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# Psychological capital and workplace emotions among Indian nurses

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Nurses have an important role to play in delivering patient care in contemporary hospital setting. They are the key caregivers in a hospital and they significantly influence the quality of care provided, treatment and patient outcomes. The nurses also interact with the patients, their relatives and act as buffers between the patients and the doctors. While providing care to the patient, nurses have to provide understanding oriented care to be effective. They act as social agents in the field of health. This requires them to have many self based resources to become effective in their job role. Important self based resources for nurses that have been studied are positive emotions, hope, optimism and self efficacy. Additionally, research on PsyCap and Burnout (Peng et al., 2013; Bitmiş & Ergeneli, 2015) reports the importance of PsyCap to fight burnout. However, their study suggests that a comprehensive research is required encompassing workplace emotions. The present study aims to understand the role of Psychological Capital (PsyCap) with relation to workplace emotions through work engagement (WE) and emotional labor (EL).

**Keywords:** psychological capital, workplace emotions, through work engagement, emotional labor, nurse

## *Psychological capital (PsyCap)*

Psychological Capital is a higher order construct, composed of four dimensions i.e., self efficacy, hope, optimism and resilience of the individual. It has its basis in the field of Positive Organizational Behavior (POB), an area that focuses on people's strengths and psychological capabilities. Studying PsyCap of nurses has the benefit to equip us with the knowhow for dealing with burnout, absenteeism, intent to leave and other related issues which are almost like occupational hazards for this profession.

The present study looks at the relation between PsyCap and workplace emotions. The workplace emotions that are studied are Work Engagement (WE) and Emotional labor (EL). Studying how PsyCap predicts WE and EL will help us in mitigating burnout, an occupational hazard for nurses and will enhance the performance and engagement among nurses.

## *Work engagement*

Work engagement (WE) is a positive affective state expressed through intense involvement and energetic and tireless working towards an identified goal in a profession one identifies with. It is considered to be on the opposite end of the spectrum of burnout. Work engagement is a positive spiral with initial work engagement leading to increased job resources which in turn increase the engagement. Because nursing as a profession is highly stressful, it is important to study the role of PsyCap in nurses' work engagement as it can act as a personal resource to mitigate problems like burnout. Also a significant amount of research supports the importance of work engagement for nurses at an individual level and at the organizational levels.

## *Emotional labor (EL)*

One of the first emotions to be studied in the workplace settings was

Emotional Labor. It was brought into the limelight with Hochschild's (1983) *The Managed Heart* and Mann's (1999) *Hiding what we feel, faking what we don't: Understanding the role of your emotions at work*. The academicians and practitioners started doing research on EL since then. Also the focus is on emotional displays in nursing jobs making the intangible tangible. Also the fact that nurses as front line employees are the face of the hospitals or healthcare setups, makes this issue significant in present times. EL has been defined as "the act of expressing organizationally desired emotions during service transactions". It is a multi dimensional construct made up of frequency of emotional display, attentiveness to required display rules including the duration and intensity of expected display, variety of emotions and emotional dissonance. Nursing as a profession would entail higher intensity of emotional display and higher emotional dissonance leaving them vulnerable to emotional exhaustion and eventual burnout. Antecedents of frequency of emotional display are explicitness of display rules and closeness of monitoring by the organization. Antecedents of variety of emotional display are the power of role receiver and tasks performed by the employees. Antecedents of emotional dissonance are form of interaction (whether face to face or not), degree of autonomy and affectivity of the employee. These in turn would lead to emotional exhaustion and reduced job satisfaction. The present study analyses the relation between PsyCap and both the emotions i.e., WE and EL.

Very little research has been done to study the relationship between PsyCap and workplace related emotions in nurses in India, which faces a high shortage of nurses. The density of nurses in India is 61.3 per 100,000 of population with densities in urban area four times that of rural India. Out of this meager number, there are reports of high turnover and intention to leave because of migration to developed countries and difficult working conditions. Hence it is important to identify and develop the health workforce particularly nurses in India. Even those who are in the workforce are facing the brunt of scarcity of resources, high workload, shift work, high physical and mental demands. To counter these and other such demands, resources available to the nurses are psychological,

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relational and skill based resources. The present paper looks at the positive psychological resource i.e., PsyCap. Purpose of the research is to study whether PsyCap predicts the workplace emotions viz. Work Engagement and Emotional Labor. Considering the high attrition and burnout rates in this profession and difficult working conditions, personal resources of the subjects can act as a buffer to intention to leave and commitment. In the present study, the personal resources have been represented through self efficacy, optimism, resilience and hope, components of PsyCap. In the backdrop of available literature and the aforementioned argument, we conjecture the following hypotheses.

