CATCH-22 IN HUMANITARIAN AND DEVELOPMENT WORK:
EMOTIONAL EXHAUSTION, WITHDRAWAL, HEALTH, AND WORK MOTIVES OF THESE WORKERS

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ABSTRACT

Humanitarian and development workers often operate in regions plagued by social, political, and economic problems where crisis and disaster characterize the context in which they operate. Working in such demanding contexts can lead to increased emotional exhaustion, which may manifest over time in the form of decreased engagement, withdrawal, and poorer health. However, not all workers who are emotionally exhausted become disengaged and withdraw but may depend on the extent to which they are driven by prosocial motives. Using the Conservation of Resources (COR) model, this study extended research in IO psychology by examining the resource loss pathway stemming from emotional exhaustion to proximal engagement and distal withdrawal and health of humanitarian and development workers. Moreover, this study examined how workers’ prosocial motives and extent of contact with beneficiaries can affect this resource loss pathway. Results showed that prosocial workers experienced less withdrawal but poorer health compared to their less prosocial counterparts. The impact of contact with beneficiaries depended on workers’ motivation. Among less prosocial workers, contact heightened emotional exhaustion’s positive relationship with turnover intentions while among more prosocial workers, contact buffered emotional exhaustion’s effect on turnover intentions. Findings from this study expanded the COR model and broadened the sample of IO psychology to include humanitarian and development workers. Moreover, findings can help inform humanitarian organizations on how to better assist their workers to cope with job stress.
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Chapter 1

Catch-22 in Humanitarian and Development Work: Emotional Exhaustion, Withdrawal, Health, and Work Motives of These Workers

“Nevertheless, the quest to understand the positive side of human nature is not only an exciting one, but one that could enhance the quality of life for all” (Eisenberg, 1986, p. 212).

Research in Industrial-Organizational (IO) psychology has traditionally centered on for-profit corporations and the cognition, affect, and behavior of their employees. Nonprofit organizations, particularly humanitarian and development organizations, have been given relatively insufficient attention perhaps due to the normative research trends of the field, or because work on nonprofit organizations have conventionally been located within the domains of law, public policy, and international affairs. Nevertheless, there is a nascent and emerging interest in the field of humanitarian work psychology, which is the application of IO psychology principles to assist with the delivery, impact, and evaluation of humanitarian and development aid. What began as a common interest among a small group of researchers has now bloomed into the formation of a Global Task Force on Humanitarian Work Psychology that is composed of IO academicians, students, and practitioners from developed and developing countries, bounded by the goal of promoting the application of IO knowledge within the humanitarian arena (Carr, MacLachlan, Reichman, Klobas, Berry, & Furnham, 2008).

The rising interest in the field of humanitarian work psychology is evidenced by the increasing number of publications, symposia and discussions on this topic in national and international conferences (e.g. Society of Industrial-Organizational Psychology, International Association of Applied Psychology, European Association of Work and Organizational Psychology). Initial research in humanitarian work psychology has focused on examining the
effects of remuneration differentials on motivation and performance between local and expatriate employees in field offices of nonprofit organizations (Carr, McWha, Maclachlan & Furnham, 2010).

Increasing interest in humanitarian goals is also reflected by our fellow colleagues from the management field, who have elaborated to some extent the potential for businesses to help alleviate global poverty, more so than any government aid can accomplish (Prahalad, 2006; Bruton, 2010). In these discussions, the topics center on how business models can better serve the needs of the world’s poor by adapting products and creating jobs suited for that population. In an attempt to gauge the engagement of business researchers and practitioners in the humanitarian arena, Bruton (2010) searched 16 business journals from 1989 to 2010 for articles concerning poverty. Disappointingly, he found only 11 relevant articles that spoke about how for-profit corporations could invest in meeting the needs of the world’s poorest billion. This low number points toward the need for greater attention, and at the same time, greater opportunities for the business and IO fields to use research findings to assist with humanitarian goals of the world.

In delivering aid, humanitarian and development workers are placed in a unique position where they are challenged to navigate the social, political, and cultural maze of the developing world to meet the needs of their beneficiaries, often with little resources at hand. At the same time, they too have to cope with traditional job demands like role conflict, role overload, and interpersonal issues with coworkers, supervisors, and other stakeholders. The vast domain of knowledge on work and worker experiences that IO psychology holds can help enhance the work experience of humanitarian and development workers and the performance of these organizations by contributing to the understanding of their employee selection, motivation, performance, and wellbeing issues. Helping humanitarian and development organizations work more effectively and efficiently is one way in which the field of IO psychology, through research in humanitarian
work psychology, can contribute their part in achieving global goals for the good of the world (e.g. the Millennium Development Goals; MDGs).²

Humanitarian and development workers may be particularly vulnerable to experiencing emotional exhaustion because of their challenging work conditions, where crisis and poverty often characterize the context in which they operate. This is especially prevalent among certain types of work that requires frequent and prolonged visits to the field and where direct interaction with beneficiaries is a significant component of their visits. Beneficiaries can include anyone in which humanitarian and development workers believe their actions at work have the potential to positively affect (Grant, 2007). Research has repeatedly expounded on the risks of extended burnout among human service workers such as social workers and child welfare employees, where emotionally intense interactions with their clients characterize the core components of their job (Blankertz & Robinson, 1997; Mor Barak, Nissly, & Levin, 2001). Such interactions have been shown to lead to burnout (e.g. Brotheridge & Grandey, 2002), but little research has examined the proximal consequences of emotional exhaustion on humanitarian and development workers’ level of engagement at work and the distal outcomes of their health and withdrawal. A specific way in which IO can contribute toward the effectiveness of humanitarian and development work is to help organizations better understand the impact and resultant outcomes of emotional exhaustion of their workers and how they might assist their workers to better cope with its consequences.

Moreover, there has been renewed interest in the effects of job characteristics on employee motivation and performance, particularly relational elements of the job like contact with external organizational members (i.e. clients, beneficiaries, customers; Humphrey, Nahrgang, & Morgeson, 2007; Grant, 2007; 2008a; Grant & Parker, 2009). There has also been an equal increase in attention on the influence of more “altruistic” forms of employee motivation, particularly prosocial motives (e.g. Grant & Campbell, 2007; Grant, 2009; Meglino & Korsgaard,
2004) on relevant employee outcomes. Previous research has shown that even a single contact with beneficiaries has a positive impact on the motivation and performance of workers (Grant et al., 2007). Much has also been postulated regarding the impact of challenging interpersonal interactions with others (e.g. Margolis & Molinsky, 2008), but little is understood regarding when contact with beneficiaries may be particularly useful for certain workers with different motives. Existing work on prosocial motives suggests how different motives among humanitarian and development workers may help explain distinctive outcomes from contact.

**Purpose and Relevance of Study**

In line with these exciting research trends, the current study seeks to extend existing IO literature, through the lens of the Conservation of Resources model (COR; Hobfoll, 1989) by examining the proximal and distal outcomes of emotional exhaustion among humanitarian and development workers. More specifically, emotional exhaustion is hypothesized to affect workers’ engagement at work and their psychosomatic health and withdrawal at a later time. This study also intends to understand how workers’ prosocial motives can function as a resource to affect the engagement levels of exhausted workers and their subsequent health and withdrawal outcomes. Research on the impact of contact with outside members of the organization has been inconclusive at best. Contact with beneficiaries has been shown to be motivating for workers’ performance (Grant et al., 2007), but also can be detrimental to workers’ wellbeing (e.g. Brotheridge & Grandey, 2002; Hochschild, 1983; Goldberg & Grandey, 2007). This study attempts to explore whether contact with beneficiaries may be particularly motivating for workers who are driven by prosocial motives. See Figure 1 for a proposed model of the study.
The overall research question adds to our current knowledge by focusing on a different landscape of work and group of workers within the IO field by examining the experience of humanitarian and development workers. With a few exceptions, such as research that has looked at the experience of Peace Corps volunteers and a review of existing selection and training practices of humanitarian relief workers (Harris, 1973; McCall & Salama, 1999; Salama, 1999), no specific studies have empirically examined the wellbeing and related outcomes of these workers, especially within the IO field. Given the importance of humanitarian and development work to tackle global challenges, examining the engagement and wellbeing of these workers takes on important precedence. Emotional exhaustion has been shown to negatively affect job performance (e.g. Wright & Bonett, 1997, Halbesleben & Buckley, 2004), and that it impedes performance through lowered motivation (Halbesleben & Bowler, 2007), yet relatively little is

Figure 1-1: Model of the study.
known regarding the longer-term consequent effects of emotional exhaustion on employees’ proximal engagement and the distal outcomes of workers’ withdrawal and wellbeing.

Furthermore, the study extends our theoretical understanding of employee motives and job design. Prosocial motives have been shown to enhance the effect of positive self-evaluation of one’s ability on performance (Grant & Wrezniewski, 2010), but we have limited knowledge of motives’ impact on workers’ engagement and wellbeing. It is common perception that individuals enter humanitarian work with at least the intention to improve the welfare of others. Examining how prosocial motives can serve as a resource for humanitarian and development workers when faced with emotional exhaustion appears to be the logical extension to expand our knowledge regarding their job experience. Moreover, examining how the impact of contact with beneficiaries on workers’ engagement and wellbeing may be different for more or less prosocially motivated workers will expand our understanding of when and for whom contact with beneficiaries will be especially beneficial. Many unique factors impinge upon the pattern and likelihood of humanitarian and development workers’ behavior, yet we have a limited understanding of the psychological factors underlying their prosocial behavior (Staub, 1978). This study attempts to fill that gap by examining, given emotionally exhausted workers, the determining factor(s) that keeps workers engaged at work without turning over, rather than disengage and ultimately leave the organization. And if this continued engagement will produce unanticipated health consequences for humanitarian workers.

Illuminating the consequent outcomes of emotional exhaustion on workers’ proximal engagement and distal withdrawal and health will help humanitarian and development organizations anticipate and train their workforce to better cope with their job demands. This study can help draw a direct link to how the IO field can positively contribute to broader global goals of the world. With better workforce, humanitarian and development organizations are equipped with the necessary human capital to work towards helping better the lives of others.
Chapter 2

Emotional Exhaustion, Withdrawal, and Health of Humanitarian and Development Workers

Humanitarian and development workers often operate in regions that are plagued by natural, social, political, and economic problems like earthquakes, poverty, hunger, and conflicts. These workers deliver a broad range of aid including financial assistance in the form of microcredit loans, economic assistance in the form of livelihood and vocational skills training, disaster relief in the form of food aid and refugee resettlement, education and health care. In addition to delivering aid, some humanitarian and development workers conduct policy and advocacy efforts directed toward corporations, governments, and multilateral agencies to influence policy discussions and direction of aid. Working in the field is inherently stressful because of insecurity, potential physical attacks, the moral and ethical dilemma workers face when witnessing human rights abuses, and the trauma accompanying the experience of unnatural deaths and violence (McCall & Salama, 1999).

Research on the emotional exhaustion of humanitarian and development workers has been limited so far, but parallels can be drawn from workers in the customer service and human service sectors. The prevalent rates of burnout among workers in these industries, which includes community mental health workers and social workers, are widely known and acknowledged (Blankertz & Robinson, 1997; Brotheridge & Grandey, 2002; Hochschild, 1983, Grandey, 2003; Judge, Woolf, & Hurst, 2009; Mor Barak et al., 2001). These workers who frequently engage in, and which intense interpersonal interaction with external members of the organization characterize a major component of their jobs, have been empirically found to experience higher stress levels than workers in other industries (Jayaratne & Chess, 1983; Geurts, Schaufeli, &
The very act of managing one’s emotions to better serve the needs of their beneficiaries is what makes the interaction emotionally exhausting (Grandey, 2000; 2003; Hochschild, 1983).

Emotional exhaustion is the feeling of emotional fatigue and depletion of emotional resources to cope with continuing job demands (Lee & Ashforth, 1996; Maslach, 1982; Maslach & Jackson, 1981; Parker & Kulik, 1995; Wright & Bonett, 1997). Emotional exhaustion has been shown to be the salient indicator of burnout, with stronger relationships to outcomes such as job performance, organizational commitment and turnover intentions, compared to the other components of burnout – depersonalization and personal accomplishment (Lee & Ashforth, 1996; Maslach & Jackson, 1981; Parker & Kulik, 1995; Wright & Bonett, 1997). Moreover, conceptually, emotional exhaustion better captures the core meaning of burnout (Cropanzano, Rupp, & Byrne, 2003) and its emphasis on depletion of resources is more consistent with the tenets of the main theoretical framework of this study - the COR model (Hobfoll, 1989).

Just like workers in customer service and human service sectors, humanitarian and development workers are likely to experience emotional exhaustion because of the intense and challenging interactions with beneficiaries that characterize their job. More than that, these workers are also faced with additional demands because of the expectation to manage these interactions while delivering aid in harsh psychological and physical circumstances. Although individual workers vary in the extent to which they may experience emotional exhaustion, given the demanding nature of their work – both the challenging interpersonal interactions and context, it can be said that emotional exhaustion play an important role in the work life of humanitarian and development workers.

Over time, humanitarian and development workers who are more stressed and emotionally exhausted may decide to withdraw from the organization. The withdrawal process of workers has been conceptualized as progressive in nature moving from a less extreme form such
as tardiness to more severe behavioral patterns like absenteeism and turnover (Johns, 2001). The current study will attempt to measure withdrawal along this series of progression to better capture the withdrawal process among humanitarian and development workers. Anecdotal stories and descriptive data from the field provide support for the salience of withdrawal among these workers. An examination of Peace Corps volunteers whose tasks mirror that of humanitarian and development workers found attrition to be a major problem in the force (Harris, 1973). At times, their turnover rate exceeded 50% of the taskforce during the 1960s. The turnover problem was so serious that it compelled the author to denote the challenging nature of humanitarian work, “The demands of the job in a remote environment remain invariantly severe, and only highly motivated individuals will survive for 2 years, or even for 1 year” (Harris, 1973, p. 234). High turnover rates also characterize community mental health workers and it is estimated that the entire public mental health workforce turns over every five to seven years (Blankertz & Robinson, 1997).

Moreover, workers who are emotionally fatigued may fall prey to ill health. Existing studies on humanitarian and development workers have pointed to the poor health status of these workers (Salama, 1999; McCall & Salama, 1999). Physical problems such as sleep difficulties and psychosomatic problems like headaches and gastrointestinal disturbances are common (Salama, 1999). They also frequently engage in risky health behaviors like alcoholism and report prevalent psychological health problems like post-traumatic stress disorder (McCall & Salama, 1999; Salama, 1999). Although the health of humanitarian and development workers can be measured in various ways, the current study will attempt to examine the health of these workers in terms of self-reported psychosomatic health symptoms. Asking individuals to indicate the presence of health symptoms may be a more feasible measure than obtaining health records but more objective than general health questionnaires. Although it is self-reported, this form of measure has been shown to have biological underpinnings and can be a valid indicator of an individual’s physical health (Halford, Anderzen, & Arnetz, 2003).
The Conservation of Resources Model

The Conservation of Resources model of stressor-strain relationships is used to explain the relationships between emotional exhaustion, withdrawal and wellbeing of humanitarian and development workers (COR; Hobfoll, 1989). According to this model, individuals are naturally drawn to preserve, maintain, and build their resources to mitigate the effects of current or future stressors. Resources are anything that is valued in their own right or that aid in resource accrual. They can come in the form of objects (e.g. funding), personal characteristics (e.g. self-esteem, self-efficacy), conditions (e.g. motivated coworkers), and energies (e.g. time, passion; Hobfoll, 1998; 2001). A comprehensive list of what appears to be 74 commonly valued resources in Western contexts can be found in Hobfoll’s (1998) paper.

Stress is experienced only when individuals perceive a threat of resource loss, an actual loss, or a lack of expected gain in resources (Hobfoll, 1989). Change, transition, and challenges, on their own are not stressful when experienced without any resource losses. COR also predicts that individuals are motivated to surround themselves with personal and social circumstances that will increase receipt of resources and avoid loss of precious resources. When facing threats or stressors, individuals strive to minimize further losses. On the other hand, when not confronted with stressors, individuals work to develop more resource surpluses to offset future losses (Hobfoll, 2001). In other words, individuals are motivated to invest resources in order to protect from resource losses such as stress, and potentially gain resources (Hobfoll, 2001).

This study borrowed from the COR model (Hobfoll, 1989; 2001) to predict what happens to humanitarian and development workers after they experienced chronic strain in the form of emotional exhaustion. In this case, strain, as an outcome of stress, resulted from exposure to continuous resource losses due to intense interactions with beneficiaries while working in challenging contexts. Employing resources to cope with persistent stress can be stressful,
especially when individuals are already lacking in resources. Not only are they more vulnerable to resource losses, but initial loss can lead to more losses in the future (Hobfoll, 2001). Over an extended period of time, emotionally exhausted workers who are depleted of their resources may slip into a resource loss spiral, which is a dynamic cycle of increasing resource losses (Hobfoll, 2001). Initial exhaustion begets subsequent emotional fatigue, which may manifest behaviorally in the form of withdrawal from work – a way to protect and rebuild resources for the future - and physiologically in the form of psychosomatic health symptoms – due to maladaptive coping strategies resulting in a net loss of resources.

Contrary to more perceptual-based theories of stress (e.g., Lazarus & Folkman, 1984), COR theory asserts that resources are in fact, not individually determined, but are transcultural and socially-construed. In other words, the value of a particular resource is likely shared among individuals bounded by a common culture (Hobfoll, 2001). However, in an attempt to expand the boundaries surrounding what constitutes a resource and its effects on individual outcomes, this study proposed that contact with beneficiaries will act as a resource to humanitarian and development workers, but in different ways among more or less prosocially-motivated workers. Contact with beneficiaries is predicted to act as a resource only among more prosocially-motivated workers, suggesting that resources may not always be socially shared and exert ubiquitous effects on workers with varying individual orientations. These internal and external resources will be described in further detail in later sections.

