RESEARCH PAPER (ORIGINAL)

Authority of Nurse Managers to Resolve Conflicts: A Humanist Perspective

Autoridad de Gerentes de Enfermería en la Solución de Conflictos:

Una Mirada Humanista

Autoridade para Resolver Conflitos por Gerentes de Enfermagem: Um Olhar Humanista

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Abstract

Theoretical Framework: Phenomenon of study: Authority exercised by nurses is based in the referential of symbolic interactionism, giving meaning to their subjectivity.

Objectives: To analyse how nurse managers apply authority in conflict resolution and its meaning.

Methodology: Qualitative, descriptive research conducted in Portuguese health institutions. Thirteen nursing leaders of the highest management level participated in the study. Interviews were conducted. Then, the information was selected through the colorimetric technique to associate contents and confirm categories. The systematic and interpretative analysis was used to determine the symbolism of authority and conflict resolution.

Results: The nurse manager has specific skills and characteristics in the affective dimension and capacity to help during conflict management. Authority acquires a humanised meaning to be applied with impartiality, justice and equality, taking into account the health needs of the citizen.

Conclusion: The humanised intervention of the manager projects a strategy posture before the conflict, showing the integrating components: Nurse, process, institution and society.

Keywords: Nursing; management; hospitals; conflict

Resumen

Marco contextual: Fenómeno de estudio: Autoridad ejercida por enfermeros en la solución de conflictos, fundamentada en el referencial de interaccionismo simbólico, para dar significado a su subjetividad.

Objetivos: Analizar la forma en que los gerentes de enfermería aplican la autoridad en la solución de conflictos y su significado.

Metodología: Investigación con enfoque cualitativo, descriptivo, cuyo escenario fueron instituciones de salud portuguesas. Participaron 13 dirigentes de enfermería de alto nivel gerencial. Se utilizó la entrevista; posteriormente, se seleccionó la información mediante la técnica colorimétrica para asociar contenidos, conformando categorías. Se discutió mediante el análisis sistemático e interpretativo para determinar el simbolismo, de autoridad y la solución de conflictos.

Resultados: El enfermero gerente posee competencias y características en la dimensión afectiva y capacidad de ayuda durante la gestión del conflicto, la autoridad adquiere un significado de dominio humanizado, para aplicar con imparcialidad, justicia y equidad, visualizando las necesidades de salud del ciudadano.

Conclusión: Lala intervención humanizada del gerente proyecta una postura estratégica ante el conflicto, mostrando los componentes integradores: Enfermero, proceso, institución y sociedad.

Palabras clave: Enfermería, gerencia; hospitales; conflicto

Resumo

Enquadramento: Fenómeno de estudo: Autoridade exercida por enfermeiros, fudamenta-se mediante o referencial de interacionismo simbólico dando significado á sua subjetividade.

Objetivos: Analisar a forma como os gerentes de enfermagem aplicam a autoridade na solução de conflitos e seu significado. Metodologia: Pesquisa com enfoque qualitativo, descritivo, tem como cenário as instituições de saúde portuguesas, participaram 13 dirigentes de enfermagem de máximo nível de gerência. Sua técnica foi entrevista, posteriormente selecionase a informação diante a técnica colorimétrica, para associar conteúdos, conformando categorias, discutindo diante análise sistemática e interpretativa para determinar o simbolismo tanto de autoridade como a maneira de solucionar os conflitos. Resultados: O enfermeiro gerente tem que possuir competências e características na dimensão afetiva e capacidade de ajuda, durante a gestão do conflito a autoridade adquire um significado de autoridade humanizada, por aplicar imparcialidade, justiça e equidade, visualizando as necessidades de saúde do cidadão.

Conclusão: A intervenção humanizada do gerente projeta uma postura estratégica diante o conflito mostrando os componentes integradores: Enfermeiro, processo, instituição e sociedade.

