

**Original Article****Perceived Effects of Interpersonal Conflicts among Nurses at Tertiary Care Hospital, Lahore**Asra Naeem¹, Misbah Zafar¹, Qandeel Farooq^{1*}, Sehrish Philips¹, Marriam Ejaz¹, Parsikla Sadiq¹ and Kanza Arshad¹¹Saida Waheed College of Nursing, Fatima Memorial Hospital, Lahore, Pakistan

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ABSTRACT

Interpersonal conflicts at workplace are not uncommon, it affects the nurses physical and mental health. It creates highly-stress environment and affects quality of patient outcomes. It poorly affects job performance and increases turnover. It creates disputes among nurses and leads to work disruptions. **Objective:** To examine perceived effects of interpersonal conflicts among nurses **Methods:** The quantitative descriptive study design and simple random sampling technique was used in this study. Demographic data from the study reveals 187 participants from which data were collected that indicates majority of the participants were 136 females. Only 33.7% of nurses reported that they were treated with love and kindness. However, 28.3% showed sometimes nurses had been faced with excessively harsh criticisms about my work. **Results:** The participants of this study include 83.4% nurses are Muslim and 16.6% are Christian. 70.6% nurses have 1 to 3 years' experience, 15.5% nurses have 3 to 5 years' experience and 13.9% have >5 years' experience. **Conclusions:** However, the results of this study could help to aware nurses about workplace conflicts and strategies that promote to reduce conflicts at workplace among nurses.

INTRODUCTION

Interpersonal conflicts arise when two or more people gives different perspectives and it can occur at any time. This can occur between co-workers, managers or clients and between clinical nurses or other employees. It can exist between two or more people having different points of views about something [1]. Such conflicts can arise in any settings which may be healthy, it can be result of mutually beneficial solution and when conflicts being unresolved, this can be unhealthy leads to conflict in a relationship. Such relationships build bad effects on working environment. The term interpersonal conflicts are used interchangeably with terms such as lateral violence,

bullying, incivility, relational aggression, and disruptive behavior [2-6]. An interpersonal conflict among healthcare workers also termed as "Horizontal or Lateral violence" it a process that occurs between interdependent individuals, groups, or both, as they face negative emotional reactions and interference with the achievement of their goals. Working relations between nursing colleagues are important for teamwork, job satisfaction, and patient outcomes [7]. The interpersonal conflicts in the workplace are inquiring issue that creates highly stressful environment, which become the barrier in progress of healthcare departments. Studies estimated that

somewhere between 46% of nurses have experienced lateral violence at some point during their careers. There is no single description about violence in nursing, however there are numerous phenomena or theories that points towards interpersonal conflicts among nurses. It can cause psychological problems such as sleep disturbances etc [8]. Nurses who experience such conflicts have poor trust in their organization and shows unsatisfactory work performance. It leads to negative self-image, ungenerous sense of well-being and low-grade world-view [9]. Manifestation includes rudeness, sarcasm, mockery, anxiety, quality issues, job dissatisfaction, increased cost and turnover. Verbal violence is considered primarily affects emotional health of nurses [10]. The purpose of improving relationships by helping them to express their emotions and describes them freely and forming healthy environment which make strong trusting relationships among workers. This will be height light awareness and to aid in further prevention. Today nursing profession faces a lot of challenges which includes increasing workload, inadequate staffing, and lack of proper scheduling workflows, working long-hour shifts, being judged about their profession, absenteeism stress and complex work environment [11]. There are varieties of ways to resolve conflicts are encouraging teamwork, involve human resources(HR), consider individual differences, listen well, speak properly, use managing styles such as compromise, collaborate, avoid biases, discipline and self-control, create problem solving. Collaboration is a strategy chosen by educated nurses and the supervisor for conflict management [12]. Managing conflicts that often relates to better job satisfaction and work relations among nurses. It leads to better satisfactory work performance, beneficial for patient quality care, but further improves organization employee's trust [13].

In recent times, there has been growing concern regarding workplace interpersonal conflict (WIC) and its implications for both the healthcare system and its workforce. Individuals across various roles such as doctors, nurses, co-workers, managers, and administrative staff may have encountered conflicts in the workplace. Given the potential compromise to patient safety resulting from these consequences, the healthcare system employees could disclose instances of interpersonal conflicts when reporting patient safety events during the course of patient care. Therefore, the present study was conducted to examine perceived effects of interpersonal conflicts among nurses.

