

Conflict Resolution: What Nurses Need to Know*

It is Kate's third 12 hour shift in as many nights. She arrives at work already tired; she did not sleep well because her neighbour's children were playing loudly in the yard next door. Even though this frequently happens, Kate has never talked to the neighbour next door about her need for quiet during the day when she is trying to sleep. She figures it would do no good, so why bother.

She is a few minutes late for her shift since she had to stop for gas on her way to work. The argument she had with her husband on her cell phone on the way to work is still much on her mind. Why does he always leave the gas low when she needs to get to work? They have had this argument many times and yet nothing ever changes. Just once I would like to win that argument Kate thinks.

Her colleagues look upset and mutter under their breath as she arrives and even worse, Jean the Nurse Manager is glaring at her as she rushes into the nursing station. Kate has been warned before about her "time issues" and been threatened with discipline if things don't get better. Kate has attempted to talk to Jean but all she gets are threats and ultimatums.

The ED is crowded as usual with the waiting room overflowing. It is going to be another busy night no doubt. As she waits for her colleague to give report on the patients she will be taking over, an irate man approaches the nursing station and starts yelling. "We have been waiting for 2 hours and nothing is being done and all of you nurses are just sitting around chatting about your social lives. This is ridiculous." Kate starts to try to explain but the man waves her off. As he storms away he says with a surly voice, "we are out of here and I am going to report all of you."

A few minutes later as Kate is assessing her patients, Dr. Lane approaches her demanding she come with him to examine a patient. Even though Kate has not finished what she is doing and has not assessed all of her patients, she does not want to upset Dr. Lane who has been known to get very angry when he does not get what he wants. Kate goes along with him, even though she worries that she has not really got a good handle on what her patients are up to.

Introduction

The conflicts that Kate experiences in the narrative above are all too familiar to many nurses. There are conflicts at home with neighbours and spouses, conflicts at work with colleagues, supervisors and doctors, as well as patients and their families. Like many of us who lead busy and challenging lives, Kate experiences conflict on a daily and sometimes hourly basis at home and at work. And like many people, Kate and her colleagues have little understanding about the sources of conflict or how to manage it when it occurs.

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This article will provide nurses with the following,

- an understanding of the origins of conflict,
- a description of the typical responses to conflict
- an examination of why healthcare creates a conflict rich environment
- a discussion of various conflict resolution strategies that can be used to manage conflict.

Conflict 101: What is it?

Conflict is an inevitable factor in our daily personal and professional lives. Most of us do not enjoy experiencing conflict and yet, one only need look at popular culture to see that we do seem to enjoy watching others involved in disputes and conflict. Movies such as “Meet the Fockers”, “The Godfather” and “Star Wars”, and television shows like Survivor and the Apprentice and ER are rife with conflict laden situations. We may not like experiencing conflict ourselves but we seem to enjoy watching others deal with it.

The prevalence of conflict in movies and TV shows merely serves to highlight the fact that disputes, arguments and disagreements are a normal and necessary part of life. Conflict happens in happy families, good relationships and healthy workplaces as well as in wacky families, outer space, on remote islands, in unrealistic hospital settings and toxic boardrooms. Conflict is neither good nor bad, it just is.

Unless we choose to live the life of a recluse and avoid human contact, we will experience conflict. It is a normal result of interacting with our fellow humans.

Conflict originates for a number of reasons, such as

- differing values,
- competition over scarce resources
- miscommunication or lack of information
- relationship breakdowns

At the center of all conflict are basic human needs. Conflict occurs because our needs are unmet or because our needs are inconsistent with or in opposition to the needs of others.¹ One of the first steps to take in helping nurses and others manage conflict is to remind them that it is normal, and unavoidable. The next step is to help people identify that there are a number of ways that each of us responds to conflict and that we all respond in different ways at different times and with different people. Once we understand the various approaches and responses we may have to conflict, we are a long way down the road to being better able to manage it as it arises.

How do we respond?

Various experts have identified the ways that people respond to conflict. One tool that is widely used is called the Thomas Killman Instrument (TKI) and identifies 5 ways in

¹ For more information on conflict see for example; Mayer, B. *The Dynamics of Conflict Resolution*, Jossey Bass. San Francisco 2000 and Goldberg, S., F. Sander and N. Rogers. *Dispute Resolution: Negotiation, Mediation and Other Processes*. Aspen Publishers New York. 1999.

which people respond to conflict.² The TKI identifies 5 approaches to conflict; avoidance, competition, accommodation, compromise and collaboration.

