

## LEADERSHIP STYLES AND CONFLICT MANAGEMENT STRATEGIES OF HEAD NURSES AT MANSOURA UNIVERSITY HOSPITAL

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### Abstract:

**Introduction:** Nowadays, hospitals are operating in a turbulent environment where organizations and institutions are searching for measures that will allow them to improve their performance and competitiveness. The achievement and stability of an organization depends on the ability of conflict recognition and the competency of leaders in managing conflict at workplaces. **Aim:** Investigate relationship between leadership styles and conflict management strategies of head nurses at Mansoura University Hospital. **Design:** descriptive design. Setting: Mansoura University hospital. **Subjects and methods:** The total study sample composed of 90 head nurses. Data was collected by using Multi factor Leadership Questionnaire (MLQ) and Rahim Organizational Conflict Inventory -II (Rahim, 2010, 1983). Results: revealed that there was statistically significant correlation between integrating, obliging and compromising conflict strategies practice with three leadership styles ( $P < 0.05$ ). There was diversity of using three leadership styles among head nurses sample based on different situations. The highest degree of opinion score related to practice of transformational leadership followed by laissez faire. The integrating strategy has the highly degree of practice followed by obliging. Recommendation: Encourage open discussion and effective communication policy, implementing educational program on conflict management strategies and leadership styles. Periodically check up for staff needs and problems and conduct an organizational conflict assessment. Good understanding of the strengths and weaknesses of the nursing team members in order to improve relations and manage conflict successfully. Promote critical thinking and the scientific method to solve problems by providing opportunities for staff nurses to express their opinion and participation in the development of new ideas and non-traditional solutions to improve performance.

**Key Words:** leadership Styles, Conflict Management Strategies, Head Nurses.

### Introduction:

The dynamic and uncertain nature of health care environment requires nursing managers to be competent leaders in order to respond to clients' needs. The role and influence of leadership are becoming increasingly important in today's complex and continually changing health care organizations<sup>(1)</sup>. Leader must be able to employ various leadership skills, such as effective direction, meeting current health care challenges and managing conflict to maintain a smoothly functioning

workplace and provide optimal care to patients<sup>(2)</sup>.

Leadership style defined as the broad, characteristic way in which a leader interacts with others in various situations. There are different leadership styles as transformational, transactional and Laissez-faire leadership style<sup>(3)</sup>.

Transformational leadership includes five components which are charisma, idealized influence inspirational, intellectual stimulation individual consideration<sup>(4)</sup>.

Transactional leadership is defined by different elements. Contingent reward, management-by-exception (active, passive) finally, the absence or avoidance of any leadership behaviors is termed laissez-faire leadership<sup>(5)</sup>.

Leadership style and choice of conflict management strategies strongly influence outcomes of a conflict. The ability to creatively manage conflict in the organization is becoming a standard requirement for effective leader<sup>(4)</sup>. Conflict is the disagreement between at least two persons or groups on specific issues, or it is a processing which one party perceives that its interests are being opposed or negatively affected by another party<sup>(6)</sup>. It classified to intrapersonal, interpersonal, intra-group, and intergroup<sup>(7)</sup>.

Conflict management strategy is a multidimensional concept that consists of five styles of conflict management including integrating, obliging, dominating, avoidant, and compromising<sup>(8)</sup>.

When leaders handle conflict effectively, problem solving increases, interpersonal relationships become stronger, and stress surrounding the conflict decreases<sup>(9)</sup>.

#### **Aim of study:**

The aim of the current study is to assess the relationship between leadership styles and conflict management strategies of head nurses at Mansoura University Hospital.

#### **Subjects and methods:**

-Study Design: - A descriptive design was used to carry out this study.

-Setting:-

The study will be carried out in Main Mansoura University Hospital, which has a bed capacity 1800 beds.

- Subjects:-

The study sample included all head nurses available at the time of data collection in the previously mentioned

settings. Their total numbers was 90 head nurses.

-Tools of data collection:-

The first tool: Multi factor Leadership Questionnaire (MLQ) developed by Bass & Avolio 1995, which includes three parts. Part one includes personal characteristics. Part two describes three leadership styles namely transformational, transactional and laissez faire leadership styles. Part three includes leadership outcomes namely extra effort, satisfaction and effectiveness.

