



THE EFFECTS OF EMOTIONAL REGULATION ON JOB SATISFACTION AND ORGANIZATIONAL CITIZENSHIP BEHAVIOUR

Dipi Talwar*	Assistant Professor, Maharaja Agrasen University, Baddi, India	Dipi.talwar@gmail.com
Diksha Sharma	Assistant Professor, Maharaja Agrasen University, Baddi, India	Dikshasharma1128@gmail.com

*Corresponding author

ABSTRACT

Aim/Purpose	The current research examines the impact of emotional regulation on job satisfaction and organizational citizenship behaviour (OCB) among nurses in selected government hospitals in Haryana.
Background	With the expansion of the service industry and increased competition, employees' capacity to control their emotions has become an essential aspect of work effectiveness. In jobs like nursing that involve direct contact with patients or clients, employees are required to express emotions that project professionalism over their actual feelings.
Methodology	A purposive sampling method was employed to select the hospitals and study participants. The data was gathered from 200 nurses, and structural equation modelling (SEM) was used for data analysis.
Contribution	This research shows that emotional labour is a strong predictor of both job satisfaction and organizational citizenship behaviour among nurses.
Findings	The results showed that surface acting did not significantly contribute to influencing job satisfaction, while deep acting significantly boosted job satisfaction. Furthermore, surface acting had a negative effect on OCB, while deep acting significantly contributed to OCB. Job satisfaction also positively predicted OCB. The findings highlight the significance of promoting genuine emotional involvement among nurses to increase their job satisfaction and promote positive organizational behaviours.

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Recommendations for Practitioners	The study provides practical implications for hospital managers and policymakers to develop supportive emotional work areas that enhance employee well-being and organizational effectiveness.
Recommendations for Researchers	Future researchers can expand this research across multiple industries and can conduct a comparative study. Longitudinal and mixed-method designs will allow for more in-depth perspectives into emotional management and workplace behaviour. Adding other variables such as emotional intelligence, resilience, and leadership support will make future models more robust.
Impact on Society	The results indicate that healthcare organizations need to institute training, emotional support systems, and workplace policies that assist nurses in better regulation of emotions, thus enhancing job satisfaction and voluntary behaviour.
Future Research	Emotional labour can also be studied in other industries, for instance, banking institutions, lawyers and judges, bill collectors, frontline managers, the aviation industry, and call centres.
Keywords	surface acting, deep acting, job satisfaction, organizational citizenship behaviour, nurses

INTRODUCTION

The healthcare profession, and indeed the nursing profession, is characterized by a set of high-intensity emotional demands that arise from the constant and often high-stress encounters with patients, their families, and other healthcare teams operating in conditions that can be extremely stressful. Nurses, for example, are frequently subjected to difficult situations where not only do they have to deal with their own emotional state, but they also need to display qualities such as empathy, sympathy, and a very high degree of professionalism simultaneously. This fine balancing act requires them to display these qualities irrespective of what they might be feeling internally on an emotional plane. In these stressful and often high-stress situations, the ability to control one's emotions becomes a crucial psychological resource. This ability enables individuals to regulate, control, and modify their emotional reactions effectively, which is essential for adapting well to the complex demands of their profession (Gross, 1998).

Emotional labour, a concept first described by sociologist Hochschild (1983), refers to the significant effort and energy that individuals expend to manage their emotions effectively in response to the emotional demands of a specific job. Over the years, this original concept has evolved significantly and is now what we refer to as emotional regulation. This contemporary concept focuses on the wide array of both conscious and unconscious processes that individuals use and draw upon to survive and regulate their feelings and emotional reactions in a specific context (Gross & John, 2003).

One of the most significant outcomes impacted by the process of emotional regulation is job satisfaction, which refers to the extent to which employees are positive or negative about their job and role in the workplace (Locke, 1976). Job satisfaction is a key topic in the nursing profession, affecting not only the general health and retention levels of nursing staff but also the provision of consistently high levels of care to patients (Lu et al., 2012). It has been found that successful emotional regulation can help nurses effectively manage a variety of workplace stressors they face, which in turn can result in an improvement in their overall psychological state and, consequently, higher levels of job satisfaction (Brotheridge & Grandey, 2002).

Another major outcome is organizational citizenship behaviour (OCB). This term refers to discretionary behaviours, which are above and beyond the call of duty and are not officially recognized or rewarded by existing reward systems in organizations. These behaviours, however, contribute significantly to the overall performance of an organization, as posited by Organ (1988). A few examples of

such behaviours include offering help to distressed colleagues, taking the initiative in tasks in advance, and being extremely loyal to the organization as an institution. As argued by Podsakoff et al. (2000), high job satisfaction is strongly related to an increase in Organizational Citizenship Behaviour.

