

International Journal of Work Organisation and Emotion

ISSN online: 1740-8946 - ISSN print: 1740-8938

<https://www.inderscience.com/ijwoe>

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DOI: [10.1504/IJWOE.2023.10046622](https://doi.org/10.1504/IJWOE.2023.10046622)

Article History:

Received:	30 July 2021
Accepted:	07 February 2022
Published online:	10 April 2023

Role of emotional labour in driving sabotage behaviours among frontline healthcare workers

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Abstract: In common with other service sectors, healthcare sector is predominantly facing employee sabotage behaviours towards different stakeholders of healthcare. Psychological stability is strongly recommended by previous literature to meet explicit job demands. However, the role of emotional capacities is still needed to understand towards employee's destructive behaviours. To examine this complex underlying path of emotional exhaustion and psychological protection, data was collected from frontline healthcare workers. The analysis suggests a comprehensive finding of how emotional labour develops sabotage behaviours through intervening psychological disturbance. The boundary effect of emotional demands specific to frontline healthcare workers is pragmatically increasing this relation.

Keywords: emotional labour; emotional demands; psychological protection; emotional exhaustion; sabotage behaviours; frontline healthcare workers.

Reference to this paper should be made as follows: Hafeez, H., Rafiq, N., Chughtai, M.A. and Sarwar, A. (2023) 'Role of emotional labour in driving sabotage behaviours among frontline healthcare workers', *Int. J. Work Organisation and Emotion*, Vol. 14, No. 1, pp.4–23.

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1 Introduction

Literature is emerging in the rapid occurrence of employee sabotage behaviours at work (Zhang et al., 2018; Kabadayi, 2019; Crino and Leap, 2019; Hu et al., 2020; Peng et al., 2021; Pradhan, 2021). Employee sabotage behaviours have consideration of intentional delinquency or misconduct in response to the feelings of helplessness, frustration and anger (Zhang et al., 2018; Sarwar et al., 2020). The literature highlighting the employer's negative functioning is the potential causes of arising sabotage behaviours, for instance, abusive supervision (Park and Kim, 2019), family to work spillover (Cheng et al., 2019), perceived workload (Ugwu, 2017) and destructive leadership style (Brender-Ilan and Sheaffer, 2019). Employer's substantial focus on accomplishing organisational expectations and neglecting employee's optimal resources can also trigger sabotage behaviours in employees (Crino and Leap, 2019). Meanwhile, Pradhan (2021) extended this fact as employer's negative influence on the employee's behaviours might not the deliberate function, which could lead to the organisation in a very stressful condition. He also highlighted the need of identifying and understanding such unintentional predictors of employee sabotage behaviours (Pradhan, 2021),

One of the leading aspects of managerial negligence towards its employees is the organisational expectations of displaying positive emotions while subduing the true expressions and feelings, represents the emotional labour phenomenon in employees (Zhang et al., 2018; Gu et al., 2020). The idea of emotional labour is to manage internal emotions and feelings in specifically to fulfil the organisational demands and goals (Diefendorff and Gosslerand, 2003; Cheng et al., 2019). The primary consideration of emotional labour works into two different dimensions. Firstly, the surface acting (suppression of feelings to possess occupational demands) has found a clear association with negative occupational outcomes along with physical health effects (Deng et al., 2016). While deep acting (regulating the inner perspective to display required behaviours) does not found any significant impact on the negative occupational outcomes (Hülshager and Schewe, 2011). An extensive overview of literature providing support to emotional labour (surface acting) in inclining poor mental health (Hülshager and Schewe, 2011), lower job satisfaction (Becker et al., 2017), lower organisational identification

(Walsh et al., 2016) and work family conflict (Wagner et al., 2014a). In addition, the negative consequences of surface acting have found significant representation in the form of deviant workplace behaviours (Deng et al., 2016; Yue et al., 2016). However, the way organisations treat their employees have leading impact on the employee's intentions to work and subject to participate in organisational objectives. Sometimes, employee's negative impression towards its respective management is so strong that pose resentment emotions and resistance to serve organisational customers or clients (Peng et al., 2021). The vulnerability and less familiarity with the organisational environment could trigger the negative emotions of employees in return to harm the organisational harmony and reputation. The way (mechanism) organisational psychology disturbs the emotional and psychological state of an individual employee to reach at customer/recipient specific sabotage behaviours is still needed to establish (Zhang et al., 2018; Peng et al., 2021).

