Research Progress on the Relationship between Emotional Labor, Organizational Commitment, and Work Engagement of Clinical Nurses

Xuewei Chen[1], Xiangxu Meng[1], Na Gao[1], Mingyue Yang[1], Ying Yang[1], Xuan Shen[1], Yingzi Yuan[1], Ying Zhang[2]*

[1]School of Nursing, Hangzhou Normal University, Hangzhou 311222, Zhejiang Province, China
[2]Department of Intensive Care Medicine, Hangzhou Normal University, Hangzhou 311222, Zhejiang Province, China

Corresponding author: Ying Zhang, youdianhz@163.com

Abstract: This paper reviews the concepts of emotional labor, organizational commitment, and work engagement among nurses. By integrating motivation theory, social exchange theory, and the job demands-resources model, it elaborates on the current research status and theoretical support for the interrelationships between these concepts in pairs. Through these theoretical frameworks, the paper explores potential causal relationships between emotional labor, organizational commitment, and work engagement, proposing that organizational commitment may mediate the relationship between emotional labor and work engagement. This study provides insights into the complex dynamics of emotional management, organizational identification, and work engagement in nursing, laying a foundation for further research in this domain.

Keywords: Clinical nurses; Emotional labor; Work engagement; Organizational commitment

1. Introduction

In the fast-paced healthcare environment, clinical nurses, as indispensable members of the healthcare team, play critical roles in delivering high-quality medical care to patients. However, the increasing complexity of healthcare services and the diversification of patient needs have intensified work pressures and emotional burdens for clinical nurses. Emotional labor, as a significant job demand, profoundly impacts nurses' work engagement and organizational commitment.

Understanding the relationships between emotional labor, work engagement, and organizational commitment among clinical nurses is essential in this context. Despite its importance, few studies have examined the interplay among these three factors, leaving knowledge gaps that require further exploration. Accordingly, this paper

seeks to systematically review the relationships between emotional labor, work engagement, and organizational commitment among clinical nurses, offering a comprehensive understanding of these interrelated concepts.

2. Conceptual framework

2.1. Concept and content of emotional labor

The concept of emotional labor was initially introduced by Hochschild [1], referring to the process by which employees regulate their facial expressions, tone of voice, and gestures during interactions with customers to display appropriate emotions. Due to the nature of their profession, many employees are constrained by rules dictating emotional expression, permitting only the display of emotions deemed acceptable by the organization or customer during interactions. Ashforth and Humphrey [2] defined emotional labor as the act of employees displaying emotions that align with organizational requirements, thereby effectively enhancing the social perception of a particular organization. Morris and Feldman [3] further refined this definition, stating that "emotional labor involves the effort, planning, and control required by employees to express the emotions expected by the organization." Grandey [4] conceptualized emotional labor as a psychological adjustment process through which individuals ultimately display emotions aligned with organizational expectations.

Although emotional labor is closely associated with the service industry, it is not limited to that sector and is frequently observed in the nursing profession. Badolamenti *et al.* [5] suggest that emotional labor should be regarded as a core nursing skill due to its positive effects on job performance and satisfaction. Nurses are required to establish good nurse-patient relationships in their work, which involves managing the emotions of patients and their families while exhibiting empathetic, sensitive, friendly, and caring emotional behaviors to maintain professionalism and rapport [6]. However, expecting these positive emotions to naturally persist throughout a nurse's work is idealistic. When positive emotions diminish while organizational demands remain constant, emotional labor ensues. Emotional labor is often invisible, easily overlooked, and underestimated [7]. Failure to address it promptly can deplete significant mental and physical energy, adversely affecting employees' well-being and health, and potentially leading to occupational burnout or intentions to resign [8].

Hochschild [1] categorizes emotional labor into three types: surface acting, deep acting, and genuine acting [9]. Surface acting involves employees mimicking observable characteristics such as facial expressions, movements, and tone of voice to meet job requirements, reflecting an organizational identification detached from their true feelings. Deep acting builds upon surface acting by incorporating cognitive processes and emotional regulation techniques to align one's emotions with the emotions that need to be displayed [10], thereby internalizing emotions to resonate with organizational standards [11]. Genuine acting, also referred to as emotional display rules, entails the spontaneous and natural expression of emotions that authentically align with an employee's actual feelings at the moment.

2.2. Concept and content of work engagement

Work engagement originated as an expansion of burnout research and is currently defined, from the perspective of burnout, by Schaufeli. Schaufeli defines work engagement as a positive, fulfilling, work-related state of mind characterized by vigor, dedication, and absorption [12]. Due to varying research emphases, there is no unified definition of work engagement at the domestic or international level. Maslach's definition [13] aligns closely with Schaufeli's, describing it as an individual's sustained, positive work-related behaviors. Kanungo [14] views work

engagement as the psychological mindset or belief individuals hold while performing professional tasks. Liu [15] suggests that work engagement reflects an individual's perceived importance of work and its influence on self-identity. Kahn [16], on the other hand, describes it as the integration of personal and work roles, offering a perspective distinct from those presented by others.

