

# **The Relationship between Emotional Labor and Job Satisfaction among Nurses of Selected Private Hospitals in Sri Lanka with the Mediating Role of Emotions**

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## **Abstract**

The healthcare system in Sri Lanka is distinguished by its distinctive and sophisticated model, which combines elements of traditional and Western medicine. It is emerging as a highly competitive industry in Sri Lanka, with an enhanced consciousness regarding the medical-related elements in daily life. This study explores the nuanced relationship between emotional labor, emotions, and job satisfaction among nurses in private hospitals in Sri Lanka within the distinctive context of its healthcare system. Focusing on surface acting and deep acting as emotional labor strategies, the research delves into the emotions of anxiety, anger, fear, and happiness, considering their impact on job satisfaction. The current investigation is primarily based on the

problem of identifying the intricate relationship between emotional labor, emotions, and job satisfaction, with a gap in existing literature in the Sri Lankan context. Thus, the primary objectives are to explore the associations between emotional labor (specifically surface acting and deep acting), emotions (anxiety, anger, fear, and happiness), and job satisfaction. The researchers collected data from five selected healthcare organizations and distributed 313 questionnaires to the study sample. The data collection process was primarily based on a simple random sampling method. The Pearson correlation analysis and the Hayes Process Model 4 Mediation Analysis were employed to unravel the direct and mediating role of emotions and emotional labor. Robust correlations regarding deep acting as a positive link with job satisfaction and surface acting as a negative link with job satisfaction are identified. The findings underscore the importance of addressing emotional labor dynamics in healthcare settings for enhanced employee well-being and improved patient care quality. This study significantly advances the understanding of the intricate relationship between emotional labor, emotions, and job satisfaction among nurses in private hospitals in Sri Lanka. The findings contribute to academic scholarship and offer actionable insights for healthcare management.

**Key Words:** Anger, Anxiety, Deep Acting, Emotional Labor, Emotions, Fear, Happiness, Surface Acting

## Introduction

The healthcare system in Sri Lanka is distinguished by its distinctive and sophisticated model, which combines elements of traditional and Western medicine to provide a wide range of services to the public. Nursing plays an essential role in the healthcare system, functioning as a crucial component in promoting the health and welfare of people and communities (Abou, 2017). Nurses, being the most substantial element of the healthcare staff, convey crucial professional knowledge and skills, making their contribution necessary for the efficient operation of healthcare institutions (Eskandari et al., 2017). Nurses often encounter high stress situations in their workplace, and long-term exposure to high-stress circumstances has the potential to result in psychological exhaustion and physical weariness. In extremely challenging job environments, nurses often encounter circumstances when they are forced to imitate feelings of happiness or emotional displays to fulfil the expectations set by their respective organizations, which is generally known as emotional labour in literature (Kim, 2018). "Emotional labour is the process of managing feelings and expressions to fulfil the

emotional requirements of a job" (Hochschild, 1983). As per Chen et al. (2024) emotional labor refers to the process through which employees regulate and modify their emotional expressions during customer interactions in order to align with the organizational expectations for appropriate emotional and behavioral conduct. Emotional labour often arises when an individual's genuine emotions differ from the emotional expressions they are expected to display during workplace interactions (Hings et al., 2024). Although emotional labor comprises a range of tactics that nurses use to regulate their emotions within the professional setting, three primary strategies have mainly been discussed under this namely; surface acting, deep acting, and naturally felt emotions (Cheung & Lun, (2015). Within the practice of nursing, the emotional setting is characterized by an intricate interrelation of diverse sentiments, each of which possesses the potential to profoundly affect the practitioners and the standard of care provided to patients. Further, the manner in which nurses execute these approaches may significantly impact their overall level of job satisfaction.

Job satisfaction serves as an important indicator of a worker's overall well-being, characterized by a pleasant emotional state that arises from an individual's evaluation of their work or job encounter (Locke, 1969). Job satisfaction is of utmost significance in the healthcare industry, especially among nurses, since it has a direct impact on the quality of patient treatment and the general running of healthcare facilities (Asima et al., 2017). It is important for healthcare institutions to comprehend the nature of these emotions, their underlying causes, and their implications for the satisfaction and well-being of nurses and the quality of patient care. Further, it is important to not only comprehend the explicit connection that exists between emotional labor and work satisfaction but also to investigate the intermediary function of emotions. The work satisfaction of nurses in private hospital settings in Sri Lanka may be greatly influenced by their emotional experiences. Understanding the particular means by which these experiences affect job satisfaction might provide valuable insights for developing medical procedures aimed at improving emotional well-being and job satisfaction among nurses.

A noteworthy research gap is evident in the context of this study, primarily stemming from the limited research conducted in Sri Lanka. To date, investigations into the relationships between emotional labor, emotions, and job satisfaction among nurses working in private hospitals in Sri Lanka are notably scarce (Wanninayake, 2018). Furthermore, there is minimal research specifically focusing on nurses' emotional labor within for-profit healthcare contexts (Babatunde et al., 2021). This dearth of research fails to address the unique experiences and challenges faced by nurses in private hospital settings, particularly in a country like Sri Lanka, with its distinct healthcare system and resource constraints. This research aims to bridge

these existing knowledge gaps, thereby shedding light on the emotional dynamics, job satisfaction, and emotional labor strategies utilized by nurses in these specific settings.

### **Theoretical Perspectives on Emotional Labour**

#### **Hochschild's Emotional Labor Theory**

Hochschild's Emotional Labor Theory (1983) explains how individuals manage their emotions to meet workplace expectations, with two main strategies: surface acting and deep acting. Surface acting involves displaying emotions outwardly without feeling them internally, while deep acting requires genuinely experiencing the emotions being expressed. For nurses, who often face high emotional demands, this theory helps to understand the balance between genuine feelings and the emotional norms set by healthcare organizations. The distinction between these two strategies is critical when analyzing how emotional labor impacts nurses' job satisfaction (Herrera et al., 2020).

#### **Display Rules Theory**

The Display Rules Theory, introduced by Ekman and Friesen (1969), explores the societal and organizational norms that dictate how emotions should be expressed. In healthcare, nurses must navigate these rules while interacting with patients, families, and colleagues. Adhering to these norms helps maintain a caring and supportive environment, but it can also create challenges when authentic emotions conflict with expected emotional displays (National Academies Press, 2021; Ekman & Friesen, 1969). This study examines how nurses balance these demands and the emotional strategies they use, shedding light on how such efforts influence their overall job satisfaction.

### **Theoretical Perspectives on Job Satisfaction**

#### **Herzberg's Two-Factor Theory**

Herzberg's Two-Factor Theory explains job satisfaction through two types of factors: hygiene factors and motivators. Hygiene factors, such as pay, working conditions, and job security, help prevent dissatisfaction but do not necessarily lead to satisfaction. On the other hand, motivators, like recognition, achievement, and career growth, directly increase job satisfaction and motivation. The theory emphasizes that improving motivators can lead to better employee performance. Herzberg's ideas have influenced practices like job enrichment, which focuses on adding motivational elements to roles. However, critics argue that the strict separation of hygiene factors and motivators oversimplifies job satisfaction.