Withdrawal

Humanitarian and development workers are drawn to and stay motivated to work in the field because of the challenges and opportunities to help others less fortunate that are inherent in their job. However, it may be the very nature of this benefactor-beneficiary relationship that can
ultimately drive them away from the field because of the intense emotional demands that it places on the workers (Blankertz & Robinson, 1997). The extended exposure to poverty, disease, and human rights abuses can erode workers’ emotional and physical resources. The constant responsibility for another person’s wellbeing and livelihood may leave workers with little left on their own to care for themselves and to continue working. These challenges all act as precursors to workers’ emotional exhaustion. Moreover, humanitarian and development workers often encounter emotionally intensive and extended interactions in their tasks, which have been shown to be taxing on one’s emotional resources. Such interactions with clients in customer service jobs have been theorized to engender emotional fatigue and role stress (Price, Arnould, & Tierney, 1995) and these emotionally exhausting interactions can occur either in person or over indirect forms of communication (phone or electronic mode; Goldberg & Grandey, 2007). In order to cope with such demands, humanitarian workers may choose to adopt a defensive coping mechanism to conserve their resources by withdrawing from the organization.

Earlier anecdotal stories and descriptive evidence about the pattern of withdrawal among emotionally exhausted workers is strengthened by empirical work. Emotional exhaustion has been shown to be the most consistent predictor of turnover and turnover intentions across several studies (Cropanzano et al., 2003; Blankertz & Robinson, 1997; Lee & Ashforth, 1996; Parker & Kulik, 1995) and the strongest predictor of turnover among the other components of burnout (Mor Barak et al., 2001). In fact, in one study, emotional exhaustion was reported to be the top reason for leaving the organization by 21% of those surveyed (Blankertz & Robinson, 1997). More importantly, burnout has been identified as a unique predictor of turnover among human service employees, compared to the more common predictors of turnover such as work performance and organizational commitment in other work fields (Mor Barak et al., 2001). Recently, withdrawal from work in the form of intentionally resisting effort has been found to function as a form of coping mechanism by emotionally exhausted employees to manage job
stressors (Krischer, Penney, & Hunter, 2010). Withdrawing from work allowed workers the chance to escape from aversive situations and replenish depleted emotional resources.

**Psychosomatic Health Symptoms**

The fatigue of emotionally exhausted workers struggling with depleting resources can also manifest in the form of ill health. Burnout has been identified as a better predictor of individuals at a higher risk of physical impairment than other health and stress outcomes (Melamed, Shirom, Toker, Berliner, & Shapira, 2006). Researchers have empirically demonstrated the relationship between emotional exhaustion and health, where individuals who are more fatigued reported greater cardiovascular disease, coronary heart disease, higher cholesterol levels, and psychosomatic symptoms (Melamed et al., 2006; Piko, 2006; Shirom, Westman, Shamai, & Carel, 1997). The detrimental effects of chronic stress on individuals’ health is manifested through its effects on impaired immune functioning, heightened bodily inflammatory response, sleep disturbances, and poor health behaviors (Melamed et al., 2006).

More importantly, the exposure to chronic stress leaves individuals with little coping resources left to manage work demands that can translate into compromised health (Melamed et al., 2006). In one study, women with coronary heart disease exhibited poorer coping strategies than healthy women (Hallman, Thomsson, Burell, Lisspers, & Setterlind, 2003). It was suggested that these women adopted poor coping strategies as a secondary option because they may lack opportunities and resources to help them deal with stressors (Hallman et al., 2003). Many of these women fulfill the role of primary caretakers at home and at work. Taking on responsibility for the wellbeing of others often leave them with little freedom to take breaks to recuperate from stress. Humanitarian and development workers who are emotionally exhausted may experience similar damaging effects that chronic stress has on their body functions. Their exposure to extended
emotional exhaustion leave them with minimal coping resources to manage the demanding nature of their work and ultimately may harm the physiological functioning of their bodies (Hobfoll, 1989). Additionally, research has shown that the constant act of regulating one’s emotions in interactions with beneficiaries can lead to increased psychosomatic health symptoms (Schaubroeck & Jones, 2000; Montgomery, Panagopolou, de Wildt, & Meenks, 2006). This initial lack of resources acts as a vicious trigger of further resources losses (Hobfoll, 2001), culminating in a greater prevalence of psychosomatic health symptoms among emotionally exhausted humanitarian and development workers.

Withdrawal and poor health is a serious problem to humanitarian and development organizations because of the direct and indirect costs associated with these outcomes. Turnover is associated with the direct expenditures of separation costs such as exit interviews, administrative paperwork, separation pay and unemployment tax, replacement costs to post job vacancies, conduct interviews and administer exams, and training costs to develop new employees (Mor Barak et al., 2001). There are also indirect costs from workers leaving the organization such as the loss of efficiency of employees before they leave, the impact of workers’ turnover on their colleagues’ productivity, and the inevitable loss of productivity as new employees acquire new skills and knowledge (Mor Barak et al., 2001).

Drawing from the COR model (Hobfoll, 1989) and existing empirical evidence, it can be hypothesized that emotionally exhausted humanitarian and development workers who are lacking in resources will slip into a cycle of loss resources which will manifest in the form of withdrawal and higher levels of psychosomatic health symptoms.

**Hypothesis 1a:** Emotionally exhausted workers are more likely to withdraw from the organization.

**Hypothesis 1b:** Emotionally exhausted workers are more likely to report higher levels of psychosomatic health symptoms.
Chapter 3

Internal and External Moderators of the Loss Spiral

The pattern of loss spiral among emotionally exhausted workers that results in withdrawal and poorer health symptoms can manifest differently depending on workers’ internal motives and their external interactions with beneficiaries. The interaction between these internal and external factors on worker’s emotional exhaustion may alter the pattern of engagement and wellbeing of humanitarian and development workers.

Withdrawal and Health among Prosocially Motivated Workers

Research has found that individuals “engage in the same activity for different motives”, (Clary & Snyder, 1999; Clary & Orenstein, 1991; Eisenberg, 1986; Rioux & Penner, 2001). Increasingly, researchers have focused on the need to consider more prosocial motives in driving work behaviors, such as fairness and justice norms, cooperation, and empathy (Batson & Powell, 2003; Cropanzano, Goldman, & Folger, 2005; DeDreu & Nauta, 2009; Eisenberg, 1986; Grant, 2007; 2009; Korsgaard, Meglino & Lester, 1997; Meglino & Korsgaard, 2004; Staub, 1978; Sturmer, Snyder, Kropp & Siem, 2006). Prosocially motivated individuals can be described as being highly concerned about the wellbeing of others (Grant, 2008b; Grant & Wrzesniewski, 2010). The inquiry behind prosocial reasons is especially timely given that the egocentric view of human behavior can no longer sufficiently explain the attitudes, cognition, and motivation of individuals in many circumstances (Brewer, 1991; Cropanzano et al., 2005; Korsgaard et al., 1997). In so far as the ‘self view’ has dominated psychological explanations of human behavior
(e.g. Cropanzano et al., 2005), we need to begin considering other factors such as the element of “otherness” (Brewer, 1991) to understand why humans are willing to sacrifice their comfort and safety to benefit another.

Workers’ prosocial motives can act as a form of resource to facilitate resource accumulation and maintenance, and prevent resource losses (Hobfoll, 1989; 2001). Prosocial motives have been shown to be influential factors in determining work behaviors. For example, research showed that less prosocially motivated individuals were primarily affected by individual-focused work motivations, cognitions and behavior such as job autonomy and skill variety in predicting work performance. On the other hand, more prosocially motivated individuals emphasized group-related factors such as justice climate at work, relationships, and opinions held by coworkers in predicting their prosocial performance (DeDreu & Nauta, 2009).

Given the different focus of prosocial motives, humanitarian and development workers who are driven into the field because of these reasons may experience their jobs differently from workers who are in humanitarian and development work for other less prosocially oriented reasons. More prosocially motivated individuals may choose this career path because they are genuinely concerned for the wellbeing of others, possess a belief in a just world and norms of equity, and feel unease when such normative expectations and values are violated (Batson & Powell, 2003; Eisenberg, 1986). They emphasize the values of cooperation and selflessness, and are more likely to demonstrate acts of citizenship behavior and organizational spontaneity (Grant & Sumanth, 2009; Korsgaard et al., 1997). Moreover, more prosocially motivated individuals are better able to take the perspective of others when attempting to solve problems (Grant & Berry, 2011). On the other hand, less prosocially motivated individuals might engage in humanitarian and development work because it facilitates, in addition to improving the welfare of others, their career development goals, and social rewards such as positive regard from friends and family (DeWall, Baumeister, Gaillot, & Maner, 2008). It might also help allay their anxieties and guilt.
over being more privileged than a majority of others in the world (Clary et al., 1998; Frisch & Gerard, 1981).

When confronted with increased job demands, prosocial workers may be better able to dig deep and continue persisting despite personal costs. Recent research has found that individuals who believed they had unlimited resources in their self-regulation capabilities were less likely to exhibit decreased performance after a depleting task compared to individuals who believed that their self-regulation resources were limited (Job, Dweck, & Walton, 2010). These two groups of individuals equally experienced exhaustion during depleting tasks, but for the former group, their exhaustion was less likely to affect their engagement in subsequent tasks. In other words, these individuals are able to continue exerting effort despite being exhausted. More prosocially motivated workers may possess this belief about their capability to continue exerting effort regardless of emotional fatigue. Their more intimate connection to the cause of their work may serve as a resource to prosocially motivated workers who are already emotionally exhausted to resist withdrawing from the organization (Hobfoll, 1989; 2001).

The primary motivation for more prosocially motivated humanitarian and development workers is to help improve the lives of their beneficiaries (Grant, 2008b). These workers may at times experience greater responsibility and commitment to their beneficiaries than to their organizations (Grant, 2007; 2009; Mor Barak et al., 2001). Even though they may be emotionally exhausted, because they are motivated by their beneficiaries and because acting in this way is partly a fulfillment of their values and professional commitment (Grant, 2008c; Mor Barak et al., 2001), they are likely to continue persisting at work. The priority of helping their beneficiaries (Blankertz & Robinson, 1997) and the significance of perceiving the impact and social worth of their actions on the lives of their beneficiaries (Grant, 2008c) may be fuel enough to keep them from withdrawing despite emotional and physical health.
However, such continued effort despite exhaustion may translate into poorer health symptoms. Past research has shown that when job demands increased, individuals have the choice to either adopt an active coping mechanism where extra effort and resources are mobilized in order to maintain one’s performance levels, or enter a passive coping mode where individuals maintain their effort levels at the expense of a reduction in overt performance (Hockey, 1993; 1997; Schaufeli & Bakker, 2004). The inherent risk in adaptive coping mechanism is that even though it may be adaptive in the short run, sustained use of one’s resources over a long period of time becomes maladaptive. Improved or maintenance of high performance levels comes at the expense of compensatory costs in the form of anxiety or fatigue and physiological symptoms of stress (Hockey, 1993; 1997).

Empirical evidence from studies within the human service industry provides support for the strength of prosocial motives in keeping individuals persisting at work. In a study on community mental health workers, the top reasons employees gave on why they remained in the field was the desire to help clients (Blankertz & Robinson, 1997). Employees mentioned that it is the fulfillment that comes from helping others that keeps them engaged. It can be hypothesized then, that more prosocially motivated workers who find greater satisfaction from value expression (Grant, 2008c) and meaning in humanitarian work (Humphrey et al., 2007) are more likely to remain at their organization despite being emotionally exhausted. Ironically, the very nature of humanitarian work that attracts them – the challenging context, intense interpersonal interactions and potential to help others – may be the very factors that keep them spiraling down the loss cycle (Hobfoll, 1989; 2001). As predicted by the COR model (Hobfoll, 1989), continued use of one’s resources to perform at work can further reinforce the loss spiral and lead to poorer health symptoms among more prosocially motivated workers. Prosocially motivated humanitarian and development workers, it seems, are confronted with a double-edged sword where their motivation to help others may end up harming themselves.
On the other hand, the reverse pattern of behaviors is predicted for less prosocially motivated humanitarian and development workers. These workers are motivated by many other reasons besides helping improve the lives of their beneficiaries, such as furthering one’s career goals, obtaining social approval, or alleviating one’s guilt for being more fortunate than many others (Clary et al., 1998; DeWall et al., 2008; Frisch & Gerard, 1981). The beliefs of these workers may mirror those who view their regulatory resources as limited and tend to expire after engaging in a depleting task (Job et al., 2010). The exhaustion they feel translates into reduced effort in subsequent effortful tasks (Job et al., 2010). Given the relatively smaller role helping others play in less prosocially motivated workers’ work decisions, the loss of resources inherent in emotional exhaustion is more likely to trigger a self-protective mechanism that will encourage withdrawal from work (Hobfoll, 2001). At the same time, the protective mechanism to minimize further losses will serve to protect their health from further declining. Hence, less prosocially motivated workers will report fewer psychosomatic health symptoms.

**Hypothesis 2a:** Work motives will moderate the relationship between emotional exhaustion and withdrawal such that emotional exhaustion will be less positively related to withdrawal among more prosocially-motivated humanitarian workers while emotional exhaustion will be positively related to withdrawal among less prosocially-motivated humanitarian workers.

**Hypothesis 2b:** Work motives will moderate the relationship between emotional exhaustion and psychosomatic health symptoms such that emotional exhaustion will be positively related to psychosomatic health symptoms among more prosocially-motivated humanitarian workers while emotional exhaustion will be less positively related to psychosomatic health symptoms among less prosocially-motivated workers.
Contact with Beneficiaries among Prosocially Motivated Workers

Contact with beneficiaries is an important element of humanitarian and development work. Albeit, the degree to which workers interact with their beneficiaries can vary greatly, from weeks or months at a time talking, working with, and delivering aid in person to only intermittent contact over email or by telephone. Regardless, contact with beneficiaries in this work can be particularly challenging given the circumstances surrounding these interactions. It was suggested earlier that these challenging interpersonal interactions might be one of the leading causes of emotional exhaustion among humanitarian workers. Nevertheless, the impact of contact with beneficiaries may depend to some degree on humanitarian and development workers’ work motives. Workers who are more prosocially motivated may draw greater benefits from these challenging interactions than less prosocially motivated workers.

Contact with beneficiaries describes jobs and tasks that are relationally structured so that workers have interactions and exposure to the people who are affected by their actions (Grant, 2007). Theoretical arguments regarding the impact of contact with one’s beneficiaries range along a broad continuum of being beneficial to one’s job performance to detrimental to one’s wellbeing. Many of these contradictory arguments stem from the fact that researchers often operate within silos of their fields with minimal cross-pollination of ideas. Specifically, job design researchers argue for the motivating potential of interaction with external members of the organization while stress researchers typically characterize contact as emotionally depleting and detrimental to one’s health (e.g. Grant, 2007; 2009; Grant & Parker, 2009; Humphrey et al., 2007; Brotheridge & Grandey, 2002; Hochschild, 1983; Goldberg & Grandey, 2007). Some researchers have suggested that underlying factors that may clarify these differences may be the nature, purpose of the interaction with outside members of the organization, and outcomes studied (Grant & Parker, 2009; Grandey & Diamond, 2010). Perhaps, an additional factor to consider about the
impact of contact with beneficiaries on one’s wellbeing may be workers’ motives to be involved in humanitarian work.

Interaction with beneficiaries may be particularly motivating and insightful for more prosocially motivated humanitarian and development workers. Given that prosocially motivated workers are inherently driven to help others (Grant, 2008; Cropanzano et al., 2005), the opportunity to perceive first hand the impact of their actions on others and develop close relationships with beneficiaries may keep them engaged in the organization rather than withdraw despite high job demands. Brief, one-time interactions with beneficiaries have been shown to increase persistence on tasks (time spent on the telephone) and improve job performance (amount of money raised) among fundraisers (Grant et al., 2007). This effect was mediated by perceived impact, in that employees became more motivated after witnessing the positive effects of their behavior on beneficiaries, and affective commitment toward beneficiaries.

Perceived impact is the degree to which you are aware of how your work impacts others (Grant, 2007). When prosocially motivated humanitarian and development workers perceive greater impact of their actions, their perceptions of behavior-outcome contingencies are strengthened, and the more likely they will be to exert effort and continue working on their tasks (Grant, 2008c). Affective commitment is the emotional concern for and dedication to the people and groups of people impacted by your work (Grant, 2007). When one is affectively committed to beneficiaries, one becomes emotionally attached and genuinely concerned about the welfare of others (Grant, 2007; 2008a). Helping becomes a personal matter. Research has shown that individuals are more motivated to help those who they have some personal connection with, such as those they perceive to be more similar to them or who identify with the same group membership (Sturmer, Snyder, & Omoto, 2005; Sturmer et al., 2006). Prosocially motivated workers who are affectively committed to their beneficiaries are more motivated to help improve others’ lives, and hence, will exert greater effort and stay in their jobs (Grant, 2007).
Although little is known empirically about the impact of challenging contact with beneficiaries on humanitarian and development workers’ motivation, withdrawal and wellbeing, it can be hypothesized that among more prosocially motivated humanitarian workers, such contact can serve to remind them about the original purpose of their work. Being able to perceive the impact of their actions and develop personal relationships through contact with beneficiaries may serve to further intensify these workers’ commitment to their work, making them less likely to withdraw from the organization. Despite being emotionally exhausted, these interactions act to confirm, rather than discourage their beliefs regarding the importance of their actions. In fact, it may gain additional relevance when humanitarian workers are burnt out and lacking in resources to continue engaging in their tasks because of the feedback from beneficiaries they receive (Bakker et al., 2007).

On the other hand, continued engagement of their resources, especially when it is already lacking, may pose a threat to their wellbeing in the form of increased psychosomatic health symptoms (Hobfoll, 1989; 2001). The opportunity to directly interact and help beneficiaries, which has been suggested as the factor that draws these workers into the field (Blankertz & Robinson, 1997) may keep them from withdrawing, but at the same time, that very act may be detrimental to their health. Prolonged persistence and effort at the expense of their depleted resources comes at a certain physiological cost (Hobfoll, 2001; Baumeister, Vohs, & Tice, 2007; Blankertz & Robinson, 1997).

On the other hand, contact with beneficiaries may be valued less by less prosocially motivated workers because such opportunities are not as important to serving their other needs besides helping others. The opportunities to perceive the impact of their actions and develop attachments to their beneficiaries are less likely to motivate them to remain at their tasks. The challenging nature of these contacts may push them to withdraw from the organization in a self-protective manner. Nevertheless, the protective act of leaving the organization may end up
buffering them from the psychosomatic health symptoms that may be more typical of their more prosocial counterparts.

