Journal of Educational Research & Social Science Review (JERSSR)

A Systematic Review of Job Crafting, Job Characteristics, Work Engagement, and Exhaustion of Female Nurses during COVID-19 Pandemic

1.   **Dr. Malik Mamoon Munir**   (Corresponding Author)
     Assistant Professor at the Department of Management Sciences, Bahria University Islamabad, Pakistan
2.   **Ume Rubaca**   PhD Scholar, Department of Management Sciences, Comsats University Islamabad, Pakistan
3.   **Malik Haroon Munir**   Master of Public Policy Scholar, Crawford School of Public Policy, Australian National University, Australia

Abstract

This research has attempted to identify the impact of daily job crafting of female nurses on their daily job performance consisting of task performance, counterproductive work behavior, and altruism during a COVID-19 pandemic in Pakistan. The present study has hypothesized that the daily job crafting of female nurses is related to daily job resources (autonomy and work pressure) and job demands which subsequently related to daily exhaustion and work engagement and eventually related to female nurses' job performance. A sample of 171 nurses working in private hospitals in Islamabad and Rawalpindi, Pakistan, provided their input on five consecutive working days (855 Occasions) in a quantitative diary method. Due to an increase in daily work engagement and autonomy, daily seeking resources for female nurses have a positive and significant relationship with daily task performance. Moreover, daily reducing demands was found to have a significant impact on daily task performance and altruism of female nurses because this reduces their daily workload which further reduces their engagement and exhaustion. The study examined that job crafting by female nurses could have both positive and negative effects on job performance during the COVID-19 pandemic.

Keywords: JOB CRAFTING, Exhaustion, Task Performance, Work Engagement, COVID-19 Pandemic

Introduction

The COVID-19 pandemic is not only causing mortality and morbidity but also generating social and psychological problems. Healthcare providers in general and female nurses, in particular, are becoming victims of occupational stress resulting in distress, anxiety, and post-traumatic stress disorder. Uncertain disease status of COVID-19 pandemic exacerbates the difficulty of female nurses' job in the hospitals to care for the pandemic patients. Hence, female nurses apply job crafting strategies to keep them motivated in the workplace. The technique of job crafting is a key to improving the motivation of workers, particularly those in high-stress and high-energy jobs. For this reason, it is significant to study how female nurses are using job crafting during the stressful time of the COVID-19 pandemic while working in private hospitals to keep them motivated.

Female nurses' performance is significant for any hospital because it contributes to the technical core of the hospital mission (Crimi & Carlucci, 2021; Kengatharan & Kunatilakam, 2020; Lotan & Taiar, 2019). Generally, the job performance of female nurses is recognized as multidimensional (Al Thobaity & Alshammari, 2020). This is because the role of female nurses' work behavior falls outside the domain of task performance (Shaukat, Ali, & Razzak, 2020), particularly during the COVID-19 pandemic (Munir, Munir, & Rubaca, 2021). Such work behaviors of female nurses include counterproductive work behavior (CWB) or altruism (Dalal, 2005). According to Borman and Motowidlo (1997, p. 100), "*such work behaviors are important because they shape the organizational, social, and psychological context that catalyzes task activities and processes*". Job crafting offers female nurses proactive behavior through which they change their work environment and outline their job demands versus resources to regulate their energy and motivation level (Crimi & Carlucci, 2021; Tims & Bakker, 2010).

_____

The existing literature has argued that employee job performance includes three broad categories which are CWB, altruism, and task performance (Demerouti, Bakker, & Halbesleben, 2015; Kumar et al., 2021). These categories support in assessing the employee contribution in an organization (Lotan & Taiar, 2019). Gruys and Sackett (2003, p.30) have to define CWB as "*any intentional behavior on the part of an organization member viewed by the organization as contrary to its legitimate interests*". Whereas MacKenzie et al. (1991, p.124) have to define altruism as "behavior(s) of a discretionary nature that is not part of employees' formal role requirements but promote the effective functioning of the organization". Altruism increases organizational effectiveness as it involves actions beyond the stated job description. Precisely, CWB represents those behaviors of female nurses which occasionally fall below the minimum requirement level whereas altruism suggests that behaviors of female nurses surpass the required level (Bennett & Robinson, 2002; Shaukat et al., 2020).

The third category of job performance is task performance. Task performance is defined as "*officially required outcomes and behaviors that directly serve the goals of the organization*" (Motowidlo & Van Scotter, 1994, p.476). Task performance suggests that female nurses' performance facilitates the attainment of hospital goals (Dalal, 2005; Kumar et al., 2021). Task performance is a significant domain of assessing female nurses' job performance (Brandi & Iannone, 2021; Tims & Bakker, 2010).

Problem Statement

It is significant to investigate the job crafting relationship with job performance, particularly when job characteristics of female nurses are changing due to the COVID-19 pandemic. This change further results in changes in the level of energy (exhaustion) and motivation (work engagement) of female nurses.

