The enactment and management of conflict in casual and professional settings: two case studies

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Abstract

This study compares the initiation, development, escalation of, and resistance to conflict in two diverse settings: A family's Thanksgiving Dinner, and a conversation between physician reviewers reviewing surgeon's proposals for surgery. Using conversation analysis, the study finds that conflict is covert in the professional setting, where the problem focus in clear, yet overt in the family setting. The difference stems from the ways in which recipients of provocative comments choose to respond to them, and shows that conflict, despite involving disagreement, requires the cooperation of conflicting parties.

Purposes

The purposes of this work were:

- To gain a clearer understanding into the complex phenomenon of conflict using detailed observation.
- To compare and contrast the initiation, development, resistance, and termination of conflict in two diverse settings.
- To examine the difference between the formation of conflict in instances where there it is expected, and in instances, where there was no predisposition toward conflict.

Rationale - why study conflict?

- Conflict-prone situations have great consequences
- Conflict is prevalent and common
- Through research, techniques for handling conflict in more productive ways will be learned.

Background

Three areas of research are focused on:

- Communication in the workplace: This study contributes to work regarding communication between organizations.
- Family dinner settings: A growing body of work underlines the importance of the talk that goes on at the family dinner table. This study looks at a familiar nexus of family joy and conflict: the holiday dinner table
- Conflict - good or evil? The present study contributes to this body of work by showing some specific ways in which conflict is a complex phenomenon.

Methods

Conversation Analysis - Following the procedures of conversation analysis in the ethnomethodological tradition (e.g., Atkinson and Heritage, 1984; Drew and Heritage, 1992), naturally occurring conversations are tape recorded and transcribed; segments of interest are chosen; and a detailed analysis of what actions are undertaken, and how they are accomplished is performed.

Data - The data analyzed came from one family's videotaped Thanksgiving dinner and from two audiotaped telephone discussions between two board-certified physician-reviewers working for an insurance company and two otolaryngologists.

Results

	Dialog	Symbols
→	32 C: Punish [her	→ Provoking
→	33 P: [Punish her	statement
+	34 G: Why^ >cuz< me and Pete were	?? calling the
+	laughing.	rejection into
+	35 Me: and Pete were laughing.	question.
+	36 Nothing to do with her. Nothing.(0.2)	+ Rejection
+	37 She yells at me. O-:h-yeah-she loves	++ Rejection
	38 making fun of people.	of rejection
	39 (0.5)	[overlapping
→	40 F: They were making fun of you hun?	talk
	41 (1.0)	: elongated
+	42 G: >I wasn't even we weren't< even	sound
+	talking	><faster talk
+	43 about h:er. and we both were laughing	^talk higher in
+	44 and she yells at me: for making fun of	pitch
??	45 her	F: Speaker F
	46 F: Who were you making fun of?	G: Speaker G

++	47 G: We weren't making fun of any:body	
??	48 F: Why^ N ^ot	

The casual setting: the Thanksgiving dinner

Overt conflict presents itself frequently in this family's dinner.

Steps taken by this family to initiate and develop conflict:

1. X states inquiry/comment that could be heard as provocative
2. Y rejects the inquiry/comment
3. X rejects the rejection by using contradiction
4. Y rejects the rejects the rejection of the objection
5. X calls into question the rejection.

The professional setting: physicians' conversations

Covert conflict presents itself in the professional settings, where a structural predisposition for conflict is present.

Steps used in the professional setting to initiate and develop conflict:

1. A seemingly innocent statement/inquiry said by the reviewer provokes the doctor.
2. The doctor reacts by proposing an outrageous suggestion/threat.
3. The reviewer remarks in a minimal way —"Mmhm"
4. The doctor rejects the reviewer's reasoning.

Discussion

Alignment

In the development of a conflict, the alignment of the parties with each other and with outside agencies is a critical factor. This study suggests that in the casual setting, conflict escalates by all members aligning together against one person. In the professional setting, alignment may either escalate or reduce conflict. If the reviewer aligned with the doctor, conflict was reduced. If the reviewer aligned with the insurance company, the conflict was maximized.

Why conflict was continually resisted in the professional setting

Resisting conflict is a way of being professional. This study shows some resources used by parties to the conversation in the professional setting by which conflict is diverted and deferred.

Discussion

Conflict is something that can be unpleasant and a source of anxiety. However, sometimes it is not avoided but rather sought. As an interactive phenomenon, conflict requires that interactants work together in order to establish and develop conflict. Although conflict is apparently messy, patterns emerge. Conflict can result from preexisting structural conditions or can be created from disagreements emerging in conversations.

Conclusions

Our observations suggest three main conclusions.

- Conflict in this study has a regular, methodical character, proceeding through a series of steps..
- Conflict is an interactive phenomenon.
- Organizations can manage conflict in more productive ways. Specifically, we would recommend that workers be advised to ignore provocative statements.

Future research can build on this study by examining the context of conflict more closely and by studying a wider range of settings, e.g., .

- Asymmetrical professional relations (doctor/patient)
- Complex family relationships (grandparent/grandchild)
- Different age groups

It would also be useful to analyze the relationship between conflict and "face work" (Goffman, 1967) or issues of identity and self-presentation.

References

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