

Conflict Management Styles among Hospital Nurses In Relation To Their Burnout and Emotion Intelligence

Manikandan^{1*}, Sajeeth Kumar Gopalakrishnan²

ABSTRACT

This study examined the association of conflict management styles among hospital nurses in relation to their burnout and emotion intelligence. The sample was 136 nurses of government and private hospital at Puducherry. Convenience sampling method was adapted to select the sample for the present study. Measure of Thomas Kilman conflict mode instrument by Kenneth L. Thomas and Ralph H. Kilman, Maslach Burnout Inventory-General Survey (MBI-GS) and the Emotional Intelligence Scale by Wong & Law to respondent. Data collected were analyzed using f-test and correlation. The results indicate that significant correlations exist between conflict management styles and burn out, and no correlation exist between EI and burnout, emotional intelligence and conflict management styles.

Keywords: *Conflict Management Styles, Burnout, Emotion Intelligence and Nurses*

Conflict is one of many issues found in all organization, including hospitals, where constant human interactions occur. The potential for conflict to arise in a hospital setting is considerably higher due to the complex and frequent interactions among the nurses and other employees and the variety of roles they play. Specialization and organizational hierarchy often add to the territorial conflicts in hospital. Although a reasonable amount of conflict in the form of competition can contribute to a higher level of performance and a conflict-free work environment is an exception, how conflict is addressed is of paramount importance. The sources of conflict among the hospital nurses and health care personnel include authority positions and hierarchy, the ability to work as a team, interpersonal relationship skills, and the expectations of performing in various roles are various levels. Burnout is a psychological term for the experience of long-term exhaustion and diminished interest. Research indicates general practitioners have the highest proportion of burnout cases (according to a recent Dutch study in Psychological Reports, no less than 40% of these experienced high levels of burnout). Engagement is characterized by energy, involvement and efficacy, the opposites of exhaustion, cynicism and inefficacy. Many theories of burnout include negative outcomes

¹ Program Assistant, Social Welfare Dept, Govt of Puducherry, Puducherry, India

² Project member, Dept of Psychology, Annamalai University, Tamilnadu, India

**Responding Author*

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related to burnout, including job function (performance, output, etc.); health related outcomes (increases in stress hormones, coronary heart disease, circulatory issues) and mental health problems (depression, etc.). Although burnout is work-related, most responsibility for burnout currently rests on the individual worker in the United States, as well as the individual company, as it is in a company's best interest to ensure burnout doesn't occur. Other countries, especially in Europe, have included work stress and burnout in occupational health and safety standards, and hold organizations (at least partly) responsible for preventing and treating burnout. How the stress is processed determines how much stress is felt and how close the person is to burnout. One individual can experience few stressors, but be unable to process the stress well and thus experience burnout. Another person, however, can experience a significant amount of stressors, but process each well, and avoid burnout. How close a person is to a state of burnout can be determined through various tests. Emotional Intelligence: It is being able to monitor our own and others' feelings and emotions, to discriminate among them, and to use this to guide our thinking and actions. The emotionally intelligent person is skilled in four areas: Identifying, using, understanding, and regulating emotions (Salovey & Mayer, 1990). Emotional intelligence is related to the management of conflict situations in several ways. Emotions involve cognitive and behavioral aspects that come into play in any conflict situation (Jones & Bodtker, 2001). To be in conflict is to be emotionally activated. Human conflict does not occur in the absence of emotions or behavioral responses to emotions (Bodtker & Jameson, 2001). The ability to draw upon those emotions in an adaptive way leads to more effective behavior. Before choosing a behavioral response, however, one must identify and categorize one's own feelings (Gardner, 1983). The present study tries to understand the relationship between conflict management style, burnout and emotional intelligence of hospital nurses.

Objectives

1. To assess the conflict management style, burnout and emotional intelligence of nurses in relation to their age.
2. To understand the relationship between conflict management style, burnout and emotional intelligence of hospital nurses.

