Emotional Labour in Mental Health Field Workers

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Emotional labour among fieldworkers (n=6) at a community mental health organisation was explored using semi-structured interviews and thematic analysis. Participants were found to regulate their emotions both in terms of experience and display. Emotions were regulated through 'deep acting' to enhance the internal experience of empathy and other positive emotions, and the control of negative emotions. Fieldworkers typically regulated the intensity of genuine emotions during their interactions with clients. Emotional labour was described as performed for the sake of clients, to mitigate risk to the field worker and emerged from workload issues and the multiple requirements of fieldworkers' roles.

Key words: Emotional labour, field workers, mental health

Hochschild (1983) introduced the term emotional labour and offered a theoretical and conceptual framework to contextualise the use of this term, though other frameworks have since been proposed (Ashforth & Humphrey, 1993; Morris & Feldman, 1996; Grandey, 2000). Generally, emotional labour is seen as a forced affective performance that may result in negative consequences for the performer (Hochschild, 1983), ranging from decreased job satisfaction to burnout. Emotional labour is performed when disparity occurs between workers' felt emotions and displayed emotions in a given occupational and organisational context. The type of emotional labour performed is shaped by the context in which it occurs (James, 1992).

Emotional labour is an important concept as it relates to burnout among mental health field workers and has been applied to a range of occupational contexts: the airline industry (Whitelegg, 2002; Williams, 2003), call centre workers (Korczynski, 2003), criminal interrogators (Rafali & Sutton, 1991), legal professions (Harris, 2002; Livley, 2002), teaching (Price, 2001), nursing (Aldridge, 1994), and the medical profession (Larson & Yao, 2005). Although Hochschild (1983) did not apply the concept of emotional labour to mental health professionals, she claimed it would likely be a component within these professions. There are few studies

investigating issues of emotional labour among mental health professionals (Mann & Cowburn, 2005; Karabanow, 1999; Yanay & Shahar, 1998), and this article aims to partially address the deficiency by exploring emotional labour in the context of mental health fieldwork at the Auckland branch of a community mental health organisation in New Zealand. Clarifying the role of emotional labour in mental health service delivery, and its relationship to burnout is important in developing proactive support structures for employees.

Existing research

Two qualitative studies have investigated emotional labour in the contexts and occupations similar to the current research (Karabanow, 1999; Yanay & Shahr, 1998). Karabanow (1999) explored the concept of emotional labour in Canadian workers at a youth shelter. Clear links were shown between organisational demands or display rules placed upon workers' expressions and emotional labour performance. Display rules tend to prescribe the expression of emotions (Ashforth & Humphrey, 1995) and "specify the range, intensity, duration and object of emotions that are expected to be experienced - or at least displayed." (Mann, 2006, p. 553).

The negative consequences of emotional labour described by Karabanow (1999) were tied to workers' beliefs that, for management, what the workers did was never good enough. Perceived non-appreciation combined with pressure created by display rules produced feelings of always needing to give more. Interestingly, little was discussed around performance of emotional labour with clients or youth at the shelter. Rather, emotional labour seemed to arise in interactions with management and in accordance with the display rules of the organisation. This suggests that emotional labour is not performed only with clients and its negative impact can result from the overall organisational structure.

Yanay and Shahr (1998) investigated emotional labour performed by third year psychology students at a residential psychiatric facility in Israel. Feeling rules (display rules) were seen as professional modes of feeling and behaving in relation to residents of the facility. The difficulties students encountered related to the uncertainty of what it was to be a professional. Performance of emotional labour was a constant negotiation between having a 'normal' emotional reaction, like anger and desire to yell at provocations from the residents, and the discourse of appropriate professional feelings and behaviour (Yanay & Shahr, 1998). Thus students tried to control their emotions according to their perceptions of what was professionally appropriate.

Brotheridge and Gradney (2002) divided emotional labour into jobfocused and employee-focused labour to investigate their predictive relationship to burnout in five occupational groupings. Job-focused emotional labour describes interactions with customers and perceived control over expression of specific emotions (also known as display rules), while the employee-focused emotional labour was conceptualised as managing both emotions and their expressions internally (through surface and/or deep acting). Human service workers were found to have the highest levels of work demands for control over emotional

expressions. Occupation type was not found to predict emotional exhaustion. The only factor that was significantly related to exhaustion was a perceived need to hide negative emotions such as anger and fear.

