Psychological Symptoms as Predictors of Organizational Conflict Among Bankers

Chukwudum Nnaemeka Abamara [1]; **Anazodo, Nkechi Nneamaka**[2]; **Onyekaba, Onyinye C.**[3]; **& Onyemaechi, Chinwe**[4]
E-mail: [1]abamaranc@yahoo.com,
        nc.abamara@unizik.edu.ng,
[1][2][3]&[4]Department of Psychology, Faculty of Social Sciences, Nnamdi Azikiwe University, Awka Anambra State, Nigeria.

Abstract

This study investigated psychological symptoms (depressive symptoms, anxiety and paranoid ideation) as predictors of organizational conflict. A total of 157 male and female bankers from five different banks in Onitsha participated in the study. A structured questionnaire form containing four validated scales of measurement namely; depressive symptoms scale, anxiety scale, paranoid ideation scale and organizational conflict scale were used as instrument for the study. Regression statistics was adopted as a statistical tool for data analysis. The results indicated that depression significantly and independently predict organizational conflict among bankers (B= .81; t=20.71, p<.05); anxiety did not significantly predict organizational conflict among bankers (B=.06; t=1.41, p>.05); and paranoid ideation did not significantly predict organizational conflict among bankers (B= -.00; t=-.07, P>.05). Based on the above findings, this study concluded that depressive symptoms is positively related to organizational conflict among bankers, while anxiety and paranoid ideation may not be among the significant predictors of organizational conflict

Keywords: *Organizational conflict, Depression, Anxiety, Paranoid ideation.*

Introduction

Conflict is inevitable among humans. When two or more social entities (i.e. individuals, groups, organizations and nations) come in contact with one another in attaining their objectives, their relationships may become incompatible or inconsistent (Rahim, 2001). In work organizations, conflict among workers may be as a result of some psychological factors such anxiety, depression and paranoid ideation. This study is aimed at determining the link between psychological symptoms (depression, anxiety and paranoid ideation) and organizational conflict. Okpara (2001) viewed conflict as a fact of organizational life and not necessarily a negative burden. But if conflict gets out of hand, it not only affects the individual but also the organization.

Conflict brings to mind images such as antagonism, struggles between parties, opposition processes and threats to cooperation. They come in form of needs to be met or desires to be satisfied, disagreements to be settled and ideas to be shared that eventually lead to change of attitudes, feelings and perceptions. Conflict therefore, is a process of incompatible behaviors. It may involve the interference or disruption by one person or group of persons or in some way or ways make another action less likely to be effective (Uchendu, Anijaobi-Idem & Odigwe, 2013). These bad characteristics of conflict may be rooted in psychological symptoms.

Psychological symptom is a wider variety of disorders, ranging from those that cause mild distress to those that severely impair person's ability to function (Cohen & David, 2009). However, this work is limited to depressive symptoms, paranoid ideation and anxiety as the major components of psychological symptoms. The reason for the focus on these psychological symptoms is that anxiety, paranoid ideation and depression, are dominant symptoms unlike severe psychological symptoms, but by the nature of their symptoms can very well go unnoticed.

Anxiety is an emotional state in which people feel uneasy, apprehensive or fearful. People usually experience anxiety about events they cannot control or predict or about events that seem threatening or dangerous (Cohen, Alex Kleiman & Arthur, 2009). According to Diagnostic and Statistical Manual of mental disorders (DSM-IV-TR), anxiety disorders include: generalized anxiety disorder, phobias, panic disorder, obsessive disorder and post-traumatic stress.

Depression on the other hand, can be seen as a mental illness in which a person experiences deep, unshakable sadness and diminished interest in nearly all activities (Richard, 2004). People with major depression often have feelings of despair, hopelessness and worthlessness as well as thoughts of committing suicide (Cohen & David, 2009).

Paranoid ideation is an irrational fear and avoidance of objects, places and situations (Omoluabi, 1997). This situation is also known as paranoia which is considered a threat belief in which the person perceives that others have intentions to harm them now or in the future with little or no supporting evidence (Mckay, Langdon, & Coltheart, 2006). These beliefs appear to be accompanied by considerable anxiety, worry and behavioural avoidance (Freeman, 2007). Such avoidance behavior may occur in form of aggression. There is a clear link between perceive hostility and higher rates of paranoid ideation (Tremblay & Belchevski, 2004).