These three interconnected variables – emotional regulation, job satisfaction, and organizational citizenship behaviour (OCB) – are particularly significant in the context of the nursing profession. Emerging evidence suggests that emotional regulation can lead to positive outcomes, including increased job satisfaction and more organizational citizenship behaviour, depending on how effectively emotions are managed (Diefendorff et al., 2005; Kuo et al., 2025).

Despite the vast number of research works on this subject, there is a surprising shortage of empirical work specifically addressing such complex dynamics in public healthcare institutions in India. In such situations, nurses typically have woefully heavy workloads, combined with a lack of necessary resources, as well as widespread bureaucratic inefficiencies that hinder their performance and well-being (Rao et al., 2011). In such challenging conditions, emotional demands on nursing professionals are even higher, hence necessitating a comprehensive study of how emotional regulation can influence job satisfaction and organizational citizenship behaviour (OCB) in this specific context. Therefore, the primary objective of this research is to thoroughly examine the various mechanisms through which emotional regulation influences job satisfaction and organizational citizenship behaviour among currently employed nurses in government hospitals of Haryana. Through exploring these intricate relationships, the researcher develops meaningful insights into how these emotional regulation strategies influence the psychological and behavioural responses of nurses, with a view to enhancing workplace atmospheres and the quality of patient care provided.

RESEARCH QUESTIONS

- (i) What is the link between emotional regulation and job satisfaction among nurses?
- (ii) What is the link between emotional regulation and organizational citizenship behaviour (OCB) among the nurses?
- (iii) How much does job satisfaction affect the demonstration of organizational citizenship behaviour among the nurses?

LITERATURE REVIEW AND HYPOTHESIS DEVELOPMENT

Emotional work involves managing emotions by employees to fulfil the emotional demands of a job, especially in service careers (Hochschild, 1983). It is mostly revealed through surface acting, i.e., pretending or hiding emotion, and deep acting, i.e., truly working to feel and display desired emotions (Grandey, 2000).

It is evident from previous research that the actual type of emotional regulation strategy employed by employees – either surface acting or deep acting – has distinct effects on job outcomes, including levels of burnout, general job satisfaction, and performance quality (Grandey, 2003). The way of performing emotional labour has important consequences on job satisfaction and Organizational Citizenship Behaviour (OCB).

Surface acting, which triggers a discrepancy between felt and expressed emotions, is primarily associated with emotional dissonance, leading to emotional exhaustion, decreased job satisfaction, and increased burnout (Brotheridge & Lee, 2003; Hülsheger & Schewe, 2011). Surface acting, which involves changing external displays of emotions without altering inner feelings, has been largely linked to unfavourable work outcomes. Various studies have documented that workers who regularly practice surface acting suffer from emotional exhaustion and lower job satisfaction, which consequently erodes their motivation to engage in discretionary behaviours not required by their job (Hülsheger & Schewe, 2011; Lartey et al., 2019; Zhang et al., 2025). In the medical sector, surface acting has been

shown to restrict nurses' prosocial behaviours and decrease organizational citizenship behaviour (Chattopadhyay, 2024; Mishra et al., 2023).

Conversely, deep acting – when workers genuinely attempt to alter their inner feelings to match prescribed emotional displays – has been consistently linked to favourable outcomes. Deep acting, on the other hand, is associated with actual emotional display, which has the tendency to lead to more job satisfaction by ensuring internal congruence and substantial social interaction (Diefendorff et al., 2005; Yin et al., 2016).

Additionally, emotional labour influences organizational citizenship behaviour, which refers to discretionary actions beyond job requirements that benefit the organization (Organ, 1988). Employees who engage in deep acting are more likely to exhibit positive work behaviours, such as helping and showing initiative, as they are less likely to experience emotional conflict and enjoy higher job satisfaction (Kuo et al., 2025). Empirical data show that nurses who utilize deep acting experience demonstrate higher emotional well-being and exhibit proactive, citizenship-behavioural conduct, thereby improving individual and organizational performance (Sun et al., 2025). Deep acting encourages genuine engagement, job satisfaction, and more cooperative behaviours (OCB) at higher levels, as workers are more likely to assist their colleagues and contribute to the organization (Feng et al., 2024; Grandey, 2003; Hülshager & Schewe, 2011; Zhang et al., 2025). Conversely, surface acting has been negatively linked to OCB, as it can increase stress and reduce the motivation to engage in voluntary, prosocial actions (Liao et al., 2024). Overall, the studies demonstrate that the source of emotional regulation strategy plays a crucial role in determining job satisfaction and OCB, highlighting the importance of promoting genuine emotional involvement in work life, particularly in service and healthcare industries.

Therefore, the character of emotional labour not only affects how employees feel about their jobs in terms of satisfaction but also affects their inclination towards extra-role behaviour, thus making it an important constituent of organizational performance.