Objectives of the Study

Following are the key objectives of the present study;

- To identify the impact of seeking resources on work engagement with the mediating effect of autonomy of female nurses.
- To identify the impact of seeking challenges on work engagement and exhaustion with the mediating effect of the workload of female nurses.
- To identify the impact of reducing demands on work engagement and exhaustion with the mediating effect of the workload of female nurses.
- To identify the impact of work engagement on task performance, altruism, and CWB of female nurses. To identify the impact of exhaustion on task performance, altruism, and CWB of female nurses.

Literature Review

The novel coronavirus has made the job of hospital nurses difficult. Due to its limited background knowledge and a high number of patients in any hospital, the nurses generally apply job crafting strategies for their motivation to work in a stressful environment.

Job Crafting

Wrzesniewski and Dutton (2001, p.179) have defined job crafting as "the physical and cognitive changes individuals make in their task or relational boundaries". Cognitive changes mean changing the job, according to employee perception and physical changes mean a change in the number or scope of job tasks (Bolger, Davis, & Rafaeli, 2003; Lotan & Taiar, 2019). In the case of hospitals, job crafting involves the changes that female nurses execute based on their needs and abilities to equalize the hospital available resources with their job demands (Crimi & Carlucci, 2021; Tims & Bakker, 2010). Female nurses' job resources refer to job aspects that facilitate them in attaining job goals and growth whereas job demands refer to such job aspects which are associated with their efforts and psychological costs (Al Thobaity & Alshammari, 2020).

Job crafting for female nurses is considered daily behavior and is dependent on the working environment of the hospital. Petrou et al. (2012) suggested that female nurses can adjust their tasks and organize the available resources for successful task performance daily, even in stable environment conditions where clear work procedures and job descriptions are available. This job crafting technique keeps the female nurses motivated and healthy during task performance. Female nurses sometimes strategize their job performance by seeking resources (Yaqub, Singh, & Dutta, 2021). Hobfoll (2001) suggested that accumulating and seeking resources during high job demands offers motivation during

job performance. On the other hand, seeking challenges through engaging in new tasks which offer opportunities for growth keeps the female nurses motivated at hospitals. To keep standardized task performance, female nurses tend to adopt reduced demand strategies to keep them mentally, emotionally, and physically fit at hospitals (Demerouti & Rispens, 2014).

Job Crafting, Job Characteristics, Work Engagement, and Exhaustion

In hospitals, female nurses typically perform job crafting by altering relational boundaries, tasks, and job characteristics. In job redesign interventions, the employees act as a key role to improve the performance and well-being through alteration of job characteristics (Wrzesniewski & Dutton, 2001). For female nurses, job restructuring interventions allow them to improve their employment through the development of new ideas, resulting in a change in job characteristics. These job redesign interventions help female nurses decrease job demands and increase job resources for their well-being (Gander & McInnes, 2021). Job development and redesign interventions provide female nurses with the opportunity to take innovative actions and find new resources to achieve the feeling of success (Demerouti & Rispens, 2014). This is proactive behavior that allows female nurses to carry out their work independently, increasing perceived autonomy and reducing workload. Perceived autonomy is considered a job resource, while the workload is considered as job demand in most jobs (Karasek, 1998).

The existing literature argues that job crafting behaviors and modified job characteristics are linked to each other (Crimi & Carlucci, 2021; Demerouti et al., 2015). For instance, seeking challenges was found with no effect on changes in workload; and reducing demands was also found with no effect on changes in cognitive and emotional demands (Demerouti & Rispens, 2014). However, Tims et al. (2013) adopted a longitudinal timeline to identify the effect that withstood exploration of the impact on everyday behavior. The daily workload is affected by reducing demands and daily seeking challenges (Bakker & Bal, 2010; Kumar et al., 2021). Female nurses enhance their work by developing new ideas that remove job demands and associated barriers. Therefore, the days when female nurses seek resources, higher levels of autonomy will be reported, and when female nurses seek challenges, higher levels of workload will be reported and vice versa. The modified occupational characteristics of female nurses explain the daily levels of energy (exhaustion) and motivation (work engagement). Exhaustion refers to the experience of fatigue or the depletion of cognitive resources (Maslach, Schaufeli, & Leiter, 2001) whereas work engagement refers to the positive motivational reaction towards the job (Schaufeli, Bakker, & Salanova, 2006).

The job Demands-Resources (JD-R) model suggests that female nurses experience autonomy in hospitals on days when there is high work engagement due to the motivating potential of job resources eventually resulting in growth and goal accomplishment (Bakker & Bal, 2010). Conversely, according to the JD-R model, high job demands exhaust energy and result in offsetting costs (exhaustion). This is also true in the case of the COVID-19 pandemic, where high job demands for female nurses are increasing their workload and causing burnout in hospitals (Munir et al., 2021; Sadrul Akhtar, & Maliha, 2021). This is because female nurses' high job demands trigger positive cognitions and emotions that drive active, problem-oriented coping styles. Therefore;

H1: Female nurses seeking resources have a positive and significant relationship with work engagement at private hospitals through the mediating effect of autonomy during the COVID-19 pandemic in Pakistan.

