An Empirical Study of Chinese Healthcare Care Theory Method and Calculation Simulation

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Abstract

The study expanded the concepts in emotional labor by analyzing the mediating of perceived organization support on emotional labor strategies related to turnover intentions. On the other hand, this essay led new light on Chinese hospital employee management within the medical industry by analyzing the front-line hospital employees' emotional labor and turnover intents, particularly mediating with perceived organization support (POS) and moderating with emotional exhaustion. [Methodology]This paper investigated the effect of emotional labor and turnover intention by using data. Moreover, SPSS Statistics 22.0 & AMOS 22.0 statistic programs, calculation simulation and theory method were used in analysis three key hypotheses. [Findings]The surface acting is positively related to turnover intention and the deep acting is negatively related to turnover intention, the perceived organizational support as the mediating variable between emotional labor and turnover. The emotional exhaustion effects as the moderating variable between emotional labor and turnover intention.[Implications]Medical organizations with a high requirement of emotional labor should adopt diversified measures to strengthen their intervention in influences of emotional labor. In terms of front-line employees already showing symptoms of emotional exhaustion, organizations should let these employees relax emotionally. After the employees recover from emotional exhaustion, they can continue with their job.

Keywords: *Emotional labor, calculation simulation, emotional exhaustion, theory method, turnover intention*

1. INTRODUCTION

The lately management of medical service become more and more focused on the function of emotion in the delivery of service, especially the emotional labor provided by the Chinese service employees. The front-line workers of medical service are supposed to show some emotions and hide others in their works when they interact with the patients in compliance with their work requirements and the expectations of organization. In this context, the notion of emotional labor can be defined as "a regulative course in the emotion and expression to fulfill the organizational goals"(Adebayo &

Ezeanya, 2015)—has drew wide attentions among the current researches with an aim to apprehend how to better deliver "smiling service" to patients by efficiently controlling nurses' display of emotions (Grandey 2003). From the time when Hochschild (1983) introduced the definition, most of researches pertaining to the emotion labour are emphasized on the dimensionality and its influence on the wellbeing of employee. As for the dimension of emotional labour, the deep acting (trying to change the emotion felt so that it follows an authentic emotional display), and the surface acting (faked or amplified emotions by showing emotions which isn't truly felt)

are the two major strategies that the employees adopt to comply with the expectations on the display of emotion (Adekola, 2016 & Hochschild, 1983). The researches have emphasized some negative results of emotional labour among nurses, including the problem of psychological health, for example, burnout (Brotheridge & Grandey, 2002).

Furthermore, the interaction with patients is the significant part of the work of a medical employee (Blaul, 2014). Interaction is not only the duty of a medical employee, but also connects with whether she and her job are accepted (Al-Homayan, Shamsudin, Subramaniam & Islam, 2013). However, owing to the consistent effects of various pressures, the interaction between medical employees and her patients tends to drop; even some of the medical employees have job burnout. Many researches are focusing on the influence of pressure on interaction in various scenes (Al-Homayan, Shamsudin, Subramaniam & Islam, 2013). It related pressure with service objects can predict when emotion exhausts (major dimension of job burnout) (Chang, Wang & Huang, 2013).

Also, though some researchers have found out that the generation of emotional labor has close relationship with turnover intention, pretty few researches have paid attention to what role emotional exhaustion have played between emotional labor and turnover intention. This is important, examining how a personality trait (emotional exhaustion) influences surface acting and deep acting and turnover intention reveals the complex ways in which individual differences can affect the process of emotional labor to turnover intention. Together, these extensions increase the scope of theories of emotional labor to turnover intention (e.g., Grandey, 2013). Moreover, surface acting in emotional labor primarily refers to delivering an emotion consistent with duty through adjusting exterior expression with efforts. The strategy is less relevant with inner part of a medical employee. That is to say, the negative attitude of a nurse on patients has small changed. Deep acting of emotional labor performs expression and emotion

status through changing inner feeling. Thus, surface acting and deep acting have different effects on turnover intention, when the emotional exhaustion as a moderating variable.