SURFACE ACTING AND JOB SATISFACTION

Surface acting has been generally accepted as a costly emotional labour tactic, where workers are asked to dissemble or withhold authentic emotions to achieve job requirements (Chau et al., 2009). It has always been associated with psychological and physical distress, like emotional exhaustion, decreased job satisfaction, and work-related stress (Hochschild, 2012; Lam & Chen, 2012). Surface acting has been reported to greatly reduce job satisfaction among service professions such as healthcare, teaching, and hospitality (Diefendorff & Richard, 2003). Recent studies support these observations. Xu and Fan (2023) noted that surface acting had a negative impact on the job satisfaction of Chinese nurses by compromising genuine nurse–patient relationships. Likewise, Li et al. (2022) demonstrated that surface acting heightened emotional exhaustion, which in turn diminished job satisfaction.

Hypothesis 1: Surface acting negatively impacts employees' job satisfaction.

DEEP ACTING AND JOB SATISFACTION

Unlike surface acting, in which people simply wear a façade of emotion, deep acting requires individuals to feel the emotions they need to express genuinely, and therefore, it is a more genuine and sustainable way of managing one's emotions (Grandey, 2003). A large and strong body of research over the past several decades clearly demonstrates that practicing deep acting has a very positive impact on job satisfaction, particularly in those occupations where empathic immersion is very much a critical necessity, e.g., nursing and caregiving staff (Brotheridge & Lee, 2003; Diefendorff et al., 2005). In a recent study, Xu and Fan (2023) provided definitive evidence that deep acting among Chinese nurses improved nurses' relationships with their patients, resulting in a corresponding positive impact on their level of job satisfaction. Consistent with these findings, Kuo et al. (2025) established high positive correlations between deep acting and internal and external facets of job satisfaction among home-care workers in Taiwan. Moreover, Li et al. (2022) presented strong evidence in the form of a

large-scale survey of over 11,000 nurses, showing that deep acting served as a strong predictor of higher job satisfaction levels, thereby emphasizing its critical significance in promoting psychological well-being in emotionally demanding professional fields.

Hypothesis 2: Deep acting has a positive influence on job satisfaction among employees.

SURFACE ACTING AND OCB

Surface acting not only harms the well-being of individual employees but also damages the overall performance of organizations, especially in the context of prosocial behaviours such as organizational citizenship behaviour (OCB). Such an event is likely to have what has been termed as emotional dissonance, which has been linked to lower organizational commitment and a reduced inclination among workers to go the extra mile (Brotheridge & Grandey, 2002; Diefendorff & Gosserand, 2003). In a study targeting Korean service workers, Li et al. (2022) found that surface acting led to increased job stress and emotional exhaustion, which in turn had adverse impacts on discretionary behaviours, such as helping co-workers or agreeing to take on additional work. Likewise, Liao et al. (2024) found a negative correlation between surface acting and work-life quality among operating room nurses, which is a significant predictor of OCB. These findings align with those reported by Krannitz et al. (2015), who found that surface acting is strongly linked to decreased employee engagement and increased withdrawal behaviours.

Hypothesis 3: Surface acting phenomenon has a negative impact on organizational citizenship behaviour demonstrated by employees in the work environment.

DEEP ACTING AND OCB

Deep acting has been shown to be highly associated with other positive outcomes such as increased organizational commitment, increased job involvement, and better interpersonal relationships in the workplace, as contended by Grandey (2003) and recently supported by Diefendorff et al. (2005). When employees consciously practice deep acting, they are shown to report a higher sense of genuineness and identification with their job, which in turn results in the development of voluntary behaviours that extend beyond their regular job descriptions. In research conducted by Xu and Fan (2023), it was reiterated that when nurses practiced deep acting, it resulted in the development of more stable relationships with their patients, leading to behaviours that were in line with civic-mindedness and caring behaviour beyond their usual job descriptions. Similarly, research conducted by Kuo et al. (2025) revealed that deep acting among home-care workers was positively related to their intention to stay in their roles and overall organizational loyalty, both of which are strong predictors of organizational citizenship behaviour. Similarly, Liao et al. (2024) made significant contributions to this phenomenon by demonstrating that the regulation of deep emotions is directly responsible for the development of a healthy work climate, which in turn results in prosocial behaviours and discretionary efforts that are beneficial to the organization as a whole.

Hypothesis 4: Deep acting has a positive influence on organizational citizenship behaviour (OCB).

