

To be a Savior or a Spectator?

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Abstract

Due to the extremely high altitude of the Tibetan Plateau (sometimes referred to as “The Roof of the World”, given its status as the highest and largest plateau in the world) unacclimated visitors are often at risk for succumbing to hypobaric hypoxia. This potentially fatal condition is the result of insufficient oxygen that is common at high altitudes. Also known as “plateau sickness”, symptoms include shortness of breath, increased heart rate, dizziness, headaches, drowsiness, moodiness, and unconsciousness. While discussing the sightseeing itinerary for the next day, a group of tourists staying overnight at a local inn heard a loud “thud” coming from the nearby common bathroom. Having just seen a tired looking gentleman enter with shower accessories in hand, the tourists became increasingly concerned after he failed to respond to loud knocking and enquiries, which were easily heard even with the shower running. Absent a reply, the guests instinctually knew their fellow traveler likely succumbed to hypoxia and fainted while showering. As concerned guests reacted to the commotion and broke down the door during the rescue, the innkeeper and staff merely stood by as passive spectators. Even worse, while the guests attended to the unconscious man, the innkeeper instructed his staff to not help, as he wanted to avoid any legal entanglement.

Key words: plateau sickness; hypoxia; rescue; customer citizenship behavior

The Story

While travelling in Tibet with two friends in July 2012, we spent our last night as guests at the Xian-Zu Island Inn in Lhasa City. Surrounded on both sides by the Lhasa River, the unique location of this high altitude island is arguably one of the most beautiful resorts in Asia, if not the entire world. As a result, its hotels and

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inexpensive inns are always booked with a diverse mix of sedate tourists, curious sightseers, and active backpackers from around the world.

While discussing plans for the next day with my companions in the inn's living room, I noticed a tired looking gentleman enter the nearby first floor bathroom. Although still fairly early in the evening, I recall thinking he probably had a long day and wanted to turn in early to be ready for the next day's activities. As my friends and I continued to chat, I heard the gentle sound of the shower and could not help but wonder how thin the walls were. Shortly thereafter my friends and I heard a disturbing and unmistakable "thud" coming from the bathroom. Instinctively, we got up and without hesitation knocked on the door as we asked the gentleman if he was alright. Seconds seemed like minutes as we looked at each other and switched from polite knocks and civil inquiries to loud banging and frantic shouting. Soon, several other guests spilled out from adjoining rooms and demanded the innkeeper do something to help. Perhaps sensing the innkeeper and staff's inability (or unwillingness) to act, an athletic looking male guest broke the door open, revealing the unconscious gentleman collapsed on the shower floor.

Unlike the previous time distortion where seconds seemed like minutes, now minutes seemed like seconds as I launched into rescue mode. Having taken a cardiopulmonary resuscitation (CPR) class years earlier, I checked for a pulse and surmised that cardiopulmonary resuscitation and artificial respiration might be needed to save this man's life. Someone yelled at the innkeeper to call an ambulance. A guest handed me a quilt to keep him warm, and another guest provided a wet washcloth to apply to his forehead. In the background I heard the innkeeper arguing with guests about avoiding possible legal actions that might ensnarl him and his staff if they got involved.

I was relieved when the man regained consciousness and was transferred to the ambulance, which arrived unnoticed during the controlled chaos. Relief soon turned to anger as the innkeeper refused to escort the man (now known to have checked in alone) to the hospital. When other guests volunteered to accompany this stranger, I finally expressed my dissatisfaction with the unhelpful attitude of the staff and assailed the innkeeper's ability and management skills. I may also have questioned his humanity, which seemed to set off an even more intense quarrel between the guests and the innkeeper.

Whether it was the inevitable emotional "crash" following the crisis-induced adrenaline rush or fatigue and drowsiness attributed to plateau sickness, the heated argument eventually abated, ending with the innkeeper extending a simple "thank you" to those involved in the rescue. That evening, a clearly visible negative mood engulfed the inn. This, at least, could not be attributed to hypobaric hypoxia.

