

Role Stressors and Alienation From Work During Covid-19 Setting

Mitevka, Mayiana
UNIBIT, Sofia, Bulgaria

Byuylekova, Maria
PU "Paisiy Hilendarski", Plovdiv, Bulgaria

Abstract

This study explores the interrelationships between work alienation and the role stressor dimensions of ambiguity and conflict. Diagnostics of role stressors in the workplace /Radoslavova, M. 2005/ and Assessment of alienation from work /Velichkov, A. 2005/. The data were collected with an online questionnaire, entered with Google Forms and processed with SPSS-21 using: descriptive statistics, and correlation analysis. The results are compared with similar previous studies conducted in Bulgaria and abroad. Respondents were 75 individuals, 72% of them were doctors working in a government hospital in a regional city. The results of the study showed that role ambiguity is a major workplace stressor in coping with the Covid-19 pandemic. Alienation from work is very high, which is also a significant antecedent for developing Burnout Syndrome.

Keywords: organization, stress, role stressors, alienation

Human work activity is associated with specific stress-inducing features. The work process and its demands can be stressful for the individual, disrupting the work-life balance. Factors associated with this condition are varied and include - the importance of one's professional role and career, one's involvement in the activity, cooperation and relationships with colleagues, and quality of organizational behaviour. When there is a problem in any one factor, occupational stress is experienced, which has an impact on work behaviour, ambition, work style and job satisfaction and overall on the mental and physical well-being of the individual. The occurrence of this type of stress is associated with factors that force the individual to change his or her mental or physical state, deviating him or her from normal functioning [1].

Role conflict is a form of stress that has negative effects on job satisfaction, task performance, and the mental and somatic well-being of the individual [9]. It is observed when individuals experience conflicting and different expectations, demands for the tasks they perform. In an organization, one person often has to perform several roles. This is what gives rise to role conflict. In some cases, the expected behaviour in one role may not match the expectations of another. By its nature, role conflict is the awareness and recognition of incompatible or conflicting demands and can manifest in a variety of forms. A situation of role conflict occurs when people in an organization have mutually exclusive expectations (e.g., expectations of different leaders). Role conflict is also observed when the person in the organization also has

competing expectations. Another manifestation of role conflict is the conflict between a person's roles (e.g., the roles of worker, spouse, and parent).

Role ambiguity is a state of uncertainty of the individual occupying a particular position about the behaviour regarding the sphere of responsibilities, the acceptable ways of their performance, the people to whose demands the results must meet, the consequences of one's behaviour for personal well-being, the well-being of the role set and the organization as a whole. This condition is due to ambiguous or insufficient information that the worker exchanges with colleagues. Role conflict is the experienced tension of perceiving situations in which an individual's agreement to fulfil one requirement prevents him or her from fulfilling another requirement of co-workers. It arises from information exchanges with colleagues that have conflicting content. Conflict is expressed by: conflicting expectations of an individual from a role set, inconsistency between the expectations of two or more members of a role set, between members of two or more sets, or between the individual and other members of the set. An overload is a specific form of conflict that combines the second and fourth of the listed forms of incongruence among colleagues [11]. We assume that role perceptions are dynamic as they depend on ongoing communication with colleagues in different situations. A long tradition of research on role ambiguity and role conflict has accumulated a wealth of evidence on their sources and effects on mental functioning and somatic health. Most authors find weak to moderate relationships between the two stressors. Second, some empirical evidence suggests that role ambiguity produces stronger adverse psychological consequences than role conflict, while other evidence suggests the opposite finding. Third, there is also empirical evidence of additive effects of the two stressors on mental and somatic health. Moreover, their impact depends on current or persistent subjective perceptions and states. Such mediating factors are orientation about the causes and course of events in the service [29], satisfaction with various aspects of the job [8], perception of the immediate supervisor as supportive [30], attachment to the organization [31], and personal potential to influence colleagues and gain their trust [32]. Mediating factors combine in determining the relationship between role stressors and psychological distress responses. Examples include the combination between job satisfaction and states of emotional exhaustion and depersonalization [33], task demands on personal competence, and opportunities for autonomy and supervisor support (Pascual, Perez- Jover, Mirabel, paediatrics 2003).

