



Original Article

Conflict Management Among Nurses in Tertiary Care Hospital Lahore

Kishwar Bashir¹, Amna Shahzadi², Arifa Ashraf² and Nadia Bashir³¹General Hospital, Lahore, Pakistan²Pakistan Institute of Cardiology Hospital, Lahore, Pakistan³Sir Gangaram Hospital, Lahore, Pakistan

ARTICLE INFO

Key Words:

Conflict, Management, Nurses, Avoiding, Collaborating

How to Cite:

Bashir, K., Shahzadi, A., Ashraf, A., & Bashir, N. (2022). Conflict Management Among Nurses in Tertiary Care Hospital Lahore: Conflict Management Among Nurses. *NURSEARCHER (Journal of Nursing & Midwifery Sciences)*, 2(02).
<https://doi.org/10.54393/nrs.v2i02.26>

*Corresponding Author:

Kishwar Bashir
 General Hospital, Lahore, Pakistan
kishhandsome9393@gmail.com

Received Date: 15th September, 2022Acceptance Date: 29th November, 2022Published Date: 31st December, 2022

ABSTRACT

Conflict amongst healthcare workers has been noted as a problem in healthcare settings all around the world. **Objective:** To analyze the most frequently occurring conflict management strategy utilized by nurses in the hospital setting. **Methods:** A descriptive cross sectional study design was used to carry out this study. The study was conducted in Mayo hospital, Lahore attached to King Edward Medical College, Lahore. Sampling size of 122 cases was calculated with 95% confidence interval and 6% margin of error. Random sampling method was used to collect data from nurses. Data were analyzed through SPSS V.21 using descriptive statistics (frequencies, and percentages). **Results:** A total of 122 female nurses were recruited and analyzed in this study. Majority of nurses were aged between 25-30 years, 45(36.8%). This study showed that there are conflicts among nurses in a hospital setting. Comparison of the subjects' conflict management strategy mean scores according to length of time in nursing position revealed differences in frequency of occurrence of the five strategies. The strategy of avoiding was the most frequently utilized behavior in all categories except the category of time in position of less than 1 year. The results of this descriptive study revealed that the most frequently occurring conflict management strategy utilized by this sample was avoiding. **Conclusion:** Findings of this study conclude that nurses who practice in the hospital setting tend to approach conflict with concern for the other party's wishes.

INTRODUCTION

In healthcare settings all throughout the world, staff conflict has been noted as a problem [1]. Personal differences, unclear work descriptions and tasks, role incompatibility, and organizational problems like high levels of stress, a lack of resources, and uncertain employment are the most frequent causes of conflict inside a healthcare facility [1]. According to studies, interpersonal conflict among healthcare workers had a negative influence on stress levels, job satisfaction, and the efficacy of teams [2]. Stress at work like this frequently causes absences and high turnover [3]. Also, it appears that the cooperation of health care professionals has an impact on the quality of health services delivered and the application of quality-improving techniques [4]. Conflict is characterized as genuine or imagined conflicts between people who have different beliefs, values, or objectives.

Moreover, it is a process that starts when someone feels compelled, senses obstruction from the other, and begins to oppose. It is a mental conflict brought on by incompatible or conflicting desires, wishes, or demands [5]. Since the middle of the 19th century, the nursing profession has seen major transformations. Within the context of the practice of many nursing responsibilities that were unthinkable fifty years ago, the field of nursing knowledge has broadened. Throughout the past 20 years, in response to developments and needs in the health sector, the roles of nurse manager and head nurse have undergone significant evolution [6]. All nurses, regardless of their position, must successfully manage conflict in order to maintain quality patient care because conflict is also one of the primary obstacles and largely depends on the conflict management strategies used [7]. Changes in