Theoretical Framework

In this research the conceptualisation of emotional labour as a form of emotional regulation proposed by Grandey (2000) will be used as the starting point. This approach includes the theoretical concepts of emotional labour as emotional regulation, presence of display rules, impact on emotional labour from individual and organisational factors, and impact of emotional labour on a person's wellbeing (see Figure 1).

Method

Organisational Context

The community mental health organisation was formed with the purpose of assisting families whose member was diagnosed with a mental illness (n.d., Fieldwork Orientation Manual, 2007). The organisation supports families whose member(s) are experiencing mental health issues rather than consumer – users of mental health services. The organisation provides families with free support, advocacy, education as well as information about mental illness and various service providers. The delivery of day-to-day services to families and actual work with families, either at the offices of the organisation or at families' private residential addresses, is done by fieldworkers. Half of the workload carried by each individual fieldworker includes direct work with families and



Figure 1. Conceptual framework of emotional labour in the current study (Adapted from Grandey, 2000, p. 101).

includes aspects of support mentioned previously. The direct work includes visiting families at their residences, telephone work, and write up of case notes. The other half is a combination of "shared team objectives/meetings, facilitating family/whānau support groups, promotional events, networking with local agencies, keeping up with new readings and presenting the organisation or training programmes to other services.

Recruitment

After consultation with the manager of the community mental health organisation the researcher gave a presentation to all fieldworkers on the proposed research study. Copies of the participant information sheet were provided and no incentive to participate was offered to fieldworkers. They were asked to contact the researcher to express their interest in participating in the research project.

Six fieldworkers from the Auckland branch of a community mental health organisation volunteered to take part following the presentation. Four identified as New Zealand European, one as Māori, and one as a Pacific Islander.

Data Collection

Data collection was undertaken as a two-stage process. The first stage included a focus-group interview with all six participants that lasted for approximately an hour-and-a-half. The second stage of data collection consisted of interviews with each participant. The duration of the interviews ranged from approximately 50 minutes to an hour-and-a half. Both the focus-group interview and the individual interviews were semi-structured and conducted by the researcher and first author.

Interviews were audio recorded and later transcribed by the researcher. Participants were offered the opportunity to review their own transcribed interview and the focus group transcript in order to ensure their accounts were as authentic as possible, as well as to comply with ethical guidelines and give participants a chance to withdraw some of the information from the interviews. No changes were requested to be made to the transcripts.

Data Analysis

Data analysis was conducted using Thematic Analysis (TA). TA was chosen as an analytic approach because as a research tool TA provides a rich and complex representation of the data. Data was processed using the six steps outlined in Braun and Clarke (2006): familiarising oneself with the data; generating initial codes; searching for themes; reviewing themes; defining and naming themes. Coding was done manually by the researcher until broader level themes were identified. Codes that were seen as falling into a theme were written using the same colour. Numbers were assigned to each code and the same number and colour were given to repeating codes; for instance, every time participants spoke about training it was written in red and assigned number ten.

Results

Theme 1: Displaying emotions with clients

All fieldworkers agreed that some of the emotions they experience with clients are negative. Negative emotions identified were anger, frustration, disgust, annoyance, and fear, whereas fieldworkers believe they needed to project other emotional states, like calmness. They felt that these should not be displayed for mainly two reasons – the expression of these emotions might interfere with the therapeutic alliance and as such are seen as damaging to clients' progress and for the sake of their own safety, as to not escalate challenging interaction with clients.

P3:sometimes you know you've got a husband for example a husband who suffers from say bipolar and say antisocial disorders (...) he really dislikes the fact that you are there with his wife, so he is yelling abuse at you and you are standing there (...) and you (--) inside you're like shaking cause you're really really scared cause this is this guy this big, and you stand there, have you finished yet? could you please stop yelling at me, still shaking inside [laughs] but the the, the look is you're calm you're collected (...) if not for anybody else's safety but your own

The importance of showing calmness and staying neutral is seen in

the narratives of all participants.

P5: ...in the past that I've discovered that if you (..) you know, remain calm then you're modelling for the other person and they (..) they normally calm down

Field workers also reported that clients' stories triggered their emotions. All participants mentioned hearing accounts that were sometimes difficult, horrible, painful, or hideous, and conveyed a sense of 'feeling for' the clients.

