School of Population Health

The Performance of Emotional Labour in Psychologists Conducting Psychotherapy

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Declaration

To the best of my knowledge and belief this thesis contains no material previously published by any other person except where due acknowledgment has been made. This thesis contains no material which has been accepted for the award of any other degree or diploma in any university.

The research presented and reported in this thesis was conducted in accordance with the National Health and Medical Research Council National Statement on Ethical Conduct in Human Research (2007) – updated March 2014. The proposed research study received human research ethics approval from the Curtin University Human Research Ethics Committee (EC00262), Approval Number: HRE2018-0297.

Signature: ………………………………………….

Date: 10.02.23

Abstract

Pre-COVID 19 estimates suggest that 40-60% of mental health professionals, including psychologists providing psychotherapy, experience burnout (O'Connor et al., 2018; Yang & Hayes, 2020). The prevalence of burnout is a concern due to its association with many other negative personal, professional, and organisational outcomes (e.g., Abraham et al., 2020; Jun et al., 2021; Papthanasiou, 2015), as well as the generally poor outcomes for existing psychological interventions aimed at reducing burnout (Dreison et al., 2018). Although research has focused on identifying key contributing factors to burnout in this group (McCormack et al., 2018; Rupert et al., 2015; Yang & Hayes, 2020), the potential contribution of emotional labour has not been explored. Emotional labour conceptualises emotion regulation processes occurring to meet one's occupational duties (Hochschild, 1983; Grandey & Gabriel, 2015). Overlooking emotional labour in this literature is contrasted by its well-established relationship with burnout in other professional groups (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Improving interventions aimed at reducing rates of burnout requires conceptualisation and amelioration of significant contributing factors. Therefore, in conducting this thesis I aimed to examine the construct of emotional labour in psychologists providing psychotherapy, its relationship with burnout, and to gather evidence for potential strategies that may mitigate this relationship. This aim was achieved through a mixed-methods approach comprising four studies.

In the first two studies, I report the findings from a reflexive thematic analysis performed on interview data obtained from 24 psychologists with varying training backgrounds and across the professional lifespan. In study one (Chapter Two), I present an analysis that established possible perceived effects of emotional

labour in psychologists providing psychotherapy. The broad themes of *personal growth*, *feeling depleted and exhausted*, and *craving space free from people and work-related emotion* are identified which represent positive, negative, and neutral perceived outcomes. This study was the first to establish various possible perceived effects of emotional labour in this occupational group. The findings contrasted previous literature by identifying possible positive effects of emotional labour, aligned with previous literature by linking emotional labour to burnout, and extended previous literature by identifying a unique neutral impact in the need for isolation from people and work-related emotion. In study two (Chapter Three), I present an analysis exploring potential strategies and factors that may assist psychologists to manage emotional labour effectively. These findings identified multiple broad potential beneficial factors including those that are novel for the emotional labour literature. Such novel factors included psychological flexibility, self-compassion, self-reflection, and career experience. This study's findings established potential strategies that may assist psychologists to manage emotional labour effectively.

In studies three (Chapter Four) and four (Chapter Five), I build upon the findings from the initial qualitative studies by analysing survey data from an international sample of 412 psychologists. In study three, I validated a psychometric measure of emotional labour, termed the Perth Emotional Labour Scale (PELS), and performed an indirect effects analysis to determine what aspects of emotional labour appear to contribute most to burnout in psychologists providing psychotherapy. The PELS was developed to account for confounding measurement errors in existing measures of emotional labour such as their unidimensional conceptualisations of surface and deep acting, and their inability to measure emotional dissonance. In this chapter, confirmatory factor analysis, correlational analyses, and computation of

Cronbach's alpha coefficients established evidence for the measure's factorial validity, convergent validity, test-retest reliability, and internal consistency. Additionally, I argue that the indirect effects analysis results suggested that the emotional dissonance factor of emotional labour contributed more strongly to burnout compared to emotion regulation efforts in this sample. These findings provide new knowledge by providing researchers with a psychometric tool to examine emotional labour that is less confounded by error in comparison to existing measures and illuminate the potential key mechanism through which emotional labour contributes to burnout in this occupational group. In study four, I tested a conditional indirect effects model to examine support for self-compassion, psychological flexibility, and career experience as factors to assist psychologists to manage emotional labour effectively. These variables were selected based on theory, past empirical studies, and the findings from studies one and two of this thesis. Support was found for the roles of self-compassion and psychological flexibility to reduce emotional dissonance and consequent burnout. These results suggested that these abilities may assist psychologists to manage emotional labour effectively.

Collectively, the findings of this thesis contribute evidence to inform understandings of the effects of emotional labour, the unique and key contributing factors, how the construct should be measured, and how emotional labour can be managed effectively in psychologists providing psychotherapy. I argue that findings presented in this thesis suggest that emotional labour significantly contributes to psychologist burnout with emotional dissonance acting as a significant mechanism of action in this relationship. Multiple strategies are identified as potentially ameliorating the negative outcomes of emotional labour, with self-compassion and psychological flexibility of particular note because these abilities received both

qualitative and quantitative inquiry and support. Furthermore, both self-compassion and psychological flexibility are abilities within an individual's locus of control and can be developed with training. I argue that the results of the PELS's psychometric validation and the subsequent indirect effects analysis support the need for emotional labour psychometric tools to adopt bidimensional conceptualisations of surface and deep acting, and include specific measurement of emotional dissonance. These specific findings underscore the importance of including and addressing emotional labour in future research on psychologist burnout and well-being. Future research focusing on reducing the impact of emotional labour in psychologists through strategies identified in this thesis has the potential to improve burnout interventions and reduce its prevalence in this occupational group.

Acknowledgment of Country

We acknowledge that Curtin University works across hundreds of traditional lands and custodial groups in Australia, and with First Nations people around the globe. We wish to pay our deepest respects to their ancestors and members of their communities, past, present, and to their emerging leaders. Our passion and commitment to work with all Australians and peoples from across the world, including our First Nations peoples are at the core of the work we do, reflective of our institutions' values and commitment to our role as leaders in the Reconciliation space in Australia.

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in psychologists only increases from here.

List of Conference Presentations

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List of Publications

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The purpose of this statement is to detail the nature and extent of the

intellectual contribution by the PhD Candidate, James Clarke, and all other co-

authors of these study publications. Emeritus Professor Clare Rees, Professor Lauren

Breen, and Dr Brody Heritage were involved in the overall supervision of the PhD,

supporting the conception and design of the studies, interpretation of results, and

writing of the manuscript. Emeritus Professor Clare Rees and Professor Lauren

Breen supported the writing of key sections of the manuscript, and overall feedback.

James Clarke contributed to the conception and design of these studies, and led the

data collection, analysis, and interpretation, and manuscript writing.

I affirm the details stated in the Statement of Contribution are true and correct.

_____   _____

Mr James Clarke   Emeritus Professor Clare Rees

_____   _____

Professor Lauren Breen   Dr Brody Heritage

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Chapter One – General Introduction

The Problem – An Overview of Burnout

Burnout is a significant occupational risk factor that is gaining increased awareness and concern in the professional well-being literature. This is evidenced by the increasing number of studies published on the topic of burnout since its inception in the 1970s (De Hert, 2020; Heinemann & Heinemann, 2017), and its recent inclusion in the International Classification of Diseases – 11th edition (World Health Organization [WHO], 2019). Burnout is conceptualised as a work-based condition comprising three components of "an overwhelming exhaustion, feelings of cynicism and detachment from the job, and a sense of ineffectiveness and lack of accomplishment" (Maslach & Leiter, 2016, p. 103). This quote describes the emotional exhaustion, depersonalisation, and ineffectiveness factors of burnout respectively. Emotional exhaustion refers to the subjective experience of one's emotional resources being depleted, depersonalization refers to the development of an attitude of cynicism towards one's work, and the ineffectiveness factor refers to the subjective sense that one is no longer achieving effective outcomes in one's work (Maslach & Leiter, 2016). The increased research attention to burnout is matched by its prevalence in clinical settings as recent global estimates of burnout prevalence in healthcare professionals suggest up to half of this workforce experiences substantial symptoms of burnout (Ghahramani et al., 2021). This research establishes burnout as ubiquitous in healthcare professionals and the need for research to tackle this complex threat to well-being.

The effects of burnout are varied and have implications for organisational, professional, and personal well-being. Intent for and actual turnover, greater absenteeism, and poorer organisational commitment are commonly observed

organisational outcomes of burnout (Abraham et al., 2020; Borritz et al., 2006; Jun et al., 2021), which have significant negative economic consequences (Han et al., 2019). In the professional domain, burnout is associated with concerning outcomes including poorer performance (Taris, 2006), greater willingness to use seclusion to manage patients displaying difficult behaviours (Happell & Koehn, 2011), poorer empathy and communication (Salyers et al., 2015), poorer patient safety (Garcia et al., 2019), poorer job satisfaction (Abraham et al., 2020), and poorer consumer satisfaction (Jun et al., 2021). Perhaps most concerning is the association between burnout and personal ill-health, as burnout is positively associated with increased stress (Abraham et al., 2020), poorer physical health, and depression and anxiety (Papthanasiou, 2015; Peterson et al., 2008). The prevalence and concerning effects of burnout underscore it as a critical construct to address in research and practice.

The Job Demands – Resources (JD-R) and Conservation of Resources (COR) theories are the two dominant theoretical models conceptualising the development of burnout. Through the lens of JD-R theory (Bakker & Demerouti, 2007; Demerouti et al., 2001), burnout is thought to develop when job demands exceed personal coping resources. The term "demands" is comprehensive and includes any job stressor from workload to lack of autonomy to physical and cognitive exertion. Burnout development through the lens of COR compliments this view by emphasising that individuals will seek to conserve psychological resources when faced with persistent stressors and resource depletion (Hobfoll, 1989). Both theories fit well with the hypothesis that the depersonalisation and ineffectiveness components of burnout are secondary to emotional exhaustion experienced due to overwhelming resource demands (Maslach & Leiter, 2016).

Multiple individual and organisational variables have been identified as predictors of burnout in healthcare workers. Maslach and Leiter (2016) summarise these variables as relating to six higher-order categories. First, workload demands exceeding resources such as excessive caseloads and working hours have been shown to relate to increased symptoms of burnout. Second, variables relating to reduced autonomy and control over one's work are associated with increased burnout. Third, a lack of sufficient rewards for resource depletion through work correlates with burnout. Rewards may be diverse and includes remuneration, prestige, social status, or the satisfaction of personal values. Fourth, qualities of work-related interpersonal variables are linked to burnout including poor peer support, abusive supervision, and conflict. Fifth, workplaces characterised by perceived unfairness tend to be associated with higher levels of burnout such as workplaces with perceived unequal distribution of workload or reward. Sixth, workplaces that either engage individuals in work inconsistent with their personal values, or do not provide enough support for individuals to pursue and fulfill work-related values have also been linked to greater levels of burnout. Recent meta-analyses largely support Maslach and Leiter's (2016) categorisation and extend these findings by identifying demographic and workplace variables associated with burnout such as being of younger age and less experience, workplaces without adequate resources to provide desired treatment, and work-family interference (Abraham et al., 2020; Meredith et al., 2022; West et al., 2018).

Burnout in Psychologists

Burnout research examining psychologists providing psychotherapy demonstrates similar rates of prevalence, predictors, and outcomes to other more extensively studied occupational groups such as physicians and nurses. Systematic

reviews and meta-analyses have both investigated psychologists exclusively and grouped psychologists with workers from other disciplines together under the broad category of "mental health professionals" (e.g., O'Connor et al., 2018; Yang & Hayes, 2020). The prevalence of burnout in these groups is generally consistent between studies and is comparable to other healthcare professional groups at around one in two workers (McCormack et al., 2018; O'Connor et al., 2018; Simionato & Simpson, 2018; Yang & Hayes, 2020). The roughly consistent prevalence across studies indicates that burnout in the context of psychologists providing psychotherapy is as vital to study as any other professional group.

There are unique variables associated with burnout in psychologists providing psychotherapy. Research regarding assumed predictors and outcomes of burnout in psychologists is generally consistent with broader literature on healthcare providers (e.g., Abraham et al., 2020; Jun et al., 2021). However, several additional predictor and outcome variables unique to psychologists and mental health professionals have been identified. Overinvolvement in client issues (McCormack et al., 2018; Rupert et al., 2015) and more difficult/complex clients requiring frequent crisis management or displaying challenging behaviours on one's caseload are all uniquely identified as increasing psychologist burnout (Rupert et al., 2015; Yang & Hayes, 2020). Personality variables such as higher levels of neuroticism and introversion also seem to increase burnout, as does frequent and strong countertransference reactions to clients (Yang & Hayes, 2020).

The effects of burnout display a similar pattern of those consistent with broader literature and some unique to psychologists providing psychotherapy. Yang and Hayes (2020) identify potential effects of burnout on psychologists that are both consistent with broader healthcare provider literature and unique to this occupational

context. Regarding unique effects of burnout, Yang and Hayes (2020) review research suggesting that increased secondary traumatic stress symptoms, poorer client engagement, and poorer capacity to build rapport and a positive therapeutic relationship are potential unique consequences for psychologists experiencing burnout. Therefore, there are common and unique factors that comprise the predictors and outcomes of burnout between psychologists and other healthcare professionals.

The professional impairment associated with burnout in psychologists may be considered problematic through the lens of professional ethics. The Australian Psychological Society's Code of Ethics (2007) standard B.1.2 states that psychologists must ensure "*their emotional, mental, and physical state does not impair their ability to provide a competent psychological service*" (p. 19). Additionally, standard B.1.4 requires psychologists to "*continuously monitor their professional functioning. If they become aware of problems that may impair their ability to provide competent psychological services, they take appropriate measures to address the problem by...*" (p. 19). Considering that burnout can lead to professional impairment (Yang & Hayes, 2020) and psychologists consider practising while under the influence of significant mood disturbance an ethical issue (Williams et al., 2010), the APS ethical principles suggest that psychologists have an ethical imperative to ensure they do not practice while impaired by burnout. The ethical imperative to ensure one is not practicing in an impaired state underscores the importance of addressing burnout in this occupational context for the benefit of psychologists themselves and consumers of psychological services.

Emotional Management and Burnout – A Neglected Construct

Absent from literature exploring burnout in psychologists and mental health professionals is the potential contribution of emotion management. Not measuring emotion management is conspicuous, given that literature commonly accepts that psychologists are likely to experience high emotional demands through exposure to traumatic content and challenging client interactions while being required to maintain high levels of empathy (Rupert et al., 2015). Yang and Hayes (2020) reference countertransference reactions and active coping styles, but emotion management is not adequately subsumed by these factors. Countertransference describes the cognitive, affective, and behavioural tendencies elicited from clinicians during psychotherapy sessions (Hayes et al., 2011). However, these descriptions relate more to the *content* of such reactions as opposed to the in-vivo *regulation* and *management* of these reactions. Broad coping styles too provide a description of tendency for how a psychologist manages stressors related to providing psychotherapy, however, this construct lacks the specificity required to conceptualise in-vivo emotion management. Thus, literature examining burnout in psychologists does not adequately account for the potential contribution of emotion management.

Emotional Labour – An Overview

Emotional labour is a theory of emotion management that provides a conceptual framework for its potential contribution to burnout in psychologists. First proposed by Hochschild (1983) and then extended by Grandey and colleagues (Grandey & Gabriel, 2015; Grandey & Melloy, 2017; Grandey & Sayre, 2019), emotional labour refers to the process of regulating emotions in service of meeting occupational specific guidelines regarding acceptable emotional displays (termed "display rules"). According to Grandey and colleagues, emotional labour occurs

when felt emotion is inconsistent with display rules (termed "emotional dissonance"). An example of this emotional dissonance may be expressing calm emotional displays while internally experiencing frustration. This dissonance is then regulated by either suppression and faking of display-rule consistent emotion (termed "surface acting"), or by engaging in strategies that genuinely realign felt and displayed emotion (termed "deep acting"). Various antecedent, consequent, mediating, and moderating variables have been found in the relationships between emotional labour constructs (Grandey & Gabriel, 2015; Grandey & Melloy, 2017). The relationships between emotional labour and burnout are well established (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). This theory specifically explores the process of how emotion is managed during interactions with service consumers and therefore provides a useful established framework to investigate emotion management's contribution to burnout in psychologists providing psychotherapy.

Take the following example to illustrate these concepts of emotional labour in the context of psychologists providing psychotherapy. Feeling frustrated or angry while providing psychotherapy has been found as a common reaction amongst psychologist trainees (Cartwright et al., 2014). However, expressing this frustration or anger in its naturally occurring form would likely be antithetical to what is considered appropriate emotion to express to a client (i.e., inconsistent with display rules). In this example, a psychologist experiencing anger which they do not express creates an intrastate of emotional dissonance. This dissonant emotion may be regulated through suppression and faking emotional displays considered to be appropriate (surface acting). Alternatively, the psychologist may actively change their perspective on the situation to reduce feelings of anger or may consciously

attend to another stimulus to elicit the emotional displays they wish to express (deep acting).

The potential pernicious effects of emotional labour are well established in previous research. Meta-analyses have confirmed that surface acting and emotional dissonance are strongly linked to emotional exhaustion and burnout (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Interestingly, deep acting strategies tend not to be correlated with emotional exhaustion (Grandey & Gabriel, 2015) but have shown to be negatively and positively correlated with the depersonalising and effectiveness factors of burnout respectively, indicating desirable relationships with these specific factors (Andela et al., 2015). This has led to researchers suggesting that deep acting is preferable only in relation to surface acting (Grandey & Gabriel, 2015; Grandey & Sayre, 2019). Surface and deep acting are also associated with outcomes including job performance, consumer satisfaction, physical ill-health, and job satisfaction, with deep acting generally having favourable relationships with these variables relative to surface acting (Grandey & Sayre, 2019). Although some research has identified conditions under which surface acting does not have negative effects such as under financial reward (e.g., Grandey et al., 2013), almost all emotional labour research associates surface acting with greater risk for negative outcomes. This research highlights the established associations between emotional labour and poorer well-being across occupations.

Emotional labour theory posits two central mechanisms explaining its association with burnout and poorer well-being outcomes. Both mechanisms are thought to relate to the experience of emotional dissonance—the extent to which a person's internal emotional experience is inconsistent with their externally expressed

emotional state—and can be understood within the JD-R and COR frameworks (Grandey & Gabriel, 2015). Grandey and colleagues (Grandey & Gabriel, 2015; Grandey & Sayre, 2019) summarise literature and theory relating to these mechanisms and describe processes of resource loss through regulation and distress due to inauthenticity as key in linking emotional labour to its outcomes. The authors argue that surface and deep acting utilisation incurs a cost to psychological resources through effort expenditure. If this cost does not adequately lead to the gaining of resources (e.g., direct financial rewards, positive customer feedback), then COR theory suggests a net resource loss occurs, thereby depleting psychological resources and in turn causing negative outcomes like burnout to develop. In JD-R theory, effort expended on regulation constitutes another job demand that requires buffering from adequate psychological resources to prevent a state of distress. Through this lens, distress and negative outcomes are likely to be experienced when effort expended on emotion regulation causes an individual's total sum of job demands to outweigh personal coping resources. Therefore, a person with sufficient emotion regulation skills/capacities should not be at risk of strain and negative outcomes. Emotional labour viewed through the lens of both JD-R and COR models emphasises that regulating emotional dissonance is likely to create resource loss or overwhelming job demands that place a person in a state of distress and consequent negative outcomes like burnout when utilised without sufficient resource reward or regulatory capacity.

An alternate mechanism through which emotional labour is thought to contribute to the development of negative outcomes is intrapsychic inauthenticity. Consistent with Hochschild's (1983) original theorising, Grandey and Gabriel (2015) argue that experiencing a state of emotional dissonance alienates one from oneself which is thought to be inherently distressing. Surface acting in this manner prolongs

this dissonance and suppression of self, whereas deep acting enables one to achieve

emotional congruence but requires the adoption of a contrived self. Both strategies

are likely to maintain the alienation of self but with deep acting doing this at less cost

relative to surface acting. The authors argue that research showing that greater

identification with occupational role reduces the costs of emotional labour supports

this theoretical assertion as emotional labour in this instance is in service of adopting

a self that is consistent with one's values and desires. With theory suggesting that

emotional dissonance and subsequent regulation are key mechanisms in the

relationship between emotional labour and its outcomes, it is curious that the

dominant psychometric measures of emotional labour (e.g., Brotheridge & Lee,

2003; Zapf et al., 1999) do not adequately distinguish between emotional dissonance

and surface acting and simply infer its presence. What seems clear, however, is that

prior theoretical and empirical evidence suggests that the intrapsychic state of

inauthenticity that is experienced during emotional labour creates distress which in

turn leads to the development of negative outcomes such as burnout.

It is possible that emotional labour may lead to positive outcomes in specific

contexts despite previous literature generally linking the construct with negative

outcomes. Deep acting has been linked to improved mood and job satisfaction

despite its generally non-significant relationship with emotional exhaustion (Grandey

et al., 2013; Grandey & Gabriel, 2015). Deep acting has also been correlated with the

improved self-efficacy component to burnout (Andela et al., 2015). Direct financial

reward has been found to weaken surface acting's relationship with negative mood

and poorer job satisfaction (Grandey et al., 2013). Genuine expression of emotion

while engaged in emotional labour has also been argued to potentially lead to

beneficial outcomes such as service quality (Humphrey et al., 2015). Engaging in

emotional labour has also been argued to assist in transitioning between work and personal life (Alam et al., 2019). However, these propositions by Humphrey and colleagues (2015) and Alam and colleagues (2019) have not yet received empirical support. Therefore, it is possible that psychologists may experience improved mood, job satisfaction and the self-efficacy component to burnout and receiving financial compensation could reduce the impact of surface acting.

There is conjecture and ongoing debate regarding the conceptualisation and measurement of emotional labour. Distinctly different factor structures are found in various measures of emotional labour that measure constructs with different conceptual boundaries. For example, the Emotional Labor Scale (ELS; Brotheridge & Lee, 2003) measures surface and deep acting as unidimensional constructs, whereas other measures conceptualise factors as bidimensional (Alabak et al., 2020; Glomb & Tews, 2004; Shaubroeck & Jones, 2000). Additionally, although the Frankfurt Emotion Work Scales (FEWS; Zapf et al., 1999) purports to measure the construct of emotional dissonance, only Andela and colleagues' (2015) measure does not confound the measurement of emotional dissonance with surface acting.[1] These measurement inconsistencies negatively impact the capacity for researchers to adequately parse mechanisms of action and relationships between specific emotional labour constructs and outcomes. Furthermore, no measures of emotional labour have been validated in the context of psychologists providing psychotherapy. Therefore, there is a need to extend literature regarding the measurement of emotional labour and to ensure that such measures are valid and appropriate for unique occupational contexts such as psychologists providing psychotherapy.

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[1]Andela and colleagues (2015) did not provide a name for this measure in this or subsequent papers (e.g., Andela et al., 2018).

Emotional Labour and Related Constructs

Emotional labour has conceptual overlap with other variables such as countertransference, emotion regulation, and emotional demands. However, there are distinct boundary differences that distinguish emotional labour as unique. Although there are varying definitions of countertransference (see Hayes et al., 2011, for a review), these definitions describe the cognitive and affective experiences of psychologists during consultation with a client. Countertransference may therefore be one aspect of the experience of emotional labour for psychologists, with the regulation and management of countertransference being accounted for by the regulatory components of the emotional labour construct. Countertransference management research (e.g., Hayes et al., 2018; Pérez-Rojas et al., 2017) also does not adequately conceptualise the process of regulating such reactions as this literature conceptualises such management through the lens of static trait-like capacities and not specific acute regulatory processes. Thus, countertransference conceptualises the *content* of emotions experienced consequent to client-work, countertransference management conceptualises *influences* and *capacities to respond functionally* to emotions specific to countertransference, but emotional labour conceptualises the *process* of emotion management and sources of emotional dissonance that transcend those originating in the client-therapist dynamic. Emotional labour also comprises broader emotional experiences unrelated to client sessions occurring outside of this context.

The importance of this distinction is evident in countertransference management intervention literature. Psychologists clearly experience countertransference reactions (Cartwright et al., 2014) that are associated with negative outcomes (Hayes et al., 2011). A promising and well-designed model of

managing countertransference reactions has been developed (Cartwright et al., 2018, 2021). However, as conceptualised by emotional labour, it is important for such interventions to consider how recommended regulatory processes to manage countertransference impact upon an individual's well-being. Awareness of the conceptual similarities and differences between countertransference and emotional labour will enhance management interventions to promote psychologist well-being by encouraging regulating emotional components to such reactions in ways that do not lead to negative outcomes such as burnout.

The concepts of emotional labour and emotion regulation are distinguished by function and the relationship to self/identity. Emotion regulation refers to efforts made to modulate the experience and expression of emotion (Gross, 1998; Gross et al., 2011; Gross, 2013) through antecedent and response-focused strategies. Grandey (2000) first applied the emotional labour model to Gross' (1998) work and found conceptual overlap between deep acting strategies and antecedent-focused strategies, as well as between surface acting and response-focused strategies. However, although emotion regulation is a component of emotional labour, the entire construct has important and practically significant differences. As argued by Grandey and Sayre (2019) emotional labour differs from emotion regulation by examining the commodification of emotion regulation in the context of meeting specific occupationally determined display rules. There are also empirical differences between emotion regulation strategies and emotional labour strategies. In emotion regulation literature, cognitive change and certain aspects of attentional deployment strategies tend to be associated with favourable outcomes (e.g., Webb et al., 2012). However, the corresponding strategies in emotional labour literature (deep acting) are consistently found to be only beneficial relative to surface acting strategies and

not inherently beneficial (Grandey & Sayre, 2019). This difference distinguishes emotional labour from emotion regulation by incorporating regulatory function and context into its theory and empirical measurement. Furthermore, emotional labour theory conceptualises the role of self and identity in determining the impact of emotion regulation processes via the concept of emotional dissonance (Hochschild, 1983; Grandey & Gabriel, 2015). Therefore, while emotion regulation concepts are a component of emotional labour theory, there are discrete functional, contextual, and conceptual differences worthy of distinction.

Emotional labour is also distinct from the concept of emotional demands, despite significant overlap and frequent conflation in the literature. Earlier research frequently used emotional labour, emotion work, and emotional demands as synonyms (e.g., Heuven et al., 2006; Xanthopoulou et al., 2013; Zapf et al., 2021), and emotional labour has also been theorised to constitute emotional demands (Hochschild, 1983). However, by examining how emotional demands has been operationalised, distinctions from emotional labour are evident. Measures of emotional demands (Bakker et al., 2004; Xanthopoulou et al., 2013) clearly measure exposure to intense emotional situations. This is evidenced by such items from Xanthopolou and colleagues' (2013) as "*is your work emotionally demanding?*", "*in your work, are you confronted with things that personally touch you?*", or "*do you face emotionally charged situations in your work?*". Although emotional labour as it is currently conceptualised (Grandey & Melloy, 2017) is likely to be positively correlated with exposure to such emotional demands, *exposure* to such situations and *regulating effects* of such exposures are separate constructs. This distinction illuminates the conceptual boundaries of emotional demands and emotional labour. Emotional demands can therefore be viewed as a higher-order construct that

subsumes emotional labour within it, as well as other constructs such as compassion fatigue, vicarious trauma, and even countertransference.

Emotional Labour in Psychologists Providing Psychotherapy

Psychologists providing psychotherapy constitute a unique professional context for emotional labour research requiring specific study. Quantitative emotional labour research has been conducted on samples of health professionals of which psychologists providing psychotherapy comprised a portion of the sample (e.g., Xanthopoulou et al., 2018). Other studies have examined emotional labour in adjacent occupational roles such as school psychologists (e.g., Weaver & Allen, 2017; Weaver et al., 2019) and sport psychologists (Hings et al., 2018a; Hings et al., 2018b). However, emotional labour research investigating psychologists providing psychotherapy is specifically required because the very nature, associated variables, and consequences of emotional labour are likely to be unique in this occupational role. Display rules for psychologists governing emotion expression appear to be contextual and varied (Van Der Merwe & Wetherell, 2020). Other factors such as qualities of emotional labour, motivations, goals, and relationship between actors is also likely to differ from other commonly studied occupations. For example, Hochschild's (1983) original work described the emotional labour of flight attendants whose emotional labour laden interactions with customers occur over short periods of time with people of limited closeness. Such interactions are markedly different to psychologists engaged in emotional labour over extended periods of time in the context of therapeutic relationships with clients characterised by greater closeness over several sessions than relationships between flight attendant and passenger. Contextual factors such as these affect outcomes associated with emotional labour (Grandey & Gabriel, 2015; Grandey & Melloy, 2017). Therefore,

research findings regarding the outcomes and management of emotional labour in other professions cannot be assumed to generalise to psychologists providing psychotherapy.

It is worth noting how emotional labour may operate specifically within the occupation of psychologists providing psychotherapy. Cartwright and colleagues (2018) developed an intervention to assist clinical psychology trainees to manage reactions to clients during sessions that encourages them to adopt a calm and empathic demeanour (i.e., display rules). However, clinicians commonly experience reactions to clients that are inconsistent with this outward display (e.g., Cartwright et al., 2014). Examples of such inconsistent internal reactions observed by Cartwright and colleagues (2014) include feeling overwhelmed, helpless, and angry. Through the lens of traditional emotional labour theory, a clinician may regulate the emotional dissonance of such reactions by suppressing the felt emotion and feigning the desired emotion (surface acting), or through engaging with strategies that actively change the felt emotion to be realigned with the emotion being displayed (deep acting). This may be true of emotional dissonance in the form of distinctly different affects (e.g., feeling angry but expressing calm), but would also be true of dissonance that is congruent in content but not intensity (e.g., such as expressing sadness to a client's disclosure of grief but not expressing the authentic intensity of this sadness to remain emotionally contained). According to emotional labour theory and supporting empirical data, surface acting in these cases would likely result in more negative outcomes compared to deep acting.

Managing emotional labour may assist psychologists to improve their well-being and may improve outcomes with clients. The existing emotional labour literature in various professional groups suggests that psychologists who use surface

acting strategies are more likely to experience negative outcomes such as burnout and physical ill-health (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Ill-managed emotional reactions to in-session events are also likely to contribute to poorer psychotherapy outcomes (Hayes et al., 2011). Emotional labour literature also suggests that job performance and consumer satisfaction is greater when deep acting is used to manage emotional labour (Grandey & Sayre, 2019). Additionally, authentic displays of emotion tend to be associated with positive well-being (Grandey et al., 2012; Hings et al., 2020), performance (Gabriel et al., 2015; Huppertz et al., 2020), and developing stronger therapeutic relationships which is viewed as a core component of psychotherapy outcome (Lamber & Barley, 2001; Norcross & Lambert, 2018). This research suggests emotion management and expression within psychotherapy may contribute to both personal well-being for psychologists and may influence therapeutic outcomes for clients. However, literature supporting emotional labour's association with service recipient outcomes has only been explored in occupational contexts significantly different to psychologists providing psychotherapy. Therefore, the paucity of research exploring this topic in psychologists suggests the need to develop such literature.

A psychologist's psychotherapeutic approach may influence perceived display rules governing the process of emotional labour and how it is used in psychological interventions. Various models of psychotherapy differ in the emphasis placed on the interpersonal exchange of emotion between psychologist and client to achieve therapeutic change. For example, psychologists practising primarily from a Gestalt orientation may see the interpersonal experiential exchange between psychologist and client as a fundamental pillar of the intervention (Mann, 2010).

Alternatively, psychologists oriented towards traditional cognitive behavioural therapies may be principally focused on developing alternative thought and behaviour patterns with clients (Williams & Chellingsworth, 2010). However, reflecting on emotional reactions to clients and how these are expressed/acted on has long been a part of common psychotherapy models from cognitive behaviour therapy (Beck, 2021), and psychodynamic psychotherapy (Cabaniss et al., 2011), to the more recent third-wave cognitive behaviour therapy models of schema therapy (Young et al., 2003), acceptance and commitment therapy (ACT; Walser et al., 2019), compassion-focused therapy (Gilbert, 2022), and dialectical behaviour therapy (Heard & Swales, 2016). Although these models may differ in their emphasis and recommendations on how to use therapist emotion and expression for formulation or intervention, it seems that the management and expression of therapist emotion is integral to all forms of psychotherapy.

Emotional Labour and Burnout Interventions – Room for Improvement

Improved interventions for both emotional labour and burnout are required especially in reference to psychologists providing psychotherapy. Over four decades, there has been extensive research on the topic of emotional labour, its relationship to negative outcomes, and potential moderating variables (Grandey & Gabriel, 2015; Grandey & Melloy, 2017; Grandey & Sayre, 2019; Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). However, there is a paucity of studies examining interventions designed to assist people from any occupation to manage emotional labour effectively. Currently, only three published intervention studies exist in the emotional labour literature (Edelman & van Knippenberg, 2017; Hülsheger et al., 2015; Weaver et al., 2019). The results of these studies are promising as they demonstrate that simple educational interventions and

recommendations to deep act can have measurable positive impacts on emotional labour's relationship with burnout. The paucity of intervention studies means that there are no evidence-based recommendations for how an individual may manage emotional labour better aside from encouraging them to adopt deep acting strategies (as per Grandey & Sayre, 2019, and Weaver et al., 2019). Similarly, although multiple moderating variables are known to affect emotional labour in the organisational context (see Grandey & Melloy, 2017, for a review), no evidence-based recommendations can be made regarding *interventions* workplaces or individuals may adopt to facilitate improved emotional labour management. The lack of capacity to make evidence-based recommendations about managing emotional labour underscores the importance of research looking to identifying factors that can form the basis of such interventions.

Exploration and identification of factors that may assist psychologists to manage emotional labour more effectively is needed. Current recommendations for managing emotional responses during sessions with clients are limited to building insight and trait-based capacities (such as capabilities to maintain an appropriate sense of self and regulate anxiety) from the perspective of countertransference (e.g., Cartwright et al., 2021; Hayes et al., 2018; Pérez-Rojas et al., 2017), or responses consequent to undesired emotional states (Van Der Merwe & Wetherell, 2020). These recommendations are limited by their narrow focus on countertransference and responses after emotional labour elicitation. Consequently, acutely controllable individual factors that positively influence the management of emotional labour and occur before, during, and after experiences of emotional labour are not known. Identifying such factors will inform recommendations for how psychologists may manage emotional labour more effectively.

Interventions designed to reduce burnout in psychologists providing psychotherapy similarly require improvement. Dreison and colleagues (2018) performed a meta-analysis of 27 studies across 35 years that reported results of interventions aimed at reducing burnout in mental health professionals. The authors found that interventions had an overall positive impact, but the effect size of these interventions were small and significantly dwarfed by effect sizes for interventions aimed at reducing other well-being outcomes. Greater effect sizes for individual-based interventions were found to reduce emotional exhaustion specifically, perhaps hinting that such interventions may be more impactful for clinicians. Alternatively, this favourable comparison for individual interventions may just be a consequence of the studied organisational interventions being particularly poor. Individualised interventions with positive effects on burnout generally focused on stress management (Brady et al., 2012; Hill et al., 2010; Mehr et al., 1994), or a combination of stress management and other skills training (Salyers et al., 2011; Rollins et al., 2016). Recent studies have demonstrated greater promise in reducing burnout (e.g., Eriksson et al., 2018). However, none of these studies used interventions that considered or targeted emotional labour. Therefore, the effectiveness of burnout interventions for psychologists can be improved and considering emotional labour's potential impact on burnout may assist this aim.

Thesis Overview

Rationale

Reducing rates of burnout and encouraging the utilisation of effective emotional labour strategies in psychologists providing psychotherapy will have multiple benefits to those in the profession and the wider community. Not only is burnout associated with multiple aspects of personal ill-health, but it is also

associated with poorer job performance and consumer satisfaction (Abraham et al., 2020; West et al., 2018; Yang & Hayes, 2020). The high burnout rates observed in psychologists (O'Connor et al., 2018; Simionato & Simpson, 2018) has significant negative implications for public health outcomes. Approximately one in two Australians will experience a mental health concern in their lifetime and one in five are currently affected (Australian Bureau of Statistics, 2022). Such mental ill-heath prevents people from living fulfilling lives, significantly burdens the health system, and reduces productivity (Productivity Commission, 2020). Ensuring that psychologists are not experiencing burnout will assist psychological treatment seeking members of the public to access treatment from higher performing clinicians. Therefore, accessing sufficiently resourced clinicians adept at managing emotional labour will assist the public to obtain effective treatment and will contribute to reducing the cost that mental ill-health has on Australian society.

Psychologist burnout literature does not adequately conceptualise potential contributing factors. If the concerning rates of approximately one in two psychologists experiencing significant burnout (O'Connor et al., 2018; Simionato & Simpson, 2018) are to be addressed, it is necessary to conceptualise and account for all major contributing factors. The current state of burnout intervention literature in this group indicates that strategies have much room for improvement (Dreison et al., 2018). The potential contribution of emotional labour to burnout in this professional group has been neglected in research literature, despite its long-established relationship with burnout in adjacent populations. The aim of this thesis is to extend the psychologist burnout and emotional labour literatures by examining the potential impacts of emotional labour in this professional group in the hope that this

knowledge will translate to more successful and comprehensive interventions to improve the well-being of psychologists providing psychotherapy.

Multiple aspects of emotional labour in the context of psychologists providing psychotherapy require exploration and understanding before they can inform applied practice. Research specifically examining emotional labour in psychologists providing psychotherapy is extremely limited. Therefore, understanding how this construct operates within this occupation and its potential effects requires exploration. Similarly, strategies to manage emotional labour such that it does not increase burnout need to be identified in this occupation. Identifying and testing strategies within an individual's locus of control are especially important as these strategies may have the most potential to reduce the emotional exhaustion component of burnout (Dreison et al., 2018). An emotional labour psychometric tool with validity in this population is required to empirically test relationships between potential variables. It is also necessary for this tool to adequately discriminate between the various emotional labour constructs to enable sophisticated analysis of what factors are related to burnout, and what factors are not. Lastly, before any interventions may be developed to address emotional labour's potential contribution to burnout, theorised coping strategies need to obtain preliminary empirical support.

In this thesis I sought to gain knowledge in the key literature gaps present in the emotional labour and burnout literature as related to psychologists providing psychotherapy. Previous research has not explored the potential holistic impacts of emotional labour in psychologists providing psychotherapy. No research has identified individually based strategies in this occupational group that may assist in managing emotional labour effectively. No psychometric tool has been validated in psychologists providing psychotherapy and no quantitative studies have sought to

explore whether specific strategies may weaken emotional labour's relationship with burnout in this population. This thesis adopts a mixed-method research design attempting to answer four specific questions to consequently answer one broad overarching research question. Each specific research question receives a dedicated individual chapter in this thesis.

Aims and Objectives

The overarching aim of this thesis was to investigate emotional labour in the context of psychologists providing psychotherapy and its potential contributing role to burnout. The broad overarching research question was:

- How can psychologists providing psychotherapy manage emotional labour effectively such that it does not negatively impact well-being?

The specific research questions that provided the basis of each chapter of this thesis to inform the higher-order research question are as follows:

- What are the perceived effects of emotional labour in psychologists providing individual psychotherapy?

- How do psychologists providing psychotherapy manage emotional labour?

- How should emotional labour be measured in psychologists providing psychotherapy and which components are most linked to burnout?

- What individual-based factors may assist psychologists providing psychotherapy reduce emotional labour's impact on burnout?

Research Significance

Through this thesis I aimed to make substantial contributions to literature regarding emotional labour and burnout and has implications for countertransference literature. The effects of emotional labour on psychologists providing psychotherapy have only received attention in one previous study (Van Der Merwe, 2019) that

narrowly focused on effects to self-concept and professional identity. Furthermore, this paper only examined strategies to manage emotional labour after its elicitation and did not examine potential a-priori contributors. Therefore, I sought to extend previous emotional labour literature by qualitatively exploring holistic factors comprising emotional labour's potential consequences and strategies for its effective management. Qualitative investigation of these questions aimed to achieve greater credibility in findings as they would be extracted from those with lived experience. I also sought to extend emotional labour research by validating a psychometric tool that would account for previous confounding measurement concerns by enabling greater clarity and nuanced analysis of the relationships between emotional labour variables and their outcomes. Last, I aimed to contribute new and important knowledge to the emotional labour literature by identifying individually trainable variables that may positively affect emotional labour's relationship with burnout.

I aimed to extend the psychologist burnout literature through this thesis. Previous burnout literature in this sample has neglected to adequately conceptualise the contribution of emotion management strategies. Linking both emotional labour and burnout in this professional group would provide new knowledge and guide future research to account for this potential relationship. As emotional labour is strongly associated with burnout, finding means to manage this construct effectively would provide future research with preliminary evidence for potential interventions to improve psychologist well-being.

The findings of my thesis may have implications for literature concerning countertransference and its management. Emotional labour encompasses the regulatory component of countertransference management. Despite widespread acceptance of the existence of countertransference and its negative effects on

treatment (e.g., Hayes et al., 2011), interventions designed to assist psychologists to manage these reactions have only been developed recently (Cartwright et al., 2018, 2021). This work emphasises the need to contain potentially negative reactions due to effects on therapeutic process and outcome. However, from an emotional labour perspective, *how* these reactions are managed will impact significantly on the psychologist's individual well-being, not only therapeutic process and outcome. For example, if moving into "adult mode" (as suggested by Cartwright and colleagues' 2018 intervention) is achieved through means that create or prolong emotional dissonance, the therapist is likely to be exposed to personal ill-health risks associated with emotional labour. Therefore, models of managing countertransference (e.g., Cartwright et al., 2018, 2021) will be enhanced by considering this thesis' potential findings regarding the relevance and effects of emotional labour in this professional group, as well as potential methods of effective emotional labour management.

Thesis Structure

I have presented this thesis in the format of a "hybrid" thesis, combining two published journal articles and four traditional typescript chapters. Chapter One provides an introduction and general literature review introducing the topic and its relevance to future research. Chapters Two through to Chapter Five contain four empirical studies that relate to the aims of the project and are written for publication. Analyses for Chapters Two and Three were drawn from the same data set but examined separate research questions. The findings sections of both are written slightly differently due to accommodating reviewer feedback as these chapters have been published in peer-reviewed journals and underwent multiple rounds of revision. Likewise, analyses from Chapters Four and Five were drawn from the same data set but different statistical analyses were used to answer distinct research questions.

Consequently, the procedures for each pair of chapters are similar. A general discussion of the thesis findings, implications, limitations, and directions for future research is presented in Chapter Six. A master reference list and relevant appendices are found after Chapter Six. For the two chapters that are published journal articles, the numbering of tables and figures as well as the spelling, have been modified to provide consistent formatting and flow to the thesis.

Ethical Considerations

Ethical approval was obtained for all studies as they involved collecting data from human participants. The project obtained initial approval from the Curtin University Human Research Ethics Committee (HREC; HRE2018-0297; Appendix A). An amendment to the project (Appendix B) was submitted prior to collecting quantitative data as the results of the first studies suggested the need to include measures of variables that were initially unforeseen and not included in the initial ethics application. Subsequent ethical approval was obtained for these changes from the HREC. The National Statement on Ethical Conduct in Human Research (2018) was also consulted during the design stages of this project. Detailed information (Appendix C) and consent (Appendix D) forms were provided to all participants in hard copy form for the qualitative studies. A detailed information/consent sheet (Appendix E) was provided to all participants who participated in the quantitative studies that clearly stated that consent to use data was assumed upon submission of their data. Any data that was not completely submitted was deleted during the analysis stage. The information sheets clearly outlined the inclusion and exclusion criteria, the purpose of the respective study, and potential risks and benefits of participating. It was clearly stated that participants had the right to withdraw consent to use their data at any time point, however, that quantitative data would not be

identifiable after submission so their data would not be able to be destroyed after

submission. All data was stored on the university research drive where it will be

stored for a minimum of seven years, as per university policy. The hard copy consent

and demographics forms used in the qualitative studies are stored in a locked draw in

a supervision team member's office.

Chapter Two – Overview

In Chapter Two, I report the findings of a qualitative reflexive thematic analysis of interview data attempting to answer the research question *what are the perceived effects of emotional labour in psychologists providing individual psychotherapy?* This chapter is published in *Psychotherapy*, an international peer-reviewed journal that publishes high-quality research regarding the practice of psychotherapy and is in the highest journal quartile. Transcripts of semi-structured interviews of 24 psychologists were used for analysis. Due to the lack of existing research on this topic and population, exploratory methods were employed to identify potential holistic effects of emotional labour from the perspective of the population of interest. Reflexive thematic analysis revealed three broad key themes including *personal growth*, *feeling depleted and exhausted*, and *craving space free from people and work-related emotion*. Although all themes provide novel findings, the *personal growth* and *craving space* themes were considered particularly novel for the emotional labour literature. This chapter concludes by acknowledging the unexpected reported positive effects of emotional labour (personal growth) by participants, but also links the negative reported effects to constructs of burnout. These findings are suggested to validate the concept that emotional labour contributes to psychologist well-being and is worthy of further attention in this occupational group. The reference for the published version of this chapter is below and the publishing agreement is found in the appendices (Appendix F).

Clarke, J. J., Rees, C. S., Breen, L. J., & Heritage, B. (2021). The perceived effects of emotional labor in psychologists providing individual psychotherapy. *Psychotherapy, 58*(3), 414-424. https://dx.doi.org/10.1037/pst0000351

Chapter Two – The Perceived Effects of Emotional Labour in Psychologists

Providing Individual Psychotherapy

Research suggests that the occupational group of psychologists are at risk of burnout and distress. Burnout is a syndrome comprised of feeling depleted and exhausted (emotional exhaustion), cynicism and cognitive distancing (depersonalisation), and reduced self-efficacy and achievement (personal accomplishment) (Maslach & Jackson, 1981; Maslach et al., 2001). A recent meta-analysis of burnout in mental health professionals found that across 33 studies, 40% of participants endorsed high levels of emotional exhaustion, 22% endorsed high levels of depersonalisation, and 19% endorsed low levels of personal accomplishment (O'Connor et al., 2018). These findings are consistent with a prior review of 40 published articles on burnout in psychotherapists that found moderate to high levels of burnout in more than half of the participants (Simionato & Simpson, 2017). Additionally, concerning levels of negative outcomes have been observed in postgraduate psychology trainees (Humphreys et al., 2017; Kuyken et al., 2000). These negative outcomes indicate that training and practicing in the psychology profession places a person at risk of experiencing burnout and distress.

There appears to be a gap in the burnout literature relating to psychotherapists. Several meta-analyses, reviews, and explorations of burnout in mental health professionals and psychologists have been conducted to identify important contributing variables (e.g., Hammond et al., 2018; Kaeding et al., 2017; O'Connor et al., 2018; Rupert et al., 2015; Simionato & Simpson, 2017; Simpson et al., 2019). However, none of these studies have measured the potential contribution of emotional labour in the development of burnout. Some articles obliquely reference emotional labour such as identifying the role of emotional demands (Rupert et al.,

2015; Scanlan & Still, 2019) or transference (Hammond et al., 2018), but it has not been studied directly. As emotional labour has consistently been associated with burnout in other professional groups (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012), further consideration of how this construct applies to the development of burnout in psychotherapists is warranted. Therefore, studying emotional labour in the context of mental health professionals such as psychologists is logical for future research.

