

Conflict Management Diversity Among Faculty in a Private Medical University of Pakistan

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ABSTRACT

Objective: To evaluate the different conflict management styles among health educators at a private medical university in Pakistan

Study Design: Cross-sectional

Place and Duration of Study: Foundation University School of Health Sciences, Islamabad Pakistan from May to Jul 2024.

Methodology: Faculty from MBBS, BDS, Physical Therapy, and Nursing programs participated. Data was collected using a validated self-reported questionnaire, including demographic details and the Rahim Organizational Conflict Inventory-II. Descriptive statistics were calculated, and Chi-square tests were used for associations between categorical variables. The Shapiro-Wilk test assessed the normality of experience, and the Kruskal-Wallis test was applied due to non-normal distribution ($p < 0.001$).

Results: The study included 130 faculty members, predominantly female (78%). Four out of five conflict management styles were used. The collaborating style was the most common (66%), followed by avoiding (16%), compromising (13%), and accommodating (5%). None of the participants used the competing style. Age, experience, and discipline significantly influenced the preference for conflict management styles, with p -values of 0.039, 0.004, and 0.001, respectively. Gender, education, and designation showed no significant influence on the choice of conflict management style, with p -values of 0.203, 0.417, and 0.262 respectively.

Conclusion: Health educators mainly use the collaborative conflict management style. A smaller number prefer avoiding or compromising, while none chose the competing style. Age, experience, and discipline significantly impact conflict management preferences, whereas gender, education and designation do not have any influence.

Keywords: Conflict, Conflict management style, Diversity, Education, Faculty, Health educators.

How to Cite This Article: Mirza TI, Shukr I. Conflict Management Diversity Among Faculty in a Private Medical University of Pakistan. *Pak Armed Forces Med J* 2026; 76(1): 105-109. DOI: <https://doi.org/10.51253/pafmj.v76i1.12438>

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INTRODUCTION

Conflict is a normal aspect of organizational life especially in academic settings, where people with different aims, ideas and point-of-view are expected to work together.¹ Similarly faculty members frequently experience challenges associated with differences in expectations and communication styles as well as competing priorities.² Unresolved conflicts may impact teamwork and effectiveness diminishing productivity as well as creating a distrusting work environment.³ Conflicts if unresolved over time can reduce faculty job satisfaction, institutional loyalty and lead to higher turnover.⁴

Unresolved conflict is a major set of issues in higher education institutions worldwide and has been recognized as having significant impact on job satisfaction and performance outcomes in many workplaces.⁵ Research in Western countries has also

shown that conflict management strategies are important for collaboration and innovation within academic institutions.⁶ These findings also highlight the importance of employing structured tools to mitigate conflicts and create healthy work environments.⁷

While conflict resolution has received much needed attention in higher education, the same is not true for South Asia.^{8,9} Some research has indicated that unaddressed conflicts within educational institutions can discourage job satisfaction among the faculty and impede professional growth but scant data is available on conflict-resolution practice in higher education with a special emphasis to Pakistani Institutes.¹⁰

The present study was carried out to investigate the prevalence of conflict management styles among faculty members in a private medical university. This study seeks to analyze how faculty members approach conflicts to gain a better if not clearer understanding of the relationship between conflict management and its consequences with respect to both well-being among faculty as well as health of institutions involved.

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Received: 08 Jul 2024; revision received: 25 Oct 2024; accepted: 31 Oct 2024

METHODOLOGY

This descriptive cross-sectional study aimed to identify the prevalent conflict management styles among faculty members at FUSH Islamabad, Pakistan from May to July 2024. The sample size was calculated using the Rao Soft software with a 95% confidence interval and a 5% margin of error. Based on a total population of 227 faculty members at FUSH with an assumed population proportion of 50%, the required sample size was calculated to be 143 participants. However, a total of 130 faculty members provided consent to participate in the study.

Inclusion Criteria: Faculty from the departments of Basic Sciences of MBBS, Dentistry, Physical Therapy and Nursing with over one year of work experience were included.

Exclusion Criteria: Faculty with less than one year of experience and clinical faculty were excluded.

Data collection was conducted after receiving ethical approval (No. FF/FUMC/215-436/Phy/24-05-24) from the university's Ethics Committee. The validated Rahim Organizational Conflict Inventory-II, a 28-item questionnaire was used to assess five conflict management styles: Collaborative, Accommodating, Competing, Avoiding, and Compromising. Responses were rated on a 5-point Likert scale and scores were averaged to identify the preferred conflict management style. Data collection included online submissions via Google Forms and physical submissions along with demographic information.

Data analysis was performed using the Statistical Package for Social Sciences (SPSS) version.²⁵ Descriptive statistics including frequencies and percentages were calculated to identify the most prevalent conflict management styles. Frequency distributions and bar charts were generated for all variables to facilitate data visualization.

Demographic variables except for years of experience were treated as categorical. Due to the small sample size and the violation of the assumption of minimum expected cell counts required for the chi-square test, Fisher's Exact Test was employed to calculate the *p*-value, ensuring a more accurate assessment of the association between the categorical variables.

