

SHARED DISPLAY RULES AND EMOTIONAL LABOR IN WORK TEAMS

by

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A Dissertation Submitted to the Faculty of the
COMMITTEE ON BUSINESS ADMINISTRATION

In Partial Fulfillment of the Requirements
For the Degree of

DOCTOR OF PHILOSOPHY
WITH A MAJOR IN MANAGEMENT

In the Graduate College

THE UNIVERSITY OF ARIZONA

2010

THE UNIVERSITY OF ARIZONA

GRADUATE COLLEGE

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ACKNOWLEDGEMENTS

I am grateful to the members of my committee – Drs. Russell Cropanzano, Aleksander Ellis, and Barbara Gutek – for their help and guidance throughout this project. In addition, the advice and assistance of Mary Walters, RN, and Mary Doyle, PhD, RN, at the Southern Arizona VA Health Care System was essential to this project.

DEDICATION

I dedicate this dissertation to my wonderful wife Michele who allowed me to undertake this journey, to my amazing, self-reliant children Will and Mari who tolerated my preoccupation with endless articles, and to Sponge Bob Squarepants who kept the kids occupied on those occasions when I needed to write.

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ABSTRACT

Emotions are an important part of the workplace. Emotional labor describes the monitoring and management of one's emotions at work. Employees perform emotional labor in response to explicit and perceived display rules for emotional expressions in the workplace. While compliance with these rules is generally beneficial for the organization, it may be detrimental to employee well-being.

This study proposes a process model of emotional labor that extends from display rules to job attitudes and behaviors. It is unique in that it investigates display rules and emotional labor at the group level of analysis. It also includes coworkers as well as customers as targets of emotional labor. Display rule commitment is proposed as an important moderator between emotional labor and important individual job attitudes and behaviors that may account for previously mixed findings in the literature.

The hypotheses of this study received general support. Specifically, group level display rules and emotional labor were viable constructs that had important consequences for job outcomes. Display rule commitment was an important predictor of job attitudes and behaviors and moderated the relationship between group level surface acting and emotional exhaustion. In addition, group level emotional labor showed a significant effect on a number of important job outcomes. It also moderated the relationship between individual level emotional labor and job attitudes and behaviors. These findings provide several promising new insights and directions for emotional labor research.

CHAPTER 1

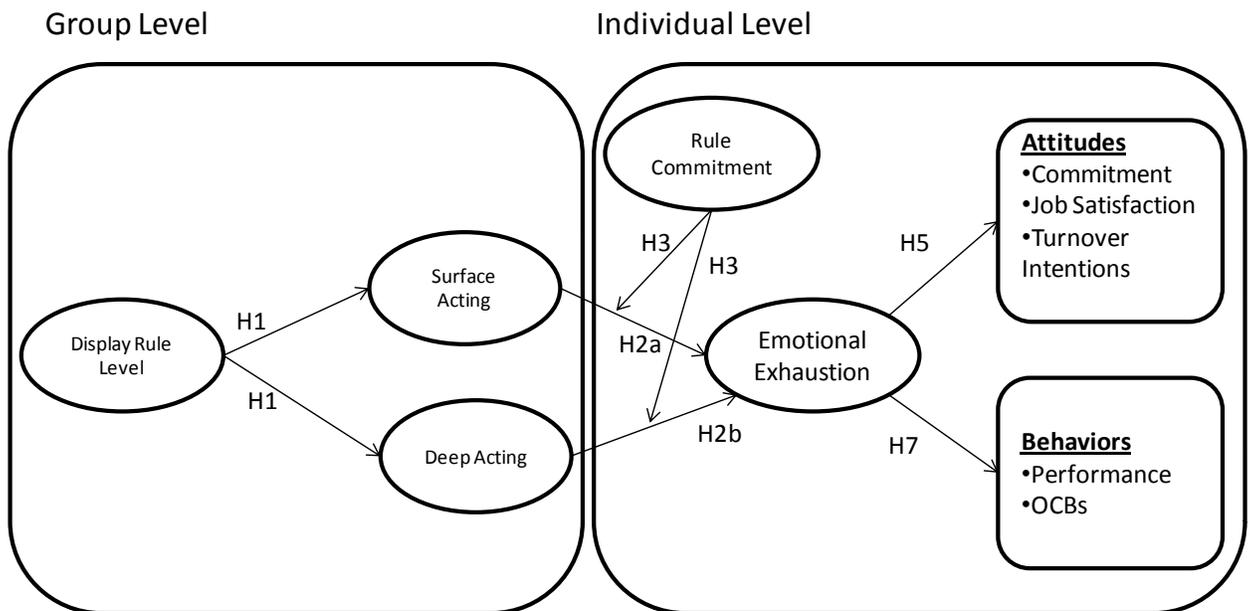
INTRODUCTION

As human beings, we are keenly aware that our emotions are important to how we experience and react to the world around us. The limbic system, our emotional center, is one of the oldest structures within the brain and is common to all higher order animals (Kolb & Whishaw, 2008). Our emotional responses to challenges in the environment have evolved over millennia, but may sometimes be ill-suited for managing social interactions in the dynamic, modern world (Izard, 2009). As a result, we often feel internal and external pressure to monitor and manage our natural emotional feelings and expressions. Organizations are increasingly taking an active role in prescribing and monitoring the emotional displays of employees in all aspects of the work domain (Ashkanasy, 2003). In response, there has been renewed interest on the part of organizational scholars to explore how emotions affect organizational and individual outcomes. This study endeavors to expand the extant research on display rules and emotional labor by incorporating emotional labor within work groups and developing a group-level model of emotional labor outcomes.

This study will investigate a process model by which display rules lead to the performance of emotional labor, which in turn leads to burnout and job related outcomes. In doing so, it will make several important contributions to the literature. First, by examining the perceptions and behaviors of nursing teams in a single large hospital, it will be one of the first studies to operationalize and investigate display rules at the group level. Second, it will include display rules and emotional labor directed towards

coworkers as well as patients/customers. Third, this study will investigate a number of potential mediators between display rules and outcome variables including commitment, satisfaction, performance, turnover, and customer care. Figure 1 provides a framework for the current study. It shows that I predict cross-level effects of group level norms on individual outcomes, attitudes, and behaviors.

FIGURE 1: Cross-level Process Model of Emotional Labor



CHAPTER 2

THEORY AND HYPOTHESES

In the remainder of the introduction, I will review the theoretical basis and empirical findings in order to develop the primary hypotheses of this study. I will begin by introducing recent developments in emotion theory. Then I will discuss display rules and emotional labor. I will then proceed to the most proximal outcome of emotional labor – emotional exhaustion. Finally, I will finish by connecting emotional labor and exhaustion to more distal but organizationally relevant outcomes. These include job attitudes and behaviors.

Emotions

It is necessary to first define emotions and differentiate among emotions, moods, and dispositional affect because these concepts have frequently been confounded or treated equivalently in previous research (Ashkanasy, 2003). Emotions are intense, automatic, unbidden but short-lived responses to specific stimuli in the environment (Brief & Weiss, 2002; Buck, 1999). Emotions are characterized as having at least three critical components (Cacioppo, 1999; Ekman, 1984). For one, emotions embody visceral feeling states. These feeling states originate in old brain structures and are capable of interrupting ongoing goal directed behavior (Izard, 2009). Second, emotions initiate cognitive reflection and convey information. Once an emotional feeling state is realized, a cognitive process is initiated to interpret and to respond to the emotion. Lastly, discrete emotions include behavioral tendencies for action and expression. In fact, Ekman and Friesen (1975) provide compelling evidence that facial expressions of emotion are

involuntary and relatively universal across cultures. Also, the action tendency for very intense emotions may be so strong as to overwhelm cognitive reflection, such as when we lash out at a perceived aggressor.

Neuroscience has recently provided a new perspective on the interactions between emotion and cognition that influence what we feel and do (e.g. Damasio et al., 2000; Greene, Nystrom, Engel, Darley, & Cohen, 2004; Izard, 2009). Izard (2007, 2009) has proposed a new emotional paradigm that is especially applicable to this study and incorporates these findings from neuroscience. This new paradigm has already been adopted within the management literature by Spence and Rupp (2009), and I will build upon it further here. This paper will be concerned with the interaction between basic emotions and emotion schemas; therefore I will briefly define other related constructs and differentiate them from emotion.

Mood. Brief and Weiss (2002, p. 282) define moods as “generalized feeling states that are not typically identified with a particular stimulus and not sufficiently intense to interrupt ongoing thought processes.” Moods are generally classified as positive or negative feelings that linger for hours or days following an emotional event or result from a number of relatively insignificant events (Kelly & Barsade, 2001). Moods can often persist below consciousness and do not actively engage cognition. Moods have been shown to exert an influence on behavior (Loewenstein & Lerner, 2003; Tsai & Huang, 2002) and decision making (Isen, 2000; Isen & Geva, 1987). However, moods do not carry the same intensity or biological imperative for behavior that are present in emotion (Ashkanasy, 2003; Brief & Weiss, 2002; Buck, 1999). In summary, moods can follow

from emotions or influence the range and intensity of emotions that are experienced. In addition, moods can have an indirect impact on behavior, but moods do not carry the concrete behavioral tendencies that discrete emotions do.

Why study emotions and not moods? There are a number of valid reasons why the body of previous research into display rules and emotional labor has dealt with emotions and not moods. As we have seen, while emotions and moods are related, the differences between them are critical to the phenomenon that underlie this study. For one, discrete emotions and not moods are associated with unique behavioral tendencies and facial expressions that are important to understanding how individuals respond to affective events at work (Weiss & Cropanzano, 1996). For example, Lerner and Keltner (2001) demonstrated that anger and fear have unique appraisal tendencies that drive distinct decision making behavior. Additionally, the research program of Ekman (1984; Ekman & Friesen, 1975) has shown that emotive facial expressions are relatively automatic and universal across cultures and that these displays are inherently linked to emotion and not mood. Facial expressions provide an important form of social communication. Once again emotions and not moods provide an important communicative role in workplace social interactions. Therefore, it is clear that emotions not moods are the appropriate constructs of concern to research into display rules and emotional labor. The remainder of this paper deals specifically with felt emotions, emotional displays, and the interaction between discrete emotions and cognition.

A neuroscience model of emotion. The Izard (2007) paradigm of emotion establishes two temporal phases of emotion: basic emotions and emotion schemas. Basic

emotions are universal, automatic affective feelings generated by the old brain structures of the limbic system and are present in humans from birth (Anderson, 2007; Ekman & Friesen, 1975; Izard, 2007). Basic emotions can be classified as positive (joy, interest), negative (sadness, anger, disgust, fear) or fundamental (shame, guilt, contempt). Basic emotions can be thought to arise as an automatic response to stimuli without conscious control. They are linked to specific behavioral tendencies that drive stereotypical approach or avoidance response strategies (Buck, 1999). For example, even infants react to goal blockage with verbal and autonomic expressions of anger (Stenberg & Campos, 1990). Lerner and Keltner (2001) demonstrated that fear led individuals to avoid risk, while angry individuals were more likely to make riskier decisions.

Once a basic emotion is manifested, the cognitive dimension of the human mind attempts to interpret and understand the emotional response. This continuing interaction between cognition and emotion leads to the development of emotion schemas that connect emotion and cognition to action (Izard, 2009). Emotion schemas are defined as emotion – cognition patterns of interaction that allow individuals to respond to basic emotion in a manner that is appropriate for the situation. They are characterized by increased activity in the executive control region of the brain, the prefrontal cortex (Banks, Eddy, Angstadt, Nathan, & Phan, 2007; Beauregard, Levesque, & Bourgouin, 2001; Goldin, McRae, Ramel, & Gross, 2008). Individuals with damage to these areas of the brain frequently are unable to moderate their emotional responses and often behave inappropriately (Kolb & Wishaw, 2008).

Once a cognitive schema is engaged, there is a dynamic interaction between the affective and cognitive systems that produces complex feeling states and behaviors in order to conform with personal goals and values, and to social norms (Izard, 2009). As the interaction progresses, felt emotions may change and different emotion schemas may become engaged. Emotion schemas occur when our conscious mind seeks to interpret and moderate our basic emotion responses. These schemas can be influenced by appraisal processes, memories, goals, values, and social norms.

Display Rules

Researchers have begun to explore the question of how individuals know what emotional expressions are appropriate for a particular situation. In the organizational context display rules can be defined as “the formal and informal norms used by an organization to manage emotional expression” (Cropanzano, Weiss, & Elias, 2004, p. 46). With this definition in mind, it is easy to see that display rules play an important role in the emotion schemas that will be utilized by employees. Display rules govern the expression of emotions that are experienced at work. From an organization’s perspective, unbridled display rules could be problematic because the “wrong” emotional expressions may create undesirable outcomes such as unhappy customers. For this reason, many firms find it beneficial to regulate employee emotional displays. Fortunately, controlling emotional expressions can be accomplished by establishing strong norms and expectations for displays. This can foster the development of emotional schemas to produce appropriate displays. I will revisit this issue later in the paper.

Types of Display Rules. Researchers have suggested a number of display rule taxonomies (Ashforth & Humphrey, 1995; Grandey, 2000; Wharton & Erickson, 1993). A common theme among these taxonomies suggests that emotional displays can be categorized as either integrative or differentiating in nature (Cropanzano et al., 2004). Integrative emotions are generally positive in tone and bring individuals together (e.g. affection, joy). In contrast, differentiating emotions are negative in tone and drive people apart (e.g. anger, disgust). This simple taxonomy yields three general types of display rules: displaying positive emotion, displaying negative emotion, and suppressing all emotion. Each of these taxonomies also posits that display rules are derived from multiple higher level influences (culture, occupation, organization). I will take this issue up in depth later in the paper. For now, I will briefly discuss the support for each of the general types of display rules in the workplace.

The first involves display rules for expressing positive emotions. Being kind and pleasant to others is a central tenet of most modern societies. This influence carries over into the workplace. An oft-cited study of Disneyland employees revealed how new employees were bombarded with inspirational films and hearty pep talks extolling them to act happy and cheerful so that their guests would do the same (Vanmaanen & Kunda, 1989). More recently, Beal and colleagues (2006) investigated cheerleader camp instructors who were encouraged at all times to present a positive attitude and foster excitement, enthusiasm, and fun.

