

# Conflict Resolution Styles among Nursing Staff Public Sector Hospital – A Cross Sectional Study

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## ABSTRACT

**Background:** Nurse conflict is commonly accepted to be a significant issue in healthcare settings all around the world. Identifying the conflict management style is an essential conflict management strategy. Conflicts between staff nurses, doctors, patients, and their families are common. **Objective:** The objective of the study was conducted to document the various types of conflict management that they encounter in their daily work. **Study Design:** Cross sectional study. **Settings:** A survey was conducted in Nishtar Hospital, Multan Pakistan. **Duration:** Two months from March 01, 2022 to April 30, 2022. **Methods:** Total 197 nurses were enrolled. All the nurses working in wards, have more than 1 year of experience and willing to participate were enrolled in current study. A self-report questionnaire was distributed to collect data for the study. To measure the various conflict resolution styles, the validated Slovene translation of the "Thomas-Kilmann Conflict MODE Instrument" was utilized. Data was entered and analyzed by SPSS 25.0. descriptive analysis was conducted. Data was stratified for age and gender. Post stratification chi-square test was applied. P-value<0.05 was considered as significant. **Results:** Total 197 nurses were enrolled in current study among which 173(87.8%) were females and 24(12.1%) were males. Majority of the nurses were 20-30 years old 97(49.2%) and 31-40 years 59(29.9%). The most frequent strategy to resolve conflict was compromising 79 (40.1%), followed by collaborating 48(24.3%), accommodating 37(18.7%), avoiding 17(8.6%) and competing 16(8.1%). Females were more inclined towards resolving conflicts by compromising than males while avoiding conflict was less common among males than females. The results indicate a significant association between age and gender in terms of conflict resolution methods (P-value <0.05). **Conclusion:** The study concluded that the most common strategy was compromising collaborating and accommodating. The avoiding and competing was least common.

**Keywords:** Conflict, Nursing staff, Organization.

## INTRODUCTION

Nurse conflict is commonly accepted to be a significant issue in healthcare settings all around the world. Identifying the conflict management style is an essential conflict management strategy. In recent years, organizations have observed a more diversified workforce. Conflicts arise as a result of this social diversity. Conflict penetrates every interaction between people because it helps to define our profound and everlasting understanding of the intrinsic diversity of the human experience.<sup>1</sup> Despite being the largest group of healthcare workers in any healthcare environment, conflict among nursing practitioners is recognized as a

serious issue in nursing settings all over the world.<sup>2</sup> Organizational complexity, varying role expectations, interdepartmental competition, decision-making process restrictions, competition for limited resources, ambiguous job boundaries, and personality differences are some elements that may contribute to it. Low emotional intelligence, job uncertainty, bad working conditions, communication problems, and a lack of organizational support are some of the prevalent causes of conflict that have been identified in recent studies.<sup>3</sup>

Conflicts between staff nurses, doctors, patients, and their families are common. Conflict management is a difficult process with both bad and good results. A properly

handled conflict can encourage creativity and innovation, develop organizational links, and boost employee engagement, all of which can improve employee and organizational performance. Also, when positively applied, it can encourage transformation and the generation of fresh ideas.<sup>4</sup>

The nursing profession, which is based on relationships with both coworkers and patients, requires tight cooperation amongst people from varied cultural backgrounds and upbringings. Different values among individuals may affect these interactions and even lead to conflict. The issue is how conflict is handled, not that it really exists. When properly handled, it encourages competitiveness, recognizes acceptable differences, and acts as a significant source of motivation. Poor management will have unfavorable results that are unproductive.<sup>5</sup> Several studies looked at nurses' conflict-management in relation to their highest academic degree. In two independent investigations, managers with higher degrees tended to adopt the integrating style, while nurses with a nursing diploma employed the dominating approach.<sup>6</sup> Nurses with a doctorate or master's degree. Compared to nurses with a baccalaureate degree, utilized the dominating technique more frequently.<sup>7</sup>

Effective conflict management and resolution enhance collaboration between nurses and doctors, which in turn raises satisfaction among all parties engaged in the delivery of healthcare, including patients. Additionally, it enhances the standard of medical care and patient outcomes.<sup>8</sup> Also, an unresolved conflict costs healthcare organizations money since it wastes time and resources and causes staff turnover. Conflicts that go unresolved may negatively impact patient results, organizational loyalty, and work commitment.<sup>9</sup> Moreover, various conflict resolution strategies may have an impact on employees' job happiness, performance, and desire to stay.<sup>10</sup> It is widely acknowledged in nursing administration that hospitals experiencing high levels of conflict tend to have lower employee performance, worse staff satisfaction, and a higher number of errors. To shed light on the conflicts and strategies employed by nursing professionals in resolving such issues, a recent study was conducted to document the various types of conflict management that they encounter in their daily work.