The theoretical rationale of an increased reactivity of people with high level of depressive symptoms to conflict is based on appraisal theory (Ellsworth & Scherer, 2003). According to this theory, people appraise:
  (a) Whether a situation threatens important needs and goals and hence is relevant for their well-being (primary appraisal); and
  (b) Whether efforts to cope with the situation may change the situation (secondary appraisal). Regarding primary appraisal, people with high levels of depressive symptoms have been found to be more dependent on others, having unsecure feelings of belonging, fears of abandonment and feelings of weakness and helplessness (Blatt, Quinlan, Chevron, McDonald & Zuroff, 1982).

Thus, negative situations that threaten the need to belong, such as conflicts, are expected to be appraised as particularly threatening by people with relatively high depressive symptoms; in line with this, people with high levels of depressive symptoms react particularly strongly to interpersonal rejection (Neziek, Kowalski, Leary, Blevins & Holtgate, 1997).

The cognitive theory proposes that anxiety disorder arises from a tendency to worry unproductively about problem and focus attention on potentially threatening circumstances. While according to conditioning theory, anxiety disorders arise when there is an inherited predisposition to excessive responsiveness of autonomic nervous system, together with generalization of the responses through conditioning of anxiety to previously neutral stimuli.

According to recent models of persecutory delusions, paranoia appears to be largely influenced by emotional, cognitive and environmental factors (Freeman, Garety, Kuipers, Fowler & Bebbington, 2002). In terms of attributional style, persons with paranoid ideation tend to exhibit a "personalizing" bias in which they tend to blame others rather than situations for negative outcomes (Kinderman & Bentall, 1997). Stafyla, Kaltsidou and Spyridis (2013), who examined the gender differences as far as the ways that stress is witnessed in the work place is concerned, reported that men were found to express their stress at a larger extent than women through interpersonal conflicts with their colleagues as a result of organizational constraints.

Akintayo (2010) investigated the impact of work family role conflict on organizational commitment of industrial workers in Nigeria. He found that there was a significant contribution of work-family role conflict to organizational commitment. Also, it was found that a significant difference existed between

married and single respondents' experience of work-family role conflict. Operationally organizational conflict is a situation where employees see one another as competitors or threats and reacts in such ways to frustrate the attempts of the competitor. Depression is a psychological disorder characterized with loss of interest in pleasurable activities. Anxiety is a feeling of uneasiness, discomfort, tension or anguish, based on the apprehension of possible failure, misfortune or danger and Paranoid ideation is seen as irrational fear and avoidance of objects, places, people and situation.

Tsuno, Ishizaki, Tabata, Akyama & Kitazume (2009) investigated the possible associations of intragroup and intergroup conflict at work with psychological distress and work engagement. They reported that intragroup conflict was marginally significantly associated with psychological distress for both males and females. Also, intergroup conflict was significantly associated with greater work engagement for females and for men intergroup and intergroup conflict at work may increase psychological distress; while for females; intergroup conflict may increase both psychological distress and work engagement. Based on this premise, the following problem statement and research which have created a gap in literature were stated as thus:

Conflict in an organization can slow down organizational progress if its antecedents are not noticed and controlled. Many studies have produced literature on the concept of conflict and its debilitating effects in organization but all the major antecedents are yet to be established scientifically. For instance, it has not been scientifically established that depressive symptom is a major predictor of conflict in some organizations. Also, there may be insufficient studies in Nigerian organizations as regards psychopathological symptom as predictors of organization conflict.

In view of the above, the following research questions were answered in this study:
1. Would depression predict organizational conflict?
2. Would anxiety predict organizational conflict?
3. Would paranoid ideation predict organizational conflict?

This study will help to widen the horizon of our knowledge as regards the predictors of organizational conflict. It will also enable most organizational managers to understand and appreciate the relevance of psychological research in organizational setting.

Hypotheses
1. Depression will significantly predict organizational conflict.
2. Anxiety will significantly predict organizational conflict.
3. Paranoid ideation will significantly predict organizational conflict.

