

ISSN 1313-7069 (print) ISSN 1313-3551 (online) Trakia Journal of Sciences, No 4, pp 352-354, 2014 Copyright © 2014 Trakia University Available online at: http://www.uni-sz.bg doi:10.15547/tjs.2014.04.003

Original Contribution

CONFLICT MANAGEMENT IN BULGARIAN NURSING PRACTICE – AN EMPIRICAL STUDY RESULTS

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ABSTRACT

Introduction: The Bulgarian health care system has been in dynamic transition for twenty years by now. The contemporary stage is developing in difficult economical, social and political circumstances. The Bulgarian health care system suffers from extremely low number of nurses. This context predisposes difficult everyday ethical and organizational conflicts that involve nurses. Purpose: to discover and analyze some of the most often and difficult conflicts and their management in Bulgarian medical practice especially in nursing health care based on opinion of nurses. Tasks: 1. To identify, classify and analyze the conflicts with stressing the ethical aspects. 2. The applied methods of managing conflicts to be described and to discuss the most preferred strategies of solving conflicts. Methods: Content analysis of written cases has been performed. The cases are prepared by students in Nursing Health Care Management at the Medical Faculty of Trakia University - Stara Zagora and describe real conflicts in their professional experience. Ethical conflicts and complex ones that include ethical component are identified and investigated. Qualitative criteria are applied for defining the type, sources, stage, methods and strategy for managing conflict. Results: Most of the conflicts are not clearly ethical but complex and are caused by ineffective communication. The insufficient time for conversations with patients leads to mistakes and interpersonal conflicts. The team conflicts most often are connected with unclear professional roles and mutual dependant responsibilities and sometimes underestimation of nurses by physicians. For solving conflicts usually the authors of cases combine well known methods with innovative ones. Compromise and cooperation are the most preferred models. Our analysis shows that in the most cases the strategies of solving conflicts are unaggressive, non-competitive and creative. Conclusions: The issue of conflict management is a big challenge to Bulgarian nurses managers. It requires theoretical knowledge, adequate managerial skills and ethical attitude to perform the delicate activity of solving conflicts. Certain political decisions must be taken as well in the direction of reducing the sources of conflicts by the managers on strategic level.

Key words: nurse managers, conflicts, strategies of solving, Bulgaria

INTRODUCTION

The Bulgarian health care system has been in dynamic transition for twenty years by now. The contemporary stage of the reform is developing in difficult economical, social and political circumstances. Undoubtedly the problems of nursing influence not only its intra-structural dynamics but the whole health care system as well. (1) The Bulgarian health care system

*Correspondence to: Svetlana Dimitrova, Department of Social Medicine and Healthcare Management, Medical Faculty at Trakia University – Stara Zagora, Bulgaria, 11 Armeiska Street, 6000 Stara Zagora, tel 042 664 467, e-mail: svdimitr@mf.uni-sz.bg suffers from extremely low number of nurses. The Bulgarian Association of Healthcare Professionals has been alarming about the drastic scarce of nurses' number in the whole healthcare net for years by now. (2) This tendency is marked as a very dangerous one in the joint report of the EU Council for the assessment of the social politics.

Many challenges have to be met by practicing health care professionals. This context predisposes difficult everyday ethical and organizational conflicts that involve nurses.

The purpose of this study is to discover and analyze some of the most often and difficult conflicts and their management in Bulgarian

medical practice especially in nursing health care based on opinion of nurses.

Tasks:

- 1. To identify, classify and analyze the conflicts with stressing the ethical aspects.
- 2. The applied methods of managing conflicts to be described and to discuss the most preferred strategies of solving conflicts.

METHODS

Content analysis of 25 written cases has been performed. The cases are prepared by students in Nursing Health Care Management at the Medical Faculty of Trakia University – Stara Zagora and describe real conflicts in their professional experience. Ethical conflicts and complex ones that include ethical component are identified and investigated. As a formal criterion we have used the formal assessment – only cases with mark "A" (excellent 6 in Bulgarian educational system) are analyzed.

Qualitative criteria are applied for defining the type, sources, stage, methods and strategy for managing conflict. Besides we have formulated: the short description of the conflict, the key words and especially the ethical components.