In general a person's response to conflict will be determined by whether one is more concerned with maintaining or improving relationships with others or whether you are more concerned about yourself and your ability to win.

While the TKI can be quite useful, I use a modified model which omits the compromise option. While compromise is described by many others as a viable alternative to conflict situations, I think it should be avoided at all costs. People routinely tout compromise as a way for everyone to get something out of a situation, when in reality it means that everyone gives up something and everyone loses. The model I use describes 5 ways that people respond to conflict; avoidance, competition, aggressive/assertive, accommodation and finally collaboration.

Below, I outline the various ways Kate and others might respond to the various conflicts described earlier.

1. *Avoidance*

Kate works shifts. When she works nights, she sleeps in the day time. Her neighbour has young children who often play outside and make noise while Kate is trying to sleep. Kate is afraid to talk to her neighbour because she assumes that the neighbour will respond negatively and she fears the confrontation that she expects would result. In fact it is quite possible that the neighbour would be very compassionate to Kate's situation. Most people will respond in a reasonable and positive way if approached in a respectful manner. Kate could invite her neighbour over for coffee on her next day off and talk to the neighbour about the situation. Since Kate works only a few nights a month, she and the neighbour should be able to work on a schedule that incorporates indoor play time on the days that Kate is sleeping.

2. *Competitive*

Kate and her husband have one car which they both drive. Kate believes that her husband deliberately leaves the gas tank almost empty in order to make her life difficult. She has yelled at him numerous times for this and is determined that she will one day win this argument and that he will change. It is more likely that Kate's husband is forgetful rather than deliberately mean. Kate and her husband need to work together to solve this problem rather than looking at it as a fight that must be won.

3. *Aggressive/Assertive*

Kate's colleagues and her supervisor are acting in an aggressive manner towards Kate. Her supervisor uses threats and intimidation and her colleagues talk about her in a

² For more information about the TKI see a description on the MIT website at <http://web.mit.edu/collaboration/mainsite/modules/module1/1.11.5.html>

negative way. This kind of response serves only to escalate the situation rather than to improve it. Kate needs to approach her colleagues and try to get their support by explaining what is going on in her life and asking for their understanding. Kate has tried to deal with Jean in a positive way but has been rebuffed. Kate needs to go to Jean and apologize for her lateness and commit to doing better in the future. She should tell Jean that she understands the expectations and that she will live up to them. Kate can be assertive in the face of Jean's aggression and remind Jean that threats are not an acceptable way to treat staff. If this attempt to negotiate with Jean is unsuccessful, Kate may want to suggest using a third person that they both trust to help them discuss the situation and work on a resolution. Mediation in this instance might be a positive way to resolve the situations and help Jean and Kate improve their working relationship.

The angry family member is also acting in an aggressive manner. After the outburst, someone should have caught up with the man and attempted to listen to his concerns. Nurses do not have to allow themselves to be verbally abused; however often demonstrating a willingness to listen to an irate patient or family member will help them to calm down. Even though it may take time, try to get the man to tell you his concerns. As you listen patiently, it is likely that the man will start to calm down. Often showing people that you care is all that is required to get them to begin to let go of their anger. Apologize for the fact that he has had to wait, acknowledge how difficult the situation is and tell him that you will find out how much longer it will be. Being calm, caring and yet assertive in highly charged situations will help to deescalate the conflict.

4. *Accommodating*

Kate goes along with what Dr. Lane wants in spite of the fact that she is in the middle of something else, has not assessed her patients and knows that she should not be doing what he asks. She is afraid to disagree with Dr. Lane because he often gets angry if he does not get what he wants. Kate should have told Dr. Lane in an assertive tone that she would be willing to help him once she was finished what she was doing. If he becomes angry and/or abusive, Kate must continue to be calm and assertive and indicate that she will help when she can. In addition Kate must tell Dr. Lane that his manner of speaking to her is unacceptable and that she will not tolerate being treated in that way. If this is an ongoing problem with other physicians as well, Kate and her colleagues should try to have a meeting with the medical staff to discuss how to improve the working environment.