## METHODS

A cross sectional study was conducted between March 2022 and the end of April 2022, a survey was conducted in Nishtar Hospital Multan, a healthcare facility with 1800 beds and over 400 nursing staff. The sample size 197 nurses were calculated by Raosoft calculator by taking expected population proportion as 400, 95% confidence interval and 5% margin of error. A convenient sampling

techniques was employed. All the nurses working in wards, have more than 1 year of experience and willing to participate were enrolled in current study. An anonymous self-report questionnaire was distributed to collect data for the study. The questionnaire consisted of two parts: the first section gathered demographic information about the participants, while the second part focused on conflict resolution among nursing staff. To measure the various conflict resolution styles, the validated Slovene translation of the "Thomas-Kilmann Conflict MODE Instrument" was utilized.<sup>11</sup> The questionnaire featured 30 pairs of statements describing potential responses to conflict situations, with higher scores indicating a decrease in scale points for other conflict resolution styles. The five individual styles of conflict resolution assessed were collaborating, accommodating, avoiding, competing, and compromising. Data was entered and analyzed by SPSS 25.0. descriptive analysis was conducted. All the quantitative variables were presented by Mean  $\pm$  SD and Qualitative with frequency and percentages. Data was stratified for age and gender. Post stratification chi-square test was applied. P-value<0.05 was considered as significant.

## RESULTS

Total 197 nurses were enrolled in current study among which 173(87.8%) were females and 24(12.1%) were males. Majority of the nurses were 20-30 years old 97(49.2%) and 31-40 years 59(29.9%). Regarding the educational status most of the participant were diploma holder 106(53.8) and 3-4 years of experience 97(49.2). The most frequent strategy to resolve conflict was compromising 79(40.1%), followed by collaborating 48(24.3%), accommodating 37(18.7%), avoiding 17(8.6%) and competing 16(8.1%). (Table 1)

**Table 1: Demographic data**

	Variable	Frequency	Percentage
Age	20-30years	97	49.2%
	31-40 Years	59	29.9%
	41-50 years	29	14.7%
	>50 Years	12	6.09%
Gender	Female	173	87.8%
	Male	24	12.1%
Education	Diploma Holder	106	53.8%
	Post RN	58	29.4%
	BS Nursing	23	11.6%
Years of experience	1-2 years	61	30.9%
	3-4 years	97	49.2%
	More than 5 years	39	19.7%
Conflict of Resolution style	Competing	16	8.1%
	Accommodating	37	18.7%
	Avoiding	17	8.6%
	Collaborating	48	24.3%
	Compromising	79	40.1%

**Table 2: Types of conflict management strategies opted by Nurses according to age and gender**

Variables		Collaborating	Accommodating	Avoiding	Competing	Compromising	P-value
Age	20-30 (n=97)	11	33	07	04	42	0.000**
	31-40 (n=59)	13	18	7	9	12	
	41-50 (n=29)	3	4	7	9	06	
	>50 (n=12)	4	2	1	4	1	
Gender	Female (n=173)	31	48	17	21	56	0.014*
	Male (n=24)	5	3	5	6	5	

Chi-square test, P-value < 0.05\*\*

Table 2 displays the correlation between age and conflict resolution tactics, categorized by age and gender. Accommodating was found to be the primary conflict resolution approach among younger individuals (aged 20-30). In contrast, females were more inclined towards resolving conflicts by compromising than males (56 compared to 5), while avoiding conflict was less common among males than females (5 versus 17). The results indicate a significant association between age and gender in terms of conflict resolution methods (P-value <0.05).

## DISCUSSION

Conflict is a natural outcome of human interaction, and its existence in groups has drawn the attention of researchers, particularly in the context of companies and organizations. In a complex setting such as a hospital, where interdisciplinary collaboration is crucial to achieving clinical and administrative objectives, the level of interaction among workers is heightened, necessitating a deeper understanding of the concept of conflict.

In current study the most frequent strategy to resolve conflict was compromising 79 (40.1%), followed by collaborating 48(24.3%), accommodating 37(18.7%), avoiding 17(8.6%) and competing 16(8.1%). These findings were correlated with another study on conflict resolution strategies revealed that the most prevalent styles of conflict resolution were compromising and avoiding, followed by accommodating, collaborating, and competing. Among nurses, the most commonly employed conflict resolution style was avoiding, while compromising was most prevalent among physicians. In current study it was indicating a significant association between age and gender in terms of conflict resolution methods (P-value <0.05). The study found statistically significant variations in the conflict resolution style based on gender, education, and length of employment.<sup>12</sup>

A separate research study indicated that in clinical settings, the most prevalent conflict management strategy employed was avoidance, accounting for 73.2% of cases, followed by negotiating for mutual benefit at 54.2%, and compromise at 40.5%. The prevalence of avoidance as the primary method of resolving conflict could be attributed

to the high proportion of nurses in the study sample. Nurses often work under immense pressure and uncertainty, lacking the benefits of power or autonomy, which may contribute to their preference for avoidance in dealing with conflict.<sup>13</sup> These findings were uncorrelated with the current study because the avoiding problems were least common in our study.

