Elevating Health Significance Post-Pandemic: Is the Employee-Organization Relationship in a Period of Change?

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Keywords

Abstract

The employee-organization relationship (EOR) is a well-established research topic in the applied psychology and organizational behavior literatures. However, the potential links between the EOR and employee health and well-being are understudied in comparison to the effects of the EOR on traditional organization-focused outcomes such as organizational commitment, job performance, and turnover. To address the need for development of the role of the EOR on employee health, we focus on two of the most popular EOR concepts: psychological contracts and perceived organizational support. We review the empirical research on the EOR and health and well-being as well as theoretical underpinnings of social exchange and reciprocity. We then suggest that the COVID-19 pandemic may have increased emphasis on employee health and well-being, resulting in heightened employee expectations from their organization. Subsequently, we present a model

based on social exchange theory to explain how this increased attention on health is linked with employee perceptions of organizational support and psychological contracts, ultimately contributing to enhanced or decreased health and well-being. Finally, we discuss the practical implications of the changing emphasis on the health and well-being of employees for the EOR and the importance of an expansion of research linking the EOR with health and well-being.

INTRODUCTION

A large body of research has been conducted on the employee-organization relationship (EOR) in the last 40 years (Shore et al. 2017). The EOR is "an overarching term to describe the relationship between the employee and the organization" (Shore et al. 2004, p. 292). Within the EOR domain, the two most popular concepts are perceived organizational support (POS) (Eisenberger et al. 1986) and psychological contracts (PCs) (Rousseau 1989). As shown in meta-analytic studies of both POS (Kurtessis et al. 2017) and PCs (Rees 2022, Zhao et al. 2007), employee health and well-being, outcomes that are beneficial to the employee, have been understudied in favor of outcomes focused on benefiting the organization such as organizational commitment, performance, and citizenship. The COVID-19 pandemic brought to the fore the fragility and importance of health in a stark manner and, with it, a refocus on the idea that employee health is integral to the EOR. In the spirit of elevating employee health as fundamental to the employee-employer exchange relationship, we draw attention to this understudied outcome of the EOR.

Our inclusion/exclusion decision in terms of EOR frameworks was guided by the extent of accumulated empirical research, and thus we focus exclusively on two of the most frequently researched EOR constructs: PCs and POS. The former captures "an individual's beliefs regarding the terms and conditions of a reciprocal exchange agreement between the focal person and another party" (Rousseau 1989, p. 123), and the latter captures an individual's perception concerning the degree to which an organization values employee contributions and cares about their well-being (Eisenberger et al. 1986).

Our review is organized as follows. First, we define the central constructs and review their theoretical underpinnings in social exchange theory. Then, we explain how the pandemic disrupted the EOR and provided the impetus for greater emphasis on health and well-being. Next, we summarize the limited empirical evidence linking the EOR and employee health as well as the dominant theoretical mechanisms. This provides the foundation for our temporal model that is presented subsequently and that explains how and why the EOR has expanded to include employee well-being and health due to the disruptive effects of the pandemic. Penultimately, we present practical implications, and then we conclude with future research directions.

PSYCHOLOGICAL CONTRACTS AND PERCEIVED ORGANIZATIONAL SUPPORT

Recall that PCs capture an individual's beliefs regarding the reciprocal exchange between that individual and their employer. As Rousseau (1990, p. 390) notes, "beliefs become contractual when the individual believes that he or she owes the employer certain contributions (e.g., hard work, loyalty, sacrifices) in return for certain inducements (e.g., high pay, job security)." How an individual assesses their PC is the driving factor to understanding its consequences (Conway & Briner 2005). Specifically, researchers have focused on fulfillment, breach, and violation.[1] PC fulfillment is

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[1]Sometimes, the label nonfulfillment is used to reflect breach. Here, we use the term breach as it reflects nonfulfillment and is widely used by researchers. We acknowledge that employees may experience breach and

described as "the extent to which one party to the contract deems the other has met its obligations" (Lee et al. 2011, p. 204). In contrast, PC breach and violation represent employee assessments of lack of reciprocation of obligations from the employer to the employee. Specifically, PC breach is defined as "the cognition that one's organization has failed to meet one or more obligations within one's PC in a manner commensurate with one's contributions" (Morrison & Robinson 1997, p. 230). Finally, PC violation is portrayed as "an intense reaction of outrage, shock, resentment, and anger" (Rousseau 1989, p. 129).