Work engagement serves as one of the core competitive advantages in hospital settings [17]. In professional nursing practice, nurses with high levels of work engagement demonstrate increased efficiency, enhance patient satisfaction, improve clinical service quality, and reduce their intention to resign [18]. A strong relationship exists between work engagement and nurses' performance. Nurses with high levels of work engagement typically exhibit superior job performance, stronger professional commitment, and greater job satisfaction [19-21]. These nurses also tend to invest more time and energy into completing tasks, displaying heightened senses of responsibility and mission [22]. Furthermore, nurses with high work engagement levels often experience better mental health, reducing the likelihood of depression [21,23].

According to Schaufeli's definition, work engagement is divided into three dimensions: vigor, dedication, and absorption, which are mutually independent [12]. Vigor, also referred to as energy in some studies, indicates employees' ability to demonstrate strong mental resilience while working. Even when encountering setbacks, they persist and exhibit robust adaptability. Dedication reflects a strong sense of mission derived from employees' identification with organizational goals, motivating them to work wholeheartedly with involvement and pride. Absorption refers to being fully engrossed in work, often accompanied by the perception of time passing quickly during such moments.

2.3. Concept and content of organizational commitment

The concept of organizational commitment is multifaceted and complex. It can be understood as an attitude, a psychological state, a "readiness for action," or a bond connecting individuals to their organization [24]. Demır [25] defines organizational commitment as an individual's dedication to their work and broader organizational endeavors. Following an examination of the three-component model of organizational commitment, Solinger proposed redefining organizational commitment as a singular "attitude toward the organization." In studies conducted domestically, organizational commitment is often defined as individuals' genuine belief in the organization, their identification with its values, their willingness to work toward organizational goals, and their desire to remain with the organization [26]. Organizational commitment resembles a "psychological contract," emphasizing emotional connections, a sense of responsibility, and long-term loyalty between employees and the organization, beyond a mere employment relationship or contractual agreement [27].

For healthcare organizations, retaining experienced nursing staff is of paramount importance. Studies indicate that the quality of services in hospitals and healthcare units heavily depends on the presence of experienced clinical professionals [28,29]. High levels of organizational commitment reduce nurses' intention to leave, enhance their willingness to stay, and promote longer and more stable tenures within the organization [30,31]. Additionally, nurses with strong organizational commitment tend to demonstrate higher job performance, more proactive engagement at work, improved nursing care quality, and increased patient satisfaction [32]. The significance of organizational commitment for nurses cannot be overstated. Prioritizing the cultivation and enhancement of nurses' organizational commitment is essential to achieving mutually beneficial outcomes for both the organization and the nursing staff.

The most representative framework for understanding organizational commitment is the three-dimensional model proposed by Allen and Meyer [33], which comprises affective commitment, continuance commitment, and

normative commitment. Affective commitment refers to employees' emotional attachment to the organization. Employees with strong affective commitment demonstrate a positive psychological orientation toward the organization, fully identify with its values and goals, and willingly contribute to or make sacrifices for the organization. Continuance commitment reflects employees' recognition of the costs associated with leaving the organization, stemming from a rational assessment of the advantages and disadvantages of departure. Normative commitment represents employees' sense of moral obligation or responsibility toward the organization, reflecting their loyalty to it. Among these dimensions, affective commitment encompasses the need for closeness to the organization and alignment with its values, fostering a strong sense of belonging that is closely linked to an individual's willingness to remain within the organization [34].

3. Relationship study and theoretical support among emotional labor, work engagement, and organizational commitment

3.1. Emotional labor and work engagement

3.1.1. Current research status on emotional labor and work engagement

Emotional labor constitutes an essential aspect of nursing, while work engagement serves as a crucial determinant of nursing quality and patient safety outcomes. Both factors are interrelated and mutually influential. Several studies suggest a positive correlation between emotional labor and work engagement [10,35,36]. However, since both constructs encompass three dimensions, exploring the relationships between these dimensions is critical. Research findings indicate that the deep and genuine behaviors associated with emotional labor are positively correlated with the three dimensions of work engagement, while surface acting shows no correlation with vigor, dedication, or absorption [10,35,36]. In contrast, Hu *et al.* [37] report that deep behaviors are positively correlated with the dimensions of work engagement, whereas surface acting and genuine behaviors exhibit a negative correlation. A separate study based on a large sample of Finnish nurses suggests a negative correlation, indicating that as emotional labor increases, work engagement decreases [6]. Similarly, domestic research focusing on nurses in the endocrinology department in Urumqi reveals a negative correlation between emotional labor and overall work engagement, as well as its various dimensions [38]. Comparable findings have also been observed among nursing undergraduate interns [39].

The divergent results may be explained by Yao's study [8], which suggests that the relationship between emotional labor and work engagement is not linear but rather curvilinear. Moderate levels of emotional labor contribute to building positive nurse-patient relationships, enhancing job performance, receiving recognition, rewards, and career advancement opportunities, deepening professional beliefs, and increasing self-esteem, achievement [40], and job satisfaction [41]. Within an appropriate range, emotional labor appears positively correlated with work engagement. However, emotional labor inherently consumes physical and mental resources. When nurses experience excessively high levels of emotional labor stress, leading to emotional exhaustion and resource depletion, work engagement diminishes, resulting in a negative correlation. Conversely, when emotional labor stress levels are too low, it may indicate a lack of dedication among nurses, reflecting insufficient responsibility and seriousness toward patients. In such cases, low work engagement levels arise from subjective factors.

