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PERCEPTUAL MAPPING OF PRIVATE AND GOVERNMENT DOCTORS AS REGARDS TO ORGANIZATIONAL VALUES: A COMPARATIVE STUDY

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The main objective of the study is to compare the organizational culture in the selected hospitals in order to identify and measure the perceived organizational culture and its various dimensions by the Doctors. A four point scale questionnaire based on the OCTAPACE profile developed by Udai Pareek was used to get responses from Doctors working in private and government hospitals in Lucknow, UP region. The result shows that the private and government doctors perceive their Organization culture differently. The study helps in identifying the weaker and stronger aspects of culture in terms of values that prevail in the organization. The calculation and testing of each item helps the management to strengthen the weaker aspects and promote the stronger aspects in the organization. On the basis of the degree of correlation between the various elements of the OCTAPACE profile a better organizational culture is developed to achieve the desired performance and to sustain competition in the long run.

Keywords: Organizational culture, OCTAPACE, T-test, Correlation, Significant

INTRODUCTION

Pricewaterhouse Coopers in its emergence market report 2007 on "Healthcare in India" states following:

"Healthcare is one of India's largest sectors, in terms of revenue and employment, and the sector is expanding rapidly. During the 1990s, Indian healthcare grew at a compound annual rate of 16%. Today the total value of the sector is more than \$34 bn. This translates to \$34 per capita, or

roughly 6% of GDP. The private sector accounts for more than 80% of total healthcare spending in India." However, the Indian healthcare system is plagued with numerous problems (Pareek, 2003). Public hospitals are criticized for poor management, unhygienic conditions, unavailability of doctors, shortage of infrastructure and resources to meet the swelling number of patients and apathetic attitude of administrative staff, etc. Waiting times in government hospitals can reach up to two hours just for accessing

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outpatient services. On the other hand private hospitals are criticized for their basic intention of treating itself as a corporate entity, where money becomes more important than humanity. In fact because of the difference in stated goals, it is evident that the private sector attracts and treats persons who can pay and are non-emergency situations hence there is already a selecting out of patients. The public sector, on the other hand, seeks to provide universal access and therefore the patient load is always higher than the intended capacity. Due to patient overload, role overload, resource inadequacy, role erosion, role stagnation majority of the Government Doctors develops feeling of negligence towards their work, whereas majority of the Private Doctors enjoy healthy work culture which includes resource adequacy, role clarity, performance based promotion and attractive incentive schemes, etc. Due to inadequate facilities available for a Gazetted Officer (Doctor) and his/her family the doctors are least interested to work in remote areas. Amongst the 1200 Government Doctors selected in December 2011 only 300 joined in June 2012 from which 100 Doctors left in October 2012. Due to undue political pressure in villages the Government Doctors are bound to indulge in such type of activities which is ethically and morally against the dignity of Doctor and his or her noble profession. On the contrary Private doctors are paid handsome amount including incentives and other facilities. Hospitals are human institutions, not buildings, bottom lines, strategic analyses, or five-year plans. A hospital is a living organization. People make a hospital work and its culture ties people together, giving meaning and purpose to their day-to-day activities and lives. Although all hospitals have cultures, the cultures do not all produce the same effect on the

organizations. Some cultures help hospitals adapt well to constantly changing environments while others hinder this ability. Edgar Schein, one of the most prominent theorists of organizational culture, gave the following very general definition:

“A pattern of shared basic assumptions that the group learned as it solved its problems of external adaptation and internal integration that has worked well enough to be considered valid and, therefore, to be taught to new members as the correct way to perceive, think, and feel in relation to those problems” Kroeber and Parsons (1958) defined culture as the “transmitted and created contents and patterns of values, ideas, and other symbolic meaningful systems as factor in shaping human behavior and the artifacts produced through behavior”.