Palavras-chave: Enfermagem; gerência; hospitais; conflito

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Introduction

From the point of view of the state, authority can be considered as the force exercised by a person legally empowered by an institution to perform generally recognised functions. Thus, leadership is the ability to influence, motivate and enable others to contribute to the success of their organisations (Fradiqui & Mendes, 2013). A manager, by the nature of his/her role, should be able to command or impose his/her point of view and be respected. Thereby, he/she will be considered a good leader, consistent with the complex demands of modern health organisations, which require managers with knowledge and skills to face the day-to-day problems that emerge, among other aspects, due to the interaction of the workers. Because of that, a manager must be distinguished by his/her fairness and impartiality, devoid of prejudice and sufficiently capable to not be dominated in the direct contact with the staff (Rodríguez, 2007), since he/she has an important role within the organisation, not only for its proper development but also for the proper development of the human capital.

The authority in the field of nursing aims to make changes, cause behaviours that enable to interact in a collective manner and promote the growth and development of society, in such a way that the personal and professional development of nurses is essential for management, which demands a constant personal advancement and requires more knowledge for the professionals, as well as for the organisational structure of the hospital institution where they work. In this sense, the management role might seem an individual personality characteristic (Guedes dos Santos et al., 2013). However, the accumulated skills in their professional practice are converted into a platform for the management practice, which allows the nurses to perform safe management activities, promote the relationship process in an interdisciplinary way, make decisions, take responsibility for the developed role, but, above all, express their skills to interact, their initiative to undertake actions, solve conflicts, as well as have a positive reaction to the problems.

Such a central role as directing the human element within an organisation would hardly be competitive without an authority that meets the requirements of the individuals (Landerdahl, Vieira, Cortes, & Padoin, 2013). As a result, this led us to reflect in this study

on the type of authority that nurses have to have within the organisations to face any social demand. Therefore, the objective is to analyse the way in which every nursing manager uses his/her authority in conflict resolution.

Background

This phenomenon is connected with the ideas of referential symbolic interactionism, in order to determine the symbolic understanding of the technical dimension of the actions of the nursing manager regarding authority, whose focus is perceived as a group interaction within the health organisations. It is important to point out that the behaviour is perceived not as a direct response to the activities of others, but they involve the intentions of others and become symbols, thus able to be interpreted. However, as in symbolic interactionism, the central point is the symbol, in which the meaning of things originates from the social interaction between the individual and the others. These symbols are manipulated and modified through an interpretative process used by the subject when dealing with things and situations (Silva & Valadares, 2013). In other words, the symbols are a class of social objects used to think, communicate and represent. It is through the symbolic interaction that meanings are attributed to the reality in which we react. Therefore, they can only be categorised as symbolic when they express a meaning.

Interactionism assigns major importance to the meaning that things have for human behaviour. In addition, it considers that the meaning emerges from the interactive process established among people. In interactionism, meaning is the central concept in which actions are built from the interaction between individuals. Once actions are defined, they appear in the social scene in which they are inserted (Álvarez, 2010).

In 1969, Blumer described the core assumptions of the interactionism theory, besides the complex relationship between society and individual, the origin of the *Self*, the development of significant symbols in the process of behaviour when relating it to self-reflexive behaviour of the individual in the process of social interaction.

Considering the premises of interactionism and the relevance assigned to the meaning of things for the

individuals, as well as the fact that the attributed significance comes from an interactive relationship, the adaptation of the interactionism theory with the subject of study in this research is recognised, since it tries to interpret a conflictive interaction in the exercise of authority by the nurse manager.

According to the perspective of symbolic interactionism, it is not possible to perceive the human being without the society and vice versa, since both are constantly interrelated through the creation of interaction and its symbolic results (Perlo, 2006). On the other hand, the symbolic interactionism has been used in nursing because it is a theory in which meaning is the central concept and "the individual and collective actions are built from the interaction between people who, depending on the situations, react in the social context" (Alvarez-Gayou, 2010, p. 46). In this way, this significance becomes a parameter to address the nursing management interventions in various circumstances, for example, the conflicts within the health organisations.

Research questions

To accomplish the objective set out, the following questions are presented: What is the meaning of authority for the nurse leader? What authority do nursing leaders have to solve conflicts within the health institutions? With these questions, we aim at identifying how the style of authority exercised by the leader influences the institution.