The Second tool: Rahim Organizational Conflict Inventory -II (Rahim, 2010, 1983). Includes two parts, Part one: that describes nature and reason of the conflicts. Part two: that describes Conflict management strategies.

Scoring system: MLQ measured on a five point Likert scale ranged from 1= not at all to 5= always.

Rahim Organizational Conflict Inventory -II measured on 5-point Likert scale ranged from 1 strongly disagree to 5 strongly agree.

#### **Statistical Analysis**

Data entry and statistical analysis were done using Statistical Package for Social Science (SPSS), version 16.0. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables, and means and standard deviations for quantitative variables. Chi- Square ( $\chi^2$ ) test was used to test association between variables. F value of ANOVA test was calculated. Correlation coefficient(r) test was used to test the closeness of association between two variables. Statistical significance was considered at p-value <0.05 while, p-value of <0.001 indicates a high significant result.

#### **Results:**

Table (1): Demographic characteristics of the head nurses at Mansoura University Hospital. This table shows that more than half of head nurses 57.8% were below the age 31years old, while small percentage

6.7% were in age group > 40 years old. Regarding educational qualification, most of them 83.3% having a bachelor's degree, while 4.4% of head nurses having master degree. Concerning marital status, high percentage of them 77.8% were married, while small percentage 2.2% are widow and divorced. The table also illustrate that approximately less than half of studied sample 44.4% having professional experience less than 6 years, and 31.1% having >10 years of experience.

Table (2): Mean scores of leadership styles as perceived by head nurses at Mansoura University Hospital . Contingent reward as a component of transactional style had the highest mean score (mean= 15.42±3.03) while, management by exception (active) had the lowest score (mean = 14.73±2.80). Regarding to transformational style, the idealized influence achieved the highest score (mean =30.51±5.11). Individualized consideration achieved the lowest score (mean =14.79±2.70) significantly lower than three components. As laissez faire leadership style had 15.73±3.05 mean score, while the total mean score was 136.15±19.73.

Table (3): Mean scores of conflict management strategies practice as perceived by head nurses at Mansoura University Hospital .

According to the table, integrating strategy has the highly degree of opinion scores (85.6%) of head nurses with mean score (28.83±3.68 ) followed by obliging and dominating (73.3%, 62.2%) respectively with mean score (23.83±2.88 &17.72±5.29) respectively ,while avoiding strategy has the lowest degree of opinion scores (21.1%) with mean score

(18.13±5.57) followed by dominating and compromising (14.4% and 6.7%) respectively .

Table (4): Relation between practice of transactional leadership style and conflict management strategies as perceived by head nurses at Mansoura university hospital. The table show that statistically significances relationship between integrating strategy practice and practice of transactional leadership style (p= 0.002\*).

Table (5): Relation between practice of transformational leadership style and conflict management strategies as perceived by head nurses at Mansoura university hospital. From the table, statistically significances relationship between integrating, obliging practice and practice of transformational leadership style (p= 0.002\*, 0.001\*) respectively.

Table (6): Relationship between practices of laissez faire leadership styles and conflict management strategies as perceived by head nurses at Mansoura university hospital.

The table shows that statistically significances relationship between integrating, obliging and avoiding practice and practice of laissez faire leadership style (p=0.001\*, 0.001\*& 0.005\*) respectively.

Table (7): Correlation between leadership styles and their practice of conflict management strategies as perceived by head nurses at Mansoura university hospital.

