# Inter-Professional Conflicts And Declining Employees' Productivity In The Health Sector: A Study Of Benue State University Teaching Hospital (BSUTH) Makurdi

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## Abstract

Inter-professional conflict is the misunderstanding, disagreement, antagonism, and squabbles that occur among staffs in a workplace. This conflict becomehas a common occurrence health sector. Thus, this study aimed to examine and ascertain task conflict, relationship conflict and process conflicts and its influence on employees' decliningproductivityrate. A total of 303 healthcare professionals comprising of males and females responded to a fourteen items self-reported questionnaire which has a psychometric reliability coefficient of 0.845. Results of the analysis obtained at the significance levelp> 0.05 shows that; task conflictshave a significantly negative influence on employees' productivity. Relationship conflict also showed a significantly negative influence on employees in productivity. Similarly, process conflict showed a significantly harmful influence on employees in productivity in Benue State University Teaching Hospital, Makurdi. Theseresults supported the evidence from previousstudiesthat task conflict, relationship conflict left uncontrolled reduces employees' productivity rate. Consequently, it is pertinent for theBenue State University Teaching Hospital management should constantly adoptrobust conflict management methodsinaddressingeffectively emerginginter-professionals conflict among the healthcare professionalsthat will guarantee a harmonious working relationship and enhance services delivery in the interest of the patients.

**Keywords:** Inter-professional conflict, Task conflict, Relationship conflict, Process Conflict, Employees' Productivity

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# I. Introduction

Conflict is an unavoidable situation to experience in human relationshipsand it often occursin thefamily, churches, institutions and corporate organizational workplaces. Many authors have described conflict as an antagonistic state of disagreement, confusion and opposition that arisesbetween or within groups of people in an environment due to misunderstandings regarding perceived differences in opinions, and suspected intent of another to wittingly(directly or indirectly)deny or suppress, the others' interest or need (Anam, Chepsiror, Muthee, Kirui, &Wasike, 2024; Patzak, 2012; Elenwo, 2020; Rahim 2002). Conflict has beendescribed by some authors as an integral process or a functional element in the dynamics of teamand organizational lifecycle (Medina, Munduate, Dorado, Martínez, & Guerra, 2005; Kulbaciauskaite. 2021).

In boththe public and private sectors, conflict is part of organizational life anditoften occurs between individuals, between the individual and a group, and between groups (Ndulue & Ekechukwu, 2016). Potentially, occurrence of workplace conflicts known to disrupt work processes and flows, affects performance and lead to employee absenteeism (Anam, Chepsiror, Muthee, Kirui, & Wasike, 2024) which consequently affects productivity. Employee productivity is defined as the employees' outcome or contribution in reference to the attainment of set goals (Osad&Osas, 2013). Conflictbe it any kind, irrespective of the reasons behind it, is an unfriendly and unpleasant (Katz & Flynn, 2013) situation that often disadvantageous to bothparties involved. However, some scholars observed that though workplace conflicts are unavoidable; their impact on the organization in some cases might lead topositive functional or negative dysfunctional outcomes (Bingham 2020; Kulbaciauskaite. 2021).

Unhealthy conflict can induce resistance to change, promotes rivalry in interpersonal relations, distrust, instills a feeling of defeat, or widens the rift of misunderstanding and heighten tension in the organization

(Ndulue & Ekechukwu, 2016). Notwithstanding, some conflictsituations encourages creativity; elicit changes in old conditions, and dealings with interpersonal differences as well aspromotingpositive change in the organizational unpopular policies and decisions (Olang, 2017). Conflict is a common situation in organizations including the healthcare setting. It is often unavoidable because the employees in an organization coming from different professional backgroundand workingsusceptible to experience some kinds of misunderstanding with one another (Al-Khasawneh&Khadar, 2021). Basically, differences in professional's backgrounds, orientation and perception are major reasonsthat are typically stimulatinghealthcare professional'sconflicts the Nigeria healthcare institutions.