Therefore, this study uses statistical software SPSS 22.0 and AMOS 22.0, takes China's hospital employees as the research objects, conducts an empirical study of the relationship between the emotional labor and its dimensions and the turnover intentions, the mediating effect of perceived organizational support and the moderating effect of medical employees' emotional exhaustion, in order to reveal the process and mechanism of the effect on emotional labor on turnover intention.

2. THEORETICAL BACKGROUND AND RESEARCH HYPOTHESES

2.1 Emotional labor (EL)

The first definition of emotional labor was formerly proposed by Hochschild(1983), claiming that emotional labor is fundamentally "a form of regulation of emotions which produces a publicly visible facial and physical expression in the working environment. "To date, the research on emotional labor has mainly highlighted the two-dimensional, three-dimensional and four-dimensional dimensions. According to Hochschild (1983), the two-dimensional mental process about emotional labor, namely surface acting and deep acting, has been widely recognized by the academic community. These two dimensions are considered to be two typical forms of emotional labor. The surface acting is related to a process of pretence by which external expressions are changed while the internal feelings remain intact. Conversely, the deep acting indicates a process that requires efforts. Through this process, employees can alter their inner feelings to conform to the expectations of the organization, so as to output more natural and more authentic emotional expression.

2.2 Turnover Intention (TI)

The term "turnover intention" refers to the willingness of employees to change their jobs or companies out of free will (Chang, Wang & Huang,

2013). Given the huge costs of drawing and replacing the human capital, the turnover intentions of employees are a major concern for plenty of organizations (Chang, Wang & Huang, 2013). As far as the individual employee is concerned, turnover may cause personal and interpersonal issues after leaving the organization (Perryer, 2016).

2.3 Emotional labor and turnover intention

Several researchers have explored the effect of emotional labor on turnover intention (Grandey, 2013). Those employees frequently involved in emotional labor may shape their attitudes in inappropriate working environment, eventually forcing them to resign from the organization (Grandey, 2013). Such viewpoint lays an emphasis on the cumulative effect of emotional labor in predicting turnover, which echoes the employees' attitudes towards work formed in daily tasks and work-related communications. Over time, such attitudes will develop into avoidance cognition and behaviors, such as turnover (Holtom & Freedy, 2016).

More specifically, when a medical front-line employee adopts the strategy of deep acting, he will remain positive inside, and this can hopefully generate positive response among patients and help form a harmonious employee-patient relationship. Under the condition, hospital employees can obtain a stronger sense of self-efficacy and fulfillment, which will in turn supplement their lost emotional resources from patients' positive response (Holtom & Freedy, 2016). Conversely, when a medical front-line employee resorts to the strategy of surface acting, his internal feelings and his external emotional expressions might be widely apart. Under the condition, employees might behavior negatively, including emotional disorder and job withdrawal. If such negative emotions are not reasonably and effectively vented, the employees might have the intention of leaving (Diefendorff, 2007). Therefore, the surface effect is expected to be proportional to the volume. Maintaining positive performance (and management-related mood disorders) is an unpleasant experience for a large number of front-

line medical workers, and can shed them to withdraw from the situation in the long term (Grandey, 2013).

As Adebayo (2016) suggested deep acting tends to induce real emotional expressions, thus bringing positive experiences to the medical staff (in the sense that the medical staffs are experiencing more positive emotions over time), thus lowering the possibility of withdrawal behavior. Hoschschild(1983) illustrated the important role of emotional labor to medical staff by studying the emotional services provided by medical staff to hospitals. Abraham (2008) stressed the crucial role of emotional labor to medical personnel and medical industry by focusing on the relationship between emotional labor and turnover intention. Based on the above discussion, the following hypotheses are made:

Hypothesis 1: Surface (deep) acting is positively (negatively) related to turnover intention.

2.4 The mediating effects of Perceived Organizational Support

The perceived degree to which employees pay attention to their contributions and value their well-being is known as perceived organizational support (Eisenberger et al., 1986). Scholars in the literature of perceptual organization support refer to the social exchange theory (Eisenberger, 2003; Blau, 2014), suggesting that the employees return what they get from the organization. Adhering to the principle of reciprocity, Seppänen (2016) held that the organizational treatment is able to bring about the sense of responsibility stimulating the employees to help the organization achieve its goals.