Emotional Labour Defined

Emotional labour describes the process by which workers regulate and display emotion to achieve desired outcomes with their service consumers (Hochschild, 1983). Recently, emotional labour has been conceptualised as a process of managing emotional responses (emotion regulation) to ensure visible emotional displays (emotion performance) are consistent with perceived rules regarding acceptable and unacceptable emotional displays (display rules) (Grandey, 2000; Grandey & Gabriel, 2015; Grandey & Melloy, 2017). According to these conceptualisations, two broad forms of emotion regulation are used when felt emotions are incongruent with display rules (emotional dissonance). Suppressing dissonant emotions while feigning emotions consistent with display rules is termed surface acting, whereas modifying felt emotion to realign with display rules genuinely is termed deep acting (Grandey & Gabriel, 2015). These are active regulatory processes that enable service providers to meet the emotional requirements of their role (Grandey & Gabriel, 2015). The specific focus on present moment processing of emotional reactions between the service provider and consumer distinguishes emotional labour from other constructs such as compassion fatigue (Hansen et al., 2018) and burnout (Maslach et al., 2001). Indeed, emotional

labour is a process of emotion management, whereas burnout and compassion fatigue are specific psychological states.

A psychotherapist's therapeutic approach may influence display rules governing the process of emotional labour. Various models of psychotherapy differ in the emphasis placed on the interpersonal exchange of emotion between psychotherapist and client. For example, psychotherapists practising primarily from a Gestalt orientation may see the interpersonal experiential exchange between psychotherapist and client as a fundamental pillar of the intervention (Mann, 2010). Alternatively, traditional cognitive-behavioural psychotherapists may be principally focused on thought and behaviour patterns with clients (Williams & Chellingsworth, 2010). Although this idea oversimplifies these approaches, it highlights the variance in emotional display rules that may exist between psychotherapists.

To illustrate emotional labour concepts in the context of providing psychotherapy, take, for example, a psychotherapist experiencing anger with a client. Displaying the naturally felt anger towards the client may be viewed as inappropriate (display rules) and the psychotherapist may instead display calm (emotion performance), resulting in a discrepancy between what the psychotherapist is feeling and displaying (emotional dissonance). From an emotional labour perspective, the psychotherapist could regulate this dissonance via suppressing the emotion of anger and feigning calm (surface acting), or by downregulating the emotion of anger to be consistent with calm (deep acting). Alternatively, the psychotherapist may choose to express the emotion of anger. However, the latter still involves the modification of raw emotion to ensure that such emotion is expressed appropriately (i.e., meeting display rules). This example reflects the nuanced process of emotional labour in the context of providing psychotherapy.

Emotional Labour Outcomes

Emotional labour has been associated with various intrapsychic and interpersonal variables. Although some literature has found potential beneficial effects of emotional labour (Alam et al., 2019; Grandey et al., 2013; Humphrey et al., 2015) most research has associated emotional labour with negative personal outcomes such as burnout (e.g., Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012), interpersonal outcomes such as work-family conflict (Wagner et al., 2014; Yanchus et al., 2010), and poorer ratings of relationship satisfaction and family quality (Bakker et al., 2019; Sanz-Vergel et al., 2012). Additionally, theoretical (Miller & Sprang, 2017) and early correlational evidence suggests that surface acting may be associated with compassion fatigue in hospice nurses (Barnett et al., 2019). This research has been performed on broad occupational fields such as customer service, education, industry, and healthcare, with few studies collecting detailed data regarding specific occupational roles. Therefore, previous research generally links emotional labour to poorer well-being but has limited occupational specificity.

Emotional dissonance is one mechanism by which emotional labour is thought to be associated with burnout (Grandey & Gabriel, 2015; Grandey & Melloy, 2017). Experiencing dissonance between felt and displayed emotions has long been considered harmful for an individual due to the psychological inauthenticity this creates (Hochschild, 1983). Research supports this assertion as emotional dissonance, and surface acting (which prolongs emotional dissonance), are consistently linked to adverse well-being outcomes such as burnout (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Further evidence for this mechanism comes from research supporting relationships

between personal and organisational authenticity with positive well-being and the amelioration of negative well-being outcomes (Grandey et al., 2012; Van den Bosch, & Taris, 2014; Van den Bosch & Taris, 2018). This research strongly suggests that emotional labour leads to burnout through a psychological state of inauthentic emotional expression.

Emotional labour is also thought to lead to burnout by depleting psychological resources (Brotheridge & Lee, 2002). Building upon conservation of resources theory (Hobfoll, 1989), Brotheridge and Lee (2002) found evidence suggesting that emotional labour contributes to burnout through a net depletion of resources occurring when emotion regulation strategies are used without reward or replenishment. From this perspective, Grandey and Gabriel (2015) argue that surface acting is unlikely to result in sufficient rewards to offset its depletory effect. This literature suggests that burnout can be developed consequent to a net loss of resources when emotion regulation does not facilitate recuperation or recovery.

A Need for Further Research

Exploratory research on the nature of emotional labour in psychologists providing psychotherapy is needed as this occupational group is under-researched. Although there has been emotional labour research conducted on samples of health professionals, of which psychologists comprise a portion (e.g., Xanthopoulou et al., 2018), few studies have focused on the specific nature and outcomes of emotional labour in psychologists. Additionally, no studies have explored emotional labour in psychologists via qualitative methods. This is a concern because previous research findings regarding emotional labour cannot be assumed to be transferable to psychologists. Relative to previously studied occupations, psychologists providing psychotherapy engage in more prolonged interactions and can have a greater degree

of closeness with their clients. Awareness and management of emotional reactions to clients is considered to be an essential factor in various psychotherapy models (e.g., Gabbard, 2009; Mooren & Stöfsel, 2015; Moorey, 2014) and there is some evidence to suggest that emotional intelligence is improved by completing training in counselling (Pearson & Weinberg, 2017). A recent model of emotional labour (Grandey & Melloy, 2017) has identified all these variables as potentially contributing to different outcomes. Therefore, it cannot be assumed that previous emotional labour research is directly applicable to psychologists providing psychotherapy.

Quantitative and cross-sectional research methods have been utilised by the bulk of published peer-reviewed research on this topic and have associated emotional labour with outcomes such as work-family conflict and burnout (Rodriguez & Carlotto, 2017; Weaver & Allen, 2017; Yanchus et al., 2010). Although these associations between these variables are consistent with other occupations (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012; Wagner et al., 2014), the research methods employed in these studies have not allowed for a robust exploration of the nature of emotional labour in this population. For example, it may be possible that emotional labour in psychologists is associated with positive outcomes such as those argued by Alam and colleagues (2019). Additionally, as well-being may vary across psychologist career stages (Dorociak et al., 2017), the effects of emotional labour may also vary across the professional lifespan. Additionally, the possibly different nature of emotional labour in this occupational group may lead to associations with variables that are unique to the profession. Therefore, there is a rationale for exploratory research methods examining the effects of emotional labour for psychologists.

Current Study

This study seeks to extend current literature by addressing gaps in burnout and emotional labour literature. The current study is the first to employ qualitative methods to primarily explore the research question: *What are the perceived effects of emotional labour in psychologists providing individual psychotherapy?* Additionally, as career experience may influence psychologist well-being (Dorociak et al., 2017), a secondary research question was explored: *Are there differences in the perceived consequences of emotional labour between psychologists of varying experience levels?*

Method

Research Design Overview

Individual semi-structured interviews of participants were collected and subjected to thematic analysis (Braun & Clarke, 2013) to answer the primary research question. The secondary research question was analysed by observing the frequency of identified themes in each participant group. The research team adopted a constructionist epistemology for the study and therefore viewed reality and truth as created by the complex dynamic interaction between researcher, participant, and context (Crotty, 1998). This enabled findings to be based on the interactions between the lived experiences of participants and the primary researcher. Participant interviews were recorded and transcribed with these transcriptions becoming the primary data-source. A qualitative research design was considered appropriate for the current study due to the exploratory nature of the inquiry. Thematic analysis was considered the most appropriate methodology because the research question was specifically focused on examining general responses and perspectives from the participants. Such a focus is a strength of thematic analysis and fits well with the

recommendations of its use in research (Braun & Clarke, 2013). The Consolidated

Criteria for Reported Qualitative Research (COREQ; Tong et al., 2007) and Journal

Article Reporting Standards for Qualitative Research (JARS-Qual; Levitt et al.,

2018) guidelines were consulted before and during the research design, data

collection, analysis, and reporting stages of the study to ensure best practice was

observed. The section headings that follow are those recommended by the JARS-

Qual reporting standards as best practice in reporting primary qualitative research

(Levitt et al., 2018).

Data Sources

Research Team Description

The research team comprised one post-graduate student working part-time as

a clinical psychologist (primary researcher) and three experienced Psychology

faculty members across two universities in Western Australia. Three members of the

research team are registered psychologists and all members have completed post-

graduate Psychology training (two in Clinical Psychology, one each in Community

Psychology and Organisational Psychology). Two members of the research team

have experience in qualitative research, and these members trained the others in

qualitative research methods when required. The primary researcher worked part-

time as a clinical psychologist providing psychotherapy throughout the research

process and as such, had deep insight into the phenomena of interest in the studied

population. Another member of the research team has extensive experience in

providing psychotherapy to clients but was not practising during the research

process. The other two team members do not have clinical experience.

The prior understandings of the primary researcher primarily enhanced the

quality of data collection and analysis. This prior understanding and lived experience

facilitated empathy with participants and insight into the investigated variables. Greater insight into emotional labour enhanced the interview process as the interviewer was better able to probe participants to reflect on underlying emotional labour processes without leading the consequences that participants identified. This insight also enabled an interpretive lens from the perspective of emotional labour theory to be applied to the interpretation of data and analysis.

The diversity of research team perspectives increased the integrity of the research process. Team members other than the primary investigator had significantly less experience with emotional labour theory. However, these team members have substantial experience in completing studies of related constructs such as burnout and resilience, including studies of such constructs in psychologists. Additionally, background and experience differences between team members were acknowledged at each step of the research process and how these perspectives may influence expectations was considered. For example, one research team member expected to find significant differences between early-career and experienced therapists in the content and intensity of emotional labour effects. This diversity in the research team enabled a rigorous approach to reflexivity in interpreting the participants' experiences.

Participants

Twenty-four participants were recruited. These participant groups were early-career psychologists (three years or less experience, $n = 9$), mid-career psychologists (between four and nine years' experience, $n = 7$) and experienced psychologists (ten years or more experience, $n = 8$). The sample ranged in age from 24 to 67 years ($M = 39.2$, $SD = 11.1$) and most were women ($n = 17$, 70.8%). This difference in gender proportion was not unexpected, as 80.8% of psychologists in Western Australia are

women (Psychology Board of Australia, 2019). All participants were registered

psychologists with varying training backgrounds (e.g., postgraduate or undergraduate

training only) and areas of endorsement (e.g., clinical psychology, counselling

psychology, and organisational psychology) and all worked primarily in the

provision of individual psychotherapy. A total of 16 participants had completed

postgraduate training in psychology across four different types of Masters courses,

with two participants undertaking their Masters course at the time of interview. In

Australia, to specialise in a specific area of psychology (e.g., clinical or counselling),

individuals are required to complete a relevant postgraduate course after their

undergraduate psychology study. The experience of the participants in providing

individual psychotherapy varied between 5 months and 30 years ($M = 8.9$, $SD = 9.8$).

Most participants ($n = 20$) worked for either government or non-government

agencies, private practice, or a mix of these three workplaces in

outpatient/community settings ($n = 19$) and most worked fulltime hours ($n = 16$). Of

the participants that were seeing clients at the time of the interview, the number of

sessions provided per week varied between 1 and 55 ($M = 16.9$, $SD = 11.7$). A

majority of the participants identified using a number of different models of therapy

($n = 11$), with Cognitive Behavioural Therapy identified most frequently in those

who either identified as using one primary model or a combination of models ($n =$

12).

Researcher-Participant Relationship

Most participants were not known to the primary researcher. However, the

primary researcher and two participants were known to each other due to previous

shared university studies occurring before 2013. At the time of interview, these

participants and the primary researcher had not had regular contact since the

cessation of studies with each respective participant. These participants were not specifically targeted during recruitment and responded to the general recruitment methods detailed in the following section. Other participants were connected to the researcher by one degree of separation as people from the research team's networks responded to recruitment posts. Impacts of researcher-participant relationships were considered to be negligible as all participants did not have ongoing relationships with the primary researcher, were not targeted directly for involvement in the study, and had no knowledge of the study before recruitment.

Participant Recruitment

Recruitment Process

The study was conducted in Perth, Western Australia. Organisations that employ psychologists, universities that offer post-graduate psychology training, and the research team's networks were contacted and requested to share the study's information sheet to possible participants via email (Appendix G). Recruitment posts were made in relevant Facebook groups, and the information sheet was sent to LinkedIn members fitting the desired participant criteria. Participants were informed that they would receive a summary of a preliminary analysis if they participated in the project, but they were not otherwise incentivised. Interviews were arranged after participants responded to the information sheet. Before interviews, participants were requested to reflect on the sorts of emotions that they experience as part of their clinical practice, how they regulate these emotions, and the possible consequences of these processes. In order to adhere to the principles of our constructionist approach (Crotty, 1998), emotional labour and the associated terms such as deep acting and surface acting were not explicitly referred to in the interviews. However, the interviews provide data that is directly applicable and informative to the construct of

emotional labour. Ethical approval was granted by the University Human Research Ethics Committee (HRE2018-0297).

An a-priori estimation of the sample size required for the study was conducted. Relating to the secondary research question, it was initially thought that approximately 10 participants from three different categories of experience would need to be recruited to allow for theoretical saturation to be achieved. Theoretical saturation is the point at which new interviews do not contribute unique data to the overall dataset (Morse, 1995). This was an over-estimate as a recent thematic analysis of the experiences of burnout in a sample of clinical psychologists reached theoretical saturation after only six interviews (Hammond et al., 2018). A total of 24 participants were interviewed once to obtain the interview data used for the study. Recruitment was ceased after the research team reached a consensus that theoretical saturation had been achieved. No participants withdrew data after being interviewed. Participants were informed that the study sought to compare and contrast the experience of emotional labour in early-career, mid-career and experienced psychologists who provide psychotherapy.

Participant Selection

Purposive sampling was used to recruit participants from various training backgrounds and work contexts, and some participants were recruited via the snowball method after interviews with connected colleagues. To be eligible for the study, participants needed to be registered psychologists who provide individual psychotherapy in their work with clients. Additionally, participants had to be providing psychotherapy within the last six months. The primary researcher conducted each individual interview with participants at mutually convenient locations, which afforded confidentiality and clear audio recording. Such locations

were mostly located in private practice offices and university campus private study

spaces. Interviews were conducted from August 2018 to February 2019.

Data Collection

Data Collection Procedures

Data was collected via individual semi-structured interviews to collect open-

ended, personal, and confidential data. The interview schedule was developed by the

primary researcher in consultation with the research team. This protocol was initially

piloted with a colleague of the primary researcher, and a recording of this pilot

interview was assessed by the research team to confirm the protocol's practical

utility and appropriateness. Minor changes to the interview schedule occurred after

the initial interviews, and these changes were discussed with the research team

before being implemented in further interviews. Alterations included subtle wording

changes for some questions to enhance clarity and the introduction of a follow-up

prompt exploring whether participants experienced any changes to leisure activities

consequent to emotional labour. This prompt was included after such a factor was

identified by one of the initial participants after interview. Interviews ranged from

26.9 minutes to 93 minutes ($M = 63.4$, $SD = 15.8$).

A reflexive journal was kept by the primary investigator to provide a

reflective space to identify and mitigate the impact of his experiences on participant

recruitment, data collection, and analysis. The primary investigator's expectations for

the data were noted before conducting interviews. Expectations included themes

around a variety of affects being elicited from client-related content, feeling worn out

or burnt out, and having reduced patience for significant others consequent to

managing emotional labour. Identifying these positions before data collection

ensured that findings were consistent with the data and that alternative or opposing

themes were explored during analysis. The reflexive journal also contained broader personal reflections to assist in developing self-awareness during the research process.

The interview schedule was developed to obtain information regarding multiple research questions relating to emotional labour (Appendix H) for the interview schedule. The data presented in this study was primarily derived from responses to the question "what do you think are the consequences of having to experience, show, and deal with different emotions in your work?" Participant responses to this question were assumed to reflect the consequences of emotional labour because the question specifically pertained to the processing of emotion. Based on previous research, the authentic expression of emotion seems to be associated with reduced burnout (Grandey et al., 2012; Van den Bosch, & Taris, 2014; Van den Bosch & Taris, 2018) and congruence between felt and displayed emotion tends not to be associated with burnout (Grandey & Gabriel, 2015). Furthermore, Grandey and Gabriel (2015) suggested that the traditional deep acting/surface acting dichotomy may not categorise all forms of regulation in the emotional labour process. These findings indicate that any effects identified by participants responding to this question are likely consequent to emotional labour and that interview questions specifically prompting participants to think in terms of this dichotomy would be limiting and contrary to the exploratory nature of the line of inquiry.

Recording and Data Transformation

Interviews were recorded using an audio recording device and these audio files were sent to an online transcription service for verbatim transcription. A member checking process took place whereby each transcript's accuracy was

assessed initially by the primary investigator and then returned to participants for

further confirmation. Additionally, field notes were made by the interviewer after

each interview following Phillippi and Lauderdale's (2018) guidelines to assist in

reflection on the data collection process. The interview transcripts, along with the

field notes, formed the primary data sources for data analysis.

Analysis

Data Analytic Strategy

Thematic analysis (Braun & Clarke, 2013) was used to identify general

themes and patterns across the data to answer the primary research question. A

recursive process of data familiarisation, initial inductive coding, subtheme and

theme identification, theme revision, theme definition and analysis was followed as

per Braun and Clarke's (2013) recommendations. An inductive approach to theme

identification was adopted to enable codes and themes to be extracted from the data

and was deemed by the research team to best suit the study's line of inquiry. The

recursive data analysis process was conducted by the primary investigator with

research team consultation and revision occurring at each step in this process. Team

members commented upon the transcripts, interim codes and participated in

identifying themes and subthemes. A second coder was not used during analysis to

avoid violating the inductive process of the research as this second coder would not

have been intimately involved throughout the research process (Morse, 1994) and

would not be consistent with the epistemology. Coding was performed on each entire

transcript. The NVivo 12 software was used to manage the coding process and data

analysis. Feedback from participants was sought regarding the findings of the

preliminary analysis. This was done as part of a further member checking procedure

to enhance the credibility of these findings. The feedback received from participants indicated that no changes to the analysis were required.

Analysis of theme frequency in the different participant experience groups was performed to address the secondary research question. The frequencies of each theme were classified as either "general" (applied to all cases), "typical" (occurring in half or more cases) or "variant" (occurring in more than two cases but less than half), as suggested by Hill and colleagues (Hill et al., 1997). Observing the frequency of the identified themes in each participant group allowed the research team to assess whether there were observable differences between participants with varying levels of experience.

Findings

The analysis of the interview data for this study was predicated on finding themes related to the research questions. To provide context for interpreting the interview data, participants were asked about the kinds of emotional responses they often manage with clients. Participant responses indicated that the content of emotional responses managed in sessions with clients spanned the entire spectrum of positive and negative affect. Concerning the primary research question, the thematic analysis identified beneficial, neutral, and pernicious effects reported by participants. These effects are summarised by the following themes: *personal growth*, *feeling depleted and exhausted,* and *craving space free from people and work-related emotion*. These themes are discussed below. All included names are pseudonyms.

Concerning the secondary research question, the theme frequency analysis found that the identified themes were 'typical' for all groups with one exception. The *feeling depleted and exhausted theme* was 'general' for early career psychologists. The frequency of this theme's representation in the data was remarkably high in mid-

career (85.7%) and experienced participants (87.5%), with all but one case reporting this theme in the other groups. The research team concluded that these findings did not constitute sufficient evidence of differences in the perceived consequences of emotional labour between the participant groups. Therefore, this secondary research question was not subject to further analysis.

Personal Growth

Most participants (79.2%) described some benefits from having to manage emotions in their work. They identified how engaging in this emotion management can lead to personal growth through the increased expansion and understanding of their emotional selves. There were no subthemes identified for this theme.

"I think I've become more comfortable with strong emotions that I feel myself and strong emotions that other people are feeling....I think I'm more able to experience and express emotions authentically, and I'm better able to like appreciate them in other people. And I think because I like appreciate how big emotions can be, I think I'm more respectful when other people are having them. And I think I realise they're more meaningful and I think that's a good thing." (Phil, early-career).

"I think there's some really lovely consequences that you're kind of constantly on this journey of self-discovery and self-learning and self-reflection…It's something I value" (Georgia, mid-career).

"You definitely have to grow a lot. You learn a lot" (John, experienced).

Participants described an increasing comfort, understanding and authenticity with personal emotional experiences and interpersonal interactions, an increased capacity to empathise with others, and an improved understanding of themselves and

the world due to the regular practice of providing empathy to clients. Participants reporting personal growth seemed to experience an expansion of self due to the management of emotional reactions with clients.

Feeling Depleted and Exhausted

Managing emotions was identified as having a significant detrimental intrapersonal effect on the participants. Almost all participants (91.7%) identified depletion and exhaustion effects caused by this specific process. This theme consisted of four subthemes (see Table 1).

"You just feel like you are fighting burnout all the time. Like it just doesn't go away. I feel like there was this little burst of energy at the beginning of my career and then since burning out the first time, I've never quite gotten that same level of energy again…And you sort of just go through lulls where you feel a little bit better in how you're coping with it all, but it's never quite gone." (Sara, mid-career).

This participant directly linked managing emotions to the development of burnout, with this quote representing the *burnout* subtheme. The *burnout* subtheme comprised participants (83.3%) linking emotion management directly to burnout, exhaustion, and fatigue. The quote captures how managing emotional reactions was perceived by most participants to significantly contribute to developing resource depleted psychological states like burnout.

"There's definitely…that compassion fatigue thing, it's just too much sometimes" (Josie, experienced).

"Sometimes when you're kind of have a little bit of emotion or compassion fatigue…really wanting to empathize when you're there, but

it's kind of not, you're not even feeling it because you've kind of just

been so exhausted of your empathy" (Emilia, early-career).

These extracts reflect the *compassion fatigue and vicarious trauma*

subtheme. This subtheme captured participants (37.5%) who either acutely

referred to compassion fatigue or obliquely referenced experiencing vicarious

stress responses to work-related emotional experiences. *Compassion fatigue*

was distinguished from emotional fatigue in the *burnout* subtheme by

references to the specific depletion of compassion and empathy.

"…I'm just like a zombie at the end of the day…And then kind of having

that blunt, you know, when other people tell you stuff, you're just kind of

like 'I wanna have that emotion, and I wanna show you that, but I've

literally got nothing left in the tank.'"(Emilia, early-career).

"…And so it feels like the, the, the more, um … infinite some of those

levels [of empathy] are in the room, in therapy, then the more finite they

become out there in personal relationships."(Patricia, mid-career).

These participants described how managing emotional reactions as part of

their work left them feeling depleted of emotional resources and unable to engage

with interpersonal relationships in the manner they desire. The preceding quotes

reflect the *reduced emotional availability* subtheme and capture the differences

between the participants' emotional availability to clients and close others. This

subtheme included participants (75%) reporting a reduced capacity to provide

emotional support for close personal relationships consequent to emotion

management. The reduced capacity seemed to be exacerbated for participants who

were involved in highly emotionally demanding personal relationships. It therefore

seemed that managing emotional reactions with clients reduced participants' capacity to be emotionally available and responsive to people in their daily lives.

> *"Perhaps become a little bit intolerant with adult children now at home when they start whinging about certain things. It's like 'you're actually okay, you have no idea. Please don't tell me about you car battery, I don't want to know'. So I suppose losing a little bit of context, losing sight of 'this is still my life and it's okay for them to have an issue with their car battery and actually whinge about it'" (Caitlin, experienced).*

> *"I can get frustrated with friends that are upset about some things that might not be things, and I have to remind myself, this is relative. This is still their stuff. This is still important to them" (Rhonda, mid-career).*

Lastly, these extracts reflect the *irritation with others and 'shallow' interactions* subtheme. This subtheme represented participants (41.7%) reporting a dysphoria consequent to reduced emotional availability and a frustration with interactions with others in their personal lives that were deemed trivial or lacking depth.

Craving Space Free from People and Work-Related Emotion

Most participants (70.8%) referenced a need for space from other relationships, reduced stimulation, and a preference to avoid activities that elicit work-related emotion consequent to emotion management.

> *"So if I have a week where I've got lots of ... people have actually divulged their traumas, then at the end of the week, I just don't want to see anyone" (Mary, mid-career).*

> *"Um, I really need to spend time alone and I need to spend time in*
>
> *nature. So just with yeah very little distraction, very little noise." (Brad,*
>
> *mid-career).*

These extracts illustrate participant reports of reduced socialising and preferences to engage with less stimulating environments consequent to in-session emotion management. This was characteristic of the *need for space from others and stimulating environments* subtheme (found in 45.8% of participants). Participants often described meeting needs for recovery through finding solitude and avoiding highly stimulating environments that were once enjoyable before providing psychotherapy.

> *"Just with certain people, and, um … less chaotic or less dramatic*
>
> *people. Like, I've become quite selective about the things I do and the*
>
> *people I do them with, because I don't … yeah, maybe I don't have*
>
> *enough space for too much other stuff." (Rhonda, mid-career).*

This participant articulated a need to establish firmer boundaries in emotionally taxing personal relationships and invest energy in non-emotionally taxing relationships consequent to managing emotional reactions during sessions with clients. This was characteristic of the *increased boundary setting in relationships* subtheme (reported by 50% of participants).

> *"I think, there are things that maybe I would do for leisure before that*
>
> *I'm less inclined to do now… Um, and so sometimes I'll be careful a*
>
> *little bit more kind of selective in terms of what I watch, I might watch*
>
> *more comedy or more rom-coms just because they feel light." (Stacey,*
>
> *early-career).*

This quote reflects the *changes to leisure activities and media consumption* subtheme (found in 29.2% of participants) and encapsulates the changing preferences of some participants to engage with less emotionally taxing leisure activities and media content. Participants identified that while their engagement with certain media platforms did not change substantially (e.g., movies, music, television etc…), the types of content consumed on these media platforms did change. Participants identified avoiding content that was thematically related to their place of work (e.g., correctional facilities) and avoiding content that was likely to elicit negative or emotional states they experienced in their work. Therefore, participants reported a preference to engage with media content and leisure activities that provided a counterweight to the emotions elicited during work consequent to emotion management.

Table 1

Frequency of Themes and Subthemes (N = 24)

Theme	Sub-theme	Frequency	
		N	%
Personal growth		19	79.17
Feeling depleted and exhausted		22	91.67
	Burnout	20	83.33
	Compassion fatigue and vicarious trauma	9	37.5
	Reduced emotional availability	18	75
	Irritation with others and 'shallow' interactions	10	41.67
Craving space free from people and work-related emotion		17	70.83
	Need for space from others and stimulating environments	11	45.83
	Changes to leisure activities and media consumption	7	29.17
	Increased boundary setting in relationships	12	50

Discussion

The current study is the first to comprehensively explore the experience of emotion as it pertains to psychologists from the perspective of emotional labour. In other words, while other studies have explored burnout and emotional impacts of working as a psychologist, none have situated these processes within the emotional labour context. This is important for several reasons. First, it contributes to emotional labour literature by examining a specific under-researched occupational group, and

by identifying novel effects. Second, it provides a new theoretical perspective to understand the processes and consequences of emotion management for psychologists. The novel findings presented here also suggest new avenues for research and practice to help psychologists better manage emotions that arise from their work.

The study explored the research question: *What are the perceived effects of emotional labour in psychologists providing individual psychotherapy?* We achieved this aim by exploring psychologists' perceptions of their experience of emotion during therapy sessions. We consciously chose not to define emotional labour so as not to "lead" participant responses. Instead, we devised an interview schedule that corresponded with the core elements of emotional labour theory. As such, the data provided rich accounts of the emotional labour process. The perceived positive effect of emotional labour described by the participants contrasts the bulk of emotional labour research whereas the observed negative effect seems consistent with the broader literature in other occupations (e.g., Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). This previous literature has mostly used quantitative research designs and self-report measurement tools that have limited the exploration of outcomes associated with emotional labour. In contrast, the current study's qualitative design enabled free exploration of outcomes and led to the identification of the perceived positive effect. The identified neutral effect of desiring space from people and work-related emotion seems to contribute new knowledge to the scientific literature.

The frequency of themes did not differ significantly across participant experience groups, suggesting that types of emotional labour outcomes are constant across the professional lifespan. This may reflect that emotional labour is inherent to

the role of psychotherapist and suggests that psychologists of all career stages would benefit from strategies that mitigate negative outcomes such as those identified in the current study. However, the commonality of themes does not imply that the groups were all afflicted to a similar extent. It may be possible that the extent of the identified themes is affected by the utilisation of different coping strategies or other factors that vary across experience groups. Despite this, the commonality in identified themes identified by participants suggests that emotional labour affects psychologists across the professional lifespan and as such, requires ongoing management.

Personal growth was identified by participants as a positive outcome consequent to managing emotional reactions during sessions. One possible explanation for this finding may be the unique nature in which emotional labour is managed by psychotherapists. Functionally managing emotional reactions within the psychologist is related to client outcomes (Hayes et al., 2018). This may cause psychologists to reflect frequently and deeply on their work-based emotional experiences through mediums such as supervision. These reflections may afford psychologists opportunities to develop functional perspectives on their emotional reactions that may lead to expanded empathy and understanding. This deep processing of emotional reactions may enable an individual to experience growth from emotional labour.

The identification of possible positive effects of emotional labour contrasts much, but not all, research on emotional labour. While most meta-analyses and reviews of emotional labour have found strong support for links between emotional labour and negative well-being outcomes (e.g., Grandey & Gabriel, 2015; Kammeyer-Mueller et al., 2013), some research has linked emotional labour to

positive well-being outcomes (Alam et al., 2019; Humphrey et al., 2015). In conjunction with this study's findings, this may suggest that in certain contexts, individuals may obtain a net benefit from emotional labour. This is significant for the literature as it adds to a relatively small but growing number of studies that contrast the bulk of emotional labour research. Additionally, to the best of the authors' knowledge, emotional labour has not previously been linked to personal growth, making this a unique finding.

The second major finding of this study was that participants attributed exhaustion, fatigue, and resource depletion to managing emotions during sessions. This suggests participants were describing phenomena such as burnout and compassion fatigue. The link between burnout and emotional labour is well established in previous literature (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). However, links between compassion fatigue and emotional labour are relatively recent and based upon simple bivariate correlations found in a sample of hospice nurses (Barnett et al., 2019; Miller & Sprang, 2017). Therefore, the findings of this study extend this literature by being the first to find a relationship between these variables in psychologists with qualitative data.

The final major theme identified in data analysis suggested that participants needed psychological distance from stimulation and social contact consequent to managing work-based emotional reactions. Needing such distance may reflect a method of emotional regulation or replenishment of psychological resources. Subsequent engagement with stimulating environments or interpersonal interactions like those occurring during the workday may result in further resource depletion.

Obtaining psychological 'space' therefore may be an important component of replenishment from emotional labour for psychologists.

The findings of this study extend the burnout literature regarding mental health professionals. Previous research examining burnout and its predictors in psychologists and mental health professionals have not included the potential contribution of emotional labour (e.g., O'Connor et al., 2018; Simionato & Simpson, 2017). However, participants in this study linked the management of emotional reactions with clients to a depletion of emotional resources. This suggests that emotional labour and burnout are associated in this occupational group. Therefore, future mental health professional burnout research should ensure that emotional labour is sufficiently considered. One possible future step would be to include emotional labour with other predictors of burnout to examine their relative contributions.

The findings of this study extend existing emotional labour literature by contributing unique findings and investigating an under-researched population. Linking emotional labour to personal growth and the development of a need for isolation from people and work-related emotion are novel findings. Additionally, the *feeling depleted and exhausted* theme may provide the first evidence of a link between emotional labour and compassion fatigue in this occupational group. These findings extend the emotional labour literature by contributing new knowledge and documenting phenomena in an under-researched occupational group.

Strengths and Limitations

The research design and participant recruitment were key strengths of the study. The process of interviewing participants allowed for rich data to be collected and enabled the identification of unique findings that were unlikely to be uncovered

without an exploratory approach. For example, quantitative methods cannot identify a link between emotional labour and personal growth without the creation of a unique psychometric tool to operationalise personal growth. As discussed in the method, the primary investigator's lived experience facilitated greater empathy with participants and deeper insight into the studied constructs. Additionally, transferability of findings was enhanced by collecting varied perspectives through diversity in participant age, experience, training backgrounds, and therapeutic models.

The study's limitations should be considered when interpreting the findings. The sample was collected with a focus on psychologists providing individual psychotherapy, suggesting that the findings of this study may not be transferable to those performing other roles. As most participants were employed and working as psychologists, the sample may be biased towards those who have higher levels of resilience. This would suggest that the results of this study may not be applicable to those severely dissatisfied with their profession. Lastly, this sample was collected exclusively from people working within organisations in Perth, Western Australia, which may restrict transferability to other contexts.

Future Research

The findings of this study support future research exploring positive outcomes of emotional labour and specific moderating variables. Future research could explore the link between emotional labour and personal growth, however, would require personal growth's operationalisation. Alternatively, personal growth may be captured by the construct of compassion satisfaction as defined by Hansen and colleagues (2018) and using this construct in future research may suffice. Furthermore, further research could identify factors specific to psychologists that

moderate the relationship between emotional labour and its outcomes. Such findings would then inform occupational specific emotional labour management recommendations. Understanding the context in which emotional labour leads to positive outcomes and occupational-specific moderating variables would be fruitful future research.

The current study's finding of needing isolation consequent to emotional labour offers potential directions for future research. Future research could attempt to clarify whether this is a unique construct or whether the depersonalisation component of burnout better conceptualises this finding. Additionally, future research could examine the relative effectiveness of coping choices that achieve this isolation from others in ameliorating burnout.

Emotional labour and its relationship with compassion fatigue could be a valuable focus of future research. There appears to be a relative dearth of literature specifically examining the link between these variables (Barnett et al., 2019; Miller & Sprang, 2017) when compared to research linking emotional labour to burnout (e.g., Grandey & Melloy, 2017; Kammeyer-Mueller et al., 2013). This study's findings suggest that a link between emotional labour and compassion fatigue is plausible in psychologists. Future research could expand on this preliminary evidence to extend emotional labour and compassion literature.

Clinical Implications

The current study asserts that reflecting upon emotional dissonance in supervision and peer support networks may assist psychologists to experience personal growth from emotional labour. It follows that incorporating this focus into supervisory or other professional support processes may be beneficial for psychologists. Evidence of a relationship between emotional labour and depletory

phenomena such as burnout in psychologists was also found, suggesting that established positive emotional labour management strategies may assist psychologists. Therefore, psychologists could better manage emotional labour through strategies such as authentic expression of emotion with colleagues (Grandey et al., 2012), and emotion regulation strategies that realign felt and displayed emotion (Grandey & Gabriel, 2015; Grandey & Melloy, 2017). An example of the latter may be practising compassionate responses to difficult client behaviours. Lastly, psychologists may improve their management of emotional labour by consciously engaging with behaviours that psychologically distance themselves from draining social interactions or highly stimulating environments, provide a counterweight to the emotions experienced during consultation with clients, and replenish emotional resources. Such behaviours are likely to depend on personal circumstances and individual preferences but examples may include establishing strong boundaries with difficult personal relationships, investing in healthier and less emotionally taxing relationships, engaging with positive affect inducing media, as well as solitary self-care activities such as reading or hiking. The themes found in the current study were consistent across participant levels of experience, suggesting that all psychologists providing psychotherapy may be vulnerable to negative effects of emotional labour and should attend to this in their self-care practises.

Chapter Three – Overview

In Chapter Three, I report the findings of a reflexive thematic analysis attempting to answer the research question *how do psychologists providing psychotherapy manage emotional labour?* This chapter is published in *Clinical Psychologist*, a journal of international scope that publishes high-quality research in the field of clinical psychology. This analysis is based on the same transcripts as Chapter Two; however, the analysis is derived from a separate subset of data from the transcripts to answer a separate research question. Qualitative methods were used to answer this chapter's research question because of the lack of literature available on this topic in this population and its exploratory nature. Such methods were deemed most appropriate to be able to capture broad holistic potential key constructs that could form the basis of the following chapters, as opposed to quantitative methods that require a-priori determination of variables. The purpose of answering this research question was to identify potential person-level constructs that could potentially inform follow-up statistical analyses. The analysis of this chapter found numerous potential key constructs that may assist psychologists to manage emotional labour effectively, including themes of *effective in-session regulation*, *effective post-session regulation*, *positive therapeutic relationships with clients*, *general lifestyle factors*, *evaluating therapeutic effectiveness*, *personal predispositions*, and *career experience*. All themes have important implications for the emotional labour literature; however, the discussion of these findings reveals a potential role for constructs of psychological flexibility, self-compassion, self-reflection, career experience to impact emotional labour's relationship with burnout in psychologists providing psychotherapy. These findings inform the later statistical modelling

presented in Chapter Five. The reference for the published version of this chapter is

below and the publishing agreement can be found in the appendices (Appendix I).

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Chapter Three – Managing Emotional Labour in the Provision of

Psychotherapy – What Matters Most

Emotional labour is an under researched construct in the psychologist well-being literature. Originally proposed by Hochschild (1983), emotional labour refers to the process by which workers regulate and express emotion throughout occupational duties (Grandey & Gabriel, 2015; Grandey & Melloy, 2017; Hochschild, 1983). Although some research has related emotional labour to positive constructs (Alam et al., 2019; Clarke et al., 2021; Grandey et al., 2013; Humphrey et al., 2015), most research associates emotional labour with negative intrapersonal, interpersonal, and organisational factors (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012; Van Der Merwe, 2019). Recent studies and reviews of psychologist well-being outcomes such as burnout (O'Connor et al., 2018; Simionato & Simpson, 2018), and stress (Finlay-Jones et al., 2015; Rupert & Dorociak, 2019), have neglected to include emotional labour's contribution. Where emotional labour has been considered, it has been linked to poorer well-being (Carlotto et al., 2016; Clarke et al., 2021; Kolar et al., 2016; Rodriguez & Carlotto, 2017; Weaver & Allen, 2017; Xanthopoulou et al., 2018; Yanchus et al., 2010). Despite this, occupationally specific factors that assist emotional labour's management are yet to be identified. Exploring such factors will further our understanding of improving psychologist well-being.

Recent models of emotional labour provide theoretical underpinnings for our study. Building upon Hochschild's (1983) work, Grandey and colleagues (Grandey & Gabriel, 2015; Grandey & Melloy, 2017) conceptualise emotional labour as being comprised of perceived rules regarding emotional expression (display rules), expressions of emotion (emotion performance), and forms of emotion regulation that

occur when felt emotion is incongruent with display rules. During a state of

incongruence between felt and displayed emotion (emotional dissonance), emotion

regulation occurs by utilising strategies that suppress felt emotions while feigning

desirable emotions (surface acting), or by utilising strategies that align felt emotions

with emotion performance (deep acting) (Grandey & Gabriel, 2015; Grandey &

Melloy, 2017). The authors argue that emotional labour contributes to burnout

through resource depletion from emotion regulation and internal distress experienced

during emotional dissonance.

Research exploring the emotional demands of psychologists providing

psychotherapy suggests a difference in how emotional labour is experienced relative

to other professions. Van Der Merwe and Wetherell (2020) describe four dilemmas

governing psychologist emotional expression with clients that suggest psychologists

experience highly contextual and dynamic display rules. For example, the authors

detail the complexity in psychologists' decision making regarding expressing or

containing emotional reactions to clients. The frequency, intensity, and duration of

emotional labour, as well as interaction goals and qualities of relationships between

psychologist and client are also likely to significantly differ compared to previously

studied occupations. For example, a retail service interaction may occur briefly

between provider and consumer of limited closeness to achieve a product sale. In

contrast, psychologists providing individual psychotherapy may engage in emotional

labour over a period of 50 minutes per session in the context of greater degrees of

closeness and goals such as providing empathy and psychotherapy. Furthermore,

psychologists performing roles that have previously been qualitatively studied such

as providing coaching on sport performance (Hings et al., 2018a; Hings et al., 2018b)

are also likely to engage in different forms of emotional labour compared to those

providing psychotherapy for the same contextual factors illustrated above. Such

differences are likely to result in different relationships to well-being constructs

(Grandey & Melloy, 2017). This suggests that psychologists providing

psychotherapy are a unique group that experience emotional labour in qualitatively

different ways, thereby requiring exclusive focus to identify idiosyncratic variables

key to effective management.

The management of emotional labour within the profession of psychotherapy

has not received significant previous attention. Emotion within psychotherapy has

historically been investigated through the lenses of countertransference (Cartwright

et al., 2021; Hayes et al., 1998; Hayes et al., 2018), empathy (Thwaites & Bennett-

Levy, 2007), impacts on therapeutic alliance and outcomes (Whelton, 2004), and

professional development. Some research has explored the management of boredom

and anxiety (Williams et al., 2003) and another study (Kolar et al., 2016) references

emotional labour in a manner inconsistent with dominant conceptualisations. Where

emotional labour theory has been considered (Van Der Merwe, 2019), relevant

factors have been explored *after* emotional labour's elicitation. Psychotherapist

professional development literature acknowledges developing balance between

emotional under- and over-involvement (Skovholt & Rønnestad, 2003; Skovholt &

Trotter-Mathison, 2013), resolving reflection on emotional experiences in therapy

constructively (Skovholt & Rønnestad, 2003; Rønnestad et al., 2019), restoring

therapist emotional well-being between clients (Skovholt & Trotter-Mathison, 2013),

and supervision (Hill et al., 2016) as important for client outcomes, personal well-

being, professional development, and career sustainability. This literature emphasises

the challenges and importance of novice psychotherapists establishing functional

methods for addressing these concerns (Skovholt & Rønnestad, 2003; Rønnestad et

al, 2019). However, despite studies investigating the emotional impact of clinical work and its management, none of this work has explored contributing factors from an emotional labour perspective.

Although psychologists providing psychotherapy are a unique occupational role, previous research provides informative context. Previous qualitative investigations in other occupations such as psychiatric nurses and sports psychologists have found multiple factors as informing how emotional labour is managed. Participants in these studies have reported using self-talk (Hings et al., 2018a; Hings et al., 2018b; Van Sant & Patterson, 2013; Williams et al., 2003), and deriving meaning from emotional events (Lamothe et al., 2021; McCance et al., 2013). Establishing psychological boundaries between work and personal roles (Van Sant & Patterson, 2013; Walsh, 2009), self-awareness, experience, and engaging in self-reflective practice (Hings et al., 2018b; Hings et al., 2020; Van Sant & Patterson, 2013) have also been reported to assist in managing unwanted emotional states. Lastly, social support and supervision may balance and maintain perceptions of one's reality as safe (Goldblatt, 2009), 'vent' unwanted emotional states (McCance et al., 2013), and increase self-awareness (Hings et al., 2020; Lamothe et al., 2021). These factors are consistent with Van Der Merwe's (2019) research that explored responses to emotional labour in psychologists. This literature suggests that authentic emotion expression, realigning felt and expressed emotion, personal traits, abilities, concepts of self, social support, and supervision, are factors relevant in managing emotional labour.

Current Study

The aim of the current study was to explore factors relevant to managing emotional labour for psychologists providing psychotherapy. A qualitative approach

was used to enable deep exploration of the research question: *How do psychologists providing psychotherapy manage emotional labour?* This question was chosen to better understand broad antecedent and consequent constructs relevant to the emotional labour process. We interpreted "manage" as reducing emotional dissonance's frequency, intensity, and/or duration, as this is the major factor linking emotional labour to undesirable constructs (Grandey & Gabriel, 2015; Grandey & Melloy, 2017; Van Der Merwe, 2019).

Method

Research Design and Research Team

A social constructionist epistemology underpinned our study. Social constructionism views "truth" as constructed jointly by researchers and participants (Crotty, 1998). Transcriptions of participant interviews formed the primary data source used in the analysis. The study obtained ethics approval from the University Human Research Ethics Committee (HRE 2018-0297). Additionally, the Journal Article Reporting Standards for Qualitative Research (Levitt et al., 2018) and the Consolidated Criteria for Reported Qualitative Research (Tong et al., 2007) were consulted throughout the research process to enhance quality.

Four members comprised the research team. The lead author was the primary researcher and was a postgraduate student and Clinical Psychologist during the research process. This background facilitated greater insight into the studied constructs and assisted with eliciting data from interviewees. The other three research team members were faculty members at two universities. Three members were registered psychologists and all members completed postgraduate training in either Clinical, Community, or Organisational Psychology. Two members had previous qualitative research experience. The research team comprised both insider

and outsider perspectives as two members had experience in providing individual

psychotherapy and two did not. These broad perspectives allowed the team to apply

greater reflexivity to the analysis and findings.

Participants

Twenty-four registered psychologists from across the professional lifespan

were recruited. Experience providing individual psychotherapy ranged between 5

months and 30 years ($M = 8.9$, $SD = 9.8$) and participant ages ranged between 24 and

67 years ($M = 39.2$, $SD = 11.1$). Seventeen participants were women (70.8%) and

seven were men (29.2%), which is consistent with the gender ratio of psychologists

practising in Western Australia (Psychology Board of Australia, 2019). Participants

had varying postgraduate training backgrounds and areas of specialisation with

sixteen having completed postgraduate psychology courses (e.g., Clinical

Psychology, Counselling Psychology, Organisational Psychology) and two in the

process of completing Masters level training at the time of interview. Most

participants worked full-time hours ($n = 16$) providing psychotherapy to clients in

government and non-government agencies, private practise, or a mix of these three (n

$= 20$). At the time of interview, participants reported conducting between 1 and 55

sessions of individual psychotherapy per week ($M = 16.9$, $SD = 11.7$) and utilised a

variety of psychotherapy models (e.g., schema, interpersonal, psychodynamic) with

cognitive behavioural therapy being the most frequently identified ($n = 12$). No

participants withdrew after being interviewed.

Table 2

Demographic Data (N = 24)

Variable	Category	Total	Early-career	Mid-career	Experienced
			Group		
N		24	9	7	8
Age					
	Years	39.20[a]	31.33[a]	39.14[a]	48.12[a]
Gender					
	Women	17	6	6	5
	Men	7	3	1	3
	Non-binary	-	-	-	-
Experience					
	Years of practice	8.87[a]	1.55[a]	5.29[a]	20.25[a]
Postgraduate Training					
	None	6	2	1	3
	Clinical	10	4	3	3
	Counselling	5	1	3	1
	Organisational	1	-	-	1
	Professional	2	2	-	-
Client contact					
	Estimated average sessions per week	15.48[a]	9[a]	17.21[a]	18.75[a]

Note. 'Professional' postgraduate training refers to a one-year postgraduate degree in

psychology available at some universities in Australia.

