Managers' Conflict Management Styles and its Effect on Staff Nurses’ Turnover Intention at Shebin El Kom Hospitals, Menoufiya Governorate

Mervat Ebrahim Aly El Dahshan and Lamiaa Ismail Keshk

Department of Nursing Administration, Nursing College, Menoufiya University, Egypt
Department of Nursing Administration, Nursing College, Helwan University, Egypt

Abstract: Conflict, as an inherent phenomenon in humans’ life, arises as a daily challenge in healthcare organizations. Work-Life harmony is a critical business strategy to reduce employee turnover and to improve overall firm performance. More flexibility can address the problem of work life balance. “Because the objective of flexible work arrangements is to improve inter-role conflict and it also seems reasonable to assume that flexible arrangements will be attractive to workers, especially those faced with competing demands”. This study aimed to determine the main conflict management styles from both nurse managers and their staff nurses' points of view and investigating its effect on nurses' turnover intention. Descriptive correlation research design was used in this study. The study was conducted in two selected hospitals, Menoufiya University Hospital and Shebin El-Kom Teaching Hospital. Two groups of sample were included in this study. The first group included all nurse managers (30) working in Menoufiya University Hospital and Shebin El-Kom Teaching Hospital. The second group included random sample of staff nurses (150) working in the previous mentioned two hospitals. Two standardized questionnaires were used to measure the variables in this study from both nurse managers and nurses' point of view: Conflict Management Styles Questionnaire and The Anticipated Turnover Scale. The findings of this study revealed that the most used conflict management style was avoiding while the least used style was competing. The highest percentage (34.2%) of male nurses had the intention to leave their organization compared to female nurses (14%). The main conclusion from the current study pointed out that there were statistically significant positive correlation between turnover intention and the three conflict management styles (collaboration, compromise and avoiding) while, there was statistically significant negative correlation between turnover intention and competing style. Designing and implementing educational program on "different conflict management styles" and "how to manage work related conflict". Further research in this area is necessary with a larger sample ranging across different governmental and private hospitals in different governorates to enhance our understanding of the main causes of conflict and how to manage it.

Key words: Managers - Conflict Management Styles - Nurses - Turnover Intention

INTRODUCTION

Conflict, as an inherent phenomenon in humans’ life, arises as a daily challenge in healthcare organizations [1]. Conflict has got enormous attention of researchers in the last few decades because it becomes global threat to every organization. It costs billions of dollars and results in intention of the employee to leave the organization [2]. There is a variety of views about conflict. Some people view conflict as a negative situation that must be avoided at any cost. Others have an opinion that conflict is a phenomenon which necessitates management. From this point of view, a conflict is seen as an opportunity for personal growth and individuals try to use it to his or her best advantages [3].

Marquis and Huston [4] defined conflict as the internal or external discord that results from differences in ideas, values or feelings between two or more people. From another point of view: Conflict in word means an overt disagreement among at least two persons in a way that one feels lack of facilities, inconsistent among purposes as well as individuals’ interference prohibit
Conflict is an unpleasant fact in any organization as longer as people compete for jobs, resources, power, recognition and security [7, 8]. Conflict is one of factors contributes to waste of energy and employees’ capabilities. It occurs when needs and desires of two individuals or parties are contradicting, consciously or unconsciously. In other words, conflict happens when parties are not getting what they want. Since people normally possess different traits and characteristics, lack of conflict may indicate lack of any meaningful interaction [9]. However, conflicts are found in all organizations but it may be weak, strong, silent, outstanding or indistinctive. Researches also suggest that 20% of managers' time is spent for resolving organizational conflicts or its aftermath [6].

While conflict is generally perceived as dysfunctional, it can also be beneficial because it may cause an issue to be presented in different perspectives. Conflict has both positive and negative effects. It can be positive when it encourages creativity, new looks at old conditions, the clarification of points of view and the development of human capabilities to handle interpersonal differences. Conflict can be negative when it creates resistance to change, establishes confusion in organization or interpersonal relations, fosters distrust, builds a feeling of defeat, or widens the chasm of misunderstanding [10].

