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Fear of Covid-19 and Turnover Intention: A Mediated Moderation Analysis

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Abstract

The aim of the study is to examine the role of Fear of COVID-19 in turnover intentions using a mediated moderation mechanism of mental health and Islamic work ethics during the COVID-19. The was a cross-sectional study involving 156 frontline nurses and doctors in district Mardan, Pakistan. For data collection, four standardized scales were used. The convenience sampling technique was adopted for data collection. The gathered data was run using various statistical analyses i.e. descriptive statistics, mediation and moderation. The findings of the study show that mental health partially mediates the relationship between Fear of COVID-19 and turnover intention. The study also shows that Islamic work ethics moderates the relationship between mental health and turnover intentions.

Key Words: *Fear of Covid-19, Islamic Work Ethics, Mental Health, Turnover Intention.*

Introduction

The spread of Corona Virus Disease-19 (COVID-19), which received international attention in December 2019, prompted the World Health Organization Emergency Committee to declare a Public Health Emergency of International Concern (PHEIC) at the end of January 2020 (Taylor, 2020; Nishiura et al., 2020). As of February 2021, around 108 million COVID-19 cases had been registered, with nearly 2.4 million, 2019). As a result of the pandemic, frontline healthcare providers, such as doctors and nurses, are exposed to physical and psychological strain, as they risk becoming infected while caring for patients or being exposed to patients' environments or biological samples, resulting in transmission to their family members (Al-Hanawi et al., 2020; Black, 2020).

The COVID-19 epidemic is still causing damage on the world, and its influence on mental health (MH) cannot be underestimated (Cullen, 2020; Harper, 2020). During a pandemic, fear, anxiety, depression, and insecurity can all contribute to psychological alterations (Huang, 2020). According to a recent study (Lu, 2020), 35% of Chinese people are psychologically distressed, suffering from significant stress, worry, and sadness and that ultimately worsen the mental health (Bakioglu, 2020; Murray, 2020; Qiu, 2020; Bakioglu, 2020).

Throughout the pandemic, fear has been a common emotional response (Alyami, 2020). Concern about COVID-19's spread grows as we learn more about its biology (Yildirim, 2021). Prior studies confirmed that contact with Covid-19 patients creates fear and anxiety (Lu, 2020). This irrational reaction could be caused by FOC-19 (Leodoro, 2020). Patients with FOC-19, as well as their families, may experience social exclusion as well. This increases their risk of depression and adjustment disorders (Huang, 2020). Other fears may stem from worries about job loss or retention. Anger, anxiety, boredom, depression, fear, stigma, stress, and PTSD have all been linked to COVID-19 (WHO, 2020).

It is critical to understand business ethics from an Islamic perspective. First and foremost, Islam is the world's second largest religion that believes in the oneness of God. There are approximately 1.9 billion Muslims in the world (Tufail, 2018; Richardson, 2013). Second, Muslims have a large customer base and have made significant investments in Western countries (Gheitani, 2019). Third, in the face of globalization and increased competition around the world, researchers and practitioners must understand the critical role of various religious and social factors that influence organizations (Hayati, 2012). A religion always spiritually motivates people to achieve a specific goal (Murtaza et al., 2016). Work, according to Islamic Work Ethics (IWE), is a promoter of social relationships and one's growth (Rokhman, 2010). IWE always supports a person who is dedicated to work and has a desire for a legal income source. IWE also values its adherents' participation in economic activities (Kolkova, 2020).

The COVID-19 epidemic is currently under control in Pakistan; nonetheless, confirmed cases continue to rise. Because their encounter is prevalent during the pandemic, health workers are at a higher risk of infection. Because they have direct contact with patients, the function of these individuals is similar to that of a medical or health-care professional. As a result, they are more susceptible to COVID-19's primary mode of transmission, respiratory droplets. The conundrum for these employees is how to balance the additional responsibilities of working at a hospital with the increased danger of having psychological disorders (mental health) and infection for themselves, their family, and friends as a result of their increased exposure to COVID-19. Furthermore, the employees may not have paid sick leave, putting them at risk of losing their jobs if they need to take time off or care for an infected family member (Satici, 2020; Khattak, 2020). As a result of working with COVID-19, fear, a negative emotion, combined with poor MH due to COVID-19 may increase turnover intention (Cheng, 2016; Jung, 2020).

Given the importance of the issue and the little of research on the MH and IWE responses to COVID-19 among hospital staff (Teng, 2021; Abd-Ellatif, 2021), this study is proposed to evaluate the relationship between FOC-19, MH, and TI of health employees, as well as the moderating influence of IWE between MH and TI.