[a] These values indicate sample means.

Recruitment

Interviews were conducted in Perth, Western Australia. Our inclusion criteria were to be a registered psychologist providing individual psychotherapy in one's work with clients. Purposive sampling was used to recruit a diverse sample with some participants recruited via the snowball method. Demographic information was collected for each interview (see Table 2 and Appendix J). When a lack of participants within a particular demographic domain was noticed, we used purposive sampling to collect greater diversity within that category. For example, an observed paucity of midcareer psychologists and abundance of participants with clinical postgraduate training led us to specifically recruit more midcareer participants and a variety of postgraduate qualifications in psychology. Participants responded to an information sheet that was posted in relevant social media groups, sent to eligible participants directly via internet messaging services, and sent to the research team's personal networks. Additionally, organisations that employ psychologists and universities offering postgraduate training for psychologists were requested to share the information sheet to potential participants. A summary of the preliminary data analysis was offered to participants. In line with recent criticism of saturation (e.g., Braun & Clarke, 2019), we determined when to cease recruitment via a reflexive process of concurrent data collection and analysis.

Data Collection

Semi-structured interviews were considered most appropriate for the line of inquiry due to their capacity to build rapport and collect data across a broad spectrum of topics and research questions. The lead author conducted each of these interviews, which ranged between 26.9 and 93 minutes ($M = 63.4$, $SD = 15.8$). Prior to interview, participants were requested to reflect on the sorts of emotional experiences

they have with clients, how they manage these reactions and what they perceive to be

the consequences of these experiences. Emotional labour constructs were not

explicitly defined for participants to facilitate an inductive and constructionist

approach to the topic. The interview schedule (see Appendix H) was developed by

the lead author in consultation with the research team. The lead author's

understanding of emotional labour theory (e.g., Grandey & Gabriel, 2015; Grandey

& Melloy. 2017; Hochschild, 1983) and its intersection with clinical experience

primarily informed question development. The schedule was developed to cover a

range of topics such as constructions, perceived effects, and management of

emotional labour. Our analysis was predominantly based on responses to interview

questions such as "*when you are experiencing an emotion you do not think is*

appropriate to express, what do you do with this feeling?", "*how do you generally*

cope with your emotions in sessions?", and "*do you prepare yourself emotionally*

prior to a session?". Questions were developed to elicit open-ended responses that

could amplify, augment, and contradict the literature. The interview protocol was

initially piloted with a colleague of the lead author to assess appropriateness. Minor

alterations were made in consultation with the research team to the interview

schedule wording and a prompt on the consequences of emotion management was

included after the initial interviews. Interview audio was recorded and sent for

verbatim transcription to an online service. The lead author and participants then

verified transcript authenticity.

Data Analysis

Reflexive thematic analysis (Braun & Clarke, 2013; Braun & Clarke, 2020)

was performed on the data. This analysis was chosen as the primary research

question sought to summarise general themes in the data and is a strength of this

methodology (Braun & Clarke, 2013). Additionally, reflexive thematic analysis enabled consistency with the underlying epistemology of the study and incorporation of context brought to our study by the primary investigator and research team, participants, and broader social factors. Braun and Clarke's (2013) analysis guidelines were followed regarding data familiarisation, coding, theme generation, theme revision, theme definition, and finalisation. The lead author primarily conducted these steps with research team consultation and revision occurring at each point. Research team input included transcript commentary, interim codes, theme generation, and definition. Inductive coding was used to enable themes to be generated from the interaction between interview data, field notes and the primary researcher's interpretive lens. The NVivo 12 software was used to facilitate analysis.

Credibility

Multiple measures were taken to ensure credibility. A reflexive journal was kept by the lead author throughout the research process. This provided an audit trail of ideas for the analysis by affording reflection on the research process and insight on positionality relating to conceptualisations of emotional labour. Expectations for the data were noted in the reflexive journal prior to data collection to ensure that themes identified in the analysis could be traced to relevant generating context. Field notes were made after each interview following Phillippi and Lauderdale's (2018) recommendations to enhance trustworthiness (Phillippi & Lauderdale, 2018; Tong et al., 2007). Member checking was performed by returning interview transcripts to participants for verification and editing. Additionally, participant comments on analysis credibility were sought by providing a preliminary analysis summary document. Feedback received from participants indicated that no changes to the analysis were required.

Results

Figure 1

Thematic Map of Factors Contributing to Positive Management of Emotional Labour
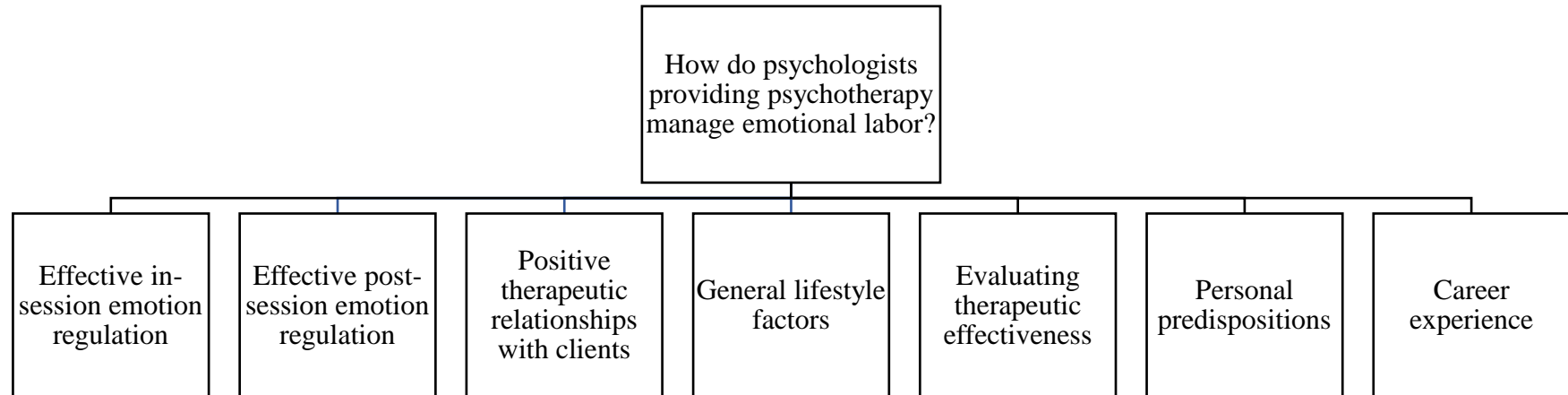
Key themes (see Figure 1) were generated from the data to answer the research question *how do psychologists providing psychotherapy manage emotional labour?* Multiple characteristics and behaviours were identified as having meaningful impacts on the management of emotional labour for participants prior to, during and after psychotherapy sessions with clients. These characteristics and behaviours are summarised by the following themes: *effective in-session regulation*, *effective post-session regulation*, *positive therapeutic relationships with clients*, *general lifestyle factors*, *evaluating therapeutic effectiveness*, *personal predispositions*, and *career experience*. These factors assisted participants to reduce the duration and frequency of emotional dissonance, as well as afford greater availability of psychological resources to utilise in instances of emotional dissonance. Pseudonyms are used after extracts with a level depicting career experience. We used labels of "early career" (3 years or less), "midcareer" (4-9 years), and "experienced" (10 years or more), to describe experience level.

Effective In-Session Regulation

Participants described a myriad of strategies to realign felt and displayed emotions when experiencing dissonant emotions acutely with clients. These strategies fell under subthemes of *breathing, mindfulness, and present moment awareness/openness*, *internal 'distance' from emotion*, *engaging with valued emotional displays*, *interpersonal processing* and *compassionate, formulating, and/or directive self-talk*. These subthemes reflected overall functions of psychological distancing from dissonant emotions and engagement with valued emotional displays, as well as realigning felt and expressed emotion.

> "...if it was boredom and it was...factors within the client and not factors
>
> within me ... I might say 'I wonder if it, is it still interesting for you? Or

do you get bored with the story?' … we use it therapeutically." (Michael,

experienced)

This extract illustrates the *interpersonal processing* subtheme and highlights

the way in which experiencing dissonant emotions can be managed through verbal

expression. Although Michael did not express a specific emotion to the client in this

example, other participants reported expressing dissonant emotions directly with

clients.

"…I just try to be compassionate…try to remember 'this must be really

awful and difficult for this client, and this is the best she can do'… people

aren't being difficult because they like being difficult - they're doing the

best they can." (Erin, experienced)

"So, I think by the fact that I'm trying to detach from it and use it to

understand, that in itself is a technique. … I'm aware of it, but I'm not

letting it affect me in that moment." (Daniel, early career)

Erin and Daniel's extracts illustrate the *compassionate, formulating and/or*

directive self-talk subtheme and demonstrate how participants realigned dissonant

emotional states via directive and compassionate self-talk, as well as formulating the

origins of the emotion. Self-talk seemed to assist participants to orient themselves to

desired emotional states such as compassion and formulation seemed to achieve

psychological 'distance' from undesired emotion. This orientation was also described

as being achieved through mindfulness skills to achieve psychological distance from

emotional reactions with a subsequent reorientation to valued emotional displays, as

illustrated by Nicole, Bethanie, and Jess in the following extracts.

"I'm probably somebody who really responds well to that kind of thought

defusion stuff… some psychological process of recognising, stepping

back, and reorienting myself where I feel like I should be." (Nicole,

midcareer)

"...there is mindfulness. So, there is a bit of exploration there, it's, 'okay,

I'm noticing this. Is this in response to the client? Is this useful right now

or is it my own personal stuff?...Mindfulness, acknowledging it...taking a

moment, a breath." (Bethanie, midcareer)

"I'm a very practiced [mindfulness] meditator... So, I have the capacity

to be mindful in those situations (experiencing emotion not expressed)."

(Jess, midcareer)

Effective Post-Session Regulation

Conscious engagement with post-session emotion regulation strategies was identified by participants to reduce the duration of dissonant emotions. Two subthemes comprised this general theme - *reflection and seeking support* and *self-care and wellness for emotion regulation*. The kinds of strategies identified in these subthemes included seeking support from supervisors, colleagues, and significant others, pursuing personal therapy when required, and engaging in self-care, as illustrated by Bethanie below. Support seeking seemed to meet various functions including validation, normalising experience, and receiving practical support to understand and treat complex clients.

"When countertransference comes up ... I take it to maybe peer

supervision, clinical supervision, or I'll seek out a supervisor specifically

to address it. Or, if it's truly my own stuff, I will seek out personal

therapy on it." (Bethanie, midcareer)

The *self-care and wellness for emotion regulation* subtheme reflected reports of self-care activities utilised to help manage dissonant emotional states. Many forms

of self-care were described by participants and were dependent on personal interest. However, most participants identified exercise as an important post-session strategy to regulate lingering emotional dissonance as illustrated by the following extracts.

> *"... I need to ...get rid of some of the emotional stuff that I carry from clients and my own experiences ... really important for me to exercise and do [a] very stringent self-care regime." (Kim, midcareer)*

> "*I found running really cathartic ... because it allowed me to release the other emotions." (Rachel, early career)*

Positive Therapeutic Relationships with Clients

Developing and maintaining a positive therapeutic relationship was reported by participants to assist in reducing the frequency of dissonant emotions and consequently reducing the need for effortful emotion regulation. The following extract represents the *open, authentic, and fond therapeutic relationships* subtheme. This subtheme reflected participants' reported need to find fondness for the client and that not finding this leads to more frequent dissonant emotion and more effortful regulation.

> *"...And I think with those clients I feel a lot more open to experiencing emotions with them, as well as for them, as well as in the process of them." (Jean, midcareer)*

Contrastingly, the *closer therapeutic relationships causing greater intensity of emotion* subtheme indicated that closer therapeutic relationships with clients can also increase the intensity of emotions experienced by participants. This highlights the dual nature of the theme as positive relationships with clients seems to both assist emotional labour management and elicit more intense emotional reactions.

General Lifestyle Factors

General habits and lifestyles of participants seemed to impact on their ability to have adequate resources to manage emotional reactions to clients, as well as assisting in reducing the frequency and duration of emotional dissonance. Identified subthemes included *daily work-related routine*, *adequate practical and emotional preparation*, *self-care,* and *non-intrusive personal life*. The following extract highlights how scheduling regular breaks between clients in a participant's *daily work-related routine* enabled them to create opportunities to regulate lingering undesired affect and restore depleted emotional resources.

> *"… when I can I'm spacing my clients … to always have some time that day to come back and go, 'what was that? What was that icky feeling?' And start to really work on whatever conceptualization I have of that client or what happened in that session to make sense of it." (Jean, midcareer)*

Participants also reported that preparing materials for clients, engaging in strategies such as mindfulness between clients and planning functional responses to negative emotional reactions helped facilitate present moment focus with clients and a greater capacity to cope with emotional triggers. These responses comprised the *adequate practical and emotional preparation subtheme* and reflect strategies that assist participants to reduce the frequency of emotional dissonance elicitation, as opposed to acute regulatory process covered in the *effective in-session regulation* theme. *Self-care* seemed to meet both the functions of regulating dissonant emotions (as covered in the *effective post-session regulation* theme) and increasing the participants' overall capacity to cope with emotion management. The following extract from Alice highlights the value of self-care in improving one's capacity to

cope with emotional labour. Note that although Alice refers to exercise, the function of exercise in this example is to build greater general capacity to respond to stress and dissonant emotion, as opposed to a function of regulating emotional dissonance as discussed in the *effect post-session* regulation theme.

> *"There are general life things I do. So, I try and go to the gym…and if I don't do that on a regular basis I can get pretty heightened quickly, like I can feel stressed quickly" (Alice, experienced)*

Lastly, Michael's extract below illustrates the *non-intrusive personal life* subtheme that reflected participant descriptions of difficulties experienced when personal life circumstances intrude on the professional role. Participants also described routines that fostered psychological distance between work-related experiences and personal life roles. Personal to professional life intrusions seemed to detract from participants' abilities to be present with clients, thereby creating dissonance and a reduced capacity to manage emotional reactions.

"… it's really hard [to be present] when I'm emotionally drained in my personal life…because I know that I'm being pulled in session by thoughts and my own emotions of what's going on in life." (Michael, experienced)

Evaluating Therapeutic Effectiveness

Viewing oneself critically in relation to competence or perceived effectiveness seemed to be a major source of frequent and enduring dissonant emotional states for participants. The subthemes reflected participant attitudes that affected emotional dissonance such as *client progress*, *perceived responsibility for change*, and *self-efficacy and unhelpful standards*.

> *"There would be frustration at them and their stuckness, but also me sometimes having a feeling of 'I'm not good at my job'… [Be]cause*

they're not getting better from my interpretation… So maybe this person

simply turning up is the best they can do that day, and it's a fucking good

effort. But here I am frustrated going, 'Oh you didn't work on that

breathing exercise like we talked about', or 'You haven't worked on your

sleep routine like we talked about.' … That's my standards, not theirs."

(Michael, experienced)

Here Michael explains how dissonant emotions can be triggered by his own standards and criticisms projected onto the client when encountering barriers to progress. Participants reported that adopting realistic standards regarding the client's capacity and responsibility for therapeutic change reduces dissonance and the associated strain, as illustrated by Fran below.

"…you can't make that change for them. You're a facilitator of a process

and introducing them to constructs and concepts that are operating

within them and they have to be able to do it for themselves." (Fran,

experienced)

Personal Predispositions

Factors unique to participants seemed to influence the frequency of elicitation and response to dissonant emotions. Subthemes indicated that personal histories, traits and regulatory tendencies are significant in this process. Factors identified within this theme refer to stable and enduring constructs, as opposed to thinking styles that are malleable such as in the *evaluating therapeutic effectiveness* theme. Participants identified how emotional reactions to clients that require regulation usually connected to their histories, life circumstances and countertransference triggers.

"I actually think I'm quite an over-regulated person most of the time…

what that means is I probably have to work quite hard to connect and feel

with the client." (Catherine, midcareer)

"... I'm not an overly emotional person and my wife would be the first

one to tell you, 'I can't believe you're a psychologist' (laughs). But

maybe that's why, it helps me keep that distance." (Ron, experienced)

Catherine and Ron explore how personal regulation tendencies and temperament impact emotional labour. Catherine described her over-regulation tendency resulting in expending greater effort to experience and express desired emotions. In contrast, Ron highlights how a personal temperament enabling greater distance from emotion is helpful.

Career Experience

Experience seemed to result in participants developing greater capacity to manage emotional reactions to clients over time. It appeared that experience increased psychological resource availability and reduced frequency of dissonant emotional states. As the process of conducting psychotherapy becomes more automatic, participants' capacity to attend to emotion management seemed to increase. Additionally, participants seemed more comfortable being emotionally authentic with clients, resulting in fewer triggers of dissonance. The processes by which career experience assisted participants to manage emotional reactions are illustrated by the following:

"… [while a novice] I would be working with the client and have so many

doors open in my mind at the same time. And that meant that the one door

I had to them was so much less open." (Jean, midcareer)

"... you build up this muscle and then you sort of are juggling all sorts of

things in a session [easier]…" (Ron, experienced)

"... it just comes from that experience… now I feel a lot more

comfortable saying things that I might have in the past normally have

wanted to avoid. (int: what changed that for you?) Probably exposure

(laughs). Probably, just being able to recognize that it's really helpful

and that avoiding difficult conversations is not gonna get anyone

anywhere." (Nicole, midcareer)

Jean illuminates how experience helped participants to process emotional

labour due to having more psychological resources available. Early-career

psychologists seemed to spend greater psychological resources on the process of the

session they are conducting, compared to the factors being processed automatically

by experienced psychologists. Ron and Nicole's extracts highlight how participants

viewed their capacity to manage dissonant emotions to increase with time, partly

due to confronting sources of incongruent emotion.

Discussion

Our study explored key factors contributing to effective management of

emotional labour in psychologists. Findings have significant implications that expand

current conceptualisations (e.g., Grandey & Gabriel, 2015; Grandey & Melloy, 2017)

of emotion regulation within the emotional labour framework. Additionally, novel

constructs were identified as impacting on this occupational group's management of

emotional labour.

Forms of acute emotion regulation reported by participants represent novel

processes that expand beyond the typical deep acting/surface acting dichotomy in

previous literature. Participants described numerous methods of regulating emotional

dissonance. Some of these fit with the cognitive change aspect of deep acting (Grandey, 2000; Grandey & Melloy, 2017) such as engaging with compassionate self-talk. However, other strategies reported by participants met the functions of present-moment awareness and psychological distancing. These strategies comprised the *breathing, mindfulness, and present moment awareness/openness*, *internal 'distance' from emotion*, *engaging with valued emotional displays* subthemes in the broader *effective in-session regulation* theme. Such strategies do not fit neatly within conceptualisations of deep acting as they do not reflect cognitive change surrounding the triggering event or a realignment of felt and displayed emotion (Grandey, 2000; Grandey & Melloy, 2017). Additionally, a key aspect of such strategies was to tolerate dissonant emotions while simultaneously maintaining valued displays of emotion (even if such displays were of dissonant emotions). In these moments, participants were not suppressing dissonant emotions but were portraying an emotional façade of sorts. This form of emotion regulation fits comfortably within conceptualizations of psychological flexibility (Hayes et al., 2006). In fact, psychological flexibility and its component parts have been posited as potentially useful in managing experiential responses to client interactions within various models of psychotherapy (Ellis et al., 2018; Walser et al., 2019). Subthemes and respective participant descriptions also were reminiscent of other literature examples of clinicians using psychological flexibility to manage emotional responses to clients. Walser and colleagues (2019) describe a scenario of utilising psychological flexibility with a client when experiencing frustration: "*...putting my frustration and anger in the room at this time would have only served to make things worse. Another angry person in the client's life was not what was needed. I breathed into my experience and returned my attention to the client. Compassion for her pain and*

stuckness seemed the best place to go." (p. 59). In this example, psychological flexibility assisted the management of dissonant emotions with a combination of attentional deployment (deep acting) and feigning emotions (surface acting). This illustrates how the utilisation of psychological flexibility to regulate dissonant emotional states transcends the traditional surface acting/deep acting dichotomy in the emotional labour literature and suggests at its potential benefits in emotional labour management. To the best of the author's knowledge, psychological flexibility has not been identified in previous qualitative or quantitative emotional labour research and so represents a unique finding.

Viewing psychological flexibility through the prism of emotional labour theory provides greater nuance and questions an established theoretical claim. As described by participants, psychologically flexible (Hayes et al., 2006) practitioners can utilise aspects of both surface acting and deep acting simultaneously—refocusing on the present moment (deep acting 'attentional deployment') while portraying a valued emotional façade (surface acting 'feigning'). This strategy was commonly reported by participants as assisting emotional labour management. This provides nuance to the accepted wisdom regarding emotional labour (Grandey & Gabriel, 2015; Hochschild, 1983) by suggesting that the distress assumed to be caused by surface acting is more attributable to suppressing rather than feigning emotion. Additionally, this finding may provide further evidence to a growing body of literature suggesting that surface and deep acting should be conceptualized as multi-faceted constructs (Alabak et al., 2020; Andela et al., 2015; Lee & Brotheridge, 2011) as the separate components of these processes may relate differently to various other constructs.

Our findings regarding social support extend current literature by describing an additional process by which reflection can assist emotional labour management.

Participants reported not only seeking support at a peer level, but also seeking supervision and personal therapy around incidence of emotional dissonance. Such forms of social support may be more focused on promoting self-reflection and perspective taking than purely venting emotion with peers. Self-awareness has been found as a factor in managing emotional labour (Hings et al., 2020; Lamothe et al., 2021), as has venting emotional dissonance with peers (Grandey et al., 2012; Van Der Merwe, 2019). However, participants indicated that supervision and peer support can assist in developing alternative perspectives on events triggering emotional dissonance. Through the lens of emotional labour, these reports can be viewed as developing and priming effective cognitive change routines. This finding expands upon previous qualitative enquiry by suggesting this alternative explanatory pathway as opposed to Goldblatt's (2009) suggestion that support seeking maintains a secure worldview for oneself. The finding further supports psychotherapist professional development literature (Hill et al., 2016; Orlinsky et al., 2001; Skovholt & Trotter-Mathison, 2013) and Wise and Neuman's (2019) assertion that reflective practice is an essential component of psychologist wellness and competence.

General lifestyle factors identified by participants have significant practical and theoretical implications for the emotional labour literature. Punctuating the workday with opportunities to process work-related emotional events and minimising intrusions to present moment focus during sessions were reported by participants as meaningful methods to manage emotional labour. Van Der Merwe (2019) highlights the importance of reconstructing the self in the emotional labour process and other research identifies the importance of establishing boundaries between work and personal roles (Van Sant & Patterson, 2013; Walsh, 2009). Complementing and

extending this research, the general factors identified by participants in the current study may elucidate structural and behavioural means to enact these goals.

The findings surrounding the *evaluating therapeutic effectiveness* theme identify psychologists at greater risk of experiencing emotional labour and elucidate possible helpful strategies. It was found that psychologists experiencing negative self-evaluations or self-criticisms may be particularly vulnerable to emotional labour, and that cognitively orienting oneself to compassionate perspectives provides psychological distance and alleviates emotional dissonance. This extends previous literature (Hings et al., 2018a; Hings et al., 2018b) where self-talk has referred to refocusing attention on current tasks and may be particularly relevant to earlier career psychologists where self-critical thinking styles are common (Lane, 2015). Additionally, clinicians' perspectives regarding responsibility for therapeutic gain and standards projected onto themselves and clients regarding therapeutic progress were a source of emotional labour. This further suggests the benefits of adopting compassionate viewpoints regarding responsibility, progress, and competence to alleviate emotional labour expressed from unrealistic and unrelenting self-criticisms.

Our findings suggested that career experience enhances individuals' capacities to cope with emotional labour. It has been theorised that career experience may afford greater opportunities to practise emotion regulation and consequently assist emotional labour (Grandey & Gabriel, 2015). However, support for this notion is purely theoretical. Two factors may explain why participants reported increasing capacities to manage dissonant emotions with greater experience. First, participants reported that experience afforded them more opportunities to confront situations typically eliciting distress and emotional labour. Confronting these situations developed confidence in participants to manage these situations and this increased

self-efficacy could reduce emotional dissonance. Second, participants reported that with increased experience, other psychologically demanding tasks (e.g., formulation) performed while consulting with clients become more automatic and less effortful. This would increase psychological resource availability to offset depletion from emotional labour. These explanatory frameworks suggest that career experience expanded capacities to cope with emotional labour.

Practical Implications and Future Research

Researchers and clinicians may appreciate integrating our key findings within their working lives and would benefit from further exploration. Consistent with a small but growing number of papers (Alabak et al., 2020; Andela et al., 2015; Lee & Brotheridge, 2011), the findings suggest researchers may benefit from considering the value in conceptualising surface and deep acting as multifaceted constructs. Psychological flexibility and self-compassion emerged from the findings as constructs that deserve more attention in emotional labour literature and clinical practice. Similarly, clinicians may be interested in considering structural and personal factors enabling regular self-reflection. Participants found obtaining this reflection assisted in developing alternative perspectives to alleviate emotional dissonance and preparing to cope with future such experiences.

Limitations

The sample was comprised exclusively of psychologists providing face to face individual psychotherapy to clients in Perth, Western Australia. This may reduce the transferability of the findings to psychologists in other locations and contexts. For example, providing psychotherapy via teleconference programs may create different demands that need to be replenished and managed in alternate ways. Additionally,

unique factors may guide acceptable displays of emotion and management strategies for Psychologists providing couples and/or family therapy.

Conclusion

The current study identified multiple factors affecting the management of emotional labour in psychologists providing psychotherapy. Among the key findings were effective emotion regulation during and after psychotherapy sessions, general lifestyle factors, attributions regarding therapeutic effectiveness, and career experience. These factors seemed to reduce the volume of emotional labour experienced and improved psychological resource availability. Our findings extend literature by identifying novel factors such as psychological flexibility and self-compassion as important in the emotional labour process. The study supports further exploration of these constructs in future research and interventions aimed at managing emotional labour.

Chapter Four – Overview

In this chapter, I investigate the research question *how should emotional labour be measured in psychologists providing psychotherapy and which components are most linked to burnout?* Consequently, I report the validation of a psychometric tool (PELS) to assess emotional labour constructs in psychologists providing psychotherapy as well as a structural equation model. I begin the chapter by arguing that measurement error is present in common measures of emotional labour that confounds previous research and precludes researchers from observing nuanced relationships between emotional labour variables and associated outcomes. Consequently, I argue that a new measure of emotional labour is required to account for these errors and to be validated in the population of interest. A confirmatory factor analysis and correlational analyses present evidence of validity and reliability for the psychometric measure. Additionally, a structural equation model exploring an indirect effects model explores the emotional labour variables that are of most importance in contributing to burnout in this population. Results support factorial validity, convergent validity, internal consistency, and test-retest reliability of the proposed measure. The indirect effects analysis supports emotional dissonance as the key mechanism by which emotional labour affects emotional exhaustion in this profession. I conclude the chapter by suggesting further research and improvement on the PELS is required, but that its current form provides researchers with a valid and reliable measure that accounts for confounding measurement error present in previous emotional labour measures. Lastly, I end the chapter with the conclusion that emotional dissonance may account for the most variance in predicting emotional exhaustion and that surface acting strategies only be harmful in as much as they maintain dissonance, not that they are uniquely harmful in this population.

Chapter Four – Psychometric Properties of the Perth Emotional Labour Scale

(PELS): A New Measure with Theoretical Implications

Emotional labour is the process by which workers regulate their emotional experiences to meet organisationally prescribed rules regarding emotional expression (Grandey & Gabriel, 2015; Grandey & Melloy, 2017; Hochschild, 1983). Decades of research has established links between emotional labour and outcomes relating to employee well-being and performance (Grandey & Gabriel, 2015; Grandey & Melloy, 2017; Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). However, recent research has also begun to question the way emotional labour is measured (Alabak et al., 2020; Andela et al., 2015; Lee & Brotheridge, 2011) and its assumed mechanisms of action (Zapf et al., 2021). These papers suggest that common measurement of emotional labour introduces measurement error that may skew and attenuate findings such as those included in previous mediation analyses (Hülsheger & Schewe, 2011; Mesmer-Magnus et al., 2012). The presence of measurement error confounds the conclusion of these mediation analyses that surface acting is a key mechanism of action in the relationship between emotional labour and burnout. It is therefore necessary to develop and test measures that enable more sophisticated relationships between variables to be explored and for measurement error to be reduced. The relationships between emotional dissonance, the components of surface acting, and burnout are one such example requiring further nuanced analysis as the unique relationships between these variables are unclear.

Grandey and colleagues' (Grandey & Gabriel, 2015; Grandey & Melloy, 2017) recent reviews and conceptualisations of the emotional labour literature build upon Hochschild's (1983) initial research to view emotional labour as an integrative

process. The authors argue that emotional labour comprises three key components—emotion requirements, emotion regulation, and emotion performance. Emotion requirements, or "display rules" refers to the kinds of emotional displays deemed acceptable or unacceptable for a particular work role. Emotion dissonance occurs when a person's felt emotions differ from the display rules governing their emotional displays; aligning the two requires emotional regulation. This regulation is thought to be performed by surface acting and deep acting strategies. Surface acting refers to the suppression of felt emotion and the displaying of inauthentic emotion consistent with display rules, whereas deep acting refers to the conscious realigning of felt and displayed emotion through cognitive strategies. Emotion performance refers to the objectively observed emotional displays of the individual experiencing emotional labour.

Emotional labour is significantly associated with burnout variables across multiple professions (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Much of this previous research has focused on relationships with the emotional exhaustion factor of burnout, which is considered its primary component (Maslach et al., 2001). It is theorised that this relationship is a result of emotional dissonance creating distress and the utilisation of surface acting strategies to regulate this dissonance resulting in a loss of psychological resources (Grandey & Gabriel; 2015; Grandey & Melloy, 2017). This proposition is supported by extensive literature that has found emotional dissonance and surface acting consistently predicting negative intrapersonal and interpersonal outcomes (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Qualitatively, similar findings are also reported by psychologists providing psychotherapy (Clarke et al., 2021; Van Der Merwe, 2019).

Findings regarding deep acting strategies contrast those of emotional dissonance and surface acting. Although deep acting is theorised to eliminate emotional dissonance, it appears unrelated to emotional exhaustion (Grandey & Gabriel, 2015). A lack of relationship between deep acting and emotional exhaustion has led to researchers (Grandey & Gabriel, 2015; Grandey & Melloy, 2017) concluding that deep acting can only be viewed as preferable to surface acting, and not necessarily a strategy by which emotional exhaustion can be ameliorated. Despite further research being required to explore lingering questions, the importance of researching surface and deep acting strategies as they relate to the outcomes of emotional labour is clear.

There are conceptual concerns regarding the historical operationalisation of surface acting and deep acting in the literature. Surface and deep acting have long been theorised as comprising two components each, with surface acting comprising suppressing and faking emotion, and deep acting comprising attentional deployment and cognitive change (Grandey, 2000; Grandey & Gabriel, 2015; Grandey & Melloy, 2017). However, the dominant emotional labour psychometric tools either assess surface and deep acting as unidimensional or are limited by exclusively focusing on surface acting. For example, the Emotional Labor Scale (ELS; Brotheridge & Lee, 2003) measures surface and deep acting as unidimensional constructs. In contrast, the Discrete Emotions Emotional Labor Scale (DEELS; Glomb & Tews, 2004) as well as Schaubroeck and Jones' (2000) measure conceptualise surface acting as bidimensional but do not include any measure of deep acting. Blau and colleagues' (2010) measure does distinguish between various deep acting and surface acting strategies, but their surface acting scales do not distinguish between emotion suppression and faking emotion. The authors of the ELS revised their measure to

account for both surface acting strategies (ELS-R; Lee & Brotheridge, 2011), but it

continues to be limited by a unidimensional measurement of deep acting.

Bidimensional conceptualisations of surface and/or deep acting have been adopted

by recent measures of emotional labour (Alabak et al., 2020; Andela et al., 2015;

Diefendorff et al., 2008), with early empirical support for their psychometric

properties.

Progressing beyond the unidimensional operationalisations of surface and

deep acting will facilitate greater sophistication in emotional labour research.

Bidimensional measurement of both surface and deep acting enables more detailed

exploration of their relationships with outcome variables. For example, Andela and

colleagues (2015) found surface acting strategies to have contrasting relationships

with emotional exhaustion as expressive suppression was positively correlated with

exhaustion but expressive amplification negatively correlated. They found similar

contrasting relationships within deep acting strategies as attentional deployment was

positively related to emotional exhaustion, whereas cognitive change was negatively

correlated. The often-found null relationship between deep acting and emotional

exhaustion (Grandey & Gabriel, 2015; Grandey & Melloy, 2017) may also highlight

the need to study surface and deep acting as bidimensional. This null relationship has

been previously explained by counteracting outcomes being produced by deep acting

resulting in a null relationship on balance (Grandey & Gabriel, 2015). However,

recent examination of this idea has failed to find any supporting evidence for this

explanation (Huppertz et al., 2020). Alternatively, the components of deep acting

(cognitive change and attentional deployment) may be related to emotional

exhaustion in contrasting ways as evidenced by the findings of Andela and

colleagues (2015). Empirical evidence for this alternative explanation would depend

upon valid measurement tools with bidimensional conceptualisations of surface and deep acting, therefore highlighting their utility.

Another concern for common emotional labour measures is their inability to adequately concurrently measure and control for emotional dissonance and surface acting. Despite emotional dissonance's theorised importance in the relationship between emotional labour and its outcomes, only the Frankfurt Emotion Work Scales (FEWS; Zapf et al., 1999) purports to directly assesses this construct amongst commonly used emotional labour measures. However, inspection of the emotional dissonance items in the FEWS indicates that they likely capture erroneous variance attributable to surface acting strategies. Three of the five items measuring emotional dissonance appear to measure surface acting with the following quote illustrating this, "Moreover, a factor for emotional dissonance appeared consisting of items referring to displaying emotions not felt as well as to the suppression of felt emotion" (p. 388). I argue that both "displaying emotions not felt" and "suppression of felt emotion" sit within the conceptual boundaries of surface acting. The inability to distinguish between emotional dissonance and surface acting in existing measures of emotional labour means that research linking emotional dissonance to various outcomes has been confounded by either using measures that infer this relationship from measuring surface acting (e.g., DEELS, ELS, ELS-R) or by using a measure of emotional dissonance that is confounded by variance from surface acting (e.g., FEWS). Therefore, dominant emotional labour measures do not allow researchers to parse out unique relationships between emotional dissonance and surface acting strategies. This distinction is vital because emotional dissonance and surface acting are conceptually distinct constructs – emotional dissonance conceptualises an intrapersonal experience/state, whereas surface acting conceptualises an active

regulatory behaviour. It may be the case that literature findings regarding the negative effects of surface acting may have erroneously been attributed to surface acting instead of emotional dissonance, or vice versa. Therefore, previous research has been confounded by an inability to adequately identify the unique contributions of emotional dissonance and/or surface acting strategies to various outcomes, highlighting the need for further measure refinement.

Empirical studies examining emotional labour and burnout have been limited using measures that do not account for emotional dissonance. Thus, although existing meta-analyses conclude that surface acting mediates the relationship between display rules and emotional exhaustion (Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012), it is likely that many findings are confounded by failing to account for emotional dissonance. Therefore, previous literature is unable to distinguish between mediation effects specific to the *behaviour* of surface acting and/or the *intrapsychic state* of emotional dissonance. Hülsheger and Schewe (2011) specifically examined surface acting as a mediator between emotional dissonance and personal well-being, but this analysis was confounded by the aforementioned issues with the FEWS (Zapf et al., 1999). Additionally, these studies used a unidimensional conceptualisation of surface acting and consequently were unable to distinguish between potential differing pathway effects. For example, the suppression component of surface acting may completely mediate the relationship between emotional dissonance and burnout, or suppression and faking emotion may relate to burnout differently as found by Andela and colleagues (2015). Disentangling these effects is important as understanding this will inform the question of how best to manage emotional labour.

A measure of emotional labour that assesses emotional dissonance and the multiple components of surface and deep acting has previously been developed

(Andela et al., 2015). The measure has five factors addressing the key emotional labour variables of emotional dissonance, expressive suppression (surface acting suppression), expressive amplification (surface acting feigning), re-evaluation (deep acting cognitive change), and attentional deployment (deep acting attentional deployment). Surprisingly, this measure has received little attention and recognition in the broader emotional labour literature to date. Consequently, evidence for the psychometric properties of this measure is constrained to the original paper whereby factor analysis was explored in a sample of 688 various healthcare professionals. The conceptual structure and preliminary findings of Andela and colleagues' (2015) instrument suggest it holds promise in accounting for the limitations of common emotional labour measures despite broad reliability and validity not being established.

Andela and colleagues' (2015) measure is likely to be adaptable to any required measurement context. There is conjecture regarding the appropriateness of person-level trait measurement of emotional labour strategies such as Andela and colleagues' (2015) measure because emotion regulation is argued to be contextual and dynamic (Grandey & Sayre, 2019; Scott et al., 2020). Some emotional labour literature reflects this concern by measuring daily surface and deep acting through diary studies (e.g., Biron & Veldhoven, 2012; Wagner et al., 2014; Xanthopoulou et al., 2018). However, these diary studies use psychometric tools (e.g., ELS; Brotheridge & Lee, 2003) that assess emotional labour constructs at the person-level consistent with Andela and colleagues' (2015) measure. The only change these studies make is to alter the wording of the measure to reflect the measurement of that day's emotional labour engagement. This is something that is entirely congruent with Andela and colleagues' (2015) measure. Therefore, Andela and colleagues' (2015)

tool measures emotional labour constructs at the same measurement context as the current dominant emotional labour psychometric tools.

Current Study

To provide future researchers with a psychometric tool to assess emotional dissonance concurrently with a bidimensional measurement of surface and deep acting components, I examined the psychometric properties of an English translation of Andela and colleagues' (2015) measure. I investigated the measure's factorial and convergent validity, as well as its test-retest reliability. Although the correlation between trait and daily level use of emotion regulation strategies varies, trait-level measurement appears to reflect general patterns in regulation strategy use (McMahon & Naragon-Gainey, 2020). Therefore, there is likely to be temporal consistency of regulatory strategy use as measured at the trait-level. Consequently, I anticipate test-retest reliability to reflect such temporal consistency in general tendencies to use emotional labour regulation strategies.

Andela and colleagues (2015) did not name the measure they developed and used in samples of healthcare workers. Consequently, I decided to refer to this measure as the Perth Emotional Labour Scale (PELS; Appendix K). My item adaptations were written for the context of providing psychotherapy as this was my population of interest, however, the items on the PELS could easily be adapted to other work contexts with minor wording changes to make the items suitable for the context of study. Additionally, I sought to clarify the relationships between emotional dissonance, surface acting strategies, and emotional exhaustion by analysing whether previously suggested indirect effects remain after disentangling emotional dissonance from surface acting strategies. Models of emotional labour emphasise both emotional dissonance and resource loss as separate mechanisms of

action between emotional labour and its outcomes and as such, I hypothesise that both surface acting strategies and emotional dissonance would contribute unique variance to emotional exhaustion. I did not analyse mediating effects of deep acting strategies as these have not been confounded with emotional dissonance in previous literature. Lastly, psychologists arguably are an under-researched occupational group in the context of emotional labour literature (as argued in Chapters One and Two) and to the best of my knowledge no measures of emotional labour have been exclusively validated in this professional group. Therefore, I also aimed to provide the first validation of a psychometric measure of emotional labour exclusively for this specific occupation. It is hypothesised that:

1. The PELS will demonstrate acceptable factorial validity through model fit indices

2. The PELS will demonstrate acceptable reliability through internal consistency and test-retest indices

3. The PELS will demonstrate acceptable convergent validity through significant positive correlations with the same and/or similar constructs on a dominant measure of emotional labour

4. Surface acting strategies of expressive suppression and expressive amplification will partially mediate the relationship between emotional dissonance and emotional exhaustion

Method

Design, Participants, and Procedure

A correlational and cross-sectional research design was used for this study with data collected via an online research survey. The study was approved by the Curtin University Human Research Ethics Committee (HRE 2018-0297). This study

was not preregistered. Participants were asked to confirm that they met the inclusion criteria of being a psychologist working in a role that involves the direct provision of psychotherapy, before completing any survey data. Data was collected over two time points to enable test-retest reliability analysis.

I received 557 responses to the online survey. Of these 557 responses, 95 had not completed the PELS and 8 had completed less than 90% of the survey, rendering these cases unusable due to significantly large amounts of incomplete data. Finally, 42 outliers across the total data set were identified and removed from the analysis. These outliers were observed to be significant univariate outliers on one or more of the measures used in the analyses across both time points for this Chapter and Chapter four's analyses. Consequently, a final sample of 412 participant responses at time one and 206 at time two were used for analysis. Participants ranged between 20 and 70 years of age ($M = 40.19$; $SD = 10.68$). The research team discussed whether the case of the 20 year old participant should be excluded due to the possibility that this age was entered erroneously (given the typical requirements to complete undergraduate training prior to practising psychotherapy). However, I decided to include this case in analyses because I did not have conclusive evidence that this age was erroneous, and the impact of this single case on statistical analyses was negligible. Most participants identified as female (82.77% female, 16.70% male, and 0.48% non-binary) and resided in Australia (82.04%, 13.13% New Zealand, 2.18% United Kingdom, 1.70% Canada, 1.70% USA, 0.24% Morocco). Experience as a psychologist ranged between 0.90 to 31 years ($M = 10.39$; $SD = 7.86$). Most participants reported a specialisation in Clinical Psychology (67% Clinical, 18.20% no specialisation, 8.49% Counselling, 1.46% Educational and Development, 1.21% other, 0.97% Community, 0.97% Forensic, 0.73% Health, 0.73% Clinical

Neuropsychology, 0.24% Sport and Exercise), and provided between 2 and 36 ($M =$

16.95; $SD = 7.39$) sessions of psychotherapy per week with between 0% and 100%

($M = 13.40$; $SD = 25.33$) of these being conducted via teleconference.

Table 3

Demographic Data (N = 412)

		M	SD	N	%
Years of Age		40.19	10.68		
Years of Experience		10.39	7.86		
Sessions Provided Per Week		16.95	7.39		
Estimated Telehealth Session Percentage		13.40	25.33		
Gender					
	Male			69	16.75
	Female			341	82.77
	Other			2	0.48
Country of Residence					
	Australia			338	82.03
	Canada			7	1.70
	UK			9	2.18
	Morocco			1	0.24
	New Zealand			50	12.13
	USA			7	1.70
Specialisation Background					
	Clinical Psychology			276	70.00
	Counselling Psychology			35	8.49
	No Specialisation			75	18.20
	Other			5	1.21
	Community Psychology			4	0.97
	Forensic Psychology			4	0.97
	Health Psychology			3	0.73
	Clinical Neuropsychology			3	0.73
	Sport and Exercise Psychology			1	0.24
	Educational and Developmental Psychology			6	1.46

The research team contacted their respective networks that met the inclusion criteria to request completion of the study. I contacted potential participants via social media posts on LinkedIn and relevant Facebook groups. I also contacted private practices, government agencies, and professional bodies via email and requested that eligible and interested participants complete the survey (Appendix L). Participants were informed that completion of the first survey would enable them to obtain one raffle entry to win one of twenty AUD$50 Amazon.com gift vouchers, and that completing the second survey would enable them to obtain another two entries.

Interested participants were provided with a flyer that linked them to the online survey hosted on the Qualtrics website (Appendix M). Participants were first shown the information sheet and asked to confirm that they met the inclusion criteria. After confirming their eligibility for the survey, respondents then completed the measures of interest in randomised order. Participants were then asked to provide an email address for a second follow up survey to be sent two weeks following the completion of time one. Participants that chose to do so were sent a reminder email generated by Qualtrics two weeks after completing the first survey. The respondents that chose to follow the link provided in the email then completed the measures of interest again in a randomised order.

Measures

Perth Emotional Labour Scale

The PELS is an English Language translation and adaptation of Andela and colleagues' (2015) measure of emotional labour. It has five factors of emotional dissonance, expressive suppression, expressive amplification, re-evaluation, and attentional deployment. The specific items were developed by Andela and

Colleagues (2015) with reported inspiration from other measures of emotion regulation such as the Frankfurt Emotion Work Scale (FEWS; Zapf et al., 1999). Andela and colleagues' (2015) measure contains four items for each factor that assesses the frequency in which respondents perceive themselves to experience emotional dissonance at work and use the specific emotional regulation strategy, on a 5-point scale from *never* to *always*. Higher total scores on each factor indicate the greater presence of that construct. The measure demonstrated good reliability and validity in its original development (Andela et al., 2015) and subsequent papers that utilised the emotional dissonance subscale only (Andela & Truchot, 2017; Andela et al., 2018).

Commonly, translation of psychometric tools involves an iterative process of back-translation (e.g., Lima-Costa et al., 2022; Klocek et al., 2022; Savard et al., 2022); these examples are of measures that required the generation of translations from original measures into their respective languages. In contrast, Andela and colleagues (2015) provided an English language translation in their original article. Thus, I used this translation in my sample and included convergent validity analyses with measures purporting to assess the same constructs to explore evidence for latent variable consistency within the context of English language speakers. Therefore, this process of examining a previously established translation in an unstudied sample to make necessary revisions was more akin to scale validation and revision (e.g., Fox et al., 2020; Hawes et al., 2014; Lee & Brotheridge, 2011, Weigold et al., 2016) than the generation of a translated measure (e.g., Klocek et al., 2022;Lima-Costa et al., 2022). I attempted to change as little as possible regarding the wording of the items but nevertheless made minor changes to seven items for meaning clarity in English and consistency with the latent emotional labour constructs the items measured. For

example, "*my work situation brings me to experience emotions at variance with those I would like to feel*" became "*my work brings me to experience emotions different to those I express*", and "*all the same, I express good mood*" became "*even though I may feel negative emotions, I express a good mood*". I also adjusted the preamble to the items to reference providing psychotherapy to clients. Wherever wording changes were made, the research team strove to ensure that the general meaning underlying each item was preserved.

Emotional Labor Scale Revised

The ELS-R (Lee & Brotheridge, 2011) was used to facilitate analysis of convergent validity. It was chosen as it and the ELS (Brotheridge & Lee, 2003) are the most widely used measures of emotional labour in the literature. The ELS-R revised the ELS by conceptualising surface acting as comprised separately by hiding and faking emotion and adding two extra items assessing faking emotion and one that assessed hiding emotion. However, the ELS-R continues to measure deep acting as a unidimensional construct. The ELS-R has three factors and nine items such as "*pretend to have emotions that I don't really have*" that ask respondents to indicate how often they use a particular surface and/or deep acting strategy on a 5-point scale from *never* to *always*. Higher total scores for each subscale indicate greater presence of this construct. Adequate reliability and validity have been established for the ELS-R (Burić et al., 2021; Fouquereau et al., 2018; Lee & Brotheridge, 2011) and the current study found acceptable internal consistency for the deep acting ($\alpha = .84$), hiding ($\alpha = .85$), and faking ($\alpha = .89$) subscales.

