
Mediating Role of Work-to-Home Resource between Optimism and Emotional Exhaustion: The Nigerian Experience in Care-giving Practice

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Abstract

The study was conceived with the main thrust of determining ways of reducing emotional exhaustion through the predictive role of optimism. We also tested the intervening role of work to home resources to understand the mechanism through which the proposed direct relationship exists. A total of 369 participants were drawn from the population of nurses practicing in 17 local government area of Plateau State Nigeria. The results obtained from the analyses conducted using SMART-PLS 3.0 revealed that optimism associate negatively with emotional exhaustion. Work to home resources was found to mediate the relationship between optimism and emotional exhaustion. We discussed the implication of findings on theory and practice.

Keywords: *Optimism, Work to Home Resources, Emotional Exhaustion*

Introduction

The main thrust in employment relationship is to attract employee who find meaning in what s/he does, and consider the organization as the right place to work with in terms of connecting their values with organizational core value. Studies have established that where individuals find meaningfulness, sense of community and are able to align with organizational value (Kazemipour & Mohd Amin, 2012; Ashmos & Duchon, 2000) they are deeply committed affectively (Rego & Cunha, 2008) at work and express high job involvement (Chawla & Guda, 2010). While employee commitment and involvement is coveted particularly in the service sector, it must be noted that a price is paid for such positive behaviour, since emotional labour which goes with effective service delivery (Francis, Kaldor, Shevlin, & Lewis 2004; Hall, Dollard, Tuckey, Winefield, & Thompson, 2010) is highly associated with emotional exhaustion (Martínez-iñigo, Totterdell, & Alcover, 2007; Vem, Gomam, Nmadu, & Wurim, 2017).

Though emotional exhaustion is not a desirable tendency, it is intertwined in care-giving professionals such as nurses, physician's teachers and other professions where emotional labour is a precondition for effectiveness. According to Callahan & McCollum (2002) emotional labour involve regulating employees emotion in exchange for pay, which sometimes is done in spite the potential risk to their health and well-being. In doing so, they are expected to manage their emotion and the patient's emotion as well (Martínez-iñigo et al., 2007). Employees in the health sectors are prone to experiencing emotional exhaustion. This is because as work stress increases due to care giver encounter with patients in dare need, they tend to endure pressure to conform to professional requirement of emotional labour and sometimes work longer hours to assure patience confidence and quality service delivery (Stordeur, D'hoore, & Vandenberghe 2001). Sometimes patient's situation might be threatening or even "disgusting", yet care-givers still need to cope with all unpleasant

emotional demand and still offer assurance. This no doubt has resulted in the depletion of emotional resources as they are consistently confronted with a situation where they are unable to offer themselves psychologically at work. Making the profession highly susceptible to emotional exhaustion. Consequently, such experiences spills over into negative work outcome such as poor job performance, low job satisfaction, reduced organizational commitment, absenteeism, and turnover (Karatepe & Aleshinloye, 2009)

Another critical factor to grapple with apart from emotional labour is the gross shortage of health care-givers in Africa and indeed Nigeria. According to Gandi, Wai, Karick and Dagona (2011) they put the ratio of nurses to the population in Africa as 2.3 per 1000. Juxtaposing same with the Americas ratio, it is a far-cry at a ratio of 24.8 healthcare workers per 1000 population. Report in Gandi, Wai, Karick and Dagona (2011) further reveals the situation in most Nigeria's hospital during their study at ratio of 1 nurse to 30 patients. In view of the country's growing population of over 170million the situation is expected to pose even more challenge than the African average. Despite of these negative indices in the emerging economies, statistics has shown a mass exodus of this category of human resources to developed and wealthier countries (Kalipeni, Semu, Mbilizi, Clemens, & Pettersson, 2012; Connell, Zurn, Stilwell, Awases, & Braichet, 2007; Hagopian, Thompson, Fordyce, Johnson, & Hart, 2004). A situation like this when left unchecked will further worsen the fortune of caregiving profession, making it highly susceptible to emotional dissonance.