Since its major implications are found in services industries, increases its contemplation for frontline workers (Dong et al., 2021). However, literature is precisely contributing its destructive effects in customer-oriented services sector (e.g., customer care, telecom sector, banking, hospitality) (Park and Kim, 2019; Dalhatu, 2019). Little exists exploring the emotional labour involved in repeated ongoing interactions by frontline healthcare professionals with key stakeholders (Sarwar et al., 2020). Frontline healthcare professionals – nurses have frequent exposure to uninterrupted instances of emotionally drained events (Suleiman-Martos et al., 2020). Nursing professionals must put substantial emotional efforts to meet their job demands. Expecting compassion, empathy, and care from nurses, when they have high chances of getting emotionally exhausted is the real example of emotional labour in healthcare sector (Hafeez et al., 2020). In such situation, tough job description, organisational expectations and workload indulge negative emotions for their workplace (Hafeez et al., 2021).

In case of frontline healthcare professionals, the level of interaction, employer's expectations and care demands are considerably higher for them. According to conservation of resource (COR) theory, healthcare professionals tend to protect their potential resources to cope with occupational demands (Salvarani et al., 2019). The inability or incapability to maintain a balance between occupational demands and personal resources may trigger emotional exhaustion in them (Li et al., 2017). Emotional exhaustion as a mental state arises, when individuals are unable to process because of the depletion of personal resources (times, emotional stability, physical stamina). Furthermore, in response to emotional labour employee's feelings of being vulnerable and getting exploit, trigger the negative perception of psychological protection by organisation (Bamonti et al., 2019). Psychological protection is the potential resources which employer can integrate through establishing support and resilience mechanism at work (Bavolar and Bacikova-Sleskova, 2018). The frequency and intensity of emotional labour have tendency to decline this potential resource of an employee. As earlier suggested, employees developed sabotage behaviours even when they feel themselves of losing important resources to cope with dynamics (Huang et al., 2018). Frontline healthcare professionals can easily develop such perceptions related to poor psychological protection by hospital management. As hospital management have diverse nature of agendas to deal as their first preference (e.g., patient recovery, timely intervention).

This resource perceptive is pragmatically providing a linking association of emotional exhaustion and psychological protection between emotional labour and sabotage behaviour. It has been suggesting, losing potential resources, and having no control can develop aggression, revenge, and retaliation (Wagner et al., 2014b). These sensitive situations potentially provoke harming and deviance behaviours. In the case of frontline healthcare employee's, chances get higher to have sabotage behaviours towards patients because of the higher patient interaction and vulnerable situation for of patients. Previous literature has providing sufficient support to this underlying mechanism (emotional exhaustion), however, how it further resulted in deviance-sabotage behaviours along with the poor perception of psychological protection is needed to establish (Kong and Jeon, 2018).

Literature highlighting the requirement related to healthcare professionals as emotionally composed and balanced between their managing duties and caring duties (Berkovich and Eyal, 2015). However, among these nursing professionals are specifically involved in such situations, where emotional demands tend to be higher (Delgado et al., 2017). These emotional demands are considerably requiring patience, emotional stability, and motivation. In response to the higher emotional demand's employees have higher tendency of getting emotionally exhausted and losing psychological protection (Maxwell and Riley, 2017). The reason of this boundary effect of emotional demand is the central and connecting role which nurses are p laying between patients, doctors and hospital authorities. The successful execution of job duties based on the ability to fulfil demand compliance. However, such emotionally drained events require them to holding back their true emotional state and perform in an occupational desired manner.

Based on abovementioned discussion, the aim of current study is to examine the role of emotion labour through surface acting – particularly to build a more realistic and pragmatic understanding of its negative consequences for sabotaging the employees within the organisation. To understand the role of emotional labour towards employee sabotage behaviour is to respond such potential future calls (Peng et al., 2021; Pradhan, 2021) which are intrinsically interested in this destructive mechanism. The idea of intervening the role of emotional exhaustion towards emotional labour and employee sabotage behaviours is possible subjection for patient's recovery, patient's satisfaction, and occupational reputation. It is pragmatically understandable that people with destructive mental capacities cannot be fully involved and productive enough towards their task. The struggle of setting in the environmental where psychological support is missing can put pressure on people to focus (Michael and Eloff, 2020). The idea of targeting frontline healthcare workers is because of their dual duty perceptive. They are expected to perform with a serious focus, control, and balanced behaviours in emotionally unpleasant situations (Gonnelli et al., 2016). This proposition of current study is establishing an understanding employee sabotage behaviours after losing resources (lack of psychological protection) and having no control (emotional exhaustion). Therefore, this study is contributing to the literature by extending the understanding of emotional labour through impending underlying mechanism (emotional exhaustion and psychological protection) and highlighting boundary effect of emotion demand towards sabotage behaviours.