Alienation from work is a term that turns out to be quite vague, with its usage including both a scientific and a popular side. The theory of labour alienation gained prominence thanks to the work of Marx (1932). The author explains the observed condition by the separation between the labourer and the product he produces. The German philosopher defines 3 forms of alienation - from the product of labour, in the process of production and from society. The sociologist Durkheim (1947) also deals with the definition of the problem. He explains alienation as a consequence of the breakdown of social norms that imply the absence of such norms, and this condition is introduced by the term anomie. Different definitions of the phenomenon under consideration emphasize certain aspects of alienation - the sense of separateness is fundamental in Fromm (1955) and Horowitz (1966), the dissociative state in Schacht (1970), and the lack of work commitment in Hirschfeld & Feild (2000).

Viewed as a mental state, alienation from work is seen in other terms. For example, the phenomenon under consideration is identified with job dissatisfaction [34]. On the other hand,

satisfaction is presented as a consequence of dealing with alienation, but authors such as Watson (2003) and Hall (1994) assume that if work provides an opportunity for individuals to freely express themselves, then alienation does not always follow from experienced dissatisfaction (M. Radoslavova, A. Velichkov, 2005).

The following hypotheses are put forward in their study:

Hypothesis 1) It is hypothesized that there are statistically significant relationships between different aspects of role stressors influencing levels of work alienation.

Hypothesis 2) Demographics are hypothesized to influence levels of alienation and the ranking of role stressors.

The subjects of the study were physicians, nurses and orderlies, the former varying in their specialization - paediatrics, orthopaedics, general practitioner, psychiatry, neurosurgery, cardiology, gastroenterology, infectious diseases and radiologists. They are grouped according to various attributes and distributed as follows in number and percentage:

Depending on gender

30 men, 40% of respondents

45 women, 60% of respondents

Depending on age

up to 35 years, 15 persons, 20% of respondents

36-50 years, 36 persons, 48% of respondents

over 50 years, 24 persons, 32% of respondents

Depending on the position held

doctor, 54 persons, 72% of respondents

nurse, 12 persons, 16% of respondents

Sanitiser, 9 persons, 12% of respondents

Depending on the position in the hierarchy

supervisor: 16 persons, 21.3% of respondents

subordinate doctor: 51 persons, 68% of respondents

subordinate-nurse: 8 persons, 10.7% of respondents

Depending on seniority in the organization

up to 5 years: 19 persons, 25.3% of respondents

over 5 years: 56 persons, 74.6% of respondents

Depending on the total length of service

up to 5 years: 7 persons, 10% of respondents

5-10 years: 11 persons, 14% of respondents

11-20 years: 26 persons, 35% of respondents

over 20: 31 persons, 41% of respondents

METHODS

In the present study, two questionnaires were used to examine psychometric characteristics: "Diagnosis of role stressors at work", created by M. Radoslavova (2005). The method contains 41 items (statements) divided into two scales containing the main constructs of role stressors, namely role ambiguity and role conflict. Respondents' role perceptions are assessed by frequency of occurrence in their work routine, using a Likert scale. A 5-point scale is used, with responses ranging from 1 - rarely, to 5 - almost always.

"Diagnosis of alienation from work" was created by A. Velichkov (2005). The questionnaire contains 10 statements assessed by a 7-point Likert scale of frequency of experience, ranked from 0 - never, to 6 - almost constantly. The minimum score on the scale is 0 and the maximum score is 60. (M. Radoslavova, 2005).

Analysis of the results obtained

The results entered from the descriptive statistics are reported in the following tables(1, 2).

Table 1. Descriptive statistics of role stressors

Role stressors	N	Mean	SD
Role ambiguity	75	3,944	0,595
Role conflict	75	2,633	0,706

The values of role ambiguity are higher than those of conflict. The trend may be due to situational ignorance due to the Covid-19 pandemic. This new situation has completely changed the duties and expectations of those working in the helping professions as they were "on the front line". Thus, the working hours of medical staff increased dramatically, the lack of staff was felt, and some wards were restructured into Covid-19 ones. These variables are a significant precondition for experiencing role ambiguity, as duties, expectations and demands change daily. In addition, health risks are increased by the initial shortage of protective equipment and disinfectants, and media misinformation and excessive 'scaremongering' increase the recorded ambiguity. Thus, in the situation created, health workers appear to be professionals of first necessity, all attention is focused on them, and demands and expectations are high. The findings are similar to those recorded in a Japanese study of 198 nurses during the Covid-19 situation. There too, role ambiguity had higher values than role conflict, and these data were linked to burnout, career development, and personality achievement [35]. This indicates the role of pandemic setting in the recorded results, and apparently, the situation influences equally for role stressors and feelings of ambiguity in all health care workers.