To state the mediating effects of perceived organizational support between emotional labor and turnover intentions, the analysis as following:

The previous researches have showed that the leaving intention is one of greatest predictor and immediate precursor for the employee turnover (Perryer, 2016). Hobfoll (2013) have the intention conceptualized into a statement pertaining to the special behavior of interest. The employee's leaving

intention are inherently relative to the turnover behavior, and it provides the reasons why there are more turnover variance than other emotional or affective responses like the job satisfaction.

The study of Hobfoll (2016) revealed that emotional had an important influence on medical front-line staffs' do not be leave. This is reasonable to show that, after the front-line medical employees feel that they are receiving unfair treatment in aspects of outcomes provided by the organizational support, they are inclined to resign from the current unit and hunt for a better job. The model of social exchange offers an explanatory framework in this respect.

The medical employees with deep acting are inclined to show greater feelings of belonging and loyalty to the unit, and they understand the gains and losses of the unit as their own. The increased perceived organizational support will reduce the leaving intention of employees. Empirically, perceived organizational support was found to be negatively related to intention to leave.

Based on the afore-said arguments, the emotional labor and turnover intention will receive medical treatment for the behavior of the employees of the organization and themselves, which is the logical assumption that emotional labor impacts on the organization under the support of the organization, thus strengthening the sense of organizational support of employees, and decrease their intention to leave the organization. Thus, the following hypotheses are made:

Hypothesis 2:Perceived Organizational Support will mediate the relationship between emotional labor (EL) and turnover intention (TI).

2.5 The moderating effects of Emotional Exhaustion (EE)

Emotional exhaustion is used a moderator variable (Hobfoll & Freedy, 2016). Emotional exhaustion was first proposed by Freudenberger in 1970s, a famous psychologist, and gradually formed the framework of job burnout theory in his later works. Freudenberger (2001) believed that emotional exhaustion was the results of measuring and

evaluating one's ability, and this result in turn regulated people's choice on behavior and determined their capability in the specific job. As an important component of psychological theory, emotional exhaustion can summarize the emotional resources and behavior of employees (Khamisa, Peltzer & Oldenburg, 2015). It is an important factor that affects the medical employees' behavior choice and effort of organization (Adebayo, 2016). Studies have shown that personal resources may play a regulating role between special emotional work environment and outcome variable (Hobfoll & Freedy, 2016).

In a service-oriented medical organization, a medical front-line employee is required to show the desired emotions while interacting with patients (Khamisa, Peltzer & Oldenburg, 2015). As mentioned above, emotional labor consumes emotional resources, and surface acting consumes more emotional resources than deep acting does. The reason is that, on the one hand, surface acting is a faking which is against the real feelings of an employee. In other words, the employee's inner feelings and his external emotional expression are paradoxical (Grandey, 2013). On the other hand, the faked positive emotions can be easily seen through by patients, which will in turn aggravate the medical employee's stress and sense of frustration. When depletion of emotional resources by a job is not immediately supplemented, a medical employee will suffer emotional exhaustion (Brotheridge & Grandey, 2002). In contrast, medical employees adopting the deep acting strategy can more naturally show positive and proper emotions in the workplace by arousing their positive emotions deep down inside (Adebayo & Ezeanya, 2015). The consistency between inner feelings and external emotional expression obviously consumes fewer emotional resources. Meanwhile, the natural emotional expression can help employees get recognition and positive feedback from patients, which in turn will deepen employees' sense of pleasure and achievement. Under the condition, emotional resources consumed can be effectively made up to reduce probability of emotional exhaustion (Hobfoll & Freedy, 2016).