2 Theoretical justification and hypothetical development

2.1 *Emotional labour and employee sabotage behaviours*

Emotional labour is the form of job requirement from employees to show specific feelings to fulfil the job duties (Hochschild, 1983; Grandey, 2003; Zhang et al., 2021). Service sectors are significantly inclined towards emotional labour and emotions involved job demands (Goussinsky, 2012; Özekici and Ünlüönen, 2021). These emotions are the anticipation of employer to satisfy their potential customers and clients. Such emotions may be to display sadness, compassion, love, enjoyment, empathy, and happiness to fulfil the emotional demands (Zaghini et al., 2020). The involvement of emotions from employees makes it harder for them to focus on their productivity and performance level. It has consideration of extra burden and resource deprivation. According to COR theory, a positive energy comes when someone gains the potential and required resources to perform well. However, an employee with higher workload (emotional labour, emotional demands) are potentially threatened to lose their key resources (Hobfoll, 2001).

It is generally observed that in such situations, employees tend to develop negative feelings and reluctant behaviours for their organisational success (Özekici and Ünlüönen, 2021). These negative feelings in most situation triggered towards negative and destructive behaviours. An extensive review of literature highlighting deviant workplace behaviours and counterproductive behaviours are the most common antecedents of emotional labour (Nair, 2020; de Ruiters et al., 2021; Zhang et al., 2021). However, sabotage behaviours could also be the potential indicator, which has been rarely discussed in the context of emotional labour. According to Harris and Ogbonna (2006), customer service sabotage (CSS) is deliberately harmful misconduct which particularly found in the service industry. Sabotage behaviour is any act which slows the quantity or quality of work for like strikes, go-slow and absenteeism (Dubois, 1979). Rosow (1974) also defined in his study, that sabotage is an action which can affect the organisational invention, productivity, and performance (Turek, 2020). Similarly, sabotage behaviours can also exist among health care professionals (Harris and Ogbonna, 2006) due to the presence of emotional demand and focus on emotional labour (Vinson and Underman, 2020). Nurses are mainly exposed to emotional labour in a stressed working environment (Bolton, 2001). They must cope with the challenging circumstances as are exposed to relax the patients and their family members (Diefendorff et al., 2011). It can create stress among nurses and can affect organisational positive behavioural outcomes. For effective services they must get rid of this stressful condition (Geurts and Sonnentag, 2006). With the perspective of COR theory, this emotional effort can create stress among nurses which can decline their willingness to perform effectively (Chung, 2018) toward patients which highlight service sabotage behaviour (Oluwole et al., 2020). The significant amount of emotional labour is required to work with the ill people (Turek, 2020). Nurses required more frequently regulating their emotions when dealing with the patients (Smith and Kleinman, 1989). The current study only deals with the surface acting method as literature consistently addresses the negative effects of surface acting among nurses (Mesmer-Magnus et al., 2012), indicating emotional exhaustion (Wagner et al., 2014b). This study demonstrated the negative moments of surface acting with employee service sabotage.

H1 Emotional labour has positive impact on the employee's sabotage behaviours.

2.2 Role of emotional exhaustion

Emotions are the internal energy resource of the employees however it may not be consistent with the feelings required by the organisations (Li et al., 2018; Thompson et al., 2020). Emotional exhaustion is the main facet of job-related stress (Maslach and Jackson, 1984), which occurs due to the higher level of frustration at workplace (Chen et al., 2019). When employees engage in excessive emotional regulation process, they tend to develop emotional exhaustion and negative emotions towards their organisation (Rafaeli and Sutton, 1987). According to Laschinger and Leiter (2006), the underlying mediating path of job burnout among job satisfaction and emotional labour display a significant finding related to job related stress and workload. However, the further extension to these findings claims to have positive impact of emotional exhaustion on counterproductive workplace behaviours (Wang et al., 2012). In addition, Lee and Ok (2014) also supported the destruction of emotional exhaustion as a mediator in the relationship of emotional imbalance and service sabotage behaviour. In the light of COR theory, individuals have basic motivation to conserve, protect and establish the resources which are important for them (Alola et al., 2019). So, people will try to conserve their resources and avoid its loss to cope with upcoming challenges. Hence, improper demand of feelings can create distress among employees and to restore from the emotional resources, destructive behaviour results in employee sabotage behaviours. Therefore, we propose that:

H2 Emotional exhaustion mediates the nexus between emotional labour and employee sabotage behaviours.