#### **Locke's Range of Affect Theory**

Locke's Range of Affect Theory focuses on the emotional experiences that shape job satisfaction (Locke, 1976). It highlights how individual emotional responses, the work

environment, and personal differences influence satisfaction levels. Positive factors, such as supportive work relationships and opportunities for skill development, lead to favorable emotions and higher job satisfaction. The theory also stresses that employees' perceptions of their work conditions play a crucial role. Practical applications include creating transparent communication, recognizing achievements, and fostering skill development to improve emotional responses and overall job satisfaction.

## **Empirical Evidence**

### **Deep Acting and Job Satisfaction**

Research consistently shows that deep acting—genuinely experiencing and expressing emotions—positively influences job satisfaction. Hochschild (1983) and Brotheridge and Lee (2003) noted that deep acting enhances emotional authenticity and fulfilment, leading to increased happiness at work. Studies by Feng-Hua and Chen-Chieh (2008) and Park et al. (2022) emphasized its advantages in nursing, where deep acting boosts satisfaction and reduces burnout. Grandey (2000) and Hülshager et al. (2013) confirmed that deep acting aligns employees' emotions with organizational norms, fostering emotional resilience and job contentment. Matsumoto et al. (2008) highlighted cultural differences, with individualistic societies showing a stronger link between deep acting and job satisfaction. Overall, deep acting promotes a positive emotional experience, countering workplace emotional fatigue (Zhang et al., 2019).

### **Surface Acting and Job Satisfaction**

Surface acting, which involves displaying emotions without feeling them, is widely associated with reduced job satisfaction. Xinjuan et al. (2018) and Sousan et al. (2022) highlighted its negative effects on nurses' well-being and job happiness. Brotheridge and Lee (2003), Grandey (2003), and Hülshager et al. (2013) found that surface acting causes emotional dissonance, fatigue, and dissatisfaction. Zapf et al. (2001) and Barger and Grandey (2006) noted similar effects in service roles, where employees often suppress genuine feelings. Grandey et al. (2005) concluded that surface acting increases emotional weariness, reinforcing the detrimental link between insincere emotional displays and workplace satisfaction. Addressing these emotional challenges is critical for creating supportive work environments.

### **Relationship Between Emotions and Job Satisfaction**

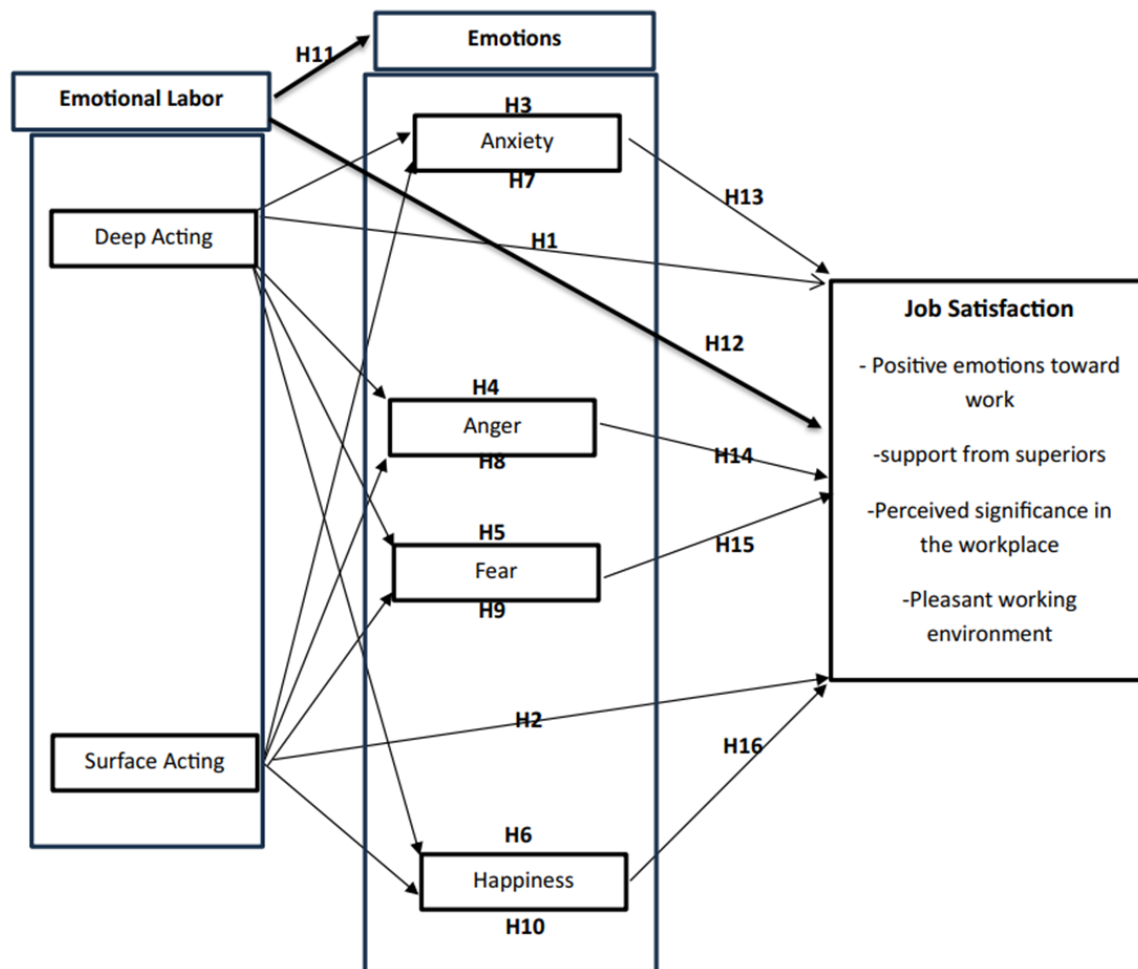
Emotions significantly influence job satisfaction. Anger correlates with lower satisfaction, as seen in the study by Totterdell and Holman (2003). Fear, often linked to job insecurity and organizational change, also negatively affects satisfaction (Cavanaugh et al., 2000). Conversely, happiness is strongly associated with higher job satisfaction. Fisher (2003) found

that positive emotions foster lasting workplace contentment. These findings highlight the need for emotional competence and supportive interventions to improve workplace well-being.

### Conceptual Framework and Hypotheses

Exhibit 1 shows the conceptual framework of this study.