Methodology

The research has a qualitative approach, and its purpose is to describe in detail situations, interactions, observed behaviours and their manifestations. It also has a descriptive focus because it accurately shows the angles or dimensions of a community, context, phenomenon, event or situation (Hernández, 2014). For this research, nursing leaders were interviewed in their workplaces, i.e. public hospitals of second and third level of care, located in different areas of Portugal. The inclusion criteria were: nurses at a management level who, at the time of the study, had taken on the position of directors or leaders of the nursing staff for more than two years, and who were

in positions of higher hierarchy in the institution (directors of nursing) in order to find the symbol of authority in their interventions.

It is noteworthy that there were no limitations to implementing the study. Moreover, we believe that due to the level of knowledge and competences on the topic, data saturation was achieved with 13 participants. It was not necessary to eliminate interviews, but to apply the pilot test of the instrument in two of them. The instrument used was the semi-structured interview that consisted of 10 questions generated from the questions formulated based on the objectives. At the end, an open question was asked to the participants for them to be able to expose additional ideas.

Symbolic interactionism as a methodology is used to facilitate and clarify the understanding of the concepts relevant to the interaction. The theory was used to discuss the results, since it is characterised by seeing the social life as a product of the interactions of its actors. The main criteria underline the importance of the symbolic environment, being the subjects those who give meanings and intentions (García Martínez, 2009). For the reasons set above, the scientific perspective had a great applicability to the object of study, which is to interpret the meaning of the authority of the nurse or the nurse manager to solve conflicts in the health institution.

Regarding the fieldwork, several phases are considered, including data collection through interviews. All interviews were transcribed in full and translated. Then, a comprehensive reading and critical analysis of these data was carried out in order to capture the ideas with greater significance and select the most important information. The colorimetric technique was used. It consisted of using colours for marking and confining the relevant contents identified in the participants' answers in order to bring together the contributions to the topic and associate the information to contextualise the five categories that resulted from the collected material. In the analysis performed with the aim of interpreting the underlying content found in the manifestation of the experiences related to the participants' clinical practice, the symbolic interactionism was used. It allowed the abstraction of the cognitive representations in order to be compared with the theoretical reference. Such comparison enabled to visualise the relevant structures of the empirical

and theoretical material (Santos et al., 2013). The discussion was performed based on a systematic and interpretative analysis of this information to determine the symbolism or meaning of authority and the way of solving conflicts. Finally, the results are presented in categories and subcategories.

Ethical aspects of the research. In every research, there are elements that must be explicitly expressed in a free informed consent (Cantú, 2010). In this case, the informed consent was read and signed by the participants before the interviews, in compliance with the policies, regulations and legal provisions of the international regulations currently in force, whose aim is and will be to protect the integrity, rights and well-being of the participants. To comply with this norm, the research project was sent to the Ethics Committee of the Nursing School of Coimbra, whose approval is included in document no. 227-10/2014. This document includes the ethical principles followed in the study, such as the anonymity by identifying persons with a number and privacy by not indicating the name of the hospitals where the participants worked. To protect the access to specific data, these will be protected during five years and no other people will have access to them. Due to the characteristics of knowledge, objectivity and impartiality of the research, this is considered to be of low risk, since only persons were interviewed and no financial, employment or professional conflicts were registered.

Results and Discussion

The categories that emerged from the results were: Conflict origin and management, conflict resolution skills, taking advantage of the conflict and humanism in the conflict with its respective subcategories justice, impartiality, and halo effect.

Nursing management in considered a great challenge for nurses in the performance of their role. Therefore, a professional dedicated to management should have authority, a large body of knowledge and characteristics in the affective dimension, such as a capacity to help and assist.

Origin of the conflicts – The nature of the life of human groups lies in the many activities performed by the individuals in their life when meeting and interacting with each other. The symbolic interactionism argues

that meaning is generated in the process of interaction between people. This is not always well understood and therefore leads to conflicts consistent with the version of the research participants:

Many conflicts arise due to communication problems within organisations, in the relationships between individuals, such as the so-called misinformation, the relationships of power poorly resolved in the management field, the lack of competence to deliberate a process, of skills in communication or in the cognitive domain. (E-1; Nov., 2014)

Conflicts arise due to differences of opinion. Most of the times, I try to understand the points of view of the parties involved in the conflict. (E-6; Nov., 2014)

As shown in the social framework, there are situations where meanings are handled or modified by means of an interpretative process during the communication with peers within a different interpretative framework. It is advisable to try to understand the origin of the conflict, since if it is possible to identify the origin of the conflict, it is easier to solve it (E-2; Nov., 2014).

