



Article

The Stress-Induced Impact of COVID-19 on Tourism and Hospitality Workers

Sung-Eun Kang ¹, Changyeon Park ², Choong-Ki Lee ^{2,*}  and Seunghoon Lee ¹ 

¹ Department of Recreation, Parks and Tourism Sciences, Texas A&M University, College Station, TX 77843, USA; skang7693@gmail.com (S.-E.K.); shlee@tamu.edu (S.L.)

² College of Hotel & Tourism Management, Kyung Hee University, Seoul 02447, Korea; changyeon1@naver.com

* Correspondence: cklee@khu.ac.kr; Tel.: +82-2-961-9430

Abstract: This study explores how COVID-19-induced stress (CID) influences organizational trust, job satisfaction, self-esteem, and commitment in tourism and hospitality organizations. A total of 427 tourism affiliated employees in South Korea participated in an online survey. Using structural equation modelling (SEM), the proposed conceptual model reveals that CID stress in tourism/hospitality employees is negatively related to organizational trust, job satisfaction, and self-esteem which, in turn, is positively related to organizational commitment. CID stress also indirectly affects organizational commitment. The findings have significant strategic implications for tourism and hospitality organizations—specifically, the provision of instrumental resources (e.g., safety glasses, latex gloves, hand sanitizers, facial masks) to alleviate their employees' work-related stress during pandemics.

Keywords: Covid-19-induced stress; organizational trust; job satisfaction; self-esteem; organizational commitment



Citation: Kang, S.-E.; Park, C.; Lee, C.-K.; Lee, S. The Stress-Induced Impact of COVID-19 on Tourism and Hospitality Workers. *Sustainability* **2021**, *13*, 1327. <https://doi.org/10.3390/su13031327>

Received: 6 January 2021

Accepted: 22 January 2021

Published: 27 January 2021

Publisher's Note: MDPI stays neutral with regard to jurisdictional claims in published maps and institutional affiliations.



Copyright: © 2021 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

1. Introduction

The novel coronavirus (COVID-19), believed to have originated in Wuhan, China, has infected more than six million people in 188 countries and killed over 500,000 [1]. Given the relatively high mortality of COVID-19, compared to other influenza-type diseases, and the ease of its human-to-human transmission, the World Health Organization (WHO) labelled COVID-19 a pandemic. Many countries have declared a temporary suspension of public/private outdoor activities and closed non-essential businesses.

According to the World Travel and Tourism Council (WTTC), more than 50 million tourism/hospitality affiliated jobs are currently at risk [2]. While many services such as administration, education, training, and libraries can be operated from home, the majority of front-line staff in sales-associated industries cannot work remotely [3]. In particular, most tourism and hospitality employees cannot work from home (e.g., flight attendants, front-desk employees, cleaners). Hotel, airline, and cruise-ship reservations have fallen dramatically, leaving those industries struggling to stay in operation [4]. According to Fernandes [5], the 2020 pandemic has reduced employment hours and salaries in tourism and led to many employees taking temporary unpaid leaves.

It is not surprising, then, that tourism and hospitality operators are coping with high levels of stress, anxiety, and uncertainty [6]. Front-line tourism/hospitality workers face the additional pressure of dealing with customers during a pandemic. Personal interviews with airline (female, 27 years) and hotel front-line staff (female, 25 years) reveal that employees (e.g., Asiana Airlines, Lotte Hotel) are wearing latex gloves and face masks to reduce the risk of infection and mitigate anxieties. Furthermore, ground staff in the airline industry are worried about pay cuts and temporary unpaid furloughs (female, 35 years). Since few tourism and hospitality studies have focused on the perceived stress of front-line employees, quantitatively investigated studies are necessary to address workplace concerns, such as occupational frustration, job satisfaction, and work performance during a

pandemic. Most importantly, the provision of strategic crisis management is warranted to relieve employee stress and build trust among those at risk of contracting the virus while at work.

Thus far, the research has focused on the high levels of depression, anxiety, insomnia, and stress-related symptoms of healthcare workers during the present pandemic [7,8], but few studies have considered the welfare of tourism/hospitality-affiliated staff and their concerns in the workplace. The question of to what extent tourism/hospitality operators are coping with fear and frustration and how this affects their trust and commitment to their company during a pandemic remains unanswered. For this reason, this study explores how perceived levels of stress in the tourism/hospitality industry influence the organizational trust, job satisfaction, self-esteem, and commitment to the company/organization of its employees during a pandemic. Understandably, the chief concern during a pandemic is the safety and emotional well-being of medical staff and other front-line workers, including any post-traumatic stress they may experience [9,10]. Investigating these factors should help tourism and hospitality organizations determine ways to safeguard their employees' physical and psychological wellbeing and increase their trust and organizational commitment. This study divides into five parts. Chapter 1 provides a background of the COVID-19 pandemic and states the study's purpose. Chapter 2 reviews the related literature of major concepts and proposes eight hypotheses. Chapter 3 describes the study's methodology and Chapter 4 explains the results of the research model and hypotheses. Chapter 5 discusses the research findings, theoretical/practical implications, and limitations.

2. Literature Review

2.1. COVID19-Induced Stress (CID)

According to Adger [11], stress refers to an unexpected event or circumstance that threatens us in some way. Lazarus [12] described stress as feelings of anxiety and worry that are physically and psychologically difficult to confront. Jamal [13] defined work-related stress as an "individual's reactions to the characteristics of work environment which appear threatening" (p. 2). Poor et al. [14] suggested that stress occurs in the workplace when an employee believes they are receiving less support from their managers, officials, and colleagues than they should. Therefore, to suppose that stress delivers a sense of negative feelings that can happen unexpectedly, at any time, and disrupt the mind and body, is reasonable.

Currently, many front-line employees face an extreme level of work-related stress and anxiety due to COVID-19. For example, a recent COVID-19-affiliated study by Santarone et al. [15] demonstrated that front-line physicians and nurses are experiencing high levels of stress due to unusual work shifts and extended work hours. Cai et al. [9] asserted that fear of infection, no reliable vaccine, and lack of medical treatment are major factors behind psychological stress among medical front-line staff. Wu et al. [10] also discovered that front-line medical staff score significantly higher levels of psychological stress as compared with a college student group because of close contact with patients, fear of infection, and concerns about spreading the virus to their families.

Studies that investigated the perceived level of stress in tourism/hospitality employees during the COVID-19 pandemic remain limited. To explore the impact of stress from the pandemic on tourism/hospitality employees, the present study developed a COVID-19-induced (CID) stress scale, which was originally developed by Cohen et al. [16]. The Methodology section provides further details.

2.2. Organizational Trust

Organizational trust has been considered an important factor for organizations to strengthen connections with their members. Shockley-Zalabak et al. [17] defined organizational trust as "expectations individuals have about networks of organizational relationships, and behaviours" (p. 37). Guinot et al. [18] referred to it as "trust between supervisors and the subordinates, and trust to the organization as a whole" (p. 561). The

central point is that organizations benefit when their members trust them because, when they do, employees generally have high job satisfaction [19], improved organizational work performance [20] and low levels of turnover intentions [21]. Furthermore, recent evidence from COVID-19 reveals that trust in medical institutions increases the willingness of medical staff to work during a pandemic [22]. Within the tourism and hospitality context, there is a need for affiliated organizations to support their employees by providing tangible/intangible resources for front-line staff. When organizations ignore or fail to respond appropriately to dangerous working conditions, distrust and cynicism are likely to increase.

2.3. Job Satisfaction

Locke [23] defined job satisfaction as “a pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences” (p. 1300). In organizational studies, job satisfaction has been studied extensively due to its far-reaching implication for organizations and employees alike [24]. Spector [25] provided three reasons why it is important from a humanitarian, utilitarian, and organizational functioning perspectives: job satisfaction can reflect a good treatment (humanitarian perspective), lead to positive and negative behaviours (utilitarian perspective) and help diagnose potential problems in an organization (organizational functioning perspective). Cronin et al. [26] also revealed that satisfaction impacts employees’ behavioural intentions as a critical variable. Thus, many studies consider job satisfaction a key variable.