LITERATURE REVIEW

Shaw (2002) claims that as far as organizational culture is concerned, the definition varies depending on which perspective it is viewed from. He states that according to the human relations perspective, culture is how employees make sense of their work and attribute meaning to organizational experiences. On the other hand, rational structuralists hold that culture is made up of the beliefs that top managers have about how they should run the company. Lastly, systems theorists assert that culture is made up of the “underlying values, beliefs, and principles that serve as a foundation for an organization’s management system” (Schein *et al.*, 1985). These are only a few of the many different perspectives held on organizational culture.

Regardless of the differing definitional views of culture, most experts do agree that a strong, dominant culture is a major benefit to any

organization . A strong culture can have many positive effects including “conflict reduction, coordination and control, reduction of uncertainty, motivation, and competitive advantage”. However, it can be a hindrance if the shared ideas interfere with the growth and development of the organization or cause people to think improperly and make bad decisions.

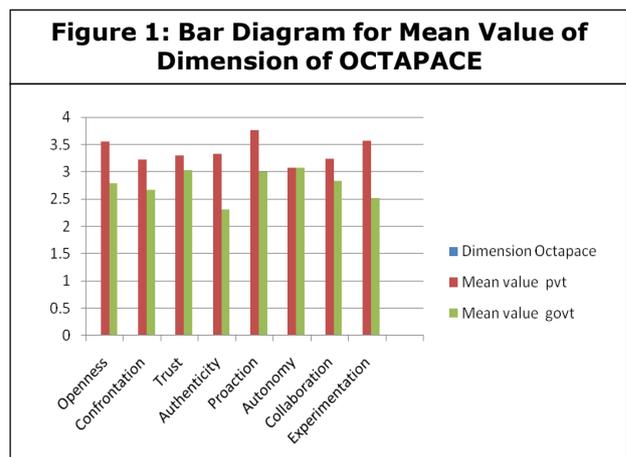
Organizational culture has assumed considerable importance in the 21st century, because of its impact on employee performance and job satisfaction. It is the imperative of every organization to understand its own dynamic culture so that managers can capitalize on the insights generated by the cultural perspective to wield greater control over their organizations. The culture of an organization has an important impact on its performance. With the ever-changing technology and fast-paced business arena, companies today are grappling to find new and innovative ways of improving performance with the minimal addition of cost. Many companies have now turned to exploring the sociological aspect of the business in order to improve profitability (Bhardwaj and Mishra, 2002). Culture is one aspect that is not tangible, yet it plays a very important role to the success of any business enterprise.

The research studies done by various researchers indicates that the strong culture contributes to the organization’s healthy working environment and self-assessment capabilities which in turn increase the proficiencies of individual, teams and the entire organizations. Empirical studies conducted by (Kumar and Patnaik, 2002; Rohmetra, 1998; Kumar, 1997; Mishra, Dhar and Dhar, 1999; Bhardwaj, 2002; Alphonsa, 2000; Rao and Abraham, 1999) depicts

that the culture of OCTAPACE (Term coined by T V Rao) values is assimilated by the culture of the many organizations to a good or moderate degree. These values help in gearing up a climate of persistent development for human resources.

OCTAPACE CULTURE

Firstly the term has been coined by Professor T V Rao of IIM-A, India. The OCTAPACE culture is defined by the occurrence of openness, confrontation, trust, authenticity, pro-activity, autonomy, collaboration and experimentation. It deals with the extent to which these values are promoted in the organization. Octapace is one technique that can be used to measure the organizational culture (Ott, 1989). Using the OCTAPACE questionnaire a survey can be conducted on the employees in an organization (Figure 1). This can also be a part of recruitment strategy to only make sure that their potential candidates expected to fill the vacant positions can culturally fit in their organizations. Various elements of OCTAPACE are as follows.



Openness

Employees feel free to express their ideas and the organization is willing to take risks and to experiment with new ideas and new ways of doing

things. Organizational openness and integrity, transparency, regard and caring for the client and confidence in the stated focus of the organization are necessary prerequisites for successful relationships.