Occasionally, there may be display rules for expressing negative emotions. Encouraging employees to express negative emotion in the workplace seems somewhat

unusual. A few of studies have reported instances when doing so proved more effective for achieving organizational goals than positive emotions. Sutton's (1991) investigation of bill collectors revealed that training and informal norms encouraged employees to respond to delinquent customers with a range of negative emotions from urgency to irritation depending on the debtor temperament and response. On the whole, this seems to be less common than expressing positive emotions.

Often there are also display rules for suppressing emotions. Employees are frequently required to maintain relatively flat affect in stressful situations. Rafaeli and Sutton (1987) reported how professional poker players must mask their emotions in order to be successful. The medical profession is widely acknowledged to encourage doctors and nurses to maintain a certain level of detachment from patients (e.g. Playle, 1995; Rafaeli & Sutton, 1987). By and large display rules for suppressing emotions are targeted toward negative emotions, although Cropanzano and colleagues (2004) provide several examples of positive emotion suppression. One compelling example involves limiting one's celebration of individual success in order to avoid being seen as boastful or creating divisiveness within work groups. Most often, suppressing negative emotion is not required simply to display flat affect but as a precursor to displaying positive emotion. Hochschild (1983) provides such an example in the case of a stewardess who was forced to respond to a crass advance by a passenger with a friendly smile.

Impact of display rules. Display rules have been tied to a number of important organizational performance outcomes (Diefendorff & Gosserand, 2003). This is especially true in service organizations where an important aspect of what the

organization provides is customer treatment (Cropanzano et al., 2004; Hochschild, 1979). Tsai (2001; Tsai & Huang, 2002) has provided evidence that the positive emotional displays of store clerks can be positively related to customer reactions. When clerks perceived greater expectations for customer service, they reported more frequent positive displays toward customers. These displays did not seem to influence customer purchase decisions, but when store service climate was higher, customers spent more time in the store and reported being more likely to return and to recommend the store to others. Display rules are generally intended to promote good customer service. In a related study, Schneider, White, and Paul (1998) report that perceptions of service quality lead to customer retention. Specifically, they found that bank branches with stronger service climates, as measured by employee perceptions of expectations, supervisor support, and resources, were perceived by customers as providing higher service quality over a number of years. They also found that there was a significant relationship between customer perceptions and service climate in successive years.

Display rules also play a role in maintaining harmony within organizations (Cropanzano et al., 2004). The conflict literature suggests that conflict with coworkers produces a significant portion of the emotionally challenging situations that arise at work (Gamero, Gonzalez-Roma, & Peiro, 2008; Jehn & Bendersky, 2003). Interpersonal conflict within nurse teams is a well-documented source of distress for nurses and patients (e.g. Almost, 2006). Cox (2003) showed that intragroup conflict in nursing teams was negatively related to team performance. In this study, nurses who reported higher levels of intrapersonal conflict within their groups were much less satisfied with their job.

Groups with higher levels of perceived intragroup conflict also reported lower perceptions of team performance. Unfortunately, objective measures of team performance were not reported. Yang and Mossholder (2004) have argued that integrative display rules for suppressing negative emotions within groups are effective at reducing task and relationship conflict.

This review provides ample evidence that the organization benefits from strong integrative display rules. However, there is also reason to believe that display rules can have an adverse impact on individual employee well-being (Hochschild, 1983). In one example, Schaubroeck and Jones (2000) found that perceived demands of headquarters employees to express positive emotion and suppress negative emotion were both positively related to physical complaints. There are other examples, but I will take this issue up more fully later in the paper.

Display rules for coworkers. Thus far, I have introduced the types of display rules that exist in the workplace and their purpose. There are two additional display rule issues I wish to address before moving on. The first issue I will address is the target of display rules. As discussed earlier, theory suggests that specific display rules will exist between coworkers to improve performance and maintain harmony (Cropanzano et al., 2004; Grandey, 2000; Hochschild, 1983). The early qualitative investigations provide pointed examples of display rules between coworkers. Shafaeli and Sutton (1989, p. 3) recount the expected emotional displays between restaurant employees:

The waitresses have to be nice to the bartenders because we need our drinks fast.

The bartender has to be nice to us because if our customers complain it is his

fault. The cooks are the least dependent on others, but they have to be nice to the waitresses to get the secret drinks we bring them from the bar.

Martin and colleagues (1998) also provided a picture of strong feminist display rules between employees across the corporate offices of a cosmetics firm. It becomes clear in their depiction of the Body Shop that newcomers, even at relatively senior levels, faced overt pressure from peers and supervisors to conform to norms of bounded emotionality in the workplace. Bounded emotionality was defined as:

build interpersonal relationships through improved mutual understanding of work-related feelings, to foster community rather than to further the efficiency or productivity goals of the organization (Martin et al., 1998, p. 436).

They even provide examples of employees who were forced to leave the company because they didn't fit in and conform to these norms for emotional display.

There has been a relative dearth of empirical research that considers coworker display rules in addition to customer display rules. In a notable exception, Diefendorff and Greguras (2009) demonstrated that display rules for coworker interactions existed and were unique from display rules toward customers. In their study employees from a variety of occupations were surveyed. The results suggested that perceived display rules for suppressing emotion was much more common than for expressing emotion. Despite this finding, complete suppression was relatively uncommon. Even for negative emotions, less than half of the display rules were reported as requiring employees to completely suppress an emotion. Most rules involved showing positive and negative emotion, but with less intensity than was experienced. Supplemental analyses revealed

that display rules were more likely to include stronger deamplification or complete suppression of negative emotions if the target of the display was a customer versus a coworker. This suggests that display rules for coworkers are unique and may dissociate from display rules for customers. In the current study, I will analyze both targets of display rules.

Group display rules. The last issue that I will take up regarding display rules regards group level influences. As discussed earlier, display rules are by definition a social phenomenon arising from societal, occupational, and organizational level influences. Yet, the extant literature has largely focused on organizational influences and has frequently operationalized display rules as individual perceptions of expectations for appropriate emotional displays (e.g. Diefendorff & Greguras, 2009; Grandey, 2003). Therefore, despite the higher level theoretical basis for the development of display rules, there have been few attempts to actually operationalize display rules above the level of the individual.

Work groups have similar interests in monitoring and moderating the emotions of their members in order to achieve group performance goals and maintain group harmony as were discussed previously. Therefore, developing emotion-regulating norms should be a core consideration in many groups (Yang & Mossholder, 2004). These group level norms can arise through normative rules that are enforced through sanctions or through collective support and encouragement (Barsade & Gibson, 1998; Kelly & Barsade, 2001). For example, at the Body Shop employees in the marketing department were encouraged to express their feelings and new employees and managers who did not conform to these

norms were counseled and even fired (Martin et al., 1998). At the work group level, there is evidence that norms are much more likely to emerge out of adaptive common practice rather than conscious design (Opp, 2002). Social information processing theory (Salancik & Pfeffer, 1978) predicts that an individual's perceptions of job demands will be strongly influenced by the beliefs and actions of others around them.

There is limited support in the extent literature for group level influences on display rules. Martin et al. (1998) found qualitative evidence that different departments within The Body Shop had unique display rules that were consistent with the overall organizational philosophy. One division in particular demonstrated much stricter and tightly enforced rules of expressivity. An instance is reported in which a manager opted to defer negative feedback to an employee because he did not have time to “put the pieces back together” (page 449) before his vacation. There is only one empirical study of group display rules that I am aware of (Diefendorff, Erickson, Grandey, & Dahling, 2008). This study examined 100 teams of nurses from two hospitals. They predicted that group display rules would be shared within nurse teams and that these group level display rules would predict the emotional labor of individual nurses. They found significant levels of agreement in display rule perceptions towards patients within nurse teams. They also found significant differences in group level display rules between teams. Therefore this study provides initial empirical support for group level influences on display rules. The current study will attempt to advance both of these issues and investigate group level display rules for displays toward coworkers as well as patients while keeping the societal, occupational, and organizational influences constant.

Emotional Labor

If display rules describe the expectations for emotional displays at work, emotional labor has come to describe the process by which individuals comply with those expectations. A wealth of previous research on emotional experience and expression indicates that individuals can modulate their emotional response and expression in order to comply with display rules. Hochschild's (1979) seminal work introduced the concept of emotion work as the active monitoring and management of emotion in response to feeling rules. She defined emotional labor as "the management of feeling to create publicly observable facial and bodily display" (Hochschild, 1983, p. 7). Hochschild's conception of emotional labor was drawn from a dramaturgical model and was shaped by her belief that emotional labor was a form of workplace oppression.

Gross (1998b) brought a social psychological perspective and a more empirical approach to emotional labor. He developed a framework of emotional regulation that considered our response to emotions that arise in all contexts of our daily lives, both at and away from work. The concept of emotion regulation suggested that individuals were able to develop a range of conscious and unconscious strategies to influence what, when, and how they experience and express emotions. His typology divides emotion regulation processes temporally into antecedent focused strategies (situation selection, situation modification, attentional deployment, and cognitive change) and response focused strategies (suppression). Gross further predicted and demonstrated that the different emotional regulation strategies yielded different physiological and psychological consequences (Gross, 1998a, 2002). More specifically, antecedent focused strategies

reduced negative and enhanced positive emotional response, whereas suppression did not affect the internal experience of emotion. Suppression also amplified the physiological and stress response to negative emotions. In general suppression has less favorable outcomes than antecedent focused strategies. The Gross framework was a large step forward but did not specifically address the unique constraints of the workplace.

Grandey (2000) integrated the emotional regulation framework of Gross (1998b) with the work setting and terminology of Hochschild (1983). In doing so she defined emotional labor as emotional regulation (enhancing, faking, or suppressing emotional expression) in the workplace. Her definition included interactions with customers, supervisors and coworkers. Grandey (2000) recognized that the work environment constrains the emotion regulation options available to employees and collapsed the specific strategies proposed by Gross into two broad categories, surface acting and deep acting. Surface acting (response-focused regulation and faking), refers to producing a desired emotional expression without modifying the underlying felt emotion. Deep acting (antecedent focused regulation) occurs when a desired emotional expression is achieved by changing the underlying felt emotion. Surface and deep acting will be discussed at greater length in the next section. Grandey's model also indicates that the primary antecedents of emotional labor are emotional events and display rules.

Diefendorf and Gosserand (2003) provide a succinct definition of emotional labor as the process of regulating one's emotional expressions in response to display rules in order to achieve work related goals. Further, Diefendorf, et al. (2006) demonstrated that

emotional labor is perceived by employees as a job responsibility. This perspective dominates the recent literature and is most tractable to the current study.

Is the distinction between surface and deep acting viable? The distinction between surface and deep acting in emotional labor has proven useful in empirical research. Surface acting entails producing emotional displays without attempting to feel the displayed emotion internally (Grandey, 2003). One example is when a tired and unhappy cashier smiles brightly at each of a succession of customers in line. Deep acting in contrast is supposed to involve internal attempts to modify internal feelings to match the required emotional display. A well-known example involves flight attendants being taught to think of passengers as children in order to engender feelings of tolerance (Hochschild, 1983). Yet it has been suggested that both are internally false and require cognitive effort to produce (Ashforth & Humphrey, 1993). Therefore, it is worth asking whether they should produce different outcomes.

First, empirical evidence has consistently indicated that surface and deep acting are distinct if moderately inter-correlated forms of emotional regulation (Bono & Vey, 2005). Grandey (2003), investigated deep and surface acting by administrative employees at a single university. She found that employees reported that display rules were significantly related to surface acting but not to deep acting. Also, both deep and surface acting were negatively related to job satisfaction. In addition, surface acting was negatively related to customer focused affective delivering ratings by coworkers. The concept of emotional dissonance, a difference between felt and expressed emotion, has been regarded as an important distinction between surface and deep acting strategies. A

study of call center employees found that surface acting but not deep acting was associated with the experience of emotional dissonance (Holman, Chissick, & Totterdell, 2002). Diefendorf et al. (2005) reported that their study of part time service workers supported three-dimensions for emotional expression on the job: surface acting, deep acting, and expressing true emotions.

Second, as seen previously in the Grandey (2003) study there is evidence that display rules are differentially related to surface and deep acting. In another study that sampled across occupations and organizations, display rules were positively related to surface acting but not deep acting (Diefendorff & Greguras, 2009). In contrast, Diefendorf et al. (2005) reported that display rules for expressing positive emotions were positively related to deep acting but not surface acting. Display rules for not expressing negative emotions, on the other hand, were associated with surface acting but not deep acting. In a related finding, Beal and colleagues (Beal et al., 2006) found that cheerleader instructors who had difficulty complying with display rules increased their level of surface acting and not deep acting. A meta-analysis of the emotional labor research found that display rules were positively related to both surface and deep acting (Bono & Vey, 2005). Therefore, the research indicates that display rules are an important factor in establishing the emotional labor demands of a job and that deep and surface acting capture unique emotional labor strategies for complying with display rules. However, display rules do not seem to account for which strategy is selected – a question that I will address further.

In summary, the evidence suggests that surface and deep acting are unique strategies for complying with display rules (Bono & Vey, 2005). Further, the distinction between surface and deep acting has been a useful framework for studying the antecedents and consequences of emotional labor (Cropanzano et al., 2004; Grandey, 2000). The primary purpose of this study is to develop and test a process model of display rules and emotional labor at the group and individual level. Therefore, I will adopt a broad definition of surface and deep acting that includes emotion evoking interpersonal interaction between customers and coworkers at work.

Emotional labor strategy selection. Thus far, most of the accounts of how individuals select emotional labor strategy have focused on individual differences. For example, Gosserand and Diefendorff (2005) found evidence that commitment to display rules and dispositional trait affectivity were related to an individual's use of surface or deep acting. I will return to the role of display rule commitment later. Another study by Diefendorf and colleagues (2005) found significant relationships between the big five personality traits and the use of surface or deep acting. Extraversion, agreeableness, and conscientiousness were negatively and neuroticism was positively related to surface acting. Only agreeableness was positively related to deep acting. While I acknowledge that individual differences can certainly play a role in the selection between deep and surface acting, research also shows convincingly that individuals can readily overcome their predilections toward one strategy or another. For example, a number of studies have demonstrated that people can selectively perform deep or surface acting when asked to do so in a laboratory environment (e.g. Banks et al., 2007; Gross, 1998a).

