

# **Burnout, Emotional Labor and Emotional Intelligence of Psychological Nurses**

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## **Abstract**

*This study was conducted to determine the emotional intelligence, emotional labor and burnout among psychological nurses. The subjects were 200 psychological nurses working at 5 mental hospitals in C & D city. The self-reported questionnaires were administered to psychological nurses and data were analyzed with SPSS 19.0. Results were as follows: The burnout was negative correlation with emotional intelligence, burnout was positive correlation with emotional labor. The burnout of psychological nurses was significantly different according to age and job satisfaction. The significant explanatory variables of burnout were emotional intelligence, emotional labor, job satisfaction, and experience of move unit. Explanatory power was 36.5%. The findings suggested that the intervention program of burnout should be developed in order to improve psychological support, manage emotional Intelligence and reduce emotional labor among psychological nurses.*

**Keywords:** Emotional Intelligence, Emotional labor, Burnout

## **1. Introduction**

### **1.1 Necessity of Research**

Psychological nurses have much work such as counseling, therapeutic activities, and education which require high level expertise compared to nurses in general wards in which tension and burnout of work is always experienced due to frequent recurrence of patients, psychological emergencies such as suicide or violence, and occurrence of accidents [1]. Also, excessive demand for improvement of nursing quality in psychological nursing clinical sites increases the burnout among psychological nurses[2].

Burnout is a mentally exhausted status in which negative effect is given to individuals and the whole organization, and applies as factor to hinder nursing quality. Due to the great ripple effect to others, research to understand factors that influence burnout is required [3,4].

Emotional labor means the stress shown in emotional expression that is regulated by an organization when facing customers while controlling one's emotion[5] and more work burnouts are experienced when emotional labor increases [2, 4, 6].

Emotional intelligence is ability to evaluate and control the emotion of oneself and others and is the capacity to efficiently control the emotion of oneself and others[7] in which it is receiving attention as an important moderating role between emotional labor and burnout nowadays. Burnout was higher in clinical nurses with lower emotional intelligence in previous research and moderating effect of emotional intelligence was found in the relation between emotional labor and burnout[4, 6]. It can be said that enhancement of sensibility functions is required for mediation and alternatives of burnout for nurses with severe emotional labor.

A few previous researches on burnout, emotional labor, and sensibility functions subject to nurses exist [4, 6], but there are not many researches subject to psychological nurses who have more emotional labor compared to other wards due to professional counseling and education using themselves as therapeutical tools.

Therefore in this study, effects of emotional labor and emotional intelligence on burnout among psychological nurses were investigated to prevent burnout among psychological nurses and provide basic data for mediation programs.

## **1.2 Research Purpose**

This research is aimed to understand the level of effects of emotional labor and emotional intelligence on burnout among psychological nurses and specific contents are as follow.

- 1) The levels of emotional labor, emotional intelligence, and burnout of psychological nurses are investigated.
- 2) Difference of burnout according to general characteristics of psychological nurses is investigated.
- 3) Correlation between emotional labor, emotional intelligence, and burnout of psychological nurses is investigated.
- 4) The level of effects of emotional labor and emotional intelligence on burnout among psychological nurses is investigated.

## **2. Research Method**

### **2.1 Research Design**

This research is a descriptive study to understand emotional labor, emotional intelligence, and burnout among psychological nurses.

### **2.2 Research Subjects and Method of Data Collection**

The subjects of this research are psychological nurses working in 5 psychiatric hospitals located in C and D locations.

When two-sided testing significance level of .05, effect size of 0.15, statistical power of 0.95, and predictive factors of 5 or higher in multiple regression, 138 subjects are calculated using the G\*power 3.1.4 program[8]. Based on this, 210 subjects were convenience sampled. Among them, 200 subjects were employed in statistics(95.2%) . For this study, the purpose and method of this study was explained to the organization head and nursing department head to receive verbal agreement. After explaining the purpose, anonymity, non-harmfulness of this study, voluntary participation, possibility of withdrawal, and guarantee of confidentiality, surveys were given to the subjects after verbal agreement. Subjects filled out the surveys in hand after verbal agreement and minor thanks were given to nurses who have completed the survey.

