Research
The Work of Inclusion in an Emergency Department
By Daniela Blei

Stanford Social Innovation Review
Summer 2021

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The Work of Inclusion in an Emergency Department

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April L. Wright, a professor of management at the University of Queensland in Brisbane, Australia, studies emergency departments. In 2014, while Wright was collecting data for a project on managerial work at public hospitals, the Ebola outbreak began in West Africa. The large urban hospital where Wright’s study was underway, now designated an Ebola response and treatment site, became one of a few places in the country to receive potential cases.

Wright knew the hospital well, and for the first time, she noticed fear creeping into daily operations and diminishing confidence in the emergency department’s ability to assess the risk of Ebola and ensure that sufficient resources were on hand. In Australia, public emergency departments provide universally accessible, high-quality care, often in risky situations involving infectious diseases and violent patients. But the specter of Ebola sparked a crisis of confidence and purpose that threatened to undermine the emergency department’s response.

Wright teamed up with Alan D. Meyer, a professor of management at the University of Oregon’s Lundquist College of Business; Trish Reay, a professor at the University of Alberta’s Department of Strategy, Entrepreneurship, and Management; and Jonathan Staggs, a professor of business at Christian Heritage College in Brisbane, Australia, to investigate how frontline professionals, who are obligated to serve everyone who comes through their doors, balanced risk, moral emotions, and fear during a global health emergency. Their research has attracted attention and praise for its implications for managing the COVID-19 pandemic.

“At the time, I couldn’t quite work out what was going on,” Wright says, recalling the 2014 crisis. “It took a few years after the event to develop a theoretical framework to really understand what happened.” Sifting through field notes, ethnographic observations, and interviews, Wright and her collaborators set out to analyze the intersection of emotions and institutional work.

Their study introduces a new concept—“places of social inclusion”—to refer to any setting that is institutionally endowed by a society or community with material resources, meaning, and values to serve all citizens and fulfill essential human needs, such as public parks, libraries, and schools.

“This emergency department and the staff within it were always mindful of their role to serve as a place of social inclusion, a safe place for all Australians,” Wright says. In an epidemic, however, “the challenge is that social inclusion carries a risk, and what is required is that the people who work in the emergency department have a strong commitment and identity above and beyond their professional identity.”

The Ebola crisis exposed the precarity of this particular place of social inclusion, even when its inclusive character was constantly reinforced at both the state and societal levels. The authors found that consistent effort and support were required to maintain the emergency department’s mission. Social norms and workplace regulations were not enough to ensure that frontline health professionals remained motivated to enact inclusion on the ground.

Mitigating risk and managing fear during a crisis depended on the ability of doctors and nurses to adopt an identity as “custodians.” This identity drove them to “uphold the highest ideals of a public emergency department as a place of social inclusion,” the authors found. They describe how workers managed tensions caused by resource limitations and risk by relying on practices of resource rationing and resource enabling, harm mitigation, and harm avoidance.

“A key mechanism in resolving these contests and bringing fear under control was custodians’ moral emotions,” the paper explains. Redirecting fear and self-conscious moral emotions to courage and care demanded a steady stream of information, training, equipment, and resources. Only then did the emergency department operate with full confidence and purpose as an inclusive, safe, and universally accessible place.

“This study suggests a need to think about how custodians, or those who feel a responsibility toward maintaining social inclusion, work to ensure inclusiveness despite the risks and threats,” says Ann Langley, a professor of management at HEC Montréal. “Spaces of social inclusion are fragile institutions and could break down under pressure. They require ongoing effort by people who feel responsibility to them to ensure their maintenance.”

While this study imparts lessons on how to support frontline health workers and sustain emergency departments during the COVID-19 pandemic, it has implications for other settings where open access and inclusiveness are fundamental values.
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“What COVID-19 did was threaten places of social inclusion, and not just in health-care organizations,” Langley says. “Thinking about where our society’s spaces of social inclusion are, and how they are and can be maintained, is really important for the maintenance of a democratic society.”


HUMAN RIGHTS

How Work Helps Refugees Thrive

BY DANIELA BLEI

Starting with an executive order in February, President Joe Biden has pledged to rebuild the 41-year-old US Refugee Admissions Program after the Trump administration gutted it. With increasing numbers of refugees allowed to resettle in the United States, advocates will likely focus once again on facilitating their integration and well-being. The challenges of adapting to a new culture, language, and way of life are often exacerbated in a society that stigmatizes and discriminates against refugees for purportedly taking away jobs and funding from citizens.

A new study by John Schaubroeck and Ann C. Peng, both professors of management at the University of Missouri’s Robert J. Trulaske, Sr. College of Business; Dong Pei, a doctoral candidate in the same department; and Ozgur Demirtas of Kayseri University in Turkey, examines what it takes for refugees to thrive in their host societies. Drawing on survey data collected from 389 Syrian refugees at work sites in an unnamed country “at the nexus of the Asian and European continents” and translated from English into Arabic and back into English to ensure accuracy, the authors looked at social identity in the workplace and its profound psychological effects on the process of transitioning into a host country’s society.

“Workplaces are some of the most important sites of socialization,” Betina Szkudlarek, a professor of management at the University of Sydney Business School, says. “For marginalized communities such as refugees, work could be the first place where they feel they belong again.”

The authors uncovered a key factor associated with successful refugee adaptation: high levels of organizational identification, or “overlap between one’s personal identity and one’s social identity as a member of an organization,” which includes productive relationships with coworkers, most of them host country nationals. When refugees experienced a strong sense of belonging at work, their organization became “a platform of positive beliefs and emotions,” serving as a bridge between “their identity as a refugee to that of a host society member,” the study explains.

Alongside higher levels of organizational identification, “perceived insider status,” or the perception of being treated as an insider, promoted greater initiative at work and increased engagement in activities and institutions outside work, such as schools, sports, and mosques—what the researchers call “community embeddedness.” The authors used supervisor reports to track whether an individual took personal initiative to go beyond the job’s minimum expectations and measured organizational identification and perceived insider status in questionnaires administered over a two-month period.

In research literature on refugee resettlement, scholars and advocates have established the many ways in which simply having a job helps create opportunities and mitigate challenges during the process of adapting to a host country society. “In our case,” John Schaubroeck says, “we’re drawing on a separate literature about organizational identification to show that if you form a high-quality relationship with the organization in which you work, there are psychological implications.” Schaubroeck and his coauthors cite research on transitional identities that shows how prisoners in the United States had better outcomes after becoming employed with a business or organization before their release. “The extent to which these individuals had a high-quality relationship, which is reflected in their organizational identification, made their confidence in reentering society much higher,” Schaubroeck says.

Highlighting the importance of the organization’s “diversity climate,” which refers to attitudes and beliefs about whether employees of all social categories, including refugees, are treated fairly and with respect and are not discriminated against, the study makes clear that the work of building a high-quality relationship with an organization hardly belongs only to refugees. It depends on an inclusive workplace.

“We expected that insider status is quite strongly associated with organizational identification but that the relationship would be much weaker if the diversity climate is not favorable,” Schaubroeck says. Levels of stigmatization in the broader host country society also affect the salience of one’s identity as a refugee, the authors found, and “the extent to which they proactively contribute to the organization and establish connections to the community.”

Their research shows how personal affirmations at work carry over into home life in ways that can facilitate refugee adaptation. Greater social involvement with host country nationals, through work initiative and community embeddedness, is a clear sign of success. “The fact that organizational identification can translate into refugees’ engagement with their wider community stresses how important inclusive workplaces are, not only for employee well-being or the bottom line, but for our societies more broadly,” Szkudlarek says.