**Exhibit 1. Conceptual Framework**



Our research hypotheses, firmly grounded in the conceptual framework and existing literature, steer our empirical investigation:

H<sub>1</sub>: There is a positive significant relationship between deep acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>2</sub>: There is a negative relationship between surface acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>3</sub>: Anxiety mediates the relationship between deep acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>4</sub>: Anger mediates the relationship between deep acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>5</sub>: Fear mediates the relationship between deep acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>6</sub>: Happiness mediates the relationship between deep acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>7</sub>: Anxiety mediates the relationship between surface acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>8</sub>: Anger mediates the relationship between surface acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>9</sub>: Fear mediates the relationship between surface acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>10</sub>: Happiness mediates the relationship between surface acting emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>11</sub>: There is a significant relationship between emotional labor and emotions among nurses in private hospitals in Sri Lanka.

H<sub>12</sub>: There is a significant relationship between emotional labor and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>13</sub>: There is a significant relationship between anxiety and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>14</sub>: There is a significant relationship between anger and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>15</sub>: There is a significant relationship between fear and job satisfaction among nurses in private hospitals in Sri Lanka.

H<sub>16</sub>: There is a significant relationship between happiness and job satisfaction among nurses in private hospitals in Sri Lanka.

## Methodology

The data were collected using a self-administered survey distributed to nurses from many private hospitals in Sri Lanka as the research participants. The structured survey, designed to encompass questions related to emotional labor, emotions, and job satisfaction, provides a comprehensive dataset. The population of the study consisted of all the registered nurses of five selected hospitals and due to ethical consideration, the names of the selected hospitals were not revealed. Accordingly, the sample frame of the study is the registered list of nurses

in five selected hospitals and the sample frame consisted of 1737 nurses. The sampling procedure employs a stratified random sampling method to select a representative sample of nurses from diverse private hospitals in Sri Lanka (Dayarathna, 2016). In order to assure the external validity, authors utilized the Krejcie and Morgan Exhibit in determining the sample size and a sample of 313 nurses was chosen.

A total of 310 responses were received yielding a response rate of 99%. Eight questionnaires were excluded from the dataset in the data cleaning process owing to incomplete information, therefore guaranteeing the reliability of the data. Gender, Age, Employee category, and Employee experience level were considered as demographic characteristics considered in the study. Based on the analysis 41.1% of participants were identified as male and 58.9% as female. Considering the age of the respondents; the majority falls within the 26-30 years age range, comprising 28.1% of participants, and substantial proportions are also present in the 31-35 years (25.2%) and 21-25 years (16.9%) categories. Moreover, related to employee category respondents reported that, Staff Nurse Grade III constitutes the most significant segment at 31.8%, followed by Staff Nurse Grade II at 28.1%, and Staff Nurse Grade I which comprises 22.8%, and Sisters represent 17.2% of the total sample. In addition, Participants' experience levels exhibit a varied distribution, in which; below 2 Years constitutes 11.9%, while 3-5 Years and 6-10 Years represent 21.9% and 30.8%, respectively. The category of 11-15 Years accounts for 27.2%, and those with Above 16 Years make up 8.3%. This diverse range ensures a comprehensive exploration of emotional labor and job satisfaction across different stages of nursing careers.

**Exhibit 2. Demographic Characteristics of Respondents**

	Frequency	Percent
Gender		
Male	124	41
Female	178	58.9



Age		
20 yers and below	17	5.6
21 – 25 Years	51	16.9
26 – 30 Years	85	28.1
31 – 35 Years	76	25.2
36 – 40 Years	41	13.6
Above 40 years	32	10.6
Employee Category		
Staff Nurse Grade III	96	31.8
Staff Nurse Grade II	85	28.1
Staff Nurse Grade I	69	22.8
Sister	52	17.2
Employee Education Level		
2 years and below	36	11.9
3 – 5 Years	66	21.9
6 – 10 Years	93	30.8
11 – 15 Years	82	27.2
Above 16 years	25	8.3

### Measures

All variables were operationalized using established scales from the literature. The items were measured on a five-point Likert scale, ranging from 1 = “strongly disagree” to 5 = “strongly agree.” Emotional labor, emotions, and job satisfaction were assessed using validated instruments, including relevant dimensions and items derived from the literature (the questionnaire is included in the appendix). To summarize and explore the data, we used descriptive statistics, including mean scores and standard deviations. Pearson Correlation Analysis was employed to assess the relationships among the key variables in the study. By calculating correlation coefficients, we determined the strength and direction of associations between emotional labor, emotions (such as anxiety, fear, anger, and happiness), and job satisfaction. Hayes Process Model 4 was used to examine the mediation effects of emotions between emotional labor and job satisfaction.

## Results

### Reliability

The reliability analysis of the study's measurement instruments, assessed using Cronbach's Alpha, indicates strong internal consistency across all variables. A Cronbach's Alpha value above 0.7, as suggested by Tavakol & Dennick (2011), is considered reliable. Job Satisfaction demonstrated particularly high reliability, with a Cronbach's Alpha of 0.943 for 28 items, confirming the consistency of this measure.

Other emotional variables also exhibited satisfactory reliability. Deep Acting, Surface Acting, Anger, Fear, Happiness, and Anxiety yielded Cronbach's Alpha values ranging from 0.800 to 0.844, indicating good internal consistency in measuring these emotional constructs. These results affirm the robustness of the instruments used in the study, ensuring that the variables effectively capture the emotional experiences and job satisfaction of nurses.

### Exhibit 3. Reliability Statistics

Variable	Cronbach's Alpha	No. of Items
Job Satisfaction	.943	28
Deep Acting	.800	6
Surface Acting	.812	5
Anger	.841	5
Fear	.835	5
Happiness	.842	5
Anxiety	.844	5

### Validity

The validity analysis of the study's instruments was conducted using the Kaiser-Meyer-Olkin (KMO) Measure of Sampling Adequacy and Bartlett's Test of Sphericity. The KMO values, which approach 1.0, indicate a high level of sample adequacy, supporting the use of factor analysis. Bartlett's Test of Sphericity, with significant p-values ( $p < .001$ ), confirms sufficient intercorrelation among the variables for a meaningful factor analysis.

The Job Satisfaction variable displayed outstanding sample adequacy with a KMO value of .911 and a significant Bartlett's test result ( $p = .000$ ), confirming the instrument's validity. Deep Acting, Surface Acting, Anger, Fear, Happiness, and Anxiety variables all had KMO values ranging from .806 to .850, demonstrating good sampling adequacy. Each of these variables also produced significant Bartlett's Test results ( $p = .000$ ), confirming sufficient inter-item correlations. This highlights that the dataset was appropriate for factor analysis, further reinforcing the validity of these emotional constructs within the study.