Three important aspects of being with clients become apparent: awareness, prioritising clients and maintaining a safe therapeutic alliance for the field worker. Awareness is needed in order to identify what it is the support workers are feeling and why; whether to display the emotion and how to display it; and who the displaying is about – the client or themselves – and whom it will serve. It is also needed in order to be able to take a step back and observe the clients' emotional expressions.

P2: ...your feelings aren't that important in this process, it's the other person's feeling and the other person's beliefs and the other (--) so you need to (...) let go... you're there to work towards a solution or work alongside a person rather than dominate and tell what to do

Generally, participants thought that expressing emotion which was not felt is not a sign of inauthenticity:

P2: I don't know if we fake it... I think there's a professional level of what's appropriate like we talked earlier what emotions to share with our (..) (--) II just [sigh] (--) there's times when you do get frustrated with your ah (--) and you've got to value that person...

Described in this theme are the emotions fieldworkers can experience with clients. Some emotions were seen as negative and believed should not be disclosed to clients. Other emotions were seen as appropriate given they reflect what the client is going through, while others were necessary to both experience and display. The negative emotions participants described do not constitute the majority of their experience of client-contact. These emotions arise only with difficult clients and difficult situations. Insincerity versus being genuine, displaying felt or produced emotions with clients is a complex interaction of multiple factors, and it is clear that fieldworkers need to manage and control their emotions so they can manage clients' emotions, the process of the interaction as well as their own safety.

Theme 2: Controlling emotions, managing clients and setting boundaries

Fieldworkers have to deal with clients' emotions, their own emotions, as well as monitor the process of faceto-face meetings. One of the participants mentioned that she does not normally dwell on a negative emotion as her logic sets in almost immediately, increasing her control of the situation. Different participants utilised different strategies in order to control their emotions. One looks at meetings with clients from "...a business point of view because that's my job, and then I don't get that emotional".

Fieldworkers believed negative affective states, as well as the display of negative emotions, needed to be concealed, while only the intensity of the display of positive emotions needed to be modulated. The control of felt and displayed emotions took several forms: self-talk in order to stay on track with clients, boundaries, and awareness of their role and purpose when with clients.

P5: I'm thinking oh, you know, this lady sounds tired and she just (..) you know um-m (..) because she was she's suffering from cancer as well and um-m yeah and so you know (..) her frustration is (..) quite valid (..) because she is probably just tired

Participants also talked about controlling their emotions in terms of inducing a desired emotion. Most participants talked about how seeing clients as victims or someone going through difficult times could by itself produce empathy or compassion, even following feelings of frustration or anger toward the client. Another way to induce the necessary emotion, like empathy, was done by verbalising it to the client "...it must've been really sucky". It is about trying to understand the client's experience and to look at a situation from their point of view.

One of the fieldworkers also talked

about the value of sometimes "saying the hard thing" and sharing what is being felt with the client. This is a compromise, based on professional judgement, between not showing frustration or anger, but acknowledging it nonetheless.

P2: ...it's not the thing that's the nicest thing to say is, sometimes is saying I am really (--) I am finding this a really frustrating situation, how about you? owning what you feel (..) which is sometimes really hard to identify because you can be so concentrating on this other person...

Theme 3: Areas of impact on client work

Workload

Workload was dependent on fieldworkers' individual work ethics and choices. Fieldworkers need to manage their workload and not take on too many tasks. However, this argument is negated by some participants, who expressed the need to do more for clients due to perceived deficiencies in the mental health system. Additionally, their area of operation has multiple fieldworkers, which means they can share the caseload and negotiate other aspects of their workload.

Workload was also seen to affect client work, something participants saw as their priority. Participant 5 for instance, said that back-to-back meetings can make it more difficult for her to work. "...clients all they want to do is just (..) offload". Managing both the client, him or herself, and the process, can lead to tiredness. For Participant 5 this meant more chances of being triggered by clients' stories.

Influences outside of work

Apart from aspects within the work environment that can impact on work with clients there are outside factors that also exert an influence. One participant disclosed that her mental state prior to the meeting and whether she is already feeling tired impacts on how well she copes with family meetings and how "drained" she feels afterwards. It seems that for her, managing client meetings when already feeling tired requires a higher level of emotional labour. Consequently, she would feel more fatigued after the meeting if her baseline tiredness at the beginning of the meeting is higher than usual.