2.4. Self-esteem

Self-esteem can be a crucial personal, social, and psychological element in behavioural studies given that it plays a crucial role in the field of social psychology and affects behaviour [27]. Coopersmith [28] defined self-esteem as “a personal judgment of worthiness that is expressed in the attitudes the individual holds towards himself” (p. 5). Self-esteem is an essential value that impacts one’s life, given that self-esteem is closely related to not only job satisfaction but also life satisfaction [29]. According to Back et al. [30], self-esteem at the organizational level has been defined as how employees fulfil their needs by performing their roles in the organization. Employees who possess high self-esteem consider themselves important, meaningful, and worthwhile [31] and have high job satisfaction [32]. Employees’ self-esteem is positively associated with organizational commitment [33]. Therefore, following previous studies, the current study also includes self-esteem as a mediating variable to explore the association between perceived stress and organizational commitment.

2.5. Job Stress and its Relations to Organizational Trust, Job Satisfaction, and Self-esteem

Given that work-related stress can lead to negative outcomes for employees, companies, and organizations, job stress is an important factor in numerous academic and business studies. Poor et al. [14] discovered stress to be a major determinant of organizational trust for those who work for government institutions in Iran. Moreover, Ahsan et al. [34] surveyed scholars in Malaysia and found that job stress is a significant indicator of decreased job satisfaction among faculty members. The authors revealed that performance pressure is a major component of job stress, which, in turn, leads to decreasing job satisfaction.

Similar results were found in the hospitality industry where workplace stress decreases satisfaction in front-desk staff [35]. Kim et al. [35] found that many employees dealing with jay-customers (e.g., abusive customers) report a higher level of job stress and lower job satisfaction level. Further evidence presented a positive association between job stress and self-esteem. For instance, Yang et al. [36] revealed that when call centre counsellors confront angry and aggressive customers, an increased level of job stress negatively influences their self-esteem. After reviewing the above research, this study predicts that CID stress may negatively affect tourism/hospitality employees’ emotional status as well as harm the workplace. Thus, the following hypotheses are proposed:

Hypothesis 1 (H1). *CID stress negatively influences the organizational trust of tourism/hospitality employees.*

Hypothesis 2 (H2). *CID stress negatively influences the job satisfaction of tourism/hospitality employees.*

Hypothesis 3 (H3). *CID stress negatively influences the self-esteem of tourism/hospitality employees.*

2.6. Organizational Commitment

Organizational commitment is the behaviour, feelings, and desire that individuals have to remain with an organization [37]. Committed employees, thus, tend to share and follow the goals and objectives of their organization and want to remain with it. Allen and Meyer [38] classified organizational commitment into three major dimensions: (a) affective, (b) continuance, and (c) normative commitments. Briefly, Allen and Meyer [38] defined affective commitment as occurring in employees who remain in an organization because they “want to”; continuance commitment occurs in employees who stay because they “need to,” and normative commitment is found in those who stay because they “ought to.” Although not all types of commitment produce a positive outcome for organizations, identifying the commitment type can be useful to better understand the employee’s organizational behaviour.

2.6.1. Affective Commitment

Affective commitment occurs in individuals who are emotionally attached to their company/organization and enjoy being part of it [38]. Given that such employees are intrinsically motivated and self-determined, they tend to share the organization’s goals and commit extra time and effort to help it succeed. Furthermore, their commitment can be seen as a major determinant of dedication and loyalty [39]. Mowday et al. [40] discovered a positive association between affectively committed employees and their involvement with the organization, namely, that those with high affective commitment tend to actively participate in the organization’s activities.

2.6.2. Normative Commitment

Although sceptics argue that normative commitment is similar to affective commitment [41]. Meyer and Parfyonova [42] found subtle differences: although the latter is emotionally tied to an organization, this is not necessarily true of the former. Employees perceive duty and obligation as significant factors for staying with an organization. One of the characteristics of a normatively committed employee is that attitude and behaviour toward an organization are derived from pressures from family expectations, traditions, and/or culture [43]. These internal norms lead employees to stay with an organization because of a sense of obligation or duty to do so.

2.6.3. Continuance Commitment

Individuals with continuance commitment stay in their organizations because of “low perceived alternatives” and “high personal sacrifice” [44]. An employee may continue to work for an organization only because they see no alternative employment or when they believe they have made considerable sacrifices to the organization. Becker’s [45] side-bet theory explains why employees show continuance commitment behaviour in the workplace. According to Becker [45], individual commitment is generated through the process of side betting or investment. Meyer and Allen [46] explained that employees continue their commitment to an organization when they invest significant time, effort, and money in it. If the value and cost (i.e., time, effort, and money) of the investment (i.e., side betting) outweigh the value of leaving the organization, the employee will likely stay.

2.7. Job Satisfaction and its Relations to Organizational Trust, Self-esteem, and Organizational Commitment

Although many researchers consider job satisfaction to be an important factor in predicting self-esteem and organizational commitment, the relationship between job satisfaction and organizational trust remains understudied and only a few studies have investigated this link. For example, Reçica and Doğan [47] studied hotel employees in Kosovo and Turkey and discovered that high levels of employee satisfaction produced increased trust in the organization. Kim [48] reported that higher job satisfaction among music therapists in South Korea results in higher collective self-esteem. Furthermore, casino dealers valued job satisfaction as a principal factor in enhancing their self-esteem and organizational commitment [30] and Al-Aameri [49] revealed that highly satisfied nurses at public hospitals are more likely to be committed to their work than other nurses. In the hotel setting, Yang [50] found that hotel workers with high job satisfaction possess high affective/continuance commitment to their hotel. All of this suggests that employees who are satisfied with their occupation show greater organizational trust, self-esteem, commitment and obligation to their respective company/organization. Thus, this study hypothesizes that:

Hypothesis 4 (H4). *Tourism/hospitality employees' job satisfaction positively influences organizational trust.*

Hypothesis 5 (H5). *Tourism/hospitality employees' job satisfaction positively influences self-esteem.*

Hypothesis 6 (H6a). *Tourism/hospitality employees' job satisfaction positively influences affective commitment.*

Hypothesis 6 (H6b). *Tourism/hospitality employees' job satisfaction positively influences normative commitment.*

Hypothesis 6 (H6c). *Tourism/hospitality employees' job satisfaction positively influences continuance commitment.*

2.8. Organizational Trust and its Relations to Organizational Commitment

Researchers emphasized organizational trust to be an important factor in maintaining employees' commitment to an organization (see [51,52]). For example, in a study by Yilmaz [52], primary-school teachers' trust in administrators was identified to be an important antecedent predicting affective and continuance commitments. Yilmaz [52] revealed that the more primary school teachers exhibit positive views on organizational trust, the more they exhibited higher levels of commitment to their organization. In the hotel setting, Liu et al. [51] also found a positive relationship between organizational trust and organizational commitment. They revealed that when hotel staff members fully trust their organization (i.e., hotel) or its superintendents, those employees accept extra work and greater responsibilities from their organization. Thus, given the preliminary evidence provided above, this study hypothesizes that:

Hypothesis 7 (H7a). *Organizational trust of tourism/hospitality employees positively influences their affective commitment.*

Hypothesis 7 (H7b). *Organizational trust of tourism/hospitality employees positively influences their normative commitment.*

Hypothesis 7 (H7c). *Organizational trust of tourism/hospitality employees positively influences their continuance commitment.*