### **2.3. Research Tools**

#### **1) General Characteristics**

General characteristics included gender, age, marriage, religion, education, position, number of patients, number of nurses, working career, Type of duty, Time of duty, Job satisfaction, Experience of turnover, Experience of move unit.

#### **2) Emotional Intelligence**

For emotional intelligence, the tool developed by Wong & Law[9] and adapted by Lim[10] was used. This tool uses a Likert 7-point scale and is composed of 16 total items

including 4 items on understanding personal sensibility, 4 items on understanding sensibility of others, 4 items on use of sensibility, and 4 items on control of sensibility in which higher points show higher emotional intelligence. Reliability of the tool was Cronbach's  $\alpha=.80$  when developed, Cronbach's  $\alpha=.93$  in research by Baik & Yom[6], and Cronbach's  $\alpha=.90$  in this study.

### 3) Emotional Labor

For emotional labor, the tool developed by Morris & Feldman[3] and adapted by Kim[11] was used. This tool uses a Likert 5-point scale and is composed of 9 total items including 3 items on frequency of emotional labor, 3 items on caution of emotional expression, and 3 items on mismatch of emotions in which higher points showed higher level of emotional labor. Reliability of the tool was Cronbach's  $\alpha=.81$  when developed, Cronbach's  $\alpha=.86$  in research by Kim[11], and Cronbach's  $\alpha=.82$  in this study.

### 4) Burnout

For mental burnout, the tool developed by Maslach & Jackson[12] and adapted by Choi & Jeong[13] was used. This tool uses a Likert 7-point scale and is composed of 22 total items including 9 items on mental exhaustion, 5 items on depersonalization, and 8 items on decline of accomplishment in which higher points showed higher level of burnout. Reliability of the tool was Cronbach's  $\alpha=.76$  when developed, Cronbach's  $\alpha=.89$  in research by Baik & Yom[6], and Cronbach's  $\alpha=.79$  in this study.

## 2.4 Data Analysis

Collected data was analyzed using the SPSS 19.0 statistics program. Descriptive statistics were used for level of general characteristics, emotional intelligence, emotional labor, and mental burnout of the subjects. Difference between level of general characteristics, emotional intelligence, emotional labor, and mental burnout of the subjects were analyzed by t-test and ANOVA, and Scheffe test was used for post analysis. Relation between emotional intelligence, emotional labor, and burnout of subjects was analyzed by Pearson's correlation coefficients and hierarchical multiple regression was used to check factors that influence burnout of the subjects.

## 3 Research Results

### 3.1 General Characteristics

Females occupied the majority with a number of 180 subjects(90%) and most subjects were in their 80s to be 81 subjects(40.5%). 158 subjects(79.0%) were married and most were Christians with 73 subjects(36.5%). 94 subjects graduated University(47.0%) and there were 151 ordinary nurses(75.5%). 123 subjects had 51-100 patients(61.5%) and 112 subjects had 5 or less number of nurses(56.0%). 62 subjects had career of 11-20 years(31.0%), 61 subjects had career of 21-31 years(30.5%), and 151 subjects had shifts for work(75.5%). 193 subjects had 8 working hours and 106 subjects answered that they were satisfied(53.0%). 126 subjects had experience of transfer(63.0%) and 132 subjects have transferred wards(66.0%) (Table 1).

**Table 1. General Characteristics of Subjects (N=200)**

Characteristics	Categories	N(%)
Gender	Male	20(10)
	Female	180(90)
Age(year)	<30	19(9.5)
	30-39	54(27.0)
	40-49	81(40.5)
	50≤	46(23.0)
Marital status	Single	38(19.0)
	Married	158(79.0)
	Others	4(2.0)
Religion	Protestant	73(36.5)
	Catholic	34(17.0)
	Buddhist	25(12.5)
Education	None	68(34.0)
	College	71(35.5)
	University	94(47.0)
Position	Over master	35(17.5)
	Nurse	151(75.5)
	Charge nurse	11(5.5)
Number of patient	Head nurse	38(19.0)
	≤ 50	62(31.0)
	51-100	123(61.5)
Number of nurses	≥ 101	15(7.5)
	≤ 5	112(56.0)
	6-10	74(37.0)
Career of working(year)	≥ 11	14(7.0)
	≤ 10	71(35.5)
	11-20	62(31.0)
	21-30	61(30.5)
Type of duty	> 30	6(3.0)
	Shift	151(75.5)
Time of duty(hour)	Day work	49(24.5)
	8	193(96.5)
Job satisfaction	12	7(3.5)
	Satisfied	91(45.5)
	Moderate	106(53.0)
Experience of turnover	Dissatisfied	3(1.5)
	Yes	126(63.0)
Experience of move unit	No	74(37.0)
	Yes	132(66.0)
	No	68(34.0)