**Hypothesis 3a**: Contact with beneficiaries and work motives will interact to moderate the relationship between emotional exhaustion and withdrawal such that among more prosocially-motivated workers, contact with beneficiaries serve to decrease the positive relationship between emotional exhaustion and withdrawal. Among less prosocially-motivated workers, contact with beneficiaries will not have a significant effect on the relationship between emotional exhaustion and withdrawal.

**Hypothesis 3b**: Contact with beneficiaries and work motives will interact to moderate the relationship between emotional exhaustion and psychosomatic health symptoms such that among more prosocially-motivated workers, contact with beneficiaries serve to increase the positive relationship between emotional exhaustion and psychosomatic health symptoms. Among less prosocially-motivated workers, contact with beneficiaries will not have a significant effect on the relationship between emotional exhaustion and psychosomatic health symptoms.
Chapter 4

Workers’ Engagement as an Explanatory Mechanism

The effect of emotional exhaustion on humanitarian and developments workers’ withdrawal and health symptoms may be explained through their level of engagement. In other words, workers’ engagement may serve to mediate the impact of motives and contact with beneficiaries on workers’ withdrawal and health. Engagement is described as a positive and fulfilling work-related state that is characterized by vigor, dedication, and absorption (Schaufeli & Bakker, 2004). When one is engaged at work, it involves the harnessing of self cognitively, physically, and emotionally to achieve work goals (Kahn, 1990; May, Gibson, & Harter, 2004). Vigor involves a high level of persistence, investment in effort, and high level of energy and mental resilience when working. Dedication is a sense of significance, inspiration, enthusiasm, pride and challenge regarding one’s work. And finally, absorption describes someone who is fully concentrated and engrossed in one’s work and experiences difficulty detaching from work.

Research has demonstrated empirically, using advanced statistical methods, that emotional exhaustion and vigor are independent and negatively related constructs (Schaufeli & Bakker, 2004; Gonzalez-Roma, Schaufeli, Bakker, & Lloret, 2006). Given the emphasis on emotional exhaustion, this study will focus on the vigor dimension of engagement. Moreover, vigor is said to constitute the main characteristics of motivated behavior, which is to exert effort and persist in tasks (Llorens, Schaufeli, Bakker, & Salanova, 2007). People are motivated at work when they feel vigorous and are dedicated in performing well. Hence, this study will adopt this definition of engagement throughout the paper, in that a person who is engaged is motivated to exert effort and persist in his or her job.
Empirical evidence exists to support the negative effect emotional exhaustion has on workers’ engagement, withdrawal and health. When workers are emotionally exhausted, they are depleted of resources (Hobfoll, 1989; Van den Broeck, Vansteenkiste, De Witte, & Lens, 2008). Resources are of importance because they constitute tools we use at work to cope with job demands (Halbesleben & Buckley, 2004). More importantly, several studies have indicated the motivating potential of resources in one’s work. Resources are motivating in their own right through the creation, maintenance, and accumulation of resources (Hobfoll, 1989). Hence, when one is low on resources such as when emotionally exhausted, being in such a state will act to decrease motivation and engagement (Llorens et al., 2007).

There is evidence to support a vicious cycle of loss spiral where strain leads to higher stress, which in turn leads to greater strain. In a study, work-home interference and exhaustion were both causes and consequences in a reciprocal relationship with work pressure (Demerouti, Bakker, & Bulters, 2004). Negative experiences triggered further negative experiences, following the form of a loss spiral. Reciprocal relationships were also found between job demands, social support of supervisors and emotional exhaustion (de Lange, Taris, Kompier, Houtman, & Bongers, 2004). In terms of this study, when humanitarian and development workers are emotionally exhausted, a lack of motivation and engagement ensues (Bakker, Hakanen, Demerouti, & Xanthopoulou, 2007; Halbesleben & Bowler, 2007), which can translate over time behaviorally to a decision to withdraw from the organization and physiologically to more psychosomatic health symptoms.

More than that, workers’ engagement levels can explain the moderating effect of workers’ motives on emotional exhaustion. The convergence of prosocially motivated workers’ values with their work may mean greater engagement at work (Kahn, 1990). More prosocially motivated workers who hold helping others to a higher esteem, and who see humanitarian and development work as a way to express their values are more likely to remain engaged and
motivated. Support for this assertion comes from research on workers performing “necessary evils,” where despite psychologically and morally challenging features inherent in their job, these workers were able to remain engaged at work (Margolis & Molinsky, 2008). In a similar way, despite being emotionally exhausted and having to cope with challenging and demanding tasks, more prosocially motivated workers may be able to sustain their effort levels and persist in their jobs. Hence, they are less likely to withdraw from the organization. But because of sustained exertion of effort in a low-resource condition, they may incur the cost of greater psychosomatic health symptoms as a result.

On the other hand, the challenging nature of humanitarian and development work may trigger self-protective mechanisms among less prosocially motivated workers, which may decrease their levels of engagement at work (Krischer et al., 2010). Because other factors besides helping others also play a big part in their motivation, such as gaining social approval and social rewards and attaining career goals (Clary et al., 1998; DeWall et al., 2008), they may be more likely to withdraw from the organization to protect their already depleting resources when they are emotionally exhausted (Hobfoll, 1989). At the same time, their actions to protect their threatened resources may prevent them from experiencing more psychosomatic health symptoms.

**Hypothesis 4a:** The moderating effect of workers’ motives on the relationship between emotional exhaustion and withdrawal will be mediated by worker engagement.

**Hypothesis 4b:** The moderating effect of workers’ motives on the relationship between emotional exhaustion and psychosomatic health symptoms will be mediated by worker engagement.

In a similar manner, workers’ engagement can mediate the moderating effect of contact with beneficiaries on the impact of prosocial motives on the resource loss pathway. Among more prosocially motivated workers, contact with beneficiaries not only provides a vivid reminder of the impact of their work but also allow workers to form affective connections with their
beneficiaries (Grant, 2007; Grant et al., 2007). These opportunities serve to strengthen prosocial workers’ engagement in their work, indirectly decreasing their probability of withdrawing from the organization. However, continued engagement at work despite depleted resources will negatively affect their physiological health. On the other hand, among less prosocial workers, contact with beneficiaries, which can be intensive and exhaustive, may trigger disengagement, leading to subsequent withdrawal from work. Nevertheless, this disengagement will protect less prosocially motivated workers’ resource pool, buffering them from deteriorating psychosomatic health symptoms.

**Hypothesis 5a**: The three-way interaction effect of workers’ motives, contact with beneficiaries and emotional exhaustion on withdrawal will be mediated by worker engagement.

**Hypothesis 5b**: The three-way interaction effect of workers’ motives, contact with beneficiaries, and emotional exhaustion on psychosomatic health symptoms will be mediated by worker engagement.
Chapter 5

Methods

Phone Interviews

Prior to the formal development of the current research questions, informal interviews with eight current or former nonprofit workers were conducted over the phone. The goal of these interviews was to provide an in-depth look into the work experiences of nonprofit employees, particularly with regards to their motivation, frustrations, and wellbeing. Feedback from these interviews was used to inform hypotheses development, in that it helped confirm the relevance of the outcomes of interest to the work experiences of nonprofit workers and the variability of these outcomes, particularly with regards to work motives of these workers. Moreover, these interviews were helpful to inform terminology of these workers’ experiences to more effectively frame the measures of this study.

Of the eight interviewees, two were former nonprofit workers with extensive experience in the industry, another a current Board Member of a community service center, one a community health service worker, and the last four interviewees worked in international nongovernmental organizations (NGOs). A broad range of workers from local and community service centers to large international NGOs were interviewed in order to capture the diverse experiences of nonprofit workers. This eventually helped narrow the sample of the paper to the work experiences of humanitarian and development workers of NGOs that focus on disaster relief, poverty, and conflict/post-conflict problems.

Initial contact with a former nonprofit worker was established through a third-party connection. From then, the remaining nonprofit workers interviewed were obtained through
snowball sampling where at the end of every interview, the interviewee was asked to recommend someone else within the industry who would be willing to speak to the researcher. At the beginning of each phone interview, interviewees were read the informed consent and told that this interview will be audio-taped for transcription purposes. Interviewees who were uncomfortable with being audio-recorded could ask that it be stopped at any point in time. On average, the interviews took 45 minutes to 1 hour 15 minutes to complete.

The researcher developed a set of interview questions based on initial interest in the work outcomes of nonprofit employees. The questions ask interviewees to describe their work role and major responsibilities, the motivation they and their colleagues have to enter and continue working in this field, and their observations regarding the frequency of employee turnover and whether it differs across different worker types. The interview questions are listed in Appendix A.

When asked what motivated them to enter the humanitarian and development field, a clear pattern emerged among a number of interviewees in terms of their career trajectory. Four of the interviewees gained initial exposure to the field through previous volunteer work where two of them were former Peace Corps volunteers, one a former Americorps volunteer, and the fourth interviewee participated in extensive student and community organizing while on campus. All of them directly attributed their volunteer experiences as helping define their nonprofit career choices in terms of wanting to do something that is more meaningful and impactful. The interviewees described being motivated to help others, “making a change in the world”, and seeing the impact of their services on beneficiaries. Another interviewee described being willing to work long hours in order to get the work done because “you buy into the larger picture of the impact of your work.” However, not all interviewees subscribed to these reasons – one of the interviewees confessed that she had relocated for personal reasons and just wanted a job during the recession.
In a related question, the interviewees were asked what they see were the main motivation for others to work in the nonprofit industry. Many of them spoke of prosocial reasons that drove others to work in the nonprofit field despite low pay, prestige, and benefits. Some of the motives they see among others in the field are having a strong sense of social justice and feeling compelled to speak up and advocate on behalf of vulnerable people who otherwise cannot do it themselves, and doing something with a bigger purpose than earning profits and pleasing shareholders. However, one of the interviewees pointed out that there were differences in motivation between nonprofit employees, in that some employees tend to be less connected to the prosocial mission of the organization.

In general, most interviewees expressed a clear problem with employee turnover in their organization. Five of them spoke of the high turnover rate in their organization, with the average tenure ranging from one year to three to four years. The common reasons cited were overall burnout from work, job stress, limited funding and low pay, and lack of career development opportunities within the organization. An interviewee candidly disclosed the prevalence of substance abuse among her colleagues, speaking of not only about emotional stress from direct beneficiary interactions, but also about the insidious nature of vicarious trauma. Interviewees discussed the high turnover rates among nonprofit workers in the field or those with direct contact with beneficiaries, citing the stress and intense travel schedules as contributing to the burnout of these employees.

Nevertheless, not everyone viewed employee turnover as a problem in the organization. One interviewee observed a low turnover rate in her organization and attributed it to the great flexibility that employees enjoyed in terms of their work role and tasks. Another interviewee thought that high turnover was a common problem in the nonprofit industry in general, but viewed it as a positive characteristic and something sought after by his organization.
Interestingly, when asked what would drive them to leave their current organization, all interviewees cited lack of career development opportunities as the primary reason. Aside from career limitations, one interviewee mentioned leaving for better pay if money ever became a problem and two others spoke about relocating to a more attractive location. One interviewee spoke about her personal intentions to leave the organization in the near future for a better job with better pay.

The interviews conducted, although informal in nature, were illuminative of the larger issues experienced by nonprofit workers and confirmed the relevance of the outcomes of interest in this study. Frequent themes that emerged in many of these interviews include the “altruistic” motivation among nonprofit workers to make a difference in the world, employee turnover in nonprofit organizations, particularly among field workers or workers who have contact with beneficiaries, and burnout among workers’ as one of the major reasons for leaving the organization. Moreover, aside from the common themes highlighted, there were answers from the interviews that suggested deviation among the experiences of nonprofit workers. Not everyone agreed on the reasons that motivated employees to become involved in nonprofit work. Besides prosocial motives, interviewees mentioned other reasons for entering the nonprofit industry that may lead to a nuanced work experience. Turnover appeared to be a major problem driven by burnout among other reasons, but questions remained on who turnover was more frequent. These gaps in knowledge heavily influenced refinement of research hypotheses and subsequent development of the two panel survey study.
Two Panel Survey

Procedures

Several different methods were used to obtain the current sample. First, a snowball sampling method was used to reach out to the wider community of humanitarian and development workers. Recruitment emails with a URL to the first survey were sent to existing contacts within the NGO field. Those contacted were asked to participate in a two-panel survey study where they were asked to complete Survey 1 at the time of the initial request, and a second set of questions two to three months later. The reason for this time lag was to examine the effects of strain on workers’ engagement and wellbeing over time. This measurement time lag is expected to reflect the causal lag of the examined constructs and lend greater construct validity to the study’s design (e.g. Demerouti et al., 2004; Houkes, Janssen, de Jonge, & Bakker, 2003).

After completing the survey, participants were asked to forward the recruitment email to their networks within the humanitarian and development field. In addition, emails were also sent to coordinators of NGO networks, NGO listservs and NGO professional associations to ask if they could circulate the survey to their members. A short summary of the survey was also posted on several NGO-related forums asking for participation.

Survey 1 took approximately 30 minutes to complete and included measures of workers’ emotional exhaustion, prosocial motives, extent of contact with beneficiaries, engagement levels, withdrawal, and psychosomatic health. Demographic information such as gender, age, and tenure in position were also collected at this time³. Reminder emails to employees who have not responded to Survey 1 were sent out following the initial email to request participation. Participants were asked to share their email addresses at the end of the first survey in order to contact them for the second survey. After two to three months following the first survey, emails
with a URL to Survey 2 were sent out to these humanitarian and development workers. The second survey included the same measures as in the first survey excluding demographic questions, and took approximately 20 minutes to complete.

Participants

A sample of 82 humanitarian and development workers fully completed the first survey while 63 respondents (or 76.8%) out of the first sample completed the second survey two to three months later. In order to cast a wide net and reach a broad array of humanitarian and development workers, snowball sampling was used. Additionally, recruitment emails were distributed to multiple nongovernmental organization (NGO) listservs and networks. Given these methods, the actual number of individuals that received the surveys cannot be tracked. However, based on the 127 individuals that accessed the first survey, the response rate for Survey 1 is 64.6%.

More than half (54%) of respondents from the first sample were females with an average age of 39.7 years. The workers have an average tenure of 3.6 years at their organization where 73.3% of them worked at international NGOs, 17.3% worked at local/national NGOs and the remaining worked in regional NGOs or government agencies. Organizations that were represented within this sample included World Vision, Relief International, Women for Women International, United Nations Capital Development Fund, and Finca International. 74% of the respondents identified themselves as nonlocal workers in the context in which they are delivering aid. Respondents occupy positions across all of levels of the organization, ranging from Country Director, Finance Director, Monitoring and Evaluation Specialist, to Marketing Officer and Administrative Assistant. On average, respondents visited the field where their main beneficiaries were located six times in the past three months, ranging from zero to everyday. Respondents traveled to diverse locations to deliver aid, for example, Thailand, the Democratic Republic of
Congo, Costa Rica, and Lebanon, among others. Given the longitudinal nature of this study, in the following analyses, only respondents who participated in both surveys were included in the following data analyses and hypotheses reporting.

Measures

Emotional exhaustion

Emotional exhaustion was assessed using a six-item measure that asked respondents to report “How often they have felt this way” to questions like “I feel emotionally drained from work” and “I feel used up at the end of the workday” (Wharton, 1993). Respondents reported their experience on a scale that ranged from 0=Never felt this way at work to 6=Feel this way every day. The internal consistency for this scale was 0.82 at Time 1 and 0.91 at Time 2, sufficiently above the minimum 0.70 threshold set by Nunnally (1978). In its original operationalization, emotional exhaustion was measured in terms of its frequency and intensity (Maslach & Jackson, 1981). However, these two dimensions of emotional exhaustion have been demonstrated to correlate moderately to strongly and measuring both dimensions has been suggested to be redundant (Lee & Ashforth, 1996; Maslach & Jackson, 1981). Hence, this study will focus only on the commonly measured frequency dimension of emotional exhaustion. These items are included in Appendix B.

Worker engagement

The concept of worker engagement was measured using the six-item vigor component of the Utrecht Work Engagement Scale (Schaufeli & Bakker, 2003). In a review of existing
measures of state engagement in the field, this measure was identified as the leading scale that
taps the energetic and affective components inherent in this construct (Macey & Schneider,
2008). Respondents are asked to indicate how often they experience the following at work on a
scale ranging from 0=Never to 6=Everyday. The internal consistency of this scale was 0.85 at
Time 1 and 0.90 at Time 2. Example items from the measure are “At my work, I feel bursting
with energy” and I can continue working for very long periods of time.”

Although burnout and engagement have been conceptualized as opposite ends of a
continuum, research has shown that in fact, burnout and engagement are independent constructs
that are moderately and negatively correlated with each other rather than mutually exclusive,
complementary states (Schaufeli & Bakker, 2004). In this study, emotional exhaustion was
measured in the past in that respondents were asked to report on their experience after work,
while engagement was measured in the present where respondents were asked to report on how
they feel while they are performing work, further contributing to their nondependency. A
humanitarian and development worker who is emotionally exhausted may or may not experience
a lack of engagement in his or her job, depending on certain internal and external factors. The
items for this measure are included in Appendix C.

**Prosocial motives**

Prosocial motives of humanitarian and development workers were measured using the
four-item prosocial motivation subscale developed by Grant (2008a). Participants were asked to
respond to the following lead sentence “The main reason for working is…” and rate the extent to
which they agreed to the four items on a scale from 1=Not at all to 5=Very much. An example of
the item is “Because I care about benefitting others through my work.” The internal consistency
for this subscale was 0.89 at Time 1 and 0.93 at Time 2. Preliminary research assessing a similar
construct showed limited evidence of social desirability (DeDreu & Nauta, 2009). These items are included in Appendix D.

**Contact with beneficiaries**

This construct was measured using the nine-item contact with beneficiaries subscale developed by Grant (2008a) to empirically test the frequency, breadth, and depth of interaction with beneficiaries. The other subscale of this measure is workers’ perceived impact on beneficiaries, which has been shown to be distinct from workers’ contact with beneficiaries (Grant, 2007; 2008a). An example of an item measuring the frequency of contact is “My job allows frequent communication with the beneficiaries who benefit from my work.” Similarly, example items from the breadth and depth dimensions of this scale are “My job provides me with contact with different groups of beneficiaries who benefit from my work” and “My job enables me to build close relationships with the beneficiaries affected by my work,” respectively. Respondents indicated the extent to which they agreed to the following items on a scale ranging from 1=Disagree strongly to 7=Agree strongly. The focal targets of these items have been changed from “people” to “beneficiaries” to fit the context of humanitarian and development work. The items in this scale were combined to form an overall indicator of contact with beneficiaries, with an internal consistency of 0.98 at Time 1 and 0.97 at Time 2. These items are included in Appendix E.