Group level emotional labor. There is reason to believe that group influences play an important role in emotional expression and emotional labor strategy selection (Barsade & Gibson, 1998). First, it may be helpful to revisit the Izard (2009) model of emotions. Emotional labor occurs when a basic emotion is experienced by the individual once emotion schemas become engaged. Deep and surface acting can be thought of as different types of emotion schemas that may consciously or unconsciously engaged once an employee recognizes that their current felt emotion does not comply with a display rule. Within an emotion schema, cognition interacts with emotion and alters the emotional expression and possibly the emotional feeling to be more in line with the display rule. These emotion schemas are similar to the scripts previously proposed in the control theory perspective of emotional labor (Bettenhausen & Murnighan, 1985; Diefendorff & Gosserand, 2003). Izard (2007, 2009) acknowledges that emotion schema selection will be affected by the individual's appraisals, disposition and previous experiences.

Izard (2009) also suggests that adaptive emotion schemas may crystallize into consistent patterns of emotion-cognition interactions, which he labels "memes". These emotion schema memes can be defined as replicable units of emotion-cognition-behavior interaction that are adaptive at the group or individual level. These memes can be transmitted between individuals through observation and interactions. In a simplistic example, always smiling at other people when you address them (even if you are unhappy) may be adaptive in that you will be received more favorably. This perception may lead others that you interact with frequently to adopt the smiling behavior. Izard argues further that these memes can propagate readily for two reasons:

First, such schemas have the attention-grabbing and motivational power of an emotion. Second, they are highly functional phenomena independent of their relations to biological fitness and survival (page 19).

Memes provide a mechanism for group level influences on emotional labor strategies that can transcend individual differences. Memes are almost always adaptive, while some cognitive schemas may be maladaptive. Recent findings in neuroscience also suggest that nonconscious processing, such as the mirror neuron system, provides viable mechanisms for how shared memes might develop within groups that interact frequently. This concept also fits well with the group norms literature that suggests that convergence of response scripts allows group members to respond more quickly and confidently to novel situations (Bettenhausen & Murnighan, 1985). The groups literature also suggests that lack of agreement within a group reduces social integration (Klein, Conn, Smith, & Sorra, 2001). Therefore, it seems that interdependent groups have both motivation and a mechanism to exert a group level influence on group member emotional labor strategy selection.

Targets of emotional labor. Similar to the discussion of display rule targets, emotional labor is manifested in emotional displays directed toward customers and coworkers (Ashkanasy, 2003; Grandey, 2000). Deifendorff and Greguras' (2009) findings for display rules suggest that employees will be more likely to utilize greater surface acting toward customers than toward coworkers. The empirical literature to date has focused almost exclusively on emotional labor directed toward customers. In a notable exception, Pugliesi (1999) investigated emotional labor directed toward

customers and coworkers among a large sample of university employees (including faculty, staff, and administrators) at a single university. This study did not use current measures of surface and deep acting, but the measure of other-focused emotional labor resembled surface acting toward coworkers and the measure of self focused emotional labor was similar to surface acting toward customers. The results suggest that surface acting toward coworkers occurred almost as frequently as surface acting toward customers. Further, surface acting toward coworkers contributed significantly and positively to psychological distress and job stress. In summary, this study found that emotional labor directed to coworkers and customers both have negative consequences for individual employees. I will return to these important findings again later in the paper.

Consistent with my previous argument for considering display rules for customers and coworkers, I believe that measuring emotional labor directed toward coworkers as well as customers will provide a better picture of the total emotional labor required of an individual and provide additional explanatory power. Therefore, drawing on these findings and the previous discussion of group level display rules, I make the following predictions with regard to display rules and emotional labor:

Hypothesis 1: Group level display rules will be positively related to group level emotional labor (both surface and deep acting) directed toward (a) patients and (b) other work team members.

Outcomes of Deep and Surface Acting

Emotional exhaustion. The job burnout construct was formulated to reflect the psychological response to repeated emotional and interpersonal stress on the job

(Maslach, Schaufeli, & Leiter, 2001). There have been three primary characterizations of burnout. The original measure, the Maslach Burnout Inventory (MBI), conceptualized burnout in service work as having three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment (Maslach, 1982). *Emotional exhaustion* reflects a chronic feeling that one is overtaxed and exhausted by the emotional demands of a job. *Depersonalization* captures the degree to which one distances and disconnects themselves from others. Finally, *reduced personal accomplishment* is characterized by negative self evaluations on the job.

The development of the MBI set off an explosion of job burnout research (for reviews see Halbesleben & Buckley, 2004; Maslach et al., 2001). A number of concerns have arisen with the MBI. For one, it was originally conceived and validated as a burnout measure for human services jobs (Maslach, 1982). While it has been widely used outside of human service roles, there have been continued questions about the psychometric properties of the MBI. There has been some support for the three factor structure of burnout across occupations (Lee & Ashforth, 1990), though a number of authors have concluded that a two factor structure consisting of emotional exhaustion and depersonalization would be more appropriate (e.g. Shirom, 2003). Most of the concerns have centered on the personal accomplishment dimension. On theoretical grounds it has been argued that personal accomplishment reflects a personality trait rather than a symptom of burnout (Cordes & Dougherty, 1993; Lee & Ashforth, 1990). From an empirical standpoint, personal accomplishment has been weakly related to the other

dimensions of burnout and to antecedents and outcomes of burnout (Lee & Ashforth, 1996; Schaufeli & Enzmann, 1998).

Subsequently, the Maslach Burnout Inventory – General Survey (MBI-GS) was developed to address some of these concerns (Maslach, Jackson, & Leiter, 1996). This measure includes more general items that address non-social as well as social aspects of a job. The dimensions of the MBI-GS were relabeled as exhaustion, cynicism, and professional efficacy. These dimensions largely mirror the original conceptualization of burnout. Exhaustion is essentially the same as the previous measure, but cynicism and professional efficacy are meant to capture more general effects of job burnout. There has been support for the three factor structure of the MBI-GS across occupations and cultures (Leiter & Schaufeli, 1996; Schutte, Toppinen, Kalimo, & Schaufeli, 2000). However, there continue to be concerns regarding the psychometric properties of the MBI-GS (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001).

The Oldenburg Burnout Inventory (OLBI) was proposed as an alternative to the MBI (Demerouti, Bakker, Vardakou, & Kantas, 2003). The OLBI includes two dimensions of burnout, exhaustion and disengagement. Exhaustion is very similar to the previous definitions of emotional exhaustion except that it also includes stress related to the cognitive and physical demands of the job (Demerouti et al., 2001). The disengagement dimension captures attitudes toward the work task and its execution and is meant to reflect the relationship between the employee and the job. The OLBI has performed well in a number of studies (Demerouti et al., 2003; Halbesleben & Demerouti, 2005), but it continues to be much less widely utilized compared to the MBI.

In this study I have opted to include only the emotional exhaustion dimension of burnout for theoretical and empirical reasons. First, emotional exhaustion is widely considered to be the core measure of burnout and some have argued that the other dimensions are aspects, if not consequences, of exhaustion (Cropanzano, Rupp, & Byrne, 2003; Maslach et al., 2001; Shirom, 1989). Second, emotional exhaustion is the only dimension that is included in each the three frameworks for burnout. Further, the exhaustion dimension of each framework is principally equivalent. Third, emotional exhaustion has been the dimension of burnout that has been most strongly and consistently linked to important outcome variables (Cropanzano et al., 2003; Grandey, 2003; Lee & Ashforth, 1996). Lastly, this study is concerned with the emotional, cognitive, and physiological demands of managing emotions. Therefore, the emotional exhaustion dimension is most applicable to the investigation of display rules and emotional labor (Bozionelos & Kiamou, 2008; Grandey, 2003; Martinez-Inigo, Totterdell, Alcover, & Holman, 2007).

From emotional labor to emotional exhaustion. The most common link to emotional exhaustion in the emotional labor literature has been derived from the conservation of resources (COR) model (Hobfoll, 1989). COR suggests that the depletion of valuable resources produces stress and causes individuals to conserve remaining resources and seek out new resources. Grandy (2000) posited that monitoring and regulating one's emotions requires the effortful expenditure of limited physiological and cognitive resources which depletes resources and causes stress. Consistently overtaxing these resources can lead to resource depletion and exhaustion. Brotheridge and Lee

(2002) provided one test of a COR model of emotional labor in a sample of working adults across a variety of occupations. They found that emotional labor contributed to emotional exhaustion. They also reported that reduced authenticity and sense of self contributed to this relationship.

Bozionelos and Kiamou (2008) extended these findings by including secondary dimensions of emotional labor. In a study of frontline banking employees, they found that the frequency, intensity, and variety of emotional labor added significantly to the prediction of emotional exhaustion over and above the effect of surface and deep acting. This recent finding is consistent with the COR model, but conflicts with an earlier study that found that the effects of the duration, frequency, intensity, and variety of emotional labor dropped out when surface acting and deep acting were included in the analysis (Brotheridge & Grandey, 2002). In this earlier study, however, the secondary dimensions of emotional labor were measured at the job level and not the individual level. The COR model implies that the relative effortfulness of emotional labor is an important determinant of emotional exhaustion. This has important implications for differences between the relationship between emotional exhaustion and surface or deep acting. We will review the findings in this regard.

Different relationships between surface/deep acting and emotional exhaustion.

Surface acting and deep acting should have different consequences for emotional exhaustion within the COR framework (Grandey, 2000). For one thing, surface acting is considered to be a more effortful and sustained process. In addition, it has been suggested that the relative difference between felt and expressed emotions matters for emotional

exhaustion (Ashforth & Humphrey, 1993; Diefendorff & Gosserand, 2003). Therefore, surface acting, which does not address the difference between felt and displayed emotions, should be problematic for as long as the emotion display is maintained. Deep acting on the other hand involves changing the felt emotion and reduces or eliminates the discrepancy between felt and displayed emotion and should minimize emotional strain. Hence, we would expect surface acting, but not deep acting, to produce emotional exhaustion.

There has been considerable support for these propositions. First, lab studies have shown that surface acting produces a stronger and longer lasting physiological response than deep acting (Gross, 1998a). In this study, subjects were shown a disgusting film clip and told to suppress or reappraise their emotions. Both groups reduced their expressions of disgust, but only those who suppressed their emotion showed increased sympathetic and cardiovascular response. Brain imaging studies also support similar conclusions. These studies indicate that reappraisal of emotion is more effective and shorter lived in terms of brain activation than suppressing the same emotion (Beauregard et al., 2001; Goldin et al., 2008). This was demonstrated by greater activation in the prefrontal cortex during suppression versus reappraisal. Following reappraisal, activation in the emotional center (amygdala) was not observable, while suppression reduced activity in this area but activity remained higher than normal. These studies demonstrated that subjects found suppressing emotion to be more difficult and physiologically arousing than reappraising. Further, suppression required more widespread and sustained deployment of cognitive resources.

A number of field studies have provided additional support for the lab results. In a study of working adults from multiple occupations, Brotheridge and Grandey (2002) found that surface acting was positively related to emotional exhaustion. Deep acting, in contrast, was not significantly related to emotional exhaustion. In this study, the target of emotional labor was not specified. Likewise, another test of the COR model by Brotheridge and Lee (2002) described earlier found that surface acting but not deep acting was related to emotional exhaustion in another mixed sample of working adults. This study also did not specify the target of emotional labor. Judge et al. (2009) employed experience sampling techniques for a mixed sample of working students and adults to investigate emotional labor (target not specified). The authors found once again that only surface acting was related to emotional exhaustion. This study also found that PA and NA mediated the effect of surface acting on emotional exhaustion.

A few studies, however, provided a much more mixed picture of the relationship between deep and surface acting and emotional exhaustion. For example, in a early study of flight attendants, Zerbe (2000) did not find a relationship between felt-expressed emotional dissonance or between faking emotions toward passengers and emotional exhaustion. This study did not actually measure surface or deep acting and the use of difference scores may have influenced the results by masking the distinction between the two.

Other studies have found that both surface acting and deep acting were related to emotional exhaustion. Holman et al. (2002) found that among call center workers both surface and deep acting toward customers were positively related to employee emotional

exhaustion. Grandey's (2003) study of customer focused emotional labor also found that both deep and surface acting were positively related to emotional exhaustion. Lastly, Diefendorff et al. (2008) also found that nurse surface and deep acting toward patients was positively related to emotional exhaustion. In each of these three studies, the effect of surface acting on emotional exhaustion was larger than that for deep acting. In a study of bank employees, Bozionelos and Kiamou (2008) found that neither surface acting nor deep acting exhibited a main effect on emotional exhaustion. However, they did find that the interaction between surface acting and frequency and between deep acting and intensity were positively related to emotional exhaustion. Further the effect sizes of these interactions were approximately equal.

In summary, the evidence as a whole provides general support for a consistent relationship between surface acting and emotional exhaustion as predicted by the COR model. However, within individual studies the predicted relationship between deep acting and emotional exhaustion has received more mixed support. It seems that sometimes deep acting can contribute significantly to emotional exhaustion, but other times it does not. Likewise, surface acting is generally linked to lower well-being, but some individual studies have not found such a relationship. This suggests that an important moderating variable may exist. One possibility may be found in considering the individual's affective reaction to the displayed emotion. I will explore this further in the next section.

Display rule commitment and emotional exhaustion. Earlier, we saw that display rule commitment may influence the choice between surface and deep acting (Gosserand & Diefendorff, 2005). Display rule commitment was defined as the intention and

motivation to expend effort to produce proscribed emotions even when it is difficult to do so. This concept raises the question of whether someone can fake an emotion and feel good about it or display a true emotion and feel bad about it. The recent research into display rule commitment provides a potentially intriguing answer to this question. Gosserand and Diefendorff investigated customer focused display rules and emotional labor in working adults from a variety of service jobs. They found that display rule commitment was significantly related to deep and surface acting and supervisor rated affective delivery. Specifically, when commitment was high employees were more willing to comply with display rules and performed more deep and surface acting. Further, their affective displays were rated more favorably by supervisors. The authors suggest that previous research may have ignored the motivational component of emotional labor. They argue that their model of the emotional labor process “explicitly incorporates motivation as a mechanism to explain why some individuals follow display rules and others do not” (Diefendorff & Gosserand, 2003, p. 1257). This study then offers commitment as one such motivating factor. Specifically, employees who view display rules favorably and are committed to the rules may be able to perform surface or deep acting effectively to willingly comply with the display rules.