The source of conflict among employees can be differences in age, cultural background, ethics and values. For instance, a long-serving employee who feels loyal to the organization may have conflict with a young newcomer who sees the organization as a stepping stone in his future career [11].

Seraji et al. [12] identified that the most important thing to resolve organizational conflicts is awareness of the five conflict management strategies and their appropriate contexts and applications in order to select the appropriate strategy for each position; not only to prevent damage to the organization, but also leading them to the realization of organizational goals. All people can benefit, both personally and professionally, from learning conflict management skills. Typically we respond to conflict by using one of five modes: Collaborating, Accommodating, Compromising, Competing and Avoiding.

Each of these modes can be characterized by two scales: assertiveness and cooperation. None of these modes is wrong to use, but there are right and wrong times to use each. The following sections describe the five modes. The information may help each team member to characterize her/his model for conflict management.

**Competing** (Assertive and uncooperative) is a win-loose approach, while every party tries to force its own interest. This strategy is only effective in emergency situations where time for discussion is limited and a prompt decision is needed [14,15].

**Accommodating** (Unassertive and cooperative) is a lose-win strategy. It is the opposite of competing. The individual neglects his/her own concerns for the other persons’ satisfaction [16].

**Collaborating** (Assertive and cooperative) is a win-win strategy. It is the opposite of avoiding. Each party shows respect to the ideas and values of the opposite side, in order to find a solution that satisfies both parties. Although collaboration is a time-consuming process, it’s an integrated approach and a long-term resolution of conflict [4].

**Avoiding** (Unassertive and uncooperative) is a lose-lose approach. Both opposite sides prefer to withdraw and leave conflict unresolved. Avoidance can be useful, when more information and analysis of the problem is needed or in case one party is more powerful [1].

**Compromising** (Moderate in both assertiveness and cooperativeness) is a lose-lose orientation. Each side has to give up a significant part of its interests. It can be chosen as a temporary resolution for a complicated issue [1].

Turnover among nurses is a complex problem requiring a multi-faceted solution. Staff turnover has been always a key concern issues faced by organizations regardless of its locations, sizes, natures of business, business strategy (Profit or nonprofit oriented) [17, 18]. Chan et al. [19] added that staff turnover as a serious issue especially in the field of human resources management. Turnover intention is defined as an employee’s personal estimated probability that he or she has a deliberate intent to leaving the organization permanently in near future [20]. From another point of view Malik et al. [21] defined turnover intention as a human psychological willingness to leave the job and quit the organization. When nurses leave their organization, this can negatively affect organizational performance. Organizations have to recruit new nurses and tacit knowledge is lost. Furthermore, organizational turnover could contribute to the nursing shortage [22].
Staff turnover is costly to all level of organizations regardless of its nature and usually the productivity and quality of the products or services are always negatively affected [23, 24]. Ali [25] has quoted that high turnover would brings destruction to the organization in the form of both direct and indirect cost. Direct costs are referring to costs such as expenditures incurred on the selection, recruitment, induction and training of new employees. Indirect costs are referring to cost of learning, reduced morale, pressure on the existing employees and the loss of social capital [17, 26, 28].

Turnover are classified and categorized into voluntary or involuntary, as well as functional or dysfunctional, each will have varying degree of impact on the organization. Voluntary turnover is defined as a process in which an employee makes decision whether to stay on or leave the organization. This type of turnover is usually dysfunctional and can be most determinat to the organization [17]. Also, Chan et al. [19] warned that the most likely to leave the organization are those most talented and smartest employee within the group. Their valuable experiences, talent, skills and knowledge will leave with them and resulted in deteriorating efficiency. In contrast, Wells and Peachey [29] were identified that involuntary turnover is referred to the situation in which the organization undertaken the control over the employee’s decision to stay or leave the organization. The reason why it is classified as functional turnover is due to the often removal of under-performing employees.