### 3.2 Emotional Intelligence, Emotional Labor, and Burnout among Psychological Nurses

Average of items of emotional intelligence was 4.9(0.74) and emotional labor showed average of 3.0(0.57). Burnout was shown to be 3.0(0.83)(Table 2).

**Table 2. Mean of Emotional Intelligence, Emotional Labor and Psychological Burnout**

Variable	M(SD)	Minimum	Maximum	Rank
<b>Emotional Intelligence</b>	4.9(0.74)	1.0	6.4	
Self emotion appraisal	5.5(0.86)	2.0	7.0	1
Other's emotion appraisal	5.0(0.72)	3.2	6.7	2
Use of emotion	4.9(0.86)	2.7	7.0	3
Regulation of emotion	4.6(0.95)	1.2	7.0	4
<b>Emotional Labor</b>	3.0(0.57)	1.7	5.0	
Frequency of emotional display	3.3(0.71)	1.0	5.0	1
Attentiveness to required display rules	3.1(0.63)	1.6	5.0	2
Emotional dissonance	2.7(0.75)	1.0	5.0	3
<b>Psychological Burnout</b>	3.0(0.83)	1.1	6.7	
Emotional exhaustion	3.4(1.17)	1.0	10.0	1
Depersonalization	2.5(0.99)	1.0	5.6	3
Reduced personal accomplishment	2.9(1.17)	1.0	10.13	2

**3.3 Difference of Burnout According to General Characteristics of Psychological Nurses**

Emotional intelligence varied depending on age(F=3.73, p=.012), education(F=3.58, p=.015), working career(F=4.43, p=.005), and job satisfaction(F=5.21, p=.002). As result of post analysis by Scheffe test, subjects in their 40s were higher than 30s, Master' s degrees were higher than college degrees, subjects with career of more than 30 years were higher than unde 10 years, and subjects with job satisfaction were higher than subjects that do not have job satisfaction. Emotional labor varied depending on age (F=7.15, p=.001), number of patients(F=5.94, p=.003), and working hours(F=6.59, p=.011). As result of post analysis by Scheffe test, subjects in their 50s were higher than 20s or 30s, subjects with 51-100 patients were higher than more than 101 patients, and 12 hour working subjects were higher than 8 hour working subjects. As result of post analysis by Scheffe test, subjects in their 30s were significantly higher than 50s and subjects with work satisfaction were lower than subjects without work satisfaction(Table 3).

