

Original Article

ADOPTION OF SOCIAL EDUCATION FOR CONFLICT MANAGEMENT IN SELECTED HEALTH INSTITUTIONS IN ENUGU STATE

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Abstract

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The main purpose of the study was to determine the extent to which social education is being adopted for conflict management in health institutions in Enugu State. One research question and one null hypothesis were formulated and tested at .05 level of significance. The population for the study comprised all the 433 doctors, nurses and Community Health Extension Workers (CHEW) in 6 selected health institutions in Enugu State. It was made up of 57 doctors, 78 nurses and 298 community health extension workers. Using census sampling, the respondents' entire population of 433 [doctors, nurses and the Community Health Extension Workers (CHEW)] in the 6 selected health institutions in Enugu State was sampled for the study. No sampling was done because the population is manageable. A structured questionnaire developed by the researchers was used for data collection. The instrument was validated by three experts. Cronbach Alpha Reliability Coefficient was used to determine the internal consistency of the instrument. 433 copies of questionnaire were administered by the researchers with the help of three research assistants that were briefed on the content of the questionnaire and its mode of administration to ensure that the questionnaire was properly administered. Out of 433 questionnaire instrument that were administered, 423 copies were retrieved, while 10 copies were not retrieved. Data collected were analyzed using Mean ($\bar{x}$) with Standard Deviation (SD) to answer the two research question. However, the null hypothesis was tested using t-test statistic at .05 level of significance. The result of the findings indicated that to a little extent social education was adopted for conflict management in health institutions in Enugu State. The finding also revealed that there was no significant difference in the mean response scores of public and private health workers on the extent to which social education was adopted for conflict management in health institutions in Enugu State. Based on the findings, the researches recommended that deliberate efforts should be made at adoption of social education for conflict management in public and private health institutions in Enugu State.

Keywords: Social Education, Conflict Management, Health Institutions

Introduction

Globally, conflict is an inevitable phenomenon which occurs every day in human life. It is often said that no organization (both private and public) can

effectively carry out its day to day activities without encountering conflict (Edet, Benson and Williams, 2017). United Nations International Children

Emergency Fund (2015), emphasized that conflict when not managed constructively often explode into violence. Owan (2018), posited that conflict should not be totally seen as evil, but rather a challenge to effect change. Conflicts are neither constructive nor disruptive, but the ways these are handled in institutions make them either positive or negative. Ubogu (2016), claimed that institutions are made up of people with different attitudes, beliefs, abilities and personality, therefore conflict is inevitable. Conflict in institutional settings is a daily occurrence simply because a consensus of opinion concerning rules governing the institution occasionally exists among the participants (e.g. administrators, staff, students, teachers/ lecturers, parents and other stakeholders). These parties, particularly staff and administrators, see one another as adversaries in most cases, not as those working to ensure a common goal and that is why there is potential for conflict in practically every decision which the administrator must make.

Conflicts in Nigerian health institutions have been traced mostly to communication gap between staff and administrative management on one hand and between patients and administrative management on the other hand. Specifically, it is often said that when there is delay by health institution authority to involve staff in decisions making, this might lead to conflict and in fact lead to breakdown of laws and orders (Dike and Dike, 2017). Flippo (2018), affirmed that total absence of conflict would be unavoidable, boring and strong indication that conflicts are being suppressed. Therefore, it is the commonest, general and widespread phenomenon. The economic downturn in Nigeria in the last two decades has led to poor salaries and wages for staff and inflation which has produced great dissatisfaction and agitations among Nigerian health workers. This has often resulted in industrial disputes and conflicts in the health sector. Consequently, it has become a major concern for health institution administrators and has dampened

the morale of health workers and other staff of health institutions. Enaigbe and Igbinoghene, (2016) posited that to accumulate series of conflict without devising appropriate management strategies, is like sitting on a keg of gun powder which could explode at any time. Thus the need to explore the extent workers education is adopted for conflict management in selected health institutions in Enugu State.