Moreover, emotional labor relies on emotional resources (Hobfoll & Freedy, 2016). According to conservation of resource theory, if a medical employee suffers emotional exhaustion and the exhausted emotional resources are not immediately supplemented, the medical employees will have no extra emotional resources to efficiently accomplish other emotional labor (Grandey, 2013). With worsening of emotional exhaustion, the employee will hold a negative attitude towards his job (Demerouti, (2001). For example, he might work less hard, perfunctorily, or withdraw from the job so

as to protect and maintain his remaining emotional resources. In the long term, the medical employees might have the idea of quitting his current job. Based on the above analysis, the following hypotheses are made:

Hypothesis 3: Emotional exhaustion (EE) will moderator the relationship between emotional labor (EL) and turnover intention (TI).

3. RESEARCH METHODS

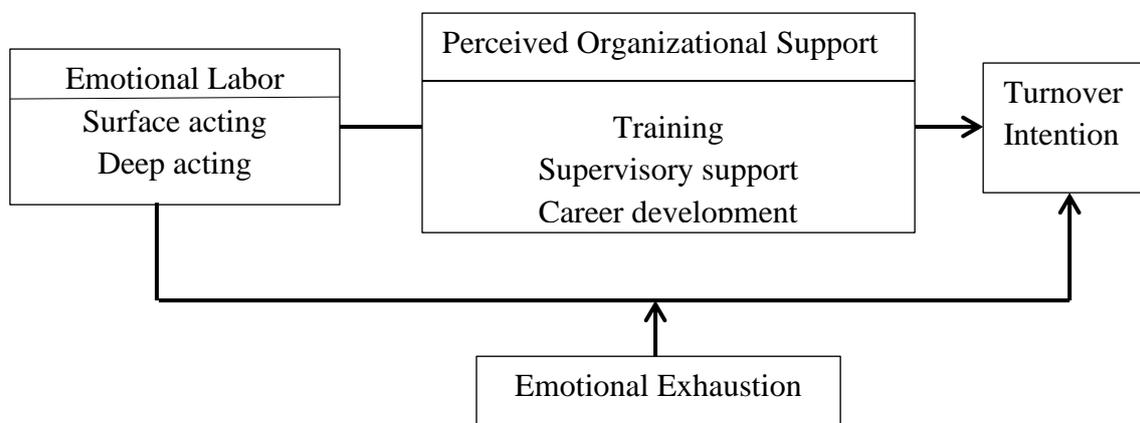### 3.1 Research model and analytical methods

Figure 1 Theoretical model

This study outlines hypotheses and constructs a research model. Accordingly, the variables and hypotheses in the model are tested by using the appropriate statistical methods. First of all, in order to ensure the feasibility of research results, the reliability and validity of the variables are verified. Secondly, the correlation analysis is used to validate

the causal relationship among variables. Finally, by using SPSS 22.0 and AMOS 22.0 statistical package, the structural equation model analysis and regression analysis are represented for the hypotheses in this study.

This study adopts the questionnaire with Chinese medical front-line employees as the research objects.

Table 1:The sample characteristic

Category		Proportion (%)	Category		Proportion (%)
Gender	Male	(113) 49.3	Age	41-50 years old	(53) 23.1
	Female	(116) 50.7		51-60 years old	(58) 25.3
Education Background	Middle school	(22) 9.6	Weekly Work Hours	5-20 hours	(121) 52.8
				21-35 hours	(48) 21.0
	High school	(56) 24.5		36-50 hours	(25) 10.9

				Above 51 hours	(35) 15.3
	Undergraduate	(83) 36.2	Length of Service	1-6 years	(22) 9.6
	Master	(40) 17.5		7-12 years	(68) 29.7
	Doctor	(28) 12.2		13-18 years	(86) 37.6
Age	20-30 years old	(73) 31.9		above 18 years	(53) 23.1
	31-40 years old	(45) 19.7			

3.2 Operational definition and measurement of variables

In order to analyze the reliability and validity of the measurement in this study, we choose the international scale with higher reliability for the measurement of variables. Additionally, Emotional labor (EL) is the work a person does to make his or her displayed emotions match those expected for a position (Hochschild, 1983). Diefendorff et al. proposed 5 items for measuring deep action (DA) and 5 items for measuring the surface action (SA) (2007). The three-dimensions of POS was conducted based on this (Eisenberger et al., 2003). The supervisory support was made on the basis of the adaptation from Greenhaus et al (1990). The career development was decided by four items that were adapted from Adekola (2011). Further, to assess emotional exhaustion, three items based on Brotheridge & Grandey (2002) was used. The turnover intention scale was based on work by Korczynski (2002).

