

## THE ROLE OF SOCIAL IDENTITY IN AN EPISODIC HEALTH CARE RELATIONSHIP

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### ABSTRACT

The aim of this paper is to elucidate the role of a customer's social identity during the process of an episodic health care relationship. The greater context of this study, healthcare service relationships and more specifically episodic relationships, have not been the focus of existing in-depth studies. The social identity of a customer (or patient) has an important role in the success of an episodic treatment relationship. The role is studied here with the help of literature on social identity and on buyer-seller relationship ending. This study suggests that the social identity of a customer has two different roles in an episodic relationship: as a directive incident and as an enabling stage. The study ends by discussing implications and suggestions for future research.

**Keywords:** dissolution of an episodic relationship, social identity, longitudinal case study, drug rehabilitation treatment

### INTRODUCTION

This paper focuses on the role of a customer's social identity during the process of ending an episodic relationship. Existing studies on relationship ending (for a review see Tähtinen and Halinen, 2002) have not profoundly explored episodic relationships, although they are not rarity in business or in society in general. An episodic relationship is defined here as a relationship that is 'established for a certain purpose and/or time period' (Halinen and Tähtinen 2002) and thus ends when it has reached its purpose and/or the time period has ended. In other words, the ending of the relationship is already predetermined when it begins. For example, in many health care services, the purpose of an episodic treatment relationship is to find a cure for a problem and therefore to end the relationship as soon as the cure has been found. However, the success of an episodic relationship and successful ending of episodic relationships of any kind (e.g. for project relationships see Havila and Salmi 2008) is complex phenomena. Thus, the success of an

episodic treatment relationship cannot be determined solely on its predefined purpose, which is often defined by the service provider instead of the customer.

In this study, we focus on successful episodic relationships in a health care context. Health care services, generally, can be defined as services which intend to influence a person's health, directly (where a prerequisite is that a patient is physically present) or indirectly (Tuominen and Orava 2002). The empirical context of the study is direct service provided by public health care service providers, namely institutional substance abuse treatment.

A successful episodic relationship is defined here as one that has reached both the purpose of the service provider and the customer and its time period has ended. The definition acknowledges the active role of both parties in the health care relationship, following IMP tradition. Moreover, as will later be shown in the paper, the definition implicitly includes the change of the customer's social identity that leads to a successful ending. We have two reasons for this: firstly the IMP tradition has recognized the social content of interactions in business relationships. Secondly, for a treatment relationship to be successful, the social identity of a customer (or patient) has an important role. Social identity is a product of social interaction between people in different groups (Hogg, Terry and White 1995). Combining these two aspects, this study asks "*What is the role of the social identity of the customer in the success of an episodic health care relationship*".

The current paper applies two theoretical bases; social identity theory and IMP inspired studies on buyer-seller relationship ending to uncover the role of social identity in a successful episodic relationship. This study will present a context-related theoretical framework that will later on be connected with an empirical part. For the empirical grounding of the model, narrative and participant observation data has already been collected during three different periods of time over the years 2007–2009.

## THE CHOICE OF THE EMPIRICAL CONTEXT

There are two reasons why the context of health care and especially drug detoxification treatment relationships was chosen for this study. First, existing research on detoxification treatments shows that most customers go through a treatment three to four times, over an average of eight years, before they actually achieve abstinence (Scot, Dennis and Foss 2004, 326). In other words, success rates for the episodic relationships are low. Because of this, drug treatment facilities face more and more difficulties in managing their customer relationships, as the cycle of relapses is more a rule than an exception. The service providers thus need more understanding on what enhances a successful ending of an episodic treatment relationship, to be able to stop the cycles of relapses and that way treat more patients than today.

Second, although the institutional substance abuse treatment is not a typical business context a study of its customer relationships gives unique and intensive views to deepen understanding about the buyer-seller relationships. The relationships are very intensive and their purpose is quite fundamental one; to start a serious change in the customer's life and lifestyle. Thus, these relationships are extreme examples of episodic relationships and studying them will bring forward the most severe problems that hamper their ending in a way that pleases all parties.

#### FACTORS INFLUENCING THE ENDING PROCESS OF EPISODIC RELATIONSHIPS

We suggest two main factors influencing the predetermined ending process, namely the purpose of the relationship and its duration together with directive incidents. Both are discussed as follows.