H2: Female nurses' seeking challenges has a positive and significant relationship with work engagement (2a) and exhaustion (2b) at private hospitals through the mediating effect of workload during the COVID-19 pandemic in Pakistan.

H3: Female nurses' reducing demands has a negative and significant relationship with work engagement (3a) and exhaustion (3b) at private hospitals through the mediating effect of workload during the COVID-19 pandemic in Pakistan.

Work Engagement and Job Performance

The existing literature has argued that work engagement has a significant relationship with job performance (Bakker & Bal, 2010; Demerouti et al., 2015). According to Christian, Garza, and Slaughter (2011, p.97) "work engagement has incremental value in explaining variance in other-ratings of task and contextual performance—over and above attitudes like job satisfaction, job involvement, and organizational commitment". Work engagement acts as a predictor of job performance supported by its three-dimensional configuration, consisting of resource allocation

components, energy, and motivation (Demerouti & Cropanzano, 2010). The ability to establish job resources by engaging workers is achieved by reaching optimal functioning levels. According to Fredrickson's (2001, p.224) broaden-and-build theory, "momentary experiences of positive emotion can build enduring psychological resources and trigger upward spirals toward enhanced emotional well-being". Specifically, female nurses possessing positive emotions display positive energy and express satisfaction during present times and in the future as well. Female nurses in hospital settings allocate job resources due to their intrinsic motivation (Bakker & Bal, 2010; Crimi & Carlucci, 2021). The intrinsic motivation supports female nurses to achieve their performance goals and to act for the hospital with an extra amount of effort even during any contingency, for instance, the COVID-19 pandemic. Therefore;

H4: Female nurses' work engagement has positive and significant relationships with task performance (4a), altruism (4b), and negative relationship with CWB (4c) at private hospitals during the COVID-19 pandemic in Pakistan.

Exhaustion and Job Performance

According to Hobfoll, 2001, the workers experiencing exhaustion tend to protect their available limited resources by maintaining a defensive standpoint. The primary motivator of the exhausted worker becomes to safeguard the available limited resources even in completing the job functions, duties. In the case of female nurses during their high levels of exhaustion, insufficient resources are available to deal with their job demands resulting in impaired job performance (Taris, 2006). Existing literature on the subject of fatigue has argued that job performance is negatively affected by depleted energy resources as well as exhaustion (Demerouti et al., 2015). CWB of female nurses is considered as a behavioral reaction to stressful and pervasive work experience (Bharadwaj, 2020; Kahsay et al., 2020). Similar to negative emotions, exhaustion signals female nurses that the task is incongruent with their job performance and could be harmful (Al Thobaity & Alshammari, 2020; Lazarus, 1991). Therefore, female nurses motivate themselves by engaging in CWB to reduce negative emotions (Kumar et al., 2021). Hence, CWB acts as a mediator between negative emotions and resultant work behavior of female nurses during the COVID-19 pandemic (Schaufeli, 2006). To cope up with exhaustion, female nurses engage themselves in central tasks to yield productive behaviors, but exhaustion may resist this capability of female nurses for triggering positive coping behavior strategy. Empirical evidence-based literature has argued that exhaustion generates negative emotions which result in impaired job performance and reduced interpersonal communication (Kahsay et al., 2020; Shaukat et al., 2020). Hence, it is summarized that on days when female nurses experience exhaustion, it is less likely that female nurses exhibit altruism and perform well, and it is more likely that the female nurses exhibit CWB. Therefore;

H5: Exhaustion of female nurses has negative and significant relationships with task performance (5a) and altruism (5b), and a positive relationship with CWB (5c) at private hospitals during the COVID-19 pandemic in Pakistan.

