

The Association Between Emotional Labour and Emotional Exhaustion Among Undergraduate Nursing Students During Clinical Posting

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ABSTRACT

Introduction: Nursing students with lesser experience and training are likely to react negatively to emotional labour and are at higher risk for deterioration of psychological well-being and increase emotional exhaustion due to accumulated stress. This study aims to determine the level and association between emotional labour and emotional exhaustion among undergraduate nursing students during clinical posting.

Methods: A cross-sectional study was conducted among undergraduate nursing students in a public University in Malaysia using online surveys. The Nurse Emotional Labour Scale (NELS) consist of 15 items and scored the response using the 5-point Likert scale was used to measure the level of emotional labour. Meanwhile, emotional exhaustion was measured using 9 items Emotional Exhaustion subscale of Maslach Burnout Inventory.

Results: A total of 155 students (81.3% female and 18.7 % male) responded to the study. The level of emotional labour among nursing students were found to be moderate with a mean score of 20.26 and most students used genuine acting. More students engaged in deep acting (Mean = 11.30) compared to surface acting (Mean = 8.97). A high level of emotional exhaustion was identified in 14.2% of the students. Clinical posting experience and emotional exhaustion were found to be associated. Posting in the operation theatre and labour room leads to emotional exhaustion. There was positive significant association between emotional labour and emotional exhaustion of the students.

Conclusion: Overall, it can be concluded that emotional exhaustion during clinical posting is related to emotional labour. Thus, measures in dealing with emotional labour such as effective coping strategies and stress prevention can be encouraged. Close monitoring and support from the clinical teachers should be strengthened so that early assistance can be delivered to the needy students. Also, steps in the arrangement of the clinical posting should be employed to make it student friendly and interesting clinical learning. Further research from the clinical teachers' perspective should be done so that early assessment of students' performance or any emotional issues that arise can be monitored and detected early.

Keywords: Emotional labour, Nursing students, Clinical, Emotional exhaustion

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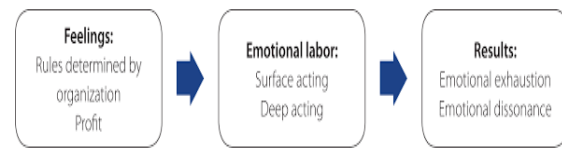
INTRODUCTION

Emotional labour is a way of emotion regulation in which employees control their emotions and feelings in the workplace. Most customer service workers need to regulate their emotions during work to be able to appear professional when dealing with undesirable situations. Nursing has been recognized as a career that needs a great deal of emotional labour (1). Nurses are in contact and communicate with patients for extended periods of time and are expected to provide empathetic care. They are required to control their emotional reactions when dealing with the patient's feelings, concerns, and discomfort. Additionally, nursing might be emotionally more stressful than any other professions since most nursing environments are associated with physically and psychologically vulnerable patients (2).

This issue is also not excluded from the nursing students during their clinical posting. Clinical posting is the first experience of nursing students in implementing nursing care as they had learned in class in real-world settings. As a healthcare provider, nursing students would also face emotional labour during work in the clinical setting. This job demand can be one of the factors of emotional exhaustion among nursing students throughout their studies. Emotional exhaustion is a condition of physical and emotional deterioration that is caused by prolonged stress on the job. The nursing students who experienced it will feel fatigued, emotionally drained, and overwhelmed (3). Emotional exhaustion can give a significant impact on the everyday life, relationships, and behaviours of students.

Hochschild's theory of emotional labour describes the process in which the employees are expected to express their emotions in accordance with the rules determined by organizations in terms of professional behaviour in taking care of clients (4). Employers are driven by the organization with the main goal to increase profits through client satisfaction. To abide by this rule, they need to regulate their emotions which can be achieved in two ways: surface acting and deep acting. Both surface and deep acting processes require effort and threaten to produce emotional dissonance and emotional exhaustion (5). (See **Figure 1**)

Figure 1: Emotional dissonance and emotional exhaustion (Hochschild, 2003).



The status of emotional labour and emotional exhaustion among undergraduate nursing students during clinical posting in Malaysia is undetermined as previous studies have all been conducted overseas. Thus, this study aims to determine the level of emotional labour, emotional exhaustion, their association with socio-demographic data and the correlation between emotional labour and emotional exhaustion among nursing students. This study hypothesizes that there should not be any association between emotional labour and emotional exhaustion.