##### *The purpose of an episodic relationship*

Defining the purpose of the relationships, i.e. the reason for its existence, involving both actors so that the individual goals do not dominate the mutual goals and thus finding appropriate disengagement, is a critical step in the ending of the relationship. Moreover, a common understanding of obtainable purposes is also critical and therefore, it would be better to start with a narrowly defined purpose between the partners of the relationship (Wilson, 1995). An episodic relationship in substance abuse treatment represents a special case, because its purpose from the service provider's point of view cannot be changed during its existence. The main purpose of the relationship, for the service provider, is to manage the withdrawal symptoms so that health risks will not arise to the one to be taken care of and to design a realizable rehabilitating period of treatment as a communal care lasting 6 months. However, the customer may enter the relationship with different objectives than service provider has, but it is possible and wishing that customer changes his/hers the purpose of relationship during the treatment period. Thus, a first prerequisite for the relationship to end successfully is to reach an understanding of a joint goal between the service provider and the customer.

##### *The duration of an episodic relationship*

In the empirical context of this study, the episodic relationships are extremely short-term. The relationships in institutional substance abuse treatment last for 14 days and nights. Although this is an extremely short duration, the relationship may nevertheless face a sudden death (see Baxter, 1984), namely it may end (and therefore also fail) before the time period ends, if the customer decides to drop out and stop the treatment.

Edvardsson and Strandvik (2000) refer to directive incidents as crossroads or turning points in a relationship. Furthermore, Edvardsson and Strandvik (2008, 327) define 'critical time' as "*a period of increased sensitivity in a business relationship that may change the actors' attitudes*

*and/or behavior*”. Thus, the period of time given for an episodic relationship is a challenging one because, the predetermined time may be too short to solve the problem that is defined as the purpose.

## THE PROCESS OF RELATIONSHIP ENDING

In this study we use the neutral concept of ‘ending’ (see Tähtinen and Halinen, 2002; Törnroos, 2004; Tidström and Åhman, 2006) when referring to the overall process through which the finishing of an episodic relationship takes places. The ending process has been further divided into assessment, decision-making, dyadic communication, disengagement and aftermath stages (Halinen and Tähtinen, 2002). An empirical grounding of the theoretical model by Tähtinen (2002) presents the following stages: consideration, enabling (*involves actions as lowering exit barriers or minimizing the attenuating factors, reasons that justify ending relationship, developing new relationships and securing network positions*), disengagement (*actor bonds, activity links and resource ties weaken and break down altogether*), communication (*dyadic and network communication stage about ending or the continuation of the focal relationship*), restoration, and sense-making and aftermath stage (*involves individual and/or group actors to make sense of what has happened in the relationship*). Since the ending of an episodic relationship is predetermined, it is likely that its ending process will not include consideration stage (*involves actors’ decision-making behavior about continuing or ending the relationship*), restoration stage (*involves actions to savings the relationships and continuing it*), assessment stage (*evaluation about future of the relationships and how it could be ended*) and decision-making stage (*the future of relationship is made*). Thus, those stages are not considered here.

Both models include a disengagement stage, which refers to the decline of the exchange activities and therefore the resource ties, actor bonds and activity links broke down, as well as an aftermath stage (or sensemaking and aftermath stage), which refers to mental elaboration of what happens and happened during the relationship and its end. Thus, both of those stages are assumed to be involved in episodic relationship endings. Moreover, communication and enabling stages are also suggested to take place in predetermined ending processes.

We will first discuss the *communication* stage, where the parties communicate the ending or continuation of the relationship. Communication refers to “discussion about exit and/or voice and/or informing the other party about the decisions made” (Tähtinen 2002, 344). In the article of the Baxter (1984,31) an interesting example is brought out about case studies of divorcing couples which are noted, by Kressel et al.( 1980), four basic types of dissolution: 1) an enmeshed pattern, characterized by high levels of ambivalence, communication and conflict; 2) an autistic pattern, characterized by high ambivalence but the absence of explicit communication; 3) a direct-conflict pattern, frequented by open conflict and communication but with less intent than in the enmeshed pattern; and 4) a disengaged conflict pattern, characterized by limited

communication and conflict. Alajoutsijärvi et al. (2000) also refer to research on personal relationship ending (e.g. Baxter 1985) and suggest that parties may use two main strategies to communicate wishes to end a continuous relationship: exit and voice. The exit strategy indicates desires to terminate the relationship and voice strategy stands for encountering the reason for potential ending together with the partner, with the aim of continuing the relationship. A silent exit strategy refers to a situation where the parties have no intention or need to communicate exit wishes (Alajoutsijärvi et al. 2000). This can happen if they share an understanding that their relationship will end (or has ended).