Considering that one of the objectives in terms of conflict management is to solve the problem, it is imperative to add the people and parties involved to continue developing the work in the organisation.

Conflict Management - Conflict management responds to the requirements defined by health organisations due to the social and ideological practices and, especially, in the large health institutions, since they are complex organisations that bring together most of the health professionals. For this reason, confrontation is common in situations of dispute (Amestoy et al., 2014). Such circumstances must be addressed through collective processes of interpretation, as shown in the following accounts:

The first thing that I try to do is to listen to all those involved in order to understand the different perspectives on the conflict, after having listened to all those involved and understand what is happening. (E-5; Nov., 2014)

The first attempt of intervention is to listen to people, having the ability to schedule meetings and to be available to listen to the different positions not only of those who tell us about the conflict, but all other parties. (E-2; Nov., 2014)

For the above-mentioned reasons, the process should start with an exploration, whose purpose

will be to find a starting point to clearly understand the problem, identify the appropriate data, identify important associations and, in general terms, ensure that the authority of any manager is directed towards that direction (Gomez-Torres, Ángeles-Ávila, & Martínez-Garduño, 2011).

As a result of this reflective communication process, the interpretation becomes the act of managing meanings. The person selects, verifies, regroups and transforms the meaning regarding the present situation and the direction for each action. In this regard, the participants stated:

Conflicts have to be analysed and studied in order to determine the best strategy to solve them. There must always be common sense and sensitivity. Therefore, these two characteristics are going to direct and indicate the way to go (E-4; Nov., 2014).

A proper conflict management allows us to achieve integrated solutions to deal with and resolve it in a more constructive, productive and above all humanised way (Tardivo & Fernández Fernández, 2014),

since to provide an interpretation and meaning to the conflict, it is essential to obtain information about the facts. In terms of conflict, everything must be supported by concrete facts, scientific documents, and records, trying to separate it from the process of communication. (E-1; Nov., 2014)

Indeed, the strategic component is essential for the effective management of any organisation. It occupies a central position because when transmitting information the ideas, feelings and activities of the staff can be coordinated in the search for common goals and a suitable working environment with the purpose of channelling organisational conflicts, as well as administrative obstacles (Valbuena, 2012).

A strategy from the humanised perspective is the "peaceful confrontation", which for some means: Appealing, which is a process that is not immediate; first listening to the parties, then promoting a

first listening to the parties, then promoting a meeting between those in conflict so that, with all the sincerity, each party says what he/she has to say (E-1; Nov., 2014).

I try, along with those who are involved in the conflict, to understand the point of view of the others and the organisation (E-5; Nov., 2014).

Nurse managers are characterised by creating collective management spaces, where they can

act as social actors, i.e. share the decision-making process and acquire the capacity for analysis to solve their problems (Spagnol, 2005), in such a way that it becomes an integrative action which reflects the performance within a framework of authority focused on the human being.

Humanism in the conflict - A humanist organisation must be a moral, flexible, comprehensive and open agent in accordance with its purposes, centred in the human being. Therefore, the organisation and the human being act around the concept of human quality, oriented towards a social plan where life is projected. This is because the conflict manager assumes his/her authority based on the adoption of more democratic, humane and ethical postures, which promote the workers' freedom of expression, with a view to overcoming conflicting relationships and avoid authoritarianism and oppression (Souza & Melo, 2009). Below two views on the matter are presented:

By marginalising one of the parties, we are not solving the conflict; it is going to perpetuate in the organisation and in our team. For that reason, I think that . . . the component of conflict management of aggregating people and I believe that all of us as individuals have an infinite potential for development . . . that is, helping the person to move forward in order to avoid future conflicts and basically having a humanist attitude. (E-1; Nov., 2014)

And that no one feels that was the only one to give away or that I was obliged or forced, since the intention is that loses are always fair in order not only for the objectives of the organisation to be met, but also for people not feel sad, unfulfilled and without motivation to collaborate with the organisation. (E-8, Dec., 2014)

These answers helps us identify what is characteristic and outstanding of the humanised resolute paradigm, which implies that the individual is seen as a physical, psychological and emotional being, in which the humanist condition, in dealing with the problem, offers the alternative to meet the needs in an efficient and effective manner, since it shows the processes within their social reality, based on the humanised skills existing within the organisation. That is an essential feature of nursing management according to the results.