In contrast, POS is unidimensional in capturing the degree to which employees feel supported by their organization. Organizational support theory posits that employees make attributions concerning the organization's intentions behind their receipt of favorable or unfavorable treatment and that favorable discretionary treatment and treatment that fulfills the needs of employees should enhance POS (Kurtessis et al. 2017). Evidence suggests that highly discretionary actions by the organization have six times more positive influence on employee perceptions of organizational support than actions in which the organization is perceived to have little choice (Eisenberger et al. 1997). An employee experiencing unreasonable work pressure is likely to perceive low organizational support, whereas an employee who received recognition from the CEO for their contributions is likely to perceive high organizational support.

POS and PCs are independent yet complementary frameworks in understanding the EOR. Both rely on social exchange theory and the norm of reciprocity (Gouldner 1960) as the underlying theoretical basis.

THE EMPLOYEE-ORGANIZATION RELATIONSHIP AND SOCIAL EXCHANGE THEORY

When Shore and her colleagues published a comprehensive review of the EOR literature in 2004, they referred to major changes in work structures in the twentieth century that contributed to modifications in the EOR (Shore et al. 2004). Since 2004, however, while much has continued to change in the world of work and in society, there continues to be an overwhelming research emphasis placed on antecedents focused on the work context (e.g., fairness and supervisor support) and outcomes of the EOR that directly benefit the organization. This reflects the traditional EOR in which obligations are centered on work-specific elements. In a recent meta-analysis of PC breach (Rees 2022), there were 909 studies that captured organizationally beneficial outcomes such as lower commitment, identification, organizational citizenship behavior (OCB), and task performance, and increased turnover intentions and CWB. In contrast, 80 studies captured employee well-being and health outcomes such as increased psychological distress, burnout, emotional exhaustion, and the undermining of physical health as a result of contract breach and violation. A similar picture is painted for POS, where 314 studies captured the enhancing effects of POS on affective commitment, normative commitment, and organizational identification, with 45 studies linking lower POS to increased burnout, emotional exhaustion, and stress (Kurtessis et al. 2017). Kurtessis et al. (2017) listed the following categories of antecedents of POS: treatment by organizational members, EOR quality, and human resources practices and job conditions. Within the human resources practices and job conditions antecedent category, only 3 studies focused on flexible work schedule and 6 studies examined perceptions of family-supportive organizational practices (4% of the results in this category). For the outcomes category, they included orientation toward the organization and work, subjective well-being, and behavioral outcomes. Subjective

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fulfillment concurrently, but this has not received much empirical attention and falls outside the focus of this review.

well-being contains studies relevant to well-being and health, and included 247 studies, of which 29 focused on health (12% of results in this category) and 16 focused on stress (6% of results). In addition, 27 studies focused on work-family balance or work-family conflict (11% in this outcome category). The overwhelming emphasis on organizationally advantageous outcomes is consistent with the primacy of shareholder profits, a perspective currently being challenged (McGahan 2023).

The PC and POS literatures rely predominantly on social exchange theory to explain the employee-employer relationship. These literatures have focused on employee perceptions of what is exchanged between employee and employer (e.g., job security for loyalty), as well as what results from these exchanges. Blau (1964) and Gouldner (1960) argued that social exchanges involve unspecified obligations so that when an individual treats another party favorably, there is an anticipation of some future return to reciprocate the favorable treatment. In social exchanges, both parties invest in the other party, creating a vulnerability to risk that the investment will not be returned, requiring trust (Blau 1964, Cotterell et al. 1992, Eisenberger et al. 1987). In addition, relationships that emphasize social exchange focus on socioemotional elements of the relationship such as being taken care of by the organization (Shore et al. 2006). A key component of the application of social exchange theory to the EOR is that it reveals the employee's viewpoint on the relationship. The employee attributes humanlike characteristics to the organization (Coyle-Shapiro & Shore 2007), and actions by agents of the organization are viewed as a reflection of the employee's relationship with the organization itself. This personification of the organization leads employees to evaluate the exchange in a similar way to how they would judge treatment by another person. As such, a loss of favorable treatment by an agent of the organization is often assumed to reflect the organization's loss of concern for the employee. And the loss of perceived caring in both the PCs and the POS literatures has been shown to affect how employees reciprocate treatment by the organization, including such behaviors as lower job performance and turnover (Kurtessis et al. 2017, Zhao et al. 2007).