The result shows statistically significant correlation between integrating, obliging and compromising conflict strategies practice with three leadership styles

**Table (1):** Demographic characteristics of the head nurses at Mansoura University Hospital

Variables	The head nurses (n=90)	
	N	%
<b>Age (years):</b> 20- 31- >40 Range Mean±SD	52 32 6 20-46 27.87±6.19	57.8 35.6 6.7 20-46 27.87±6.19
<b>Educational qualification:</b> Nursing diploma Bachelor degree Bsc degree +diploma Master	6 75 5 4	6.7 83.3 5.6 4.4
<b>Marital status:</b> Single Married Divorced Widow	18 70 1 1	20.0 77.8 1.1 1.1
<b>Experience years:</b> 1- 6- >10 Range Mean±SD	40 22 28 1-16 7.20±3.88	44.4 24.4 31.1 1-16 7.20±3.88

**Table (2):** Mean scores of leadership styles as perceived by head nurses at Mansoura University Hospital .

Leadership styles	Upper & lower limit	Head nurses (n=90)	
		Range	Mean±SD
<b>Transactional leadership style:</b> a-Contingent reward b-Management by exception(active) c-Management by exception (passive)	(4-20) (4-20) (4-20)	5-20 8-20 4-20	15.42±3.03 14.73±2.80 15.08±3.04
<b>Total</b>	(12-60)	17-60	45.23±7.52
<b>Transformational leadership style:</b> a-Idealized influence b-Inspirational motivation c-Intellectual stimulation d-individualized consideration	(8-40) (4-20) (4-20) (4-20)	12-40 8-20 6-20 6-20	30.51±5.11 14.88±2.55 15.01±2.81 14.79±2.70
<b>Total</b>	(20-100)	(32-100)	75.19±10.82
<b>laissez faire leadership style</b>	(4-20)	6-20	15.73±3.05

**Table (3):** Mean scores of conflict management strategies practice as perceived by head nurses at Mansoura University Hospital .

Practice of conflict management strategies	Opinions of head nurses (n=90)						Score Range Mean±SD
	Low		Moderate		High		
	n	%	N	%	n	%	
1-Integrating	0	0	13	14.4	77	85.6	17-35 28.83±3.68
2-Obliging	0	0	24	26.7	66	73.3	14-30 23.83±2.88
3-Compromising	6	6.7	58	64.4	26	28.9	4-15 11.55±2.17
4-Dominating	13	14.4	21	23.3	56	62.2	6-25 17.72±5.29
5-Avoiding	19	21.1	49	54.4	22	24.4	6-30 18.13±5.57

\*Significant (P<0.05)

**Table (4):** Relation between practice of transactional leadership style and conflict management strategies as perceived by head nurses at Mansoura university hospital (n=90).

Practice of conflict management strategies		Practice of transactional leadership style						$\chi^2$	P
		Low (n=1)		Moderate (n=43)		High (n=46)			
		n	%	N	%	n	%		
■Integrating	Moderate	1	100	10	23.3	2	4.3	12.419	0.002*
	High	0	0	33	76.7	44	95.7		
■Obliging	Moderate	0	0	16	37.2	8	17.4	4.831	0.089
	High	1	100	27	62.8	38	82.6		
■Compromising	Low	0	0	4	9.3	2	4.3	3.775	0.437
	Moderate	1	100	30	69.8	27	58.7		
	High	0	0	9	20.9	17	37.0		
■Dominating	Low	0	0	6	14.0	7	15.2	4.426	0.351
	Moderate	0	0	14	32.6	7	15.2		
	High	1	100	23	53.5	32	69.6		
■Avoiding	Low	0	0	8	18.6	11	23.9	1.486	0.829
	Moderate	1	100	25	58.1	23	50.0		
	High	0	0	10	23.3	12	26.1		

\*Significant (P<0.05)

**Table (5):** Relation between practice of transformational leadership style and conflict management strategies as perceived by head nurses at Mansoura university hospital (n=90).

Practice of conflict management strategies		Practice of transformational leadership styles				$\chi^2$	P
		Moderate (n=34)		High (n=56)			
		N	%	n	%		
■Integrating	Moderate	10	29.4	3	5.4	9.905	0.002*
	High	24	70.6	53	94.6		
■Obliging	Moderate	16	47.1	8	14.3	11.620	0.001*
	High	18	52.9	48	85.7		
■Compromising	Low	3	8.8	3	5.4	5.412	0.067
	Moderate	26	76.5	32	57.1		
	High	5	14.7	21	37.5		
■Dominating	Low	4	11.8	9	16.1	2.530	0.282
	Moderate	11	32.4	10	17.9		
	High	19	55.9	37	66.1		
■Avoiding	Low	7	20.6	12	21.4	5.350	0.069
	Moderate	23	67.6	26	46.4		
	High	4	11.8	18	32.1		

**Table (6):** Relationship between practices of laissez faire leadership styles and conflict management strategies as perceived by head nurses at Mansoura university hospital (n=90).

