

Original Research

Received 04 June 2026

Revised 16 July 2026

Accepted 31 July 2026

Natural Resources for Human Health 2026, Vol. 6 (13s): 103–110

KEYWORDS:

emotional intelligence; leadership style; job burnout; work engagement; HIV care providers; PLS-SEM

Emotional Intelligence and Leadership Style as Drivers of Work Engagement among HIV Care Providers: The Mediating Role of Job Burnout

Chintya Devi Oktovianus^{1*}, Sudirman Zaid², Laode Asfahyadin Aliddin³, Wahyuniati Hamid⁴

¹Doctoral Program in Management Science, Postgraduate Program, Halu Oleo University, Kendari, Indonesia

^{2,3,4} Department of Management, Halu Oleo University, Kendari, Indonesia

*Corresponding author: Chintya Devi Oktovianus

ABSTRACT: This study examines the effects of emotional intelligence and leadership style on job burnout and work engagement among HIV Care, Support, and Treatment (PDP) service providers in Kendari City, Indonesia, and tests the mediating role of job burnout. A quantitative cross-sectional design was employed. The population consisted of 57 HIV PDP service providers, all of whom participated through a census approach. Data were collected using a structured questionnaire and analyzed with Partial Least Squares Structural Equation Modeling (PLS-SEM). Emotional intelligence significantly reduced job burnout ($\beta = -0.362$, $p = 0.003$) and significantly increased work engagement ($\beta = 0.232$, $p = 0.042$). Leadership style did not significantly affect job burnout ($\beta = -0.046$, $p = 0.796$), but it positively affected work engagement ($\beta = 0.291$, $p = 0.015$). Job burnout negatively affected work engagement ($\beta = -0.366$, $p < 0.001$). The indirect effect of emotional intelligence on work engagement through job burnout was significant ($\beta = 0.133$, $p = 0.040$), indicating partial mediation. The model explained 14.6% of the variance in job burnout and 42.5% of the variance in work engagement. These findings highlight emotional intelligence as an important personal resource and effective leadership as an organizational resource for sustaining engagement among HIV care providers working under emotionally demanding conditions.

1. INTRODUCTION

Human resource management in health services must simultaneously protect employee well-being and sustain high-quality service delivery. This challenge is particularly salient in HIV Care, Support, and Treatment (PDP) services, where providers perform clinical, counseling, psychosocial, administrative, and follow-up responsibilities while interacting continuously with patients who require long-term care. Strategic human resource management emphasizes that human capabilities are central organizational resources (Wright & Snell, 1998), while the resource-based view argues that valuable and difficult-to-imitate human resources can underpin organizational effectiveness (Barney, 1991). In healthcare settings, therefore, maintaining the psychological resources of frontline personnel is not peripheral to performance; it is integral to service continuity.

The work context of HIV service providers is emotionally demanding. Beyond antiretroviral treatment, PDP personnel provide adherence counseling, psychosocial support, patient tracing, reporting, and coordination across programs. In Kendari City, services are provided across hospitals and primary healthcare centers, while the growing complexity of HIV treatment and prevention increases the breadth of tasks handled by personnel. The dissertation underlying this article reports 1,797

cumulative people living with HIV recorded in Kendari, with 75% actively receiving antiretroviral therapy and 51% achieving viral suppression, alongside continuing identification of new cases. These conditions increase the need for sustained, engaged, and psychologically resilient health workers.

Work engagement represents a positive work-related state characterized by vigor, dedication, and absorption (Schaufeli et al., 2002; Schaufeli et al., 2006). In nursing and healthcare, engagement is associated with the investment of cognitive, emotional, and physical energy in professional roles (Bargagliotti, 2012). Engaged employees are more likely to remain energetic, dedicated, and attentive even under demanding conditions. However, persistent job demands can deplete personal resources and generate burnout, thereby undermining engagement (Maslach et al., 2001; Schaufeli et al., 1996). A recent systematic review and meta-analysis also confirms the close inverse relationship between burnout and work engagement among nursing staff (Vargas-Benítez et al., 2023).

Job burnout is commonly conceptualized as a chronic response to prolonged work stress, involving exhaustion, cynicism or depersonalization, and reduced professional efficacy (Maslach et al., 2001; Schaufeli et al., 1996). Healthcare workers are particularly vulnerable because their work combines high responsibility, emotional labor, time pressure, and frequent interpersonal contact. Research among health professionals and students has repeatedly linked burnout to adverse psychological and work outcomes (Taylor et al., 2024; Shariatpanahi et al., 2022). The conservation of resources perspective further suggests that individuals experience strain when valued psychological resources are threatened or depleted (Wright & Hobfoll, 2004).