2.9. Self-Esteem and its Relations to Organizational Commitment

Back et al. [30] revealed a statistically significant link among self-esteem, normative, and continuous organizational commitment existing among South Korean casino dealers: those with high self-esteem tended to have a higher sense of commitment to work and remain in the current organization compared to those with low self-esteem. Choi et al. [53] found that employees who report high levels of self-esteem also report significantly high levels of commitment to their organization. Sadoughi and Ebrahimi [54] similarly discovered a strong correlation between self-esteem and organizational commitment among healthcare staff in Iran. Fundamentally, this selective literature review suggests a positive association between self-esteem and organizational commitment. Therefore, using the multi-dimensional concept of organizational commitment, the present study attempts to identify how the self-esteem of front-line tourism/hospitality employees influences their commitment to their organizations during the COVID-19 crisis. Thus, this study hypothesizes that:

Hypothesis 8 (H8a). *Self-esteem of tourism/hospitality employees positively influences their affective commitment.*

Hypothesis 8 (H8b). *Self-esteem of tourism/hospitality employees positively influences their normative commitment.*

Hypothesis 8 (H8c). *Self-esteem of tourism/hospitality employees positively influences their continuance commitment.*

The present study proposes a research model in which COVID stress, organizational trust, job satisfaction, self-esteem, and organizational commitment are conceptualized and tested for tourism/hospitality affiliated workers in South Korea. The conceptual model is shown below (Figure 1).

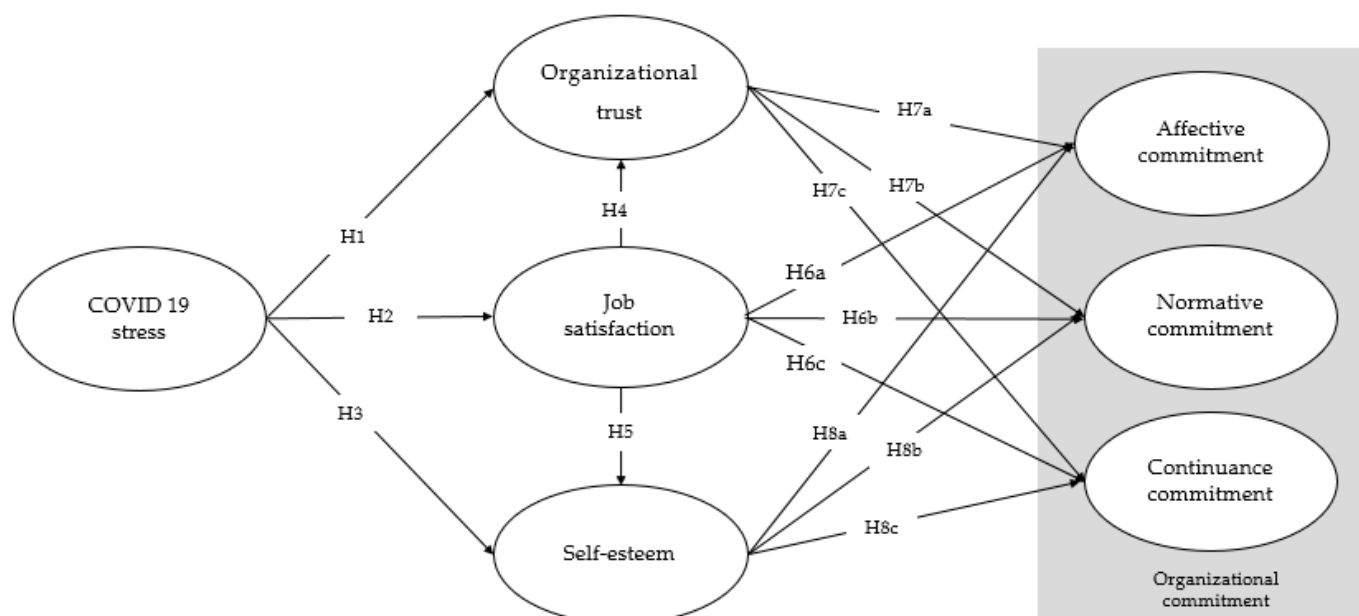


Figure 1. Conceptual model.

3. Research Method

3.1. Measures

The researchers adopted five measures of organizational trust from a study by Lee et al. [19]. This study measured CID stress with 10 items adopted from a study by Cohen et al. [16] and modified them in the context of COVID-19. Job satisfaction was measured with four items and was consistent with a study by Lee et al. [19]. This study adopted three measures of self-esteem from Back et al. [30]. The researchers adopted nine measures of organizational commitment from Back et al.'s [30] study to measure affective, normative, and continuance commitments. This study assessed all measures on a 5-point Likert-type scale (1 = strongly disagree to 5 = strongly agree). After completing all scales, the researchers asked the respondents to state their gender, age, marital status, education level, monthly income level, occupation sector, years of working experience, and changes in employment status after the COVID-19 pandemic.

One native Korean speaker translated the English questionnaire into Korean. For possible translation errors in the survey items, three bilingual scholars fluent in English and Korean implemented back-translation recommended by Brislin [55]. By comparing two versions they confirmed that the English version was accurately translated into Korean. This study further asked two scholars to review the measurement items for content validity to determine whether they were appropriate for assessing the tourism/hospitality industry during the COVID-19 pandemic. This study also conducted pretest to 20 graduate students and tourism/hospitality employees in order to check if the questionnaire made sense. Based on the feedback from these procedures the questionnaire was refined with minor wordings.

3.2. Data Collection

To reduce the risk of COVID-19 transmission, the researchers avoided using a traditional paper-based survey. Instead, this study used Google Forms, an online survey that allows researchers to collect information via a personalized survey. Given that tourism/hospitality employees are the small population, respondents were recruited using a snowball sampling method which contacted friends and colleagues working in the relevant area—travel agencies/hotels/casinos/airlines/convention/food services in South Korea. A survey link was then shared via a chat room of Korean Kakao-talk in which the group could respond. The survey was conducted from June 6 to June 17, 2020 (11 days) and this study collected 455 responses via Google Forms. During the data cleaning process, the researchers found 28 respondents to be outliers (e.g., non-tourism/hospitality affiliated employees) and were therefore removed from the survey. After cleaning the data, the researchers used 427 responses for testing the hypotheses. Given that the sample size for the current study exceeds the criteria by Muthén and Muthén [56], this study confirms that the sample size ($n = 427$) is acceptable.

3.3. Data Analysis

The researchers analysed the collected data using the PLS-SEM, which is broadly used for theoretical confirmation. PLS-SEM is appropriate for a small sample to validate the verification of the model [57]. The specific analysis procedure is as follows. First, this study conducted a frequency analysis to identify demographic characteristics using SPSS 22.0. Second, this study verified reliability, convergent, and discriminant validity by performing confirmatory factor analysis (CFA) on the measurement model using Smart PLS 3.0. Third, this study examined the causal relationship between variables in the research model and tested the hypotheses using Smart PLS 3.0.

4. Results

4.1. Profile of the Sample

Table 1 shows that males (49.4%) and females (50.6%) were similar. 37.5% were age between 40 and 49 years old, followed by age between 30–39 (34.7%). The majority of the participants attended university (46.6%) and were married (59.5%). Roughly a third (35.4%)

of respondents were employed in hotels or resorts, followed by travel agencies (18.5%), and airlines (15.9%). Their careers in tourism/hospitality lasted for 5–10 years (22.5%), 10–15 years (20.6%), and 1–5 years (20.1%). After COVID-19, 49.4% of the respondents had not changed their employment status, but 50.6% had changed, which included short-term employment (13.6%), paid leave (21.6%), unpaid leave (12.4%), recommended resignation (2.1%) and laid off (0.9%).

Table 1. Profile of respondents.