Now companies are more conscious about work life balance and are offering more friendly work life policies. “High turnover rates disrupt continuity of care and also harm workers’ abilities to achieve critical case management functions.” “Most effective organizational responses to work family conflict and to turnover are those that combine work family policies with other human resources practices including work redesign and commitment enhancing incentives”. Work-Life harmony is a critical business strategy to reduce employee turnover and to improve overall firm performance. More flexibility can address the problem of work life balance. “Because the objective of flexible work arrangements is to improve inter-role conflict and it also seems reasonable to assume that flexible arrangements will be attractive to workers, especially those faced with competing demands [30].

**Significance of the Study:** Studies suggested that conflict had both negative and positive consequences. Today, conflict researchers even view conflict as a potentially useful occurrence in an organization, because, if handled appropriately, it can enhance creativity and innovation, improve the quality of decision making and provide for mutual understanding [31].

In spite of a burgeoning literature on the topic of employee conflict, very little researches had been done in its impact on employee turnover. When nurses leave their organization, this can negatively affect organizational performance. Organizations have to recruit new nurses and tacit knowledge is lost. Furthermore, organizational turnover could contribute to the nursing shortage. In Egypt few studies were conducted in the area of conflict and turnover. So, the current study was conducted to determine the relationship between conflict management styles and turnover intension among nurses working in Shebin El- Kom Hospitals, Menoufiya Governorate, Egypt.

**Aim of the Study:** The aim of this study was to determine the main conflict management styles used from both nurse managers and staff nurses’ points of view and investigating its effect on nurses' turnover intension at Shebin El - Kom Hospitals.
Subjects and Methods

Design: Descriptive correlation research design was used in this study.

Variables of the Study

Independent Variables:
- Managers' conflict management styles.

Dependent Variables:
- Nurses' turnover intention.

Setting: The study was conducted in two selected hospitals:
- Menoufiya University Hospital (Menoufiya University).
- Shebin El-Kom Teaching Hospital (Ministry of Health)

Subjects: Two groups of sample were included in this study. The first group included all nurse managers (30) working in Menoufiya University Hospital and Shebin El-Kom Teaching Hospital. The second group included random sample of staff nurses (150) working in the following areas (Critical Care Units (ICU), Pediatric Critical Care Units (PICU), Burn units, Hemodialysis units and Emergency units) working in the previous mentioned hospitals.

Pilot Study: A pilot study was conducted on ten staff nurses and five nurse managers were not included in the study sample. Validity and reliability of the study tools were tested using Cronbach’s coefficient alpha (0.84). The tools were clear, comprehensive and applicable.

Procedure

Protection of Human Subjects: A formal letter was issued from the Nursing College, Menoufiya University to obtain approval of the hospitals' administrators to carry out the study. Oral consent was taken from each nurse manager and staff nurse before data collection. Data collection procedures, analysis and reporting of the finding were undertaken in a manner designed to protect confidentiality of subjects. The data collection period was from June to August 2013.

Data Analysis Plan: Data were revised, coded, entered, analyzed and tabulated using SPSS version 16. Both descriptive statistics (Frequency, percentage, mean and standard deviation) and inferential statistics (Pearson correlation test, chi-square test, independent t test) were used according to type of variables.

Data Collection Tools: Three questionnaires were used to measure the variables in this study from both nurse managers and nurses' point of view:

Assessment Sheet: This sheet was designed by the researchers to collect the socio-demographic data (Such as; age, gender, qualification, total years of experiences, department, hospital and marital status).

Conflict Management Styles Questionnaire: This instrument was developed by Mohamed [32] and used by Hessain [33] and Abd Elghany [34] and directed at both unit managers and their staff nurses to identify unit managers' conflict management styles as self perceived and as perceived by their staff nurses. It composed of 38 items represented five basic conflict management styles that encompass all the effective ways of dealing with conflict. Collaborating style included eight items. Compromising style included seven items. Accommodating style consisted of seven items. Competing style included eight items. Avoiding style consisted of eight items. A total conflict management score was calculated using a 5-point Likert scale. The possible responses ranged from 1 (Never) to 5 (Always) on all items. 1 (Never), 2 (Rarely), 3 (Sometimes) 4 (Often), 5 (Always). The scores of the items for each domain were summed up and the total score was divided by the number of items giving the average score of each domain. Higher degrees of conflict management styles are indicated by higher scores.