The approaches described above are ones that most of us use at various times in various situations. And there are times when each of those responses may be appropriate. It is perfectly reasonable to avoid conflict when you are dealing with a violent or unstable situation. You do not want to try to talk sense to a thief who is holding a gun on you. In a true emergency situation it is necessary for someone to take the lead and give the orders. It is not the time for collaborating when there is a crisis. Winning arguments is necessary if you are a lawyer in front of a jury, but does little to improve your relationship with your significant other. Aggression is undoubtedly required if you are a prize fighter. When your grandmother asks you to take her to favourite restaurant that you really don't like it is clear that you should accommodate her wishes.

What works better?

In most situations the best outcomes will be achieved if the parties involved in the problem work together towards a resolution in a collaborative way. The types of processes that work well can be generally described as interest-based approaches. Using an interest based approach means that the parties who are in conflict focus on the interests or needs that lie beneath the conflict rather than focusing on the positions that they may be taking. The goal is to work towards a resolution that allows everyone to get what they need rather than trying to win or defeat the other person. The types of processes that work well can be generally described as interest-based approaches. One of the best descriptions of interest-based problem solving is found in the book “Getting to Yes” written by Harvard based professors Roger Fisher and William Ury.³

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Interest based or collaborative approaches include negotiation, mediation and to a lesser extent arbitration. You may be familiar with the term “Alternative Dispute Resolution” or ADR. When people speak of ADR they are usually referring to processes used to resolve conflicts that are other than the traditional legal one of litigation.

In addition to being more timely and cost effective, using a collaborative approach also allows the parties to maintain their relationships in a positive. If Kate discusses the issue about the gas for the car with her husband and works with him to create a solution that works for both of them, the fighting will stop and the relationship can be strengthened as they realize that there are positive ways to deal with conflicts. In Kate’s situation with her neighbour, the matter would likely be quickly and pleasantly resolved if she talks with her neighbour and negotiates a solution that they both can live with. Kate needs to sleep and her neighbour wants to have time for her children to play. Together they can work out an acceptable schedule that will allow everyone to get what they need. Kate’s conflicts at work can be approached in a similar manner. In each situation, the first step should be to talk with the individuals involved and negotiate a solution that works for all. While Kate’s experiences with her colleagues are not unique in that all of us experience conflict with co-workers and supervisors, there are some specific factors about healthcare that help to generate conflict. These are discussed in the next section.

What is it about healthcare that creates conflict?

There are a number of characteristics unique to healthcare that help to generate misunderstandings and conflict;

³ Fisher, R. and W. Ury, *Getting to Yes: Negotiating Agreement Without Giving In* Penguin Books NY 1981 and Ury, W. *Getting Past No: Negotiating Your Way From Confrontation to Cooperation*, Bantam Books NY 1991

- Healthcare is a classic example of a complex adaptive system (CAS). Such systems are prone to generate errors on a regular basis; they are also capable of achieving innovation if the correct conditions are created.
- The complexity of the healthcare system means that misunderstandings and conflict usually occur at multiple levels at the same time.
- The healthcare system involves the wide disparity of knowledge, power, and control experienced by the various players. While most conflicts involve some disparity between parties, it is unusual for this to be as markedly institutionalized, as is the case in healthcare.
- The ethnic diversity of both consumers and providers of healthcare services in many communities is striking and can generate potential barriers to helping parties create solutions. As well, there remain strong gender inequities in terms of the services offered, the research done, and the treatment of many providers.
- Healthcare involves people interacting with other people to repair and preserve the health and personal integrity of patients. Often this involves issues about which people may have strongly held personal or religious values that may seem to be, and often are, irreconcilable.

All of these factors combine to make healthcare environments particularly prone to conflict. It is therefore important for nurses and other healthcare professionals to understand the origins of conflict and to develop strategies to manage the conflicts that they will experience.⁴

In addition it is useful for healthcare professionals to know the various approaches used to manage conflict including those outlined by the author above, as well as those of others tools and experts identified such as the Thomas Killman Instrument, Fisher and Ury, Bernie Mayer and others. As with any topic, the more one reads about and understands conflict, the better one will be equipped to handle it.

So why should we try to manage conflict?

For all of us, the first and most important step in learning to deal with conflict is recognizing that it is normal and manageable. Understanding that it is a natural outcome of interacting with others and that there are various approaches we can use to approach it is also helpful. Demystifying and clarifying is always a good first step in understanding any issue.