Justice in the conflict - The world of each person or group is composed of objectives which are the product of the symbolic interaction, where physical, human, conceptual and moral objects - such as justice - are present in the expressions of the interviewees, which symbolise an act of nature in human action:

In a situation of conflict, we have to avoid that some of the participants can lose, but in case of loss that should be as minimum as possible. I have always tried that every party involved in the conflict could obtain what it is fair or could be strictly benefitted. (E-7, Dec., 2014)

If it is not possible for all those involved in the conflict to win, they should have at least a clear notion of justice in which both parties make compromises (E-8., Dec., 2014).

The principle of equity has to be the main objective of satisfaction in conflict resolution. Consequently, when it is applied, it improves the worker's performance. Moreover it is also essential that justice prevails as a source or form of employment relationship, thus projecting a reliable organisational vision.

Impartiality in the conflict - In conflict management, the manager is not allowed to take the risk of supporting one of the parties:

That is not always easy, since one of the parties or one of the people involved may be correct and the other not (E-1, Nov., 2014).

Understanding what caused the conflict from the perspective of the various participants to prevent having a distorted perspective on one side of the parties, looking for possible and beneficial solutions for everyone involved, that is, understanding the point of view of the others and the organisation. (E-5. Nov., 2014)

The managers' performance is, in these cases, the analysis of what they perceive and the construction of a behaviour based on impartiality in order to project their interpretation to all those involved, since the reflexive behaviour only emerges when people become self-aware, enabling the person in charge to control and organise things.

Halo effect in the conflict - This cognitive bias refers to a particular individual inclination of the manager towards one of the parties, when there is some bond of affection or admiration based on various characteristics of the worker. In this way, the managers take advantage of the relationship and the power in favour of the other, with the intention of protecting themselves. One interviewee discusses his/her position on the matter:

To guarantee the principles of impartiality, it is mandatory that the manager avoids the halo effect, considering that, in a conflict, the manager can have a privileged personal relationship with one of the parties. However the manager should be careful not to side by one of those involved due to their personal relationship, and should always attempt to be as impartial as possible. (E-1., Nov., 2014)

To avoid the above-mentioned situation, it is important that the managers' behaviours are as neutral as possible with regard to their strategic intention, since there is usually a tendency to respond to the conflict more emotionally than rationally.

Conflict resolution skills - Nowadays, competences are terms that can be used to develop a series of skills: ability to perform an activity easily and without complications, planning them mentally to perform them almost automatically (Rocha, Correia, Costa, Vieira, & Macedo, 2014). Competence as a consolidated knowledge must form the basis for the practice and subsidise the development of ways to cope with old and new problems at the workplace and specific problems in the profession.

Nursing managers should have the capacity to lead, which is an important factor for these professionals to guide their team and facilitate work and the solution of everyday problems, as the following results show:

I take on conflict management when I think that I have the competences to do so. I have to feel able to lead the conflict because if I don't feel capable, I become part of the conflict. The competence has to do with scientific knowledge, with the psychomotor domain and more with the affective dimension of relationship, that is, the three dimensions of Botefeque. (E-1; Nov., 2014) In a problematic situation that can generate conflicts, it is important to remain calm, have the ability and the discernment to listen to the people involved, explore the different perspectives and then calmly be able to help find lines of action to mitigate, harmonise and eliminate what caused the discomfort. (E-2; Nov., 2014)

Intergroup, interpersonal and individual conflicts can lead to positive and negative situations, as well as to constructive and destructive situations in the organisation because they generate cohesion, and the search for creative and new solutions to eliminate differences in the establishment of mechanisms to solve problems. Then, the influence of humanistic components will always be a positive factor for the members of the organisation (Matta, 2013). When this is not possible, the strategy is to continue to seek advice from experts in the respective area, as can be seen in the following account:

Within the organisation, I identify the most capable person, knowing that although a nurse manager cannot transfer his/her responsibility for this domain to others, he/she can lead the process or call another person to assist in process management (E-1., Nov., 2014).