Fundamentally, inter-professional conflict may be a functional element in organizations like hospitals; it often escalates to undesirable levels due mainly to complexities in the Nigerian healthcare systems. This always negatively impacts the quality of communication and decision-making, which results in undesirable patient treatment outcomes, reduced patient satisfaction, increased medical errors, job dissatisfaction, burnout and employee turnover and lack of retention of direct patient care employees (Al-Khasawneh&Khadar, 2021; Al-Shourah, 2015). Particularly disturbing is the fact, the public hospitals in Nigeria are periodically faced with recurrent conflicts in which doctors, nurses, clinical officers, disgruntled patients and many other stakeholders are involved. Unfortunately still, Teaching Hospitals as apex healthcare delivery institutions where healthcare services are supposed to be provided uninterrupted, also fall victims to inter-professional conflict. This regularly keeps interfering with services delivery to patients who rely on the healthcare system support. The undesirable impact of unresolved conflict, especially among the professional teams in healthcare institutions of this status, cannot be overemphasized. The incessant incidence of conflict in tertiary healthcare settings is significantly higher, compared to others, because of multifaceted factors. In view of this observed unhealthy development in these apex hospital institutions, this study seeks to ascertain how some types of workplace conflicts creates inter-professional conflict and how these affect employees' productivity in the Benue State University Teaching Hospital, Makurdi.

# II. Review Of Literature

Contextually, this study directly focuses on three conceptual organizational conflicts, which have been recognized as; task conflict, relationship conflict and process conflict (Fajana&Shadare, 2012; Jehn & Mannix, 2001). Task conflicts are defined as instances in which an employee has incompatibilities such as different opinions and viewpoints towards the task, policies, and/ or organizational issues (Jehn & Mannix, 2001) as cited in (Kulbaciauskaite. 2021). Numerous workplace studies have founda correlation between task conflict and processes, developing solutions together rather than having them imposed on them, and collective agreement (Eisenhardt, Kahwajy& Bourgeois, 2000; Mukolwe, Korir, Buyeke, Milaka& Musyoki, 2015; Ndulue & Ekechukwu, 2016). However, many other studies reported the negative influence of task conflict link on team member satisfaction (Adim&Odili, 2020). A team having task conflict may feel less satisfied despite its productivity (high insensitivity of argumentation) concerning results (Broukhim et al., 2019). In fact, Dreu and Weingart (2003) have long emphasized that persistent incidence of task conflict among workers can sour team morale and cause irritation, which can eventually impair output

Jehn and Mannix (2001) defined relationship conflict as friction and tension between individuals or groups due to observable incompatibilities in personality, values, norms, preferences, attitudes and many other issues (Amason, 1995) as cited in (Boz, Martínez, Munduate, 2009; Al-Khasawneh&Khadar, 2021). Relationship conflict is found to be linked to negative outcomes, like reduction of team member satisfaction, collaborative problem solving, team performance (De Dreu & Weingart, 2003). Relationship conflict emerging from interpersonal differences among the employees commonlyadverselyaffect an organization's performance (Anam, Chepsiror, Muthee, Kirui, Khasenye&Wasike, 2024; Al-Shourah, 2015), decision quality, team effectiveness and helping behavior (De Dreu& Van Vianen, 2001), organizational citizen behavior (Greer, Saygi, Aaldering& de Dreu, 2012), team trust (Simons & Peterson, 2000), affective acceptance and understanding (Amin & Shila, 2015), and relational closeness (Rispens, Greer, Jehn& Thatcher, 2011).

Furthermore, relationship conflict has been also found to inducedestructive climate, fostering negative affections, misattribution and non-collaborative team behavior leading to unsuccessful team functioning and performance (Smith & Edmondson, 2008; Anku-Tsede&Adjadogo, 2016). It increases stress levels (Friedman, Tidd, Currall, & Tsai, 2000) and propensity to leave the job (Medina et al., 2005), producing negative reactions such as anxiety, depression, and frustration (Spector & Jex, 1998), with reduced levels of job satisfaction (De Dreu& Van Vianen, 2001) as cited in (Boz, Martínez, Munduate, 2009). Essentially, Behfar, Peterson, Mannix, & Trochim, (2008) observed that teams might experience difficulties managing expenses and allocating resources, resulting in lower output and higher operating expenses which is to the organization's disadvantage.

