

Collaborating and Compromising strategies as persived by staff nurses at South Egypt Cancer Institute

Hanaa Mohamed Ahmed

lecturer in Nursing Administration Department, Faculty of Nursing - Assuit University, Egypt.

Corresponding by Hanaa Mohamed Ahmed

Abstract: This article aimed to assess of staff nurses' knowledge about collaborating and compromising stratiges of dispute resolution. It was included staff nurses working in general departments at South Egypt Cancer Institute (n=113). It was included three tools to assess the studied staff nurses' knowledge, such as: personal characteristics tool, collaborating strategy questionnaire, and compromising strategy questionnaire. It was resulted that, the highest percentage of studied staff nurses had low knowledge of all items of collaborating & compromising strategies. It was concluded that the majority of studied staff nurses had low knowledge as regard to collaborating & compromising stratiges. And recommended to designing and implementing educational program about collaborating and compromising stratiges of dispute resolution and providing courses about dispute management should be provided periodically, to help staff nurses acquainted with the new knowledge.

Key words: Dispute management, Staff nurses, collaborating and compromising stratiges.

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I. Introduction:

Compromising and collaborating are procedures for resolving opposing preferences between the parties (Skjorshammer,2011). Compromising involves discussion between the parties with the goal of reaching agreement (Daiski, 2014). While, collaborating is a variation on compromising in which one or more outsiders "third parties" assist the parties in discussion (Root, 2014). By understanding the dynamics of collaborating and compromising in areas such as leadership, power, and dispute management, healthcare professionals will improve the quality of their professional practice, relationships and their working environment (Berman, 2014). Collaborating strategy is a voluntary, non-binding, private dispute resolution process, through a neutral person helps the parties to reach the negotiated settlement (Schlairet, 2009).

It includes the following types: facilitative, evaluative and transformative collaborating (Tomey, 2009).

Compromising is a process of digging into an issue to identify underlying individual concerns and find alternatives that meet most or all sets of concerns (Collins, 2012). Compromising in its most creative form is similar to collaborating and in its most poorly managed form may resemble a competing approach. It frequently resembles compromise when it is used as a dispute resolution strategy (Novak, 2012 & Coleman, 2015).

Collaboratig and compromising are procedures for resolving opposing preferences between the parties (Yoder, 2010 & Fiumano, 2012). Compromising involves discussion between the parties with the goal of reaching agreement. There is no limit to the number of parties ("disputants") who can take part in compromising, but two-party Compromisings are the kind most often studied (Nastakis, 2013). Collaborating is a variation on compromising in which one or more outsiders ("third parties") assist the parties in their discussion (Sullivan, & Decker,2009).

Significance of the study:

Healthcare organizations must find ways for managing dispute and developing effective working relationships to create healthy work environments (Collins, 2012). So, should be used of more effective compromising and collaborating strategies which have been identified as an essential component of the nurse manager role (Anthony, et al, 2014). It was noticed that there were no studies done in Upper Egypt about collaborating and compromising as strategies of dispute resolution for staff nurse. So, the researcher desirous to study the phenomenon among staff nurses through assesses their knowledge about collaborating and compromising stratiges of dispute resolution at South Egypt Cancer Institute .

Aim of the study:

This study aimed to: assess knowledge of staff nurses about collaborating and compromising stratiges of dispute resolutions at South Egypt Cancer Institute .

Subject& methods:

A-Study design: Descriptive research design was used.

B-Setting: The present study conducted at South Egypt Cancer Institute .

C-Study subject: It was included all staff nurses working in general department at South Egypt Cancer Institute (n=113).

D-Study tools: included three tools, as the following:

- 1- **Personal characteristics questionnaire:** It was developed by the researcher to collect data about a staff nurses as age, gender, marital status, and years of experience.
- 2- **Collaborating strategy of dispute resolution questionnaire:** It was developed by the researcher to assess staff nurses' knowledge about collaborating strategy of dispute resolution and consisted of 37 items. staff nurses responses based on 3 points Likert scale ranging (3) marks for **always** answer, (2) marks for **sometimes** answer and (1) mark for **never** answer.
- 3- **Compromising strategy of dispute resolution questionnaire:** It was developed by the researcher to assess staff nurses' knowledge about compromising strategy of dispute resolution and consisted of 31 items. Staff nurses responses based on 3 points Likert scale ranging (3) marks for **always** answer, (2) marks for **sometimes** answer and (1) mark for **never** answer.

II. Methods:

I- Operational design:

1-Preparatory phase:

After reviewing the available literatures concerning the topic of the study, the researcher developed and translated of assessment tools from English to Arabic was done. It took about Four months from September to December 2018 and the validity of the assessment tool reviewed by the experts of the nursing administration (Jury from three expertise in the specialty) to check the relevance, coverage, and clarity of the questions. Accordingly, modifications were done and the final form was developed. This phase took about three months from February to March; 2019.this design explains the steps of actual implementation of the study.