**Table 3. Emotional Intelligence, Emotional Labor and Burnout according to General Characteristics**

Variables	Items	Emotional Intelligence			Emotional Labor			Burnout		
		M(SD)	t or F	<i>p</i> <sub>ST</sub>	M(SD)	t or F	<i>p</i> <sub>ST</sub>	M(SD)	t or F	<i>p</i> <sub>ST</sub>
Sex	Male	4.9(0.77)	0.15	.693	4.9(0.77)	.15	.693	3.0(0.82)	0.57	.448
	Female	5.0(0.36)			5.0(0.36)			2.9(0.87)		
Age(year)	<30 <sup>a</sup>	4.9(0.69)	3.73	.012	3.4(0.51)	7.15	.001	3.1(0.85)	3.16	.026
	30-39 <sup>b</sup>	4.6(0.91)			3.1(0.57)			3.2(0.97)		
	40-49 <sup>c</sup>	5.0(0.59)			3.0(0.56)			3.0(0.75)		
	50≤ <sup>d</sup>	5.0(0.72)			2.7(0.52)			2.7(0.67)		
Marital status	Single	4.7(0.65)	0.78	.506	3.2(0.48)	1.52	.209	3.1(0.75)	2.18	.115
	Married	4.9(0.77)			3.0(0.60)			3.0(0.84)		
	Others	5.2(0.45)			3.2(0.64)			2.1(0.13)		
Religion	Protestant	4.9(0.69)	1.77	.154	3.0(0.58)	0.173	.915	2.9(0.86)	1.50	.216
	Catholic	5.1(0.62)			3.1(0.70)			2.8(0.73)		
	Buddhist	5.0(0.68)			3.1(0.50)			3.0(0.88)		
	None	4.8(0.85)			3.0(0.52)			3.1(0.80)		
Education	College <sup>a</sup>	4.7(0.82)	3.58	.015	3.0(0.60)	1.18	.318	3.0(0.90)	0.13	.937
	University <sup>b</sup>	4.9(0.67)			3.0(0.55)			3.0(0.78)		
	Over master <sup>c</sup>	5.2(0.66)			3.2(0.58)			3.0(0.81)		
Position	Nurse	4.9(0.78)	0.87	.455	3.0(0.57)	0.63	.594	3.0(0.87)	0.72	.486
	Charge nurse	4.8(0.66)			3.0(0.66)			3.1(0.52)		
	Head nurse	5.1(0.63)			3.1(0.59)			2.9(0.66)		
Number of	≤50a	5.0(0.70)	1.35	.259	3.1(0.51)	5.94	.003	2.8(0.68)	1.74	.178
	51-100b	4.8(0.77)			2.9(0.56)			3.0(0.88)		

patient	≥101c	5.1(0.69)			3.4(0.75)				3.3(0.89)		
Number of nurses	≤5	5.0(0.63)			3.0(0.58)				3.0(0.74)		
	6-10	4.8(0.88)	0.71	.490	3.0(0.55)	0.74	.928	2.9(0.95)	0.34	.711	
	≥11	4.8(0.81)			3.1(0.66)			3.0(0.78)			
Career of working (year)	≤10 <sup>a</sup>	4.7(0.87)			3.0(0.52)				3.1(0.73)		
	11-20 <sup>b</sup>	4.9(0.69)			3.1(0.65)				3.1(0.96)		
	21-30 <sup>c</sup>	5.0(0.59)	4.43	.005	3.0(0.53)	1.16	.324	2.9(0.78)	1.25	.293	
	>30 <sup>d</sup>	5.6(0.21)			2.9(0.72)			2.6(0.71)			
Type of duty	Shift	4.8(0.65)			3.0(0.56)				3.0(0.86)		
	Day work	5.1(0.96)	3.12	0.79	3.0(0.62)	0.08	.776	2.8(0.71)	1.86	.173	
Time of duty(hour)	8	4.9(0.74)			3.0(0.57)				3.0(0.82)		
	12	5.2(0.75)	1.41	.235	3.6(0.56)	6.59	.011	3.3(0.94)	0.86	.354	
Job satisfaction	Satisfied <sup>a</sup>	5.3(0.58)		.002	3.1(0.67)				2.4(0.78)		.001
	Moderate <sup>b</sup>	4.8(0.95)	5.21	a>b	3.0(0.55)	0.19	.900	3.1(0.83)	6.75	a<b	
	Dissatisfied <sup>c</sup>	4.7(0.62)		a>c	3.0(0.57)			3.1(0.76)		a<c	
Experience of turnover	Yes	4.9(0.67)	0.24	.619	3.0(0.57)	0.14	.703	3.0(0.87)	0.99	.320	
	No	4.9(0.86)			3.0(0.58)			2.9(0.74)			
Experience of move unit	Yes	4.9(0.82)	0.04	.834	3.0(0.59)	0.56	.453	3.0(0.89)	1.63	.202	
	No	4.9(0.57)			3.0(0.54)			2.9(0.67)			

ST: Scheffe Test

### 3.4 Relation between Emotional Intelligence, Emotional Labor, and Burnout among Psychological Nurses

Burnout showed significantly negative correlation with emotional intelligence by  $-.40 (<.001)$  and showed significantly positive correlation with emotional labor by  $.43 (<.001)$  (Table 4).