This finding is consistent with Ashforth and Humphrey’s (1993) conceptualization of emotional labor with some modest reinterpretation. Their model suggests that one’s true feelings are the key determinant of the effectiveness and outcome of emotional labor. This has been interpreted as meaning that a difference between felt and displayed emotions was detrimental. Viewed another way however, if the true self

believes that a display is appropriate even if it differs from the felt emotion, then faking the emotional display may be a truer reflection of the self than the felt emotion. Further, faking in good faith may not carry negative long term consequences.

The Izard (2009) model of emotion also supports this proposition. Emotion schemas are engaged as our cognitive mind attempts to rectify basic emotions with display rules and situational variables. As discussed previously, schema selection may yield surface or deep acting emotional labor strategies. The emotion schema alters the emotional display and produces more complex emotion feeling states. At this point, display rule commitment could play an important role. If the schema engaged produces a feeling state and display that the individual is committed to, then the resulting complex emotional state will likely be overall positive. This should be true regardless of whether surface or deep acting is employed. In this way a nurse who knows that the chances for a patient's surviving are slim but presents an optimistic demeanor because she believes it is in the families' best interest will likely feel good about her surface acting display. If however, the individual is not committed to the target emotional state and display, then even though the outward display may be achieved through deep acting, the resulting complex emotional state is likely to be negative. In this way, when commitment is low even deep acting may produce negative internal emotions that increase stress and contribute to emotional exhaustion consistent with mixed findings discussed. Therefore, I propose the following set of predictions to test this potential explanation of the previously mixed findings:

Hypothesis 2a: Group level surface acting will be positively related to individual level emotional exhaustion.

Hypothesis 2b: Group level deep acting will be positively related to individual level emotional exhaustion, but the relationship will be weaker than for surface acting.

Hypothesis 3: Individual level display rule commitment will moderate the relationship between group level emotional labor and emotional exhaustion, such that when commitment is low both surface and deep acting are positively related to emotional exhaustion.

Emotional Labor, Emotional Exhaustion, and Job Attitudes

I am proposing a process model that extends from display rules to important job attitudes and behaviors. Therefore, this model poses a series of mediated relationships as shown in Figure 1. Display rules lead to emotional labor, which leads to emotional exhaustion, which leads to job attitudes and behaviors. Relatively few empirical studies have extended the investigation of emotional labor to consider the impact on important job attitudes and outcomes (Bono & Vey, 2005). The next section will lay out the evidence relating to the relationship between emotional labor and emotional exhaustion and job attitudes. Most of these studies have been described earlier, but I will highlight unique aspects of each pertaining to job attitudes and behaviors.

Emotional labor and job satisfaction. Theoretical accounts suggest that emotional labor should predict important job attitudes (Grandey, 2000). A limited number of empirical studies have examined this possibility. In a study discussed previously, Pugliesi

(1999) found that surface acting toward customers but not surface acting toward coworkers was negatively related to job satisfaction among university employees. Côté and Morgan (2002) conducted a longitudinal study of part time employees from a variety of occupations with two observations four weeks apart. They found that increased suppression of negative emotions (anger, fear, sadness) toward customers, coworkers, and supervisors was negatively related to job satisfaction and positively related to intentions to quit. Amplifying pleasant emotion (happiness) was not related to any of the job outcome variables. These findings were unusual in that suppressing emotion at time one was more strongly related to job attitudes at time two than at time one.

A study of self monitoring and emotional labor in a call center reported evidence that surface acting, but not deep acting, toward customers was negatively related to job satisfaction (Holman et al., 2002). Grandey's (2003) study of university administrative employees that was reviewed in detail earlier, found that both deep and surface acting were negatively related to job satisfaction. Finally, Diefendorff et al.'s (2008) study of nurse teams found that unit level display rules and surface acting contributed negatively to job satisfaction. A modest positive effect of deep acting on job satisfaction was not significant when display rules were included in the analysis. The zero order correlation between deep acting and job satisfaction was actually small but negative. In summary, surface acting has been consistently and negatively linked to job satisfaction. Deep acting has shown a much weaker but still generally negative relationship with job satisfaction.

Emotional labor and organizational commitment. Only one study has investigated the relationship between emotional labor and organizational commitment. This study of

frontline bank employees in Greece measured surface and deep acting as well as secondary dimensions of emotional labor (frequency, intensity, variety) (Bozionelos & Kiamou, 2008). They found modest support for a negative impact on organizational commitment for both deep and surface acting. The zero order correlations between deep and surface acting and organizational commitment were negative but nonsignificant. A hierarchical regression including interactions indicated that surface acting and the interaction between intensity and deep acting were significant negative predictors of organizational commitment. The measure of emotional labor in this study did not differentiate the target of emotional labor.

Emotional labor and turnover intentions. Only two studies have investigated the relationship between emotional labor and turnover intentions. Côté and Morgan (2002), detailed above, found that surface acting (suppressing negative emotions) at both observation times was related to turnover intentions. Similarly, Bozionelos and Kiamou (2008) also reported a significant and positive zero order correlation between surface acting and turnover intentions. Their regression analyses indicated that the intensity of the emotion moderated the effect of surface acting such that surface acting was more harmful for more intense felt emotions. No significant effects were found for deep acting and turnover intentions.

In summary the empirical research connecting emotional labor to job attitudes has been scant, but generally suggests that emotional labor has a negative impact on job attitudes. Therefore, I predict the following:

Hypothesis 4: Group level surface and deep acting will be negatively related to (a) job satisfaction, (b) organizational commitment, and (c) positively related to turnover intentions at the individual level.

Emotional exhaustion and job attitudes. To this point, we have shown that emotional labor has been consistently associated with emotional exhaustion. The literature on the consequences of emotional exhaustion is itself extensive (for reviews see Halbesleben & Buckley, 2004; Maslach et al., 2001). Emotional exhaustion has been linked to a number of important individual, organizational, and customer outcomes. A large number of these studies have investigated job satisfaction. In one such study of customer service employees, emotional exhaustion contributed to reduced job satisfaction and organizational commitment (Singh, Goolsby, & Rhoads, 1994). Further, the results suggested that emotional exhaustion mediated the impact of role stressors on job attitudes. Other studies across a range of occupations, including nursing, have consistently supported the conclusion that emotional exhaustion is deleterious for job satisfaction, organizational commitment, and turnover intentions (e.g. Burke & Greenglass, 1995; Jackson, Turner, & Brief, 1987; Leiter & Maslach, 1988; Wolpin, Burke, & Greenglass, 1991; Wright & Cropanzano, 1998).

Leiter and Maslach (1988) is of particular interest because they investigated emotional exhaustion among nurses due to interpersonal relationships with coworkers and supervisors. They found that emotional exhaustion partially mediated the relationship between interactions with coworkers and organizational commitment. In light of the

previous findings, I predict the following regarding emotional labor, emotional exhaustion, and job attitudes:

Hypothesis 5: Emotional exhaustion will mediate the relationship between surface and deep acting and (a) job satisfaction, (b) organizational commitment, and (c) turnover intentions.

Emotional Labor, Emotional Exhaustion and Job Behaviors

The theoretical conceptualization of emotional labor suggests that managing emotions contributes to resource depletion and emotional exhaustion which have negative consequences for job behaviors as well as attitudes (Grandey, 2000). Specifically, Grandey predicts that deep acting but not surface acting will be positively related to customer service performance due to the genuine nature of displayed emotions produced by deep acting. Very few empirical investigations of emotional labor have included job behaviors (Bono & Vey, 2005). I was unable to locate any empirical emotional labor studies that included job performance or organizational citizenship behaviors.

Emotional exhaustion and job performance. Once again, we can draw on the research into emotional exhaustion and in-role and extra-role performance. Wright and Cropanzano (1998) used the COR model to argue that emotionally exhausted employees would put less effort toward their work and therefore their job performance would suffer. A longitudinal study of social services workers found that emotional exhaustion was in fact negatively related to supervisor rated job performance (Wright & Bonett, 1997). More recently, Halbesleben and Bowler (2007) found evidence that emotional exhaustion

was negatively related to job performance, but that achievement striving mediated this relationship.

Two other emotional exhaustion studies dealt specifically with nurses. Parker and Kulik (1995) found that emotional exhaustion was associated with lower self-rated and supervisor-rated job performance. A second study investigated the subjective and objective performance perceptions of intensive care unit nurses (Keijsers, Schaufeli, LeBlanc, Zwerts, & Miranda, 1995). Similar to the other studies, this study found that there was a negative relationship between emotional exhaustion and self-rated performance. Surprisingly however, in this study emotional exhaustion was positively related to supervisor ratings of performance. Supplemental analyses indicated that nurses who were part of higher performing teams but rated their own performance less favorable were the most emotionally exhausted. Therefore, overall there has been a consistent link between emotional exhaustion and reduced job performance.

Emotional exhaustion and organizational citizenship behaviors. In the first study to investigate the relationship between emotional exhaustion and organizational citizenship behaviors (OCB), Cropanzano, Rupp, and Byrne (2003) found that emotional exhaustion was negatively related to OCBs directed toward the organization (OCB-O). Halbesleben and Bowler (2005) used COR to assert that exhausted employees would conserve resources by reducing OCB-O but that might also seek to increase social support by increasing OCBs toward coworkers (OCB-I). In an empirical test which focused on emotional exhaustion, they found general support for these predictions (Halbesleben & Bowler, 2007). Another study also found that emotional exhaustion in hotel and

restaurant service employees was negatively related to a measure OCBs that aggregated OCB-I and OCB-O (Chiu & Tsai, 2006). From the preceding, I hypothesize the following:

Hypothesis 6: Group level surface and deep acting will be negatively related to individual level (a) job performance and (b) OCBOs.

Hypothesis 7: Emotional exhaustion will mediate the relationship between surface and deep acting and (a) job performance and (b) OCBOs.

Group Level Aggregation

Because I have proposed a group level model of display rules and emotional labor, it is important to follow the guidance of Kozlowski and Klein (2000) and provide a brief discussion of the assumptions and justification for this cross-level model. The starting point of this model is display rules. Throughout this paper, I have detailed for the top-down nature of emotion display rules in work groups and have thus provided a solid justification that display rules emerge out of individual perceptions of expected emotional expression that are influenced by group level phenomenon. I have argued that the group level influences on display rules provide shared group expectations for emotional display. I have also suggested that emotion schema memes can be shared within interdependent groups, leading to group predilections toward surface or deep acting in order to comply with display expectations. I acknowledge that this is a largely exploratory prediction, and this study will provide the first test of emotional labor at the group level that I am aware of. The remainder of the process model suggests individuals respond to the demands of emotional labor in unique ways depending on their level of commitment to the display

rule. Therefore the consequences of emotional labor are operationalized as individual-level constructs.

I will briefly discuss and justify how group level display rules and emotional labor will be modeled and aggregated. Chan (1998) provides a typology of composition models for modeling group level phenomenon. Drawing from the climate literature (Schneider, Salvaggio, & Subirats, 2002), I propose that the direct consensus model will be most relevant to this investigation of group level display rules and emotional labor. In direct consensus models, the average group value reflects a shared consensus within the group regarding the level of the group variable. Direct consensus models are appropriate when group member perceptions are expected to be similar as we expect to be the case in this sample due to the structured environment, frequent interaction, and maturity of the teams. Direct consensus requires a minimum level of agreement within the group. In this case, the average group rating will represent the relative level of the display rule or emotional labor. This model is consistent with the only study to consider display rules as a group level construct (Diefendorff et al., 2008).

CHAPTER 3

RESEARCH METHODOLOGY

The above predictions investigated in this study are summarized by the framework presented in Figure 1. The model shown in Figure 1 depicts a cross-level, process model with group-level display rules and emotional labor leading to individual-level behaviors, attitudes, and outcomes in a top-down fashion. This approach is consistent with multi-level models of emotion in organizations and with previous emotional labor research (Ashkanasy, 2003; Diefendorff et al., 2008; Grandey, 2000).

Sample

This study utilized a sample of nurse teams in a large veteran's hospital in the southwest United States. The nursing profession provides an appropriate sample for emotional labor research on several accounts. For one, the core of the daily activities involved in nursing is both emotionally demanding and emotionally complex (Bolton, 2000). Another feature of nursing involves the conflicting philosophies that currently underlie its training and practice (Playle, 1995). On one hand the positivist tradition expects nurses to be impassive, objective, and scientific in their dealings with patients. On the other, humanism entreats them to adopt a genuine, empathetic, and holistic approach to patients. The end result is that employers and patients often expect nurses to shift seamlessly from one paradigm to the other in response to changing circumstances to best meet the needs of patients and coworkers.

Another important aspect of nursing is the interdependence within nursing teams. Interpersonal conflict within nurse teams is a well-documented source of distress for

nurses and patients (Almost, 2006; Cox, 2003). It is recognized that task and relationship conflict are related through emotionality and norms for emotional display (Yang & Mossholder, 2004). As a result, nurses are subject to variety of strong and often conflicting influences for emotional expression. Therefore, group influences should be important and I expect that there will be significant variance across work teams. Further, interactions between team members should play an important role in shaping local display rules.

The hospital employed a total of 415 registered nurses, licensed practicing nurses, and nurse's assistants engaged directly in patient care. Of these 319 (77 %) attended meetings and were asked to participate in the study. Of these, sixty-four percent (205) returned surveys. In addition, six nurses from satellite clinics completed surveys. Sixteen managers completed evaluations of each nurse that returned a survey and each work group. Nine nurses were dropped from the sample due to excessive missing data or missing manager evaluations. The final sample consisted of 202 nurses. Eighty percent of the nurses who responded were registered nurses (RN) with the highest level of nursing education and qualifications, while only eleven percent were nursing assistants with little or no nursing education. The average age was 44.16 years ($SD = 11.71$). The respondents had an average of 13.89 years ($SD = 11.56$) nursing experience and an average tenure at the hospital of 5.67 years ($SD = 5.81$). Eighty-five percent of the nurses were female. The nurses were organized into multiple functional groups such as emergency room, intensive care, outpatient clinic, etc. and they were scheduled such that they remained with the same coworkers according to a shift schedule within each

functional group. Therefore, the sample included 35 work teams. The average tenure of nurses in their work teams was 3.19 years ($SD = 2.40$). The average team size was 5.71 ($SD = 3.83$). Surveys were completed and collected at the place of employment.