Most participants talked about life outside of work impacting their client relationships. Two participants, who have children living with them, talked about how sometimes, when they are with clients, their thoughts are with their clients or household chores, and this interferes with their field work.

Theme 4: Impact of work on fieldworkers

This theme seems to be the most controversial in terms of difference of opinions and experience in relation to the impact of work. A lot of what participants experienced appears to be related to individual differences and abilities to cope, as well as personal preferences and dislikes of certain aspects of their job. When talking about how work impacts on them, participants mainly talked about a combination of work-related and external factors.

Part of their stories related to the impact of client work and part to the overall responsibilities of their role as fieldworkers. Participant 3 said that trying to do too much for clients and trying too hard "can emotionally drain you" and sometimes she can come home "...tired, mentally and physically exhausted... and it's not so much the physical stuff, it's the mental drainage". This "mental drainage" seems to result from both the workload and the nature of face-to-face work and dealing with the emotional difficulties of other people. As it was shown in the second theme, participants' own emotions at times were triggered during sessions with clients, and that required more active management of both emotions and the process of the meeting.

Another participant, while talking about the need to be non-judgemental with clients, stated that because of full days spent with clients "I get home and I say - I am out of nice". There appears to be an effort involved in being nonjudgemental and being genuine, whether on an intellectual or an emotional level. As a result, at least for some participants, maintaining a level of genuineness and understanding can result in them not having tolerance or 'niceness' outside of work.

Discussion

The discussion of the results is based on an integration of the themes with the theoretical model of emotional labour provided in Figure 1.

Organisational Structure: Display Rules

Client Contact

Fieldworkers' understanding about how to behave with clients, what is appropriate and what is not, what emotions are desirable and need to be displayed with clients can be defined as display rules.

The range of emotions fieldworkers are expected to display is fairly large. Positive emotions that fieldworkers experienced and displayed appear to be 'appropriate emotions' that are congruent with the clients and can be displayed at appropriate times, and 'necessary emotions' that fieldworkers are required to display. Fieldworkers are expected to display positive emotions that are considered necessary and acceptable, which also need to be authentic and genuine and thus 'felt'. Furthermore, they must conceal emotions that are unacceptable and negative, and regulate the intensity of the display of positive acceptable and necessary emotions. However, they are not required to only display positive emotions like empathy, concern, or compassion, though these are displayed most of the time. Situations act as cues for the activation of specific display rules that may have been applicable to one situation but not another (Sutton, 1991).

Outside of Client Contact

There also seemed to be expectations about appropriate display of emotion and behaviour outside of client contact. When interacting with other mental health professionals fieldworkers are there to represent the organisation or to ensure the best results for their clients. Participants did not indicate that these display rules were overtly stated within the organisation, but that some display rules can be learnt from professional norms (Tschan, Rochat, & Zapf, 2000).

When interacting with supervisors or managers, and especially with colleagues, fieldworkers' accounts spoke of more relaxed display rules regarding emotional expressions. Frustration and anger regarding clients could be expressed, with colleagues and supervisors providing support. Tschan, Rochat, and Zapf (2000) showed that deviating from display rules was more likely to occur with one's colleagues than clients. It still seemed, however, that display rules dictating what needs to be thought or felt for clients still partially applied.

Display Rules: Where do They Come From?

Display rules or emotional prescriptions, according to Ashforth and Humphrey (1995), represent a blend of influence from within as well as outside the organisation. Some of the display rules, evident in fieldworkers' stories, seemed to be located within the organisation in the form of the mission statement and policies around client contact, which includes supporting clients and empowering them.

Display rules were also procured from training and were reinforced by supervisors and other fieldworkers. Immersion of the worker into display rules often begins during training (Hochschild, 1983), for example, fieldworkers learning to establish and maintain boundaries with clients. Boundaries, as display rules, specify how fieldworkers need to engage with clients while maintaining a professional relationship. Fieldworkers set boundaries, as much for clients as for themselves, to ensure that display rules are being adhered to and thus their conduct with clients is appropriate and professional.