Practices of conflict management strategies		Practices of laissez faire leadership styles of the head nurses						$\chi^2$	P
		Low (n=3)		Moderate (n=36)		High (n=51)			
		n	%	n	%	n	%		
■Integrating	Moderate	2	66.7	9	25.0	2	3.9	14.436	0.001*
	High	1	33.3	27	75.0	49	96.1		
■Obliging	Moderate	0	0	17	47.2	7	13.7	13.237	0.001*
	High	3	100	19	52.8	44	86.3		
■Compromising	Low	1	33.3	2	5.6	3	5.9	4.966	0.291
	Moderate	2	66.7	25	69.4	31	60.8		
	High	0	0	9	25.0	17	33.3		
■Dominating	Low	0	0	3	8.3	10	19.6	6.033	0.197
	Moderate	0	0	12	33.3	9	17.6		
	High	3	100	21	58.3	32	62.7		
■Avoiding	Low	0	0	5	13.9	14	27.5	15.007	0.005*
	Moderate	3	100	27	75.0	19	37.3		
	High	0	0	4	11.1	18	35.3		

\*Significant (P<0.05)

**Table (7):** Correlation between leadership styles and their practice of conflict management strategies as perceived by head nurses at Mansoura university hospital.

Practice of conflict management strategies	Opinion scores of the head nurses about leadership styles (n=90)					
	Transactional leadership Styles		Transformational leadership styles		laissez faire leadership styles	
	R	P	r	P	R	P
▪Integrating strategies	0.568	0.0001*	0.460	0.0001*	0.493	0.0001*
▪Obliging strategies	0.366	0.0001*	0.390	0.0001*	0.380	0.0001*
▪Compromising strategies	0.297	0.004*	0.299	0.004*	0.420	0.0001*
▪Dominating strategies	0.083	0.437	0.032	0.768	0.093	0.383
▪Avoiding strategies	0.196	0.064	0.141	0.184	0.160	0.131

**Discussion:**

Today's hospitals confronted with an increasingly competitive global health care climate, which they need to change the way they do health services in order to survive. These changes falls to their leaders to develop a variety of mechanisms and structures that contributes to improve performance, apply effective conflict management strategies and promote quality of care<sup>(13)</sup>.

Accordingly table (7) the result shows statistically significant correlation between integrating, obliging and compromising conflict strategies practice with the three leadership styles ( transformational, transactional, laissez-faire). This is because of the effective leadership styles enhance the ability of staff nurses to perform their tasks in a higher proficiency level without the feel of stress or pressure and cooperative conflict management strategies (integrating, obliging, and compromising) leads to positive outcomes and high performance. **Wade et al**, found that establishing effective leadership model in any institution that promote the integrity of professionals and reduce the

risk for turnover<sup>(14)</sup>. Furthermore, the leadership and conflict-handling styles serve as tools to understanding the ways staff nurses promote constructive conflict management<sup>(15)</sup>.

Analysis of data revealed that, transformational leadership style achieved the highest mean score followed by laissez faire and transactional leadership. In table (5) there is statistically significances relationship between integrating, obliging practice and practice of transformational leadership style. The result may be due to that transformational leaders are sensitive to staff nurses who are more accurate at understanding and recognizing individual subordinates' needs, propose innovative methods to complete tasks and they have the priority to achieve everyone's interest than personal interest. This result is consistent with the finding of **Humphreys & Zettel** reported that leaders who described themselves as more transformational used integrative conflict management styles because of their close relationship with followers should be more effective than other leaders ,these relationships should enhance followers□

well-being and work performance<sup>(16)</sup>Contradictory with, **Lehnen et al.** in Florida, found that male transformational leaders described themselves as using more of a compromising style of conflict management<sup>(17)</sup>.

