Managing Conflict through Competent Communication

Conflict is an interactive process between interdependent people who perceive incompatibility.

Conflict in healthcare is particularly challenging due to (1) a complex, ambiguous, and dynamic task environment, (2) different training, salary structures, power differentials, interdependent roles, and competing missions, and (3) strong professional identification and weak organizational identification.

Conflict is pervasive in veterinary medicine and left unchecked, it can lead to stress, burnout, low job satisfaction, low commitment, low quality of patient care, medical errors, and turnover.

Conflict is related to individual, interpersonal, and organizational factors. Common causes of conflict include diverse values/attitudes, different agendas, needs, or expectations, poor communication, lack of clear expectations, ambiguous roles, limited time and resources.

Participants in conflict can approach it from one of three broad approaches: avoidance, distributive, or integrative.

(1) Avoidance is common as many individuals tend to avoid, normalize, and tolerate conflict. Avoidance minimizes explicit discussion and instead, only indirectly addresses the conflict. This approach is characterized as win-lose because one party in the conflict “wins” or gets what they want, while the other party “loses” or does not get what they want. Specific avoidance conflict management styles include: Avoidance, accommodation

(2) The distributive approach is individualistic and competitive. This approach is characterized as win-lose because one party in the conflict “wins” or gets what they want, while the other party “loses” or does not get what they want. In contrast to avoidance, the conflict is explicitly addressed, but it is done so in an attempt to win at all costs. Specific distributive conflict management styles include: Competition

(3) An integrative approach is more cooperative and parties in conflict tend to pursue a mutually favorable resolution. This approach is characterized as either win-win or lose-lose. Sometimes, both parties win and have their needs met without giving anything up, and other times, both parties lose because they each give something up. Specific integrative conflict management styles include: Collaboration, compromise

Follow the five keys to conflict resolution:

(1) Acknowledge what you hear – Find the grain of truth and acknowledge it. Reflect the other’s experience for what it is without judgement.
(2) Explain intent and invite consent – Provide an invitation to problem solve.
(3) Ask open-ended questions to find common ground.
(4) Express yourself clearly and congruently - Summarize and propose a solution.
(5) Express appreciation – Thank the other party for feedback and cooperation to convey respect and strengthen the relationship.

Throughout the interaction, communicate competently and ethically:
• Do express your disagreement
• Stick with the issue at hand
• Use rhetorical sensitivity
• Disagree with the idea, don’t criticize the person
• Base your disagreement on evidence and reasoning
• Express needs, feelings, and wants
• React to disagreement in a spirit of inquiry rather than defensiveness
• Listen
• Empathize
• If someone persists in attacking you. Stay calm and speak reasonably
• Use an integrative rather than an avoidance or distributive approach

Consider the following approaches when working with clients:

• Refocus – Bring the conversation back to the patient’s condition and advocate for the patient
• Reconcile – Attempt to resolve any lingering past issues
• Reflect – Listen for clarity and understanding; be mindful and go in without an agenda
• Reframe – Help clients understand the patient’s condition and translate medical information into what it would mean for the patient
• Refer – Elicit support of another individual

With particularly angry clients:

• Get them into a room
• Listen and take notes and listen some more
• Don’t take it personally
• Collect the facts about the situation and why the person is upset
• Change their perception. You may not agree with the client’s feelings but that does not make them wrong. You must change the perception and correct the events that led to that feeling.
• Be positive and assertive. Once they have told their side, confidently and diplomatically state your position. If you project authority, the client is more likely to respect you. Don’t become mad or aggressive.
• Use bridging technique to get from where you don’t want to be to where you do want to be. “I’m sorry, I don’t know what happened during that call; what I can tell you is…” “I know that’s what you feel happened; in our experience we…”
• Apologize and correct the problem. If you/the clinic/service did not do the very best with a client, apologize and let them know you will correct the problem.

References:


Wright & Nicotera 2016