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UNFOLDING THE DILEMMA OF VALUES IN HEALTHCARE ORGANIZATIONS

Healthcare

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ABSTRACT

The core values of healthcare organizations can have a direct impact on patient outcomes. Values are important because they impact employee attitudes and behaviours. New rules and protocols, as well as the continual development of accrediting standards, developing technologies, and adherence to evidence-based principles, are all posing challenges to the healthcare Industry globally. Employees bring their personal beliefs and personal values into work environments, and the value system arises from individual interactions in which employees make choice, decisions, communicate and share concerns. The value systems of professional groups in healthcare companies are extremely diverse. Multiple values systems converge in the social world of the healthcare organizations, which contributes to the competing or conflicting values within a unit or the entire healthcare organization. The goal of the present study is to analyze values diversity and values conflict in health care teams and its influence on their work.

KEYWORDS

Values Diversity, Values Conflict, Modernity Values, Post Modernity Values

INTRODUCTION

As new macroeconomic scenario of recession, high inflation and increasing rates of unemployment has substantially altered the consistency of value change among Indian consumers. The economic growth, social, and political modernization of Indian society in the last decades has been colossal. The persistence of some important social inequalities with inadequate welfare state has created distinct levels of change in economic, social and political values among Indian consumers and due to regional dichotomies, there is considerable change from materialist to post-materialist values in urban areas compared to rural areas. The survival of some of the more enduring traditional cleavages, and the persistence of materialist demands resulting from varying levels of economic insecurity, are the sources of potential conflict in work cultures.

Globally, health care systems are confronted with significant challenges of emerging new infectious disease burden. The importance of achieving a value-based, affordable, sustainable healthcare system underscores efforts of healthcare policy makers. Governments are struggling to address the current health system's unsustainability by providing the leadership and political determination needed to eliminate roadblocks, foster innovation, and lead them to long-term cost-effective healthcare solutions. To create a win-win transformation in healthcare system healthcare policy makers need to focus on values of healthcare consumers, healthcare providers and healthcare payers. A clear understanding of definition, measures, and dimensions of healthcare values is needed by healthcare entrepreneurs and healthcare policy makers to align and build healthcare systems which promote direct healthcare purchasing, improving accessibility and utilization of healthcare services and efficient and transparent use of reimbursement by healthcare insurers accordingly.

II. Defining Values and Value systems

Human value is defined as "*enduring belief that a specific mode of conduct or end-state of existence is personally or socially preferable to an opposite or converse mode of conduct or end-state of existence*" (Rokeach, 1973). One's major values combine to form a value system, which is "*an enduring organization of beliefs concerning preferable modes of conduct or end-states of existence along a continuum of importance*"(Rokeach, 1973). Thus, an individual will inherently hold a plethora of values and these values are assigned based on varied degrees of importance as and when needed, though not always consciously. According to the cultural change hypothesis, younger generations have substantially modified their value systems, shifting from giving top priority to physical sustenance and safety toward placing greater emphasis on belonging, self-expression and quality of life, economic prosperity, physical security, education and higher patient expectations. This new value system has been termed value change and is represented by the materialist and post-materialist dimensions (Inglehart, 1977, and 1990).

III. Unfolding Concept of Values in Healthcare System

Usually, value is in eye of healthcare consumer who seeks health care service. If healthcare consumers, healthcare providers and healthcare payers focus on value system and be in agreement upon the definition and measures of healthcare value's and then direct healthcare purchasing, healthcare services delivery and reimbursement accordingly, it will constitute good value system in health care system. A healthcare institution should reflect and embody some measure of the community's values and try to integrate into the community and achieve community goodwill.

Values in healthcare system are classified as modernity values and post-modernity values. Modernity values have several variables like linear progress, growth, economic needs, technological basis, resource and capital intensity, funds and intellectual capital and place. Post-modernity values may have sustainability, human needs, community and human foundations, resource and capital extensity, social capital, identity and network variables. In health care market there is paradigm shift from modernity values to post-modernity values which may increase healthcare customer's expectation in healthcare service delivery and subsequent increase in healthcare cost and increase in market demand for high quality healthcare services.

Previous studies have shown that materialistic attitude, which is the most typical characteristic of modernity, was less common in the younger adults and in better educated population. However, financial capabilities, the intensity of economic development and individual wealth were interrelated in a special, non-linear way (Inglehart, 1997), which may impact health system directly or indirectly. Human behaviour is mostly influenced by the degree to which certain basic requirements are met. The hierarchy of these needs are "*physiological needs, safety needs, belongingness and love needs, esteem requirements, and the desire for self-actualization*" as reflected by Maslow hierarchy of needs (Maslow, 1970). Based on above assumptions, the values of healthcare consumers towards healthcare services have undergone transformation mainly due to socio-economic reforms in preferences from changing of preferences from traditional hospitals to super-specialty hospitals.

Today's healthcare consumers are not usually able to define values in healthcare. Individualistic consumer values could be supportive of a healthcare system but, the core values of current consumer culture for health care are materialistic, and internalization of materialistic values as one's personal goals leads individuals to a greater commitment for buying health care services. If compulsive buying can be understood as compensatory behaviour aimed at improvement of health, an association between materialism and irrational buying of health care services seems highly probable.

