

**Industrial Conflict in the Health Sector: Its Challenges, Prospects and
Solutions.**

(A Study of Federal Neuropsychiatric Hospital, Yaba)

BY

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400 LEVEL

Dedication

This Research is dedicated to Almighty God and my parent.

Certification

This is to certify that this research project was carried out by MISS BALOGUN, AYOMIDE MOYOSORE at the Department of Public Administration and Mountain Top University Ogun State, Nigeria under my supervision.

Name of the Supervisor

Signature & Date

Name of Head Of Department

Signature & Date

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ABSTRACT

The study examined the industrial conflict in the health sector; its challenges, prospects and solution using federal neuropsychiatric hospital, yaba. Theory of Industrial conflict in the health sector by chamberlain provided by the framework, research design was purely explored and the sample size 800 was selected. Questionnaire was the instrument used for data collection.

While 41.9% were males, 58.1% were females. More so 18.1% of the respondents had 1-10years working experience in the hospital, 47.6% of the respondents were between 11-20years working experience while 25.8% were between 21-30years working experience and 8.5% were above 30years working experience. In respect of poor wages and salaries are the only root cause of conflict in public health sectors, 4.1% of the respondents strongly disagreed, 3.4% disagreed, 17.3% were undecided, 67.3% agreed and 7.8% strongly agreed. As to whether absence of regular promotion of staff has led to conflict in public health sectors, 17.7% of the respondents strongly disagreed, 2.7% disagreed, 65.4% were undecided, 14.2% agreed and 2.7 strongly agreed. The findings of the three hypotheses showed that there is no significant relationship between factors that are responsible for industrial conflict and smooth operation of government hospitals. However, the relationship between the two variables is strong but not significant. The study has brought to the fore how most of the public work organisations take the issue of workers' welfare with levity.

Key Words

Industrial Conflict, Health sector, workers welfare, Public work organisations

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CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

Conflict is a natural and complex phenomenon among two or more people and it crosses across the globe. As far as there is interaction between human beings, definitely conflict is inevitable. In other words, man is a social animal and cannot live in isolation; he must live in society because he would need the cooperation of fellow man. In the process of building inter-personal relationship with fellow man, disagreement may occur as a result of tussle for survival and power which will leads to conflict. Thus, conflict can occur in either formal and informal settings as regards to the modus of operandi, it can escalate within the family, community, social gathering, organization and even country as a result of differences in individuals' perception, character, cultural and also belief system. This means conflict is an integral part of relationship among human beings. Conflict in formal setting can be as a result of underlining and ineffective organizational structure, hierarchical position and job design or responsibilities (Adebayo et.al 2019; Akanbi, 2020; Ani at.al, 2021; Nsude, Nkwam-Uwaoma and Nwamini, 2016).

Over the years, there are frequent occurrences of industrial conflicts in every sector and organization in Nigeria and health sector is not left out. The government at various levels has made conscious efforts to bring lasting solutions to industrial conflict in Nigeria but to no avail. The federal government in 2014 set up a presidential committee of experts on inter-professional relationships in the public health sector. The committee discovered that there are no fewer than fifty (50) areas of conflict amongst the various professionals in the sector (Akanbi, 2020). These areas of industrial conflict are mainly in organizational management, infrastructure, leadership and teamwork, remuneration and motivation, career development and management, professional practice, labour, legal and governance

Nwaebuni (2015), asserted that public health institutions in Nigeria are afflicted with numerous problems such as poor leadership structure, lack of government's goodwill on implementation of

international best practices, underfunding/mismanagement, poor infrastructures, undue propensity on foreign health tourism among the elite, quackery, corruption, poor attitude of the health personnel, brain drain and associated challenges of shortage of manpower, indiscriminate and incessant industrial actions and supremacy tussle among health care professional unions. He further affirmed that it is regrettable that Nigeria is still categorized among the PAIN (Pakistan, Afghanistan, India and Nigeria) in healthcare delivery ratings.

1.2 STATEMENT OF THE PROBLEM

Over the years, Nigeria healthcare sector continued to witness incessant industrial strike and this has incapacitated the system. This is mainly caused by industrial conflict among the stakeholders in the Nigeria health system. The government at different levels have turned deaf hear to the demand of the healthcare workers and left them with no other option than to resort into industrial strike. Apparently, the public hospitals have become a nightmare for Nigerians as a result of poor delivery of services and high mortality rate. This ranges from poor medical treatment, obsolete medical facilities and equipment, mismanagement of resources both medical and human, lackadaisical attitudes of health workers, poor working conditions among others. In fact, there is nothing good to write home about of our public hospital because Nigerians continued to lament the incompetent of the healthcare workers as a result of the loss of lives of their family members in public hospitals.

In recent time, Nigeria health system is faced with the challenge of shortage of workforce as many healthcare workers sought for better working conditions abroad. According to the Minister of Health, Prof Isaac Adewole, the country has a shortage of 144,000 health workers. Nigeria is ranked second in Africa behind Ethiopia with 152,000 and latest ranked in the 7th position among 57 countries classified as facing a critical shortage of health workers by World Health Organization (WHO) - The Nation Newspaper, 9th May, 2017) . The brain drain scheme has not only deteriorated our health sector but also other sector of our economy. Many foreign countries have established recruitment office in Nigeria to entice our best brains in order to develop their economies.

Furtherance, there is increase in practice of foreign medical tourism among Nigerians because of unreliable health system. Many Nigerians have lost trust in the health sector with the issue of incessant industrial strike, as many that can afford abroad medical treatment sought out for it even at neighbouring countries. This study will examine the challenges and prospect of industrial conflict and how it can be managed to improve the healthcare sector. However, many literatures have been written on the challenges of conflict management in the healthcare sector and new challenge continue to arise which need urgent attention to be addressed to fill the gap of existing knowledge and also provide new knowledge.

1.3 OBJECTIVE OF THE STUDY

The main objective of the study is to examine the Industrial Conflict in the Health Sector; its challenges, Prospects and Solutions the Federal Neuropsychiatric Hospital, Yaba.

The specific objectives are to:

- i) identify the factors that are responsible for industrial conflict in the public healthcare system;
- ii) ascertain the implications of industrial conflict in the government hospital; and
- iii) determine how to manage the challenges of industrial conflict for positive impact in the Nigeria health system.

1.4 RESEARCH QUESTIONS

- i) What are the factors that are responsible for industrial conflict in the public healthcare sector?
- ii) Does industrial conflict affect the operation of government hospitals?

- iii) How can we manage the challenges of industrial conflict for positive in the Nigeria health system?

1.5 RESEARCH HYPOTHESES

The following hypotheses therefore guilds the study:

Ho₁: There are no factors that are responsible for industrial conflict in the public healthcare sector.

Ho₂: There is no significant correlation between industrial conflict and smooth operation of government hospitals.

Ho₃: There is no way the challenges of industrial conflict can be managed positively in the Nigeria health system.

1.6 SIGNIFICANCE OF THE STUDY

The study will assist the decision makers, policy influencers, Union leaders especially in the health sector in formulating and implementing policies to prevent industrial conflict and strike in the health system. Also, the study will be useful for academic purpose and educational community as it would contribute to existing knowledge.

1.7 SCOPE OF THE STUDY

This study focuses on the Industrial Conflict in the heath Sector: Its Challenges, Prospects and Resolutions. The Case of Federal Neuropsychiatric Hospital, Yaba. The study focuses on this special hospital as a leading medical centre in mental healthcare in Nigeria situated in urban area which is accessible to many psychiatric patients. The medical centre has adequate facilities in

terms of medical and human resources. Similarly, there has been record of industrial strike in various Neuropsychiatric Hospital in Nigeria and the medical centre is not left out.

1.8 LIMITATIONS TO THE STUDY

The limitation of my study is as follow;

- I. The time range for the period of my research serve as a limitation.
- II. Lack of both accessibility to both internet information and the tangible materials needed for detailing.
- III. The economic situation of the researcher and the disposal of the researcher.
- IV. The lack of ability to conduct interview due to both time and resources.
- V. Lack of good documentation of the area of research.

All these mentioned reasons that limit work and serve as a hindrance to the completion.

1.9 OPERATIONAL TERMINOLOGIES

Conflict: Conflict is defined as a clash between individuals arising out of a difference in thought process, attitudes, understanding, interests, requirements and even sometimes perceptions.

Industrial Conflict: industrial conflict is described as the presence of discord that occurs when goals, interests or values of different individuals or groups are incompatible and frustrate each other's' attempt to achieve objectives in an organization.

Conflict Management: Conflict Management involves the steps undertaken to prevent the conflict at the right time and also helps to resolve it in an effective and smooth manner.

Organization: Organization refers to a collection of people, who are involved in pursuing defined objectives. It can be understood as a social system which comprises all formal human relationships. The organization encompasses division of work among employees and alignment of tasks towards the ultimate goal of the company.

Public Hospital: Public hospitals are owned by governments and play an important role in the health care safety net, providing care for patients who may have limited access to care elsewhere. Public hospitals provide care for individuals across Nigeria.

Healthcare Sector: The healthcare sector is complex, heterogeneous in terms of employee composition and conflict prone. Healthcare service provision is inherently interdisciplinary; it requires doctors, nurses, pharmacists, and other health professionals with different specialties to work in teams.

Healthcare Workers: According to World Health Organization (2006) health-care workers are primarily concerned with the well-being of the patient. The World Health Organization describes health workers as all people engaged in actions whose primary intent is to enhance health; they include doctors, nurses, pharmacists, laboratory technician, laboratory scientists, community health workers, management, and support workers.

Healthcare System: A healthcare system can be defined as the method by which healthcare is financed, organized, and delivered to a population

Industrial Strike: A strike or industrial action is an action taken caused by a dispute between Union members and employers. It is a refusal to work by employees until the dispute has been resolved.

Social Dialogue: Social dialogue is the process of negotiation by which different actors in society reach agreement to work together on policies and activities.

CHAPTER TWO

LITERATURE REVIEW

2.0 INTRODUCTION

Industrial Conflict is one of the most prevalent issues in organization which demands for urgent address since it is unavoidable. In fact it occurs more in public sector than the private setting due to the structural and hierarchical dimensions of the institution. In the Nigeria health System (NHS), it has become a common practice over the years which lead to incessant and industrial strike. However, present and past government has made conscious efforts with various policies formulation and implementation to bring an end to incessant strike. Unfortunately, these have not yielded to positive development.

Subsequently, various causes are attached to Industrial conflict which has leads to poor services and productivity. Most public hospitals lack adequate infrastructure and maintenance to improve the well-being of patients. Many healthcare workers have different understanding and opinions on the hierarchical and functionality operations of the health system in Nigeria. However, this has generated to lackadaisical attitudes, unhealthy rivalries, negligence of responsibilities, non-compliance to policies and lack of implementations among the healthcare workers.

Over the years, there is no tangible improvement in the health sector and this allows many Nigerians to lose interest in the reliability the system because maximum treatment and satisfaction cannot be guaranteed. Many well-to-do Nigerians that can afford better treatment sought for it in private hospitals and abroad. There is need for overhaul irregular practices in the industry through dialogue and negotiation with provision of medical infrastructures in order to improve the Nigeria Health system.