⁴ For more information see the following by the author and a physician colleague; Marshall P. and Robson R., **Using Dispute Resolution to Resolve Health Care Conflicts: An Essential Tool in Hospital Risk Management**, *Risk Management in Canadian Health Care*, Vol.4, Number 7 2003 and **Conflict Resolution in Healthcare: An Overview**, *Interaction*, Vol. 16, Number 1/2 2003, and **Preventing and Managing Conflict: Vital Pieces in the Patient Safety Puzzle**, *Patient Safety Papers, Healthcare Quarterly Special Issue*, October 2005

On a personal level, increasing our awareness of the manageability of conflict will assist us in improving and strengthening our relationships with friends, family and others. As nurses it is equally vital to understand conflict in order to improve our working relationships with colleagues and managers and in turn making our working lives more pleasant and productive. Decreasing stress has a clear connection to improved performance and increased job satisfaction.

However, improving our working relationships is not only a good thing for our own well-being and that of our colleagues. Recent research into patient safety and medical error indicates that positive working relationships within healthcare teams has a significant effect on the safety and efficacy of the care we give to patients.⁵ The research supports the importance of communication, collaboration and respect among health care team members as a vital component contributing to nurses providing safe quality care to patients.

What can we do to prevent and manage conflict?

1. Get education and training in conflict and conflict management

Conflict resolution education and skills training should be part of all health care professional programs and all health care facilities continuing education programs. Training should include an overview of basic conflict principles and approaches, as well as practical skills training in negotiation, mediation and facilitation. In addition, there are numerous publications on conflict resolution skills and techniques that are easily accessible.⁶

2. Improve your communication skills

*Seek first to understand, then to be understood.*⁷

Stephen Covey's well-known maxim may be intuitively logical and yet most of us ignore or forget its sensible and sensitive approach, especially when we are in highly

⁵ See for example, *To Err Is Human: Building a Safer Health System*. Washington, D.C. National Academy Press (IOM 2000) noting the vital role that nurses play in creating and maintaining safe patient environments; *Crossing the Quality Chasm: A New Health System for the 21st Century* (IOM 2000) discussing the importance of effective collaborative teams in ensuring patient safety; Decker D., et al, **Effect of Organizational Change on the Individual Employee**, *The Health Care Manager* 19(4):1-12 (2001) noting that poor communication leads to mistrust by nurses in hospital administration; Kritek P. *Negotiating at an Uneven Table: Developing Moral Courage in Resolving our Conflicts*, Jossey Bass, San Francisco(2nd ed. 2002) specifically addressing the power differentials that nurses encounter in healthcare situations; and Spears, P **Managing Patient Care Error: Nurse Leaders' Perspectives**, *Journal of Nursing Administration*. 35(5):223-224, (2005) discussing the impact of poor communication and conflict on patient safety.

⁶ See for example, Fisher, R. and Ury, W. *Getting to Yes: Negotiating Agreement Without Giving In*, Penguin Books, New York (2nd ed. 1991); *Difficult Conversations: How to Discuss What Matters Most*, Penguin Books, New York (1999)

⁷ Covey, S., *The Seven Habits of Highly Effective People*, Harper Collins, New York (2nd ed. 2004)

charged emotional situations. Most of us listen with the intent to reply and therefore we are not really listening at all. In fact we are more likely to be formulating our response. Very few of us ever practice the highest form of listening -- empathic or active listening. Active listening is the process whereby we “actively” work at hearing and understanding what the other person is saying. The listener must take care to attend to the speaker fully, and then repeat, or reframe what he or she thinks the speaker has said. In this way you ensure that you have fully understood the message the other person is trying to convey before you attempt to make the point you want to make. Remember, “Communication is at the heart of conflict and conflict resolution.”⁸

3. Recognize that men and women have different communications styles and responses to conflict.

Women have made great gains over the past few decades in ensuring equality in their personal and professional opportunities. In working hard towards these goals, many have tried to ensure and maintain women’s access to equality by insisting that men and women are the same. And while there is no doubt that men and women should have equal opportunities and access to jobs and services, there are still some fundamental differences in the way men and women communicate.⁹ In the area of conflict resolution particularly, recent research has indicated that women do not adopt the traditional “flight or fight” response to stressful situations that we have been led to believe is a universal response. Instead, women are more likely to “Tend and Befriend.”¹⁰ Women seek each other’s company in times of stress and want to discuss and share their experiences. Women turn outward whereas men tend to turn inward. Understanding these biologically connected preferences may help us understand why men are more likely than women to react violently in times of stress. Since the vast majority of nurses are women it is helpful to understand how our biology may affect our responses to others.