Table 2. Descriptive statistics of work alienation

Alienation from work	N	Mean	SD
Alienation	75	15,000	12,048

The data obtained show that the levels of alienation in the sample presented are higher than the norm. Often, alienation occurs due to the presence of overwork, which is also a likely factor in the sample under consideration. Compliance with multiple rules, constant activity and the need to adapt to a changing environment could also cause excessive occupational stress and alienation from work. The need for security also generates feelings of alienation - from tasks,

which also lowers motivation to work. This can be assumed to exist from the long on-call periods caused by a lack of staff and multiple illnesses in a short period of time. It is also possible that an inappropriate management style in such a dynamic pandemic situation may have been influential in increasing general alienation from work, but this may be the aim of a further in-depth study. Furthermore, alienation is a strong predictor of the development of Burnout Syndrome, and high levels on this indicator suggest a near-developmental level of the condition. A study of nurses in Turkey showed that high levels of work alienation affected task performance and a decline in performance was observed [35].

According to some studies, role ambiguity causes stronger adverse psychological consequences (M. Radoslavova, 2005). High values on the considered phenomenon form the need for a detailed definition of the impacting constructs of role stressors. The obtained data highlight several significant trends (Tab. 3). The highest values were found for the ambiguity scale with its three dimensions- job duties, performance and results. Their values were very close, suggesting their significance in approximately equal degrees. These findings are quite logical once it is specified that this scale has higher scores than the other. All three dimensions influence and appear to be role stressors, suggesting variable task and job behaviours as well as an inability to predict outcomes. This is probably due to the observed shortage of professionals and workers in the field under consideration. This ambiguity may also be suggestive of changing work roles and fulfilling other people's commitments, with the pandemic situation that has developed being a key factor in the high scores recorded, as hospital settings are presumably well organised. The data in the table (Table 3) also vividly show that the determinants of 'ambiguity' are significantly more interrelated than the stressors on the 'conflict' scale. The most pronounced of the conflict scale, are job duties. This is fully explained by the job specificity in medical professionals. The changing epidemiological situation imposes new tasks and responsibilities that give rise to the observed results, leading to some dissatisfaction and conflict. But for the sample presented, it can be assumed that after the role problem occurred in the job description dimension, the sense of community, purpose and duty support the non-continuation of conflict in the performance of the newly emerged duties and subsequent outcomes. It should be verified whether the characteristic is valid only for highly specialized staff in a medical facility or for all employees.

Table 3. Descriptive statistics of role stressor subscales

Role stressor subscales	N	Minimum	Maximum
Official duties ambiguity	75	2.17	4.67
Implementation ambiguity	75	1.67	5.00
Results ambiguity	75	2.00	5.00
Results conflict	75	1.00	4.50
Implementation conflict	75	1.00	4.27
Official duties conflict	75	1.00	4.60

It is important to define the antecedents of an increase in the alienation and role stressor scores as well as pinpoint the demographic dependents influencing the components presented. Only in this way can adequate measures be diagnosed and implemented to address employee stress levels and subsequent burnout, as well as improve the overall functioning of the business and organization. A foreign study conducted during the Covid-19 pandemic in Wuhan among nurses

investigated stressors in the work environment and showed that work hours per week and time spent with loved ones and children were influential factors in coping with mental strain [28]. In order to look for correlations between this study and the present study, more independent and more extensive research should be considered.

Dependencies between the two constructs under consideration should be sought.

The high interrelationship between the constructs examined is evident (Table 4). The data show that the strongest correlation is between alienation and role conflict. This suggests that changing role responsibilities and performing unforeseen tasks largely predisposes to careless performance or violation of organizational rules, which is indicated by alienation. Furthermore, in a work environment such as the medical one, good collegial relations are essential. Misunderstanding and shifting of responsibilities between colleagues can be life-threatening in a critical situation, which also explains the observed results. The other two relationships present a good correlation between role ambiguity with role conflict and alienation. In tabular form, the results are seen as an inverse correlation because the role ambiguity scale derives a raw score for the level of clarity that reverses the sign. The determinants of the role stressors interact, which is not surprising and indicates good agreement between the scales. As role ambiguity increases, role conflicts also increase because ignorance about duties and responsibilities gives rise to performing unrelated tasks and conforming to colleagues' opinions, which is experienced with tension and causes some psychological distress. The correlation between alienation and role ambiguity is not as strong as between alienation and role conflict. However, the mean relationship between the two constructs suggests that failure to plan daily goals and tasks also generates alienation from work. In the current sample of subjects, alienation emerged as a consequence more strongly following the need to perform unforeseen tasks and conform to the opinions of colleagues than following experienced uncertainty about job duties and responsibilities. Perhaps this can be explained by an attempt to keep the work environment relatively calm despite the stressful situation that occurred - Covid-19.

