

EFFECTS OF ACADEMIC QUALIFICATION ON INTRA-PROFESSIONAL CONFLICT AMONG NURSES IN SOUTH-EAST, NIGERIA

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Abstract

The observation of the researcher as a nurse in a hospital in South-East, Nigeria is to the effect that intra-professional conflict is rife among nurses. Strikingly, the incidence of intra-professional conflict among nurses could be a function of many factors among which are age and academic qualification. Thus, the purpose of this study was to investigate effects of academic qualification on intra-professional conflict among nurses in South-East, Nigeria. The research design employed in the study was a cross sectional survey, sample size of 997 nurses who were randomly selected participated in the study. The data were obtained using a 19-item questionnaire titled: Sources of Intra-Professional Conflicts among Nurses Questionnaire (SIPCNQ). SIPCNQ was validated by two other experts from nursing and health management. Reliability of SIPCNQ which was tested with Cronbach alpha test to determine its internal consistency obtained an alpha coefficient reliability of 0.68-0.86 and was considered reliable for the study revealed that intra-professional conflict negatively affected nurses with HND/other non nursing degrees the most, followed by nurses with BSCN/BNSc degree while nurses with PGD/other diploma certificates are least affected by intra-professional conflict. Based on the findings of the study, it was recommended that nurses with lower academic qualification should work towards upgrading their qualification. That way, they will be more armed with vital information that border on intra professional conflict management.

Keywords: intra professional, conflict, nursing qualifications, nurses and midwives.



INTRODUCTION

There is the likelihood of conflict in any form of social interaction. This is because of divergent views and perceptions. Put differently, every human endeavor and interaction can hardly be conflict-free given that people are of diverse views and background. Conflict is a matter of inevitability and diversity of views is one of its causative factors. Conflict can either be within a person (intrapersonal) or between persons (inter-personal).

Intrapersonal conflicts take place within the individual (Patton, 2014). Thus, intra-professional conflict is one that takes place within a profession. It is internal to a profession and could be problematic to manage. Workplace violence in hospitals comes in many forms, including verbal abuse. This form of abuse may leave no visible scars, but emotional damage can affect productivity, increase medication errors, absenteeism, and decrease morale and overall satisfaction within the nursing profession (Araujo & Sofield, 2011). Academic qualification could be at the core of intra-professional conflict among nurses. It could be that nurses who possess higher educational qualification take those who possess lower academic qualification for granted even when they may be more experienced than their more academically qualified colleagues. It could further be that nurses with lower academic qualification do not accord the requisite professional respect to their seniors in matters of academic qualification because they feel they are more experienced than their graduate colleagues. Conflicts may stem from contrasting educational backgrounds and the varying levels of autonomy and decision-making authority associated with different qualifications. The underpinning theory for the study is the human needs theory by Abraham Maslow. It offers insight into the sources of conflict and possible resolutions. Human needs are either basic or professional; both are important in human behaviors. Conflicts and violence are caused by unmet human needs (Burton, 1990). Maslow (1943) defined the hierarchy of human needs as both biological and physiological. Burton (1990) moved beyond basic needs to include security, recognition, stimulation, distributive justice, meaning, rationality, and control. According to Burton (1990), conflict may occur if real or perceived needs are unmet. McClelland (2014) also argued that needs influence motivation and effectiveness in work performance and job satisfaction.

Curiously, there appears to be inconsistencies in the findings of some researchers on academic qualifications and intraprofessional conflict among nurses. For instance, Asmaa, El-Sayed and Azza (2019) argued that the phenomenon of having younger age group with bachelor's degree in managerial positions, with more experienced less qualified older nurses as their subordinates is at the core of conflict among nurses. Similarly, Havaei, MacPhee and Dahinten (2014) found that registered nurses with bachelor's degree had fewer intra-professional conflict than those with Diploma certificates. The deduction here is that the expanded knowledge base and critical thinking skills acquired through a bachelor's degree programme may enhance communication and collaboration among nurses, reducing conflict. Looking at the afore-mentioned studies, it can be deduced that none of them was done in Nigeria. In a bid to fill the above gaps, the researcher considered the current study necessary.

