CHAPTER 39 CONFLICT RESOLUTION AND CRISIS MANAGEMENT

BOARD OF HEALTH ROLE AT A GLANCE

- Minimize conflict in a manner most beneficial to the board as well as protecting the public health.
- Attempt to resolve all conflicts that arise as part of public health duties.
- Efficiently manage crisis situations to ensure public health and safety.
- Informing the public about a crisis situation in a way that will not create panic or fear in the public.

INTRODUCTION

Board of health members often have to deal with situations within, as well as outside of the board, where confrontations can be expected. Conflicts can arise within a board due to board members disagreeing on important issues. Outside of the immediate board of health, conflicts can also arise due to other members of the state or local government disagreeing with decisions made by the board of health. Board of health members need to know how to handle these often precarious and difficult situations in a manner that is most beneficial to the board as well as to the public which the board of health is serving.

In addition to resolving conflicts, board of health members must also be able to efficiently manage crisis situations. This includes effective networking between various city, state, and local officials, as well as timely and appropriate notification of the public in emergency and crisis situations. There is a magnitude of information available to the public regarding the most efficient and effective ways to resolve conflicts and the most successful strategies for crisis management. This chapter attempts to consolidate the information available and present it in such a way that it will be applicable and useful to board of health members in the daily tasks that face them. A source list is included at the end of this chapter so that further and more in depth information regarding these topics can be obtained.

Conflict Resolution & Crisis Management

Conflict resolution and crisis management are becoming an increasingly prominent feature that members of boards of health are having to face. Conflicts and crisis can arise both within a board of health and can also come from outside the board. The conflict resolution and crisis management section of Guidebook, is an attempt to offer information and suggestions on how to effectively and quickly combat and prevent possible problem situations. Conflict may arise when there is disagreement within the board of health itself, or it may arise when the public or individual is unhappy with an action or inaction of board. It is important that such conflicts and crisis be resolved quickly in order to ensure that they do not interfere with the functioning and main purpose of the board of health, namely to ensure public health and safety.

Conflict has been defined as the interaction of interdependent people who perceive incompatible goals and interference from each other in achieving these goals. There have been a multitude of publications dealing with conflict resolution both in the workplace (i.e., intra-

board conflicts) and those conflicts coming from individuals outside the workplace (i.e., conflicts with the public). Several methods have been suggested for dealing with conflict and resolving problems in a timely and efficient manner. Some methods suggested for effective conflict resolution include group conversation dealing directly and head on with the problem at hand. Other methods stress avoiding the conflict in the first place through goal orientation and discussion.

CONFLICT RESOLUTION

Conflict Resolution Within Boards of Health

Conflicts occur whenever two or more individuals or groups of people disagree about an issue or an idea. Conflicts can be resolved in one of two ways; the outcome can either be positive and beneficial to both groups, or it can be negative and in the long term destructive to both groups involved. (Deutsch, 1973) The goal of members of local boards of health should be to resolve conflicts in the most positive manner possible. As long as conflicts exist within or outside of a board of health, these conflicts will present an obstacle that must be hurdled each time something new and beneficial is to be accomplished.

There are two ways in which most conflicts are traditionally dealt with. Conflicts are most often dealt with through cooperation or through competition. A cooperative method of conflict resolution is defined by Deutsch (1973), as "when a participant behaves in such a way as to increase his/her chances of goal attainment, while increasing the chances that the others, with whom he/she are in conflict with, will also attain there goals." In contrast, when a conflict is dealt with in a competitive manner, "the participant behaves in such a way as to increase his/her own chances of goal attainment, while decreasing the chances that the others with whom he/she are in conflict with, will attain their goals." Conflict will be most successfully resolved if all individuals involved attempt to act in a cooperative manner.

Within a board of health, the cooperative approach to conflict resolution can be easily achieved if all members agree, as so they should, that it is paramount that interboard conflicts be resolved in a manner that is timely as well as in the best interest of the community that the board is serving. Resolving conflicts is an important issue facing boards of health in Massachusetts; however, certain steps can be taken to aid in avoiding or minimizing conflicts in the first place. Gary P. Latham, in Worchel and Simpson (1993), presents a strategy called "goal alignment." Goal alignment involves sitting down as a group, such a board of health, and establish goals that very clearly define the board's purpose and what the board as a whole hopes to achieve within their community. Once the goals and desires of the board are agreed upon, it will become easier to achieve those goals and conflicts will be less likely to arise.

Conflict Resolution Outside the Board of Health

Conflicts dealing with individuals and groups outside of the board of health, whether they be other town and city officials or members of the general public, can often times be more difficult and tedious to resolve. When dealing with individuals outside of the board of health, problems arise because not everyone has the same ideas and views on what is the best for "public health." There have been several researchers who have suggested a number of ways to deal with and resolve conflicts when they arise outside of a group.

There are five basic methods for resolving conflict when dealing with people not closely related

to or involved with a board of health. Depending on the nature of the conflict and the outcome at stake, different methods of resolution should be employed.