3.3 Reliability and validity test

Some researchers suggest that reliability and validity are two important issues that any researcher should take into consideration when they design a research study, along with viewing the relevant literature and analyzing the data.

SPSS 22.0 is applied for factor analysis and reliability analysis. The measurement results of Tab.3 show that Bartlett sphericity test is significantly (P < 0.000), and the values of reliability and validity both are above 0.7, indicating that the scales have acceptable reliability and validity. Each item is respectively corresponding to each factor, which demonstrates that the scales have higher convergent validity.

Table 2:The reliability and validity

Variable		Items	Factor loading	Eigen values	Percentage of variance explained (%)	KMO	Cronbach's Alpha
EL	SA	I take action to treat the patient in an appropriate manner. I pretend to be in a good mood when interacting with the patient. When interacting with patients, I show "performance". I expressed to the patient a different feeling from my	.788 .738 .669 .622 .562	2.834	25.763	.871	0.845

		heart.					
		I put on a "mask" in order to display the emotions need for the job.					
	DA	I try to feel the real emotions I need to show to others.	.745	2.724	24.760		
		I tried to experience the emotions I had to show myself.	.738				
			.682				
		I really want to feel the emotions I show as part of my work.	.587				
			.547				
		I work hard to develop the inner feelings I need to show my patients.					
		I work hard and feel the emotions I need to show my patients.					
POS	TT	My organization provides employees with a good opportunity to conduct in-house work training.	.900	3.424	21.401	.816	0.897
		My organization provides employees with a great opportunity to learn the general skills and knowledge within the organization, which may be useful to me in my career.	.900				
			.568				
		My colleagues resisted my efforts to acquire and apply new knowledge or skills at work.					
	SS	My supervisor paid attention to my level of competence.	.910	3.200	19.998		
		My Supervisor was respectful of my views and ideas.	.910				
			.550				
		My supervisor gave me regular feedback on my performance.					

CD	The formal process of achieving professional development is very important to me. I understand the need for continuous professional development. Career planning tools are critical to supporting my career development. Career management programs are critical to supporting my career development.	.736 .723 .700 .563	2.903	18.144			
TI	I often think about giving up my current job. I often think about another way of working (except for an activity other than my current job). I am always looking for a better job.	.811 .760 .736	1.777	59.248	.644	.755	
EE	I feel emotionally drained from my work. Working with people all day is really a pressure for me. I think my job is bad.	.814 .782 .769	1.866	62.208	.667	.773	

Note：EL=emotional labor; SA= surface acting; DA=deep acting; POS=perceived organizational support;
T=training SS=supervisory support; CD=career development; TI=turnover intention. EE= emotional exhaustion;

Pearson correlation analysis method is used to make correlation analysis. It can be seen from Tab. 4 that there is no anomaly in terms of the mean and standard deviations of each variable. The results of the correlation analysis are shown in Tab. 4.

Table 3:The correlation analysis

	SA	DA	T	SS	CD	EE	TI
SA	1						
DA	-.377**	1					
T	-.748**	.421**	1				
SS	-.825**	.395**	.866**	1			
CD	-.722**	.417**	.762**	.740**	1		
EE	.878**	-.423**	-.750**	-.842**	-.736**	1	

TI	.542**	-.378**	-.471**	-.462**	-.438**	.403**	1
Mean	2.482	3.554	3.587	3.518	3.447	2.465	2.480
S.D.	0.717	0.751	0.708	0.696	0.735	0.700	0.483

Note：*P<0.05；**P< 0.01（The same below).

4. HYPOTHESIS TESTING

4.1 Validation for Hypothesis 1

This study uses SPSS 22.0 to conduct regression analysis on the impact of EL on TI. The results show that the F value is significant, which demonstrates that the variable is suitable for regression analysis. Moreover, SA has a positive impact on TI (β=0.468, P<0.01) and DA has a negative impact on TI (β=-0.220, P<0.01). Hypothesis 1 is supported.

