

Formulating a Model of Quitting Intention: The Role of Psychological Capital, Emotional Labor, and Organizational Culture among Nurses in Public Teaching University Hospitals.

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ABSTRACT

This article focused on the Role of Psychological Capital, Emotional Labor, and Organizational Culture among Nurses in Public Teaching University Hospitals. This study uses a qualitative approach by focusing on the interaction between psychological capital, emotional labor and organizational culture. The study results show that high emotional stress, unsupportive organizational culture, and lack of management support are the main factors that drive the quitting intention among nurses in public teaching university hospitals. Although psychological capital helps nurses cope with workplace challenges, high work pressure without adequate support can overwhelm these internal strengths. This study suggests the need for a more effective intervention in forming an organizational culture that supports and strengthens the psychological capital of nurses to reduce the rate of job termination.

Keywords: Quitting Intention, Emotional Labor, Psychological Capital, Organizational Culture, Public Teaching University Hospital

INTRODUCTION

The unemployment rate among nurses in Malaysia is becoming a serious issue. In a global context, the rate of nurse layoffs has reached an alarming level, and Malaysia is no exception to this trend. High turnover among nurses causes a critical shortage of experienced workforce and directly affects the quality of health services provided to the community. It is supported by research (Bae, 2022), which states that nurse turnover in acute hospitals has a negative noneconomic impact, such as patient mortality, medication errors, and other issues, and it is very costly. According to a study by Dagnew et al. (2020), nurses face barriers to quality oral care due to inadequate resources, lack of guidelines, staff shortages, time constraints, insufficient knowledge, poor supervision, and high workload. The rising turnover and unemployment rates among nurses in Malaysia's public teaching university hospitals create a critical shortage of skilled professionals, undermining patient care quality (Alzamel et al., 2020).

In addition, the emotional burden experienced by nurses in carrying out their daily duties is extremely high. This emotional burden refers to the need to control and express their emotions in a way considered professionally appropriate, even in challenging situations such as managing a critically ill patient or dealing with a patient's family who is under stress. According to Hochschild (2012), this emotional burden is one of the main factors contributing to emotional exhaustion, ultimately leading to burnout. This situation further increases nurses' intention to quit, especially when psychological capital and organizational culture support are insufficient. Leitão et al. (2021) stated that burnout affects individual well-being and the

organization's overall performance. Nurse burnout is also associated with worsening safety and quality of care, decreased patient satisfaction, and reduced nurses' organizational commitment and productivity (Jun et al., 2021).

This study aims to form a model that can explain the intention to quit among nurses in public teaching university hospitals in Malaysia, focusing on the role of psychological capital, emotional labor, and organizational culture. Psychological capital refers to an individual's self-efficacy, resilience, optimism, and hope. Psychological capital is an internal resource that can help individuals face work pressure more effectively. Increasing psychological capital through psychological capital interventions significantly reduces stress and job insecurity (Patnaik et al., 2021). However, in the context of public teaching hospitals in Malaysia, there is a lack of comprehensive studies on how this psychological capital interacts with emotional burden and organizational culture to influence the intention to quit.

This study is critical because it will provide a deeper insight into the factors contributing to the high rate of nurse layoffs. By understanding these factors, more effective strategies can be devised to reduce turnover intentions and retain experienced nurses. For example, a study by Pariona- Cabrera et al. (2022) found that increased psychological capital can help nurses and personal care assistants in aged care cope with physical violence, reducing stress, depression, and anxiety and reducing their intention to leave.

This study also has significant implications in terms of policy and practice. From the government's point of view, the findings of this study can be used as a basis for formulating more effective policies in dealing with the problem of layoffs among nurses in public teaching hospitals. For example, the government could introduce a more comprehensive training and development program focusing on increasing psychological capital and managing emotional stress among nurses. These programs will not only help reduce the rate of layoffs but also ensure stability in the health workforce, which is an essential requirement to ensure the delivery of high-quality health services.

This study is critical for the community because it can improve the quality of health services received by patients. More experienced and highly skilled nurses are key to effective health service delivery. By reducing attrition rates among nurses, public teaching hospitals can retain experienced nurses, ensuring continuity of patient care. Patients treated by experienced nurses had better treatment outcomes, which reflects the importance of maintaining a stable and skilled nursing workforce. A study by Hong (2020) found that nursing service experience is positively related to patient satisfaction, health system satisfaction and trust in the health system.