Maslach Burnout Inventory – Human Services Survey

The emotional exhaustion subscale from the Maslach Burnout Inventory – Human Services Survey (MBI; Maslach & Jackson, 1981) was used to assess

emotional exhaustion. This subscale has nine items such as "*I feel emotionally drained from my work*" responded to on a 7-point Likert scale ranging from *never* to *every day*. Higher subscale total scores indicate greater emotional exhaustion. The MBI has demonstrated consistent reliability and validity (Lin et al., 2022) and the current study found adequate internal consistency ($\alpha = .93$).

Balanced Inventory of Desirable Responding Short Form

The Balanced Inventory of Desirable Responding Short Form (BIDR-16; Hart et al., 2015) was used to assess and control for social desirability bias. The BIDR-16 is a short form of the Balanced Inventory of Desirable Responding (BIDR; Paulhus, 1991) and has 16 items on two factors – Self-Deceptive Enhancement (SDE) and Impression Management (IM). Participants respond to items such as "*I have not always been honest with myself*" and "*I sometimes tell lies if I have* to" on a 7-point scale from *not true* to *very true*. Higher scores on each subscale indicate greater presence of this construct. Although the original BIDR enabled computing of a total Socially Desirable Responding (SDR) score, recent research suggests that keeping SDE and IM separate is most appropriate (Hart et al., 2015). The BIDR-16 has recently demonstrated acceptable reliability (Miller, 2021; Moon et al., 2022; Siegel et al., 2021) and the current study found adequate internal consistency for the IM scale ($\alpha = .74$) but not the SDE scale ($\alpha = .66$).

Analysis

Assumption testing was performed prior to analysis. Assumptions of normality, linearity, and homoscedasticity were met. The current study utilised confirmatory factor analysis (CFA) using the Mplus software (Muthén & Muthén, 2015) to assess the PELS's factorial validity (hypotheses one) by analysing whether it demonstrated acceptable model fit characteristics. Covariance matrices and

maximum-likelihood estimation were used to assess the factor structure of the measure. Specifically, the chi-square statistic (χ^2), root-mean-square error of approximation (RMSEA), the standardised root-mean-square residual (SRMR) and the comparative fit index (CFI) were compared to suggested values (Hu & Bentler, 1999) to assess overall goodness of fit. The values Hu and Bentler (1999) suggest as indicating good fit are χ^2 = p > .05, RMSEA ≤ .06, SRMR ≤ .08, and CFI ≥ .95. Item loadings greater than .4 were considered ideal (Yang, 2010). Consent to use participant data was assumed upon submission of the data, therefore cases with significant portions of missing data were excluded from the analysis. A computation of Cronbach's α using the SPSS software was used to assess internal consistency (hypothesis two) with α ≥ .7 considered to be indicative of good internal consistency. Following Kline's (2016) guidelines, an a-priori power analysis indicated that a sample size of 820 participants would be required to sufficiently power the CFA, suggesting the risk that the final sample of 412 could result in an underpowered analysis.

Test-retest reliability (hypothesis two) of the PELS was assessed by examining the bivariate correlations between its factors across time one and two data. Convergent validity (hypothesis three) was determined by assessing the correlations between scales of the PELS and the corresponding scales of the ELS-R. Specifically, Pearson's product-movement correlation coefficients (*r*) was calculated to assess the bivariate relationships between Expressive Amplification (PELS) and Faking (ELS-R), Expressive Suppression (PELS) and Hiding (ELS-R), as well as both Re-evaluation (PELS) and Attentional Deployment's (PELS) relationships with deep acting (ELS-R). Significant correlations and greater effect sizes between these variables will be understood to support convergent validity of these subscales.

Structural equation modelling (SEM) with maximum likelihood estimation was used to assess the proposed indirect relationships between variables (hypothesis four). The analysis was performed with Mplus and as per the CFA, Hu and Bentler's (1999) modification indices guidelines were consulted to determine model fit. Specifically, pathways of expressive suppression and expressive amplification on emotional dissonance and emotional exhaustion were analysed to determine whether there was evidence of indirect effects. Age, number of sessions per week, and social desirability bias constructs were included as control variables. Age and number of sessions per week were included as control variables as they had significant relationships with emotional exhaustion. There were no significant differences between gender, $F(2, 409) = .89$, $p = .41$, $\eta^2 = .00$, or specialisation $F(9, 402) = 1.08$, $p = .37$, $\eta^2 = .02$, in predicting emotional exhaustion. Emotional exhaustion was not significantly correlated with number of dependents, $r(410) = -.05$, $p = .28$, or percentage of sessions provided via telehealth $r(410) = .07$, $p = .13$. It initially appeared as though country of residence may have an effect on emotional exhaustion, $F(4, 406) = 3.08$, $p = .02$, $\eta^2 = .03$. However, post hoc analyses with Hochberg's GT2 (using an α of .05) revealed that only those residing in the UK ($N = 9$, $M = 45.22$, $SD = 18.12$) had a significantly higher emotional exhaustion than those residing in Australia ($N = 338$, $M = 31.75$, $SD = 12.10$) and New Zealand ($N = 50$, $M = 30.54$, $SD = 10.70$). Due to there being no statistically significant differences between any of the other countries of residence, the small number of participants in question, and the small effect size ($\eta^2 = .03$), the effect of this difference on the outcome of analysis was deemed negligible. Kline's (2016) guidelines suggest that this analysis was sufficiently powered.

Results

Figure 2

Confirmatory Factor Analysis with Standardised Factor Loadings (N = 412)
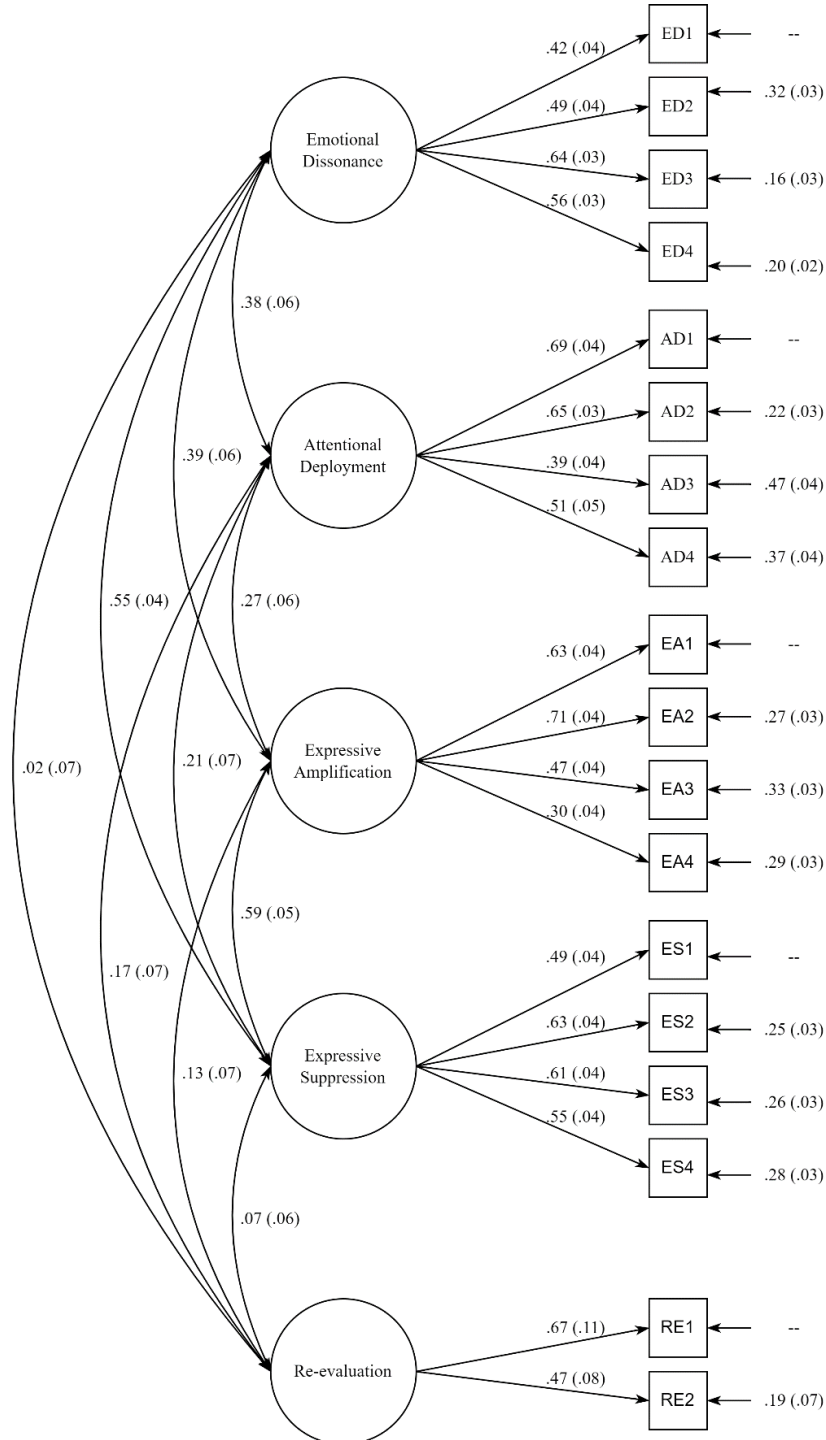
Note. STD Standardization model values presented; ED = emotional dissonance; AD = attentional deployment; ES = expressive suppression; EA = expressive amplification; RE = re-evaluation.

Factorial Validity

I conducted an exploratory factor analysis with principal axis factoring to initially explore the factor structure of the PELS. As postulated, five factors with eigenvalues exceeding 1 were identified as underlying the 20 item PELS. These factors accounted for 63.79% of the variance in the data. I then conducted a CFA using the MPlus software to explore the factor structure of the PELS. Latent variables were allowed to covary to account for their theoretical association with the higher order construct of emotional labour. An initial CFA testing the proposed latent structure demonstrated poor fit characteristics: $\chi^2(160, N = 412) = 579.83$ ($p < .001$), CFI = .85, RMSEA = .08 (90% CI = .07 - .09), and SRMR = .07. Modification indices statistics indicated that overall model fit would be improved if re-evaluation items three and four were allowed to load onto the attentional deployment factor. These items were also observed to load poorly on the latent factor (.36 & .30, respectively) relative to re-evaluation items one (.56) and two (.53). From this, I decided to run an additional CFA with the exclusion of the two problematic items. This secondary CFA demonstrated significantly improved fit (see Table 4) with fit statistics either within or approaching ideal cut-offs: $\chi^2(125, N = 412) = 274.95$ ($p < .001$), CFI = .94, RMSEA = .05 (90% CI = .04 - .06), and SRMR = .05. I concluded that these statistics indicated acceptable model fit. Factor loadings of items in the second CFA were good except for expressive amplification item four (see Figure 2). However, the retention of this item was acceptable given no modification indices indicated support for altering the model, the model's overall goodness of fit, and the item's face validity. Therefore, I determined that hypothesis one was partially supported as satisfactory fit characteristics were obtained but only after the removal of two original items.

Table 4

Goodness of Fit Statistics for CFA Models (N = 412)

Model	χ^2	CFI	RMSEA	SRMR
1	579.83*	.85	.08	.07
2	**274.96***	**.94**	**.05**	**.05**

Note. Model 2 bolded to indicate improved fit statistics; * $p < .001$; Model 1 = all items included; Model 2 = removal of 2 re-evaluation subscale items based on modification indices; CFA = confirmatory factor analysis; χ^2 = Chi-square statistic; CFI = comparative fit index; RMSEA = root mean square error of approximation; SRMR = standardised root-mean-square residual.

Reliability

I examined PELS's internal consistency and test-retest reliability using the SPSS software. Cronbach's alpha values for each factor were all above acceptable cut-offs ($\alpha > .70$) and all factors had large positive bivariate correlations across time one and time two (see Table 5). I concluded this indicates adequate internal consistency and test-retest reliability for all factors of the PELS. Therefore, hypothesis two was supported.

Convergent Validity

I tested convergent validity by examining the correlations between factors on the PELS and the ELS-R. The PELS's expressive suppression subscale was significantly positively correlated with the ELS-R's hiding subscale, $r(410) = .53$, $p < .001$, expressive amplification was significantly positively correlated with the ELS-R's faking subscale, $r(410) = .41$, $p < .001$, re-evaluation was significantly positively correlated with the ELS-R's deep acting subscale, $r(410) = .11$, $p = .03$, and attentional deployment was significantly positively correlated with deep acting, $r(410) = .11$, $p = .02$. Despite the smaller size of correlations for the re-evaluation

and attentional deployment subscales, I concluded that significant correlations in predicted directions indicated support for hypothesis three.

Table 5

Test-Retest Correlations and Internal Consistency

Variable	Test-retest correlation (*r*) *n* = 206	Time 1 Cronbach's Alpha (α) *n* = 412
Emotional dissonance	.63*	.80
Expressive suppression	.65*	.82
Expressive amplification	.59*	.77
Attentional deployment	.53*	.78
Re-evaluation	.52*	.85

Note. * $p < .001$; Data collected over a two-week interval.

Indirect Effect Model

A longitudinal cross-lagged model was initially tested following Cole and Maxwell's (2003) recommendations using data from time one and two as a more rigorous approach to analyse hypothesised causal relationships between variables. However, the very small variance in emotional exhaustion between time points, $r(204) = .86$, p < .001, resulted in negligible variance remaining for the hypothesised variables to predict. The small amount of variance in emotional exhaustion may be consequent to the relatively short interval between time-points (two weeks) as there may not have been enough time for a person's level of emotional exhaustion to fluctuate. This interval was chosen to maximize the likelihood of second survey completion but may have had the unintentional consequence of hindering the model's power to adequately test hypotheses longitudinally. Therefore, the research team decided that the most appropriate method to present the analysis was as a cross-sectional model while considering the limitations of cross-sectional data regarding causal inferences. Rather than adhering to the use of the term *mediation* in light of

the use of cross-sectional data, the alternative term of *indirect effect* was used to describe the pattern of associations between variables (Kline, 2016).

I performed a SEM analysis using MPlus software to determine whether emotional dissonance had an indirect effect on emotional exhaustion through surface acting strategies, after controlling for age, number of sessions provided per week, and social desirability bias. Unsatisfactory model fit statistics were observed χ^2(264, $N = 412$) = 770.29 ($p < .001$), CFI = .89, RMSEA = .07 (90% CI = .06 - .07), and SRMR = .06. Emotional dissonance was found to have significant pathways to expressive suppression ($\beta = .58$, $p < .001$, 95% CI = .51, .65), expressive amplification ($\beta = .44$, $p < .001$, 95% CI = .35, .54), and emotional exhaustion ($\beta = .34$, $p < .001$, 95% CI = .22, .47). However, no evidence of indirect effects from expressive suppression to emotional exhaustion ($\beta = -.06$, $p > .05$, 95% CI = -.19, .05), or from expressive amplification to emotional exhaustion ($\beta = .09$, $p > .05$, 95% CI = -.01, .19) were observed. As illustrated by Figure 3, I concluded that hypothesis four was not supported as only a direct effect from emotional dissonance to emotional exhaustion was evidenced by the data.

Figure 3

Indirect Effects Model with Standardised Coefficients (N = 412)
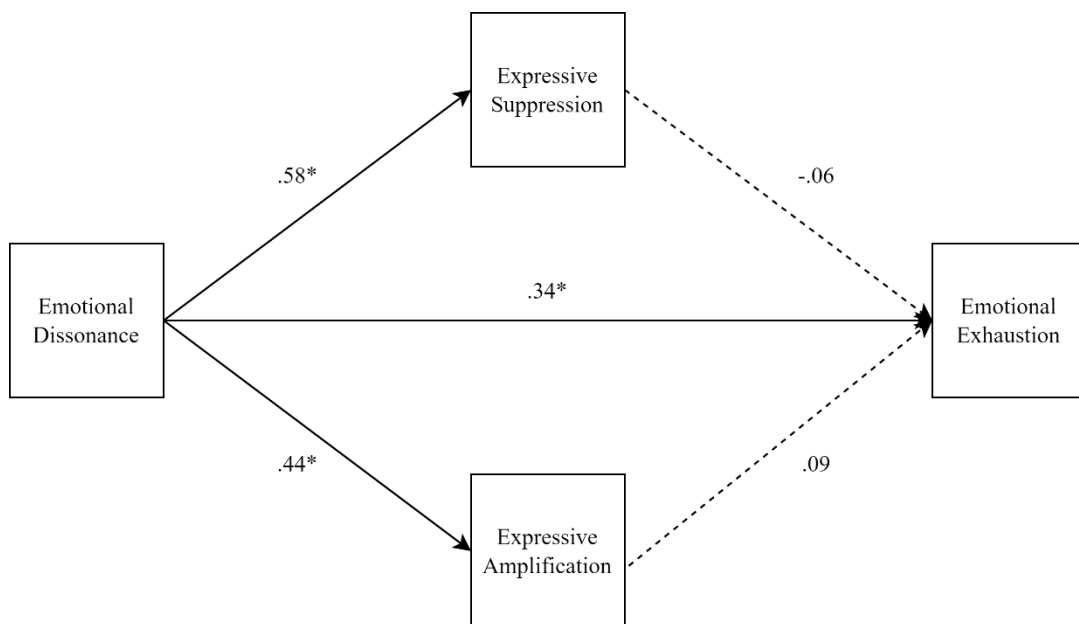
Note. * $p < .001$. STD Standardization model values presented.

Discussion

I examined the psychometric properties of the PELS to analyse whether it could provide emotional labour researchers with a tool designed to better capture the complexity of emotional labour constructs and account for measurement issues found in other measures. I sought to validate this measure within an under-researched population in the emotional labour literature. Additionally, I attempted to use this greater nuance to examine the theorised indirect effects from surface acting strategies on the relationship between emotional dissonance and burnout. The analysis found evidence to support the reliability and validity of the PELS in the under-researched occupational group of psychologists providing psychotherapy. However, I failed to find evidence of the theorised indirect effects from surface acting in the relationship between emotional dissonance and emotional exhaustion. These findings extend previous research by suggesting a pivot away from unidimensional measurement of surface and deep acting, as well as highlighting the need to differentiate between

emotional dissonance and regulatory strategies when measuring relationships between emotional labour and related variables.

Demonstrating acceptable psychometric properties of the PELS has significant implications for conceptualisations and operationalisations of emotional labour constructs. Results broadly support the PELS's factorial and convergent validity, internal consistency, and test-retest reliability. Evidence supporting validity and internal consistency are of particular note given the PELS is the first measure to include emotional dissonance and bidimensional conceptualisations of surface and deep acting within a single tool. Additionally, these promising psychometric properties were validated in an occupational group that had not previously being subject to emotional labour psychometric tool evaluation. The PELS provides researchers with a valid psychometric tool to explore emotional labour as it pertains to psychologists providing psychotherapy. Additionally, researchers using the PELS will now be able to clearly distinguish relationships between emotional dissonance, components of surface acting, and components of deep acting with specific outcomes.

The comparatively weaker psychometric properties demonstrated by the PELS's deep acting subscales (attentional deployment and re-evaluation) may indicate the need for further examination. Although strong psychometric properties were demonstrated by the surface acting subscales (expressive suppression and expressive amplification), the deep acting subscales displayed weaker convergent validity statistics. One explanation may be that the ELS-R's deep acting subscale and the PELS's deep acting subscales may measure latent variables with differing boundaries. For example, the ELS-R's unidimensional conceptualisation of deep acting incorporates both attentional deployment and cognitive change strategies. The

attentional deployment subscale on the PELS may be correlated with the attentional deployment component to the ELS-R's conceptualisation, but not the cognitive change component. Similarly, the PELS's re-evaluation subscale may correspond to the ELS-R's cognitive change component of deep acting, but not attentional deployment. This would explain why significant, but comparatively weaker relationships, were observed between the PELS and ELS-R's deep acting subscales relative to their surface acting subscales (where the ELS-R adopts a bidimensional conceptualisation and measurement). However, another explanation may be that the PELS's deep acting subscales poorly represent their respective latent constructs. The only other measure of emotional labour containing a bidimensional measurement of deep acting is Alabak and colleagues' (2020) measure. Although convergent validity of Alabak and colleagues' (2020) measure has not been established in the literature, a convergent validity analysis between it, the ELS-R, and the PELS may examine this question.

Covariances between the PELS's emotional dissonance and deep acting subscales may have interesting theoretical implications. Emotional dissonance had a significant positive covariance with attentional deployment, but a non-significant covariance with re-evaluation. This may suggest that attentional deployment strategies may not produce desired emotional states by realigning felt and expressed affect which questions traditionally accepted wisdoms surrounding emotional labour (Grandey, 2000; Grandey & Gabriel, 2015; Grandey & Melloy, 2017). As emotional dissonance is strongly correlated with emotional exhaustion (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012), this would further evidence the suggestion that unidimensional measurements of deep acting introduce unnecessary measurement error by being unable to account for attentional

deployment and cognitive change's opposing relationships with outcomes. The comparative non-significant covariance observed for the PELS's re-evaluation factor may suggest that it would be the most preferable method of emotion regulation within the emotional labour framework as all other subscales had significant positive covariances with emotional dissonance. Therefore, the PELS's pattern of covariances between subscales may evidence the need to transcend unidimensional measurement of emotional labour strategies and may suggest that interventions to assist workers to manage emotional labour may benefit from emphasis on developing cognitive change strategies specifically.

Failing to find support for the proposed indirect effects model extends literature attempting to identify explanatory pathways between emotional labour and burnout. Previous surface acting mediation studies (Hülsheger & Schewe, 2011; Mesmer-Magnus et al., 2012) have been limited by their use of measures that do not adequately control for emotional dissonance resulting in a lack of clarity regarding unique contributions of variance. Paralleling Zapf and colleagues' (2021) findings regarding negative emotion, my findings suggest that surface acting strategies do not contribute unique variance to emotional exhaustion beyond that of preserving a state of emotional dissonance. This supports theoretical assertions of emotional dissonance as a mechanism of action between emotional labour and its outcomes (Grandey & Gabriel, 2015; Hochschild, 1983), but questions research suggesting that surface acting strategies themselves contribute to emotional exhaustion beyond their elongation of emotional dissonance (Hülsheger & Schewe, 2011; Mesmer-Magnus et al., 2012). Additionally, it suggests that emotional dissonance may underlay the pernicious consequences of suppressing emotion found in broader emotion regulation

literature (Chervonsky & Hunt, 2019; Gross, 2002, 2013). Therefore, the indirect effects model findings extend emotional labour's theoretical and empirical literature.

The indirect effects analysis has significant implications for future research. Failing to support an indirect effect from surface acting but observing a direct effect of emotional dissonance on emotional exhaustion supports a refined focus on measuring emotional dissonance in future research. However, this finding must be considered in the context of the unique sample in which it was found. Much of existing emotional labour literature uses tools that either measure surface acting without accounting for emotional dissonance (e.g., Brotheridge & Lee, 2003; Lee & Brotheridge, 2011), or measure emotional dissonance without accounting for surface acting (Zapf et al., 1999). Additionally, literature frequently draws conclusions about the unique effect of surface acting (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). However, due to the measurement issues inherent in the psychometric tools used to draw such conclusions, these studies may not rule out the possibility that such findings are more attributable to latent emotional dissonance captured by measures of surface acting. My findings contrast this literature by suggesting emotional dissonance should take precedence over surface acting when studying emotional labour's effects in future research, at least in the context of psychologists providing psychotherapy.

An alternative explanation for my findings regarding emotional dissonance and surface acting may be that such dissonance is particularly threatening for psychologists providing psychotherapy. I speculate that psychologists are likely "high-identifiers" (after multiple search attempts I found no research that has explored this concept) with their occupational role. Greater identification with one's occupational role has been argued to reduce the costs of surface and deep acting as

they enable one to behave consistent with their social identity (Ashforth &

Humphrey, 1993; Humphrey et al., 2015). However, experiencing states of emotional

dissonance such as experiencing anger or a lack of compassion may be more

distressing for people highly identifying with the role of a psychologist as such

emotions may be particularly threatening to one's identity as "psychologist" (Van

Der Merwe, 2019). Therefore, the non-significant relationship found between surface

acting strategies and emotional exhaustion may be a result of such strategies enabling

psychologists to align behaviour with valued identity (Humphry et al., 2015),

whereas emotional dissonance may be experienced as a threat to one's self-identity

(Van Der Merwe, 2019). As I did not measure participant identification with the

occupational role of psychologists this contention can only be considered

speculative, however, it may provide a possible explanation for my findings.

   Finding evidence for the reliability and validity of the PELS supports its use

in future research. Given that existing measures are unable to adequately distinguish

between emotional dissonance and surface acting, the PELS appears well placed as a

tool for future researchers to utilise to conduct such research. The use of existing

measures or the development of further refined psychometric tools is not precluded

by the PELS's validation, however, researchers must consider how their data

distinguishes between emotional dissonance and surface acting's mutual and

exclusive variance. Therefore, my findings support a shift to measuring and

examining emotional dissonance as the preeminent variable in the relationship

between emotional labour and burnout in psychologists providing psychotherapy,

and that the PELS can be viewed as a key tool to utilise for this purpose. Replication

of such results in other occupational groups would support such a pivot in the

broader emotional labour literature.

The indirect effects analysis has significant practical implications for the emotion regulation of individual workers. As consistent with broader theory (Grandey & Gabriel, 2015; Grandey & Melloy, 2017), finding emotional dissonance to possibly be the primary concern in the relationship between emotional labour and burnout suggests that using emotion regulation that alleviates or reduces emotional dissonance may ameliorate its negative consequences. My findings suggest that this can be achieved through surface *or* deep acting provided the function of alleviation of emotional dissonance is achieved. I acknowledge that suppressing and faking emotions are *likely* to prolong emotional dissonance and be harmful in that context and that emotional suppression is consistently demonstrated to be harmful in emotion regulation literature (Chervonsky & Hunt, 2019; Gross, 2002, 2013). However, my findings suggest that surface acting may not have a negative effect on well-being if it is used in a manner that alleviates emotional dissonance. An illustrative example of this is a psychologist experiencing frustration while treating a client with narcissistic personality disorder displaying hostility towards the therapist (as is commonly observed, e.g., Tanzilli et al., 2017). Maintaining empathic concern through surface acting despite experiencing frustration may promote a bedrock of secure attachment to encourage the client to explore and reflect on this interpersonal process. This exploration may facilitate the client to shift out of such a behavioural mode (Drozek & Unruh, 2020; Weinberg & Ronningstam, 2020), which may reduce the psychologist's experience of frustration and return to emotional congruence. It is possible that using deep acting to portray empathic concern may be preferred in this scenario, nevertheless, the indirect effects analysis suggests that performing these emotions via surface acting may be a viable alternative in some contexts. This may suggest the need to focus more on function over form of emotion regulation and how

it changes the contingent environment/context between actors within an interaction producing emotional labour. Support for this contention may be found in previous literature. (Andela et al, 2015; Grandey et al., 2013). Andela and colleagues found feigning emotion to be associated with reduced burnout, whereas Grandey and colleagues (2013) suggest that goal achievement through surface acting may replenish psychological resources. In summary, my findings and the presented literature suggests that surface acting resulting in achieving the goal of a psychologist/client interaction may not result in a negative effect on emotional exhaustion.

Another explanation for the indirect effects findings and those of Andela and colleagues (2015) may be the perspective from which emotional dissonance is viewed. As discussed in Chapter Three, feigning emotion while accepting (and not suppressing) emotion is consistent with the concept of psychological flexibility (Hayes et al., 2006). Through the lens of psychological flexibility, emotional dissonance would create one avenue of psychological drain that would be compounded by further drains from unsuccessful attempts to modify one's experienced and expressed emotions. Depletion of psychological resources is subsequently minimised if one is accepting of emotional dissonance and makes no attempts to modify this. Additionally, if feigned emotions align with one's authentic values, then there is no alienation from oneself as the authentic valued self is presented (despite the possible presence of emotional dissonance). Therefore, it may be possible to feign emotions while maintaining authenticity and minimising psychological resource depletion. This establishes theoretical precedent to challenge the commonly accepted wisdom that surface acting (especially when measuring this unidimensionally) is always harmful to the self.

My findings suggest that variables that elicit, prevent, and alleviate emotional dissonance are key in the relationship between emotional labour and negative outcomes. Research has covered multiple such variables (for reviews see Grandey & Gabriel, 2015; Grandey & Melloy, 2017) that apply in general contexts, but this lacks occupational specificity. In the context of this study's sample (psychologists providing psychotherapy), several variables hold promise as key constructs but have not been subject to quantitative analysis. Negative evaluations of efficacy, psychological flexibility, experience, reflection, self-care, and other variables (Chapter Three; Van Der Merwe, 2019) are all such constructs that have been qualitatively linked to the elicitation, prevention, and amelioration of emotional dissonance. Finding quantitative support for the capacity of these variables to reduce emotional dissonance would inform recommendations for psychologists to maintain personal well-being. Nevertheless, as these constructs have qualitative support for their capacity to reduce emotional dissonance and my finding of this to be the key variable in the emotional labour process suggests that psychologists would benefit from developing skills and experience in the aforementioned variables.

Future Directions

My results suggest that future research may benefit from using measurement tools that operationalise emotional labour in the manner of the PELS. The findings contribute to a growing body of literature (e.g., Alabak et al., 2020; Andela et al., 2015; Lee & Brotheridge, 2011) supporting the bidimensional measurement of surface acting and deep acting strategies and the inclusion of an emotional dissonance factor. These findings also highlight the potential greater importance of emotional dissonance over regulatory strategies in explaining the links between emotional labour and its outcomes. Therefore, a re-evaluation of common tools used

to measure emotional labour that do not share the same conceptualisations (e.g., ELS, ELS-R, FEWS, DEELS) seems justified. Past findings based on these measures should be interpreted with these limitations in mind. I do not assume that the PELS provides the most suitable tool across all contexts, but it may provide a useful starting point for further refinement and development of alternative measures.

The indirect effects model results suggest the need for further research and a re-evaluation of mechanisms of action. The analysis results suggest that emotional dissonance itself, as opposed to surface acting strategies, may be the key mechanism of action in emotional labour's relationship to emotional exhaustion in psychologists providing psychotherapy. First, my findings are based upon a cross-sectional analysis and so a longitudinal replication of this finding would provide stronger evidence regarding any mediation effect. Replicating such a finding longitudinally would suggest the need for future emotional labour research to directly measure emotional dissonance with tools such as the PELS, as opposed to other tools that either confound surface acting and emotional dissonance, or research that *implies* effects of emotional dissonance from measurements of surface acting. Additionally, replication of these findings in other occupational groups is required to support the notion that emotional dissonance is the key mechanism in the relationship between emotional labour and its outcomes.

Further revision and exploration of the PELS may be beneficial. My final CFA model for the PELS only included two items within the re-evaluation subscale. Further expansion of this factor may provide more robust measurement of its latent variable. The small, although significant, correlations between the PELS's attentional deployment and re-evaluation subscales and the deep acting scale of the ELS-R may also suggest the need for further exploration, and I propose a comparison between

the PELS, ELS-R, and Alabak and colleagues' (2020) measure would be a logical next step. These analyses may further verify the PELS's validity or may indicate the need for revisions or inclusion of more/different items. An analysis of discriminant validity would also further the psychometric validation of the PELS.

Future research may also benefit from examining the quantitative dimensions of emotional labour's occurrence and consequent links to outcomes. As measures of emotional labour do not typically measure duration, intensity, or total volume of emotional labour, it is unclear how these different dimensions may contribute to variance in outcomes. Measures generally ask participants to indicate the frequency of strategy uptake (and the PELS does this regarding emotional dissonance also), it may be possible the effects due to duration, intensity, and/or total volume are not being adequately measured. Additionally, as suggested by the substantial literature on mindfulness and psychological flexibility (e.g., Baer, 2003; Hayes et al., 2006), these quantitative domains may be less important than a person's meta-experience of emotional labour. For example, a worker that engages in highly frequent emotional labour with low intensity or duration may have different outcomes to one that performs emotional labour less frequently but more intensely and for longer periods. This difference likely reflects occupational role difference such as the difference between the frequency, intensity and duration a nurse's interactions with many patients and staff members over one day compared to a psychologist consulting with fewer clients but for greater periods of time. Similarly, individuals holding negative meta-cognitions regarding emotional labour's experience may experience more consequent distress and resource drain than those more psychologically accepting and accommodating of emotional dissonance. The available measures of emotional labour have no means to conceptualise and account for such differences easily but

the capacity to do so would provide greater nuance in research and more targeted

findings.

Limitations

The generalisability of my findings may be reduced by sample homogeneity.

The sample exclusively comprised psychologists providing psychotherapy, which

may affect the generalisability of these findings to other professions. As argued in

Chapter Three and supported by Van Der Merwe and Wetherell's (2020) findings,

psychologists may experience emotional labour in a unique manner compared to

other healthcare professions and may possess unique qualities affecting surface

acting that could have influenced my indirect effects analysis. The sample in this

chapter was heavily weighted towards female gender (82.77%). Although this is

consistent with gender representation at a clinical level (Psychology Board of

Australia, 2019) and I found no evidence of significant associations between

identified gender and variables of interest, this bias nonetheless may limit

generalisability. Similarly, the sample was primarily comprised of psychologists

living in Australia, New Zealand, and the United Kingdom, which may reduce the

generalisability of findings to different cultures and countries. There are examples of

adaptations of emotional labour measures from one culture to another requiring

significant alterations in items and/or factor structure (e.g., Carlotto et al., 2016; Jang

et al., 2015). Although the PELS is itself an adaptation of a measure developed in

another cultural context (Andela et al., 2015), this does not rule out further

adaptations of the PELS suffering similar concerns and my findings should be

interpreted with this caveat. It is also possible that the effect size of the CFA may be

overestimated as the total sample of 412 participants was underpowered according to

Kline's (2016) estimates (Geldman & Carlin, 2014).

Emotional labour measures are limited by their conceptualisations of emotion regulation. Although the PELS and other measures of emotional labour (e.g., Alabak et al., 2020; Lee & Brotheridge, 2011) provide required nuance in expanding the factors of deep acting and surface acting, they are still constrained by these approaches to emotion regulation. Other forms of emotion regulation may be as important to the emotional labour process but are not directly captured by existing measures and conceptualisations. For example, mindfulness as a regulatory strategy does not fit neatly within the surface and deep acting sub-factors (as argued in Chapter Three) and consequently is not adequately accounted for by emotional labour measures in their current form. This echoes Grandey and Gabriel's (2015) recommendation that research progress beyond the traditional surface and deep acting view of emotion regulation. Therefore, the PELS and other emotional labour measures are limited by their attachment to surface and deep acting as the lens through which to view emotion regulation strategies.

Conclusion

Findings presented in this chapter support the use of the PELS as a valid, reliable, and convenient measure of emotional labour that allows for nuanced exploration of constructs. It is also the first emotional labour psychometric tool to be validated exclusively in a sample of psychologists providing psychotherapy. This measure is the first to incorporate bidimensional measurement of surface and deep acting strategies along with a separate emotional dissonance factor. However, I recommend further examination of the PELS, particularly for the attentional deployment and re-evaluation subscales. These findings provide further support to growing literature supporting bidimensional measurement of emotional labour regulatory strategies as opposed to using common measurement tools that

conceptualise these strategies as unidimensional and consequently include greater measurement error. The SEM of indirect effects suggests that surface acting strategies may only be harmful through their preservation of emotional dissonance and may not uniquely contribute to burnout. This supports a shift away from surface acting to emotional dissonance as the key mechanism of action in emotional labour literature. Beyond the academic implications of my findings is the recommendation that interventions aiming to promote well-being through management of emotional labour should primarily aim to prevent and alleviate emotional dissonance.

Chapter Five – Overview

In Chapter Five, I examine the research question *what individual-based factors may assist psychologists providing psychotherapy to reduce emotional labour's impact on burnout?* I draw upon the findings of the previous studies to test a structural equation model that explores this question. As no interventions to address emotional labour in psychologists exist, I sought to test preliminary evidence for person-level strategies drawn from Chapter Three's conclusions. The specific constructs examined were self-compassion, psychological flexibility, and career experience. It was thought that gathering evidence for self-compassion and psychological flexibility as effective management strategies for emotional labour may inform future interventions to assist psychologists to reduce their level of emotional labour. The results of the structural equation model supported an indirect effect of emotional dissonance on the relationship between self-compassion and emotional exhaustion, and that the relationship between self-compassion and emotional dissonance was conditional on psychological flexibility. The model did not support the theorised moderating effects of psychological flexibility and career experience on the relationship between emotional dissonance and emotional exhaustion. I conclude the chapter by suggesting that possessing high levels of both self-compassion and psychological flexibility can be helpful in reducing the frequency and duration of emotional dissonance, which in turn may assist in reducing emotional exhaustion. The numerous significant implications of these findings for various literature bodies are discussed.

Chapter Five – Emotional Labour and Emotional Exhaustion in Psychologists:

Preliminary Evidence for the Protective Role of Self-Compassion and

Psychological Flexibility

Burnout is a syndrome comprising emotional exhaustion, depersonalisation, and a reduced sense of accomplishment (Maslach & Jackson, 1981). Concerning rates of burnout have been observed in studies of psychologists over several years (e.g., Di Benedetto & Swadling, 2014; O'Connor et al., 2018; Simionato & Simpson, 2018; Trombello et al., 2021). For example, recent reviews have estimated that more than half of surveyed psychologists report significant symptoms of burnout (O'Connor et al., 2018; Simionato & Simpson, 2018), with emotional exhaustion appearing to be the most reported dimension of burnout (McCormack et al., 2018).

Emotional labour is a contributor to burnout across multiple professions (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). However, emotional labour's relationship with burnout in psychologists providing psychotherapy has only received relatively recent attention (Carlotto et al., 2016; Rodriguez & Carlotto, 2017; Van Der Merwe, 2019; Van Der Merwe & Wetherell 2020; Weaver & Allen, 2017; Xanthopoulou et al., 2018; Yanchus et al., 2010). The scant attention paid to this potentially important construct is highlighted by its lack of inclusion in large-scale reviews of predictors of burnout in this occupational group (e.g., McCormack et al., 2018; O'Connor et al., 2018; Rupert et al., 2015; Simionato & Simpson, 2018; Yang & Hayes, 2020). Although the findings of Chapter Three and another qualitative study (Van Der Merwe, 2019) have pointed to potential strategies and mechanisms that psychologists use to mitigate emotional labour's personal impact, none of these strategies have been examined quantitatively. Therefore, although these strategies seem to be subjectively beneficial, it is unclear

whether such strategies could be recommended to others without objective analysis and support. Consequently, evidence for potential methods for psychologists to effectively manage emotional labour is purely based on analyses of interview data. Therefore, the current state of the literature is unable to make robust evidence-based recommendations on potential means to reduce emotional labour's impact on burnout in psychologists. I sought to expand previous research by exploring possible explanatory pathways in constructs proposed in qualitative literature to ameliorate emotional labour's impact on burnout in psychologists. As there is very limited literature regarding what constructs may influence the relationship between emotional labour and burnout in psychologists, I chose to examine potential variables that were identified in previous chapters of this thesis. Specifically, I examined evidence for whether self-compassion, psychological flexibility, and career experience affect relationships between emotional labour and burnout in psychologists. The justification of examining self-compassion, psychological flexibility, and career experience in this analysis is provided below.

Emotional Labour and Burnout

Emotional labour refers to the process of regulating emotion in service of one's occupational role (Hochschild, 1983; Grandey & Sayre, 2019). Recent conceptualisations of emotional labour view the construct as dynamic and comprising display rules, emotion regulation, and emotion performance (Grandey & Gabriel, 2015). According to emotional labour theorists (e.g., Grandey & Gabriel, 2015; Grandey & Melloy, 2017), display rules refer to perceived guidelines governing "acceptable" emotional expression, emotion regulation refers to affect processing when felt emotion is inconsistent with display rules (termed emotional dissonance), and emotion performance refers to publicly observable affective

displays. Two mechanisms are proposed to regulate emotional dissonance – surface acting and deep acting strategies (Hochschild, 1983). Surface acting occurs when an individual regulates emotional dissonance via suppression and faking of emotion, whereas deep acting involves adopting strategies that genuinely realign one's felt and expressed emotion.

Two mechanisms of action are thought to explain the relationship between emotional labour and burnout. Grandey and Gabriel (2015) summarize literature that indicates emotional labour likely contributes to burnout through distress experienced during inauthentic emotional states and psychological resource drain created by regulating this emotional dissonance. Using surface acting to regulate emotional dissonance is thought to increase burnout through the prolonging of emotional dissonance and the creation of a resource loss spiral (Grandey & Gabriel, 2015). Interestingly, although there may be some limited evidence that deep acting strategies may moderate the relationship between emotional dissonance and emotional exhaustion (Andela & Truchot, 2017), deep acting is generally found to be unrelated to burnout (Grandey & Gabriel, 2015). However, Chapter Four's findings suggested that previous surface and deep acting findings may be confounded by measurement error and that emotional dissonance specifically accounts for more variance in the relationship between emotional labour and burnout in the context of psychologists providing psychotherapy.

There is a need to identify individual-level variables with the capacity to be increased through training/practice that may positively influence emotional labour's relationship with burnout. The identification of modifiable constructs existing within an individual's locus of control would enable the development of interventions to assist individuals to manage emotional labour effectively. Quantitative support has

been found for multiple moderating variables affecting emotional labour's

relationship with burnout (see Grandey & Melloy, 2017 for a review), none of which

have been explored exclusively within the context of psychologists providing

psychotherapy. However, Chapter Three and Van Der Merwe's (2019) findings

identified possible helpful strategies within this specific occupational group. Such

possible beneficial modifiable strategies within the psychologists' control identified

in these papers included emotion regulation strategies, cognitive evaluations of self-

efficacy, debriefing, self-reflection, general self-care practices, self-compassion, and

psychological flexibility. Of these variables, self-compassion and psychological

flexibility appear to be the most novel and amenable to existing interventions (e.g.,

Eriksson et al., 2018). Consequently, I determined that examining how self-

compassion and psychological flexibility interact with emotional labour and burnout

constructs could potentially be a fruitful course of study.

Self-compassion and Emotional Labour

Self-compassion is yet to be examined in the context of emotional labour but

holds promise as potentially assisting psychologists to experience less emotional

dissonance and consequent emotional exhaustion. Self-compassion refers to

engaging in self-directed kindness and normalising of one's experience without

reactivity to unpleasant thoughts and feelings (Neff, 2003). Cognitive patterns

involving unrealistic standard setting and self-criticism correlate strongly with

burnout in psychologists (Kaeding et al., 2017; Richardson et al., 2020; Simpson et

al., 2019; Turnbull & Rhodes, 2021). In contrast, self-compassionate practices may

ameliorate the impact of self-criticism on burnout (Richardson et al., 2020), with a

randomized controlled trial supporting self-compassion as an intervention to reduce

burnout in psychologists (Eriksson et al., 2018). The findings of Chapter Three of

this thesis suggested that self-compassion may impact the relationship between emotional labour and its outcomes through the mechanism of improved management of self-critical thought patterns. In that chapter, psychologists reported that self-criticism triggers an intrapsychic state of emotional dissonance. I suggested that improved management of this self-criticism would reduce the frequency by which emotional dissonance is experienced, thereby reducing associated negative outcomes. Paralleling the findings of Chapter Three, self-efficacy has been linked with burnout in psychologists (Kim et al., 2018) and self-compassion has been demonstrated to improve psychologist self-efficacy (Latorre et al., 2021).

Self-compassion and emotional labour may also be related through other mechanisms beyond improved management of self-critical thought patterns. Self-compassion may assist emotional labour management by assisting psychologists to access compassionate points of view toward their clients, encouraging more authentic emotional expression, and promoting a sense of universality with emotional challenges. Embodying compassion is viewed as a key tenet of psychotherapy (Baer, 2010) and the associated emotional expressions can be considered as display rules when viewed through the lens of emotional labour. Despite some mixed findings (e.g., López et al., 2018), self-compassion may increase the ease by which psychologists access compassion for their clients (Beaumont et al., 2016; Neff & Beretvas, 2013; Neff & Pommier, 2013). Accessing this compassion for clients would result in less frequent and prolonged emotional dissonance during psychotherapy. Greater authenticity in emotional expression may be another mechanism by which self-compassion reduces strain associated with emotional labour in clinicians. Self-compassion has been linked with more authentic emotional exchanges between therapist and client (Patsiopoulos & Buchanan, 2011). Self-

compassion also promotes perceiving one's experience as universal through a common sense of humanity (Germer & Neff, 2019). Maintaining a sense of universality with common countertransference reactions such as feeling overwhelmed, hopeless, and angry (Cartwright et al., 2014) may enable psychologists to be less emotionally reactive in secondary responses to these emotions due to feeling less alone in such experience. These possible mechanisms may reduce the frequency and duration of emotional dissonance and its consequent outcomes. I also acknowledge that self-compassion may relate to emotional exhaustion through other previously identified mechanisms (Bibeau et al., 2016; Gerber & Anaki, 2021; Germer & Neff, 2019; Prudenzi et al., 2022), therefore I do not hypothesize emotional dissonance to account for the total relationship between these variables. Consequently, I propose the following hypotheses (see Figure 4):

Hypothesis one: Self-compassion will be significantly and negatively associated with emotional dissonance.

Hypothesis two: Self-compassion will be significantly and negatively associated with emotional exhaustion.

Hypothesis three: Self-compassion will exert a partial indirect effect on emotional exhaustion through emotional dissonance.

Psychological Flexibility and Possible Conditional Effects

Psychological flexibility may positively influence relationships between self-compassion, emotional labour, and emotional exhaustion. Psychological flexibility is the core tenet of ACT and can be defined as "*the ability to contact the present moment more fully as a conscious human being, and to change or persist in behaviour when doing so serves valued ends*" (Hayes et al., 2006, p. 7). Although self-compassion and psychological flexibility are under researched constructs in the

emotional labour literature, intervention studies have found mindful self-compassion (a combination of self-compassion and the mindfulness and acceptance components of psychological flexibility) to be effective in reducing symptoms of burnout (Eriksson et al., 2018; Neff et al., 2020). Research also suggests that psychological flexibility and self-compassion have reciprocal influences such that training one can increase the other (Yadavia et al., 2014). However, psychological flexibility has elements distinct from self-compassion. For example, although non-judgmental mindful awareness and acceptance of experience appear to be overlapping tenets, cognitive defusion, values, committed action, and a self-as-context perspective are factors unique to psychological flexibility.