METHODS

A quantitative descriptive study design was used to conduct in the Jinnah Hospital, Lahore, from February to

March 2023. Sample size was calculated by using Sullivan formula as follow: $N = \text{Total population}$ $n = \text{sample size}$ $e = \text{margin of error}$ $n = N / (1 + Ne^2)$ $n = 500 / (1 + 500(0.05)^2) = 187$. All the nursing staff having 3 to 8 years' experience were enrolled in current study. All the unwilling nurses and working on managerial post were excluded from current study. The Workplace Aggression Research Questionnaire (WAR-Q) was used for data collection. The questionnaire was divided into 2 parts. 1st part consists of basic information and 2nd part deals with conflict-of-interest questionnaire. All the data was entered and analyzed by SPSS version 22.0. Frequencies and percentages were calculated for qualitative variables.

RESULTS

Out of 187 participants, 94.1% nurses were included in category of 25-35 age, 3.7% were included in 36-45 and 2.1% included in 46-55. Out of 187, 27.3% nurses are male and 72.7% nurses are female. The majority of the participants were 136 females. Out of 187, 79.7% nurses are single and 20.3% nurses are married. Out of 187, 83.4% nurses are Muslim and 16.6% are Christian. 70.6% nurses have 1 to 3 years' experience, 15.5% nurses have 3 to 5 years' experience and 13.9% nurses have >5 years' experience. 75.9% nurses are from urban community and 24.1% nurses are from rural community. 44.4% are BSN nurses, 43.9% are General Nursing and 11.2% are midwifery. There rate of BSN nurses who completed the study was high (Table 1).

Table 1: Demographic Tool Profile Characteristics of Nurses at a Tertiary Care Hospital Lahore (N=187)

| Demographic Variables | Frequency (%) |
|--------------------------|---------------|
| Age | |
| 25-35 | 176 (94.1) |
| 36-45 | 7 (3.7) |
| 46-55 | 4 (2.1) |
| Gender | |
| Male | 51 (27.3) |
| Female | 136 (72.7) |
| Marital Status | |
| Single | 149 (79.7) |
| Married | 38 (20.3) |
| Educational Level | |
| BSN | 83 (44.4) |
| General Nursing | 82 (43.9) |
| Midwifery | 21 (11.2) |
| Religion | |
| Islam | 156 (83.4) |
| Christianity | 31 (16.6) |
| Experience | |
| 1-3 year | 70.6 (70.6) |
| 3-5 year | 15.5 (15.5) |
| >5 year | 13.9 (13.9) |

| Residence | |
|-----------------|-------------|
| Urban community | 75.9 (75.9) |
| Rural Community | 24.1 (24.1) |

The nurses' experiences of being treated with love and kindness in the workplace indicated that 33.7% of nurses reported always receiving such treatment, 31.6% often, 23% sometimes, 5.3% rarely, and 6.4% never. Moving on to hostile glares, findings revealed that 13.4% of nurses always experienced it, 29.9% often, 31% sometimes, 19.3% rarely, and 6.4% never. Moreover, explored negative comments about religious beliefs, the data showed that 11.8% of nurses always faced such comments, 11.8% often, 19.3% sometimes, 14.4% rarely, and notably, 42.8% never experienced negative comments about their religious beliefs. The question regarding examined instances of others refusing assistance, 26.2% of nurses reported sometimes experiencing refusal. Additional findings included 5.3% always, 20.9% often, 24.6% rarely, and 23% never facing refusal for their requests for assistance. Finally, research the experiences of excessively harsh criticism about work the results indicated that 10.7% of nurses always faced such criticism, 18.2% often, 18.7% rarely, and 24.1% never. However, 28.3% showed sometimes nurses had been faced with excessively harsh criticisms about my work (Table 2).

Table 2: Perceived Effects of Interpersonal Conflicts among Nurses

| Questions | Always | Often | Sometimes | Rare | Never |
|---|--------|-------|-----------|------|-------|
| Had I ever been treated with love and kindness at workplace? | 33.7 | 31.6 | 23 | 5.3 | 6.4 |
| Had I ever faced helping and trusting relationship at workplace? | 27.8 | 28.3 | 23.1 | 13.4 | 5.3 |
| Had someone ever given values to my personal beliefs and faith? | 26.2 | 29.9 | 20.3 | 15.5 | 0 |
| Had I ever been glared at in a Hostile manner? | 13.4 | 29.9 | 31 | 19.3 | 5.4 |
| Had I ever been excluded from work-related social gathering? | 21 | 34 | 43 | 30 | 59 |
| Had I ever been subjected to negative comments about my religious beliefs? | 11.8 | 11.8 | 19.3 | 14.4 | 42.8 |
| Had I ever been treated in a rude or disrespectful manner? | 14.4 | 20.9 | 21.4 | 16 | 27.3 |
| Had others refused my requests for assistance? | 5.9 | 20.3 | 26.2 | 24.6 | 23 |
| Had I ever been subjected to negative comments about my intelligence or competence? | 11.2 | 15.5 | 19.8 | 18.7 | 34.8 |
| Had I ever been blamed for other people mistakes? | 11.8 | 19.3 | 18.7 | 21.4 | 28.9 |
| Had I ever been given unreasonable workload more than others? | 13.9 | 21.4 | 30.5 | 16 | 18.7 |