Characteristics	n	%	Characteristics	n	%
Gender			Occupation		
Male	211	49.4	Travel agency	79	18.5
Female	216	50.6	Casino	36	8.4
Age			Hotel, Resort	151	35.4
20–29	71	16.6	Airline	68	15.9
30–39	148	34.7	Food service	20	4.7
40–49	160	37.5	Convention	9	2.1
50–59	39	9.1	Education, Researcher	58	13.6
60 and over	9	2.1	Other	6	1.4
Education level			Career period		
High school	10	2.3	Less than 1 year	21	4.9
2-year college	58	13.6	1–5 years	86	20.1
University	199	46.6	5–10 years	96	22.5
Graduate school	160	37.5	10–15 years	88	20.6
Marital status			15–20 years	82	19.2
Single	166	38.9	Over 20 years	54	12.7
Married	254	59.5	Status of employment change		
Other	7	1.6	No change	211	49.4
Monthly household income (KRW *)			Shortened work time	58	13.6
Less than 2.00 million	33	7.7	Paid leave	92	21.6
2.00–2.99 million	122	28.6	Unpaid leave	53	12.4
3.00–3.99 million	124	29	Recommended resignation	9	2.1
4.00–4.99 million	74	17.3	Laid off	4	0.9
5.00–5.99 million	32	7.5			
6.00 million or over	42	9.9			

Note: * US \$1 = 1250 KRW (Korean won).

4.2. Test of Common Method Bias

If data are collected from a single method, common method bias (CMB) will be an issue [58]. The study conducted Harman's single-factor test [59] to assess CMB. This study shows that the single factor explained 34.52% of the variance and, thus, CMB was not a problem any more because the variance of a single factor lower than 50% is considered acceptable [60].

4.3. Measurement Model

This study conducted CFA using PLS-SEM to verify the construct validity of the measurement model. Table 2 presents that all the factor loadings were significant and ranged from 0.702–0.953, exceeding the criteria of 0.7, and the average variance extracted (AVE) ranged from 0.572–0.834, exceeding the criteria of 0.5, which confirmed convergent validity [57]. Specifically, this study deemed all constructs reliable because Cronbach's alphas were from 0.754–0.905 and composite reliability (CR) values were from 0.842–0.938, which were all higher than 0.70 [57]. Table 3 exhibits that the square root value of AVE between each pair of constructs was higher than the corresponding correlation coefficient, confirming discriminant validity. Moreover, the effect size (Q^2) values greater than zero for endogenous variables indicated acceptable predictive relevance [57].

Table 2. Results of confirmatory factor analysis.

Items	λ	M	SD	SK	KU	Convergent validity		
						AVE	CR	rho_A
COVID-19-induced stress								
After the coronavirus crisis, how often have you felt confident about your ability to handle your personal problems?	0.748	2.99	0.789	−0.152	0.224	0.572	0.842	0.783
After the coronavirus crisis, how often have you felt that things were going your way?	0.732	3.15	0.813	−0.369	0.001			
After the coronavirus crisis, how often have you been able to control irritations in your life?	0.702	2.89	0.749	−0.394	0.011			
After the coronavirus crisis, how often have you felt that you were on top of things?	0.837	2.96	0.724	−0.279	0.402			
Organizational trust								
Our organization treats me fairly and properly.	0.866	3.52	.873	−0.654	0.470	0.726	0.930	0.906
Our organization communicates openly and honestly	0.866	3.21	1.03	−0.443	−0.479			
Our organization tells me what I want to know	0.857	3.25	1.01	−0.317	−0.372			
Our organization maintains a long-term relationship with me.	0.843	3.66	0.792	−0.574	0.535			
Our organization considers my advice valuable	0.827	3.54	0.859	−0.590	0.623			
Job satisfaction								
I think my job is fun	0.889	3.67	0.818	−0.579	0.506	0.710	0.907	0.869
I feel comfortable with my job	0.807	3.65	0.866	−0.643	0.414			
I feel satisfied with my job	0.891	3.66	0.804	−0.540	0.293			
I am passionate about my work	0.778	3.87	0.786	−0.371	0.104			
Self-esteem								
I am important in this organization	0.927	3.77	0.777	−0.630	0.720	0.834	0.938	0.911
I am valuable in this organization	0.953	3.76	0.765	−0.647	0.989			
I am trusted in this organization	0.856	3.82	0.705	−0.505	0.913			
Affective commitment								
I feel as if this organization’s problems are my own	0.730	3.36	1.04	−0.557	−0.419	0.704	0.876	0.834
I feel a strong sense of belonging to this organization	0.909	3.68	0.866	−0.610	0.443			
I feel like “part of the family” at my organization	0.868	3.25	1.00	−0.250	−0.332			
Normative commitment								
I would not leave this organization because I have a sense of obligation to it	0.907	3.03	1.07	−0.112	−0.770	0.748	0.899	0.843
I would feel guilty if I left this organization	0.853	2.58	1.13	3.77	−0.710			
I have no intention to leave this organization	0.831	3.32	1.09	−0.453	−0.529			

Table 2. Cont.

Items	λ	M	SD	SK	KU	Convergent validity		
						AVE	CR	rho_A
COVID-19-induced stress								
Too much of my life would be disrupted if I decide to leave my organization now	0.783	2.96	1.16	0.052	−1.00	0.751	0.900	0.886
I feel that I have very few options to consider leaving this organization	0.904	3.20	1.10	−0.248	−0.718			
Right now, staying with my organization is a matter of necessity as much as desire	0.908	3.33	1.06	−0.465	−0.265			

Note: All of the items of perceived stress are reversed; λ : Factor loadings; M: mean; SD: standard deviation; SK: skewness; KU: kurtosis; AVE: average variance extracted; CR: composite reliability.

Table 3. Correlation of the constructs.

Construct	Correlation of the constructs						
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
(1) COVID-19 induced stress	0.756						
(2) Organizational trust	−0.260	0.852					
(3) Job satisfaction	−0.244	0.373	0.843				
(4) Self-esteem	−0.279	0.411	0.550	0.913			
(5) Affective commitment	−0.130	0.580	0.475	0.548	0.839		
(6) Normative commitment	−0.129	0.526	0.437	0.433	0.652	0.865	
(7) Continuance commitment	−0.118	0.457	0.473	0.338	0.508	0.770	0.867
Effect size (Q^2)		0.118	0.041	0.262	0.319	0.260	0.220
Cronbach's alpha (a)	0.754	0.905	0.863	0.900	0.791	0.831	0.838

Note: Bold numbers in correlation of the constructs are the square root of AVEs.

4.4. Structural Model

Figure 2 and Table 4 presents the estimation of the research model. CID stress negatively and significantly affected organizational trust ($\gamma = -0.180$, t -value = 3.662, $p < 0.001$), job satisfaction ($\gamma = -0.244$, t -value = 5.155, $p < 0.001$), and self-esteem ($\gamma = -0.154$, t -value = 3.658, $p < 0.001$). Thus, H1, H2, and H3 were supported. Job satisfaction was found to positively influence organizational trust ($\gamma = 0.329$, t -value = 6.529, $p < 0.001$) and self-esteem ($\gamma = 0.513$, t -value = 12.329, $p < 0.001$), thus H4 and H5 were supported. Especially, the link between job satisfaction and self-esteem was the strongest effect on the proposed research model. Further, job satisfaction was also a significant predictor on all of the organizational commitments: affective commitment ($\gamma = 0.165$, t -value = 3.286, $p < 0.01$), normative commitment ($\gamma = 0.204$, t -value = 3.497, $p < 0.01$), and continuance commitment ($\gamma = 0.342$, t -value = 5.796, $p < 0.001$), thus H6a, H6b, and H6c were supported. Further, organizational trust significantly affected all of the organizational commitments and thus, H7a, H7b, and H7c were supported: affective commitment ($\gamma = 0.397$, t -value = 9.408, $p < 0.001$), normative commitment ($\gamma = 0.383$, t -value = 8.253, $p < 0.001$), and continuance commitment ($\gamma = 0.322$, t -value = 5.784, $p < 0.001$). Self-esteem significantly affected affective commitment ($\gamma = 0.293$, t -value = 5.796, $p < 0.001$) and normative commitment ($\gamma = 0.163$, t -value = 3.013, $p < 0.01$), thus H8a and H8b were supported. However, self-esteem did not predict continuance commitment ($\gamma = 0.018$, t -value = 0.347) and thus, H8c was not supported.

