

Identifying Components of Emotional labor Dimensions for Nurses in Relation to Patient Companion

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Extended Abstract

Emotional labor is managing feelings in order to express expected organizational emotion which has two dimensions: surface acting and deep acting. Nursing profession is deeply rooted in the concept of emotions. Therefore, the goal of current study is to identify components of emotional labor dimensions for samplar nurses in relation to companions of patients. The current paper was a descriptive research drawing upon the strategy of phenomenology. Semi-structured and deep interviews were used for data collection and Colaizzi approach was used for analysis. All national exemplar nurses of public hospitals of Mashhad made the research population; they were interviewed considering purposeful sampling and its adequacy. Based on the analysis of interviews, 2 sub-categories (emotional silence and emotional visage) for “emotional suppression” in surface acting dimension and 8 sub-categories (understanding emotional mood of patient companion, considering opinions of patient companion, placing self instead of patient companion, portrayal, justification, suggestion, avoiding emotional conflict, and emotional seclusion) for “emotional support, emotional effort, & emotional distance” in deep acting dimension were obtained. Findings of the current research has provided valuable insight regarding the emotional labor performed by national exemplar nurses in the research population promoting the quality of patient care and improving life quality as a result.

Introduction

The concept of emotions at workplace have increasingly become more important with overall development of services and competition among

service providers. Created emotions among service agents and customers affect quality evaluations of services, customer retention, and his or her overall view toward the organization. Hence, employees are expected not only to become involved in physical and intellectual labor but also in emotional labor.

Case study

The organization being studied in this research is public hospitals of Mashhad (Imam Reza (PBUH) Hospital, Omolbanin Hospital, Omid Hospital, Dr. Sheikh Hospital, Dr. Ali Shariati Hospital, Taleghani Hospital, Shahid Hasheminezhad Hospital, Kamiab Hospital, Montaserieh Hospital, Ghaem Hospital, Khatemolania (PBUH) Hospital, and Ebnesina Hospital). The sample population is elected country nurses of public hospitals of Mashhad who are annually nominated and introduced.

Materials and Methods

In this research, phenomenology method is applied to identify components of emotional labor dimensions. Research tool is questions discussed within the interview. The first two questions common for interviewees based on surface and deep acting dimensions, as two aspects of emotional labor, were open ended. For surface action dimension, the open ended question was that “express the experience in which your true feelings were different from the expected ones in your career; and you suppressed them and showed the expected emotions”. For deep acting dimension, the open ended question was that “express an experience in which your true feelings were different from expected ones and you could manage your true emotions in a way to become compatible with the expected emotions”.

Discussion and Results

Based on the analysis of interviews, 2 sub-categories (emotional silence and emotional visage) for “emotional suppression” in surface acting dimension and 8 sub-categories (understanding emotional mood of patient companion, considering opinions of patient companion, placing self instead of patient companion, portrayal, justification, suggestion, avoiding emotional conflict, and emotional seclusion) for “emotional support, emotional effort, & emotional distance” in deep acting dimension were obtained.

Conclusion

Health domain, as an emotional area, is a potential field for surveying emotions in workplace. Emotional labor can be placed as the main part of nursing ability, leading nurses as emotional wizards to be strong enough in communication with patients’ companions and to support patients in that they feel comfortable.

Keywords: Emotions, Emotional labor, Surface acting, Deep acting