Possible Solutions

Select (circle) one of the following alternative solutions:

- A. The innkeeper does not participate in the rescue and does not thank the guest participants for their customer citizenship behavior.
- B. The innkeeper does not participate in the rescue, but thanks the guest participants and provides discount coupons to show his gratitude.
- C. The innkeeper leads the rescue and thanks the guest participants by refunding one-night's stay.
- D. The innkeeper and staff participate in the rescue, thank the guest participants with a free one-night stay, provide coupons to all guests, and escort the concerned guests to visit the patient in the hospital.
- E. The innkeeper participates in the rescue, arranges staff to escort the patient to the hospital, but stays behind to address guests' concerns and collects feedback.

Assessments**Surface Assessment**

Choice D appears to be the best choice. Not only should the innkeeper and staff learn how to handle emergencies, but guests can also be made more aware of the seriousness of plateau sickness. Posting advisories in guest bedrooms and bathrooms to remind tourists of the symptoms and ways to avoid plateau sickness could prevent future emergencies. Rather than face anger from all involved by the innkeeper remaining a spectator, helping those in need often results in increased self-esteem and confidence and earns the respect of others. In addition, sharing such high stress experiences sometimes results in life-long friendships. By rewarding the guest participants with discounts, a free night's stay, and escorting guests to the hospital, the innkeeper also demonstrates appreciation for those who took action.

Deep Assessment

As a hotel guest, it was my non-reflective gut reaction to perform CPR that helped save this fellow hotel guest's life. Other guests were also participating to ensure the unconscious man was in good care. As an ancient Chinese philosopher, Mencius once said, human nature has an innate tendency to goodness. For this incident, I was not looking for any compensation or reward, but rather to help someone suffering from a potential fatal condition. However, the innkeeper's inability to handle an emergency that occurred on his property cautioned me that this incident may possibly occur to myself.

What troubled me the most about this incident was the innkeeper's unwillingness to take the patient to the hospital after my assistance as a

follow-through to the emergency rescue. This is not only the responsibility of the innkeeper to ensure his guests are not subject to danger, but also is one way to exhibit basic humanity. In addition, without further care, if the side effects to the patient cause even a worse condition, then all actions of rescue, participation, and good intent would be in vain. The unwillingness to take action also shows that the innkeeper was not wise to consider avoiding negative publicity if the incident had resulted in the death of a guest on his property.

I therefore wonder what caused the management inaction by the innkeeper and employees. Is it related to a lack of training or being oblivious or just simply inhuman?

Local hotels and inns are typically the first entry stop for tourists who arrive in Tibet. Their accommodations symbolically give travelers a sense of home away from home. Thus, hotel management and innkeepers should proactively consider programs and actions that ensure safety and prevent incidents from happening to guests on their property.

From the aspect of humanity, I was dismayed by the innkeeper's inaction. It reminded me of several news reports concerning court cases related to rescuers being framed and liable for victims' malicious intentions. In 2009, one piece of news was about some old men who would purposely fall down by themselves and then frame the people who helped them, in order to obtain monetary reparation indemnity from their so-called injuries. Such crimes lead to people not wanting to extend a helping hand and instead merely observe an incident as a spectator. For this case in Tibet, the staff was afraid to become involved in unnecessary legal problems. Under the circumstance, a lack of righteousness makes no one dare to help others.

References

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Strategies: Point Values and Explanations

- A. The innkeeper does not participate in the rescue and does not thank the guest participants for their customer citizenship behavior. 0 points: The innkeeper is perceived as lacking humanity and loses self-esteem, which would likely have moral and psychological impacts on the inn's staff and guests, further leading to a long-term decline in their willingness to help others.
- B. The innkeeper does not participate in the rescue, but thanks the guest participants and provides discount coupons to show his gratitude. 1 point: If the innkeeper lacked medical training and experience to offer assistance, then he could have asked others to help while making sure not to disturb, distract, or impede the rescuers. In addition, the coupons could serve as a form of

psychological compensation, while also serving to gain empathy in the eyes of guests and staff members.