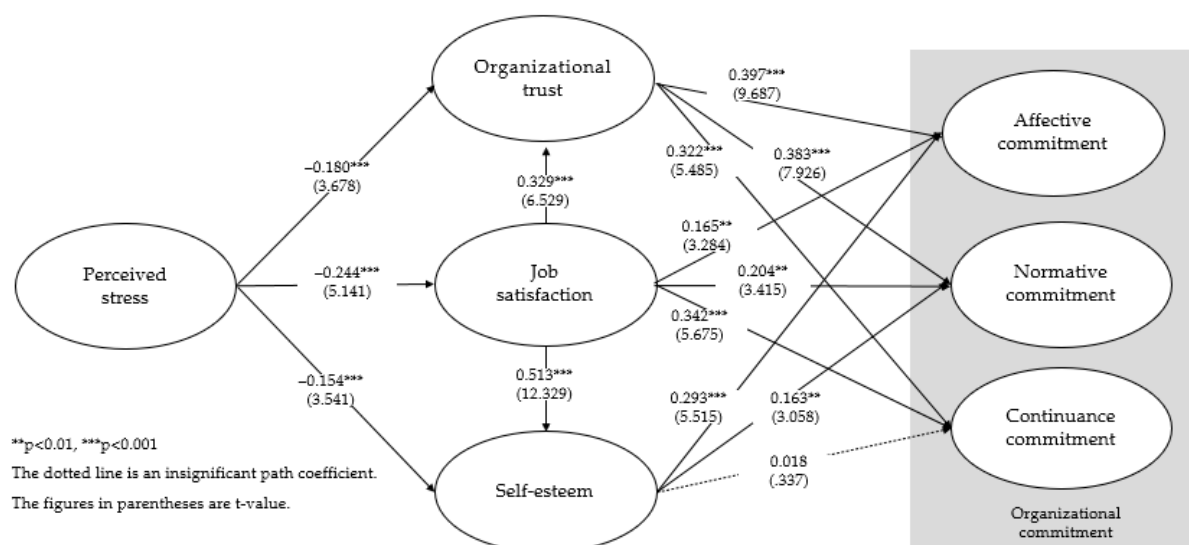


Figure 2. Estimation of research model.

Table 4. Results of path analysis.

Hypothesis		Path		Estimate	t-value	p-value	Test result
H1	COVID-19 induced stress	→	Organizational trust	−0.180 ***	3.662	0.000	Supported
H2		→	Job satisfaction	−0.244 ***	5.155	0.000	Supported
H3		→	Self-esteem	−0.154 ***	3.658	0.000	Supported
H4	Job satisfaction	→	Organizational trust	0.329 ***	6.529	0.000	Supported
H5		→	Self-esteem	0.513 ***	12.329	0.000	Supported
H6a		→	Affective commitment	0.165 **	3.286	0.01	Supported
H6b		→	Normative commitment	0.204 ***	3.497	0.000	Supported
H6c		→	Continuance commitment	0.342 ***	5.918	0.000	Supported
H7a	Organizational trust	→	Affective commitment	0.397 ***	9.408	0.000	Supported
H7b		→	Normative commitment	0.383 ***	8.254	0.000	Supported
H7c		→	Continuance commitment	0.322 ***	5.784	0.000	Supported
H8a	Self-esteem	→	Affective commitment	0.293 ***	5.796	0.000	Supported
H8b		→	Normative commitment	0.163 **	3.013	0.003	Supported
H8c		→	Continuance commitment	0.018	0.347	0.728	Not supported

Note: $**p < 0.01$, $***p < 0.001$.

In addition, Q^2 explained organizational trust (17.0%), job satisfaction (6.0%), self-esteem (32.5%), affective commitment (46.9%), normative commitment (36.1%), and continuance commitment (31.5%). The researchers observed path coefficients and t-statistics by applying a PLS bootstrapping method of 1,000 re-samplings.

4.5. Mediating Effects

Additionally, this study examined the mediating roles of organizational trust, job satisfaction, and self-esteem. Table 5 exhibits that CID stress indirectly influenced affective commitment ($\gamma = -0.072$, t-value = 3.351, $p < 0.01$), normative commitment ($\gamma = -0.069$, t-value = 3.347, $p < 0.01$), and continuance commitment ($\gamma = -0.058$, t-value = 3.061, $p < 0.01$) via organizational trust. Moreover, CID indirectly affected organizational trust ($\gamma = -0.080$, t-value = 3.668, $p < 0.001$) and self-esteem ($\gamma = -0.125$, t-value = 4.405, $p < 0.001$) via job satisfaction as well as affective commitment ($\gamma = -0.040$, t-value = 2.894, $p < 0.01$), normative commitment ($\gamma = -0.050$, t-value = 3.053, $p < 0.01$), and continuance commitment ($\gamma = -0.084$, t-value = 3.864, $p < 0.001$) via job satisfaction. CID stress indirectly affected affective commitment ($\gamma = -0.045$, t-value = 3.065, $p < 0.01$) and normative commitment ($\gamma = -0.025$, t-value = 2.365, $p < 0.01$) via self-esteem. However, CID stress did not indirectly affect continuance commitment via self-esteem.

Table 5. Mediating effects.

Indirect path				Estimate	t-value	p-value	97.5% Confidence interval		
							Lower	Upper	
COVID-19 induced stress	→	Organizational trust	→	Affective commitment	−0.072 **	3.351	0.001	−0.120	−0.037
			→	Normative commitment	−0.069 **	3.347	0.001	−0.112	−0.034
			→	Continuance commitment	−0.058 **	3.061	0.002	−0.101	−0.026
	→	Job satisfaction	→	Organizational trust	−0.080 ***	3.668	0.000	−0.127	−0.040
			→	Self-esteem	−0.125 ***	4.405	0.000	−0.184	−0.072
			→	Affective commitment	−0.040 **	2.894	0.004	−0.071	−0.016
			→	Normative commitment	−0.050 **	3.053	0.002	−0.086	−0.022
			→	Continuance commitment	−0.084 ***	3.864	0.000	−0.130	−0.047
			→	Affective commitment	−0.045 **	3.065	0.002	−0.078	−0.019
	→	Self-esteem	→	Normative commitment	−0.025 *	2.365	0.018	−0.049	−0.007
			→	Continuance commitment	−0.003	0.330	0.742	−0.021	0.15

Note: * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

5. Discussion and Conclusions

5.1. Discussion

Many front-line employees face extreme levels of work-related stress and anxiety due to COVID-19. However, it remains unclear to what extent tourism/hospitality operators are coping with the levels of stress and anxiety and how these stress and anxiety affect tourism/hospitality operators trust in and commitment to the company during a pandemic. To address this gap, this study explored how perceived stress levels of those working in the tourism/hospitality industry influence organizational trust, job satisfaction, self-esteem, and commitment to their employers during a pandemic. The study developed a conceptual framework of the relationships between perceived stress levels, organizational trust, job satisfaction, self-esteem, and commitment to tourism/hospitality companies by their staff. The results of this study reveal that COVID stress is negatively related to organization trust, job satisfaction, and self-esteem which, in turn, are positively related to organizational commitment. The findings have significant theoretical and practical implications for tourism and hospitality organizations which want to alleviate job stress experienced during pandemics.