Prevalence of emotional exhaustion among care-giving employees is evident and well-documented. Research findings have identified numerous precursors to emotional exhaustion. It has been established that negative work environment such job demands associate significantly with emotional exhaustion (Magnusson Hanson, Theorell, Oxenstierna, Hyde, & Westerlund, 2008), likewise is increase in work-home related stress and conflict (Hertzberg et al., 2016; Wang, Tsai, & Lee, 2016). While myriad studies agrees that work stressors have positive effect on emotional exhaustion, it is also worthy of note that positive individual and organizational factors have been found to affect emotional exhaustion differently. Study by Vem et al. (2017) shows that frontline employees in hospitality industry who experienced psychological ownership tend to express low emotional exhaustion. Similarly, employee coping strategy according to (Ito & Brotheridge, 2003) has a mitigating effect on emotional exhaustion. Hence we find it compelling to examine the role of care-givers' level of optimism and work to home resources as strategies in coping emotional exhaustion.

We find based on literature that Optimists have been found to exhibit favourable outcome expectancies towards life generally (Dust and Greenhaus 2013). Individuals who possess this characteristic have overwhelming tendency to presume that life's challenging will be successfully managed and solved, positively in their favour (Paulik, 2001). Previous study have shown positive behavioural outcomes, such as higher job performance, higher motivation, successful coping, stronger academic performance, and lower burnout (Chang, Rand, & Strunk, 2000; Wu, Hoy, & Tarter, 2013). Furthermore we expect a direct mitigating effect of optimism on emotional exhaustion which also is explained better through a mechanism of work to home resources. We thus expect that optimism triggers role accumulation resulting in accusation of resource (Marks, 1977) which has a reducing effect on negative outcome (Greenhaus & Powell, 2006). Interestingly a search reveals a dearth of literature on the mediating role of work-home resources in the relation between optimism and emotional exhaustion. In addition limited studies have been conducted on this important subject from the emerging countries perspective; hence this study is timely and relevant.

Conceptual Framework and Hypotheses Development

In keeping with the objective of this study, we developed a conceptual framework which seeks to provide understanding on the mechanism in the relationship between optimism and

emotional exhaustion. Based on documented evidences we conceptualized that optimism relate directly as well as indirectly through the mediating lens of work to home resources with emotional exhaustion. In furthering this argument a conceptual framework for this study is presented in Figure 1, followed by the discussion on the empirical evidences that support the logic for these relationships.

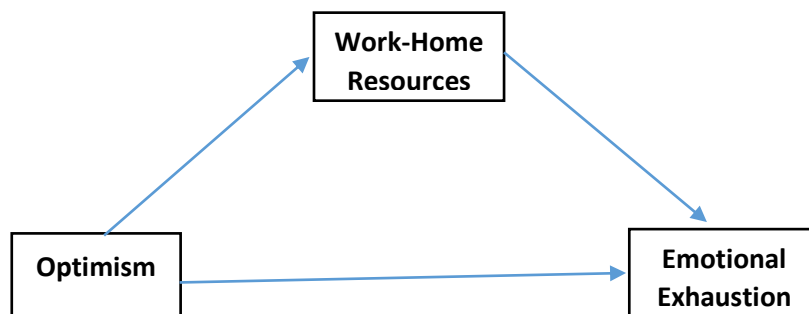


Figure 1 Conceptual Framework

Relationship between Optimism and emotional Exhaustion

That people differ significantly in their approach and how they construed the world around them is no-gain-say. While some are pessimistic about life's expectations, others expect things to work in their favour, thus with that in mind they are seen as optimistic about life generally. Optimism has been defined as "the favourability of a person's generalized outcome expectancy" (Scheier & Carver, 1985:232). Furthermore, Scheier, Carver, & Bridges (1994) posits that optimism is a generalized expectancies of good outcomes occurring in one's endeavour. Hence optimists can be referred as people with relatively stable traits which give them advantage to influence various aspects of behaviour and well-being.

