

Conflict Management Among the Nursing Personnel of Referral Hospital During Pandemic COVID-19

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ABSTRACT

The increase in COVID-19 cases raises concern for everyone, including nurses. This study aims to determine the conflict management of nurses in nursing services during the COVID-19 pandemic. This type of research was a descriptive correlation with a cross-sectional study design. The study was conducted from January to June 2021. This study involved 178 nurses who served in the isolation room for COVID-19 patients. Sampling was selected by systematic random sampling. Data analysis was done using univariate and bivariate. The results showed that the characteristics of respondents were in the age range of 21-45 years, 62.4% had a diploma in nursing education, 88.8% served as implementing nurses, and 55.6% worked within 0-1 years. The types of conflicts that often occur are intragroup (NCS score, mean±SD: 0.59±0.31), and conflict resolution strategies used collaboration (ROCI II score, mean±SD: 4.09±0.43). There is a correlation between the nurse's age and accommodation conflict resolution strategies. Education and length of work were also significantly related to avoiding conflict resolution strategies. The characteristics of nurses, types, and causes of conflict can play a role in the selection of conflict resolution strategies that occur in nursing services during COVID-19. Conflict can be a positive thing and increase productivity in nursing services the reference must be avoided.

Keywords: COVID-19, Management, Conflict, Nursing.

INTRODUCTION

Coronavirus Disease 2019 is well-known as COVID-19. A new type of coronavirus causes this disease, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which comes from bats and then spreads widely into a human. It may cause damage to the human respiratory system quickly. (1,2). COVID-19 disease has been increasing every single time. Based on data World Health Organization (2020) global scale recorded last year in 2020 that summed confirming of COVID-19 total were 142,557,268 cases and the percentage of death at 2.1% were 3,037,398 people. In Indonesian case of positive has been confirmed pool as much as 1,620,569 peoples dan the percentage of death at 2.7% were 44.007 people. Monitoring data COVID-19 from the Province of West Sumatra has indicated increasing cases until last year in 2020 that summed confirming case COVID-19 total were 34,916 people and have been death 761 people (3).

An increased total of the case would cause apprehension for people, including medical personnel, and the nurse who is front line at the health service (4). The pressure on medical personnel was increasing during the pandemic period. There were two types of pressure by medical personnel which. First, the disease burden has inflicted stress, and second, the impact has been disserved on

health, including the risk of infection (5). The research by Liu Q et al. (2020) showed that medical personnel carrying COVID-19 patients would be at considerable risk of mental health problems such as stress, depression, and insomnia. That would be a lead conflict for medical personnel, especially the nurse (6).

The negative consequences of conflict like teamwork were decreased patient satisfaction and increased employee change in the organization. The conflicts experienced by the nurse during the COVID-19 pandemic should not be avoided but managed. When the organizational conflict has encountered distraction, nursing should be known as the first step, and action would be done until employee motivation and organizational productivity is not reduced (7).

M Djamil Hospital is a government hospital as a national reference in Indonesia, which is being acted as a health service, teaching hospital, researching, and then become a reference hospital that carries COVID-19 patients. The interview result had been done with M Djamil Hospital nurses as 8 – 10 subjects were reluctant to be placed in the COVID-19 isolation room. Nine out of 10 nurses had been told their fear about contracting or disseminating COVID-19 disease while working in the COVID-19 isolation room. Thus, the most common problem is the conflict that happened with the patient in the isolation room or their family. That phenomenon must be studied more for conflict identification which has happened to nurses during the COVID-19 period, causing a strategy that would be used for conflict completion. The general purpose of the research is to know the

management of nurse conflict in nursing services during the COVID-19 pandemic.

