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Health care organizations face major changes, and these changes are likely to increase conflict in the organizations (*Cox, 2001*). Conflict is the most difficult challenge managers' face because if it is not resolved effectively, it can block the organization from moving forward (*Yoder-wise, 1995*).

Early in the twentieth century, conflict was considered to be an indication of poor organizational management and was avoided at all costs. In the mid-1900s when worker satisfaction and feedback become paramount, conflict was accepted passively and perceived as a normal and expected outcome in organization. The interactionist theorists of the 1970s recognized conflict as "absolute necessity" and actively encouraged organization to promote conflict as means of productivity, and growth. This view has since been tempered by the realization that conflict in itself is neither good nor bad and that it can produce growth or destruction depending upon how it is managed (*Wilson ,1994 ,Marquis & Huston, 1998*).

Nurses, in particular, are vulnerable to conflict situations in which they may be required to deal with verbal abuse, substandard practice, family demands, authority figures, assignments they would prefer to decline, role conflicts, and differences of opinion regarding the best treatment modality to be used for a patient, (*Ellis & Hartley 1995*).

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Too little conflict results in organizational stasis, while too much conflict reduces the effectiveness of the organization and eventually immobilizes its employees (*Marquis & Huston, 1996*).

Conflict is a disagreement among two or more individuals, groups, or organizations. The disagreement may be relatively superficial, or very strong and short-lived or exist for months or years, and it may be work related or personal. (*Douglass 1996*). It is a natural, inevitable condition in organizations, and it is often a pre-requisite to change in people and organizations (*Sullivan & Decker 1997*).

Conflict can be viewed from a behavioral standpoint, an incident and a process standpoint, from a *behavioral standpoint* it is defined as “a perceived condition that exists between parties in which one or more of the parties perceive” (*Sullivan & Decker 1997*). From an *incident standpoint*, “conflict occurs as a disagreement between two persons or parties in which one perceives the act of the other to be detrimental to his or her interests or actions”(*Marquis & Huston 1998*). From a *process standpoint* it can be defined as “ what occurs when real or perceived differences exist in the goals, values, ideas, attitudes, beliefs, feeling, or actions of two or more parties” (*Cavanagh, 1991; Walczak & Absolon 2001*).

Because of the discomfort that conflict produces, it has generally been viewed as a negative concept, and if allowed to continue, it will lead to deterioration in relationships, lowered self-esteem, and a decrease in production. However, conflict can be a growth-producing process if

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person learn how to manage it effectively (*Bernhard & Walsh 1995, Mackenzie & Buchan 1998*).

In Egypt few studies have done about conflict in nursing field as: Assessment of Role Conflict and Role Ambiguity among Baccalaureate Nurses in Selected University and Private Hospital in Cairo which revealed that, there is no significant relationship between position of the nurses and both conflict and ambiguity levels, also the staff nurses perceived sources of conflict more than head nurses. (*Abed, 1997*). The other study Strategies and Styles of Conflict Resolution Utilized by Nurse Leaders in Military, Public and Private Hospitals in Cairo indicated that confrontation, smoothing and compromise were the most favorable utilized strategies while forcing and withdrawal being the least favored (*Atteya, 1997*).

Although several studies have done about job satisfaction in nursing field, such as Effect of Nurses' Job Satisfaction on The Quality of Patient Care in Medical Wards at Benha University Hospitals, which conducted by *Youssef (1997)* who found that the overall satisfaction level was only 47.13% . while *El-Sayed (2001)* in her study The Relation Between Motivation and Job Satisfaction among Nurses, demonstrated that the sample of studied nurses was almost equally divided between satisfied and dissatisfied with hospital administration and organization. One reason for nurses' stress could be the conflict generated by large areas of incompatibilities (*Hewison and Wildman, 1996*).

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Although numerous studies have focused on conflict management, few have considered causes and effect of conflict in nursing units. (***Cox, 2001***). So it is important to measure conflict among hospital nurses, and indicate its sources and effect, so the present study intended to measure conflict and investigate its sources and effect on staff nurses' job satisfaction.