The *enabling* stage consists of “all the actions that aim at lowering the exit barriers” (Tähtinen 2002, 343). In other words, this stage is needed if the ending of the relationship could not be otherwise possible. In buyer-seller relationships several types of exit barriers exist, e.g. lack of alternative partners or strong relational bonds.

Once the ending is possible, the *disengagement* stage can really progress. The disengagement stage refers to a part of the ending process during which “the actors bonds, activity links and resource ties start to weaken and break down altogether” (Tähtinen 2002, 340).

The *aftermath* stage would include “all the actions through which the individual and/or group actors make sense of what has happened in the relationship” (Tähtinen 2002, 342). The property which is typical of this stage is a self-reflection in that view, are mistakes done. Thus actors have possibilities to think about were there something that should be made otherwise. (Tähtinen 2002).

Since this paper uses a definition of a successful episodic relationship that stresses, on one hand the achievement of the purpose of both the service provider and the customer and on the other hand the ending of a predetermined time period, the ending is also a predetermined one (for the categorization of endings, see Halinen and Tähtinen, 2002) However, it is also possible that an episodic relationship ends before it fulfills its purpose or the time period ends. If this is the case, it cannot be considered as a successful one.

## SOCIAL IDENTITY

Social Identity Theory focuses on “the structure and function of the socially constructed self” (Hogg, Terry and White 1995, 259). In other words, the theory addresses individuals and their identity in connection with other individuals and groups of individuals. Social identity is a person’s knowledge that s/he belongs to a social category or group. Self-categorization is a process whereby self is reflexive and can categorize, classify, or name itself in particular ways in relation to other social categories or classifications. (Stets & Burke 2000.) Hogg, Terry and White (1995, 264) argue that social identity theory explicates a person’s individual behavioral choices as well as people’s relations with those from out-groups. However, this paper focuses on

the social identity of individuals that view themselves as members of the same social category. These social groups consist of two different groups, an in-group and an out-group. Members of the in-group are those who share similar self-categorization while members of the out-group are people who currently differ from an individual's own category. (Stets & Burke 2000.)

Social identity is seen as enduring, but at the same time changing construct. It changes when the individuals intergroup relationship change. Social Identity theory also views the content of social identity as “dynamically responsive to immediate contextual factors: different contexts may prescribe different contextually relevant behaviors contingent on the same social identity” (Hogg, Terry and White 1995, 259).

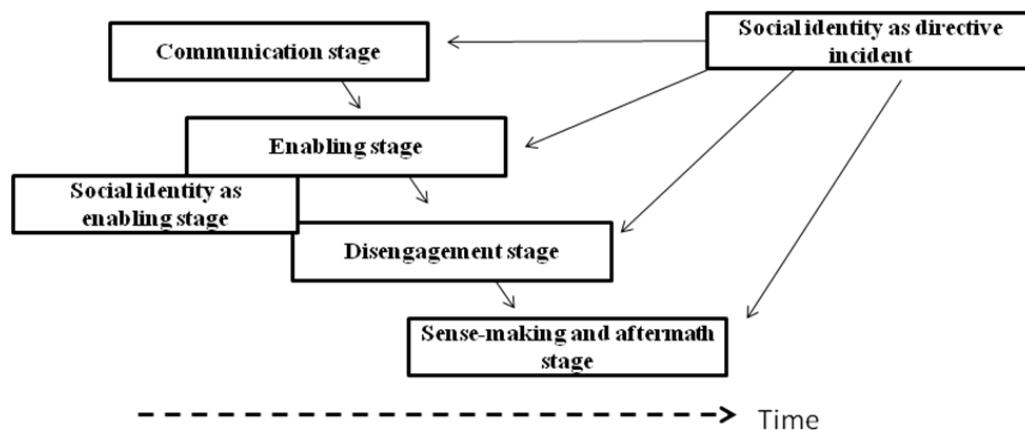
A developmental perspective on the change of social identity or self-definition is useful here. This perspective assumes that identity is dynamic and capable of both progress and adaptation. Thus, the developmental perspective takes both a progressive and an adaptive approach. The progressive approach to identity development sees it as a natural progression occurring when an individual moves toward a higher-order stage, changing her/his identity as s/he develops. Levinson (1986) explains that a new era in the life cycle begins as the previous one draws nearer to its end and each individual goes through the same basic sequence of the life cycle. This approach shows that individual growth leads to changes in identity content over time. The cross-era transition terminates the outgoing era and initiates the next higher stages of the life cycle.