5.2. Theoretical Implications

First, as previously noted, although a substantial body of literature has examined post-traumatic stress and wellbeing in healthcare workers, few studies have focused on work-related stress in front-line staff in the tourism/hospitality industry. This is unfortunate because non-medical employees are being unrecognized for the services they provide, often at risk to themselves, their colleagues and their customers. Similar to healthcare workers, front-line non-medical personnel often provide essential services, including but not limited to facilitating transportation and accommodation. The proposed conceptual model contributes to the stress management literature by providing a deeper understanding of the degree to which work stress leads to attitudinal and behavioural changes toward an employee's company/organization.

Second, although previous research reported the direct positive relationship between job stress and organizational commitment [61], the present study contributes to the literature by examining the indirect effect of work-related stress and organizational commitment through three mediating variables: organizational trust, job satisfaction, and self-esteem. The results reveal that the effect of COVID stress on organizational commitment is significant via the three mediating variables. Moreover, differences in high- and low-stress

tourism/hospitality employees suggest that ultimately, the three mediators can help the industry to better understand how work-related stress is indirectly related to organizational commitment.

Third, this study applied the multi-dimensional concept of organizational commitment generated by Allen and Meyer [38] to determine which mediating variables most influence the organizational commitment of employees. The results reveal that organizational trust is the highest indicator of affective commitment ($\gamma = 0.397$) and self-esteem the lowest indicator of continuance commitment ($\gamma = 0.018$). The current study, therefore, confirms that by applying Allen and Meyer's [38] multi-dimensional concept of organizational commitment, better predicting the commitment of employees to their company/organizations is possible. Previous research treated organizational commitment as a one-dimensional concept [62] but the conceptual model supports Allen and Meyer's [38] multi-dimensional approach and thus contributes to the literature by broadening one's perspective of this important factor.

Fourth, this study adds to the existing literature by shedding light on the role of job satisfaction on organizational trust, self-esteem, and organizational commitment during a pandemic. Even though job satisfaction has been widely studied in the tourism and hospitality industry, job satisfaction during a crisis has thus far been neglected in many fields of study. The results of this study, however, reveal that job satisfaction significantly and positively affects all three constructs of organizational trust, self-esteem, and organizational commitment. Fundamentally, providing a plausible explanation of why tourism and hospitality employees might be satisfied with their work during a pandemic is vital for the tourism/hospitality industry.

Fifth, this research highlights the problem of suppressing the effect of multiple mediating variables that damage the power of other parameter estimates predicting organizational commitment. Back et al. [30] whose research on casino employees uncovered a negative relationship between self-esteem and affective commitment, argued that "the inconsistent findings may also be due to the model's inclusion of the mediating role of self-esteem in the relationship between job satisfaction and organizational commitment" (p.120). Given that the findings confirm an insignificant relationship between self-esteem and continuance commitment, this study suggests that researchers should further investigate the effect of multiple-mediating-variables on organizational commitment.

5.3. Practical Implications

The results of this research have several practical implications. Given that COVID stress can negatively impact job satisfaction, organizational trust, self-esteem, and organizational commitment, this study suggests that providing instrumental and emotional support during and after a pandemic is the best practice for travel, tourism, and hospitality industries. Kickul and Posig [63] revealed that when a stressful event emerges among employees, management's emotional and instrumental support significantly reduces employee stress. Examples of instrumental support during a pandemic include the provision of protective gear, such as safety glasses, latex gloves, hand sanitizers, and facial masks, even when government advice is vague or inconsistent. Kurtessis et al. [64] demonstrated in their study that proactive company/organizational support plays a vital role in establishing workplace security and reduces work-related stress. When employees believe they are receiving appropriate organizational support they demonstrate higher levels of job satisfaction and organization-based self-esteem [64]. Thus, from an organizational perspective, providing instrumental resources to improve working conditions during an outbreak not only helps sustain the physical and psychological wellbeing of employees, but also it is a sound business policy.

A further practical suggestion is to provide risk-hardship allowances and/or pay for medical expenses for antibody tests as needed. Additionally, extra break times during work task hours, flexible rotating shift hours, and minimizing the interaction of front-line employees with customers can also reduce stress. In the airline industry, minimizing

inflight catering services (i.e., simplifying meals and beverages), reducing personal requests, valet services, house-keeping services, and installing glass or Perspex shields at hotel front desks can similarly help reduce CID stress. Such measures not only safeguard customers and employees, but also they boost job satisfaction levels, which, in turn, increases employee trust and self-esteem.

By supporting employees with encouragement, communication, and interpersonal trust, companies can influence their employees' emotions and behaviour [63,65]. When employees believe they are well treated and that their employer cares about their wellbeing, they tend to have a favourable attitude toward work and the company/organization [66]. An open-door policy in which employees can approach supervisors can also alleviate many workplace concerns.

The present study reveals that job satisfaction is key to improving organizational trust and self-esteem, both of which contribute to organizational commitment. Thus, to increase job satisfaction, self-esteem, organizational trust, and commitment, management should encourage employees to take leadership roles during a crisis. The evidence shows that enabling employees to take ownership increases job satisfaction and work performance [67]. Instead of drafting comprehensive guidelines to cover every possible eventuality, companies/organizations should empower employees to seek solutions and make recommendations themselves. Ultimately, no one is as concerned about health and safety as those on the front lines, doing their best for customers who depend on their services in unprecedented times.

5.4. Limitations and Future Research

Although this study's findings provide theoretical and practical contributions to tourism and hospitality areas, the study has limitations. Given that the researchers collected the data exclusively in South Korea, the results cannot be generalized to tourism and hospitality employees in other countries. Therefore, future researchers may conduct surveys in other cultures and verify our research model to ensure generalizability. A second limitation is that the number of samples obtained from different sectors of the tourism industry (e.g., airlines, hotels, restaurants, casinos, travel agencies, etc.) was unevenly distributed. Although this study collected a valid sample ($n = 427$), an unequal sample can lead to biased results; that is, in this study, the degree to which the negative impact that can cause to each tourism/hospitality industry might differ substantially across companies/organizations. Future studies should investigate whether differences exist in various tourism/hospitality sectors using a stratified sampling strategy to improve sample size precision. Finally, a more comprehensive theoretical framework should be designed for future studies. Given that this study included three mediators (i.e., organizational trust, job satisfaction, and self-esteem), other factors, such as job security and job anxiety would also likely have helped this study's interpretation.

Author Contributions: Conceptualization, C.P. and S.-E.K.; methodology, S.-E.K.; software, C.P.; validation, C.-K.L. and S.L.; formal analysis, C.P.; investigation, C.P.; resources, C.-K.L.; data curation, C.P.; writing—original draft preparation, S.-E.K.; writing—review and editing, C.-K.L.; visualization, S.L.; supervision, C.-K.L.; project administration, C.-K.L. All authors have read and agreed to the published version of the manuscript.

Funding: This research received no external funding.

Institutional Review Board Statement: Institutional Review Board Statement is not required for this paper in South Korea.

Informed Consent Statement: Not applicable.

Data Availability Statement: Data sharing not applicable.

Conflicts of Interest: The authors declare no conflict of interest.