**Exhibit 4. Validity Statistics**

Variable	Kaiser-Meyer-Olkin Measure of Sampling Adequacy	Sig. Value
Job Satisfaction	.911	.000
Deep Acting	.810	.000
Surface Acting	.806	.000
Anger	.830	.000
Fear	.814	.000
Happiness	.807	.000
Anxiety	.850	.000

**Univariate Analysis**

The study reveals that participants generally experience a good level of job satisfaction, with an average score of 4.06 and a relatively symmetrical distribution, indicating consistency among responses. There's a strong preference for deep acting, as shown by the high average score of 4.21, with little variation, suggesting that many participants adopt this strategy for regulating their emotions. In contrast, surface acting is less favored, with a mean score of 2.06 and a more varied response pattern, hinting at different levels of inclination towards this form of emotional regulation. Anger and fear are present at moderate levels, with mean scores of 3.89 and 4.19, respectively, and both show some variability, indicating diverse experiences among participants. Happiness is generally high, with a mean of 4.05 and a roughly symmetrical distribution, pointing to an overall positive emotional state. Anxiety is also moderate, with an average score of 3.88 and a slight skew towards higher scores, but it shows less variability compared to other emotions. Emotional labor scores suggest a moderate level of engagement (mean 3.23), with limited variability. Overall, the participants demonstrate a favorable emotional experience, with a mean score of 4.00, indicating a generally positive emotional state. The findings highlight consistent tendencies in deep acting and job satisfaction, along with variability in how individuals experience emotions like anger, fear, and anxiety.

**Exhibit 5. Univariate Analysis**

Statistics										
		Job Satisfact ion	Deep Acting	Surface Acting	Ang er	Fear	Happi ness	Anxi ety	Emotion al Labor	Emot ions
N	Valid	302	302	302	302	302	302	302	302	302

	Missing	0	0	0	0	0	0	0	0	0
Mean		4.0556	4.2092	2.0556	3.8854	4.1861	4.0483	3.88	3.2300	4.0007
Std. Error of Mean		.02632	.02436	.03085	.03461	.03209	.03002	.031	.01248	.02578
Median		4.0357	4.1667	2.0000	3.8000	4.2000	4.0000	3.80	3.1818	4.0000
Mode		4.04	4.33	2.00	4.00	4.00	3.80	4	3.18	3.60
Std. Deviation		.45741	.42327	.53609	.60143	.55759	.52161	.544	.21689	.44794
Variance		.209	.179	.287	.362	.311	.272	.295	.047	.201
Skewness		-.034	-.122	-.246	.106	-.276	-.003	.295	.058	.127
Std. Error of Skewness		.140	.140	.140	.140	.140	.140	.140	.140	.140
Kurtosis		-.371	.058	-.640	-.502	-.733	-.503	-.178	-.065	-.457
Std. Error of Kurtosis		.280	.280	.280	.280	.280	.280	.280	.280	.280
Range		2.18	2.00	2.00	2.80	2.20	2.20	2	1.18	2.15
Minimum		2.82	3.00	1.00	2.20	2.80	2.80	3	2.64	2.85
Maximum		5.00	5.00	3.00	5.00	5.00	5.00	5	3.82	5.00

## Correlation

The correlation analysis reveals significant relationships among job satisfaction, emotional labour, and various emotional states. Job satisfaction shows strong positive correlations with emotions, deep acting, anger, happiness, and anxiety, suggesting that higher job satisfaction is associated with positive emotional experiences and a preference for deep acting. Conversely, job satisfaction is negatively correlated with surface acting, indicating that individuals with higher job satisfaction tend to engage less in surface acting. Deep acting is positively linked with emotions and other positive states, while surface acting is generally associated with negative correlations to job satisfaction and emotions. Anger, fear, and anxiety show moderate to strong correlations with job satisfaction and emotions, reflecting

their subtle role in the emotional experiences of participants. Overall, the results highlight a complex interplay between emotional labour and job satisfaction, with deep acting aligning more closely with positive outcomes than surface acting.

### Exhibit 6. Correlation Analysis Results

Correlations										
		Job Satisfac tion	Deep Actin g	Surface Acting	An ger	Fea r	Happ iness	Anx iety	Emotio nal Labor	Emo tion s
Job Satisfac tion	Pearson Correlation	1	.846**	-.641**	.725**	.707**	.746* *	.762**	.184**	.912* *
	Sig. (2- tailed)		.000	.000	.000	.000	.000	.000	.001	.000
	N	302	302	302	302	302	302	302	302	302
Deep Acting	Pearson Correlation	.846**	1	-.585**	.623**	.553**	.608* *	.647**	.410**	.755* *
	Sig. (2- tailed)	.000		.000	.000	.000	.000	.000	.000	.000
	N	302	302	302	302	302	302	302	302	302
Surface Acting	Pearson Correlation	-.641**	-.585**	1	-.545**	-.400**	-.502**	-.516**	.499**	-.610* *
	Sig. (2- tailed)	.000	.000		.000	.000	.000	.000	.000	.000
	N	302	302	302	302	302	302	302	302	302
Anger	Pearson Correlation	.725**	.623**	-.545**	1	.503**	.521**	.572**	.052	.818* *
	Sig. (2- tailed)	.000	.000	.000		.000	.000	.000	.371	.000
	N	302	302	302	302	302	302	302	302	302

Fear	Pearson Correlation	.707**	.553**	-.400**	.503**	1	.551**	.488**	.142*	.788**
	Sig. (2-tailed)	.000	.000	.000	.000		.000	.000	.013	.000
	N	302	302	302	302	302	302	302	302	302
Happiness	Pearson Correlation	.746**	.608**	-.502**	.521**	.551**	1	.557**	.087	.806**
	Sig. (2-tailed)	.000	.000	.000	.000	.000		.000	.133	.000
	N	302	302	302	302	302	302	302	302	302
Anxiety	Pearson Correlation	.762**	.647**	-.516**	.572**	.488**	.557**	1	.113	.809**
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000		.051	.000
	N	302	302	302	302	302	302	302	302	302
Emotional Labor	Pearson Correlation	.184**	.410**	.499**	.052	.142*	.087	.113	1	.121*
	Sig. (2-tailed)	.001	.000	.000	.371	.013	.133	.051		.035
	N	302	302	302	302	302	302	302	302	302
Emotions	Pearson Correlation	.912**	.755**	-.610**	.818**	.788**	.806*	.809**	.121*	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	.000	.000	.035	
	N	302	302	302	302	302	302	302	302	302
**. Correlation is significant at the 0.01 level (2-tailed).										
*. Correlation is significant at the 0.05 level (2-tailed).										