From the perspective of the healthcare industry, particularly public teaching university hospitals, this study provides an in-depth view of the factors contributing to layoffs among nurses. By understanding these factors, hospitals can devise more effective strategies to retain their nurses, reducing the costs associated with recruiting and training new nurses. A management strategy that emphasizes the improvement of a supportive organizational culture and the development of psychological capital among staff may reduce the rate of layoffs in their hospital. Healthy culture will create fun at work and reduce the quitting intention among nurses.

Finally, in terms of contribution to knowledge, this study will expand existing knowledge about the role of psychological capital, emotional burden, and organizational culture in

influencing the intention to quit. The findings of this study will contribute to the academic literature related to human resource management and work psychology, particularly in the context of health care. For example, this study is expected to provide a theoretical model that can be used as a basis for further studies in this field. This contribution to knowledge is crucial because it will give a more robust basis for understanding absenteeism dynamics among nurses, an increasingly critical issue in the global and local healthcare sector.

The scope of this study is focused on nurses who serve in public teaching university hospitals in Malaysia. This study will examine how emotional burden, psychological capital, and organizational culture affect the intention to quit among nurses. Public teaching hospitals were chosen as the context of the study because of their critical role in training the future health workforce and providing essential health services to the community. By focusing the analysis on this context, the findings of this study are expected to provide a more accurate and relevant view of the factors contributing to the termination of work among nurses in Malaysia.

LITERATURE REVIEW

Termination of Work (Turnover) Among Nurses

Attrition among nurses has become a critical issue in human resource management and healthcare worldwide. A study by Wyk & Naicker (2023) showed that the high rate of nurse layoffs causes a workforce shortage and affects the quality of health services delivered. This challenge is particularly pronounced in settings where nurses face heavy workloads, elevated emotional stress, and inadequate support from management, all of which contribute to the escalating attrition rates (Kowalczyk & Kułak, 2020). Addressing these issues is crucial for sustaining a stable and effective healthcare workforce.

In a more in-depth study, it is proven that nurses who choose to quit work often experience tremendous stress, not only physically but also emotionally and mentally. A heavy and unbalanced workload and high personal and professional demands are the main reasons for their desire to leave this profession (Pennbrant & Dåderman, 2021). This situation is exacerbated when hospitals face a shortage of trained workers, which further increases the workload of nurses still serving, creating a cycle of layoffs that is difficult to break.

In Malaysia, this problem of layoffs is more pronounced in public teaching hospitals, which play an essential role in training the future health workforce (Jarrar et al., 2023). Nurses in this hospital are not only responsible for patient care but are also involved in teaching and guiding medical students. This double responsibility increases the pressure on nurses, ultimately contributing to their quitting. The lack of an experienced workforce in these hospitals leads to decreased quality of health services (Alkhaqani, 2022). It affects the education and training process of medical students who depend on the experience and guidance of nurses.

A study by Subramony et al. (2023) also shows that one of the main factors contributing to layoffs is the inability of organizations to provide adequate support to nurses, especially in dealing with the increasing workload. Factors such as a lack of resources, poor leadership, and an unsupportive organizational culture are the main causes of increased absenteeism among nurses in public teaching hospitals.

Emotional Labor Among Nurses

Emotional labor, or emotional burden, is an aspect of work increasingly recognized as an important factor contributing to employee well-being and performance, especially in service sectors such as healthcare. According to Kılınç et al. (2020), emotional labor refers to employees managing their emotions to meet organizational expectations, especially when dealing with customers or patients. In health care, nurses often have to manage their feelings when dealing with patients in critical condition or when providing emotional support to the patient's family who are facing stress.

An in-depth study by Back et al., (2020) shows that prolonged emotional labor can lead to burnout, in which employees experience emotional exhaustion, depersonalization, and decreased personal achievement. This burnout affects nurses' mental and physical well-being and increases the intention to quit work. In addition, a study by Kumar & Jin (2022) found that high emotional labour among nurses in hospitals is often not accompanied by sufficient support from management. Nurses who have to deal with the emotions of patients and their families while maintaining high professionalism face constant pressure. Without adequate support, such as counselling or emotional management training, these nurses tend to experience burnout, which can lead to the intention to quit the job.

In addition, emotional labour is also associated with a decrease in nurses' mental and physical well-being. Continuous emotional labor can cause increased blood pressure, sleep disturbances, and mental health problems such as anxiety and depression (Eunjookim, 2017). This study emphasizes how important it is to manage emotional labor effectively among nurses to reduce the risk of burnout and termination of employment.

Psychological Capital

Psychological capital refers to an individual's internal resources that include four main components: resilience, self-efficacy, optimism, and hope (Luthans et al., 2007). Psychological capital is an important asset that helps individuals face challenges and pressures in their jobs more effectively. Studies show that individuals with high psychological capital can better overcome work pressure and maintain their mental well-being, even when faced with challenging work conditions.