The adaptive approach suggests that social identity change is an adaptation to changing internal or external standards, relevant in specific situations or environments (Dutton et al, 2010). In other words, certain events or role transitions assist an individual to see the need to change her/his identity and therefore encourage the creation of a new identity. Thus, first an individual undergoes a period of sense-breaking when experiencing discontent with the current sense of self in relation to the ideal self. Thereafter, the discontent may be transformed into creation of a new identity.

The change of identity is a process in itself, containing several stages: a decision, a communication and disengagement stages for example. At the decision-making stage the customer makes choices about the new in-group s/he wishes to belong to in the future. At the communication stage explicit communication, as well as explicit conflict to reduce social distance between the members of the present in-group (narcotics) and the members of the future in-group (recovering narcotics), is used. During the disengagement stage, directive incidents will help the customer to experience the discontent with the current identity and a will to change into new identity.

## A THEORETICAL FRAMEWORK

When framing the roles of social identity in a successful episodic health care relationship ending, we focus on four important stages of the process: the communication, the enabling and the disengagement and sense-making and aftermath, as shown in Figure 1. The figure sums up the theoretical discussion and views the role of social identity as taking two interconnected roles of directive incidents and part of the ending process; the enabling stage.



**Figure 1. Stages of the episodic relationship ending and social identity**

Both roles assume that the social identity of the customer changes and this change thus influences relationship ending and is a vital part of the ending process. The first role a directive incident as strong attraction to the change social identity is needed to move the relationship ending process forward. The second role, as a part in the enabling stage, ensures the success of the ending and makes possible the process of the social identity change of the beginning.

The process of episodic relationship ending thus furthers through four important stages, the communication, enabling stage, disengagement and sense-making and aftermath. Each is discussed next.

### *Communication stage*

In the context of this study, in which the ending is known in advance, there is a need to discuss how the disengagement will proceed, since the detoxification treatment relationship is only the first episode in the whole process of treatment. Thus, there is a need to discuss the future treatment plans of the customer, which also indicates the level of success of the relationship. We assume that in the episodic relationships the conflicts between the customer and the service provider and the control of conflicts also influence the progress of the relationship to its

successful ending. We define conflict as “a process in which one party perceives that its interests are being opposed or negatively affected by another party” (Wall and Callister 1995, 517).

### *Enabling stage*

Since the enabling stage refers to making the ending possible, it seems illogical to suggest that an already agreed ending would include enabling actions. However, the inclusion of this stage into our model has its bases on the aim to study *successful* endings in the context of the health care service. Here we assume, based on the first author’s profound understanding of the context, that for a detoxification treatment relationship to end successfully, the customer’s social identity needs to start to change from a narcotic to a recovering one, and this change could be considered as an enabling activity. If the customer, at the end of the treatment relationship, still sees him/herself as a narcotic, it is highly unlikely that s/he would commit to any future treatment plans, even if those would be made. Because the enabling stage also contains developing new relationship and securing network positions it is essential stage in the ending process of the episodic relationship. In other words, the change in the self-concept of the social identity provides the basis of forming new relationships in a new environment, which again supports the identity change.

### *Disengagement stage*

Since disengagement stage refers to starting the actor bonds which are weaken thus in our model it means that the bonds of the nursing staff, bonds of the different therapists, bonds of the different context-based staff as kitchen staff and bonds of the context-based mates are broken down altogether. Because the disengagement stage is a psychological as well as a physical heavy to the customer it is an extremely challenging stage in the ending process of the episodic relationship. Therefore, in the disengagement stage it would be better to find new alternative actors as soon as possible to fill the emptiness of the actor bonds.

### *Sense-making and Aftermath stage*

Sense-making and aftermath stage includes storytelling by actors’ own side of the things which were happened in the ending process. Therefore its effect on the network of social relations, during ending process, must be more marked than others, above mentioned stages. We suggest that the stories of detoxification treatment are the “key” from the social reality to make it reasonable to understand why the success of the episodic relationship ending is not by itself clarity. The narrator of the story talks from his/hers experiences of the treatment process which drift in the network of the social relations to the listener who needs it. The narrator of the story necessarily not from a conscious one, the transfer of the information but it is the property of the network of social relations that the information goes.