Emotional intelligence may serve as a personal resource that enables employees to recognize, understand, use, and regulate emotion. Salovey and Mayer (1990) introduced emotional intelligence as the capacity to process emotional information, while Wong and Law (2002) operationalized the construct through self-emotional appraisal, others' emotional appraisal, use of emotion, and regulation of emotion. In emotionally intensive occupations, these abilities can support adaptive coping, interpersonal effectiveness, and psychological regulation. Empirical evidence shows that emotional intelligence is negatively associated with burnout (Silbaugh et al., 2023; Taylor et al., 2024; Alshammari et al., 2025) and positively related to work engagement (Su et al., 2022; Yuan et al., 2025; Salcedo et al., 2025; Abadi & Hakim, 2025).

Leadership is another organizational resource with the potential to shape employee energy and involvement. Leadership style determines how supervisors influence, support, direct, and motivate followers. Evidence across sectors indicates that transformational and supportive forms of leadership can foster employee engagement (Thanh & Quang, 2022), while systematic reviews in nursing show that nurse-manager leadership styles are meaningfully associated with work engagement (Alluhaybi et al., 2023). Leadership has also been studied as an antecedent of burnout, although effects vary across contexts and leadership forms (Wei et al., 2020; Roshida & Martiana, 2023). This inconsistency makes it important to test leadership effects in specialized HIV services.

Social Exchange Theory provides a complementary explanation for the leadership–engagement relationship. Social relationships develop through reciprocal exchanges of valued resources (Homans, 1958; Blau, 1964), and the norm of reciprocity suggests that favorable treatment tends to be reciprocated with positive attitudes and behavior (Gouldner, 1960). When employees perceive support, respect, direction, and fairness from leaders, they may respond with stronger dedication and engagement. Conversely, insufficient support under demanding conditions may accelerate resource loss and psychological fatigue.

Although emotional intelligence, leadership, burnout, and engagement have been examined separately, fewer studies integrate these variables in a single model among HIV PDP service providers. Existing research has largely focused on nurses, teachers, students, or general employees, leaving a contextual gap in multidisciplinary HIV services. The present study addresses this gap by examining whether emotional intelligence and leadership style predict burnout and work engagement, and whether burnout transmits the effect of emotional intelligence to engagement. This integrated model contributes to human resource management research by linking personal emotional resources, leadership processes, occupational strain, and positive work functioning in a high-demand public health context.

2. MATERIALS AND METHODS

2.1 Study Design and Setting

This study used a quantitative, explanatory, cross-sectional design. The research was conducted among personnel providing HIV Care, Support, and Treatment (PDP) services in Kendari City, Southeast Sulawesi, Indonesia. The study focused on the relationships among emotional intelligence, leadership style, job burnout, and work engagement.

2.2 Population and Sample

The population comprised 57 HIV PDP service providers. Because the population was limited and fully accessible, a census technique was applied and all 57 personnel were included as respondents. Most respondents were 31–40 years old (52.63%), held a bachelor's degree (56.14%), had 6–10 years of service (31.58%), worked eight hours per day (64.91%), and were married (85.96%).

2.3 Measures

Emotional intelligence was measured through four dimensions: self-emotional appraisal, others' emotional appraisal, use of emotion, and regulation of emotion, consistent with Wong and Law (2002). Leadership style was represented by five leadership dimensions used in the dissertation instrument. Job burnout was measured through three dimensions reflecting the burnout construct, while work engagement was measured through vigor, dedication, and absorption, consistent with Schaufeli et al. (2002, 2006). Responses were obtained through a structured Likert-type questionnaire.

2.4 Data Analysis

Data were analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM). The measurement model was evaluated through indicator loadings, average variance extracted (AVE), discriminant validity, and composite reliability. The structural model was assessed using R^2 , predictive relevance (Q^2), path coefficients, and p-values. Statistical significance was evaluated at $\alpha = 0.05$. Mediation was determined by comparing the significance of direct and indirect effects.