JOB SATISFACTION AND OCB

Affective Events Theory, as Weiss and Cropanzano (1996) originally theorized in their work, suggests that when employees experience positive emotional events in the workplace, such as job satisfaction, it can potentially enhance their citizenship behaviours in the organization to a great extent. Happy employees are likely to be involved in behaviours that not only benefit the organization but also go beyond what is expected of them in terms of what is defined in their job roles and job descriptions. Several empirical studies support this claim. For instance, Kuo et al.'s (2025) research study demonstrated that the level of job satisfaction among care workers in Taiwan was a strong predictor of their OCB intentions, such as being likely to remain in the organization for an extended period and assisting their colleagues. Similarly, in the healthcare sector, Liao et al.'s (2024) research

study proved that highly job-satisfied nurses were more likely to behave in a manner committed to their organizations and exhibit good teamwork, thereby further supporting the key nexus between job satisfaction and positive citizenship behaviours. All these findings are consistent with previous work by Organ (1988), as well as recent advancements in workplace psychology, and point to all of these reinforcing the key role of job satisfaction as a precursor to OCB.

Hypothesis 5: Organizational Citizenship Behaviour (OCB) is positively influenced by job satisfaction

The model study of emotional labour, job satisfaction, and organizational citizenship behaviour has been developed, as shown in Figure 1.

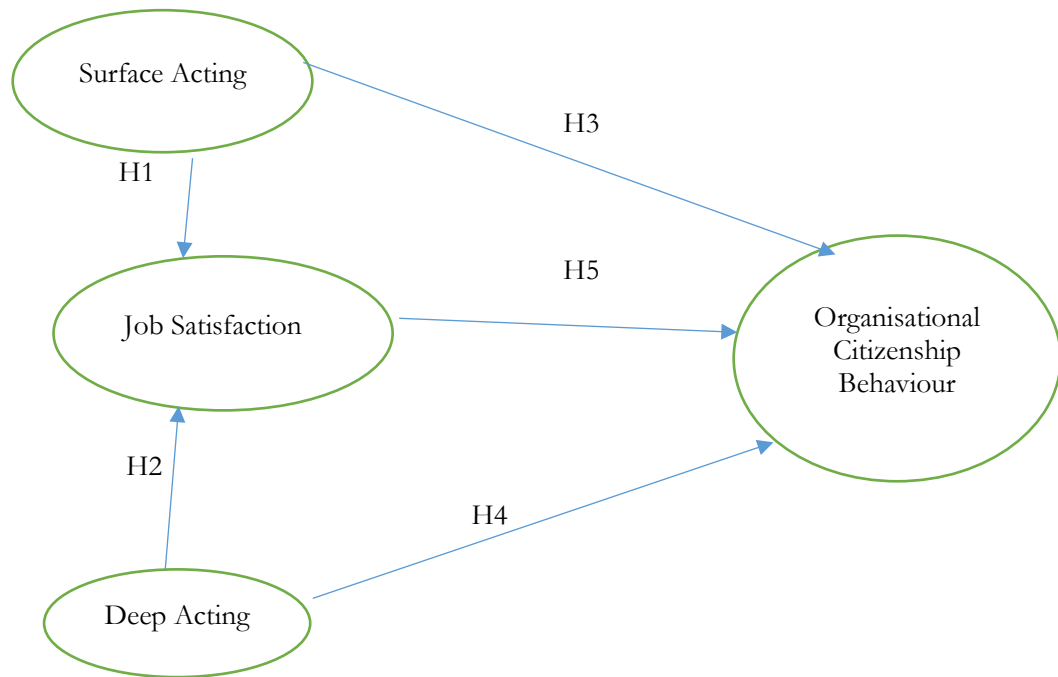


Figure 1. Model of emotional regulation regarding the job and organizational outcome

RESEARCH METHODOLOGY

The study is based on primary and secondary data sources. The primary data was obtained with keenness for the purpose of this study through a standardised questionnaire, which was specially prepared to assist in the attainment of the several goals of the study. For the purpose of validating the Structural Equation Model (SEM), the hypothetical connections were established using an extensive literature review. The literature review served as the theoretical basis for the selection of constructs, formulation of hypotheses, and specification of model paths. Therefore, the literature review was not an additional dataset, but rather a justification for the conceptual framework and methodological appropriateness of SEM.

The secondary data study carried out for the research purpose of this study included a detailed literature review that was focused on a few major areas of emotional labour, job satisfaction, and organisational citizenship behaviour. Based on the analysis of the secondary data findings, the researchers established specific study objectives. The data collection was carried out over a huge range of three months, which provided ample scope for the thorough collection of information. For this purpose, the questionnaires were distributed in a well-planned manner during the various working hours of weekdays at the hospitals chosen for the study.

RESEARCH DESIGN

The research study employs a descriptive research design with an analytical strategy that seeks to investigate in depth the intricacies of organizational dynamics, as well as the attitudes of employees working in government hospitals in the state of Haryana.

POPULATION AND SAMPLE

The target population specifically chosen for this study is nurses currently working in government hospitals dispersed throughout the state of Haryana. Additionally, it is worth noting that the sampling frame for this study is limited to government hospitals in Haryana, which are renowned for offering a range of healthcare services, including both general medical services and specialized healthcare services.