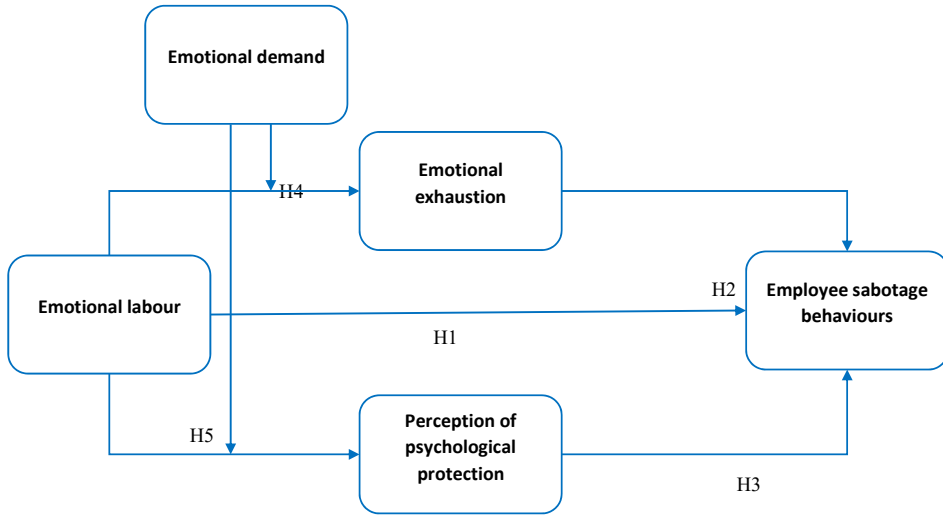
2.3 Role of psychological protection

Literature has identified the various indicators for employee's psychological health (Kabadayi, 2019; Crino and Leap, 2019; Hu et al., 2020; Hafeez et al., 2021). Previous studies have chosen resilience, optimism, and social support as way to measure the perception of psychological protection to employees at workplace (Bavolar and Bacikova-Sleskova, 2020). The mediating impact of perception of psychological protection is not studied yet. Psychological protection is the form of provision which employers provide to maintain a healthy and reassuring relation with their employees. In measure to perception of psychological protection resilience defines as the process to be resist in any traumatise, tragic and threatening situation (American Psychological Association, 2014). Presences of resilience found to have negative association with mental indicators, for instance: stress, depression and anxiety (Hu et al., 2015). However, optimism has been considered as the ability to have positive expectations for the future and it has further positive association with the behavioural outcomes (Alarcon et al., 2013). Within the premises of COR model, people try to conserve and retain their resources (Hobfoll, 1989) whereas higher demand of emotional labour can affect their perception of psychological protection (Grandey, 2003). This tendency can affect their perception of psychological protection from employer and increase their willingness to develop sabotage behaviours (Shi et al., 2015). Literature supports the presences of emotional demand and emotional can triggers negative thoughts an intention towards

organisation (Rafiq et al., 2020), these negative intentions and thought process can also negatively affect the future anticipation and ability to resist in employees. Gottlieb and Bergen (2010) investigated that social support is the social resource of individuals which they perceive to be available. Teoh and Rose (2001) reported that high level of social support is correlated with psychological well-being. Resilience, optimism, and social support have been established as protection factors which interact and influence in combination with each other (Bavolar and Bacikova-Sleskova, 2020). Based on abovementioned discussion, it is hypothesised:

H3 Poor perception of psychological protection at workplace mediates the nexus between emotional labour and the employee sabotage behaviours.

Figure 1 Theoretical model (see online version for colours)



2.4 Boundary effect by emotional demands

In the perspective of COR theory, emotional demand would be perceived as social resource. Emotional demand refers to those job aspects which entail constant emotional effort while dealing with clients (De Jonge and Dormann, 2003). Nursing profession demands high emotions throughout the day on individuals’ basis (Kristensen et al., 2005). Emotional demands have strong impact on interpersonal relationships due to feelings and emotions involved in dealing and caring for patients. Previously, many authors have included the importance of emotional demands in their studies especially where involvement is high (Johannessen et al., 2015; Delgado et al., 2017; Maxwell and Riley, 2017). In the similar vein, Vegchel et al. (2014) demonstrated that emotional demands are prone to vital psychological demands like workload. Low level of emotional demands might lessen the harmful influence of emotional labour on emotional exhaustion (Rafiq et al., 2020). The strain is likely to be felt in greater strength when emotional demands are higher. In case of low emotional demands, the situation would be opposite (Sarfraz et al., 2019). In case of low emotional demand, there would be fewer requirements of psychological protective factors and it would be opposite in case of high emotional

demand. In the premises of work requirement of nurses, low emotional demand will be considered as positive resource (Hobfoll, 1989) which would be helpful to avoid the detrimental effect of emotional labour on emotional exhaustion and in the same perspective it will tend the nurses to consume low level of psychological factors because of emotional confrontation due to emotional labour. Low emotional demand would be less prone to stressful situation as emotional exhaustion resulted in response to emotional labour:

- H4 Emotional exhaustion will be higher in the presences of emotional demands at workplace.
- H5 Psychological protections will tend to decrease, in the presences of emotional demands at workplace.