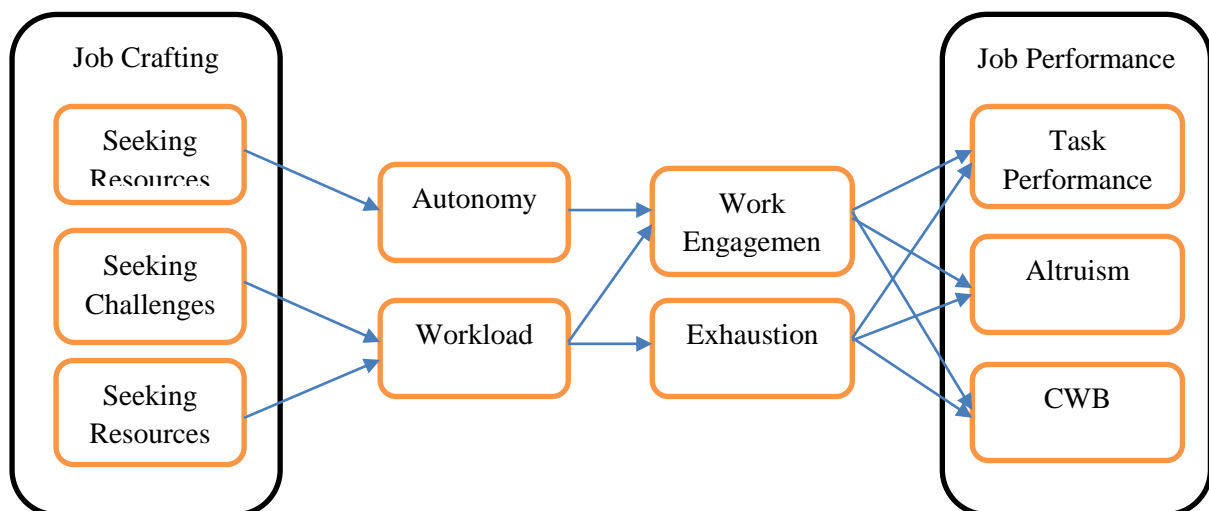Figure 01 entails the theoretical framework of the present study;

Figure 01. Theoretical Framework

In this research, the relationship of job crafting strategies and job performance of female nurses in the form of daily basis CWB, altruism, and task performance during the COVID-19 pandemic is measured. The study uses a quantitative daily diary design method and questioned female nurses from private hospitals during a COVID-19 pandemic for five consecutive working days. A diary design method was used which generally helps in understanding the energy and motivation level of workers, and brings the precipitating conditions and level of study analysis closer in predicting the daily behavior.

Method

Procedure and Participants

Participants of the present study were female nurses from various private hospitals of Rawalpindi and Islamabad, Pakistan. This research has adopted the daily diary approach of data collection and analysis from Demerouti et al (2015) study. Aligning with the Demerouti et al. (2015) study, twenty female research students from a medical university in Islamabad were recruited for approaching the study participants and data collection. The questionnaires and diaries were then distributed to study participants randomly for attaining the diverse (concerning age, education, and years of experience) sample (Demerouti & Rispens, 2014). The research students explained the research objectives to female nurses and provided them a package containing;

a.   an informed consent form describing the research purpose and assuring the confidentiality of responses,
b.   an instructional page to guide the completion of the survey,
c.   a questionnaire, and
d.   a diary booklet.

The general questionnaire was filled by the female nurses and they completed the daily questionnaires during their free time at hospitals and this procedure was repeated for five (05) consecutive working days.

The survey packages were randomly distributed to 200 female nurses (10 packages per research student) in the private hospitals of Rawalpindi and Islamabad. On the fifth working day, 171 female nurses completed the general and daily questionnaires. Hence, the response rate was 85.50%. The participants' demographics are shown in Table 1.

Table 1. Sociodemographic characteristics of female nurses (N=171)

Characteristics	n	%
City		
Rawalpindi	89	52.05
Islamabad	82	47.95
Age		
Less than 30 years	57	33.33
30 to 40 years	78	45.61
More than 40 years	36	21.05
Length of Marriage		
Unmarried	29	16.96
01 to 10 Years	103	60.23
More than 10 years	39	22.81
Family Monthly Income (PKR)*		
Less than 20,000	19	11.11
20,000 to 40,000	121	70.76
More than 40,000	31	18.13
Education		
No Schooling	0	0.00
Up to 10 years of Schooling	51	29.82
More than 10 years of Schooling	120	70.18
Years of Experience		

Less than 03 years	5	2.92
03 to 06 years	23	13.45
More than 06 years	143	83.63

* 01 USD = 165 PKR

Items were adapted from existing literature to measure the present research variables through a general questionnaire and daily questionnaire data collection technique. In the general questionnaire, female were nurses were first questioned regarding their feeling and behavior. Aligning with the study Ohly, Sonnentag, Niessen, and Zapf (2010), shorted scales were used in the daily questionnaire measures to keep the daily survey simple and short.

This research hypothesis was tested through multilevel analysis (Demerouti et al., 2015). This resulted in the two-level model. At the day-level or Level 1, a series of repeated measures were received (within-person; n = 855 study occasions). At the person level or Level 2, measures between persons at individual levels were received (between-person; n = 171 participants). According to Maas and Hox (2004, p.135), "for robust estimations of fixed effects in multilevel modeling a sample of at least 30 at the highest level of analysis is needed". This suggests that the present research sample size (n = 171) offers adequate statistical power for the data analysis. According to Mathiue and Taylor (2007), certain conditions are required to be met to support the H1 to H3 hypothesized mediation.

Results

This research has adopted the data analysis and results technique from Demerouti et al (2015) study. Table 2 presents the means and standard deviations of the study variables.