**Table 4. Correlations among Variables (N=200)**

Variables	Psychological Burnout
	r(p)
Emotional Intelligence	-.40(<.001)
Self emotion appraisal	-.23(.001)
Other's emotion appraisal	-.30(<.001)
Use of emotion	-.30(<.001)
Regulation of emotion	-.37(<.001)
Emotional Labor	.43(<.001)
Frequency of emotional display	.21(.003)
Attentiveness to required display rules	.40(<.001)
Emotional dissonance	.46(<.001)

### 3.5 Factors Influencing Burnout

To check the power of explanation of factors that influence emotional labor, mental burnout was set as a dependent variable and general variables, emotional intelligence, and emotional labor were set as independent variables for multiple regression analysis. Durbin-Watson statistics, which show autocorrelation of errors, was 1.8 in which there was no problem in independence or autocorrelation. Correlation between independent variables was .23-.46 and tolerance limit was .42-.90 in which both were higher than 0.1 Distributed factor inflation was 1.11-2.32 and lower than 10 in which there was no problem in multicollinearity between independent variables. Emotional intelligence( $\beta=-.31$ ,  $p<.001$ ), emotional labor( $\beta=.37$ ,  $p<.001$ ), job satisfaction( $\beta=-.20$ ,  $p=.003$ ) and experience of department transfer( $\beta=-.12$ ,  $p=.044$ ) among general characteristics showed significant influence on mental burnout and it was shown that they had 36.5% power of explanation no emotional labor (Table 5).

**Table 5. Predictors of Psychological Burnout (N=200)**

Variables	$\beta$	t	p	Adj.R <sup>2</sup>	F(p)
Emotional Intelligence	-.319	-4.853	<.001		
Emotional Labor	.378	5.914	<.001	36.5	<.001
Job satisfaction	.201	3.057	.003		
Experience of move unit	-.127	-2.026	.044		

#### 4. Discussion

In this study, effects of emotional labor and emotional intelligence on burnout among psychological nurses were investigated to prevent burnout among psychological nurses and provide basic data for mediation programs to prevent and relieve burnout among psychological nurses.

As result of research, emotional intelligence was 4.9 points out of 7 points which was higher than research by Joo & Han[14]. Emotional intelligence is the ability to watch feelings and emotions of oneself and others to use this information to lead one's thought and behavior[15]. This corresponds to therapeutic methods that psychological nurses mainly use when nursing patients which is why that result is shown.

Emotional labor shown in the results of this study are similar to the results of the research subject to psychological nurses by Lee & You[16] and is lower than the results of research subject to clinical nurses by Byun & Yom[17]. Emotional labor can vary depending on characteristic of organization, type of job, and working area[18] which is why this difference was shown.

As result of this study, burnout showed 3 out of 5 points of value higher than middle level in which much effort is required to improve quality of nursing such as human rights education in recent psychological nursing clinical settings[2]. It can be said that appropriate support and planning must be established to prevent burnout of psychological nurses from counseling, therapeutical activities, education that require high level expertise, frequent recurrence of patients, psychological emergencies such as suicide or violence, and occurrence of accidents[1]

Emotional intelligence varied depending on general characteristics such as age, education career, and job satisfaction. As result of this study, emotional intelligence increased as career was longer in which this is identical to the research results by Han, Sohn & Kim[19] that good relationships and effective communication can take place with subjects due to increase of emotional intelligence by increase of age or career. Also, emotional intelligence increased with higher education in which this is identical to the research results by Kim et al.[20]. These results are identical to the research results by Lee & Song[21] and You & Kim[22] that emotional intelligence gave positive influence in reduction of job stress and job immersion which increased emotional intelligence while support through mediation considering general characteristics of psychological nurses is demanded.

As result of this study, emotional labor varied depending on general variables such as age, number of patients, and working hours. According to research results by Kim et al[20] subject to nurses in surgery, operating rooms, emotional labor increases as age increases. However in this study which is subject to psychological nurses, emotional labor decreased as age increased. This is considered to be because tension of light and death compared to medical, surgical wards was lower and that experience, technique of personal relationships were developed by long career. Difference of emotional labor was shown depending number of patients in which this is identical to the research results by Han et al[23] that negative influence on emotional labor by increase of number of patients and job stress. Identical to the research results of this study, Son, Park & Kong[24] reported that longer working hours increased emotional labor. Increase of work such as increase of number of patients and working hours consumes mental, physical, and emotional nurses in which modification of appropriate work is required due to health problems and severe stress.