However Hmieleski & Baron (2009) posits that optimism is not always positively associated with performance. This was demonstrated in a study conducted to examine entrepreneurial optimism and new venture performance, result reveal an inconsistent relationship as entrepreneurial optimism was not found to predict potential success of start-up businesses. Notwithstanding the findings of Hmieleski & Baron (2009), a hegemony is established between optimism and organizational behaviour as seen in the capacity to influence favourable work behaviour (Medlin & Green Jr, 2009; Jensen, Luthans, Lebsack, & Lebsack, 2007). Positive behavioural outcomes such as higher job performance, higher motivation, successful coping, stronger academic performance, and lower strain (Tuten & Neidermeyer, 2004) has been found to be predicted by optimism.

In Dust and Greenhaus (2013) optimism was defined as a dimension to personal spirituality characteristics. As dimension to spirituality characteristic, we expect it to attenuate negative work outcome since studies have found spirituality among the factors that exerts mitigating effect on negative work outcome such as emotional exhaustion (Bickerton, Miner, Dowson, & Griffin, 2014) and also ensure problem solving capacity (Emmons, 2000) as entail in spiritual intelligence.

According to Matter-Formism Theory of existence, human beings are souled-bodied substances and the nature of each soul is spirituality. It added that embedded in every matter (body) is a form (soul) (García-Valdecasas, 2005) and spirituality relies on the soul to manifest (Weger & Wagemann, 2015) individual's deepest desire for goodness and truth (meaning). Therefore, nurses who express optimism at work are expected to perceive role engagement as opportunity to fulfilled their existential purpose (Del Rio & White, 2014) through participation in what they considered meaningful in line with transcendence/sacred (Pargament & Mahoney, 2005). Since their participation is expected to be guided by their

existential purpose and perceived meaningfulness at work, nurses who are spiritual at work express high optimism. And because of their optimistic disposition in anticipation of positive outcome, they are expected to be involved in deep acting rather than surface acting (Deng, Walter, & Guan, 2016; Grandey, 2003). Through deep acting optimism should attenuate stress and emotional exhaustion. Hence we hypothesize that;

H1: Optimism has a negative relationship with emotional exhaustion

Intervening Role of Work-to-Home Resources

Based on empirical evidences, optimism has consistently influence work outcome (Hmieleski & Baron 2009; Medlin & Green Jr, 2009; Jensen, Luthans, Lebsack, & Lebsack, 2007; Tuten & Neidermeyer, 2004), hence the basis for H1. However the mechanism that enhances the relationship between optimism and emotional exhaustion is being established as a cursory survey of previous literature yield dearth of literature in that regard. This study contend that the relationship can be explained through the intervening role of work to home resource.

Our argument is underpinned in Role Expansion Theory (Marks, 1977; Sieber, 1974; Aryee, Srinivas, & Tan, 2005) and contends that, instead of depleting an individual's psychological, social and physiological resources, involvement in multiple roles provides a number of benefits that may outweigh the costs, leading to net gratification rather than strain because personal resources are abundant and expandable. consistent with the meaning of optimism being "favourability of a person's expectancy" (Scheier & Carver, 1985:232) which Scheier, Carver and Bridges (1994) referred to as generalized expectancies of good outcomes occurring in one's endeavour. Therefore, we argue that individuals who are optimistic and expecting positive work or home outcome, are prone to accepting more responsibilities, through high involvement either at work or at home.

Riding on Role Expansion Theory, nurses who are optimistic are expected to create work to home resources such as psychological and social capital, new perspectives in dealing with challenges in caregiving, acquire more experience due to involvement in multiple roles, as well as material benefits (Greenhaus & Powell, 2006). Since the boundary between work and home is not water-tight we expect that resources generated from any of the domain to positively spill-over as proposes in enrichment hypothesis (Greenhaus & Powell, 2006; Carlson, Grzywacz, & Zivnuska, 2009; Nicklin & McNall, 2013; Kacmar, Crawford, Carlson, Ferguson, & Whitten, 2014). Having established in previous studies that job resources relate negatively with emotional exhaustion (Bickerton et al., 2014; Blanco-Donoso, Garrosa, Moreno-Jiménez, de Almeida, & Villela-Bueno, 2016) we propose that work to home resources attenuate nurses emotional exhaustion. In keeping to the aforementioned argument, we therefore hypothesize that;

H2: optimism in nurses relates positively with work to home resources.