Table 2. Means and Standard Deviations (SD) of the Variables

(N = 171 Female Nurses x 5 days = 855 Occasions)

S.No.	Variable	Mean	SD
1	Work Experience	17.80	13.38
General Questionnaire			
2	Seeking Resources	3.49	0.58
3	Seeking Challenges	2.79	0.97
4	Reducing Demands	2.00	0.58
5	Autonomy	3.66	0.89
6	Workload	3.18	0.88
7	Work Engagement	3.66	0.82
8	Exhaustion	1.57	0.97
9	Task Performance	4.28	1.06
10	Altruism	3.67	1.04
11	CWB	1.67	0.38
Daily Questionnaire*			
12	Seeking Resources	2.79	0.53
13	Seeking Challenges	2.15	0.55
14	Reducing Demands	1.84	0.49
15	Autonomy	3.82	0.67
16	Workload	3.02	0.79
17	Work Engagement	3.22	0.54
18	Exhaustion	2.14	0.70
19	Task Performance	3.78	0.51
20	Altruism	2.98	0.78
21	CWB	1.53	0.42

* Day-level data were averaged across 5 days

The study has concluded that in all day-level variables, there are significant amounts of within-person and between-person variance.

Testing of Hypothesis

H1, H2, and *H3* suggest that job resources and demands mediate the relationship between job crafting, and exhaustion, and work engagement.

Results are shown in Tables 3, 4, and 5 evident in the relationships of *H1, H2,* and *H3*. Table 3 shows that seeking resources was positively related to autonomy, after controlling for general autonomy and work experience for female nurses during the COVID-19 pandemic in Pakistan. Hence, the relationship is found significant. In addition to this, seeking resources was positively and

significantly related to workload, whereas reducing demands was negatively and significantly related to workload, after controlling for general workload and work experience for female nurses during the COVID-19 pandemic in Pakistan.

Table 3. Multilevel Model (Model 2) Predicting Day-Level Autonomy and Day-Level Workload

(N = 171 Female Nurses x 5 days = 855 Occasions)

Model	Autonomy			Workload		
Variable	Estimate	SE	t	Estimate	SE	t
Intercept	2.699	0.092	37.965***	2.160	0.118	25.137***
Work Experience	0.005	0.001	2.003*	-0.003	0.002	1.197
General Measure	0.450	0.059	6.303***	0.484	0.077	3.013***
Day-Level Seeking Resources	0.201	0.059	2.287**	0.158	0.079	1.960*
Day-Level Seeking Challenges	0.002	0.053	0.086	0.036	0.072	0.517
Day-Level Reducing Demands	0.060	0.060	0.097	-0.225	0.084	-1.618
- 2 x log			772.356			1022.117
Δ - 2 x log			15.138***			13.773***
Df			3			3
Level-1 (within-person) variance	0.209	0.013		0.410	0.069	
Level-2 (between-person) variance	0.254	0.041		0.369	0.025	

*$p < 0.05$, ** $p < 0.01$, *** $p < 0.001$*

Results shown in Table 4 states that seeking resources was positively related to work engagement for female nurses during the COVID-19 pandemic in Pakistan. Hence, the relationship is found significant. In addition to this, reducing demands was negatively and significantly related to work engagement for female nurses during the COVID-19 pandemic in Pakistan. Whereas, both autonomy and workload were positively and significantly related to work engagement.

Table 4. Multilevel Model Predicting Day-Level Work Engagement

(N = 171 Female Nurses x 5 days = 855 Occasions)

Model	Null			1			2			3		
Variable	Estimate	SE	t	Estimate	SE	t	Estimate	SE	t	Estimate	SE	t
Intercept	2.244	0.054	55.962***	2.170	0.064	46.355***	2.168	0.064	31.688***	2.714	0.064	54.475***
Work Experience				0.001	0.001	0.330	0.001	0.001	0.330	0.001	0.001	0.330
General Work Engagement				0.466	0.045	8.767***	0.468	0.045	8.810***	0.467	0.045	8.789***
Day-Level Seeking Resources							0.102	0.043	2.279*	0.071	0.044	0.571
Day-Level Seeking Challenges							0.113	0.038	1.826*	0.118	0.039	1.878*
Day-Level Reducing Demands							-0.203	0.044	3.380***	-0.202	0.046	3.181***
Day-Level Autonomy										0.107	0.035	1.892*
Day-Level Workload										0.072	0.026	1.583*
- 2 x log		600.787			516.791			489.760			474.901	
Δ - 2 x log					82.993***			26.028***			13.856***	
Df					2			3			2	
Level-1 (within-person) variance	0.124	0.006		0.123	0.006		0.115	0.006		0.113	0.005	
Level-2 (between-person) variance	0.285	0.042		0.112	0.018		0.115	0.018		0.116	0.018	

* p < 0.05, ** p < 0.01, *** p < 0.001

Findings

The Monte Carlo test was applied for testing the indirect effects in this research (Demerouti et al., 2015). Results indicated the significant indirect effect relationship of reducing demands with work engagement through workload (lower bound 0.040 to upper bound 0.002) as well as seeking resources with work engagement through autonomy (lower bound 0.005 to upper bound 0.046) at a 95% confidence interval which did not include zero. These results evidence the hypothesized relationship of *H1* and *H (3a)*. Moreover, the relationship of day-level seeking challenges of female nurses with a day-level work engagement is found insignificant. Therefore, *H (2a)* will be rejected. The other indirect effects hypothesized were also found insignificant.