In summary, emotional labor stress levels beyond an optimal range—whether excessively high or excessively low—can lead to a decline in work engagement. Moderation in emotional labor is therefore essential to maintaining high levels of work engagement.

3.1.2. Theoretical research on emotional labor and work engagement

The relationship between emotional labor and work engagement can be interpreted through motivation theory. Motivation theory primarily emphasizes the relationship between an individual's motivation and performance at work. Porter and Lawler [42] categorized motivation into two types: intrinsic and extrinsic motivators. Intrinsic motivation arises from personal interest in the job, along with the satisfaction, competence, and sense of achievement derived from it. Extrinsic motivation, in contrast, pertains to organizational factors such as salary, bonuses, benefits, and organizational recognition.

On one hand, emotional labor enables nurses to establish amicable nurse-patient relationships, enhance patient satisfaction, and derive a sense of competence and fulfillment from their work. On the other hand, nurses' exceptional performance may prompt organizations to offer material or intangible rewards as acknowledgment. According to motivation theory, these positive outcomes can act as motivational factors, fostering nurses' enthusiasm for their roles and promoting work engagement [8].

The majority of research findings suggest a positive correlation between deep emotional labor and work engagement [10,35-37]. This may be attributed to nurses experiencing the combined motivating effects of intrinsic and extrinsic factors, which lead to greater engagement in their tasks. Conversely, when nurses engage in surface acting that conflicts with their authentic emotions, it may superficially appear as typical work behavior but exhaust personal resources without activating intrinsic motivation. Over time, this depletion can result in diminished work engagement, leading to either a negative or no correlation between surface acting and work engagement.

3.2. Emotional labor and organizational commitment

3.2.1. Current research on emotional labor and organizational commitment

Due to the intersection of emotional labor and organizational commitment with hospital management and objectives, a strong connection between the two is evident [43]. However, current research presents conflicting perspectives on their impact and interaction. Some studies suggest a negative correlation between emotional labor and organizational commitment, attributing this to factors such as decreased job satisfaction and disrupted work-life balance, which can arise from emotional labor. This negative relationship has been observed in surveys of certified Indian social health activists, university administrators, and emergency medical technicians [44-46]. Yolanda [47] proposes that emotional labor depletes individual psychological resources, leading to fatigue and subsequent diminished emotional commitment.

Conversely, a survey of nurses in Changsha, Hunan Province, revealed a significant positive correlation between emotional labor and organizational commitment [27], with similar findings observed among a group of Turkish nurses [43]. Lee [48] provides evidence suggesting a positive correlation between emotional labor and organizational commitment, particularly in organizations with a strong emphasis on humanistic care, such as nursing. In nursing, both nurses and hospital management prioritize emotional needs, respect, and dignity, fostering a positive correlation between emotional labor and organizational commitment.

3.2.2. Theoretical research on emotional labor and organizational commitment

Most studies utilize Social Exchange Theory [49] to elucidate the relationship between emotional labor and organizational commitment. This theory posits that organizational relationships are based on mutual resource exchange. Emotional labor can be viewed as a form of social exchange, where nurses regulate their emotions in exchange for organizational benefits such as recognition, support, and promotion. When this exchange is perceived as

imbalanced, it can lead to decreased organizational commitment. If nurses feel a lack of reciprocity in the resource exchange process, violating the fundamental principles of social exchange, it can trigger feelings of dissatisfaction, ultimately resulting in a lack of commitment to the organization or even organizational detachment [50].

Engaging in surface emotional labor can easily lead to emotional dissonance and self-alienation [51]. If corresponding emotional benefits are not obtained from the organization [52], the exchange of emotional resources diminishes, leading to emotional fatigue, detachment, and a feeling of being undervalued by the organization [53]. In such cases, individual levels of organizational commitment may decrease. Conversely, nurses engaging in deep emotional labor, where internal feelings align with external expressions, avoid excessive depletion of personal emotional resources and engage in equitable resource exchange with the organization. This leads to increased job satisfaction, a sense of organizational identification, and higher levels of organizational commitment [54,55].

The contradictory findings in many studies on the relationship between emotional labor and organizational commitment may be attributed to a lack of differentiation between surface and deep emotional labor. Existing research demonstrates a positive correlation between emotional labor and organizational commitment among nurses, suggesting that most nurses engage in deep emotional labor, and hospital management provides adequate resource rewards when appropriately managed. It is only when emotional labor is not adequately rewarded by the organization that it may lead to decreased organizational commitment.

