WHO BENEFITS FROM EMOTIONAL LABOUR?

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Abstract: Emotional labour is an essential requisite in most professions. It is present wherever performance of work involves interactions with colleagues and/or customers. Emotional labour produces multiple positive consequences for organizations, such as constant performance by employees, uniform image, and regular, satisfied customers. Of all effects of emotional labour on individuals, literature discusses the negative ones mostly. This study is to demonstrate that emotional labour may as well have positive effects on individuals.

Key words: emotional labour, side-effects, positive side-effects.

Literature Review

The Emotional Labor Theory deals with emotions which employees feel, or pretend to feel, to meet their job requirements. According to Hochschild's definition (1983, pp. 7), "emotional labour is the management of feelings to create bodily and facial displays compliant with social requirements. Emotional labour has an exchange value, since it is paid wages for."

This definition suggests that emotional labour is primarily beneficial to the employer and organization. A uniform behaviour by all employees will result in efficient fulfilment of duties, provision of high-quality services, and regular customers. According to *Ashforth and Lee* (1990), emotional labour enhances the efficiency of working, reduces the necessity of direct control, and lessens interpersonal problems.

On the other hand, literature data show that the effects which emotional labour has on individuals are predominantly negative. According to *Wharton and Erickson* (1993), a major cause of the development of negative effects on employees is that, through implementing emotional directives, employers limit their employees' right to spontaneous action.

Furthermore, a higher relative incidence rate of psychosomatic diseases among professionals performing emotional labour is a fact supported by data from clinical studies. According to *Schaubroeck and Jones* (2000), the root cause of higher rates of tumours and cardio-vascular diseases resulting from a hypo-functioning immune system is to be searched in the suppression of emotions invariably.

However, the most common subjects of literature on emotional labour are psychic consequences. *Hochshild* (1983) was the first to report that, as a result of their emotional labour, some employees identified themselves with their job-defined roles so much so that they became unable to disregard their role requirements in other areas of life either. Hiding or sublimating their true emotions frequently, another group of employees became uncertain about their own emotions. Alienation is one of the typical responses to burdens deriving from emotional labour. Where expectations excessive or impossible to satisfy are raised, emotional labour will become ingenuine, which will, in its turn, increase the prevalence of depression (*Ashforth and Humphrey*, 1993).

Excessive identification with emotional requirements often goes hand in hand with burnout. The studies of *Ashforth and Mael* (1989) show that the more an individual identifies himself/herself with his/her job or role, the more intense negative effects of emotional labour he/she will sustain. Moreover, if the individual even fails to meet the requirements at work, the psychic verification process of his/her social identity will be damaged, which will lead to a sense of uselessness as well as increased propensity to commit suicide (*Burke*, 1991).

Payne, Jick and Burke (1982) concluded that emotional labour affects acute and permanent states of mind equally. As a result of negative effects, an individual may lose not only his/her inclination or propensity, but ability to perform emotional labour.

It should be clearly understood, however, that it is not emotional labour but emotional dissonance (defined as discrepancy between expected/displayed and real emotional states) and consequences thereof that may be harmful. If an individual's genuine emotions are identical with the emotional expectations at work (defined as *genuine acting*), neither emotional dissonance nor negative side-effects will occur. According to the findings of *Rafaeli and Sutton* (1987), emotional dissonance is most often dissolved through *deep acting* too, while being a constant concomitant of *surface acting* only.

When an individual uses only external manifestations of his/her emotions (such as physiognomy, tone and intonation of voice, and gestures) to meet the organization's emotional norms without actually altering his/her emotions, he/she is said to be performing surface acting. In this case his/her emotional displays do not coincide with his/her actual emotions.

On the other hand, deep acting is defined as *alteration of the individual's true emotions in order to comply with the organization's emotional norms*. Such alteration may result from either cognitive processes and deliberate efforts (i.e. retuning to a situation through recalling and reliving situations with appropriate emotional charges) or spontaneous empathy.