Based on the results of Tables 2 and 4, it could be summarized that the indirect effect relationship of reducing demands with exhaustion through workload has a significant but negative relationship for female nurses in private hospitals during the COVID-19 pandemic. The other indirect effects hypothesized were also found insignificant. For instance, the relationship of work experience of female nurses is found negatively related to day-level exhaustion. Therefore, *H (2b)* will be rejected and *H (3b)* will be accepted.

To test *H4* and *H5* hypotheses, this research has controlled the respective general measure of the performance dimension and work experience, whereas exhaustion and work engagement were included in the equation. Results shown in Table 9 indicated that relationships of work engagement of female nurses with task performance (4a) and altruism (4b) are found significant, whereas the relationship of work engagement with CWB (4c) is found insignificant. So this research will accept *H (4a), H (4b),* and reject *H (4c)*. Moreover, hypothesized relationships of exhaustion of female nurses with task performance (5a) and altruism (5b) are found positive and significant, whereas the relationship of exhaustion with CWB (5c) is found insignificant. Also, work experience was found significant but in a negative relationship with CWB. So the present research will reject *H5*.

Based on the observations of five consecutive days, a positive association between daily seeking resources and daily task performance was identified. This is because female nurses were able to achieve a higher rate of engagement and autonomy in their daily basis job at private hospitals during a COVID-19 pandemic. On days when female nurses employ the job crafting strategy of reducing demand, their task performance gets lower because it reduced work engagement and workload which generally are the triggers of enthusiasm. Moreover, the study has also highlighted that daily reducing demands for female nurses in private hospitals were unfavorable for daily altruism. Moreover, a positive association was identified between daily seeking challenges and daily CWB for female nurses during the COVID-19 pandemic.

Conclusion

The above findings evident the significant role of job crafting in determining organizational behavior. This research has identified that job crafting is considered an important behavior of female nurses in explaining their specific job resources and challenges in private hospitals of Pakistan. Among the three key dimensions of job crafting, only seeking resources is identified to have an advantageous role for female nurses. Inconsistent with the findings of Hobfoll's (2001) study regarding individual capability to accumulate job resources to protect other valued resources, this research has also recognized that on days when female nurses explored more job resources in the private hospitals during the COVID-19 pandemic, they were also able to attain better job performance (Kumar et al., 2021). On the other hand, the job crafting strategy of decreasing demands was found disadvantageous for daily altruism and task performance. Considering reducing demands as a strategy for protecting health or to avoid excessively high demands by female nurses (Jex, 1998; Lotan & Taiar, 2019), it was not a surprise on days when female nurses used this strategy, they were not able to fully comply with their job requirement role regarding helping others, or contributing the extra mile for private hospitals during COVID-19 pandemic. Such female nurses may not consider the task of helping others as a significant portion of their work performance. According to Demeroutie et al. (2014), such employees or female nurses who employ a selection procedure to meet their feelings of exhaustion, for instance, ignoring goal irrelevant activities and deciding on goal priorities, are less adaptive towards change in comparison with those female nurses who have not employed this strategy.

Similarly, on days during a COVID-19 pandemic in Pakistan, when female nurses seek more challenges, they also display more CWB for instance, hiding mistakes and gossiping about others.

_____

This could be the counterintuitive strategy for female nurses and the findings of the present research are also consistent with the existing literature which indicates that acts of social responsibility may generate CWB in situations when female nurses feel obliged to accomplish social responsibility because of hospitals constraints, incompetence, or supervisor demands (Al Thobaity & Alshammari, 2020; Demerouti et al., 2015; Spector & Fox, 2010). The moral licensing theory proposed by Nisan (1990) cited Klotz and Bolino (2013) study evident these findings specifically when female nurses seek for moral equilibrium between good and bad deeds.

The results of this research highlighted that daily job crafting has a significant impact on the daily job performance of female nurses. This is consistent with the findings of Tims et al (2013) study, the results of the present research indicated that on days when female nurses perform job crafting, their job characteristics perception also changes. The study has focused on two critical job characteristics of female nurses in private hospitals, which are autonomy and job resource. Whereas other job characteristics which are workload and job demand are responsible for strain and motivation for female nurses during the COVID-19 pandemic. The female nurses can adjust job characteristics so that they remain healthy and motivated during their job performance. For this reason, a positive association was identified between daily workload and daily work engagement, and a similar positive association between daily exhaustion and altruism was identified.