I propose that psychological flexibility's unique factors may enhance self-compassion's relationship with emotional dissonance. For example, the non-reactivity to unpleasant thoughts and emotions that psychological flexibility facilitates may create greater psychological distance from one's experience to enable easier deployment of the self-kindness and common humanity aspects of self-compassion. Greater psychological flexibility may also orient oneself to evaluating their competence via their connection with values underlying the provision of psychotherapy as opposed to measurements based on therapeutic change occurring outside of one's control (as identified as potentially helpful in Chapter Three). Consequently, a psychologically flexible and self-compassionate psychologist may more easily access compassionate thoughts, emotions, and responses to a client, thereby reducing emotional dissonance. Therefore, I theorise that the effect of self-compassion on emotional dissonance is likely to be enhanced in individuals who are simultaneously psychologically flexible. Consequently, I propose (see Figure 4):

Hypothesis four: The relationship between self-compassion and emotional dissonance will be conditional on psychological flexibility, such that the relationship will be stronger for individuals higher in psychological flexibility.

Psychological flexibility may increase the capacity of psychologists to tolerate emotional dissonance. Empirical support for the utility of psychological flexibility and its subcomponents such as mindfulness and acceptance to reduce burnout in psychologists, health, and service workers has already been established (Biron & van Veldhoven, 2012; Di Benedetto & Swadling, 2014; Hegel et al., 2021; Onwezen et al., 2014; Puolakanaho et al., 2018; Salvado et al., 2021; Yang & Hayes, 2020). Interestingly, the relationship between mindfulness and burnout has been found to be partially mediated by surface acting (Hülsheger et al., 2013) and deep acting (Ma et al., 2021), which may support the contention of Chapter Three, that psychological flexibility comprises components of surface and deep acting simultaneously. Possible explanations for psychological flexibility's observed relationship with emotional exhaustion are that it may enable practitioners to reduce their psychological resource expenditure on controlling thoughts and emotions, or it may reduce distress relating to emotionally dissonant intrapsychic states (Biron & van Veldhoven, 2012). This theorised explanatory pathway suggests that psychologically flexible psychologists may have greater psychological resources available to offset the potential negative effects of emotional dissonance. In other words, psychological flexibility may exert a moderating effect on the relationship between emotional dissonance and emotional exhaustion. Thus, I propose (see Figure 4):

Hypothesis five: The relationship between emotional dissonance and emotional exhaustion will be conditional on psychological flexibility, such that the relationship will be weaker for individuals who are higher in psychological flexibility.

Experience and Emotional Labour

Career experience may assist psychologists to cope with emotional dissonance. The findings of Chapter Three and previous literature (Grandey & Gabriel, 2015) suggest that people with greater experience in their work may have more opportunities to regulate emotional labour and emotional dissonance more effectively. According to Grandey and Gabriel's (2015) theoretical assertions, repeated exposure to managing common triggers of emotional dissonance may result in workers developing more functional strategies to manage emotional labour without it contributing to negative outcomes such as burnout. The preliminary evidence from Chapter Three suggests that career experience may act as a buffer from psychological resource loss for psychologists engaging in the emotional labour process while providing psychotherapy. Therefore, experience could potentially act as a moderating variable in the relationship between emotional dissonance and emotional exhaustion in psychologists providing psychotherapy. To the best of my knowledge, such a relationship is yet to receive empirical exploration in this specific manner. Consequently, I propose (see Figure 4):

Hypothesis six: The relationship between emotional dissonance and emotional exhaustion will be conditional on career experience, such that the relationship will be weaker for individuals who have more career experience.

Figure 4

Hypothesised Conditional Indirect Effects Model
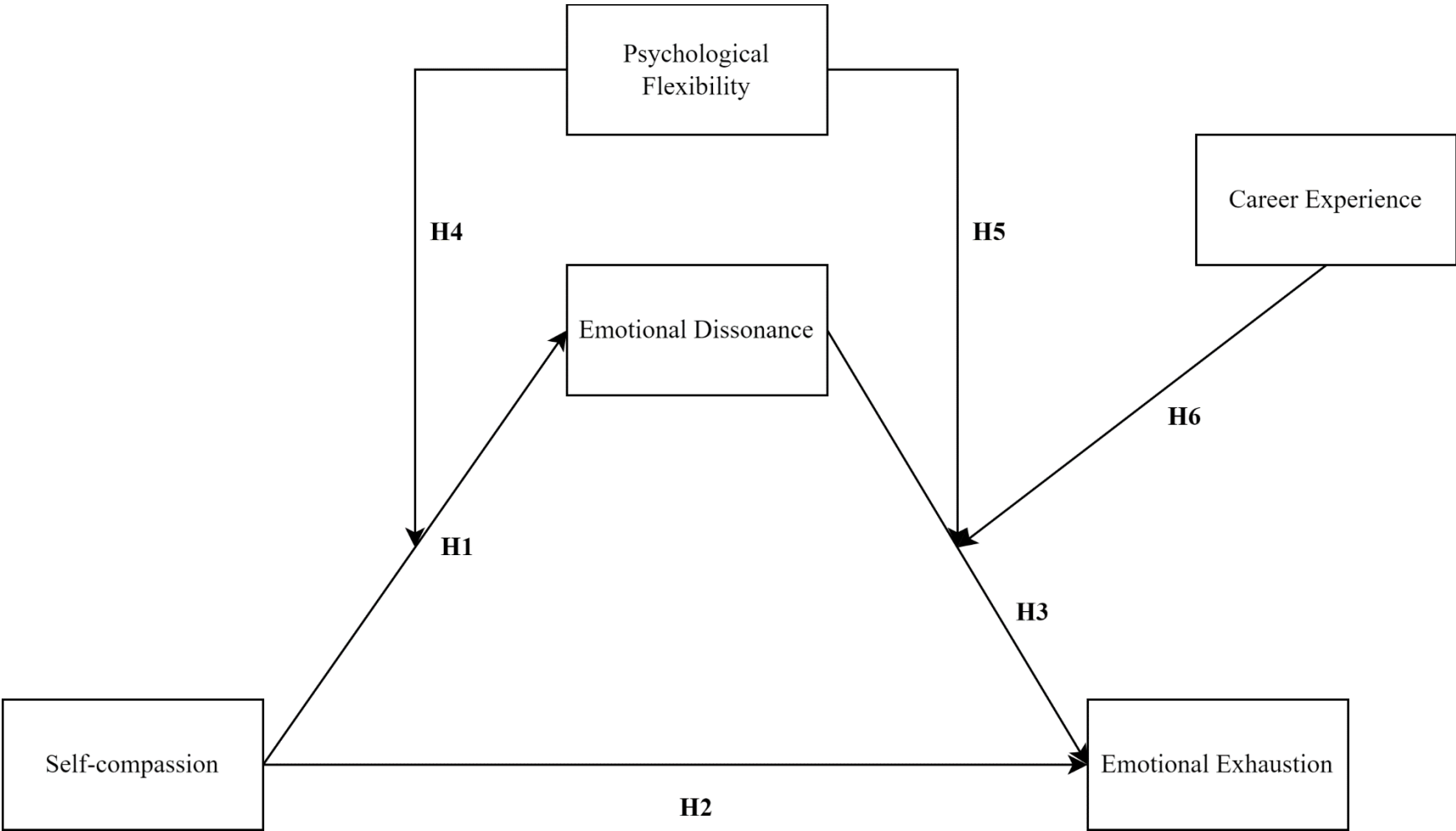
Method

Design, Participants, and Procedure

A correlational and cross-sectional research design was used for this analysis. Collection of longitudinal data was attempted but it was decided that the most appropriate analysis would be cross-sectional for the reasons outlined in Chapter Four (p. 105). This chapter's analysis derived from the same dataset as collected in Chapter Four. Consequently, only salient information for this analysis and aspects of the study that differ from Chapter Four will be presented here. A total of 412 participant responses from registered psychologists who provide psychotherapy in their work were used for this analysis. The mean age was 40.19 years (range = 20 – 70; SD = 10.68) with 10.39 years of experience (range = 0.90-31; SD = 7.86). Most identified as female (82.77% female, 16.70% male, 0.48% non-binary) and most participants resided in Australia (82.04%), followed by New Zealand (13.13%), the United Kingdom (2.18%), Canada (1.70%), and the United States of America (1.70%). Participants provided an average of 16.95 session of psychotherapy per week (range = 2-36; SD = 7.39). See Chapter Four (p. 93) for more details on the demographics of the sample. Concerningly, 59.71% of our sample reported high levels of emotional exhaustion (n = 246) and 91.99% reported moderate or high rates of emotional exhaustion (n = 379), according to Maslach and Jackson's (1996) proposed cut-off scores. While there is conjecture on the appropriateness of these specific cut-off scores (e.g., Berjot et al., 2017), these percentages are nonetheless concerning. An a-priori power analysis suggested that 380 participants were required to achieve adequate power for the analysis (Kline, 2016). This study used the same dataset as collected in Chapter Four.

Measures

Measures From Chapter Four

As the current study is based upon the same dataset as obtained in Chapter Four, the details of measure of control variables, emotional dissonance, and emotional exhaustion are already discussed (see p. 96 for details). Measures of self-compassion and psychological flexibility were unique to this analysis and are detailed below.

Self-Compassion

The Self-Compassion Scale – Short Form (SCS-SF; Raes et al., 2011) was used to assess self-compassion. The SCS-SF is a 12-item measure with six subfactors and allows for a total mean self-compassion score to be calculated. Items such as "*I'm disapproving and judgmental about my own flaws and inadequacies*" are scored on a 5-point scale ranging from *almost never* to *almost always*. Total mean scores for self-compassion can range from 1 to 5, with higher scores indicating greater self-compassion. There has been recent conjecture about the factor structure of the SCS-SF and the original measure from which it was derived (e.g., Hayes et al., 2016; Kotera & Sheffield, 2020). However, a total score for self-compassion is commonly used and has justification (Cleare et al., 2018; Neff et al., 2019; Neff et al., 2018). As a psychometric analysis of the SCS-SF is beyond the scope of this paper, I decided to use the one-factor model traditionally seen in previous literature. General validity and reliability of the SCS-SF has been established (Raes et al., 2011) and it performed well in my study ($\alpha = .87$).

Psychological Flexibility

The Work-Related Acceptance and Action Questionnaire (WAAQ; Bond et al., 2013) was used to assess psychological flexibility in the work context. The

WAAQ has seven items such as "*My thoughts and feelings do not get in the way of my work*" measuring a global construct of psychological flexibility. Items are responded to on a 7-point scale ranging from *never true* to *always true*. A total score ranging between 1 and 49 is computed with higher scores indicating a greater presence of psychological flexibility. The WAAQ has demonstrated acceptable psychometrics (Bond et al., 2013) that were supported by my findings ($\alpha = .87$). The WAAQ was chosen over the Acceptance and Action Questionnaire – II (Bond et al., 2011) because my research question examined relationships between variables in the context of work. As the WAAQ has demonstrated validity and reliability and is more aligned to psychological flexibility in the work context, I determined that it was a more appropriate instrument choice than the AAQ – II.

Analysis

Structural Equation Modelling (SEM) was used to test the hypothesized indirect and conditional effects proposed by my statistical model. The overall conditional indirect effects model was tested using model 64 of Hayes' (2022) PROCESS macro v. 4.1 for SPSS version 26, estimating 95% confidence intervals with 10,000 bootstrap iterations. I examined the estimated pathways in the conditional indirect effects model for statistical significance to determine whether results supported my hypotheses. I controlled for social desirability bias, age, and number of sessions per week in my analysis by including them as covariates in the model. Assumptions of normality, linearity, and homoscedasticity in the data were tested and met. As discussed in Chapter Four (p. 105), it was initially planned to test longitudinal cross-lagged models. However, due to the lack of variance in emotional exhaustion between time points, we determined that it was most appropriate to analyse the data cross-sectionally. Consequently, the term *conditional effect* instead

of *moderation* is used subsequently in this study to acknowledge the cross-sectional

nature of the analysis (Kline, 2016) and to remain consistent with Chapter Four.

Results

Table 6 presents the descriptive statistics and Table 7 contains correlations

for all variables used in the analysis. All variables of interest had significant zero-

order correlations in expected directions. Hypotheses one to three proposed a partial

indirect effect between self-compassion and emotional exhaustion through emotional

dissonance and hypothesis four proposed the relationship between self-compassion

and emotional dissonance would be conditional upon psychological flexibility. As

demonstrated by Figure 5, SEM analysis results supported a direct effect of self-

compassion on emotional exhaustion (Effect = -4.46, *SE* = .99, $p < .001$, CI = -6.40, -

2.52). As illustrated by Figure 6, the relationship between self-compassion and

emotional dissonance was found to be conditional upon psychological flexibility

(Effect = -0.07, *SE* = 0.03, $p = .04$, CI = -0.14, -0.00). Though this relationship was

statistically significant for those with low (Effect = -0.64, *SE* = 0.25, $p = .01$, CI = -

1.14, -0.14), moderate (Effect = -0.99, *SE* = 0.20, $p < .001$, CI = -1.38, -0.60), and

high (Effect = -1.27, *SE* = 0.25, $p < .001$, CI = -1.76, -0.78) psychological flexibility,

it was identified that the strength of these associations were strongest when

psychological flexibility was highest ($x \geq 42$), followed by moderate ($34 \leq x \leq 41$),

followed by low ($x \leq 33$). These values represent the 84th, 50th, and 16th percentiles.

Emotional dissonance was then found to exert a significant and positive effect on

emotional exhaustion (Effect = 4.75, *SE* = 1.91, $p = .01$, CI = 1.00, 8.51). I concluded

that these results support hypotheses one, two, three, and four. Thus, my analysis

supported the contention that greater self-compassion is directly associated with

lower rates of emotional exhaustion and indirectly through reduced emotional

dissonance. Additionally, the results suggest that psychologists in my sample had greater reductions in emotional exhaustion through emotional dissonance when they were simultaneously higher in self-compassion and psychological flexibility.

Table 6

Descriptive Statistics (N = 412)

Variable	Minimum	Maximum	Range	*M*	*SD*
Age	20	70	50	40.19	10.68
Sess	2	36	34	16.95	7.39
SDE	20	52	32	35.66	6.27
IM	18	55	37	38.58	7.32
ED	5	16	11	10.98	2.37
SC	1.75	5	3.25	3.49	0.68
PF	24	49	25	37.47	4.68
Exp	0.90	31	30.10	10.39	7.86
EE	10	63	53	31.98	12.15

Note. Sess = Average Amount of Sessions Provided Per Week; SDE = Self-Deceptive Enhancement; IM = Impression Management; ED = Emotional Dissonance; SC = Self-Compassion; PF = Psychological Flexibility; Exp = Years of Experience; EE = Emotional Exhaustion.

Table 7

Correlations Between Variables (N = 412)

	Age	Sess	SDE	IM	SC	PF	ED	Exp	EE
Age	-								
Sess	.20**	-							
SDE	.10*	.09	-						
IM	.15**	.04	.34**	-					
SC	.24**	.12*	.48**	.20**	-				
PF	.10*	.14**	.40**	.14**	.38**	-			
ED	-.07	-.03	-.16**	-.06	-.29**	-.13**	-		
Exp	.74**	.14**	.16**	.10*	.28**	.11*	-.14*	-	
EE	-.12*	.04	-.20**	-.08	-.35**	-.18**	.35**	-.11*	-

Note. Sess = Average Amount of Sessions Provided Per Week; SDE = Self-

Deceptive Enhancement; IM = Impression Management; SC = Self-Compassion; PF

= Psychological Flexibility; ED = Emotional Dissonance; Exp = Years of

Experience; EE = Emotional Exhaustion; * p < .05, ** p < .01.

Figure 5

Analysed Conditional Indirect Effects Model (N = 412)
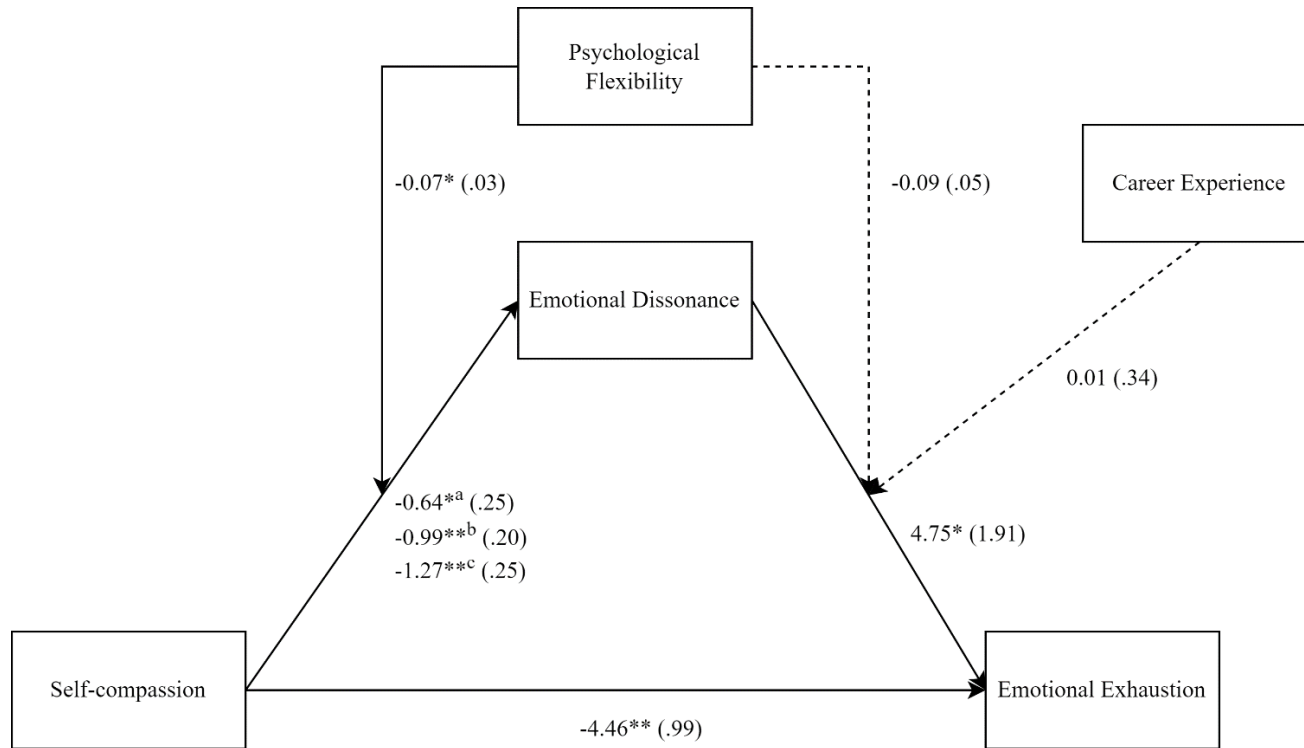
[a] = interaction effect at low psychological flexibility. [b] = interaction effect at moderate psychological flexibility. [c] = interaction effect at high psychological flexibility. Solid line indicates significant pathway. Dashed line indicates non-significant pathway. * $p < .05$ ** $p < .001$.

Hypotheses five and six proposed conditional effects from both psychological flexibility and career experience on the relationship between emotional dissonance and emotional exhaustion. I found no statistical significance to suggest that emotional dissonance's relationship with emotional exhaustion was conditional upon psychological flexibility (Effect = -0.09, *SE* = 0.05, *p* = .07, CI = -0.19, 0.01), or career experience (Effect = 0.01, *SE* = 0.03, *p* = .71, CI = -0.05, 0.07). Therefore, I concluded that the results do not support hypotheses five and six. Thus, I found no evidence to suggest that psychologists in my example experiencing the same level of emotional dissonance varied in their consequent emotional exhaustion conditionally upon their concurrent level of psychological flexibility or career experience.

Figure 6

Moderating Effect of Psychological Flexibility on Self-Compassion and Emotional Dissonance (N = 412)
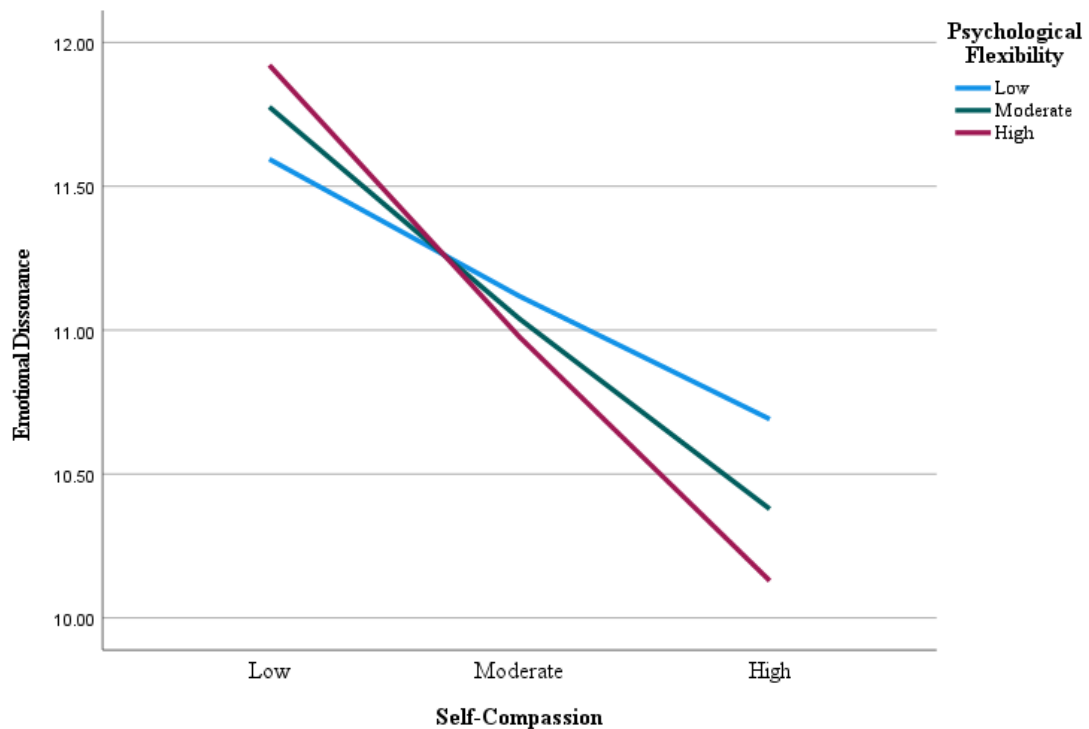
Discussion

Theorised indirect and conditional effects between self-compassion, psychological flexibility, career experience, emotional dissonance, and emotional exhaustion were tested in this analysis. I observed empirical evidence for four of the six hypothesized relationships in this study. These findings and possible explanations are discussed in the following paragraphs. It is worth noting the high rates of emotional exhaustion observed in my sample. I believe this serves to highlight the importance of identifying means to reduce emotional exhaustion in this occupational sample, and to provide further validity to the significant pathways observed in the analysis as these were found in the context of a highly emotionally exhausted sample.

My finding that self-compassion affects emotional exhaustion indirectly through emotional dissonance can be considered unique for this literature. Self-compassion and emotional exhaustion are consistently correlated (Gerber & Anaki, 2021; Germer & Neff, 2019; Prudenzi et al., 2022) and training in self-compassion has been shown to reduce emotional exhaustion (Eriksson et al., 2018; Neff et al., 2020; Richardson et al., 2020). There are many possible variables that may act as mechanisms between self-compassion and emotional exhaustion (see Germer & Neff, 2019 for a review of potential mechanisms to well-being), but empirical studies linking these two variables specifically are scant. Possible mechanisms include reduced distress associated with exposure to client suffering through improved emotion regulation (Bibeau et al., 2016), increased psychological resources (Prudenzi et al., 2022), and satiating the emotional need for autonomy (Gerber & Anaki, 2021). Therefore, the finding that self-compassion may impact emotional exhaustion through the mechanism of reduced emotional dissonance is novel in the context of previous literature.

Cognitions, emotions, and regulatory strategies promoted by self-compassion may account for its observed indirect pathway to emotional exhaustion through emotional dissonance in my analysis. Self-criticism and unrealistic standard setting are common amongst psychologists providing psychotherapy (Kaeding et al., 2017; Richardson et al., 2020; Simpson et al., 2019; Turnbull & Rhodes, 2021) and are a common source of emotional dissonance (Chapter Three). However, self-compassion tenets may facilitate the adoption of compassionate perspectives and behaviours regarding the self and others (Beaumont et al., 2016; Neff & Beretvas, 2013; Neff & Pommier, 2013) despite some mixed evidence (López et al., 2018), thereby reducing self-compassionate psychologists' engagement with self-directed critical thinking. Similarly, greater compassion directed towards others may assist psychologists to adopt cognitive styles that enable easier access to compassionate emotional states in the context of challenging client-therapist interactions. Such cognitive styles may include reduced personalising and pejorative judgments of difficult behaviours. For example, self-compassion may reduce over-personalising client outcomes through greater acceptance and understanding of one's limits and reduce unrealistic expectations of the self (Patsiopoulos & Buchanan, 2011). Negative judgments of clients may also be reduced as a client with borderline personality disorder engaging in parasuicidal behaviours may be seen less as "manipulative" or other common pejorative labels (Ring & Lawn, 2019) and more compassionately as someone seeking nurturance in the context of intense distress through coping behaviours positively reinforced across their lifespan. Compassionate self-talk and appraisals could therefore act as both an antecedent strategy to reduce the likelihood of emotional dissonance being triggered with a client displaying challenging behaviours, but also as a strategy to regulate emotional dissonance once

elicited. Furthermore, as self-compassion is consistently associated with adaptive emotion regulation (Finlay-Jones et al., 2015; Inwood & Ferrari, 2018), self-compassionate psychologists may be more likely to engage in adaptive strategies outside of clinical sessions such as seeking peer support, openness in supervision spaces, or the conscious mindful attention to self-care. Therefore, my findings extend those of Chapter Three by providing further objective support for the contention that self-compassion can reduce the frequency and duration of emotional dissonance and its consequent outcomes.

Self-compassion may also increase authentic emotional expression within the context of a therapeutic dyad. Appropriately disclosing and discussing dissonant emotions with clients was identified as a beneficial strategy for managing emotional labour for psychologists providing psychotherapy in Chapter Three. It is possible that psychologists practicing from a self-compassionate standpoint may find it easier to appropriately engage with this strategy and be more emotionally authentic with clients due to a greater acceptance of their common humanity and downregulated sympathetic nervous system responses (Patsiopoulos & Buchanan, 2011). An acceptance of one's experience from the perspective of reduced physiological arousal could reduce reactivity and secondary distress associated with emotional dissonance, thereby creating sufficient psychological distance from this emotional dissonance to facilitate its constructive expression and interpersonal regulation in a manner that is therapeutically beneficial. The findings of Patsiopoulos and Buchanan (2011) support this as they found self-compassionate counsellors to report themselves to be more "genuine" with clients. Furthermore, they suggest greater acceptance of the self may promote authenticity outside of the client space, which has been observed as an organisational factor that improves the management of emotional labour (Grandey et al., 2012).

I also observed a direct effect of self-compassion on emotional exhaustion. This likely indicates that although emotional dissonance may be a significant variable through which self-compassion exerts influence on emotional exhaustion, there are other factors that also account for this relationship. Aforementioned theorised and observed factors may account for this (Bibeau et al., 2016; Gerber & Anaki, 2021; Germer & Neff, 2019; Prudenzi et al., 2022). However, further empirical research is needed to clarify the specific mechanisms by which self-compassion affects emotional exhaustion.

The finding that self-compassion and emotional dissonance's relationship is conditional upon psychological flexibility suggests that these constructs exert complimentary unique effects. I propose that psychological flexibility's unique factors may account for the conditional effect on self-compassion and emotional dissonance. For example, the cognitive defusion, self-as-context, values, and committed action factors may provide sufficient psychological distance to facilitate the self-kindness and common humanity aspects of self-compassion. Psychological flexibility may also orient oneself to evaluating competence based upon more achievable and controllable factors as opposed to client change (as consistent with findings from Chapter Three). Consequently, this psychological distance may enable easier access to compassionate thoughts, emotions, and responses to a client. Although it is unclear what specific mechanism of psychological flexibility may be responsible for enhancing the relationship between self-compassion and emotional dissonance, my findings support such an effect. As the relationship between these variables has not been previously studied to the best of my knowledge, this represents a novel contribution to the literature.

Identifying significant relationships between self-compassion, psychological

flexibility and emotional dissonance provides preliminary evidence for these constructs

to potentially affect emotional labour management in psychologists providing

psychotherapy. Although much is known about constructs that affect the experience and

outcomes of emotional labour, research examining management interventions is

significantly limited. In fact, interventions have been limited to providing

psychoeducation on the emotional labour concepts and coaching on how to implement

deep acting strategies (Edelman & van Knippenberg, 2017; Hülsheger et al., 2015;

Weaver et al., 2019), with only one intervention exploring effects on burnout (Weaver et

al., 2019) and none of these interventions examining emotional dissonance directly.

Therefore, my findings extend previous literature by suggesting further study of an

intervention such as mindful self-compassion training (e.g., Eriksson et al., 2018; Neff et

al., 2020) to possibly affect the relationship between emotional labour and emotional

exhaustion. Mindful self-compassion interventions would be of particular interest in

emotional labour literature as these concepts transcend the typical deep acting/surface

acting dichotomy found in previous research (as discussed in Chapter Three, p. 77), as

called for by previous research (Grandey & Gabriel, 2015). Additionally, mindful self-

compassion interventions could aim to reduce emotional dissonance specifically as

opposed to previous interventions aiming to reduce surface acting frequency (Edelman

& van Knippenberg, 2017; Hülsheger et al., 2015; Weaver et al., 2019). This aligns with

the findings of Chapter Four that suggest the experience of emotional dissonance

contributes more heavily to emotional exhaustion in comparison to surface acting

strategies. However, it should be noted that this suggestion is based upon cross-sectional

findings from my dataset and requires further replication in longitudinal studies before any conclusions are made.

Observing emotional dissonance to be significantly related to emotional exhaustion has significant implications for psychologists providing psychotherapy. This finding suggests that regulatory strategies that reduce the volume of emotional dissonance should be promoted as means of emotion regulation while engaged in the provision of psychotherapy. For example, the potential for Cartwright and colleagues' (2018; 2021) countertransference management intervention to improve clinician well-being may be improved if the regulatory strategies one engaged in while adopting this approach ameliorated emotional dissonance. Strategies that do not have this effect may inadvertently increase a person's emotional exhaustion through their assumption of an emotionally dissonant intrapsychic state. Therefore, my findings support literature suggesting that clinicians should be encouraged to regulate their emotions while providing psychotherapy through strategies that ameliorate emotional dissonance.

I did not find support for my hypothesis that psychological flexibility would have a conditional effect on the relationship between emotional dissonance and emotional exhaustion. As suggested by Chapter Three, I proposed that psychological flexibility may increase the psychological resources one has to tolerate emotional dissonance without distress, thereby reducing its association with emotional exhaustion. Despite significant zero-order correlations as expected with emotional dissonance and emotional exhaustion (see Table 6), the interaction term between psychological flexibility and emotional dissonance was non-significant. Although these specific constructs have not been modelled as in my study, previous research has found psychological flexibility and its component parts to exert positive effects on emotional exhaustion (Di Benedetto &

Swadling, 2014; Hegel et al., 2021; Puolakanaho et al., 2018; Salvado et al., 2021; Yang & Hayes, 2020), including the demonstration of conditional effects on the relationship between emotional demands and emotional exhaustion (Biron & van Veldhoven, 2012; Onwezen et al., 2014). The lack of support for the hypothesised conditional effect contrasts literature positing similar relationships (Biron & van Veldhoven, 2012; Onwezen et al., 2014). However, due to the significant zero-order correlations between psychological flexibility, emotional dissonance, and emotional exhaustion, my results still somewhat support the association between psychological flexibility and these variables. It is possible that psychological flexibility simply does not significantly impact the relationship between emotional dissonance and emotional exhaustion. It may also be possible that engaging with psychologically flexible skills under the condition of emotional dissonance has both a benefit and cost to one's psychological resources and consequent emotional exhaustion. For example, engaging in this process may assist a person manage their own emotional reactions when dissonance is triggered (as qualitatively reported in Chapter Three), but may simultaneously require resource expenditure to perform occurring outside of one's conscious qualitative experience. This balance of resource conservation and expenditure could result in a net non-significant effect on the relationship between emotional dissonance and emotional exhaustion. In any case, it appears that the contention that psychological flexibility increases a person's capacity to manage emotional dissonance is not substantiated by my quantitative inquiry.

I also did not find any support for my hypothesis that experience conditionally affects the relationship between emotional dissonance and emotional exhaustion. This finding contrasts the subjective findings of Chapter Three and previous literature

(Grandey & Gabriel, 2015) suggesting experience increases an individual's capacity to regulate emotional dissonance or provides opportunities to rehearse functional responses such elicitations. Consistent with my findings regarding psychological flexibility, experience may simply not impact the relationship between emotional dissonance and emotional exhaustion. Alternatively, the lack of support for this effect may be attributable to measurement error. I measured experience by asking participants to report how many years they have practiced psychotherapy. However, this does not account for the heterogeneity between any two participants relative years of experience. For example, one participant may have worked full-time hours for 10 years whereas another may have worked part-time for as many years - equating to a 5-year difference in full-time equivalent experience. Additionally, as found qualitatively in Chapter Three, it may be the combination of experience, self-reflection, and supports like quality supervision that enables a person to improve their management of emotional labour, and not experience alone. Lastly, although experience may reduce the *frequency of* emotional dissonance, it may not reduce the costs associated with it once it is elicited. In this way, an experienced psychologist would be less likely to experience emotional dissonance in comparison to a novice psychologist but would be just as vulnerable to its negative effects once elicited (as evidenced by Chapter Three's findings and the significant negative correlation found between these variables in this analysis). Therefore, the lack of support for experience conditionally affecting emotional dissonance and emotional exhaustion may be attributable to qualities related to experience but not the specific years one has practiced for, or it may reduce the frequency of emotional dissonance but not its effects.

Future Research

I suggest five main directions for future research to build upon these findings. The conditional indirect effects model findings should be replicated across a longitudinal dataset to enable conclusions to be drawn regarding possible mediation and moderation effects. However, to avoid invariance in emotional exhaustion between time points resulting in the inability to test a cross-lagged longitudinal model, I recommend that future research studies use a period longer than two week between time points. The findings also suggest that mindful self-compassion interventions should be explored to improve the management of emotional labour and its associated negative outcomes. Although my findings have supported and modelled significant relationships between self-compassion, psychological flexibility, emotional dissonance, and emotional exhaustion, the specific mechanisms of action between these variables and their relative weights are unclear. For example, it is not clear how much of the relationship between self-compassion and emotional dissonance is attributable to accessing more compassionate viewpoints of clients, reducing self-criticism, improving emotion regulation, or increasing authentic emotional expression with clients and colleagues. Similarly, it is unclear how the unique components of psychological flexibility (e.g., cognitive defusion, values, committed action, and self-as-context) appear to strengthen self-compassion's relationship with emotional dissonance. Although I have proposed possible mechanisms in these relationships, future research could empirically test these to gain greater clarity on what components are most important.

The relative weight of contribution emotional labour has to emotional exhaustion in comparison to personal variables with associations to burnout should also be explored in future research. My findings clearly suggest that emotional labour is related to

emotional exhaustion in psychologists, however, emotional labour has not been included

as a variable in reviews and meta-analyses of predictors of burnout in this group (e.g.,

O'Connor et al., 2018; Yang & Hayes, 2020). Therefore, emotional labour's

contribution to burnout relative to other established predictors in this occupational group

is unclear. Examining whether emotional labour accounts for unique variance beyond

that of already established predictors of burnout in this group could assist in establishing

its relative importance for psychologist well-being.

Future studies exploring the emotional labour of psychologists should also

expand beyond examining emotional labour specifically within the provision of

psychotherapy. This study specifically explored emotional labour in psychologists

providing psychotherapy, whereas other studies exploring emotional labour in this

occupational group did not specify the sources of emotional labour they were seeking to

quantify (Carlotto et al., 2016; Rodriguez & Carlotto, 2017; Van Der Merwe, 2019;

Weaver & Allen, 2017; Xanthopoulou et al., 2018; Yanchus et al., 2010). Psychologists

providing psychotherapy may also experience emotional dissonance while engaged in

supervision, administration tasks, peer, multidisciplinary, and/or interagency

consultations and those providing couples or family interventions may also vary in their

experience of emotional labour. Furthermore, consulting with specific client

demographics (e.g., across the lifespan or socioeconomic status), presenting issues (e.g.,

trauma, personality disorders, substance use disorders, oncology, neurodivergence, or

developmental disabilities), and practicing from different therapeutic orientations (e.g.,

traditional CBT, third-wave CBT, psychodynamic, gestalt) may or may not significantly

shape the quality of emotional labour that one experiences. Another interesting context

to explore would be differences in emotional labour between providing psychotherapy in

person and via telehealth. Although research indicates that client outcomes can be

comparable across these modes of delivery (Giovanetti et al., 2022), the limited capacity

to communicate emotions through body language in a telehealth context relative to in-

person may functionally affect how emotion is experienced and expressed during

sessions. Therefore, future research should expand the exploration of emotional labour

into these different contexts and qualities in which psychologists provide psychotherapy.

Limitations

The limitations of this study should be considered when interpreting the results

and conclusions. The cross-sectional nature of the data prohibits any conclusions of

causality to be drawn. The generalizability of my findings may also be limited by sample

demographics and inclusion criteria. Although this sample was international in scope,

participants overwhelmingly reported to reside in high-income western countries.

Furthermore, I specifically examined the emotional labour associated with psychologists

providing psychotherapy and did not account for other potential sources of emotional

labour such as other occupational duties or therapeutic modalities. The generalisability

of my findings may be hampered by these factors. Lastly, I only measured the emotional

exhaustion component of burnout in this study. This limits the conclusions as I can only

report the relationships between examined variables and one dimension of burnout. It is

possible that examining relationships between all facets of burnout could have

elucidated more sophisticated analysis and understanding of these constructs.

<div align="center">

Conclusion

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My findings make novel contributions to literature by supporting emotional

dissonance as a variable through which self-compassion affects emotional exhaustion,

and that this relationship is strengthened by psychological flexibility. My findings

suggest that self-compassion reduces the frequency and duration of emotional dissonance in psychologists, which consequently reduces emotional exhaustion. Self-compassion and emotional dissonance were found to be conditional upon psychological flexibility, which indicates that its unique aspects may enhance this relationship. The lack of evidence found for theorized moderating effects of psychological flexibility and experience on the relationship between emotional dissonance and emotional exhaustion may indicate that such effects are not present or may be attributable to measurement issues and/or opposing effects. My findings extend the scarce emotional labour intervention literature by providing preliminary evidence that mindful self-compassion interventions may warrant further examination for their potential to assist psychologists to manage emotional labour effectively.

Chapter Six – Overview

In this chapter, I provide a general discussion for the overall findings of the thesis. I open the chapter with a review of the rationale for the thesis and a summary of the overall findings. How these findings inform questions around the effects of emotional labour, contributing factors, conceptual implications, psychometric measurement, and effective management strategies are discussed. I examine the thesis' implications for theoretical, clinical, and broader literature bodies. I also discuss the thesis' strengths, limitations, and recommendations for future research directions.

Chapter Six – General Discussion

Review of Thesis Objectives

Through this thesis I attempted to collect knowledge to inform the overarching research question of *how can psychologists providing psychotherapy manage emotional labour effectively such that it does not negatively impact well-being?* Generating new knowledge in pursuing this question was considered to make contributions to the psychologist well-being literature and specifically regarding burnout. Burnout is estimated to affect between 40-60% of psychologists (McCormack et al., 2018; O'Connor et al., 2018; Simionato & Simpson, 2018; Yang & Hayes, 2020) and this has significant costs to practitioners, healthcare systems, and client outcomes (Abraham et al., 2020; West et al., 2018). Additionally, practising while impaired by burnout can be construed as an ethical transgression (APS, 2007; Simionato et al., 2019; Williams et al., 2010). Studied interventions generally either have small effect sizes or poor follow-up outcomes (Dreison et al., 2018), indicating the need for significant improvement. Individual interventions appear to perform better than organisational interventions in reducing mental health professional burnout, suggesting that identifying and ameliorating individual-based factors may be preferable in strategies looking to address this concern (Dreison et al., 2018). A potential individual factor overlooked by psychologist burnout literature is the potential contribution of emotional labour. Therefore, I aimed to extend literature focused on understanding contributors and strategies to reduce burnout in psychologists by exploring the contribution and potential management of emotional labour.

A structure and design that most appropriately aligned with the respective research questions was adopted for this thesis. A mixed-methods design was used to

allow for exploration of research questions requiring more holistic analysis. Reflexive thematic analysis most appropriately explored the central research questions in Chapters Two and Three due to the lack of knowledge existing on the respective topics. These research questions were '*what are the perceived effects of emotional labour in psychologists providing psychotherapy?*' and '*how do psychologists providing psychotherapy manage emotional labour?*' respectively. Quantitative research methods were adopted for the following two chapters as the thesis progressed from broad knowledge generation to testing specific hypotheses. Psychometric validation through confirmatory factor analysis and correlational analyses assisted to answer *how should emotional labour be measured in psychologists providing psychotherapy and which components are most linked to burnout?* Conditional indirect effects analysis through structural equation modelling was used to answer *what individual-based factors may assist psychologists providing psychotherapy to reduce emotional labour's impact on burnout?*

Summary of Major Findings

Overall findings

The findings I presented in this thesis make substantial contributions to the broader research literature surrounding emotional labour and burnout in the context of psychologists providing psychotherapy. Emotional labour was found to be a construct that contributes significantly to the personal well-being of psychologists. Multiple constructs were identified as potentially having a positive influence on the relationship between emotional labour and burnout. Of note are self-compassion and psychological flexibility, which received quantitative support in the key conditional indirect effects model. Additionally, evidence to support a new means of conceptualising and measuring

emotional labour was found. Using this new measure to explore the relationships between surface acting strategies and burnout revealed relationships with significant implications for emotional labour theory. These findings extend psychologist burnout literature by identifying a significantly contributing variable previously unstudied in this occupation. Similarly, the findings of this thesis extend emotional labour literature by exploring these variables in a unique understudied occupational group and presents evidence to possibly challenge some long-held assumptions.

Effects of Emotional Labour

I presented evidence to suggest positive, negative, and neutral consequences of emotional labour in psychologists providing psychotherapy throughout this thesis. Qualitative and quantitative data supported a connection between emotional labour and burnout in this occupational group, with qualitative support for personal growth and the need for psychological distance from others being found. These findings complement and extend existing literature and validate the contention that emotional labour should be considered as a potential contributing factor to well-being in psychologists providing psychotherapy.

I observed a relationship between emotional labour and burnout in this thesis using both qualitative and quantitative methodologies. This relationship contributes new knowledge and has significant implications for the psychologist well-being literature. Finding evidence for this relationship across methodologies adds further evidence for this finding due to methodological triangulation. The *feeling depleted and exhausted* theme presented in Chapter Two was interpreted as representative as the phenomenon of burnout. Evidence for this relationship was further established in the analyses of Chapters Four and Five, which indicated a significant relationship between the

emotional dissonance component of emotional labour and emotional exhaustion. Experiencing burnout consequent to emotional labour fits with existing literature (Grandey & Melloy, 2017; Grandey & Sayre, 2019) as well as the COR (Hobfoll, 1989) and JD-R (Bakker & Demerouti, 2007; Demerouti et al., 2001) theoretical models underpinning current understandings of burnout development. As previously theorised (Grandey & Gabriel, 2015), engaging in emotional labour is likely to deplete psychological resources that in turn creates the necessary conditions for burnout to develop. Therefore, finding emotional labour to be linked to burnout in the unique occupational group of psychologists providing psychotherapy complements much previous research findings and theory.

Finding emotional labour to be related to burnout supports its relevance as a potential contributing factor to burnout in this occupational group. The importance of identifying this relationship is highlighted by the dearth of attention given to this construct in the psychologist well-being literature as recent meta-analyses and reviews of predictors of burnout in psychologists and mental health professionals have not included this as a potential predicting variable (e.g., O'Connor et al., 2018; Yang & Hayes, 2020). Addressing the concerningly high rates of burnout in psychologists (McCormack et al., 2018; O'Connor et al., 2018; Simionato & Simpson, 2018; Yang & Hayes, 2020) requires interventions aimed at ameliorating relevant contributing factors. The findings of this thesis suggest that the effectiveness of psychologist burnout interventions may be enhanced by including means to address the potential contribution of emotional labour. Therefore, the findings I have presented in this thesis surrounding emotional labour and burnout contribute new knowledge with significant implications for interventions attempting to improve psychologist well-being.

Qualitative investigation of emotional labour effects in this thesis also identified new relationships with novel constructs. Needing psychological distance from other people and personal growth consequent to emotional labour both had not been identified in previous literature reporting the effects of emotional labour. It appeared that behavioural patterns providing psychological distance from human interaction, work-related emotional content, and stimulation were a means to conserve and replenish psychological resources, as consistent with the COR model (Hobfoll, 1989). As such, these behaviours were not interpreted to be inherently 'negative' as such behaviours could be both 'negative' and 'positive' depending on their contextual function and consequence. For example, meeting this need sufficiently may have no net effect on a psychologist's well-being besides potentially altering one's personal and leisure activities. Alternatively, one may find benefit in behaviours and pursuits of greater solace, as one participant noted his valuing of engaging with nature. However, if this need is not met sufficiently, the capacity for performing emotional labour and managing emotional load in one's personal life may be hampered. In this example, one's being and engagement with personal relationships may be altered by this need for psychological distance from interaction and work-related emotional content resulting in work-family conflict and potentially less satisfying relationships. Therefore, the novel finding of emotional labour leading to a need for psychological distance from people and work-related emotion highlights emotional labour's potential intrusion and influence on one's personal life and relationships. This effect has not been previously explored in emotional labour research and may be a fruitful course of further inquiry.

Identifying personal growth as a potential positive consequence of emotional labour represents a novel finding that advances previous literature by contrasting typical

findings. Personal growth was identified in Chapter Two's qualitative analysis of effects of emotional labour. It was argued in Chapter Two that this personal growth may not be an automatic consequence of emotional labour but may instead develop indirectly through personal reflection on sources of emotional labour. This reflection and subsequent personal growth may act as a resource to buffer against future psychological resource loss through more intense emotional labour, as per JD-R theory (Bakker & Demerouti, 2007; Demerouti et al., 2001). The vast majority of emotional labour research reports relationships with undesirable outcomes such as burnout, poorer job performance, and poorer service recipient satisfaction (Grandey & Gabriel, 2015; Grandey & Sayre, 2019; Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). In contrast, support for possible positive effects of emotional labour under certain conditions is mostly conceptual (Alam et al., 2019; Humphrey et al., 2015). Therefore, finding emotional labour to be linked with personal growth in this thesis not only contributes new knowledge to the emotional labour literature but suggests that under the proviso that strategies are implemented to successfully mitigate its negative effects, emotional labour could potentially create a net benefit for an individual through an expansion of their emotional self.