Since years of experience was a continuous variable, its normality was assessed via the Shapiro-Wilk test, which indicated non-normal distribution (*p*<0.001). As a result, the non-parametric Kruskal-

Wallis test was applied to assess the relationship between years of experience and conflict management style. This test is suitable for comparing medians across groups when normality assumptions are violated. A *p*-value of less than 0.05 was considered statistically significant.

RESULTS

A total of 130 faculty members out of 227 consented to participate in the study, yielding a response rate of 57%. The majority of participants were female (78%). Table-I presents the baseline demographic characteristics of the study participants. Most faculty members were aged between 25-35 years (41%), with the largest group belonging to the MBBS faculty (57%). Participants had diverse educational backgrounds with 35% holding a Bachelor's degree and 31% having completed a Master's. A significant portion of the faculty had 1-10 years of experience (59%), and the most common designation was Lecturer (51%).

Table-I: Baseline Characteristics of Participants and Conflict Management Styles (n=130)

Characteristics	n(%)
Gender: Male	29 (22)
Female	101(78)
Age: 25-35	54(41)
36-45	36(28)
46-55	26(20)
56-65	14(11)
Institute: FUMC(MBBS)	74(57)
FUCD(BDS)	19(15)
FUCP (Physical Therapy)	24(18)
FUCN(Nursing)	13(10)
Educational level: Bachelor	45(35)
Masters	40(31)
FCPS	38(29)
PhD	7(5)
Experience: 1-10	77(59)
11-20	41(31.5)
21-30	10(8)
41-50	2(1.5)
Designation: Lecturer	66(51)
Senior Lecturer	4(3)
Assistant Professor	30(23)
Associate Professor	9(7)
Professor	21(16)
Conflict Management Styles	
Collaborative	86(66)
Avoiding	21(16)
Compromising	17(13)
Accommodating	6(5)
Competing	0(0)

Conflict Management Diversity Among Faculty

The collaborative style was the most frequently used with 66% of the faculty selecting it as their dominant approach. The avoiding style was the second most common at 16%, followed by compromising at 13%. Accommodating was chosen by 5% of respondents while none reported using the competing style. The response rates by discipline were as follows: 64% for MBBS faculty, 28% for Dentistry, 80% for Physical Therapy and 100% for Nursing. Table-II shows the results of statistical analysis.

participants from FUMC predominantly favoring the collaborative style ($p = 0.001$). In contrast, no significant association was found between gender, educational level, designation and the preferred conflict management style, with p -values of 0.203, 0.417 and 0.262, respectively.

Table-III shows that the most common conflict management style is Collaboration, with a median score of 1 and an interquartile range (IQR) of 3. This

Table -II: Association Between Demographic Variables and Conflict Management Styles (n=130)

Variables	CONFLICT MANAGEMENT STYLES				p-value
	Collaborative	Accommodating	Compromising	Avoiding	
Gender, n(%)					
Male	19(65.5)	2(6.9)	1(3.4)	7(24.1)	0.203
Female	67(66.0)	4(4.0)	16(15.8)	14(13.9)	
Education, n(%)					
Bachelors	28(62.0)	3(6.7)	7(15.6)	7(15.6)	0.417
Masters	26(65.0)	2(5.0)	5(12.5)	7(17.5)	
FCPS	29(76.0)	1(2.6)	2(5.3)	6(15.8)	
PhD	3(43.0)	0	3(42.9)	1(14.3)	
Discipline, n(%)					
FUMC	59(80.0)	3(4.0)	4(5.0)	8(11.0)	0.001
FUCD	10(53.0)	0	5(26.0)	4(21.0)	
FUCP	7(29.0)	2(8.0)	8(33.0)	7(29.0)	
FUCN	10(77.0)	1(8.0)	0	2(15.0)	
Age, n(%)					
25-35	28(51.9)	4(7.4)	12(22.2)	10(18.5)	0.039
36-45	23(63.9)	1(2.8)	4(11.1)	8(22.2)	
46-55	24(92.3)	0	0	2(7.7)	
56-65	11(78.6)	1(7.1)	1(7.1)	1(7.1)	
Designation, n(%)					
Lecturer/Demonstrator	37(56.1)	5(7.6)	11(16.7)	13(19.7)	0.262
Senior lecturer	4(100.0)	0	0	0	
Assistant Professor	19(63.3)	0	5(16.7)	6(20.0)	
Associate Professor	9(100.0)	0	0	0	
Professor	17(81.0)	1(4.8)	1(4.8)	2(9.5)	

Collaborative was the dominant conflict management style across all disciplines with 80% of MBBS faculty, 77% of Nursing faculty and 53% of Dentistry faculty favoring it. The Physical Therapy faculty, conflict management preferences were more diverse with 33% favoring the compromising style while both the collaborative and avoiding styles were equally preferred by 29% of the respondents. Age, discipline and years of experience were found to significantly influence the choice of conflict management style. Participants from the 46-55 age group were more likely to use the collaborative style ($p = 0.039$) while discipline also had a significant impact, with

indicating a strong overall preference for collaboration among participants, though there is some variability. There is a statistically significant difference in conflict management styles based on years of experience ($p = 0.004$). The findings suggest that individuals with greater experience are more likely to prefer collaboration, while those with less experience tend to favor avoiding conflicts.