**Psychosomatic health symptoms**

Health of humanitarian workers was assessed by the extent to which they experienced psychosomatic health symptoms. Respondents were asked to indicate, “How often they
experienced the following in the past month?” to a list of 10 psychosomatic health symptoms. The response scale ranged from 1=Rarely to 5=Very often, with an alpha of 0.85 at Time 1 and 0.88 at Time 2. Example psychosomatic health symptoms are “Your hands trembled enough to bother you” and “You were bothered by your heart beating hard” (Caplan, Cobb, French, Harrison, & Pinneau, 1975; Schaubroeck & Jones, 2000). These items are included in Appendix F.

Withdrawal

Research has provided evidence for the progressive nature of withdrawal that proceeds from tardiness, absenteeism, and finally turnover (Johns, 2001). To overcome the lack of objective turnover and absence data from the personnel department of NGOs, two self-reported indicators were used to measure withdrawal; past and current behavioral withdrawal and future intentions to turnover. To assess behavioral patterns of withdrawal, 8 items from the Psychological Withdrawal Behavior measure (Lehman & Simpson, 1991) were used to tap withdrawal of effort at work. The internal consistency for this subscale was 0.81 at Time 1 and 0.84 at Time 2. Respondents were asked to indicate the frequency which they engaged in the following behaviors in the past 3 months, on a scale that ranged from 1=Never to 5=Every Day. An example behavior from this measure is, “Left work station for unnecessary reasons.” The full list of items is shown in Appendix G.

Turnover intentions have been shown to be the best approximate of actual turnover (e.g. Johns, 2001; Mor Barak et al., 2001; Tett & Meyer, 1993). Hence, this study used three items obtained from Cropanzano, James, and Konovsky (1993) to assess the extent to which respondents have thought about leaving the organization in the next year. Respondents were asked to rate the likelihood on a scale of 1=Very unlikely to 7=Very likely. These items had an
internal consistency of 0.70 at Time 1 and 0.64 at Time 2. An example item is, “I intend to leave this organization in the next year”. The items are shown in Appendix H.
Chapter 6

Results

Evidence for Discriminant Validity

Confirmatory factory analysis (CFA) using Lisrel 8.8 (Joreskog & Sorbom, 2006) was conducted to demonstrate discriminant validity of measures in this study. Common practice dictates that CFA involves a comparison between the fit of the six-factor measurement model of emotional exhaustion, worker engagement, prosocial motives, contact with beneficiaries, behavioral withdrawal, and psychosomatic health and the fit of a one-factor model (e.g. Grant & Berry, 2010; Long, 1983). However, because of the small sample sizes of this study (82 and 63 for Survey 1 and Survey 2, respectively), comparisons of fit between two-factor and one-factor models for each pair of constructs in the study were conducted instead following the suggestion of Bagozzi, Yi, and Phillips (1991; e.g. Grandey, Foo, Groth, & Goodwin, 2011). At the minimum, evidence for discriminant validity is established when two-factor combination models demonstrate better fit to the data than one-factor models.

Following recommendations from the research community, a combination of fit indices of model chi-square, root mean square error of approximation (RMSEA), Non-Normed Fit index (NNFI), Comparative Fit Index (CFI), and Goodness of Fit Index (GFI) are used to determine model fit. Individual fit indices tend to have unique limitations that may bias fit conclusions if used on their own (Hu & Bentler, 1999; Hooper, Coughlan, & Mullen, 2006). This is especially relevant in the current study where small sample size may lead to an underestimation of fit by most indices. For example, the chi-square model tends to lack power for small sample sizes and can poorly discriminate between good and bad fitting models. The GFI, CFI, and NNFI have
downward biases in small sample sizes of less than 200 and can indicate poor fit when other
statistics indicate otherwise (Hu & Bentler, 1999; Hooper et al., 2006; Tabachnik & Fidell, 2007).

In general, most of the fit indices suggested moderate fit of the combination models to the
data for Survey 1 (see Table 1). In every two-factor model to one-factor model comparison, the
two-factor model had a better chi-square to degrees of freedom ratio, lower RMSEA, and higher
NNFIs, CFIs, and GFI. Moreover, most of the CFIs, which is least affected and biased by small
sample sizes (Hooper et al., 2006; Tabachnik & Fidell, 2007) are above the cut-off value of 0.90,
with the lowest fit of 0.83 for the two-factor pair of behavioral withdrawal and intentions to
turnover.

For Survey 2, most of the fit indices indicated poor to moderate fit to the data for both the
two-factor and one-factor combination models (see Table 2). The poor fit can be partially
attributed to the smaller sample size of Survey 2 (Hu & Bentler, 1999; Hooper et al., 2006;
Tabachnik & Fidell, 2007). However, when comparing the fit of the combination two-factor and
one-factor models, all the two-factor models collectively had better fit indices than the one-factor
models. Moreover, when comparing the CFIs of the two-factor and one-factor combination
models, more than half of the two-factor models had better fitting CFIs close to or above the cut-
off value of 0.90 and all of them had better fit to the data than the one-factor models.
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*Notes: EE = Emotional exhaustion, ENG = Worker engagement, PM = Prosocial motives, CWB= Contact with beneficiaries, ITO = Intentions to Turnover*
Table 2: Fit indices for two-factor and one-factor combination models measured at Time 2.

<table>
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<th>Latent Variables</th>
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<td>0.89</td>
<td>0.92</td>
<td>0.85</td>
</tr>
<tr>
<td>Withdrawal/ITO</td>
<td>95.64</td>
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<td>0.14</td>
<td>0.83</td>
<td>0.87</td>
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<tr>
<td>PM and Health</td>
<td>156.5</td>
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<td>0.13</td>
<td>0.83</td>
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<td>PM/Health</td>
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<tr>
<td>PM and ITO</td>
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<td>0.08</td>
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<tr>
<td>PM/ITO</td>
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<td>0.18</td>
<td>0.81</td>
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<tr>
<td>Health and ITO</td>
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<td>Health/ITO</td>
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<td>0.13</td>
<td>0.83</td>
<td>0.86</td>
<td>0.76</td>
</tr>
</tbody>
</table>

Notes: EE = Emotional exhaustion, ENG = Worker engagement, PM = Prosocial motives, CWB= Contact with beneficiaries, ITO = Intentions to Turnover
Hypotheses Testing

Means, standard deviations (SDs), and correlations of study variables in Survey 1 and Survey 2 are provided in Table 3. Analysis of the survey data followed the principles of multiple regression analysis (Cohen, Cohen, West & Aiken, 2003) and was conducted using PASWStatistics 18.0. Main study variables were centered in all subsequent regression and mediated moderation analyses. All moderator hypotheses (H2a; H2b; H4a; H4b) were tested following the moderator multiple regression steps (Baron & Kenny, 1986; Cohen et al., 2003) on the full sample. None of these tests appeared significant (see Table 4 and Table 5). Given the conservativeness of the moderator multiple regression, small sample size of the study and hence, the lack of power to detect moderator effects (e.g. Aguinis, 1995; Aguinis & Stone-Romero, 1997; Stone-Romero & Anderson, 1994), a more descriptive, but less conservative test of the moderator hypotheses of prosocial motives and contact with beneficiaries on withdrawal and psychosomatic health symptoms was conducted. The results of these descriptive tests will be the focus of the following sections. For clarity sake, the sections below are divided into results of withdrawal as the dependent variable (DV) and results of psychosomatic health as the DV. Following that, the results of mediated moderation analysis are reported.
Table 3: Descriptives, Time 1 and Time 2 Correlations and Internal Consistency Reliability.

<table>
<thead>
<tr>
<th>Variable</th>
<th>M</th>
<th>SD</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
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</tr>
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<td>2. Gender</td>
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<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
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<td>3. Tenure</td>
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<td>3.17</td>
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<td>0.38</td>
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<td></td>
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<td>4. Negative affectivity</td>
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<tr>
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<td>6. Worker engagement Time 1</td>
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<td>0.11</td>
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<td>-0.16</td>
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<td>7. Prosocial motives Time 1</td>
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<td>0.10</td>
<td>-0.11</td>
<td>-0.06</td>
<td>0.01</td>
<td>0.24*</td>
<td>0.89</td>
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</tr>
<tr>
<td>8. Contact with beneficiary Time 1</td>
<td>4.48</td>
<td>1.93</td>
<td>0.18</td>
<td>-0.32**</td>
<td>0.06</td>
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<td>-0.26*</td>
<td>0.29**</td>
<td>0.13</td>
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<td>-0.09</td>
<td>-0.18</td>
<td>0.24**</td>
<td>0.33**</td>
<td>-0.09</td>
<td>0.10</td>
<td>-0.01</td>
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<tr>
<td>11. Intentions to turnover Time 1</td>
<td>4.05</td>
<td>1.66</td>
<td>-0.32**</td>
<td>0.19</td>
<td>-0.13</td>
<td>0.26**</td>
<td>0.38**</td>
<td>-0.08</td>
<td>-0.04</td>
<td>-0.25*</td>
</tr>
<tr>
<td>12. Physical absences Time 1</td>
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<td>2.12</td>
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<td>0.17</td>
<td>0.19</td>
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<td>-0.21</td>
<td>0.34**</td>
<td>0.17</td>
<td>-0.19</td>
<td>0.11</td>
<td>-0.30**</td>
</tr>
<tr>
<td>14. Emotional exhaustion Time 2</td>
<td>1.95</td>
<td>1.27</td>
<td>-0.44**</td>
<td>0.41**</td>
<td>-0.28</td>
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<td>0.75**</td>
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<td>0.17</td>
<td>-0.26*</td>
<td>-0.26*</td>
<td>0.50**</td>
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<td>0.16</td>
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<tr>
<td>16. Prosocial motives Time 2</td>
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<td>0.69</td>
<td>0.04</td>
<td>0.20</td>
<td>0.04</td>
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<td>-0.11</td>
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<td>SD2</td>
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<td>-------</td>
<td>-------</td>
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<tr>
<td>17. Contact with beneficiary Time 2</td>
<td>4.27</td>
<td>1.78</td>
<td>0.33*</td>
<td>-0.26*</td>
<td>0.15</td>
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<td>0.22</td>
<td>-0.15</td>
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<td>2.58</td>
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<td>-0.30</td>
<td>0.31*</td>
<td>0.32*</td>
<td>-0.26*</td>
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<td>0.63</td>
<td>-0.33*</td>
<td>0.12</td>
<td>-0.30</td>
<td>0.26*</td>
<td>0.29*</td>
<td>-0.05</td>
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<td>0.09</td>
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<td>20. Intentions to turnover Time 2</td>
<td>3.96</td>
<td>1.64</td>
<td>-0.37**</td>
<td>0.27*</td>
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<td>0.31*</td>
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<td>0.14</td>
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<td>-0.07</td>
<td>0.10</td>
<td>0.01</td>
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<td>22. Emotional absences Time 2</td>
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<td>0.88</td>
<td>-0.37**</td>
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<td>0.08</td>
<td>0.12</td>
<td>-0.19</td>
<td>0.20</td>
<td>-0.44**</td>
</tr>
</tbody>
</table>

*Notes: * p < .05, ** p < .01. Cronbach’s alphas are in italics on the diagonal. Emotional exhaustion measure is on a scale from 0 to 6. Negative affectivity measure is on a scale from 1 to 7. Worker engagement measure is on a scale from 0 to 6. Prosocial motives measure is on a scale from 1 to 5. Contact with beneficiaries measure is on a scale from 1 to 7. Behavioral withdrawal measure is on a scale from 1 to 5. Psychosomatic health symptoms measure is on a scale from 1 to 5. Intentions to turnover measure is on a scale from 1 to 7.
<table>
<thead>
<tr>
<th>Variable</th>
<th>11</th>
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<th>19</th>
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<td>12. Physical absences Time 1</td>
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</tr>
<tr>
<td>13. Emotional absences Time 1</td>
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<tr>
<td>14. Emotional exhaustion Time 2</td>
<td>0.24</td>
<td>0.15</td>
<td>0.04</td>
<td>0.91</td>
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<tr>
<td>15. Worker engagement Time 2</td>
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<td>0.00</td>
<td>-0.26*</td>
<td>0.90</td>
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<tr>
<td>16. Other-oriented motives Time 2</td>
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<td>0.08</td>
<td>0.11</td>
<td>0.00</td>
<td>0.42**</td>
<td>0.93</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>17. Contact with beneficiary Time 2</td>
<td>-0.11</td>
<td>0.01</td>
<td>-0.26*</td>
<td>-0.36**</td>
<td>0.34**</td>
<td>0.08</td>
<td>0.97</td>
<td></td>
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</tr>
<tr>
<td>18. Withdrawal Time 2</td>
<td>0.26*</td>
<td>0.24</td>
<td>0.32*</td>
<td>0.44**</td>
<td>0.27*</td>
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<td>-0.48**</td>
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<tr>
<td>19. Psychosomatic health Time 2</td>
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<td>0.07</td>
<td>0.44**</td>
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<td>0.04</td>
<td>-0.11</td>
<td>0.17</td>
<td>0.88</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Intentions to turnover Time 2</td>
<td>0.69**</td>
<td>0.07</td>
<td>0.02</td>
<td>0.42**</td>
<td>-0.13</td>
<td>0.09</td>
<td>-0.32*</td>
<td>0.35**</td>
<td>-0.06</td>
<td>0.64</td>
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<td>21. Physical absences Time 2</td>
<td>-0.03</td>
<td>0.21</td>
<td>-0.08</td>
<td>0.18</td>
<td>-0.01</td>
<td>-0.08</td>
<td>-0.03</td>
<td>0.04</td>
<td>0.43**</td>
<td>-0.20</td>
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<td>22. Emotional absences Time 2</td>
<td>0.06</td>
<td>0.33*</td>
<td>0.70**</td>
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<td>-0.50**</td>
<td>0.44**</td>
<td>0.25</td>
<td>0.04</td>
<td>0.04</td>
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</tr>
</tbody>
</table>

Notes: * p ** p < 0.01. Cronbach's alphas are in italics on the diagonal. Emotional exhaustion measure is on a scale from 0 to 6. Negative affectivity measure is on a scale from 1 to 7. Worker engagement measure is on a scale from 0 to 6. Prosocial motives measure is on a scale from 1 to 5. Contact with beneficiaries measure is on a scale from 1 to 7. Behavioral withdrawal measure is on a scale from 1 to 5. Psychosomatic health symptoms measure is on a scale from 1 to 5. Intentions to turnover measure is on a scale from 1 to 7.
Table 4: Moderating effect of prosocial motives in full sample.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intentions to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
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<td>Intercept</td>
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<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>-0.08</td>
<td>0.39</td>
<td>-0.22</td>
</tr>
<tr>
<td>Prosocial Motives</td>
<td>0.03</td>
<td>-0.05</td>
<td>-0.03</td>
</tr>
<tr>
<td>Emotional Exhaustion X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prosocial Motives X</td>
<td>0.07</td>
<td>0.01</td>
<td>0.09</td>
</tr>
</tbody>
</table>

Notes: *p < .05, **p < 0.01. Values are unstandardized beta coefficients.

Table 5: Three-way moderating effect of emotional exhaustion, prosocial motives, and contact with beneficiaries in full sample.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intentions to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>0.78</td>
<td>-1.68</td>
<td>-0.12</td>
</tr>
<tr>
<td>Prosocial Motives</td>
<td>0.63</td>
<td>-0.35</td>
<td>0.36</td>
</tr>
<tr>
<td>Contact with beneficiaries</td>
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<td>-1.70</td>
<td>0.52</td>
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<td>Emotional Exhaustion X</td>
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<td></td>
<td></td>
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<tr>
<td>Prosocial Motives X</td>
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<td>0.45</td>
<td>0.02</td>
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<tr>
<td>Contact with beneficiaries</td>
<td>-0.27</td>
<td>0.88</td>
<td>-0.13</td>
</tr>
<tr>
<td>Prosocial motives X</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Contact with beneficiaries</td>
<td>-0.16</td>
<td>0.34</td>
<td>-0.15</td>
</tr>
<tr>
<td>Emotional exhaustion X</td>
<td></td>
<td></td>
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<tr>
<td>Prosocial motives X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact with beneficiaries</td>
<td>0.07</td>
<td>-0.20</td>
<td>0.04</td>
</tr>
</tbody>
</table>

Notes: *p < .05, **p < 0.01. Values are unstandardized beta coefficients.
Withdrawal

Hypothesis 1a predicted that emotionally exhausted workers are more likely to withdraw from the organization. The regression results shown in Table 6 provided support for Hypothesis 1a in that emotional exhaustion at Time 1 significantly and positively predicted workers’ behavioral withdrawal at Time 2 ($B = 0.23, p = .01$, lower CI = 0.05, upper CI = 0.40) and intentions to turnover at Time 2 ($B = 0.42, p = .01$, lower CI = .09, upper CI = 0.76). The results indicated that emotionally exhausted workers are more likely to report greater behavioral withdrawal and intentions to turnover even after a few months later.

Table 6: Emotional exhaustion as predictor of withdrawal and health.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intentions to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
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<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>EE</td>
<td>0.23**</td>
<td>0.42**</td>
<td>0.15*</td>
</tr>
</tbody>
</table>

Notes: * $p < .05$, ** $p < 0.01$. Values are unstandardized beta coefficients.

Hypothesis 2a proposed a moderating effect of prosocial motives on the relationship between emotional exhaustion and withdrawal such that among more prosocially motivated workers, emotional exhaustion will have a weaker positive effect on their withdrawal intentions but a stronger positive effect on less prosocially motivated workers. Two separate samples derived by splitting the original sample into units greater or lesser than the mean of prosocial motives ($\bar{X} = 4.29$) were obtained. Then, the two dependent variables representing withdrawal were regressed separately onto emotional exhaustion on each of these two samples.