Fieldworkers also referred to display rules that seemed to be located outside the organisation and within the larger professional mental health practice. One of the participants, for instance, talked about being "guided by the code of (..) ethics which is you know, do no harm and um-m (..) (--) yeah but you can be friendly with people (..) yeah but at the same time maintaining that you know (..) work relationship". Ideas around emotional management strategies and specific professional attitudes can be assimilated through professional socialisation (Brown, 1991).

Fieldworkers seemed to embrace the display rules, especially around

appropriate and inappropriate emotional displays with clients. Commitment to display rules ensures changes in behaviour in accordance with these rules (Gosserand & Diefendorff, 2005). In the case of fieldworkers it did not affect only the observable emotional expressions but the internal experience of emotions as well. Fieldworkers saw genuine emotions like empathy, compassion, concern, respect, care, and the desire to help - all of which are display rules pertaining to both the organisation and seemingly wider context of mental health work - as necessary aspects of their work, without which their capacity to help clients would be impaired. These display rules are not just about appropriate displays when with clients. They are about the actual feeling and experiencing of the emotions that are seen as desired and needing to be portrayed to clients.

Performance of Emotional Labour by Fieldworker

Client Contact

Displaying, shaping, masking, or suppressing emotions (Erickson & Ritter, 2001) happens in accordance with display rules and constitutes management or regulation of emotions. All of the aforementioned display rules govern fieldworkers' behaviour, emotional experiences, and expressions with clients. Fieldworkers' accounts of controlling and managing emotions are examples of emotional regulation performed through types of acting. Control and management are the ways fieldworkers regulate their emotions. In Figure 1 two types of acting are presented - deep acting and surface acting - as well as the expression of genuine, naturally occurring emotions.

Surface acting

All participants reported showing emotions they do not feel to clients. When they are feeling angry, scared or frustrated they mask those emotions and attempt not to display them. Instead they use facial expressions and body language to project feelings they may not have been feeling at the time (Theodosius, 2008), like calmness and neutrality. Technically speaking, this represents surface acting. In the literature, surface acting has been described as 'pretending' (Martinez-Inigo, Totterdell, Alcover, & Holman, 2007) and 'faking' (Brotheridge & Grandey, 2002). These descriptions give a distinct impression of the performer being insincere and not attempting to feel or express a genuine emotion. According to fieldworkers, they do not feel like they fake but rather feel genuine when they are with clients. 'Faking', as was reported by one fieldworker, related to sometimes not having the energy to be completely present with her clients. And although she described it as faking it does not relate to the conceptualisation of surface acting but rather to a sense of somehow minimising the value of that session for her clients and thus possible feelings of guilt.

Fieldworkers, therefore, 'surface act' for the clients' sake, but only when what they are experiencing would not be beneficial for clients. To say that fieldworkers are genuine in their surface acting may appear to be an oxymoron, but nevertheless seems to be true. They do not attempt to deliver fake emotions, but rather to present a more appropriate emotional display that can calm an agitated situation.

Deep acting

Deep acting "is the process of controlling internal thoughts and feelings to meet mandated display rules" (Brotheridge & Grandey, 2002). Fieldworkers performed deep acting through self-talk when they tried to think about their clients' experiences. It was particularly obvious when fieldworkers talked about dealing with more difficult clients. Deep acting enabled fieldworkers to regulate their negative emotions not just in terms of display but also in terms of experience, and increased their ability to be non-judgemental and empathic. As a result, they were able to manage the session so that it did not deteriorate and remained helpful to the clients. Seeing clients as victims, explaining clients' anger displays as symptomatic of their psychological difficulties, and looking at the situation from the clients' point of view were the discourses utilised when attempting to enhance positive emotions while deep acting. These are similar to what Hochschild (1983) described in flight attendants when they were trying to conform with the display rules and exhibit positive emotions when in reality feeling negative.