the care model, which aims to break free from the dominant medical model and vertical power structures, have created a need for communication, interpersonal interactions, and management training. This is necessary for the nurse's actions to be stronger and more credible [8]. As a result, the abilities that depend on sophisticated business knowledge and managerial skills are becoming more and more important for success in the employment market [9]. Hence, the use of managerial abilities and leadership contribute to how well nurses function in these changing work environments [9]. According to management theory, there are five types of conflict resolution behavior: competition, collaboration, compromise, avoidance and accommodation [10]. Assertion and cooperation are the intentions that determine the type of conflict management strategy used in a situation, where assertion refers to an attempt to confront the other party and cooperation refers to an attempt to find a workable solution [11]. Conflict resolution behavior can range from cooperation to confrontation. Based on their leadership and conflict resolution abilities, nurse managers have a significant impact on the nursing staff, other members of the healthcare team, and patient care [12]. The ability to learn conflict communication competencies is one that can be applied to any role. An effective leadership intervention is coaching. Nurse Managers can increase staff nurses' desire to stay on the job if they employ the right dispute resolution techniques [13]. Many organizational-culture issues that affect team dynamics, retention, and work satisfaction are faced by nurse leaders. There are generational factors, variations in culture, race, and beliefs, variations in practice, and varying degrees of nursing education and training [14]. In light of patient experience, health outcomes, regulatory compliance, and reimbursement, the corporate culture's impact on patient care must also be taken into account [15]. Conflict is inevitable and a normal component of all human relationships; it exists in all facets of life and in all organizations [16]. All healthcare organizations now have goals and targets in place to raise the standard of patient care. Because nurses are the primary frontline staff who engage with patients, learning to settle conflict is essential to delivering effective and efficient patient care and achieving financial success [17]. In addition, it has been noted from our clinical experience that nurses frequently deal with challenging circumstances that have a negative impact on their ability to deliver high-quality patient care [18]. To maintain high-quality patient care, it's critical to support those nurses who struggle with conflict management [19]. So, this study was conducted to assess how a conflict management programme affected the standard of patient care. The question addressed in this

study were: What is the predominant or most frequently occurring conflict management strategy utilized by nurses in the hospital setting?

METHODS

Descriptive cross sectional study design was used to carry out this study. The study was conducted in Mayo hospital, Lahore attached to King Edward Medical College, Lahore. It is one of the big public hospitals of Lahore. At the time of data collection, the population of nurses is 1500. Therefore, this organization was selected for present study. This study was completed in 03 months. Sampling size of 122 cases was calculated with 95% confidence interval and 6% margin of error [20]. Random sampling method was used to select the sampling units. Data were gathered from Mayo Hospital in Lahore's emergency, medical, surgical, and intensive care units, among other important departments. To gather the data, a random sample procedure was used to choose all of the nurses in these departments. The participants' written informed agreement to participate in the study was obtained first. After that, participants were randomly assigned to complete a self-administered questionnaire. Inclusion Criteria: Registered female Nurses, aged between 20-50 years. Nurses with at least Diploma holder. Having at least one-year experience. Exclusion Criteria: Nurses who were not available during data collection. Nurses with any chronic/ mental illness. Information was gathered from all of Mayo hospital Lahore's key departments, including the emergency, medical, surgical, and intensive care units. To gather the data, a random sample procedure was used to choose all of the nurses in these departments. Firstly, written informed consent to participate in the study was taken from the participants, then a self-administered questionnaire was randomly distributed among the participants. One week time was given to the participants to complete the perform. Seventy percent of the participants returned filled perform and 20% did not returned the questionnaire. They were given more time to complete the perform and they returned it after one week. The questionnaire consists of two sections including, socio demographic characteristics of the participants, conflict management tool. In first section, the socio-demographic characteristics included age, marital status, job experience, and educational status. In second section, the 30-question developed by Thomas-Kilmann Mode Instrument was used. Data were analyzed through SPSS V.21 using descriptive statistics (frequencies, and percentages). Quantitative variables were measured as median, mean and standard deviation. The normality distribution of the variables was assessed using the Kruskal-Wallis test and the Mann-Whitney U test.

RESULTS

A total response of 122 female nurses was recorded and analyzed in this study. Majority of nurses were aged between 25–30 years, 45 (36.8%) followed by 31–35 years, 40 (32.8%). Most of nurses were married, 83 (68%). More than two-third, 67 (54.9%) of participants had more than 5 year of work experience. Most of, 55 (44.3%) held diploma nursing, while 36 (29.5%) had generic BSN degree (Table 1).

Variable	Group	Frequency (%)
Age	25–30 year	45 (36.9%)
	31–35 year	40 (32.8%)
	36–40 year	22 (18%)
Marital Status	Single	37 (30.3%)
	Married	83 (68%)
	Divorced	1 (0.8%)
	Widow	1 (0.8%)
Job Experience	One year	24 (19.7%)
	2–5 years	31 (25.4%)
	greater than 5 years	67 (54.9%)
Education	master degree	11 (9%)
	Generic BSN	36 (29.5%)
	Post RN	21 (17.2%)
	Diploma Nursing	54 (44.3%)

Table 1: Demographic characteristic of participants

This study showed that there are conflicts in a hospital in Lahore. Table 2 illustrates the responses of different department nurses towards conflict management. Effective management of conflict include using of a variety of styles rely on the conflict circumstances. The research question was: What is the predominant or most frequently occurring conflict management strategy utilized by nurses in the hospital setting? The most frequently occurring conflict management strategy in this sample was avoiding. The mean score for avoiding was 8.07. The mode was 8 and the median was 8. Rank order, means, and standard deviations for the five conflict management strategies are presented in Table 2.