2.1 CONCEPT OF INDUSTRIAL CONFLICT

Industrial conflict is inevitable despite the best of management practices in organizations and manifests in various forms as an intrinsic and unavoidable feature of employment relationship. It is by nature an ever present process and more likely to occur in hierarchical organizations where people with divergent view, opinion and background interact.

According to Kazimoto (2013), industrial conflict is described as the presence of discord that occurs when goals, interests or values of different individuals or groups are incompatible and frustrate each other's attempt to achieve objectives in an organization. It is a communication process and an inevitable consequence of transactional relationship manifesting in disagreement and dissonance with and between individuals and groups in the work-environment. This indicates that industrial conflict is an integral part of life as far as people compete for jobs, power, recognition and security. It is also understandable that industrial conflict can also be known as organizational or workplace conflict which connotes tussle for survival and superiority in a challenging environment.

Obi (2012) defined workplace conflict as an act of discontentment and contention which either the workers or employers of labour utilize to put excessive pressure against each other so as to get their demands. This refers to different strategies used by both the employers and the employees to drive home their various want; hence, each party shared different goals and objectives either among the workers or between the employers and employees in which mutual agreement or equilibrium point must be reached for mutual satisfaction. This is buttressed by Ugbaja (2002) that organizational conflict as any dispute, individual or group that causes disharmony among a group of workers or between an individual and the management in an organization. However, Dunlop (2002) expresses that conflict is a disagreement between two or more individuals or groups with each individual or group trying to make the other accept its view or position.

To Rahim (2001), it is the conflict among members of a group or sub-group as regards the carrying out of their goals, tasks and procedures to be used. Henry (2009) conceptualized conflict as a dispute that occurs when interests, goals or values of different individuals or groups are

incompatible with each other. It is the most common and problematic types of conflict experienced in work place (Wall & Callister 1995). Interpretively, there is need for industrial conflict for progress to takes place in order to achieve collective responsibilities, which means every individual must be carry along to attain development. There must be democratic process of operational activities to avoid violation of human rights, marginalization and oppression in an organization particularly in public spheres. According to Pandy (1992), the absence of conflict may indicate autocracy, uniformity, stagnation, and mental fixity, while the presence of conflict may be indicative of democracy, diversity, growth, and self-actualization.

Apparently, Organizational conflict breaks out when there is breach of contract between the employer and employee on mutual agreement. At the initial stage of operation, there is written terms and conditions that both parties agreed to abide by, abiding with this principles means that organizational harmony will continues to exist which result to progress but when one of the party feels cheated and frustrated with the working conditions. Definitely, it will leads to industrial conflict between both parties. Ubaku (2003) buttresses that the terms of employment of persons include such things as wages, hours of work compensation, leave, promotion, fringe benefits among others. Conditions of work include environment to the workers" efficiency or his enjoyment of the job, these include safety and working conditions generally, health and welfare of the employee. In the words of Nwatu (2004), avers that in all organizations, employees and employers have common interests in getting work done. What constitutes the work, how the work should be done and the price of labour services in the work process constitute areas where the interests of the two parties vary. This indicates that it is pertinent to make arrangement in resolving unforeseen conflict because it is certain that there will be clash of common interest in the future.

2.2 CONCEPTUAL FRAMEWORK

The theory propounded for this study is Conflict Process Theory (CPT), this theory is most relevant in addressing the concept of industrial conflict in Nigeria health system. It explains that man is born in the community out of conflict and it is inevitable, this means various groups exist

in the community with the purpose to overcome one another in the period of conflict. The theory believed that the observation of conflict pertaining to major organizational offices is a reliable procedure for sampling the developmental tendencies of the organization. In other words, conflict exists when there is interfering and incompatibility of goals between one party and another, this means differences in ideologies, interests and interpretation of facts can lead to conflict. Understandably, Conflict tends to be associated with negative features and situations which give rise to inefficiency, ineffectiveness or dysfunctional consequences. In other cases, it can result to stimulating problem solving strategy and harmony among aggrieved parties. It can be ascertain that industrial conflict is formal competition among individuals and groups for limited organizational resources in order to achieve organizational rewards. Applying this theory, healthcare workers resort to industrial strike to share their agitations and complaints particularly during critical period in the health sector which have negative impact on the industry. And also, the negligence of the government to adopt democratic negotiation and dialogue as instrumentality of problem solving technique has led to poor governance and management especially in the Nigeria Health System. Since, conflict is part of the relationship and interaction among different actors in the workplace. It is pertinent to examine the causes and negative impacts of industrial conflict on the health sector and how it can be properly manage.

2.3 TYPES OF INDUSTRIAL CONFLICT

According to Doyles (2000), Organizational conflict can be of two types which are:

- i. Individual conflict
- ii. Collective conflict

INDIVIDUAL CONFLICT: This is expression of grievances or agitations by an individual; this means when individual is not pleased with the current situation around the working environment. An employee might feel that he has been deprived from legitimate right or entitlement such as promotion, unfair treatment and disciplinary action, breach of agreement, cheated in one way or the other. As a result, it can lead to discouragement, poor morale or lack of motivation towards work. Hence, the negative impact is untimely meet up and poor delivery of service.

COLLECTIVE CONFLICT: It is a situation in which Individual employee considered to be union have disagreement with the management. It arises from misinterpretation of collective agreement or non-implementation of the whole or parts of the agreement. This can result to industrial strike when collective bargaining cannot be achieved. In addition, an individual conflict can also escalate to collective conflict if not effectively manage. Generally speaking, individual conflict can be considered as employee fight for his or her rights as a workman in place of work while collective conflict is concerned mainly for economic matter.

2.3.1 TYPES OF INDUSTRIAL CONFLICT IN THE HEALTH SECTOR

There are various types of industrial conflict in the health sector most especially in public hospitals in Nigeria. These are:

- i. **Hierarchical Conflict:** There may be conflict between the various levels of the organization. It can be between the employer which is the government and the employee the unions in the health system, the board of director and the top management, middle management may be in conflict with supervisory personnel, or there may be general conflict between management and workers.
- ii **Functional Conflict:** These can be conflict between different functional departments of the organization such as the medical and the pharmacy departments.
- iii. **Line - Staff Conflict:** There may be conflict between line and staff. It often results from situations in which staff personnel do not formerly possess authority over line personnel. For example conflict between medical and non-medical team.
- iv. **Formal - Informal Conflict:** There may be conflict between the formal and informal organizations for example the informal organizations norms for performance may be incompatible with the formal organizations norms for performance. E.g. the medical team and contractors.

- v. **Healthcare worker – Patient Conflict:** There can be conflict between the healthcare workers and team and the patients. In most cases, this is caused by the lackadaisical or non-challant attitudes of healthcare workers towards the patients in public hospitals.

2.3.2 TYPES OF CONFLICT

In another communiqué, Chandan (2005) also distinguishes between five types of conflicts which occur in the public healthcare sector which are enlisted below:

1. Intra-personal conflict
2. Inter-personal conflict
3. Personal-group conflict
4. Inter-group conflict
5. Inter-organizational conflict

Intra-personal conflict: This occurs within an individual as a result of goals and values proposed to achieve over time. Inability to meet up with these goals can lead to pressure and tension which bring about negative reactions from the individual. According to Nwatu (2004), a healthcare worker is expected to remain polite even in the face of high provocation from the patient in order to maintain good interpersonal relationships. However, the situation can be in the opposite direction. This has been the practice of most healthcare workers in Nigeria by expressing their aggression on the patients who are their customers particularly in public hospitals and government-owned medical centres.

Inter-personal conflict: According to Chandan (2005), this type of conflict occurs between two or more workers or individuals in an organization in terms of disagreement, misunderstanding or competition in order to attain supremacy in an organization. Thus it occurs in correlation to the goals of an organization in which individuals tussle for limited opportunities available in the organization such as promotion, vacancies, favouritism, personal development among others.

This leads to unhealthy rivalries among workers which bring about negative impact on the services and health industry.

Personal-Group conflict: This is a group of two or more people with an independent conscious effort in unified manner on particular cause in order to achieve common goals in respect to similar values, ideologies or concern. It is pertinent for individual members to strictly adhere to the group's rules and regulation (Osborne, 2001). Therefore, conflict can occur when individual member's behaviour is not in agreement with the group's rules and regulation. It usually occurs within members of a particular professional group in the health industry for example the Nigerian Medical Association.

Inter-group Conflict: This type of conflict occurs when there is a disagreement or misunderstanding between departments, units or groups in an organization. It has nothing to do with personality of an individual but because of the structure inherent in an organization. This means there are various factors in an organization's norms and values that can lead to conflict among one departmental group or the other. Chandan (2005) opines that it may be as a result of unspecified or undefined tasks, inconsistencies in performance criteria for different units and groups. For example, the medical doctors are considered as most important personnel in public hospital and were rewarded based on their responsibilities and satisfaction to the patients while nurses and other healthcare workers were not given such recognition. Sometimes this leads to poor performance and delivery of services between one department and the other (Nwatu 2004).

Inter-organizational Conflict: These types of conflicts exist among organizations. Such conflict arises when the policies of one organization causes dissatisfaction among management or employees of other organization.

2.3.3 STAGES OF INDUSTRIAL CONFLICT IN HEALTH SECTOR

Conflict can be viewed into five sequential stages which are; latent, perceived, felt, and manifest and conflict resolution stages.

Latent: In this stage, the basic conditions for potential conflict are resources, role conflict, drivers for autonomy, divergence of individual goal etc. These factors lead to competition and unhealthy rivalries among healthcare workers in the industry as a result of limited resources and supremacy for hierarchical positions.

Perceived: At this stage focused anxieties are created between the anxiety and tension. This leads to division and creation of different parties among healthcare workers. Therefore, each party battle for relevance and significance disposition which may escalates dispute and conflict in larger proportion. Thus, party begins to develop negative feelings towards each other.

Manifest: This is the stage of open conflict, a stage when conflict behaviour is exhibited in intense condition which leads uncomfortable atmosphere and also sabotage. Most departments disengage from the operational activities of other in order to for appraisal. There is lack of cooperation among different departments which hindered progress of services.

Resolution and Aftermath: This stage represent the condition that exists after the resolution or suppression of the conflict if the conflicts have been genuinely resolved, it can lead to an improved relationship and effective cooperation between organizational members. But if not resolved adequately, it may lead to a new and more severe conflict than the first.

2.3.4 CLASSIFICATION OF INDUSTRIAL CONFLICT

Industrial conflict can be classified into informal and formal conflict, in another dimension; it can also be functional and dysfunctional conflict.

Informal Industrial Conflict: Ogunbameru (2006) asserts that this conflict can be informal when there is expression of behavioural inadequacy from the healthcare worker in the process of delivery his or her responsibility. It is not based on the systematic organizational problem. This means it has to do with the individual inter-personal relationship to fellow colleague or the patient in the hospital. It is expressing grievances, poor attitude to work, unruly behaviour in form of protest, sabotage and aggression. If the situation is sufficiently widespread, it can significantly affect employee job description focus, turnover and impact on the prosperity of an organization (Kazimoto, 2013).