## CONCLUSIONS

The current paper has undertaken the developmental perspective of social identity, especially with a focus on an adaptive approach. Furthermore, the developmental perspective opens up new possibilities for seeing and understanding the role of social identity in business relationships. The value of the developmental perspective is revealed by using the progressive approach to build an illustrative proposition; how the change of the customer's social identity enables the successful ending process of an episodic relationship. According to Ethier and Deaux (1994, 244) "the way in which the person had previously maintained the identity is no longer valid or useful in the new context, and the person must change the way in which he or she maintains the identity". Thus, in a new context, maintaining a social identity must include a process of re-mooring the identity to new social supports. If the above-mentioned scenario happens, we can agree that an episodic relationship is successful, not only because the customer "flows" from the beginning of the relationship process to the end, but because the customer has the possibilities to create new ties of different people who present different social groups and different social life style than earlier has been.

### *Managerial implication*

The authors recommend that it would be excellent to the manager of service provider to create cooperation also with other disciplines than nursing science for example with economics. Thus, the workers would get the holistic understanding of the customer ending process with the treatment view.

A further implication of this study is that customer must be encouraged to provide new social relations and customer could be seen as having a duty to create more responsibility and willingness to accept that when relationship ending, many of the social bonds are broken. That kind of the encourage by nursing staff can succeed only if there were enough time for the nurses to the one to be taken care of. Thus we suggest that if customer has a personal nurse it would be easier for the nurse to support customer's interest for the adopting of the new social identity.

Finally we can state, that developing of operations models with analyzing real expectations and "dream" expectations of the customer in each stages of the ending process by safekeeping into the patient's and the nurse's use. Thus it would make possible to take care of by a profoundly customer-orientation.

### *Future research plans*

We argue that it would be crucial to focus on critical times in episodic relationships because of that a chronological duration of the process it has been agreed on beforehand as in this study only 14 days and night. “How long is a critical time, how do critical times develop and why and what are the drivers of the flow of critical times” (Edvardsson and Strandvik 2009, 332) are questions which we would like to place into the episodic health care relationship.

## References

Alajoutsijärvi, K., Möller, K., Tähtinen, J. (2000). Beautiful exit: how to leave your business partner, *European Journal of Marketing*, Vol. 34 (11/12), 1270-1289.

Andersen, P. H., and Kumar, R. (2005). Emotions, trust and relationship development in business relationships: A conceptual model for buyer-seller dyads, *Industrial Marketing Management* 35, 522-535.

Baxter, L.A. (1984). Trajectories of relationship disengagement, *Journal of Social and Personal Relationships*, Vol. 1, 29-48.

Bergami, M. and Bagozzi, R.P. (2000), Self-categorization, affective commitment and group self-esteem as distinct aspects of social identity in the organization, *British Journal of Social Psychology*, Vol. 39 (4), 555-577

Bonoma, T.V.(1985). Case Research in Marketing: Opportunities, Problems, and a Process, *Journal of Marketing Research*, Vol. XXII, 199-208.

De Cremer, D. and van Vugt, M. (1999). Social identification effects in social dilemmas: a transformation of motives, *European Journal of Social Psychology*, Vol. 29, 871-893.

Dash, S., E. Bruning, and K.K. Guin. (2007). Antecedents of Long-Term Buyer-Seller Relationships: A Cross Cultural Integration, *Academy of Marketing Science Review*, volume 2007, no.11.

DeRue, D.S, and Ashford S.J. (2010). Who Will Lead and Who Will Follow? A Social Process of Leadership Identity Construction in Organizations, *Academy of Management Review*, Vol. 35 (4), 627-647.

Dutton, Jane. E., Roberts Laura M., Bednar J. (2010). Pathways for Positive Identity Construction at Work: Four Types of Positive Identity and Building of Social Resources, *Academy of Management Review*, Vol. 35 (2), 265-293.

Dwyer, F.R., Schurr, P.H. and Oh, S. (1987). Developing Buyer-Seller Relationships, *Journal of Marketing*, 51 (2), 11-27.

Edvardsson, B. and Strandvik, T. (2000). Is a critical incident critical for customer relationship? *Journal of Managing Service Quality*, Volume 10 (2), 82-91.