References

- World Health Organization. WHO Coronavirus Disease (COVID-19) Dashboard. Available online: https://covid19.who.int/?gclid=CjwKCAjw8df2BRA3EiwAvfZWaLjXv9_ihvupSmNYxrKekgxU3ubtAKQe1-qJzVdd5LE_gqTddb6QhoCqhsQAvD_BwE (accessed on 5 June 2020).
- World Travel & Tourism Council. Coronavirus Puts Up to 50 Million Travel and Tourism Jobs at Risk Says WTTC. Available online: <https://wtcc.org/News-Article/Coronavirus-puts-up-to-50-million-Travel-and-Tourism-jobs-at-risk-says-WTTC> (accessed on 17 June 2020).
- Alon, T.M.; Doepke, M.; Olmstead-Rumsey, J.; Tertilt, M. *The impact of COVID-19 on Gender Equality*; National Bureau of Economic Research: Cambridge, MA, USA, 2020.
- Gössling, S.; Scott, D.; Hall, C.M. Pandemics, tourism and global change: A rapid assessment of COVID-19. *J. Sustain. Tour.* **2020**, *29*, 1–20. [\[CrossRef\]](#)
- Fernandes, N. Economic Effects of Coronavirus Outbreak (COVID-19) on the World Economy. Available online: <https://foroparalapazenelmediterraneo.es/wp-content/uploads/2020/03/SSRN-id3557504.pdf.pdf> (accessed on 3 June 2020).
- Hartman, G.; Nickerson, N.P. *Tourism-Related Business Owners Speak Out About COVID-19 Impacts*; Institute for Tourism & Recreation Research: Missoula, MT, USA, 2020; pp. 1–35.
- Lai, J.; Ma, S.; Wang, Y.; Cai, Z.; Hu, J.; Wei, N.; Wu, J.; Du, H.; Chen, T.; Li, R.; et al. Factors associated with mental health outcomes among health care workers exposed to coronavirus disease 2019. *JAMA Netw. Open.* **2020**, *3*, 1–12. [\[CrossRef\]](#) [\[PubMed\]](#)
- Pappa, S.; Ntella, V.; Giannakas, T.; Giannakoulis, V.G.; Papoutsis, E.; Katsaounou, P. Prevalence of depression, anxiety, and insomnia among healthcare workers during the COVID-19 pandemic: A systematic review and meta-analysis. *Brain. Behav. Immun.* **2020**, *88*, 901–907. [\[CrossRef\]](#) [\[PubMed\]](#)
- Cai, H.; Tu, B.; Ma, J.; Chen, L.; Fu, L.; Jiang, Y.; Zhuang, Q. Psychological Impact and coping strategies of frontline medical staff in Hunan between January and March 2020 during the outbreak of coronavirus disease 2019 (COVID-19) in Hubei, China. *Med. Sci. Mon. Int. Med. J. Exp. Clin. Res.* **2020**, *26*, 1–15.
- Wu, W.; Zhang, Y.; Wang, P.; Zhang, L.; Wang, G.; Lei, G.; Xiao, Q.; Cao, X.; Bian, Y.; Xie, S.; et al. Psychological stress of medical staff during the outbreak of COVID-19 and adjustment strategy. *J. Med. Virol.* **2020**, *92*, 1–9. [\[CrossRef\]](#)
- Adger, W.N. Social vulnerability to climate change and extremes in coastal Vietnam. *Worl. Dev.* **1999**, *27*, 249–269. [\[CrossRef\]](#)
- Lazarus, R.S. From psychological stress to the emotions: A history of changing outlooks. *Annu. Rev. Psychol.* **1993**, *44*, 1–22. [\[CrossRef\]](#)
- Jamal, M. Job stress and job performance controversy: An empirical assessment. *Organ. Behav. Hum. Perform.* **1984**, *33*, 1–21. [\[CrossRef\]](#)
- Poor, A.Y.; Ahmed, E.M.; Ansari, F.M.; Movahedi, M. Investigating the relationship between job stress and organizational trust in Sirjan Municipality. *Worl. Appl. Sci. J.* **2014**, *32*, 2042–2047.
- Santarone, K.; McKenney, M.; Elkbuli, A. Preserving mental health and resilience in frontline healthcare workers during COVID-19. *Am. J. Emerg. Med.* **2020**, *3*, 1530–1531. [\[CrossRef\]](#)
- Cohen, S.; Kamarck, T.; Mermelstein, R. Perceived stress scale. In *Measuring Stress: A Guide for Health and Social Scientists*; Oxford University Press: Oxford, UK, 1994; pp. 1–2.
- Shockley-Zalabak, P.; Ellis, K.; Winograd, G. Organizational trust: What it means, why it matters. *Organ. Dev. J.* **2000**, *18*, 35.
- Guinot, J.; Chiva, R.; Mallén, F. Organizational trust and performance: Is organizational learning capability a missing link? *J. Manag. Organ.* **2013**, *19*, 559–582. [\[CrossRef\]](#)
- Lee, C.K.; Song, H.J.; Lee, H.M.; Lee, S.; Bernhard, B.J. The impact of CSR on casino employees' organizational trust, job satisfaction, and customer orientation: An empirical examination of responsible gambling strategies. *Int. J. Hosp. Manag.* **2013**, *33*, 406–415. [\[CrossRef\]](#)
- Tzafrir, S.S. The relationship between trust, HRM practices and firm performance. *Int. J. Hum. Resour.* **2005**, *16*, 1600–1622. [\[CrossRef\]](#)
- Cho, Y.J.; Song, H.J. Determinants of turnover intention of social workers: Effects of emotional labor and organizational trust. *Public. Pers. Manag.* **2017**, *46*, 41–65. [\[CrossRef\]](#)
- Imai, H. Trust is a key factor in the willingness of health professionals to work during the COVID-19 outbreak: Experience from the H1N1 pandemic in Japan 2009. *Psychiatry. Clin. Neurosci.* **2020**, *74*, 1. [\[CrossRef\]](#)
- Locke, E.A. The nature and causes of job satisfaction. In *Handbook of Industrial and Organizational Psychology*; Dunnette, M.D., Ed.; Rand McNally: Chicago, IL, USA, 1976; pp. 1297–1349.
- Agarwal, P.; Sajid, S.M. A study of job satisfaction, organizational commitment and turnover intention among public and private sector employees. *J. Manag. Res.* **2017**, *17*, 123–136.
- Spector, P.E. *Job Satisfaction: Application, Assessment, Causes, and Consequences*; Sage Publications: Thousand Oaks, CA, USA, 1997; Volume 3.
- Cronin, J.J., Jr.; Brady, M.K.; Hult, G.T.M. Assessing the effects of quality, value, and customer satisfaction on consumer behavioral intentions in service environments. *J. Retail.* **2000**, *76*, 193–218. [\[CrossRef\]](#)
- Rosenberg, M.; Schooler, C.; Schoenbach, C.; Rosenberg, F. Global self-esteem and specific self-esteem: Different concepts, different outcomes. *Am. Social. Rev.* **1995**, *60*, 141–156. [\[CrossRef\]](#)
- Coopersmith, S. *The Antecedents of Self-Esteem*; W. H. Freedman and Company: San Francisco, CA, USA, 1967.