Formal Industrial Conflict: Formal conflict is a systematic plan and organized expression of dissatisfaction and grievances at work environment by healthcare workers and other practitioners which might be as a result of organizational problem such as poor remuneration, poor working condition, failure to fulfill approved agreement, lack or insufficient of working facilities among others. This can be articulated through union workers and other medical representatives to the authority or management (Ogunbameru, 2006). For example Nigerian Medical Association versus Federal Government which mostly leads to industrial strike and negotiation.

2.3.5 FUNCTIONAL VERSUS DYSFUNCTIONAL INDUSTRIAL CONFLICT

According to Robbins (1978), Industrial conflict can be of benefit for the public health sector if it is served for genuine reasons, this is known as functional conflict, thus, it can also have negative impact on the industry or organization if it is mishandled without appropriate reasons. This is called dysfunctional conflict.

Functional Industrial Conflict: This category of industrial conflict supports the goals and objectives of an organization. However, there is improvement of performance and progress in the operational activities. It can also be referred to as constructive or corporative conflict.

Dysfunctional Industrial Conflict: Dysfunctional or destructive conflicts, on the other hand, are the type of conflict that hinders organisational performance. Research carried out by Schmidt (1974) came out with the following positive and negative outcomes of conflict.

2.3.6 POSITIVE AND NEGATIVE OUTCOMES OF CONFLICT

Positive Outcomes of Industrial Conflict: This conflict brings new innovative and better ideas, long-term and lagging problems were resolved, healthcare practitioners were instructed to look for better way expressing their grievances without embarking on industrial strike and resolving other problems. Thus, there is social democratic negotiation, expression of view, permission for creativity and testing of capacities. In the health sector, Brinkert (2010) equally noted that the impact of conflict on an interdisciplinary team can result in the patient benefitting more from treatment decisions that are a product of careful deliberation and combined expertise.

Negative Outcomes of Industrial Conflict: This type of conflict leads to division among various parties involved, it creates an atmosphere of distrust, suspicion and also betrayal. Thus, it builds selfish interest among medical departments which means healthcare workers are only interested in only their functions without considering others. Some workers left the turmoil atmosphere because of persistence active and passive approach to duty within the teamwork. In a related study, Wilson (2004) reported that conflict within the nursing profession drains energy, reduces focus, and causes discomfort and hostility. Brinkert (2010) noted that unmanaged conflict is costly not only in monetary terms and not only for the healthcare personnel but can extend to affect the users.

2.4 SOURCES OF INDUSTRIAL CONFLICT IN HEALTH SECTOR

It is pertinent to elucidate and differentiate sources and causes of conflicts. However, sources refer to the origin of conflict, which is the place or nature from which conflict emanated from whilst the causes of conflict are conditions and factors that can enable conflict to arise and lead to element of concern (Robbins, 2005). Sources of conflict can be classified into two, which are internal and external conflicts The internal conflict are considered as integrated into the

organizational structure or framework, for instance, the primary element of internal conflict is the opposing interests of the industrial actors. In the aspect of industrial resources sharing by the industrial actors, these interests bring about conflicts. Internal sources of conflicts include managerial conflicts, the difference in personality values, lack of communication, lack of accountability, and responsibility (Harada, Sivanadan. & Ndanusa, 2018). The bane problem in the health sector is no job description and specification. Most healthcare workers neglect their responsibilities for the others which widen the gap of communication between the medical team and the patients. Adei (2007) asserted that there are numerous sources of industrial conflict and enlisted the following:

Internal Sources of Industrial Conflict

- i. Organizational Structure
- ii. Goals and target of the organization
- iii. Conditions of service.
- iv. Personality traits
- v. Gap in Communication
- vi. Workers' background
- vii. Job description/Specification
- viii. Bureaucracy
- ix. Authority/ Management.
- x. Workers' goals

Organizational Structure: This refers to system and complex functions of organization which includes the size and hierarchical structure, departmental functions, workers' responsibilities, power allocation among others. A reputable organization has distinctive and defined specification for functions and system in order to provide satisfactory delivery of services for its clients. Across Nigerian health institutions, the competition between the hierarchical position of doctors and other health workers drives conflict.

Goals and target of the Organization: One of the important reasons of establishing an organization is the goals to be achieved. The goals must consider both clients satisfaction and

worker aspiration. A good organization must be able to evaluate its target in term of service delivery and workers' performance and increase in productivity. In the health sector, there is always conflict between the organizational and workers' goals.

Condition of Service: This factor determines the performance of workers in an organization. Workers possess aspiration and ambition to achieve with an organization. This includes good remuneration, conducive working environment, appraisal and promotion, annual leave, allowances among other, all these incentives motivate and stimulate workers to put extra efforts to work to attain increase in delivery of service and productivity. In Nigerian health sector, there is little or no provision to most of these working conditions which result to poor delivery of services. In most cases the patients are the receiving end.

Personality traits: naturally, there are personality diversities in the work place, including health institutions. While some people can crack jokes easily and almost always, there are some people who do not withstand jokes or teases and easily take offence each time one is made on them, hence people who are quiet and reserved are usually in conflict with those who are radical and extravagant in the healthcare industry. Their quarrels sometimes emanate from the use and generous sharing of medical protective equipment with other healthcare practitioners.

Gap in Communication: One of the major challenges in the organization is misunderstanding and communication gap including health sector. Apparently, it is dominant in the sector as a result of heterogeneous nature of the industry which accommodates different professionals in medical background. For instance, medical doctors, nurses, pharmacists, laboratory scientists among others. There is fusion of specializations in which most time result to conflict and neglect of responsibilities and specification. In some cases, nurse might go against the instructions of the medical doctor or the pharmacist might reject the prescription of the medical doctor. All these abnormal practices result to conflict in the public hospital.

Workers Background: Healthcare workers come from various backgrounds, experiences, education and training result in individuals developing different perceptions of similar health realities. Some people have difficulty in getting along with each other in the health institutions.

This is purely a psychological problem and it has nothing to do with their job requirements or formal interactions.

Job Description and Specification: As earlier explain the heterogeneous nature of the industry pave way for industrial conflict. Most of the healthcare practitioners responsibilities are interwoven which result to neglect of duties and duplication of functions. In most cases, conflict brings about division among the professionals which leads to poor services.

Bureaucracy: emanates from a situation where some bureaucratic heads handles the workmen or subordinate as machine and makes poor judgments, subscribing rarely to in-between judgments. The boss here, is highly intolerant of ambiguity and things less of human feelings. His decision may seem to favour some people in the organization who would develop the attitude that “we own here” or are king makers in the healthcare establishment. This creates division among the people in any organization, particularly when there is suspected uneven distribution of rewards.

Authority/ Management: In American health system, the management team is business owners who invest in the industry. They might not be healthcare practitioners and they control and manage the activities and operations of the medical Centre. In Nigerian health sector, the medical team occupies the headship of medical institution; the medical doctor is mostly the medical director of the public hospitals and this has led to unending industrial conflict with other healthcare practitioners like nurses, pharmacists and other who feel entitle to this position and authority.

Workers’ Goals: In most cases, healthcare workers have different and incompatible goals which lead to competition, unhealthy rivalries and disunity in the industry as a result of limited and scarce resources.

External Sources of Industrial Conflict

External Sources are sources of conflict from outside of an organisation, but which influence happenings in organisation (Harada, Sivanadan, & Ndanusa, 2018). This includes the following:

- i. Government policies
- ii. Nature of labour legislation
- iii. Unpatriotic and unethical behaviour of the political class
- iv. National economic mismanagement
- v. Intervention from Government

Government policies: This is when the government plays the regulatory role, attempts to enact laws or formulate policy that may favour one group at the expense of the other group or when external interventions to industrial disputes become one-sided or biased. In Nigerian health system, there is privatization of medical centre which weakened the public hospitals. There is lack or insufficient funds available for the health industry, in other words, low budget is annually allocated for the health sector which leads to unreliability and mistrust. According to research, thousands of Nigerians lost their lives annually in public hospital because of poor and non-functional medical facilities and equipment.

Nature of labour legislation: Nigerian labour legislation does not favour the workers including the healthcare practitioners. In most cases, the welfare of the workers are neglected which paves way for, poor services, corruption and incessant industrial strike. As a matter of fact, government refused to implement labour legislation on agreement. This has negative impact on the health industry.

Unpatriotic and unethical behaviour of the political class: As a result of bastardization of public hospitals, political class sort for expensive private hospital and world-class hospital abroad. This has become normal practice for affluent and average Nigerians. Therefore, medical tourism budget is annually prepare for the political class at the expense of tax provision of common man while they have no other option than public hospital.

National economic mismanagement: Undoubtedly, the economic system has been in recession as a result of mismanagement form the political elite. There is an economic pressure caused by changing markets, domestic and foreign competition, recession, and Free Trade policies between

countries. Political pressures, changes in government, and demands from special interest groups can often bring about conflict, especially in public enterprises and non-profit organisations. Because of this, low budget is annually allocated for the National Health System (NHS).

Intervention from the Government: There is no autonomy on decision-making from the medical team. In most cases, there is incessant intervention from the government from time to time which makes the medical management to be handicapped in decision making and policy implementation. Most medical management dance to the tune of the government in order to remain relevant in the health sector.

2.5 CAUSES OF INDUSTRIAL CONFLICT IN HEALTH SECTOR

Marion and Gonzales (2013) and Rukshan, Nishanthi and Mahalekamge (2014) opined that the causes of conflicts are classified into three groups: Communicational or Data conflicts; Personal conflicts; and Structural conflicts. This can be expatiated below:

Communicational or Data conflicts: This refers to conflict associated with communication factors; it is indicated as primary element attached to personal conflicts. As earlier discuss, there is wide communication gap in the health sector. Sometimes, practitioners misinterpret data or lack adequate information for decision-making which create vacuum for poor assessment and data evaluation. Therefore, bring about opposition of facts and inadequate data analyzing and misunderstandings. (Charlse, 2015; Weerarathna, 2017).

Personal conflicts: This occurs as a result of differences in personality, since individuals are naturally different in traits, attitudes and beliefs. There is possibility of not getting along easily which can bring about different perception to particular situation or condition. This can leads to abrasiveness, egocentrism, laziness and gossiping (Charlse, 2015; Weerarathna, 2017). Some healthcare workers do not give room for tolerating and accommodating others Relationships between professionals in the healthcare team are by their nature unequal ones. Differences in knowledge and experience in specific issues confer on those who possess them, unequal responsibility and authority both ethically and legally, and precisely because of this inequality of

authority and responsibility (Strutton & Knouse, 1997 cited in Ogbonnaya & Ogbonnaya & Adeoye-Sunday (2007) inter-professional conflicts are common and expected.

Structural conflicts: This is closely associated with organizational structure and roles. This means it is generated from system of an organization in terms of factors which includes specialization, shared resources, goal differences, interdependence, authority relationships, roles and expectations, and jurisdictional ambiguities (Harada, Sivanadan, & Ndanusa, 2018). These factors can lead to conflict. It is a dynamic process which can escalate to anti-authority, protest, industrial strike among other over a period of time in the health system. However, it doesn't appear immediately but takes various stages and time to develop through manifestation of action and inaction process.