MATERIALS & METHODS

This research was a descriptive correlation with a cross-sectional study that explored how nursing conflict management in the isolation room for patients covid-19. Therefore, the characteristics of nurses have an association with the strategy of conflict management. Correspondents who were eligible to be involved in this study were randomized with systematic random sampling. This research was conducted on nurses at M Djamil Hospital. All participants had been full-time hospital-based nurses. Participants were recruited by distributing fliers in several healthcare systems and nursing school graduate-level courses in a national referral hospital for COVID-19. The participants included head nurses, head nurse assistants, and staff nurses from all isolation rooms who were willing to participate in the study. The study used a questionnaire, such as Nursing Conflict Scale (NCS) to assess types of conflicts and levels of conflict (8), and the questionnaire of conflict management, Rahim Organizational Conflict Inventory-II (ROCI II).

STATISTICAL ANALYSIS

Data were numbered with 2 groups being used t-independent test and more than 2 groups being used ANOVA. Then, using SPSS version 1.6 was used to analyze the data.

RESULT

Almost 178 participants eligible in our study were female (82.6 %), with an age range of 21-45 years old as the dominant population. About 62.4% of participants had an educational undergraduate/diploma, with a position as a nurse staff. They worked as volunteers during the pandemic, so their working experiences were under 0-1 years.

Table 1. Distribution of Aged Participant

Characteristics (n=178)	Mean	Median	Min-max	SD
Age	29,2	28	21-45	5,33

Table 2. Baseline Characteristics of Participants

Characteristics	Number of Nurses (N)	Percentaget(%)
Gender		
Male	31	17,4
Female	147	82,6
Total	178	100,0
Educational levels		
Undergraduate/Diploma	111	62,4
Graduated	65	36,5
Master/specialist	2	1,1
Total	178	100,0
Job Position		
Head Nurse	2	1,1
Head Nurse Assistant	18	10,1
Staff Nurse	158	88,8
Total	178	100,0
Employee Status		
Government employee	31	17,4
Others	39	21,9
Volunteer	108	60,7
Total	178	100,0
Working experience		
0-1 year	99	55,6
1-3 years	22	12,4
> 3 years	57	32
Total	178	100,0

Based on table 3 that had been causing more conflict more frequently were patient attitude as 60.1%, then patient misunderstanding as 47.8% dan distrusting as 46.1%.

Table 3. Type of Conflicts

Type of Conflicts (n=178)	Mean	Min-max	SD
Intrapersonal	0.37	0-1.50	0.25
Interpersonal	0.13	0-0.86	0.18
Intergroup	0.17	0-1.50	0.28
Intragroup	0.59	0-1.83	0.31
Disruptive	0.35	0-1.40	0.31
Competitive	0.58	0-2.20	0.43

Data from Table 4 showed that collaborating was the most common strategy, followed by compromising. The other strategy had the same proportion.

Table 4. Conflict management

No	Conflict Management	Mean Score	Min-max	SD
1	Collaborating	4.09	3-5	0.43
2	Accommodating	2.98	1.83-5	0.55
3	Competing	2.63	1-5	0.79
4	Avoiding	2.94	1.50-5	0.62
5	Compromising	4.07	2.75-5	0.46

The association between characteristic participant and conflict management were analyzed with spearman correlation, Mann Whitney and Kruskal Wallis. Data form table 5 that showed the accommodation

strategy significant correlation with age ($p < 0.05$), the strength of correlation a very weak in the negative direction, meaning the lower the age, the better strategy accommodation. Education has been a

significant relation with the strategy of avoiding conflict completion. Diploma degrees are more inclined to be done with the strategy of avoiding conflict completion than the other. Length of work is being

connected significantly with the strategy of avoiding conflict completion. The nurses with length of work 0-1 year were significantly different to the strategy of avoiding conflict completion.