4. Adopt an AVID approach to others¹¹

Nurses are not alone in being surrounded by stressful, conflict laden situations on a daily basis. Our 21st century lives are packed with commitments and busy schedules; we are all dealing with various demands and requests from employers, colleagues, clients, family and friends. As we have discussed throughout this article, conflict is inevitable as we attempt to interact and communicate with others. In order to deal with the stress of everyday life, the following simple method of thinking about others and situations may help you to stay focused and positive in your interactions with others.

⁸ Mayer, B., *The Dynamics of Conflict Resolution: A Practitioner’s Guide*, Jossey Bass, San Francisco (2000)

⁹ See for example, Kolb, D. *Shadow Negotiation: Everyday Bargaining Skills for Women*, Simon & Schuster, New York (2000), Tannen, D., *You Just Don’t Understand: Women and Men in Conversation*, Harper Collins, New York (2001); and Goleman, D., *Emotional Intelligence: Why it can matter more than IQ*, Bantam Books, New York (1995)

¹⁰ Taylor, S., *The Tending Instinct: Women, Men and the Biology of our Relationships*. Times Books, Henry Holt & Company, New York (2002)

¹¹ © Pam Marshall

A: **Assume** the positive about others and their behaviour. **Assume** that they are reasonable and are not trying to cause you grief or pain. **Assume** that if someone is difficult to deal with, that they have something problematic going on in their life. **Assume** it is about them and not about you.

V: If you cannot assume the positive as in step #1 above, then you must **Validate** the situation. Talk to the individual and find out what is going on with them. Remember Stephen Covey's maxim and seek to understand them first before you angrily tell them what you think of their behaviour. **Validate** your negative assumptions about the other person by talking directly to them.

I: If you are unable to assume the positive, and you are unable (or unwilling) to validate the situation by talking to the individual, you must **Ignore** it and let it go. Sometimes, despite our best efforts we cannot think positively about a person, maybe due to past experiences. And there are times when we can't talk to the person directly, as in the case of a patient because they have been discharged or are deceased. Or in other situations we do not want to take the risk of talking to the person, especially if it is a difficult colleague. In these situations it is imperative that you consciously decide to let the matter go. We all pick the battles we will engage in and there are many times when avoidance is a perfectly acceptable option to choose. One important caveat however, you cannot continually choose to avoid and **Ignore** situations that repeat themselves over and over. At some point you must decide to take action.

D: If you cannot think **positively**, if you can't or won't **validate**, and if you can no longer **ignore**, you must **DO** something. Otherwise the stress of these unresolved situations will build up and inevitably be detrimental to your health and the health of those around you. We can all think of examples of angry bitter individuals who constantly carry with them the burden of past hurts and injuries; real or perceived. These are not pleasant people to be around. **DO** not be one of them! There are a number of things you can **DO**:

- Debrief the situation with a trusted friend and get their advice.
- Discuss the situation and your response with a therapist.
- Drink something healthy and calming, herbal tea may be a good choice, a nice glass of wine is often helpful, remembering however that moderation is key. Overuse of alcohol will only exacerbate problem situations not help them
- Do introduce relaxing activities and techniques into your lifestyle. Try walking, bike riding, hiking, canoeing, yoga or other activities that are non-competitive.
- Do consider meditation as a way to become more self-aware and positively focused.

Conclusion

Conflict is like the air we breathe. It is all around us and necessary for life. Sometimes it is murky and foggy and at other times it is clear and fresh. Just as our behaviour affects

the air around us, so too does it affect the development of conflict situations and the management of them. As nurses you will encounter conflict, and you will create it; these are inevitable facts of life. You will not be able to prevent all the conflict in your personal or professional lives; however you can educate yourself about it, understand it better and try some new approaches so that you will be better equipped to manage and deal with problems as they arise. The aim of this article is to get you started towards that goal.

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