INSTRUMENTATION AND MEASUREMENT

A well-designed questionnaire was carefully crafted for data collection, incorporating a list of items borrowed from existing, pre-tested measurement scales to achieve maximum content validity. The questionnaire was designed specifically to assist and complement the study's objectives and was divided into three sections that addressed different research questions.

The first part focused on emotional labour strategies, which comprised two dimensions: surface acting, measured through five items, and deep acting, measured through four items. The items were taken from the scale presented by Naring et al. (2005). The second part of the measure addressed job satisfaction measurement and, more specifically, variety satisfaction measurement. Measurement was done using items based on the scale by Wood and de Menezes (1986). The third section assessed organizational citizenship behaviour (namely altruism) with items taken from the scale developed by MacKenzie et al. (1993).

SAMPLING METHOD

A **purposive sampling** method was employed to select the hospitals and study participants. Permission was obtained from the administration of each selected hospital to collect the data from the nurses. A sample of 200 was purposively selected based on the availability and consent of the nurses. The selection criteria for the hospitals include three highly populated districts in Haryana's urban area. Besides, all the selected hospitals not only provide a vast array of general medical treatment but also specialist medical treatment according to the needs of some patients. Three government hospitals were purposively selected from three large districts of the state of Haryana (Table 1). These districts have higher urbanization and a huge population.

Table 1. List of selected hospitals located in Haryana

Hospitals	Name of the hospitals
Government hospital	(1) Government hospital, near bus stand, Gurugram
	(2) Civil hospital, Model Town Road, Ambala
	(3) Government hospital, Sector 6, Panchkula

SAMPLE SIZE

Finally, the ultimate sample of this study consisted of 200 nurses selected from a list of shortlisted hospitals for the study. The data collection process was conducted through "personal contact," where the researcher met each respondent in person to explain the survey's objectives and reasons in detail. In hospitals where head nurses were present, personal contacts were also established with Human Resource (HR) managers, doctors, and other departmental heads, who were tasked with serving as liaison persons between the researcher and the nurses themselves. Additionally, the nurses were also motivated to contact the researcher personally if they encountered any problems or difficulties while filling out the questionnaire.

DATA COLLECTION

The data collection was conducted over a period of seven months, providing ample scope for the thorough collection of information. For this purpose, the questionnaires were distributed in a well-planned manner during the various working hours of weekdays at the hospitals chosen for the study.

DATA ANALYSIS TECHNIQUE

In the present research study, Structural Equation Modelling (SEM) was employed as the primary analytical tool to conduct a comprehensive analysis of the complex and dynamic interactions between emotional labour, job satisfaction, and organizational citizenship behaviour. To comprehensively and rigorously test the measurement model, Confirmatory Factor Analysis (CFA) was conducted meticulously, following the detailed guidelines prescribed by Hair (2010). This step was observed to be important and critical in measuring the construct validity of the model, as it entailed testing key statistical measures crucial to this process, such as composite reliability (CR), average variance extracted (AVE), and Cronbach's alpha.

DESCRIPTIVE ANALYSIS

Descriptive analysis presents a profile of the respondents selected from the government hospitals located in Haryana.

Table 2. Respondents profile

	Hospitals	
	Frequency	Percentage (%)
1. Marital Status		
Married	91	45.5%
Unmarried	109	54.5%
N =	200	100%
2. Age		
Between 20-34	133	66.5%
Between 35-54	67	33.5%
N =	200	100%
3. Education		
Graduates	127	63.5%
Postgraduates	73	36.5%
N =	200	100%
4. Experience		
Less than 5 years	104	52%
5 years-10 years	82	41%
10 years and above	14	7%
N =	200	100%

MEASUREMENT MODEL

Before starting the process of testing the structural model, it is essential first to run Confirmatory Factor Analysis (CFA). The first step is crucial for accurately testing the measurement model of the latent constructs, particularly with regard to dimensionality, validity, and reliability. Due to the quantitative nature of the current research study, Cronbach's alpha is often used as a measure for testing the internal consistency reliability of the measurements taken. That said, it is essential to note that

Composite Reliability (CR) is considered a more reliable and robust measure, and thus it is highly recommended for use under such circumstances (Henseler et al., 2009). Furthermore, it is essential that the measurement instruments used meet the pre-specified standards of both convergent validity and discriminant validity.

Convergent validity

Factor loading, Average Variance Extracted, and Composite Reliability are common measures used to ascertain the convergent validity of a measurement model. As Hair (2010) observed, the measures are crucial in determining the extent to which the items of a measurement scale relate to each other, which is important in ascertaining the validity of the model.

As shown in Figure 2, the values from the convergence validity test exceeded the threshold value of 0.6, providing strong evidence that all the findings demonstrated significant levels of convergent validity.