The correlation analysis of nurses in private hospitals in Sri Lanka indicates significant relationships between various emotional factors and job satisfaction. Deep acting shows a strong positive correlation with job satisfaction, implying that nurses who engage more in deep acting tend to be more satisfied with their jobs. In contrast, surface acting is negatively correlated with job satisfaction, suggesting it decreases job satisfaction. Emotional labor and emotions are positively linked, indicating that changes in emotional labor are associated with changes in emotional experiences. Additionally, emotional labor also correlates positively with job satisfaction, highlighting its role in influencing job contentment. Negative emotions such as anxiety, anger, and fear show substantial negative correlations with job satisfaction, meaning that increased levels of these emotions are associated with lower job satisfaction. Conversely, happiness has a significant positive relationship with job satisfaction, underscoring the importance of fostering positive emotions to enhance overall job satisfaction among nurses in this context. Based on the correlation analysis results, hypotheses H<sub>1</sub>, H<sub>2</sub>, H<sub>11</sub>, H<sub>12</sub>, H<sub>13</sub>, H<sub>14</sub>, H<sub>15</sub>, and H<sub>16</sub> are all accepted. These findings highlight significant relationships between various aspects of emotional labor, emotions, and job satisfaction among nurses in private hospitals in Sri Lanka.

### **Mediation Analysis**

The Hayes Process Model 4 Mediation Analysis is appropriate for this study, as it facilitates the exploration of mediation effects between emotional labor, emotions, and job satisfaction. This approach allows for a nuanced understanding of how emotions indirectly influence job satisfaction, providing valuable insights into the impact of emotional labor on job satisfaction (Cavanaugh, 2016). Specifically, the study examines how emotions mediate the relationship between different facets of emotional labor and job satisfaction among nurses in Sri Lanka's private hospitals.

### Exhibit 7. Mediation Analysis for the Relationship Between Deep-Acting Emotional Labor (DA) and Job Satisfaction Considering the Effect of Anxiety

Model Summary						
	R	R-sq	MSE	F	df1	df2
	.6475	.4192	.1722	216.5361	1.0000	300.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	.3831	.2390	1.6026	.1101	-.0873	.8534
DA	.8315	.0565	14.7152	.0000	.7203	.9426
*****						
OUTCOME VARIABLE:						
JS						
Model Summary						
	R	R-sq	MSE	F	df1	df2
	.8917	.7952	.0431	580.3240	2.0000	299.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	.0870	.1202	.7243	.4695	-.1494	.3235
DA	.6568	.0371	17.6961	.0000	.5838	.7298
Ay	.3101	.0289	10.7284	.0000	.2532	.3670
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****						
Direct effect of X on Y						
Effect	se	t	p	LLCI	ULCI	
.6568	.0371	17.6961	.0000	.5838	.7298	
Indirect effect(s) of X on Y:						
Effect	BootSE	BootLLCI	BootULCI			
Ay	.2578	.0274	.2052	.3124		

Hypothesis H<sub>3</sub>, which proposes that anxiety mediates the relationship between deep-acting emotional labor and job satisfaction, finds compelling support through mediation analysis. The analysis reveals that anxiety significantly mediates this relationship, with the direct effect of deep acting on job satisfaction being highly significant ( $p < .000$ ). The significant indirect effect through anxiety (BootLLCI = .2052, BootULCI = .3124) further substantiates anxiety's mediating role. The p-value of the indirect effect ( $p < .000$ ) confirms its statistical significance. Therefore, the alternative hypothesis is accepted, affirming that anxiety serves as a significant mediator between deep-acting emotional labor and job satisfaction among nurses in this context.



### Exhibit 8. Mediation Analysis for the Relationship between Deep-Acting Emotional Labor (DA) and Job Satisfaction considering the Effect of Anger

Model Summary							
	R	R-sq	MSE	F	df1	df2	p
	.6230	.3881	.2221	190.2971	1.0000	300.0000	.0000
Model							
	coeff	se	t	p	LLCI	ULCI	
constant	.1594	.2715	.5872	.5575	-.3748	.6936	
DA	.8852	.0642	13.7948	.0000	.7589	1.0115	
*****							
OUTCOME VARIABLE:							
JS							
Model Summary							
	R	R-sq	MSE	F	df1	df2	p
	.8834	.7804	.0462	531.4331	2.0000	299.0000	.0000
Model							
	coeff	se	t	p	LLCI	ULCI	
constant	.1666	.1239	1.3438	.1800	-.0774	.4105	
DA	.6966	.0374	18.6084	.0000	.6230	.7703	
Ar	.2463	.0263	9.3466	.0000	.1944	.2981	
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****							
Direct effect of X on Y							
Effect	se	t	p	LLCI	ULCI		
.6966	.0374	18.6084	.0000	.6230	.7703		
Indirect effect(s) of X on Y:							
Effect	BootSE	BootLLCI	BootULCI				
Ar	.2180	.0258	.1698	.2719			

The mediation analysis for H<sub>4</sub> confirms that anger significantly mediates the relationship between deep-acting emotional labor (DA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of DA on JS is highly significant ( $p < .000$ ), and there is a substantial indirect effect through anger (BootLLCI = .1698, BootULCI = .2719), which supports anger's role as a mediator. The p-value for the indirect effect ( $p < .000$ ) underscores its statistical significance. Thus, we accept the alternative hypothesis, affirming that anger is a significant mediator in the relationship between deep-acting emotional labor and job satisfaction.

### Exhibit 9. Mediation Analysis for the Relationship between Deep-Acting Emotional Labor (DA) and Job Satisfaction considering the Effect of Fear

Model	coeff	se	t	p	LLCI	ULCI
constant	1.1203	.2681	4.1788	.0000	.5927	1.6479
DA	.7284	.0634	11.4934	.0000	.6037	.8531
*****						
OUTCOME VARIABLE:						
JS						
Model Summary						
R	R-sq	MSE	F	df1	df2	p
.8938	.7989	.0424	594.0168	2.0000	299.0000	.0000
Model	coeff	se	t	p	LLCI	ULCI
constant	-.1112	.1220	-.9121	.3625	-.3512	.1288
DA	.7085	.0336	21.0655	.0000	.6423	.7747
Fr	.2830	.0255	11.0846	.0000	.2328	.3332
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****						
Direct effect of X on Y						
Effect	se	t	p	LLCI	ULCI	
.7085	.0336	21.0655	.0000	.6423	.7747	
Indirect effect(s) of X on Y:						
Effect	BootSE	BootLLCI	BootULCI			
Fr	.2061	.0239	.1611	.2550		

The mediation analysis for H<sub>5</sub> reveals that fear significantly mediates the relationship between deep-acting emotional labor (DA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of DA on JS is highly significant ( $p < .000$ ), and there is a substantial indirect effect through fear (BootLLCI = .2328, BootULCI = .3332), which confirms fear's mediating role. The p-value of the indirect effect ( $p < .000$ ) indicates its statistical significance. Consequently, we accept the alternative hypothesis, affirming that fear is a significant mediator in the relationship between deep-acting emotional labor and job satisfaction.