The Anticipated Turnover Scale (ATS): This tool was developed by Hinshaw and Atwood [35] to study turnover intention among both nurse managers and staff nurses. It seeks to measure employees' perceptions or opinions of possibility voluntarily terminating their present job. The ATS is a 12 items self administered instrument with a 5-point Likert Scale ranging from strongly disagree to strongly agree, where 1 (Strongly disagree), 2 (Disagree) 3 (Neutral), 4 (Agree) and finally 5 (Strongly agree). The instrument's items were related to an employee's anticipated length of time to leave (Six items) and certainty of leaving the job (Six items). The total score was obtained by calculating the sum of all items in the scale divided by the number of items in the scale. Higher scores indicated intention to stay in the present position or job. While lower scores indicated
intension to leave the organization. The scores were then calculated for the mean scores which were then categorized as follows: mean scores < 3 = intension to leave, mean scores > 3 = intension to stay.

RESULTS

Table 1 Demonstrated that the mean age and experience of studied nurses were (29± 4.1 and 9.1± 4.3 years respectively). The majority (50%) of studied nurses were nursing school diploma and (78.9%) were female.

Table 2 Showed that means for conflict management styles including collaborating, avoiding for nurse managers was (33.2±3.5, 29.9±5.6 respectively). Also, means for conflict management styles including avoiding, collaborating for staff nurses were (30.7±4.9, 29.6±3.2 respectively). Also, this table shows that low means in both group for conflict management styles in related to avoiding were (18.1± 5.5, 19.8± 5.6 respectively). There was a statistically significant difference between nurse managers and staff nurses regarding collaborating, compromise and accommodating (p-value 0.000). While, there was no statistically significant difference between both group regarding competing and avoiding (p-value 0.13, 0.48 respectively).

Table 3 Illustrated that means and standard deviations for (Intension to leave and intension to stay) for nurse managers were (24.6± 2.6, 48.1±4.4 respectively). While the means and standard deviations for (Intension to leave and intension to stay) for staff nurses were (22.8± 4.3, 44.8± 8.1 respectively) with statistically significant differences between both group (p-value 0.02, 0.03 respectively).

Table 4 Demonstrated that the means for conflict management styles and turnover intension including collaborating, avoiding for female and male nurses were (30.3±3.6, 29.7± 3.2 and 30.8± 5.0, 29.8± 5.0 respectively). In the same context, the means for turnover intension for female and male nurses were (46.4± 6.7 and 41.5± 10.1 respectively). There was a statistically significant difference between male and female nurses regarding competing and turnover intention. While, no statistically significant difference was found between both male and female nurses regarding collaborating, compromise, accommodating and avoiding.

Table 5 Showed that no statistically significant differences between the two hospitals regarding all conflict management styles and turnover intension except compromise style of conflict management was statistically significant differences (p-value 0.000). Also, the table showed that nurses in University hospital had higher