3.3. Organizational commitment and work engagement

3.3.1. Current research on organizational commitment and work engagement

Work engagement stems from work commitment and satisfaction, leading to positive behaviors, contributions, and self-realization. A review by Kim *et al.* [56] found that eight studies reported organizational commitment as a prerequisite for work engagement. Currently, there is a significant body of research on organizational commitment and work engagement among nurses, with the majority of findings suggesting a positive correlation between the two [17,18,22,31,57-63]. Organizational commitment can positively predict work engagement [64,65]. Regarding the relationship between the dimensions of organizational commitment and work engagement, while research results vary, it is generally believed that the three dimensions of work engagement are positively correlated with continuance commitment and affective commitment [57,66-68], but not with normative commitment [57]. Among these, the correlation between affective commitment and work engagement is the strongest [62], with affective commitment having a greater impact on work engagement than continuance commitment [58].

3.3.2. Theoretical research on organizational commitment and work engagement

The Job Demands-Resources Model [69] is a commonly used theoretical framework for explaining and predicting workplace stress and work motivation, and it is often applied to the study of work engagement [70]. This model proposes that work conditions can be categorized into job demands and job resources. Job demands refer to the physical, psychological, and emotional resources required in a job, such as high workload, time pressure, and emotional demands, which can lead to stress, fatigue, and emotional exhaustion. Job resources, on the other hand, encompass various factors that support employees in completing their tasks, such as social support, training opportunities, and autonomy. These resources contribute to increased employee motivation and job satisfaction.

Organizational commitment, as a positive psychological resource in the workplace, can help nurses cope with job difficulties, manage negative emotions, and maintain a positive work attitude. This can lead to improved work quality and effective job performance, thereby enhancing work engagement [64].

Organizational commitment and work engagement are positively correlated [17,18,22,31,57-63]. While both concepts relate to employee attitudes and behaviors, they differ in their focus. Work engagement emphasizes the psychological connection between an individual and their work, reflecting an inner sense of joy and passion. Organizational commitment, on the other hand, emphasizes an individual's loyalty and sense of belonging to the organization, focusing on the relationship between the individual and the organization.

3.4. Emotional labor, organizational commitment, and work engagement

Currently, there is a dearth of research specifically focusing on the relationship between emotional labor, organizational commitment, and work engagement among healthcare workers. However, a study conducted in Turkey revealed that in the teacher population, organizational commitment mediates the relationship between emotional labor and work engagement [72]. This implies that emotional labor positively influences teachers' work engagement by increasing their organizational commitment.

4. Inference on the relationships between emotional labor, work engagement, and organizational commitment

Based on the current research status and theories, the following inferences can be made regarding the relationships between emotional labor, work engagement, and organizational commitment:

(1) Employees with high levels of work engagement are more likely to engage in deep emotional labor: Existing research confirms that nurses engaging in deep emotional labor can promote work engagement [10,35-37]. While there is a lack of research on the opposite direction, the impact of work engagement on emotional labor, it can be inferred that nurses with high work engagement, characterized by strong work motivation and organizational identification [22], are more likely to engage in deep emotional labor. They believe in the organization's reciprocity and are willing to exert extra effort to meet job demands, regulating their emotions to align with organizational requirements.

(2) Organizational commitment influences the type of emotional labor: Deep emotional labor can prevent the depletion of individual psychological resources. According to social exchange theory, individuals with more resources to exchange with the organization exhibit higher levels of organizational commitment [54,55]. High levels of organizational commitment can stimulate nurses to actively regulate their emotions and engage in deep emotional labor to maintain consistency with the organization. Therefore, organizational commitment can influence the type of emotional labor, with nurses possessing high organizational commitment more likely to engage in deep emotional labor.

(3) Work engagement promotes the formation of organizational commitment, creating a positive cycle between the two: Both organizational commitment and work engagement are psychological resources and organizational commitment positively predicts work engagement levels [64,65]. High levels of organizational commitment motivate nurses to develop a strong sense of belonging and loyalty to the organization, enhancing their work engagement and improving work quality. High levels of work engagement strengthen nurses' emotional connection and identification with the organization, deepening organizational commitment. This emotional identification encourages employees to make efforts for the organization's benefit and long-term development, creating a virtuous cycle that promotes the formation and consolidation of organizational commitment.

(4) Organizational commitment serves as a mediating variable between emotional labor and work engagement: While emotional labor can directly affect work engagement [6,8,10,35-39], organizational commitment, as a manifestation of the connection between employees and the organization, may play a mediating role between these two factors. This hypothesis has been validated in the teacher population [72]. Given that existing research confirms that nurses' emotional labor positively influences organizational commitment [27,43] and that organizational commitment is positively correlated with work engagement [17,18,22,31,57-63], it is reasonable to infer that nurses' emotional labor affects work engagement through the mediating variable of organizational commitment. Emotional labor involves managing and expressing emotions at work, and employees with high levels of organizational commitment are more likely to engage in deep emotional labor. They are more willing to regulate their emotions to align with organizational values, strengthening their emotional identification with the organization. This emotional identification inspires higher work engagement, leading to increased investment of energy and resources in work and organizational development.