Procedure

The nurses were organized into multiple functional groups such as emergency room, critical care, oncology, etc. and they are generally scheduled such that they remain with the same coworkers according to a shift schedule within each functional group. A complete list of nurses and supervisors was obtained from the human resources department and the questionnaires were prepared with name stickers in addition to unique numeric participant identifiers. I met with small groups of nurses during shift turnovers. Nurses were introduced to the study and informed consent was obtained. Then nurses received survey packets, completed the survey at their convenience and then peeled off their name sticker. Completed surveys were returned in sealed envelopes to collection boxes in break areas. Each nurse that completed a survey received a small token of appreciation. I then met individually with supervisors and they completed an evaluation of each work team and each nurse that returned a survey.

Measures

The complete survey instruments are included in Appendix A. Each measure and its source are discussed briefly here. The measures will be presented according to the order they appear in the process model shown in Figure 1.

Display rules. Seven items from the Emotion Work Requirements scale (Best, Downey, & Jones, 1997) will be used to measure perceptions of integrative emotional

display rules. This scale included items for displaying positive emotions and for not displaying negative emotions. Sample items include: “Reassuring people who are distressed or upset,” (positive emotion) and “Hiding your anger or disapproval about something someone has done” (negative emotion). Separate scales were included for display rules toward patients and toward co-workers. Responses were on a five point Likert scale (1 = not at all required; 5 = always required). For positive emotion display rules toward patients coefficient alpha reached .73, with an ICC(1) = .15, ICC(2) = .47, and average $r_{wg} = .91$ supporting aggregation of individual responses (see Klein et al., 2000). For positive emotion display rules toward coworkers coefficient alpha reached .82, with an ICC(1) = .08, ICC(2) = .29, and average $r_{wg} = .85$. For negative emotion display rules toward patients coefficient alpha reached .82, with an ICC(1) = .12, ICC(2) = .41, and average $r_{wg} = .69$. For negative emotion display rules toward coworkers coefficient alpha reached .82, with an ICC(1) = .05, ICC(2) = .20, and average $r_{wg} = .71$.

Emotional labor – deep acting. Four items measuring deep acting were adapted from Grandey et al. (2004). Sample items included: “I generally tried to look at the positive side of things to change how I feel” (deep acting - reappraisal) and “I tried to see things from the other person’s point of view” (deep acting - perspective taking). Separate items were included for deep acting toward patients and co-workers. Responses were on a five point Likert scale (1 = almost never; 5 = very frequently). For deep acting toward patients coefficient alpha reached .75, with an ICC(1) = .12, ICC(2) = .40, and average $r_{wg} = .84$ supporting aggregation of individual responses (see Klein et al., 2000). For deep

acting toward coworkers coefficient alpha reached .80, with an ICC(1) = .13, ICC(2) = .42, and average $r_{wg} = .76$.

Emotional Labor – Surface Acting. Two items measuring surface acting were adapted from Grandey et al. (2004). The items included: “I faked my feelings” and “I tried to keep my feelings from interfering too much”. Separate items were included for surface acting toward patients and co-workers. Responses were on a five point Likert scale (1 = almost never; 5 = very frequently). For surface acting toward patients coefficient alpha reached .67, with an ICC(1) = .09, ICC(2) = .33, and average $r_{wg} = .61$ supporting aggregation of individual responses (see Klein et al., 2000). For surface acting toward coworkers coefficient alpha reached .62, with an ICC(1) = .17, ICC(2) = .50, and average $r_{wg} = .67$.

Display Rule Commitment. Commitment to display rules were measured with five items developed by Gosserand and Diefendorf (2005). A sample item is: “I am committed to displaying emotions desired by the organization.” Responses were on a five point Likert scale (1 = strongly disagree; 5 = strongly agree).

Emotional Exhaustion. I measured emotional exhaustion using items from the Oldenburg Burnout Inventory (OLBI) adapted from Halbesleben and Demerouti (2005). A sample item is: “During my work, I often feel emotionally drained”. Responses were on a five point Likert scale (1 = strongly disagree; 5 = strongly agree).

Organizational Commitment. I utilized four items to assess commitment to the organization adapted from Eisenberger et al. (1986) Sample items include: “I really feel as if this hospital’s problems are my own” and “This hospital has a great deal of personal

meaning for me.” Responses were on a five point Likert scale (1 = strongly disagree; 5 = strongly agree).

Intention to Turnover from the Organization. I utilized three items to assess turnover intentions from the organization (Cropanzano, Howes, Grandey, & Toth, 1997). The following is a sample item: “I would leave my job if a position were available at another hospital”. Responses were on a 5 point Likert scale (1 = strongly disagree; 5 = strongly agree).

Job Satisfaction. I utilized a three item global job satisfaction scale (Seashore, Lawler, Mirvis, & Camman, 1982): “In general, I like working here”, “In general, I don’t like my job” (reverse coded), and “All in all, I am satisfied with my job.” Responses were on a five point Likert scale (1 = strongly disagree; 5 = strongly agree).

Supervisor Measures

Job Performance. I measured in-role job performance with five items adapted from Williams and Anderson (1991). Sample items included: “Meets formal performance requirements of the job” and “Treats patients with dignity and respect.” Responses will be on a 5 point Likert scale (1 = strongly disagree; 5 = strongly agree).

Organizational Citizenship Behaviors. Individual OCBs were by rated by supervisors using eight items (Williams & Anderson, 1991). This scale has two dimensions, altruism and compliance. Sample items included: “Helps others who have heavy workloads” (altruism) and “Complains about insignificant things at work” (compliance). Responses were on a 5 point Likert scale (1 = strongly disagree; 5 = strongly agree).

Control variables. Two group level control variables were recorded or calculated and included in the analysis to ensure that the results were not confounded with other group variables. These included day versus evening shift and average group member tenure.

CHAPTER 4

RESULTS

The descriptive statistics for the individual level study variables of interest are shown in Table 1. All of the scales were adapted from previous studies and the internal reliabilities suggested that even those that were shortened were appropriate for the hospital setting. The two item measures of surface acting toward patients and co-workers were somewhat lower than what is desirable but these were not shortened and have been previously validated and utilized in other studies (Diefendorff et al., 2008; Grandey et al., 2004).

TABLE 1: Descriptive Statistics and Intercorrelations for Individual Level Variables

Student	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7
1. Display Rule Commitment [5]	4.06	.72	(.78)						
2. Emotional Exhaustion [5]	3.13	.76	-.29**	(.75)					
3. Organizational Commitment [3]	3.39	.76	.30**	-.43**	(.69)				
4. Job Satisfaction [3]	4.06	.72	.40**	-.32**	.55**	(.83)			
5. Turnover Intentions [3]	2.01	.90	-.35**	.26**	-.53**	-.57**	(.81)		
6. Performance [5]	4.28	.64	.26**	-.12	.15*	.15*	-.15*	(.84)	
7. OCB [8]	3.72	.64	.17**	.00	.11	.09	-.15*	.75**	(.71)

Note: Coefficient alpha is provided along the diagonal. The number of items is provided in brackets.

** = $p < 0.01$, * = $p < 0.05$, and † = $p < 0.10$

Validation of Scales and Aggregation

Display Rules. This study was one of the first to empirically explore display rules and emotional labor toward coworkers as well as toward customers. Therefore, it was necessary to establish that nurses' reports of display rules and emotional labor directed

toward coworkers were distinct from those reported toward patients. Confirmatory factor analysis in AMOS (Blunch, 2008) was used to investigate the factor structure and item performance of the display rule and emotional labor scales at the individual level. Several nested models of display rule items and emotional labor items were tested to investigate different combinations of patient and coworker items to determine the most appropriate combinations. Display rule and emotional labor items were considered separately. Within each model, individual items were allowed to load on a single latent factor. The models were compared on the basis of multiple fit statistics including the χ^2 statistic, the Goodness of Fit Index (GFI), and the standardized root mean square residual (SRMR). The lower bound for good fit for GFI is generally accepted to be 0.9 while for the SRMR values below 0.10 indicate good fit.

I first investigated the factor structure of the display rule scales as shown in Table 2. As expected, the single factor model which collapsed display rules across targets of display and valence of emotion did not fit the data well at all. This confirmed that display rules were not a global construct but rather needed to be differentiated further. Two different two factor models were also investigated. The first separated the items targeted toward patients from those targeted toward coworkers because I predicted this would be an important distinction. The second separated display rules for positive and negative emotions. These models fit better than the single factor model but were still less than acceptable. Next a four factor model of display rules was fit to the data which separated the scales into display rules for positive and negative emotions toward patients and coworkers. This model fit the data better than either of the two factor models ($\Delta\chi^2 = 263$,

$\Delta df = 5, p < .01$) and the overall fit of the model was acceptable (GFI = .85, RMR = .08).

Further, the intercorrelations between patient and coworker positive and negative emotion display rules were not high enough to suggest that they measured a single construct (.60 and .67 respectively). To investigate this further, separate two factor models were fit for patients and coworkers and these models fit the data extremely well. In summary, the factor analysis confirmed that there were distinct display rules for patients and coworkers. Further, the results indicated that it was also important to differentiate between display rules for positive and negative emotional displays.

TABLE 2: Summary of Confirmatory Factor Analysis Fit Statistics

Model	χ^2	<i>df</i>	GFI	SRMR
<i>Display Rules</i>				
1 Factor	625	65	.63	.12
2 Factor (patient/coworker)	495	64	.66	.12
2 Factor (positive/negative)	512	65	.71	.21
4 Factor	232	59	.85	.08
<i>Patient Display Rules</i>				
1 Factor	68	9	.89	.06
2 Factor (positive/negative)	32	8	.95	.04
<i>Coworker Display Rules</i>				
1 Factor	224	14	.70	.14
2 Factor (positive/negative)	37	13	.95	.06
<i>Emotional Labor</i>				
2 Factor (surface/deep acting)	180	34	.85	.09
4 Factor	153	29	.87	.08
<i>Patient Emotional Labor</i>				
1 Factor	49	5	.91	.12
2 Factor (surface/deep acting)	7	4	.99	.03
<i>Coworker Emotional Labor</i>				
1 Factor	48	5	.90	.10
2 Factor (surface/deep acting)	16	4	.97	.05

Emotional Labor. I investigated the factor structure of the emotional labor measures in a similar fashion. The major exception was that there is a body of previous literature demonstrating that deep and surface acting are distinct dimensions of emotional labor (Bono & Vey, 2005; Diefendorff et al., 2005). Therefore, it was only necessary to compare a two factor model with surface and deep acting to a four factor model with surface and deep acting toward patients and coworkers. It became apparent that none of the models fit the data acceptably well. Therefore before proceeding further, I investigated the source of the misfit. One of the deep acting items “I generally tried to look at the positive side of things to change how I felt” demonstrated consistently low factor loadings. It seems likely that this item was not appropriate for the hospital setting due to the nature of the situations faced by nurses. Therefore, it was dropped from further consideration. Doing so improved the fit of each of the emotional labor models. In the adjusted models the four factor model fit the data better than the two factor deep and surface acting model ($\Delta\chi^2 = 27, \Delta df = 5, p < .01$) and the overall fit of the four factor model was acceptable (GFI = .87, RMR = .08). Once again separate models were fit for patients and coworkers. These two factor models fit the data exceptionally well and were significantly better than their single factor alternatives. The intercorrelations in Table 3 also indicate that each of the dimensions of display rules and emotional labor were distinct. Each of the measures was related, but none of the correlations were high enough to be worrisome. In summary, the findings confirmed that nurses differentiated display rules and acts of emotional labor toward patients from those toward coworkers.

In this study, display rules and emotional labor were conceptualized and justified at the nurse team level of analysis. A sound conceptual underpinning for the hypothesized direct consensus model of these group level variables is an important prerequisite for aggregating the individual level responses (Chan, 1998; Schneider & Bowen, 1985). It was also necessary to investigate whether the group level measures could be reliably differentiated between nurse work teams. One such measure is the interclass correlation (ICC(1)) from ANOVA analyses which indicates the proportion of variance that is accounted for by team membership. Another statistic of interest ICC(2) provides an estimate of the reliability of the group means, or the extent to which they can be reliably differentiated. Finally, the r_{wg} statistic provides an indication of within group agreement for the measure in question by comparing observed group variance to expected random variance. The established standards for acceptable values of ICC(1) and ICC(2) for each variable were compared to previous studies (Bliese, 2000; Williams & Anderson, 1991). It is worth noting that all of the respondents were professional nurses from a single organization. Therefore, it is likely that the ICC(1) and ICC(2) values were constrained by strong organizational and occupational norms (George, 1990). Nonetheless, r_{wg} values greater than 0.7 provide confirmation of the theoretical prediction that display rules and emotional labor are appropriate group-level constructs for these established teams (Schneider et al., 1998).

Group-level display rules. There was relatively consistent evidence in support of aggregating display rules for positive and negative display rules toward patients and coworkers at the group level. The ICC(1) values ranged from 0.15 for display rules for

positive emotions toward patients to 0.05 for display rules for negative emotions toward coworkers. This suggests that group membership accounted for a meaningful proportion of the variance in display rules and is in line with typical values in organizational research. In addition, there was significant between group variance in the display rules at the .10 level for each of the display rules except for negative display rules toward coworkers ($F(34,167) = 1.12, p = .18$). Each of these differences exceeded the relaxed criteria for single organization samples proposed by George (1990). The ICC(2) values ranged from 0.47 for positive display rules toward patients to 0.20 for display rules for negative emotions toward coworkers. These values are lower than the more stringent standards for scale reliabilities but are similar to values in previous research (e.g. Hoffman, Morgeson, & Gerras, 2003).

Within group agreement was also satisfactory for the display rule measures. Average r_{wg} values ranged from .91 for positive display rules toward patients to 0.69 for display rules for negative emotions toward patients. Agreement was a bit lower for the negatively valenced display rules. Negative display rules toward patients fell just below the originally proposed cutoff of .7 but still indicated moderate to strong agreement under the revised standards proposed by LeBreton and Senter (2008). Under these standards, an average r_{wg} between .9 and .71 indicates strong agreement and between .51 and .70 indicates moderate agreement. In summary, the interrater reliability and agreement measures indicate that direct consensus measures of display rules at the group level were appropriate. Therefore, these individual display rules were aggregated to form group level measures.