Factors Contributing to Emotional Labour

I presented new knowledge surrounding factors contributing to emotional labour in psychologists providing psychotherapy in this thesis. Previous qualitative research on emotional labour in psychologists has either focused on some aspects of management (e.g., Van Der Merwe, 2019) or disciplines within psychology with discretely different occupational roles (e.g., Hings et al., 2018a; 2018b). Therefore, novel literature contributions are made through Chapter Three's exploration of unique factors

contributing to emotional labour in this group. Identifying these factors may implicate those at greater risk of experiencing emotional labour and its consequent outcomes and may inform interventions designed to reduce its potential pernicious effects. Although multiple constructs were identified in the findings of Chapter Three, four of these factors were interpreted as contributing to the elicitation of emotional labour. These four factors were qualities of the therapeutic relationship, general lifestyle factors, evaluating therapeutic effectiveness, and career experience.

Fostering close and fond interpersonal relationships between psychologist and client may reduce the frequency and duration of emotional labour elicitation. Although some participants reported that closer relationships with clients can increase the intensity of emotion experienced, they generally indicated that close and fond relationships with clients led to greater authenticity in emotion expression and less taxing emotion regulation. This finding supports and extends previous research by suggesting that emotional authenticity with clients as well as colleagues (Grandey et al., 2012; Hings et al., 2020) may be beneficial for psychologists. This finding also extends previous literature in other occupational groups by suggesting that closer and more fond relationships with clients can benefit service providers' personal well-being in addition to the service quality (Gabriel et al., 2015; Wang & Groth, 2014). Emphasising the importance of developing quality therapeutic relationships with clients therefore not only seems beneficial for therapeutic outcomes (Norcross & Lambert, 2018), but also psychologist well-being.

A variety of general lifestyle factors may also contribute to the elicitation of emotional labour in psychologists providing psychotherapy. Specifically, establishing clear boundaries between work and personal roles appeared important to enable

psychologists to maintain positive present moment awareness and focus. This finding supported previous qualitative literature identifying this as important in the emotional labour process (Van Sant & Patterson, 2013; Walsh, 2009). General life factors were found to impinge at times on psychologists' capacities to hold present moment focus, to be sufficiently psychologically resourced to perform work duties, and respond to their clinical work as they wished. This cross-contamination of the clinical space seemed to elicit emotional dissonance and subsequent labour. Contributors to this cross-contamination included factors such as mental preoccupation with personal life issues, inadequate self-care such as poor sleep hygiene or insufficient exercise, and a lack of emotional readiness. Therefore, the findings I have presented in this thesis suggest that general lifestyle factors intruding on a psychologist's capacity for present moment focus are likely to contribute to greater emotional labour.

Evaluating concepts of progress and responsibility for therapeutic outcome are cognitive patterns that may elicit greater emotional labour for psychologists providing psychotherapy. The findings I reported in Chapter Three suggested that psychologists who experience self-critical thought patterns, adopt unrealistic standards for themselves, project unrealistic standards onto clients, and over-personalise responsibility for therapeutic outcomes are more likely to experience greater emotional labour. To potentially account for this it was argued in Chapter Three that refocusing on the process of psychotherapy rather than internal and external pressures to achieve expected therapeutic gains and client adherence to treatment protocols may assist in reducing the frequency of emotional dissonance. Furthermore, these findings suggested that adopting a balanced perspective regarding clinician and client responsibilities for therapeutic gain also is likely to reduce the frequency of emotional dissonance. The findings I presented

in Chapter Five provide further support for these assertions as emotional dissonance was found to indirectly effect the relationship between self-compassion and emotional exhaustion in the analysed conditional indirect effects model. As argued in Chapter Three, this partial indirect effect suggests that greater self-compassion can reduce emotional labour and burnout consequently. In other words, the more psychologists engage in self-critical thinking styles, the greater their experience of emotional dissonance and consequent emotional exhaustion.

The findings I presented in this thesis suggest developing balanced perspectives on one's contributions to therapeutic outcomes may improve clinician well-being through reduced emotional labour. Compassionately negotiating internalised evaluations and perceived responsibilities for therapeutic outcome respects the fact that the greatest contributors to therapeutic outcome are external to a clinician's control (Lambert & Barley, 2001). Compassionate thought patterns may also reduce the likelihood that cognitive themes surrounding unrealistic standards and perfectionism (as is common in psychologists, e.g., Kaeding et al., 2017; Simpson et al., 2019) become projected onto clients in harmful ways (Rafaeli et al., 2011). Although self-compassion may help nurture such attitudes towards providing psychotherapy, Chapter Five's findings also suggest that psychological flexibility may assist in reduced emotional dissonance elicitation. Psychological flexibility promotes focusing and connecting with one's values for any given behaviour such as providing psychotherapy (Hayes et al., 2006) and as such may assist psychologists to functionally detach from evaluating one's own performance or the value of providing psychotherapy as based exclusively on quantitative measures of symptom reduction. Developing compassionate and flexible cognitive styles to reduce emotional labour frequency may be particularly important for

early-career psychologists who may be at most risk of dysfunctional self-criticism

(Lane, 2015).

Findings presented in this thesis suggest that career experience can impact on the

frequency of emotional labour in psychologists providing psychotherapy. As argued in

Chapter Three, psychologists with greater experience may experience less emotional

labour due to being more comfortable confronting difficult dynamics with clients that

they may previously have avoided. Additionally, it seemed that experience enabled

psychologists to be more adept at authentically expressing emotion. Although Chapter

Five's findings did not support career experience acting as a moderator between

emotional dissonance and emotional exhaustion, the positive correlation found between

experience and emotional dissonance supports the notion that experience may reduce the

frequency of emotional dissonance. Previous literature has suggested that workers with

greater experience may use emotion regulation strategies more successfully to manage

emotional labour (Grandey & Gabriel, 2015). My findings extend this literature by

suggesting that experience may increase emotional authenticity and may reduce the

frequency of emotional labour's elicitation, as opposed to helping people manage

emotional labour once triggered.

A key contribution of this thesis is identifying novel contributing factors to

emotional labour in the occupational group of psychologists providing psychotherapy.

The importance of understanding constructs that increase the likelihood that a

psychologist experiences emotional labour is underscored by the negative associated

outcomes reported in Chapter Two and previous findings in other occupational contexts

(e.g., Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et

al., 2012). My findings meaningfully contribute to identifying those at higher risk of

emotional labour as well as potential constructs that may be targeted for interventions designed to reduce emotional labour's pernicious potential. The findings suggest that early career psychologists who overly personalise responsibility and contribution to therapeutic outcomes and engage in self-critical self-talk relating to the therapy process, are more vulnerable to emotional labour and its effects. The findings also suggest that those more adept at developing close and fond relationships with clients are also less likely to be vulnerable to emotional labour. Therefore, these findings may inform research regarding who is most vulnerable to emotional labour in the context of psychologists providing psychotherapy and what factors may be beneficial to target in potential interventions. I discuss how such interventions may look in the 'Future Research' section below.

Conceptualising and Measuring Emotional Labour

Meaningful contributions to the literature are made by my thesis regarding the conceptualisation and measurement of emotional labour. Specifically, I presented evidence to suggest surface and deep acting should be measured bidimensionally concurrently with emotional dissonance. I also presented evidence for a readily usable psychometric tool that accounts for these concerns (PELS) but suggested that further scale development and revision would be beneficial. Measuring emotional labour as suggested will allow future researchers to gain greater clarity and nuance in the relationships between emotional labour variables and their purported outcomes. The proposed scale provides researchers with the first emotional labour tool validated in a sample of psychologists providing psychotherapy.

My findings suggested that current theoretical conceptualisations of emotional labour constructs could be improved. Findings from Chapter Three suggested that the

utilisation of mindfulness and psychological flexibility to manage emotional labour provided evidence of regulatory processes that transcend the dichotomy between surface and deep acting commonly presented in conceptual papers (Grandey & Gabriel, 2015; Grandey & Melloy, 2017). These findings were observed in the context of literature calls to expand beyond such a dichotomy (Grandey & Gabriel, 2015). Conceptualising surface and deep acting as the utilisation and outcomes of these variables are likely to be highly contextual (Grandey & Sayre, 2019). Therefore, my thesis extends emotional labour literature by providing evidence to suggest that elements of both surface and deep acting may be used simultaneously under certain conditions with specific regulatory processes.

Challenging the surface and deep acting dichotomy has significant implications for literature surrounding psychometric measurement of emotional labour. It was argued in Chapter Three that the feigning emotion component to surface acting may not be harmful provided it occurs in the context of psychological flexibility. In this context, a mindful and psychologically flexible individual may feign value-congruent emotional displays while accepting emotional dissonance and possibly employing a refocusing of attention through attentional deployment, or cognitive change surrounding the experience of emotion itself. As such, psychologically flexible individuals may be utilising components of both surface and deep acting simultaneously. The utilisation of specific components of surface and deep acting implies that such subfactors may have differing relationships with other variables such as burnout. Therefore, the findings of my thesis imply that measures of emotional labour need to satisfactorily allow researchers to parse relationships between specific emotional labour constructs and their purported outcomes as their relationships may be dynamic and contextual.

This thesis provides researchers with a validated measure of emotional labour that accounts for noted conceptual and measurement issues in existing measures. As outlined in Chapter Four, existing measures of emotional labour are confounded by either measuring surface and deep acting as unidimensional, by failing to parse out emotional dissonance from surface acting, or by not measuring all these elements within a single tool. To address these concerns, I provided evidence for the psychometric validity of a translated and adapted measure of emotional labour originally developed in French (Andela et al., 2015) in Chapter Four. As the original measure was untitled, I named this English translation and adaptation the PELS. The PELS measures surface acting and deep acting bidimensionally and includes a measure of emotional dissonance. Although I recommend further revision of the PELS, the measure advances literature by providing researchers with a valid and reliable psychometric tool that accounts for previous conceptual and measurement issues. Consequently, research using the PELS can more accurately parse relationships between emotional labour variables and their outcomes with less degrees of confounding measurement error. Furthermore, the PELS is the first emotional labour measure to be psychometrically validated specifically in the sample of psychologists providing psychotherapy.

The utility in measuring emotional labour with the PELS was highlighted by the indirect effects analysis presented in Chapter Four that had significant consequences for emotional labour literature. This indirect effects analysis found evidence to suggest that the components of surface acting may not be harmful beyond their capacity to prolong emotional dissonance. This analysis challenges conventional wisdom arguing that surface acting strategies themselves are responsible for the relationship between emotional labour and its outcomes such as burnout (Hülsheger & Schewe, 2011;

Mesmer-Magnus et al., 2012). Although this finding still implies that surface acting can be harmful as these are likely to prolong emotional dissonance, it provides greater nuance to this concept by suggesting that, if surface acting was used to subsequently bring about congruent emotional states, then its potential negative impact may be reduced or mitigated. This analysis also suggests that emotional dissonance is the key mechanism by which emotional labour is linked to outcomes such as burnout and as such, should be the focus of attempts to ameliorate its potential harmful consequences. Furthermore, this finding extends key theory (Grandey & Gabriel, 2015) by suggesting emotional labour's relationship with outcomes such as burnout may be more attributable to the proposed inauthenticity mechanism than the resource loss mechanism. However, it is important to note that such a finding occurred in the context of a unique occupational group and may not be generalised to other professional groups. Therefore, the PELS provides researchers with a more appropriate tool to measure emotional labour and its use in analyses of emotional labour may have facilitated theoretical advancements.

Managing Emotional Labour

Gathering evidence to inform approaches to manage emotional labour was a key objective and contribution of this thesis. Gathering such evidence was in service of the overarching research question guiding this thesis of *how can psychologists providing psychotherapy manage emotional labour effectively such that it does not negatively impact well-being?* Chapter Three's findings identify multiple holistic variables that may assist psychologists to manage emotional labour effectively. Due to the qualitative inquiry of this chapter, the concept of "helping manage emotional labour" was broad and incorporated factors that reduce the frequency, intensity, and duration of emotional labour, as well as factors enabling psychologists to bear emotional labour more easily.

Through quantitative analysis, the findings in Chapter Four suggested that emotional dissonance may be the most important variable to target in managing emotional labour's relationship with burnout and that the cognitive change component of deep acting may be superior to other regulatory strategies to target reductions in emotional dissonance. Lastly, the analysis in Chapter Five built upon the findings of Chapter Three by quantitatively examining identified constructs that may assist in managing emotional labour. The results of this analysis supported the hypothesis that self-compassion and psychological flexibility may beneficially affect the relationship between emotional labour and burnout.

Multiple variables that may assist psychologists to manage emotional labour while providing psychotherapy was identified in the analysis of Chapter Three. Themes of self-talk, psychological flexibility, social support, and general lifestyle behaviours were all identified as assisting emotional labour management. Self-talk promoting compassion and understanding of emotional labour eliciting events was identified as a potential helpful means to manage emotional labour. This strategy seemed to alleviate emotional dissonance through reinterpreting the triggering event in a manner that realigned felt and expressed emotion. Accordingly, this strategy seemed most aligned with the cognitive change component of deep acting. Alternatively, skills relating to psychological flexibility seemed to assist participants to adopt a nonreactive stance to manage emotional labour more effectively despite encouraging practitioners to regulate emotions in ways that do not fit neatly within the surface acting/deep acting dichotomy. Obtaining social support seemed to serve multiple functions in managing emotional labour. First, social support seemed to facilitate venting and expression of dissonant emotions. Second, support that emphasised personal reflection (such as supervision and

peer supervision) seemed to enable clinicians to develop alternative viewpoints on their experience that reduced residual emotional dissonance but also primed functional cognitive patterns to future similar triggers, thereby reducing the frequency of emotional labour. Lastly, the structure of a clinician's workday seemed to impact on their capacity to manage emotional labour. Engagement with self-care routines seemed to provide clinicians with the capacity to discharge negative emotional dissonance (e.g., through exercise), as well as having regular moments of reflection throughout one's day to be able to process emotional dissonance. Furthermore, behaviours that facilitated greater connection with the present moment and desired emotional states (e.g., having adequate session preparation) seemed to assist psychologists to manage emotional labour effectively. Therefore, this thesis provides evidence for potential strategies that may reduce the frequency, duration, and intensity of emotional dissonance by increasing connection and non-reactivity to the present moment and facilitating easier adoption of cognitive patterns that elicit emotional states aligned with display rules.

The findings I presented in Chapter Four may illuminate the key construct in emotional labour's relationship to burnout in psychologists providing psychotherapy and may support the utility of a specific regulatory strategy. The indirect effects analysis presented in Chapter Four suggests that emotional dissonance is the primary construct through which emotional labour affects the emotional exhaustion component of burnout in psychologists. This finding suggests that strategies that seek to reduce the frequency, duration, and intensity of emotional dissonance may be most likely to positively impact on the relationship between emotional labour and burnout. The function of a particular emotion regulation strategy therefore seems to be more important than the form of such strategy as even surface acting strategies could conceivably be useful provided that

utilising these strategies facilitates subsequent reductions in emotional dissonance. This

function over form concept contrasts the bulk of emotional labour literature that

highlights the potential negative outcomes of surface acting (Hülsheger & Schewe,

2011; Mesmer-Magnus et al., 2012). Examining the covariances between factors of the

PELS also provides an interesting insight into managing emotional labour effectively in

this occupational group. The re-evaluation (cognitive change) factor was the only one to

have a negative correlation with emotional dissonance. Contrasting this negative

correlation with attentional deployment's positive correlation with emotional dissonance

suggests that re-evaluation/cognitive change deep acting strategies may be more useful

in reducing emotional dissonance that attentional deployment strategies. This finding

again contrasts dominant views on emotional labour (Grandey & Gabriel, 2015;

Grandey & Sayre, 2019; Hülsheger & Schewe, 2011; Mesmer-Magnus et al., 2012) that

support the utilisation of both deep acting components over surface acting strategies.

Therefore, the findings of this thesis support focusing on the function of reducing

emotional dissonance rather than the form of specific regulatory strategies to reduce

emotional labour's contribution to burnout, but that re-evaluation strategies may be the

most likely to achieve such a reduction.

     The conditional indirect effects analysis presented in Chapter Five identified two

factors that may reduce the frequency of emotional labour's elicitation but there was no

support for means to cope with emotional labour once triggered. This analysis suggested

that emotional dissonance is a mediating factor in the relationship between self-

compassion and emotional exhaustion, and that this relationship is significantly

strengthened under the condition of greater psychological flexibility. In other words,

clinicians with high self-compassion and psychological flexibility seemed significantly

less likely to experience emotional dissonance and consequent emotional exhaustion. These two trainable factors are novel for both the broader emotional labour literature and research specific to emotional labour in psychologists. Career experience and psychological flexibility were hypothesised to provide greater availability of psychological resources to manage emotional labour and therefore moderate the relationship between emotional dissonance and emotional exhaustion. These factors were non-significant in the analysis and although possible explanations for this finding were proposed in Chapter Five, the findings of this thesis do not support either career experience or psychological flexibility as being able to reduce emotional dissonance's impact on emotional exhaustion after its elicitation. Therefore, only self-compassion and psychological flexibility emerged from this thesis' findings with both qualitative and quantitative support for their capacity to reduce the likelihood that emotional labour will contribute to emotional exhaustion.

Key Theoretical, Clinical, and Broader Implications

My thesis makes multiple contributions to theoretical literature surrounding emotional labour. Focusing specifically on the under-researched sample of psychologists providing psychotherapy enabled all findings to contribute novelty to the broader literature. To my knowledge, my thesis was the first to outline the potential effects of emotional labour, validate a psychometric measure, and identify holistic and specifically trainable means of managing emotional labour, in this occupational group qualitatively and quantitatively. Identifying potential positive effects contrasts the bulk of emotional labour (Grandey & Gabriel, 2015; Grandey & Sayre, 2019; Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012) literature but extends limited papers (Alam et al., 2019; Humphrey et al., 2015) in the broader literature.

Factors identified to reduce the frequency and duration of emotional labour illustrated

functional and contextual differences in how these factors operate to be beneficial as

compared to related but distinct occupational groups (e.g., Hings et al., 2018a; Hings et

al., 2018b; Lamothe et al., 2021; Van Sant & Patterson, 2013). Analysis using the PELS

more accurately separated the contributions of emotional dissonance and regulatory

strategies and identified emotional dissonance as the potential key mechanism through

which emotional labour affects emotional exhaustion. This provides empirical support

for the inauthenticity mechanism (Grandey & Gabriel, 2015) and contrasts the bulk of

emotional labour literature that is confounded by measurement issues in previous

research which conflates emotional dissonance and regulatory strategies (see Chapter

Four). Lastly, this thesis is the first to identify and support psychological flexibility and

self-compassion's respective potential roles in affecting the relationship between

emotional labour and burnout. These constructs not only seem to be potentially helpful

for psychologists but may also translate to other professions, especially those with

similar display rules.

It is important to note the high rate of emotional exhaustion observed in the

sample forming the basis of Chapters Four and Five. In this data set, 91.99% of

participants were experiencing either moderate or high levels of emotional exhaustion.

This is more concerning given the potential ethical implications of providing

psychological services in a state of emotional exhaustion to this extent (Simionato et al.,

2019; Williams et al., 2010). Rates of emotional exhaustion in psychologists and mental

health professionals are lower in previous literature (e.g., O'Connor et al., 2018;

Simionato & Simpson, 2018; Trombello et al., 2021) but are still concerningly high. It is

possible that the higher rate observed in the current sample reflected this data being

collected across 2021 during the COVID-19 pandemic where rates of burnout were observed to increase across professions (Luceño-Moreno et al., 2022; Maunder et al., 2022). Alternatively, those with higher levels of emotional exhaustion may have been more likely to participate. Regardless of the explanation, this finding alone underscores the need for research to examine means to reduce rates of burnout in psychologists providing psychotherapy.

Numerous clinical practice recommendations can be made from the findings of this thesis. These recommendations for clinical practice are made with the view to promote positive well-being and need to be considered with the caveat that the current data provides preliminary evidence only and requires replication and extension. The findings support the contention that emotional labour can produce negative effects in psychologists providing psychotherapy. Logically following this contention implies that managing emotional labour effectively is worthy of clinician attention. The thesis advances possible means of managing emotional labour effectively in this group. Strategies broadly identified included developing self-compassion and psychological flexibility, using cognitive change skills to attain perspectives and attitudes (e.g., formulating the origin of difficult client behaviours or adopting realistic internalised standards) that enable desired emotion to be elicited, embedding reflection on emotional labour in social support utilisation, effectively maintaining boundaries between work and personal lives, and developing behavioural routines in work and personal spaces that facilitate the discharging and processing of emotional dissonance as well as increasing one's emotional resources. These strategies may offer a starting point for clinicians to consider how they can manage emotional labour more adequately.

Broader implications for previous research on burnout, self-compassion, and countertransference management are found within the analyses of this thesis. My findings support the need to consider emotional labour in psychologist burnout literature. Psychologist burnout has received much attention in the literature and multiple meta-analyses and systematic reviews have been published (McCormack et al., 2018; O'Connor et al., 2018; Rupert et al., 2015; Simionato & Simpson, 2018; Yang & Hayes, 2020). None of these analyses have included research on the potential contribution of emotional labour. Finding emotional labour qualitatively and quantitatively associated with emotional labour in the current thesis suggests that this construct requires examination alongside other identified predictors of burnout in psychologists providing psychotherapy. Doing so would enable judgements to be made about its relative contribution compared to other predictors and therefore its importance as a target for interventions designed to reduce burnout in this group. Therefore, broader psychologist burnout literature would benefit from considering the findings of this thesis that highlight emotional labour as a significant predictor of emotional exhaustion.

Finding support for emotional dissonance as having an indirect effect on the relationship between self-compassion and emotional exhaustion has significant implications for the self-compassion literature. Self-compassion and mindful self-compassion interventions have been demonstrated as effective at reducing burnout (Eriksson et al., 2018; Neff et al., 2020). Multiple mechanisms have been proposed to explain the link between self-compassion and emotional well-being such as reduced negative self-talk and rumination, the uptake of healthy behaviours, and improved attentiveness to personal distress (Germer & Neff, 2019). Extending these previous findings, this thesis' results suggest that emotional labour may be another mechanism

through which self-compassion acts on burnout. Identifying this link suggests that further research focusing on the relationship between self-compassion, emotional labour, and outcomes such as burnout is warranted. Attempting to conceptualise the pathways between self-compassion and emotional labour, as well as whether self-compassion interventions could be enhanced by directly incorporating emotional labour concepts may be fruitful courses of future research.

Countertransference management literature may be extended by considering the findings of this thesis. Countertransference reactions likely constitute a component of a psychologist's experience of emotional labour, as I argued in Chapter One. Applying the lens of emotional labour theory to countertransference management suggests that processing such reactions through mechanisms that elicit or prolong emotional dissonance is likely to have harmful effects on personal well-being such as increased emotional exhaustion. Similarly, managing such reactions in a manner that promotes emotional congruence is likely to ameliorate these concerns. Despite significant research outlining the potential harmful effects of countertransference reactions (Yang & Hayes, 2020; Hayes et al., 2018), there are limited evidence-based interventions designed to assist people to manage countertransference reactions beyond Cartwright and colleagues' work (2015, 2021) and generalised recommendations to develop specific capacities and personal insight, seek supervision and personal therapy as required, maintain good self-care routines, and practice meditation (Hayes et al., 2018). Cartwright and colleagues' (2021) model of countertransference management assists to conceptualise the interpersonal process between psychologist and client but could be extended to promote positive well-being in clinicians by exploring how this process may also enable clinicians to reduce emotional dissonance. Similarly, generic

recommendations to obtain supervision and personal psychotherapy (Hayes et al., 2018) could be enhanced by these processes exploring barriers and facilitators to reduce emotional dissonance. Therefore, the findings of the current thesis have potentially significant implications for broader countertransference literature.

It is important that the findings presented in this thesis are considered in the context of broader factors that may contribute to an individual's level of burnout. Although there are person-level factors that contribute to burnout in psychologists (O'Connor et al., 2018; Yang & Hayes, 2020), of which the findings of this thesis suggest emotional labour as significant, literature clearly demonstrates that workplace factors also play a significant role in the development of burnout (Cusack et al., 2016; Maslach & Leiter, 2016). Therefore, psychologists experiencing workplace factors that place them at risk of developing burnout such as excessive caseloads, severe client presentations, as well as mismatches between demands and resources in the other domains identified by Maslach and Leiter (2016), are likely to continue to experience burnout despite their engagement with person-level ameliorating strategies. Additionally, workplace environments creating excessive volumes of emotional labour may require unrealistic levels of engagement with management strategies to reduce the impact of these workplace demands. In these cases, sufficient recovery from the volume of emotional labour may require an unrealistic amount of engagement with management strategies or may impede the psychologist's capacity to invest in other important sources of meaningful and valued activity. This potential work-family conflict resulting from workplace factors may only be resolved through strategies that change the psychologists work environment, as opposed to their individual experience. Therefore, it is essential that burnout management is viewed as a dual responsibility between workplace and

worker, with workplaces that employ psychologists responsible to provide workplaces that promote positive psychological well-being.

Strengths and Limitations

This thesis had numerous strengths. Elements of the research designs utilised, measures included, and the sample assessed all enhanced the quality of the research. Qualitative analysis of participant interviews allowed for greater richness in data to be extracted and for unique findings to be identified that were unlikely to be found with quantitative methods (e.g., identifying personal growth as a potential consequence of emotional labour). Strong credibility measures that adhered to the COREQ (Tong et al., 2007) guidelines regarding quality in qualitative research were also used in Chapters Two and Three. Controlling for social desirability bias in Chapters Four and Five afforded greater validity to the findings. Measures of telehealth provision and COVID-19 anxiety were also included in these chapters, which enabled potential controlling for these factors. However, these variables were found to be unrelated to the assessed outcome variables and consequently were not included in analysis (possible reasons for this are discussed in Chapter Four). The diversity in samples used in this thesis were another strength. The transferability of qualitative findings was enhanced by collecting perspectives from participants varying in aspects such as age, experience, training backgrounds, and therapeutic modalities. Similarly, the sample forming the basis of quantitative analyses was diverse and of sufficient power for the indirect effects and conditional indirect effects analyses (Kline, 2016). The quantitative sample also had high rates of burnout which perhaps increased the ecological validity of the findings as the thesis was attempting to inform future interventions to reduce burnout in clinicians already experiencing this phenomenon. Lastly, a strength of the PhD is the progression

of theory development in each chapter, culminating in each element of Chapter Five's analysis having origins in the preceding three chapters.

This thesis also has some limitations that need to be considered when interpreting its findings. Detailed discussion of respective limitations is provided in Chapters Two, Three, Four, and Five, so only the broad limitations of the thesis in general will be discussed here. This thesis focused specifically on psychologists providing individual psychotherapy. This focus limits transferability and generalisability of the findings to psychologists performing other roles such as educational psychology, organisational psychology, or sports psychology, as well as psychologists providing psychotherapy in contexts such as family and couples' therapy. Participants were also disproportionately from western cultural contexts and so generalisability to other cultural contexts with differing norms regarding emotional expression may be limited. The PELS's conceptualisation of the emotion regulation components of emotional labour are still constrained by concepts of surface and deep acting. Consequently, the thesis was unable to advance theory beyond these regulatory processes despite calls to do so (Grandey & Gabriel, 2015). Only the emotional exhaustion component of burnout was measured in this thesis which limited the capacity for relationships with burnout more broadly to be analysed. Exploring these other potential relationships would have enabled greater analysis sophistication and consequent insights. Lastly, the cross-sectional nature of the thesis prevents causal inferences to be made about the proposed mediation and moderated mediation relationships.

Minor alterations were made to the interview schedule used in Chapters Two and Three to inform the data analysed in Chapter Two. The alterations were made after seven interviews and these changes occurred after concerns were reflected upon in my

reflexive journal. The changes included changes to the language of some questions, the

addition of a prompt to directly explore negative effects of emotional labour as well as

adding a prompt to directly explore the impact of emotional labour on one's leisure

activities. Changing the language of some questions was made simply for clarity for

participants as I noted in my reflexive journal that some questions seemed to be slightly

confusing to some participants when read aloud. The addition of the prompt regarding

negative effects of emotional labour was included upon reflection of one interview

where I felt that the participant was providing contradictory answers. I theorised in my

reflexive journal that this may have been an attempt at impression management and an

avoidance of identifying negative consequences directly despite comments that

identified this indirectly. Therefore, the addition of this direct prompt was an attempt to

reduce the likelihood that other participants may avoid naming this directly. As this

change was made after only one of seven participants presented in this manner, it may

not have significantly altered my findings as the remaining participants all identified

negative outcomes without specific prompting. However, it remains possible that other

participants may have also avoided discussing these concerns directly if the prompt had

not been included, thereby possible reducing the frequency that the *feeling depleted and*

exhausted theme was represented in the analysis. The last change made regarding a

prompt about effects on leisure activities was made after reflection that a number of

participants were making such comments. Responses to this prompt constituted a

subtheme under the broader theme of *craving space from people and work related*

emotion. Therefore, this information provided richer context to this theme but the

absence of these responses would not have significantly altered the major themes

identified in Chapter Two as this major theme would have remained constituted by other subthemes.

Another possible limitation of my thesis may be related to the scope of investigation in Chapter Three. In this chapter I explored strategies participants reported using to manage emotional labour. The reported strategies were generally functional and socially appropriate in nature. However, because I did not probe participants to report dysfunctional or unsuccessful management strategies I did not collect any information regarding the uptake of such strategies. Additionally, even if I had probed for such responses, social desirability bias may have caused participants to refrain from discussing these concerns. Not exploring dysfunctional strategies used by psychologists may reduce the ecological validity of the analysis. Although my research question for this chapter related to identifying functional coping strategies and obtaining data about dysfunctional strategies would not have altered this aspect of the analysis, not attempting to collect this data may have limited my capacity to comprehensively represent how participants manage emotional labour.

Future Research

The findings I have presented in this thesis support future research to explore numerous concepts and potential research questions. As the direct future research directions suggested by each analysis are presented in each respective chapter, only the general broad themes of future research direction suggested by this thesis will be discussed here. Considering the significant relationship found between emotional labour and emotional exhaustion in the analyses of this thesis, future research examining burnout in psychologists should consider the potential contribution of emotional labour variables. A logical first step for future research would be to quantify the relative

contribution of emotional labour compared to other established predictors of burnout in this group (e.g., McCormack et al., 2018; O'Connor et al., 2018; Rupert et al., 2015; Simionato & Simpson, 2018; Yang & Hayes, 2020). Exploration of emotional labour's relative weight of contribution to burnout should also include comparisons to workplace aspects such as workload and workplace cultural factors to ensure that such elements are not overlooked. Overlooking these factors may unfairly rest the burden of burnout management solely on psychologists themselves and inadvertently absolve workplaces of their responsibilities to provide psychologically healthy environments for psychologists to work (Maslach & Leiter, 2022). Understanding the relative weight of impact of emotional labour on burnout in this sample and adequately accounting for this in interventions designed to reduce burnout in this occupational group will likely improve their effectiveness.

Numerous future directions within the emotional labour literature are suggested by my findings in this thesis. Despite the relevance and need to understand the potential negative consequences of emotional labour, finding potential positive outcomes in Chapter Two of this thesis suggests that future research could build upon this and the limited amount of research on this topic (Alam et al., 2019; Humphrey et al., 2015). Understanding possible positive outcomes of emotional labour and the conditions required to achieve them would be a fruitful course of future research. The PELS and other current measures of emotional labour (e.g., Brotheridge & Lee, 2003; Lee & Brotheridge, 2011) measure the frequency of emotional labour regulatory strategies. However, it may be possible that other dimensions such as duration, intensity, and volume also contribute to emotional labour's outcomes and may require inclusion in future measure revisions. Future research should also explore how emotional labour

operates in psychologists providing family, couples, or other forms of psychotherapy, as well as exploring broader sources of emotional labour for psychologists such as emotional labour experienced during supervision, administration tasks, multidisciplinary team meetings, interagency meetings, and work-family conflict. Future emotional labour research should also adequately distinguish between constructs of emotional dissonance and the components of surface and deep acting. Lastly, the findings of the current thesis require replication longitudinally to provide stronger evidence to support the proposed mediation and moderated mediation relationships between analysed constructs.

Future research may re-examine the PELS' psychometric properties for extension and revision. The deep acting subscales of the PELS may require the most revision, particularly the re-evaluation subscale that only retained two items after confirmatory factor analysis. Further analysis of convergent validity between the deep acting factors of the PELS and Alabak and colleagues' (2020) would also extend the psychometric validity of this measure. This measure and its original (Andela et al., 2015) have only been used in the context of healthcare workers (Andela et al., 2015; Andela & Truchot, 2017) and as such could potentially be expanded and examined in other professional groups. This would provide future researchers with a valid instrument to account for various relationships between emotional labour and its outcomes more adequately in broader occupational groups.

Although emotional labour has attracted significant research interest over the past four decades (Hochschild, 1983; Grandey & Sayre, 2019), direct interventions to assist workers to manage emotional labour more effectively are significantly lacking. To the best of my knowledge, only three such interventions have been studied and consist of education about emotional labour and recommendations to use deep acting strategies

(Edelman & van Knippenberg, 2017; Hülsheger et al., 2015; Weaver et al., 2019).

Future research is required to focus on helping workers to reduce emotional labour and

ameliorate its potentially negative outcomes. My findings suggest that training in

mindful self-compassion may be a logical starting point as an intervention to assist

psychologists providing psychotherapy to manage emotional labour more effectively.

Therefore, my findings suggest future research should pivot to implementing

interventions to assist workers to manage emotional labour.

Trainable factors existing within an individual's locus of control that can moderate

the impact of emotional dissonance also require identification. This thesis found no

support for the theorised moderating effect of psychological flexibility on the

relationship between emotional dissonance and emotional exhaustion. Similarly,

research support for trainable moderating variables existing within a person's control is

limited (Grandey & Melloy, 2017). Consequently, the current state of the literature is

unable to provide robust evidence-based suggestions about specific acute strategies an

individual may use to support and recover from emotional labour once it has been

elicited. However, the findings reported in Chapter Three may provide a starting point

for other potential strategies that may moderate this relationship. Future research should

therefore endeavour to identify variables that moderate the relationship between

emotional labour and burnout which are amenable to individual intervention with factors

identified in Chapter Three potentially being a good starting point.

Future research may also benefit from extending the findings of the current thesis

surrounding the contribution of general lifestyle factors to effective management of

emotional labour. According to the findings of Chapter Three, interventions assisting

individuals to be present moment focused and more readily able to deep act could reduce

the frequency of emotional labour elicitation. Such interventions have not been examined in the context of emotional labour literature, but this contention may provide an additional explanatory pathway for the results of attachment (Pardess et al., 2014) and self-compassion (Eriksson et al., 2018; Neff et al., 2020) interventions on clinician well-being. In Pardess and colleagues' (2014) study on people working with individuals who have experienced trauma, the authors found that priming participants with mental imagery of a secure attachment figure prior to presenting them with a vignette of a common client presentation significantly reduced their anticipated level of compassion fatigue. Similarly, self-compassion interventions (e.g., Germer & Neff, 2019) utilise mental imagery to enable practitioners to access compassionate perspectives. Through the lens of emotional labour, it is likely that these interventions would prime an individual to access desired affective states and cultivate psychological attitudes that produce these emotions with greater ease. In other words, one is primed to naturally experience desired emotions or more easily deep act in response to emotional labour. The capacity for mental imagery to reduce emotional labour elicitation would be a novel intervention to potentially promote workers well-being through reduced resource expenditure and consequent burnout.

Concluding Remarks

Burnout is a significant and costly problem facing multiple industries and its employees, including psychologists providing psychotherapy. The concerning rates of burnout in this group has the potential to comprise client safety, job performance and satisfaction, personal well-being, and client outcomes (West et al., 2018; Yang & Hayes, 2020). Reducing rates of burnout requires identification and amelioration of major contributing factors. Many predictors of burnout in this group were known; however,

emotional labour's contribution to burnout had not been considered in the psychologist burnout literature. The neglect of this construct is contrasted by decades of research linking emotional labour to burnout in other professional groups (Hülsheger & Schewe, 2011; Kammeyer-Mueller et al., 2013; Mesmer-Magnus et al., 2012). Psychologists providing psychotherapy were an under researched group in the context of emotional labour literature. Consequently, the characteristics, nature, and potential outcomes of emotional labour this group were uncertain. Therefore, this thesis aimed to explore the nature of emotional labour in this occupational group, its potential link to negative well-being outcomes such as burnout, the mechanisms through which such links operated, and to identify potential constructs that may assist psychologists to manage emotional labour more effectively. Four analyses were conducted in this thesis to discover new knowledge to advance our collective understanding of how emotional labour may be managed effectively in psychologists such that rates of burnout may be reduced.

There is much work ahead of the discipline and industry of psychology in identifying causes, contributors, and potential solutions to burnout. I hope the findings of this thesis positively contribute to the advancement of awareness and initiatives to improve psychologist well-being by addressing the relationship between emotional labour and burnout. Improving psychologist well-being is likely to improve productivity, life satisfaction, and client outcomes. Above all else, I hope that this thesis helps those who care for others so effectively to also care for themselves effectively.

References

Abraham, C. M., Zheng, K., & Poghosyan, L. (2020). Predictors and outcomes of burnout among primary care providers in the United States: A systematic review. *Medical Care Research and Review, 77*(5), 387-401. http://dx.doi.org/10.1177/1077558719888427

Alabak, M., Hülsheger, U. R., Zijlstra, F. R. H., & Verduyn, P. (2020). More than one strategy: A closer examination of the relationship between deep acting and key employee outcomes. *Journal of Occupational Health Psychology, 25*(1), 32-45. http://dx.doi.org/10.1037/ocp0000152

Alam, M., Ezzedeen, S. R., & Latham, S. D. (2019). Managing work-generated emotions at home: An exploration of the "Bright Side" of emotion regulation. *Human Resource Management Review, 29*(4), 1-15. https://doi.org/10.1016/j.hrmr.2018.12.002

Andela, M., & Truchot, D. (2017). Emotional dissonance and burnout: The moderating role of team reflexivity and re-evaluation. *Stress and Health, 33*(3), 179-189. https://doi.org/10.1002/smi.2695

Andela, M., Truchot, D., & Borteyrou, X. (2015). Emotional labor and burnout: Some methodological considerations and refinements. *Canadian Journal of Behavioural Science, 47*(4), 321-332. http://dx.doi.org/10.1037/cbs0000024

Andela, M., Truchot, D., & Huguenotte, V. (2018). Job demands, emotional dissonance and elderly abuse: The moderating role of organizational resources. *Journal of Elder Abuse and Neglect, 30*(5), 368-384. https://doi.org/10.1080/08946566.2018.1514343

Ashforth, B. E., & Humphrey, R. H. (1993). Emotional labor in service roles: The influence of identity. *Academy of Management Review, 18*(1), 88-115. https://doi.org/10.2307/258824

Australian Bureau of Statistics. (2022). National study of mental health and wellbeing. Canberra: Commonwealth of Australia. Retrieved from https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/2020-21

Australian Psychological Society. (2007). APS code of ethics. Melbourne, Victoria. Retrieved from https://psychology.org.au/about-us/what-we-do/ethics-and-practice-standards/aps-code-of-ethics

Baer, R. A. (2003). Mindfulness training as a clinical intervention: A conceptual and empirical review. *Clinical Psychology: Science and Practice, 10*(2), 125-143. https://doi.org/10.1093/clipsy.bpg015

Baer, R. A. (2010). Self-compassion as a mechanism of change in mindfulness and acceptance based treatments. In R. A. Baer (Ed.)., *Assessing mindfulness and acceptance processes in clients* (pp. 135-154). New Harbinger.

Bakker, A. B., & Demerouti, E. (2007). The job demands-resources model: State of the art. *Journal of Managerial Psychology, 22*(3), 309-328. http://dx.doi.org/10.1108/02683940710733115

Bakker, A. B., Demerouti, E., & Verbeke, W. (2004). Using the job demands-resources model to predict burnout and performance. *Human Resource Management, 43*(1), 83-104. http://dx.doi.org/10.1002/hrm

Bakker, A., B., Sanz-Vergel, A. I., Rodriguez-Munoz, A., & Antino, M. (2019). Ripple effects of surface acting: A diary study among dual-earner couples. *The Spanish*

Journal of Psychology, 22(7), 1-12. https://doi-
org.dbgw.lis.curtin.edu.au/10.1017/sjp.2019.6

Barnett, M. D., Hays, K. N., & Cantu, C. (2019). Compassion fatigue, emotional labor,
and emotional display among hospice nurses. *Death Studies*, 1-7. Advance online
publication. https://doi.org/10.1080/07481187.2019.1699201

Basim, H. N., Begenirbaş, M., & Can Yalçin, R. (2013). Effects of teacher personalities
on emotional exhaustion: Mediating role of emotional labor. *Educational
Sciences: Theory and Practice, 13*(3), 1488-1496.
https://doi.org/10.12738/estp.2013.3.1509

Beaumont, E., Durkin, M., Martin, C. J. H., & Carson, J. (2016). Compassion for others,
self-compassion, quality of life and mental well-being measures and their
association with compassion fatigue and burnout in student midwives: A
quantitative survey. *Midwifery, 34*, 239-244.
https://doi.org/10.1016/j.midw.2015.11.002

Beck, J. S. (2021). *Cognitive Behavior Therapy: Basics and Beyond* (3rd ed.). The
Guildford Press

Berjot, S., Altintas, E., Grebot, E., & Lesage, F. (2017). Burnout risk profiles among
French psychologists. *Burnout Research, 7*, 10-20.
https://doi.org/10.1016/j.burn.2017.10.001

Bibeau, M., Dionne, F., & Leblanc, J. (2016). Can compassion meditation contribute to
the development of psychotherapists' empathy? A review. *Mindfulness, 7*(1),
255-263. https://doi.org/10.1007/s12671-015-0439-y

Biron, M., & van Veldhoven, M. (2012). Emotional labour in service work:

    Psychological flexibility and emotion regulation. *Human Relations, 65*(10),

    1259-1282. https://doi.org/10.1177/0018726712447832

Bishop, S. R., Lau, M., Shapiro, S., Carlson, L., Anderson, N. D., Carmody, J., Segal, Z.

    V., Abbey, S., Speca, M., Velting, D., & Devins, G. (2004). Mindfulness: A

    proposed operational definition. *Clinical Psychology: Science and Practice,*

    11(3), 230-241. https://doi.org/10.1093/clipsy.bph077

Blau, G., Fertig, J., Tatum, D. S., Connaughton, S., Park, D. S., & Marshall, C. (2010).

    Further scale refinement for emotional labor: Exploring distinctions between

    types of surface versus deep acting using a difficult client referent. *Career*

    Development International, 15(2). https://doi.org/10.1108/13620431011040969

Bond, F. W., Hayes, S. C., Baer, R. A., Carpenter, K. M., Guenole, N., Orcutt, H. K.,

    Waltz, T., & Zettle, R. D. (2011). Preliminary psychometric properties of the

    acceptance and action questionnaire – II: A revised measure of psychological

    inflexibility and experiential avoidance. *Behaviour Therapy, 42*(4), 676-688.

    https://doi.org/10.1016/j.beth.2011.03.007

Bond, F, W., Lloyd, J., & Guenole, N. (2013). The work-related acceptance and action

    questionnaire: Initial psychometric findings and their implications for measuring

    psychological flexibility in specific contexts. *Journal of Occupational and*

    Organizational Psychology, 86(3), 331-347. https://doi.org/10.1111/joop.12001

Borritz, M., Rugulies, R., Bjorner, J. B., Villadsen, E., Mikkelsen, O. A., & Kristensen,

    T. S. (2006). Burnout among employees in human service work: design and

    baseline findings of the PUMA study. *Scandinavian Journal of Public Health,*

    34(1), 49-58. https://doi.org/10.1080/14034940510032275

Brady, S., O'Connor, N., Burgermeister, D., & Hanson, P. (2012). The impact of

    mindfulness meditation in promoting a culture of safety on an acute psychiatric

    unit. *Perspectives In Psychiatric Care, 48*(3), 129-137.

    https://doi.org/10.1111/j.1744-6163.2011.00315.x

Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for

    beginners*. London, England: Sage Publications Ltd

Braun, V., & Clarke, V. (2019). To saturate or not to saturate? Questioning data

    saturation as a useful concept for thematic analysis and sample-size rationales.

    Qualitative Research in Sport, Exercise and Health, 13(2), 201-216.

    https://doi.org/10.1080/2159676X.2019.1704846

Braun, V., & Clarke, V. (2020). One size fits all? What counts as quality practice in

    (reflexive) thematic analysis? *Qualitative Research in Psychology*.

    https://doi.org/10.1080/14780887.2020.1769238

Brotheridge, C. M., & Lee, R. T. (2002). Testing a conservation of resources model of

    the dynamics of emotional labor. *Journal of Occupational Health Psychology,

    7*(1), 57-67. https://doi.doi:10.1037//1076-8998.7.1.57

Brotheridge, C., & Lee, R. T. (2003). Development and validation of the emotional

    labour scale. *Journal of Occupational and Organizational Psychology, 76*, 365-

    379. https://doi.org/10.1348/096317903769647229

Burić, I., Kim, L. E., & Hodis, F. (2021). Emotional labor profiles among teachers:

    Associations with positive affective, motivational and well-being factors.

    Journal of Educational Psychology, 113(6), 1227-1243.

    https://doi.org/10.1037/edu0000654

Cabaniss, D. L., Cherry, S., Douglas, C. J., & Schwartz, A. (2011). *Psychodynamic psychotherapy: A clinical manual*. John Wiley & Sons.

Carlotto, M. S., Rodriguez, S. Y. S., & Câmara, S. G. (2016). Translation, adaptation and exploration of psychometric properties of the emotional labor scale (ELS) in a sample of psychologists. *Temas em Psicologia, 24*(2), 717-725. https://doi.org/10.9788/TP2016.2-17

Cartwright, C., Barber, C., Cowie, S., & Thompson, N. (2018). A trans-theoretical training designed to promote understanding and management of countertransference for trainee therapists. *Psychotherapy Research, 28*(4), 517-531. https://doi.org/10.1080/10503307.2016.1252071

Cartwright, C., Hayes, J. A., Yang, Y., & Shires, A. (2021) "Thinking it through": toward a model of reflective practice for trainee psychologists' countertransference reactions. *Australian Psychologist, 56*(2). https://doi.org/10.1080/00050067.2021.1893599

Cartwright, C., Rhodes, P., King R., & Shires, A. (2014). Experiences of countertransference: Reports of clinical psychology students. *Australian Psychologist, 49*(4), 232-240. http://dx.doi.org/10.1111/ap.12062

Cartwright, C., Rhodes, P., King, R., & Shires, A. (2015). A pilot study of a method for teaching clinical psychology trainees to conceptualise and manage countertransference. *Australian Psychologist, 50*, 148-156. http://dx.doi.org/10.1111/ap.12092

Chervonsky, E., & Hunt, C. (2019). Emotion regulation, mental health, and social wellbeing in a young adolescent sample: A concurrent and longitudinal investigation. *Emotion, 19*(2), 270-282. http://dx.doi.org/10.1037/emo0000432

Clarke, J. J., Rees, C. S., Breen, L. J., & Heritage, B. (2021). The perceived effects of

emotional labor in psychologists providing individual psychotherapy.