3. RESULTS AND DISCUSSION

3.1 Measurement Model

All construct-level indicators showed acceptable outer loadings, ranging from 0.703 to 0.925. AVE values were above 0.50 for emotional intelligence (0.647), leadership style (0.556), job burnout (0.591), and work engagement (0.600). Composite reliability values ranged from 0.812 to 0.879, exceeding the conventional 0.70 threshold. These results indicate adequate convergent validity and internal consistency.

Construct	AVE	Composite reliability	Interpretation
Emotional intelligence	0.647	0.879	Valid and reliable
Leadership style	0.556	0.862	Valid and reliable
Job burnout	0.591	0.812	Valid and reliable
Work engagement	0.600	0.818	Valid and reliable

Table 1. Measurement model quality criteria.

3.2 Structural Model and Hypothesis Testing

The structural model explained 14.6% of the variance in job burnout ($R^2 = 0.146$) and 42.5% of the variance in work engagement ($R^2 = 0.425$). The model's Q^2 value was 0.509, indicating predictive relevance. Five of the six proposed relationships were statistically significant.

Hypothesis	Relationship	β	p-value	Decision	Meaning
H1	Emotional intelligence $\rightarrow$ Job burnout	-0.362	0.003	Supported	Negative

					significant
H2	Emotional intelligence → Work engagement	0.232	0.042	Supported	Positive significant
H3	Leadership style → Job burnout	-0.046	0.796	Not supported	Not significant
H4	Leadership style → Work engagement	0.291	0.015	Supported	Positive significant
H5	Job burnout → Work engagement	-0.366	<0.001	Supported	Negative significant
H6	Emotional intelligence → Job burnout → Work engagement	0.133	0.040	Supported	Partial mediation

Table 2. Structural model and hypothesis testing.

3.3 Emotional Intelligence and Job Burnout

The negative effect of emotional intelligence on job burnout ($\beta = -0.362$, $p = 0.003$) indicates that providers who are better able to appraise and regulate emotions experience lower occupational exhaustion. This finding is theoretically consistent with the view of emotional intelligence as a personal coping resource (Salovey & Mayer, 1990; Wong & Law, 2002). In a service environment involving stigma, long-term patient relationships, adherence problems, and emotionally sensitive communication, emotional regulation can reduce the accumulation of psychological strain. The result is consistent with evidence from medical students, school leaders, healthcare trainees, and hospital nurses showing an inverse relationship between emotional intelligence and burnout (Shariatpanahi et al., 2022; Silbaugh et al., 2023; Taylor et al., 2024; Alshammari et al., 2025). It also aligns with conservation of resources theory, because emotional competencies help protect individuals from resource depletion under persistent demands (Wright & Hobfoll, 2004).

3.4 Emotional Intelligence and Work Engagement

Emotional intelligence positively affected work engagement ($\beta = 0.232$, $p = 0.042$). Personnel who understand their own emotions, recognize others' emotions, use emotion constructively, and regulate affect are better positioned to sustain energy and dedication. This result supports recent studies reporting positive associations between emotional intelligence and engagement across educational, organizational, and healthcare-related contexts (Su et al., 2022; Yuan et al., 2025; Salcedo et al., 2025; Abadi & Hakim, 2025; Abaker et al., 2025). The finding is especially relevant to HIV care, where empathy and emotional self-management are required simultaneously. Emotional intelligence may therefore function not only as a buffer against strain but also as an activating resource that supports positive involvement in work.

3.5 Leadership Style, Job Burnout, and Work Engagement

Leadership style did not significantly predict job burnout ($\beta = -0.046$, $p = 0.796$). This result suggests that burnout among HIV PDP personnel may be driven more strongly by direct job demands, emotional exposure, workload, and personal coping resources than by leadership behavior alone. Prior reviews show that leadership can influence nurse burnout, but the strength and direction of the relationship vary across leadership forms and work environments (Wei et al., 2020; Roshida & Martiana, 2023). In a small specialized service network, employees may also experience similar workload pressures regardless of the leadership behaviors perceived in their immediate unit.

By contrast, leadership style positively affected work engagement ($\beta = 0.291$, $p = 0.015$). This supports Social Exchange Theory: supportive and effective leadership provides socioemotional resources that employees can reciprocate through greater dedication and involvement (Blau, 1964; Gouldner, 1960). The result is consistent with evidence that leadership styles are associated with engagement among nurses and public-sector employees (Alluhaybi et al., 2023; Thanh & Quang, 2022). Thus, leadership may have a more immediate role in mobilizing enthusiasm and commitment than in directly eliminating accumulated burnout.