### Exhibits 10. Mediation Analysis for the Relationship between Deep-Acting Emotional Labor (DA) and Job Satisfaction considering the Effect of Happiness

Model Summary						
	R	R-sq	MSE	F	df1	df2
	.6081	.3698	.1720	176.0491	1.0000	300.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	.8940	.2389	3.7416	.0002	.4238	1.3642
DA	.7494	.0565	13.2683	.0000	.6383	.8606
*****						
OUTCOME VARIABLE:						
JS						
Model Summary						
	R	R-sq	MSE	F	df1	df2
	.8953	.8016	.0418	603.9218	2.0000	299.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	-.0826	.1205	-.6853	.4937	-.3197	.1545
DA	.6729	.0351	19.1873	.0000	.6039	.7419
Hs	.3226	.0285	11.3353	.0000	.2666	.3786
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****						
Direct effect of X on Y						
	Effect	se	t	p	LLCI	ULCI
	.6729	.0351	19.1873	.0000	.6039	.7419
Indirect effect(s) of X on Y:						
	Effect	BootSE	BootLLCI	BootULCI		
Hs	.2417	.0277	.1883	.2992		

The mediation analysis for H<sub>6</sub> shows that happiness significantly mediates the relationship between deep-acting emotional labor (DA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of DA on JS is highly significant ( $p < .000$ ), and the indirect effect through happiness is also significant (BootLLCI = .1883, BootULCI = .2992), indicating that happiness plays a mediating role. The p-value of the indirect effect ( $p < .000$ ) confirms its statistical significance. Therefore, we accept the alternative hypothesis, affirming that happiness is a significant mediator in the relationship between deep-acting emotional labor and job satisfaction.

### Exhibit 11. Mediation Analysis for the Relationship between Surface-Acting Emotional Labor and Job Satisfaction considering the Effect of Anxiety

OUTCOME VARIABLE:						
Ay						
Model Summary						
	R	R-sq	MSE	F	df1	df2
	.5161	.2664	.2175	108.9445	1.0000	300.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	4.9586	.1065	46.5582	.0000	4.7490	5.1681
SA	-.5233	.0501	-10.4376	.0000	-.6220	-.4247
*****						
OUTCOME VARIABLE:						
JS						
Model Summary						
	R	R-sq	MSE	F	df1	df2
	.8150	.6643	.0707	295.7839	2.0000	299.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	2.7275	.1742	15.6590	.0000	2.3848	3.0703
SA	-.2881	.0334	-8.6307	.0000	-.3538	-.2224
Ay	.4946	.0329	15.0216	.0000	.4298	.5594
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****						
Direct effect of X on Y						
	Effect	se	t	p	LLCI	ULCI
	-.2881	.0334	-8.6307	.0000	-.3538	-.2224
Indirect effect(s) of X on Y:						
	Effect	BootSE	BootLLCI	BootULCI		
Ay	-.2588	.0285	-.3183	-.2050		

The mediation analysis for H<sub>7</sub> reveals that anxiety significantly mediates the relationship between surface-acting emotional labor (SA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of SA on JS is highly significant ( $p < .000$ ), and the indirect effect through anxiety is also significant (BootLLCI =  $-.3183$ , BootULCI =  $-.2050$ ), indicating that anxiety plays a mediating role. The p-value of the indirect effect ( $p < .000$ ) confirms its statistical significance. Thus, we accept the alternative hypothesis, affirming that anxiety is a significant mediator in the relationship between surface-acting emotional labor and job satisfaction.

### Exhibit 12: Mediation Analysis for the Relationship between Surface-Acting Emotional Labor and Job Satisfaction considering the Effect of Anger

OUTCOME VARIABLE:						
Ar						
Model Summary						
	R	R-sq	MSE	F	df1	df2
	.5448	.2968	.2552	126.6483	1.0000	300.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	5.1419	.1154	44.5685	.0000	4.9149	5.3689
SA	-.6112	.0543	-11.2538	.0000	-.7181	-.5044
*****						
OUTCOME VARIABLE:						
JS						
Model Summary						
	R	R-sq	MSE	F	df1	df2
	.7824	.6121	.0817	235.9077	2.0000	299.0000
	p					
	.0000					
Model						
	coeff	se	t	p	LLCI	ULCI
constant	3.0879	.1802	17.1343	.0000	2.7332	3.4425
SA	-.2982	.0366	-8.1378	.0000	-.3704	-.2261
Ar	.4068	.0327	12.4539	.0000	.3426	.4711
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****						
Direct effect of X on Y						
	Effect	se	t	p	LLCI	ULCI
	-.2982	.0366	-8.1378	.0000	-.3704	-.2261
Indirect effect(s) of X on Y:						
	Effect	BootSE	BootLLCI	BootULCI		
Ar	-.2487	.0273	-.3025	-.1961		

The mediation analysis for H<sub>8</sub> shows that anger significantly mediates the relationship between surface-acting emotional labor (SA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of SA on JS is highly significant ( $p < .000$ ), and the indirect effect through anger is also significant (BootLLCI =  $-.3025$ , BootULCI =  $-.1961$ ), highlighting anger's role as a mediator. The p-value for the indirect effect ( $p < .000$ ) confirms its statistical significance. Therefore, we accept the alternative hypothesis, affirming that anger is a significant mediator in the relationship between surface-acting emotional labor and job satisfaction.

### Exhibit 13. Mediation Analysis for the Relationship between Surface-Acting Emotional Labor and Job Satisfaction considering the Effect of Fear

OUTCOME VARIABLE:							
Fr							
Model Summary							
	R	R-sq	MSE	F	df1	df2	p
	.3997	.1598	.2621	57.0551	1.0000	300.0000	.0000
Model							
	coeff	se	t	p	LLCI	ULCI	
constant	5.0408	.1169	43.1125	.0000	4.8107	5.2709	
SA	-.4158	.0550	-7.5535	.0000	-.5241	-.3074	
*****							
OUTCOME VARIABLE:							
JS							
Model Summary							
	R	R-sq	MSE	F	df1	df2	p
	.8082	.6532	.0730	281.6073	2.0000	299.0000	.0000
Model							
	coeff	se	t	p	LLCI	ULCI	
constant	2.9591	.1656	17.8718	.0000	2.6332	3.2849	
SA	-.3638	.0317	-11.4746	.0000	-.4261	-.3014	
Fr	.4406	.0305	14.4549	.0000	.3806	.5005	
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****							
Direct effect of X on Y							
	Effect	se	t	p	LLCI	ULCI	
	-.3638	.0317	-11.4746	.0000	-.4261	-.3014	
Indirect effect(s) of X on Y:							
	Effect	BootSE	BootLLCI	BootULCI			
Fr	-.1832	.0265	-.2363	-.1315			

The mediation analysis for  $H_9$  demonstrates that fear significantly mediates the relationship between surface-acting emotional labor (SA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of SA on JS is highly significant ( $p < .000$ ), and the indirect effect through fear is also significant (BootLLCI = -.2363, BootULCI = -.1315), indicating that fear plays a mediating role. The p-value for the indirect effect ( $p < .000$ ) confirms its statistical significance. Thus, we accept the alternative hypothesis, affirming that fear is a significant mediator in the relationship between surface-acting emotional labor and job satisfaction.