Convergent validity tests whether the statements in the scale have been successful in converging into one factor in the process of measurement. It also tests whether each measurement has a satisfactory correlation with other measurements associated with the same latent variables. To achieve adequate convergent validity, Composite Reliability (CR) should be higher than the threshold of 0.7, while Average Variance Extracted should be greater than or at least equal to the value of 0.5 (Hair, 2010).

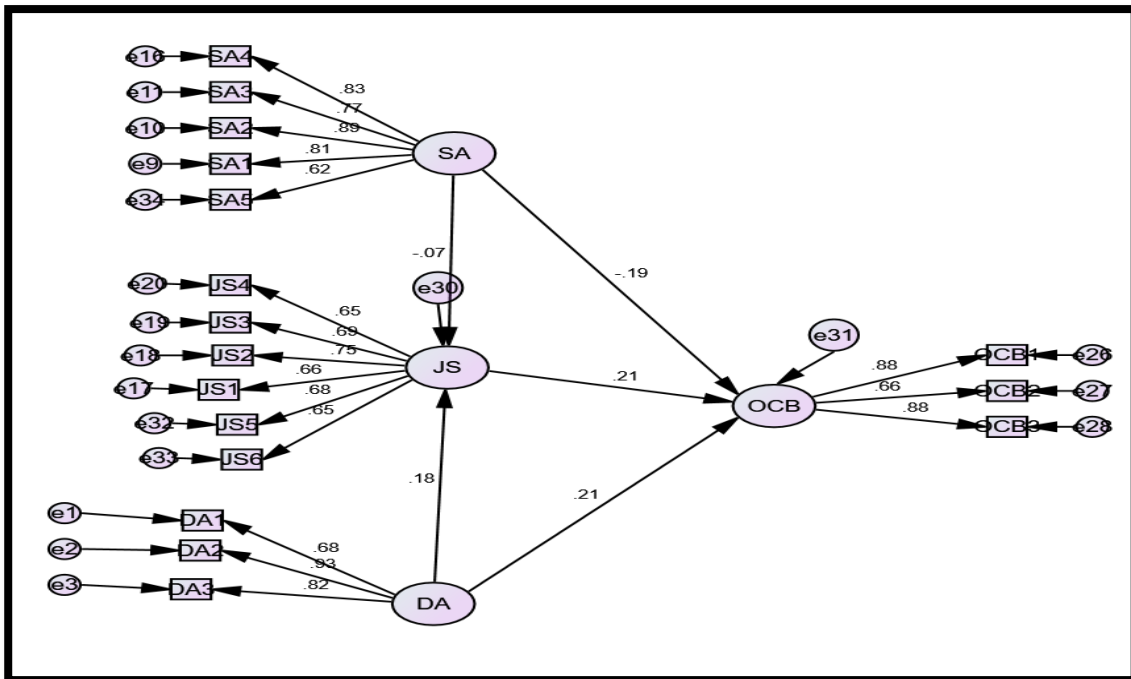


Figure 2. Path model (Source: AMOS Output)

CR and AVE statistics

As indicated in Table 3, the CR and AVE statistics for the four constructs utilized in the measurement model in this research exhibit good convergent validity (calculated through AMOS).

Table 3. CR and AVE statistics

Construct	Item	Statement	Loading	A	CR	AVE
Surface Acting	SA1	I always perform impressively at work	0.81	0.889	0.89	0.60
	SA2	I always show the right emotions at work	0.89			
	SA3	I try to develop the required emotions that are needed for my job	0.77			
	SA4	I always try to deal with patients in the right way	0.83			
	SA5	During my job, I pretend to be happy even if I am sad	0.62			
Deep Acting	DA1	It is difficult for me to develop (produce) the emotions I need to show	0.68	0.848	0.85	0.70
	DA2	I make an effort to actually feel the emotions I need to show	0.93			
	DA3	I try to produce the feelings I need to show to patients	0.82			
Job Satisfaction	JS1	I am satisfied with the variety of activities in my job	0.66	0.843	0.84	0.50
	JS2	I am satisfied with the freedom I have to do my job	0.75			
	JS3	I am satisfied with the opportunities my job provides to interact	0.69			
	JS4	There are different activities in my job	0.65			
	JS5	I have enough freedom to do what I want in my job	0.68			
	JS6	I can make job-related decisions independently	0.65			
Organizational Citizenship Behaviour	OCB1	I help orient new nurses even though it is not required	0.88	0.843	0.84	0.70
	OCB2	I am always ready to help people around me	0.66			
	OCB3	I am always ready to give my time to the person who needs it	0.88			

Note: α = Cronbach's alpha; CR = Composite Reliability; AVE = Average Variance Extracted.