Table 5. Association between Characteristics and Conflict Management

Management	Collaborating	Accommodating	Competing	Avoiding	Compromising
Age					
Spearman Correlation	-0,141	-0,167	0,005	-0,118	-0,112
Sig(p)^a	0,061	0,026*	0,942	0,118	0,136
Gender					
Male	95,95	101,66	101,60	97,40	95,69
Female	88,14	86,94	86,95	87,83	88,19
Sig(p)^b	0,433	0,146	0,148	0,345	0,429
Educational Level					
Undergraduate/Diploma	87,99	89,05	92,39	97,15	90,40
Graduated	94,99	90,85	83,75	76,69	89,22
Master/specialist	24,00	71,00	116,00	81,25	48,75
Sig(p)^c	0,134	0,855	0,426	0,037*	0,477
Position					
Head Nurse	106,75	71,50	86,00	27,00	81,50
Head Nurse Assistant	85,64	80,83	90,61	90,89	76,64
Staff Nurse	89,72	90,72	89,42	90,13	91,07
Sig(p)^c	0,842	0,654	0,991	0,222	0,469
Employee Status					
Government Employee	85,26	77,52	81,94	80,97	84,03
Other	73,42	92,46	93,05	82,49	79,83
Volunteer Kontrak	96,52	91,87	90,39	94,46	94,56
Sig(p)^c	0,093	0,358	0,639	0,271	0,204
Working Experience					
0-1 year	94,06	94,35	93,66	97,07	93,14
1-3 years	90,77	80,09	84,25	76,73	99,66
>3 years	81,10	84,70	84,31	81,29	79,25
Sig(p)^c	0,300	0,345	0,480	0,043*	0,126

* $p < 0,05$ significant correlation

^a Spearman

^b Mann-Whitney

^c Kruskal Wallis

DISCUSSION

The types of nursing conflict in the hospital were concluded in this research. There are 3 kinds of conflict among them: (1) intragroup conflict (2) competitive conflict and (3) intrapersonal conflict. Moreover, it was discovered that the scale of nursing conflict is low at the light level of 94,9%.

The research to be done by Higazee (2015) refers to the type of conflict experienced by the nurse with intragroup conflict, then competitive conflict. Intragroup conflict is the common conflict in the group (8). While competitive conflict is done when two groups are being attempted achieving goals

intragroup conflict and competitive conflict is being connected between nurses because competition would be given a chance for them to grow and to evolve. That has been related to the problem that they face. According to Zakari, Al Khamis, & Hamadi, (2010), the type of intragroup conflict revealed a correlation of significance with personality for professionals in giving the nursing service (9).

Intrapersonal conflict is a conflict that happened to someone. During the COVID-19 pandemic, the pressure being experienced by medical personnel that

would be inflicted stress would be impacted health including infection risk of disease. (5). According to Liu Q et al, (2020), medical personnel who cared for COVID-19 patients had the biggest risk of having mental health problems like stress, insomnia, and depression. That would have caused conflict among self-health personnel, especially nurses (6).

Based on the research, the scale of nurse conflict nurse while COVID-19 pandemic has been lying at a light level. In line with the research had been done by Damanik, (2021) as much as 57,5% of nurses have mild conflict (10). There is a difference in conflict level in Higazee's research (2015) with a scale of nurse conflict had been lied in the moderate sum of 54,2 % and research by Kunaviktikul, Nuntasupawat, Srisuphan, & Booth, (2000) that evaluating the level of conflict and management style of nurse conflict. The result has indicated that nurses have a moderate conflict that would be impacted work satisfaction and willingness to stay or move from their work (11).

Professional nurses at work have been associated with levels of conflict and types of interpersonal and intragroup. The background of culture individual and organization climate apparently would become the most influential factor that would be pushed the result (9). The Understanding style of conflict management have been gotten increasing the result of positive nurse conflict, and leading to increase the relationship, to increase pleasure of work and to increase nurse retention. The research result had been done with 178 respondents that the cause of nurse conflict often commonly is the common behavior consisting of patient attitude. That is not accordingly as much as 60,1%, then patient misunderstanding as much 47,8% and distrust as much 46,1%.

Dissimilar to the research by Azoulay et al., (2009) medical personnel in the ICU room have been gotten the common behavior that would become conflict a bad attitude, distrust, and bad communication between the team (12).