### Exhibit 14. Mediation Analysis for the Relationship between Surface-Acting Emotional Labor and Job Satisfaction considering the Effect of Happiness

OUTCOME VARIABLE: Hs							
Model Summary							
	R	R-sq	MSE	F	df1	df2	p
	.5015	.2515	.2043	100.8144	1.0000	300.0000	.0000
Model							
	coeff	se	t	p	LLCI	ULCI	
constant	5.0514	.1032	48.9322	.0000	4.8483	5.2546	
SA	-.4880	.0486	-10.0406	.0000	-.5836	-.3923	
*****							
OUTCOME VARIABLE: JS							
Model Summary							
	R	R-sq	MSE	F	df1	df2	p
	.8076	.6522	.0733	280.3758	2.0000	299.0000	.0000
Model							
	coeff	se	t	p	LLCI	ULCI	
constant	2.6645	.1852	14.3837	.0000	2.2999	3.0290	
SA	-.3039	.0336	-9.0363	.0000	-.3701	-.2377	
Hs	.4980	.0346	14.4046	.0000	.4299	.5660	
***** DIRECT AND INDIRECT EFFECTS OF X ON Y *****							
Direct effect of X on Y							
	Effect	se	t	p	LLCI	ULCI	
	-.3039	.0336	-9.0363	.0000	-.3701	-.2377	
Indirect effect(s) of X on Y:							
	Effect	BootSE	BootLLCI	BootULCI			
Hs	-.2430	.0269	-.2973	-.1924			

The mediation analysis for  $H_{10}$  shows that happiness significantly mediates the relationship between surface-acting emotional labor (SA) and job satisfaction (JS) among nurses in private hospitals in Sri Lanka. The direct effect of SA on JS is highly significant ( $p < .000$ ), and the indirect effect through happiness is also significant (BootLLCI =  $-.2973$ , BootULCI =  $-.1924$ ), indicating that happiness plays a mediating role. The p-value for the indirect effect ( $p < .000$ ) confirms its statistical significance. Therefore, we accept the alternative hypothesis, affirming that happiness is a significant mediator in the relationship between surface-acting emotional labor and job satisfaction.

## Discussion

This study explores emotional labor among nurses in private hospitals in Sri Lanka, focusing on how different emotional labor strategies (deep acting and surface acting) affect job satisfaction. It also considers demographic factors such as gender, age, experience level, and employee category. Using correlation analyses, mediation models, and the Hayes Process

Model, the study reveals several significant findings about the relationships among emotional labor, emotions, and job satisfaction.

The results indicate a strong positive correlation between deep emotional labor and job satisfaction ( $r = 0.846$ ,  $p < 0.001$ ). This suggests that when nurses genuinely engage in emotions aligned with organizational expectations, their job satisfaction significantly improves. This finding underscores the importance of authentic emotional involvement in enhancing job satisfaction, supporting the idea that fostering genuine emotional experiences can benefit workplace morale.

Conversely, the study shows a substantial negative correlation between surface-acting emotional labor and job satisfaction ( $r = -0.641$ ,  $p < 0.001$ ). This highlights the negative impact of suppressing true emotions on job satisfaction, consistent with other research. For instance, studies by Rifaya and Dayarathna (2019) and Kuo et al. (2023) have also found that surface acting is detrimental to job satisfaction and psychological well-being.

The analysis further reveals a significant negative correlation between anxiety and job satisfaction ( $r = -0.762$ ,  $p = 0.000$ ), aligning with other research that links high anxiety levels to lower job satisfaction. Wang et al. (2023) found that increased workload can lead to higher anxiety, which adversely affects job satisfaction, while a positive working environment can mitigate these effects.

The study also confirms a significant negative relationship between anger and job satisfaction ( $r = -0.725$ ,  $p = 0.000$ ). This finding is consistent with previous research (Senol-Durak et al., 2021) that shows unmanaged anger negatively impacts job satisfaction. La and Yun (2019) found that higher anger levels contribute to burnout and reduced job satisfaction, emphasizing the need for effective anger management strategies.

Additionally, the mediation analysis reveals that anxiety, anger, fear, and happiness all play significant mediating roles in the relationship between emotional labor and job satisfaction. These results highlight the complex emotional pathways through which emotional labor affects job satisfaction. For example, research shows that managing anger is crucial for job satisfaction (Totterdell & Holman, 2003), while happiness is positively associated with job satisfaction (Javanmardnejad et al., 2021). Conversely, fear and anxiety negatively impact job satisfaction (Cavanaugh et al., 2000). Overall, these findings provide valuable insights for healthcare organizations looking to improve job satisfaction and emotional well-being among their staff.

### **Implications and Future Research Studies**

The study's implications offer valuable guidance for improving the well-being and job satisfaction of nurses. Emotional Labor Training is crucial; by introducing programs that focus on deep acting, nurses can enhance their emotional intelligence and create a more positive work environment. Anger and Anxiety Management are also essential, as providing resources



and support for managing these emotions can foster a better work atmosphere. Addressing Fear by creating a secure work setting and mitigating stress factors can help reduce apprehension and boost job satisfaction.

Advancing Happiness is another key area. By promoting a positive work culture and implementing initiatives that recognize and reward employees, management can enhance overall contentment and well-being. Customized support Programs, such as counselling and flexible work arrangements, can cater to the diverse emotional needs of nurses, further improving job satisfaction.

Moreover, Improving Patient Care Quality is closely linked to the emotional stability of nurses. Content and emotionally well-supported nurses are more likely to deliver high-quality patient care. Minimizing turnover Rates by enhancing job satisfaction can also yield financial benefits by reducing recruitment and training costs. Additionally, a focus on emotional well-being can enhance organizational reputation and attract skilled professionals, ultimately benefiting patient care.

Prioritizing staff health contributes to overall well-being and reduces healthcare costs associated with stress-related issues. Promoting Gender Equality within nursing is vital, given the field's female dominance. Addressing emotional labor concerns can help advance gender equality and challenge related stereotypes.

Future research suggestions include conducting longitudinal studies to track changes over time, comparative analyses between different hospital settings, and intervention studies to assess the effectiveness of emotional labor strategies. Expanding the demographic scope and exploring the role of organizational support and technological advancements can provide further insights. Additionally, examining the relationship between nurses' emotional labor and patient outcomes, as well as delving into gender-specific experiences, can lead to more tailored support mechanisms. Using qualitative methods can also offer a deeper understanding of the emotional challenges faced by nurses.

## **Conclusion**

This study investigates the relationship between emotional labor, emotions, and job satisfaction among nurses in private hospitals in Sri Lanka. It aimed to explore how emotional labor strategies (surface acting and deep acting) impact nurses' emotional experiences and job satisfaction. The findings revealed that surface acting, which involves displaying emotions that do not match one's true feelings, negatively affects nurses' emotions. In contrast, deep acting, which involves genuinely experiencing and expressing emotions, is positively associated with their emotional experiences.