Literature Review

Connection between Fear of Covid-2019 (FOC-19) and Mental Health (MH)

Fear is a strong emotion that is triggered by a perceived threat (Huremovi, 2019; Cullen, 2020). According to a previous study, people are more afraid of getting sick or dying during infectious outbreaks (Pakpour, 2020). It's critical to assess fear and its impact on MH during the ongoing COVID-19 pandemic (Ahorsu, 2020; Zhang, 2020). FOC-19 and MH have been studied previously in the general public and healthcare workers. They claim FOC-19 causes MH issues like intolerance of uncertainty, depression, anxiety, and stress (Wang, 2020). Hang (2020) also discovered a link between FOC-19 and depression, anxiety, and stress in Turkey. Yildirim (2021) found that the FOC-19 pandemic had a significant impact on the MH of Pakistani nurses. As shown in (Zolotov, 2020), the FOC-19 increased MH issues while decreasing life

satisfaction and job retention of employees in the health sector. Reznik (2020) and Buckley (2020) also found FoCOVID-19 had an effect on MH.

H1. FOC-19 has significant and positive association with MH.

Connection between MH and TI

Turnover intention (TI) is an employee's intention to leave their current job (Jung, 2021). Increasing staff TI can have a significant impact on an organization's competitive advantage (De, 2020; Xiang, 2019). In the hospitality industry, the negative effects of voluntary TI are frequently discussed (Cheng, 2016). Previous research has found that depressed hospital employees are more likely to quit their jobs (Khattak, 2020; Kim, 2015). Some studies also show that stressful jobs, such as those in hospitals and nursing homes, have a higher TI (Urbancov, 2011). As they adjust to their new jobs, health care workers face a new set of challenges – not only physical but also psychological. Because of the constant threat of infection, hospital employees' levels of depression, anxiety, and stress have increased, potentially increasing TI (Buckley, 2020; Boz, 2016).

H2. MH has significant and positive association with TI.

Connection between Fear of Covid-2019 and TI

According to prior nursing research, nurses' increased FOC-19 and risk of infection made them want to quit their jobs and look for something else (Teng, 2021; Cheng, 2016). Higher levels of fear and anxiety in nurses make them more likely to quit their jobs (Labrague, 2021). Anxiety and stress increased in Pakistani nurses who feared contracting COVID-19 (TI) (Masuyama, 2020). FoCovid-2019 increased MH issues, which in turn increased TI and decreased nurses' job satisfaction, according to Jung and Reznik et al., both published studies in the year 2021.

H3. FoCovid-19 has significant and positive association with TI.

Mediating role of MH between FoCovid-2019 and TI

Employees may be worried about the Covid-2019 pandemic, which experts say could harm their mental and physical health as well as their lives (Huremovi, 2019; Lim, 2018; Xiang et al., 2020). It also means they are more likely to experience stress, which can lead to a number of psychological problems such as depression and anxiety (Cullen, 2020; Bakioglu, 2020) People with poor MH have lower levels of job satisfaction and disengagement, making it more difficult for them to continue in a job if they are dissatisfied (Kim, 2015; Labrague, 2021). As a result, people are being encouraged to change careers, which is exactly what TI is all about (transitional employment). Previous research has found that hotel employees who are depressed are more likely to consider abandoning their jobs than those who are not depressed (Kilic, 2016; Kuo, 2014; Leodoro, 2020). Furthermore, some researchers have discovered evidence that persons who work in more stressful environments, such as epidemics or pandemics, such as health workers, are more likely to consider leaving their jobs (Wen, 2020; Pakpour, 2020). Aside from the physical challenges of their new employment, hospital personnel must contend with the fear of contracting COVID-19 and the potential psychological consequences of contracting this infection. Because of the ongoing fear of infection, the MH of health-care personnel has improved, potentially leading to an increase in turnover (Masuyama, 2020; Satici, 2020).

H4. MH mediates the relation between FoCovid-19 and TI.