METHODS

A cross-sectional study was conducted in the Islamic University Malaysia, Kuantan Campus among undergraduate nursing students within a 6-month period. A total of 155 student were recruited for the study using convenient sampling method. Participants who met the inclusion criteria (having experience of clinical posting for at least one month) and those who were diagnosed with mental disorder were excluded.

Instruments

Socio-demographic questionnaire was used to record the students' characteristics including age, gender, year of study, duration of clinical posting and clinical posting area that were most stressful. The level of emotional labour was measured using the Nurse Emotional Labour Scale (NELS) (6). It consisted of three constructs which are Surface Acting (5 items), Deep Acting (5 items) and Genuine Acting (5 items) with a total of 15 items. It used the 5-point Likert scale from 0 = "never" to 5 = "always". A high score indicates a level of emotional labour from the participants. This tool measures which emotional strategies (6) in their everyday encounters with their patients the most. The strategies taken by participant indicated the level of emotional labour they had. For easy understanding of the emotional

labour, in this current study the researchers had categories the score of response into three groups which are low (0–16), moderate (17–26) and high (≥ 27).

Emotional exhaustion of the participants was measured using the nine-item scale of Emotional Exhaustion from the Maslach Burnout Inventory (7). Items were rated from 0 = “never” to 5 = “always”. The scale scores from the instruments were categorized into three groups (7) which are low (0–16), moderate (17–26) and high (≥ 27).

Data collection process and analysis

The information of the study, consent form and the questionnaires were in Google form and distributed to the participants through email and WhatsApp. Questionnaires with incomplete answers were excluded from the

data analysis. The collected data were analysed using computer software, Statistical Package for Social Science (SPSS) version 20.0 for windows.

RESULTS

Sociodemographic characteristics of the participants

A total of 155 participants responded. Most of the participants are female (81.3%) and aged between 21 to 23 years old (80%). A total of 43.2% of the participants were year 4 students (Table 1). For the clinical posting experience, the average is 34 weeks. Finally, the clinical posting area that the participants found the most stressful were the surgical ward (80.6%) and the medical ward (63.9%). The results were summarised in **Table 1**.

Table 1: Distribution of participants' Sociodemographic characteristics

Characteristics	Variables	Frequency (n=155)	Percentage (%)
Gender	Male	29	18.7
	Female	126	81.3
Year of study	Year 2	37	23.9
	Year 3	51	32.9
	Year 4	67	43.2
Age	<21 years old	2	1.3
	21-23 years old	124	80.0
	>23 years old	29	18.7
Clinical posting experience (weeks)	4-18	38	24.5
	19-33	29	18.7
	34-45	32	20.6
	>45	56	36.1
Clinical posting area that are most stressful	Medical ward	99	63.9
	Surgical ward	125	80.6
	Operation theatre	8	5.2
	Intensive Care Unit	12	7.7
	Emergency Department	19	12.3
	Psychiatric ward	4	2.6
	Labour room	12	7.7
	“Klinik Kesihatan”	33	21.3
	Antenatal/ Postnatal/	13	8.4
	Gynaecology ward		
Paediatrics ward	22	14.2	

Level of emotional labour

The level of emotional labour (**Table 2**) was measured using the mean and standard deviation of the total marks scored by the students. The level of the emotional labour of nursing students was moderate with a mean

score of 20.26 points (SD = 6.98). Most of the nursing students was engaged in genuine acting with mean score of 14.17 (SD = 3.47), followed by deep acting (Mean = 11.30, SD = 3.85) and surface acting (Mean = 8.97, SD = 4.14).

For the genuine acting group, most students stated that the smiles they share with patients are sincere (Mean = 3.26, SD = 0.78), followed by genuinely caring for patients and their well-being and the emotions they show to patients match what they truly feel.

emotion at the right time when dealing with patients (Mean = 3.01, SD = 0.95), followed by trying to experience the emotions that must be shown when interacting with patients as they have to cover up their true feelings when dealing with patients.

The highest emotional labour attitude scored by the students is trying to show appropriate

Table 2: Participants' emotional labour level.