Table 4:Regression analysis of EL on TI

Dependent variable	Independent variable	B	SE	β	t-value	p-value
TI	(constant)	1.969	.346		5.694	.000
	SA	.576	.071	.468	8.126	.000
	DA	-.258	.068	-.220	-.3.817	.000
R²=.336 F=57.292(.000)						

4.2 Validation for Hypothesis 2

This study uses AMOS 22.0 to validate the mediating effect of POS. Before evaluating the fitness of the model, we must check the offending estimates. In addition, from the mediating effect analysis table, it can be seen that the absolute values of standardized coefficients are no more than 0.95.

Therefore the fitness test for overall models can be conducted. The fitting criteria of the mediating models are: 0<CMIN/D<5; RMR<0.05; RMSEA <0.1; GFI>0.9; NFI, CFI and IFI are between 0 and 1, and the closer to 1, the better. The analysis results of the mediating effect of WS are shown in Tab. 6.

Table 5:The mediating effect of POS

	Standardized Estimate	S.E.	C.R.	P
EL→T	.776	.240	7.391	***
EL→CD	.775	.239	7.360	***
EL→SS	.193	.260	7.660	***
EL→TI	-.364	1.408	-3.810	***
T→TI	.319	.151	2.113	.035
CD→TI	.411	.166	2.856	.004
SS→TI	.327	.409	3.247	.001
Model Fit	CMIN/DF=4.299, RMR=0.031, GFI=0.957, RMSEA=0.0137, NFI=0.963, IFI=0.970 CFI=0.969			

Note：EL=emotional labor; T=training SS=supervisory support; CD=career development; TI=turnover intention.

Tab.6 shows that, the direct impact of EL on TI (-0.364) is less than the indirect impact (0.776*0.319=0.247), so T plays a mediating role in the relationship between EL and TI. The direct impact of EL on TI (-0.364) is less than the indirect impact (0.776*0.327=0.253), so SS plays a mediating role in the relationship between EL and TI. The direct impact of EL on TI (-0.364) is less than the indirect impact (0.776*0.411=0.318), so CD plays a mediating role in the relationship between EL and TI.

In conclusion, Perceived organizational support (T, SS and CD) plays a mediating role in the relationship between the EL and the TI. Hypothesis 2 is validated.

4.3 Validation for Hypothesis 3

In order to reduce the multiple collaterally problems of variables in the regression equation, according to Aiken and West (1994), before regression analysis, centralization is carried out for the mean of all variables, and hierarchical regression analysis is conducted whether EE plays a significantly moderating role in the relationship between EL and TI. The specific data are shown in Tab. 7.

M1 - M3 test whether EE plays a significantly moderating role in the relationship between EL and TI. The result of M1 is the same as the validation results of Hypothesis 1. M2 shows that EL and EE have positive influence on TI. M3 shows that the EE plays a regulating role in the relationship between EL and TI (β=-.174, P<0.05). R^2 of M3 is greater than that of M2, which shows that the regression model is better after the regulated variable EE is added. In addition, the F test of the model reaches the significant level of P<0.01, which shows that the fitting of the model is also good. At the same time, after the interaction item is added, $\triangle R2$ of M3 is 0.003 (P<0.05), which also shows that the moderating effect of EE is significant. That is, EE has moderating effect on the relationship between EL and TI. Hypothesis 3 is fully supported.