H3: Work to home resources attenuates emotional exhaustion.

H4: Work to home resources mediates the relationship optimism and emotional exhaustion.

Method

Participants and procedure

We drew the participants in this study from population of nurses practicing in primary healthcare clinics in Plateau state Nigeria. Data available at Plateau state Ministry of health reveal a total 2300 registered nurses are currently working within the health facilities spread across the 17 local government area. In all a total of 369 valid questionnaires were analyses out of the total of 450 questionnaires administered.

Measures

The measure for the variables in this study were sourced as thus; Optimism (Scheier et al., 1994), Work to Home Resources (Kacmar et al., 2014) and Emotional Exhaustion (Kristensen, Borritz, Villadsen & Christensen, 2005).

Optimism scale was adopted from Life Orientation Test-revised version (LOT-R) (Scheier et al., 1994). It is a 10-items scale, which includes, “In uncertain times, I usually expect the best”, “Overall, I expect more good things to happen to me than bad”. For **Work to Home Resources and Demand**, we adapted (Kacmar et al., 2014) work-to-family enrichment scale, particularly the aspect that emphasizes work-to-home resources. The scale contains 9-items and the sample of items include, “Involvement at work helps me to gain knowledge”, “Helps me acquire skills and this helps me be more successful with ability to solve problem”.

Emotional Exhaustion We used 6-items adapted from Copenhagen Burnout Inventory (CBI) by Kristensen, Borritz, Villadsen and Christensen (2005) assesses emotional exhaustion that emanate from individual’s interaction with clients, customers or patients. Items sampled include, “I find it frustrating working with patients”, “I feel I have given more than I get back when working with patients”, “I always feel tired of working with patients”.

All the questionnaire items used were assessed on a 7-point Likert typed scale as 1 =strongly disagree, 2 = disagree, 3= slightly disagree, 4 =neutral, 5=slightly agree, 6= agree, 7= strongly agree.

Results

The characteristics of the respondents in Table 1 reveals that, 40.7% were males; 56.6% were employed in primary healthcare while the remaining in secondary health care institutions; 73.4% had worked earlier in more than one institution prior to taking the current employment. Furthermore normality test and other relevant descriptive test were conducted using SPSS version 22 to have a feel for the data. Based on the results presented in Table 2, the measure of central tendency, which is between 3.9 and 4.6 assessed on a 7-point likert typed scale is within range(Chua, 2013), likewise the skewness and kurtosis which falls within -1 and +1 did not violate the normality requirement (Hair, Ringle, & Sarstedt, 2011).

Table 1 Respondents’ demographic profile

Demographic Variable	Frequency n=369	Percentage %
Gender		
Male	150	40.7
Female	218	59.3
Marital Status		
Single	111	30.1
Married	200	54.2
Others	58	15.7
Age		
20-30yrs	50	13.6
31-40yrs	200	54.2
41-50yrs	105	28.4
Above 50yrs	14	3.8
Health Institution Currently Working With		
Secondary Health Care	160	43.4

Primary	209	56.6
Work Experience		
2-5yrs	113	30.6
6-10yrs	110	29.8
11-15yrs	90	24.4
16-20yrs	52	14.1
Above 20yrs	4	1.1
Specialization		
General Practice	149	40.4
Specialist	220	59.6
Number of Health Institution(s) Worked With		
One Institution	98	26.6
Two and Above	271	73.4

Table 2 Descriptive Statistics and Correlation coefficient

Variables	Mean	Std. Deviation	skewness	Kurtosis	1	2	3
1 Optimism	4.210	0.808	-0.923	0.626	1		
2 Work to Home Resources	4.430	0.929	-0.320	-0.473	0.785**	1	
3 Emotional Exhaustion	3.910	0.085	0.140	-0.780	-0.651**	-0.873**	1