Subscale	Factor ranking	Item ranking	Mean	SD
I. Surface level acting	3		8.97	4.14
I feign emotions I do not really feel when telling patients bad news.		9	1.19	0.95
I pretend to be sad when my patient tells me a bad experience.		10	1.12	0.91
I put on an act in order to deal with patients in an appropriate way		6	2.10	1.18
I have to cover up my true feelings when dealing with patients.		3	2.45	1.10
I behave in a way that differs from how I really feel		5	2.12	1.16
II. Deep level acting	2		11.30	3.85
I work hard to feel the emotions that I need to show when dealing with my patients.		8	1.63	1.05
When dealing with difficult patients, I imagine them being little kids so that I can be more patient with them.		7	1.75	1.15
I try to show appropriate emotion at the right time when dealing with patients.		1	3.01	0.95
I try to actually experience the emotions that I must show when interacting with patients.		2	2.67	1.03
I have to concentrate more on my behaviour when I display an emotion that I don't actually feel.		4	2.25	1.16
III. Genuine level acting	1		14.17	3.47
I show the same feelings that I feel inside.		5	2.35	1.05
I actually feel the emotions that I need to show to do my job.		4	2.46	1.01
The smiles I share with my patients are sincere		1	3.26	0.78
I genuinely care for my patients and their well-being.		2	3.18	0.75
The emotions I show to patients match what I truly feel.		3	2.91	0.86
Total mean emotional labour (Mean ± SD)			20.26	± 6.98

Level of emotional exhaustion

The emotional exhaustion level among the nursing students was measured by mean and standard deviation of participants' total scores. The mean total score of emotional exhaustion scored by the nursing students is 18.23. Most students (47.1%) scored moderately on emotional exhaustion, 14.8% had high levels of emotional exhaustion while 60 participants had low levels of emotional exhaustion with a percentage of 38.7% (Table 3).

Based on Table 4, the most common emotional exhaustion characteristics experienced by the nursing students were fatigue when getting up in the morning (Mean = 2.54, SD = 0.99), followed by feeling sluggish at the end of the workday (Mean = 2.43, SD = 0.95), and feeling emotionally drained from work (Mean = 2.37, SD = 0.81). Meanwhile, feeling at the end of the rope was the least experienced by the students during clinical posting.

Table 3: Participants' emotional exhaustion level.

Variable	n	%
Level of emotional exhaustion		
Low (0-16)	60	38.7
Moderate (17-26)	73	47.1
High (>27)	22	14.2

Table 4: Emotional exhaustion during clinical posting

Item	Item ranking	Mean	SD
Emotional Exhaustion		18.23	7.25
I feel emotionally drained from my work.	3	2.37	0.81
I feel used up at the end of the workday	2	2.43	0.95
I feel fatigued when I get up in the morning.	1	2.54	0.99
I feel like I am at the end of my rope.	9	1.55	1.14
I feel frustrated by my job.	8	1.63	1.08
I feel I am working too hard on my job.	6	1.87	0.99
I feel burned out from my work	5	2.03	1.08
Working with people puts too much stress on me.	4	2.08	1.09
Working with patients is really a strain for me.	7	1.73	1.04

The association between socio-demographic characteristics and emotional labour level

Independent t-test was used to analyse the association between genders, most stressful clinical posting area and emotional labour levels while ANOVA was used to analyse the association between age, year of study, clinical posting area and level of emotional labour. The finding shows that none of the socio-demographic characteristics contributed to the level of emotional labour.

The association between socio-demographic characteristics and emotional exhaustion level

Independent t-test was used to analyse the association between genders, most stressful clinical posting area with emotional exhaustion level while ANOVA was used to analyse the association between age, year of study, clinical posting area and level of emotional exhaustion. The association between genders, the most stressful clinical posting area and level of emotional exhaustion were not significant (Table 5) except for operation theatre and labour room where each demographic variable was significantly different as the p-value is 0.021 and 0.015 ($p < 0.05$), respectively.