In the split samples, significant moderating effects emerged. Among workers who were less prosocially motivated, emotional exhaustion had a significant and positive effect on behavioral withdrawal at Time 2 ($B = 0.26, p < .05$, lower CI = 0.03, upper CI = 0.49) and
intentions to turnover at Time 2 ($B = 0.50, p = .01$, lower CI = 0.14, upper CI = 0.85; see Table 7). This effect was not significant among workers who were more prosocially motivated ($B = 0.18, p > .05$, lower CI = -0.11, upper CI = 0.46 for behavioral withdrawal Time 2; $B = 0.30, p > .05$, lower CI = -0.38, upper CI = 0.97 for intentions to turnover Time 2; see Table 8). Simple regression lines of these effects for units greater or less than mean of prosocial motives were plotted to further examine the interaction effect. Figures 2 and 3 provide evidence to support these significant effects. The deleterious effects of emotional exhaustion on workers’ withdrawal were present only among those with less prosocial motives, and were significant even after a time lapse of two to three months. On the other hand, among workers with more prosocial motives, emotional exhaustion did not have a significant effect on their behavioral withdrawal and intentions to turnover at Time 2. The results provided support for Hypothesis 2a.

Table 7: Emotional exhaustion predicting withdrawal and health in sample of units less than the mean of prosocial motives.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intentions to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>-0.04</td>
<td>0.16</td>
<td>-0.05</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>0.26*</td>
<td>0.50**</td>
<td>0.08</td>
</tr>
</tbody>
</table>

*Notes: * $p < .05$, ** $p < 0.01$. Values are unstandardized beta coefficients.

Table 8: Emotional exhaustion predicting withdrawal and health in sample of units greater than the mean of prosocial motives.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intentions to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>0.06</td>
<td>-0.19</td>
<td>0.08</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>0.18</td>
<td>0.30</td>
<td>0.27**</td>
</tr>
</tbody>
</table>

*Notes: * $p < .05$, ** $p < 0.01$. Values are unstandardized beta coefficients.
Figure 2: The moderating effect of prosocial motives on the relationship between emotional exhaustion and behavioral withdrawal time 2 using split sample analysis.

Figure 3: The moderating effect of prosocial motives on the relationship between emotional exhaustion and intentions to turnover time 2 using split sample analysis.
Hypothesis 3a predicted that contact with beneficiaries will weaken the effect of emotional exhaustion on withdrawal among more prosocially motivated workers, while contact with beneficiaries will not have a significant effect on less prosocially motivated workers. This three-way longitudinal interaction effect of emotional exhaustion, prosocial motives, and contact with beneficiaries on withdrawal at Time 2 was tested on split samples greater or lesser than the mean of contact with beneficiaries (\(\bar{x} = 4.27\)). A significant moderating effect of prosocial motive and emotional exhaustion on intentions to turnover at Time 2 emerged among workers who experienced frequent contact with beneficiaries (\(B = -0.72, p = .05, \text{lower CI} = -1.44, \text{upper CI} = -0.01\)). On the other hand, this interaction effect was not significant when workers had less contact with beneficiaries (\(B = 0.20, p > .05, \text{lower CI} = -0.36, \text{upper CI} = 0.76\); see Tables 9 and 10).

Table 9: Moderating effect of emotional exhaustion and prosocial motives in sample of units less than the mean of contact with beneficiaries.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intention to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>0.36*</td>
<td>0.25</td>
<td>-0.01</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>0.03</td>
<td>-0.47</td>
<td>-0.12</td>
</tr>
<tr>
<td>Prosocial Motives</td>
<td>0.01</td>
<td>-0.38</td>
<td>0.07</td>
</tr>
<tr>
<td>Emotional Exhaustion X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prosocial Motives</td>
<td>0.03</td>
<td>0.20</td>
<td>0.06</td>
</tr>
</tbody>
</table>

Notes: * \(p < .05\), ** \(p < 0.01\). Values are unstandardized beta coefficients.
The significant effect was examined further by plotting the interaction on a graph using 1 SD above and below the mean of prosocial motives (Aiken & West, 1991). Looking at Figure 4, we see that emotional exhaustion had a significant positive effect on intentions to turnover at Time 2 among less prosocially-motivated workers while this relationship was slightly negative for more prosocially motivated workers. Simple slope analysis confirmed this pattern of relationships; the slope for the emotional exhaustion-intentions to turnover relationship among less prosocially motivated workers was significant and positive ($B = 3.71, p < .05$). On the other hand, the slope was only marginally significant and negative among more prosocially motivated workers ($B = -3.17, p < .10$). Contact with beneficiaries buffered the negative effect of emotional exhaustion among prosocially motivated workers such that they had lower turnover intentions even when emotionally exhausted. Hypotheses 3a predicted a null effect of contact with beneficiaries among less prosocially motivated workers but findings show that for these workers, frequent contact with beneficiaries enhanced a significant positive relationship between emotional

Table 10: Moderating effect of emotional exhaustion and prosocial motives in sample of units greater than the mean of contact with beneficiaries.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Withdrawal Time 2</th>
<th>Intention to turnover Time 2</th>
<th>Health Time 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept</td>
<td>-0.30*</td>
<td>-0.33</td>
<td>0.03</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>-0.37</td>
<td>3.47*</td>
<td>-0.83</td>
</tr>
<tr>
<td>Prosocial Motives</td>
<td>-0.14</td>
<td>1.67</td>
<td>-0.41</td>
</tr>
<tr>
<td>Emotional Exhaustion X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prosocial Motives</td>
<td>0.14</td>
<td>-0.72*</td>
<td>0.24</td>
</tr>
</tbody>
</table>

Notes: * $p < .05$, ** $p < 0.01$. Values are unstandardized beta coefficients.
exhaustion and intentions to turnover at Time 2. Hence, results provided partial support for Hypotheses 3a-3c.

Figure 4: The moderating effect of prosocial motives on the relationship between emotional exhaustion and intentions to turnover Time 2 in sample with units greater or less than the mean of contact with beneficiaries.
Psychosomatic Health Symptoms

Hypothesis 1b predicted that emotional exhaustion will have a significant negative relationship with psychosomatic health of humanitarian and development workers. As shown in Table 6, regression analysis of emotional exhaustion on health symptoms confirmed this relationship. Emotional exhaustion was a significant and positive predictor of psychosomatic symptoms at Time 2 ($B = 0.15$, $p < .05$, lower CI = 0.02, upper CI = 0.28; see Table 6). The results indicated that emotionally exhausted workers are more likely to experience poorer health even after a few months later. These results provided support for Hypothesis 1b.

Hypothesis 2b predicted that among more prosocially motivated workers, emotional exhaustion will have a stronger aversive impact on their health while not so much on less prosocially motivated workers. Just like in the earlier analysis on withdrawal, Hypotheses 2b was tested on the split samples of units greater or lesser than the mean of prosocial motives ($\bar{X} = 4.29$). A significant moderating effect emerged. The relationship between emotional exhaustion and psychosomatic health was significant and positive only among those with more prosocial motives ($B = 0.27$, $p = .01$, lower CI = 0.08, upper CI = 0.46) but not for those who were less prosocially motivated (see Tables 7 and 8). Simple regression lines for units greater or lesser than the mean of prosocial motives were plotted for these effects. Figure 5 confirms the interpretation of this effect in that workers who were more prosocially motivated experienced greater health symptoms when emotionally exhausted compared to less prosocial workers. In sum, emotional exhaustion did not significantly impact the behavioral withdrawal and intentions to turnover of prosocially motivated workers, but had a significant aversive effect on their psychosomatic health even after a significant time delay. The results provided support for Hypothesis 2b.
For Hypotheses 3b, the three-way longitudinal interaction effect of emotional exhaustion, prosocial motives, and contact with beneficiaries on psychosomatic health symptoms was not significant in the split samples (see Tables 9 and 10). Hence, the results did not support Hypothesis 4b.

**Mediated Moderation Analysis**

The steps for first-stage mediated moderation suggested by Edwards and Lambert (2007) were used to test Hypotheses 4a and 4b and Hypotheses 5a and 5b. Hypothesis 4a and 4b predicted that the moderating effect of prosocial motives on the relationship between emotional exhaustion and withdrawal and health, respectively, occurred indirectly through worker engagement. Following Edwards and Lambert (2007), coefficient estimates for the following two equations predicting withdrawal or health at time 2 (Equation 1) and worker engagement at time

![Figure 5: The moderating effect of prosocial motives on the relationship between emotional exhaustion and psychosomatic health symptoms time 2 using split sample analysis.](image)
were first obtained through regression analysis (see Tables 11, 12, and 13).

Simple effects are then computed based on Equation 3 (see Tables 14, 15, and 16).

\[
Y = b_0 + b_x X + b_{m}M + e_y \quad \text{[Equation 1]}
\]

\[
M = a_0 + a_x X + a_{x2}Z + a_{xZ}XZ + e_m \quad \text{[Equation 2]}
\]

\[
Y = b_0 + (a_0 + a_{x}Z)b_{m} + [b_{x} + (a_{x} + a_{xZ}Z)b_{a}b_{m}]X + b_{m}e_{m} + e_y \quad \text{[Equation 3]}
\]

Test of the significance of first stage moderating effect between prosocial motives and emotional exhaustion on worker engagement is based on the coefficient estimate, \(a_{xz}\). From Tables 11, 12, and 13, we can see that this effect was significant. To facilitate the interpretation of this interaction, the effect was graphed at 1 SD above and below the mean of prosocial motives (see Figure 6; Aiken & West, 1991). Emotional exhaustion was significant and negatively associated with worker engagement at Time 1 among more prosocially motivated workers, but slightly positively associated with worker engagement among less prosocially motivated workers.

Simple slopes test provided further support for this pattern of interaction. The slope for the relationship between emotional exhaustion and worker engagement was significant and negative for prosocially motivated workers \((B = -1.42, p < .05)\), while for less prosocially motivated workers, the slope was only marginally significant in the positive direction \((B = 1.01, p < .10)\).
Table 11: Regression coefficient estimates for model predicting behavioral withdrawal time 2.

<table>
<thead>
<tr>
<th></th>
<th>Model 1: Withdrawal T2</th>
<th>Model 2: Worker Engagement T1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept, $b_0$</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Emotional exhaustion, $b_1$</td>
<td>0.20*</td>
<td>--</td>
</tr>
<tr>
<td>Worker engagement, $b_2$</td>
<td>-0.14^</td>
<td>--</td>
</tr>
<tr>
<td>Intercept, $a_0$</td>
<td>--</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional exhaustion, $a_1$</td>
<td>--</td>
<td>1.07^</td>
</tr>
<tr>
<td>Prosocial motives, $a_2$</td>
<td>--</td>
<td>0.96**</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives, $a_3$</td>
<td>--</td>
<td>-0.30*</td>
</tr>
</tbody>
</table>

Notes: $N = 63$ for Model 1. $N = 80$ for Model 2. Entries along the rows labeled $b_0$, $b_1$, and $b_2$ are unstandardized coefficient estimates from Equation 1, using behavioral withdrawal as the dependent variable. Entries along the rows labeled $a_0$, $a_1$, $a_2$, and $a_3$ are unstandardized coefficient estimates from Equation 2, using worker engagement as the dependent variable. Withdrawal T2 indicates longitudinal regression of behavioral withdrawal at time 2.

^$p < 0.10$, $^* p < 0.05$, $^{**} p < 0.01$
Table 12: Regression coefficient estimates for model predicting intentions to turnover time 2.

<table>
<thead>
<tr>
<th></th>
<th>Model 1: Intentions to Turnover T2</th>
<th>Model 2: Worker Engagement T1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept, b₀</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Emotional exhaustion, b₁</td>
<td>0.42*</td>
<td>--</td>
</tr>
<tr>
<td>Worker engagement, b₂</td>
<td>-0.03</td>
<td>--</td>
</tr>
<tr>
<td>Intercept, a₀</td>
<td>--</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional exhaustion, a₁</td>
<td>--</td>
<td>1.07^</td>
</tr>
<tr>
<td>Prosocial motives, a₂</td>
<td>--</td>
<td>0.96**</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives, a₃</td>
<td>--</td>
<td>-0.30*</td>
</tr>
</tbody>
</table>

Notes: N = 61 for Model 1, N = 79 for Model 2. Entries along the rows labeled b₀, b₁, and b₂ are unstandardized coefficient estimates from Equation 1, using intentions to turnover as the dependent variable. Entries along the rows labeled a₀, a₁, a₂, and a₃ are unstandardized coefficient estimates from Equation 2, using worker engagement as the dependent variable. Intentions to turnover T2 indicates longitudinal regression of turnover at time 2.

^ p < 0.10, * p < 0.05, ** p < 0.01
Table 13: Regression coefficient estimates for model predicting psychosomatic health time 2.

<table>
<thead>
<tr>
<th></th>
<th>Model 1:</th>
<th>Model 2:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Health T2</td>
<td>Worker Engagement T1</td>
</tr>
<tr>
<td>Intercept, $b_0$</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Emotional exhaustion, $b_1$</td>
<td>0.15*</td>
<td>--</td>
</tr>
<tr>
<td>Worker engagement, $b_2$</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Intercept, $a_0$</td>
<td>--</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional exhaustion, $a_1$</td>
<td>--</td>
<td>1.07^</td>
</tr>
<tr>
<td>Prosocial motives, $a_2$</td>
<td>--</td>
<td>0.96**</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives, $a_3$</td>
<td>--</td>
<td>-0.30*</td>
</tr>
</tbody>
</table>

Notes: $N = 61$ for Model 1. $N = 80$ for Model 2. Entries along the rows labeled $b_0$, $b_1$, and $b_2$ are unstandardized coefficient estimates from Equation 1, using psychosomatic health as the dependent variable. Entries along the rows labeled $a_0$, $a_1$, $a_2$, and $a_3$ are unstandardized coefficient estimates from Equation 2, using worker engagement as the dependent variable. Health T2 indicates longitudinal regression of psychosomatic health at time 2.

^$p < 0.10$, * $p < 0.05$, ** $p < 0.01$
To test the significance of the indirect mediation effect of the interaction through worker engagement, bootstrapping analysis was conducted using earlier regression values as starting points. This was done to obtain 1,000 bootstrap samples of coefficient estimates (Edwards & Lambert, 2007). From these bootstrap samples, bias-corrected confidence intervals for indirect effects were obtained (Stine, 1989). Indirect effects are significant when their confidence intervals excluded zero. From Tables 14, 15, and 16, none of the indirect effects reached significance. Based on these results, Hypothesis 4a and 4b were not supported. Taking into consideration the earlier results on the significant first stage moderating effect of prosocial motives on the relationship between emotional exhaustion and worker engagement, with the null indirect mediation effects of worker engagement, results suggest that although engagement played a role in prosocially motivated workers’ resource loss pathway, results did not provide support for the effect of engagement on withdrawal and health at a later point in time.

Figure 6: The first stage moderating effect of prosocial motives on the relationship between emotional exhaustion and worker engagement.
Table 14: Simple effects for model predicting behavioral withdrawal at time.

<table>
<thead>
<tr>
<th>Other-oriented motives</th>
<th>First Stage</th>
<th>Direct Effect</th>
<th>Indirect Effect</th>
<th>Total Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>-0.01</td>
<td>0.18*</td>
<td>-0.24</td>
<td>-0.06</td>
</tr>
<tr>
<td>High</td>
<td>-0.41*</td>
<td>0.18*</td>
<td>-0.18</td>
<td>0.00</td>
</tr>
<tr>
<td>Difference</td>
<td>0.41</td>
<td>0.00</td>
<td>-0.05</td>
<td>-0.05</td>
</tr>
</tbody>
</table>

Notes: N = 63. For rows with values, table entries are simple effects computed from Equation 3 using coefficient estimates from Table 11a. Zs = -0.7043 and 0.7043 for low and high prosocial motives respectively (i.e. one standard deviation below and above the mean of the centered prosocial motives variable). Differences between effects were obtained by subtracting the effects of high prosocial motives from low prosocial motives. Tests of differences of first stage effects are equivalent to tests of $a_{xz}$. Test of differences for indirect and total effects are based on bias-corrected confidence intervals derived from bootstrap estimates.

^ p < 0.10, * p < 0.05, ** p < 0.01
Table 15: Simple effects for model predicting intentions to turnover time 2.

<table>
<thead>
<tr>
<th>Other-oriented motives</th>
<th>First Stage</th>
<th>Direct Effect</th>
<th>Indirect Effect</th>
<th>Total Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>-0.01</td>
<td>0.40*</td>
<td>-0.21</td>
<td>0.19</td>
</tr>
<tr>
<td>High</td>
<td>-0.41*</td>
<td>0.40*</td>
<td>-0.21</td>
<td>0.19</td>
</tr>
<tr>
<td>Difference</td>
<td>0.41</td>
<td>0.00</td>
<td>0.01</td>
<td>0.01</td>
</tr>
</tbody>
</table>

Notes: N = 61. For rows with values, table entries are simple effects computed from Equation 3 using coefficient estimates from Table 12a. Zs = -0.7043 and 0.7043 for low and high prosocial motives respectively (i.e. one standard deviation below and above the mean of the centered prosocial motives variable). Differences between effects were obtained by subtracting the effects of high prosocial motives from low prosocial motives. Tests of differences of first stage effects are equivalent to tests of $a_{xz}$. Test of differences for indirect and total effects are based on bias-corrected confidence intervals derived from bootstrap estimates.

*p < 0.10, *p < 0.05, **p < 0.01
Hypotheses 5a and 5b predicted that the three-way interaction effect of emotional exhaustion, prosocial motives, and contact with beneficiaries on withdrawal and health is mediated by worker engagement. These indirect effects were tested following similar steps suggested by Edwards and Lambert (2007). Coefficient estimates of Equation 1 and Equation 4 were obtained from regression analysis (see Tables 17, 18, and 19). These estimates were then used to compute simple effects following Equation 5 as shown in Tables 20, 21, and 22.

\[M = a_0 + a_X + a_Z + a_W + a_{XZ}X + a_{ZW}Z + a_{XW}W + a_{XZW}XZW + e_m \quad [\text{Equation 4}]
\]

\[Y = [b_0 + (a_0 + a_W)b_m + (a_z + a_{ZW})b_mZ] + (b_X + a_{bm} + a_{Zb}b_mZ) + a_{XW}b_mW + a_{XZW}b_mZW)X + b_\gamma e \quad [\text{Equation 5}]
\]

Table 16: Simple effects for model predicting psychosomatic health time 2.