Moderating Role of IWE

Religion, which has its origins in the Qur'an and Ahadith, exerts a significant influence on people and institutions in a number of countries (Ahmad, 2011). According to the Quran (6:132), Ali (2005), and Richardson (2013), unethical workplace behaviors such as begging, laziness, and time waste are prohibited in the workplace and in the Qur'an. IWE is an obligatory activity and virtue because of the need and necessity to achieve equilibrium in one's personal and social life (Ali and Al Owaihan, 2008). IWE not only deals with how to live but also how to run a business. Its code of ethics provides guidelines for business and work (Ali, 2008). Studies have looked into how religious beliefs, affiliations, and behaviors affect workplace attitudes and how MH affects these attitudes (Murtaza et al., 2016; Kim, 2015). Religion influences people's lifestyles and behaviors, as well as their comfort and freedom to express their faith and religious identity at work. According to some researchers, intrinsically motivated employees benefit organizations when they manage MH (Farooq, 2015), and there are some mechanisms through which IWE can manage MH on TI (Ajmal, 2014; Labrague, 2021; Teng, 2021; Tufail, 2017). A close look at the MH-variable relationship yielded a variety of Studies on IWE emphasizes hard work, commitment, creativity, and work dedication (Yousef, 2001; Ajmal, 2014). Islam places a high value on work and encourages organizations to create work environments that benefit employees (Khurram, 2013; Cheng, 2016). It shows that having IWE in the organization reduces MH, which reduces stress, job satisfaction, and TI (Syed, 2010; Farooq, 2015; Wen, 2020).

H5. IWE moderates the relation between MH and TI.

Conceptual Model

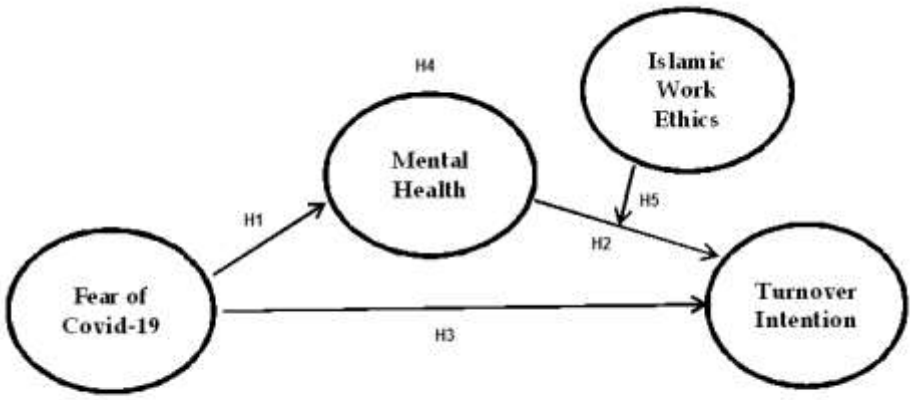

Figure 1: Conceptual Model

Research Methodology

Survey Instruments

On a Likert-type scale with five items ranging from strongly disagree (1) to strongly agree (5), the research participants were asked to answer the questions in a structured Survey questionnaire that was distributed

to them (5). This is a self-assessment that was used to calculate the FoCovid-2019, MH, TI, and IWE scores for each participant. FOC-19 was measured using the 7-item scale of Ahorsu (2020), MH was measured using the 5-item scale of Wang (2020), TI was measured using the 15-item scale of (Giffen, 2015), and IWE was measured using the 17-item scale of (Crane et al. 2007).

Study participants and sampling technique

The study utilized the convenience sampling technique to collect data from the employees working in hospitals (public & private) in district Mardan, Pakistan. A total of 170 employees were surveyed and distributed questioners among them, but only 156 were returned. The FOC-19, MH, and IWE, as well as their impact on employees' TI, is described in the sample of items received. The distributed questionnaire was divided into four sections: FOC-10, MH, IWE, and TI. The questioners contain the information about the participants' personal data, such as gender, age, education, and experience level. The majority of the participants in this detailed study are men, with 114 in total and 73 percent respectively. Female respondents accounted for 42 employees, or 27% of the total. The majority of those who responded were between the ages of 25 and 30 (46 percent), 31 to 40 (41 percent), 41 to 50 (eight percent), and 51 and older (eight percent) (8 percent). About 101 (65%) of the respondents have a master's degree; 48 (31%), a bachelor's degree; 9 (3%), a master's degree; and only one (0.6%) has a PHD and two have an inter qualification (.4 %).

Reliability of Scale and Validity of Data

Cronbach's alpha score for FoCovid-2019 was (0.81), MH (0.82), TI (0.73), and IWE was (0.73) in this research study (.63). As a result, these four values are regarded as trustworthy for data collection.

Results

Descriptive Statistics

Table 1: Descriptive Statistics and Correlation Analysis

Variable	N	Mean	Std. Dev	1	2	3	4
FoCovid-2019	156	3.72	.920	1			
MH	156	3.33	.751	.421**	1		
TI	156	4.49	.439	.170**	.063**	1	
IWE	156	3.51	.504	.214**	.490**	.402**	1

Table 1 includes the variable name in the first column, the number of respondents in the 2nd while third and fourth columns are about the mean and standard deviation of data collected from respondents. Table 1 show that FOC-19 has an excellent mean of 3.72 and a standard deviation of o.920. Whereas the values of the mean and standard deviations of MH, TI and IWE are (means= 3.33, 4.49, 3.51) and (SD=0.751, 0.439, 0.504) respectively. Table 1 further displays the coefficients values that are FoCovid-2019 is significantly positively associated with TI (r = 0.170**, p<0.05). FoCovid-2019 has a positive relationship with MH (r =0.421**, p<0.05). FOC-19 also has also positive relationship with IWE (r = .214**, p0<.05). (r = .063*, p0<.05) TI with MH, IWE with TI (r=.402**, p0<.05). IWE with MH (r=.490, P0<.05).