<table>
<thead>
<tr>
<th>Characters</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years):</td>
<td>29±4.1 years</td>
</tr>
<tr>
<td>Gender:</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>142</td>
</tr>
<tr>
<td>Male</td>
<td>38</td>
</tr>
<tr>
<td>Marital status:</td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>139</td>
</tr>
<tr>
<td>Unmarried</td>
<td>41</td>
</tr>
<tr>
<td>Occupation:</td>
<td></td>
</tr>
<tr>
<td>Staff nurses</td>
<td>150</td>
</tr>
<tr>
<td>Head nurses</td>
<td>30</td>
</tr>
<tr>
<td>Education:</td>
<td></td>
</tr>
<tr>
<td>Bachelor</td>
<td>45</td>
</tr>
<tr>
<td>Technical Institute</td>
<td>45</td>
</tr>
<tr>
<td>Nursing School Diploma</td>
<td>90</td>
</tr>
<tr>
<td>Department/Unit:</td>
<td></td>
</tr>
<tr>
<td>Intensive care unit</td>
<td>42</td>
</tr>
<tr>
<td>Pediatric intensive care unit</td>
<td>26</td>
</tr>
<tr>
<td>Burn unit</td>
<td>24</td>
</tr>
<tr>
<td>Emergency unit</td>
<td>48</td>
</tr>
<tr>
<td>Hemodialysis unit</td>
<td>40</td>
</tr>
<tr>
<td>Experience:</td>
<td>9.1±4.3 years</td>
</tr>
<tr>
<td>Total</td>
<td>180</td>
</tr>
</tbody>
</table>

intention to stay compared to teaching hospital (46.2±7.5 and 44.5±7.9 respectively) with no statistically significant differences between the two hospitals.

Figure 1 Illustrated that nearly one fifth (18.4%) of studied nurses had the intent to leave their organization, while the majority of studied nurses (81.6%) had the intent to stay in their organization. The finding of the present study revealed that approximately one third (34.2%) of studied male nurses wanted to leave their organization, while only (14%) of studied female nurses had the desire to leave their organization.

Table 6 Demonstrated that statistically significant positive correlation between turnover intension and three conflict management styles including (Collaboration, compromise and avoiding) (p-value .037, .002 and .000 respectively). While there was statistically significant negative correlation between turnover intension and competing style (P-value.000). Also, the table illustrated that no statistically significant negative correlation between turnover intension and accommodating (p-value .599).
Fig. 1: Turnover Intension among Female and Male Nurses (N: 180).
NB: χ² = 8.1, P = 0.004 significant

Table 2: Means, Standard Deviations of Different Conflict Management Style among Nurse Managers and Staff Nurses

<table>
<thead>
<tr>
<th>Conflict Management Styles</th>
<th>Nurse managers (N=30)</th>
<th>Staff nurses (N=150)</th>
<th>t-test</th>
<th>P value of difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaborating</td>
<td>33.2±3.5</td>
<td>29.6±3.2</td>
<td>5.5</td>
<td>0.000 **</td>
</tr>
<tr>
<td>Compromise</td>
<td>25.9±2.8</td>
<td>22.9±2.8</td>
<td>5.1</td>
<td>0.000 **</td>
</tr>
<tr>
<td>Accommodating</td>
<td>26.6±3.8</td>
<td>20.7±5.8</td>
<td>5.3</td>
<td>0.000 **</td>
</tr>
<tr>
<td>Competing</td>
<td>18.1±5.5</td>
<td>19.8±5.6</td>
<td>-1.5</td>
<td>0.13 NS</td>
</tr>
<tr>
<td>Avoiding</td>
<td>29.9±5.6</td>
<td>30.7±4.9</td>
<td>-0.7</td>
<td>0.48 NS</td>
</tr>
</tbody>
</table>

** High significant

Table 3: Means, Standard Deviations of Turnover Intension among Nurse Managers and Staff Nurses.

<table>
<thead>
<tr>
<th>Turnover Intension</th>
<th>Nurse managers (N=30)</th>
<th>Staff nurses (N=150)</th>
<th>t-test</th>
<th>P value of difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intension to leave</td>
<td>24.6±2.6</td>
<td>22.8±4.3</td>
<td>2.2</td>
<td>0.02 *</td>
</tr>
<tr>
<td>Intension to stay</td>
<td>48.1±4.4</td>
<td>44.8±8.1</td>
<td>2.1</td>
<td>0.03 *</td>
</tr>
</tbody>
</table>

*Significant

Table 4: Means, Standard Deviations of Different Types of Conflict Management Styles and Turnover Intension Distributed by Gender. (N: 180).