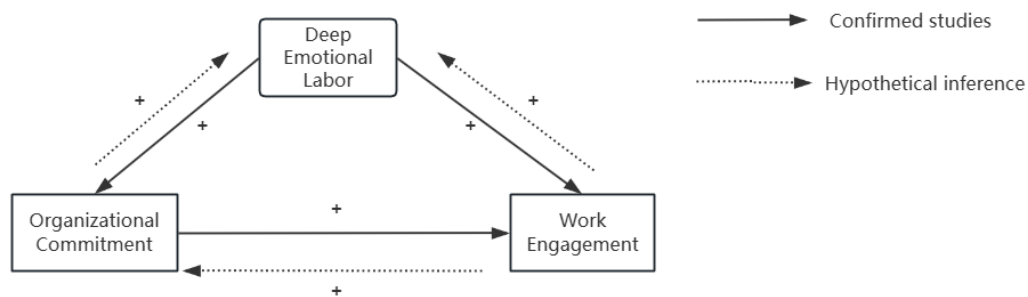The relationships among these three factors are illustrated in **Figure 1**.

Figure 1. Summary of the relationship between emotional labor, organizational commitment, and work engagement. Note: + represents a positive correlation

5. Summary and outlook

A complex and close relationship exists between emotional labor, work engagement, and organizational commitment. This paper has systematically reviewed the relationships between each pair of variables, discussed the potential role of organizational commitment in mediating between emotional labor and work engagement, and highlighted how organizational commitment may serve as a mediating variable, playing a connecting and moderating role. Nurses with high levels of organizational commitment tend to engage in deep emotional labor and demonstrate higher levels of work engagement. This commitment reflects nurses' loyalty and identification with the organization and significantly influences their workplace performance and attitudes.

Future research should further investigate the relationships between emotional labor, work engagement, and organizational commitment, deepening our understanding of the mediating role of organizational commitment. For nursing managers, fostering a positive organizational culture and atmosphere can promote nurses' team identification with the organization, thereby inspiring higher levels of work engagement. Personalized

management strategies tailored to individual nurses' levels of organizational commitment and needs can be developed to motivate and support nurses in effectively managing emotional labor and enhancing work engagement. Additionally, nursing managers should utilize appropriate technological tools and resources to assist nurses in handling emotional labor more effectively, improving work efficiency and quality while strengthening their commitment to the organization.

Disclosure statement

The authors declare no conflict of interest.

References

[1] Hochschild AR, 2019, The Managed Heart: Commercialization of Human Feeling. University of California Press, California.

[2] Ashforth BK, Saks AM, 1996, Socialization Tactics: Longitudinal Effects on Newcomer Adjustment. Academy of Management Journal, 39(1): 149–178. https://doi.org/10.5465/256634

[3] Morris JA, Feldman DC, 1995, The Dimensions, Antecedents, and Consequences of Emotional Labor. The Academy of Management Review, 21(4): 986–1010. https://doi.org/10.2307/259161

[4] Grandey AA, 2003, When "The Show Must Go on": Surface Acting and Deep Acting as Determinants of Emotional Exhaustion and Peer-Rated Service Delivery. The Academy of Management Journal, 46(1): 86–96. https://doi.org/10.2307/30040678

[5] Badolamenti S, Sili A, Caruso R, et al., 2017, What Do We Know About Emotional Labour in Nursing? A Narrative Review. Br J Nurs, 26(1): 48–55. https://doi.org/10.12968/bjon.2017.26.1.48

[6] Mauno S, Ruokolainen M, Kinnunen U, et al., 2016, Emotional Labour and Work Engagement Among Nurses: Examining Perceived Compassion, Leadership and Work Ethic as Stress Buffers. J Adv Nurs, 72(5): 1169–1181. https://doi.org/10.1111/jan.12906

[7] Williams A, 2013, Hochschild (2003) – The Managed Heart: The Recognition of Emotional Labour in Public Service Work. Nurse Educ Today, 33(1): 5–7. https://doi.org/10.1016/j.nedt.2012.07.006

[8] Yao Y, Wei W, Hu Y, et al., 2021, Curvilinear Relationship Between Emotional Labour and Work Engagement in Nurses: A Correlational Study. J Clin Nurs, 30(21–22): 3355–3365. https://doi.org/10.1111/jocn.15848

[9] Hu Y, Tu W, Zhou L, et al., 2023, Evaluating Emotional Labor from a Career Management Perspective. Front Psychol, 13: 1093723. https://doi.org/10.3389/fpsyg.2022.1093723

[10] Pan YL, Zhang HM, Yang T, et al., 2024, Current Situation and Correlation Analysis of Emotional Labour and Work Engagement of Pediatric Nurses. Zhejiang Clinical Medicine, 26(2): 309–311.

[11] Diefendorff JM, Croyle MH, Gosserand RH, 2005, The Dimensionality and Antecedents of Emotional Labor Strategies. Journal of Vocational Behavior, 66(2): 339–357. https://doi.org/10.1016/j.jvb.2004.02.001

[12] Schaufeli WB, Bakker AB, Salanova M, 2006, The Measurement of Work Engagement with a Short Questionnaire: A Cross-National Study. Educational and Psychological Measurement, 66(4): 701–716. https://doi.org/10.1177/0013164405282471

[13] Maslach C, Schaufeli WB, Leiter MP, 2001, Job Burnout. Annu Rev Psychol, 52: 397–422. https://doi.org/10.1146/annurev.psych.52.1.397

[14] Kanungo RN, 1983, Work Alienation: A Pancultural Perspective. International Studies of Management & Organization, 13(1–2): 119–138.