Research Questions

- 1. What are the sources of conflict among nurses.
- 2. Does academic qualification constitute a source of intra professional conflict in nursing.

Hypothesis

1. There is no significant difference between sources of conflict among nurses based on their academic qualifications.

METHOD

Research Design: Ex-post factor research design was adopted for the study. Ex-post factor research design is a systematic empirical inquiry in which the independent variable cannot be manipulated by the researcher (Nworgu, 2015). This design is appropriate because the researcher cannot manipulate academic qualification and age of nurses which constitute the independent variable in the study.

Procedure: The population of the study comprised all nurses that have worked in any department of the hospital for two years or more. Two years was chosen because by the Nigeria civil service regulation every senior staff would have spent two years probationary period before the appointment is confirmed (2008 Public Service Rules). The total number of nurses for NAUTH, Anambra State was 511, while that of UNTH, Enugu was 665, given a total of 1176 nurses from the two hospitals, (Nursing Services Records, NAUTH & UNTH, 2014). The sample consisted of all the total registered but confirmed nurses in different cadre in the two hospitals with a total population of 1176 was used. A population of just 1,000 nurses will be considered small, since Nigeria has a very large population of about 250,000 nurses/midwives (N&MCN, 2022). Most nurses cover three shift duties of morning, afternoon and night, with some others on off duty, annual/maternity leave, study leave and even sick leave. The total number of 997 nurses met on duty each day for the one month of data collection constituted the sample. A purposive sampling method was used to select the two tertiary hospitals in the South East. These hospitals were purposively chosen due to accessibility and because the population also has all the characteristics of registered nurses (they all have the same training, skills, and knowledge). The instrument for data collection was a questionnaire titled: Sources of Intra-Professional Conflicts among Nurses Questionnaire (SIPCNQ). The SIPCNQ consisted of 19 items developed by the researcher. The questionnaire had two sections; A, and B. Section A was designed to generate data on respondents' demographic characteristics, while section B sought information on the respondents' sources of intra-professional conflict. SIPCNQ was validated by two experts in the field of management from Departments of Nursing and Health administration and Management for face and content validity. The reliability of the SIPCNQ was ascertained using Cronbach Alpha Statistics. Consequently, the instrument was administered once to 100 registered nurses who had worked for at least 2years at the Chukwuemeka Odimegwu Ojukwu University Teaching Hospital (COOUTH), Awka. The scores generated were subjected to Cronbach alpha test to determine the internal



consistency of the instrument. An alpha coefficient reliability of 0.68-0.86 was obtained showing that the instrument was reliable and was appropriate for the study.

Data Analysis: The research questions were answered using mean and standard deviation while Analysis of Covariance (ANCOVA) was used in testing the null hypotheses at 0.05 level of significance. The decision rule was that if the p-value<0.05, reject Ho and if the p-value is>0.05, do not reject Ho.

Results

Table 1: Difference in Sources of Conflict

		Means and STD					
S/N	Sources of Conflict	HND/	O <u>th</u> ers	B.ScN	/BNSc	PGD/	Others
		Χ	SD	Х	SD	Χ	SD
1.	Nursing goal to be achieved like quick.	2.41		3.28		3.29	
2.	Lack of clearity on the process or procedure of	3.00		2.88		2.54	
	performance task.						
3.	Personality clashes and lack of dialogue.	3.01		3.34		3.20	
4.	Personality animosity against the nurse.	3.21		3.47		3.24	
5.	Disparity in academic qualification between	3.45		3.24		3.38	
	graduates and non-graduates.						
6.	Inadequate remuneration.	3.46		3.26		3.24	
7.	Inadequate welfare package.	3.22		3.19		3.18	
8.	Difficulty in implementing the nursing process.	3.21		3.61		3.44	
9.	Disrespectfulness by young graduate nurses.	2.81		2.51		2.66	
10.	Bullying by Senior nurses especially when one	3.16		2.11		2.01	
	over spent her break period or receive visitor on						
	duty.						
11.	Poor acceptable managerial leadership style.	3.01		2.24		2.01	
12.	Burnout due to heavy job assignment or heavy	3.22		2.81		2.70	
	burns dressing.						
13.	Female dominance in the professional and petty	2.84		3.01		3.13	
	jealousy.						
14.	Promotion stagnation.	3.10		3.31		2.99	
15.	Unfriendly colleagues and uncondusive work	3.17		3.40		2.98	
	environment.						
16.	Transferred aggression from home to work	3.01		2.21		2.84	
	place.						
17.	Lack or limited materials and supplies to work	3.28		3.01		3.38	
	with.						
18.	Favoritism by managers.	3.38		2.55		2.45	
19.	Communication breakdown.	3.46		3.11		2.99	