### Hypotheses of the study

- PsyCap will not significantly predict Work Engagement i.e. vigor, dedication and absorption.
- PsyCap will not significantly predict surface acting (SA) and deep acting (DA) components of emotional labor.
- PsyCap will not significantly predict emotional consonance (EC) and emotional suppression (ES), components of emotional labor.
- There will be no difference in WE and EL of nurses with Low and High PsyCap

## Method

### Participants

The participants were 139 nurses working in a multi specialty hospital in Karamsad Gujarat. The hospital is run by a trust providing medical services. There were 136 (97.84 %) females and 3 (2.16%) males in this sample. The nurses' age ranged from 20 years to 55 years with a Mean of 34.95 (SD =10.237). Their work experience in the current organization ranged from two months to 29 years with a Mean of 10.54 years (SD =9.237). The sample included nurses from neonatal ICU, surgery, cardiac unit, pediatric ward, chest ward, ENT ward, medicine ward, oncology, operation theatre and the nursing office. The qualifications were General Nursing and Midwifery (GNM) (96), Registered Nurse and Registered Midwife (RN&RM) (24) and BPNA (2). There were 96 staff nurses and 39 Nurse-in-charges.

### Instruments

To measure PsyCap, *PsyCap Questionnaire(PCQ)* was used. PCQ is

a self-report 24-item scale proposed by and consists of items adopted from the already established scales including efficacy scale, hope scale, resilience scale, and optimism scale. Luthans and colleagues have used this scale in different studies and found that it produces reliable results. To facilitate the state-like framing, the PCQ asks the respondent to describe how you think about yourself right now.

To measure Work Engagement *Utrecht Work Engagement Scale (UWES)*, a 17 item scale was used. The UWES items are scored on a 7 – point frequency scale ranging from 1 never to 7 always. It is a three dimensional questionnaire including vigor, dedication and absorption. Meta analysis of the original and short version of the UWES indicates very good internal consistency for vigor, dedication and absorption. More particularly analyses across 33 samples (Total n=19940) from eight different countries revealed that sample weighted value for Cronbach's alpha for all three scales of original and short versions of the UWES exceeds .80. Moreover Cronbach's alpha for the composite score exceeds .90.

To Measure Emotional Labor, Naring, G Britt, M. and Brouwers, A.(2007)'s Dutch Questionnaire on Emotional Labor was used. It consists of 13 items with 5 items assessing surface acting, 3 items assessing deep acting, 2 items assessing emotional consonance and 3 items assessing emotional suppression. The items are scored on a 7-point scale ranging from 1 to 7 with 1= "Very untrue of me"; 2= "Untrue of me" 3= "Somewhat untrue of me"; 4 = neutral; 5 = "Somewhat true of me"; 6= "True of me" and 7 = "Very true of me"

### Procedure

Data was collected in a general hospital in Karamsad, Gujarat. For this study we needed cooperation from the HR department and the Nursing Training Department as well as the nurse management department. After the HR department had agreed, the nursing department was approached and it was agreed that on a predefined day the researcher would be present to collect the data from the nurses. The questionnaires were administered in group sessions.

## Results

This study analyses the effect of PsyCap on workplace emotions. In order to find out the relation between PsyCap, WE and EL, the data was subjected to correlation and regression analysis.

Table 1: Effect of PsyCap dimensions on Work engagement

PsyCap	Vigor			Dedication			Absorption		
	B	$\beta$	t	B	$\beta$	t	B	$\beta$	t
Efficacy	.06	0.03	0.30	.11	0.09	0.88	.30	0.18	1.71
Hope	.21	0.11	0.98	.26	0.19	1.92	.23	0.14	1.27
Resilience	.62	0.30	2.73**	.27	0.19	1.97*	.41	0.23	2.14*
Optimism	.01	0.01	0.05	.31	0.23	2.54**	-.18	-0.10	-1.04
F		6.09**			15.66**			7.06**	
R		0.39			0.56			0.42	
R <sup>2</sup>		0.15			0.32			0.17	
Adj R <sup>2</sup>		0.13			0.30			0.15	

\* - Significance level .05

\*\* - Significance level .01



Table 1 shows that scores on PsyCap i.e., Efficacy, Hope, Resilience and Optimism significantly predicted Work Engagement i.e. vigor, dedication and absorption scores. The linear regression model explained 13% of the overall variance in vigor. Looking at the individual contribution of each of the components of PsyCap, resilience predicts vigor significantly ( $r=.38^{**}$ ). In fact, the commonly used definition of vigor includes the words 'mental resilience' and people who are highly engaged 'persist despite difficulties'.

The linear regression model explained 30% of dedication experienced by nurses. Looking at the individual contribution of the

PsyCap dimensions, resilience ( $r=.47^{**}$ ) and optimism ( $r=.47^{**}$ ) significantly predict dedication.

The linear regression model explained 15% of absorption experienced by nurses. When we look at the individual components of PsyCap and significance of their  $t$  scores, it suggests that resilience ( $r=.37^{**}$ ) significantly contributes to the explanation of absorption.