Take advantage of the conflict -The conflict is perceived as something negative due to the tension it generates and the energy required to solving it. However, the value obtained will depend on the perception of the parties involved and the final outcome, recognising that it is a means to produce a change (Nina-Estrella, 2013), which is in line with the answers of the interviewees:

I often see an opportunity in a conflict and that's why leadership is very important because sometimes these conflicts can be a resource for service management (E-1; Nov., 2014).

I don't see the conflict as a problem, rather as a need, so long as it does not include the so-called pathological intention that is excessive in this tension (E-3; Nov., 2014).

This can be a win-win situation, where the organisation benefits from it and the people do not feel attacked and even be able to perceive the benefits of a new way of doing things (E-5; Nov., 2014).

In this way, the emergence of profits within its humanist dimension can enable transformations of the structures in the way of acting within the health institutions and incorporate the concept of shared equity, which has an impact on the performance of the people as a social concept, where:

At some point, the conflict should facilitate and preferably without prejudice to both parties, with more profits and a better understanding so that the solutions found are useful to achieve the ultimate goal, which is always seen as the necessary responses to the citizen's health. (E-1; Nov., 2014)

Symbolic interactionism considers that the meaning of things for human beings is present in joint actions. In order to explain their behaviour, not only the meaning of things is required, but also the anticipation of the presence of problems with a different mental planning for the manager, where the crisis is an opportunity for growth, since the problems are their raw material.

Conclusion

Through a critical and reflective analysis, the research allowed to determine how nurse managers assume a distinctively humanised perspective to solve organisational conflicts, converting it into a symbol or meaning which makes them act from a cognitive, emotional and technical perspective, showing the integrative components: nurse, process and institution, in accordance with the principle of symbolic interactionism.

Symbolic interactionism and its concepts were critical, since the theory revealed the importance of interpretation in the managers' interventions. This suggests that, in case of a communication conflict, a complete communication nomenclature must be usually used with similar meanings for all, where the capacity of the people who work as communication centres, either high-level or middle-level managers, establish them as strategies with a preventive focus on the conflicts in the respective system and without being interrupted or modified without the knowledge of the members of the institution.

An important contribution to the management practice is to avoid the halo effect in conflict resolution, in such a way that, if there is any close relationship where the manager of the conflict has any connection with one of the parties, it will be necessary to delegate the task to another competent person who will solve the problem. If that is not possible, the manager should provide a way for minimising emerging antagonisms, either by assuming an impartial and fair position not to cause resentments among those involved and avoid personal confrontation, or assuming an equitable attitude.

The study provides significant contributions that encourage the further exploration of themes such as: hidden behaviours in the presence of problems due to the peculiarities and interpretations of the subjects involved and the frequent occurrence of conflicts within the organisations, which are useful aspects for management in particular and for the nursing science in general. The above-mentioned aspects refer to the everyday issues and transcend the function, where

symbolic interactionism may contribute to solving this social phenomenon.