Method

Participants

A total of 157 bankers selected from five different banks in Onitsha through convenience sampling method were used in the study as participants. Out of the 157 participants 68 (43.3%) were single while 89 (56.7%) were married 99 (63.1%) were males while 58 (36.9%) were females. Their ages ranged from 19 to 51 years with a mean age of 32.41 and standard deviation of 7.67.

Instruments

Organizational Conflict Scale

The Scale was developed by Eze (2007). The scale comprised 13 items. The response options are based on 5-point Likert format of strongly agree (1) point to strongly disagree (5) points. The reliability of this scale was determined through test-retest reliability of r = 0.63 was obtained.

Symptoms Distress Check list 90 (SCL-90)

Three categories of psychological symptoms were examined. They include 10-item symptoms sub scale; 13-item depression sub scale; and 6-item paranoid ideation sub-scale of Symptoms Distress Check list 90 (SCL-90) by Derogatis, Limpman and Covi (1977).

The symptoms distress checklist 90 was designed to assess 10 primary categories of symptoms associated with distress. The 10 categories are somatization, obsessive compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, psychoticism and neuroticism. The scale is scored directly on 5-point Likert format: 0=Not at all; (I) =a little bit; (2) = moderately, (3) quite a bit; and (4) extremely. The three sub scales (anxiety, depression and paranoid ideation) were used. They were scored separately by adding together the values of the number shaded in each item in each section. One week interval test retest reliability coefficient was obtained with alpha coefficients of ranging from .77 to 90. (Derogatis et al, 1977).

Procedure
Collection of data for this study started with an official process of seeking the consent and approval of the appropriate authorities of the study settings. Researchers officially sought the permission of the bank managers of the various banks used for the study, while approvals were issued to conduct the study, a total of 180 questionnaire were administered to the participants. They were given two days to complete the questionnaire due to nature of their work. Out of 180 questionnaires administered, 160 were returned. Out of the 160 questionnaires returned, three were not properly answered. This amounted to the 157 that were used in the study.

Design / Statistics
This study is a predictive design utilizing a cross-sectional survey design and multiple regression statistics was used to analyze the data.

Results
The results were presented in the order in which the research hypotheses were tested.

Table 1: Mean and Standard Deviation on Depression, Anxiety and Paranoid Ideation as Predictors of Organizational Conflict.

Variable	Mean	SD
Depression	54.3	9.55
Anxiety	30.7	7.44
Paranoid Ideation	11.56	5.94

Table2: Summary table of regression analysis on depression, anxiety and paranoid ideation as predictors of organizational conflict.

Models				Unstandardized coefficient		Standardized coefficient
	R	*R²*	*F*	*B*	STD Error	*B*
Constant				4.79	2.19	
	.36	.14	15.60*			
Depression				.81	.04	.85**
Anxiety				.06	.04	.06
Paranoid ideation				-0.0	.04	.00

** $p<.001$

The three predictor variables contributed to 14% of the model R^2 =.14 $F(3,154)=15.60$, *P*<.05

Based on the above, the first hypothesis which stated that depression will significantly and independently predict organizational conflict among bankers was confirmed at $B =.81$; $t=20.71$, p<.05).

It was observed that depression was a highest predictor of organizational conflict among bankers based on the predictor variables examined in this study. The second hypothesis which stated that anxiety will significantly predict organizational conflict among bankers was not confirmed at $B=.06$; $t=1.41$, p>.05. The result also indicated that paranoid is not a significant predictor of organizational conflict at $B=-.00$; t=-.07, p>.05. The R^2 squared = .14

Discussion and Conclusion

Organizational conflict has been a reoccurring decimal in most organization in Nigeria, and many researchers have been hypothesizing to know what is responsible for its prevalence in the recent past. Hence the idea of a study was nurtured on Psychological symptoms (depression, anxiety and paranoid ideation) as predictors of organizational conflict.

Three hypotheses were tested in this study using regression analysis. The first hypothesis which stated that depression will significantly and independently predict organizational conflict among bankers was confirmed. This means that depression was a predictor of organizational conflict among bankers. This is supported by the findings of Ylipaavalniemi (2005), who found lagged effects on depressive symptoms. In his study, he did not only assume that depressive symptoms are related to conflicts, but also that people with depressive symptoms are more vulnerable to conflict.