These research findings support the results of Fredrickson's (2001) theory focused on employee engagement and Hobfoll's (2001) theory focused on employees' exhaustion in an organization.

Significance of the Study

These research findings have important implications, particularly concerning frontline health workers regarding their productivity and engagement who are playing a critical role during the COVID-19 pandemic. Hospitals must stimulate job crafting in general and the seeking resources strategies in particular. These strategies could have advantageous effects on task performance and the altruism of female nurses. The present research also suggested that hospitals should devise strategies to stimulate female nurses for practicing job crafting regularly as it has beneficial effects for the hospitals during the stressful time of the COVID-19 pandemic. Generally, a supervisor in a hospital can act as a role model for explaining female nurses regarding beneficial behavior strategies for achieving a healthy workforce and hospital success.

References

Al Thobaity, A., & Alshammari, F. (2020). Nurses on the Frontline against the COVID-19 Pandemic: An Integrative Review. *Dubai Medical Journal, 3*, 87-92.

Bakker, A. B., & Bal, M. P. (2010). Weekly work engagement and performance: A study among starting teachers. *Journal of Occupational and Organizational Psychology, 83*,189–206.

Bennett, R. J., & Robinson, S. L. (2002). The past, present, and future of workplace deviance research. In J. Greenberg (Ed.), *Organizational behavior: The state of the science (2nd ed., pp. 247–281)*. Mahwah, NJ: Erlbaum.

Bharadwaj, Y. P. (2020). An empirical analysis of occupational stress on organizational image and commitment for medical practitioners' satisfaction in Jawaharlal Nehru Medical College. *International Journal of Work Organisation and Emotion, 11*(3), 194–212.

Bolger, N., Davis, A., & Rafaeli, E. (2003). Diary methods: Capturing life as it is lived. Annual Review of Psychology, 54, 579–616.

Borman, W. C., & Motowidlo, S. J. (1997). Task performance and contextual performance: The meaning for personnel selection research. *Human Performance, 10*, 99–109. http://dx.doi.org/10.1207/ s15327043hup1002_3.

Brandi, U., & Iannone, R.L. (2021). Approaches to learning in the context of work – workplace learning and human resources. *Journal of Workplace Learning, 33*(5), 317-333.

Christian, M. S., Garza, A. S., & Slaughter, J. E. (2011). Work engagement: A quantitative review and test of its relations with task and contextual performance. *Personnel Psychology, 64*, 89–136.

Crimi, C., & Carlucci, A. (2021). Challenges for the female healthcare workers during the COVID-19 pandemic: the need for protection beyond the mask. *Pulmonology, 27*(1), 1-3.

Dalal, R. S. (2005). A meta-analysis of the relationship between organizational citizenship behavior and counterproductive work behavior. *Journal of Applied Psychology, 90*, 1241–1255.

Demerouti, E., & Cropanzano, R. (2010). From thought to action: Employee work engagement and job performance. In A. B. Bakker & M. P. Leiter (Eds.), *Work engagement: A handbook of essential theory and research* (pp. 147–163). New York, NY: Psychology Press.

Demerouti, E., & Rispens, S. (2014). Improving the image of student recruited samples: A commentary. *Journal of Occupational and Organizational Psychology, 87*, 34–41.

Demerouti, E., Bakker, A. B., & Halbesleben, J. R. B. (2015). Productive and Counterproductive Job Crafting: A Daily Diary Study. *Journal of Occupational Health Psychology, 20*(4), 457-469.

Fredrickson, B. L. (2001). The role of positive emotions in positive psychology. The broaden-and-build theory of positive emotions. *American Psychologist, 56*, 218–226.

Gander, M., & McInnes, M. (2021). Can a professional learning community deliver career development learning?" *Journal of Workplace Learning, 33*(7), 523-533.

Gruys, M. L., & Sackett, P. R. (2003). Investigating the dimensionality of counterproductive work behavior. *International Journal of Selection and Assessment, 11*, 30–42.

Hobfoll, S. E. (2001). The influence of culture, community, and the nested-self in the stress process: Advancing conservation of resources theory. *Applied Psychology: An International Review, 50*, 337–421.

Jex, S. M. (1998). Stress and job performance: Theory, research, and implications for managerial practice. Thousand Oaks, CA: Sage.

Kahsay, W. G., Negarandeh, R., & Dehghan N. N. (2020). Sexual harassment against female nurses: a systematic review. *BMC Nurs, 19*, 58.

Karasek, R. A. (1998). Demand/Control Model: A social, emotional, and physiological approach to stress risk and active behavior development. *In J. M. Stellman (Ed.), Encyclopaedia of occupational health and safety* (34.6–34.14). Geneva, Switzerland: ILO.