Hypotheses

1. Nurses do not differ in conflict management style on the basis of age.
2. Nurses do not differ in burnout on the basis of age.
3. Nurses do not differ in emotional intelligence on the basis of age.
4. There will be no significant relationship between conflict management style, burnout and emotional intelligence.

METHODOLOGY

Sample

The aim at the study was to explore the conflict management style among hospital nurses in relation to their burnout and emotional intelligence. A sample of 136 hospital nurses of

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government and private hospital at Puducherry were taken for the study. Hospital nurses of age from 21 to 40 years and above were selected. The total sample surveyed for the current study was 136. Convenience sampling method was adapted to select the sample for the present study.

Tools

- 1. Conflict mode instrument by Kenneth L. Thomas and Ralph H. Kilman (1974):** The scale consists of 30 statements which explore the different dimensions of conflict mode instrument such as competing, collaboration, compromising, avoiding & accommodating. There are several pairs of statements, describing possible behavioral responses. For each pair, please circle the “A” or “B” statement which is most characteristic of your own behavior. The sum of all the 30 items is the indicator of conflict mode instrument.
- 2. Maslach Burnout Inventory-General Survey (MBI-GS) (2001):** The instrument consists of services of 16 statements. Which explore the different dimensions of burnout such as: exhaustion (item no’s 1,2,3,4 and 6); cynicism (item no’s 8,9,13,14 and 15); professional efficacy (item no’s 5,7,10,11,12 and 16) there are scored on a 7-point likely scale ranging from 0 (never) to 7 (daily).
- 3. Emotional Intelligence Scale by Wong & Law (2007):** The scale consist of 16 statement which explore the different dimensions of emotional intelligence such as self-emotional appraisal (item no’s 1, 2, 3 and 4); other emotional appraisal (item no’s 5, 6, 7 and 8); use of emotion (item no’s 9, 10, 11 and 12); regulation of emotion (item no’s 13, 14, 15 and 16). There are seven response categories for each as: i) Strongly disagree ii) disagree iii) Moderately disagree iv) Neither agree nor disagree v) moderately agree vi) Agree vii) Strongly agree. The sum total of all the 16 items is the indicator of emotional intelligence.

Procedure

This study implemented survey method the self reported questionnaires were used to collected the data for two variables of the study along with the personal data sheet. The selected hospital nurses of (N=150) were given the standardized questionnaire under personal supervision. In spite of supervision it was found that some questionnaires were partially responded and hence only 136 were considered for the analysis.

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RESULTS AND DISCUSSION

Table 1 showing the mean, SD and F value for conflict management styles on the basis of age

Variables	Age	N	Mean	S.D	F-Value
Competition	21-30	57	5.94	1.59	3.036(NS)
	31-40	47	5.97	1.90	
	Above 40	32	6.81	1.59	
	Total	136	6.16	1.73	
Collaborating	21-30	57	5.80	1.48	11.687**
	31-40	47	6.06	1.56	
	Above 40	32	7.37	1.47	
	Total	136	6.26	1.62	
Compromising	21-30	57	6.19	1.50	15.887**
	31-40	47	6.55	1.55	
	Above 40	32	8.06	1.54	
	Total	136	6.75	1.69	
Avoiding	21-30	57	7.10	1.63	0.821 NS
	31-40	47	7.02	1.35	
	Above 40	32	7.43	1.29	
	Total	136	7.15	1.46	
Accommodating	21-30	57	7.68	1.70	4.303*
	31-40	47	6.74	1.55	
	Above 40	32	7.15	1.62	
	Total	136	7.38	1.67	

***Significant at 0.01 level NS=Not Significant*

It is observed that 'F' Values are significant for compromising & collaborating of Conflict management styles. The "F" values are not significant for competing, Accommodating and avoiding. Hence the hypothesis is partly accepted and partly rejected it is concluded that the nurses significantly differ in their conflict on the basis of age