DISCUSSION

This study showed that among the 130 participants, 66% preferred the "Collaborative" approach (mean = 4.20, SD \pm 0.5), emphasizing open

problem-solving, fairness, and transparency.¹¹⁻¹² The "Avoiding" style was the second most common 16% (mean=3.5,SD±0.7), reflecting a tendency to evade conflict which may lead to unresolved issues.¹³ The "Compromising" style(mean=3.0,SD±0.8) was adopted by 13% , focused on mutual concessions to resolve conflicts.¹⁴ Only 5% of respondents used the "Accommodating" style(mean=3.6,SD±0.5), while none opted for the "Competing" style, indicating a low preference for strategies that emphasize personal gain at the expense of others.¹⁵

Most of the literature focuses on conflict management among nurses, with fewer studies addressing other allied health sciences. A study by Khalid Alshehri in Saudi Arabia found similar results with the majority of academic leaders favoring collaboration (mean=3.85, SD±1.11).¹⁶⁻¹⁷ Interestingly compromising was the second most common style in that study unlike our findings where avoiding ranked second. Avoidance as noted in a qualitative study by Arshad *et al* in Pakistan, is often perceived as an appealing strategy in overwhelming conflicts or when resolution methods are uncertain.¹⁸ This aligns with our finding that avoidance is commonly used by faculty when managing interpersonal conflicts.

Table-III Comparison of Conflict Management Styles Across Different Years of Experience (N=130)

Parameter	Median (IQR)		p-value	
Years of Experience	8 (10)		0.004	
Conflict Management Style	1 (3)			
Frequencies by Years of Experience n(%)				
Years of Experience	Collaboration	Accommodating	compromising	avoiding
> Median (n=60)	45(75.0)	3(5.0)	7(11.7)	5(8.3)
≤ Median (n=70)	41(58.6)	3(4.3)	10(14.3)	16(22.9)

In a study by Sportsman *et al.* on health professionals in the USA, compromising was the most prevalent style (mean=4.5, SD±0.6) followed closely by avoiding.¹⁹ This is consistent with international findings but differs from our sample where collaboration was the dominant style. The competing style, which no participants selected in this study, has been shown in prior research to be infrequently used in educational settings due to its potential to create stress and hinder interpersonal relationships.²⁰

Our study also revealed that faculty members' experience and age significantly influenced their conflict management preferences. Senior faculty members with more than ten years of experience

predominantly used the collaborative style, likely due to their experience in fostering interpersonal relationships. This contrasts with junior faculty, who also employed collaborative strategies but were more likely to use avoiding and compromising styles. These findings are in line with a study by Filiz Kantek on nurse managers, which showed that senior staff, particularly those nearing retirement tend to favor the accommodating style.²¹ According to Manzoor et al. individuals' responses to conflict are shaped by their past behaviors and experiences which are influenced by their perceptions and understanding of the organizational environment. Less experienced individuals often approach conflicts more impulsively, guided by their immediate perceptions.²²

Gender differences in conflict management styles were minimal in this study, with both male and female faculty members showing a strong preference for collaboration. This finding is consistent with several previous studies²³ although there is conflicting evidence in the literature regarding gender differences.²⁴ While some studies suggest that women prefer non-confrontational styles and men lean toward competitive strategies, our findings do not support this distinction possibly due to the academic setting in which both genders prioritize collaboration.

Our study is among the first to explore conflict management styles among health educators in Pakistan, setting the stage for future research on how these styles impact faculty performance and student outcomes. This research contributes to a deeper understanding of conflict management in educational environments and provides a foundation for future improvements in this area.

LIMITATION OF STUDY

This study has several limitations. First, it was conducted in a single institution, which may limit the generalizability of the findings to other academic settings. Second, the relatively small sample size of 130 participants may not be fully representative of the broader population of health educators. Third, the reliance on self-reported data introduces the possibility of response bias, as participants may have reported what they perceived as socially desirable conflict management styles rather than their actual behaviors. Despite these limitations, the study provides valuable insights into the conflict management preferences of experienced health educators and offers a foundation for future research in similar educational contexts.

Further research with larger, multi-institutional samples and longitudinal designs is recommended to confirm these findings and explore their broader applicability.

CONCLUSIONS

This study indicates that health educators predominantly favor collaborative conflict management styles, with only a few respondents leaning towards avoiding or compromising styles and none selecting the competing style. Factors such as age, experience and discipline significantly influence the choice of conflict management approaches. The gender, designation and educational status did not notably impact style preference. These findings are crucial for developing targeted interventions to enhance conflict management skills among educational professionals ultimately fostering a healthier work environment, improving work engagement and promoting effective teamwork.

ACKNOWLEDGEMENT

We are grateful to the study participants.

Conflict of Interest: None.

Funding Source: None.

Authors' Contribution

Following authors have made substantial contributions to the manuscript as under:

TIM & IS: Data acquisition, data analysis, critical review, approval of the final version to be published.

Authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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