Group-level emotional labor. I also found positive evidence for the emergence of shared emotional labor in work teams. This was true for both deep and surface acting toward patients and coworkers. Interrater reliability and agreement was similar across each of the dimensions. ICC(1) values ranged from .17 for surface acting toward coworkers to 0.09 for surface acting toward patients. The between group variance was significant at the .05 level for each of the four dimensions. ICC(2) values ranged from .50 for surface acting toward coworkers to 0.33 for surface acting toward patients.

Within group agreement was also satisfactory for the display rule measures. Both surface acting toward patients ($r_{wg} = .61$) and toward coworkers ($r_{wg} = .67$) fell below .7 but still suggest relatively strong agreement within groups. As before, the interrater reliability and agreement measures suggested that direct consensus measures of display rules at the group level were appropriate. Therefore, the individual emotional labor measures were aggregated into group level variables using the group means. A summary of the aggregated group level variables for display rules and emotional labor and their intercorrelations is provided in Table 3.

Hypothesis Tests

Group level display rules and emotional labor. Hypothesis 1 predicted that there would be positive relationships between group level display rules and emotional labor toward patients and coworkers. Despite the relatively low power of the basic group level analyses, Table 3 provides positive evidence of the predicted relationships between display rules and emotional labor. Specifically, patient display rules for positive emotions were significantly related to deep acting ($r = .24, p < .01$) toward patients. Patient display

rules for negative emotions were significantly related to deep ($r = .38, p < .01$) and surface acting ($r = .50, p < .01$) toward patients. The relationships for coworker display rules were similar. Positive coworker display rules were significantly related to deep acting ($r = .46, p < .01$) and surface acting ($r = .19, p = .01$) toward coworkers. Negative emotion display rules were also significantly related to deep ($r = .34, p < .01$) and surface acting ($r = .41, p < .01$) toward coworkers. This suggests that nurse teams respond to coworker display rules for both positive and negative emotions with surface acting, but that surface acting toward patients is limited to suppressing or hiding negative emotions.

TABLE 3: Descriptive Statistics and Intercorrelations for Group Level Variables.

Variable	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8	9	10
1. Positive DR _{patient}	4.47	.29										
2. Negative DR _{patient}	3.65	.56	.38*									
3. Positive DR _{coworker}	4.01	.40	.55**	.18								
4. Negative DR _{coworker}	3.10	.53	.07	.71**	.28							
5. Deep Acting _{patient}	3.95	.42	.39*	.29†	.63**	.35*						
6. Surface Acting _{patient}	3.19	.53	.19	.63**	.17	.59**	.27					
7. Deep Acting _{coworker}	3.76	.48	.19	.20	.47**	.28	.84**	.34				
8. Surface Acting _{coworker}	3.13	.50	.08	.40*	.30†	.51**	.59**	.56**	.55**			
9. Shift	.71	.46	.01	-.20	-.04	-.19	-.11	-.10	-.13	.07		
10. Group Size	5.71	3.83	-.11	-.11	-.18	-.03	-.20	.01	-.05	-.07	-.01	
11. Tenure	3.19	2.40	-.32†	-.03	-.24	.20	-.22	.20	.20	.20	.18	.04

Note: Shift was coded 1 for day shift and 0 for night shift.

** = $p < 0.01$, * = $p < 0.05$, and † = $p < 0.10$

A series of hierarchical regressions on the group level variables were run in order to test Hypothesis 1. Separate models were run with each type and target of emotional labor as the dependent variable. In step one, the group level control variables (tenure and shift) were entered into the model and in step two group level display rules corresponding

to the target of emotional labor were entered (i.e. for deep acting toward patients positive and negative emotion display rules for patients but not for coworkers were entered).

Separate models were fit for patients and coworkers for the relationship between display rules and emotional labor. This was appropriate because nurses encounter and respond situations involving patients or coworkers separately. The results of these analyses are presented in Table 4.

TABLE 4: Hierarchical Regression Results for Group Level Variables

	Patients		Coworkers	
Dependent Variable	DA	SA	DA	SA
Independent Variable	B	B	B	B
Step 1	$R^2 = .05$	$R^2 = .06$	$R^2 = .06$	$R^2 = .03$
Group Tenure	-.04	.05	-.10	.04
Shift	-.07	-.17	-.04	.04
Step 2	$R^2 = .19$	$R^2 = .45$	$R^2 = .27$	$R^2 = .32$
Positive DR	.43	.04	.45*	.26
Negative DR	.12	.63**	.19	.46**

Note. Separate models were fit for patients and coworkers. $N = 35$ for each model.

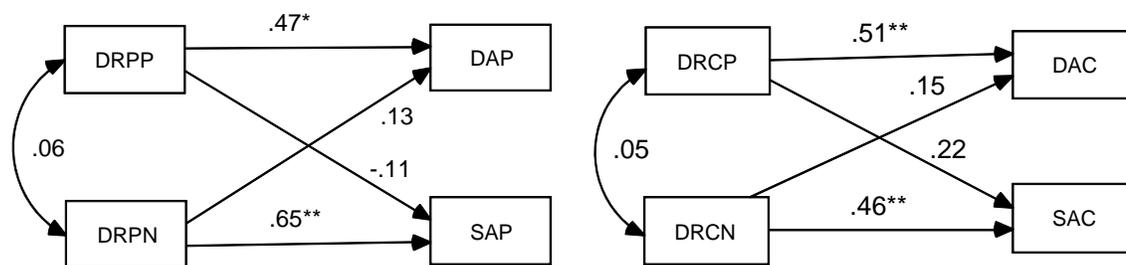
** = $p < 0.01$, * = $p < 0.05$

These results indicate that the control variables were not related to group level emotional labor. There were however significant relationships between group display rules and emotional labor. Positive emotion display rules were positively related to deep acting toward coworkers. Negative emotion display rules were positively related to surface acting toward patients and coworkers. These relationships were quite strong given the low power of these analyses including the control variables. Due to the low effect sizes and nonsignificant results for the control variables, I reanalyzed the models without

the control variables. The relationships between display rules and emotional labor were stronger and in addition to confirming the previous results, there was a marginally significant relationship between positive emotion display rules and deep acting toward patients ($B = .47, p = .07$).

In order to investigate this relationship further, path analysis was utilized because it allowed deep and surface acting to be modeled as simultaneous outcomes of display rules. The results are presented in Figure 4. These results confirmed the previous finding that display rules for positive emotions contributed to deep acting, while display rules for negative emotions led to increased surface acting. This was true for both patients and coworkers. In summary, group level display rules for specific types of emotional displays were related to unique types of group level emotional labor. Namely, display rules for positive emotions predicted deep acting while display rules for negative emotions predicted surface acting. Therefore, Hypothesis 1 received strong general support in that group level display rules were positively related to group level emotional labor.

FIGURE 2: Hierarchical Regression Results for Group Level Variables



Hypothesis 2 through 5 predicted multilevel relationships between group level emotional labor and individual level outcomes. Therefore, hierarchical linear modeling

(HLM) represented the most appropriate analytical approach for investigating these hypotheses (Bryk & Raudenbush, 1996; Hoffman et al., 2003). HLM is particularly well suited for the nested data of our sample and the cross-level interactions hypothesized here.

Emotional exhaustion. Hypothesis 2 predicted that group level emotional labor would have a direct relationship with emotional exhaustion. Therefore, in Model 1 (Table 5) the group level emotional labor variable were included at level 2 along with the level 2 control variables (group tenure and shift). Group level surface and deep acting toward patients had significant direct effects on emotional exhaustion but emotional labor toward coworkers did not. Deep acting toward patients demonstrated a negative effect on emotional exhaustion ($\gamma = -.63, p = .02$) while surface acting showed a positive effect ($\gamma = .41, p < .01$). These findings suggest that increased deep acting tended to reduce emotional exhaustion, while increased surface acting had the opposite effect. Therefore, Hypothesis 2a was supported for surface acting toward patients. Hypothesis 2b was not supported for deep acting toward patients because the relationship with emotional labor was in the opposite direction predicted. This was however was consistent with the original predictions of Grandy (2000) which have received mixed support in empirical studies (Bono & Vey, 2005). I will address this further in the discussion. Deep acting also showed a stronger effect on emotional exhaustion than surface acting contrary to Hypothesis 2b. Emotional labor directed toward coworkers did not demonstrate significant direct effects on emotional exhaustion, therefore Hypotheses 2a and 2b were not supported for surface and deep acting respectively toward coworkers.

TABLE 5: HLM Results for Hypotheses 2 and 3 Regarding Emotional Exhaustion

Fixed Effects	γ_{00}	γ_{01}	γ_{02}	γ_{DRCM}	γ_{11}	γ_{12}	γ_{13}	γ_{14}	γ_{DAP}	γ_{SAP}	γ_{DAC}	γ_{SAC}
Model 1												
L1: EMOEX = $\beta_0 + r$												
L2: $\beta_0 = \gamma_{00} + \gamma_{01} \text{TENURE} + \gamma_{02} \text{SHIFT} + \gamma_{DAP} \text{DAP} + \gamma_{SAP} \text{SAP} + \gamma_{DAC} \text{DAC} + \gamma_{SAC} \text{SAC} + U_0$	3.15**	.04	-.08						-.57*	.35**	.23	-.10
Model 2												
L1: EMOEX = $\beta_0 + r$												
L2: $\beta_0 = \gamma_{00} + \gamma_{01} \text{TENURE} + \gamma_{02} \text{SHIFT} + \gamma_{DAP} \text{DAP} + \gamma_{SAP} \text{SAP} + \gamma_{DAC} \text{DAC} + \gamma_{SAC} \text{SAC} + U_0$	3.14**	.04	-.08	-.28**	-.43	.57*	.25	-.38*	-.57*	.36**	.22	-.10
L2: $\beta_1 = \gamma_{DRCOM} + \gamma_{11} \text{DAP} + \gamma_{12} \text{SAP} + \gamma_{DAC} \text{DAC} + \gamma_{SAC} \text{SAC} + U_1$												

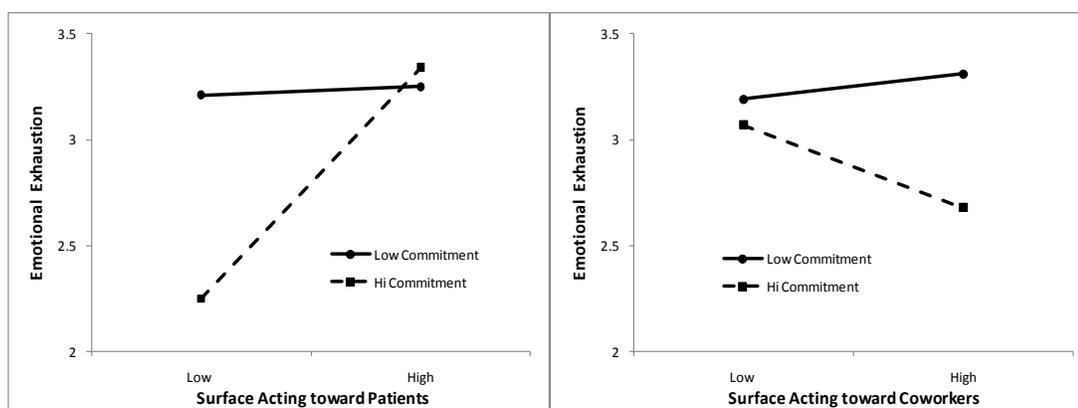
Note. $N_{L1} = 202$. $N_{L2} = 35$. EMOEX = emotional exhaustion; TENURE=average team tenure; SHIFT=1 for day shift, 0 for night shift; DAP = group deep acting toward patients; SAP = group surface acting toward patients; DAC = group deep acting toward coworkers; SAC = group surface acting toward coworkers; DRCM = display rule commitment; ** = $p < 0.01$ and * = $p < 0.05$

Hypothesis 3 predicted that individual display rule commitment would moderate the relationship between emotional labor and emotional exhaustion. Therefore, in Model 2 display rule commitment was included at level 1 and the cross level interactions with group level emotional labor were included at level 2. Display rule commitment showed a significant negative relationship with emotional exhaustion ($\gamma = -.28, p < .01$). The results also demonstrated significant interactions between display rule commitment and emotional labor in predicting emotional exhaustion. Specifically, surface acting toward patients ($\gamma = .57, p = .02$), and surface acting toward coworkers ($\gamma = -.38, p = .04$) were moderated by commitment. When the cross-level interactions were included in the model, the main effects of emotional labor toward patients remained significant.

In order to interpret these interactions, the relationships were plotted for high and low levels of display rule commitment and included in Figure 3. The left graph of Figure 3 shows that individuals with higher display rule commitment were more affected by

surface acting toward patients than were less committed nurses. When more committed nurses utilized greater surface acting toward patients they also became more emotionally exhausted. The right graph in Figure 2 suggests that display rule commitment had a divergent effect on the relationship between surface acting toward coworkers and emotional exhaustion. When commitment was low, increased surface acting toward coworkers increased emotional exhaustion. In contrast, when commitment was high increased surface acting toward coworkers decreased emotional exhaustion. In summary, Hypothesis 3 was supported only for surface acting toward patients. Display rule commitment also moderated the relationship between surface acting toward coworkers and emotional exhaustion but in manner contrary to that predicted. There was no evidence of a moderating effect for deep acting toward patients or coworkers.

FIGURE 3: Display Rule Commitment as a Moderator of the Relationship between Emotional Labor and Emotional Exhaustion



Job satisfaction. Hypothesis 4a predicted that emotional labor would have negative consequences for job satisfaction. Hypothesis 5a predicted that this effect would be mediated by emotional exhaustion. Table 6 presents the results of HLM models to test

these predictions. In Model 1 display rule commitment was entered as a level 1 control variable and group tenure and shift were entered as level 2 controls. The group emotional labor variables were entered at level 2. The results show that among the emotional labor variables, only surface acting toward coworkers ($\gamma = -.25, p = .09$) had a marginally significant direct effect on job satisfaction such that increased surface acting decreased job satisfaction. Therefore Hypothesis 4a was only partially supported.

TABLE 6: HLM Results for Hypotheses 4a and 5a for Job Satisfaction.