[15] Liu J, Lambert EG, Kelley T, et al., 2020, Exploring the Association Between Work-Family Conflict and Job Involvement. Int J Offender Ther Comp Criminol, 64(8): 791–817. https://doi.org/10.1177/0306624X19896463

[16] Kahn WA, 1990, Psychological Conditions of Personal Engagement and Disengagement at Work. The Academy of Management Journal, 33(4): 692–724. https://doi.org/10.2307/256287

[17] Cao Y, Liu J, Liu K, et al., 2019, The Mediating Role of Organizational Commitment Between Calling and Work Engagement of Nurses: A Cross-Sectional Study. Int J Nurs Sci, 6(3): 309–314. https://doi.org/10.1016/j.ijnss.2019.05.004

[18] Chang F, Wu X, Huang Y, 2023, The Mediating Effects of Psychological Capital and Organizational Commitment on the Relationships Between Calling and Work Engagement Among Clinical Nurses. Chinese Journal of Nursing Education, 20(12): 1475–1480. https://doi.org/10.3761/j.issn.1672-9234.2023.12.012

[19] Eguchi H, Inoue A, Kachi Y, et al., 2020, Work Engagement and Work Performance Among Japanese Workers: A 1-Year Prospective Cohort Study. J Occup Environ Med, 62(12): 993–997. https://doi.org/10.1097/JOM.0000000000001977

[20] Mukaihata T, Fujimoto H, Greiner C, 2020, Factors Influencing Work Engagement Among Psychiatric Nurses in Japan. J Nurs Manag, 28(2): 306–316. https://doi.org/10.1111/jonm.12923

[21] García-Sierra R, Fernández-Castro J, Martínez-Zaragoza F, 2016, Work Engagement in Nursing: An Integrative Review of the Literature. J Nurs Manag, 24(2): E101–E111. https://doi.org/10.1111/jonm.12312

[22] Tang P, Zhang X, Feng F, et al., 2022, The Relationship Between Organizational Commitment and Work Engagement Among Clinical Nurses in China: A Cross-Sectional Study. J Nurs Manag, 30(8): 4354–4363. https://doi.org/10.1111/jonm.13847

[23] Jenaro C, Flores N, Orgaz MB, et al., 2011, Vigour and Dedication in Nursing Professionals: Towards a Better Understanding of Work Engagement. J Adv Nurs, 67(4): 865–875. https://doi.org/10.1111/j.1365-2648.2010.05526.x

[24] Solinger ON, van Olffen W, Roe RA, 2008, Beyond the Three-Component Model of Organizational Commitment. J Appl Psychol, 93(1): 70–83. https://doi.org/10.1037/0021-9010.93.1.70

[25] Demır S, 2020, The Role of Self-Efficacy in Job Satisfaction, Organizational Commitment, Motivation and Job Involvement. Eurasian Journal of Educational Research, 20(85): 205–224.

[26] Borhani F, Jalali T, Abbaszadeh A, et al., 2014, Nurses' Perception of Ethical Climate and Organizational Commitment. Nurs Ethics, 21(3): 278–288. https://doi.org/10.1177/0969733013493215

[27] Li P, Ouyang L, Duan GX, 2012, Effects of Organizational Commitment on Emotional Labor of Nurses in Tertiary Hospitals. Chinese Journal of Nursing, 2012(2): 144–146.

[28] Karami A, Farokhzadian J, Foroughameri G, 2017, Nurses' Professional Competency and Organizational Commitment: Is It Important for Human Resource Management? PLoS One, 12(11): e0187863. https://doi.org/10.1371/journal.pone.0187863

[29] Yang J, Liu Y, Chen Y, et al., 2014, The Effect of Structural Empowerment and Organizational Commitment on Chinese Nurses' Job Satisfaction. Appl Nurs Res, 27(3): 186–191. https://doi.org/10.1016/j.apnr.2013.12.001

[30] Labrague LJ, McEnroe-Petitte DM, Tsaras K, et al., 2018, Organizational Commitment and Turnover Intention Among Rural Nurses in the Philippines: Implications for Nursing Management. Int J Nurs Sci, 5(4): 403–408. https://doi.org/10.1016/j.ijnss.2018.09.001

[31] Lin WQ, Yuan LX, Kuang SY, et al., 2020, Work Engagement as a Mediator Between Organizational Commitment

and Job Satisfaction Among Community Health-Care Workers in China: A Cross-Sectional Study. Psychol Health Med, 25(6): 666–674. https://doi.org/10.1080/13548506.2019.1634821

[32] Kim MJ, Kim BJ, 2020, The Performance Implications of Job Insecurity: The Sequential Mediating Effect of Job Stress and Organizational Commitment, and the Buffering Role of Ethical Leadership. Int J Environ Res Public Health, 17(21): 7837. https://doi.org/10.3390/ijerph17217837

[33] Meyer JP, Allen NJ, 1991, A Three-Component Conceptualization of Organizational Commitment. Human Resource Management Review, 1(1): 61–89. https://doi.org/10.1016/1053-4822(91)90011-Z