Process conflicts refer to situations where people disagreed on a specific responsibility when they have to achieve a particular task. It has been shown that process conflict is detrimental to individual employee or

group performance and job satisfaction. It a conflict that is found to have negative impact on the performance of and assignment of duties and resources (Jehn, 2007) expected to promote productivity in an organization (De Dreu & Weingart, 2009). According to Ongari (2009), this type of conflict normally occurs when the procedure(s) for the task is not clearly defined by the supervisor or the person in charge. Deducing from the literature reviewed, it obvious that the three types of inter-professional conflicts have both positive and negative effects on employees' performance and productivity capacity. In view of this realization, the outcome of the data collected and analyzed will help to determine which side the actual effect of task conflict, relationship conflict and process conflict has on employees' productivity in the Benue State University TeachingHospital.

#### Aim and Objectives

Theaim of the study was to ascertain the influence of task conflict, relationship conflict and process conflict on employees' productivity in the Benue State University Teaching Hospital, Makurdi. The objectives were to:

- 1. Determine the influence of task conflict on employee productivity among inter-professional healthcare team members in Benue State University Teaching Hospital, Makurdi.
- 2. Determine the influence of relationship conflict on employee productivity in the Benue State University Teaching Hospital, Makurdi.
- 3. Determine the influence of process conflict on employees' productivity among inter-professional healthcare team members in the Benue State University Teaching Hospital, Makurdi.

#### **Research Questions**

- 1. Will task conflict have a significant influence onemployees' declining productivity among the healthcare teammembers in Benue State University Teaching Hospital?
- 2. Will relationship conflict have a significant influence on employees'decliningproductivity among thehealthcare team membersin Benue State University Teaching Hospital?
- 3. Will process conflict have a significant influence on employees'declining productivity among the healthcare team members in Benue State University Teaching Hospital?

#### III. Methods

#### **Research Design**

This study employed descriptive survey research design to answer the research questions and achieveits aim and objectives at the end. The use of this research methodhelps in the accurate presentation, description and discussion of the findingsobtained from the data collected and analyzed to determine the research outcome.

#### **Population of the Study**

The population of the study comprised of 1,245 health workers from different health professional orientation working in (BSUTH) Makurdi. These health professionals include medical doctors, nurses, pharmacists, medical lab scientists and other categories of healthcare professional in the different sections and departments of the hospital. Gender wise, they were males and females healthcare professionals.

#### **Sample Size Determination**

A sample size of 303 participants for the study was determined using Taro-Yamane's formula for the size selection. The formula was developed based on the assumption that the population from which the sample will be derived from, is a finite one and not infinite. It also assumes that the acceptable error margin for any sample must be greater than zero and never equal to or less than zero (Adam, 2020). The formula is given as:

$$n = \frac{N}{1 + N(e)2}$$

where: n = Sample size N = Total Population e = Level of significance (tolerable error) at 5% 1= Constant Therefore,

n =  $\frac{1,245}{1 + 1,245(0.05)2}$ n =  $\frac{1,245}{1 + 1,245(0.0025)}$ 

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$$n = \frac{1,245}{1+3.1125}$$
$$n = \frac{1,245}{4.1125}$$

n = 303

## **Sampling Technique**

By virtue of the use of the Taro Yamane's formula to obtain the desired sample size, the calculation brought out a total of 303 healthcare professionals for selection as participant in the study. The convenience sampling technique was used in the selection of the respondents on visit to each department. This technique wasactually not relied upon to bring the sample to reflect a representative sample selected for the study. However, it is useful for making a generalization inference from the findings on the subject of the study.

#### **Data Collection**

The data was collected with a self-developed adhoc questionnaire. The questionnaire comprised of twelve items and was administered to the 303 participants involved the study. The reliability of instrument was determined by the process of factor analysis to assess the construct validity of each variable in the study. The reliability coefficient showed 0.845 while the Bartlett's Test of Sphericity was significant with the chi-square value of 318.730, atp<.001).

#### Method of Data Analysis

The data was analyzed using the Computer Based Statistical Package for Social Sciences (SPSS Version 23). The statistics for theanalysis was frequency and percentages, means and standard deviation to obtain the accurate values for the interpretation of the findingsto describe the influences of inter-professional conflict on employee productivity healthcare sector in Benue State.

#### **IV.** Results

Beloware the statistical results of data collected and analyzed to answer the three formulated research questions. This result section carried two categories of the data analysis that include the demographic variables of the participants and the findings on the three questions. All the results are presented in four tables.