Discriminate validity

Discriminant validity is a significant term used in research methodology studies. This scenario illustrates that there is little to no correlation between the different constructs under research. This validity demonstrates that a specific construct has some items that are not shared with other constructs, hence making it unique and easily distinguishable from the others. It is recommended that the square root of Average Variance Extracted (AVE), as reflected by the bold value on the diagonal in suitable analyses, should be greater than the correlation coefficients obtained between the constructs being compared. Hair (2010) provided guidance on this method standard.

Tables 4 and 5 provide a clear indication of how each of the various constructs relates to the others and a test of the discriminating validity, respectively. Specifically, Table 5 clearly shows that the value on the bold diagonal is greater than the correlation coefficient values found in other regions of the

table. This fact goes a long way in indicating that the discriminant validity of the scale not only exists but is very highly supported by the overall goodness of the scale used in this application.

Table 4. Correlations (Group number 1 - default model)

Variables	Estimate
SA ↔ JS	-.037
JS ↔ DA	0.162
DA ↔ OCB	0.202
SA ↔ DA	0.225
SA ↔ OCB	-0.157
JS ↔ OCB	0.249

Note: SA = Surface Acting; JS = Job Satisfaction; DA = Deep Acting; OCB = Organizational Citizenship Behaviour
Source: AMOS Output

Table 5. Discriminate validity

	SA	JS	DA	OCB
SA	0.774			
JS	-0.01	0.707		
DA	0.12	0.07	0.836	
OCB	-0.1	0.12	0.13	0.836

Note: Bold values indicate the square root of AVE of each construct

In conclusion, the CFA results showed that the measurement model's variables had sufficient levels of reliability, convergent validity, and discriminant validity.

MODEL FIT INDICES

The structural model's fit to the sample data is assessed using what is referred to as model fit. To assess the quality of the suggested measurement model, various indices can be used to determine if it provides acceptable model-fit indices or if it fails in some manner. Model fit has traditionally been assessed using the chi-square statistic, which serves as a primary indicator. The suggested measurement model is considered to have a good model fit when the p-value obtained from the chi-square test is lower than 0.05, indicating a statistically significant finding. In Table 6, various measures of model fit are provided for scrutiny and observation.

Table 6. Fit indices with guidelines for performing model analysis

Fit index	Guideline	Model value
χ^2	—	232.68
CMIN/DF	Between 1 and 5	2.059
PGFI	> 0.50	0.652
PNFI	> 0.50	0.721
PCFI	> 0.50	0.769
CFI	> 0.90	0.926
RMSEA	< 0.08	0.073

The fit measurement model was found to have the absolute indicators of fit. All these measurements were greater than the minimum required values. Thus, the goodness of numbers revealed that the model was describing the data appropriately.

TESTING HYPOTHESES

Table 7 presents the findings of the hypothesis tests conducted using a structural equation modelling approach. The hypothesis test findings reveal a significant number of correlations among the study constructs. The direction as well as the strength of the correlations are shown through the standardized beta (β) coefficients.

Table 7. Results of structural model analysis (hypothesis testing)

Hypothesis	Statement	β	P	Result
H1	Surface acting negatively impacts employees' job satisfaction.	-0.07	.365	Rejected
H2	Deep acting positively impacts employees' job satisfaction.	0.18	.033	Accepted
H3	Surface acting negatively impacts employees' organizational citizenship behaviour.	-0.19	.012	Accepted
H4	Deep acting positively impacts employees' organizational citizenship behaviour.	0.21	.013	Accepted
H5	Job satisfaction positively impacts employees' organizational citizenship behaviour.	0.21	.009	Accepted

The relationship between surface acting and job satisfaction was negative but not statistically significant ($\beta = -0.07$, $p = 0.365$), suggesting that surface acting makes no statistically significant contribution to job satisfaction. Hence, Hypothesis 1 was rejected. In line with previous studies (Lartey et al., 2021), there was no direct significant relationship between surface acting and job satisfaction, suggesting that any relationship might be contingent upon the existence of intervening variables; without them, surface acting cannot predict job satisfaction. “SA doesn’t always predict JS”.

Conversely, deep acting was positively and significantly related to job satisfaction ($\beta = 0.18$, $p = 0.033$), supporting Hypothesis 2 and indicating that authentic emotional involvement is associated with increased job satisfaction among nurses. This finding aligns with current research that emphasizes the positive impact of deep acting in healthcare environments. Feng et al. (2024) found that deep acting in nurses reduced emotional exhaustion and increased job satisfaction, while Zhang et al. (2025) discovered that deep acting enhances positive work attitudes by strengthening organizational identification. Likewise, Mishra et al. (2023) found that nurses who engage in deep acting are more intrinsically motivated, as what they present genuinely aligns with professional ideals and expectations in caring for patients.