References

- Amestoy, S. C., Schubert, B. V., Lima, T. L., Corrêa, Á. V., Lins de Oliveira, F. A., & Neves, S. C. (2014). Compreensão dos enfermeiros sobre o exercício da liderança no ambiente hospitalar. Cogitare Enfermagem, 19(3), 475-482. Retrieved from http://ojs.c3sl.ufpr.br/ojs2/index.php/cogitare/article/ view/35006/23217
- Cantú, M. P. (2010). Bioética e investigación en salud. México: Trillas
- Fradiqui, M. J., & Mendes, L. (2013). Efeitos da liderança na melhoria da qualidade dos cuidados de enfermagem. Revista de Enfermagem Referencia, 3(10), 45-53. Retrieved from http://esenfc.pt/rr/index.php?module=rr&target = publicationDetails&pesquisa=&id_artigo=2390&id_revista=9&id_edicao=52#
- García Martínez, J. G. (2009), Métodos de investigación administrativa (2ª ed.). México: Trillas.
- Gómez-Torres, D., Ángeles-Ávila, G., & Martínez-Garduño, M. D. (2011). Modelo de dirección de hospitales por enfermeras. *Aquicban*, 11(3), 316-326. Retrieved from http://www.redalyc.org/articulo.oa?id=74121424007
- Hernández, S. R. (2010). Metodología de la investigación (5^a ed.). México: Interamericana.
- Jurgenson, J. A-G. (2010). Cómo hacer investigación cualitativa fundamentos y metodología: Fundamentos e metodología. México: Paidós.
- Landerdahl, M. C., Vieira, L. B, Cortes, L. F., & Padoin, S. M. (2013). Processo de empoderamento feminino mediado pela qualificação para o trabalho na construção civil. *Escola Anma Nery, 17*(2), 306-312. Retrieved from http://www.revistaenfermagem.eean.edu.br/detalhe_artigo.asp?id=876
- Matta, J. P. (2013). Intercambios, moralidades y conflictos. *Intersecciones en Antropología, 14*(1), 171-182. Retrieved from http://www.redalyc.org/articulo.oa/id=179531063010
- Nina-Estrella, R. (2013). El conflicto intercultural desde un contexto comunitario. Revista Puertorriqueña de Psicología.

- 14, 1-18. RRetrieved from http://www.redalyc.org/articulo.oa?id=233227551002
- Perlo, C. L. (2006). Aportes del interaccionismo simbólico a las teorías de la organización. *Invenio: Revista de Investigación Académica*, 9(16), 89-107. Retrieved from http://www.redalvc.org/articulo.oa/id=87701607
- Rocha, A. D, Correia, S. M., Costa, C. M., Vieira, P. S., & Macedo, A. P. (2014). Teste no tempo: Da teoria clássica da administração à organização atual do trabalho de enfermagem. Revista de Enfermagem Referência, 4(2), 111-120. Retrieved from http://dx.doi.org/10.12707/RIII13109
- Rodríguez Valencia, J. (2007). Administración moderna de personal. México: Thomson.
- Santos, J. L., Prochnow, A. G., Silva, D. C., Silva, R. M., Leite, J. L., & Erdmann, A. L. (2013). Prazer e sofrimento no exercício gerencial do enfermeiro no contexto hospitalar. *Escola Anna Nery*, 17(1), 97-103. Retrieved from http:// www.revistaenfermagem.eean.edu.br/detalhe_artigo. asp?id=843
- Silva, P. R., & Valadares, G. V. (2013). Vivenciando o conjunto de circunstâncias que influenciam na significação da alta hospitalar: Estudo de enfermagem. Escola *Anna Nery*, 17(2), 249-255. Retrieved from http://www.redalyc.org/articulo. oa?id=127728367007
- Souza, M. K., & Melo, C. M. (2009). Atuação de enfermeiras nas macrofunções gestoras em saúde. Revista Enfermagem UERJ, 17(2), 198-202. Retrieved from http://www.facenf.uerj. br/v17n2/v17n2a10.pdf
- Spagnol, C. A. (2005). (Re)pensando a gerência em enfermagem a partir de conceitos utilizados no campo da saúde coletiva. *Revista Ciência & Saúde*, 10(1), 119-127. Retrieved from http://dx.doi.org/10.1590/S1413-81232005000100019
- Tardivo, G., & Fernández Fernández, M. (2014). El interaccionismo simbólico en Italia y España: Un camino por recorrer. Barataria: Revista Castellano-Manchega de Ciencias Sociales, 18, 45-63. Retrieved from http://www.redalyc.org/ articulo.oa?id=322132553004
- Valbuena, M., Morillo, R., Montiel, M., & Hernández, J. (2012).

 Gerencia estratégica y los conflictos organizacionales.

 Multiciencias, 12, 270-276. Retrieved from http://www.redalyc.org/articulo.oa?id=90431109044