2.5.1 Causative Factors of industrial Conflict

Empirical findings carried out by Hotepo, Asokere et. al (2010) on determinant factors on industrial conflict found lack of resources, different expectation, competition, lack of cooperation, interdependence and communication problems as factors that have caused conflicts in the Nigerian service industry. Several factors have been identified as causes of conflicts in organizations. These include;

Organizational policies and objectives: Organizational policies and objective are always task-oriented but not welfare-oriented which paves way for conflict prone. Therefore, there is usually incompatible and conflict of goals between the organizational and employee's goals (Darel, 2003). In the public hospitals, most healthcare workers prioritize their goals at the expense of organization goals which lead to poor services delivery.

Individual goals and objective: It is noteworthy that individual possesses objectives and goals while working with the organization, in other words, the purpose of securing the job in an organization is to have means of achieving goals and objectives. Consequently, the healthcare practitioners engaged in various means of short cut to attain their goals.

Poor Communication: In Nigerian health system, there is not only poor communication by wide gap of communication process. This means of disseminating information from the management to the employee must be adequately channel into appropriate destination. Communication is the exchange of ideas, information or knowledge between individuals. With good communication channel, the management conveys information on the decision taking to the workers' and also workers return problems and challenges faced to the management. Thus, communication enhances interpersonal relationships in the organization and fosters understanding among everybody in the organization. According to Ugbaja (2002) ascertained that ineffective communication create a wide gap of communication between the management and the workers, manager and subordinate, as well as among the workers. This leads to misunderstanding, mistrust and suspicion in the organization because the workers feel concern why certain decisions are taken without duly consultation from them. In the health industry, there is wide gap of communication because of inferiority complex of some healthcare workers.

Nature of Assignment: The nature of tasks undertaken by workers can be cause of industrial conflict in an organization especially when the job description and specialization is not well specifying in the public hospitals. Some healthcare worker neglected the difficult tasks at the expense of the easy one. Ankwor (2006) remarks that difficult and stressful tasks are a serious factor that causes conflicts in organizations because such jobs give workers frustrations

Management Style: This refers to the headship style of an organization in term of leadership. It includes the relationship between the employer-employee and also superior-subordinate. Generally, workers resent dictatorial or autocratic management or leadership style. It can result to oppression and suppression in form of master-slave relationship in public hospitals. Feeling of resentment and anger associated with such relationship often leads to conflict (Ankwor, 2006)

Reward System: Rewards include wages and salaries, promotion, advancement, etc. These are given to workers for the works that they do as well as for excellent performance. Belonwu (2007), notes that ineffective reward system breeds dissatisfaction and frustration and ultimately

results in organizational conflict. In other words, if the workers perceive that the reward system does not reflect actual performance, conflict will occur. In Nigerian health system, the reward structure is lopsided which create division among the healthcare practitioners, it is mainly based the significance of the responsibilities of each healthcare worker as well as job description. The Events in Nigeria suggest that the salary structure in the public health sector is responsible for many conflicts as every salary increase in the public health sector has always left one group or the other aggrieved. For instance, physician is expected to earn more than nurse, pharmacist, laboratory scientist and other healthcare professionals in the industry.

2.6 MANAGEMENT OF INDUSTRIAL CONFLICT

2.6.1 Concept of Conflict Management

Naturally, conflict is inevitable in an organization as far as there is interaction between two or more people but it can be manage to the minimal stage in order to avoid escalation. According to Rahim (2002) conflict management involves designing effective strategies to minimize the dysfunctions of conflict and enhance the constructive functions in order to optimize learning and effectiveness of an organization. This means that managing conflict does not involves termination or eradication of conflict but creating framework to regulate how it can be avoided or prevented. Conflict management is prescribed not simply as a mechanism for dealing with difficult differences within an existing social system, but also as an approach that can facilitate constructive social change towards a responsive and equitable system (Fisher 2000). In other words, it involves method through which people or organization handle grievances or disputes in a constructive manner in order to arrive to resolution, mutual agreement and consensus offer genuine commitment to decision-making. Industrial or Organizational conflict may occur between two individuals, within small groups and work teams, or between groups (DeDreu & Van de Vliert, 1997). In simpler terms, Huseman (1977) views conflict management as distinguishing between useful conflicts and conflicts that should be eliminated. Also, conflict management should involve the ability to develop individuals who can work under stress but continue to be productive.

2.6.2 Significance of Conflict Management

Uchendu, Anijaobi and Odigwe (2013), since conflict is inevitable in organizations, its management determines whether it will generate positive or negative effect on the organizational performance. This indicates that it is important to recognize conflict at the appropriate timeline before it escalated into crisis that can be counter-productive. Thus, effectual conflict management is germane before it goes out of hand in workplace or organization. Subsequently, conflict management orientation is a viable method in resolving conflict which can be implemented in diverse ways in organizations. Ford (2007) posited a four-way process which includes assessment and inquiry, design, implementation and evaluation aimed at achieving efficacious and objective conflict decision in the workplace. It is an integrative approach that is often employ by the management so as to satisfy the needs of the stakeholders in conflict resolution. Thus, the integrative approach is useful and effective to achieve better result and commitment from individuals to put their efforts to work. As a matter of fact, the integrative approach widens the understanding of the nature of the conflict and provides appropriate solution to the conflict.

Conversely, the collective bargaining strategy is an approach which is advisable for managing conflict of union-management relationship in an organization. The approach is internationally acclaimed as the legal instrument by which workers and management settle conflicts arising from employment contracts (Fajana and Shadare, 2012). In recent time, collective bargaining strategies have been suggested in Nigeria by the Trade Union Amendment Act (2000) because of its positive machinery used has been adopted by most multinational organizations in resolving conflict in the country. In practice, this collaborative approach of managing conflict, involves negotiation between union and management in a process of meeting demands, discussing, presenting counter demands, bluffing and sometimes threatening all in a bid to reach collective agreement

2.6.3 Management of Industrial Conflict in Health Sector

Over the years, Nigeria Health System has continued to witness incessant industrial strike which put the sector into shamble, porous and unreliable sector. This is because it has become life threatening and death trap to the people of the country. Many approaches have been suggested to put an end to the industrial conflict and strike but all has not resulted to fruitful conditions. In recent time, research conducted by healthcare practitioners have propounded social and democratic dialogue as the most suitable method of resolving and managing industrial conflict or strike in public health sector. However, emphasising the important of dialogue in resolving industrial conflict, Linda (2012) asserts that the use of dialogue in resolving conflict still remains the only socially acceptable form of interacting in the workplace, especially for taking decisions over issues of mutual and divergent interests. She opined that social and democratic dialogue has positive impact on industrial relations between the union and management because it paves ways for mutual respect and agreement in the process of negotiation when there is industrial conflict. Furtherance, the decision of democratic dialogue has become the mostly acceptable approach in find lasting solution to industrial strike in Nigeria Health System (NHS).

In addition, in the words of Oyewunmi and Oyewunmi (2015) social and democratic dialogue through collective bargaining has been advocated as an antidote for effective resolution of industrial conflict of any magnitude. They averred that it will enable for possible solution to prioritize germane issues such as infrastructure, capacity building and quality assurance in the resolution of industrial impasse in Nigeria's public health sector. This also includes resolving untold hardship suffered by the commoners like the poor and low-income earners, middle class and rural dwellers which make their lives vulnerable to the public hospitals. However, social and democratic dialogue has not been effective and also successful in some decades back especially during the military era which is characterized with dictatorship and coercive authority. This also exposed the Nigeria health sector maladministration, mismanagement and poor medical facilities because decisions were taken from above without proper consultation from the healthcare practitioners (Okolie, 2010). In most cases, appointment in leadership position is based on

mediocrity but not meritocracy. In addition, conflicting roles of government as both employer and regulator has tendered low marginal result of dialogue in the health sector (Adebisi, 2014).

Subsequently, policy inconsistencies and lack of political freewill in implementing good labour relations over a long period of time. Breaching of collective agreement by the government as well as turning deaf ears to the demand of medical practitioners has exposed the Nigeria health system (NHS) to volatile condition in one hand. At the other hand, neglecting the professional ethics, tussle for supremacy among the healthcare workers, egocentric nature of the medical doctors, prioritizing of personal gains, ethnocentrism of other medical professionals among others remain recurring abysmal practices that resulted to unending industrial conflicts in Nigeria health sector (Oyewunmi and Oyewunmi 2015).

2.7 DIMENSIONS OF CONFLICT MANAGEMENT

The conflict management process encompasses a wide range of activities including negotiation, problem solving, dealing with emotion, and understanding positions (Brett, 2001). In order to resolve industrial conflict, dialogue and negotiation are the ultimate tools. According to OECD (2005), dialogue is an important tool for strengthening governance and democracy, preventing violent conflict and building peace, it facilitates a shared understanding of complex societal problem. This indicates that dialogue is in a better position for conflict management, prevention and protection. It is unfortunate that this veritable tool has not been able to resolve industrial conflict in Nigeria health sector. However, dialogue as an approach and as a process share a common denominator; any type of dialogue basically aimed at creating a quality of conversation that facilitates the transformation of inter-personal relations, sustain industrial harmony and shared understanding of complex problem. Jide (2009) appraisal for dialogue stated that one important mechanism which has become almost unavoidable in conflict resolution is dialogue. This means conflict can be resolved through various strategies which are:

i. **Negotiation Strategy:** According to Neale and Fragale (2006), negotiation is a process by which two parties, each with its own viewpoint and objectives, attempt to reach a mutually satisfactory result on a matter of common concern. De Dreu, Weingart & Kwon, (2000) also assert that Negotiation is used to minimize conflict affecting individuals so as to maximize cooperation and keep conflict to acceptable levels. However, both negotiators have a round table discussion to unanimously agree on consensus to favours both parties. The actors in conflict can help adversaries communicate with each other in many ways.

ii. **Win-win Negotiation Outcome:** This is a situation that both parties benefit from the resolution of the conflict and are willing to voluntarily accept the outcome of the negotiation. In other words, the negotiators adopt the collaborative approach during the discussion and every factor that leads to the conflict is discussed extensively in order to arrive to collective conclusion. A win-win negotiation outcome can help improve team performance by reducing tension, antagonism and distraction of members of a team (Mannix, 2001).

iii. **Win-lose Negotiation:** The win -lose outcome occurs when one side of a dispute feels they have won and the other feels that they have lost (Beckno, 2006). This means the negotiators are not able to arrive at collective resolutions or agreement. For instance Industrial conflicts, which usually arise due to a breakdown in negotiation as well as disagreements between employer(s) and the employees, connote a temporary stoppage of work resulting from the pursuance of grievance(s) by workers resulting from a win- lose negotiation outcome (Osabuohien, 2014). However, this affects the future relationship of both negotiators likewise the employer-employee or union-management.

iv. **Lose-Lose Negotiation:** In this scenario, both parties are not able to achieve their wants and needs because argument are based on emotion but not objective. In most cases, one party cannot stand in the position of being loose, for this reason put more effort and energy to ensure that situation is not avoidance for both parties. This situation can turn to win-lose once a party

considers it to fair enough. Good negotiation usually involves a lot of homework, and teamwork for making long term binding agreement (Neely & Crowe, 2001).

v. **Collaboration Strategy:** There is cooperation and the search for a mutually beneficial outcome, when each party to conflict desire to fully satisfy the concerns of all parties. The purpose of the meeting is to resolve problem by clarifying the differences rather than accommodating divergent opinions and grievances from the parties involves. This involves openness, exchange of viable information and communication differences to reach a solution acceptable to both parties. Rahim (2011) asserts that collaboration strategy is useful for effective dealing of complex problems especially when one party alone cannot solve the problem. According to Kilman and Thomas (2008), collaboration strategy is the best method of handling conflict, as it strives to satisfy the needs of both parties. It is integrative and has high concern for personal goals as well as relationship.

vi. **Accommodation:** An accommodating style of industrial conflict management involves neglecting one's own concerns in order to satisfy the concerns of others (Brown, 2007). Individual applying this strategy prioritize the inter-personal affairs of the parties involves and show support to one and another. These individuals tend to use apology or humor, or express their desires in an indirect way rather than coming straight to the problem (Stanford, 1997). Wertheim (2002) views accommodation as a destructive strategy because it often leads to a buildup of negative emotions

2.7.1 STYLES OF CONFLICT MANAGEMENT

The following techniques have been identified in managing conflicts in corporate organizations;

1. AVOIDANCE: This technique entails calming down the conflict through non-attention. Ojo (2005) argues that through avoidance more information is gathered by management on the issue(s) at dispute before a decision is taken. Sometimes, it requires physical separation so as to avoid violent demonstration of grievances and differences which will aggravate the situation.