IV. Values diversity and Value Conflicts in Healthcare Teams

Values are considered internal and do not necessarily imply actions; however, norms do involve actions and behavior. Nevertheless, norms are grounded in personal values. Health care organizations may choose to start by establishing overall principles, and then utilize this as a foundation for identifying key norms in various health service

departments or units, utilizing a participatory approach to develop a normative consensus. Healthcare organizations frequently feature high percentage of team members from different ethnic groups, who may hold beliefs that differ from those held by management. Because of this diversity, healthcare internal consumers and stakeholders should be involved in the development of corporate values. Organizational members should endeavor to identify underlying ideals in such ethnically diverse circumstances.

One of the main challenges to management-based values in hospitals is that hospital administrators have limited authority over professional, licensed personnel. This is particularly salient in regard to physicians with whom management has traditionally shared authority. Since physicians are often not full time employees of a given hospital (or of many other healthcare organizations), management's capacity to influence physicians is limited. Different specialty consultants are present in hospitals, and they often have their own values and professional identities, that are grounded in different professional values. To address the diversity of values systems and minimize conflicts, hospital managements must obtain extensive input from various specialty consultants while formulating and implementing organizational values systems. Both parties should learn to comprehend what is significant and worthwhile in the other's value systems.

Key cultural differences exist between physicians and healthcare executives on quite a few key dimensions. Hospital managers focus on positioning the healthcare organization for the future, so their time frame of action is middle to long term but physicians have a more short term time frame, arising from the necessity of meeting the immediate needs of patients. Hospital Managers are described as viewing resources as limited and being highly aware of the need to allocate scarce resources effectively. Physicians, on the other hand, are believed to regard resources as important to treating their own patients and improving the quality of care (Alexander and Morlock, 1994**).**

Health care organizations management face different challenges like serving the individual versus serving the community; achieving quality versus cost containment; preserving patient rights versus organizational control; and permitting freedom versus keeping order and control (Worthley, 1999). Ethnic communities must be able to keep some essential values associated with their customs, languages, and religions while still contributing to a dynamic balance, "*between the overarching and shared values…and the ethnic or core values*" (Smolicz, 1985). All levels of healthcare organizations can see the relative relevance of one value to another within healthcare teams. Because values have value and healthcare team members are conscious of their own beliefs, conflicts between right and wrong, posing difficult decision-making issues for healthcare leaders (Badaracco, 1998). Differences exist between the values one express or transmit (espoused ideas) and the values one really act on (theories-in-use) (Senge, 1990).

V. Compliance of Healthcare Leaders Value's with Healthcare Organizations Values

Health care organizational values are probably the most significant component of health care delivery systems. They contribute to the organization's and its leaders' image success. Inspiring values are widely recognized as a fundamental feature of great leaders. Values are a critical component of effective leadership and a necessary trait for all leaders. Leader's values should match with the values of their organizations, which are acknowledged by their team members.

Healthcare managers must be highly directive and controlling over major health care projects, yet they may really believe in values input and participation. Healthcare managers should do some soul searching about what they really values in order to learn and grow as an individual and as a manager. Hence, managers need outside input to "see themselves," because it is often difficult for them to ascertain their own theories-in use. Healthcare managers who wish to uphold and communicate values, is to better understand their own value systems at work (Senge, 1990).

Burns, (1978), stated, "*The essence of leadership in any polity is the recognition of real need, the uncovering and exploiting of contradictions among values and between values and practice, the realigning of values…The leader's fundamental act is to induce people to be aware or conscious of what they feel -- to feel their true needs so strongly, to define their values so meaningfully, that they can be moved to purposeful action.*" Obviously, leadership involves influencing and defining human values, as well as connecting them to the needs of the business (Burns, 1978). According to principle-centered leadership, employee's values should be matched with certain correct principles. Employee participation in the development of a shared vision and principles for an organization will serve to bring people together. There is a paradigm shift in the perception of leader as the primary or sole creator of an organization's values. Using participative approach, organizations must develop shared principles, values, and missions (Stephen covey, 1991). Healthcare executives place a premium on the development of a wide variety of human values and ethical instincts, as well as ensuring that they are not compromised (Nash, 1993).

Values enable organizations to face hard events, which are referred to as *defining moments*. A true leader will ponder the question, "*Who am I?*" "*Who are we?"* "*Who is the company?"* This self-inquiry approach enables the leader to deeply discern and live up to his or her actual values (Badaracco, 1998). Employees who uphold the organization's value systems are typically underpaid, which can lead to demotivation and job dissatisfaction. Four key aspects of values-based leadership are underlined for leaders who desire to evolve as values-based leaders. 1) Recognize and embrace internal stakeholders' values, 2) Determine what to expect from the entire company, 3) determine what can be accomplished inside one's sphere of influence, and 4) Commit to values-based leadership.

VI. CONCLUSION

Leaders need to stress that the organization's values not only create a unique and dynamic culture, but also contribute to the competitiveness and success of the organization. Values must be clearly the underpinning and thrust for a healthcare managers who seeks to serve the healthcare organizations, to carry out their responsibilities conscientiously, and to communicate honestly and fully with their employees. As a result, many challenges and crises are required to not only test, but also to elicit, "values-based leadership" in healthcare organizations. However, because of having distinct cultures, structural and operational characteristics, values-based leadership are not always easy to be adopted in healthcare institutions and top management must put consistent efforts to develop organization values-based leaders who promote organization values among the team members.

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