Table 1 shows that the following are perceived as sources of conflict by nurses irrespective of their academic qualification: lack of clarity on the process or procedure of performing task, personality class and lack of dialogue, personally animosity against the nurse manager, disparity in academic qualification, inadequate remuneration, inadequate welfare package, difficulty in implementing the nursing process, disrespectfully by younger graduates nurses. Bullying by senior nurses especially when one overspent her break period or receive visitors on duty and poor acceptable managerial leadership style are not majorly seen by nurses with B.ScN/BNSc and PGD/others as sources of intra-professional conflict. Transferred aggression from home to work is seen by least number of nurses with B.ScN/BNSc as source of conflict while favoritism by managers is perceived by the least number of nurses with PGD/others as a source of intra-professional conflict.

Table 2: ANOVA on Significant Difference between Sources of Intra-Professional Conflict among Nurses Based	
on their Academic Qualification.	

	Sum of Squares	Df	Mean Square	F	Sig.
Between Groups	1.259	2	.629	6.484	.865
Within Groups	114.139	1174	.097		
Total	115.398	1176			

Table 2 reveals a significant difference between sources of conflict among nurses based on their ages; F(2, 1174) = 6.484; p > 0.05. This means that the null hypothesis is not rejected because the p-value is greater than the alpha value of 0.05. Therefore, there is no significant difference between sources of intra-professional conflict among nurses based on their academic qualifications.



Discussion

The findings of this study indicated that intra-professional conflict negatively affects nurses with HND/other degrees the most, followed by nurses with B.ScN/BNSc degree while nurses with PGD/other diploma certificates are least affected by intra-professional conflicts. The deduction is that the more educated a nurse is, the less prone they are to intra-professional conflict. Put differently, education is a veritable tool in conflict management. The trend in the finding of the current study could be traceable to the fact that nurses with higher academic qualification are more apt in conducting themselves professionally than their counterparts with lower academic qualification. The findings of the study are rather in tandem with the findings of Havaei, MacPhee and Dahinten (2014) that registered nurses with bachelor degree had fewer intra-professional conflict than those with National Diploma degree. More so, Asmaa, El-Sayed and Azza (2019) found that the phenomenon of having younger bachelor's degree nurses in managerial positions, with more experienced less qualified older nurses as their subordinates is at the core of conflict among nurses. The findings however revealed that no significant difference existed between sources of intra-professional conflict among nurses based on their academic qualifications. The implication is that intra-professional conflict is rife among nurses irrespective of their academic qualification.

Conclusion

In view of the findings of the study, it was concluded that academic qualification negatively affects intra-professional conflict among nurses. Again, it was concluded that the effect is stronger on nurses with lower academic qualification than nurses with higher academic qualification. It was further concluded that the effect of academic qualification on intraprofessional conflict among nurses is not significant. Conflict resolution in nursing is necessary to create a productive and safe workplace by keeping patients safe, boosting morale of colleagues and increasing efficiency: Strong conflict-resolution strategies can help redirect time and energy back to patients and their families. When teams collaborate better, health care organizations often see increased productivity.

Recommendations

The following recommendations are made based on the findings and the implications:

- 1. Nurses with lower academic qualification should work towards upgrading their qualification. That way, they will be more armed with vital information that border on intra-professional conflict management.
- 2. Nurses must collaborate and work together in a friendly atmosphere devoid of conflicts for the benefit of the patients by delivering quality care.
- 3. Nurses should realize that there must be diversity in life, nurses with diploma should be humble enough to collaborate with other nurses with higher degrees.

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