Automatic regulation

Hochschild (1983) believed that people can learn to deep act extremely well, to the point where they would not be aware of the emotional work they put into creating a required emotion. For fieldworkers, learning to competently deep act can arise from self-monitoring. Self-monitoring relates to self-reflection (Shepard & Morrow, 2003), which, in turn, promotes awareness. The selfmonitoring that participants reported mirrored those reported elsewhere (Riggio & Friedman, 1982): the ability "to 'read' the demands of the particular social situation, monitor, and control (or disguise) inappropriate information or feelings and usually express oneself in a positive and socially approved manner" (p. 33). Brotheridge and Lee (2003) and Diefendorff, Croyle, and Gosserand (2005) found self-monitoring to be a predictor of surface acting. However, in fieldworkers, self-monitoring seemed to be a process that enabled emotional labour and allowed fieldworkers to monitor other aspects of the meeting as it unfolded. Through self-monitoring, which was directed at self and others (Riggio & Friedman, 1982), they were consciously aware of the process of the meeting and whether the boundaries were in place or being pushed by either party. It did not automatically imply a display of unfelt emotions; rather, it made fieldworkers more attuned to the needs of their clients.

Genuine emotions

Another aspect of emotional management that was included in the framework of emotional labour was around genuinely occurring emotions that comply with display rules. Displaying naturally occurring emotions requires little effort, according to Ashforth and Humphrey (1993). Fieldworkers felt that the display of these emotions constituted the majority of their interactions with clients.

Showing empathy to clients was one of the more important emotions that needed to be displayed and felt. Empathy can be thought of as one of the acting methods in emotional labour (Larson & Yao, 2005). As Larson and Yao (2005) point out "empathy should characterise all health care professions" (p. 1100). The authors further argue that empathising with clients or patients makes physicians better 'healers'. Fieldworkers seemed to hold a similar opinion. They believed that without genuine empathy and concern, they would feel like they were not doing their job, that is, helping clients to move on and live a happier existence.

The majority of the studies on emotional labour do not consider the display of naturally felt emotions when investigating emotional labour (Diefendorff, Croyle, & Gosserand, 2005). Diefendorff, Croyle, and Gosserand (2005) argue that the display of naturally felt emotions is more predominant than research would suggest, and surface and deep acting are more compensatory strategies that "occur in response to difficult situations" (p. 348). It coincides with participants' discourses of needing to manage their emotions and displays through deep acting when they are with a challenging client.

Outside of Client Work

The idea that emotional labour counts as emotional labour only when the object at whom it is directed is a client, a customer, or a patient is widespread throughout the literature (Bailey & McCollough, 2000; Gorman, 2000; Sass, 2000; Williams, 2003). It is not that the sentiment is often overtly stated, but the predominance of research and theory considering emotional labour in relational work with customers or clients makes the argument for itself. However, emotional energy is exerted during interactions with colleagues, supervisors, and managers (Maslach, 1982), and some of the display rules regarding these interactions have been described previously. These are evident in fieldworkers when interacting with other mental health professionals, with supervisors, management, and within the team.

Several participants disclosed having had unexpressed negative emotions when working within a clinical team. It was not explored how or why participants knew they needed to conceal these emotions. Often though, when it comes to workrelated interactions, general societal rules take presence, which normally dictate being polite and not exhibiting displays that can be conceived as rude and bad-mannered (Leary, 1996, as cited in Tschan, Rochat, & Zapf, 2000).

The reciprocal nature of emotional labour

Factors that were identified as impacting on emotional labour and explanations of the impact of emotional labour on fieldworkers are arguably interconnected. Emotional work performed by the caring professions is complex (Bolton, 2001). For fieldworkers it involves frequent negotiation between display rules pertaining to when and what emotions need to be displayed and felt, and the regulation of both displayed and felt emotions. It is also impacted by factors inside and outside of work.

Organisational factors

Control at work

Several factors were found to impact on emotional labour in fieldworkers at an organisational level. Attending several meetings a day left fieldworkers feeling exhausted and drained because dealing with a number of people is strenuous (Maslach, 1982). In such situations they would exert even more effort to regulate their emotions. However, fieldworkers had a degree of control, and could reschedule a meeting with their clients if they were already feeling tired before the meeting.

Having control over decisions around work performance is negatively related to burnout (Schaufeli & Enzmann, 1998), and makes workers less likely to experience emotional exhaustion (Wharton, 1993). Fieldworkers in this study had control over how they work with their clients, including modifying boundaries and choosing which training to incorporate into their practice.