Brotheridge and Grandey (2002) found that surface acting and deep acting differ in terms of most of their effects on individuals. The frequency of surface acting shows correlation with both emotional exhaustion (*Maslach*, *Schaufeli and Leiter*, 2001) and depersonalization (*Totterdel* and Holman, 2003), and is associated with increased rates of individuals who underrate their personal contribution to work (*Brotheridge and Lee*, 2002). Zerbe and Falkenberg (1989) found their studies to prove correlation between burnout and surface acting. Based on Hochschild's findings (1983), deep acting will, unlike surface acting, not lead to emotional exhaustion or depersonalization, but positively affect employees' feeling of contribution to work.

Emotional labour, or rather a certain form thereof, may have positive effects on the individual as well. *Wharton* (1993) finds that emotional labour increases the level of job satisfaction. Furthermore, emotional compliance with organizational and social requirements leads to predictable emotional displays, while reducing the possibility that embarassing interpersonal situations may arise (*Gross and Stone*, 1964), and enhancing one's feeling of personal efficiacy (*Rose*, 2001). It is through effects of emotional labour on satisfaction with life that this paper aims at demonstrating its negative and positive consequences for individuals.

Survey and methods

Altogether 250 questionnaires were distributed in the Medical School & Health Science Center of the Debrecen University (DEOEC), Kenézy Gyula Hospital Debrecen, University & Healthcare Center of Kaposvár, and Borsod-Abaúj-Zemplén County Hospital, Miskolc. Demographics and job experience data of individuals under study are given in the *table 1*.

Results

Satisfaction with life: The Satisfaction with Life Scale (SWLS) was used to assess subjective well-being (Diener, 1994). An SWLS questionnaire sizes up satisfaction with life in terms of three dimensions, including life of meaning, life of pleasure, and life of engagement. This kind of test was chosen because, though being fundamentally a diagnostic tool of positive psychology, it offers acceptable psychometric indicators (Ryan and Deci, 2001). Respondents were

Table 1: Characteristics of individuals under study

Characte- ristics	Units	DEOEC	Debrecen	Miskolc	Kaposvár	Total
Total	Persons	148	19	6	14	187
Age	20-30	30	2	2	1	35
	30-40	58	7	1	7	73
	40-50	44	7	0	6	57
	50-60	10	3	3	0	16
	60-	6	0	0	0	6
Gender	Males	27	4	4	6	41
	Females	121	15	2	8	146
Marital status	Single	28	0	3	1	32
	Married	64	9	3	10	86
	Co-habitant	29	5	0	1	35
	Divorced	23	2	0	2	27
	Widow	4	3	0	0	7
Child(ren)	Without	100	14	3	11	128
	With	48	5	3	3	59
Healthcare	0-10	24	4	3	4	35
experience	10-20	23	1	0	4	28
	20-30	50	5	0	3	58
	30-40	51	9	3	3	66
Job-assign ment	Physicians	23	0	5	8	36
	HCPs	125	19	1	6	151

supposed to use a seven-degree Likert scale to tell the extent to which they agreed with each of 18 statements. The dimensions of satisfaction with life were found to be correlated with demographic and job-related characteristics as follows.

Table 2: Correlation between demographic data and life satisfaction

Characteristics	Life of pleasure		Life of engagement		Life of meaning	
Correlation	Pearson	Sig.	Pearson	Sig.	Pearson	Sig.
Age	-0.21	0.00				
Gender			-0.15	0.04		
Child(ren)	0.21	0.00				
Healthcare experience	-0.21	0.00				
Job-assignment			-0.16	0.03		
Family background					-0.16	0.03

As clear from the *table 2*, younger individuals with less healthcare experience and without children scored higher, i.e. performed better, in terms of the life-of-pleasure dimension of satisfaction with life. Females and healthcare professionals underperformed males and physicians in the life-of-engagement dimension. The respondents' family background was found to be correlated with the life-ofmeaning dimension of satisfaction with life, with single, divorced, or widowed respondents having scored higher than their married or co-habitant colleagues. *Emotional labour:* Emotional labour was assessed by means of a 17-question form designed on the basis of Grandey's emotional labour questionnaire (2003). This was added 10 more questions derived from an emotional labour assessment questionnaire designed by *Brotheridge and Lee* (1998). (My test sample measured a Cronbach's Alfa at 0.77.) My respondents were supposed to evaluate the statements by frequency against a five-degree Likert scale. Of all factors assessed by means of the questionnaire, only the pretence-of-emotions factor showed correlation with demographic characteristics across the whole sample.