Psychotherapy, 58(3), 414-424. https://dx.doi.org/10.1037/pst0000351

Cleare, S., Gumley, A., Cleare, C. J., & O'Connor, R. C. (2018). An investigation of the

factor structure of the Self-Compassion Scale. *Mindfulness, 9*(2), 618-628.

https://doi.org/10.1007/s12671-017-0803-1

Cole, D. A., & Maxwell, S. E. (2003). Testing mediation models with longitudinal data:

Questions and tips in the use of structural equation modelling. *Journal of

Abnormal Psychology, 112*(4), 558-577. https://doi.org/10.1037/0021-

843X.112.4.558

Cottrell, J. M., & Barrett, C. A. (2016). Job satisfaction among practicing school

psychologists: The impact of SLD identification. *Contemporary School

Psychology, 20*, 21-30. https://doi.org/10.1007/s40688-015-0076-4

Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the

research process*. St Leonards, New South Wales, Australia: Allen & Unwin.

Cusack, L., Smith, M., Hegney, D., Rees, C. S., Breen, L. J., Witt, R. R., Rogers, C.,

Williams, A., Cross, W., & Cheung, K. (2016). Exploring environmental factors

in nursing workplaces that promote psychological resilience: Constructing a

unified theoretical model. *Frontiers in Psychology, 7*, 600.

https://doi.org/10.3389/fpsyg.2016.00600

De Hert, S. (2020). Burnout in healthcare workers: Prevalence, impact and preventative

strategies. *Local and Regional Anesthesia, 13*, 171-183.

http://dx.doi.org/10.2147/LRA.S240564

Demerouti, E., Bakker, A. B., Nachreiner, F., & Schaufeli, W. B. (2001). The job demands-resources model of burnout. *Journal of Applied psychology, 86*(3), 499-512. https://doi.org/10.1037/0021-9010.86.3.499

Di Benedetto, M., & Swadling, M. (2014). Burnout in Australian psychologists: Correlations with work-setting, mindfulness and self-care behaviours. *Psychology, Health & Medicine, 19*(6), 705-715. https://doi.org/10.1080/13548506.2013.861602

Diefendorff, J. M., Croyle, M. H., & Gosserand, R. H. (2005). The dimensionality and antecedents of emotional labor strategies. *Journal of Vocational Behaviour, 66*(2), 339-357. https://doi.org/10.1016/j.jvb.2004.02.001

Diefendorff, J. M., Richard, E. M., & Yang, J. (2008). Linking emotion regulation strategies to affective events and negative emotions at work. *Journal of Vocational Behavior, 73*(3), 498-508. https://doi.org/10.1016/j.jvb.2008.09.006

Diefendorff, J. M., Morehard, J., & Gabriel, A. (2010). The influence of power and solidarity on emotional display rules at work. *Motivation and Emotion, 34*(2), 120-132. http://dx.doi.org.dbgw.lis.curtin.edu.au/10.1007/s11031-010-9167-8

Diestel, S., Rivkin, W., & Schmidt, K. (2015). Sleep quality and self-control capacity as protective resources in the daily emotional labor process: Results from two diary studies. *Journal of Applied Psychology, 100*(3), 809-827. http://dx.doi.org/10.1037/a0038373

Dorociak, K. E., Rupert, P. A., & Zahniser, E. (2017). Work life, well-being, and self-care across the professional lifespan of psychologists. *Professional Psychology: Research and Practice, 48*(6), 429-437. http://dx.doi.org/10.1037/pro0000160

Dreison, K. C., Luther, L., Bonfils, K. A., Sliter, M. T., McGrew, J. H., & Salyers, M. P.

    (2018). Job burnout in mental health providers: A meta-analysis of 35 years of

    intervention research. *Journal of Occupational Health Psychology, 23*(1), 18.

    http://dx.doi.org/10.1037/ocp0000047

Drozek, R. P., & Unruh, B. T. (2020). Mentalization-based treatment for pathological

    narcissism. *Journal of Personality Disorders, 34*, 177-203. https://dx.doi.org/

    10.1521/pedi.2020.34.supp.177

Edelman, P. J., & van Knippenberg, D. (2017). Training leader emotion regulation and

    leadership effectiveness. *Journal of Business and Psychology, 32*(6), 747-757.

    https://doi.org/10.1007/s10869-016-9471-8

Ellis, T. E., Schwartz, J. A. J., & Rufino, K. A. (2018). Negative reactions of therapists

    working with suicidal patients: a CBT/Mindfulness perspective on

    "countertransference". *International Journal of Cognitive Therapy, 11*, 80-99.

    https://doi.org/10.1007/s41811-018-0005-1

Eriksson, T., Germundsjö, L., Åström, E., & Rönnlund, M. (2018). Mindful self-

    compassion training reduces stress and burnout symptoms among practicing

    psychologists: A randomized controlled trial of a brief web-based intervention.

    Frontiers in Psychology, 9, 1-10. https://doi.org/10.3389/fpsyg.2018.02340

Finlay-Jones, A. L., Rees, C. R., & Kane, R. T. (2015). Self-compassion, emotion

    regulation and stress among Australian psychologists: Testing an emotion

    regulation model of self-compassion using structural equation modelling. *PLOS

    ONE, 10*(7), 1-19. https://doi.org/10.1371/journal.pone.0133481

Fleury, M., Grenier, G., & Barnvita, J. (2017). A comparative study of job satisfaction

    among nurses, psychologists/psychotherapists and social workers working in

Quebec mental health teams. *BMC Nursing, 16*(62), 1-12.

https://doi.org/10.1186/s12912-017-0255-x

Fouquereau, E., Morin, A. J. S., Lapointe, É., Mokounkolo, R., & Gillet, N. (2018).

Emotional labor profiles: Associations with key predictors and outcomes. *Work

and Stress, 33*(3), 268-294. https://doi.org/10.1080/02678373.2018.1502835

Fox, K. R., Harris, J. A., Wang, S. B., Millner, A. J., Deming, C. A., & Nock, M. K.

(2020). Self-injurious thoughts and behaviors interview – revised: Development,

reliability, and validity. *Psychological Assessment, 32*(7), 677-689.

http://dx.doi.org/10.1037/pas0000819

Gabbard, G. O. (2009). *Textbook of psychotherapeutic treatments*. Retrieved from

https://doi-org.dbgw.lis.curtin.edu.au/10.1176/appi.books.9781585623648

Gabriel, A. S., Acosta, J. D., & Grandey, A. A. (2015). The value of a smile: Does

emotional performance matter more in familiar or unfamiliar exchanges? *Journal

of Business and Psychology, 30*(1), 37-50. https://doi.org/10.1007/s10869-013-

9329-2

Garcia, C. D. L., Abreu, L. C. D., Ramos, J. L. S., Castro, C. F. D. D., Smiderle, F. R.

N., Santos, J. A. D., & Bezerra, I. M. P. (2019). Influence of burnout on patient

safety: systematic review and meta-analysis. *Medicina, 55*(9), 553-566.

https://doi.org/10.3390/medicina55090553

Geldman, A., & Carlin, J. (2014). Beyond power calculations: Assessing type S (sign)

and type M (magnitude) errors. *Perspectives on Psychological Science, 9*(6),

641-651. https://doi.org/10.1177/1745691614551642

Gerber, Z., & Anaki, D. (2021). The role of self-compassion, concern for others, and

    basic psychological needs in the reduction of caregiving burnout. *Mindfulness,*

    12(3), 741-750. https://doi.org/10.1007/s12671-020-01540-1

Germer, C., & Neff, K. (2019). *Teaching the mindful self-compassion program: A guide*

    for professionals. Guilford Press

Ghahramani, S., Lankarani, K. B., Yousefi, M., Heydari, K., Shahabi, S., & Azmand, S.

    (2021). A systematic review and meta-analysis of burnout among healthcare

    workers during COVID-19. *Frontiers in Psychiatry, 12*, 1-16.

    http://dx.doi.org/10.3389/fpsyt.2021.758849

Giovanetti, A. K., Punt, S. E. W., Nelson, E., & Ilardi, S. S. (2022). Teletherapy versus

    in-person psychotherapy for depression: A meta-analysis of randomized

    controlled trials. *Telemedicine and e-Health, 28*(8), 1077-1089.

    http://doi.org/10.1089/tmj.2021.0294

Gilbert, H. (2022). The therapeutic relationship in compassion focused therapy. In P.

    Gilbert & G. Simos (Eds.), *Compassion Focused Therapy* (pp. 385-400). Taylor

    & Francis.

Glomb, T. M., & Tews, M. J. (2004). Emotional labor: A conceptualization and scale

    development. *Journal of Vocational Behavior, 64*(1), 1-23.

    https://doi.org/10.1016/S0001-8791(03)00038-1

Goldblatt, H. (2009). Caring for abused women: impact on nurses' professional and

    personal life experiences. *Journal of Advanced Nursing, 65*(8), 1645-1654.

    https://doi.org/10.1111/j.1365-2648.2009.05019.x

Grandey, A, A. (2000). Emotion regulation in the workplace: A new way to

    conceptualize emotional labor. *Journal of Occupational Health Psychology, 5*(1),

    95-110. https://doi.org/10.1037//1076-8998.5.1.95

Grandey, A. A., Chi, N., & Diamond, J. A. (2013). Show me the money! Do financial

    rewards for performance enhance or undermine the satisfaction from emotional

    labor? *Personnel Psychology, 66*, 569-612. https://doi.org/10.1111/peps.12037

Grandey, A. A., Foo, S. C., Groth, M., & Goodwin, R. E. (2012). Free to be you and me:

    A climate of authenticity alleviates burnout from emotional labor. *Journal of*

    Occupational Health Psychology, 17(1), 1-14. https://doi.org/10.1037/a0025102

Grandey, A. A., & Gabriel, A. (2015). Emotional labor at a crossroads: Where do we go

    from here?. *Annual Review of Organizational Psychology and Organizational*

    Behavior, 2, 323-349. https://doi.org/10.1146/annurev-orgpsych-032414-111400

Grandey, A. A., & Melloy, R. C. (2017). The state of the heart: Emotional labor as

    emotion regulation reviewed and revised. *Journal of Occupational Health*

    Psychology, 22(3), 1-16. https://doi.org/10.1037/ocp0000067

Grandey, A. A., & Sayre, G. M. (2019). Emotional labor: Regulating emotions for a

    wage. *Current Directions in Psychological Science, 28*(2), 131-137.

    https://doi.org/10.1177/0963721418812771

Gross, J. J. (1998). The emerging field of emotion regulation: An integrative review.

    Review of General Psychology, 2(3), 271-299. http://dx.doi.org/10.1037/1089-

    2680.2.3.271

Gross, J. J. (2002). Emotion regulation: Affective, cognitive, and social consequences.

    Psychophysiology, 39(3), 281-291. https://doi.org/10.1017/S0048577201393198

Gross, J. J. (2013). Emotion regulation: Taking stock and moving forward. *Emotion, 13*(3), 359-365. https://doi.org/10.1037/a0032135

Gross, J. J., & Feldman Barrett, L. (2011). Emotion generation and emotion regulation: One or two depends on your point of view. *Emotion Review, 3*(1), 8-16. https://doi.org/10.1177/175407391038097

Hammond, T. E., Crowther, A., & Drummond, S. (2018). A thematic inquiry into the burnout experience of Australian solo-practicing clinical psychologists. *Frontiers in Psychology, 8*¸ 1-13. https://doi.org/10.3389/fpsyg.2017.01996

Han, S., Shanafelt, T. D., Sinsky, C. A., Awad, K. M., Dyrbye, L. N., Fiscus, L. C., ... & Goh, J. (2019). Estimating the attributable cost of physician burnout in the United States. *Annals of Internal Medicine, 170*(11), 784-790. http://dx.doi.org/10.7326/M18-1422

Hansen, E. M., Eklund, J. H., Hallén, A., Bjurhager, C, S., Norrström, E., Viman, A., & Stocks, E. L. (2018). Does feeling empathy lead to compassion fatigue or compassion satisfaction? The role of time perspective. *The Journal of Psychology: Interdisciplinary and Applied, 152*(8), 630-645. https://doi.org/10.1080/00223980.2018.1495170

Happell, B., & Koehn, S. (2011). Seclusion as a necessary intervention: The relationship between burnout, job satisfaction and therapeutic optimism and justification for the use of seclusion. *Journal of Advanced Nursing, 67*(6), 1222-1231. http://dx.doi.org/10.1111/j.1365-2648.2010.05570.x

Hart, C. M., Ritchie, T. D., Hepper, E. G., & Gebauer, J. E. (2015). The balanced inventory of desirable responding short form (BIDR-16). *SAGE open, 5*(4), 1-9. https://doi.org/10.1177/2158244015621113

Hawes, S. W., Byrd, A. L., Henderson, C. E., Gazda, R. L., Burke, J. D., Loeber, R., &
Pardini, D. A. (2014). Refining the parent-reported inventory of callous–
unemotional traits in boys with conduct problems. *Psychological Assessment,
26*(1), 256-266. https://doi.org/10.1037/a0034718

Hayes, A. F. (2022). *Introduction to mediation, moderation, and conditional process
analysis: A regression-based approach* (2nd ed.). Guilford Press

Hayes, J. A., Gelso, C. J., Goldberg, S., & Kivlighan, D. M. (2018). Countertransference
management and effective psychotherapy: Meta-analytic findings.
Psychotherapy, 55(4), 496-507. https://doi.org/10.1037/pst0000189

Hayes, J. A., Gelso, C. J., & Hummel, A. M. (2011). Managing countertransference.
Psychotherapy, 48(1), 88-97. https://doi.org/10.1037/a0022182

Hayes, J. A., Lockard, A. J., Janis, R. A., & Locke, B. D. (2016). Construct validity of
the Self-Compassion Scale-Short Form among psychotherapy clients.
Counselling Psychology Quarterly, 29(4), 405-422.
https://doi.org/10.1080/09515070.2016.1138397

Hayes, J. A., McCracken, J. E., McClanahan, M. K., Hill, C. E., Harp, J. S., &
Carozzoni, P. (1998). Therapist perspectives on countertransference: Qualitative
data in search of a theory. *Journal of Counseling Psychology, 45*(4), 468–482.
https://doi.org/10.1037/0022-0167.45.4.468

Hayes, S. C., Luoma, J. B., Bond, F. W., Masuda, A., & Lillis, J. (2006). Acceptance
and commitment therapy: Model, processes and outcomes. *Behaviour Research
and Therapy 44*(1), 1-25. https://doi.org/10.1016/j.brat.2005.06.006

Heard, H. L., & Swales, M. A. (2016). *Changing behavior in DBT*. The Guilford Press

Hegel, J., Halkett, G. K., Schofield, P., Rees, C. S., Heritage, B., Suleman, S., Inhestern, L., Butler, T., Fitch, M. I., Breen, L. J. (2021). The relationship between present-centered awareness and attention, burnout, and compassion fatigue in oncology health professionals. *Mindfulness, 12*(5), 1224-1233. https://doi.org/10.1007/s12671-020-01591-4

Heinemann, L. V., & Heinemann, T. (2017). Burnout research: Emergence and scientific investigation of a contested diagnosis. *Sage Open, 7*(1), 1-12. https://doi.org/10.1177/2158244017697154

Heuven, E., Bakker, A. B., Schaufeli, W. B., & Huisman, N. (2006). The role of self-efficacy in performing emotion work. *Journal of Vocational Behavior, 69*(2), 222-235. https://doi.org/10.1016/j.jvb.2006.03.002

Hill, C. E., Lent, R. W., Morrison, M. A., Pinto-Coelho, K., Jackson, J. L., & Kivlighan, D. M. (2016). Contribution of supervisor intentions to client change: The therapist perspective. *The Clinical Supervisor, 35*(2), 227-248. http://dx.doi.org/10.1080/07325223.2016.1193783

Hill, C. E., Thompson, B. J., & Williams, E. N. (1997). A guide to conducting consensual qualitative research. *The Counseling Psychologist, 25*(4), 517-572. doi:10.1177/0011000097254001

Hill, R. G., Atnas, C. I., Ryan, P., Ashby, K., & Winnington, J. (2010). Whole team training to reduce burn-out amongst staff on an in-patient alcohol ward. *Journal of Substance Use, 15*(1), 42-50. https://doi.org/10.3109/14659890903013059

Hings, R. F., Wagstaff, C. R. D., Anderson, V., Gilmore, S., & Thelwell, R. C. (2018a). Emotional labor and professional practice in sports medicine and science.

Scandinavian Journal of Medicine and Science in Sports, 28(2), 704-716.

https://doi.org/10.1111/sms.12941

Hings, R. F., Wagstaff, C. R. D., Anderson, V., Gilmore, S., & Thelwell, R. C. (2018b).

Professional challenges in elite sports medicine and science: Composite vignettes

of practitioner emotional labor. *Psychology of Sport and Exercise, 35*, 66-73.

https://doi.org/10.1016/j.psychsport.2017.11.007

Hings, R. F., Wagstaff, C. R. D., Anderson, V., Gilmore, S., & Thelwell, R. C. (2020).

Better preparing sports psychologists for the demands of applied practice: The

emotional labor training gap. *Journal of Applied Sport Psychology, 32*, 335-356.

https://doi.org/10.1080/10413200.2018.1560373

Hobfoll, S. E. (1989). Conservation of resources: A new attempt at conceptualizing

stress. *American Psychologist, 44*(3), 513-524. https://doi.org/10.1037/0003-

066X.44.3.513

Hochschild, A. R. (1983). *The managed heart: Commercialization of human feeling*.

Berkeley, CA: University of California Press.

Hseih, C., Hsieh, J., & Huang, I. (2016) Self-efficacy as a mediator and moderator

between emotional labor and job satisfaction: A case study of public service

employees in Taiwan. *Public Performance and Management Review, 40*(1), 71-

96. http://dx.doi.org/10.1080/15309576.2016.1177557

Hu, L., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure

analysis: Conventional criteria versus new alternatives. *Structural Equation

Modeling, 6*(1), 1-55. https://doi.org/10.1080/10705519909540118

Hülsheger, U. R., & Schewe, A. F. (2011). On the costs and benefits of emotional labor: A meta-analysis of three decades of research. *Journal of Occupational Health Psychology, 16*(3), 361-389. https://doi.org/10.1037/a0022876

Hülsheger, U. R., Lang, J. W., Schewe, A. F., & Zijlstra, F. R. (2015). When regulating emotions at work pays off: a diary and an intervention study on emotion regulation and customer tips in service jobs. *Journal of Applied Psychology, 100*(2), 263. https://doi.org/10.1037/a0038229

Hülsheger, U.R., Alberts, H. J. E. M., Feinholdt, A., & Lang, J. W. B. (2013). Benefits of mindfulness at work: The role of mindfulness in emotion regulation, emotional exhaustion and job satisfaction. *Journal of Applied Psychology, 98*(2), 310-325. https://doi.org/10.1037/a0031313

Humphrey, R. H., Ashforth, B. E., & Diefendorff, J. M. (2015). The bright side of emotional labor. *Journal of Organizational Behavior, 36*(6), 749-769. https://doi.org/10.1002/job.2019

Humphreys, L., Crino, R., & Wilson, I. (2017). Psychological functioning predicts competence development for postgraduate students of professional psychology. *Training and education in professional psychology, 11*(1), 49-56. https://doi.org/10.1037/tep0000139

Huppertz, A. V., Hülsheger, U. R., De Calheiros Velozo, J., & Schreurs, B. H. (2020). Why do emotional labor strategies differentially predict exhaustion? Comparing psychological effort, authenticity, and relational mechanisms. *Journal of Occupational Health Psychology, 25*(3), 214-226. https://doi.org/10.1037/ocp0000179

Inwood, E., & Ferrari, M. (2018). Mechanisms of change in the relationship between

    self-compassion, emotion regulation, and mental health: A systematic review.

    Applied Psychology: Health and Well-Being, 10(2), 215-235.

    https://doi.org/10.1111/aphw.12127

Jang, E. H., Park, D., Lee, D. H., Lee, D., & Chol, Y. H. (2015). A validation study on

    the translated Korea version of emotional labor scale (ELS) in hospitality

    organizations. *Indian Journal of Science and Technology, 8*(5), 1-9.

    https://doi.org/10.17485/ijst/2015/v8iS5/62026

Jaredić, B., Hinić, D., Stanojević, D, Zečević, S., & Ignjatović-Ristić, D. (2017).

    Affective temperament, social support and stressors at work as the predictors of

    life and job satisfaction among doctors and psychologists. *Vojnosanitetski*

    Pregled, 74(3), 241-248. https://doi.org/10.2298/VSP151020183J

Jun, J., Ojemeni, M. M., Kalamani, R., Tong, J., & Crecelius, M. L. (2021). Relationship

    between nurse burnout, patient and organizational outcomes: Systematic review.

    International Journal of Nursing Studies, 119.

    https://doi.org/10.1016/j.ijnurstu.2021.103933

Kaeding, A., Sougleris, C., Reid, C., van Vreeswijk, M. F., Hayes, C., Dorrian, J., &

    Simpson, S. (2017). Professional burnout, early maladaptive schemas, and

    physical health in clinical and counselling psychology trainees. *Journal of Clinical*

    Psychology, 73(12), 1782-1796. https://doi.org/10.1002/jclp.22485

Kammeyer-Mueller, J. D., Rubenstein, A. L., Long, D. M., Odio, M. A., Buckman, B.

    R., Zhang, Y., & Halvorsen-Ganepola, M. D. K. (2013). A meta-analytic

    structural model of dispositional affectivity and emotional labor. *Personnel*

    Psychology, 66(1), 47-90. https://doi.org/10.1111/peps.12009

Kim, J. J., Brookman-Frazee, L., Gellatly, R., Stadnick, N., Barnett, M. L., & Lau, A. S. (2018). Predictors of burnout among community therapists in the sustainment phase of a system-driven implementation of multiple evidence-based practices in children's mental health. *Professional Psychology: Research and Practice, 49*(2), 132. https://doi.org/10.1037/pro0000182

Kinman, G., & Leggetter, S. (2016). Emotional labor and well-being: What protects nurses?. *Healthcare, 4*(4), 89-101. https://doi.org/10.3390/healthcare4040089

Kline, R. B. (2016). *Principles and practice of structural equation modelling* (4th ed.). The Guildford Press

Klocek, A., Řiháček, T., & Cígler, H. (2022). Czech version of the Emotion Regulation Skills Questionnaire (ERSQ): Psychometric evaluation and network model in an adult clinical sample. *Psychological Assessment, 34*(6), 55-64. https://doi.org/10.1037/pas0001132

Kolar, C., von Treuer, K., & Koh, C. (2016). Resilience in early-career psychologists: Investigating challenges, strategies, facilitators, and the training pathway. *Australian Psychologist, 52*(3), 198-208. https://doi.org/10.1111/ap.12197

Kotera, Y., & Sheffield, D. (2020). Revisiting the self-compassion scale-short form: Stronger associations with self-inadequacy and resilience. *SN Comprehensive Clinical Medicine, 2*(6), 761-769. https://doi.org/10.1007/s42399-020-00309-w

Kuyken, W., Peters, E., Power, M., Lavender T., & Rabe-Hesketh, S. (2000). A longitudinal study of the psychological adaptation of trainee clinical psychologists. *Clinical Psychology and Psychotherapy, 7*(5), 394-400. https://doi.org/10.1002/1099-0879(200011)7:5<394::AID-CPP268>3.0.CO;2-O

Lambert, M. J., & Barley, D. E. (2001). Research summary on the therapeutic

    relationship and psychotherapy outcome. *Psychotherapy: Theory, Research,*

    Practice, Training, 38(4), 357-361. https://doi.org/10.1037/0033-3204.38.4.357

Lamothe, J., Geoffrion, S., Couvrette, A., & Guay, S. (2021). Supervisor support and

    emotional labor in the context of client aggression. *Children and Youth Services*

    Review, 127, 106105. https://doi.org/10.1016/j.childyouth.2021.106105

Lane, J. A. (2015). The imposter phenomenon among emerging adults transitioning into

    professional life: Developing a grounded theory. *Adultspan Journal, 14*(2). doi:

    10.1002/adsp.12009

Latorre, C., Leppma, M., Platt, L. F., Shook, N., & Daniels, J. (2021). The relationship

    between mindfulness and self-compassion for self-assessed competency and self-

    efficacy of psychologists-in-training. *Training and Education in Professional*

    Psychology. https://doi.org/10.1037/tep0000395

Lee, R. T., & Brotheridge, C. M. (2011). Words from the heart speak to the heart: A

    study of deep acting, faking, and hiding among child care workers. *Career*

    Development International, 16(4), 401-420. https://doi-

    org.dbgw.lis.curtin.edu.au/10.1108/13620431111158805

Leong, F. T. L., & Kalibatseva, Z. (2011). Effective psychotherapy for Asian

    Americans: From cultural accommodation to cultural congruence. *Clinical*

    Psychology: Science and Practice, 18(3), 242-245.

    https://doi.org/10.1111/j.1468-2850.2011.01256.x

Levitt, H. M., Bamberg, M., Creswell, J. W., Frost, D. M., Josselsen, R., & Suárez-

    Orozco, C., (2018). Journal article reporting standards for qualitative primary,

    qualitative meta-analytic, and mixed methods research in psychology: The APA

Publications and Communications Board task force report. *American*

    Psychologist, 73(1), 26-46. https://doi.org/10.1037/amp0000151

Lima-Costa, A., Bonfá-Araujo, B., Pechorro, P., & Marcus, D. K. (2022). Brazilian

    Portuguese adaptation of the spitefulness scale and associations with personality

    traits. *Psychological Assessment, 34*(7), e65-e71.

    https://doi.org/10.1037/pas0001135

Lin, C. Alimoradi, Z., Griffiths, M. D., & Pakpour, A. H. (2022). Psychometric

    properties of the Maslach Burnout Inventory for medical personnel (MBI-HSS-

    MP). *Heliyon, 8*(2), 1-8. https://doi.org/10.1016/j.heliyon.2022.e08868

López, A., Sanderman, R., Ranchor, A. V., & Schroevers, M. J. (2018). Compassion for

    others and self-compassion: Levels, correlates, and relationship with

    psychological well-being. *Mindfulness, 9*(1), 325-331.

    https://doi.org/10.1007/s12671-017-0777-z

Luceño-Moreno, L., Talavera-Velasco, B., Vázquez-Estévez, D., & Martín-García, J.

    (2022). Mental Health, Burnout, and Resilience in Healthcare Professionals After

    the First Wave of COVID-19 Pandemic in Spain: A Longitudinal Study. *Journal*

    of Occupational and Environmental Medicine, 64(3), e114-e123.

    https://doi.org/10.1097/JOM.0000000000002464

Ma, Y., Wang, F., & Cheng, X. (2021). Kindergarten teachers' mindfulness in teaching

    and burnout: The mediating role of emotional labor. *Mindfulness, 12*(3), 722-

    729. https://doi.org/10.1007/s12671-020-01538-9

Mann, D. (2010). *Gestalt therapy: 100 key points and techniques*. Hove, East Sussex:

    Routledge

Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. *Journal of Occupational Behaviour, 2*(2), 99–113. https://doi.org/10.1002/job.4030020205

Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: recent research and its implications for psychiatry. *World Psychiatry, 15*(2), 103-111. https://doi.org/10.1002/wps.20311

Maslach, C., & Leiter, M. P. (2022). *The burnout challenge: Managing people's relationships with their jobs*. Harvard University Press

Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology, 52*(1), 397–422. https://doi.org/10.1146/annurev.psych.52.1.397

Maunder, R. G., Heeney, N. D., Hunter, J. J., Strudwick, G., Jeffs, L. P., Ginty, L., ... & Wiesenfeld, L. A. (2022). Trends in burnout and psychological distress in hospital staff over 12 months of the COVID-19 pandemic: a prospective longitudinal survey. *Journal of Occupational Medicine and Toxicology, 17*(1), 1-11. https://doi.org/10.1186/s12995-022-00352-4

Mauno, S., Ruokolainen, M., De Bloom, J., & Kinnunen, U. (2017). Does recovery buffer against emotional labor in terms of motivational outcomes at work? Analyzing age differences among Finnish health care professionals. *Applied Nursing Research, 36*, 88-94. https://doi.org/10.1016/j.apnr.2017.06.007

McCance, A. S., Nye, C. D., Wang, L., Jones, K. S., & Chiu, C. (2013). Alleviating the burden of emotional labor: The role of social sharing. *Journal of Management, 39*(2), 392-415. https://doi.org/10.1177/0149206310383909

McCormack, H. M., MacIntyre, T. E., O'Shea, D., Herring, M. P., & Campbell, M. J. (2018). The prevalence and cause (s) of burnout among applied psychologists: A

systematic review. *Frontiers in Psychology, 9*.

https://doi.org/10.3389/fpsyg.2018.01897

McMahon, T. P., & Naragon-Gainey, K. (2020). Ecological validity of trait emotion

regulation strategy measures. *Psychological Assessment, 32*(8), 796-802.

http://dx.doi.org/10.1037/pas0000827

Mehr, M., Senteney, A., & MacCreadie, T. (1994). Daydreams, stress and burn-out in

women mental health workers: A preliminary clinical report. *Imagination,*

Cognition and Personality, 14(2), 105-115. https://doi.org/10.2190/103X-40HD-

A1QN-7KC

Meredith, L. S., Bouskill, K., Chang, J., Larkin, J., Motala, A., & Hempel, S. (2022).

Predictors of burnout among US healthcare providers: a systematic review. *BMJ*

Open, 12(8). https://doi.org/10.1136/bmjopen-2021-054243

Mesmer-Magnus, J. R., DeChurch, L. A., & Wax, A. (2012). Moving emotional labor

beyond surface and deep acting: A discordance-congruence perspective.

Organisational Psychology Review, 2(1), 6-53.

https://doi.org/10.1177/2041386611417746

Miller, B. K. (2021). Impact of social desirability and common method variance on two

measures of entitlement. *Psychological Reports, 124*(4), 1845-1862.

https://doi.org/10.1177/0033294120937439

Miller, B., & Sprang, G. (2017). A components-based practice and supervision model

for reducing compassion fatigue by affecting clinician experience. *Traumatology,*

23(2), 153-164. https://doi.org/10.1037/trm0000058

Moon, K., Riege, A., Gourdon-Kanhukamwem A., & Vallée, G. (2022). Development

and validation of the treatment self-regulation questionnaire assessing healthcare

professionals' motivation for flu vaccination (TSRQ-Flu). *Psychology and Health, 37*(3), 259-278. https://doi.org/10.1080/08870446.2021.1912343

Mooren, T., & Stöfsel, M. (2015). *Diagnosing and treating complex trauma*. Hove, East Sussex: Routledge.

Moorey, S. (2014). "Is it them or is it me?" Transference and countertransference in CBT. In A. Whittington & N. Grey (Eds.), *How to become a more effective CBT therapist: Mastering metacompetence in clinical practice* (pp. 132-145). Chichester, West Sussex: John Wiley & Sons.

Morse, J. M. (1994). Designing funded qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 220-235). Thousand Oaks, CA: Sage.

Morse, J. M. (1995). The significance of saturation. *Qualitative Health Research, 5*(2), 147-149. https://doi.org/10.1177/104973239500500201

Muthén, L. K., & Muthén, B. O. (2015). *Mplus user's guide* (7th ed.). Muthén & Muthén

National Health and Medical Research Council. (2018). National statement on ethical conduct in human research. Canberra: Commonwealth of Australia. Retrieved from https://www.nhmrc.gov.au/about-us/publications/national-statement-ethical-conduct-human-research-2007-updated-2018

Navqi, F. (2013). Emotional labor: A study of moderators and outcomes in hotel industry. *Management and Labor Studies, 38*(4), 471-482. https://doi.org/10.1177/0258042X13513156

Neff, K. D. (2003). The development and validation of a scale to measure self-compassion. *Self and Identity, 2*(3), 223-250. https://doi.org/10.1080/15298860309027

Neff, K. D., & Beretvas, S. N. (2013). The role of self-compassion in romantic

    relationships. *Self and Identity, 12*(1), 78-98.

    https://doi.org/10.1080/15298868.2011.639548

Neff, K. D., & Pommier, E. (2013). The relationship between self-compassion and

    other-focused concern among college undergraduates, community adults, and

    practicing meditators. *Self and Identity, 12*(2), 160-176.

    https://doi.org/10.1080/15298868.2011.649546

Neff, K. D., Knox, M. C., Long, P., & Gregory, K. (2020). Caring for others without

    losing yourself: An adaptation of the Mindful Self-Compassion Program for

    Healthcare Communities. *Journal of Clinical Psychology, 76*(9), 1543-1562.

    https://doi.org/10.1002/jclp.23007

Neff, K. D., Tóth–Király, I., & Colosimo, K. (2018). Self–compassion is best measured

    as a global construct and is overlapping with but distinct from neuroticism: A

    response to Pfattheicher, Geiger, Hartung, Weiss, and Schindler (2017).

    European Journal of Personality, 32(4), 371-392.

    https://doi.org/10.1002/per.2148

Neff, K. D., Tóth-Király, I., Yarnell, L. M., Arimitsu, K., Castilho, P., Ghorbani, N., &

    Mantzios, M. (2019). Examining the factor structure of the Self-Compassion

    Scale in 20 diverse samples: Support for use of a total score and six subscale

    scores. *Psychological Assessment, 31*(1), 27-45.

    https://doi.org/10.1037/pas0000629

Norcross, J. C., & Lambert, M. J. (2018). Psychotherapy relationships that work III.

    Psychotherapy, 55(4), 303-315. http://dx.doi.org/10.1037/pst0000193

O'Connor, K., Muller Neff, D., & Pitman, S. (2018). Burnout in mental health

professionals: A systematic review and meta-analysis of prevalence and

determinants. *European Psychiatry, 53*, 74-99.

https://doi.org/10.1016/j.eurpsy.2018.06.003

Onwezen, M. C., Van Veldhoven, M. J. P. M., & Biron, M. (2014). The role of

psychological flexibility in the demands–exhaustion–performance relationship.

European Journal of Work and Organizational Psychology, 23(2), 163-176.

https://doi.org/10.1080/1359432X.2012.742242

Orlinsky, D. E., Botermans, J. F., & Rønnestad, M. H. (2001). Towards an empirically

grounded model of psychotherapy training: Four thousand therapists rate

influences on their development. *Australian Psychologist, 36*(2), 139-149.

https://doi.org/10.1080/00050060108259646

Papathanasiou, I. V. (2015). Work-related mental consequences: Implications of burnout

on mental health status among health care providers. *Acta Informatica Medica,

23*(1), 22-28. https://doi.org/10.5455/aim.2015.23.22-28

Pardess, E., Mikulincer, M., Dekel, R., & Shaver, P. R. (2014). Dispositional attachment

orientations, contextual variations in attachment security, and compassion fatigue

among volunteers working with traumatized individuals. *Journal of Personality,

82*(5), 355-366. https://doi.org/10.1111/jopy.12060

Patsiopoulos, A. T., & Buchanan, M. J. (2011). The practice of self-compassion in

counseling: A narrative inquiry. *Professional Psychology: Research and

Practice*, *42*(4), 301-307. https://doi.org/10.1037/a0024482

Paulhus, D. L. (1991). Measurement and control of response bias. In J. P. Robinson, P.

R. Shaver, & L. S. Wrightsman (Eds.), *Measures of personality and social*

psychological attitudes (pp. 17-59). Academic Press.

https://doi.org/10.1016/B978-0-12-590241-0.50006-X

Pearson, A., & Weinberg, A. (2017). The impact of counsellor training on emotional

intelligence. *British Journal of Guidance and Counselling, 45*(5), 610-621.

https://doi.org/10.1080/03069885.2016.1226496

Pérez-Rojas, A. E., Palma, B., Bhatia, A., Jackson, J., Norwood, E., Hayes, J. A., &

Gelso, C. J. (2017). The development and initial validation of the

Countertransference Management Scale. *Psychotherapy, 54*(3), 307-319.

http://dx.doi.org/10.1037/pst0000126

Peterson, U., Demerouti, E., Bergström, G., Samuelsson, M., Åsberg, M., & Nygren, Å.

(2008). Burnout and physical and mental health among Swedish healthcare

workers. *Journal of Advanced Nursing, 62*(1), 84-95.

https://doi.org/10.1111/j.1365-2648.2007.04580.x

Phillippi, J., & Lauderdale, J. (2018). A guide to field notes for qualitative research:

Context and conversation. *Qualitative Health Research, 28*(3), 381-388.

https://doi.org/10.1177/1049732317697102

Productivity Commission (2020). Mental health: Productivity commission inquiry

report. Canberra: Commonwealth of Australia. Retrieved from

https://www.pc.gov.au/inquiries/completed/mental-health/report

Prudenzi, A., D. Graham, C., Flaxman, P. E., & O'Connor, D. B. (2022). Wellbeing,

burnout, and safe practice among healthcare professionals: predictive influences

of mindfulness, values, and self-compassion. *Psychology, Health & Medicine,*

27(5), 1130-1143. https://doi.org/10.1080/13548506.2021.1898651

Psychology Board of Australia. (2019). *Psychology board of Australia: Registrant data, reporting period: 01 April 2019 to 30 June* 2019. Retrieved from https://www.psychologyboard.gov.au/About/Statistics.aspx

Puolakanaho, A., Tolvanen, A., Kinnunen, S. M., & Lappalainen, R. (2018). Burnout-related ill-being at work: Associations between mindfulness and acceptance skills, worksite factors, and experienced well-being in life. *Journal of Contextual Behavioral Science, 10*, 92-102. https://doi.org/10.1016/j.jcbs.2018.09.003

Raes, F., Pommier, E., Neff, K. D., & Van Gucht, D. (2011). Construction and factorial validation of a short form of the self-compassion scale. *Clinical Psychology & Psychotherapy, 18*(3), 250-255. https://doi.org/10.1002/cpp.702

Rafaeli, E., Bernstein, D. P., & Young, J. (2011). *Schema therapy: Distinctive features*. Routledge

Richardson, C. M., Trusty, W. T., & George, K. A. (2020). Trainee wellness: Self-critical perfectionism, self-compassion, depression, and burnout among doctoral trainees in psychology. *Counselling Psychology Quarterly, 33*(2), 187-198. ttps://doi.org/10.1080/09515070.2018.1509839

Ring, D., & Lawn, S. (2019). Stigma perpetuation at the interface of mental health care: a review to compare patient and clinician perspectives of stigma and borderline personality disorder. *Journal of Mental Health,* 1-21. https://doi.org/10.1080/09638237.2019.1581337

Rodriguez, S. Y. S., & Carlotto, M. S. (2017). Predictors of burnout syndrome in psychologists. *Estudos de Psicologia (Campinas), 34*(1), 141-150. https://doi.org/10.1590/1982-02752017000100014

Rollins, A. L., Kukla, M., Morse, G., Davis, L., Leiter, M., Monroe-DeVita, M., ... & Salyers, M. P. (2016). Comparative effectiveness of a burnout reduction intervention for behavioral health providers. *Psychiatric Services, 67*(8), 920-923. https://doi.org/10.1176/appi.ps.201500220

Roncalli, S., & Byrne, M. (2016). Relationships at work, burnout and job satisfaction: a study on Irish psychologists. *Mental Health Review Journal, 21*(1), 23-36. https://doi.org/10.1108/MHRJ-01-2015-0002

Rønnestad, M. H., Orlinsky, D. E., Schröder, T. A., Skovholt, T. M., & Willutzki, U. (2019). The professional development of counsellors and psychotherapists: Implications of empirical studies for supervision, training and practice. *Counselling and Psychotherapy Research, 19*(3), 214-230. https://doi.org/10.1002/capr.12198

Rupert, P. A., & Dorociak, K. E. (2019). Self-care, stress, and well-being among practicing psychologists. *Professional Psychology: Research and Practice, 50*(5), 343-350. https://doi.org/10.1037/pro0000251

Rupert, P. A., Miller, A. O., & Dorociak, K. E. (2015). Preventing burnout: What does the research tell us?. *Professional Psychology: Research and Practice, 46*(3), 168-174. https://doi.org/10.1037/a0039297

Salvado, M., Marques, D. L., Pires, I. M., & Silva, N. M. (2021). Mindfulness-Based interventions to reduce burnout in primary healthcare professionals: A systematic review and meta-analysis. *Healthcare, 9*(10), 1342-1357. https://doi.org/10.3390/healthcare9101342

Salyers, M. P., Flanagan, M. E., Firmin, R., & Rollins, A. L. (2015). Clinicians'
perceptions of how burnout affects their work. *Psychiatric Services, 66*(2), 204-
207. https://doi.org/10.1176/appi.ps.201400138

Salyers, M. P., Hudson, C., Morse, G., Rollins, A. L., Monroe-DeVita, M., Wilson, C.,
& Freeland, L. (2011). BREATHE: A pilot study of a one-day retreat to reduce
burnout among mental health professionals. *Psychiatric Services, 62*(2), 214-217.
http://dx.doi.org/10.1176/ps.62.2.pss6202_0214

Santos, A., Mustafa, M. J., & Gwi, T. C. (2015). Trait emotional intelligence, emotional
labor, and burnout among Malaysian HR professionals. *Management Research
Review, 38*(1), 67-88. http://dx.doi.org/10.1108/MRR-06-2013-0143

Sanz-Vergel, A. I., Rodrigeuz-Munoz, A., Bakker, A. B., & Demerouti, E. (2012). The
daily spillover and crossover of emotional labor: Faking emotions at work and at
home. *Journal of Vocational Behavior, 81*(2), 209-217.
https://doi.org/10.1016/j.jvb.2012.07.003

Savard, C., Maheux-Caron, V., Vachon, D. D., Hétu, S., & Gamache, D. (2022). French
adaptation of the Affective and Cognitive Measure of Empathy (ACME-F).
Psychological Assessment, 34(3), 15-25. https://doi.org/10.1037/pas0001105

Scanlan, J. N., & Still, M. (2019). Relationships between burnout, turnover intention, job
satisfaction, job demands and job resources for mental health personnel in an
Australian mental health service. *BMC Health Services Research, 19*(1), 1-11.
https://doi.org/10.1186/s12913-018-3841-z

Schaubroeck, J., & Jones, J. R. (2000). Antecedents of workplace emotional labor
dimensions and moderators of their effects on physical symptoms. *Journal of*

Organizational Behavior, 21, 163-183. https://doi.org/10.1002/(SICI)1099-1379(200003)21:2<163::AID-JOB37>3.0.CO;2-L

Scott, B. A., Awasty, N., Johnson, R. E., Matta, F. K., & Hollenbeck, J. R. (2020). Origins and destinations, distances and directions: Accounting for the journey in the emotion regulation process. *Academy of Management Review, 45*(2), 423-446. https://doi.org/10.5465/amr.2017.0448

Siegel, J. A., Huellemann, K. L., Calogero, R. M., & Roberts, T. (2021). Psychometric properties and validation of the phenomenological body shame scale – revised (PBSS-R). *Body Image, 39*, 90-102. https://doi.org/10.1016/j.bodyim.2021.06.001

Simionato, G. K., & Simpson, S. (2018). Personal risk factors associated with burnout among psychotherapists: A systematic review of the literature. *Journal of Clinical Psychology, 74*(9), 1431-1456. https://doi.org/10.1002/jclp.22615

Simionato, G. K., Simpson, S., & Reid, C. (2019). Burnout as an ethical issue in psychotherapy. *Psychotherapy, 56*(4), 470-482. https://doi.org/10.1037/pst0000261

Simpson, S., Simionato, G., Smout, M., van Vreeswijk, M. F., Hayes, C., Sougleris, C., & Reid, C. (2019). Burnout amongst clinical and counselling psychologist: The role of early maladaptive schemas and coping modes as vulnerability factors. *Clinical Psychology and Psychotherapy, 26*(1), 35-46. https://doi.org/10.1002/cpp.2328

Skovhold, T. M., & Trotter-Mathison, M. (2013). Therapist professional resilience. In M. H. Rønnestad & T. M. Skovholt (Eds.), *The developing practitioner:*

Growth and stagnation of therapists and counsellors (pp. 247-264). Taylor &

Francis Group.

Skovholt, T. M., & Rønnestad, M. H. (2003). Struggles of the novice counsellor and

therapist. *Journal of Career Development, 30*(1), 45-58.

https://doi.org/10.1177/089484530303000103

Sloan, M. M. (2014). The consequences of emotional labor for public sector workers and

the mitigating role of self-efficacy. *American Review of Public Administration,*

44(3), 274-290. https://doi.org/10.1177/0275074012462864

Szczygiel, D. D., & Bazińska, R. (2021). Emotional intelligence mitigates the effects of

customer incivility on surface acting and exhaustion in service occupations: A

moderated mediation model. *Frontiers in Psychology, 11*, 1-14.

https://doi.org/10.3389/fpsyg.2020.506085

Tanzilli, A., Muzi, L., Ronningstam, E., & Lingiardi, V. (2017). Countertransference

when working with narcissistic personality disorder: An empirical investigation.

Psychotherapy, 54(2), 184-194. https://doi.org/10.1037/pst0000111

Taris, T. W. (2006). Is there a relationship between burnout and objective performance?

A critical review of 16 studies. *Work & Stress, 20*(4), 316-334.

https://doi.org/10.1080/02678370601065893

Thwaites, R., & Bennett-Levy, J. (2007). Conceptualizing empathy in cognitive

behaviour therapy: Making the implicit explicit. *Behavioural and Cognitive*

Psychotherapy, 35(5), 591-612. https://doi.org/10.1017/S1352465807003785

Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting

qualitative research (COREQ): a 32-item checklist for interviews and focus

groups. *International Journal for Quality in Health Care, 19*(6), 349-357.

https://doi.org/10.1093/intqhc/mzm042

Trombello, J. M., David, N. S., Robbins, M. A., & Ruchinskas, R. A. (2021). Burnout

During the COVID-19 Pandemic: Descriptive and Predictive Data from a Survey

of Psychologists at a Single Academic Medical Center. *Academic Psychiatry, 46*,

718-722. https://doi.org/10.1007/s40596-021-01562-4

Trougakos, J., Beal, D. J., Green, S. G., & Weiss, H. M. (2008). Making the break count:

An episodic examination of recovery activities, emotional experiences, and

positive affective displays. *The Academy of Management Journal, 51*(1), 131-

146. https://doi.org/10.2307/20159498

Turgoose, D., & Maddox, L. (2017). Predictors of compassion fatigue in mental health

professionals: A narrative review. *Traumatology, 23*(2), 172-185.

http://dx.doi.org/10.1037/trm0000116

Turnbull, M. G., & Rhodes, P. (2021). Burnout and growth: Narratives of Australian

psychologists. *Qualitative Psychology, 8*(1), 51-61.

https://doi.org/10.1037/qup0000146

Van den Bosch, R., & Taris, T. W. (2018). Authenticity and work: Its relations with

worker motivation and well-being. *Frontiers in Communication, 3*, 1-11.

https://doi.org/10.3389/fcomm.2018.00021

Van Der Merwe, H. (2019). Emotional labour and the practicing psychologist: When the

psychologist's professional emotions go awry. *European Journal for Qualitative

Research in Psychotherapy, 9*, 27-40.

https://ejqrp.org/index.php/ejqrp/article/view/58

Van Der Merwe, H., & Wetherell, M. (2020). The emotional psychologist: A qualitative

    investigation of norms, dilemmas, and contradictions in accounts of practice.