Support

de Jonge et al., (2008) found that having sufficient job resources is negatively related to emotional exhaustion. Fieldworkers' accounts indicated that there was a high level of resources available. Social support, especially supervisor and, to a lesser extent colleague support, is associated with lower strain produced by stressors at work (Dormann & Zapf, 1999). In this study fieldworkers placed more importance on colleague support when it came to debriefing after a difficult meeting with clients or asking for more practical advice regarding client work. Colleague support is what Korczynski

(2003) referred to as communities of coping, where workers form a collective mechanism through which they provide each other with the necessary support to be able to withstand the difficulties associated with people work.

Workload

Workload, another organisation factor, impacts emotional labour both directly and indirectly. The indirect impact occurs via training, and the majority of fieldworkers expressed ideas regarding improvements to the training. They specifically highlighted the need for more peer discussions and reflections after a training session in order to summarise the information and discover the best ways to integrate it into their practice. The more direct impact of workload on emotional labour results from having too much to do, not in terms of client work but other aspects of the fieldworker role.

Fieldworkers did not report any significant long-term negative effect of emotional labour with clients. Some short-term negative consequences, however, were associated with the combination of other aspects of work. Edwards, Burnard, Coyle, Fothergill, and Hannigan (2000) report that mental health community nurses experience stress and burnout because of high workloads and a lack of resources. Zapf (2002) also argues that empirical research shows that it is organisational job stressors, like workload and time pressures, that are the strongest predictors of burnout and stress rather than emotional job demands. This is consistent with the information collected from participants. Feelings of tiredness and exhaustion in fieldworkers were mainly related to workload, and specifically to the workload associated with non-client contact, and a sense of never having enough time to finish tasks. Client contact was something that the majority of fieldworkers experienced as positive and enjoyable, despite admitting that it could be very difficult at times.

Wharton (1993) found that jobs involving emotional labour with clients are seen as more satisfying than similar jobs without emotional labour. Fieldworkers' stories indicated a sense of pride and satisfaction with the work they with their clients. Challenges at work and their ability to meet these challenges, the ability to help people, and an opportunity to interact with a variety of people are some of the things that made work enjoyable despite the difficulties associated with emotional regulation (Wharton, 1996). Making a difference for another human being is a powerful experience that made it worth doing for all fieldworkers but one. It was the sense of making a difference that differentiated a fieldworker who intended to leave the organisation from the others, as she had lost faith that a perceptible difference could be made on a larger societal scale.

Individual Factors

Work and family

Individual factors that impact on emotional labour were also apparent in participants' narratives. For some participants, having outside family commitments, at times, made it difficult to be present with their clients. This either led to feelings of job inadequacy and thus exerting more effort to be present, or rescheduling meetings. Interaction between competing roles at work and at home can be a source of strain (Majomi, Brown, & Crawford, 2003).

Ways of coping

Coping involves both cognitive and behavioural efforts at managing or reducing external demands and internal negative emotional reactions (Folkman & Lazarus, 1980). It is necessary for mental health workers to have coping strategies to combat stress, which can include increased social support, exercise, relaxation, or deep breathing (Kottler & Schofield, 2001). Support from a partner, to assist with coping during difficult days at work, was mentioned by two fieldworkers. It seems that having understanding and supportive partners could help fieldworkers to express some of their frustrations with clients and to talk about their experiences. Having personal coping strategies also assists with not taking on clients' stories or negative emotional reactions and helps to 'let go' of them.

Some of the coping strategies fieldworkers mentioned can be used during client contact and affords neutrality, for example, being conscious of the fact that a difficult meeting is time-limited and will be over, or using 'a cloak of protection' to not take on clients' negative emotions. Other coping strategies can be used for eliminating the emotional residue that can linger after a particularly difficult meeting, like having a bath or doing physical work in the garden.

Experience of mental illness

Some fieldworkers had experienced mental illness in their own lives. As a result, it made it easier for them to better understand clients and what they were going through. This understanding assisted in not having to exert much effort in trying to put themselves in the client's situation, when the client was acting angry or was uncontrollably upset, thus making it possible to maintain a degree of genuine emotions that corresponded with display rules. Other fieldworkers also modelled the attitude of respect for the clients from the fieldworkers who had a personal experience of mental illness in their own family. This also allowed them to better understand their clients and commiserate, which, again, could promote genuinely occurring emotions.