Table 6 shows the association between age, year of study, clinical posting experience and level of emotional exhaustion using ANOVA. Only the clinical posting experience variable was found to be significantly different ($F = 4.54$, $df = 3, 151$, $p < 0.05$). Further analysis with Bonferroni post-hoc test showed that the students with experience of 34–45 weeks had significantly more emotional exhaustion ($M = 21.69$, $SD = 8.11$) than students with 4–18 weeks of experience ($M = 16.39$, $SD = 6.03$) and students with 19–33 weeks of experience ($M = 15.97$, $SD = 7.57$). The difference between clinical posting experience of 4–18 weeks and 19–33 weeks, between 4–18 weeks and more than 45 weeks, between 19–33 weeks and more than 45 weeks, between 34–45 weeks and more than 45 weeks were not statistically significant (Table 7).

The correlation between emotional labour and emotional exhaustion

The finding in this current study shows that there are positive significant association between emotional labour and emotional exhaustion among nursing students ($r = 0.212$, $p = 0.008$). Surface acting also shows a significant positive correlation with emotional exhaustion but has poor relationship ($r = 0.282$, $p = 0.001$). Genuine acting is the only variable that is negatively correlated with the level of emotional exhaustion ($r = -0.166$, $p = 0.039$).

DISCUSSION

The emotional labour of nursing students

Findings in this study support previous evidence that nursing students perform emotional labour in clinical setting as to appear professional. Overall, it was found that the emotional labour engaged by IIUM undergraduate nursing students were at a moderate level. This can be made clear as most

Table 5: Association between nursing students' socio-demographic characteristics and level of emotional exhaustion using Independent t-test.

Variables	Characteristics	n	Mean (SD)	Mean diff (95% CI)	t-statistics (df)	p-value
Gender	Male	29	18.97 (6.98)	0.91	0.603 (153)	0.548
	Female	126	18.06 (7.33)	(-2.06, 3.86)		
Medical ward	Yes	99	18.24 (7.13)	0.53	0.437 (153)	0.663
	No	56	17.89 (7.52)	(-1.87, 2.93)		
Surgical ward	Yes	125	18.32 (7.12)	0.45	0.306 (153)	0.760
	No	30	17.87 (7.91)	(-2.47, 3.38)		
Operation Theatre	Yes	8	21.50 (3.21)	3.45	2.678 (11.56)	0.021*
	No	147	18.05 (7.38)	(0.63, 6.26)		
Intensive Care Unit	Yes	12	18.33 (6.20)	0.11	0.05 (153)	0.960
	No	143		(-4.21, 4.43)		
Emergency Department	Yes	19	18.79 (7.01)	0.64	0.356 (153)	0.722
	No	136	18.15 (7.31)	(-2.89, 4.16)		
Psychiatric ward	Yes	4	23.00 (7.53)	4.89	1.335 (153)	0.184
	No	151	18.11 (7.23)	(-2.35, 12.14)		
Labour room	Yes	12	23.08 (5.71)	5.26	2.451 (153)	0.015*
	No	143	17.83 (7.24)	(1.02, 9.50)		
Health Clinic	Yes	33	18.03 (8.52)	-0.26	-0.18 (153)	0.858
	No	122	18.29 (6.91)	(-3.08, 2.57)		
Antenatal/ Postnatal/ Gynaecology ward	Yes	13	21.92 (7.60)	4.03	1.934 (153)	0.055
	No	142	17.89 (7.16)	(-0.09, 8.15)		
Paediatrics ward	Yes	22	20.18 (7.40)	2.27	1.365 (153)	0.174
	No	133	17.91 (7.21)	(-1.02, 5.56)		

*Significant value <.05

Table 6: Association between nursing students' socio-demographic characteristics and level of emotional exhaustion using one-way ANOVA.

Variables	n	Mean (SD)	F-Statistics (df)	p-value
Age			1.287 (2, 152)	0.279
<21 years old	2	12.50 (3.54)		
21-23 years old	124	17.98 (7.40)		
>23 years old	29	19.69 (6.61)		
Years of study			2.05 (2, 152)	0.132
Year 2	37	16.27 (6.07)		
Year 3	51	18.31 (7.82)		
Year 4	67	19.25 (7.29)		
Clinical posting experience (weeks)			4.54* (3, 151)	0.004*
4-18	38	16.39 (6.03)		
19-33	29	15.97 (7.57)		
34-45	32	21.69 (8.11)		
>45	56	18.68 (6.67)		

*Significant value <.05

Table 7: Bonferroni post hoc test of clinical posting experience.