<table>
<thead>
<tr>
<th>Other-oriented motives</th>
<th>First Stage</th>
<th>Direct Effect</th>
<th>Indirect Effect</th>
<th>Total Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>-0.01</td>
<td>0.15*</td>
<td>-0.21</td>
<td>-0.06</td>
</tr>
<tr>
<td>High</td>
<td>-0.41*</td>
<td>0.15*</td>
<td>-0.21</td>
<td>-0.06</td>
</tr>
<tr>
<td>Difference</td>
<td>0.41</td>
<td>0.00</td>
<td>0.01</td>
<td>0.01</td>
</tr>
</tbody>
</table>

Notes: N = 61. For rows with values, table entries are simple effects computed from Equation 3 using coefficient estimates from Table 13a. Zs = -0.7043 and 0.7043 for low and high prosocial motives respectively (i.e. one standard deviation below and above the mean of the centered prosocial motives variable). Differences between effects were obtained by subtracting the effects of high prosocial motives from low prosocial motives. Tests of differences of first stage effects are equivalent to tests of \(a_{XZ}\). Test of differences for indirect and total effects are based on bias-corrected confidence intervals derived from bootstrap estimates.

\(^{*}p < 0.10, \quad ^{*}p < 0.05, \quad ^{**}p < 0.01\)
Test of the first stage moderating effect of prosocial motives and contact with beneficiaries on the relationship between emotional exhaustion and worker engagement was based on the significance of the coefficient estimate, $a_{zw}$. From Tables 17, 18, and 19, this interaction effect was not significant. Moreover, bias-corrected confidence intervals obtained from bootstrapping analysis showed little support for the indirect effect of worker engagement (see Tables 20, 21, and 22). Although total effects of the three-way interaction effect on behavioral withdrawal, intentions to turnover, and psychosomatic health were significant, they were primarily driven by the significant direct effect of emotional exhaustion on these constructs. All in all, these results do not support Hypothesis 5a and 5b.
Table 17: Regression coefficient estimates for 3-way model predicting behavioral withdrawal at time 2.

<table>
<thead>
<tr>
<th></th>
<th>Model 1: Withdrawal T2</th>
<th>Model 2: Worker Engagement T1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept, b₀</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Emotional exhaustion, b₁</td>
<td>0.20*</td>
<td>--</td>
</tr>
<tr>
<td>Worker engagement, b₂</td>
<td>-0.14^</td>
<td>--</td>
</tr>
<tr>
<td>Intercept, a₀</td>
<td>--</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional exhaustion, a₁</td>
<td>--</td>
<td>-1.27</td>
</tr>
<tr>
<td>Prosocial motives, a₂</td>
<td>--</td>
<td>1.11*</td>
</tr>
<tr>
<td>Contact with beneficiaries, a₃</td>
<td></td>
<td>0.34</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives, a₃</td>
<td>--</td>
<td>0.23</td>
</tr>
<tr>
<td>Emotional exhaustion X Contact with beneficiaries, a₄</td>
<td>--</td>
<td>0.49</td>
</tr>
<tr>
<td>Prosocial motives X Contact with beneficiaries, a₅</td>
<td>--</td>
<td>-0.06</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives X Contact with beneficiaries, a₆</td>
<td>--</td>
<td>-0.11</td>
</tr>
</tbody>
</table>

Notes: N = 63 for Model 1, N = 81 for Model 2. Entries along the rows labeled b₀, b₁, and b₂ are unstandardized coefficient estimates from Equation 1, using behavioral withdrawal as the dependent variable. Entries along the rows labeled a₀, a₁, a₂, a₃, a₄, a₅, and a₆ are unstandardized coefficient estimates from Equation 4, using worker engagement as the dependent variable. Withdrawal T2 indicates longitudinal regression of behavioral withdrawal at time 2.

^p < 0.10, *p < 0.05, **p < 0.01
Table 18: Regression coefficient estimates for 3-way model predicting intentions to turnover at time 2.

<table>
<thead>
<tr>
<th></th>
<th>Model 1:</th>
<th>Model 2:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Intentions to Turnover T2</td>
<td>Worker Engagement T1</td>
</tr>
<tr>
<td>Intercept, b₀</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Emotional exhaustion, b₁</td>
<td>0.42*</td>
<td>--</td>
</tr>
<tr>
<td>Worker engagement, b₂</td>
<td>-0.03</td>
<td>--</td>
</tr>
<tr>
<td>Intercept, a₀</td>
<td>--</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional exhaustion, a₁</td>
<td>--</td>
<td>-1.27</td>
</tr>
<tr>
<td>Prosocial motives, a₂</td>
<td>--</td>
<td>1.11*</td>
</tr>
<tr>
<td>Contact with beneficiaries, a₃</td>
<td></td>
<td>0.34</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives, a₃</td>
<td>--</td>
<td>0.23</td>
</tr>
<tr>
<td>Emotional exhaustion X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact with beneficiaries, a₄</td>
<td>--</td>
<td>0.49</td>
</tr>
<tr>
<td>Prosocial motives X Contact with beneficiaries, a₅</td>
<td>--</td>
<td>-0.06</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact with beneficiaries, a₆</td>
<td>--</td>
<td>-0.11</td>
</tr>
</tbody>
</table>

Notes: N = 61 for Model 1. N = 81 for Model 2. Entries along the rows labeled b₀, b₁, and b₂ are unstandardized coefficient estimates from Equation 1, using intentions to turnover as the dependent variable. Entries along the rows labeled a₀, a₁, a₂, a₃, a₄, a₅, and a₆ are unstandardized coefficient estimates from Equation 4, using worker engagement as the dependent variable. Intentions to turnover T2 indicates longitudinal regression of intentions to turnover at time 2.

* p < 0.10, * p < 0.05, ** p < 0.01
Table 19: Regression coefficient estimates for 3-way model predicting psychosomatic health at time 2.

<table>
<thead>
<tr>
<th></th>
<th>Model 1: Health T2</th>
<th>Model 2: Worker Engagement T1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intercept, ( b_0 )</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Emotional exhaustion, ( b_1 )</td>
<td>0.15*</td>
<td>--</td>
</tr>
<tr>
<td>Worker engagement, ( b_2 )</td>
<td>0.00</td>
<td>--</td>
</tr>
<tr>
<td>Intercept, ( a_0 )</td>
<td>--</td>
<td>0.00</td>
</tr>
<tr>
<td>Emotional exhaustion, ( a_1 )</td>
<td>--</td>
<td>-1.27</td>
</tr>
<tr>
<td>Prosocial motives, ( a_2 )</td>
<td>--</td>
<td>1.11*</td>
</tr>
<tr>
<td>Contact with beneficiaries, ( a_3 )</td>
<td>0.34</td>
<td></td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives, ( a_3 )</td>
<td>--</td>
<td>0.23</td>
</tr>
<tr>
<td>Emotional exhaustion X Contact with beneficiaries, ( a_4 )</td>
<td>--</td>
<td>0.49</td>
</tr>
<tr>
<td>Prosocial motives X Contact with beneficiaries, ( a_5 )</td>
<td>--</td>
<td>-0.06</td>
</tr>
<tr>
<td>Emotional exhaustion X Prosocial motives X Contact with beneficiaries, ( a_6 )</td>
<td>--</td>
<td>-0.11</td>
</tr>
</tbody>
</table>

Notes: \( N = 61 \) for Model 1, \( N = 81 \) for Model 2. Entries along the rows labeled \( b_0, b_1, \) and \( b_2 \) are unstandardized coefficient estimates from Equation 1, using psychosomatic health as the dependent variable. Entries along the rows labeled \( a_0, a_1, a_2, a_3, a_4, a_5, \) and \( a_6 \) are unstandardized coefficient estimates from Equation 4, using worker engagement as the dependent variable. Health T2 indicates longitudinal regression of psychosomatic health at time 2.

\(^* p < 0.10, \* p < 0.05, \** p < 0.01\)
Table 20: Simple effects for 3-way model predicting behavioral withdrawal at time 2.

<table>
<thead>
<tr>
<th></th>
<th>First Stage</th>
<th>Direct Effect</th>
<th>Indirect Effect</th>
<th>Total Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Low contact with beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td></td>
<td>-0.1637</td>
<td>0.2047*</td>
<td>0.2013*</td>
</tr>
<tr>
<td>High</td>
<td></td>
<td>-0.2550</td>
<td>0.2047*</td>
<td>0.2131*</td>
</tr>
<tr>
<td>Difference</td>
<td></td>
<td>-0.0913</td>
<td>0.0000</td>
<td>0.0119</td>
</tr>
<tr>
<td><strong>High contact with beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td></td>
<td>0.0654</td>
<td>0.2047*</td>
<td>0.1715^</td>
</tr>
<tr>
<td>High</td>
<td></td>
<td>-0.4068</td>
<td>0.2047*</td>
<td>0.2329*</td>
</tr>
<tr>
<td>Difference</td>
<td></td>
<td>-0.4721</td>
<td>0.0000</td>
<td>0.0614</td>
</tr>
</tbody>
</table>

Notes: N = 63. For rows with values, table entries are simple effects computed from Equation 5 using coefficient estimates from Table 14a. Zs = -0.7043 and 0.7043 for low and high prosocial motives respectively (i.e. one standard deviation below and above the mean of the centered other-oriented motives variable. Ws = -1.931 and 1.931 for low and high contact with beneficiaries respectively (i.e. one standard deviation below and above the mean of the centered variable). Differences between effects were obtained by subtracting the effects of high prosocial motives from low prosocial motives under conditions of low and high contact with beneficiaries. Tests of differences of first stage effects are equivalent to tests of $a_{new}$. Test of differences for indirect and total effects are based on bias-corrected confidence intervals derived from bootstrap estimates.

^$p < 0.10$, *$p < 0.05$, **$p < 0.01$
Table 21: Simple effects for 3-way model predicting intentions to turnover at time 2.

<table>
<thead>
<tr>
<th></th>
<th>First Stage</th>
<th>Direct Effect</th>
<th>Indirect Effect</th>
<th>Total Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Low contact with beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other-oriented motives</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>-0.1637</td>
<td>0.3962*</td>
<td>0.0005</td>
<td>0.3967*</td>
</tr>
<tr>
<td>High</td>
<td>-0.2550</td>
<td>0.3962*</td>
<td>-0.0013</td>
<td>0.3949*</td>
</tr>
<tr>
<td>Difference</td>
<td>-0.0913</td>
<td>0.0000</td>
<td>-0.0018</td>
<td>-0.0018</td>
</tr>
<tr>
<td><strong>High contact with beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other-oriented motives</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>0.0654</td>
<td>0.3962*</td>
<td>0.0051</td>
<td>0.4013*</td>
</tr>
<tr>
<td>High</td>
<td>-0.4068</td>
<td>0.3962*</td>
<td>-0.0043</td>
<td>0.3919*</td>
</tr>
<tr>
<td>Difference</td>
<td>-0.4721</td>
<td>0.0000</td>
<td>-0.0094</td>
<td>-0.0094</td>
</tr>
</tbody>
</table>

Notes: N = 61. For rows with values, table entries are simple effects computed from Equation 5 using coefficient estimates from Table 15a. Zs = -0.7043 and 0.7043 for low and high prosocial motives respectively (i.e. one standard deviation below and above the mean of the centered other-oriented motives variable. Ws = -1.931 and 1.931 for low and high contact with beneficiaries respectively (i.e. one standard deviation below and above the mean of the centered variable). Differences between effects were obtained by subtracting the effects of high prosocial motives from low prosocial motives under conditions of low and high contact with beneficiaries. Tests of differences of first stage effects are equivalent to tests of a_{csw}. Test of differences for indirect and total effects are based on bias-corrected confidence intervals derived from bootstrap estimates.

^p < 0.10, * p < 0.05, ** p < 0.01
Table 22: Simple effects for 3-way model predicting psychosomatic health at time 2.

<table>
<thead>
<tr>
<th></th>
<th>First Stage</th>
<th>Direct Effect</th>
<th>Indirect Effect</th>
<th>Total Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Low contact with beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other-oriented motives</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>-0.1637</td>
<td>0.1462*</td>
<td>0.0005</td>
<td>0.1467*</td>
</tr>
<tr>
<td>High</td>
<td>-0.2550</td>
<td>0.1462*</td>
<td>-0.0013</td>
<td>0.1449*</td>
</tr>
<tr>
<td>Difference</td>
<td>-0.0913</td>
<td>0.0000</td>
<td>-0.0018</td>
<td>-0.0018</td>
</tr>
<tr>
<td><strong>High contact with beneficiaries</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other-oriented motives</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>0.0654</td>
<td>0.1462*</td>
<td>0.0051</td>
<td>0.1513*</td>
</tr>
<tr>
<td>High</td>
<td>-0.4068</td>
<td>0.1462*</td>
<td>-0.0043</td>
<td>0.1419*</td>
</tr>
<tr>
<td>Difference</td>
<td>-0.4721</td>
<td>0.0000</td>
<td>-0.0094</td>
<td>-0.0094</td>
</tr>
</tbody>
</table>

*Note. N = 61. For rows with values, table entries are simple effects computed from Equation 5 using coefficient estimates from Table 16a. Zs = -0.7043 and 0.7043 for low and high prosocial motives respectively (i.e. one standard deviation below and above the mean of the centered other-oriented motives variable. Ws = -1.931 and 1.931 for low and high contact with beneficiaries respectively (i.e. one standard deviation below and above the mean of the centered variable). Differences between effects were obtained by subtracting the effects of high prosocial motives from low prosocial motives under conditions of low and high contact with beneficiaries. Tests of differences of first stage effects are equivalent to tests of $a_{xzW}$. Test of differences for indirect and total effects are based on bias-corrected confidence intervals derived from bootstrap estimates.

* $p < 0.10$,  ** $p < 0.01$
Posthoc Analysis

Results provided support for the buffering effect of contact with beneficiaries in mitigating turnover intentions among emotionally exhausted prosocial workers. In COR terms (Hobfoll, 1989), contact with beneficiaries served as a form of resource for these workers to prevent further resource losses, hence, minimizing the need to withdraw to protect their resources. Drawing from the same model, I wanted to investigate if contact’s buffering effect among prosocially motivated workers will also hold for their emotional exhaustion. Past research has found contact with beneficiaries acted to enhance workers’ performance and persistence in effort (Grant et al., 2007). Examining whether contact also has a direct effect on worker’s emotional exhaustion can add to the growing literature on the impact of social characteristics of jobs (Humphrey et al., 2007). From Table 3, you can see that contact with beneficiaries was significant and negatively correlated to emotional exhaustion at Time 2 ($r = -0.41, p < .01$). This means that having greater contact with beneficiaries led to lower emotional exhaustion.

Next, I proceeded to test the moderating effect of prosocial motives and contact with beneficiaries on emotional exhaustion of workers at Time 2. Regression analysis on the full sample showed a marginal moderating effect ($B = -0.16, p = .10$, lower CI = -0.34, upper CI = 0.03). Split sample regression analysis revealed a significant negative effect of contact with beneficiaries on emotional exhaustion at Time 2 among more prosocially motivated workers ($B = -0.39, p < .01$, lower CI = -0.60, upper CI = -0.18). On the contrary, this effect was not significant among less prosocially motivated workers ($B = -0.17, p > .05$, lower CI = -0.39, upper CI = 0.06; see Figure 7).
The study’s hypotheses predicted contact with beneficiaries’ unique moderating role on the impact of prosocial motives. However, I was curious to explore whether contact with beneficiaries could alternatively serve as a more direct resource to mitigate emotional exhaustion’s effects on workers’ withdrawal and health, regardless of the prosocial nature of workers’ motivation. I proceeded to test the moderating effect of contact with beneficiaries on the emotional exhaustion-withdrawal and emotional exhaustion-health relationships. None of the tests produced significant moderating effects. The pattern of results above confirms the unique moderating role of contact with beneficiaries on the impact of prosocial motives on workers’ wellbeing, hence strengthening the validity of the study’s findings.

The COR model predicts that individuals who continue to use their resources to cope with stressors become more vulnerable to further resource losses, triggering a resource loss spiral (Hobfoll, 2001). Worker engagement was hypothesized as an indirect indicator of the resource loss pathway in this study, where greater emotional exhaustion leads to lower or higher engagement depending on one’s prosocial motives, and subsequent withdrawal and health

Figure 7: The moderating effect of prosocial motives on the relationship between contact with beneficiaries and emotional exhaustion at time 2.
outcomes. Bootstrapping analysis of the mediated moderating effects did not provide support for worker engagement’s indirect effects on the resource loss pathway. However, notwithstanding the mediating role of worker engagement, workers’ loss spiral could still proceed from emotional exhaustion to withdrawal or health, to greater emotional fatigue at a later time (Hobfoll, 2001). Furthermore, this pattern of loss spiral could manifest differently depending on workers’ prosocial motives. An alternative way of investigating the presence of this loss spiral is to examine the reverse relationships between withdrawal, health and emotional exhaustion among more or less prosocially motivated workers.

First, emotional exhaustion at Time 2 was regressed onto withdrawal and health at Time 1. Results showed that behavioral withdrawal ($B = 0.46, p < .05$, lower CI = 0.07, upper CI = 0.86) and psychosomatic health ($B = 0.76, p < .01$, lower CI = 0.24, upper CI = 1.27) at Time 1 were significant predictors of emotional exhaustion at Time 2. Workers’ who coped by withdrawing behaviorally and that exhibited poor health may already possess fewer resources available to navigate existing job demands, leading to further emotional exhaustion (Hobfoll, 1989). The relationship between intentions to turnover at Time 1 and emotional exhaustion Time 2 was marginally significant ($B = 0.18, p < .10$, lower CI = -0.01, upper CI = 0.37). The results suggest the interchangeable nature of stressor and strain, where initial emotional exhaustion can lead to withdrawal and health at a later time, which then acts as a stressor to intensify individuals’ emotional fatigue (Hobfoll, 2001).

Second, prosocial motives was tested as a moderator of this reverse pattern of resource loss pathway. None of the moderating effects were significant in the full sample. Findings from split samples of units greater or lesser than the mean of prosocial motives ($\bar{x} = 4.29$) provided support for the moderating role of prosocial motives such that among less prosocially motivated workers, the positive relationship between behavioral withdrawal at Time 1 and emotional exhaustion at Time 2 was significant ($B = 0.59, p < .02$, lower CI = 0.10, upper CI = 1.07). This
relationship was not significant among more prosocially motivated workers ($B = 0.27, p > .05$, lower CI = -0.45, upper CI = 1.00).