THE IMPETUS FOR EXPANSION OF THE EMPLOYEE-ORGANIZATION RELATIONSHIP DOMAIN

The COVID-19 pandemic raised societal awareness of the importance of health and well-being. Dua et al. (2022) report that two-thirds of employees said that the pandemic caused them to reflect on their purpose in life, and millennials were three times more likely than others to report that they were reevaluating work. Employees who experience greater purpose at work are purported to experience higher energy and better health (Dua et al. 2022). A key question is whether this awareness and reflection also changed societal beliefs pertaining to the fundamental role of the employer in creating and maintaining a healthy work environment that promotes well-being. Specifically, do employees view the EOR through an expanded lens of greater organizational responsibility for health and well-being?

In the past, the obligations incorporated into the EOR by scholars were bounded by work settings with narrow parameters. The traditional EOR involved work arrangements in which most employees worked in a common location, with regular hours, and with separation of work and personal life. Employees working full-time were expected to address family obligations and health and well-being in their personal time and through nonwork means. However, APA's 2023 Work in America Survey found that 92% of workers said it is very (57%) or somewhat (35%) important to them to work for an organization that values their emotional and psychological well-being (APA 2023). This reflects increasing expectations that organizational care for employee health is part of the post-pandemic EOR.

Likewise, organizations of today reflect a variety of work arrangements that were rare in the early part of the twenty-first century. Flexible work arrangements have become more common in part due to the pandemic (Dua et al. 2022). The norms separating work and nonwork life became less clear during the pandemic (Adisa et al. 2022). The nature of work arrangements has expanded (Chafi et al. 2022), and generational shifts in expectations have evolved (Lub et al. 2016).

Two recent changes in society may well be contributing to expanded employee expectations that organizations show concern for their health and well-being. These changes were catapulted to the fore by the COVID-19 pandemic. For safety reasons, many organizations were forced to require that employees worked from home. The varied and flexible work arrangements employees experienced, and the health and well-being benefits associated with flexible work (Shifrin & Michel 2021), have opened the door to considering major changes in the EOR. At the same time, many employees who transitioned quickly to working from home discovered that it was difficult to maintain their well-being and fulfill their work obligations while also taking care of family demands (Allgood et al. 2024, Shockley et al. 2021). The swift move to working from home that occurred during the COVID-19 pandemic uncovered the inadequacy of established organization policies and resources for supporting employees during rapid and unpredictable periods of change (Pulido-Martos et al. 2021). Less separation of work and home responsibilities may have changed the way people look at their work obligations and altered the way organizations treat work-family challenges (Allen et al. 2014) as well as accommodating remote work for employees with disabilities (Kanter 2022).

The expansion of remote and hybrid work during the pandemic provided an opportunity for employees to experience working without some of the stresses associated with the office environment. Both women and men point to the same key benefits of remote work: "increased efficiency and productivity, better work/life balance, and less fatigue and burnout" (Dua et al. 2022). A meta-analysis of remote work intensity including pre- and during-pandemic data (Gajendran et al. 2024) showed that higher levels of remote work are associated with several benefits for employees including greater job satisfaction, POS, organizational commitment, and supervisor-rated performance, as well as reduced turnover intentions. In addition, there were no major downsides except for perceived isolation. However, post-pandemic, there are increasing tensions between employees who want to continue to work remotely at least part of the time and employers who want a full-time return to the office (RTO) consistent with the traditional EOR (Mortensen 2023). Given the increased popularity of remote and hybrid work, especially among younger (Deloitte 2024) and disabled employees (Anand & Sevak 2017), it is important to determine how such modifications in the EOR influence employee health and well-being.

A second issue during the pandemic was the expanded awareness of the fragility of health and well-being and the need to support employee health (Vaziri et al. 2020). Well-being is a broad category that involves employees' moods, emotions, and evaluation of satisfaction (Diener et al. 2004). The view that health and well-being are the responsibility of the individual employee, with the employer playing a minor role, may be at a turning point. If societal demands on organizations to have a sense of purpose gain momentum, forward-looking conceptual frameworks are needed to strengthen the body of knowledge showing the connections between actions and policies of the organization, and their effect on employee health. Those actions and policies should also reflect societal trends promoting expanded and varied forms of EORs and consideration of their differential effect on younger and older employees as well as employees with minoritized identities (e.g., gender, race/ethnicity, disabled, sexual minorities).