Variable		Mean Diff (95% CI)	P-value
4-18 weeks	19-33 weeks	0.43 (-4.20, 5.05)	1.000
	34-45 weeks	-5.29 (-9.79, -0.79)	0.012*
	>45 weeks	-2.28 (-6.23, 1.66)	0.741
19-33 weeks	4-18 weeks	-0.43 (-5.05, 4.20)	1.000
	34-45 weeks	-5.72 (-10.53, 0.91)	0.011*
	>45 weeks	-2.713 (-7.00, 1.58)	0.558
34-45 weeks	4-18 weeks	5.29 (0.79, 9.79)	0.012*
	19-33 weeks	5.72 (0.91, 10.53)	0.011*
	>45 weeks	3.009 (-1.15, 7.17)	0.329
More than 45 weeks	4-18 weeks	2.28 (-1.66, 6.23)	0.741
	19-33 weeks	2.71 (-1.58, 7.00)	0.558
	34-45 weeks	1.56 (-7.17, 1.15)	0.329

*Significant value < .05

of the nursing students preferred to use genuine level acting during their clinical posting. In previous in-depth individual interviews with nineteen nursing students based in North of England, nursing students demonstrated the use of emotional labour for the patient's benefit, yet they also emphasized the importance of genuine acting; to be honest and show true emotions (8).

Most of the time, not all nursing students would genuinely care about the patients, but they still need to make the patient feel secure, thus they engage in emotional labour by using surface and deep acting. Subjects in the current study scored moderately in deep acting and surface acting with more students engaging in deep acting compared to surface acting during clinical posting. These findings are supported by previous studies among 107 undergraduates and graduate nursing students enrolled in a large south-eastern university in USA (9) where the nursing students frequently suppressed their emotion [Mean (SD) = 29.83 (9.95)] more than they faked their emotions [Mean (SD) = 23.75 (8.62)]. As the nature of nurses' work is to encourage satisfaction towards patients, students think that faking an emotion is the best approach and recognizes that showing true emotions could lead to worse circumstances.

The level of emotional exhaustion among nursing students

Emotional exhaustion may constitute an early manifestation and indicator of the development

of burnout. The current study showed that most of the nursing students (47.1%) had moderate levels of emotional exhaustion. However, in Brazil, there are two studies using the same scale of emotional exhaustion, the first study among 570 nursing students from three universities and the other among 114 nursing students at a public university, found out that most of nursing students had high emotional exhaustion, with 76.3% and 64.04%, respectively (10,11). The exact reason for the differences is not confirmed, but it is possible that it is due to the differences in the clinical and academic environment. In the literature, nursing students mentioned that clinical environments with poor psychosocial conditions may bring a negative impact on learning (12).

Despite that, there are other factors of emotional exhaustion among nursing students that should be considered. In fact, this study was conducted during the global pandemic of Covid-19 in which this circumstance was tough for everyone including the students. Despite the pandemic, the students still needed to go to the hospital for clinical posting and it can be more challenging. A study among nursing students in Belgium suggested that the clinical placement experience amid the pandemic was more demanding with the fear of becoming infected with Covid-19, fewer learning opportunities and worries of inadequate support from supervisors and preceptors (13). Besides that, the change in their learning experience can amplify the level of mental health burden on the students (14).

The association between socio-demographic characteristics and emotional labour

In this study, it was found that gender was not related to the emotional labour of students. This is similar to a previous study of 167 nursing students from a state university located in Turkey which found that gender was not associated with the subscales of emotional labour (15). However, a number of other studies revealed that women are superior to men in emotional labour (16, 17). This suggested that women managed their emotions better than a man.

Apart from that, the findings were similar to one previous study that found the clinical experience of nursing students is not related to emotional labour during their engagement in clinical work. In this respect, it could be stated that the duration of work does not make a difference in the emotional management of students. This is contrary to another study which observed that higher emotional labour was reported by nurses who served longer (18). Undeniably, involving in longer work activities could increase work-related stress. Next, the clinical posting area was found not to be associated with emotional labour among students. In the literature, the working area gave an impact on the method of managing emotions where the nurses who worked in the oncology department are more likely to experience emotional labour compared to other departments (18).