Table 2 Showing the mean, SD, and F value for burnout on the basis of age

Variables	Age	N	Mean	S.D	F-Value
Exhaustion	21-30 Yrs	57	3.44	1.34	5.23*
	31-40 Yrs	47	3.31	1.37	
	Above 41	32	4.33	1.74	
	Total	136	3.60	1.50	
Cynicism	21-30 Yrs	57	3.08	1.39	14.53*
	31-40 Yrs	47	3.81	1.66	
	Above 40	32	4.91	1.58	
	Total	136	3.76	1.68	
Professional efficacy	21-30 Yrs	57	4.68	1.11	5.38*
	31-40 Yrs	47	4.17	0.65	
	Above 40	32	4.70	0.74	
	Total	136	4.25	0.91	

**Significant at 0.05 level*

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It is observed that the 'F' Values are significant for the entire Burnout dimension, exhaustion (5.23), cynicism (14.53) and professional efficacy (5.38) which is significant at 0.01 level. Hence the hypothesis is rejected. It is concluded that the hospital nurses significantly differ in their Burnout on basis of their age.

Table3 Showing the Mean, SD and F value for emotional intelligence of the nurses on the basis of age

Variables	Age	N	Mean	S.D	F-Value
Self emotional appraisal	21-30 Yrs	57	23.01	3.59	8.011**
	31-40 Yrs	47	22.42	5.39	
	Above 41	32	25.96	1.94	
	Total	136	23.50	4.25	
Other emotional appraisal	21-30 Yrs	57	22.77	3.66	10.921**
	31-40 Yrs	47	22.21	3.86	
	Above 41	32	25.68	1.82	
	Total	136	23.26	3.64	
Use of emotion	21-30 Yrs	57	23.14	3.49	7.539**
	31-40 Yrs	47	22.48	4.32	
	Above 41	32	25.53	1.84	
	Total	136	23.47	3.69	
Regulation of emotion	21-30 Yrs	57	22.36	3.70	10.768**
	31-40 Yrs	47	20.91	4.71	
	Above 41	32	24.93	1.95	
	Total	136	22.47	4.05	
Total emotional intelligence	21-30 Yrs	57	90.00	13.43	14.215**
	31-40 Yrs	47	87.89	14.58	
	Above 41	32	102.34	5.33	
	Total	136	92.17	13.66	

**Significant at 0.01 levels

It is observed that the 'F' values are significant for the entire Emotional intelligence dimension as well as for the total, which is significant at 0.01 level. Hence the hypothesis is rejected. It is concluded that the hospital nurses significantly differ in their in their emotional intelligence on the based on their age.

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Table 4: Conflict management styles, burnout and emotional intelligence of hospital nurses: correlation analysis.

	Competition	Collaborating	Compromising	Avoiding	Accommodating	Exhaustion	Cynicism	Professional Efficacy	Self Emotion	Other Emotion	Use of Emotion	Regulation of Emotion	EI total
Competition													
Collaborating	.155												
Compromising	.094	.390**											
Avoiding	.104	.129	-.036										
Accommodating	-.013	.080	.096	.082									
Exhaustion	.262**	.445**	.285**	.267**	.057								
Cynicism	.318**	.359**	.309**	.305**	-.162	.565**							
Professional Efficacy	.096	.201*	.209*	.206*	.008	.394**	.317**						
Self Emotion	.178*	.125	.072	.082	-.032	-.020	.034	-.001					
Other Emotion	-.006	.202*	.194*	.024	.179*	.031	-.021	.086	.615**				
Use of Emotion	.156	-.018	.044	.018	.076	.009	.027	-.008	.664**	.459**			
Regulation of emotion	.038	.143	.134	.164	.108	.133	.087	.063	.429**	.636**	.429**		
EI total	.068	.136	.150	.059	.099	.030	.023	.113	.735**	.798**	.698**	.712**	