The second hypothesis which stated that anxiety will significantly predict organizational conflict among bankers was not confirmed. This means that anxiety may not be relate to organizational conflict. This can be buttressed with the outcome of the study conducted by Tsuno, Ishizaki, Tabata, Akiyama and Kitazume (2009). They investigated the possible associations of intragroup and intergroup conflict at work with psychological distress and work engagement in a manufacturing factory in Japan. Their result indicated that intra group conflict was associated with greater psychological distress for males while intergroup conflict was marginally significantly associated with psychological distress for both males and females.

The third hypothesis which stated that paranoid ideation will significantly predict organizational conflict among bankers was not confirmed. This means that if employees and the employers are always in logger heads, the employees may not

be committed to work and as such organizational progress will be hindered. This implies that conflict in work organization affects workers commitment. When organizational conflict lingers it may lead to low productivity. Workers with depressive symptoms may not perform optimally in an organization.

Based on the findings, the researchers conclude that depressive symptom is positively related to organizational conflict among bankers. The researchers also conclude that anxiety and paranoid ideation may not necessarily be predictors of organizational conflict. The study implies that to control conflict in an organization, the issue of depression should be taken seriously. This is because increase in depressive symptoms may brings about an increase in organizational conflict. Most organization pay little or nothing to their staff and they are expected to put in their best to ensure maximum productivity. As a result of poor remuneration, most workers put up a look warm attitude towards achieving organizational goals. When organizational workers cannot have solution to their pressing needs, they develop some depressive symptoms which will drastically affect their psychological wellbeing. When workers are not working optimally as a result of depressive symptoms, it can lead to organizational conflicts. Organizational conflict has been implicated by the previous studies as one the major causes of low turnover in most organizations. The incidence of low productivity and low turnover currently suffered by most organization in Nigeria has lead to drastic laying off of workers in both private and public organizations and in most cases it may lead to untimely folding of some organization in Nigeria.

Recommendation
The researchers recommend that the government and organizational agencies should device means of moderating intra personal organizational conflict in other to increase the positive work attitude of employees. Organizational managers should always be mindful of the components of their leadership style and the work situations that can predispose employees to depression and anxiety and correct such situations or style of leadership. This will help to reduce the level of organizational conflict.

One of the major limitations of this study is that the results did not indicate the determinant of depression and other psychological symptoms rather it showed the psychological determinants of organizational conflict. The result of this should also be interpreted with care, this is based on the fact that small sample of participants were used.

Finally, the researchers suggest that having known the impact of some psychological symptoms on organizational conflict among bankers, more scientific

investigations should be conducted to disclose other variables that are likely to contribute to organizational conflict among bankers.

References

Akintayo, D. I. (2010). Work-family role conflict and organizational commitment among industrial workers in Nigeria. *Journal of Psychology and counseling vol. 2(1), pp.1-8.*

Blatt, S., Quinlan, D.M., Chevron, E.S. McDonald, C., & Zuroff, D. (1982). Depending and self-circticism: psychological dimensions of depression. *Journal of Consulting and Clinical psychology, 50, 113-124.*

Cohen, B. & David, S. B. (2009). Depression. (*Psychology) Micropt.*

Derogatis, L. R., Lipman, R. S., & Covi, L. (1977). SCL-90R: *Administration, Scoring and procedures manual.* Baltimore: John Hopkins University school of Medicine, Clinical psychometrics research unit.

Ellsworth, P. C, & Scherer, K. R. (2003). Appraisal processes in emotion. In R. J. Davidson, K. R. Scherer, & H.Hill Goldsmith (eds.), *Handbook of Affective Sciences (pp.572-595).* Oxford UK. Oxford University press.

Eze, O. (2007). Employee attitude and organizational behavior scale. *Journal of Organizational Behavior. 51(3)* 60-74

Freeman, D. (2007), suspicious minds: The psychology of persecutory delusions. *Clinical psychology Review, 27,425-457*

Freeman, D., Garety, P.A., Kuipers, E., Foeler, N., & Bebbington, D. (2002). A Cognitive model of Persecutory Delusions. *British Journal of Clinical Psychology, 41.*331-347.