[34] Orgambídez A, Almeida H, 2020, Supervisor Support and Affective Organizational Commitment: The Mediator Role of Work Engagement. West J Nurs Res, 42(3): 187–193. https://doi.org/10.1177/0193945919852426

[35] Zhang G, Li H, Song G, et al., 2022, Study on the Current Status of Emotional Labor and Work Engagement, and Its Correlation of Nurses in Emergency Department. Journal of Bengbu Medical University, 47(2): 259–264. https://doi.org/10.13898/j.cnki.issn.1000-2200.2022.02.029

[36] Zhang GW, Li HP, Song GQ, et al., 2020, Mediating Effect of Psychological Detachment in the Relationship Between Emotional Labor and Work Engagement in Emergency Nurses. Modern Clinical Nursing, 2020(1): 13–17.

[37] Hu YF, Hu YL, Xue YN, 2020, Current Situation of Emotion Labor of Emergency Nurses and Its Influence on Job Engagement. Chinese Journal of Modern Nursing, 26(15): 1972.

[38] An YX, 2019, Effect of Emotional Labor on Work Engagement of Nurses in Endocrinology Department of Five Grade-A Tertiary Hospitals in Urumqi City. Occupation and Health, 35(9): 1224–1227 + 1231.

[39] Lu Y, 2023, Research on the Influence of Emotional Labor on Post Involvement of Undergraduate Nursing Interns: Based on the Mesomeric Effect of Psychological Disengagement. Health Career Education, 41(22): 152–155.

[40] Grandey AA, Melloy RC, 2017, The State of the Heart: Emotional Labor as Emotion Regulation Reviewed and Revised. J Occup Health Psychol, 22(3): 407–422. https://doi.org/10.1037/ocp0000067

[41] Zapf D, 2002, Emotion Work and Psychological Well-Being: A Review of the Literature and Some Conceptual Considerations. Human Resource Management Review, 12(2): 237–268. https://doi.org/10.1016/S1053-4822(02)00048-7

[42] Porter LW, Lawler EE, 1968, Managerial Attitudes and Performance. Administrative Science Quarterly, 13(1): 177–180. https://doi.org/10.2307/2391269

[43] Akkoç İ, Türe A, Arun K, et al., 2022, Role of Affective Commitment in the Relationship Between Emotional Labor and Life Satisfaction in Nurses. Perspect Psychiatr Care, 58(4): 2050–2058. https://doi.org/10.1111/ppc.13028

[44] Yuan MZ, Chen HF, Yang CC, et al., 2022, The Relationship between Medical Staff's Emotional Labor, Leisure Coping Strategies, Workplace Spirituality, and Organizational Commitment during the COVID-19 Pandemic. Int J Environ Res Public Health, 19(10): 6186. https://doi.org/10.3390/ijerph19106186

[45] Han SL, Shim HS, Choi WJ, 2018, The Effect of Emotional Labor of College Administrative Service Workers on Job Attitudes: Mediating Effect of Emotional Labor on Trust and Organizational Commitment. Front Psychol, 9: 2473. https://doi.org/10.3389/fpsyg.2018.02473

[46] Akbar Jan N, Rajasekhar D, Subramani A K, et al., 2024, The Moderating Effects of Perceived Social Worth and Organizational Virtuousness on the Relationship Between Emotional Labor, Precarious Work, and Organizational Commitment Among ASHA Workers in India. Acta Psychol (Amst), 248: 104384. https://doi.org/10.1016/j.actpsy.2024.104384

[47] Yolanda A, 2023, Cultivating Organizational Commitment: The Impact of Emotional Labor and the Mediating Role of Emotional Exhaustion. Ultima Management: Jurnal Ilmu Manajemen, 15(2): 180–197. https://doi.org/10.31937/

manajemen.v15i2.3298

[48] Lee HJ, 2018, Emotional Labor and Organizational Commitment Among South Korean Public Service Employees. Social Behavior and Personality: An International Journal, 46(7): 1191–1200. https://doi.org/10.2224/sbp.7265

[49] Homans GC, 1958, Social Behavior as Exchange. American Journal of Sociology, 63(6): 597–606.

[50] Bakker AB, Demerouti E, 2007, The Job Demands-Resources Model: State of the Art. Journal of Managerial Psychology, 22(3): 309–328. https://doi.org/10.1108/02683940710733115

[51] Ashforth BE, Humphrey RH, 1993, Emotional Labor in Service Roles: The Influence of Identity. The Academy of Management Review, 18(1): 88–115. https://doi.org/10.2307/258824

[52] Scott BA, Barnes CM, 2011, A Multilevel Field Investigation of Emotional Labor, Affect, Work Withdrawal, and Gender. Academy of Management Journal, 54(1): 116–136. https://doi.org/10.5465/AMJ.2011.59215086

[53] Panari C, Caricati L, Pelosi A, et al., 2019, Emotional Exhaustion Among Healthcare Professionals: The Effects of Role Ambiguity, Work Engagement and Professional Commitment. Acta Biomed, 90(6-S): 60–67. https://doi.org/10.23750/abm.v90i6-S.8481