There was also a significant relationship between psychosomatic health at Time 1 and emotional exhaustion at Time 2 for both more and less prosocially motivated workers ($B = 0.81, p = .05$, lower CI = -0.01, upper CI = 1.64 for more prosocially motivated workers; $B = 0.72, p = .05$, lower CI = 0.02, upper CI = 1.43 for less prosocially motivated workers, respectively). Based on the unstandardized coefficients, the slope was slightly more positive among more prosocially motivated workers, signifying a greater impact of psychosomatic health on emotional exhaustion among these workers, mirroring the earlier results on the effect of emotional exhaustion on psychosomatic health of prosocial workers. The results suggest the manner in which the resource loss spiral could manifest and the moderating effect of prosocial motives on this pathway.
Chapter 7

Discussion

At a broad level, this study sought to understand what follows from emotional exhaustion in terms of withdrawal and wellbeing among humanitarian and development workers, how prosocial motivation might affect this pathway, and who among the workers are more likely to benefit from contact with beneficiaries. In particular, this study posited that prosocial motives can serve as a form of resource, following the theoretical arguments of the COR model (Hobfoll, 2001), to buffer the negative consequences of emotional exhaustion on wellbeing and withdrawal outcomes. Moreover, the job design and emotional labor lines of research have tended to disagree in the past in terms of the impact of contact with external members of organization (i.e. clients, customers, beneficiaries) on the performance and wellbeing of workers (Grandey & Diamond, 2010; Grant & Parker, 2009). The current study attempted to narrow the gap between existing discrepant findings by taking into consideration among whom contact with beneficiaries may benefit more in terms of lower withdrawal.

Humanitarian and Development Workers in IO Research

To answer these questions, the current study focused on a sample of humanitarian and development workers. Instead of the typical student or corporate worker samples in IO literature (Shen, Kiger, Davies, Rasch, Simon & Ones, 2011), this sample was selected for two primary reasons. First, there was a recent call from researchers to better match their sample characteristics to the research question. These workers face challenging environmental conditions in the course of work, having to operate in poverty-stricken, disaster-ridden, and conflict settings. Moreover, as
is the case with other human-oriented work (e.g. hospital workers, social and community workers), the challenging interactions they face with their beneficiaries can easily affect their engagement and wellbeing (Blankertz & Robinson, 1997; Goldberg & Grandey, 2007; Margolis & Molinsky, 2008; Price et al., 1995). The study findings of how emotional exhaustion affects the engagement, withdrawal, and health of these workers and how contact with beneficiaries and prosocial motives can moderate these relationships can be pertinent knowledge to both the IO field and sample concerned. Furthermore, the relevance of these questions to the sample facilitates inference of appropriate conclusions (Shen et al., 2011).

Second, the IO literature consists of a vast collection of knowledge and evidence surrounding the life and pitfalls of for profit corporations and the employees that work for them. The impact and operations of NGOs have typically been left to the domains of law, business, and public policy, with little attention paid to the wellbeing of NGO workers. The increasing interest in corporate social responsibility is evidence of a greater attention toward the potential for organizations to contribute to positive social change in the world (e.g. McWilliams & Siegel, 2001; Aguilera, Rupp, Williams, & Ganapathi, 2007). To capitalize on these developing trends, the current study sought to broaden the sample profile of typical IO research by examining the work experience of humanitarian and development workers. The inclusion of a diverse range of humanitarian and development workers in this study provided useful insight as one of the first few studies to look at this subsample of workers.

**Prosocial Motives as a Resource**

Many studies exist that examine emotional exhaustion’s implications on work performance (Cropanzano et al., 2003; Halbesleben & Bowler, 2007), turnover (Cropanzano et al., 2003; Blankertz & Robinson, 1997; Lee & Ashforth, 1996; Mor Barak et al., 2001; Parker &
Kulik, 1995), and health (Melamed et al., 2006; Piko, 2006; Shirom et al., 1997). However, few exist that have examined both withdrawal and health outcomes together (see Bakker et al., 2007 for an exception). This study contributed to the growing body of research to support the COR model (Hobfoll, 1989) by demonstrating that emotionally exhausted workers who already lack sufficient resources to cope with continuing job demands are more likely to withdraw from the organization in the form of behavioral withdrawal at work and intentions to turnover, even after a few months time lag. These workers are also more likely to report poor health. The COR model predicts that individuals who are stressed employ their resources to cope with existing threats. Continued use of their resources leaves them more vulnerable to further resource losses. This is seen among more emotionally exhausted workers, who demonstrated behavioral withdrawal, greater intentions to turnover, and poorer health at a later time.

More than just adding to the extensive evidence for the COR model (Hobfoll, 1989), the current study expanded the literature on COR model by conceptualizing and subsequently finding support for the role of prosocial motives as a form of resource. The study found that less prosocially motivated workers were more likely to withdraw behaviorally and had higher intentions to turnover at a later time compared to more prosocially motivated workers, even though they were equally emotionally exhausted. These findings are consistent with emerging evidence from related studies on self-regulation. In a study on individuals’ belief in their self-regulation capabilities, those who believed they had limitless self-regulation continued persevering in their tasks despite being equally emotionally fatigued (Job et al., 2010). Past research has also shown the ability for individuals to continue exerting effort even after ego depletion when the task is important enough and when they are motivated by certain goals, such as social concern (Baumeister et al., 2007; Muraven & Slessareva, 2003).

Nevertheless, continued exertion of effort leaves more prosocially motivated workers with little resources to cope with demands (Hobfoll, 1989; 2001), which was found to be
detrimental to the health of these workers. When individuals are faced with limited resources, active coping mechanisms where workers continue exerting effort to maintain or improve their performance levels may be adaptive in the short run (Hockey, 1993; 1997; Schaufeli & Bakker, 2004). However, this persistence of effort regardless of available resources can be maladaptive in the long run, as shown in this study in the form of poorer health. On the other hand, less prosocially motivated workers who are more likely to withdraw from the organization may at the same time be protecting their reservoir of resources from becoming depleted. Their tendency to withdraw from the organization serves to protect their health from deteriorating, hence, they did not exhibit negative health outcomes compared to their more prosocially motivated counterparts.

**Contact with Beneficiaries as a Resource for Prosocial Workers**

In trying to connect the dots between two parallel lines of research on job design and emotional labor, the study illuminated for whom and when contact with beneficiaries can be advantageous or detrimental. Contact with beneficiaries served to buffer the negative consequences of emotional exhaustion on intentions to turnover among more prosocially motivated workers such that the relationship was marginally negative (see Figure 5). Being close and having the opportunities to interact with their beneficiaries serve to remind workers of the impact they have on the lives of their beneficiaries (Bakker et al., 2007; Grant, 2007; Grant, 2008c). These interactions are more meaningful to prosocially motivated workers, allowing them to form stronger affective connections with their beneficiaries, compelling them to help more (Sturmer et al., 2005; 2006; Grant & Gino, 2011). The encouraging feedback they receive from their beneficiaries may have kept them from withdrawing.

On the other hand, among less prosocially motivated workers, contact with beneficiaries actually heightened the effect of emotional exhaustion on intentions to turnover such that the
relationship became positive, compared to low contact conditions (see Figure 5). These interactions, which can be challenging both psychologically and physically, can take a toll among humanitarian and development workers, particularly when they are less valued by less prosocially motivated workers. These findings add to the growing body of research on the contingencies surrounding contact with external members of the organization. In terms of this study, results showed that the benefits of contact depended on workers’ motivation. At a broader level, findings further confirmed the importance of recognizing and taking into consideration the social characteristics of the job, particularly interactions with outside members of the organization, when examining workers’ wellbeing, performance, and engagement at work (Humphrey et al., 2007).

Given the buffering effect of contact with beneficiaries on withdrawal and health among more prosocially motivated workers, I explored whether the same mitigating effect was present on emotional exhaustion at a later time. From posthoc analysis conducted, a significant moderating effect of contact with beneficiaries and prosocial motives on emotional exhaustion at Time 2 emerged. Among more prosocially motivated workers, there was a significant negative relationship between contact with beneficiaries and emotional exhaustion (see Figure 7). This was not the case for less prosocially motivated workers. Hence, the benefits of contact with beneficiaries appeared to be relevant only to more prosocially motivated workers. It is interesting to note that prosocial motives was not significantly correlated to emotional exhaustion at either points in time (see Table 3). Being more prosocial does not necessarily lead to being less emotionally exhausted. However, being prosocial in combination with having more frequent, in depth, and diverse contact with beneficiaries led to feeling less fatigued.

This and earlier three-way interaction results suggest a unique beneficial impact of contact with beneficiaries on only prosocially motivated workers. This was further corroborated by the results from posthoc analysis when contact with beneficiaries was analyzed as the sole
moderator of the relationship between emotional exhaustion and withdrawal and health. None of these tests were significant, implying that the significance of having contact with beneficiaries comes to light only in the presence of prosocial motives. Contact with beneficiaries offered prosocially motivated workers a prized opportunity to obtain direct feedback on the impact of their work on their beneficiaries. Close interactions with their beneficiaries also allowed them to form affective connections, and hence, greater commitment to help improve the wellbeing of their beneficiaries (Grant 2007; 2008a). Such interactions are less valued by less prosocially motivated workers, hence did not serve as a useful resource to them.

While this study expanded the COR theory (Hobfoll, 1989; 2001), it simultaneously highlighted the limitations around the very definition of resources according to the COR model. The COR theory asserts that resources are anything that is valued because of its characteristics or that facilitates resource accumulation. They come in the form of objects, personal characteristics, conditions, and energies. As a reaction to more appraisal-based theories of stress which authors denoted as recursive and infallible because they are solely reliant on individual perceptions (Hobfoll, 1989), the COR theory states that most resources are objective and observable, deriving its value from shared cultural and social development. Resources valued by one individual will most likely be valued by others, in similar situations (Hobfoll, 2001). However, as this study has demonstrated, this very definition of resources is limited in its ability to account for the differential effects prosocial motives and contact with beneficiaries have as resources to humanitarian and development workers.

Prosocial motives appeared to function as a resource to mitigate the negative effects of emotional exhaustion on less prosocially motivated workers’ health, but not for their work-related outcomes. On the other hand, the opposite was true for more prosocially motivated workers where prosocial motives acted as a resource to prevent emotional exhaustion’s negative effects on work-related outcomes, but not on these workers’ health. In a similar fashion, contact with
beneficiaries served as a resource only among more prosocially-motivated workers, acting to buffer emotional exhaustion’s effects on workers’ turnover intentions. These findings highlight how the COR theory, just like its predecessors of appraisal-based theories of stress, may in fact rely too on individual perceptions. The influence of individual orientation on stress pathway has been illuminated before, such as in the challenge-hindrance stressor model (Podsakoff, LePine, & LePine, 2007), where individual orientations may influence how stressors and the stress process affect individuals’ work and wellbeing outcomes. In the same way, perhaps the value of resources in aiding stress resistance may depend on individual orientation (i.e. prosocial motives). More research is needed to further explore how and when individual perceptions may influence resource gain and loss pathways.

**Resource Loss Spiral**

The COR model posits that engaging resources to cope with ongoing stressors can trigger further resource losses, leading to a vicious cycle of continued resource losses, otherwise also known as loss spirals (Hobfoll, 1989; 2001). The net loss of resources can be demotivating (Llorens et al., 2007), likely leading to less engagement, more withdrawal and deteriorating health. The current study proposed worker engagement at Time 1 as a proxy indicator of the resource loss process, hypothesizing that among less prosocially motivated workers, preceding emotional exhaustion will lead to less present engagement, and more subsequent withdrawal but better health. The opposite was hypothesized to be true for more prosocially motivated workers. Worker engagement at Time 1 was hypothesized as a mediator to capture the cumulative effect continued engagement over a long period of time despite experiencing emotional exhaustion could have on withdrawal and health at a later point in time. Nevertheless, the results failed to
find support for the indirect effect of engagement on the relationship between emotional exhaustion, prosocial motives, and contact with beneficiaries on withdrawal and health.

The study did find an unexpected first stage moderating effect between prosocial motives and emotional exhaustion on engagement at Time 1 such that engagement was lower among more prosocially motivated workers who were experiencing emotional exhaustion (see Figure 6). Contrary to expectations, disengagement could be a present act of self-regulation in response to depleting resources among prosocially motivated workers, almost as if to ensure that they can continue exerting effort in the near future. This finding is somewhat similar to the findings of a study where individuals engaged in production deviance and withdrawal to cope with injustice at work (Krischer et al., 2010). One can speculate that the initial disengagement of prosocially motivated workers at Time 1 helped prevent them from withdrawing from work at Time 2, as found in the results of this study. However, further studies are needed to explore the manner in which self-protective acts are manifested by who, under what conditions and how.

Posthoc tests of alternative manifestations of the resource loss spiral were conducted by regressing emotional exhaustion at Time 2 onto withdrawal and health at Time 1. Results showed that withdrawal and health variables at an earlier point in time can affect emotional exhaustion at a later time. Combining earlier results with this suggests the manner in which loss spirals can proceed from emotional exhaustion to greater behavioral withdrawal, intentions to turnover and poorer health at a later time, which can subsequently intensify the emotional exhaustion experienced. This provides initial support for how one form of strain can become a stressor, which feeds into further resource losses (Hobfoll, 2001).

Moreover, support was also found for the moderating role of prosocial motives in this reversed resource loss pathway such that among less prosocially motivated workers, behavioral withdrawal at Time 1 was a significant positive predictor of emotional exhaustion at a later time, mirroring findings for emotional exhaustion as predictor and withdrawal as DV relationship.
Earlier findings also indicated how emotional exhaustion led to reduced engagement among more prosocial workers, perhaps by conserving their current resources for subsequent endeavors. First, these findings further strengthen the role of prosocial motives as a resource buffer. Second, it seems like both more and less prosocially motivated workers engaged in self-protective acts, albeit at different points in time and with different goals in mind. Although the indirect effect of worker engagement was not found for this study, piecing these evidences together suggests how prosocial workers may leverage disengagement at the present to conserve resources with foresight to continue exerting effort over a longer period of time. To the contrary as hypothesized, less prosocially motivated workers may not plan that far ahead to regulate their present engagement so that they can remain working in the near future, which may lead to an accumulation of depleted resources and greater withdrawal at a later time. In fact, it could be that less prosocial workers may not have long-term career plans in the organization. More studies are definitely needed to confirm these stipulations, preferably with a longitudinal design.

Lastly, it is interesting to note that the current study is one of a growing number of studies that have examined emotional exhaustion as the main predictor in the study (e.g., Cropanzano et al., 2003; Halbesleben & Bowler, 2007; Wright & Cropanzano, 1998). Studies such as this are important to highlight that emotional exhaustion is often not the conclusion in the life story of workers. Work continues after emotional exhaustion and knowledge regarding the experiences of emotionally exhausted workers can add to the growing body of research on worker wellbeing and engagement, and more importantly, in stimulating discussions on how to ameliorate its negative consequences. The current study managed to find evidence for withdrawal and health of emotionally exhausted workers and internal and external factors that can help soften its negative consequences.
Chapter 8

Limitations and Future Directions

A major limitation of this study is the small sample size of 82 workers at Time 1 and 63 workers at Time 2, which hardly lends itself well to statistical analyses. Initial power analysis recommended a minimum sample size of approximately 120 to detect moderate effect sizes (Faul et al., 2007). One of the obvious challenges of obtaining participation from humanitarian and development workers is the frequency in which they travel to and from the field, often to remote places with connectivity issues. When the nature of one’s work involves dealing with pressing issues of poverty, health, and crisis, participating in a survey falls to a lower priority. In order to increase participation rate, the researcher sent multiple emails to NGO listservs and networks and posted on NGO forums. This was in addition to the snowball sampling method used, capitalizing on existing contacts within the field. Perhaps, the fact that the researcher was also a member of the NGO field helped increase interest in the study. Nevertheless, such “cold-calling” methods of recruitment are limited in its ability to obtain a decent sample size typically seen in IO research (Shen et al., 2011).

Recognizing the limitations of moderator multiple regression (MMR) in small sample sizes (Aguinis, 1995; Aguinis & Stone-Romero, 1997; Aguinis, Beaty, Boik, & Pierce, 2005), more descriptive tests of moderating effects hypothesized were used to partially address this issue. However, testing moderator effects this way has its limitations. In a study comparing the relative power of testing moderator analysis using MMR or subgroup correlation coefficients (SCC), Stone-Romero and Anderson (1994) found that in all cases, MMR was superior in detecting moderator effects compared to SCC (i.e. higher power). Testing moderator effects this way meant equating moderator values to all participants in the subsample, resulting in loss of
information, increased error variance and lower likelihood of detecting moderating effects (Stone-Romero & Anderson, 1994). Moreover, the decision to cut the sample at the mean value of these variables of interest was relatively arbitrary. Nevertheless, the presence of significant effects in the direction hypothesized offers, at least, a preliminary view as to the impact of prosocial motives and contact with beneficiaries on the withdrawal and wellbeing of humanitarian and development workers.

Moving forward, future studies should seek to replicate this study on a larger sample of humanitarian and development workers. A larger sample size will allow for the ability to conduct more rigorous regression analysis to detect and confirm the pattern of moderating effects found in this study. A larger sample will also enable researchers to replicate the mediating test of worker engagement’s indirect effect on the variables of interest. One possible way to obtain a larger sample size among these workers is to approach a humanitarian or development organization to get their workers to participate in this study. That way, communication regarding the study can come from the management or personnel department of the organization, providing top-down support that may increase interest and commitment of workers to the study.

As one of the first few studies on humanitarian and development workers in the IO literature (e.g., Carr et al., 2010; McWha, Marai, & Peniop, 2010), the current study drew from a diverse range of humanitarian and development workers, ranging from workers in microfinance, poverty reduction, and humanitarian relief, and across the different levels within their organization. The breadth of this sample lends itself well to initial exploration of the work experiences of this group of workers. However, future studies should focus on the work experiences of a specific type of humanitarian or development worker as different work environment and tasks could contribute to diverse experiences, engagement, and wellbeing (Price et al., 1995). For example, workers in humanitarian relief in response to natural disasters or in refugee resettlement as a result of ongoing conflict are more likely to encounter psychologically,
physically, and emotionally intense experiences when in the field than workers in development or general poverty reduction sectors.