The attitude of someone would become one of causing conflict. The unique attitude, opinions, beliefs, emotional stability, maturity, education, gender, and language of the other have been described as the different behavior that would be caused conflict (13).

While the COVID-19 pandemic each person would be encountered anxiety, fear dan concern that will disease transmission. That would be caused stress for patients who have been infected by COVID-19. Therefore, it could be affected problems for medical personnel especially the nurse who is being cared patient. The attitude, misunderstanding of patients, and distrust of nursing COVID-19 would be caused conflict experienced by the nurse in giving nursing care services.

The strategy of conflict solution had been gotten by the research that is more often using by nurses is collaboration with Mean value 4,09 and compromise with Mean value 4,07. The research result is being supported by Özkan Tuncay, Yaşar, & Sevimligül research (2018), The studied results have indicated that the conflict managements are collaborating and compromising. The collaborating style is helping the nursing manager to find creative and alternative things from a problem with clearly share the information that would be needed to decide the solution or the effective way that could be accepted by the others in conflict situations that occur. Furthermore, the compromise in two sides is being shared to hand over or to give up for make good decision together (14).

Alshammari & Dayrit, (2017) saying that the nursing personnel is being used the common strategy to clear the conflict with collaborating, then compromising, accommodating, competing and the last strategy is avoiding. By using collaboration and compromise strategy, the nurse would be avoided from stress and tension that could be increased conflict situation rather than reducing conflict intensity. Therefore, collaborating and compromising are effective strategies to resolve the conflict (15).

In this study, the correlation between age and accommodating strategies was found. This researched that the younger the nurse, the more conflict resolution strategies nurses use accommodation. At a young age more trying to meet the need and expectations of the opposite, and more likely to follow the advice of the opposite. The older you ger, the wiser, more creative you will be, so your ability to make decisions in overcoming existing problems will also increase (16).

The research had been gotten the correlation between age and conflict strategy solving within p value 0,028. There had been indicated that age and conflict strategy solving have been significant connected in accommodating style. The range age 20-25 years old are had significant different in taking accommodation conflict strategy solving than the age above ranged. In the research by (Özkan Tuncay et al., 2018) the nurse within range age 24-29 years old is more effective using avoiding strategy, compromising and accommodating than the age above ranged (14).

Being different with Ünlü, Özcihan, Özbaş, & Bakiner, (2014) range age with 26-35 are being used for accommodating conflict strategy solving more than range age with > 36 years old (17). Based on Baddar et al.,

(2016) the nurse with age more than 36 years old are being using collaboration in completing the conflict. The nurse had more empathy to listen to the other and it could be to control their emotions, then adapt with a social environment that would be more democratic to resolve the problem (15).

The research by (Özkan Tuncay et al., 2018) showed that education is being more influenced by choice conflict strategy solving. The nurse with diploma degree is more likely using conflict strategy solving negatively, avoiding and competing than bachelor and master degree (14). Rating of education have been impacted in emotional intelligence level, which the manager within emotional intelligence level and high ethical arid ability would be affected the connection between employees positively (15). In other research had been shown that education is had a role to choose conflict strategy solving. (18).

Nursing education is furthermore in conflict management for the nurse and the manager nurse is needed. Both of them must be more aware that would be the conflict between them and more skilled to understand how the conflict could be resolved in a constructive. Overall, the identity of nurse professionals must be stronger than more important to the policy maker for releasing the potential negative effect of the conflict medical service (9).

CONCLUSION

The most common types of conflict that we found were intragroup, competitive, and intrapersonal. The source of conflicts in nursing management was the attitude of patients, misunderstanding, and mistrust. Collaborating and compromising were the most common strategies nurses used to solve the conflict during the pandemic COVID-19. There was a relationship between age with accommodating strategy.

Avoiding had an association with the educational level of the nurse, especially for undergraduates. Strategy avoiding is also significant in nurses with working experiences below 1 year.

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