** . Correlation is significant at the 0.01 level (2-tailed).

Assessment of Measurement Model

The analyses were conducted using Partial Least Square (PLS) approach to Structural Equation Modelling (SEM). In order to evaluate the measurement model an analysis of PLS algorithm was conducted to first determine the Composite Reliability (CR), convergent validity through Average Variance Extracted (AVE) (Hair Jr, Hult, Ringle, & Sarstedt, 2013, 2017). The results of CR and AVE obtained are presented in Table 3. Based on the outcome, the composite reliability coefficient (CR) and average variance Extracted (AVE) met Hair et al. (2011) threshold of 0.708 and 0.5 respectively.

Table 3: Assessing Convergent Validity

Construct	Items	Loading	Composite Reliability	AVE
Emotional Exhaustion	EmoExhaus1	0.831	0.934	0.701
	EmoExhaus2	0.865		
	EmoExhaus3	0.820		
	EmoExhaus4	0.845		
	EmoExhaus5	0.838		
	EmoExhaus6	0.825		
Optimism	Optimism_r7	0.685	0.928	0.539
	Optimism_r9	0.658		
	Optimism1	0.806		
	Optimism10	0.845		
	Optimism2	0.783		
	Optimism4	0.866		

	Optimism5	0.822		
	Optimism6	0.740		
	Optimism8	0.672		
Work to Home Resources	WHR1	0.874	0.928	0.776
	WHR2	0.892		
	WHR3	0.901		
	WHR4	0.840		
	WHR5	0.881		
	WHR6	0.864		
	WHR7	0.893		
	WHR8	0.904		
	WHR9	0.878		

Criteria: Composite Reliability >0.708 (Hair et al. 2011: Hair et al. (2014), AVE>0.5 (Hair et al. 2011: Hair et al. 2014). Items deleted Optimism 3, Reverse coded items Optimism 7 & 9

Secondly, discriminant validity is tested to establish the dissimilarity of the constructs in the study (Henseler, Ringle, & Sarstedt, 2014) as they relate within the framework. Two methods have been widely used by researchers over the years in determining discriminant validity of constructs (1) Cross loading and (2) Fornell and Larcker criteria. Recently, Heterotrait and Monotrait (HTMT) criterion for variance-based SEM (Henseler et al., 2014) was introduced. HTMT scores between -1 to 1 (Hair Jr, Hult, Ringle, & Sarstedt, 2016) indicate that discriminant validity requirement is not violated. In line with this criterion, the results presented in Table 4 reveal that the HTMT coefficient for the constructs are within acceptable range.

Table 4 Assessing Discriminant Validity Through HTMT

		1	2	3
1	Emotional Exhaustion	-		
2	Work to Home Resources	0.842	-	
3	Optimism	0.336	0.351	-

Assessment of Structural Model

Having ascertained the robustness of the measurement model, in keeping with the requirement of Partial Least Square the next is the evaluation of the structural model. This enable the assessment of the hypothesized relationships and the substantive significance of the model. Here the path coefficient, the t-statistics, coefficient of determination (R^2), effect size (F^2) of constructs on the structural model, and the predictive relevance (Q^2) of indicators on the structural model were determined. The results of these analyses are presented in Table 5.

Table 5: Assessment of Path Coefficient, R^2 , f^2 and Q^2

Hypotheses	Relationships	Std Beta	Std Error	T-Value	Decision	R^2	F^2	Q^2
H1	Opti -> Emo. Exh	-0.120	0.041	2.711**	Supported		0.040	
H2	Opti -> WHR	0.336	0.050	6.698**	Supported	0.113	0.127	0.087
H3	WHR -> Emo. Exh	-0.780	0.025	31.398**	Supported	0.632	1.453	0.439