Fixed Effects	γ_{00}	γ_{01}	γ_{02}	γ_{EE}	γ_{DRCM}	γ_{DAP}	γ_{SAP}	γ_{DAC}	γ_{SAC}
Model 1									
L1: $JSAT = \beta_0 + \beta_2 DRCM + r$	4.01**	-.05*	.07		.35**	.15	-.14	.15	-.25†
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									
Model 2									
L1: $EMOEX = \beta_0 + \beta_1 EMOEX + \beta_2 DRCM + r$	4.04**	-.04*	.02	-.35**	.28**	-.02	.00	.18	-.29*
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									

Emotional exhaustion was included at level 1 in Model 2. Emotional exhaustion showed a significant negative effect on job satisfaction ($\gamma = -.35, p < .01$). Including emotional exhaustion did not reduce the direct effect of surface acting toward coworkers ($\gamma = -.29, p = .02$) on job satisfaction. Therefore emotional exhaustion did not mediate the effect of surface acting on job satisfaction, and Hypothesis 5a was not supported. Separate models found that there were no significant interactions between emotional labor and display rule commitment in predicting job satisfaction.

Organizational commitment. Next I tested the relationships between emotional labor and organizational commitment predicted by Hypotheses 4b and 5b using the same

methodological approach and the results are presented in Table 7. Similar to the results for job satisfaction, Model 1 indicated that only group surface acting toward coworkers showed a marginally significant negative relationship ($\gamma = -.34, p = .06$) with organizational commitment. Model 2 shows that including individual emotional exhaustion ($\gamma = -.30, p < .01$) in the model, did not reduce this effect ($\gamma = -.36, p = .03$). Once again, this indicates that exhaustion did not mediate the effect of group level surface acting toward coworkers on organizational commitment. Separate models found that there were no significant interactions between emotional labor and display rule commitment in predicting organizational commitment. Hypothesis 4b received only partial support for surface acting toward coworkers. Hypothesis 5b was not supported.

TABLE 7: HLM Results for Hypotheses 4b and 5b for Organizational Commitment

Fixed Effects	γ_{00}	γ_{01}	γ_{02}	γ_{EE}	γ_{DRCM}	γ_{DAP}	γ_{SAP}	γ_{DAC}	γ_{SAC}
Model 1									
L1: $ORGCOR = \beta_0 + \beta_2 DRCM + r$	3.40**	.02	-.01		.30**	.20	-.14	.07	-.34†
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									
Model 2									
L1: $ORGCOR = \beta_0 + \beta_1 EMOEX + \beta_2 DRCM + r$	3.39**	.03	-.02	-.30**	.24**	.04	-.04	.12	-.36*
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									

Turnover intentions. I investigated the effects of group level emotional labor on turnover intentions predicted by Hypotheses 4c and 5c in the same way as before and the results are presented in Table 8. Model 1 revealed that the pattern of relationships between emotional labor and turnover intentions was quite different than for job

satisfaction and organizational commitment. Surface acting toward patients had a significant positive effect ($\gamma = .41, p = .02$) on turnover intentions indicating that increased surface acting was related to greater intent to leave the organization. Deep acting toward coworkers demonstrated a marginally significant negative effect ($\gamma = -.39, p = .06$) on turnover intentions. This suggested that higher levels of group deep acting within work teams reduced turnover intentions. Separate models found that there were no significant interactions between emotional labor and display rule commitment in predicting turnover intentions. Once again, Hypothesis 4c was partially supported because only surface acting toward patients impacted turnover intentions in the predicted manner. Deep acting toward coworkers had a meaningful relationship with turnover intentions, but the effect was in the opposite direction predicted. Deep acting toward patients and surface acting toward coworkers were not related to turnover intentions in this study.

Model 2 shows that including emotional exhaustion in the group level model produced a significant positive effect of emotional exhaustion on turnover intentions ($\gamma = .30, p < .01$) and the effect of surface acting toward patients was substantially reduced and no longer significant ($\gamma = .35, p < .01$). Previous results demonstrated that surface acting toward patients had a significant relationship with emotional exhaustion ($\gamma = .41, p = .02$). Therefore, there was evidence that emotional exhaustion mediated the relationship between surface acting toward patients and turnover intentions. The effect of deep acting toward coworkers was not affected by the inclusion of emotional exhaustion ($\gamma = -.35, p =$

.06) indicating that emotional exhaustion did not mediate its relationship with turnover intentions. Therefore, Hypothesis 5c was partially supported.

TABLE 8: HLM Results for Hypotheses 4c and 5c for Turnover Intentions

Fixed Effects	γ_{00}	γ_{01}	γ_{02}	γ_{EE}	γ_{DRCM}	γ_{DAP}	γ_{SAP}	γ_{DAC}	γ_{SAC}
Model 1									
L1: $TOI = \beta_0 + \beta_2 DRCM + r$	1.87**	-.03	.17		-.32**	.00	.41*	-.39†	.14
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									
Model 2									
L1: $TOI = \beta_0 + \beta_1 EMOEX + \beta_2 DRCM + r$	1.91**	-.03	.12	.23**	.27**	.05	.26	-.35†	.22
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									

Job performance. Next I investigated the predictions of Hypotheses 6a and 7a that group level emotional labor would have a negative effect on job performance but that this relationship would be moderated by emotional exhaustion. The analyses were carried out in the same manner as for job attitudes. Table 9 presents the results.

Model 1 showed a significant positive effect for deep acting toward patients ($\gamma = .49, p < .02$) on supervisor rated job performance. There was also a marginally significant effect for deep acting toward coworkers ($\gamma = -.24, p = .10$). These results suggested that deep acting toward patients was associated with improved performance, but surprisingly deep acting toward coworkers may have been associated with lower performance. Hypothesis 6a was not supported because the effect for deep acting toward patients was in the opposite direction predicted. The effect for deep acting toward coworkers was in the direction predicted but was only marginally significant. Surface acting toward

patients and coworkers was not related to performance. Model 2 indicated that emotional exhaustion was not related to job performance ratings. Therefore, Hypothesis 7a was not supported. Separate models found that there were no significant interactions between emotional labor and display rule commitment in predicting job performance.

TABLE 9: HLM Results for Hypotheses 6a and 7a for Job Performance

Fixed Effects	γ_{00}	γ_{01}	γ_{02}	γ_{EE}	γ_{DRCM}	γ_{DAP}	γ_{SAP}	γ_{DAC}	γ_{SAC}
Model 1									
L1: $PERF = \beta_0 + \beta_2 DRCM + r$	4.28**	.01	.09		.16 ^c	.49**	.01	-.24†	.01
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									
Model 2									
L1: $PERF = \beta_0 + \beta_1 EMOEX + \beta_2 DRCM + r$	4.28**	.02	.09	.02	.17*	.50**	.01	-.24	.01
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAP} DAP + \gamma_{SAP} SAP + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$									
L2: $\beta_1 = \gamma_{EE} + U_1 \quad \beta_2 = \gamma_{DRCM} + U_2$									

Organizational citizenship behaviors. Finally I explored the effects of group level emotional labor on OCBs predicted by Hypotheses 6b and 7b. Because OCBs are by definition directed toward coworkers, only emotional labor toward coworkers was included in the analyses which are presented in Table 10. Model 1 shows that none of the group level measures produced a significant direct effect on OCBs. Model 2 found that individual level emotional exhaustion had a significant effect ($\gamma = .09, p = .05$) but the effects of emotional labor remained nonsignificant. Therefore, no support was found for either Hypothesis 6b or 7b.

TABLE 10: HLM Results for Hypotheses 6b and 7b for OCBs

Fixed Effects	γ_{00}	γ_{01}	γ_{02}	γ_{EE}	γ_{DRCM}	γ_{DAC}	γ_{SAC}
Model 1							
L1: $OCB = \beta_0 + \beta_2 DRCM + r$	3.63**	-.01	.18		.10	.04	.08
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$							
L2: $\beta_1 = \gamma_{EE} + U_1; \quad \beta_2 = \gamma_{DRCM} + U_2$							
Model 2							
L1: $OCB = \beta_0 + \beta_1 EMOEX + \beta_2 DRCM + r$	3.63**	-.01	.19†	.09*	.12†	.06	.06
L2: $\beta_0 = \gamma_{00} + \gamma_{01} TENURE + \gamma_{02} SHIFT + \gamma_{DAC} DAC + \gamma_{SAC} SAC + U_0$							
L2: $\beta_1 = \gamma_{EE} + U_1; \quad \beta_2 = \gamma_{DRCM} + U_2$							

CHAPTER 5

DISCUSSION

These results provide a number of important contributions. For one, they demonstrated a measure of support for the conceptualization of display rules and emotional labor at the group level. Display rules have long been conceptualized as a higher level construct (Cropanzano et al., 2004; Hochschild, 1979). This study continues a trend toward operationalizing display rules at the work group level (Diefendorff et al., 2008) and demonstrates the viability and utility of doing so. The results of this study also suggest that the distinction between integrative display rules for positive and negative emotions is valid at the group level as well as the individual level.

This study is the first to draw on relatively new paradigms from organizational neuroscience to conceptualize and investigate emotional labor at the group level (Becker & Cropanzano, in press). This is consistent with the formulation of the social aspects and nature of deep and surface acting by Gross (1998a). I elaborated on how nonconscious processes provide a mechanism by which groups could develop norms not only in terms of the display rules for emotional displays but also in the preferred methods for complying with those display rules. The results for these mature teams that interacted closely found considerable agreement within groups and substantial differences between groups even when these groups were part of the same departments.

In addition, this study is one of the first to take up an important conceptual element of early frameworks of emotional labor and investigate specific targets of emotional displays (Hochschild, 1979). Early theoretical development of emotional labor

recognized that employees were required to manage their emotions toward both customers and coworkers (Grandey, 2000; Hochschild, 1983). This study builds on recent efforts to extend emotional labor research to coworkers as well as customers (Diefendorff & Greguras, 2009). The results of this study demonstrated that there were unique, if related, display rules for patients and coworkers. Further, these display rules led to distinguishable emotional labor directed toward both customers and coworkers. Moreover, the display rules and emotional labor for specific targets demonstrated unique relationships with a number of the other study variables.

The results indicated significant positive relationships between group level display rules and emotional labor as predicted by Hypothesis 1. Specifically, integrative display rules for positive emotions were positively related to deep acting, while those for negative emotions were related to surface acting. This suggests that at the group level, nurses responded to expectations for expressing positive emotions with deep acting. In contrast, they complied with expectations to mask or minimize negative emotions by surface acting. These relationships held for displays toward both patients and coworkers. While the distinction between integrative display rules for positive and negative emotions has frequently been made, this is one of the first studies to report different relationships for the two types of integrative rules.

The group level measures of emotional labor demonstrated some important consequences for individual attitudes and behaviors. Hypotheses 2a and 2b predicted that emotional labor would be positively related to emotional exhaustion. Hypothesis 3 predicted that display rule commitment would moderate this relationship such that low

commitment would strengthen the positive relationship between emotional labor and exhaustion. The results indicated that only deep and surface acting toward patients contributed directly to emotional exhaustion and suggested that emotional exhaustion was more closely related to nurses' interactions with patients than with coworkers.

In this study, increased group level deep acting toward patients reduced emotional exhaustion. This finding was contrary to the direction of the relationship between deep acting and exhaustion predicted by Hypothesis 2b but was consistent with the original conceptualization of emotional labor (Grandey, 2000). In the study, the beneficial effect of increased deep acting was stronger than the negative effect of increased surface acting. This study predicted that previously untested moderating effect of display rule commitment may help to explain the mixed findings in other studies. This moderating effect did not explain the observed beneficial effect of deep acting toward patients as there was not a significant interaction with display rule commitment. The predicted moderating effect of commitment on the relationship between surface acting toward patients was observed however and nurses who were more committed became much more exhausted due to surface acting than did less committed nurses.

The result for the moderating influence of commitment on the relationship between surface acting toward coworkers and emotional exhaustion was particularly interesting despite not being in the predicted direction. For committed nurses there was a negative relationship between surface acting and exhaustion. This indicated that higher levels of surface acting actually reduced emotional exhaustion. This is consistent with one of the functions of display rules and emotional labor proposed by Cropanzano et al.

(2004). They suggested that emotional displays can be regulated in order to promote group harmony. It follows that more committed nurses could perceive the positive group displays more favorably even if those displays are achieved through surface acting. This favorable perception of intragroup relations could translate to reduced stress and lower emotional exhaustion.

Hypotheses 4 and 5 predicted that emotional exhaustion resulting from emotional labor would have consequences for important job attitudes through their relationship with emotional exhaustion. These predictions received only partial support. The findings consistently indicated that the effects of group level emotional labor on job attitudes and behaviors were not mediated by emotional exhaustion. The only positive evidence of the predicted mediation was for the relationship between surface acting toward patients and turnover intentions. This was attributable to the finding that in general emotional labor toward patients was related to emotional exhaustion, while emotional labor toward coworkers was related to job attitudes. Therefore, the predicted chain of events for mediation was not present.

Instead, the findings suggest a heretofore unexplored conclusion. Distinct, integrative display rules for patients and coworkers existed and produced emotional labor. However, emotional labor toward different targets impacted job outcomes in different ways. In short, a greater reliance on surface acting toward patients produced greater emotional exhaustion, especially for more committed nurses. In contrast, a greater reliance on surface acting between coworkers had a deleterious effect on both job satisfaction and organizational commitment. Turnover intentions produced slightly

different effects which may have resulted because the items tapped a deeper level attitude toward the team and organization. Deep acting toward coworkers had a negative effect on turnover intentions. This would be consistent with the argument based on the COR framework that groups that develop more genuine relations provide greater social support within the group (Hobfoll, 1989). In general, job attitudes were shaped by the way in which group members treated each other. In particular, groups where faking was the dominant means of complying with display rules suffered as a result. On the contrary, groups that relied more heavily on deep acting for intragroup relations benefitted.

The results were slightly different for job behaviors. Group level emotional labor was predicted to influence job performance and OCBs through its effect on emotional exhaustion. However, no evidence materialized of a mediating role for emotional exhaustion between emotional labor and job performance or OCBs. In fact, emotional exhaustion did not show a significant effect on job performance at all. Nonetheless, group level deep acting toward patients and coworkers demonstrated direct effects on job performance. Specifically, being part of a group that utilized a high level of deep acting toward patients was beneficial to one's performance rating. This suggested that nurse teams that developed a high deep acting norm provided better patient care that was perceived by managers. This finding is consistent with Grandey's (2000) prediction that more genuine emotional displays would be received more favorably.