<table>
<thead>
<tr>
<th>Gender</th>
<th>Conflict Management styles and Turnover Intension</th>
<th>Female (N=142)</th>
<th>Male (N=38)</th>
<th>Total (N=180)</th>
<th>t-test</th>
<th>P value of difference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Collaborating</td>
<td>30.3±3.6</td>
<td>29.7±3.2</td>
<td>30.2±3.5</td>
<td>0.9</td>
<td>0.3</td>
</tr>
<tr>
<td></td>
<td>Compromise</td>
<td>23.4±3.0</td>
<td>23.8±3.1</td>
<td>23.5±3.1</td>
<td>0.08</td>
<td>0.4</td>
</tr>
<tr>
<td></td>
<td>Accommodating</td>
<td>21.7±6.0</td>
<td>21.8±5.5</td>
<td>21.7±5.9</td>
<td>0.02</td>
<td>0.8</td>
</tr>
<tr>
<td></td>
<td>Competing</td>
<td>19.0±5.3</td>
<td>21.5±6.4</td>
<td>19.6±5.6</td>
<td>2.4</td>
<td>0.02 *</td>
</tr>
<tr>
<td></td>
<td>Avoiding</td>
<td>30.8±5.0</td>
<td>29.8±5.0</td>
<td>30.6±5.1</td>
<td>0.9</td>
<td>0.3</td>
</tr>
<tr>
<td></td>
<td>Turnover intension</td>
<td>46.4±6.7</td>
<td>41.5±10.1</td>
<td>45.4±7.7</td>
<td>3.6</td>
<td>0.00 *</td>
</tr>
</tbody>
</table>

*Significant
Table 5: Means, Standard Deviations of Different Types of Conflict Management Styles and Turnover Intension Distributed by Hospital (N: 180)

<table>
<thead>
<tr>
<th>Hospitals</th>
<th>University (N=92)</th>
<th>Teaching (N = 88)</th>
<th>t-test</th>
<th>P value of difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaborating</td>
<td>30.4±3.3</td>
<td>29.9±3.7</td>
<td>0.8</td>
<td>0.38</td>
</tr>
<tr>
<td>Compromise</td>
<td>24.6±2.9</td>
<td>22.3±2.7</td>
<td>5.5</td>
<td>0.000**</td>
</tr>
<tr>
<td>Accommodating</td>
<td>21.8±6.3</td>
<td>21.6±5.4</td>
<td>1.28</td>
<td>0.89</td>
</tr>
<tr>
<td>Competing</td>
<td>20.3±5.6</td>
<td>18.9±5.6</td>
<td>1.7</td>
<td>0.08</td>
</tr>
<tr>
<td>Avoiding</td>
<td>30.8±5.1</td>
<td>30.3±5.1</td>
<td>0.747</td>
<td>0.45</td>
</tr>
<tr>
<td>Turnover intension</td>
<td>46.2±7.5</td>
<td>44.5±7.9</td>
<td>1.4</td>
<td>0.14</td>
</tr>
</tbody>
</table>

** High significant

Table 6: Correlation Coefficient between Different Types of Conflict Management Styles Scores with Turnover Intension Score among Studied Nurses (N: 180)

<table>
<thead>
<tr>
<th>Items</th>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
<th>(5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turnover intension total score (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collaborating total score (2)</td>
<td>.156*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compromise total score (3)</td>
<td>.234**</td>
<td>.384**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accommodating total score (4)</td>
<td>-.039</td>
<td>.278**</td>
<td>.242**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Competing total score (5)</td>
<td>-.555**</td>
<td>-.432**</td>
<td>-.215**</td>
<td>.020</td>
<td></td>
</tr>
<tr>
<td>Avoiding total score (6)</td>
<td>-.305**</td>
<td>.143</td>
<td>.072</td>
<td>-.196**</td>
<td>-.408**</td>
</tr>
</tbody>
</table>

(2-tailed)

** DISCUSSION **

Healthcare organizations constitute complex work places, where healthcare professionals coming from different disciplines, educational status and under a stressful environment, have to work side by side aiming to provide quality health services. Collaboration among multidiscipline groups is difficult enough, with conflict arising as a daily challenge.