**p<0.01. Where Opti; Optimism, Emo Exh; Emotional Exhaustion, WHR: Work to Home Resources.

To evaluate the hypothesized relationships, we first assessed the direct relationship between optimism and emotional exhaustion. H1, reveals ($\beta = -0.120$, $p < 0.01$), and hence supported the hypothesized negative relationship between optimism and emotional exhaustion. Since the t-value is greater than the threshold of 1.96 in a one-tailed test, it is hence considered statistically significant. In H2, the hypothesis that optimism associated positively with work to home resources was supported with ($\beta = 0.336$, $p < 0.01$) and significant at t-value $6.698 > 1.96$ threshold. Similarly, H3 supported the negative relationship between work to home resources and emotional exhaustion, with path coefficient ($\beta = 0.470$, $p < 0.01$), and t-value $31.398 > 1.96$. These relationships were explained through coefficient of determination R^2 of 0.113, and 0.632 for optimism on work to home resources and optimism and WHR on emotional exhaustion respectively. The R^2 coefficients reveals the amount of variance in endogenous variable which is influenced by the exogenous variables. Based on Cohen (1988) criteria of 0.26 (substantial), 0.13 (moderate) and 0.02 (weak), our model produce a slightly moderate R^2 in WHR and Highly substantial R^2 in Emotional Exhaustion.

Further assessment of the structural model was done in Table 5 to determine the substantive significance of the result. SMART-PLS evaluates beyond traditional statistical significance of structural models to the substantive significance, where the contributions of latent constructs and the indicators are ascertained. This is made possible through evaluation of effect size (f^2) and the predictive relevance (Q^2) (Hair Jr et al., 2016). First the f^2 which shows the effect of exogenous latent variable on the structural model was assessed, and the results reveals effect size of optimism on emotional exhaustion as 0.040 which is considered small, while the size in the relationship with WHR is 0.127, and considered medium, while f^2 between WHR and emotional exhaustion is 1.452 which is considered very large effect as defined by Cohen (1988). Similarly, Q^2 which explains the indicators predictive relevance in the structural model was ascertained through a blindfolding procedure at omission distance 7 (Hair Jr et al., 2016). Decision on the coefficient in Table 5 is based on requirements of Cohen (1988), where 0.35 is considered strong effect, 0.15 medium effects and 0.02 weak effects. In consonance with these criteria, optimism has a predictive relevance of 0.087 while WHR reveal 0.439 and are considered small and high respectively.

Table 6: Assessing Indirect Relation between Optimism and Emotional Exhaustion

Hypothesis	Relationship	Std Beta	Std Error	T- Value	Lower Limit	Upper Limit	Decision
H4	Opti ->WHR-> Emo. Exh	-0.261	0.039	6.741**	-0.33	-0.199	Supported

Criteria: ** $p < 0.01$, and zero did not straddle between lower and upper limits (Hair et al, 2017; 2014).

In addition, we further evaluated the mechanism that supports the relationship between optimism and emotional exhaustion. We has earlier proposed that WHR should explain the mechanism that supported the relationship as postulated in H4. A bootstrapping procedure was carried out (Preacher & Hayes, 2008). Results in Table 6 reveals that a strong indirect relationship exist in accordance with Preacher and Hayes (2008) and Hair Jr et al. (2013; 2017) first and second criteria. The result shows a complementary mediation (Hair, Hult, Ringle, & Sarstedt, 2017) since both direct and indirect relationships are significant based on the criteria that, the t-value in both indirect relationships are above the threshold value of 1.96. Secondly in the indirect effects, zero is not straddled between the upper and the lower limit, hence suggesting a strong mediating effect (Hair et al, 2013; 2017).

Discussion of Findings

We conducted this study with the sole objective of determining ways to reduce emotional exhaustion among care-givers, particularly the nurses. The motivation is owed to the plethora literature which indicates emotional exhaustion has serious consequences in the service jobs, and that individuals who are emotionally exhausted usually dread work, thereby exhibits job dissatisfaction and withdrawal Behaviour (Rutherford, Wei, Park, & Hur, 2012; Lewin & Sager, 2008). In keeping with this objective, we assessed the antecedent role of optimism and the intervening role of work to home resources as predictor and mechanism for understanding the prevailing challenges of emotional exhaustion in the service sector (Francis et al., 2004; Hall, Dollard, Tuckey, Winefield, & Thompson, 2010). A review of extant empirical finding shows dearth of literature as conceptualized in this study. Riding on Matter-Formism Theory of Human Existence, Role Expansion Theory, and Spill-over Theory, we developed and tested four hypotheses accordingly.