Table 4. Correlation between role stressors (ambiguity and conflict) and alienation

Constructs	Role ambiguity	Role conflict	Alienation
Role ambiguity	1	-.383**	-.462**
		,001	,000
Role conflict	-.383**	1	.675**
	,001		,000
Alienation	-.462**	.675**	1
	,000	,000	

Overall, it can be concluded that the examined correlations are statistically significant for all constructs, thus accepting Hypothesis 1. The Role Stressors Questionnaire has very good internal consistency and its determinants are correlated. Alienation registers high levels of correlation with both scales measuring role stressors. It is important to determine whether the observed dependence is influenced by demographic indicators. Thus, strategies can be implemented to reduce the feelings of alienation and stress that predispose medical staff to leave.

In summary, it can be concluded that in the present study, strong correlations were observed between work alienation and role stressors, as well as between the constructs of role ambiguity and role alienation themselves. None of the demographic indicators registered a statistically significant difference with the unknowns examined, and this is explained by the specificity of working in a medical setting. For a more comprehensive study, factors influencing the external organizational environment that may be a prerequisite for reducing job stress and alienation as well as job satisfaction can be explored. Other constructs not explored in this paper, such as leadership management styles, reward, locus of control, and burnout, may also prove to be important unknowns.

CONCLUSION

The interrelationship between the two constructs under study was proved, thus accepting Hypothesis 1. The data showed that the strongest correlation was between work alienation and role conflict. This suggests that changing role responsibilities and performing unforeseen tasks largely predisposes to negligent performance or violation of organizational rules, as indicated by alienation. In a work environment such as the medical one, good collegial relations are essential, so phenomena such as misunderstanding and shifting of responsibilities between colleagues can be life-threatening in a critical situation, which also explains the observed results. Role ambiguity also correlated well with role conflict and alienation. The determinants of role stressors interacted, which is not surprising and indicates good consistency between the scales. As role ambiguity increases, so does role conflict, because ignorance about duties and responsibilities gives rise to performing unrelated tasks and conforming to colleagues' opinions, which is experienced with tension and causes some psychological distress. The correlation between alienation and role ambiguity shows that failure to plan daily goals and tasks also generates alienation from work. In the current sample of subjects, alienation emerged as a consequence more strongly after the need to perform unforeseen tasks and conform to the opinions of colleagues than after experiencing uncertainty about job duties and responsibilities. Perhaps this can be explained by an attempt to keep the work environment relatively calm despite the stressful situation that occurred - Covid-19.

The characteristics discussed in this paper have a major impact on employee performance, motivation and work ability. Therefore, it is in the interest of employers and managers and workers to seek and implement effective strategies to reduce stress and improve the quality of life of individuals. An innovative approach gaining popularity is that of Balint groups. Highly suitable for health care workers, it allows sharing the professional problem and focusing on the emotional side of the diagnosis, understanding the patient. This helps to reduce stress by being understood by colleagues and reproduces a relaxed doctor-patient relationship, which should reduce alienation.