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

Finding indicates there is a relationship between conflict management styles with burnout and emotional intelligence. In the conflict management styles the dimension of competing is obtained the significant in burnout dimension “Exhaustion” ($r = 0.26$; 0.01 significance), “cynicism” ($r = 0.31$; 0.01 significance) and not significance with “professional efficacy”. In the conflict management styles the dimension of “Collaborating” is obtained the significant with burnout dimension “Exhaustion” ($r = 0.45$; 0.01 significance), “cynicism” ($r = 0.35$; 0.01 significance) and “professional Efficacy” ($r = 0.20$; 0.05 Significance). In the conflict management styles the dimension of “Compromising” the three dimension of burnout has obtained the positive correlation “Exhaustion” ($r = 0.28$; 0.01 significance), “cynicism” ($r = 0.30$; 0.01 significance) and “professional Efficacy” ($r = 0.20$; 0.05 Significance). In the conflict management styles the dimension of “Avoiding” the three dimension of burnout has obtained the positive correlation “Exhaustion” ($r = 0.26$; 0.01 significance), “cynicism” ($r = 0.30$; 0.01 significance) and “professional Efficacy” ($r = 0.20$; 0.05 Significance). In the conflict management styles the dimension of “Accommodating” the three dimensions of burnout has not shown any correlation. Emotional intelligence has not correlated with conflict management styles. However, all the dimensions of conflict management styles are not shown any correlation with emotional intelligence. Emotional intelligence has not correlated with Burnout. However, all the dimensions of burnout are not shown any correlation with emotional intelligence.

DISCUSSION

The findings of the present study reveal that conflict management styles of hospital nurses significantly differ on the basis of age. The previous study done by Pavlakis, (2011) Mean age of respondents was 41 years, and 75% were female. The majority of respondents agreed that organizational problems and communication gaps were the main issues creating conflict. Avoidance and collaboration were the preferable strategies for conflict resolution. Burnout of hospital nurses are significantly differ on the basis of age and educational. There was significant age difference in the burnout exhaustion, cynicism and professional efficacy. The age differences in hospital nurses are higher than the cynicism. The previous study done by Fazelzadeh A et al, (2008) the nurses of psychiatry wards showed significantly higher levels of emotional exhaustion and depersonalization in comparison with nurses working in other wards, and burn wards nurses showed significantly higher levels of personal accomplishment. Also, nurses who were single were more emotionally exhausted. The previous study **in Individual State Nursing Approvals (2009) shows** Burnout is a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment. Levels of burnout are high among healthcare professionals, and the effects of burnout have serious consequences in the nursing profession. In addition to the detrimental physical, psychologic, and interpersonal/social effects, high levels of burnout among nurses have led to an ongoing nursing shortage that poses a threat to patient safety and quality of patient care. The findings shows that emotional intelligence of hospital nurses will differ on the basis of age. A finding suggests that a relationship between conflict management styles, burnout and emotional intelligence. The previous study of Malek (2000) found a positive correlation between emotional intelligence and collaborative conflict resolution styles within a small general population sample. The previous study of Morrison (2005) also found a positive correlation between emotional intelligence and collaborative conflict management styles as well as a negative correlation between and accommodating styles and emotional intelligence among population of registered nurses. The previous study of Lee's (2003) also found a positive correlation between emotional intelligence and either compromising or integrating styles (similar to collaborative styles) of conflict management within a population of college faculty and staff in Taiwan. The previous study of Baker (2000) discovers a correlation between emotional intelligence and collaborative styles of conflict management. All the findings have important to know the nurses work role and how to work under them in the hospital and it also helps the nurses to develop the assumption towards the work for future development.

CONCLUSION

1. Age influences the conflict management styles, burnout and emotional intelligence of hospital nurses.
2. Significant correlations exist between conflict management styles and burn out, and no correlation exist between EI and burnout and emotional intelligence and conflict management styles.

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