2. ACCOMMODATION: This style requires making concession by one of the parties in the dispute in order to resolve the conflict. This is usually appropriate when one party is interested in

satisfying the other party interest more than his/her own interest. Ojo (2005) states that it is appropriate when the issue is more important to the other party. Sacrifice and concessions are made to please the opponent so as to maintain the relationship. Often this earns one social credit that will be used later for commendation.

3 COMPETITION: This technique requires introduction of contest as a means of resolving an agitation especially when limited opportunities exist for employees to achieve their aims for instance, when few vacancies exist to be filled through promotion. The basis for the conflict is non-promotion. Adei (2007) expresses that one party uses superior skill and intelligence to beat the other. This technique is appropriate when there is need for quick decisive action regarding matters that are vital to organization effectiveness. A decision from higher authority may not only reduce manifestation of conflict but also the cause of the dispute.

4 COMPROMISE: Through this style, each disputant makes a concession or give up something of value in order to resolve the conflict. This leads to “no winner, no loser.” It means shifting ground a bit to reach a common ground, (Ananaba 2001).

5 COLLABORATIONS: This technique requires consultation, discussion and negotiation between all the parties in dispute. Juchel (2002) expresses that when the conflicting parties openly discuss all relevant issues in an open and honest manner, tempers are cooled and solution found. It works well when it is important to find a joint solution and this leads to a “wins a win” situation.

6 MODIFYING THE ORGANIZATIONAL STRUCTURE: This style requires the modification of organizational structure in order to resolve a conflict. For instance conflicts arising from bureaucratic rigidities, span of control, centralization, command structure, etc. can only be resolved through modification of the organizational structure to ease decision-making and communication. Juhel (2002) posits that when the removal of an indicated personal does not resolve the conflict, this technique is most appropriate. However, there are other conflict management techniques put forward by other authors. These include

7 TEAM MEDIATION PROCESS: McDaniel (2001) offers a step-by-step mediation process from corporate organizations dealing with conflict. The mediation process provides the work team with skills and structure for mediating in their own disputes. In this situation, there is a strong emphasis on parties to disputes to learn and commit themselves to a process of communication and resolving the conflicts by themselves.

2.7.2 Tools and Strategies in Conflict management

Conflict management aids are the instruments that are used in management organizational conflicts. According to Okomba, (2005) there are four such aids. These include;

- **Goal Structure:** Organizational goals should be properly defined and the departmental roles must be clearly distinguished and stated. Okomba (2005) explains that the purpose of goal structuring is to avoid role conflict and clash. Thus, all departments must be aware of the importance of their role and the importance of their role must be fully recognized and appreciated.
- **Reward System:** The reward system or compensation program is an important aid to conflict management since poor reward system is a major source of organizational conflict. Osborne (2001) acknowledges that a good reward system should be appropriate and relates work or efforts to earnings. It should be such that it does not create individual competition and conflict within the organization.
- **Trust:** Trust among individual members of the organization is also an important aid to conflict management. Mistrust is a great source of conflict in corporate organizations. As an aid to conflict management, therefore, trust and confidence make members of the organization to have faith in each other including the management team. Osborne (2001) argues that the greater the trust among organizational members the less the suspicion and disagreement.
- **Communication:** As an aid to conflict management, communication ensures that information is shared and that everyone is carried along in decision and policymaking. Inyang (2004) posits that adequate and effective communication brings about understanding and promotes harmony.
- **Coordination:** Proper coordination of activities reduces conflict. This is because it tends to harmonize conflicting goals and makes organizational members to work as a team. Team spirit and team work engendered by effective coordination reduces conflict to the barest minimum (Inyang, 2004).
- **Trade Dispute Amendment Decree 1988:** Another conflict management approach for resolution of conflict in Nigeria is offered in the provision of the Trade disputes

Amendment Decree, 1988, No. 39 and Trade dispute Act CAP 18, 2004 which provided five steps for legal management of conflict in organizations in the country. These are voluntary settlements of conflict using internal machinery of grievance procedures and the external machinery involving appointment of mediator, conciliator, reference of disputes to industrial arbitration panel, National Industrial Court and the constitution of a Board of Inquiry if such is considered necessary. In conflict resolution, the award of the National Industrial Court is final and binding on the employees and employers from the date of the award in the country.

2.8 ROLES OF UNION IN PREVENTING INDUSTRIAL CONFLICT

The union member can prevent industrial conflict through the following process

1. Receiving the nature of complain or dissection of the workers
2. Getting all fact correcting and handling on time.
3. Analysis the nature of the complaint from the workers as appropriately.
4. Calling a meeting to discuss the complaint appropriately.
5. Getting in touch with the management or the superior officer involved to discuss the issues.
6. Encouraging all members to attend meeting to contribute morally and financially
7. Work together united and strong union to face the challenges of the workers
8. The union must be fair to all members to nature of their complain or discomfort
9. Communicating effectively to all member of the union.

STRIKES

Industrial conflict can also lead to strikes, majority of strikes are non-violent because of restraint on both the management and the employees. Ootobo (2000) stated that a reason for such caution is the realization that a strike is a temporary stoppage of work. High level of aggression during a strike may negatively affect bargaining relationships which are crucial for day-to-day labor-management relations. Strike can have great impact on the employee, the employer and the society as a whole.

2.9 Theoretical Framework

This theory adopted the Conflict Process Theory (CPT), this theory is most suitable in addressing the concept of industrial conflict in Nigeria health system. One of the basic tenets of this theory is that all groups in the society are born from conflict and as such conflict is inevitable. The Theory is propounded by Karl Max, he stated that society will always be in a state of conflict due to its never-ending competition and struggle for finite resources. People in possession of resources and wealth will always strive to protect and keep these resources, while people without will do everything they can to acquire them. Therefore, there will be tussle between the rich and poor in the society. The theory postulated that conflict is rational, inevitable, functional, and regular in organizations and is resolved through recognition and various management styles by leaders (Mohanta, 2017). Nigeria medical doctors often use conflict (industrial actions) to resolve problems in a critical area like health sector. On the other hand, lack of commitment to prompt resolution of industrial conflict through swift utilization of the instrumentality of dialogue by the government unarguably cast serious aspersions on the developmental capabilities of government and governance in Nigeria. It is pertinent to adopt appropriate management strategies to minimize the negative outcomes of conflicts so that it is beneficial to the organization.

2.9.1 Empirical Review

Kumar (2009) conducted research on conflict management's impact on employee's performance at Nigerian Breweries Plc, Iganmu, Lagos State. A survey research design was employed in the study. Data was taken from primary sources with questionnaires. The study shows a significant improvement in relationship between conflict management and employees' performance. The study recommended the management should adopt dialogue approach as conflict management tool to improve the relationship with the employees in order to enhance their performance which leads to increase in productivity.

Also, Meng-Shan (2018) investigated the impact of conflict management on organizational performance in a Nigerian manufacturing firm, with sample size of 250 employees. Validated

questionnaires were used to generate data and analyzed. Results showed a significantly positive relationship between conflict management strategies (collective bargaining, accommodation, and compromise) and organisational performance. Non-integrative conflict management strategies (such as competition, avoidance, and domination) had a negative effect on organisational performance. The regression analysis specified that collective bargaining strategy has the highest significant positive correlation with organizational performance.

The union-management conflict was discovered to be the most predominant in the organisation. The study concluded that conflict is an unavoidable occurrence and could detract from or contribute to organisational performance depending on the methods of conflict management being adopted at the workplace

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 INTRODUCTION

This has to do with method that would be adopted by the research study in collecting and collating data for the study. It comprises of description of techniques and procedures that would be used; such as Research Design, Population of the Study, Sample size and sampling technique, Research Instrument, and Method of Data Analysis.

3.1 RESEARCH DESIGN

The research is employed for both descriptive and quantitative research methods. These methods will be appropriate to explore the causes of industrial strike in health sector and how it can be managed effectively for better healthcare provision and services. Primary sources will be used to gather comprehensive information about the study since there are many literatures on the subject matter.

3.2 POPULATION OF THE STUDY

For the purpose of the study, a total number of eight hundred respondents are selected comprising of medical practitioners, healthcare workers – nurses, pharmacists and laboratory scientists at Federal Neuropsychiatric Hospital, Yaba. This will help to gather first-hand-data.

3.3 SAMPLE SIZE AND SAMPLING TECHNIQUE

Simple random sampling technique will be adopted to select eight hundred respondents from the target population. The principle of random sampling gives every member of the population equal chance of being selected in the sample. It comprises of 300 medical practitioners, 500 healthcare workers. The study would collect primary data for a better analysis.

3.4 RESEARCH INSTRUMENT

This study will adopted structured questionnaire to elicit the needed information from the respondents. This study will use survey method to collect necessary data required. This involves pilot study to showcase the occurrence of the subject matter.

3.5 ADMINISTRATION OF INSTRUMENT

Structured questionnaire will be administered, with a total of eight hundred copies for the respondents comprises of staff and patient of Federal Neuropsychiatric Hospital, Yaba. It will be administered subsequently beginning from the senior staff such as medical director, medical consultant, senior and junior staff and also non-medical staff.

3.6 METHOD OF DATA COLLECTION

The structured questionnaire will be used for the data collection from the selected respondents. Out of the 1000 copies of the questionnaire self administered, 800 copies will be retrieved and fit for analysis, with a response rate of 95%. The questionnaire will be designed following standard guidelines for questionnaire design. The first part of the questionnaire sought for the biographical

details of the respondents, while the second part comprises 15 items questions to be answered in Likert scale format, in relation to research questions. Each item of the construct to be used will be presented with five alternative responses from strongly disagree to strongly agree with numerical value 1 – 5. The questionnaire survey followed all the required ethical considerations.