Attributes	Frequency	Percentage (%)
	Trequency	Tereentage (70)
	Age	
18-27 years	68	21.2
28-37 years	99	31.0
38-47 years	77	24.0
48 years and above	76	23.8
	Gender	
Male	184	57.5
Female	136	42.5
	Educational Qualification	
SSCE	56	17.5
ND/NCE	73	22.8
HND/Degree	127	39.7
Postgraduate	64	20.0
-	Years of Experience	
1-5 years	87	27.2
6-10 years	159	49.7
10 years and above	74	23.1

Table one described the distribution of the respondent'ssocial demographic variables whose participation was calculated and presented in percentages as shown in the table.

Table 2   Statistical findingson influence oftask conflict on employees' productivity (n=320)											
Item		N		Min		-	Maxir	-	Mean	020)	SI
There are often differences of opinion in the inter-professional tea	303 am		1			4		3.08		0.961	
Members of your team disagree often on decision to manage issues	303		1	4			3.09		0.773		
Arguments in your team are Frequently task-related		303			1	4		3.53		0.683	
Members of your team disagree mostly on procedures for doing a particular work	303		1	4			3.28		0.595		
The disagreement in the team delays the task to be performed	303		1	4			3.53		0.683		

 $\square$   $\square$  p> 0.05

The results on table two showed that there are always disagreements among the inter-professional teamrelating totask performanceandopinion differences from the mean=3.08 and SD=0.96, frequent disagreement on decisions mean=3.09 and SD=0.773, frequent arguments on task related issues mean=3.53 and SD=0.683, disagreements on procedures mean=3.28 and SD=0.595 and disagreements delaying task performance mean=3.53 and SD=0.683. Thesefindings showed that task conflict delayed task performance which also could lead to a decline in the employees' productivity.

Table 3   Statisticalfindings oninfluence of relationship conflicton employees' productivity (n=320)									
Items		N		linimum	Maximum	Mean	.520)		
Clashes due to display of ego and superiority between profession	320 nals		1	4	3.28	0.613			
Constant tension among inter-professional team members		320		1	4	3.52	0.617		
Observed mistrust and suspicion of one another in the teams	320		1	4	3.24	0.551			
There always miscommunication among team on issues	320		1	4	3.48	0.676			
Conflict interference with inter- professional collaboration and wo	320 rk		1	4	4 3.09	0.773			
			$\square p > 0$	).05					

Table three results showed that relationship conflict has a significant negative influenceonemployees' productivity level of the health professionals' team in the hospital. This was shown the mean and standard deviation values obtained on the related variables which are; displayof ego and superiority mean=3.28 and SD = 0.613, frequent tension among the inter-professional team members mean =3.52 and SD = 0.617, constant misunderstanding and miscommunication mean=3.48 and SD=0.676, and relationship conflict interference with inter-professional collaboration and work progress mean=3.09 and SD=0.773.

Table 4   Statistical findings on influence of process conflicton employees' productivity (n=320)									
Items	N	-	Minimum			Mean	cuvity (i	SD	
There is constant disagreement on Decision-making in the team	320	1		4		3.26		0.672	
Frequent opinion differences 0.666 related to methods/procedures carrying out task among the team		320	1		4		3.55		
Team members constantly refused abide the process of carrying out a task		1		4		3.35		0.736	
Team members are always altering agreed procedure/methods for completing tasks	320	1		4		3.33		0.885	

 $\square$   $\square$  p> 0.05

Table three resultsshowed that process conflict significantly influence employee's productivitydue to the inter-professional team member's disagreements on methods or procedures required in performing tasks. The statistics shows disagreement on decision-making; mean=3.26 and SD=0.672, differences in opinion on a desired procedures mean=3.55 and SD=0.666, frequent refusal to abide by the decision on specifiedproceduresmean=3.53 and SD=0.736, team members altering of the procedures/process mean=3.33 and SD=0.885.These findings showed that the health professionals'differing viewsleading to disagreement aboutcompliancewith laid down processes for execution of tasks negatively affect effective service delivery in the hospital.

# V. Discussion

The purpose of the study was to examine the impact of inter-professional conflict on employees' productivity in Benue State University Teaching Hospital Makurdi. Based on the findings from the analysis, the discussion was made on the three research questions stated.