RESULTS AND DISCUSSION

As A. Petkov, according to Folger et al. identifies the conflict it is the interaction of interdependent people who perceive incompatible goals and interface from each other in achieving those goals. (3) The transformative theory of conflict starts by offering its own answer to the foundational question of what conflict means to the people involved. According to transformative theory, what people find most significant about conflict is not that it frustrates their satisfaction but that it leads and even forces them to behave towards themselves and others in ways that they find uncomfortable and even repellent (3)

Our priority in defining the conflicts analyzed in our study was to identify the ethical ones. Most of the conflicts are not clearly ethical but complex and are caused by ineffective communication. We have classified them based on type of the problematic communication – organizational, interpersonal team conflicts, interpersonal conflicts with the patients and their relatives, intrapersonal conflicts. The most of the cases, 19 as a number, are about team conflicts in a scarce of personnel situation. The team conflicts most often are connected with mutual

dependant responsibilities of the nurses and sometimes underestimation of nurses by physicians. Most often conflict concerns the "nurse-nurse" communication - mutual dependence in performing the professional duties (12 of cases). Different reasons lead to the conflict in every single case. The authors underline personal qualities of the people that being involved in it. They predispose the conflict in most of the cases (10). Second, the bad formal communication and unclear professional roles constitute 20% of the reasons for conflicts. (5 cases)

Interpersonal conflicts with patients and their relatives are not so commonly described. It is interesting that, according to our study, only in few cases (6 as a number) the reason for conflict is the nurse-patient communication. This fact may be commented in different directions neglecting this 'very routine' side of the profession, unwillingness to discuss openly the failure to communicate with the patient, not very good skills to be empathic with the patients and many other explanations. We would like to comment that the insufficient time for conversations with patients leads to mistakes and interpersonal conflicts. When time is pressing the nurse in performing her professional duties she would be under the growing stress and she wouldn't react normally. As it is shown in the book of Burnard, Scott (2007) describes this behaviour as self sabotage adding that when an individual is found in a stressful situation they can often become impatient or causing unnecessary conflicts and mental stress because stress is clouding their judgement. (4) We would like to cite one of the students: '(The patient) was saying that she (the colleague -nurse) was misbehaved and said to him that he was very capricious and she had no time for explanations because otherwise she could not do her work after that she kicked him out'. This rude attitude could be routed in the extreme overload of the nurse who evidently suffered from 'burn-out' syndrome. Only the correct and delicate intervention by the author of the case who played a role of a mediator between the patient and the other nurse, in the same time taking her responsibilities on herself could solve the conflict.

To summarize, communicational difficulties in professional relationship are due mainly to the extremely low number of nurses and working overload. The scarce human resources results in high level of stress. It often brought out an argumentative person who on reflection was calm and friendly when things were going right and people co-operated with tasks asked of them but when crossed became bossy. The poor conflict resolution skills are exercised when someone tends to act aggressively with people when simple assertiveness will work better.

For solving conflicts usually the authors of cases combine well known methods with innovative ones. Compromise and cooperation are the most preferred models. The democratic style of management and involving team members in the process of choosing the proper strategy is presented in a reasonable part of cases that are successfully solved. Our analysis shows that in the most cases the strategies of solving conflicts are unaggressive, non-competitive and creative. A number of authors describe that by supporting colleagues professionals can work together to understand better the dynamics underlying the conflict and how its transformation from conflict to a collaborative process of peace building can be achieved. (4,5) "Good integration and an ability to resolve conflicts are popularly held to be valuable leadership skills and one might expect leadership to emerge clearly in such a situation" (Callaghan 2007). By using tools to become more aware of your inner voice, using positive affirmations and surrounding yourself with positive energy, you can turn things around

for the better, and experience much less mental and emotional stress in your daily life. (4)

CONCLUSIONS

The issue of conflict management is a big challenge to Bulgarian nurses managers. It requires theoretical knowledge, adequate managerial skills and ethical attitude to perform the delicate activity of solving conflicts. We have tried to discover this actual problem of the Bulgarian nursing according to the opinion of the future certified managers and teachers in nursing. Further investigation is needed in order to analyze it more deeply. Certain political decisions must be taken as well in the direction of reducing the sources of conflicts by the managers on strategic level.

REFERENCES

- 1. Bulgarian National Healthcare Strategy 2008 2013.
- 2. Markova St., Problems of the Nursing Challenges to the New Team of The Ministry of Health. *Health care*, 3,2009,4-5.
- 3. Petkov A., Management and Healthcare Management. *Organizational Psychology*. Irita, 2009, 165.
- 4. Burnard Ph., Effective Communication Skills for Health Professionals. Stanley Thornes (Publishers) Ltd, 1997, 265.
- Lisa Grant, Conflict Transformation A Nurse Managers Experience Dealing With Confrontational Situations. Mediate.com, July 2007.