3.7 METHOD OF DATA ANALYSIS

This data collected will be analysed using descriptive method in analyzing respondents' background information. Also the descriptive method will be used to answer the raised research question. The answers will be analysed in percentage (%) scale as this will enable the research study to set a benchmark for each question answered in order to achieve validity and reliability of the study.

CHAPTER FOUR

Data Presentation, Analysis and Interpretation

4.0 Introduction

This chapter is dedicated primarily to the analysis and presentation of data obtained from the field using various statistical techniques discussed earlier in the methodology. All data collected were presented, analyzed and discussed. As a matter of fact, 800 copies of questionnaire were carefully administered on respondents, however, 790 copies were correctly filled and returned at the stipulated time. This is 98.75% response rate, which the researcher believed was enough to give unbiased data needed for this research. Thus, 790 copies of questionnaire received from respondents were presented and analyzed using Software Package for Social Science (SPSS) for easy understanding.

Table 4.1 Preliminary Survey Details

Response Rate to Questionnaire Administered

S/No	Questionnaires	Frequency	Percentage
1.	Number of questionnaire administered	800	100%
2.	Questionnaires retrieved and used for the final analysis	790	98.75%
3.	Number of questionnaires not retrieved and discarded due to errors.	10	1.25%

Source: Field Survey 2022

Table 4.1 above provides the response rate to questionnaires administered. A total of 800 copies of questionnaire were administered to the workers in Federal Neuropsychiatric Hospital, Yaba

according to the sample size determination. The total number of questionnaires retrieved after administration was 800 while 5 copies were not properly administered and 5 copies were not returned. This means 98.75% response rate was achieved.

Table 4.2. Demographic data of the Respondents.

The following shows the presentation and analysis of demographic data of the respondents in terms of their Gender, marital status, academic qualification, years of working experience, staff category, employment status and department.

Variable	Frequency	Percentage (%)
GENDER		
Male	331	41.9
Female	459	58.1
TOTAL	790	100.0
MARITAL STATUS		
Single	183	23.2
Married	496	62.8
Divorced	15	1.9
Separated	33	4.2
Widowed	63	8.0
TOTAL	790	100.0
ACADEMIC QUALIFICATION		
SSCE	92	11.6
OND	118	14.9
B.Sc	266	33.7
MSc	96	12.2
MBA	186	23.5
PhD	32	4.1
TOTAL	790	100.0

Source: Field Survey 2022

YEARS OF WORKING EXPERIENCE		
1 – 10 years	143	18.1
11 – 20 years	376	47.6
21 – 30 years	204	25.8
Above 30 years	67	8.5
TOTAL	790	100.0
STAFF CATEGORY		
Junior staff	493	62.4
Senior staff	225	28.5
Management staff	72	9.1
TOTAL	790	100.0
EMPLOYMENT STATUS		
Permanent	678	85.8
Casual	61	7.7
Contract	51	6.5
TOTAL	790	100.0
DEPARTMENT		
Administration	85	10.8
Pharmacy	136	17.2
Nursing	280	35.4
Medical	203	25.7
Others	86	10.9
TOTAL	790	100.0

Demographic data of the Respondents Cont'd

Table 4.2 presented the demographic information of the respondents. As shown above, 331 of the respondents representing 41.90% were males; while 459 representing 58.1% are females. This simply implies that majority of the workers in Federal Neuropsychiatric Hospital, Yaba that participated in this study were females.

The marital status of the respondents is presented in Table 4.2. From the table above, it can be seen that 183 of the respondents representing 23.2% were single, 496 representing 62.8% of the respondents married, 15 respondents representing 1.9% were divorced, 33 of the respondents representing 4.2% were separated and lastly 63 respondents representing 8.0% were widowed. Looking at the marital status, majority of the workers were married.

The academic qualification of the respondents is also presented in Table 4.2. It can be seen that 92 of the respondents representing 11.6% have SSCE, 118 respondents representing 14.9% have OND, 266 of the respondents representing 33.7% have B.Sc, 96 respondents representing 12.2% have MSC, 186 respondents representing 23.5% have MBA and 32 respondents representing 4.1% have PhD. Hence, majority of the respondents have BSc.

With respect to working experience of the respondents; as shown in Table 4.2, 143 respondents representing 18.1% have between 1 – 10 years working experience, 376 respondents representing 47.6% have between 11 – 20 years of experience, 204 respondents representing 25.8% have between 21 – 30 years of experience and 67 respondents representing 8.5% have between above 30 years of experience. The result indicates that majority of the respondents are experienced.

According to staff category, 493 of the respondents representing 62.4% were junior staffs, 225 of the respondents representing 28.5% were senior staffs and 72 of the respondents representing 9.1% were management staffs respectively. Hence majority of the workers in Federal Neuropsychiatric Hospital, Yaba that participated in this study were junior staffs.

On the basis of respondent's employment status, it can be seen that 678 of the respondents representing 85.8% were permanent staffs, 61 respondents representing 7.7% casual staffs and 51 of the respondents representing 6.5% were contract staffs. This indicates that majority of the workers that participated in this study were permanent staffs.

The department of the respondents is also presented in Table 4.2. From the table above, it can be seen that 85 of the respondents representing 10.8% were in Administration department, 136 representing 17.2% of the respondents were in Pharmacy department, 280 respondents representing 35.4% were in Nursing department, 203 respondents representing 25.7% were in Medical department and 86 of the respondents representing 10.9% were in other departments not stated in the study. Hence, majority of the respondents were in Nursing.

4.1 Factors Causing Conflict in Public Health Care System

This section presents the answer provided by the employees in response to research question on factors that causes conflict in public health care system

Table 4.3.1. Poor wages and salaries are the only root causes of workplace conflict in public health institution

Items	Frequency	Percentage (%)
Disagree	27	3.4
Strongly Disagree	32	4.1
Undecided	137	17.3
Agree	532	67.3
Strongly Agree	62	7.8
Total	790	100.0

Source: Field Survey 2022

Table 4.3.1 above presented the result of the frequency distribution of staffs in response to whether poor wages and salaries are the only root causes of workplace conflict in public health institution. The table showed that majority of the respondents (67.3%) agreed that poor wages and salaries are the only root causes of workplace conflict in public health institution. Hence, majority strongly agreed that poor wages and salaries are the only root causes of workplace conflict in public health institution.

Table 4.3.2: Absence of regular promotion of staff has led to conflict in my workplace

Items	Frequency	Percent (%)
Disagree	21	2.7
Strongly Disagree	140	17.7
Undecided	517	65.4
Agree	112	14.2
Strongly Agree	21	2.7
Total	790	100.0

Source: Field Survey 2022

Table 4.3.2 above presented the result of the frequency distribution of employees in response to whether absence of regular promotion of staff has led to conflict in my workplace. The table showed that majority of the respondents (65.4%) agreed that absence of regular promotion of staff has led to conflict in my workplace. Although, 17.7% strongly disagreed that absence of regular promotion of staff has led to conflict in my workplace, it is concluded that absence of regular promotion of staff has led to conflict in my workplace.

Table 4.3.3: Failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict

Items	Frequency	Percent (%)
Disagree	50	6.3
Strongly Disagree	34	4.3
Undecided	0	0
Agree	605	76.6
Strongly Agree	101	12.8
Total	790	100.0

Source: Field Survey 2022

Table 4.3.3 above presented the result of the frequency distribution of staffs in response to whether failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict. The table proved that 12.8% strongly agreed, 76.6% agreed, 4.3% strongly disagreed and 6.3% disagreed to the statement. Hence, majority of the respondents agreed that failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict.

Table 4.3.4: Poor leadership style is a principal cause of conflict in my workplace

Items	Frequency	Percent (%)
Disagree	26	3.3
Strongly Disagree	87	11.0
Undecided	0	0
Agree	583	73.8

Strongly Agree	94	11.9
Total	790	100.0

Source: Field Survey 2022

Table 4.3.4 above presented the result of the frequency distribution of staffs in response to whether poor leadership style is a principal cause of conflict in my workplace. The table proved that 11.9% strongly agreed, 73.8% agreed, 11.0% strongly disagreed and 3.3% disagreed to the statement. Hence, majority of the respondents agreed that poor leadership style is a principal cause of conflict in their workplace.

Table 4.3.5: Absence of proper conflict management is a root cause of major conflicts in my workplace

Items	Frequency	Percent (%)
Disagree	85	10.8
Strongly Disagree	34	4.3
Undecided	0	0
Agree	616	78.0
Strongly Agree	55	7.0
Total	790	100.0

Source: Field Survey 2022

Table 4.3.5 above presented the result of the frequency distribution of employees in response to whether absence of proper conflict management is a root cause of major conflicts in my workplace. The table showed that majority of the respondents (78.0%) agreed that absence of proper conflict management is a root cause of major conflicts in my workplace.

4.2 The Implications of Industrial Conflict.

This section is intended to illustrate the resultant effects of industrial conflict.

4.4.1: Industrial conflict in my workplace will continue to affect labor and management relations

Items	Frequency	Percent (%)
Disagree	29	3.7
Strongly Disagree	48	6.1
Undecided	105	13.3
Agree	323	40.9
Strongly Agree	285	36.1
Total	790	100.0

Source: Field Survey 2022

Table 4.4.1 above presented the result of the frequency distribution of staffs in response to whether industrial conflict in my workplace will continue to affect labor and management relations. The table proved that majority (40.9%) of the respondents agreed to the statement. Hence, industrial conflict in respondent's workplace will continue to affect labor and management relations

4.4.2: Industrial conflict leading to work stop pays often reduces productivity of the employees

Items	Frequency	Percent
Disagree	44	5.6
Strongly Disagree	93	11.8
Undecided	0	0
Agree	512	64.8
Strongly Agree	141	17.8
Total	790	100.0

Source: Field Survey 2022

Table 4.4.2 shows whether industrial conflict leading to work stop pays often reduces productivity of the employees. The response of the employees proved that 17.8% strongly agreed, 64.8% agreed, 11.8% strongly disagree and 5.6% disagreed. Hence, majority of the respondents agreed that industrial conflict leading to work stop pays often reduces productivity of the employees.

4.4.3: Strikes in my workplace has led to the loss of lives of many patients.

Items	Frequency	Percent
Disagree	6	.8
Strongly Disagree	73	9.2
Undecided	0	0
Agree	585	74.1
Strongly Agree	126	15.9
Total	790	100.0

Source: Field Survey 2022

Table 4.4.3 presented the results of respondents on the statement strikes in my workplace has led to the loss of lives of many patients. It was seen that 15.9% strongly agreed, 74.1% agreed, and 9.2% strongly disagreed. Hence, majority of the respondents agreed that strikes in my workplace has led to the loss of lives of many patients.

4.4.4: Training, job satisfaction and workplace motivation will continue to prevent workers from industrial conflict

Items	Frequency	Percent (%)
Disagree	60	7.6
Strongly Disagree	67	8.5
Undecided	18	2.3
Agree	552	69.9
Strongly Agree	93	11.8
Total	790	100.0

Source: Field Survey 2022

Table 4.4.4 above presented the result of the frequency distribution of staffs in response to whether training, job satisfaction and workplace motivation will continue to prevent workers from industrial conflict. The table proved that 11.8% strongly agreed, 69.9% agreed, 2.3% were undecided and 8.5% strongly disagreed to the statement. Hence, majority of the respondents agreed that training, job satisfaction and workplace motivation will continue to prevent workers from industrial conflict.