Edvardsson, B. and Strandvik, T. (2008). Critical times in business relationships, *European Business Review*, Vol. 21 (4), 326-343.

- Ethier, K.A. and Deaux, K.(1994). Negotiating Social Identity When Context Change: Maintaining, Identification, and Responding to Threat, *Journal of Personality and Social Psychology*, Vol. 67 (2), 243-251.
- Evans, P. (2002). Collective Capabilities, Culture, and Amartya Sen's Development as Freedom, *Studies in Comparative International Development*, Vol. 37 (2), pp.54-60.
- Giller, C. and Matear, S. ( 2001).The termination of inter-firm relationships, *Journal of Business & Industrial Marketing*, Vol. 16 (2), 94-112.
- Hadjikhani, A. (1996). Project marketing and the management of discontinuity, *International Business Review*, Volume 5, Issue 3, June 1996, Pages 319-336.
- Halinen, A. and Tähtinen, J. (2002). A process theory of relationship ending, *International Journal of Service Industry Management*, Vol. 13 (2), 163-180.
- Hogg, M.A., Terry, D.J., White, K.M. (1995). A Tale of Two Theories: A Critical Comparison of Identity Theory with Social Identity Theory, *Social Psychology Quarterly*, Vol. 58 (4), 255-269.
- Ibarra, H. (1999). Provisional selves: Experimenting with image and identity in professional adaptation, *Administrative Science Quarterly*, 44: 764-791.
- Kong, E. (2008). The development of strategic management in the non-profit context: Intellectual capital social service non-profit organizations, *International Journal of Management Reviews*, Vol. 10 (3), 281–299.
- Kressel, K.,Jaffee,N., Tuchman, B., Watson, C., and Deutsch, M. (1980). A typology of divorcing couples: implication for mediation and the divorce process, *Family Process* (19), 101-16.
- Labov, W. (1997).Some further Steps in Narrative Analysis, Special issue of the *Journal of Narrative and Life History*, 27/08, 1-13.
- Levin-Rozalis, M. (2004). Searching for the Unknowable: A Process of Detection-Abductive Research Generated by Projective Techniques, *International Journal of Qualitative Methods*, 3 (2).
- Levinson, D. J. (1986). A conception of adult development, *American Psychologist*, Volume 41, No. 1, 3-13.
- Ojasalo, J. (2001). Managing customer expectations in professional services, *Managing Service Quality*, Vol. 11 (3), 200 – 212.

Orava, M. and Tuominen, P. (2002). Curing and caring in surgical services: a relationship approach, *Journal of Services Marketing*, Vol. 16 (7), 677-691.

Roos, I. (1999). Switching Processes in Customer Relationships, *Journal of Service Research*, Volume 2 (1),

Scott, C. K., Dennis, M. L., and Foss, D. M. (2004). Utilizing Recovery Management Checkups to shorten the cycle of relapse, treatment reentry, and recovery, *Drug and Alcohol Dependence* 78, 325-338.

Sen, A. (1998). Lecture delivered in Stockholm, Sweden, December 8, Alfred Nobel Memorial Prize in Economic Sciences.

Stets, J.E. and Burke, P. (2000). Identity Theory and Social Identity Theory, *Social Psychology Quarterly*, Vol. 63 (3), 224-237.

Sweeney, J.C. and Webb, D.A. (2007). How functional, psychological, and social relationship benefits influence individual and firm commitment to the relationship, *Journal of Business & Industrial Marketing*, 22/7, 474-488.

Tidström, A. and Åhman, S. (2006). The process of ending inter-organizational cooperation, *Journal of Business & Industrial Marketing*, Vol. 21 (5), 281-290.

Tähtinen, J. (2002). The Process of Business Relationship Ending – Its Stages and Actors. *Journal of Market-Focused Management*, Vol. 5 (4), 331–353.

Tähtinen, J. and Halinen A. (2002). Research on Ending Exchange Relationships. A categorisation, an assessment, and an outlook, *Marketing Theory*, Vol. 2 (2), 165–188.

Törnroos, J.-Å. (2004). Terminating relationships in the business networks? Reflection on business strategy, *Proceedings of the 20<sup>th</sup> Annual IMP Conference*, Copenhagen.

Wilson, D.T. (1995). An Integrated Model of Buyer-Seller Relationships, *Journal of the Academy of Marketing Science*, Vol. 23 (4), 335-345.