The results represent that statistically significances relation between integrating, obliging and avoiding practice and practice of laissez faire leadership style in table<sup>(6)</sup>. This result may be due to that laissez faire leader forms a stronger interpersonal relationships that could inherently smoothen the process of integrating ideas openly and constructively or the followers have skills and knowledge that enable them work without direction. In this respect, **Ayoko & Perkeri**<sup>(18)</sup>who reported that laissez-faire leadership showed a significant, positive correlation with the avoiding style due to incapacities in dealing with interpersonal tension, resulting in increased negative affect and the persistence of unfulfilled needs.

Contradictory, **Kotlyar & Karakowsky**<sup>(19)</sup>found a significant negative relationship found between laissez-faire leadership and the integrating style, demonstrating that laissez-faire leadership is unlikely promote constructive collaborations between conflicting parties.

The findings of the present study showed that contingent reward as an item of transactional leadership had the highest mean score and most of them always perceived and practiced it which head nurses always identify nurse's needs, clarify tasks, rewards their nurses for their effort and explain to nurses how to deal with problems to meet organizational objectives. In the line with result, **Obiwuru et al.** they concluded that contingent reward improve the degree which leader determine rewards in exchange with followers' efforts to satisfy organizational goals<sup>(20)</sup>.

Most of head nurses in this study perceived and practiced idealized

influence as an item of transformational leadership that achieved the highest score .Head nurses have a sense of self confidence and highly trusted as they deal with top management levels as they act as a role model, having strong sense of purpose and consider the moral and ethics of decisions. In this respect **Dormeyer** concluded that idealized influence has positively related to performance and satisfaction<sup>(21)</sup>.

In table (3): the result shows that integrating strategy has the highly degree of opinion scores followed by obliging and dominating. While avoiding strategy has the lowest degree of opinion scores. This finding is agreed with **Fakhry** found the integrating strategy was perceived as the most appropriate and effective strategy because it focuses on both the other and the self and the avoiding style was least effective while the dominating style was somewhat effective but not necessarily appropriate<sup>(22)</sup>Contrast with, **Barki & Hartwick** who found that staff nurses working in teams with high levels of conflict were more likely to manage conflict through domination or avoidance rather than integrating<sup>(23)</sup>.

In table (4) the study revealed that statistically significances relation between integrating strategy and practice of transactional leadership style. Head nurses focus on having internal actors perform the tasks required for the organization to reach its desired goals, remove potential barrier within the system, and to motivate the staff nurses to achieve the predetermined goals. They tend to prefer strategy that will maintain relationships in the long run. The result consistent with **Hendel et al .**, found that transactional leadership was found to have significant influence on the integrating strategy by creating a Win–Win solution for all involved parties by openly and freely discussing the issues<sup>(4)</sup>.On the other hand **Alvolio & Bass** and **Spinelli** who made a study for assessing



transformational and transactional leadership. They found that combination of transactional and transformational leadership styles resulted in the most effective outcomes<sup>(24, 25)</sup>.

**Conclusion:**

The findings of the present study concluded that, there was a highly statistical significant relation between all leadership styles and cooperative conflict management strategies (integrating, obliging and compromising) of the studied sample head nurses. Also, cooperative conflict management strategies enhance extra effort, work effectiveness and satisfaction of head nurses. Transformational leadership was the dominant practiced style followed by laissez faire and transactional leadership. As well, the integrating strategy had the highly degree of practice followed by obliging. Most of conflict arise among all members in hospital was dysfunctional. Miscommunication is the main reason of conflict on hospital followed by misunderstanding.

**Recommendations:**

Based on the results of this study, it was recommended that, encourage open discussion and effective communication. Designing and implementing educational program on conflict management strategies and leadership styles to manage work related conflict. Use rewards and punishments to keep staff nurses on the path toward achieving hospital goals. Watch for deviations from rules and standards and taking corrective action to prevent mistakes to increase management by exception active. Good understanding of the strengths and weaknesses of the nursing team members in order to improve relations and manage conflict successfully. Promote critical thinking and the scientific method to solve problems by providing opportunities for staff nurses to express their opinion and participation in the development of new

ideas and non-traditional solutions to improve performance.

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