The term 'conflict' carries plethora of definitions depending on the usage and the context of its usage. According to Rahim (2015), conflict is an interactive process manifested in incompatibility, disagreement or differences within social entities. Simon (2017), viewed conflict as any divergence of interests, objectives or priorities between individual, groups or organizations that do not conform with requirements of a task, activity or process. Ibrahim (2017), perceived conflict as a situation in which two or more values, perspectives and opinions are contradictory in nature and have not been agreed upon. Uya (2018), defined conflict as a situation in which there are incompatible goals, cognition or emotion within or between individual and groups that leads to opposition. Conflict is an activity that takes place when conscious beings wish to carry out mutually inconsistent acts concerning their wants, needs and obligations. Mutiullahi (2018) elucidated that, conflict is an attempt of actors that make use of a threat or coercion to exterminate opponents in order to have access to scarce resources. In the opinion of Onwachekwa (2017), conflict is defined as steaming form the fact that parties must share scarce resources or work activities which create various statue, goals or values. Amazon (2017), described conflicts as form of socialization, in that, institutions have goals that employees need to adopt at the expense of their interest. Therefore, conflicts come into existence whenever the interest group finds it practically impossible that their needs are to be fulfilled or actualized. Obi (2014), affirmed that conflict is an action by a person or group of people

which in some way makes it less likely that the desired action of another person or group of people is actualized. In this sense, whenever two or more group of people involve in a struggle towards the realization of their goals, conflict is bound to occur.

A critical analysis of the definitions of conflicts revealed that it is a struggle over resources or ideas between two or more parties caused by the perceptions of the contending parties when they cannot have their desire. UNICEF (2015), posited that conflict is not necessarily synonymous with violence and that conflict occurs not only in violent situation, but inevitably occurs between people over ideas, values, positions and perspectives on a range of issues. Although conflict may impede the attainment of one goal, the consequence may be beneficial if they produce new information which in turn enhances the decision making lengthy delays over issues that do not importantly affect the outcome of the project or disintegration of the new team efforts, thus, the need for conflict management. Conflict management is the act of resolving differences in a constructive and mutually beneficial manner. It entails identifying the root cause of the dispute and finding a solution that satisfies all parties involved. Conflict management entails the establishment of various mechanisms to eliminate the misconception or negative feeling aspects of conflict to enhance learning and group outcomes so as to pave the way for people to achieve their goals (Adeniji 2019). Oni (2017), averted that conflict management enhances capacity through a number of measures by working with the parties involved in conflict. The above definition covers the entire area of handling conflicts positively, being proactive at and preventing conflict. In the view of Adaeze (2014), it is a diagnostic process or dialogue where strategies and intervention are designed to curtail the conflict. This implies that when conflict arises, the need is to become a positive solution provider, rather than generating a negative one, which threatens the individual or group, so as to cover conflict

limitation, containment and litigation. From the examination of various definitions, conflict management is thus a measure put in place in managing conflict towards constructive action in resolving organizational conflict. This indicates that when conflict arises, the need for proper management is imperative so as to enhance positive results. Such proper management according to Udoka (2016), among other includes social education.

Social education has to do with having healthy friendships, understanding how to be a good friend, and knowing how to navigate social situations within a given institution or organizational setting. Odi (2019), noted that social education connects to important health skills like analyzing influences, interpersonal communication skills, decision making and advocacy. Aleke (2016), stated that a person's social well-being deeply connects to their overall well-being and happiness. And because of the interconnectedness of health (meaning that each dimensions of health influences and impacts the other dimensions), the status of a person's social health directly impacts the status of the other dimensions of health. Ugbo (2019), stated that learning how to deal with social conflict in an institution (workplace) is fundamental to achieving work success. Ugbo further noted that social friction is inevitable at the workplace, but when strong social skills are developed, one is able to navigate the sticky situation with success. Ubaka (2017), posited that most administrators neglect social education, probably as a result of ignorance or poor managerial ability. Ubaka added that the provision of social education make for cordial relation and interaction among individual in a social setting or work place. Supporting the above assertion, Edukalife (2023), noted that social education promotes social welfare and improves the quality of people in general. Being that social education is an important tool for promotion of social welfare and interaction, there is need to explore the extent to which it is adopted in

health institution in Enugu State for conflict management.

It is important to note that conflicts in health institutions can lead to difficult patient care consequences. Conflicts in health institutions pose threats to physical, mental, and emotional health of one's ability to perform at work. It is believed that these social education approaches can be useful in conflict management in health institutions, however, it is not certain on the extent to which private and public health institutions use social education approaches in managing conflict in Enugu State. Thus, the status or ownership of the health institution is a variable of serious concern in this study. It is expected that the adoption of social education for conflict management cuts across both private and public health institutions. The high demand and the problems envisaged by the government to fund health institutions alone, led to granting license to private individuals, religious organizations and corporate organizations to establish private health institutions like other nations of the world (Chidiobi, 2014).