As hypothesized, optimism was found to associate negatively and significantly with emotional exhaustion in accordance with (H1) this is consistent with previous findings which demonstrated a hegemony between optimism and organizational behaviour (Medlin & Green Jr, 2009; Jensen, Luthans, Lebsack, & Lebsack, 2007), which include, higher job performance, higher motivation, successful coping, stronger academic performance, and lower strain (Tuten & Neidermeyer, 2004). Also it is in tandem with the argument that Nurses who find meaningfulness in their profession, and align same with their existential purpose, express high job engagement. In line with Mahoney et al. (2005) we perceived the role of life-saving as a call and opportunity to serve higher purpose. This motivates high level of optimism, which is expressed in nurses resilience and coping strategy in discharging their caregiving role through deep-acting rather than surface acting (Deng, Walter, & Guan, 2016; Grandey, 2003). And since deep acting involve genuine expression of emotional labour, the results further confirms our expectations.

Another dimension to discussing result in H1 is on the fact that optimism and other components of psychological capital or positive organizational behaviour such as hope and resilience have been found to enhance positive work outcome (Youssef & Luthans, 2007; Peng et al., 2013). Here nurses who possess high psychological capital are endowed with positive emotion, and where preponderance of such emotion is, there bound to exist a high attenuating effect on negative emotion such as emotional exhaustion, hence the negative and statistically significant result.

Result in H2 and H3 reveal the impact of optimism on WHR and how WHR in turn influence emotional exhaustion. The significant outcome was expected as underpinned in Role Expansion and Spill-over Theories. First, the relationship which was supported in H2 is on the basis that the expression of optimism means that nurses are positive about their expectations on the course of discharging their caregiving roles particularly when it aligns with their existential purpose as argued earlier. This in turn must have triggered positive disposition towards multiple role acceptance at work. Role expansion theory explained how such perception could lead to acquisition of resources such as new perspective, social capital, skills and new knowledge and material resources (Greenhaus & Powell, 2006). Depending on the domain of origin of multiple roles and since the boundary between work and home is not water-tight, resources gained are shared between work to home or from home to work (Greenhaus & Powell, 2006; Carlson, Grzywacz, & Zivnuska, 2009; Nicklin & McNall, 2013; Kacmar, Crawford, Carlson, Ferguson, & Whitten, 2014).

Similarly, the significant relationship between WHR and emotional exhaustion in H3 supported the previous findings in Bickerton et al. (2014) which aptly relate job resources with emotional exhaustion and turnover intention. This is expected because nurses are expected to experience less emotional exhaustion when they perceived positive benefit from

participating in multiple roles. This will be sustained if the pleasurable experience in WHR is the motivation for deep acting which will in turn mitigate emotional exhaustion.

In addition, findings also reveal that employee WHR is a complementary mediator (Hair et al., 2017) in the relationship between optimism and emotional exhaustion. This implies that the consistency in the relationship between optimism and work outcome does not operate devoid of other factors. The results further buttresses the mechanism through which the relationship could be strengthened through WHR. Suggesting that, relationship between optimism and emotional exhaustion is explained in the mediating role of WHR as predicted earlier.

Implications of Research Findings

Having surveyed non exhaustively the extant literature regarding emotional exhaustion a framework was carefully conceived as blueprint in this study to determine the role of nurses optimism and work to home resources as predictor and mediator respectively in proffering more understanding on the subject. From the analyses conducted through Smart-PLS, the results as analysed and discussed earlier obviously have some implications to theory and practice.

