

THE HUMAN RELATIONS MODEL AND ORGANISATIONAL CHANGE

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There is a direct relationship between attitudes and performance, leadership and productivity. It leads us to the belief that good leadership should contain good decision making in the particular organisational structures, says Mrs. S.K. Khanna, Ed. D., Nursing Student at Teachers' College, New York.

WE are aware at the global level that many educational innovations have taken place during the last two decades. Nursing education is no exception. The main purpose of writing this article is to make the nursing educators aware of the fact that students have their own status and teacher-pupil relationship plays an important part in making changes successful or a failure. Some kind of representation from student body is desirable on curriculum committees or any administrative committees if optimum benefit is expected.

Nursing educators should attempt to gain better understanding of the ways people change their behaviours or resist efforts by others to have them do so. They should be aware of the target of change, medium of change, leadership of change, emotional change in particular environments and the change of individual behaviour in particular systems. These aspects of change are summed up under the heading of 'Human Relations Model and Organizational Change'. We will be discussing these aspects with a view to make nursing leaders and educators aware of the fact that a group of students consists of living human beings who react emotionally towards any kind of change which is being imposed on them without their participation.

Let us review the model of human relations. The human relations school consists of two branches, for all practical purposes. One is concerned with morale, leadership and productivity. The second, more sophisticated branch, is concerned with the structuring of groups, and it is built on the premise of the first, but applies those morales to the organization as a whole.

Leadership and Productivity Branch

This branch of human relations theory states that good leadership will lead to increased productivity on the part of employees. "Good Leadership" is generally described as democratic rather than authoritarian, employee-centered rather than production-centered, concerned with human relations rather than with bureaucratic rules, and so on. It is hypothesized that good leadership will lead to high morale, and high morale will lead to increased effort resulting in higher production. It will also

reduce turnover and absenteeism, thus raising productivity by minimizing both training time and disruption caused by absent workers.

It has also been noted that there is a direct relationship between attitudes and performance, leadership and productivity. It leads us to the belief that good leadership should contain good decision making in the particular organizational structures. The good leader is thought to be practising good human relations. Many programmes are in effect to train leaders for various organizations. One of the most famous and successful of these programmes have been dubbed T-group programmes, T standing for training. These tend to expand interpersonal consciousness, develop authority in interpersonal consciousness, develop authenticity in interpersonal relations and spontaneous behaviour, eliminate behaviour that stems from hierarchical positions and substitute collaborative behaviour, and develop ability to solve conflicts through problem-solving rather than through bargaining, coercion, or power manipulation and the same kind of leadership is required for nursing educators who want to produce competent nurses through the nursing training programmes. The second important factor is that nursing training programme can be more fruitful if nursing leaders make good decisions by involving student-groups in planning and implementing any kind of change in the nursing education.

This student-group involvement leads us to the second branch of the human relations model called "Group Relations Model". The expansive view of human nature explicit in the second branch of human relations theory finds its theoretical justification in the work of psychologist Abraham Maslow. He says, "...there is a hierarchy of needs in the individual—physiological, social, ego and self-fulfilment. Once the lower-order needs, such as physiological and safety needs, are satisfied, the higher-order needs such as self-actualization and autonomy, come into play. Each higher need is not activated until the one below it is reasonably satisfied."¹

The human relations theory justifies the extensive relations involvement in, and identification with, the organization. A person who participates in an organization only to the extent of contract, or to the extent of giving what he considers to be a fair degree of effort for the return he receives, is considered a stunted individual—even though he may be self-actualizing outside the organization.

Argyris has also described the similar kind of theory. He says, "...a fundamental conflict between the individual and the organization, finding that the organization generally demands dependent, childish behaviour from its members and makes it difficult for them to grow and achieve or maintain 'maturity'...indeed, it is the responsibility of the organization to develop maturity in individuals."²

The most popular theory of this second branch is originated by Likert. He says, "The power of 'job-organization' and 'cooperative-motivation' should be

1. A. Maslow, *The Human Organization*. New York: McGraw Hill, 67, p. 110.
2. C. Argyris, *Interpersonal Competence and Organizational Effectiveness*. Homewood, Ill: The Dorsey Press, 62, p. 5.

combined in order to get maximum production. Group conflicts, divergent groups, daily face-to-face interaction, interdependencies, complex hierarchies, fixed amount of remuneration, etc., are low importance in any organization."³

Bureaucratic model is not like human relations model which is based on democratic set-up. The human relations model is more flexible, creative and efficient. Bureaucratic model involves : 1) Equal treatment for all employees, 2) A reliance upon expertise, 3) No extra-organizational prerogatives of the position, 4) The introduction of rules and regulations that served the interests of the organization, 5) Setting up specific standards of work and binding upon managers as well as employees. In this kind of model, there is no flexibility, efficiency, creativity or responsiveness.

The Ideal Nurse

Nursing education organizations are complex social organizations. There are cooperative systems with all people working towards a common goal. These organizations consist of forces generated by people acting in concert to achieve a common goal, but sometimes it turns out that goals are not indeed shared by all or common to all. These organizations are expected to

3. R. Likert, *The Human Side of Enterprise*. New York : McGraw Hill, 60, p. 12.

work towards a common goal of producing an 'ideal nurse'. The ideal nurse is expected to meet the physical, spiritual, psychological and socio-cultural needs of the human beings who are sick. In this kind of effort, the authorities in nursing education manipulate things the way they are convenient to them. Instead of taking students who are future nurses into consideration, the authorities make changes without their participation. This kind of attitude creates many problems. The educators may face conflict of interest in the organization. In this kind of situation, the trust is lost, the motto is misunderstood, the individual right is threatened and unrest emerges which shatters the whole frame of success. Nursing educators ought to be more sensitive towards the needs and requirements of the student nurses who are brought up in a democratic atmosphere.

According to the human relations model, the organization must involve groups who are related to the particular kind of change. The concerned groups should understand the mechanics of operation. Any kind of change process has three main steps. The first involves 'unfreezing mechanism', i.e., 1) Lack of confirmation or disconfirmation, 2) Induction of guilt-anxiety, and 3) Creation of psychological safety by reduction of threat or removal of barriers. These three mechanisms make the educators aware of motivation for change, but not the individual himself. The individual is a student who is motivated for change of behaviour, but not the human being himself.

DIAGRAMATIC REPRESENTATION

OF

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