Confrontation

Employees face the problems and work jointly with others concerned to find its solution. They face the issues together without hiding them or avoiding them for fear of hurting each other. Employees face the problems and work jointly with others concerned to find its solution. They face the issues squarely without hiding them or avoiding them for fear of hurting each other. Xenikou, Athena and Furnham (1996) in their studies indicate those confrontations organizational cultures group the following concepts together oppositional orientation, power, competition, and perfectionism (Eelke *et al.*, 2006). Collins (2001) in his studies notes that the organizational ability to hear the 'truth' distinguishes good to great companies.

Trust

The extent to which employees individually and in groups trust each other and can be relied upon to do whatever they say they will do. Reina and Reina, in their studies indicate that trust is an essential aspect of healthy human relationships (Alphonsa, 2000). Poter (1992) in his studies reveals that without trust one cannot expect the human imagination to pursue value added. Gibb (1991) studies indicates that within an organizational environment, higher degrees of trust enhance the discovering processes and, ultimately, the ability of groups and organizations to fully function. Simply, as trust increases, defensive and unproductive behaviors decrease (Scholz, 1987). A minimum level of trust is

necessary for carrying out performance appraisal system. Employees, departments and groups trust each other and can be relied upon to 'do' whatever they say they will.

Authenticity

It is the value underlying trust. It is the willingness of a person to acknowledge the feelings he/she has, and accept him/her as well as others who relate to him/her as persons.

Authenticity is the value underlying trust. It is the willingness of a person to acknowledge the feelings he/she has, and to accept him/her as well as others who relate to him/her as persons. Mufeed (2006) in his empirical study on the culture of hospitals found that the value of authenticity had been well developed (Mufeed , 2007).

Proaction

Employees are action-oriented, willing to take initiative and to show a high degree of proactivity. They anticipate the issues and act or respond to the needs of the future. Schein (1992) studies notes several requisites for organizational success that organizational culture must now take into account (Shafritz and Ott, 2001). The organization must be proactive, not just reactive, the organization must influence and manage the environment, not just adapt, the organization must be pragmatic, not idealistic, the organization must be future-oriented, not predominantly present/past oriented, the organization must embrace diversity, not uniformity, the organization must be relationship-oriented, not just task-oriented, the organization must embrace external connectivity, as well as promote internal integration

Collaboration

Collaboration involves working together and using one another's strength for a common purpose.

Individuals, instead of solving their problems by themselves, share their concerns with one another and prepare strategies, work out plans of action, and implement them together.

Experimentation

Experimenting as a value emphasizes the importance given to innovation and trying out new ways of dealing with problems in the organization. Davenport and Prusak (1998) in their study claims that lack of forgiveness for mistake making is one of the basic stumbling blocks because it slows or prevents or even erodes some of the knowledge as it moves through the organization. Experimenting states the importance given to innovation and trying out new ways of dealing with problems in the organization. This factor plays an important role in medical sector for the development of sciences.

OBJECTIVES OF THE STUDY

To identify and measure the perceived organizational culture and its various dimensions by the Doctors in the Government and Private Hospitals with respect to Openness, Confrontation, Trust, Authenticity, Proactivity, Autonomy, Collaboration and Experimentation is our objective in this study.

HYPOTHESIS OF THE STUDY

On the basis of above objectives, the following hypothesis was formulated:

Null Hypothesis

H_0 : *There is no difference in perception of Private and government Doctors as regards to openness, confrontation, trust, authenticity, proactivity, autonomy, collaboration and experimentation.*

Alternate Hypothesis

H_1 : *The mean values of openness, confrontation,*

trust, authenticity, proactivity, autonomy, collaboration and experimentation as perceived by private doctors are significantly higher than the government doctors.