The weak negative direct effect of deep acting toward coworkers on job performance ratings is slightly more puzzling in light of the beneficial effects of deep acting found elsewhere in the study. The predicted effect drew on the COR framework to

connect emotional labor to emotional exhaustion to job performance. The results did not support either the link between deep acting toward coworkers nor between emotional exhaustion and performance. Therefore, the causal order between deep acting toward coworkers and job performance was suspect. An alternative explanation could be that both were related through a third unobserved variable. For example, more demanding managers may have rated their nurses more harshly and caused nurses in these workgroups to band together for greater social support. This interesting possibility presents an intriguing direction for future research.

Group level emotional labor showed no effects on OCBs. It may be that performing OCBs was an individual choice and less subject to the development of norms. A model which replaced group level emotional labor with individual level emotional labor found a significant positive effect for deep acting toward coworkers ($\gamma = .09, p = .01$) that was not mediated by emotional exhaustion. This suggested that individual nurses who expressed more genuine more emotional displays toward coworkers were more likely to perform OCBs, regardless of whether these acts were reciprocated within the work team.

Lastly, I will comment on the general results for display rule commitment. This study provided an important contribution by confirming and extending the recent finding regarding the importance of display rule commitment in explaining the outcomes of display rules (Gosserand & Diefendorff, 2005). Since commitment is thought to capture the motivational aspect of emotional labor, it was conceptualized at the individual level as an important moderator between emotional labor and the outcomes of emotional labor.

This direction is also consistent with early suggestions that the internal connectedness to emotional displays was an important determinant of the effects of surface and deep acting (Hochschild, 1983). Display rule commitment consistently showed significant direct positive effects as well as interactions with emotional labor to predict emotional exhaustion. The results indicate that when commitment was high increasing deep acting and reducing surface acting had the greatest benefit for reducing exhaustion. In addition, rule commitment showed a beneficial direct effect on each of the measured job outcomes except for OCBs.

Future Research Directions and Practical Implications

The results of this study provided a number of important theoretical implications and directions for future research. For one this study was the first to conceptualize and find evidence that emotional labor can emerge at the group level. This initial finding will need to be replicated in different types of work teams and in different settings in order to determine the boundary conditions under which group level emotional labor is likely to emerge. The teams in this study were unique in the maturity of the groups and the level of interaction among team members. These conditions were extremely favorable for the development of group norms through conscious and nonconscious mechanisms (Kozlowski & Bell, 2003; Opp, 2002).

In addition, this study confirmed the utility of considering different targets of display rules and emotional labor that are relevant to the situation under study (in this case, patients and coworkers). Further, the results indicated that emotional labor toward different targets produced quite different outcomes for the individual. Here, emotional

labor toward patients was more closely related to emotional exhaustion, while emotional labor toward coworkers was more closely related to job attitudes. Failing to consider different targets of emotional labor may account for some of the mixed findings from previous studies (Bono & Vey, 2005). Future studies should consider this issue carefully.

This study also found that different types of integrative display rules were related to different types of emotional labor. As far as I could ascertain, this result has not been previously reported in the literature. Diefendorff and Greguras (2009) used a different approach to emotional management but found somewhat similar results in that employees were more likely to suppress or neutralize negative emotions than positive emotions. Future research should confirm these empirical findings and develop a sound theoretical rationale for why display rules for different types of emotions are likely to evoke different types of emotional labor strategies.

These findings also have important practical implications for managers. Commitment to display rules demonstrated a positive effect on important individual and job outcomes. Greater commitment contributed directly to lower emotional exhaustion. It also moderated the relationship between surface acting and emotional exhaustion in a beneficial manner. Increased commitment was also positively related to increased job satisfaction, organizational commitment, and job performance and lower turnover intentions. In addition, higher group level deep acting toward patients had a beneficial impact on emotional exhaustion and job performance. Greater group deep acting within groups reduced turnover intentions. This suggests that in situations where strong display rules and high emotional labor are a necessary or desired facet of the job from the

organization's perspective, managers can blunt the potentially negative impact on employee well being by building commitment to the required displays. If work teams exist, they should also actively seek to help groups develop norms for greater deep acting and reduced surface acting. Totterdell and Parkinson (1999) have shown that it is possible to train individuals to employ different emotional labor strategies and extending this to actively influencing group emotional labor norms may have promise.

Limitations

The current study also had several potential limitations. For one, there were relatively few work groups available and a number of these groups had few members. Therefore, the power of the study to distinguish significant group level relationships was relatively low. This suggests that the direct effects found and reported in the current study results were particularly strong. However other weaker but meaningful group effects likely existed but were not detectable within the current study. For example, the relationship between deep acting toward coworkers and exhaustion showed a reasonable positive effect size, but its confidence remained just below marginally significant levels.

An additional weakness was that the study investigated a single organization. Even though there was significant within group agreement strong organizational norms for customer service likely limited the between group differences for the group level variables (George, 1990). Given the strong patient centered culture of nursing these norms likely impacted display rules and emotional labor toward patients more than toward coworkers. To illustrate this point the r_{wg} values for the entire sample were calculated for several of the display rule measures. The agreement for display rules for

positive emotions toward patients (most likely to have strong organizational norm) was strong ($r_{wg} = .90$), while that for negative emotions toward coworkers (less likely to have strong organizational norm) was only moderate ($r_{wg} = .66$). Nonetheless, these limitations would have reduced the ability to detect group level effects. Therefore it is encouraging that this study produced a number of meaningful group level findings. In addition, the organizational setting of this study was an extremely relevant one for studying emotional labor. Future research that examined multiple organizations would be able to resolve this issue and simultaneously explore group and higher level influences on display rules and emotional labor.

I also acknowledge several limitations of the field study data collection approach. For one, the cross sectional nature of the study did not allow us to be sure of the temporal order and direction of causality between the observed variables. This was of greater concern for the more distal outcome variables such as job satisfaction, as previous studies have approached the question from the opposite point of reference and investigated the effect of job satisfaction on emotional labor (Bono & Vey, 2005). The predicted mediating link between emotional labor and job outcomes was not found. This broke the theoretical logic linking emotional labor to the outcomes variables. Without this linkage, it seems likely that a direct relationship between the outcome variables and emotional labor would be recursive. Being unsatisfied could lead to increased surface acting which could lead to becoming less satisfied, producing a downward spiral of attitudes and behaviors. A future longitudinal study would help to resolve this shortcoming and could significantly advance our understanding of the relationship between emotional labor and

job outcomes. In addition, the survey method used to collect the majority of the study variables introduces the potential for common method bias to distort the findings of the study (Podsakoff, MacKenzie, Lee, & Podsakoff, 2003). However, the relative diversity of the findings and the supportive findings for the objective manager reported variables alleviate these concerns to some extent. Limitations on the length of the survey also prevented me from collecting several other variables that may have been of interest such as size of work team, frequency of interaction, and social ties.

CHAPTER 6

CONCLUSIONS

This purpose of this study was to explore an expanded conceptualization of group emotional display rules in a field setting for an occupation with high emotional demands and relatively interdependent teams. The findings of this study demonstrated that group level display rules and emotional labor can evolve and have important consequences for work outcomes at the individual level. The results suggested that researchers should consider a richer conceptualization of emotional labor that considers the targets of emotional labor as well as the potential for group level emergence of emotional labor. From a practical perspective, these findings suggest that, while group norms for display rule commitment can develop naturally, managers should also help newly formed work teams develop positive display rule and emotional labor norms. Also, managers should also strive to develop commitment to necessary emotional displays in order to improve employee well being as well as organizational outcomes.

APPENDIX A
NURSE SURVEY

To what extent are you **expected** to do the following when dealing with a **patient** or **family member**...?

	Almost Never	Rarely	Once in a While	Often	Very Frequently
1. Reassure people who are distressed or upset.	1	2	3	4	5
2. Remain calm even when you are overwhelmed.	1	2	3	4	5
3. Express feeling of sympathy (e.g. saying you understand).	1	2	3	4	5
4. Express friendly emotions.	1	2	3	4	5
5. Hide your anger or disapproval about something someone has done.	1	2	3	4	5
6. Hide your disgust over something someone has done.	1	2	3	4	5
7. Hide your fear of someone who appears threatening.	1	2	3	4	5

Think of a time in the last two weeks when you experienced strong or conflicting emotions when dealing with a **patient** or **family member**... to what extent did you do the following?

	Almost Never	Rarely	Once in a While	Often	Very Frequently
8. I faked my feelings.	1	2	3	4	5
9. I tried to keep my feelings from interfering too much.	1	2	3	4	5
10. I generally tried to look at the positive side of things to change how I felt.	1	2	3	4	5
11. I attempted to focus on happier things.	1	2	3	4	5
12. I tried to see things from the other person's point of view	1	2	3	4	5
13. I tried to reinterpret what people said or did so that I didn't take their actions personally.	1	2	3	4	5
14. I let my feelings out somehow.	1	2	3	4	5
15. I expressed inappropriate feelings to the person(s) involved	1	2	3	4	5

To what extent are you **expected** to do the following when dealing with **coworkers**...?

	Almost Never	Rarely	Once in a While	Often	Very Frequently
16. Reassure people who are distressed or upset.	1	2	3	4	5
17. Remain calm even when you are overwhelmed.	1	2	3	4	5
18. Express feeling of sympathy (e.g. saying you understand).	1	2	3	4	5
19. Express friendly emotions.	1	2	3	4	5
20. Hide your anger or disapproval about something someone has done.	1	2	3	4	5
21. Hide your disgust over something someone has done.	1	2	3	4	5
22. Hide your fear of someone who appears threatening.	1	2	3	4	5

Think of a time in the last two weeks when you experienced strong or conflicting emotions when dealing with a **coworker**... to what extent did you do the following?

	Almost Never	Rarely	Once in a While	Often	Very Frequently
23. I faked my feelings.	1	2	3	4	5
24. I tried to keep my feelings from interfering too much.	1	2	3	4	5
25. I generally tried to look at the positive side of things to change how I felt.	1	2	3	4	5
26. I attempted to focus on happier things.	1	2	3	4	5
27. I tried to see things from the other person's point of view	1	2	3	4	5
28. I tried to reinterpret what people said or did so that I didn't take their actions personally.	1	2	3	4	5
29. I let my feelings out somehow.	1	2	3	4	5
30. I expressed inappropriate feelings to the person(s) involved	1	2	3	4	5

Indicate the degree to which you agree or disagree with each of the following statements.

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
31. Quite frankly, I don't care if I display the organizationally expected emotions on the job or not.	1	2	3	4	5
32. I am committed to displaying the organizationally expected emotions on the job.	1	2	3	4	5
33. It wouldn't take much to make me ignore the requirement for displaying the organizationally expected emotions on the job.	1	2	3	4	5
34. I think displaying the organizationally expected emotions on the job is beneficial for patients and coworkers.	1	2	3	4	5
35. This job denies me any chance to use my personal initiative or judgment in carrying out the work.	1	2	3	4	5
36. My job affords me the opportunity to evaluate patient care myself	1	2	3	4	5
37. This job gives me considerable opportunity for independence and freedom in how I do the work.	1	2	3	4	5
38. There are days that I feel tired before I arrive at work.	1	2	3	4	5
39. After work, I tend to need more time than in the past in order to relax and feel better.	1	2	3	4	5
40. I can tolerate the pressure of my work very well.	1	2	3	4	5
41. During my work, I often feel emotionally drained.	1	2	3	4	5
42. After working, I have enough energy remaining for my leisure activities	1	2	3	4	5
43. My team values my contribution to its effectiveness.	1	2	3	4	5
44. Help is available from my team when I have a problem.	1	2	3	4	5
45. My team strongly considers my goals and values.	1	2	3	4	5
46. Given the opportunity, my team would take advantage of me.	1	2	3	4	5
47. My team cares about my well-being.	1	2	3	4	5
48. I really feel as if this team's problems are my own.	1	2	3	4	5

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
49. I think that I could as easily become attached to another team as I am to this one.	1	2	3	4	5
50. I do not feel "emotionally attached" to my team.	1	2	3	4	5
51. I intend to leave this team within the next year.	1	2	3	4	5
52. I would leave this team if an opportunity was available to join another team.	1	2	3	4	5
53. I would like to remain with this team indefinitely.	1	2	3	4	5
54. All in all, I am satisfied with my job.	1	2	3	4	5
55. In general, I don't like my job.	1	2	3	4	5
56. In general, I like working here.	1	2	3	4	5
57. This hospital has a great deal of personal meaning for me.	1	2	3	4	5
58. I really feel as if this hospital's problems are my own.	1	2	3	4	5
59. I do not feel a strong sense of belonging to the hospital.	1	2	3	4	5
60. This hospital has a great deal of personal meaning for me.	1	2	3	4	5
61. I intend to leave this hospital within the next year.	1	2	3	4	5
62. I would leave my job if a position were available at another hospital.	1	2	3	4	5
63. I intend to remain with this hospital indefinitely.	1	2	3	4	5

Job Title: RN / LPN / NA (circle one)

Department: _____

Work Team: _____

Shift: _____

Gender: _____

Age: _____

Number of Years with SAVAHCS: _____

Number of Years nursing experience: _____

Highest Degree earned: _____

APPENDIX B

SUPERVISOR SURVEY

Below is a series of statements that describe both positive and negative employee behaviors. Please rate the above employee using the indicated scale.

	Never	Rarely	Once in a While	Often	Always
1. Adequately completes assigned duties.	1	2	3	4	5
2. Meets formal performance requirements of the job.	1	2	3	4	5
3. Neglects aspects of the job he/she is obligated to perform.	1	2	3	4	5
4. Treats patients with dignity and respect.	1	2	3	4	5
5. Goes beyond what is expected to enhance patient care.	1	2	3	4	5
6. Helps others who have heavy workloads.	1	2	3	4	5
7. Assists supervisor with his/her tasks without being asked.	1	2	3	4	5
8. Takes time to listen to co-workers problems and worries.	1	2	3	4	5
9. Takes a personal interest in other employees.	1	2	3	4	5
10. Takes undeserved work breaks.	1	2	3	4	5
11. Gives advance notice when unable to come to work.	1	2	3	4	5
12. Complains about insignificant things at work.	1	2	3	4	5
13. Adheres to informal rules devised to maintain order and efficiency.	1	2	3	4	5

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