3.6 Job Burnout and Work Engagement

Job burnout had a significant negative effect on work engagement ($\beta = -0.366$, $p < 0.001$). As exhaustion and detachment increase, the energy available for vigor, dedication, and absorption decreases. This pattern is consistent with the conceptual opposition between burnout and engagement (Schaufeli et al., 2002) and with evidence from nursing that high burnout is systematically associated with reduced engagement (Vargas-Benítez et al., 2023). The finding also supports the practical importance of workload management, recovery opportunities, peer support, and psychological resources in sustaining HIV service quality.

3.7 Mediating Role of Job Burnout

The indirect effect of emotional intelligence on work engagement through job burnout was positive and significant ($\beta = 0.133$, $p = 0.040$). Because the direct emotional intelligence–engagement path remained significant ($\beta = 0.232$, $p = 0.042$), burnout functioned as a partial mediator. Emotional intelligence therefore appears to strengthen engagement through two mechanisms: directly, by supporting constructive emotional functioning, and indirectly, by reducing burnout. This finding closely corresponds with Alshammari et al. (2025), who modeled burnout as a mediator between emotional intelligence and work engagement among hospital nurses. For HIV PDP services, the result implies that emotional intelligence development should be paired with organizational measures aimed at preventing chronic exhaustion.

3.8 Theoretical and Managerial Implications

Theoretically, the findings integrate personal resources, leadership resources, burnout, and engagement within a specialized health-service context. Emotional intelligence emerges as both a protective and motivational resource, while leadership primarily strengthens engagement. The partial mediation result clarifies that positive work engagement cannot be explained only by the absence of burnout; employees also require resources that actively generate energy and dedication. Managerially, HIV service organizations should incorporate emotional intelligence development into training, strengthen supportive and adaptive supervisory practices, monitor signs of chronic exhaustion, distribute workloads more equitably, and provide structured recovery and psychosocial support. These interventions are particularly important for personnel responsible for clinical care, counseling, adherence support, tracing, and program reporting.

4. CONCLUSION

This study demonstrates that emotional intelligence is an important determinant of both lower job burnout and higher work engagement among HIV PDP service providers in Kendari City. Leadership style significantly increases work engagement but does not directly reduce burnout. Job burnout significantly decreases work engagement and partially mediates the influence of emotional intelligence on engagement. The findings indicate that sustaining engagement in emotionally demanding HIV services requires simultaneous investment in individual emotional capabilities and organizational leadership, accompanied by explicit burnout-prevention strategies. The relatively modest R^2 for burnout also suggests that future studies should incorporate workload, staffing adequacy, organizational support, job demands-resources, psychological capital, and recovery experiences, preferably using larger multi-site and longitudinal samples.

ACKNOWLEDGEMENTS

The authors express their appreciation to the HIV Care, Support, and Treatment (PDP) service providers and participating health facilities in Kendari City for their valuable participation and support during data collection.

AUTHOR CONTRIBUTIONS

Chintya Devi Oktovianus: Conceptualization, investigation, data collection, formal analysis, writing—original draft.

Sudirman Zaid: Supervision, conceptualization, methodology, writing—review and editing.

Laode Asfahyadin Aliddin: Supervision, methodology, validation, writing—review and editing.

Wahyuniati Hamid: Supervision, validation, interpretation, writing—review and editing.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

ETHICS STATEMENT

This manuscript is derived from a doctoral dissertation involving human respondents. Participation was voluntary and confidentiality was maintained. The final journal submission should insert the formal ethics committee name, approval number, and approval date exactly as stated in the study's ethics documentation.

DATA AVAILABILITY STATEMENT

The data supporting the findings of this study are available from the corresponding author upon reasonable request, subject to confidentiality and applicable ethical requirements.