- C. The innkeeper leads the rescue and thanks the guest participants by refunding one night's stay. 1 point: This action earns the respect of staff and guests. In addition, when combined with praising the good deeds of the rescuers, the refund could encourage positive customer citizenship behavior and enhance social harmony.
- D. The innkeeper and staff participate in the rescue, thank the guest participants with a free one-night's stay, provide coupons to all guests, and escort the concerned guests to visit the patient in the hospital. 6 points: After the innkeeper demonstrates the willingness to act, the other guests may likely feel less pressure and panic. In addition to bolstering the innkeeper's reputation as a person of integrity and honor, the free night's stay and coupons could compel the guests to become loyal customers and provide free word of mouth endorsements and reviews.
- E. The innkeeper participates in the rescue, arranges staff to escort the patient to the hospital, but stays behind to address guests' concerns and collects feedback. 2 points: By remaining behind to collect feedback, the innkeeper can learn from the experience and address guests' anxieties and concerns.

Editorial Commentary

Emergency and safety-related incidents do happen. However, the way in which the organization responds to the crisis and manages the event and outcome is the key. This case presents an inexperienced innkeeper with the responsibility to respond to a guest's (potentially) fatal medical condition. The unresponsiveness of the innkeeper might have resulted in a tragic outcome, if another hotel guest had not stepped in to rescue the afflicted guest. The hotel's crisis management policy concerning medical emergencies of guests and its customer-orientation and service culture are discussed herein.

Tibet has experienced a fast-growing tourism industry over the last few years. The increases in tourism development have resulted in direct employment and business opportunities for local communities. To fully enjoy the benefits of tourism revenue, local governments, communities, and tourism businesses may need to improve the quality of support systems that cater to tourists' needs, including health and safety responses to various crises, including an enhanced service quality and service culture for tourism businesses run by local residents. A key imperative is to improve the levels of knowledge, ability, and skills to respond adequately and with speed to tourists' needs. Doing so will enable more tourists and local communities to enjoy the benefits of tourism development.

Tibet's natural mountain scenery, unique culture, and various attractions and related activities attract a wide array of tourists who come to visit them, including Xian-Zu Island in Lhasa City. Even though most tourists arrive well-prepared for their visit to Tibet, some tourists are not (and cannot be) familiar with the impact of

its high latitude upon their health. As a consequence, a number of tourists inevitably encounter acute high-altitude illness or mountain sickness, including hypobaric hypoxia. As in this case study, innkeepers enjoy economic benefits from hosting (offering) accommodations for tourists. Local residents, including most innkeepers, indeed are very familiar with the health risks of high altitude tourism. Such incidents can be avoided by providing awareness education to warn visiting tourists. In addition, when an incident like the one in this case happens, the innkeeper should have emergency procedures in place to engage service employees and management to deal effectively and efficiently with the situation. Relaying the rescue to another guest is not the best option. Any follow-up legal concerns may be avoided by taking proactive training classes and considering health assurance coverage.

Precautions should involve training programs and education for staff, as well awareness programs for guests. Training programs should include basic emergency medical rescue training for employees and managers. Knowledge training or education programs to enhance hospitality employee service consciousness and some basic legal knowledge are also recommended. More specifically, one highly effective measure for hotels and inns may be to provide an intervention mechanism in the form of emergency buttons and announcements in visible places in order to inform guests about the procedures to follow (and whom to contact) in the event of hypoxia. Local governments should also ensure the safety of tourists with basic equipment and response units. The unwillingness of the local business owner to step forward and handle the calamitous event (a guest suffering from hypobaric hypoxia) points to the need for the local community to develop a more customer-oriented service culture.

This case study recommends the need for training communities and business owners about emergency procedures. In the end, this will help establish a much better overall service culture.