out after work, and engaging in social activities were common ways participants dealt with the stress of smart shaming. These activities, such as sharing experiences and venting, helped them manage their emotions and find comfort. Research indicates that emotional support contributes significantly to reducing occupational stress and anxiety in newly hired nurses. Nurses who receive adequate emotional support from their peers and supervisors often report lower levels of anxiety and enhanced self-confidence (Ebrahimi,2022). Further, Karatza et al. (2022), mentioned that the impact of workplace bullying has on nursing staff varies depending on the existence of a supportive family or friend environment and if nurses parent children. These findings demonstrate the value of family and friend support when coping with workplace bullying.

Table 2 presents the coping mechanisms utilized by nurses who were smart-shamed.

Coping Strategies	Themes	Sub-themes	Literature Support
	Social support	Seeking: • Family • Support from friends • Colleagues	Spending time with friends, hanging out after work, and engaging in social activities were common ways participants dealt with the stress of smart shaming. These activities, such as sharing experiences and venting, helped them manage their emotions and find comfort. Research indicates that emotional support contributes significantly to reducing occupational stress and anxiety in newly hired nurses. Nurses who receive adequate emotional support from their peers and supervisors often report lower levels of anxiety and enhanced self-confidence (Ebrahimi,2022). Further, Karatza et al. (2022), mentioned that the impact of workplace bullying has on nursing staff varies depending on the existence of a supportive family or friend environment and if nurses parent children. These findings demonstrate the value of family and friend support when coping with workplace bullying.
	Engaging in activities	• Self-care activities • Spiritual and reflective practices	To cope with the negative experience, new nurses also engage in self-care practices. Participants bring up the importance of taking time to care for themselves such as watching movies, going to the coffee shops and to sleep. By doing so, the feeling of relief was experienced and was considered as destress activities. According to Leadbetter (2023) without adequate rest, we become more susceptible to burnout, which can lead to disillusionment and reduced job satisfaction. Taking breaks and getting enough sleep are critical in preventing burnout and sustaining a fulfilling nursing career. The importance of prayer and seeking spiritual guidance to handle work-related stress and find inner peace. This reflects the role of faith and personal beliefs in managing emotional well-being. Religion and spirituality serve as vital coping mechanisms for nursing professionals who face the constant stress of their demanding roles. While religion provides structured support through rituals, communal practices, and adherence to doctrines, spirituality offers a more personal and flexible approach to managing stress, such as through mindfulness and finding personal meaning. Recognizing and distinguishing between these two aspects is essential for tailoring effective support, as each plays a unique role in helping nurses navigate their stressors. This review underscores the importance of this differentiation in understanding how religious and spiritual coping strategies can be utilized across various socio-cultural and religious backgrounds to enhance nurses' resilience and well-being (Perera et al., 2023).

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Lastly, coping mechanisms used to maintain balance were spiritual and reflective practices. The importance of prayer and seeking spiritual guidance to handle work-related stress and find inner peace. This reflects the role of faith and personal beliefs in managing emotional well-being. Religion and spirituality serve as vital coping mechanisms for nursing professionals who face the constant stress of their demanding roles. While religion provides structured support through rituals, communal practices,

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CONCLUSION, IMPLICATION, SUGGESTION, AND LIMITATIONS

The research shows two primary themes concerning the challenges new nurses encounter when dealing with smart shaming: psychological stress and emotional stress. Psychological strain is defined by having unrealistic expectations, lack of support, and facing harsh criticism. Inexperienced nurses commonly encounter great pressure causing worry and lack of confidence, with insufficient guidance and assistance adding to feelings of being alone. Criticisms and demeaning remarks worsen their confidence, causing them to be hesitant about asking questions and hindering their career advancement. Unequal distribution of tasks and workload causes emotional strain, which results in the development of resilience and self-reliance due to emotional exhaustion. Overly high expectations and lack of assistance lead to stress, worry, and lack of confidence, affecting their career growth.

The study limitations identified were firstly, it is limited to graduate nurses from a particular school in Cavite, which means the findings may not be applicable to new nurses from other institutions or regions. Additionally, the study specifically examines smart shaming among new nurses and does not explore other related or unrelated issues that may affect their experience. This narrow focus could limit the breadth of understanding regarding the broader challenges faced by new nurses in different contexts.

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