Table 6:The moderating effect of EE

variable	TI		
	M1	M2	M3
EL(SA)	.468***	.862***	.951**
EL(DA)	-.220***	-.287***	-.203***
EE		-.475***	-.308*
SA*DA*EE			-.174**
R2	.336	.384	.387
△R2	.336	.048	.003
F	57.292***	46.788***	35.419***

Note：EL=emotional labor; SA=surface acting; DA=deep acting; TI=turnover intention. EE=emotional exhaustion;

5. CONCLUSION AND DISCUSSION

5.1 Conclusion and Implications

The purpose of this study is to verify the mediating effect model of "Emotional labor (EL)→Perceived organizational support (POS)→ Turnover intention (TI)" as well as the moderating effect model with emotional exhaustion as the moderate variable. Employees in service-oriented medical organizations are adopted as research objects to verify reliability of

the two models. Through empirical research, we find that the research results and the hypotheses have been supported. Results suggest that:

(1) Different forms of emotional labor vary in terms of their influence on hospital employees' intention of turnover. Surface acting is a positive predictor of hospital employees' willingness of turnover; while deep acting can negatively influence hospital employees' willingness of turnover, but the negative influence has not reached the significance level; Therefore, in the current medial macro-environment, when organization selects employees, the selection of deep acting plays a significantly promoting role for organization management and easy to connect to their patients. In addition, the organization should pay attention to the employee's surface acting traits. In addition, POS can mediate the relationship between emotional labor and hospital employees' intention of turnover from above statistic analyzed. This means POS plays a fully mediating role between the EL and the TI. This shows that when the POS include T, CD, and SS, higher POS effect with and it will give employees a good incentive, thereby decreasing the generation of hospital employees' TI.

(2) EE plays an obviously regulating role between the EL and the TI. The result of M1 is same as the validation results of Hypothesis 1. The results of M2 show that EL and EE have positive influence on TI. The regression coefficient β of the product items is -0.174(P<0.01), M3, which shows EE plays a moderating role in the relationship between EL and TI. R^2 of M3 is greater than that of M2, indicating that the regression model is better after the moderator variable EE is added. The F test of the model reaches the significant level of P<0.001, which shows that the fitting of the model is also good. Then, after the interaction item is added, $\triangle R^2$ of M3 is 0.003(P<0.05), which also shows that the moderating effect of EE is significant. This suggests that employees adopting the strategy of surface acting might result in emotional depletion due to continuous consumption of emotional resources. If the consumed emotional resources are not immediately made up, hospital employees might have the intention of quitting the current job;

This study has the following implications:

(1) Practically, medical organizations with a high requirement of emotional labor should adopt diversified measures to strengthen their intervention in influences of emotional labor. For example, a harmonious work atmosphere and interpersonal relationship can be created to alleviate hospital employees' sense of pressure and nervousness; more psychological training and guidance can be provided for employees. In terms of hospital employees already showing symptoms of emotional exhaustion, organizations should let these employees relax emotionally. After the hospital employees recover from emotional exhaustion, they can continue with their job.

(2) mportant impression of patients regarding service quality is constituted of behaviors displayed by hospital employees who provide service.

(3) Due to the labor intensiveness, the centrality of patients and the great level of employee turnover rates, the management of human resources becomes even more important for enterprises. According to the framework, for the company's success, which wants to gain success in the section of service, it can be achieved by enrolling the employees who are inclined to show the emotional labor and by not enrolling those who don't. While people acquire knowledge and skills through expedience, the emotions can't be learnt or

changed. Besides, the workers who are inclined to show emotional labor will not confront the negative situations, such as emotional or physical stress or alienation, if the business requires sincere and cheerful behavior.

5.2 Limitation and Further Research

First, the major research objects of this research are full-time employees in the hospital industry. Thus, the research findings might not be applicable to employees in other sectors. Holtom & Mitchell (2008) pointed out emotional labor exists in different sectors, so research of emotional labor can be performed by dividing sectors into different types.

Second, the research variables measured in this paper are all based on hospital employees' self-evaluation. This might partially influence stability of the regression model and the external validity of research conclusions. In the future, it is necessary to expand samples to further verify research conclusions of this paper.

Third, this paper focuses on discussing influence of emotional labor on outcome variables of medical employees. Chau (2009) thought that emotional labor can influence patients' service experience, and influence the organization to different degrees. Therefore, the research perspectives should be further expanded to teams, organizations, or even patients' family.

Furthermore, this study focuses on the psychological factors of hospital employees, but the factors that affect the behavior of individuals include many other aspects except individual psychological factors, such as individual and organizational factors. How these factors influence turnover intention is also a direction that is worth exploring.

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