In healthcare, psychological capital is an essential factor influencing nurses' intention to quit work. Nurses with strong psychological capital are better able to deal with high workloads and emotional labour and are more likely to maintain their commitment to their jobs (Yao et al., 2021). This psychological capital can also function as a buffer against the harmful effects of emotional labor, by providing nurses with the necessary internal resources to face the pressure.

A study by Luthans, & Youssef-Morgan (2017) found that high psychological capital among nurses can reduce the risk of burnout and increase job satisfaction. Psychological capital allows nurses to see challenging work situations as opportunities to grow rather than as threats to be avoided. For example, highly self-confident nurses are more likely to take the initiative to solve work problems. In contrast, optimistic nurses can better see the positive aspects of challenging situations.

In Malaysia, psychological capital was also crucial in influencing the intention to quit work among nurses in public teaching hospitals. A study by Ali et al. (2022) shows that nurses with high psychological capital can better maintain their commitment to their jobs, even when faced with high work pressure. This psychological capital can also reduce the negative effects of emotional labor by giving nurses the internal resources needed to face the pressure.

Organizational Culture in Public Teaching University Hospitals

Organizational culture refers to the values, beliefs, and practices shared in an organization, which shape the behaviour and attitudes of employees (Schein, 2010). In public teaching hospitals, organizational culture is vital in determining job satisfaction and intention to quit among nurses. Studies show that a supportive organizational culture, such as open communication, social support, and responsive leadership, can increase job satisfaction and reduce quitting intention (Olakunle, 2021).

A positive organizational culture can create a supportive work environment where nurses feel valued and receive the support they need to perform their duties effectively. For example, a study by Nurcholis, & Budi (2020) found that hospitals with a supportive and inclusive organizational culture can increase employee motivation and commitment, reducing the intention to quit. A positive organizational culture can also help reduce the negative effects of emotional labor, by providing the emotional and social support needed to cope with work stress.

On the other hand, a negative or toxic organizational culture can increase work stress and decrease job satisfaction among nurses. An unsupportive organizational culture, such as a lack of effective communication and weak leadership, can cause nurses to feel isolated and unappreciated, ultimately prompting them to leave their jobs Zaghini et al. (2020). A negative organizational culture can also magnify the negative effects of emotional labor, by increasing the risk of burnout and layoffs.

Interaction between Emotional Labor, Psychological Capital and Organizational Culture.

The relationship between emotional labor, psychological capital, and organizational culture in influencing the intention to quit is complex and interrelated. An in-depth study by Leiter & Maslach (2017) shows that high emotional labor can lead to burnout, increasing the intention to quit work. However, studies also show that psychological capital can act as a buffer against the negative effects of emotional labor by providing nurses with the internal resources needed to face the pressure (Da et al., 2020).

A positive organizational culture can also play an important role in reducing the negative effects of emotional labor and psychological capital on the intention to quit. A study by Wong et al. (2023) showed that a supportive organizational culture can strengthen psychological capital among nurses, reducing the negative effect of emotional labor on the intention to quit work. On the other hand, a negative organizational culture can magnify the negative effects of emotional labor, even though nurses have high psychological Capital (Luthans et al., 2007).

For example, a study by Boucher (2022) found that a supportive organizational culture can increase nurses' resilience, which reduces the risk of burnout and the intention to quit. This study also found that a positive organizational culture can strengthen self-efficacy and

optimism among nurses, which helps them see challenging work situations as opportunities to grow rather than threats.

In addition, the interaction between these three factors is also influenced by the organizational context and work culture in public teaching hospitals. Hospitals with a competitive and less supportive work culture tend to increase work stress and decrease nurses' mental well-being, which ultimately increases the intention to quit.

METHODOLOGY

Methodology is important in determining the approach and process used to achieve the study's objectives. In this study, a qualitative research method approach was chosen, where the researcher conducted interviews with five participants who were nurses at a public teaching hospital in Malaysia. The design of this study is Basic Qualitative Inquiry, which aims to deeply understand the experiences, views, and factors that contribute to the intention to quit work among nurses. This study uses a descriptive and interpretative approach to understand better the phenomenon under study (Babchuk, 2016).

Study Design

The research design used in this article is Basic Qualitative Inquiry. This approach was chosen because it allows exploring and understanding participants' subjective experiences without being tied to existing hypotheses or theories. Basic Qualitative Inquiry is suitable for this study because it allows the researcher to examine the factors influencing the intention to quit work from the nurses' perspective. This design also allowed the researcher to gather rich data in meaning and context, essential in understanding the interaction between emotional labor, psychological capital, and organizational culture (Patton, 2015).