Private health institutions are non-public or independent health institutions which do not receive governmental funding and are usually, administered by denominational or secular boards. They are health institutions operated for profit, while government owned health institutions are those which are owned, managed, controlled, financed and inspected by the government. Akpan (2017), asserted that it is expected of the government through the Ministry of Health to take close surveillance on both private and government owned institutions to checkmate if actually both are meeting up to the set standard of health institutions in the country for improved healthcare delivery.

The difference between private and public health institutions in the adoption of the workers' education can be attributed to their ownership structures. Adietomre (2017), stated that government who bears the burden of paying salaries to workers not minding

if they are productive, owns the public health institutions, while on the other hand, Adietomre (2017), noted that the private health institutions owned by private individuals or organizations dictates the way and manner their school should be ran. In the same vain, Balogun (2015), observed that there are more health facilities in the private health institutions than the government owned health institutions. Adietomre (2017), noted that health institutions owners, be it private or public, has the sole authority to insist on the adoption of social education or not. Akpan (2017), asserted that be it as it may, the fact remains that the adoption of social education in the health institutions is for the best interest of the workers and the society and should be adhered to, by both the government owned health institutions and the private as well.

Considering the fact that social education is vital to institutional progress and achievements, yet the extent of its adoption in both public and private owned health institutions in Enugu State is yet unknown. Literatures available to the researchers did not show any recent work and empirical evidence on extent of the adoption of the social education in health institutions in Enugu State. This created a gap and problem that necessitated this study. Hence the researchers consider it very necessary and timely to ascertain the extent to which the social education is being adopted for conflict management in health institutions in Enugu State.

Statement of the Problem

In all places where there are interactions between people, there is bound to be misunderstanding resulting from differences in perception, behaviour and approach to life issues. This poses problem to collaboration in client care to the detriment of the patients. Modern health care delivery system is complex and rapidly changing. 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 inter-professional conflicts are common and expected.

Although, strategies have been explored and adopted for addressing health issues and challenges in health institution by health stake-holders, no strategy to the knowledge of the researcher is targeted towards adoption of social education for conflict management in health institutions in Enugu State. This calls for a serious concern as the gap created by this is long overdue. Thus the need to explore social education as an approach for conflict management in health institutions in Enugu State. It is therefore against this background that the researchers was motivated to investigate the extent to which social education is being adopted for conflict management in health institutions in Enugu State, hence this study determined the extent to which social education is being adopted for conflict management in health institutions in Enugu State.

Purpose of the Study

The purpose of the study was to ascertain the adoption of social education for conflict management in health institutions in Enugu State. Specifically, the study sought to:

1. examine the extent to which social education is adopted for conflict management in health institutions in Enugu State.

Research Question

The following research question guided the study:

1. To what extent is social education adopted for conflict resolution in health institutions in Enugu State?

Hypothesis

The following null hypothesis were formulated and tested at .05 level of significance.

HO₁: There is no significant difference between the mean response scores of private and public health workers on the extent social education is adopted for conflict resolution in health institutions in Enugu State.

Methods

Descriptive survey research design was utilized for this study. Descriptive survey research design, according to Nworgu (2015), is one in which a group of people or items is studied by collecting and analyzing data from only a few people or items considered to be representative of the entire group. A descriptive survey research is concerned with specified population of persons, item or situation, in a defined geographical location. It involves the collection of relevant data for or about the population that enables the description of the person, items or situations the way they are. The descriptive survey research design was considered suitable for the study as it solicits for information from the respondents directly and affords all the respondents equal chance of being chosen for the study. The research was carried out in Enugu State, Nigeria. The choice of Enugu State was as a result of the observed conflict cases in the public and private health institutions within the State. The population for the study comprised all the 433 of doctors, nurses and Community Health Extension Workers (CHEW) in 6 selected health institutions in Enugu State. It was made up of 57 doctors, 78 nurses and 298 community health extension workers. This is based on the data obtained from the Personnel Unit of each of the health institutions. Using census sampling, the respondents' entire population of 433 [doctors, nurses and the Community Health Extension Workers (CHEW)] in the 6 selected health institutions in Enugu State was sampled for the study. No sampling was done because the population is manageable.