    Journal of Community and Applied Social Psychology, 30(2), 227-245.

    https://doi.org/10.1002/casp.2439

Van Sant., J. E., & Patterson, B. J. (2013). Getting in and getting out whole: Nurse-

    patient connections in the psychiatric setting. *Issues in Mental Health Nursing,

    34*(1), 36-45. https://doi.org/10.3109/01612840.2012.715321

Wagner, D. T., Barnes, C. M., & Scott, B. A. (2014). Driving it home: How workplace

    emotional labor harms employee home life. *Personnel Psychology, 67*, 487-516.

    https://doi.org/10.1111/peps.12044

Walser, R. O'Connell, M., & Coulter, C. (2019). *The heart of ACT*. New Harbinger

    Publications

Walsh, E. (2009). The emotional labor of nurses working in her Majesty's (HM) prison

    service. *Journal of Forensic Nursing, 5*, 143-152. https://doi.org/10.1111/j.1939-

    3938.2009.01047.x

Wang, K. L., & Groth, M. (2014). Buffering the negative effects of employee surface

    acting: The moderating role of employee-customer relationship strength and

    personalized services. *Journal of Applied Psychology, 99*(2), 341-350.

    https://doi.org/10.1037/a0034428

Weaver, A. D., & Allen, J. A. (2017). Emotional labor and the work of school

    psychologists. *Contemporary School Psychology, 21*, 276-286.

    https://doi.org/10.1007/s40688-017-0121-6

Weaver, A. D., Allen, J. A., & Byrne, R. E. (2019). Coping with emotional labor: an

    intervention study. *Management Research Review, 42*(9), 1033-1048.

    https://doi.org/10.1108/MRR-07-2018-0259

Webb, T. L., Miles, E., & Sheeran, P. (2012). Dealing with feeling: a meta-analysis of

    the effectiveness of strategies derived from the process model of emotion

    regulation. *Psychological Bulletin, 138*(4), 775-808.

    http://dx.doi.org/10.1037/a0027600

Weigold, I. K., Weigold, A., Kim S., Drakefor, N. M., & Dykema, S. A. (2016).

    Assessment of the psychometric properties of the revised academic hardiness

    scale in college student samples. *Psychological Assessment, 28*(10), 1207-1219

    https://doi.org/10.1037/pas0000255

Weinberg, I., & Ronningstam, E. (2020). Dos and don't in treatments of patients with

    narcissistic personality disorder. *Journal of Personality Disorders, 34*, 122-142.

    https://doi.org/10.1521/pedi.2020.34.supp.122

West, C. P., Dyrbye, L. N., & Shanafelt, T. D. (2018). Physician burnout: contributors,

    consequences and solutions. *Journal of Internal Medicine, 283*(6), 516-529.

    http://dx.doi.org/10.1111/joim.12752

Whelton, W. J. (2004). Emotional processes in psychotherapy: Evidence across

    therapeutic modalities. *Clinical Psychology and Psychotherapy, 11*, 58-71.

    https://doi.org/10.1002/cpp.392

Williams, B. E., Pomerantz, A. M., Segrist, D. J., & Pettibone, J. C. (2010). How

    impaired is too impaired? Ratings of psychologist impairment by psychologists in

    independent practice. *Ethics & Behavior, 20*(2), 149-160.

    https://doi.org/10.1080/10508421003595968

Williams, C., & Chellingsworth, M. (2010). CBT: *A clinician's guide to using the five areas approach*. London: Hodder Arnold.

Williams, E. N., Polster, D., Grizzard, M. B., Rockenbaugh, J., & Judge, A. B. (2003). What happens when therapists feel bored or anxious? A qualitative study of distracting self-awareness and therapists' management strategies. *Journal of Contemporary Psychotherapy, 33*(1). https://doi.org/10.1023/A:1021499526052

Wise, E. H., & Reuman, E. (2019). Promoting competent and flourishing life-long practice for psychologists: A communitarian perspective. *Professional Psychology: Research and Practice, 50*(2), 129-135. http://dx.doi.org/10.1037/pro0000226

World Health Organization (2019). *International statistical classification of diseases and related health problems* (11th ed.). https://icd.who.int/

Xanthopoulou, D., Bakker, A. B., & Fischbach, A. (2013). Work engagement among employees facing emotional demands: The role of personal resources. *Journal of Personnel Psychology, 12*(2), 74-84. http://dx.doi.org/10.1027/1866-5888/a000085

Xanthopoulou, D., Bakker, A. B., Oerlemans, W. G. M., & Koszucka, M. (2018). Need for recovery after emotional labor: Differential effects of daily deep and surface acting. *Journal of Organizational Behavior, 39*(4), 481-494. https://doi.org/10.1002/job.2245

Yadavaia, J. E., Hayes, S. C., & Vilardaga, R. (2014). Using acceptance and commitment therapy to increase self-compassion: A randomized controlled trial. *Journal of Contextual Behavioral Science, 3*(4), 248-257. https://doi.org/10.1016/j.jcbs.2014.09.002

Yadisaputra, M. (2015). The role of emotional intelligence and emotional labor among

 frontline employees in casino hotel Macao. *International Journal of Tourism*

 Sciences, 15(1-2), 44-58. https://doi.org/10.1080/15980634.2015.1118876

Yanchus, N. J., Eby, L. T., Lance, C. E., & Drollinger, S. (2010). The impact of

 emotional labor on work-family outcomes. *Journal of Vocational Behavior, 76*,

 105-117. https://doi.org/10.1016/j.jvb.2009.05.001

Yang, H. (2010). Factor loadings. In N. J. Salkind (ed.). *Encyclopedia of research*

 design. SAGE Publications. https://dx.doi.org/10.4135/9781412961288

Yang, Y., & Hayes, J. A. (2020). Causes and consequences of burnout among mental

 health professionals: A practice-oriented review of recent empirical literature.

 Psychotherapy, 57(3), 426-436. http://dx.doi.org/10.1037/pst0000317

Young, J. E., Klosko, J. S., & Weishaar, M. E. (2003). *Schema therapy: A practitioner's*

 guide. The Guildford Press

Zapf, D., Kern, M., Tschan, F., Holman, D., & Semmer, N. K. (2021). Emotion work: A

 work psychology perspective. *Annual Review of Organizational Psychology and*

 Organizational Behavior, 8, 139-72. https://doi.org/10.1146/annurev-orgpsych-

 012420-062451

Zapf, D., Vogt, C., Seifert, C., Mertini, H., & Isic, A. (1999). Emotion work as a source

 of stress: The concept and development of an instrument. *European Journal of*

 Work and Organizational Psychology, 8(3), 371-400.

 https://doi.org/10.1080/135943299398230

Appendices

Appendix A: HREC Approval

Curtin University

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29-May-2018

Name: Clare Rees
Department/School: School of Psychology
Email: C.Rees@curtin.edu.au

Dear Clare Rees

RE: Ethics Office approval
Approval number: HRE2018-0297

Thank you for submitting your application to the Human Research Ethics Office for the project **The Performance of Emotional Labour in Psychologists Conducting Psychotherapy**.

Your application was reviewed through the Curtin University Low risk review process.

The review outcome is: **Approved**.

Your proposal meets the requirements described in the National Health and Medical Research Council's (NHMRC) *National Statement on Ethical Conduct in Human Research (2007)*.

Approval is granted for a period of one year from **29-May-2018** to **28-May-2019**. Continuation of approval will be granted on an annual basis following submission of an annual report.

Personnel authorised to work on this project:

Name	Role
Clarke, James	Student
Rees, Clare	CI
Breen, Lauren	Co-Inv
Clarke, James	Student
Breen, Lauren	Co-Inv

Approved documents:

Document

Standard conditions of approval

1. Research must be conducted according to the approved proposal
2. Report in a timely manner anything that might warrant review of ethical approval of the project including:
   - proposed changes to the approved proposal or conduct of the study
   - unanticipated problems that might affect continued ethical acceptability of the project
   - major deviations from the approved proposal and/or regulatory guidelines
   - serious adverse events
3. Amendments to the proposal must be approved by the Human Research Ethics Office before they are implemented (except where an amendment is undertaken to eliminate an immediate risk to participants)
4. An annual progress report must be submitted to the Human Research Ethics Office on or before the anniversary of approval and a completion report submitted on completion of the project
5. Personnel working on this project must be adequately qualified by education, training and experience for their role, or supervised
6. Personnel must disclose any actual or potential conflicts of interest, including any financial or other interest or affiliation, that bears on this project
7. Changes to personnel working on this project must be reported to the Human Research Ethics Office
8. Data and primary materials must be retained and stored in accordance with the Western Australian University Sector Disposal Authority (WAUSDA) and the Curtin University Research Data and Primary Materials policy
9. Where practicable, results of the research should be made available to the research participants in a timely and clear manner
10. Unless prohibited by contractual obligations, results of the research should be disseminated in a manner that will allow public scrutiny; the Human Research Ethics Office must be informed of any constraints on publication
11. Approval is dependent upon ongoing compliance of the research with the Australian Code for the Responsible Conduct of Research, the National Statement on Ethical Conduct in Human Research, applicable legal requirements, and with Curtin University policies, procedures and governance requirements
12. The Human Research Ethics Office may conduct audits on a portion of approved projects.

Special Conditions of Approval

None

This letter constitutes low risk/negligible risk approval only. This project may not proceed until you have met all of the Curtin University research governance requirements.

Should you have any queries regarding consideration of your project, please contact the Ethics Support Officer for your faculty or the Ethics Office at hrec@curtin.edu.au or on 9266 2784.

Yours sincerely

Amy Bowater
Acting Manager, Research Integrity

Appendix B: HREC Amendment Approval

Curtin University

01-Dec-2020

Name: Clare Rees
Department/School: School of Psychology
Email: C.Rees@curtin.edu.au

Dear Clare Rees

RE: Amendment approval
Approval number: HRE2018-0297

Thank you for submitting an amendment request to the Human Research Ethics Office for the project **The Performance of Emotional Labour in Psychologists Conducting Psychotherapy**.

Your amendment request has been reviewed and the review outcome is: **Approved**

The amendment approval number is HRE2018-0297-04 approved on 01-Dec-2020.

The following amendments were approved:

1. Changed conditions for entry to the raffle.

2. The inclusion of four additional measures and one additional demographic question.

3. Change to the inclusion criteria to psychologists who directly provide psychotherapy as part of their work role.

Condition of Approval.

It is the responsibility of the Chief Investigator to ensure that any activity undertaken under this project adheres to the latest available advice from the Government or the University regarding COVID-19.

Any special conditions noted in the original approval letter still apply.

Standard conditions of approval

1. Research must be conducted according to the approved proposal
2. Report in a timely manner anything that might warrant review of ethical approval of the project including:
   - proposed changes to the approved proposal or conduct of the study
   - unanticipated problems that might affect continued ethical acceptability of the project
   - major deviations from the approved proposal and/or regulatory guidelines
   - serious adverse events
3. Amendments to the proposal must be approved by the Human Research Ethics Office before they are implemented (except where an amendment is undertaken to eliminate an immediate risk to participants)
4. An annual progress report must be submitted to the Human Research Ethics Office on or before the anniversary of approval and a completion report submitted on completion of the project
5. Personnel working on this project must be adequately qualified by education, training and experience for their role, or supervised
6. Personnel must disclose any actual or potential conflicts of interest, including any financial or other interest or affiliation, that bears on this

project

7. Changes to personnel working on this project must be reported to the Human Research Ethics Office

8. Data and primary materials must be retained and stored in accordance with the Western Australian University Sector Disposal Authority (WAUSDA) and the Curtin University Research Data and Primary Materials policy

9. Where practicable, results of the research should be made available to the research participants in a timely and clear manner

10. Unless prohibited by contractual obligations, results of the research should be disseminated in a manner that will allow public scrutiny; the Human Research Ethics Office must be informed of any constraints on publication

11. Ethics approval is dependent upon ongoing compliance of the research with the Australian Code for the Responsible Conduct of Research, the National Statement on Ethical Conduct in Human Research, applicable legal requirements, and with Curtin University policies, procedures and governance requirements

12. The Human Research Ethics Office may conduct audits on a portion of approved projects.

Should you have any queries regarding consideration of your project, please contact the Ethics Support Officer for your faculty or the Ethics Office at hrec@curtin.edu.au or on 9266 2784.

Yours sincerely

Amy Bowater
Ethics, Team Lead

Appendix C: Information Sheet for Chapters Two and Three

<u>**PARTICIPANT INFORMATION STATEMENT**</u>

HREC Project Number:	*HRE2018-0297*
Project Title:	*The Performance of Emotional Labour in Psychologists Conducting Psychotherapy*
Chief Investigator:	*Clare Rees*
Student researcher:	*James Clarke*
Version Number:	**1**
Version Date:	**03/07/2018**

<u>**What is the Project About?**</u>

Emotional labour, which refers to the process of regulating emotions to achieve desired outcomes in employee-customer interactions, is linked to adverse wellbeing outcomes such as burnout. Interestingly, this research has not been applied to Psychologists providing psychotherapy despite the presumed emotional labour inherent in this occupational role. This project seeks to compare and contrast the experience of emotional labour in both early-career, mid-career and experienced Psychologists who provide psychotherapy. Understanding how this phenomenon is experienced in these groups will help the future development of interventions that assist Psychologists to learn ways of managing emotional labour without increasing their levels of burnout.

<u>**Who is doing the Research?**</u>

The project is being conducted by Mr James Clarke, Professor Clare Rees, Associate Professor Lauren Breen and Dr Brody Heritage. The results of this research will be used by James Clarke to obtain a Doctor of Philosophy at Curtin University and is funded by the University. There will be no costs to you and you will not be paid for participating in this project.

<u>Why am I being asked to take part and what will I have to do?</u>

You have been invited to take part in this research because you are a psychologist providing psychotherapy to clients. Your participation in the project will involve being interviewed by a researcher about your perspectives on ideas such as the sorts of emotions that you think are important to show during psychotherapy, how you experience emotions during sessions and your perspective on the consequences of managing emotions as part of your job. The interview will take place at a mutually convenient location and it is expected that the interview could take approximately one hour to complete. After we have completed our preliminary data analysis we will contact you again to see whether you would be willing to verify how credible our findings seem. If you do not wish to provide feedback on this, you do not have to and this will not affect your participation in the project.

We will make a digital audio recording of the interview so we can concentrate on what you have to say and not distract ourselves with taking notes. After the interview we will make a full written copy of the recording. We will then send this to you so that you can approve the accuracy of this transcript.

<u>Are there any benefits' to being in the research project?</u>

There may be no direct benefit to you from participating in this research, however, sometimes people appreciate the opportunity to discuss their thoughts and feelings on such a topic. We are happy to share with you the preliminary findings of the research if you would like. Additionally, we hope the results of this project will allow us to:

- better understand factors contributing to burnout in Psychologists
- develop interventions to assist Psychologists to develop positive behavioural patterns to manage emotional labour and burnout effectively
- assist and expand the development of models designed to manage countertransference reactions

Are there any risks, side-effects, discomforts or inconveniences from being in the research project?

The only foreseeable circumstance in which there may be some risk to you would be if you disclose that you have engaged in behaviour that is considered to be notifiable conduct by the Australian Health Practitioner Regulation Agency (AHPRA). Such behaviour includes things like practising while intoxicated and engaging in inappropriate relationships with clients. Disclosures of this kind will require the researcher to notify AHPRA of such conduct. We have been careful to make sure that the questions in the interview do not cause you any distress. But, if you feel unhappy about answering any of the questions then you do not need to answer them. If the questions cause any concerns or upset you, we can refer you to a counsellor. Apart from giving up your time, we do not expect that there will be any inconveniences associated with taking part in this study.

Who will have access to my information?

The information collected in this research will be re-identifiable (coded). This means that we will collect data that can identify you, but will then remove identifying information on any data or sample and replace it with a code when we analyse the data. Only the research team have access to the code to match your name if it is necessary to do so. Any information we collect will be treated as confidential and used only in this project unless otherwise specified. The following people will have access to the information we collect in this research: the research team and, in the event of an audit or investigation, staff from the Curtin University Office of Research and Development. Electronic data will be password-protected and hard copy data (including video or audio tapes) will be in locked storage. The information we collect in this study will be kept under secure conditions at Curtin University for 7 years after the research is published and then it will be destroyed. The results of this research may be presented at conferences or published in professional journals. You will not be identified in any results that are published or presented.

<u>Will you tell me the results of the research?</u>

As previously mentioned, we will seek your feedback about the validity of our findings once we complete our preliminary analysis. If you are interested in obtaining a summary of the results after the final analysis is completed, please contact the researchers after March, 2020. The results may also be available in professional journals or at conference presentations.

<u>Do I have to take part in the research project?</u>

Taking part in a research project is voluntary. It is your choice to take part or not. You do not have to agree if you do not want to. If you decide to take part and then change your mind, that is okay, you are free to withdraw from the study prior to approving your transcript. If you choose not to take part or start and then stop the study, it will not affect your relationship with the University, staff or colleagues.

<u>What happens next and who can I contact about the research?</u>

If you decide to take part in this research we will ask you to sign the consent form. By signing it is telling us that you understand what you have read and what has been discussed. Signing the consent indicates that you agree to be in the research project and have your information used as described. Please take your time and ask any questions you have before you decide what to do. You will be given a copy of this information and the consent form to keep. If you would like further information about this project, you may contact me via email (james.j.clarke@postgrad.curtin.edu.au) or phone (9266 9266), or you may contact my supervisors Professor Clare Rees (C.Rees@curtin.edu.au), Associate Professor Lauren Breen (Lauren.Breen@curtin.edu.au) and Dr Brody Heritage (Brody.Heritage@murdoch.edu.au).

Your participation is greatly appreciated and thank you for your support.

Curtin University Human Research Ethics Committee (HREC) has approved this study (HREC number: HRE2018-0297). Should you wish to discuss the study with

someone not directly involved, in particular, any matters concerning the conduct of the study or your rights as a participant, or you wish to make a confidential complaint, you may contact the Ethics Officer on (08) 9266 9223 or the Manager, Research Integrity on (08) 9266 7093 or email hrec@curtin.edu.au.

Appendix D: Consent Form for Chapters Two and Three

CONSENT FORM

HREC Project Number:	*HRE2018-0297*
Project Title:	*The Performance of Emotional Labour in Psychologists Conducting Psychotherapy*
Chief Investigator:	***Clare Rees***
Student researcher:	***James Clarke***
Version Number:	**1**
Version Date:	**03/07/2018**

- I have read the information statement version listed above and I understand its contents.
- I believe I understand the purpose, extent and possible risks of my involvement in this project.
- I voluntarily consent to take part in this research project.
- I have had an opportunity to ask questions and I am satisfied with the answers I have received.
- I understand that this project has been approved by Curtin University Human Research Ethics Committee and will be carried out in line with the National Statement on Ethical Conduct in Human Research (2007).
- I understand I will receive a copy of this Information Statement and Consent Form.

Participant Name	
Participant Signature	
Date	

<u>Declaration by researcher:</u> I have supplied an Information Letter and Consent Form to the participant who has signed above, and believe that they understand the purpose, extent and possible risks of their involvement in this project.

Researcher Name	
Researcher Signature	
Date	

Note: All parties signing the Consent Form must date their own signature.

Appendix E: Information/Consent Form for Chapters Four and Five

<u>**PARTICIPANT INFORMATION STATEMENT**</u>

HREC Project Number:	HRE2018-0297
Project Title:	*The Performance of Emotional Labour in Psychologists Conducting Psychotherapy*
Chief Investigator:	*Clare Rees*
Student researcher:	*James Clarke*
Version Number:	**2**
Version Date:	**27/11/2020**

<u>**What is the Project About?**</u>

Emotional labour, which refers to the process of regulating emotions to achieve desired outcomes in employee-customer interactions, is linked to adverse wellbeing outcomes such as burnout. Interestingly, this research has not been applied to Psychologists providing psychotherapy despite the presumed emotional labour inherent in this occupational role. We aim to gather data to support the use of a tool that measures emotional labour in this group as well as explore how different ways of managing emotional labour affect a person's levels of burnout. This research will help inform future research about understanding, preventing and treating burnout in this occupational group.

<u>**Who is doing the Research**</u>?

The project is being conducted by Mr James Clarke, Professor Clare Rees, Associate Professor Lauren Breen and Dr Brody Heritage. This results of this research project will be used by James Clarke to obtain a Doctor of Philosophy at Curtin University and is funded by the University. There will be no costs to you other than 10 to 20 minutes of your time on two occasions. After submitting your responses to the first survey, you will be provided with an opportunity to enter a raffle to win one of twenty

AUD$50 Amazon.com vouchers. Upon submission of data at the second time point, you will be offered the opportunity to enter an additional two entries into this raffle.

Why am I being asked to take part and what will I have to do?

You have been invited to take part in this research because you meet some of the criteria we are looking for in participants. Specifically, we want participants to be registered Psychologists who directly provide psychotherapy as part of their work role. It does not matter whether you are part-time employed, full-time employed or otherwise employed, provided that you meet the aforementioned criteria. Participation will involve initially completing one short online questionnaire and then completing a follow-up online questionnaire two weeks later. Completion of the first questionnaire should take approximately 10 to 20 minutes and completion of the second questionnaire should be shorter in duration. The questionnaire will ask you about some types of emotional experiences you may have in your client work, some ways that you regulate such emotions, and questions about your experience of some symptoms of burnout and related constructs.

Are there any benefits to being in the research project?

As mentioned previously, you will be provided with the option of entering a raffle to win one of twenty AUD$50 Amazon.com vouchers subsequent to the submission of your data at time one. You will be offered the opportunity to gain an additional two entries upon submission of your data at time two. Other than this, it is unlikely for you to benefit directly from participating in this research. However, we hope the results of this project will allow us to:

- better understand factors contributing to burnout in Psychologists
- develop interventions to assist Psychologists to develop positive behavioural patterns to manage emotional labour and burnout effectively
- assist and expand the development of models designed to manage countertransference reactions

Are there any risks, side-effects, discomforts or inconveniences from being in the research project?

There are no foreseeable risks for you as a participant in completing the questionnaires and we have been careful to make sure that the questions do not cause you any distress. However, if the questions cause any concerns or upset you, please do not hesitate to contact us and we will attempt to link you to appropriate support services.

Who will have access to my information?

As this project requires participants to complete the questionnaire on two separate occasions, you will be asked to provide a name and email address at the end of the first questionnaire. This name and email address will be stored separately from your responses and will only be linked via an anonymous respondent identification number that is generated by the server hosting this questionnaire (Qualtrics). Two weeks after you complete the initial questionnaire, you will be contacted via email by Qualtrics to let you know that the second questionnaire is available for completion. Subsequent to the completion of the second questionnaire, the personally identifying information will be used for the prize draw to draw the winning participants, after which the personally identifying information will be destroyed. At no stage will your personal information be stored alongside the responses you provide on the questionnaire regarding your wellbeing as a Psychologist.

You are not required to enter any identifying information if you do not wish, however, without this information it will be impossible to contact you to re-complete the questionnaire two weeks later. Therefore, you will be unable to take part in the second round of data collection. Your participation is completely voluntary and consent will be assumed upon the submission of data from the questionnaires. After this point it will be impossible to identify your results therefore making it impossible to remove them from the data pool. You will be provided with the option of obtaining one entry into a raffle to win one of twenty AUD$50 Amazon.com gift vouchers after the first survey, and you will be provided with the option of obtaining an additional two entries after the second survey. If you choose to enter the draw, an email address will need to be collected after

you complete the questionnaire, however, this information will not be linked to your results from the questionnaire in any way.

Electronic data will be password-protected and stored securely. The information we collect in this study will be kept under secure conditions at Curtin University for 7 years after the research is published. The results of this research may be presented at conferences or published in professional journals. You will not be identified in any results that are published or presented.

Will you tell me the results of the research?

If you are interested in obtaining a summary of the results please contact the researchers after December, 2022. Alternatively, you may obtain the results from journal articles or conference presentations that are produced from this research.

Do I have to take part in the research project?

Taking part in a research project is voluntary. It is your choice to take part or not. You do not have to agree if you do not want to. If you decide to take part and then change your mind, that is okay, you can withdraw from the project prior to submitting your questionnaire responses by closing your web browser. If you choose not to take part or start and then stop the study, it will not affect your relationship with the University, staff or colleagues.

What happens next and who can I contact about the research?

To participate in this research you can click on the URL below which will link you to the first questionnaire. Two weeks after you first complete the initial questionnaire, you will be contacted via email to make you aware that the second questionnaire is available to complete. You will be able to access this information form if you wish in the future by returning to this URL. We ask that you please ensure that you complete the questionnaire over a two week period in which you are working your normal hours with clients, and not a period in which you foresee yourself to be taking any kind of leave.

If you would like further information about this project, you may contact me via email (james.j.clarke@postgrad.curtin.edu.au) or phone (9266 9266), or you may contact my supervisors Professor Clare Rees (C.Rees@curtin.edu.au), Associate Professor Lauren Breen (Lauren.Breen@curtin.edu.au) and Dr Brody Heritage (Brody.Heritage@murdoch.edu.au). Please contact me on my aforementioned contact details if you have any issues accessing the survey.

Your participation is greatly appreciated and thank you for your support. To begin the questionnaire, please click on the link below:

[URL will be inserted here when questionnaire is made live]

Curtin University Human Research Ethics Committee (HREC) has approved this study (HREC number HRE2018-0297). Should you wish to discuss the study with someone not directly involved, in particular, any matters concerning the conduct of the study or your rights as a participant, or you wish to make a confidential complaint, you may contact the Ethics Officer on (08) 9266 9223 or the Manager, Research Integrity on (08) 9266 7093 or email hrec@curtin.edu.au.

Appendix F: Publishing Agreement for Chapter Two

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Instructions: Complete and sign Sections 1 and 2 of this form.

Accepted manuscripts cannot be published unless this form is completed, signed, and returned to the Editor. For information on APA copyright policies, please see the reverse side of this form. This form and the terms contained herein may <u>not</u> be amended without the express written consent of the American Psychological Association.

Manuscript title

Author names (<u>in order of authorship</u>)

Corresponding author _____ **Phone number**

_____ **Email address**

_____ **APA publication**

---

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Authorized signature and title   **Date**

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Authorized signature and title   **Date**

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Appendix G: Recruitment Messages

Recruitment Email for Chapters Two and Three

Dear XXXX,

My name is a James Clarke and I am a PhD Candidate at Curtin University. As part of my PhD research, I am investigating the emotional labour of psychologists who provide psychotherapy. I am looking to recruit participants and I am hoping that you or members of your organisation would be interested in participating in this project. Participation will involve being interviewed about your perspectives on ideas such as the sorts of emotions that you think are important to show during psychotherapy, how you experience emotions during sessions and your perspective on the consequences of managing emotions as part of your job. For further information, you can read the information sheet that I have attached to this email, respond to the contact details provided on that sheet, or simply reply to this message.

Thank you for your time and kind regards,

James Clarke

Social Media Post for Chapters Two and Three

Dear XXXX,

My name is a James Clarke and I am a PhD Candidate at Curtin University. As part of my PhD research, I am investigating the emotional labour of psychologists who provide psychotherapy. I am looking to recruit participants and I am hoping that you would be interested in participating in this project. If you are interested, participation will involve being interviewed about your perspectives on ideas such as the sorts of emotions that you think are important to show during psychotherapy, how you experience emotions during sessions and your perspective on the consequences of managing emotions as part of your job. For further information, you can read the information sheet that I have attached to this message, respond to the contact details provided on that sheet, or simply reply to this message.

Thank you for your time and kind regards,

James Clarke

Recruitment Email for Chapters Four and Five

Dear XXXX,

My name is a James Clarke and I am a PhD Candidate at Curtin University. As part of my PhD research, I am investigating the emotional labour of psychologists who provide psychotherapy. I am looking to recruit participants and I am hoping that you or members of your organisation would be interested in participating in this project. Participation will involve completing an online survey on two occasions, two weeks apart. Each survey should take between ten and twenty minutes to complete and participants will be given the opportunity to enter a raffle to win one of twenty AUD$50 Amazon.com gift vouchers after submitting their data on the second occasion.

I would be greatly appreciative if you could please circulate the attached information sheet to any psychologists who provide psychotherapy in your network, organisation, or on any relevant membership lists. For further information you may contact my supervisors and I on the contact details provided in the information sheet.

Thank you for your time and kind regards,

James Clarke

Social Media Post Request for Chapters Four and Five

Dear XXXX,

My name is a James Clarke and I am a PhD Candidate at Curtin University. As part of my PhD research, I am investigating the emotional labour of psychologists who provide psychotherapy and I am looking to recruit participants. With your permission, I would like to post information about my study in your group/page and provide a link that users can follow if they are interested in participating. If you could respond to this message to let me know whether or not you consent to me doing this, it would be greatly appreciated. For further information you may contact my supervisors and I on the contact details provided in the information sheet that I have attached to this message.

Thank you for your time and kind regards,

James Clarke

Social Media Post for Chapters Four and Five

The work of a Psychologist is tough! This work can be made tougher if the emotional labour inherent in the role of being a Psychologist providing psychotherapy is not managed effectively. Researchers at Curtin University are calling on Psychologists who provide psychotherapy as part of their work role to respond to a brief survey to gather data to support the use of a tool that measures emotional labour in this group, as well as explore how different ways of managing emotional labour affect a person's level of burnout.

Participation involves completing an online survey on two occasions (approximately 10-20 minutes each), two weeks apart. You will be given the opportunity to enter a raffle to win one of twenty AUD$50 Amazon.com vouchers if you complete the survey on both occasions.

If you would like further information about this project, you may contact Mr James Clarke via email (james.j.clarke@postgrad.curtin.edu.au) or phone (9266 9266), or you may contact Professor Clare Rees (C.Rees@curtin.edu.au), Associate Professor Lauren Breen (Lauren.Breen@curtin.edu.au) and/or Dr Brody Heritage (Brody.Heritage@murdoch.edu.au). Please contact Mr James Clarke on the aforementioned contact details if you have any issues accessing the survey.

Your participation is greatly appreciated and thank you for your support. To view the information sheet and begin the questionnaire, please click on the link below:

[URL will be inserted here when questionnaire is made live]

LinkedIn Message for Chapters Four and Five

Dear XXXX,

My name is a James Clarke and I am a PhD Candidate at Curtin University. As part of my PhD research, I am investigating the emotional labour of psychologists who provide psychotherapy. I am looking to recruit participants and I am hoping that you would be interested in participating in this project. Participation will involve completing an online survey on two occasions, two weeks apart. Each survey should take between ten and twenty minutes to complete and you will be given the opportunity to enter a

raffle to win one of twenty AUD$50 Amazon.com gift vouchers after submitting your data for the second time.

I would be greatly appreciative if you could please circulate the attached information sheet to any psychologists who provide psychotherapy in your network, organisation, or on any relevant membership lists. For further information you may contact my supervisors and I on the contact details provided in the information sheet.

Thank you for your time and kind regards,

James Clarke

Appendix H: Interview Schedule for Chapters Two and Three

The purpose of this interview is to find out about your experiences of emotional labour in your work with clients. I just want to remind you that the things you say will be treated in the strictest confidence and you won't be identifiable in the final report. I am particularly interested in your thoughts and opinions – there are no right or wrong answers.

- Do you have any questions before we start?

Now I'd like to find out a bit about the sorts of emotional experiences you have with clients.

- What sort of events cause you to experience emotional reactions during sessions?
    - Can you tell me about some common emotions you experience in session?
    - What sort of emotions do you generally show in session?
    - Are there times when you're feeling one emotion but expressing something else?
- How do you think the relationship with your clients affects how you experience emotion in session?
    - Closeness?
    - Power differential?

Now I'd like to find out a bit about what emotions you consider necessary to experience and express in your work.

- What emotions do you think are appropriate to show?
    - When and in what contexts are these emotions appropriate?
- Are there any emotions that you think are not appropriate to show?
    - If so, when and in what contexts are these emotions not appropriate?
- Where did you learn these rules about what emotions are and aren't appropriate to show?
    - What do you think about these rules guiding your expression of emotion?

Now I'd like to understand how you regulate and process your emotions during work.

- Are you generally aware in the moment of how you are dealing with your emotions?
- How do you generally cope with your emotions in sessions?
- Do you prepare yourself emotionally prior to a session?
    - How do you do this?
- When you are experiencing an emotion you don't think is appropriate to express, what do you do with this feeling?
    - What do you do with this feeling after the session?
- How do you regulate your emotions during a difficult client interaction?

Now I'd like to ask about what you think the outcomes are of how you express emotion

- How does the way that you express different emotions affect the session?
    - How does this affect the ongoing therapeutic relationship you have with a client?
- What do you think are the consequences of having to experience, show and deal with different emotions in your work?
    - What are the consequences to how you feel more generally?
    - What are the consequences to your relationships with others?
    - Are there any negative effects of having to display high levels of empathy and compassion (or what has been named) as part of your work?
    - Are there any effects on the sorts of things you like to do in your leisure time?
    - What are the effects of experiencing one emotion and showing another?
    - Other effects?

Thank you for participating in this interview today. Your answers have been really helpful.

- Are there other questions you wished I had asked you or anything else you wish to talk about?

We've come to the end of my questions. Thank you for your time. How are you feeling? I have some information and pamphlets of people who are able to talk further with you about any feelings that may have arisen.

Appendix I: Publishing Agreement for Chapter Three

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Appendix J: Demographics Collected for Chapters Two and Three

- What is your age?

- What is your identified gender?

- How many years have you been practising individual psychotherapy?

- If you have one, what is your specialization background (e.g. Clinical Psychology, Counselling Psychology, School Psychology etc…)?

- Have you previously received specific training in the management of countertransference reactions?

- In which sector do you mainly work (e.g. Private, Government, Non-Government Organisation)?

- Do you work full-time, part-time or casual hours as a Psychologist?

- Do you provide most of the psychotherapy you practise in a community or inpatient setting?

- On average, how many sessions of psychotherapy do you provide per week? (please do not include sessions that clients do not attend)

- What is your primary model of psychotherapy?

- Do you have any people dependent on you at home (e.g. children)? If so, how many?

Appendix K: Perth Emotional Labour Scale (PELS)

When rating the following statements about your work, please take a moment to think about how you process emotional reactions triggered while [providing occupational role]. Please indicate how often you feel the emotional state, or use the specific strategy stated in each item, on an average day of work. Each item is rated on a 5-point scale with response options as *never*, *rarely*, *sometimes*, *often*, and *always*.

Emotional Dissonance

1. The emotions that I feel in my job do not directly correspond to those I would like to express
2. My work brings me to experience emotions different to those I express
3. I experience a discrepancy between the emotions I express to be professional and what I feel
4. The emotions I show in order to be professional are not congruent with my inner feelings

Attentional Deployment

1. I make the effort to think about something different to feel fewer negative emotions
2. I force myself to think about something different to feel more positive emotions
3. I pay attention to something other than the triggered reaction
4. I pay attention to something more pleasant to improve my mood

Expressive Amplification

1. Even though I may feel negative emotions, I express a good mood
2. Even if I do not feel much positive emotion, I show an enthusiastic face
3. Even if I do not feel relaxed with a client, I present a relaxed face
4. Despite any emotional difficulty with a client, I act in a warm manner

Emotional Suppression

1. I keep my emotions to myself
2. I control my feelings by hiding them
3. When I experience negative feelings, I avoid expressing them
4. I mask my negative emotions to stay professional

Re-evaluation

1. I reconsider the events by taking another point of view
2. I examine the situation differently
3. I change my viewpoint to feel more positive emotions (enthusiasm, empathy, serenity…)*
4. I change my viewpoint to feel fewer negative emotions (irritation, distress…)*

Note. * Items that were excluded from the final measure due to poor model fit

Appendix L: Recruitment Flyer for Chapters Four and Five

The Emotional Labour of Psychologists

Are you a Psychologist who provides psychotherapy?

Would you like to assist research to promote psychologist wellbeing?

_____

The work of a Psychologist is tough! This work can be tougher if emotional labour isn't managed effectively. Researchers at Curtin University are calling on Psychologists who provide psychotherapy to respond to a brief survey exploring emotional labour among practicing psychologists.

Participation involves completing an online survey on two occasions (approximately 10-20 minutes each), two weeks apart. You will be given the opportunity to obtain one raffle entry to win one of twenty AUD$50 Amazon.com vouchers if you complete the first survey, and two additional entries if you complete both surveys.

For further information about this project, please contact James Clarke (james.j.clarke@postgrad.curtin.edu.au) or contact Professor Clare Rees (C.Rees@curtin.edu.au). Your participation is greatly appreciated and thank you for your support. To view the information sheet and begin the questionnaire, please click on the link below:

http://bit.ly/emotionallabour

This project has obtained ethical approval under the Curtin University Human Research Ethics Committee (Project Number: HRE2018-0297)

Appendix M: Qualtrics Survey for Chapters Four and Five

Thank you for participating in this research. This study is investigating the emotional labour of psychologists providing psychotherapy. After finishing the survey, you will be offered the opportunity to enter a raffle to win one of twenty AUD$50 Amazon.com gift vouchers. If you would like two additional raffle entries and want to assist with this research further, then please complete the follow-up survey that will be emailed to you two weeks after you complete this initial questionnaire.

Thank you for participating in this research. To begin with, we will ask you for some basic demographic information.

✳

What is your age? (Please respond in numerals)

_____

What is your identified gender?

○ Male

○ Female

○ Intersex

○ Other

○ Prefer not to say

In which country do you reside?

_____

✳

How many years have you been practicing psychotherapy? (Please respond in numerals)

_____

If you have one, what is your specialisation background?

▼ Clinical Psychologist ... Sport and Exercise Psychologist

Have you previously received specific training in the management of countertransference reactions?

○ Yes

○ No

○ Unsure

In which sector do you primarily work?

○ Private

○ Government

○ Non-Government Organisation

Do you work full-time, part-time or casual hours as a psychologist providing individual psychotherapy?

○ Full-time

○ Part-time

○ Casual

○ Student

○ Retired

Do you provide most of the psychotherapy you practice in a community or inpatient setting?

○ Community/outpatient

○ Inpatient

○ Other

✳

On average, how many sessions of psychotherapy do you provide per week? (please do not include sessions that clients do not attend and please use numerals for your response)

_____

✳

How many dependents (e.g. children, partner, parent) do you have at home? (Please respond in numerals)

_____

✳

On average, what percentage of psychotherapy sessions do you provide via teleconference (not face to face) per week? (Please respond in numerals)

_____

Thank you. Using the scale as a guide, please indicate how much you agree with each statement.

I have not always been honest with myself

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I always know why I like things.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

It's hard for me to shut off a disturbing thought.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I never regret my decisions.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I sometimes lose out on things because I can't make up my mind soon enough.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I am a completely rational person.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I am very confident of my judgments.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I have sometimes doubted my ability as a lover.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I sometimes tell lies if I have to.

○ (1)Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

I never cover up my mistakes.

- ○ (1) Not true
- ○ 2
- ○ 3
- ○ (4) Somewhat true
- ○ 5
- ○ 6
- ○ (7) Very true

There have been occasions when I have taken advantage of someone.

- ○ (1) Not true
- ○ 2
- ○ 3
- ○ (4) Somewhat true
- ○ 5
- ○ 6
- ○ (7) Very true

I sometimes try to get even rather than forgive and forget.

- ○ (1) Not true
- ○ 2
- ○ 3
- ○ (4) Somewhat true
- ○ 5
- ○ 6
- ○ (7) Very true

I have said something bad about a friend behind his or her back.

   ◯ (1) Not true

   ◯ 2

   ◯ 3

   ◯ (4) Somewhat true

   ◯ 5

   ◯ 6

   ◯ (7) Very true

When I hear people talking privately, I avoid listening.

   ◯ (1) Not true

   ◯ 2

   ◯ 3

   ◯ (4) Somewhat true

   ◯ 5

   ◯ 6

   ◯ (7) Very true

I never take things that don't belong to me.

   ◯ (1) Not true

   ◯ 2

   ◯ 3

   ◯ (4) Somewhat true

   ◯ 5

   ◯ 6

   ◯ (7) Very true

I don't gossip about other people's business.

○ (1) Not true

○ 2

○ 3

○ (4) Somewhat true

○ 5

○ 6

○ (7) Very true

Thank you. How often have you experienced the following activities over the last 2 weeks?

I felt dizzy, lightheaded, or faint, when I read or listened to news about the coronavirus.

○ Not at all

○ Rare, less than a day or two

○ Several days

○ More than 7 days

○ Nearly every day over the last 2 weeks

I had trouble falling or staying asleep because I was thinking about the coronavirus.

○ Not at all

○ Rare, less than a day or two

○ Several days

○ More than 7 days

○ Nearly every day over the last 2 weeks

I felt paralyzed or frozen when I thought about or was exposed to information about the coronavirus.

○ Not at all

○ Rare, less than a day or two

○ Several days

○ More than 7 days

○ Nearly every day over the last 2 weeks

I lost interest in eating when I thought about or was exposed to information about the coronavirus.

○ Not at all

○ Rare, less than a day or two

○ Several days

○ More than 7 days

○ Nearly every day over the last 2 weeks

I felt nauseous or had stomach problems when I thought about or was exposed to information about the coronavirus.

○ Not at all

○ Rare, less than a day or two

○ Several days

○ More than 7 days

○ Nearly every day over the last 2 weeks

Thank you. Now we will ask about different feelings and emotions that you experience. This scale consists of a number of words that describe different feelings and emotions. Read each item and then select the appropriate answer to indicate to what extent you generally feel this way, that is, how you feel on the average.

Interested

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Irritable

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Distressed

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Alert

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Excited

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Ashamed

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Upset

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Inspired

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Strong

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Nervous

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Guilty

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Determined

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Scared

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Attentive

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Hostile

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Jittery

○ Very slightly or not at all

○ A little

○ Moderately

○ Quite a bit

○ Extremely

Enthusiastic

- ○ Very slightly or not at all
- ○ A little
- ○ Moderately
- ○ Quite a bit
- ○ Extremely

Active

- ○ Very slightly or not at all
- ○ A little
- ○ Moderately
- ○ Quite a bit
- ○ Extremely

Proud

- ○ Very slightly or not at all
- ○ A little
- ○ Moderately
- ○ Quite a bit
- ○ Extremely

Afraid

- ○ Very slightly or not at all
- ○ A little
- ○ Moderately
- ○ Quite a bit
- ○ Extremely

Thank you. Please read each statement carefully before answering. Please indicate how often you behave in the stated manner, using the provided scale:

When I fail at something important to me I become consumed by feelings of inadequacy.

- ○ (1) Almost never
- ○ 2
- ○ 3
- ○ 4
- ○ (5) Almost always

I try to be understanding and patient towards those aspects of my personality I don't like.

- ○ (1) Almost never
- ○ 2
- ○ 3
- ○ 4
- ○ (5) Almost always

When something painful happens I try to take a balanced view of the situation.

- ○ (1) Almost never
- ○ 2
- ○ 3
- ○ 4
- ○ (5) Almost always

When I'm feeling down, I tend to feel like most other people are probably happier than I am.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

I try to see my failings as part of the human condition.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

When I'm going through a very hard time, I give myself the caring and tenderness I need.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

When something upsets me I try to keep my emotions in balance.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

When I fail at something that's important to me, I tend to feel alone in my failure.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

When I'm feeling down I tend to obsess and fixate on everything that's wrong.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

I'm disapproving and judgmental about my own flaws and inadequacies.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

I'm intolerant and impatient towards those aspects of my personality I don't like.

○ (1) Almost never

○ 2

○ 3

○ 4

○ (5) Almost always

Thank you. When rating the following statements about your work, please take a moment to think about how you process emotional reactions triggered while providing psychotherapy to clients. Please indicate how often you feel the emotional state, or use the specific strategy stated in each item, on an average day of work.

The emotions that I feel in my job do not directly correspond to those I would like to express

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

My work brings me to experience emotions different to those I express

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I experience a discrepancy between the emotions I express to be professional and what I feel

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

The emotions I show in order to be professional are not congruent with my inner feelings

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I make the effort to think about something different to feel fewer negative emotions

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I force myself to think about something different to feel more positive emotions

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I pay attention to something other than the triggered reaction

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I pay attention to something more pleasant to improve my mood

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Even though I may feel negative emotions, I express a good mood

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Even if I do not feel much positive emotion, I show an enthusiastic face

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Even if I do not feel relaxed with a client, I present a relaxed face

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Despite any emotional difficulty with a client, I act in a warm manner

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I keep my emotions to myself

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I control my feelings by hiding them

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

When I experience negative feelings, I avoid expressing them

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I mask my negative emotions to stay professional

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I reconsider the events by taking another point of view

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I examine the situation differently

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I change my viewpoint to feel more positive emotions (enthusiasm, empathy, serenity...)

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

I change my viewpoint to feel fewer negative emotions (irritation, distress...)

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Thank you. For the next few questions, please think about your current job when responding. On an average day at work, how frequently do you:

Make an effort to actually feel the emotions that I need to display to others

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Hide my true feelings about a situation

◯ Never

◯ Rarely

◯ Sometimes

◯ Often

◯ Always

Really try to feel the emotions I have to show as part of my job

◯ Never

◯ Rarely

◯ Sometimes

◯ Often

◯ Always

Resist expressing my true feelings

◯ Never

◯ Rarely

◯ Sometimes

◯ Often

◯ Always

Try to actually experience the emotions that I must show

◯ Never

◯ Rarely

◯ Sometimes

◯ Often

◯ Always

Conceal what I'm feeling

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Pretend to have emotions that I don't really have

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Show emotions that I don't feel

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Show emotions that are expected rather than what I feel

○ Never

○ Rarely

○ Sometimes

○ Often

○ Always

Thank you. Below you will find a list of statements about you in the workplace. Please rate how true each statement is for you in relation to conducting psychotherapy by selecting the appropriate response. Use the scale below to make your choice.

I am able to work effectively in spite of any personal worries that I have

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

I can admit to my mistakes at work and still be successful

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

I can still work very effectively, even if I am nervous about something

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

Worries do not get in the way of my success

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

I can perform as required no matter how I feel

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

I can work effectively, even when I doubt myself

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

My thoughts and feelings do not get in the way of my work

○ Never true

○ Very seldom true

○ Seldom true

○ Sometimes true

○ Frequently true

○ Almost always true

○ Always true

Thank you. Please read each statement carefully and decide if you ever feel this way about *your* job. If you have *never* had this feeling, select the response "never". If you have had this feeling, indicate *how often* you feel it by selecting the response that best describes how frequently you feel that way.

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

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○ Once a week

○ A few times a week

○ Every day

[Removed due to copyright issues]

○ Never

○ A few times a year or less

○ Once a month or less

○ A few times a month

○ Once a week

○ A few times a week

○ Every day

Thank you for taking the time to complete this survey. Informed consent to use your anonymous data will be assumed upon submission of your responses. Beyond this point individual data is unable to be identified or destroyed. If you would like to provide some feedback about the questions asked, please do so below:

_____
_____
_____
_____
_____