REFERENCES

- [1] Abadi, M. Z., & Hakim, Z. A. (2025). The relationship between emotional intelligence and work engagement among employees in small growing company. *Psycho Idea*, 23(2), 79–87.
- [2] Abaker, M., Noureldin, A., Aboueldahab, M., Fakhfakh, A., & Al-Hariry, B. (2025). Mindfulness and work engagement: How emotional intelligence bridges the gap. *Journal of Management World*, 2025(2), 320–332.
- [3] Alligood, M. R. (2014). *Nursing Theorists and Their Work* (8th ed.). Elsevier.
- [4] Alluhaybi, A., Wilson, A., Usher, K., & Durkin, J. (2023). Impact of nurse manager leadership styles on work engagement: A systematic literature review. *Journal of Nursing Management*, 2023, 5090276. <https://doi.org/10.1155/2023/5090276>
- [5] Alshammari, B., Pangket, P., Alrasheeday, A., Baghdadi, N., Alkubati, S. A., Cabansag, D., et al. (2025). The mediating role of burnout in the relationship between emotional intelligence and work engagement among hospital nurses: A structural equation modeling approach. *Nursing Reports*, 15(6), 208. <https://doi.org/10.3390/nursrep15060208>
- [6] Anand, A. A., & Acharya, S. N. (2021). Employee engagement in a remote working scenario. *International Research Journal of Business Studies*, 14(2), 119–127.
- [7] Anderson, M. H., & Sun, P. Y. (2017). Reviewing leadership styles: Overlaps and the need for a new full-range theory. *International Journal of Management Reviews*, 19(1), 76–96.
- [8] Bargagliotti, L. A. (2012). Work engagement in nursing: A concept analysis. *Journal of Advanced Nursing*, 68(6), 1414–1428. <https://doi.org/10.1111/j.1365-2648.2011.05859.x>
- [9] Barney, J. (1991). Firm resources and sustained competitive advantage. *Journal of Management*, 17(1), 99–120.
- [10] Blau, P. M. (1964). *Exchange and Power in Social Life*. Wiley.
- [11] Deci, E. L., & Ryan, R. M. (2000). The 'what' and 'why' of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, 11(4), 227–268.
- [12] Gouldner, A. W. (1960). The norm of reciprocity: A preliminary statement. *American Sociological Review*, 25(2), 161–178.
- [13] Homans, G. C. (1958). Social behavior as exchange. *American Journal of Sociology*, 63(6), 597–606.
- [14] Maslach, C., & Jackson, S. E. (1984). Burnout in organizational settings. *Applied Social Psychology Annual*, 5, 133–153.
- [15] Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52, 397–422.
- [16] Mayer, J. D., Salovey, P., & Caruso, D. R. (2000). Models of emotional intelligence. In R. J. Sternberg (Ed.), *Handbook of Intelligence*. Cambridge University Press.
- [17] Rosales, R. A., Labrague, L. J., & Rosales, G. L. (2013). Nurses' job satisfaction and burnout: Is there a connection? *International Journal of Advanced Nursing Studies*, 2(1), 1–10.
- [18] Roshida, D. S., & Martiana, T. (2023). Leadership style influence on nurses' burnout: A systematic review. *The Indonesian Journal of Public Health*, 18(2), 341.
- [19] Roy, C. (2009). *The Roy Adaptation Model* (3rd ed.). Pearson.
- [20] Salcedo, J., Garza, A., Gandolfi, F., Gutierrez, M., & Treviño, B. (2025). The effect of emotional intelligence on work engagement: Validation of the Emotional Intelligence Self-Instrument for Latin America. *International Journal of Innovative Research and Scientific Studies*, 8(2), 1321–1330.