Care

Care for clients, the desire to help, and a more general desire to do this type of work also seemed to make emotional labour, specifically with 'difficult' clients, easier. If there was no consideration for the wellbeing of the family then the expression of unfelt emotions, not being genuine, and not feeling genuine empathy would go against the display rules. It was the compliance with the expectations specified in display rules, through identification with their roles, that made workers feel authentic (Ashforth & Tomiuk, 2000). Several research studies found that expression of naturally felt emotions is negatively related to emotional exhaustion and stress, and is positively associated with satisfaction from client or patient interactions (Kim & Han, 2009; Martinez-Inigo, Totterdell, Alcover, & Holman, 2007; Zapf, 2002). The fact that fieldworkers reported faceto-face work with clients as enjoyable, despite the difficulties and short-term sense of being overwhelmed that it could cause, may be as a result of finding interactions rewarding and satisfying.

Self-monitoring

The self-monitoring described by fieldworkers was another aspect of work that was likely to mitigate the negative impact of emotional labour. Workers who are high self-monitors were less negatively affected by the performance of emotional labour (Wharton, 1993). Another possible reason why fieldworkers did not report significant negative impact from their interactions with clients compared to occupations in the service sector, was the long term nature of their relationships. Tschan, Rochat and Zapf (2000) discuss the impact of the length of relationships in terms of interactions with colleagues, where violation of display rules can be restored. Fieldworkers' narratives indicated a similar possibility with their clients. Several fieldworkers expressed that even when mistakes were made with their clients they could go away, reflect on the issue with either supervisors, colleagues, or by themselves, and address it during the next meeting with their clients.

Emotional regulation

The way emotional labour is performed, or what type of regulation is used, can also account for the presence or absence of a long term, significant negative impact of emotional labour (Mauss, Cook, & Gross, 2007). Fieldworkers did not utilise fake emotions, or what surface acting is normally referred to, but they did utilise deep acting. Deep acting is normally associated with a lack of negative consequences of emotional labour, like emotional exhaustion (Grandey, 2002) and presence of positive consequences, like a sense of personal accomplishment (Brotheridge & Grandey, 2002).

Automatic emotional regulation is more or less effortless. The conscious regulation of emotions during specific situations when performed over a period of time with the same goal or plan in mind can become automatic (Bargh & Chartrand, 1999). Mauss, Cook, and Gross (2007) argue that compared to controlled regulation, automatic emotional regulation comes at a smaller cost, or none at all. Perhaps the reason why fieldworkers' performing what resembled surface acting did not produce the negative impact normally associated with this type of acting is because they had learnt to do it automatically – to display calmness when feeling anxious or frustrated - and may only have needed to reverse back to deep acting when a situation was more challenging for them.

Limitations of the study

The small sample size in this study was due to the small scale of the research project and the results may not be generalisable to all fieldworkers although the results do resonate with existing research on emotional labour. To develop a better and a more complete understanding of emotional labour in fieldworkers a national study with fieldworkers from different work contexts would be valuable.

Conclusion

This study aimed to explore emotional labour in fieldworkers at a community mental health organisation. Emotional labour and its performance by fieldworkers was found to be shaped by display rules that originate both within the organisation and within the wider context of professional practice. Fieldworkers demonstrated conformity with the display rules because they saw them as best practice and thus the most appropriate way to help their clients. Regulation of negative emotions through control and management and the display of other, more appropriate emotions (e.g., calmness), was seen as necessary for the clients and to maintain the safety of fieldworkers. Fieldworkers' own emotions were considered secondary during meetings with clients. Deep acting, accomplished through self-talk, was enacted when a client was perceived as challenging and genuine empathy needed to be enhanced.

Emotional labour in mental health fieldworkers is therefore about prioritising client experiences and regulating negative emotions so that they are not displayed and cannot impact on clients or increase risk for the field worker. Emotional labour is also about regulating the intensity of the display of genuine positive emotions for the same purpose as the regulation of negative emotions. While the driving force behind emotional regulation is the desire to help, care for and respect clients it is also important to consider the role of emotional labour in maintaining a safe work context. The relationship between emotional labour and the high rate of burnout amongst mental health field

workers might be mitigated when field workers are able to employ emotional labour not only for their clients' sake, but also to increase their own sense of agency and safety in the therapeutic interactions with clients.

Conflicts of interest

The authors state that there are no conflicts of interest.

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