4.4.5: Delivery of good health care services will not be realized in the country with industrial conflict in the health sector

Items	Frequency	Percent
Disagree	87	11.0
Strongly Disagree	0	0
Undecided	74	9.4
Agree	522	66.1
Strongly Agree	107	13.5
Total	790	100.0

Source: Field Survey 2022

Table 4.4.5 shows whether delivery of good health care services will not be realized in the country with industrial conflict in the health sector. The response of the employees proved that 13.5% strongly agreed, 66.1% agreed, 9.4% were undecided and 11.0% disagreed. Hence, majority of the respondents agreed that delivery of good health care services will not be realized in the country with industrial conflict in the health sector.

4.3 How to manage conflict.

This section is intended to illustrate the strategies in managing conflicts

4.5.1: Social dialogue should be used regularly to manage conflict in my workplace

Items	Frequency	Percent (%)
Disagree	66	8.4
Strongly Disagree	13	1.6
Undecided	98	12.4
Agree	465	58.9
Strongly Agree	148	18.7
Total	790	100.0

Source: Field Survey 2022

Table 4.5.1 presented the results of respondents on whether social dialogue should be used regularly to manage conflict in my workplace. The results showed that 18.7% strongly agreed and 58.9% agreed. Hence, majority of the respondents strongly agreed that social dialogue should be used regularly to manage conflict in my workplace.

4.5.2: Conflict resolution mechanism as contained in trade disputes act should always be used to resolve conflict.

Items	Frequency	Percent
Disagree	35	4.4
Strongly Disagree	86	10.9
Undecided	0	0
Agree	574	72.7
Strongly Agree	95	12.0
Total	790	100.0

Source: Field Survey 2022

Table 4.5.2 presented the results of respondents on the statement conflict resolution mechanism as contained in trade disputes act should always be used to resolve conflict. It was seen that 12.0% strongly agreed, 72.7% agreed, 10.9% strongly disagreed and 4.4% disagreed. Hence, majority of the respondents agreed that conflict resolution mechanism as contained in trade disputes act should always be used to resolve conflict.

4.5.3: Management should always honor collective agreement as a way of managing conflict

Items	Frequency	Percent
Disagree	44	5.6
Strongly Disagree	77	9.7
Undecided	0	0
Agree	535	67.7
Strongly Agree	134	17.0
Total	790	100.0

Source: Field Survey 2022

Table 4.5.3 presented the results of respondents. It showed that 17.0% strongly agreed, 57.7% agreed, 9.7% strongly disagreed and 5.6% disagreed. Hence, majority of the respondents agreed that management should always honor collective agreement as a way of managing conflict.

4.5.4: Regular interaction in form of joint consultation between workers and management is the best way to manage conflict in my workplace

Items	Frequency	Percent (%)
Disagree	29	3.7
Strongly Disagree	70	8.9
Undecided	69	8.7
Agree	447	56.6
Strongly Agree	175	22.2
Total	790	100.0

Source: Field Survey 2022

Table 4.5.4 presented the results of respondents on whether regular interaction in form of joint consultation between workers and management is the best way to manage conflict in my workplace. The results showed that 22.2% strongly agreed, 56.6% agreed and 8.9% strongly disagreed. Hence, majority of the respondents agreed that regular interaction in form of joint consultation between workers and management is the best way to manage conflict in the workplace

4.5.5: Regular upward review of workers' salaries is the only way to avoid and manage conflict in my workplace

Items	Frequency	Percent
Disagree	46	5.8
Strongly Disagree	72	9.1
Undecided	0	0
Agree	531	67.2
Strongly Agree	141	17.8
Total	790	100.0

Source: Field Survey 2022

Table 4.5.5 presented the results of respondents on the statement regular upward review of workers' salaries is the only way to avoid and manage conflict in my workplace. It was seen that 17.8% strongly agreed, 67.2% agreed, 9.1% strongly disagreed and 5.8% disagreed. Hence, majority of the respondents agreed that regular upward review of workers' salaries is the only way to avoid and manage conflict in my workplace.

4.4 HYPOTHESES TESTING

4.4.1 Hypothesis One:

Ho: There are no factors that are responsible for industrial conflict in the public healthcare sector

Correlations

			factors that are responsible for industrial conflict	smooth operation of government hospitals
Spearman's rho	factors that are responsible for industrial conflict	Correlation coefficient	1.000	0.719**
		Sig (2-tailed)		.060
		N	790	790
	smooth operation of government hospitals	Correlation coefficient	0.719**	1.000
		Sig (2-tailed)	.060	
		N	790	790

Source: Field Survey 2022

The result above indicated that there is a strong positive correlation between factors that are responsible for industrial conflict and smooth operation of government hospitals with correlation coefficient "r" being 0.719. Therefore, the relationship or association between factors that are

responsible for industrial conflict and smooth operation of government hospitals is strong. Also, the significant value (sig 2- tailed) “0.060” is higher than the p-value (p-value = 0.05). This implies that the strong relationship observed between the two variables is not significant. Hence, null hypothesis is accepted. That is, there are no factors that are responsible for industrial conflict in the public healthcare sector.

4.4.2 Hypothesis Two

Ho: There is no significant correlation between industrial conflict and smooth operation of government hospitals

Correlations

			industrial conflict	smooth operation of government hospitals
Spearman's rho	industrial conflict	Correlation coefficient	1.000	0.645*
		Sig (2-tailed)		.092
		N	790	790
	smooth operation of government hospitals	Correlation coefficient	0.645*	1.000
		Sig (2-tailed)	.092	
		N	790	790

Source: Field Survey 2022

The result above indicated that there is a moderate positive correlation between industrial conflict and smooth operation of government hospitals with correlation coefficient “r” being 0.645. Therefore, the association between industrial conflict and smooth operation of government hospitals is moderate. However, the significant value (sig 2- tailed) “0.092” is higher than the p-value (p-value = 0.05) which indicated that the moderate relationship observed between the two variables is not significant. To this effect, null hypothesis is accepted, which

means, there is no significant correlation between industrial conflict and smooth operation of government hospitals.

4.4.3 Hypothesis three:

Ho: There is no way the challenges of industrial conflict can be managed positively in the Nigeria health system

Correlations

			challenges of industrial conflict	smooth operation of government hospitals
Spearman's rho	challenges of industrial conflict	Correlation coefficient	1.000	0.659
		Sig (2-tailed)		.181
		N	790	790
	smooth operation of government hospitals	Correlation coefficient	0.659	1.000
		Sig (2-tailed)	.181	
		N	790	790

Source: Field Survey 2022

The result above indicated that there is a moderate positive correlation between challenges of industrial conflict and smooth operation of government hospitals with correlation coefficient “r” being 0.659. Therefore, the relationship or association between smooth operation of government hospitals is relatively moderate. However, the significant value (sig 2- tailed) 0.181 is higher than the p-value (p-value = 0.05) which indicated that the result is not significant. This implies that the moderate positive relationship observed between the two variables is not significant. Hence, null hypothesis is accepted. This mean that there is no way the challenges of industrial conflict can be managed positively in the Nigeria health system.

4.5 DISCUSSION OF THE FINDINGS

In this section, the findings from the survey analysis of the Topic “Industrial Conflict In The Health Sector: Its Challenges, Prospects And Solutions: A Study Of Federal Neuropsychiatric Hospital, Yaba” would be discussed.

The general objective of this research is to examine industrial conflict in the health sector; its challenges, prospects and solutions in Federal Neuropsychiatric Hospital, Yaba. The general objective is further sub-divided into three specific objectives. The specific objectives drawn from these general objectives are to: identify the factors that are responsible for industrial conflict in the public healthcare system, ascertain the implications of industrial conflict in the government hospital and determine how to manage the challenges of industrial conflict for positive impact in the Nigeria health system.

The research adopted descriptive survey design in order to get information from selected respondents through structured questionnaire on the subject matter which is to examine industrial conflict in the health sector; its challenges, prospects and solutions in Federal Neuropsychiatric Hospital, Yaba. The resulting data collected from 790 respondents were then analyzed using descriptive statistics and correlation analysis which arrive at our findings. The findings from the study are presented as follows.

The research investigated the relationship between factors that are responsible for industrial conflict and smooth operation of government hospitals. The findings showed that there is no significant relationship between factors that are responsible for industrial conflict and smooth operation of government hospitals. However, the relationship between the two variables is strong but not significant. According to the study made by Darel (2003), it was averred that in the public hospitals, most healthcare workers prioritize their goals at the expense of organization goals which lead to poor services delivery.

Researcher also investigated the link between industrial conflict and smooth operation of government hospitals. Findings showed that there is a positive and moderate relationship between industrial conflict and smooth operation of government hospitals. This implies that the industrial conflict has moderate association and may also have moderate influence on smooth

operation of government hospitals. Also, this relationship was found to be statistically insignificant. However, the research Ogunbameru (2006) asserted that this conflict can be informal when there is expression of behavioural inadequacy from the healthcare worker in the process of delivery his or her responsibility.

Lastly, the researcher verified the relationship between the challenges of industrial conflict and smooth operation of government hospitals. There was a positive but no significant relationship observed between challenges of industrial conflict and smooth operation of government hospitals. On this basis, null hypothesis was accepted. From other authors' findings, Brinkert (2010) noted that unmanaged conflict is costly not only in monetary terms and not only for the healthcare personnel but can extend to affect the users.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.0 Introduction

In this section of the study, the researcher provides a summary of the findings derived from the study, the conclusion of the study, and recommendation for the study.

5.1 SUMMARY

The focus of the theory was Industrial conflict in the health sector: its challenges, prospects and solutions: a study of Federal Neuropsychiatric Hospital, Yaba-Lagos. The objectives of the study were:

- To identify the factors that are responsible for industrial conflict in public health care system
- To ascertain the implication of industrial conflict in government hospital
- To determine how to manage the challenges of industrial conflict for positive impact in Nigeria health system

In response to whether poor wages and salaries are the only root causes of workplace conflict in public health institution, the findings showed that majority of the respondents (67.3%) agreed that poor wages and salaries are the only root causes of workplace conflict in public health institution. Hence, majority strongly agreed that poor wages and salaries are the only root causes of workplace conflict in public health institution.

In response to whether absence of regular promotion of staff has led to conflict in my workplace. results showed that majority of the respondents (65.4%) agreed that absence of regular promotion of staff has led to conflict in my workplace. Although, 17.7% strongly disagreed that

absence of regular promotion of staff has led to conflict in my workplace, it is concluded that absence of regular promotion of staff has led to conflict in my workplace.

As to whether failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict, findings proved that 12.8% strongly agreed, 76.6% agreed, 4.3% strongly disagreed and 6.3% disagreed to the statement. Hence, majority of the respondents agreed that failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict. In response to whether poor leadership style is a principal cause of conflict in my workplace, it was proved that 11.9% strongly agreed, 73.8% agreed, 11.0% strongly disagreed and 3.3% disagreed to the statement. Hence, majority of the respondents agreed that poor leadership style is a principal cause of conflict in their workplace.