RESEARCH METHODOLOGY AND MATERIALS

The 4-point scale developed by Pareek has been used for the present study (Pareek, 2003). As many as 8 dimensions were taken to judge the perceived organizational culture. The OCTAPACE profile is a 40 items instrument that gives the profile of the organization's ethos in eight values. These values are openness, confrontation, trust, authenticity, pro-action, autonomy, collaboration and experimentation. The purpose of an organizational culture questionnaire is to produce a comprehensive picture of the prevailing values in an organization and of the views of the personnel (Rao and Abraham, 1999). We took sixty doctors as our subjects under study. All doctors were of age group of 30-65 years. Data was taken in private and government hospitals. We formed a questionnaire as suggested by Pareek and distributed among 30 private sector doctors and 30 government sector doctors (Cameron and Quinn, 1999). We requested to doctors to fill the questionnaire carefully. We used probability sampling technique in data collection. After primary data collection we took help of computer software. Statistical analysis has been used to analyze the data like mean, standard deviation, coefficient of variation and correlation. We used *t*-test to test the hypotheses. Statistical software like the Microsoft Excel of version 7, Statistical Program for Social Sciences (SPSS) of version 17 and Mini Tab of version 15 have been used to analyze the data.

RESEARCH DESIGN

Research Type : Exploratory and Descriptive
 Research Approach: Survey method
 Research Tool : Structured Questionnaire/ Interview Method
 Data type : Primary
 Sampling Method : Probability Sampling
 Sampling Unit : Doctors (Private and Public Sector) of age 30-65 years.
 Sample Size : 60
 Sample Area : Lucknow city

RESULTS AND DISCUSSION

The present study reveals an important results between private and government sector doctors under study. The various elements of OCTAPACE shows the significance difference in their values when studied for private and government sector doctors. An overall average value of an elements of OCTAPACE for private sectors doctors is different and significantly higher than the government sectors doctors. Our null hypothesis is: There is no difference between Private and government doctors as regards to openness, confrontation, trust, authenticity, proactivity, autonomy, collaboration and experimentation is rejected and our alternate hypothesis: the mean

Table 1: Statistics of Various Individual Dimensions of OCTAPACE

Dimensions	Private Doctors			Government Doctors			Statistical Results		
	Mean	SD	SE of Mean	Mean	SD	SE of Mean	Mean Difference	T-value	p-value
Openness	3.552	0.471	0.211	2.792	0.454	0.203	0.76	2.81	0.024
Confrontation	3.216	0.552	0.247	2.672	0.331	0.249	0.544	2.19	0.047
Trust	3.296	0.065	0.029	3.032	0.26	0.116	0.264	2.97	0.021
Authenticity	3.328	0.532	0.238	2.31	0.505	0.226	1.018	3.23	0.016
Proaction	3.764	0.473	0.211	2.99	0.52	0.232	0.774	2.33	0.04
Autonomy	3.072	0.277	0.124	3.074	0.334	0.149	-0.002	-0.01	0.505
Collaboration	3.24	0.304	0.136	2.834	0.401	0.179	0.406	2.58	0.031
Experimentation	3.57	0.323	0.114	2.522	0.538	0.24	1.048	2.79	0.025

Table 2: Statistics of Various Overall Dimensions of OCTAPACE

Statistic	Organization	
	Private	Government
Mean	3.379	2.778
SD	0.22	0.266
SE of mean	0.08	0.094
Note: T-value=4.62; $p < 0.05$.		

values of openness, confrontation, trust, authenticity, proactivity autonomy, collaboration and experimentation of private doctors are significantly higher than the government doctors is accepted for each elements of OCTAPACE except autonomy (calculated t value is $<$ tabulated t value). It is clear from Table 1 that each elements of OCTAPACE except autonomy for private doctors is significantly higher than government