Strategy	Rank order	Mean \pm SD
Avoiding	1	8.07 \pm 2.25
Accommodating	2	7.12 \pm 2.15
Compromising	3	7.10 \pm 2.06
Collaborating	4	5.01 \pm 2.22
Competing	5	2.70 \pm 2.18

Table 2: Rank Order, Means, and Standard Deviations of Conflict Management Strategy

Note. Rank order reflects the most frequently utilized strategy to the least frequently utilized strategy

DISCUSSION

The findings of this study are similar to those found during the review of literature. Cavanagh (1988) reported the most frequently occurring conflict management strategy for 64 full-time female intensive care registered nurses who

completed the study instrument was avoiding ($x = 8.0$) [20]. The least frequently occurring strategy was competing ($x = 3.2$). The sample consisted of predominantly baccalaureate and advanced degree nurses. Another similarity of the present study and Hightower's (1986) study is the variation in the most frequently utilized strategy according to the age variables [21]. Hightower reported that a sample of 160 predominantly female managerial and administrative nurses who completed the study instrument utilized avoiding as the most frequently occurring strategy. The mean score was 7.26 and the standard deviation was 2.40. However, subjects who were age 29 years or less utilized compromising most frequently. Hightower instructed the subjects to respond to the questionnaire as subordinates. The most frequently occurring conflict management strategy in the present study was avoidance. Avoiding is described by Thomas and Schmidt (1976) as an unassertive approach to managing conflict which reflects behaviors of indifference and often apathy [22]. Thomas further identified that the scheme of conflict management strategies forms a hierarchical sequence. When the usual conflict management behavior fails to be effective in a conflict situation, the next conflict management behavior comes into play and so forth. The rank order from the highest to the lowest for this sample was: avoiding, accommodating, compromising, collaborating, and, finally, competing. Avoiding and accommodating are unassertive strategies. Compromising is intermediate for both assertiveness and cooperation. Collaborating is an assertive approach, whereas, competing is also assertive but dominating.

CONCLUSIONS

Based upon the findings of this study and cognizant of the limitations of the study, the following conclusions are presented: Nurses who practice in the hospital setting tend to approach conflict with concern for the other party's wishes. Nurses who practice in the hospital setting may tend to avoid confrontation. The following implications are presented based upon the findings of this study: Nurses who practice in the hospital setting need to become aware of conflict management behaviors. Nurses who practice in the hospital need structured learning opportunities to learn conflict management strategies. Nurses should become aware of how conflict is managed in the hospital setting. Identification of how conflict is handled in the hospital setting has significance for nursing's role in the hospital setting and the health care system. Based upon the findings of this study, the following recommendations are made for further study regarding conflict management. A correlational study should be conducted to investigate nurses' perceived power and use of conflict management strategies. A study should be conducted utilizing a random

sample from a larger hospital setting. A study should be conducted to investigate subjects' responses to specific conflict situations in which the other party is identified, such as nurse physician conflict.

Conflicts of Interest

The authors declare no conflict of interest.

Source of Funding

The authors received no financial support for the research, authorship and/or publication of this article.