The current study revealed that half of the studied nurses had nursing school diploma and (78.9%) were female. This results were in the same line with Mosadeghrad [36] who found three fourth of the participants were females (72.6%) and the majority of studied sample had bachelors' degree (61.9%). Also, Al-Hussami et al. [37] found that more than half of studied sample (57.7%) were females and (42.3%) and the majority of the study sample (82%) was employed at the baccalaureate level and (18%) were employed at the masterly level. While, Almalki et al. [38] reported that approximately half of the sample (47.4%) had a diploma degree and (5.3%) had a bachelor degree or higher.

The results of this study reported that the most used strategy for managing conflict as perceived by staff nurses was avoiding followed by collaborating, compromising, accommodating and finally competing. There was a slight difference between nurse managers and staff nurses' opinions regarding conflict management styles. On the other hand, conflict management styles as perceived by nurse managers was collaborating followed by avoiding, accommodating, compromising and lastly competing. In the current study the researchers focused on the opinions of the staff nurses because they reported their opinions in their nurse managers and they were greater in numbers (150) compared to nurse managers (30).

This result was in the same line with Moisoglou et al. [1] who pointed out that a large proportion (62%) of respondents choose avoidance as a strategy to handle conflict. In the same context, this finding was consistent with Kanani and Farahani [6] who ranked conflict management styles as following avoidance followed by compromise followed by accommodation followed by collaboration and lastly competition [39-41].

The findings of this study was in contrast with Violetta [3] who revealed that the most popular strategy is collaborating (Problem-solving) (61.8%) and the most unpopular is withdrawing (Avoiding), only one person used this conflict management style.

Also, the present study showed that competing style was the least conflict handling style from both nurse managers and their staff nurses. This finding was supported by several studies [6, 33, 34, 42, 43] who stated that there were agreement between staff nurses and their managers in reporting competing style as the least frequent style utilized by nurse managers in conflict situations. This finding truly could reflect that the non-use of this style was that the nurse managers who prefer to adhere to more cooperative styles rather than more dominating "competing style".

138
In the same context, this finding was congruent with Bhushan [44] who pointed out that competition tends not to resolve conflict as it merely manages it for short term. In competition, only satisfy one party's needs, so not all of the objective issues can be resolved in a satisfactory manner and over time, this usually breaks down the trust between the parties and places a significant strain on the relationship which consequently increases dissatisfaction and potential for conflict.

The result of this study showed that (18.4%) of studied nurses had the intention to leave their organization, while the majority of studied nurses had the desire to stay in their organization. This finding was in the same line with Almalki et al. [38] who pointed out that (40.4%) of respondents indicated that they intended to leave their current employment while, (59.6%) of respondents had the intention to stay in their current employment. This result was contrast with Asegid et al. [45] who stated that (50%) of nurses responded their readiness to leave the organization. While Mosadeghgrad [36] revealed that thirty-five percent of nurses stated that they would leave the hospital if they find another job opportunity.

Nasiripour et al. [24] added that employees' turnover is costly and threatening for the organization. When the good employees give up their work, organization must substitutes someone else and endures the costs of education and replacement, disposal and missing of production, disaffiliation with the costumers. The high rate of employees’ turnover intention reduces the profiting and the interest of the company.

Also, the results of the study reflected that nurses in University hospital had higher intention to stay compared to teaching hospital. This result congruent with Zaghoul et al. [46] who indicated that the intention of 276 nurses to stay at a university hospital in Al-Khobar, Saudi Arabia. Also, Eldenburg et al. [47] clarified that beyond profits, hospital objectives are likely to vary by hospital type.