| | | | | | |
|--|------|------|------|------|------|
| Had my attempt ever been made to turn other employees against me? | 11.8 | 13.4 | 28.9 | 15.5 | 30.5 |
| Had someone else taken credit of my work? | 11.2 | 21.9 | 29.9 | 17.1 | 19.8 |
| Had I ever been faced with excessively harsh criticisms about my work? | 10.7 | 18.2 | 28.3 | 18.7 | 24.1 |
| Had my contributions ignored by others? | 11.2 | 23 | 24.1 | 15 | 26.7 |
| Had I ever been given little or no feedback about my performance? | 12.8 | 25.1 | 26.2 | 17.6 | 17.6 |
| Had others fail to deny false rumors against me? | 12.3 | 23 | 31.6 | 12.5 | 20.9 |
| Had I ever felt tense and stress on my job? | 15 | 27.8 | 28.3 | 11.8 | 17.1 |
| Had I ever been subjected to threats to reveal private or embarrassing information about me to others? | 11.8 | 18.7 | 16.6 | 8.6 | 44.4 |

DISCUSSION

The results of current study reported that out of 187, 27.3% nurses are male and 72.7% nurses are female. The majority of the participants were 136 females. Out of 187, 79.7% nurses are single and 20.3% nurses are married. Out of 187, 83.4% nurses are Muslim and 16.6% are Christian. Sauer et al., reported the frequency of nurses experiencing workspace bullying in a hospital in the North Carolina. According to his findings, 40% of the nurses had experienced bullying in the past six months. Out of these nurses, 95% were female [14]. The current study explored those perceived effects of Interpersonal conflicts among nurses working at tertiary care hospital. These findings were in line with another study which reported that the Interpersonal conflict at workplace such as criticizing, negative comments, unreasonable workload, and stress on job, disrespectful manner, blaming on others and giving little value creates conflict among nurses. As evident by the literature that interpersonal conflicts exist [15]. The results of current study revealed that the experiences of excessively harsh criticism about work the results indicated that 10.7% of nurses always faced such criticism, 18.2% often, 18.7% rarely, and 24.1% never. However, 28.3% showed sometimes nurses had been faced with excessively harsh criticisms about my work. These research outcomes corroborate the conclusions drawn in a study by Sellers et al., on New York State Nurses, indicating that nurses tend to overlook behaviors associated with horizontal violence when they either witness or undergo such incidents. A significant number of interviewed nurses failed to label their encounters with aggression as instances of horizontal violence, bullying, or by any other terminology found in existing literature, workplace violence policies, or codes of conduct [16]. In another

study, it was reported that the 31% of participants reported experiencing bullying, and such instances of bullying emerged as a substantial factor in predicting the likelihood of individuals intending to depart from the organization [17]. Findings by Singh and Loncar determined that dissatisfaction with nursing colleagues was the fourth most prevalent cause of workplace challenges [18]. Nurses cited issues such as a lack of mutual respect, internal conflicts among peers, accusations of subpar professional standards within the colleague group, and unsupportive attitudes from both senior staff and administrators [19]. Recent literature suggests that competition for resources is a foundational factor for bullying behaviors. Considering nurses' patient responsibilities in resource-constrained environments, further investigation into resource competition as a factor in horizontal violence is warranted [20].

CONCLUSIONS

The study explored those perceived effects of interpersonal conflicts among nurses working at tertiary care hospital. The study revealed that Interpersonal conflict at workplace such as criticizing, negative comments, unreasonable workload, and stress on job, disrespectful manner, blaming on others and giving little value creates conflict among nurses. However, the results of this study could help to aware nurses about workplace conflicts and strategies that promote to reduce conflicts at workplace. It leads to better job-performance and workplace relations.

Authors Contribution

Conceptualization: AN, MZ, QF, SP, ME, PS, KA, ZF

Methodology: AN, MZ

Formal analysis: AN, MZ

Writing-review and editing: QF, SP, ME, PS, KA, ZF

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

The author declares no conflict of interest.

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