As result of this study, burnout varied depending on emotional intelligence and job satisfaction. Emotional intelligence increased as age increased and emotional labor decreased in which reduction of burnout can be expected. According to research results by Park[25], age and work stress were factors influencing burnout. Also, it was said in research by June & Byun[26] and Han[27] that negative influence is applied on job satisfaction if work stress and work intensity is high in which burnout increases. Therefore, job satisfaction improvement programs according to age are needed to reduce burnout.

As result of this study, burnout had negative relation with emotional intelligence and positive relation with emotional labor. This is identical to the research results by Ahn, Yea & Yeum[4] and Kim et al.[20] claiming that emotional intelligence has positive influence on reduction of burnout and that emotional labor has negative influence on reduction of burnout in which work demand and emotional labor must be decreased to reduce burnout of nurses while work resources and emotional intelligence are increased. According to the research results by Baik & Yom[6], emotional intelligence, emotional labor, social support by working department were factors that influence burnout. In research by Park & Kim[28], work satisfaction was a factor influencing burnout in which burnout, emotional labor must be reduced as mediation programs are demanded to improve emotional intelligence. In this study, burnout reduction programs and emotional potential development programs considering general characteristics suggested in this study are demanded.

## 5. Conclusion and Suggestion

This study was conducted to understand the level of effects of emotional labor and emotional intelligence on burnout among psychological nurses.

The subjects of this study are 200 nurses working in 5 psychiatric hospitals located in C and D, and the self-reported survey was analyzed using the SPSS 19.0 statistics program.

The results of this study are as follow.

First, burnout has significant difference depending on age and work satisfaction.

Second, burnout showed negative correlation with emotional intelligence and positive correlation with emotional labor.

Third, job satisfaction and experience of department transfer had significant effect on burnout among emotional intelligence, emotional labor, and general variables. They showed 36.5% power of explanation on burnout.

As result of this research, emotional factors and environmental factors of psychological nurses directly influenced burnout in which emotional mediation and environment management mediation is required to manage this matter.

Also, emotional labor research subject to nurses of various fields with other various variables other than the ones in this study are to be researched in the future.

## References

- [1] H.S. Park, Y.J. Bae, S.Y. Jeong, "A Study on Anger expression and Burnout of Psychiatric Mental Health Nurses", Korean Acad Psych Mental Health Nurs. vol. 12, no. 3, (2003), pp. 235-244.
- [2] Y.K. Yang, "A Study on Burnout, Emotional Labor, and Self-Efficacy in Nurses", The Journal of Korean Nursing Administration Academic Society, vol. 17, no. 4, (2011), pp. 423-431.
- [3] J.A. Morris, D.C. Feldman, "The dimension, antecedents and consequences of emotional labor", Academy of Management Review, vol. 21, no. 4, (1996), pp. 986-1010.
- [4] J.A. Ahn, C.J. Ye, D.M. Yeum, "The Impact of Nurse's Job Resources, Emotional Labor and Emotional Intelligence on Burnout", Social Science Research. vol. 27, no. 4, (2011), pp. 25-43.
- [5] A.R. Hochschild, "The managed heart. San Francisco", University of California Press Berkeley, (1983).
- [6] D.W. Baik, Y.H. Yom, "Effects of Social Support and Emotional Intelligence in the Relationship between Emotional Labor and Burnout among Clinical Nurses", Journal of Korean Academy of Nursing Administration, vol. 18, no. 3, (2012), pp. 271-280.
- [7] P. Salovey, J.D. Mayer, "Emotional intelligence", Imagination, Cognition and Personality, vol. 9, no. 3, (1990), pp.185-211
- [8] F. Faul, E. Erdfelder, A. Buchner, A. Lang, "G\*Power 3: A flexible statistical power analysis program for the social, behavioral, and biomedical sciences", Behavior Research Method. vol. 3, no. 2, (2009), pp. 175-191.
- [9] C.S. Wong, K.S. Law, "The effects of leader and follower emotional intelligence on performance and attitude: An exploratory study", The Leadership Quarterly, vol. 13, (2002), pp. 243-274.
- [10] J.S. Lim, "A Study on the relationship between the emotional intelligence, attitude, and behavior of employees", Unpublished master's thesis, Korea University, Seoul, (2004).
- [11] M.J. Kim, "Effect of the hotel employee's emotional labor upon the job-related attitudes", Korea Journal of Tourism and Hospitality Research, vol. 21, no. 2, (1998), pp. 129-141.