Question one: does task conflict have a significant influence on employee's decliningproductivity among interprofessional healthcare team members in Benue State University Teaching Hospital?

Inferring from the statistical values obtained from the data analysis; the results determined at p > 0.05 shows that task conflict which is a type of inter-professional conflictcommonlyfound in organizationshas a significant negative influence on the healthcare professionals' declining productivity in Benue State University Teaching Hospital Makurdi. The positive outcome on this research question indicates that opposing opinion, arguments and disagreements on decisions and procedures to tasks performance for successful services delivery in the hospital are the sources of this conflict. The health professionals' decline productivity is the product of hurt feeling, disinterested, demotivated and dissatisfied because their opinion or contribution to decision making on execution of task is not always respected. These findings evidently corresponded with the previous studies reports thattask conflict among employees of tenproduces negative consequences (Adim&Odili, 2020; Behfar, Peterson, Mannix, &Trochim,2008; Broukhim et al., 2019; Dreu & Weingart, 2003). Dreu and Weingart (2003) emphasized that too much task conflict can sour team morale and cause irritation, which can eventually impair output.

Question two: does relationship conflict have a significant influence on employees' declining productivity among inter-professional healthcare team members in Benue State University Teaching Hospital?

On this question, the findings showed that relationship conflict has significant negative influence on employees' declining productivity in the Hospital. The declining rate of productivity the result of unharmonious working relationship and uncooperative attitude, arising fromego clashes, quarrels, feeling of superiority over others, miscommunication, suspiciousness, and mistrust among the health careworkers that is constituted into inter-professional. This finding shave supported the existing evidences from numerous studies that relationship conflict resulting from interpersonal differences among employees negatively interferes with an organization's

level ofperformance (Anam, Chepsiror, Muthee, Kirui, Khasenye&Wasike, 2024; Al-Shourah, 2015; De Dreu&Weingart, 2003; Greer, Saygi, Aaldering& de Dreu, 2012; Anku-Tsede&Adjadogo, 2016; Tekleab*et al.*,2009). Persistent relationship conflicts increases negative feelings, which decreased teamwork, and reduced job satisfaction (De Dreu& Van Vianen, 2001; Simons and Peterson 2000). Negative feelings about one another damage team cohesiveness and the morale for collaboration, employee satisfaction, employee commitment to work, and expected productive turnover rates (Jehn, 1997),.

Question three: does process conflict have a significant influence on employees' decliningproductivity among inter-professional healthcare team members in Benue State University Teaching Hospital?

The findings shows that process conflict significantly have undeserved consequences on employee declining productivity in Benue State University Teaching Hospital, Makurdi. This happens as a result of the healthcare team frequent disagreement on decision-making, differing opinions related to methods/procedures for providing services, refusal to abide by an agreed process and observed alteration in the process perceived may have undesired outcome. The finding supported many available studies which found that process conflict has a strong negative relationship with employee's performance of organizational task (De Dreu & Weingart, 2009; Jehn, 2007; Jehn and Mannix 2001; Yusuf-Habeeb & Kazeem, 2017).In fact, Behfar, Peterson, Mannix, &Trochim (2008) observed that the working teams might experience difficulties managing resources, resulting in lower output and higher operating expenses which are to the organization's disadvantage.

#### VI. Conclusion

Consideringthe unlimitedworkplace interaction organizations, the occurrence of conflict among the employees is unavoidable. However, its management determines whether the result will be positive or negative. Basically, uncontrolled or ineffective conflicts management approaches only leaves conflict to persist to the extent of affecting employees' motivation which in turn leads to poor service delivery, decreasing productivity due toworkers absence from work and periodic strikes. Arising fromthefinding, it is reasonable to conclude that unending issues of inter-professional conflict in Nigeria tertiary hospital institutions like the Benue University Teaching Hospital is contributes tremendously to decreased employees' motivationfor the workcumproductivity on this apex hospital institution in Benue state are; task conflict, relationship conflict and process conflict. It is therefore, pertinent that the management of the hospital should always adopt effective conflict management approaches that will help to limit the frequency of healthcare professionals' conflict for the purpose of promoting peace and enhance service delivery to the patients.

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