A look at the correlation matrix suggests that pscap is significantly correlated to dedication ( $r=.39$ ,  $p=.001$ ) and work engagement ( $r=.32$ ,  $p=.001$ )

Table 2: Effect of PsyCap dimensions on emotional labor

PsyCap	Surface acting			Deep acting			Emotional consonance			Emotional suppression		
	B	$\beta$	t	B	$\beta$	t	B	$\beta$	t	B	$\beta$	t
Efficacy	-0.11	-0.08	-0.68	0.05	0.05	0.48	0.06	0.09	.80	-0.06	-.07	-0.60
Hope	0.16	0.11	0.96	0.17	0.17	1.58	0.04	0.05	.45	0.03	.03	0.24
Resilience	0.14	0.09	0.78	0.27	0.25	2.32*	0.07	0.09	.83	0.26	.24	2.22*
Optimism	0.10	0.07	0.66	-0.001	-0.001	-0.01	0.06	0.09	.83	0.20	.20	1.99*
F	1.16			6.77**			2.52**			5.11**		
R	0.18			0.41			0.26			0.36		
R <sup>2</sup>	0.03			0.17			0.07			0.13		
Adj R <sup>2</sup>	0.01			0.14			0.04			0.11		

Table 2 shows that changes in PsyCap (Efficacy, Hope, Resilience & Optimism) scores were significantly able to predict variance in deep acting, emotional consonance and emotional suppression but not surface acting. The linear regression model explained 14% of the overall variance in deep acting. When we look at the individual components of PsyCap and significance of their  $t$  scores, it suggests that resilience ( $r=.38^{**}$ ) significantly contributes to the explanation of deep acting, while resilience ( $r=.32^{**}$ ) and optimism ( $r=.30^{**}$ ) significantly contribute to the explanation of emotional suppression. A look at the correlation matrix suggests that overall PsyCap is significantly only correlated to deep acting ( $r=.26$ ,  $p=.002$ ). Each of the components of PsyCap i.e., efficacy, hope, optimism and resilience are correlated to all the components of emotional labor except surface acting.

To understand whether PsyCap makes an impact on the WE experienced, the mean WE of nurses with High PsyCap was compared to the mean WE experienced by low PsyCap nurses. Using an independent  $t$ -test, it was confirmed that High PsyCap nurses did experience significantly higher WE and dedication as compared to low PsyCap nurses ( $t(136)=3.581$ ,  $p=.000$  (one tailed)).

To understand whether PsyCap makes an impact on the EL experienced, the mean EL of nurses with High PsyCap was compared to the mean EL experienced by low PsyCap nurses. Using an independent  $t$ -test, it was confirmed that High PsyCap nurses did experience significantly lower EL and deep acting, emotional consonance and emotional suppression as compared to low PsyCap nurses ( $t(127)=1.845$ ,  $p=.0335$  (one tailed)). In case of surface acting there was no significant difference between the high and low PsyCap nurses.

To understand the relationship between the age and WE and EL, an independent  $t$ -test revealed that age was not a significant factor in

experiencing workplace emotions.

## Discussion

In this paper we are interested in knowing whether there is a relation between PsyCap and work engagement and PsyCap and Emotional labor amongst nurses. The need for exploring these relationships exists because burnout amongst nurses is a serious problem. The burnout experienced by nurses can in turn affect the patient satisfaction with nursing care. The profession is riddled with problems like shortage of nurses because of high turnover, pressure to deliver better patient outcomes and intention to leave. In order to deliver better quality of care, we need engaged nurses who because of their personal resources are able to overcome the challenges created by the occupation. Nursing Job Demands-Resources (NJD-R) model suggested by Keyko, Cummings and Wong also identifies psychological resources as an important antecedent of work engagement. What are these personal resources, that can help combat the stress and burnout faced by nurses was the question that researchers were looking for. PsyCap with the components of self esteem, hope, optimism and resilience seemed to be most appropriate. Based on this study we can suggest that PsyCap dimensions especially resilience can be an important antecedent to work engagement. In spite of adversities like long working hours, hospital atmosphere, demanding patient relatives, becoming aware of and developing one's own resilience would help the nurses to combat and bounce back to serving the patients as all the three components i.e. vigor, dedication and absorption are explained by resilience. This ability to 'bounce back' helps the nurses to tolerate the negative atmosphere present in their work setting and continue performing the service that they provide.



In order to counteract the EL experienced by nurses because of the contagion effects due to negative emotions expressed by the patients and their relatives, optimism could be a strong buffer. Flexibility and adaptability offered by optimism can counteract the impact of emotional dissonance generated by the hospital atmosphere. Optimism would also help them dwell less on the negative situation and help them maintain a positive outlook in face of adversities. Their resilience would also instill confidence and faith in self to alter the internal emotional state rather than just match the external emotional expression, thus reducing emotional labor and freeing personal resources for delivery of better patient care and outcome.

### Implications of the study

Very few studies have been undertaken showing the relationship between PsyCap, WE and EL in the nursing population in India. A review shows that in studies related to Work Engagement in nursing as a profession, North American studies dominate. The present study adds value from a global perspective. It also shows how the personal resources of the nurses can act as a buffer to the stark reality of high intention to leave in Indian healthcare organizations. The study also points to PsyCap development as a method to reduce fatigue and burnout experienced by nurses, which in turn would affect the patient outcomes and improve quality of nursing care. This in turn would help the organizations reduce costs with limited resources.

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