- The first method of resolution is a competitive technique. This method involves a high level of assertiveness and a low level of cooperation (Folger & Poole, 1984). This technique should be employed only in those situations where compromise is unreasonable and would result in danger or harm to those people and ideals being protected under the board of health.
- A second style of conflict resolution using accommodating techniques used only be used when the goals and tasks of the board of health will not be compromised by resolving the conflict. This technique is an unassertive method that is high is cooperation, (Folger & Poole, 1984).
- A third style of conflict resolution should only be used when the other individual or group involved in the conflict is so irate or irrational that any attempts of mediation would be unfruitful (Folger & Poole, 1984). This method of conflict resolution is called avoidance, and should only be used when not resolving the conflict will not result in an outcome dangerous or harmful to the public's and the environment's health.
- A collaborative style of conflict resolution is a fourth method. This method is both very assertive and very cooperative (Folger & Poole, 1984). This method works to attain a solution that meets the needs of all individuals and groups involved in the conflict.
- The fifth and final method of resolving conflict is very similar, if not identical to the methods suggested for intergroup conflict between board of health members. This method of resolution is called compromising. In this method, the disagreeing groups "split the difference", that is the two parties involved reach a compromise that is suitable for both (Folger & Poole, 1984). Board of health members should attempt to use this method as frequently as possible because this method will be most beneficial for maintaining good relations between the board of health and members of other groups also involved in the conflict.

Active Listening

Whether the conflict is within the board of health itself, or a result of problems outside of the board, there is one technique that should be employed every time a crisis arises, no matter how large or small the problem may be. That technique is called active listening. It involves paying close attention to all parties involved so that they, or he/she, knows that you are listening and have not already pre-judged there ideas and opinions. It is imperative that any time a crisis arises, that all board of health members carefully and attentively listen to all sides of the problem. Many times the ideas of the angered individual or group may be irrational and irate; however, most times escalated situations can be managed if the board of health is attentive and listens to the grievances of the individual and/or group, in such a way that he/she knows that their concerns are important to the board.

It is important that board of health members attempt to resolve all conflicts that face it. It is difficult if not impossible for a board of health to function in a manner that is suitable and effective, when faced with conflicts from individuals and groups outside of the board. It is for this reason that members of boards of health be educated and familiar with a variety of ways to

resolve conflict. With the knowledge supplied above, and with a bit of common sense and a desire for the best possible outcome, the board of health should be able to deal with most conflicts that come before it.

CRISIS MANAGEMENT

Suggestions for Board of Health Members

Crisis' will invariably arise when dealing with issues that are pertinent to both the public at large and the environment and the health of the surrounding area. When crisis do arise it is imperative that board of health members handle these crisis in a manner that is timely and informative to the general public. If board of health members do not deal with a situation appropriately, mayhem within a community may result. Board of health members must be very cautious when dealing with issues that may be sensitive to the general public. This information should be utilized and adapted to particular situations when dealing with crisis situations.

When a crisis situation faces a board of health, be it a food contamination issue, an environmental contamination issue, or anything else of imminent public concern, it is important that boards of health deal effectively with the crisis in their own offices first, and then supply the general population with information that is necessary. When informing the public about a crisis situation board of health members must first, and most importantly, make sure that the information that they release to the public will not create a panic. If board members release detailed information regarding a situation using terminology and topics with which lay people are not familiar, it is very likely that the public will become confused. With confusion often comes panic and anger, both which will make an already critical situation even worse. For information and guidelines for writing a press release, consult Chapter 6 of this *Guidebook*, this section provides information on how to, as well as when to inform the public about a situation that the board of health is dealing with.

When dealing with crisis situations, board of health members need to be able to act in a calm and concise manner. It is often necessary for board of health members to deal with situations that are not pleasant and often urgent. In situations of this sort it is imperative that board members know all protocol dealing with the particular situation, as well as all of the agencies and individuals that need to be contacted following a crisis situation. This section is not intended to list all the individuals that need to be contacted; however, other sections of this *Guidebook*, as well as *The Legal Handbook*, Benes (1995), are good places to look for information relative to a variety of crisis situations.

NOTE: This chapter was contributed in large part by the efforts of Shandy Kelsey who was a research assistant to Dr. Gary S. Moore at the University of Massachusetts.

Sources For Further Information

MAHB Training CD - Conflict Management and Conducting a Hearing www.mahb.org

Breggin, Peter R. (1992). Beyond Conflict: From Self-Help and Psychotherapy to Peacemaking. St. Martin's Press; New York.

Deutsch, Morton (1973). The Resolution of Conflict: Constructive and Destructive Process. Yale University Press;

New Haven.

DuBois, Rachel D. & Li, Mew-Soong (1971). *Reducing Social Tension and Conflict Through the Group Conversation Method.* Association Press; New York.

Folger, Joseph P. & Poole, Marshall S. (1984). Working Through Conflict: A Communication Perspective. Scott, Foresman, and Company; Illinois.

Knight, Douglas E., Curtis, Huntington, W., & Fogel, Lawrence, J. (1971). Cybernetics, Simulation, and Conflict Resolution: Proceedings of the Third Annual Symposium of the American Society for Cybernetics. Spartan Books; New York.

Sherif, Muzafer, Harvey, O.J., White, B. Jack, Hood, William R., & Sherif, Carolyn W. (1961). *Intergroup Conflict and Cooperation*. The University Book Exchange; Norman, Oklahoma.

Worchel, Stephen & Simpson, Jeffry A. (1993). Conflict Between People and Groups: Causes, Processes, and Resolutions. Nelson-Hall Publishers; Chicago.