Figure 1 displays traditional work arrangements and the EOR, as well as the disruptive work arrangements that occurred during the pandemic. Based on the data presented in the meta-analyses
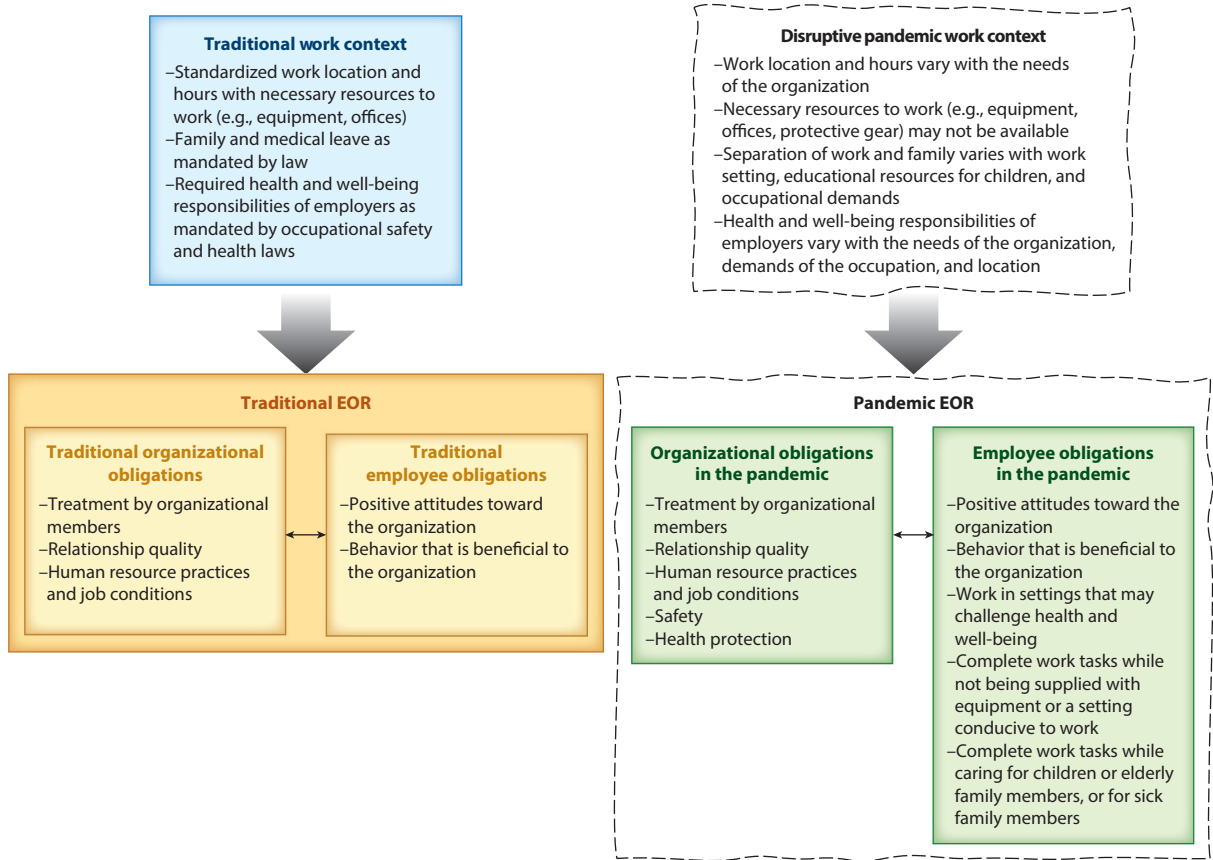
Figure 1

The context for the traditional employee-organization relationship (EOR) involves standardized work locations and hours and legal mandates for family and medical leaves, as well as occupational safety and health. In this context, the traditional EOR involves work-bounded organizational obligations in exchange for employee fulfillment of obligations pertaining to attitudes and behaviors that benefit the organization. The work context during the pandemic was disruptive as organizations sought to keep employees as safe as possible while also maintaining the productivity of the organization. The pandemic EOR involved an expansion of organizational obligations focused on safety and health, and an enlargement of employee obligations to fulfill work requirements in a variety of settings in which work needed to be completed while challenged with (1) inadequate equipment, technology, or work environment; (2) unsafe environments; and (3) family demands.

described above, there has been less emphasis in the EOR literature pre-pandemic on well-being and health, as well as the effects of work on family and vice versa of nontraditional work arrangements having to do with where people work (in a work setting or from home). Work arrangements altered drastically and quickly during the COVID-19 pandemic, creating large disruptions in the lives of employees and their families. As depicted in **Figure 1**, social exchange theory underlies the EOR in both the traditional work context and the pandemic. However, the pandemic created an expansion of organizational and employee obligations amid a very frightening and stressful context, given the number of people dying and the lack of understanding as to how the virus was transmitted or how to prevent health- and life-threatening consequences. Now that the COVID-19 pandemic is no longer as widespread and is better understood, many questions remain as to whether the EOR has altered or whether it will return to the pre-pandemic traditional EOR. In

the latter half of this review, we more fully explore the potential changes to the EOR that may result from the pandemic experience.