Regression Analysis

We used regression analysis to uncover the underlying linkages. On the basis of the independent variable, it predicts the outcome variable. When one unit shift occurs in FOC-2019, it is useful to know how many changes occur in the dependent variable.

Table 2: Mediation of Mental Health between Fear of Covid-19 and Turnover Intention

IV	FOC-19 →MH	MH→TI	Direct Effect of FOC-19 →TI	Total effect of FOC-19 →TI	Bootstrapping results	
	β	β	β	B	BLLCI	BULCI
FOC-19	0.417	0:063	0.143	0.156	0.066	0.035

Fear of Covid-19= FOC-19*, MH = Mental Health, TI = Turnover Intention*

Hypothesis 1 of the study predicts impact of FoCovid-19 on TI (*B=0.417, p<0.05*). We run bootstrap for relationship of FOC-19 and TI and from Table 2, it can be observed that the total effect of FoCovid-19 on TI has 0.156 with the lower and upper limits of 0.066 and 0.035 and zero is not present in 95% confidence interval, in result we can say that FOC-19 has a significant relationship with TI and first hypothesis and third are hence accepted. The table further shows that H2 is accepted as per their results as (B=0.063). Hypothesis 5 of the study predicts MH is a possible mediator between the relationship of FOC-19 and TI. Thus we can bring to a close that MH partially mediates the relationship of FOC-19 on TI and our fifth hypothesis is hence accepted.

Table 3: Moderation analysis for Islamic Work Ethics between Fear of Covid-19 and Turnover Intention

IV on DV	*β*	*T*	*P*	Bootstrap Results	
				LLCI	ULCI
Int term →	0.04	0.74	.0000	0.31	0.05

n = 156 (IV = Mental Health, Mod = Islamic Work Ethics, DV = Turnover Intention

Hypothesis 4 of the study predicts that IWE moderates the association among MH and TI; such that if IWE is high than the relationship between MH and TI would be low. From Table 4.4, it can be observed that interaction term of MH and IWE effect on the relationship of MH and TI has the lower and upper limits of 0.31 and 0.05 and 0 is not present in the 95% interval, therefore we can finish that IWE moderate MH and TI relationship. Hence it's proved that the 4th hypothesis is also accepted.

Discussion

One of the research's early discoveries was the link between FOC-19. COVID-19 concern was higher among frontline health workers with chronic diseases, like doctors and nurses (Bakioglu, 2020). According to recent research (Wang et al. 2020), the coronavirus pandemic has a greater psychological impact on health workers (Satici, 2020; Khattak, 2020). Because COVID-19 is more prevalent in patients with mental health issues (stress, sadness, anxiety), significant levels of FOC-19 in frontline workers with chronic illnesses are expected (Alyami, 2020). These disorders, together with COVID-19, have been related to a higher risk of death. As a result, the FOC-19 levels of people with mental health concerns may have risen (Yildirim, 2021).

The study's hypothesis, H2, reveals that MH has a major impact on health personnel' TI. It means that, in order to raise the amount of MH issues (depression, stress, and anxiety), frontline employees will be more likely to leave. This is the first study, to the best of the author's knowledge, to empirically investigate the

relationship between MH and TI during COVID-19, providing new information to Pakistan's health sector. Fear linked with coronavirus may interfere with work performance in doctors and nurses as a psychological reaction to a dangerous environment (Teng, 2021), resulting to greater levels of intentions to leave the organization. This finding is consistent with previous research in other industries, which found that workers with severe MH issues had a negative impact on their overall performance and job satisfaction (Farooq, 2015; Kim, 2015; Wen, 2020; Leodoro, 2020).

Table 2 shows that there is a significant relationship between FOC-19 and TI in the current study, indicating that as FOC-19 increases, so does the turnover total score. According to the findings, fear levels are a favorable predictor of the intention to leave an organization. In a study conducted by (Leodoro, 2020; Labrague, 2021; Teng, 2021), researchers examined the impact of COVID-19-related levels of dread on nurses' job satisfaction, overall health perception, anxiety, and intention to leave the profession on an organizational and professional level.