Moreover, contact with beneficiaries may exert differing effects on different types of humanitarian or development workers, such as operational workers like Program Officers who manage implementation of programs in the field, compared to functional workers like Accountants who are primarily responsible for managing the finances of the organization. These considerations are reminiscent of the job design-emotional labor debate on the impact of contact with external members of the organization, in that whether or not such interactions lend itself well to the worker depends on the nature of the interaction, characteristics of the job, and of the worker (Grandey & Diamond, 2010; Grant & Parker, 2009).

Common method variance poses a probable threat to the validity of responses, as all measures in the two-panel survey were self-reported, hence potentially biasing the strength and direction of the relationships found in the study (Podsakoff et al., 2003). The current study attempted to address this problem in several ways. First, the measures used in the study were all well validated with good reliabilities, based on pre-existing studies and from the current study’s own reliability analysis (i.e. all above 0.70; Nunnally, 1978). Second, confirmatory factor analysis provided sufficient evidence on discriminant validity of the constructs examined in this study by comparing the fit of the two-factor to the one-factor combination models (see Table 1 and Table 2). Third and lastly, the longitudinal nature of the current study provided temporal separation of two to three months in the measurement of the predictor and criterion variables (Podsakoff et al., 2003), which not only allowed for more effective measurement of the effect of stressor on strain, but better matched the suggested causal lag of the constructs examined in the study (Demerouti et al., 2004; Houkes et al., 2003).

Recent research has highlighted certain misperceptions and an overly critical censure of reviewers on common method biases (Conway & Lance, 2010; Lance, Dawson, Birkelbach, &
Hoffman, 2011). These misperceptions include that relationships between self-reported measures are always upwardly biased, that other methods of measuring constructs are inherently superior to self-reports, and that rating sources are merely alternative methods of measurement. Although common method bias can be a real threat in some cases, it is by no means always a constraint in study conclusions. Proper and a priori consideration of common method issues during the design and analytical phase of the study (Conway & Lance, 2010), such as outlined earlier, will hopefully have partially alleviated some of the potential biases.

Finally, the study attempted to gain insight into the experience of resource loss spirals among humanitarian and development workers following the path from emotional exhaustion to decreased engagement at Time 1, to greater withdrawal and poorer health at a later time (Hobfoll, 2001). The lack of significant indirect effects could partially be attributed to the small sample size and hence, low power of the study, making it difficult to detect any mediating effect (Fritz & MacKinnon, 2007). However, the bias-corrected bootstrapping method inherent in Edwards and Lambert’s (2007) approach should partially address this limitation (Fritz & MacKinnon, 2007). Another, perhaps better way to capture this psychological experience is to measure workers’ experiences more than twice at theoretically driven intervals of time and over a longer timeframe than two or three months. Examples can be drawn from past studies that have examined the cyclical nature of psychological experiences surrounding wellbeing and stress where predictors act as criterion at a later point in time in their conceptual and structural model (e.g. Demerouti et al., 2004; Llorens et al., 2007).
Chapter 9

Practical Implications

On the surface, it may seem advantageous to organizations to have dedicated and prosocially motivated workers who continue performing their tasks, despite limited resources. These workers exert greater effort over time, are less likely to engage in behavioral withdrawal and exhibit fewer intentions to turnover. However, over the long run, the incurred cost in terms of poorer health can be detrimental to the productivity and effectiveness of the organization. Organizations should be aware of the unintended consequences of being ‘overly motivated’ and aim to strike a careful balance between encouraging workers to continue exerting effort at the expense of their emotional and physical health.

Drawing from these findings, NGOs can proactively implement and support stress reduction programs for their humanitarian and development workers to help them better cope with the anticipated emotional fatigue, withdrawal and health outcomes. For example, organizations can institute mandatory rest periods following intense visits to the field (Etzion et al., 1998), particularly for less prosocially motivated workers. Organizations can consider implementing pre-assignment training programs, similar to realistic job previews, to reduce unrealistic expectations regarding their job tasks and work demands they may encounter in field assignments (Buckley et al., 1998). Mentoring relationships have been shown to facilitate organizational commitment, performance, and lower turnover intentions (Egan & Song, 2008; Payne & Huffman, 2005). NGOs can help facilitate mentor-mentee relationships between newer and more tenured workers in the organization who may be able to share stress coping strategies learned over their course in the organization (Blankertz & Robinson, 1997).
Recognizing the benefits contact with beneficiaries offer to workers, particularly those who are more prosocially motivated, organizations should seriously consider incorporating such contacts into the formal job descriptions of humanitarian and development workers. In the event contact with beneficiaries is not feasible, or occur relatively infrequently, organizations could better communicate the impact of their work to humanitarian and development workers, which has been shown to facilitate performance (Grant et al., 2008), either through direct testimonies from beneficiaries, or through trustworthy managers (Grant & Sumanth, 2009).

Finally, although the study does not provide concrete evidence to suggest whether NGOs should prioritize selection of more over less prosocially motivated employees, the findings of this study demonstrated the greater benefits that prosocially motivated employees draw from the very nature of humanitarian and development work. In particular, their prosocial nature and the opportunity to interact with their beneficiaries act as resources for them to navigate the demands of their job. This harkens to earlier emphasis on person-job fit when selecting and understanding the performance and wellbeing of employees (e.g. Kristof-Brown, Jansen, & Colbert, 2002; Kristof-Brown, Zimmerman, & Johnson, 2005).
Chapter 10

Conclusions

“Strange is our situation here on Earth. Each of us comes for a short visit, not knowing why, yet sometimes seeming to divine a purpose. From the standpoint of daily life, however, there is one thing we do know: that man is here for the sake of other men”
-- Albert Einstein.

In light of ongoing global challenges where 1.4 billion people still live below $1.25 a day, where 43 million people have been displaced due to conflict and persecution, and where wide gaps still remain in women’s access to paid employment (The Millennium Development Goals Report, 2011), the work of humanitarian and development workers cannot be underestimated. Having workers that are motivated and engaged can facilitate organizational goals. Nevertheless, the findings of this study illuminate the possibility that what is good for the organization itself may not always be beneficial for its workers. Workers who are prosocially motivated may be less likely to withdraw behaviorally and harbor turnover intentions, but this comes at the expense of poorer health, which in the long run may be more harmful for organizations. On the other hand, less prosocially motivated workers may be less likely to exhibit poor health, but they are more likely to withdraw and derive less benefits from having contact with beneficiaries. In short, it serves organizations well to keep prosocially motivated workers, but what is needed is more effective support from the organization to aid in emotional exhaustion and poor health of these workers.
References


Shirom, A., Westman, M., Shamai, O., & Carel, R. S. (1997). Effects of work overload and burnout on cholesterol and triglycerides levels: The moderating effects of emotional


1 According to these researchers, organizations should adapt their products and services to serve the needs of the world’s poor, who as individuals have limited purchasing power but as a group have great purchasing power. On the other hand, other researchers believe that in order to effectively lift the poor from grinding poverty, businesses ought to invest in raising their income by converting them from consumers to producers (Karnani, 2007). It is better to eradicate global poverty by creating steady employment at reasonable wages than lowering the prices or quality of goods and services to make them more affordable to the poorest billion.

2 The Millennium Development Goals (MDGs) is a set of eight global goals that the world committed to achieving in 2000. Under the leadership of the United Nations, the goals are to halve the number of people living with less than $1 a day, achieve universal education, promote gender equality and empower women, reduce child mortality, improve maternal health, combat HIV/AIDS, malaria and other diseases, ensure environmental sustainability, and develop a global partnership for development. These goals were formed with the purpose of creating a better world for everyone.

3 Demographic information such as gender, age, and tenure in organization was collected to gain a more descriptive picture of the sample. Several reasons contributed to the decision to exclude them as control variables in the main hypotheses testing. First, the longitudinal nature of this study presented a strong argument against the need to control for external variables that could bias study conclusions. Second, the small sample size of the study limited the ability to detect any effect beyond the control variables. Third, the main hypotheses were tested controlling for these demographic variables and results mainly failed to reach significance, rather than hypotheses.
rejected. Moreover, none of the control variables were significant predictors in any of the regression models.

4 Cross panel data can be tested using three common methods; cross panel correlation tests, multiple regression analysis, and structural equation models (SEM; Kenny, 1975). Cross panel correlation tests are typically used as an exploratory model to examine causal directionality of relationships between variables and to eliminate alternative hypothesis regarding confounding variables. Based on Table 3, cross lag correlations between emotional exhaustion at time 1 and dependent variables at time 2 are significant and in the predicted direction. Moreover, their synchronous correlations are relatively equal, suggesting stability in the causal relationships. This reduces the probability that the relationship between X and Y is caused by a third confounding variable. The slight increase in synchronous correlations at Time 2 can be partially attributed to the increase in reliability of measures (Kenny, 1975).

Multiple regression and SEM analysis are subsequently used to estimate parameters and formally test study hypotheses. SEM is frequently used in cross panel data (e.g. Bolton, Gray, & Litz, 2006). However, given the small sample size of the current study and the limitations surrounding that in conducting SEM, regression analysis was used instead.

5 Respondents were also asked to report on the number of absences in the past three months due to physical reasons and emotional reasons as another indicator of withdrawal. However, frequency analysis revealed the extreme skewness of the data with more than 50% and 55% of respondents indicating zero physical absences at Time 1 and Time 2, respectively and more than 72% and 74% of respondents indicating zero emotional absences at both times. Moreover, none of the hypotheses with physical or emotional reasons as the dependent variable were significant, hence their results were not reported in the main paper.

6 To confirm findings from more descriptive moderator tests, a more stringent method of testing this model was conducted by regressing change scores of behavioral withdrawal,
intentions to turnover, and psychosomatic health symptoms from Time 1 to Time 2 onto main
predictors of this model. None of the effects were significant, except for the three-way interaction
effect between emotional exhaustion, prosocial motives, and contact with beneficiaries on change
scores of intentions to turnover, which confirmed earlier H3a findings. The interaction effect
between emotional exhaustion, prosocial motives, and contact with beneficiaries marginally
predicted the change in workers’ turnover intentions from Time 1 to Time 2 ($B = -0.21, p < .10,$
lower CI = -0.43, upper CI = 0.01), such that the direction of the interaction mirrored that found
in the descriptive moderator test.

Simple slope analysis showed that in high contact with beneficiaries’ condition, less
prosocially motivated workers’ emotional exhaustion predicted a positive change in their turnover
intentions from Time 1 to Time 2. The opposite was true for more prosocially motivated workers
where emotional exhaustion predicted a negative change in turnover intentions from Time 1 to
Time 2. In low contact with beneficiaries’ condition, these relationships were not significant.
Hence, contact with beneficiaries served to buffer the negative effect of emotional exhaustion on
prosocial workers’ turnover intentions, but not for less prosocially motivated workers. In general,
the lack of significance of change scores can be partially attributed to the relative stability of
individual’s behavior and wellbeing across time and hence, smaller magnitude of change in these
outcomes, and the brief interval between Time 1 and Time 2 surveys that was insufficient to
allow for significant fluctuations in outcomes.
Appendix A

Interview Script

Thank you for giving me the opportunity to speak with you regarding your job. The purpose of this interview is to find out more about your work in a nonprofit organization. More specifically, the tasks you perform at work, the job structure, the organization, and the personal factors motivating you to do your job. Before we start, I would like to read through the consent form to provide you a brief overview of the study.

[I will then read the implied consent form to the interviewee]

This interview will be audiotaped. Please let me know at anytime during the interview if you feel uncomfortable having the conversation recorded.

1. Please provide a general description of what you do at your job

2. What is the general career progression of an employee like you in the organization?
   a. How long do employees tend to stay? Is there a lot of coming and going?
   b. Does it vary by the type of job they hold?
   c. Who is more likely to leave?

3. Who would you say are your ‘clients’ that you provide services/goods/information to?
   a. How often do you interact with your clients (face to face, verbally, written)?
   b. How often do you perform fieldwork?

4. What would you say was the main thing that drew you to work for your organization?
   a. What are other reasons that people are drawn to work for this organization?
   b. What would be the main reason you would leave, if you chose to leave?
5. Can you think of any other information that would be important to understanding your job?

6. Is there someone else you think that I will be able to talk to in the nonprofit field?
Appendix B

Emotional Exhaustion Measure

The following statements are about how you feel emotionally at work. Please read the following statements and decide if you ever feel this way while at work. If you have never felt this way, choose 0. If you have had this feeling, indicate how often you have felt this way while at work using the response scale provided below.

0 = Never felt this way while at work, 1= A few times a year, 2 = Monthly, 3 = A few times a month, 4 = Every week, 5 = A few times a week, 6 = Everyday

1. I feel emotionally drained from my work
2. I feel used up at the end of the work day
3. I dread getting up in the morning and having to face another day on the job
4. I feel burned out from my work
5. I feel frustrated by my job
6. I feel I’m working too hard on my job
Appendix C

Worker Engagement Measure

The following statements are about how you feel at work. Please read each statement carefully and decide if you ever feel this way about your job. If you have never had this feeling, select 0. If you have had this feeling, indicate how often you feel it by selecting the number that best represents how frequently you feel that way.

0 = Never felt this way while at work, 1 = A few times a year or less, 2 = Once a month or less, 3 = A few times a month, 4 = Once a week, 5 = A few times a week, 6 = Everyday

1. At my work, I feel bursting with energy
2. At my job, I feel strong and vigorous
3. When I get up in the morning, I feel like going to work
4. I can continue working for very long periods at a time
5. At my job, I am very resilient, mentally
6. At my work I always persevere, even when things do not go well
Appendix D

Worker Motives Measure

The following items ask about the reasons you work for your organization. Please read the statements carefully and indicate the extent to which you agree to each item using the response scale provided below. The main reason for working is…

1 = Not at all, 3 = Moderately, 5 = Very much

1. Because I care about benefiting others through my work
2. Because I want to help others through my work
3. Because I want to have positive impact on others
4. Because it is important to me to do good for others through my work
Appendix E

Contact with Beneficiary Measure

The following statements are about your interactions with beneficiaries. Beneficiaries are those whom your work benefits. Please read the statements carefully and indicate the extent to which you agree to each item using the response scale provided below.

1 = Disagree strongly, 2 = Disagree, 3 = Disagree slightly, 4 = Neutral, 5 = Agree slightly, 6 = Agree, and 7 = Agree strongly

1. My job allows frequent communication with the beneficiaries who benefit from my work.
2. My job often gives me the opportunity to meet the beneficiaries who benefit from my work.
3. My job enables me to interact regularly with the beneficiaries who benefit from my work.
4. My job provides me with contact with different groups of beneficiaries who benefit from my work.
5. My job allows me to interact with a variety of beneficiaries who benefit from my work.
6. My job enables me to meet diverse groups of beneficiaries who benefit from my work.
7. My job enables me to build close relationships with the beneficiaries affected by my work.
8. My job allows me to form emotional connections with the beneficiaries who benefit from my work.
9. My job gives me the chance to have meaningful communications with the beneficiaries who benefit from my work.
Appendix F

Psychosomatic Health Symptoms Measure

The following statements concern your health. Please read the statements carefully and indicate how often you have experienced the following symptoms in the past month using the response scale provided below.

1 = Rarely, 3 = Occasionally, 5 = Very Often

1. Your hands trembled enough to bother you
2. You were bothered by shortness of breath when you were not working hard or exercising
3. You were bothered by your heart beating hard
4. Your hands sweated so you felt damp and clammy
5. You had spells of dizziness
6. You were bothered by having an upset stomach or stomach ache
7. You were bothered by your heart beating faster than usual
8. You were in ill health which affected your work
9. You had a loss of appetite
10. You had trouble sleeping at night
Appendix G

Behavioral Withdrawal Measure

The following items ask about your behavior at work. Please read the statements below and indicate how often you have done each of the following things at your current job in the past 3 months using the response scale provided below.

1 = Never, 2 = Once or Twice, 3 = Once or Twice Per Month, 4 = Once or Twice Per Week, 5 = Every Day

1. Thoughts of being absent
2. Chat with co-workers about nonwork topics
3. Left work station for unnecessary reasons
4. Daydreaming
5. Spent work time on personal matters
6. Put less effort into job than should have
7. Thoughts of leaving current job
8. Let others do your work
Appendix H

Intentions to Turnover Measure

The following statements ask about your future plans. Please read the statements carefully and indicate the likelihood of the statements being true in the coming year.

1 = Very unlikely, 2 = Unlikely, 3 = Slightly unlikely, 4 = Neutral, 5 = Slightly likely, 6 = Likely, 7 = Very likely

1. I intend to leave this organization within the next year
2. I intend to remain with this organization indefinitely
3. I would leave this job if I could
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Monitoring and Evaluation Data Analyst:
Women for Women International, Washington DC May 2011-Present
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• Conduct data analysis for internal and external reporting purposes
• Manage field implementation of program graduate follow up tool
Research Assistant: International Center for the Study of Terrorism, PSU Jan 2008-May 2011
• Compiled chronological history of key individuals and terrorist organizations
• Conducted research with team members on improvised explosive devices of the IRA
• Evaluated effectiveness of organizations’ training program for international assignees

POLICY AND ADVOCACY EXPERIENCE
Senior Policy and External Relations Intern:
• Researched, drafted and edited policy and media briefs, press releases, blog and opinion pieces

WRITING AND PRESENTATION SKILLS
• Co-authored a peer-reviewed journal article on burnout of hospital teams
• Co-authored a book chapter on team membership selection
• Presented 3 research papers at 2 national conferences

LEADERSHIP AND ORGANIZATIONAL SKILLS
Team Leader: Multicultural Action Project at Penn State, PSU 2007-2009
• Managed a team of 5 people over 1 year to accomplish team goals
• Designed and administered a survey to evaluate effectiveness of HSBC’s global leadership training program
• Managed a team of 5 over 9 months to accomplish team goals
• Revised and redesigned standardized selection system for the Association’s field representatives
• Managed a team of 5 over 9 months to assist in test development

LANGUAGE SKILLS AND TOOLS
• Fluent in English and Malay Languages
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• Database software (SQL)
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