It was observed that the present study revealed that male nurses were more likely to indicate an intention to leave compared to female nurses. This result was supported by Almalki et al. [38] who reported that male respondents had a higher intention to leave their current employment (50.6%) compared with female nurses were (35.4%). Moreover, the result matched the nature of female who prefer to stay in one place rather than quitting from one place to another. On the other hand, this result was contrast with Karamzade et al. [48] who mentioned that the score of occupational stress and turnover intention in female nurses are higher than male nurses.

Almalki et al. [38] indicated that the literature is not consistent in terms of the relationship between gender and each satisfaction and turnover intention. A number of nursing studies support the notion that the female nurses are more satisfied in their work and are more likely to stay [49, 50]. Other studies found no relationship between gender and employees’ satisfaction and their intention to leave [38]. It can be argued that male nurses were less satisfied with their work life and were more intent on leaving their current employment.

Findings of this study revealed significant associations between turnover intention and demographic variables of gender, age, marital status, dependent children, education level. Using the Anticipated Turnover Scale (ATS), (40.4%) of the respondent nurses indicated that they intended to leave their current employment. This finding supports the notion that turnover and turnover intention are high among nurses in general [51, 52]. Saeed [53] conducted a study in Riyadh to determine the variables related to nurses’ intention to leave their hospital. Data was collected from three hospitals in Riyadh. Of the 488 respondents, 275 (56.4%) intended to leave their job.

Al-Ahmadi [54] collected data from 434 nurses working in nine psychiatric hospitals randomly selected from various geographic regions of Saudi Arabia. Results showed that 37% of nurses had the intention to leave the institution. Also, findings revealed that about (17%) of the sample agreed that they had intentions to leave. Additionally, more than half of the respondents were not sure exactly whether they intended to leave or not. Al-Ahmadi’s [54] study found that approximately (38%) of respondents reported an intention to leave their current hospital.

The finding of this study revealed that there were statistically significant positive correlation between turnover intention and three conflict management styles (Collaboration, compromise and avoiding). This means that the more the used of these styles as conflict management strategy the more nurses’ intention to stay in the organization. This result was supported with Chan et al. [9] who confirmed that the use of integrating conflict management style (CMS) by manager leads to positive subordinate outcomes and also concluded that managers’ effective conflict management style facilitates the social exchange process with their subordinate and thus induces subordinate’s positive work attitudes including increase job satisfaction and decrease turnover intention. This finding also in the same line with Javed et al. [55] who stated that role conflict and the job stress were having a positive and significant relationship.
with the turnover intention of employees. On the contrary, the work life balance was not having a positive relationship with the turnover intention of employees.

This result was supported with Alsam et al. [2] who reported that Work Family Conflict (WFC) was positively related with turnover intentions. Those managers who face work-family conflict confronted with turnover intention very soon so organization consider such polices that help to control turnover rate. Moreover, Noor & Maad, [30] who stated that work life conflict & stress have positive relationships with turnover intentions. On other hand, recent research has further supported that increased trust in supervisors is negatively related to employee turnover intention [9, 12, 56].

**Limitations of the Study:** The current study had some limitations. All data in this study was obtained through cross-sectional, self-report surveys, which could lead to common method variance between predictor variables and outcome variables. The sample size in the present study was small and taken only from two governmental hospitals. Therefore, it is suggested that these results be used cautiously.

**CONCLUSION**

Despite the limitations of this study, the findings from the current study contributed to our understanding of relationship between conflict management style and turnover intention among nurses. The main conclusion of this research was that the most used conflict management style was avoiding followed by collaborating and lastly competing style. The finding from this study revealed that there was statistically significant positive correlation between turnover intention and the three conflict management styles (collaboration, compromise and avoiding) while, there was statistically significant negative correlation between turnover intention and competing style.

**Recommendation:** In the light of the study findings, the following are recommended:

- Designing and implementing educational program on "different conflict management styles" and "how to manage work related conflict".
- Future research in this area is necessary with a larger sample ranging across different governmental and private hospitals in different governorates to enhance our understanding of the main causes of conflict and to investigate its correlation with turnover intention among nurses.

**REFERENCES**