The selection of the Basic Qualitative Inquiry design is also in line with the study's objective, which is to identify the factors that contribute to a high rate of job termination and to analyze the effect of emotional labor on the intention to quit work. This design allows the study to be carried out in an exploratory and interpretative manner, which is important to gain a deeper understanding of complex phenomena such as the intention to quit (Creswell & Poth, 2016).

Data Collection

In this study, data collection was done through two main methods: semi-structured interviews and observation. Semi-structured interviews were chosen because they allowed the researcher to obtain in-depth information from the participants while providing flexibility to explore related topics further (Wilson, 2014). The interview questions formulated are based on the study's objectives and focus on the participants' experiences related to emotional labor, psychological capital, and organizational culture in their workplace. These interviews were conducted face-to-face, and each session lasted 45 minutes and one hour.

Observation is also used as a data collection method to complement the information obtained through interviews (Laitinen et al., 2014). Through observation, the researcher understood the context of nurses' work, including their interactions with patients, colleagues, and management. These observations help in validating and enriching the data obtained from the interviews (Monday, 2020). The selection of interview and observation methods is based on

the need to obtain context-rich and in-depth data, which aligns with the study's objective, which seeks to understand the factors that contribute to the intention to quit work among nurses. In addition, this method also allows the researcher to get a more holistic view of the phenomenon being studied (Maxwell, 2013).

Sampling

The sampling strategy used in this study is purposive sampling, where participants are selected based on specific criteria relevant to the study's objectives (Palinkas et al., 2015). The target population in this study is nurses working in public teaching university hospitals in Malaysia who have experience and perspectives relevant to the phenomenon under study. The purposive sampling technique was chosen because it allows the researcher to select participants with deep knowledge and experience related to the issue under study (Morse, 2019).

The sample size chosen for this study is five participants. Although this sample size may seem small, it is sufficient for qualitative research where the main focus is on the depth and quality of data obtained rather than quantity. Qualitative research often uses a small sample size because it allows the researcher to conduct an in-depth and interpretive analysis, which is vital to understanding the phenomenon under study (Guest et al., 2013).

Data Analysis

Data analysis in this study was done using manual coding and thematic analysis techniques. The coding process involves grouping the data collected into specific themes or categories related to the study's objectives (Williams & Moser, 2019). Thematic analysis is then used to identify, analyze, and report the main patterns or themes in the data. Both techniques use Microsoft Word software, allowing the researcher to organize and manage data systematically.

The selection of coding and thematic analysis as a data analysis technique is in accordance with the nature of qualitative research that emphasizes a deep and interpretative understanding of the data. Thematic analysis allows the researcher to identify the main themes that appear in the data, which aligns with the study's objective to identify the factors that contribute to the intention to quit and analyze the effects of emotional labor (Braun & Clarke, 2006).

Ethical Considerations

In conducting this study, several ethical considerations have been taken into account to ensure that the rights of the participants are protected. First, ethical approval was obtained from the university before the study was conducted. Second, all participants involved in this study were given a clear explanation of the purpose of the study, the data collection process, and their rights as participants, including the right to withdraw from the study at any time without any negative implications (Orb et al., 2001).

Written consent was obtained from the participants before the interview and observation sessions were conducted. In addition, to ensure the confidentiality and privacy of the participants, all data collected was de-identified, and the names of the participants were replaced with codes or pseudonyms. These steps are taken to ensure that the rights and privacy of the participants are protected throughout the study (Patton, 2015).

Data Validity and Reliability

To ensure the validity and reliability of the data in this study, several steps were taken. First, data triangulation was done using various data sources, including interviews and observations, to ensure that the data obtained was consistent and verifiable (Farmer et al., 2006). Second, member checking was done, where the study's initial results were shared with the participants to get feedback and confirmation about the accuracy of the data interpretation.

In addition, peer debriefing is also done by involving fellow researchers with experience in the same field to review the analysis process and the study results. It helps ensure that data analysis is done objectively and without bias (Shenton, 2004). These steps are taken to ensure that the data obtained is valid and reliable and can provide an accurate picture of the phenomenon being studied.

EMPIRICAL RESULTS

This study has provided an in-depth insight into factors contributing to the intention to quit work among nurses in public teaching university hospitals in Malaysia. Through in-depth interviews with five participants, several key themes were identified that help to understand better why nurses often consider leaving their jobs. These findings provide a strong picture of high emotional stress, unsupportive organizational culture, as well as lack of management support as the main drivers of intention to quit.