A structured questionnaire named "Adoption of Social Education for Conflict Management in Health Institutions (AWECMHI), developed by the researchers was used for data collection. The instrument had two sections; A and B. Section A contained the respondents bio- data while section B was has 11 items, The response format for the instrument was a 4-point scale of Very Great Extent

(VGE), Great Extent (GE), Little Extent (LE) and Very Little Extent (VLE). Each response option had a numerical value assigned to it as follows;

Very Great Extent (VGE) = 4 points

Great Extent (GE) = 3 points

Little Extent (LE) = 2 points

Very Little Extent (VLE) = 1 point

The respondents' responses were used to determine the extent to which social education was adopted for conflict management in health institutions in Enugu State. An introductory letter stating the rationale for the study was attached to the instrument for the respondents. In order to ensure the validity of the instrument, draft copies of the instrument together with the research topic, purpose of the study, research question, hypothesis, and the developed instrument were given to three experts. Two experts were from the Department of Continuing Education and Development Studies, while the other expert was from the Department of Mathematics and Computer Education, all from Faculty of Education, Enugu State University of Science and Technology, Enugu. The experts were requested to assess the relevance, adequacy, suitability and comprehensiveness of the items in addressing the research question as well as the clarity of the instruction to the respondents. The initial 16 generated items were decreased to 11 items as suggested by the validators, while grammatical errors were corrected as well. The validators' comments were used to draft the final instrument that was used for data collection. To ascertain the internal consistency of the instrument, the researchers conducted a trial test using 20 health workers in private and public health in Ebonyi State. This served as a similar population for the study. The respondents were assured of complete confidentiality of all information they supplied. The choice of Ebonyi State was dictated by the fact that both states have the same health institution characteristics in terms of administration, population and environment. The respondents were allowed to complete the instrument at their own convenience. Data collected

from the respondents' responses were analyzed using Cronbach Alpha Reliability Coefficient to determine the internal consistency of the instrument. The instrument yielded a reliability coefficient .71, indicating that the instrument is reliable and suitable for the study.

433 copies of questionnaire were administered by the researchers with the help of three research assistants that were briefed on the content of the questionnaire and its mode of administration to ensure that the questionnaire was properly administered. Appointments were booked with the respondents for collection at a later date for those who were not able to fill their own copies of the instrument because of the nature of their job. Out of 433 questionnaire instrument that were administered only 423 copies were retrieved, while 10 copies were not retrieved. Data collected was analyzed using Mean ($\bar{x}$) with Standard Deviation (SD) to answer the research question. However, the null hypothesis was tested using t-test statistic at .05 level of significance. The analysis was done with the use of the Statistical Package for Social Sciences (SPSS). The decision rule; real limit of the mean scores was applied, therefore, the upper and lower limits of the mean is as follows;

Mean scores from 3.50 – 4.49 Very Great Extent (VGE)

Mean scores from 2.50 – 3.49 Great Extent (GE)

Mean scores from 1.50 – 2.49 Little Extent (LE)

Mean scores from 0.50 – 1.49 Very Little Extent (VLE)

The null hypothesis was not rejected when the significant level was less than .05 and was rejected when the significant level was equal or more than .05 level of significance.

Results

Research Question 1

To what extent is social education adopted for conflict management in health institutions in Enugu State?

Table 1: Mean and standard deviation of public and private health workers on the extent to which social education is adopted for conflict management in health institutions in Enugu State

S/ N	Social education adopted for conflict management in health institutions include;	Public N= 302		Private N= 121		Overall		Decision
		$\bar{X}_1$	SD ₁	$\bar{X}_2$	SD ₂	$\bar{X}_G$	SD _G	
1	enhance interpersonal communication skills among individuals in the health institutions	2.1	0.7	2.1	0.7	2.1	0.7	LE
		5	5	2	4	4	4	
2	provide assertive training to individuals in the health institutions	1.7	0.6	1.7	0.6	1.7	0.6	LE
		9	8	6	7	8	7	
3	provide clear guideline for individuals on expected positive behavior in health institutions	2.1	0.6	2.1	0.6	2.1	0.6	LE
		4	4	2	4	4	4	
4	use audio visual materials to teach positive behaviour to individuals in the health institutions	1.8	0.6	1.8	0.6	1.8	0.6	LE
		6	4	4	3	5	4	
5	use recreational activities to enhance social life among individuals in the health institutions	1.9	0.7	1.9	0.7	1.9	0.7	LE
		9	6	9	6	9	6	
6	encourage healthy interpersonal relationship among individuals in the health institutions	1.8	0.5	1.8	0.5	1.8	0.5	LE
		6	2	4	2	5	2	
7	invite resources individuals to deliver talks on social behaviours among individuals in the health institutions	2.0	0.5	2.0	0.6	2.0	0.6	LE
		8	9	6	0	7	0	
8	plan some sequence of behaviours for conflicting individuals to follow in the health institutions	1.7	0.8	1.7	0.8	1.7	0.8	LE
		8	6	8	7	8	6	
9	daily teaching of moral instruction through morning devotion in the health institutions	2.0	0.7	1.9	0.7	2.0	0.7	LE
		0	6	9	6	0	6	
10	provide individuals in the health institutions with positive behaviour pattern through drama	1.7	0.5	1.7	0.5	1.7	0.5	LE
		2	9	0	9	1	9	
11	provide seminars for individuals in the health institutions on disciplined behavior	2.0	0.7	2.0	0.6	2.0	0.7	LE
		8	1	5	9	7	0	