29. Diener, E.; Diener, M. Cross-cultural correlates of life satisfaction and self-esteem. *Cult. Well.* **2009**, *68*, 71–91.
30. Back, K.J.; Lee, C.K.; Abbott, J. Internal relationship marketing: Korean casino employees' job satisfaction and organizational commitment. *Cornell. Hosp. Q.* **2011**, *52*, 111–124. [\[CrossRef\]](#)
31. Pierce, J.L.; Gardner, D.G.; Cummings, L.L.; Dunham, R. Organization-based self-esteem: Construct definition, measurement, and validation. *Acad. Manage. J.* **1989**, *32*, 622–648.
32. Adler, S. Self-esteem and causal attributions for job satisfaction and dissatisfaction. *J. Appl. Psychol.* **1980**, *65*, 327. [\[CrossRef\]](#)
33. Hughes, L.W.; Palmer, D.K. An investigation of the effects of psychological contract and organization-based self-esteem on organizational commitment in a sample of permanent and contingent workers. *J. Leadersh. Organ. Stud.* **2007**, *14*, 143–156. [\[CrossRef\]](#)
34. Ahsan, N.; Abdullah, Z.; Fie, D.Y.G.; Alam, S.S. A study of job stress on job satisfaction among university staff in Malaysia: Empirical study. *Eur. J. Soc. Sci.* **2009**, *8*, 121–131.
35. Kim, G.; Ro, H.; Hutchinson, J.; Kwun, D.J. The effect of jay-customer behaviors on employee job stress and job satisfaction. *Int. J. Hosp. Tour. Adm.* **2014**, *15*, 394–416. [\[CrossRef\]](#)
36. Yang, H.C.; Ju, Y.H.; Lee, Y.C. Effects of job stress on self-esteem, job satisfaction, and turnover intention. *J. Transnatl. Manag.* **2016**, *21*, 29–39. [\[CrossRef\]](#)
37. Hunt, S.D.; Chonko, L.B.; Wood, V.R. Organizational commitment and marketing. *J. Mark.* **1985**, *49*, 112–126. [\[CrossRef\]](#)
38. Allen, N.J.; Meyer, J.P. The measurement and antecedents of affective, continuance and normative commitment to the organization. *J. Occup. Psychol.* **1990**, *63*, 1–18. [\[CrossRef\]](#)
39. Rhoades, L.; Eisenberger, R.; Armeli, S. Affective commitment to the organization: The contribution of perceived organizational support. *J. Appl. Psychol.* **2001**, *86*, 825. [\[CrossRef\]](#)
40. Mowday, R.T.; Porter, L.W.; Steers, R.M. *Employee—Organization Linkages: The Psychology of Commitment, Absenteeism, and Turnover*; Academic Press: New York, NY, USA, 2013.
41. Ko, J.W.; Price, J.L.; Mueller, C.W. Assessment of Meyer and Allen's three-component model of organizational commitment in South Korea. *J. Appl. Psychol.* **1997**, *82*, 961. [\[CrossRef\]](#)
42. Meyer, J.P.; Parfyonova, N.M. Normative commitment in the workplace: A theoretical analysis and re-conceptualization. *Hum. Resour. Manag. Rev.* **2010**, *20*, 283–294. [\[CrossRef\]](#)
43. Bte Marmaya, N.H.; Hitam, M.; Zawawi, N.; Jody, J.M. Organizational commitment and job burnout among employees in Malaysia. In Proceedings of the International Conference on Business and Economics Research, Cairo, Egypt, 21 October 2011; pp. 185–187.
44. Yousef, D.A. Job satisfaction as a mediator of the relationship between role stressors and organizational commitment. *J. Manag. Psychol.* **2002**, *17*, 250–266. [\[CrossRef\]](#)
45. Becker, H.S. Notes on the concept of commitment. *Am. J. Sociol.* **1960**, *66*, 32–40. [\[CrossRef\]](#)
46. Meyer, J.P.; Allen, N.J. Testing the “side-bet theory” of organizational commitment: Some methodological considerations. *J. Appl. Psychol.* **1984**, *69*, 372. [\[CrossRef\]](#)
47. Reçica, L.F.; Doğan, A. The relationship between job satisfaction, organizational trust and intention to leave the job: A comparative study between Kosovo and Turkey. *Acta Univ. Danubius. Œconomica* **2018**, *15*, 173–189.
48. Kim, Y. Music therapists' job satisfaction, collective self-esteem, and burnout. *Art. Psychother.* **2012**, *39*, 66–71. [\[CrossRef\]](#)
49. Al-Aameri, A.S. Job satisfaction and organizational commitment for nurses. *Saudi Med. J.* **2000**, *21*, 531–535. [\[PubMed\]](#)
50. Yang, J.T. Antecedents and consequences of job satisfaction in the hotel industry. *Int. J. Hosp. Manag.* **2010**, *29*, 609–619. [\[CrossRef\]](#)
51. Liu, C.M.; Huang, C.J.; Huang, K.P.; Chen, K.J. Psychological contract breach, organizational trust and organizational citizenship behavior of hotel industry in Taiwan. *Pak. J. Stat.* **2013**, *29*, 635–648.
52. Yilmaz, K. The relationship between organizational trust and organizational commitment in Turkish primary schools. *J. Appl. Sci.* **2008**, *8*, 2293–2299. [\[CrossRef\]](#)
53. Choi, S.; Lee, J.; Park, H. The effects of psychosocial problems on employees' stress, self-esteem, and organizational commitment: The case of South Korean workplaces. *J. Workplace. Behav. Health* **2015**, *30*, 179–190. [\[CrossRef\]](#)
54. Sadoughi, F.; Ebrahimi, K. Self-esteem and organizational commitment among health information management staff in tertiary care hospitals in Tehran. *Glob. J. Health Sci.* **2015**, *7*, 328. [\[CrossRef\]](#)
55. Brislin, R.W. Cross-Cultural Research Methods. In *Environment and Culture. Human Behavior and Environment (Advances in Theory and Research)*; Altman, I., Rapoport, A., Wohlwill, J.F., Eds.; Springer: Boston, MA, USA, 1980; Volume 3, pp. 47–82.
56. Muthén, L.K.; Muthén, B.O. How to use a Monte Carlo study to decide on sample size and determine power. *Struct. Equ. Model.* **2002**, *9*, 599–620. [\[CrossRef\]](#)
57. Hair, J.F.; Ringle, C.M.; Sarstedt, M. PLS-SEM: Indeed a silver bullet. *J. Maretk. Theor. Pract.* **2011**, *19*, 139–152. [\[CrossRef\]](#)
58. Lee, C.K.; Ahmad, M.S.; Petrick, J.F.; Park, Y.N.; Park, E.K.; Kang, C.W. The roles of cultural worldview and authenticity in tourists' decision-making process in a heritage tourism destination using a model of goal-directed behavior. *J. Dest. Mark. Manag.* **2020**, *18*, 100500.
59. Harman, D. A single factor test of common method variance. *J. Psychol.* **1967**, *35*, 359–378.
60. Podsakoff, P.M.; MacKenzie, S.B.; Lee, J.Y.; Podsakoff, N.P. Common method biases in behavioral research: A critical review of the literature and recommended remedies. *J. Appl. Psych.* **2003**, *88*, 879. [\[CrossRef\]](#) [\[PubMed\]](#)

-
61. Michael, O.; Petal, P. Job stress and organizational commitment among mentoring coordinators. *Int. J. Educ. Manag.* **2009**, *23*, 266–288. [[CrossRef](#)]
 62. Morgan, R.M.; Hunt, S.D. The commitment-trust theory of relationship marketing. *J. Mark.* **1994**, *58*, 20–38. [[CrossRef](#)]
 63. Kickul, J.; Posig, M. Supervisory emotional support and burnout: An explanation of reverse buffering effects. *J. Manag. Issues.* **2001**, *13*, 328–344.
 64. Kurtessis, J.N.; Eisenberger, R.; Ford, M.T.; Buffardi, L.C.; Stewart, K.A.; Adis, C.S. Perceived organizational support: A meta-analytic evaluation of organizational support theory. *J. Manag.* **2017**, *43*, 1854–1884. [[CrossRef](#)]
 65. Vasin, S.M.; Gamidullaeva, L.A.; Wise, N.; Korolev, K.Y. Knowledge Exchange and the Trust Institution: A New Look at the Problem. *J. Knowl. Econ.* **2019**, *11*, 1–17. [[CrossRef](#)]
 66. Cullen, K.L.; Edwards, B.D.; Casper, W.C.; Gue, K.R. Employees' adaptability and perceptions of change-related uncertainty: Implications for perceived organizational support, job satisfaction, and performance. *J. Bus. Psychol.* **2014**, *29*, 269–280. [[CrossRef](#)]
 67. Hechanova, M.R.M.; Alampay, R.B.A.; Franco, E.P. Psychological empowerment, job satisfaction and performance among Filipino service workers. *Asian. J. Soc. Psychol.* **2006**, *9*, 72–78. [[CrossRef](#)]