In response to whether absence of proper conflict management is a root cause of major conflicts in my workplace. The table showed that majority of the respondents (78.0%) agreed that absence of proper conflict management is a root cause of major conflicts in my workplace.

In response to whether industrial conflict in my workplace will continue to affect labor and management relations, results proved that majority (40.9%) of the respondents agreed to the statement. Hence, industrial conflict in respondent's workplace will continue to affect labor and management relations

As to whether industrial conflict leading to work stop pays often reduces productivity of the employees, the response of the employees proved that 17.8% strongly agreed, 64.8% agreed, 11.8% strongly disagree and 5.6% disagreed. Hence, majority of the respondents agreed that industrial conflict leading to work stop pays often reduces productivity of the employees.

On the statement strikes in my workplace has led to the loss of lives of many patients. It was seen that 15.9% strongly agreed, 74.1% agreed, and 9.2% strongly disagreed. Hence, majority of the respondents agreed that strikes in my workplace has led to the loss of lives of many patients.

In response to whether training, job satisfaction and workplace motivation will continue to prevent workers from industrial conflict, it was proved that 11.8% strongly agreed, 69.9% agreed, 2.3% were undecided and 8.5% strongly disagreed to the statement. Hence, majority of the respondents agreed that training, job satisfaction and workplace motivation will continue to prevent workers from industrial conflict.

As to whether delivery of good health care services will not be realized in the country with industrial conflict in the health sector, the response of the employees proved that 13.5% strongly agreed, 66.1% agreed, 9.4% were undecided and 11.0% disagreed. Hence, majority of the respondents agreed that delivery of good health care services will not be realized in the country with industrial conflict in the health sector.

On whether social dialogue should be used regularly to manage conflict in my workplace, the results showed that 18.7% strongly agreed and 58.9% agreed. Hence, majority of the respondents strongly agreed that social dialogue should be used regularly to manage conflict in my workplace.

On the statement conflict resolution mechanism as contained in trade disputes act should always be used to resolve conflict. It was seen that 12.0% strongly agreed, 72.7% agreed, 10.9% strongly disagreed and 4.4% disagreed. Hence, majority of the respondents agreed that conflict resolution mechanism as contained in trade disputes act should always be used to resolve conflict.

On whether Management should always honor collective agreement as a way of managing conflict, results showed that 17.0% strongly agreed, 57.7% agreed, 9.7% strongly disagreed and 5.6% disagreed. Hence, majority of the respondents agreed that management should always honor collective agreement as a way of managing conflict.

On whether regular interaction in form of joint consultation between workers and management is the best way to manage conflict in my workplace. The results showed that 22.2% strongly agreed, 56.6% agreed and 8.9% strongly disagreed. Hence, majority of the respondents agreed that regular interaction in form of joint consultation between workers and management is the best way to manage conflict in the workplace

On the statement regular upward review of workers' salaries is the only way to avoid and manage conflict in my workplace. It was seen that 17.8% strongly agreed, 67.2% agreed, 9.1% strongly disagreed and 5.8% disagreed. Hence, majority of the respondents agreed that regular

upward review of workers' salaries is the only way to avoid and manage conflict in my workplace

Hypothesis one indicated that there is a strong positive correlation between factors that are responsible for industrial conflict and smooth operation of government hospitals with correlation coefficient "r" being 0.719. Therefore, the relationship or association between factors that are responsible for industrial conflict and smooth operation of government hospitals is strong. Also, the significant value (sig 2- tailed) "0.060" is higher than the p-value (p-value = 0.05). This implies that the strong relationship observed between the two variables is not significant. Hence, null hypothesis is accepted. That is, there are no factors that are responsible for industrial conflict in the public healthcare sector.

Hypothesis two indicated that there is a moderate positive correlation between industrial conflict and smooth operation of government hospitals with correlation coefficient "r" being 0.645. Therefore, the association between industrial conflict and smooth operation of government hospitals is moderate. However, the significant value (sig 2- tailed) "0.092" is higher than the p-value (p-value = 0.05) which indicated that the moderate relationship observed between the two variables is not significant. To this effect, null hypothesis is accepted, which means, there is no significant correlation between industrial conflict and smooth operation of government hospitals.

Hypothesis three indicated that there is a moderate positive correlation between challenges of industrial conflict and smooth operation of government hospitals with correlation coefficient "r" being 0.659. Therefore, the relationship or association between smooth operation of government hospitals is relatively moderate. However, the significant value (sig 2- tailed) 0.181 is higher than the p-value (p-value = 0.05) which indicated that the result is not significant. This implies that the moderate positive relationship observed between the two variables is not significant. Hence, null hypothesis is accepted. This mean that there is no way the challenges of industrial conflict can be managed positively in the Nigeria health system.

5.1 CONCLUSION

In conclusion, where workers and employers meet in the name of work, conflict is inevitable. Y This stems from the fact that the desires, hopes, focus and goals of the two parties are inversely

related. In response to whether poor wages and salaries are the only root causes of workplace conflict in public health institution, the findings showed that majority of the respondents (67.3%) agreed that poor wages and salaries are the only root causes of workplace conflict in public health institution. Hence, majority strongly agreed that poor wages and salaries are the only root causes of workplace conflict in public health institution.

In response to whether absence of regular promotion of staff has led to conflict in my workplace. results showed that majority of the respondents (65.4%) agreed that absence of regular promotion of staff has led to conflict in my workplace. Although, 17.7% strongly disagreed that absence of regular promotion of staff has led to conflict in my workplace, it is concluded that absence of regular promotion of staff has led to conflict in my workplace.

As to whether failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict, findings proved that 12.8% strongly agreed, 76.6% agreed, 4.3% strongly disagreed and 6.3% disagreed to the statement. Hence, majority of the respondents agreed that failure on the part of management to honor collective agreement is a fundamental reason for my workplace conflict. In response to whether poor leadership style is a principal cause of conflict in my workplace, it was proved that 11.9% strongly agreed, 73.8% agreed, 11.0% strongly disagreed and 3.3% disagreed to the statement. Hence, majority of the respondents agreed that poor leadership style is a principal cause of conflict in their workplace.

In response to whether absence of proper conflict management is a root cause of major conflicts in my workplace. The table showed that majority of the respondents (78.0%) agreed that absence of proper conflict management is a root cause of major conflicts in my workplace.

In response to whether industrial conflict in my workplace will continue to affect labor and management relations, results proved that majority (40.9%) of the respondents agreed to the statement. Hence, industrial conflict in respondent's workplace will continue to affect labor and management relations

Hypotheses one indicated that there is a strong positive correlation between factors that are responsible for industrial conflict and smooth operation of government hospitals with correlation coefficient "r" being 0.719. Therefore, the relationship or association between factors that are responsible for industrial conflict and smooth operation of government hospitals is strong. Also, the significant value (sig 2- tailed) "0.060" is higher than the p-value (p-value = 0.05). This

implies that the strong relationship observed between the two variables is not significant. Hence, null hypothesis is accepted. That is, there are no factors that are responsible for industrial conflict in the public healthcare sector.

Hypotheses two indicated that there is a moderate positive correlation between industrial conflict and smooth operation of government hospitals with correlation coefficient “ r ” being 0.645. Therefore, the association between industrial conflict and smooth operation of government hospitals is moderate. However, the significant value (sig 2- tailed) “0.092” is higher than the p-value (p -value = 0.05) which indicated that the moderate relationship observed between the two variables is not significant. To this effect, null hypothesis is accepted, which means, there is no significant correlation between industrial conflict and smooth operation of government hospitals.

Hypotheses three indicated that there is a moderate positive correlation between challenges of industrial conflict and smooth operation of government hospitals with correlation coefficient “ r ” being 0.659. Therefore, the relationship or association between smooth operation of government hospitals is relatively moderate. However, the significant value (sig 2- tailed) 0.181 is higher than the p-value (p -value = 0.05) which indicated that the result is not significant. This implies that the moderate positive relationship observed between the two variables is not significant. Hence, null hypothesis is accepted. This mean that there is no way the challenges of industrial conflict can be managed positively in the Nigeria health system. From the foregoing, workplace conflict is a feature of Federal Neuropsychiatric Hospital, Yaba-Lagos. Thus, concerted efforts must be made by the management of manage such conflict successfully in order to enhance effective jb performance among workers and high productivity in the workplace.

5.3 RECOMMENDATIONS

- The management of Federal Neuropsychiatric Hospital, Yaba-Lagos should give utmost priority to the welfare of the workers in terms of regular payment of wages and salaries, availability of fringe benefits, payment of arrears and bonuses together with other entitlements to prevent workplace conflict

- The use of social dialogue is critical between the management and workers especially when disputes emerge. An atmosphere of mutual interaction must be created to ensure co-operation while conflicting issues are harmonized for peace to reign
- Collective bargaining must be embraced by the management and workers which is a fundamental mechanism to resolve inherent structural conflict. The structural nature of the conflict is tantamount to industrial democracy that allows workers to have a say in decisions that affect their lives in work organisation
- Terms and conditions of employment of workers must be improved upon by the management in order to reflect the current economic realities of the country.
- The effective use of communication strategies and motivational tools should be embraced by the management of Federal Neuropsychiatric Hospital, Yaba-Lagos to remove bickering and disharmony of interest between workers and management.
- The management style of Federal Neuropsychiatric Hospital, Yaba-Lagos must be democratic and participatory. This will prevent dictatorship and unfair labour practices that often instigate workplace conflict
- There must be positive attitude on the part of the management of Federal Neuropsychiatric Hospital, Yaba-Lagos towards labour unions in their workplace in order to create a platform where basic issues that could have brought workplace conflict are diligently channeled towards the management.

5.4 CONTRIBUTION TO KNOWLEDGE

- The study has contributed to knowledge in the area of gap in knowledge created. Past studies have examined industrial conflict within the contexts of leadership, labour unions, labour policy, work life balance, management styles, however, little or nothing has been done in the area of industrial conflict relative to its challenges, prospects and solutions.

- In the area of methodology of the research work, it has contributed to knowledge. This is manifested in the area of type of research design, sampling technique, method of data collection and data analysis method
- The study has brought to the fore how most of the public work organisations take the issue of workers' welfare with levity. This is an eye opener to the government to formulate policy that can stem the waves of industrial conflict in both private and public work organisations.
- The study will help the management of Federal Neuropsychiatric Hospital, Yaba-Lagos to formulate good policy on industrial conflict management that can accelerate high productivity in the workplace.
- The study will assist other researchers to understand the causes, effects and solutions to industrial conflict on work organisations, workers and country and and how to carry out further research work in this area

5.5 SUGGESTIONS FOR FURTHER STUDIES

Further studies can focus on industrial conflict in Banking sector relative to manufacturing sector for the purpose of identifying the differences and similarities between them. It can also focus on comparative analysis of industrial conflict in public sector relative to private sector for people to assess the differences between the two sectors. In addition, further studies should be directed towards industrial conflict construction industries or oil industries or other service oriented industries where new facts can emerge for future studies.

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