[54] Humphrey RH, Ashforth BE, Diefendorff JM, 2015, The Bright Side of Emotional Labor. Journal of Organizational Behavior, 36(6): 749–769. https://doi.org/10.1002/job.2019

[55] Yu Y, Kim H, Qu H, 2020, A Deep Acting Perspective Generation Y Hotel Employees' Workplace Deviance. International Journal of Contemporary Hospitality Management, 32(2): 835–852. https://doi.org/10.1108/IJCHM-05-2019-0426

[56] Kim W, Kim J, Woo H, et al., 2017, The Relationship Between Work Engagement and Organizational Commitment: Proposing Research Agendas Through a Review of Empirical Literature. Human Resource Development Review, 16(4): 350–376. https://doi.org/10.1177/1534484317725967

[57] Xia QP, Yu Q, Hong HX, et al., 2023, The Mediating Effect of Organizational Commitment Between Nurses' Sense of Organizational Support and Work Engagement. World Digest of Recent Medical Information, 23(40): 145–149.

[58] Duan S, Wang D, Zhang Y, et al., 2017, Strategy of Promoting Nurses' Working Involvement – Based on Intermediation of Organizational Commitment. Soft Science of Health, 31(5): 53–55. https://doi.org/10.3969/j.issn.1003-2800.2017.05.014

[59] Liu ZH, 2016, Current Situation of Emotion Labor of Emergency Nurses and Its Influence on Job Engagement. Chinese Journal of Modern Nursing, 22(35): 5060–5064.

[60] Meng XD, Li JP, 2011, Study on the Relationship Between Job Engagement and Organization Commitment of Nursing Staffs in Emergency Departments in 2A-Level Hospitals. Journal of Nursing Management, 11(6): 390–392.

[61] Ni YX, Wen Y, Xu Y, et al., 2023, The Relationship Between Work Practice Environment and Work Engagement Among Nurses: The Multiple Mediation of Basic Psychological Needs and Organizational Commitment A Cross-Sectional Survey. Front Public Health, 11: 1123580. https://doi.org/10.3389/fpubh.2023.1123580

[62] Fukuzaki T, Iwata N, Ooba S, et al., 2021, The Effect of Nurses' Work-Life Balance on Work Engagement: The Adjustment Effect of Affective Commitment. Yonago Acta Med, 64(3): 269–281. https://doi.org/10.33160/yam.2021.08.005

[63] Orgambídez A, Borrego Y, Vázquez-Aguado O, 2019, Self-Efficacy and Organizational Commitment Among Spanish Nurses: The Role of Work Engagement. Int Nurs Rev, 66(3): 381–388. https://doi.org/10.1111/inr.12526

[64] He XC, Zhou WQ, Zhang BL, et al., 2023, The Mediating Effect of Organizational Commitment Between Psychological Contract and Work Engagement of Psychiatric Nurses. Nursing Practice and Research, 20(20): 3089–

3095.

[65] Chen D, Lin Q, Yang T, et al., 2022, Distributive Justice and Turnover Intention Among Medical Staff in Shenzhen, China: The Mediating Effects of Organizational Commitment and Work Engagement. Risk Manag Healthc Policy, 15: 665–676. https://doi.org/10.2147/RMHP.S357654

[66] Gupta V, Agarwal UA, Khatri N, 2016, The Relationships Between Perceived Organizational Support, Affective Commitment, Psychological Contract Breach, Organizational Citizenship Behaviour and Work Engagement. J Adv Nurs, 72(11): 2806–2817. https://doi.org/10.1111/jan.13043

[67] Santos A, Chambel MJ, Castanheira F, 2016, Relational Job Characteristics and Nurses' Affective Organizational Commitment: The Mediating Role of Work Engagement. J Adv Nurs, 72(2): 294–305. https://doi.org/10.1111/jan.12834

[68] Shen X, Shen T, Chen Y, et al., 2023, The Associations Between Benevolent Leadership, Affective Commitment, Work Engagement and Helping Behavior of Nurses: A Cross-Sectional Study. BMC Nursing, 22(1): 407. https://doi.org/10.1186/s12912-023-01581-6

[69] Demerouti E, Bakker AB, Nachreiner F, et al., 2001, The Job Demands-Resources Model of Burnout. Journal of Applied Psychology, 86(3): 499–512. https://doi.org/10.1037/0021-9010.86.3.499

[70] Schaufeli WB, 2017, Applying the Job Demands-Resources Model: A 'How To' Guide to Measuring and Tackling Work Engagement and Burnout. Organizational Dynamics, 46(2): 120–132. https://doi.org/10.1016/j.orgdyn.2017.04.008

[71] Zhai Y, Cai S, Chen X, et al., 2023, The Relationships Between Organizational Culture and Thriving at Work Among Nurses: The Mediating Role of Affective Commitment and Work Engagement. J Adv Nurs, 79(1): 194–204. https://doi.org/10.1111/jan.15443

[72] Sezen-Gultekin G, Bayrakcı M, Limon İ, 2021, The Mediating Role of Organizational Commitment on the Relationship Between Emotional Labor and Work Engagement of Teachers. Front Psychol, 12: 648404. https://doi.org/10.3389/fpsyg.2021.648404