One of the main findings is the emotional stress nurses face in performing their daily duties. This pressure often comes from interactions with patients and their families, which requires nurses to maintain professionalism even in stressful situations. One participant stated, *"Ehhh, that emotional pressure can't be avoided, right? Sometimes, when the patient is angry, we have to be patient. But, in that heart, it is very stressful."* This statement illustrates how difficult it is for nurses to control their emotions and how this leads to burnout and a desire to quit work.

Organisational culture has also been found to play an important role in influencing the intention to quit. Most participants felt that the organizational culture in their hospital did not care about employee well-being. They feel that the organization cares more about work results than the welfare of employees, which causes many to feel unappreciated and burdened. Another participant said, *"Eh, I think the organizational culture here makes many people want to quit. Aaa... no support, a lot of work, and sometimes it seems unappreciated."* This statement shows that when nurses feel they do not get enough support from management, the intention to quit is stronger.

Despite efforts from the hospital to provide emotional support, study participants felt that the support provided was insufficient. Some participants stated that the support programs did not focus on their real problems at work. It caused the perceived work pressure not to decrease, and the support did not reduce their intention to quit. One of the participants said, *"Mmm, support from the hospital? Ehhh... to be honest, I don't think it's enough. Sometimes, it feels like we have to face everyone."*

In addition, the role of psychological capital, such as resilience, optimism, and self-confidence, has also been identified as an essential factor in helping nurses face challenges at work.

Although this psychological capital gives nurses internal strength to survive, high work pressure and lack of support from management still make it difficult for them. A participant said, *"Ehhh, self-reliance is the most important thing for the researcher. Mmm, if I didn't have endurance, I would have stopped a long time ago."* It shows that although psychological capital helps nurses to survive, it cannot replace the need for more concrete support from the organization.

Overall, this study asserts that emotional stress, unsupportive organizational culture, and lack of management support are the main factors that prompt nurses to consider termination of employment. Although psychological capital helps them to persevere in the face of challenges, high work pressure and lack of support can overwhelm these inner strengths. These findings show how important it is for organizations to provide relevant and effective support to help nurses cope with work stress. With more proactive measures, organizations can help reduce stress and improve nurses' well-being while reducing absenteeism.

CONCLUSION

This study found that the main factors driving nurses' intention to quit their jobs were emotional stress, unsupportive organizational culture, and lack of management support. Nurses experienced high emotional stress from interactions with patients and families and felt that the support they received was inadequate to help them cope with this stress. One participant noted that despite trying to control his stress, it still negatively impacted his well-being and increased his desire to quit.

The organizational culture was also found to play a critical role. Most participants felt that their hospital's culture did not prioritize employee well-being and focused more on work results. It made many nurses feel unappreciated and burdened, leading some colleagues to consider quitting. As a result, many nurses expressed a decline in job satisfaction, which affected their motivation and overall commitment to the organization

While psychological capital like resilience, optimism, and self-confidence helped nurses face workplace challenges, the constant work pressure and lack of management support remained major obstacles. One participant said his resilience was necessary, but the high workload sometimes overwhelmed this inner strength. Despite their psychological capital, many nurses felt that their personal strengths were stretched to the limit, leaving them vulnerable to stress and burnout.

Overall, the study emphasizes the need for organizations to provide relevant and effective support to help nurses manage work stress. Organizations can reduce nurse absenteeism and turnover by addressing these key factors, improving employee well-being and healthcare service quality. Implementing structured support systems, such as stress management programs and regular mental health check-ins, could foster a more resilient and engaged nursing workforce.

Based on the discussion and findings in this study, a conceptual model has been developed to address the issue of nurses quitting intention in public teaching university hospitals in Malaysia. It focuses on critical factors such as emotional labor, organizational culture, management support, and psychological capital. Emotional labor, identified as a primary factor influencing nurses to consider quitting, requires effective management to lessen its impact. An unsupportive organizational culture can intensify emotional distress and increase

turnover intentions. In this model, fostering a positive organizational culture helps alleviate the negative effects of emotional stress. Adequate management support is essential in assisting nurses to cope with emotional challenges, serving as a crucial element that enhances their well-being and reduces the likelihood of quitting. Furthermore, psychological capital, comprised of resilience, optimism, and self-confidence, is vital in equipping nurses to face workplace challenges, acting as a buffer against emotional stress and a challenging organizational environment. This model emphasizes a holistic approach, where addressing emotional stress and strengthening supportive factors collectively improve nurses' well-being and reduce turnover rates.

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