3 Research methods

The methodological approach for this study is based on descriptive design to analyse the negative effects of emotion labour could possibly impose on the employee's tendencies to work in the organisation. This methodological approach is the contribution in a positivist research philosophy. Positivism is prominent approach in other research methods because it follows a scientific and real terms of method in the social sciences (Neuman, 2013). This requires a quantitative research method that collects numerical data to assess hypotheses about human behaviour (Collis and Hussey, 2013). In general, positivists relate assumptions, theories, variables, and numerical data and therefore use certain statistical tools to elicit conclusions (Newman and Nollen, 1996). Positivists generally believe that sociologists can use recognised statistical tools to identify specific problems related to society and the individual and to find their solutions.

Put simply, the individual understanding regarding real time experiences is essential to understand any truth that exist in the environment. This study was undertaken in district head quarter (DHQ) across the Pakistan (South Asian country) with the intention to collect detailed responses of nurses for the purpose of conceptualisation of facts. Pakistan as the developing state among Asian countries is identified as the dis-propionate region for nursing professional with the required care (approximately six nursing individuals are available for the people of 1,000) (WHO, 2013). This gap of nurse-to-patient ratio is persisting and becoming a major source of missed nursing care practices. In Pakistan, the total numbers of registered nurses in DHQ hospitals are approximately 48,446 (Shahzad and Malik, 2014). This quantitative research approach has been applied to assess the relationship among study variables. Data is collected through questionnaire survey form consisting of all items of variables under research from frontline healthcare workers of Pakistan. Each key position holder mentioned above as population was approached personally and requested to fill this research questionnaire. Total 300 questionnaires were sent from which 234 returned out of them 211 forms were complete in all respects which were finally used for data analysis of this study.

Sampling technique in current study was the assortment of purposive sampling and judgemental sampling. The idea behind to use these techniques is to target the eligible participants who can fulfil the demand of study. The idea to implement judgemental sampling is to estimate the required knowledge, ability to provide information and

competency (Casida and Parker, 2011). Study participants were registered nurses practicing in DHQ hospitals, who had experience of working at least six months. Participant nursing professionals claim to have the impact of emotional demand on their mental health, which most of the time last for 3 to 4 days. While in some sever cases, it claimed to be prolonged for a longer period and develop a sense of sadness, feelings relevant to guilty and incapability to feel pleasure. Prior permission was taken from hospital administration before talking to participants to follow the formal procedure. Participants were well informed about the purpose of study before data collection. Moreover, participants were asked to provide suggestions on the additional components related to this study. This fraction provides confidence to respondents as they are doing something productive for their field. This interpretive descriptive design approach is the underpinning the idea of subjective approach of nurses that can help to conceptualise the responses for analysis. This approach has already proven to be successful in previous studies (Hsieh and Shannon, 2005; Ganann et al., 2019). Data of this study is evaluated with Smart-PLS 3 through structural equation modelling (SEM). PLS-SEM is basically employed to measure the relation between endogenous and exogenous variables (Hair et al., 2016). In social sciences (SEM) is often used due to its ability to test various endogenous and exogenous variables concurrently, this enables analysis of little and asymmetric data samples.

3.1 Measures

Measures were adopted from review of several empirical research. Overall, four constructs were depleted in this very study. All questionnaire items were rated on the five-point Likert scale:

- *Emotional demand*: Emotional demand was rated using three items from Kristensen et al. (2005) and included questions such as: ‘Does your work put you in emotionally disturbing situations?’ Items were rated from 1 (never) to 5 (always) with scale reliability of 0.806.
- *Emotional exhaustion*: Exhaustion was rated using five items refers to feelings of being overextended and drained by work demands from Maslach et al. (1986) and having reliability value of 0.914.
- *Emotional labour*: Emotional labour scale having surface acting three items, e.g., ‘I pretend to have emotions that I do not really have’ and deep acting three items, e.g., ‘I try to actually feel the emotions that I need to display to others’ from Brotheridge and Lee (2003) on a five-point scale (1 = never, 5 = always) having reliability value of 0.901.
- *Employee sabotage behaviour*: Skarlicki et al. (2008) five-item scale was rated for sabotage behaviour. To fit the context for the nurses’ ‘customers’ word in the scale items changed into ‘patients’ in the current study and the scale reliability of 0.836.
- *Perception of psychological protection*: The psychological protective was rated using five items adopted from the study of Zhu et al. (2020) from 1 = never to 5 = always having reliability value of 0.852.

3.2 Control variables

Age, gender, education, and job experience were used as control variables. Previous research used these variables as they may affect the association of emotional labour and service sabotage outcomes so were controlled (Sarfraz et al., 2019).