Theoretically, we address two gaps in this study where paucity of literature was established. First we earlier found limited empirical studies linking the role of optimism in attenuating emotional exhaustion among nurses. Our argument was underpinned in Matter-Formism Theory of human existence (Del Rio & White, 2014) which relate optimism (being a positive expression about work outcome) as emanating from the meaningfulness and existential purpose one finds in a chosen profession. And because nursing like other service oriented profession is associated with emotional labour, the realization of meaningfulness and existential purpose will spur deep-acting rather than surface acting (Deng, Walter, & Guan, 2016; Grandey, 2003) as the most desired emotional energy. Findings in this study confirmed that optimism has a reducing effect on emotional exhaustion as seen in the negative relationship. The current findings underscore the strength of Matter Formism theory in the relationship between optimism and emotional exhaustion and perhaps motivated by nurses realization of meaning that proceeds from their discovery of existential purpose that centres on life-saving.

Secondly, the significance of work to home resources in the framework established the mechanism through which optimism attenuates emotional exhaustion through the lens of Role Expansion Theory. This suggests that the relationship between optimism and emotional exhaustion is also indirect. In underscoring our earlier argument we had posited that optimism leads to high job and home involvement, which enhances the acquisition of resources, and in turn spill-over positively to mitigate emotional exhaustion. By implication, the significant intervening finding has strengthened the knowledge boundaries between positive organizational behaviour work to home interface and burnout dimension. This will open up a new frontier for further investigation between optimism and other dimensions to burnout such as depersonalization, personal accomplishment and involvement (Maslach & Jackson, 1981)

Practically, the findings in this study offer another perspective to practitioners on ways to reduce emotional exhaustion. Optimism as described earlier is individual attribute that propels employee to see situation favourably with generalized positive outcome expectancy” (Scheier & Carver, 1985:232). This stable trait gives them advantage to influence various aspects of behaviour and well-being in a work place. Thus this is important to hospital management, such that they could leverage on nurses positive attitude to achieve organizational goals through ensuring that the right support is extended to such employee in order to spur commitment to lifesaving through deep acting (Deng, Walter, & Guan, 2016;

Grandey, 2003). And since this has been found to reduce emotional exhaustion, steps must be taken to inculcate positive organizational attributes as this will not only enhance high involvement of caregivers, but also trigger positive social interaction and assurance in patients (Heaphy & Dutton, 2008).

Human resource managers in the health sector could also benefit from this study on the course of discharging their core mandate of identifying and selecting nurses with the desired positive job attribute. Since optimism and other attributes such as hope, perseverance and compassion have been found to positively influence caring behaviour, co-opting these attributes into selection criterion will help greatly in the whittling process to ensure that only those with high tendency to thrive base on the criterion are considered.

Furthermore, having established the intervening role of work to home resources, it further necessitate the importance of giving close attention the connection between work and home interface and its implication on employee expression at work. Hospital managers who are conversant with the blurred boundary in caregivers work and home involvement tend to appreciate the dynamism more. Since proponents of enrichment hypothesis (Greenhaus & Powell, 2006; Masuda, McNall, Allen, & Nicklin, 2012; Chen, Powell, & Cui, 2014) are unanimous on the benefit that accrued from such involvement, nurses who are optimistic should be encourage to express this by exposing them to more challenging tasks at work. Doing so enable them acquire resources which will not only avail them with experience, new perspective or psychological capital for better participation at home, it should also translate into positive mood (Greenhaus & Powell, 2006) and affect, hence attenuate emotional exhaustion.

Conclusion

The study was conceived to determine ways of reducing emotional exhaustion through the predictive role of positive organizational behaviour as seen in nurses' level of optimism, and the intervening role of work to home resources. As hypothesized, we found optimism relating directly and negatively with emotional exhaustion as well as positively and indirectly with emotional exhaustion through the intervening role of work to home resources. This study contributes to the burgeoning research in this area in view of the negative consequences of emotional exhaustion on caring behaviour. Since studies have inferred that individuals who are emotionally exhausted dread work, exhibits job dissatisfaction, absenteeism, and ultimately show withdrawal Behaviour (Rutherford, Wei, Park, & Hur, 2012; Lewin & Sager, 2008), this study believes that this tendency can be minimized through the mitigating role of optimism and work to home resources.

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