References

- [1]. TERRY A. BEEHR, JOHN E. NEWMAN RESEARCH ON OCCUPATIONAL STRESS: AN UNFINISHED ENTERPRISE Personnel Psychology First published: 07 December 2006 <https://doi.org/10.1111/j.1744-6570.1998.tb00741.x>
- [2]. Velichkov A., Psychology of Individual Social Behaviour, ed. "Albatros", Sofia, 2006
- [3]. Valkov P., "Stress in the teaching profession and coping strategies", Online Journal of Scientific Forum (3), 2017
- [4]. Mitevska M., Organizational and Business Psychology, ed. "For the Letters", Sofia, 2017
- [5]. Naumov I., "Organizational Behavior", Sofia, 2004
- [6]. Pavlova P., Todorova M., "Occupational stress and job satisfaction in health care professionals", 2008, Health Care, №3
- [7]. Peev V., "Professional stress and "burnout" syndrome in doctors working in surgical wards", Sofia, 2017
- [8]. Radoslavova M, Velichkov A, "Methods for psychodiagnostics" , ed. "Pandora Prim", Sofia, 2005
- [9]. Reggio R., Porter L., Introduction to Industrial Psychology, Dilok, 2006
- [10]. Rusinova V., Vassileva L., Zhilyova S., "Assessment of occupational stress in work activities", "25 years Institute of Psychology", 1997
- [11]. Rusinova V., Vassileva L., "Occupational stress: a theoretical and experimental model of C.L. Cooper", Bulgarian Journal of Psychology, 4, 1995
- [12]. Celier H., "Stress without Distress", Science and Art Publishing House, Sofia, 1982
- [13]. Stoyanov I., "Stress in the organizational environment", edition of SA "D. A. Tsenov", Svishtov, 2012
- [14]. Hristova E., "Stress at Work", Paisii Hilendarski University Press, Plovdiv, 2018
- [15]. Yanakiev, J., "Diagnosis of Burnout Syndrome in Educational Professionals. Strategies for coping with chronic stress in the workplace", University Edition Plovdiv University " Paisii Hilendarski", 2019
- [16]. Bodrov V. "Psychological stress: development and overcoming", 2006
- [17]. Al-Jibeihi H., "Exploring the Association between Gender Performativity and Work Alienation", 2019
- [18]. Amarat M., Akbolat M., "The mediating role of work alienation in the effect of workplace loneliness on nurses' performance", Journal of nursing management 2018
- [19]. Cooper C., Dewe P.& O'Driscoll M. , "Organizational Stress: a review and critique of theory", Research, and Applications, 2001
- [20]. Hobfoll S. E., "Conservation of resources: A new attempt at conceptualizing stress", American Psychologist, 44(3), 1989
- [21]. Kahn, R. L., Wolfe, D. M., Quinn, R. P., Snoek, J. D., & Rosenthal, R. A. (1964). *Organizational stress: Studies in role conflict and ambiguity*. John Wiley.
- [22]. Lazarus R., "Stress and Emotion", 1999

- [23]. Meng H., Bai S., "Risk factors of role stress and professional burnout among nurse anaesthetists: a multicenter cross-sectional study", *Japan journal of nursing science*, 2021
- [24]. Santas G., Isik O., Demir A., "The effect of loneliness at work; work stress on work alienation and work alienation on employees' performance in Turkish health care institution", *South Asian Journal of Management Sciences*, 2016
- [25]. Wagner III J., Humphrey S., Meyer C., Hollenbeck J., "Individualism-collectivism and team performance: another look.", *Journal of Organizational Behavior*, 2012
- [26]. Walter B. Cannon. *Bodily Changes in Pain, Hunger, Fear and Rage*, New York: Appleton, 1929
- [27]. Work P., "Unemployment and Mental Health. Oxford University Press Publishing", 1987
- [28]. Yuanyuan M. et al, "Work stress among Chinese nurses to support Wuhan in fighting against COVID-19 epidem
- [29]. LE Tetrick, JM LaRocco Understanding, prediction, and control as moderators of the relationships between perceived stress, satisfaction, and psychological well-being. *Journal of Applied psychology*, 1987 - psycnet.apa.org, 2020
- [30]. PD Bliese, CA Castro Role clarity, work overload and organizational support: Multilevel evidence of the importance of support *Work & Stress*, 2000 - Taylor & Francis
- [31]. Angel Velichkov, Maria Radoslavova INFLUENCE OF NEGATIVE ROLE PERCEPTIONS ON PSYCHOLOGICAL STRESS DYNAMICS - A LONGITUDINAL STUDY *Journal: Психологични изследвания*, Issue Year: 08/2005' Issue No: 1 Page Range: 39-53
- [32]. PL Perrewé, KL Zellars, GR Ferris Neutralizing job stressors: Political skill as an antidote to the dysfunctional consequences of role conflict ... - *Academy of ...*, 2004 - journals.aom.org
- [33]. EK Kelloway, J Barling Job characteristics, role stress and mental health - *Journal of occupational psychology*, 1991 - Wiley Online Library
- [34]. J Fried, M Weitman, MK Davis Man-machine interaction and absenteeism. - *Journal of Applied Psychology*, 1972 - psycnet.apa.org
- [35]. O Unal, M Akbolat, M Amarat The influence of patient-physician communication on physician loyalty and hospital loyalty of the patient - *Pakistan journal of medical sciences*, 2018 - ncbi.nlm.nih.gov
- [36]. https://infostat.nsi.bg/infostat/pages/external/login.jsf?x_2=1000
- [37]. <https://knizhen-pazar.net/products/books/1332931-psychology>