- [12] C. Maslach & S. E. Jackson, "The measurement of experienced burnout", *Journal of Occupational Behavior*, vol. 2, (1981), pp. 99-113.
- [13] H.J. Choi, N.U. Jeong, "Perfectionism tendency, social support, and burnout among counselors", *Korean Journal of Health Psychology*. vol. 8, no. 2, (2003), pp. 279-300.
- [14] Y.S. Joo,, S.S. Han, "Original Articles: The Effects of Leader`s Emotional Intelligence and Nurse`s own Emotional Intelligence on Organizational Commitment and Organizational Citizenship Behavior", *The Journal of Korean academic society of nursing education*, vol. 19, no. 2, (2013), pp. 194-202.
- [15] J.D. Mayer, P. Salovey, "What is emotional intelligence?" InP. Salovey & D. Sluyter(Eds.). *Emotional development an demotional intelligence: Implications for educators*. New York: Basic Books(1997)
- [16] E.D. Lee, M.J. You, "A Study on the Effect of Emotional Hardship on Job Satisfaction and Turnover of Nurses in the correctional field. *Correction review*. vol. 55, (2012), pp. 129-155.
- [17] D.S. Byun, Y.H. Yom, "Factors affecting the burnout of clinical nurses", *Journal of Korean Academy of Nursing Administration*, vol. 15, no. 3, (2009), pp. 444-454.
- [18] H.A. Kang, "Change of nursing profession labor", *Economy and Society*, vol. 55, no. 3, (2002), pp. 142-168.
- [19] S.S. Han, I.S. Sohn, N.E. Kim, "New Nurse Turnover Intention and Influencing Factors", *Journal of Korean Academy Nursing*, vol. 39, no. 6, (2009), pp. 878-887.
- [20] J.H. Kim, Y.M. Lee, H.Y. Joung, H.S. Choo, S.J. Won, S.Y. Kwon, "Effects of Emotional Labor, Emotional Intelligence and Social Support on Job Stress in Clinical Nurses", *The Korean journal of fundamentals of nursing*, vol. 20, no. 2, (2013), pp. 157-167.
- [21] K.H. Lee, J.S. Song, "The Effect of Emotional Intelligence on Self-Efficacy and Job Stress of Nurses - Mediating Role of Self-Efficacy", *The Journal of Korean Nursing Administration Academic Society*, vol. 16, number. 1, pp. 17-25(2010)
- [22] H.K. You, S.P. Kim, "A Study On The Relationship Between Emotional Intelligence, Job Stress, Job Satisfaction And Job Performance", *Journal of Korean Academy of Human Resource Management*. vol. 15, number. 4, pp. 127-146(2008)
- [23] S.J. Han, M.S. Kwon, O.S. Yoon, M.Y. Moon, "Emotional Labor and Job Stress of Public Health Nurses. *Journal of Korea community health nursing academic society*. vol. 26, no. 2, (2012), pp. 314-327
- [24] J.S. Son, S.K. Park, S.S. Kong, "Impact of Internal Marketing Activity, Emotional Labor and Work-Family Conflict on Turn-Over of Hospital Nurses", *Journal of Korean Clinical Nursing Research*, vol. 18, no. 3, (2012), pp. 329-340.
- [25] C.S. Park, "Factors Influencing on Burnout Experience in Working Nurses at Hospital. *Journal of Korean Academy of Womens Health Nursing*", vol. 8, no. 4, (2002), pp. 550-558.
- [26] K.J. June, S.W. Byun, "Nurse`s Burnout Research Throughout the Past 10 Years in Korea", *The Journal of Korean Nursing Administration Academic Society*. vol. 15, number. 3, pp. 305-313(2009)
- [27] S.J. Han, "The Effect of the Job Rotation and Occupational Stress on Job Satisfaction among Hospital Nurses", *Nursing Science*, vol. 24, no. 2, (2012), pp. 1-11.
- [28] H.S. Park, K.N. Kim, "Factors Affecting Burnout in ICU Nurses", *The Korean journal of fundamentals of nursing*. vol. 17, no. 3, (2010), pp. 409-418.