A survey of healthcare professionals (HPs) in Cyprus revealed that the most preferred approaches to conflict resolution were avoidance and collaboration.<sup>14</sup> According to a different study, avoidance was found to be the most frequently utilized conflict management style, followed by collaboration, and then compromise, competition, mediation, and accommodation, in smaller percentages. Age, work experience, education, and managerial position were identified as significant factors influencing the choice of conflict resolution strategy. Younger nurses, those with less responsibility and no prior conflict management education, tended to prefer avoidance as their primary strategy. More educated nurses, on the other hand, tended to favor collaboration as a conflict resolution approach, and supervisors were deemed the most suitable individuals for managing conflicts.<sup>15</sup>

In this study the results showed that females were more inclined towards resolving conflicts by compromising than males (56 compared to 5), while avoiding conflict was less common among males than females (5 versus 17). These findings were compared In Jordan, female nurse managers were inclined to employ the avoiding style and integrating style, respectively, whereas male nurse managers also exhibited a tendency to use the avoiding style.<sup>16</sup> In a separate study, integrating, obliging, and competing were identified as the most commonly employed conflict resolution styles among male nurses.<sup>17</sup>

## CONCLUSION

The study concluded that the most common strategy was compromising collaborating and accommodating. The avoiding and competing was least common. Enhancing our comprehension and establishing clear guidelines that define the circumstances at hand is the most efficient approach to conflict management.

## LIMITATIONS

The sampling method used in our study was convenience sampling instead of random sampling, which may have caused sampling errors and impacted the extent to which the results can be applied to a broader population. Therefore, it is not possible to generalize the research findings since the study was conducted at a single center.

## SUGGESTIONS / RECOMMENDATIONS

The article highlights the importance of organizational aspects, such as a supportive work environment, unambiguous policies, and sufficient resources, in mitigating workplace conflicts. It stresses the significance of providing appropriate training and assistance to nurses in conflict resolution and suggests that additional research is required to investigate the connection between conflict management and patient outcomes in public sector nursing.

## CONFLICT OF INTEREST / DISCLOSURE

There is no conflict of interest.

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## REFERENCES

1. Albert NM, Pappas S, Porter-O'Grady T, Malloch K. Quantum leadership: Creating sustainable value in health care: Creating sustainable value in health care. Jones & Bartlett Learning, 2020.
2. Johansen ML, Cadmus E. Conflict management style, supportive work environments and the experience of work stress in emergency nurses. *J Nurs Manag* 2016; 24: 211-8.
3. Al-Hamdan Z, Nussera H, Masa'deh R. Conflict management style of Jordanian nurse managers and its relationship to staff nurses' intent to stay. *J Nurs Manag* 2016; 24: E137-45.
4. Kim W, Nicotera AM, McNulty J. Nurses' perceptions of conflict as constructive or destructive. *J Adv Nurs* 2015; 71: 2073-83.
5. Piryani RM, Piryani S. Conflict management in healthcare. *J Nepal Health Res Counc* 2018; 16: 481-2.
6. Labrague LJ, Al Hamdan Z, McEnroe-Petitte DM. An integrative review on conflict management styles among nursing professionals: implications for nursing management. *J Nurs Manag* 2018; 26: 902-17.
7. Başoğlu C, Özgür G. Role of emotional intelligence in conflict management strategies of nurses. *Asian Nurs Res (Korean Soc Nurs Sci)* 2016; 10: 228-33.
8. Hendel T, Fish M, Galon V. Leadership style and choice of strategy in conflict management among Israeli nurse managers in general hospitals. *J Nurs Manag* 2005; 13: 137-46.
9. Gelfand MJ, Leslie LM, Keller K, de Dreu C. Conflict cultures in organizations: How leaders shape conflict cultures and their organizational-level consequences. *J Appl Psychol* 2012; 97: 1131.
10. Kunaviktikul W, Nuntasupawat R, Srisuphan W, Booth RZ. Relationships among conflict, conflict management, job satisfaction, intent to stay, and turnover of professional nurses in Thailand. *Nurs Health Sci* 2000; 2: 9-16.
11. Thomas KW, Kilmann RH. Conflict mode instrument. Langara College, 2012.
12. Delak B, Širok K. Physician-nurse conflict resolution styles in primary health care. *Nurs Open* 2022; 9: 1077-85.
13. Pitsillidou M, Farmakas A, Noula M, Roupa Z. Conflict management among health professionals in hospitals of Cyprus. *J Nurs Manag* 2018; 26: 953-60.
14. Pavlakis A, Kaitelidou D, Theodorou M, Galanis P, Sourtzi P, Siskou O. Conflict management in public hospitals: the Cyprus case. *Int Nurs Rev* 2011; 58: 242-8.
15. Lahana E, Tsaras K, Kalaitzidou A, Galanis P, Kaitelidou D, Sarafis P. Conflicts management in public sector nursing. *Int J Healthc Manag* 2019; 12: 33-9.
16. Al-Hamdan Z, Norrie P, Anthony D. Conflict management styles used by nurses in Jordan. *J Res Nurs* 2014; 19: 40-53.
17. Al-Hamdan Z, Nussera H, Masa'deh R. Conflict management style of Jordanian nurse managers and its relationship to staff nurses' intent to stay. *J Nurs Manag* 2015; 24: E137-45.