In the context of organizational citizenship behaviour (OCB), surface acting was found to have a significant negative effect ($\beta = -0.19$, $p = 0.012$). This suggests that the more nurses practiced surface acting – altering their external emotional displays while maintaining the same internal feelings – the less likely they were to perform beyond their official job duties, thus supporting Hypothesis 3. These findings align with prior research, which illustrates how surface acting can contribute to emotional exhaustion, decreased job satisfaction, and lower discretionary effort among employees (Brotheridge & Lee, 2003; Grandey, 2003). Particularly in healthcare, surface acting has been found to reduce nurses’ inclination toward performing prosocial acts not enforced by rules, including assisting co-workers or participating in organizational causes (Hülshager & Schewe, 2011; Zhang et al., 2025). This implies that surface emotion regulation might drain psychological resources, which constrain the ability to perform voluntary, citizenship-related behaviour.

Conversely, deep acting showed a significant positive influence on organizational citizenship behaviour (OCB) ($\beta = 0.21$, $p = 0.013$), with evidence in favour of Hypothesis 4. This result suggests that

nurses who practice deep acting – intentionally changing their internal state to authentically experience the feelings demanded by their job – are more likely to practice discretionary, prosocial actions that go beyond their regular job requirements. This is supported by previous studies that suggest deep acting promotes favourable attitudes, job satisfaction, and involvement, thereby increasing employees' propensity to engage in citizenship behaviours (Brotheridge & Lee, 2003; Grandey, 2003; Hülshager & Schewe, 2011). Particularly in nursing situations, authentic emotional involvement has been associated with greater helpfulness towards other employees and proactive contributions to organizational objectives, indicating the significance of authentic emotional control for fostering OCB in health care environments (Brotheridge & Grandey, 2002; Zhang et al., 2025).

Last but not least, job satisfaction was found to significantly and positively predict OCB ($\beta = 0.21$, $p = 0.009$), supporting Hypothesis 5 and reinforcing the concept that satisfied employees are more likely to display organizationally helpful behaviours. This finding is supported by recent studies in nursing and healthcare that establish job satisfaction as a strong antecedent of OCB, indicating that nurses with higher job satisfaction are likely to exhibit discretionary, organization-improving behaviours (Chattopadhyay, 2024; Mishra et al., 2023; Sun et al., 2025).

LIMITATIONS OF THE STUDY

This research is conducted specifically among government hospitals in only three districts of Haryana. Therefore, the results do not necessarily reflect the situation or issues in government health facilities, which may vary significantly in terms of resources, patient population, and quality of services.

The research method employed involves the use of purposive and convenience sampling techniques, which may limit the extent to which the results can be extrapolated to a larger population. This type of sampling targets specific groups or individuals, which can introduce bias and hinder an overall understanding of the healthcare environment.

Further, there is also a risk that the answers gathered from the participants may be influenced by social desirability bias. This is when individuals give responses that they believe are more positive or ideal to others, even though they have been assured of their anonymity. This bias is likely to affect the validity of the information gathered.

SUGGESTIONS FOR FUTURE RESEARCH

Though the research study enhances the understanding of the correlation and effect of emotional regulation, job satisfaction, and organisational citizenship behaviour in chosen hospitals, respectively, suggestions for future research are:

- Future research can be undertaken on the nurses employed in the private hospitals of Haryana. Moreover, the comparative study can be conducted.
- Emotional labour can also be studied in other industries, for instance, banking institutions, lawyers and judges, bill collectors, frontline managers, the aviation industry, and call centres.

While the present study gathered data from three hospitals, the sample included only 200 nurses from the chosen hospitals. For future studies, it is advisable to have more respondents from each organisation to make the results generalizable to the entire organisation.

CONCLUSION

This research shows that emotional labour is a strong predictor of both job satisfaction and Organizational Citizenship Behaviour among nurses. The findings indicate that although the deep acting-component of emotional labour enhances job satisfaction and supports OCB, surface acting generates negative outcomes, which can result in emotional exhaustion and decreased discretionary effort. Within the context of nursing, where compassionate interaction and patient care are paramount, the capacity to regulate emotions genuinely presents itself as a crucial determinant of morale maintenance

and the enhancement of prosocial behaviours in healthcare teams. In nursing, where empathy and genuine patient interaction are essential, successful emotional regulation is crucial for an engaged workforce and for delivering high-quality care to patients. The results indicate that healthcare organisations need to institute training, emotional support systems, and workplace policies that assist nurses in better regulating their emotions, thus enhancing job satisfaction and voluntary behaviour.

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AUTHORS



Dr Dipi Talwar is an Assistant Professor at Maharaja Agrasen University, Baddi. She has a PhD in Human Resources and is UGC-NET qualified in management. Her research areas are human resource management, economics, operations research, and consumer behaviour.



Dr Diksha Sharma is an Assistant Professor at Maharaja Agrasen University, Baddi. She has qualified for the UGC-NET in Commerce and holds a PhD in Marketing. She is actively engaged in teaching and research in the fields of digital marketing, consumer behaviour, and management.