4 Data analysis and results

4.1 Measurement model

4.1.1 Reliability testing

At first, the reliability and validity of all the concepts were examined. Reliability is generally reflected by internal consistency reliability and stated by Cronbach's alpha. Nunnally (1967) recommended the alpha value to be better than 0.70. For this study, the values of Cronbach's alpha for EE and EL are above 0.90 and for ED, ESB and PP above 0.80 which is well above than the threshold. Another measure is composite reliability (CR) that is frequently utilised in social sciences for internal consistency. The value of CR is ideally acceptable if more than 0.70 and less than 0.95 (Nunnally and Bernstein, 1994). For this research, the values of CR of all the variables under study have values below 0.95 and above than 0.8.

Table 1 Reliability and validity analysis

	<i>CR</i>	<i>Cronbach's alpha</i>	<i>AVE</i>	<i>ED</i>	<i>EE</i>	<i>EL</i>	<i>ESB</i>	<i>PP</i>
ED	0.884	0.806	0.718	<i>0.848</i>				
EE	0.936	0.914	0.744	0.302	<i>0.863</i>			
EL	0.938	0.901	0.835	0.224	0.654	<i>0.914</i>		
ESB	0.890	0.836	0.670	0.426	0.547	0.424	<i>0.818</i>	
PP	0.894	0.852	0.628	0.388	0.264	0.298	0.416	<i>0.792</i>

Notes: ED = emotional demand, EE = emotional exhaustion, EL = emotional labour, ESB = employee sabotage behaviour and PP = psychological protective. The square roots of AVE (the italic number on the diagonal in table).

4.1.2 Validity testing

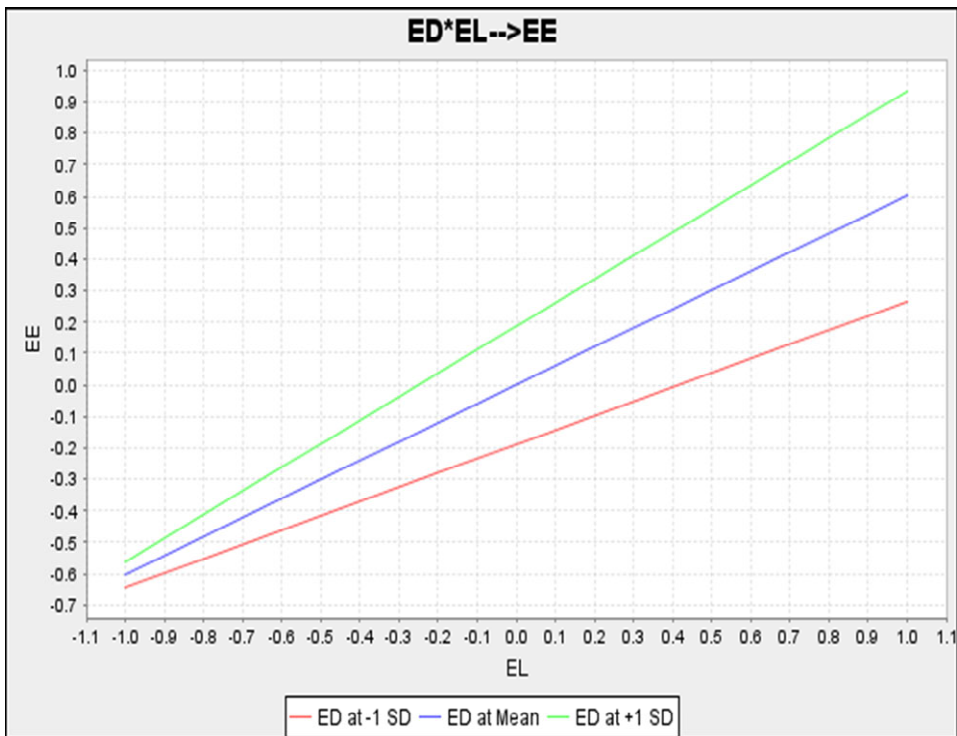
After assessing the reliability, we checked for validity. First, we checked for convergent validity by assessing average variance extracted (AVE). According to Petter et al. (2007), how sound the indicators of a concept load or unite on their corresponding concept. In current study, the AVE values of all the constructs are above 0.60 which is well overhead the cutoff value and presenting to be decent in convergent validity. Secondly, the data was assessed for the discriminant validity through the square root of AVE. According to Fornell and Larcker (1981), the square root of AVE should be more than the correlations between the constructs. In our study, square root of the AVE for all the constructs is higher than the correlations between the construct and that implies reliable discriminant criterion as mentioned in Table 1 italic values in diagonal.

4.2 Evaluation of structure model

4.2.1 Hypothesis testing

PLS-SEM as recommended by Kaplan (2008) and Wong (2013) was used on 211 samples to determine the path coefficients of hypotheses by bootstrapping method using. The results and path coefficient establishes the effect of the exogenous variable on the endogenous variable and P value and the T value shows the importance of the association (Hair et al., 2016). Once PLS-SEM ran, it was observed that every hypothesis was found significant because of their P values which are lesser than 0.05 and their T values which are found higher than 1.96.