Table 3: Correlation between demographic data and pretence of emotions

Characteristics	Pearson correlation	Sig.
Age	-0.20	0.03
Healthcare experience	0.01	0.23
Child(ren)	-0.16	0.00

Table 4: Correlation between emotional labour and life satisfaction

Characteristics	Life of r	Life of meaning		gagement	
Correlation	Pearson	Sig.	Pearson	Sig.	
Deep acting	0.25	0.00	0.16	0.03	

 Table 5: Correlation between emotional labour and life satisfaction of male and female respondents

	Ma	ales	Females				
Characteristics	Life of		Life of		Life of		
	engagement		meaning		engagement		
Correlation	Pearson	Sig.	Pearson	Sig.	Pearson	Sig.	
Surface acting	0.33	0.04					
Deep acting			0.32	0.00	0.18	0.03	

According to the findings summarized in the *table 3*, older respondents with longer healthcare experience pretend emotions less frequently than their younger colleagues with less job experience. Furthermore, individuals with children under study were found to display emotions different from their true ones more frequently than healthcare professionals without children did.

In an attempt to explore effects of emotional labour on individuals, the relationship between emotional labour and satisfaction with life was examined. A significant correlation was only found with deep acting *Table 4*.

The correlation found in this study substantiated Hochschild's conclusion to the effect that deep acting does not bring about negative consequences for individuals. And what is more, satisfaction with life scored higher in terms of both life of meaning and life of engagement with increasing frequencies of deep acting across the whole sample under study.

As illustrated in the *table 5*, such correlation resulted from the scores of the female population under study, while with my male respondents, it was surface acting that was found to show positive correlation with the life-ofengagement dimension of satisfaction with life, a finding which seems to reach farther than data from literature discussed above.

Furthermore, a positive effect of emotional labour on satisfaction with life was detectable among physicians and individuals living alone *Table 6*.

 Table 6: Correlation between emotional labour and life satisfaction of physicians and healthcare professionals

Characteristics	Phys	icians	Healthcare professionals		
	Life of pleasure		Life of 1	neaning	
Correlation	Pearson	Sig.	Pearson	Sig.	
Deep acting			0.28	0.00	
Pretence of emotions	0.41	0.01			

It was pretence of emotions that led to increased satisfaction with life among physicians and individuals living alone Table 7. Physicians who displayed/pretended emotions different from their true ones more frequently, over performed their counterparts in the life-of-pleasure dimension, while among individuals living alone, those using pretence to alter their true emotions over performed their counterparts in the life-of-engagement dimension.

Summary and conclusions

The results from this study showed that deep acting increased satisfaction with life in terms of both life of engagement and life of meaning with the majority of individuals under study, a finding in line with correlations reported in international literature.

 Table 7: Correlation between emotional labour and life satisfaction in groups different in marital status

	Individuals living alone				Individuals living with a partner				
Characteristics	Life of		Life of		Life of		Life of		
	meaning		engagement		meaning		engagement		
Correlation	Pearson	Sig.	Pearson	Sig.	Pearson	Sig.	Pearson	Sig.	
Deep acting	0.27	0.03			0.23	0.01	0.30	0.00	
Pretence of emotions			0.29	0.02					

However, three sub-groups of individuals under study were identified in which even surface acting brought about an increase in satisfaction with life. Among male respondents, surface acting, i.e. both pretence of emotions and hiding of true emotions, resulted in increased satisfaction with life in the life-of-engagement dimension, while among physicians and individuals living alone, it was pretence of emotions that led to increased satisfaction with life in the life-of-pleasure and life-of-engagement dimensions.

Thus the results from this study seem to confirm the assumption that emotional labour may be beneficial to the individual as well. Positive consequences do, however, not reduce the occurrence rate of harmful side-effects or hazards arising from emotional labour as described in literature, but modulate a picture of the phenomenon painted in very dark colours so far.

Due to the relatively small size of the sample under study, the findings presented herein serve as guidance only, though calling attention to the fact that not only deep acting, but surface acting may bring about positive side-effects on the individual. Further studies will be needed to identify the range of individuals who experience predominantly positive rather than negative consequences of any emotional labour, whether in the form of deep or surface acting, as they may perform.

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