Grand Mean/SD	1.9 5	0.6 8	1.9 3	0.6 8	1.9 4	0.6 8	LE
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X = Mean; SD = Standard Deviation; LE = Little Extent

Data presented in Table 1 indicates that overall item mean scores ranges from 1.71 to 2.14 depicting little extent. This shows that the items have little extent of adoption of social education for conflict management in health institutions in Enugu State. The overall cluster mean rating of 1.94 indicates little extent. The low standard deviation of 0.68 shows that the respondent's opinions do not differ

Table 2: Summary of t-test analysis of mean response score of public and private health workers on the extent to which social education is adopted for conflict management in health institutions in Enugu State

Variables	N	t	df	Sig. (2tailed)	Mean Difference	Std. Error Difference	Decision
Public	30	.434	421	.665	.18751	.43245	NS
Private	8						
	12						
	1						

The result of t-test analysis in Table 2 shows that the t-value at 0.05 level of significant and 421 degree of freedom for the items is 0.434 with a significant value of 0.665. As the significant value of 0.665 is more than the 0.05 level of significant the null hypothesis is not significant. This means that there is no significant difference in the mean response score of public and private health workers on the extent to which social education is adopted for conflict management in health institutions in Enugu State.

Discussion of Findings

The research question sought to find out the extent of to which social education is adopted for conflict management in health institutions in Enugu State. The result revealed that to a little extent, social education was adopted for conflict management in health institutions in Enugu State. This finding is in line with Ubaka (2018), who posited that most administrators neglect social education, probably as a result of ignorance or poor managerial ability. Ubaka added that the provision of social education make for cordial relation and interaction among

remarkably to the itemized. This implies that to a little extent social education is adopted for conflict management in health institutions in Enugu State.

Hypothesis 1

There is no significant difference between the mean response scores of private and public health workers on the extent to which social education is adopted for conflict management in health institutions in Enugu State.

individual in a social setting or work place. Therefore there is need to ensure effective and efficient adoption of social education for conflict management in health institutions in Enugu State for an improved health care delivery in the health institutions.

On the influence of health institution ownership it was found in this study that there is no significant difference in the mean response scores of public and private health workers on the extent to which social education is adopted for conflict management in health institutions in Enugu State. This finding disagrees with Ubaka (2018), who revealed that adoption of social education for conflict management in health institutions is more obtainable in private health institutions as they strive more patronage and popularity. The finding however agrees with Adietomre (2017), who noted that health institutions owners, be it private or public, has the sole authority to insist on the adoption of workers' education or not. Therefore, public and private administrators of health institution should insist on

adoption social education for conflict management in health institutions in Enugu State.

Educational Implications of the Findings

The findings of this study hold implication for the management of health institutions, health workers, and Ministry of Health.

The findings of this study holds serious implication on the management of health institutions who are saddled with the responsibility of providing health services to patients as it will assist them in providing fast and reliable health care services to their patients. The findings of the study would serve as a guide to the management of health institutions on the need for social education and adoption of the reviewed social education for an improved health care delivery in their health institutions in Enugu State and Nigeria at large.

The study holds implication for health workers as it explores appropriate strategies and recommendations that should help to facilitate effective and efficient health care services delivery among workers in different health institutions in Enugu State.

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The study holds implication for the state ministry of health as it would assist them and other concerned bodies in implementing effective and efficient social education programme among health workers in different health institutions in the state. Due to the poor adoption social education for conflict management in health institutions in Enugu State, this study should help in creating more awareness on the need for social education for conflict management in health institutions in Enugu State and the world at large.

Recommendations

Based on the findings of the study the following recommendations were made.

- Administrators of health institutions should ensure effective and efficient adoption of social education for conflict management in health institutions in Enugu State by organizing workshops on social education for health works for an improved health care delivery in the health institutions.

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