Figure 2 Moderation of emotional demand on the relationship between emotional labour and employee exhaustion (see online version for colours)



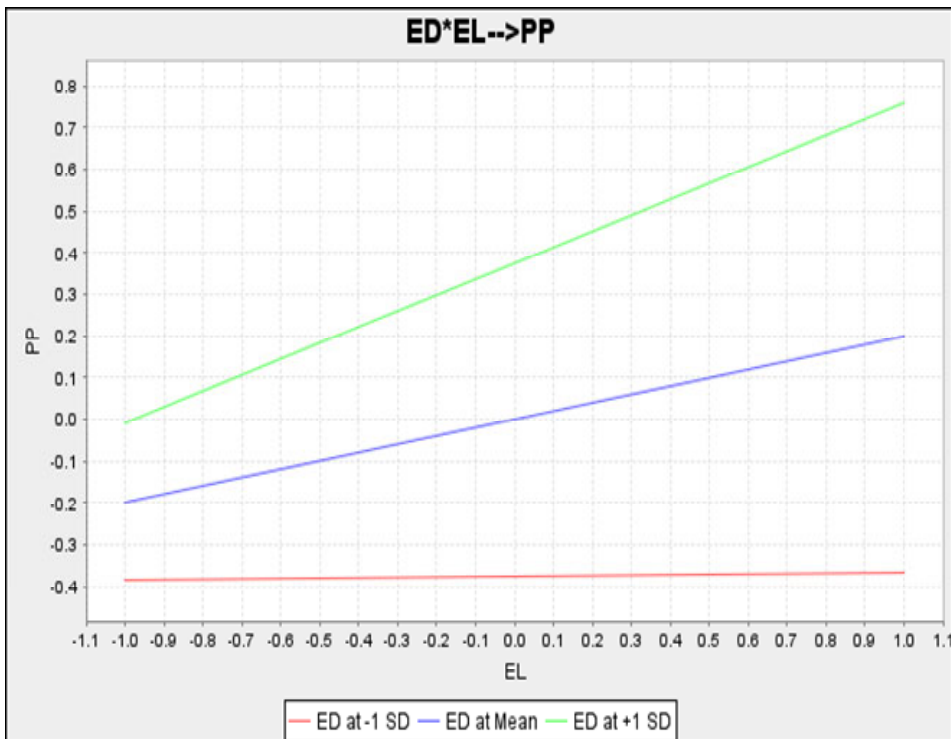
Our research conceptualises emotional demand as a moderating variable and assesses its influence on the association between emotional labour and employee exhaustion and emotional labour and psychological protective. The moderating effect was computed by the method of interaction terms and in Table 2 results of our hypotheses testing are presented. The simple slope analysis has been conducted for understanding moderation. In Figures 2 and 3, slopes have been presented to specify the moderator’s high, mean, and low positions using green, red and blue lines, respectively. Results of moderation analysis reveal that emotional demand positively moderates the association among emotional labour and emotional exhaustion.

On the contrary, emotional demand negatively moderates the association among emotional labour and psychological protective.

Table 2 Hypotheses result

Hypothesis	Path coefficient	T statistic	P values	Hypotheses decision
1 Emotional labour → emotional exhaustion → employee sabotage behaviour	0.270	4.607	0.000	Supported
2 Emotional labour → psychological protective → employee sabotage behaviour	0.060	3.114	0.002	Supported
3 Emotional labour * emotional demand → emotional exhaustion	0.064	2.619	0.009	Supported
4 Emotional labour * emotional demand → psychological protective	-0.082	3.049	0.031	Supported
5 Emotional labour → employee sabotage behaviour	0.373	6.875	0.000	Supported

Figure 3 Moderation of emotional demand on the relationship between emotional labour and psychological protective (see online version for colours)



4.2.2 *Mediation analysis***Table 3** Hypothesis 1 analysis

<i>Hypothesis 1</i>	<i>Path</i>	<i>Path coeff.</i>	<i>Indirect effect</i>	<i>Total effect</i>	<i>VAF</i>	<i>T values</i>	<i>P values</i>	<i>Hypothesis decision</i>
Direct effect (without mediator)	Emotional labour → employee sabotage behaviour	0.389	n/a	n/a	n/a	8.558	0.000	Supported
Indirect effect (with mediator)	Emotional labour → employee sabotage behaviour	0.385	n/a	n/a	n/a	7.627	0.000	
	Emotional labour → emotional exhaustion	0.617	0.270	0.887	0.3043		0.000	
	Emotional exhaustion → employee sabotage behaviour	0.438					0.000	