REFERENCES

- [1] Ogbimi RI and Adebamowo CA. Questionnaire survey of working relationships between nurses and doctors in University Teaching Hospitals in Southern Nigeria. *BMC Nursing*. 2006 Dec; 5: 1-6. doi: 10.1186/1472-6955-5-2.
- [2] Tabak N and Orit K. Relationship between how nurses resolve their conflicts with doctors, their stress and job satisfaction. *Journal of Nursing Management*. 2007 Apr; 15(3): 321-31. doi: 10.1111/j.1365-2834.2007.00665.x.
- [3] Clarke S and Cooper C. Managing the risk of workplace stress: Health and safety hazards. Routledge; 2004 Jul. doi: 10.4324/9780203644362.
- [4] Krogstad U, Hofoss DA, Hjortdahl PE. Doctor and nurse perception of inter-professional co-operation in hospitals. *International Journal for Quality in Health Care*. 2004 Dec; 16(6): 491-7. doi: 10.1093/intqhc/mzh082.
- [5] Ledlow GR. and Stephens JH. Understanding the Executive Roles in Health Leadership. 2018. [Last cited: Aug2021]. Available at: <https://digitalcommons.georgiasouthern.edu/health-policy-facpubs/181/>.
- [6] Beserra EP, do Amaral Gubert F, Martins MC, Vasconcelos VM, de Figueiredo GA, Silva LA, et al. Conflict Management In Nurse Training. *Journal of Nursing UFPE*. 2018 Oct; 12(10): 2891-96. doi: 10.5205/1981-8963-v12i10a236080p2891-2896-2018.
- [7] Yoder-Wise PS, Sportsman S. Leading and Managing in Nursing E-Book. Elsevier Health Sciences; 2022 Sep.
- [8] Amestoy SC, Backes VM, Thofehrn MB, Martini JG, Meirelles BH, Trindade LD. Conflict management: challenges experienced by nurse-leaders in the hospital environment. *Revista Gaucha de Enfermagem*. 2014 Jun; 35(2): 79-85. doi: 10.1590/1983-1447.2014.02.40155.
- [9] Vernekar SP and Shah H. A study of work-related stress among nurses in a tertiary care hospital in Goa. *International Journal of Community Medicine and Public Health*. 2018 Feb; 5(2): 657-61. doi: 10.18203/2394-6040.ijcmph20180246.
- [10] Vivar CG. Putting conflict management into practice: a nursing case study. *Journal of Nursing Management*. 2006 Apr; 14(3): 201-6. doi: 10.1111/j.1365-2934.2006.00554.x.
- [11] Baddar F, Salem OA, Villagrancia HN. Conflict resolution strategies of nurses in a selected government tertiary hospital in the Kingdom of Saudi Arabia. *Journal of Nursing Education and Practice*. 2016 Jan; 6(5): 91-9. doi: 10.5430/jnep.v6n5p91.
- [12] Akanbi KL. Impact of Conflict Management Dynamics on Staff Performance in Tertiary Healthcare Institutions in North-Central, Nigeria (Doctoral dissertation, Kwara State University (Nigeria)). 2020. Available at: <https://www.proquest.com/docview/2461007741?pq-origsite=gscholar&fromopenview=true>.
- [13] Al-Hamdan Z, Nussera H, Masa'deh R. Conflict management style of Jordanian nurse managers and its relationship to staff nurses' intent to stay. *Journal of Nursing Management*. 2016 Mar; 24(2): E137-45. doi: 10.1111/jonm.12314.
- [14] Kaur G, Arora P, Pathak J, Anand T, Vaidya R, Kumar A. Self Rated Assessment of Conflict at Work among Staff Nurses of Tertiary Care Hospital in Delhi. *Global Journal of Medical Research: K Interdisciplinary*. 2019 Apr; 19(4): 31-38. doi: 10.34257/GJMRK.VOL19IS4PG31.
- [15] Black J. Conflict management and team building as competencies for nurse managers to improve retention. 2018. Available at: https://repository.usfca.edu/dnp_qualifying/9/.
- [16] Marquis BL, Huston CJ. Leadership roles and management functions in nursing: Theory and application. Lippincott Williams & Wilkins; 2009.
- [17] Roussel L. Management and leadership for nurse administrators. Burlington, MA: Jones & Bartlett Learning; 2020.
- [18] Leksell J, Gardulf A, Nilsson J, Lepp M. Self-reported conflict management competence among nursing students on the point of graduating and registered nurses with professional experience. *Journal of Nursing Education and Practice*. 2015 Jun; 5(8): 82-9. doi: 10.5430/jnep.v5n8p82.
- [19] Martins MM, Trindade LD, Vandresen L, Amestoy SC, Prata AP, Vilela C. Conflict management strategies used by Portuguese nurse managers. *Revista brasileira de enfermagem*. 2020 Oct; 73(suppl 6): 1-7. doi: 10.1590/0034-7167-2019-0336.
- [20] Cavanagh SJ. The conflict management style of intensive care nurses. *Intensive Care Nursing*. 1988 Sep; 4(3): 118-23. doi: 10.1016/0266-612X(88)90006-5.

- [21] Hightower T. Subordinate choice of conflict-handling modes. *Nursing Administration Quarterly*. 1986 Oct; 11(1): 29-34.
- [22] Thomas KW and Schmidt WH. A survey of managerial interests with respect to conflict. *Academy of Management journal*. 1976 Jun; 19(2): 315-8. doi: 10.2307/255781.
- [23] Leveillee MG. Exploration of Conflict Management Styles Used by Medical-Surgical Nurses. Master's Theses, Dissertations, Graduate Research and Major Papers Overview. 2018; 275: 1-55. doi: 10.28971/532018LM90.