Kengatharan, N., & Kunatilakam, S. (2020). Work-family conflict among female nurses in the healthcare sector. *International Journal of Work Organisation and Emotion, 11*(3), 213-230.

Klotz, A., & Bolino, M. (2013). Citizenship and counterproductive work behavior: A moral licensing view. *The Academy of Management Review, 38*, 292–306.

Kumar, D., Saghir, T., Ali, G., Yasin, U., Furnaz, S., Karim, M., Hussain, M., Kumari, R., Bai, R., & Kumar, H. (2021). Psychosocial Impact of COVID-19 on Healthcare Workers at a Tertiary Care Cardiac Center of Karachi Pakistan. *J Occup Environ Med, 63*(2), 59-62.

Lazarus, R. S. (1991). Emotion and adaptation. New York, NY: Oxford University Press.

Lotan, D. W., & Taiar, R. (2019). Female nurses: Professional identity in the question of how female nurses perceive their professional identity through their relationships with physicians. *Cogent Medicine, 6*(1).

Maas, C. J., & Hox, J. J. (2004). Robustness issues in multilevel regression analysis. Statistica Neerlandica, 58, 127–137.

MacKenzie, S. B., Podsakoff, P. M., & Fetter, R. (1991). Organizational citizenship behavior and objective productivity as determinants of managerial evaluations of salespersons. *Organizational Behavior and Human Decision Processes, 50*, 123–150.

Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). *Job burnout. Annual Review of Psychology, 52*, 397–422.

Mathieu, J. E., & Taylor, S. R. (2007). A framework for testing mesomediational relationships in organizational behavior. *Journal of Organizational Behavior, 28*, 141–172.

Motowidlo, S. J., & Van Scotter, J. R. (1994). Evidence that task performance should be distinguished from contextual performance. *Journal of Applied Psychology, 79*, 475–480.

Munir, M.M., Munir, M. H., & Rubaca, U. (2021). The Shadow Pandemic: Violence against Women in Pakistan during COVID-19 Lockdown. *Journal of International Women's Studies, 22*(5), 229-248.

Nisan, M. (1990). Moral balance: A model of how people arrive at moral decisions. In T. E. Wren (Ed.), *the moral domain* (pp. 283–314). Cambridge, MA: MIT Press.

Ohly, S., Sonnentag, S., Niessen, C., & Zapf, D. (2010). Diary studies in organizational research: An introduction and some practical recommendations. *Journal of Personnel Psychology, 9*, 79–93.

_____

Petrou, P., Demerouti, E., Peeters, M. C. W., Schaufeli, W. B., & Hetland, J. (2012). Crafting a job on a daily basis: Contextual correlates and the link to work engagement. *Journal of Organizational Behavior, 33*, 1120–1141.

Sadrul, H.S.S.M., Akhtar, A., & Maliha, S. R. (2021). Initiatives are taken by NGOs and private companies to fight the COVID-19 pandemic. *International Journal of Work Organisation and Emotion, 12*(1), 86–92.

Schaufeli, W. B. (2006). The balance of giving and take: Toward a social exchange model of burnout. *Revue Internationale de Psychologie Sociale, 1*, 75–119.

Schaufeli, W. B., Bakker, A. B., & Salanova, M. (2006). The measurement of work engagement with a brief questionnaire: A cross-national study. *Educational and Psychological Measurement, 66*, 701–716.

Shaukat, N., Ali, D. M., & Razzak, J. (2020). Physical and mental health impacts of COVID-19 on healthcare workers: a scoping review. *Int J Emerg Med, 13*, 40.

Spector, P. E., & Fox, S. (2010). Counterproductive work behavior and organizational citizenship behavior: Are they opposite forms of active behavior? *Applied Psychology: An International Review, 59*, 21–39.

Taris, T. W. (2006). Is there a relationship between burnout and objective performance? A critical review of 16 studies. *Work & Stress, 20*, 316–334.

Tims, M., & Bakker, A. B. (2010). Job crafting: Towards a new model of individual job redesign. *South African Journal of Industrial Psychology, 36*, 1–9.

Tims, M., Bakker, A. B., & Derks, D. (2013). The impact of job crafting on job demands, job resources, and well-being. *Journal of Occupational Health Psychology, 18*, 230–240.

Wrzesniewski, A., & Dutton, J. E. (2001). Crafting a job: Revisioning employees as active crafters of their work. *Academy of Management Review, 26*, 179–201.

Xanthopoulou, D., Baker, A. B., Heuven, E., Demerouti, E., & Schaufeli, W. B. (2008). Working in the sky: A diary study on work engagement among flight attendants. *Journal of Occupational Health Psychology, 13*, 345–356.

Yaqub, Y., Singh, A.K., and Dutta, T. (2021). An empirical study of factors influencing training transfer in the management training intervention. *Journal of Workplace Learning, 33*(5), 361-374.