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Dealing with Workplace Adversity in Emerging Markets

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Abstract

Individuals face adversity at workplace becomes emotionally drained, psychologically disturbed, and are totally burned. Employees after encountering such events have low level of commitment towards their work and also start thinking about leaving their jobs. Contrary to these negative resources, some positive resources do exist within us in the form of resilience. The main purpose of the study is to highlight the adaptive and maladaptive behaviors of an individual when they face adversity. Healthcare personnel exhibit negative as well positive work outcomes when they face adversity at work. Each individual possess the reservoir of positive resources but the way these resources are utilized differs a lot. Due to this some people face adversity as a challenge and some are totally shattered after facing traumatic work events. In this study, the scenario-based experimental design is used to understand the positive and negative resource impact on employee performance contribution and job.

I. Introduction

INDIVIDUALS AT WORKPLACE are faced with unpredictable working hours (Evers, Tomicand Brouwers, 2001), toxic supervisor and colleagues (Cortina, Magley, Williams and Langhout, 2001), obnoxious work assignments (Molinsky and Margolis, 2005), or supervisor's incivility (Cortina, Magley and Williams, 2001). The impact of these events increases manifold when an individual encounters an unexpected adversity at work which drains his physical and mental well being. Workplace adversity is defined as an individual's experience of some sudden and shocking events which threatens their healthy development (Daniel, Wassell and Gilligan, 1999). Workplace adversity can have different expressions in the form of a physical assault, verbal abuse, bullying or even homicide (Hoel, Rayner and Cooper, 1999).

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Finally an important implication of this research is resilience. An employee with resilience in his attitude performs well despite of setbacks because of his positive resources. Every individual possess positive resources and these resources can be increased if he is surrounded by positive environment. Thus, a major implication that if workplace culture is good then employees tend to develop more of positive resources which makes them more confident and competent to handle challenging work situations.

5.3 Limitations and future directions

The main limitation of our study was the use of narrative descriptions of a fictitious hospital to generate feelings when doctors underwent situation of adversity. For future studies, use of descriptions and videos from original events of actual hospitals can be used, so that the degree of realism can be enhanced. We believe that manipulations generated through our scenarios were weaker, in comparison to real experiences of adverse situation.

In our study we tried to measure the experiences of doctor's of an adverse event by language-based method. In future studies we can measure them by a variety of methods like facial expressions, autonomic or somatic nervous system, etc.

In addition to this, we have limited our study to doctors in the northern state of India. In the future, we can take the respondents from other areas also.

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Appendix I Narrative scenario of adverse situation at hospital

Below is a scenario that describes a situation that happens now and then to doctor who in their everyday prescribing of medical services to patients to find that they are targets of violence by the family members of their patients. Please read the following scenario, place yourself as much as possible in the position of the protagonist doctor (Dr. Anand) by imagining that the event in scenario is actually happening to you, and then answer the questions following scenario.

Dr.Anand, a general practitioner (physician) in the Altis Group of Hospitals in Noida, is assigned a 6 year old patient, Neelam Purohit, who is very sick. Dr. Anand examines Neelam, orders a number of specialty tests, and later after studying the results of the tests, meets again with Neelam the following week. As a result of the examination and tests, Dr. Anand begins treating Neelam over the course of a few weeks. The treatments turnout not to have much effect, and Neelam's health continues to deteriorate. After about 10 more days, she has a seizure and passes away.

Unhappy with the death of Neelam and the answers provided by Dr. Anand about the reasons for Neelam's death, the father and uncles of Neelam confront DrAnand at his office. The confrontation turns ugly, voices are raised, threats made, and Dr. Anand fears for his safety. In a fit of rage, the relatives of Neelam begin to rough-up Dr. Anand, the situation seems to spiral out of control, and Dr. Anand tries desperately to escape...

Appendix II Narrative scenario of the control condition

Below is a scenario that describes an everyday situation of doctors prescribing medical services to patients. Please read the following scenario, place yourself as much as possible in the position of the protagonist doctor (Dr. Anand) by imagining that the event in scenario is actually happening to you, and then answer the questions following scenario.

Dr. Anand, a general practitioner (physician) in the Altis Group of Hospitals in Noida, is assigned a 6 year old patient, Neelam Purohit, who is not feeling well. Dr. Anand examines Neelam, orders a number of specialty tests, and later after seeing that all tests are normal, prescribes rest and a healthy diet, and schedules a follow-up appointment two weeks later. After two weeks, Neelam reports feeling well, and Dr. Anand closes the case.