The association between socio-demographic characteristics and emotional exhaustion

From the current study, the finding shows that age and year of study were not significant to emotional exhaustion among nursing students. This is similar to a previous study among 89 Romanian nursing students which showed a non-significant difference ($p = 0.544$) between age category and emotional exhaustion (19). In contra, nursing students in Brazil aged between 18 and 24 were found to experience higher emotional exhaustion compared to other age groups (20). Other studies found that students with an advanced year of study experience higher emotional exhaustion, and this reflects those students in or approaching their final year had more workload and academic demands (10).

Other than that, clinical posting experience was significant to emotional exhaustion in which nursing students with 34–45 weeks of clinical experience demonstrated higher emotional exhaustion. This could be explained by the prolonged exposure to stressful environments that brought negative outcomes to them. However, in a relevant study, it was stated that the nursing students' experience as nurses was not associated with emotional exhaustion (19). Another finding reported in this current study is that IIUM nursing students that felt more pressured in operation theatres and labour rooms had more emotional exhaustion. Unsurprisingly, these two specialized areas provided a new different environment to the students which requires them to consume some time to adjust themselves. Some students may not be able to cultivate interest in those two areas which causes them to be emotionally exhausted.

The correlation between emotional labour and emotional exhaustion

In the current study, the results demonstrated the existence of a significant positive association between the level of emotional labour and emotional exhaustion among nursing students. This explains that the more nursing students engaged in strategies that indicated high level of emotional labour (mostly adopted genuine acting, strategies) during clinical posting, the most likely will not experience emotional exhaustion. This finding is similar to several other studies that mentioned a significant positive correlation between emotional labour and emotional exhaustion was found among nurses and nursing students (18, 21, 22,23). This could happen because the consistent regulation of emotion during clinical work makes the students feel emotionally exhausted and they are no longer able to maintain their normal level of psychological effort (24).

Additionally, with regards to the measure of emotional exhaustion with the subscale of emotional labour, this study found that surface acting is positively associated with emotional exhaustion. Consistently, previous studies (23, 25) also found that surface level acting is associated with higher levels of emotional exhaustion compared to deep acting. Other

than that, deep acting among nursing students during clinical posting is not significant with the level of emotional exhaustion. This contraindicated previous studies where the authors mentioned that deep acting was negatively related to emotional exhaustion (23,25). For the genuine acting subscale, the students in this study that use less genuine acting had more emotional exhaustion. This can be explained by the genuine and sincere expression they share with the patient which helps to reduce the burden of emotional problems.

CONCLUSION

Despite knowing that clinical posting is a requirement to complete the nursing course, yet it could be challenging. This study is conducted to identify the emotional labour and emotional exhaustion of nursing students involved in clinical posting. We also tested the relationship between emotional labour and emotional exhaustion. The results revealed that the level of emotional labour is moderate with the involvement in deep acting that is higher than surface acting. Despite that, most students still engage in genuine acting where they show sincere emotion. Sincere emotional exhaustion among the students was found to be moderate.

In conclusion, the findings also supported the previous studies that show emotional labour had positive correlation with emotional exhaustion. Emotional labour is synonymous to the job of nurses, and it could lead to emotional exhaustion and other negative outcomes. Hence, measures should be taken to counter this issue such as effective coping strategies and stress prevention, implementation of education on emotional management that can be useful during clinical posting. This could help the nursing students to control the emotions they face daily in the clinical setting. Close monitoring and support from clinical coordinator and clinical teachers should also be strengthened so that early assistance can be delivered to the needy students. Further research from the clinical teachers' perspective should be done so that early assessment on students' performance, any emotional issues that arise can be monitored and detected early.

ETHICAL MATTERS

The study was approved by the Kulliyah Nursing Committee (KON) and the University Ethics Committee (IREC). Information regarding the study's purpose, procedures, assurance of confidentiality and statements about their right to withdraw at any time. The return of the completed questionnaire was treated as informed consent to participate.

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LIMITATION OF STUDY

This study had been successfully conducted. However, some limitations may affect the overall findings of this study. First, the study had to be postponed for a few months due to Movement Control Order (MCO) during the COVID-19 pandemic. Some of the respondents were at home and only able to return to campus and resume their clinical placement in the hospital after the approval obtained. Being in the pandemic situation, their responses to the questionnaire may somehow be affected by their emotions varied when they are at home as compared to being in the hostel and having only friends rather than family members around them. Also, due to online survey, some respondents may have internet problems thus this may affect the response rate.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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