Table 3: Correlation Among Various Dimensions of OCTAPACE

Dimension	O	C	T	A	P	A	C	E
O	1	*	*	*	*	*	*	*
C	-0.50	1	*	*	*	*	*	*
T	0.336	0.012	1	*	*	*	*	*
A	0.567	0.105	0.908	1	*	*	*	*
P	0.338	-0.246	0.788	0.734	1	*	*	*
A	0.104	0.149	-0.619	-0.430	-0.891	1	*	*
C	0.436	-0.043	0.946	0.935	0.918	-0.715	1	*
E	-0.027	-0.568	0.541	-0.531	0.064	-0.191	0.319	1

doctors at 5% level of significance and degree of freedom in our data was 14 (8+8-2). Table 2 suggests that the overall OCTAPACE culture of private doctors is also higher than government doctors and null hypothesis is rejected at the same time alternate hypothesis is accepted significantly with *T*-value 4.62 ($p < 0.05$). An average value of overall value of OCTAPACE culture for private sector doctors is 3.379 whereas for the government sector doctors is 2.778. Organizational cultural values are represented by Bar diagram in Figure 1. Present study suggests that there must be some authentic changes in the culture of government hospitals by the top governing bodies to improve the various aspects of cultural values. Table 3 shows the correlation coefficient among each elements of organization cultural values. Positive correlation coefficient shows the positive effect of one variable on other while negative correlation shows that the inverse effect of one variable on other if correlation coefficient is near to zero it implies almost no correlation, Correlation coefficient near one shows almost perfect positive correlation among elements of OCTAPACE. Various psychologist explains the relationship of

OCTAPACE elements in their one view, so it varies from one to person to another (Rohmetra, 1998).

CONCLUSION

Present comparative study reveals that the organization cultural values in terms of OCTAPACE for private sector doctors is significantly high than those of government sector's doctors. The main implication of this study on organizational culture based on private and government doctors is that there is a scope for further improvement in the culture of government hospitals which will be the result of adopted high organizational values by the government Doctors. In general, the top governing body must organize seminars, personality development programs, and listen the issues and rectify them. The governing body must try to promote and imbibe culture among the government doctors to feel free to discuss their ideas, activities feelings about the area of their operations related to their job description. The management should encourage their subordinates to confront problems bravely without searching escape routes. The government sectors doctors should be given training in

developing confrontation abilities and approaches for the creative problem solving. The management should exhibit a very high level of authenticity implying that what it says, it means and what it means, it says. Accepting people at their face value and trusting their words and approach in the true spirit promotes authenticity (Niranjana and Pattanayak, 2005). The culture of pro-activity should also be promoted in the government sector doctors in order to compete globally.

Efficiency of the Present Study

Present study is a comparative study and the variables under study are traits or characteristics. We cannot measure above aspects quantitatively. For example we cannot measure mathematically that which doctor is more trusty, authentic and collaborative. So that type of studies contains some errors vitally. To minimize the error and to get the authentic results we took precautions from end to bottom in the study. We designed easy and interesting questionnaire to feel comfort and to achieve genuine result. We tried to collect the entire questionnaires which were distributed among doctors to minimize non response error and to enhance the efficiency of the study.

Limitation of the Present Study

Present study meets some limitations. Such as personal profile of subjects (age, sex ,etc.), geographical region of study (i.e., urban areas has more medical facilities for doctors than in rural areas) and sample size (the greater sample size an improved result we may achieve) under study. Because these keys also play vital roles in our results. In our study the age group of doctors (for both private and government doctors) is between 30-60 years, if we increase this range

result may be changed slightly. The region of our study is Lucknow and it is a developed city with adequate medical facilities (adequate of instruments, patients and other facilities) so that the doctors can perform more and more experiments and can practice as they want. Sample size that we used for this study is 60. Statisticians suggest that as sample size increases, standard error decreases. That's why we can increase the sample size to achieve more authentic result. If we overcome on these limitations then our results may be more better and can be implemented for the desirable change.

Problem Faced During Survey

During survey some of the times Doctors were unavailable due to the busy schedule. The researchers also observed Doctors showing disinterest and non-cooperative behavior. The collected data was tabulated and Cross tabulated for analysis.

Future Work

Our area of interest is to study the organization culture in medical sectors. In future work our subjects will be doctors and other staff members of private and government hospitals. Study region will be large and will cover all regions urban as well as rural areas. In this study we will take a large sample size of subjects and will concluded their socioeconomic standard, domestic background and other personal profile to achieve best result.

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