- [21] Salovey, P., & Mayer, J. D. (1990). Emotional intelligence. *Imagination, Cognition and Personality*, 9(3), 185–211.
- [22] Sarmiento, T. P., Laschinger, H. K. S., & Iwasiw, C. (2004). Nurse educators' workplace empowerment, burnout, and job satisfaction: Testing Kanter's theory. *Journal of Advanced Nursing*, 46(2), 134–143.
- [23] Schaufeli, W. B. (2012). Work engagement: What do we know and where do we go? *Romanian Journal of Applied Psychology*, 14(1), 3–10.
- [24] Schaufeli, W. B., Bakker, A. B., & Salanova, M. (2006). The measurement of work engagement with a short questionnaire: A cross-national study. *Educational and Psychological Measurement*, 66(4), 701–716. <https://doi.org/10.1177/0013164405282471>
- [25] Schaufeli, W. B., Leiter, M. P., Maslach, C., & Jackson, S. E. (1996). Maslach Burnout Inventory-General Survey (MBI-GS). In C. Maslach, S. E. Jackson, & M. P. Leiter (Eds.), *MBI Manual* (3rd ed.). Consulting Psychologists Press.
- [26] Schaufeli, W. B., Salanova, M., González-Romá, V., & Bakker, A. B. (2002). The measurement of engagement and burnout: A two-sample confirmatory factor analytic approach. *Journal of Happiness Studies*, 3, 71–92.
- [27] Schutte, N. S., Malouff, J. M., Bobik, C., Coston, T. D., Greeson, C., Jedlicka, C., et al. (2001). Emotional intelligence and interpersonal relations. *The Journal of Social Psychology*, 141(4), 523–536.
- [28] Shariatpanahi, G., Asadabadi, M., Rahmani, A., Effatpanah, M., & Ghazizadeh Esslami, G. (2022). The impact of emotional intelligence on burnout aspects in medical students: Iranian research. *Education Research International*, 2022, 5745124. <https://doi.org/10.1155/2022/5745124>
- [29] Silbaugh, M. W., Barker, D. B., & Arghode, V. (2023). Emotional labor, emotional intelligence, and burnout among school principals: Testing a mediational model. *Leadership and Policy in Schools*, 22(1), 73–86. <https://doi.org/10.1080/15700763.2021.1904511>
- [30] Su, H., Zhang, J., Xie, M., & Zhao, M. (2022). The relationship between teachers' emotional intelligence and teaching for creativity: The mediating role of working engagement. *Frontiers in Psychology*, 13, 1014905. <https://doi.org/10.3389/fpsyg.2022.1014905>
- [31] Surana, S., & Singh, A. K. (2009). Development and validation of job burnout scale in the Indian context. *International Journal of Society Systems Science*, 1(4), 351–374. <https://doi.org/10.1504/IJSSS.2009.026509>
- [32] Taylor, M. J., Andreatta, R., Woltenberg, L., Cormier, M., & Hoch, J. M. (2024). The relationship of emotional intelligence to burnout and related factors in healthcare profession students. *Nurse Education Today*, 143, 106387. <https://doi.org/10.1016/j.nedt.2024.106387>
- [33] Thanh, N. H., & Quang, N. V. (2022). Transformational, transactional, laissez-faire leadership styles and employee engagement: Evidence from Vietnam's public sector. *SAGE Open*, 12(2), 21582440221094606. <https://doi.org/10.1177/21582440221094606>
- [34] Vargas-Benítez, M. Á., Izquierdo-Espín, F. J., Castro-Martínez, N., Gómez-Urquiza, J. L., Albendín-García, L., Velando-Soriano, A., & Cañadas-De la Fuente, G. A. (2023). Burnout syndrome and work engagement in nursing staff: A systematic review and meta-analysis. *Frontiers in Medicine*, 10, 1125133. <https://doi.org/10.3389/fmed.2023.1125133>
- [35] Watson, J. (2012). Nursing: The philosophy and science of caring. In *Caring in Nursing Classics: An Essential Resource*.
- [36] Wei, H., King, A., Jiang, Y., Sewell, K. A., & Lake, D. M. (2020). The impact of nurse leadership styles on nurse burnout: A systematic literature review. *Nurse Leader*, 18(5), 439–450. <https://doi.org/10.1016/j.mnl.2020.04.002>
- [37] Wong, C. S., & Law, K. S. (2002). The effects of leader and follower emotional intelligence on performance and attitude: An exploratory study. *The Leadership Quarterly*, 13(3), 243–274.
- [38] Wright, P. M., & Snell, S. A. (1998). Toward a unifying framework for exploring fit and flexibility in strategic human resource management. *Academy of Management Review*, 23(4), 756–772. <https://doi.org/10.5465/amr.1998.1255637>
- [39] Wright, T. A., & Hobfoll, S. E. (2004). Commitment, psychological well-being and job performance: An examination of conservation of resources theory and job burnout. *Journal of Business and Management*, 9(4), 389–406.
- [40] Xing, Z. (2022). English as a foreign language teachers' work engagement, burnout, and their professional identity. *Frontiers in Psychology*, 13, 916079. <https://doi.org/10.3389/fpsyg.2022.916079>
- [41] Yuan, H., Yan, Z., Zhao, Y., & Lei, J. (2025). The relationship of rural kindergarten teachers' emotional intelligence and work engagement in China: The chain mediation role of emotional labor strategies and general self-efficacy. *BMC Psychology*, 13(1), 154. <https://doi.org/10.1186/s40359-025-02475-9>

- [42] Zeng, J. F., Xiao, A. X., Ye, J. R., Cai, H. T., Li, W. M., Xia, Z. C., et al. (2020). Occupational burnout in nurses: A concept analysis. *Frontiers of Nursing*, 7(1), 1–8.