The study also examined how emotions influence job satisfaction. It found that anxiety, anger, and fear are negatively correlated with job satisfaction, meaning higher levels of these emotions are associated with lower job satisfaction. Conversely, happiness is positively

correlated with job satisfaction, indicating that higher levels of happiness lead to greater job satisfaction.

Additionally, the research highlighted that surface acting predicts lower job satisfaction, while deep acting is associated with higher job satisfaction. This underscores the adverse effects of superficial emotional displays and the benefits of authentic emotional engagement.

Furthermore, the study confirmed that emotions mediate the relationship between emotional labor strategies and job satisfaction. This finding emphasizes the important role of emotions in shaping job satisfaction among nurses.

Overall, this research contributes to a deeper understanding of the emotional dynamics within private healthcare settings in Sri Lanka. It underscores the importance of addressing emotional labor strategies and their impact on job satisfaction. The study provides actionable insights for healthcare management to improve emotional well-being and job satisfaction among nurses, ultimately leading to better patient care outcomes.

## Appendix (Measures)

### Section A: Demographic Data

- (i) What is your gender?
  - Male ( )
  - Female ( )
- (ii) What is your age?
  - 20 and below years old ( )
  - 21-25 years old ( )
  - 26-30 years old ( )
  - 31-35 years old ( )
  - 36-40 years old ( )
  - Above 40 years old ( )
- (iii) Employee category?
  - Staff Nurse Grade 111 ( )
  - Staff Nurse Grade 11 ( )
  - Staff Nurse Grade 1 ( )
  - Sister ( )
- (iv) What is your experience level?
  - 2 and below years ( )
  - 3-5 years ( )
  - 6-10 years ( )
  - 11-15 years ( )
  - Above 16 years ( )

Kindly tick the appropriate columns and fill appropriate information where necessary as it applies to your view on each of the items below:

Key: Strongly Agree=SA Agree=A Neutral=N Disagree=D Strongly Disagree=SD

### Section B: Emotional Labour

S/N	QUESTIONS	1	2	3	4	5
		SD	D	N	A	SA
	<b>Deep Acting</b>					
1	I work hard to genuinely feel the emotions that I need to show to others.					
2	I make an effort to actually feel the emotions I need to display toward others.					
3	I work at conjuring up the feelings I need to show to patients.					
4	I genuinely attempt to empathize with patients' emotions during my interactions with clients.					
5	I often make an effort to understand and share the emotional experiences of patients in order to provide better care					
6	I frequently and consciously manage my own emotions to align with the emotional needs of patients.					
	<b>Surface Acting</b>					
7	I put on a show at work to express the right emotions for my job.					
8	I put on a 'mask' in order to display the emotions needed for my role.					
9	I pretend to have the emotions I need to express for my job.					
10	I put on an act to interact with patients in an appropriate way.					
11	I fake a good mood to meet the expectations of my role as a nurse.					
<b>Section C: Emotions</b>						
	<b>Anger</b>					
12	Feeling anger or frustration when I have to pretend to feel emotions that I don't actually feel at work.					
13	Experiencing anger due to the need to hide my true emotions and display emotions that are expected of me.					
14	Feeling upset or irritated about the negative consequences of suppressing my genuine emotions in the workplace.					
15	Having difficulty managing feelings of anger and resentment related to the pressure to mask my true emotions.					
16	Feeling overwhelmed by anger due to the requirement to display emotions that don't align with my true feelings in my role as a nurse.					

	<b>Anxiety</b>					
17	Feeling tense or anxious when trying to genuinely express emotions at work.					
18	Experiencing nervousness or apprehension when attempting to align my emotional expressions with the situation.					
19	Worrying about not being able to effectively manage my emotions in the workplace.					
20	Having difficulty managing anxious feelings related to work demands and emotional expressions.					
21	Feeling overwhelmed by anxiety due to the need to display specific emotions in my role as a nurse.					
	<b>Fear</b>					
22	Feeling afraid or anxious when I have to pretend to feel emotions that I don't actually feel at work.					
23	Experiencing fear about the consequences of not hiding my true emotions and displaying emotions that are expected of me.					
24	Worrying about negative outcomes or reactions when I suppress my genuine emotions in the workplace.					
25	Having difficulty managing fear and apprehension related to the need to mask my true emotions.					
26	Feeling overwhelmed by fear due to the pressure to display emotions that don't align with my true feelings in my role as a nurse.					
	<b>Happiness</b>					
27	Feeling joyful or content when I genuinely express emotions at work.					
28	Experiencing happiness and satisfaction from being able to authentically connect with patients and colleagues through emotions.					
29	Feeling a sense of fulfillment and well-being when I align my emotional expressions with the needs of patients and colleagues.					
30	Having a positive outlook and feeling happy about the emotional connections I establish in my role as a nurse.					
21	Feeling a sense of happiness and job satisfaction from being able to genuinely express emotions that align with my true feelings at work.					

**Section D: Job Satisfaction**

S/ N	QUESTIONS	1	2	3	4	5
	<b>Positive emotions toward work</b>					
22	I am proud of my current job.					
23	Provision of nursing care is what I like to do.					
24	I find my work challenging.					
25	I clearly understand my problems and challenges in work.					
26	Working in this hospital helps me improve.					
27	I find my job interesting.					
28	I cannot find any meaning in my work.					
29	Helping patients recover motivates me to work as a nurse.					
29	There are nurses in my workplace who serve as good examples					
	<b>Appropriate support from superiors</b>					
30	The nursing supervisor in my workplace often talks to nurses to praise and thank them.					
31	When a problem occurs in my workplace, the nursing supervisor properly addresses it.					
32	The nursing supervisor helps me make progress and improve by providing advice.					
33	I can consult the nursing supervisor frankly.					
34	The nursing supervisor in my workplace provides nursing staff with detailed explanations of work policies and goals.					
35	The nursing supervisor evaluates me fairly.					
	<b>Perceived significance in the workplace</b>					
36	While providing nursing care, I always think of ideas to improve it.					
37	I can express my opinions at conferences.					
38	My suggestions are reflected in the workplace.					
39	I play my role in the workplace.					
40	I can consult with other professionals on patient care.					
41	I cannot assert my opinions to physicians.					
42	I sometimes receive praise and recognition from colleagues.					
43	I feel trusted by patients and their families.					
	<b>Pleasant working environment</b>					
44	Our hospital allows nurses to work flexibly, taking into consideration individual circumstances.					
45	I can balance work with my private life.					
46	An appropriate number of personnel are deployed in the hospital I work for.					
47	I receive a sufficient salary for my work.					
48	Requests concerning days off are accepted in my workplace.					

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