Kinderman, P. & Bentall, R. P. (1997). Causal attributions in paranoia: Internal, personal and situational attributions for negative events. *Journal of Abnormal psychology, 106, 341-345.*

McKay, R., Langdon, R., & Coltheart, M. (2006). The persecutory deation questionnaire. *Journal of Nervous and Mental Disease, 194, 628-631.*

Neziek, J. B., Kowalski, R. M., Leary, M. R., Blevins, T., & Holgate, S. (1997). Personality moderators of reactions to interpersonal rejection: Depression and trait self-esteem. *Personality and Social Psychology Bulletin, 23,* 1235-1244.

Okpara, E. (1991). A study in social value differentiation among Nigerian sub-cultures. *Nigerian Journal of Psychology, 8, 17-23.*

Omoluabi, P. (1997). Standardization of Psychophysiological Symptoms checklist. *Nigerian journal of psychology*

Rahim, M. A. (2001). Managing conflict in organizations third edition. In Teasdale, J. D. (1983). Negative thinking in depression: cause, effect, or reciprocal relationship? *Advances in Behavior Research and Therapy, 5, 3-25.*

Richard, P. H. (2004). *Abornmal psychology*: clinical perspective on psychological disorder. McGroww Hill press.

Stafyla, A., Kaltsidou, G., & Spyrides (2013). Gender differences in work stress, related to organizational conflicts and organizational conflicts and organization constraint: An empirical research. *International Journal of Economic Sciences and Applied Research 6(1): 91-101.*

Tremblay, P. F., & Belchevski, M. (2004). Did the instigator in tend to provoke? A key moderator in the relation between trait aggression and aggressive behavior. *Aggressive behavior 30, 409-424.*

Tsuno, K., Ischizaki, M., Tabata M., Akiyama, M., & Kawakami, N. (2009). Intragroup and Intergroup Conflict at work, Psychological distress, and work engagement in a sample of employees in Japan. *Industrial Health, 47 (6),* 640-648.

Uchendu, C. C., Anijaobi-Idemf, N. & Odigwe, F. N. (2013). Conflict Management and Organizational performance in secondary school in cross river state, Nigeria. *Research Journal in Organisation Psychology & Educational Studies, 2(2), 67-71.*

Ylipaavalniemi, J., Kivimaki, M., Elovainio, M., Virtanen, M., Kelti Kangas Jarvinen, J., & Valitera (2005). Psychological work characteristics and incidence of newly diagnosed depression: a prospective cohort study of three different models. *Social Science & Medicine, 61-171-122.*

AUTHORS BIOGRAPHIES

Abamara, Nnaemeka Chukwudum is a Doctor of Philosophy in Clinical Psychology from Nnamdi Azikiwe University, Awka, Nigeria. He is presently a lecturer at Department of Psychology, Nnamdi Azikiwe University, Awka. He is a practicing Clinical Psychologists, his research interest is on mental health, with special interest on psychotic disorders and sleep disorders. Other areas are Psycho- neurology; Demographic and psychosocial predictors of cardiovascular illnesses, sexual abnormalities and deviation, and health psychology.

Anazodo, Nkechi Nneamaka holds a master of science degree in Industrial / Organizational Psychology from Nnamdi Azikiwe University, Awka Nigeria. She taught Psychology in Federal Polytechnic Auchi, Edo State and She is currently involved in private practice. Her research interests are on motivation,

organizational conflicts, job involvement, job stress, organizational climate, organizational citizenship behaviour.

Onyekaba, Onyinye C. holds a bachelor of Science degree in psychology from Nnamdi Azikiwe University, Awka Nigeria. She is currently working in a private firm in Port Harcourt, Rivers State Nigeria. Her research interest is on organizational conflicts and job commitment.

Onyemaechi, Chinwe I. is studying clinical psychology at Ph.D level in the Department of Psychology, Nnamdi Azikiwe University, Awka. She is interested in psychological wellbeing among married couples. chinweifyo@gmail.com