Table 4 Hypothesis 2 analysis

<i>Hypothesis 2</i>	<i>Path</i>	<i>Path coeff.</i>	<i>Indirect effect</i>	<i>Total effect</i>	<i>VAF</i>	<i>T values</i>	<i>P values</i>	<i>Hypothesis decision</i>
Direct effect (without mediator)	Emotional labour → employee sabotage behaviour	0.389	n/a	n/a	n/a	8.558	0.000	Supported
Indirect effect (with mediator)	Emotional labour → employee sabotage behaviour	0.385	n/a	n/a	n/a	7.627	0.000	
	Emotional labour → psychological protective	0.217	.060	.287	0.2090		0.000	
	Psychological protective → employee sabotage behaviour	0.277					0.000	

4.3 *Magnitude of mediation*

Once the importance of the indirect effect is determined, the strength of the mediator can be examined based on the overall effect and variance account for (VAF). Overall effect = direct effect + indirect effect for H1, the overall effect is $0.617 + 0.270 = 0.887$. Meanwhile, $VAF = \text{indirect effect} / \text{overall effect}$ for H1, $VAF = 0.270 / 0.887 = 0.3043$. Mediation analysis results are presented in Tables 3 and 4. It is assessed that 30.43% of emotional labour's effect on employee sabotage behaviour can be explicated via the emotional exhaustion the mediator and the magnitude is partial. For H2, the overall effect is $0.217 + 0.060 = 0.287$. Meanwhile, $VAF = \text{indirect effect} / \text{overall effect}$ for H2, $VAF = 0.060 / 0.287 = 0.2090$. Which means that 20.90% of emotional labour's effect on employee sabotage behaviour can be explicated via the psychological protective the mediator and the magnitude is partial to because of VAF is more than 0.2 and not

complete due to less than 0.8 (Hair et al., 2016). These results led us to support Hypotheses H1 and H2 about emotional exhaustion's and psychological protective's mediation role.

5 Discussion

The emotional stability of an employee is predominantly impacting their intentions and capabilities to work in their respective organisations (Ugwu, 2017). Meanwhile, healthcare organisations and their employees are consistently facing an emotional breakdown (Kabadayi, 2019). This emotional burden of frontline healthcare professionals is particularly triggering the sabotage behaviours. The tendency of sabotage behaviours has mostly affected their willingness to work in accordance with the organisational demands (Crino and Leap, 2019; Peng et al., 2021). Presences of employee sabotage behaviours can seriously affect the organisational captivities as well as customer satisfaction. This negative influence triggers to higher level in case of such organisations where emotional demand is higher, e.g., healthcare organisations, hospitality and marketing agencies. The absences of psychological protection found to have a major involvement in developing sabotage behaviours (Hu et al., 2020). The potential reason of having poor psychological protection is the involvement of continues emotional labour in healthcare organisations. The current pandemic situation also supporting the findings of current study. As healthcare units are mainly focused towards treating their patients right now (Pradhan, 2021). In support to previous studies, current study extended the role of emotional exhaustion in developing sabotage behaviours in healthcare organisations (Peng et al., 2021). The level of emotional labour triggers the mental and emotional exhaustion because of the frequent demands. The emotional demand from frontline healthcare workers is comparatively found higher from other healthcare professionals. In their cases emotional demands tends to higher which triggers emotional exhaustion and poor perception of psychological, protection (Pradhan, 2021). This study has serious implications for healthcare management and healthcare policy developers. The comprehensive findings of current study giving solid evidence of protecting employee's mental stability and organisational image. It also provides an in-depth understanding for such organisations where customer and non-conventional integration involves (Peng et al., 2021). The development of sabotage behaviours potentially arises when employees found opportunity to negatively affect the organisational image.

6 Conclusions

The prominent feature of healthcare organisations provides a substantial focus of being responsive and focused for the people they are committed towards them. However, the critical situations such as, cynicism, ostracism, emotional strains, or work pressures put organisation into sensitive situations where the tendency to differential behaviours get heighten (sabotage, workplace deviance). Findings of current study reveals a strong aspect of balancing the professional responsibilities to maintain a healthy and concerned environment for employees at workplace, which is not only necessary for employees but beneficial to employers as well in terms of retaining workforce, managing technical

knowledge and maintaining performance measures. The role of current study is frequently triggering a leading focus where hospital management should be more responsive towards the support that could lead to a responsive assistance towards the problems employees face in the workplace. The findings reveal a very strong influential aspect of considering about the emotional demands from employees can increase the level of pressure of job. As employees in healthcare can be found vulnerable towards such requirements due to the constant pressure of matching the demands. This study would be promising initiative to develop an essential support towards the frontline healthcare workers, which tends to be struggling with a hostile atmosphere working and serving people at a same time. It would also clarify the practical stance of frontline healthcare worker towards hospital management in terms of the pressure which they are dealing.

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