2-Pilot study:

A pilot study was carried out to assess tools, clarity and applicability. Moreover, to identify problems that may be encountered during the actual data collection. It applied on eleven staff nurses (10%) from the main hospital included in the study sample of the selected from South Egypt Cancer Institute s. Reliability analysis with the results and the researcher done the modification of items after justifying the comment of Jury and before the pilot study to provide the reliability of the study tool. It was equal ($\alpha = 0.88\%$). It took about two months from April to May, 2019.

II-Administrative design:-

Official permission obtained to collect data from the directors of the South Egypt Cancer Institute , official permission obtained to collect necessary data from the general director of Nursing, director of the Nursing Administration department at South Egypt Cancer Institute . Ethical consideration obtained with oral consent taken from the studied staff nurses before getting the data in the present study.

III- Statistical design:-

Collected data were verified prior to computerized data entry and analysis by using statistical software packages for social sciences (SPSS) v.g 20.program. Data were presented using descriptive statistics in the form of percentages also mean and standard deviations were calculated.

III. Results:

Table (1) Personal characteristics of the studied Staff nurses at South Egypt Cancer Institute .

Items	No.	%
1-Age: (years)		
< 35↓	16	14.2
35 - < 40↓	77	68.1
40 - < 45↓	10	8.8
45 - < 48↑	10	8.8
Range: 22- 48↑ years.	Mean ± SD	
	31.9 ± 6.9	
2-Gender:		
Male.	9	8.0
Female.	104	92.0

4-Marital status:		
Single.	37	32.7
Married.	73	64.6
Divorced.	2	1.8
Widow.	1	0.9
5-Years of experience:		
<5↓ years	40	35.4
5-<10↓years	29	25.7
10-≥ 15↑ years.	44	38.9

Table(2): Distribution of staff nurses' knowledge regarding the collaborating and compromising strategies of dispute resolution.

Dispute strategies	Never		Sometimes		Always	
	No.	%	No.	%	No.	%
1. Collaborating strategy.	50	44.2	33	29.2	30	26.5
2. Compromising strategy.	48	42.5	36	31.9	29	25.7

Table (3): Mean scores of staff nurses' knowledge regarding he collaborating and compromising strategies of dispute resolution..

Variables	Total score	Mean ± SD	Low		Moderate		High	
			No.	%	No.	%	No.	%
1. Collaborating strategy.	111	65.1+22.5	50	44.2	33	29.2	30	26.5
2. Compromising strategy.	93	54.7+19	48	42.5	36	31.9	29	25.7

Table (1): showed that, personal characteristics of the studied staff nurses showed in The highest percentage of them were female, have a bachelor degree of nursing science, their age from 35 to less than 40 years old, married, and having experience from 10 to more than 15 years (**92.0%, 81.4%, 68.1%, 64.6% and 39.0%**) respectively.

Table (2): depicted that, Staff nurses' knowledge regarding the collaborating and compromising stratiges of dispute resolution. The majority of the studied staff nurses had low knowledge as regards to the collaborating and compromising strategies of dispute resolution (**44.2%&42.5%**) respectively.

Table (3): Illustrated that, Mean scores of staff nurses' knowlege regarding dispute management content. The majority of the studied staff nurses had low knowledge as regards to the dispute management content, dispute resolution strategies and collaborating & compromising strategies of dispute resolution.

IV. Discussion:

Ahmed, (2008) & Kelly, (2010) reported that, the problem solving strategy provide manage change and plays a vital role in one's success through collaborative efforts and had a strong impact on the organization's bottom line and overall success. Moreover **El Dahshan & Keshk, (2014)** found that the most of the studied subjects used to avoid strategy, but the least used strategy was competing, however for improvement of the organizational problem by resolve the dispute. And, **Ibrahim, (2015)** who revealed that the majority of the study subject reported the common strategy clear at El Mansoura University Hospital was compromise strategy also disagree with the present study.

The current study finding revealed that, the majority of the studied staff nurses had low knowledge regarding the collaborating and compromising strategy of dispute resolutions; because some health care professionals in this hospital had a lack of information and in attendance of in service educational workshops or program's about dispute resolution stratiges. This finding in contrast with **Pavlakisl, et al (2011)** suggested that, a wide range of methods and procedures for addressing dispute exist, including compromising, collaborating, and creative peace building. In the contrasted to **Raines, (2015)** who showed that, all health practitioners had a high knowledge about dispute resolution stratiges because dedicated to supporting and improving the field of stratiges resolution by providing continuous workshops.

V. Conclusion:

In the light of the study results, the majority of the studied staff nurses had poor knowledge as regard to collaborating & compromising stratiges of dispute resolution.

VI. Recommendations:

1. Designing and implementing of an educational program about collaborating and compromising stratiges of dispute resolution.
2. Provide courses about dispute management periodically, to help staff nurses and their managers acquainted with the new knowledge.
3. Encouraging the nurses to improve and update their knowledge by reading. This can be achieved by establishing of small nursing library with hospital departments.
4. Periodically research studies are needed to assess the dynamics of the hospitals and the work environment to identify the contributing factors of nurses behavior

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