The study's H4 shows a link between MH, FOC-19, and TI. The current study found that MH partially mediates the FOC-19-TI association. This study supports prior research (Satici, 2020; Khattak, 2021; Bakioglu, 2020) linking increased FOC-19 to MH (depression, anxiety, and stress). Contrary to popular belief, fear can cause negative psychological reactions that lead to increased job turnover (Leodoro, 2020; Labrague, 2021; Ahorsu et al., 2020). The most common psychological issues affecting employees are depression, anxiety, and stress.

H5 shows that IWE moderates the MH-TI interaction slightly. As a result, IWE has been linked to lower MH. The study found that employees with a higher IWE were more likely to follow the recommended course of action regardless of the scenario, particularly during the Covid-19. These findings support prior research (Murtaza et al., 2016; Rokhman, 2010; Khurram, 2013; Farooq, 2015; Ajmal, 2014; Labrague, 2021; Tufail, 2018) that showed positive TI. These findings are clarified by the idea that Islamic teachings inspire followers to be loyal to their jobs and serve people to the best of their abilities.

Conclusion

The COVID-19 outbreak has had a significant impact on how MH services are delivered. MH service infrastructures and providers needed to adjust quickly and be flexible in order to continue providing services while decreasing the potential of COVID-19 transmission. Managers can have people with very low TI by putting more attention and focus on the IWE in various areas of personnel management to limit the negative impact of job changes on burnout and subsequent TI. In addition, highlighting IWE when hiring employees and taking steps to empower organizational human capital in a way that drives employees to support and embrace this design may be quite valuable in this regard.

Theoretical Contributions

According to the World Health Organization, the growing COVID-19 outbreak has harmed the global health industry (2020). This study adds to our knowledge of COVID-19 fear's impact on frontline healthcare workers' mental health. This study will add to the psychological studies on hospital workers during the COVID-19 crisis. The study revealed several important hospital-related findings. During the pandemic, the mental health of healthcare workers has received little attention. TI is linked to depression, anxiety, and stress. These studies highlight the role of MH in job loss decisions. The findings of this study suggest that mental health should be considered when detecting employee TI. The amount of hospital employee TI research is increasing. During the COVID-19 epidemic, health workers shelter and feed

patients and medical personnel. During the mandatory 14-day quarantine period, these individuals help guests comply with quarantine regulations by providing lodging. Employees are more susceptible to COVID-19 infection than the general public, which affects them physically and psychologically. Due to a lack of research on these employees, their role in healthcare is critical.

Practical Implications

Employees' health and motivation can be negatively affected by excessive fear, which can exacerbate mental health issues. When faced with a crisis, employers should place a strong emphasis on the mental health of their employees. In these situations, hospital administrators should take the following factors into consideration.

At initial point, the supervisors should create a workplace protocol that includes relevant training and reaction plans, as well as guidelines and safety measures for caring for guests in quarantine. Training is essential for preparing health care workers to respond to disease outbreaks and other disasters. Employees' knowledge, skills, and organization, as well as hospital protocols, are required to ensure the facility's safety and smooth operation.

Secondly, MH issues such as depression, anxiety, or stress hampered the ability of the health-care workers to perform tasks in the field. According to the findings of this study, hospital administrators should implement open communication policies to reduce employee anxiety. Employees are kept informed about the pandemic, the status of quarantine guests, changes in regulations and procedures, and the impact on their workloads through open communication. Encouragement to express concerns and desires helps build resilience.

The third step is for hospital administrators to develop a psychological support program for patients. Employees' mental health could be monitored via internet surveys. Anxiety, depression, or other negative psychological symptoms should be addressed immediately. Hoteliers should help guests with online mental health education and therapy. Staff that can perform at a high level is a valuable asset. After the outbreak, the hotel's employees will be eager to help with the cleanup.

The fourth recommendation is for hospitals to use technology to reduce COVID-19 transmission and cross-contamination. Using contactless services reduces the risk of COVID-19 transmission by limiting contact with quarantined people and their time in public. On-line and automated patient registration and exit procedures must be implemented as soon as possible.

The fifth point is that management should think about continuing training programs, communication, and consistent behavior that adheres to Islamic Work Ethics.

Limitations and Future Research Directions

The results are not typical due to the convenience sampling method and the fact that all study samples were hospital workers from Mardan, Pakistan. To improve sample representativeness and generality, a more systematic and complete sampling approach is required. Future research should include hospital employees from different countries, including reception, housekeeping, and room service. It would also be beneficial to collect data in various ways. This study used partial least squares and the Baron and Kanney mediation and moderation model, however future studies could use structural equation modeling.

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