THE CURRENT STATE OF THE EMPLOYEE-ORGANIZATION RELATIONSHIP AND HEALTH

What does current empirical evidence tell us about the impact of the EOR on employee health? Our review is not a comprehensive one, as we selected to review studies that were most theoretically impactful for developing an expansion of the link between the EOR and health.

Psychological Contracts: Empirical Evidence

Research linking PCs and health has primarily focused on breach, so we review these findings first, followed by violation and then fulfillment.

Breach and health. Robinson et al. (1994) argued that the negative effects of breach on relationships were enduring and difficult to repair, while Rousseau (1989) argued that fulfillment after breach was unlikely to mend the relationship. To test this element, Conway et al. (2011) examined the relationship between PC breach and fulfillment and affective well-being outcomes. In support of Rousseau's theorizing about breach, they found that an increase in breach significantly and negatively predicted affective well-being, while an increase in fulfillment had no effect on affective well-being. Likewise, Achnak et al. (2021) found a positive link between breach and faster heart rate, a physiological stress reaction. These studies suggest that breach may have direct effects on health, supporting social exchange arguments about the harmful effects of an imbalanced PC.

Some studies suggest that health may mediate relations between breach and employee behavior directed toward the organization. In a study of soldiers on a peacekeeping mission, Chambel & Oliveira-Cruz (2010) found that breach increased burnout and lowered engagement during the mission. Achnak et al. (2018) found that breach led to negative emotions, which in turn led to self-reported stress. Similarly, Costa & Neves (2017) found that breach was a source of stress that increased emotional exhaustion, which in turn lowered OCB and in-role performance. The unpredictability and lack of control associated with breach may have precipitated these effects. Specifically, breach appears to undermine well-being, which in turn lowers employees' reciprocity to the organization. Interestingly, when forgiveness cognitions were high, employees were less emotionally exhausted because these thoughts allowed them to better cope with PC breach. In another study linking breach and health, Garcia et al. (2018) found that psychological distress mediated the relationship between breach and increased insomnia among older employees. Importantly, generativity, or the "concern in establishing and guiding the next generation" (Erikson 1963, p. 267), buffered the negative effect of breach on employee insomnia. Given the focus on the well-being of others, the authors argue that generativity may serve to minimize focus on the self and motivate other-oriented behavior as well as provide a source of positive self-worth, serving to mitigate the effects of breach.

In a longitudinal study linking breach with mental and physical health complaints, Griep et al. (2021) found that effort-reward imbalance (ERI) (Siegrist 1996) served as a mediating mechanism. Specifically, breach contributed to employee perceptions that the organization has not fulfilled its obligations toward them, thus creating an imbalance between employee contributions and employer inducements. This resulted in higher perceptions of ERI, or under-reward, which in turn undermined health. Another study examined the buffering impact of mindfulness on the link between breach and hostility as well as between hostility and deviant behavior (Shaffakat et al. 2022). It was found that mindfulness dampened the relationship between breach and hostility as well as the relationship between hostility and organizational deviance. Importantly, employees who were

higher in mindfulness experienced lower levels of hostility in response to breach and were also less likely to respond to hostility by engaging in deviant behaviors.

To summarize, PC breach is a source of stress that can affect employees' mental and physical health. Several studies suggest that breach operates in a manner consistent with social exchange theory. Specifically, breach is experienced as an undermining of reciprocity that would be expected in a high-quality social exchange relationship. The imbalance in the exchange relationship (ERI) is an important mechanism for explaining the negative effects of breach on health. This effect of imbalance in the EOR is shown through the existing studies linking breach to mental and physical health. In addition, breach has been shown to precipitate negative emotions, a psychological mechanism; negative emotions, in turn, are harmful to health. Finally, there are individual differences such as mindfulness, forgiveness, and generativity that serve to buffer the negative effects of breach on health.

Violation and health. Less empirical work exists linking violation and health. Ali et al. (2019) found that violation mediated the relationship between workplace bullying and job burnout. Jamil et al. (2013) found a positive association between breach and felt violation and that both increased employee burnout. Abbas & Al Hasnawi (2020) compared breach and violation in relation to job procrastination and emotional exhaustion and found that they both had concurrent direct effects on procrastination and exhaustion. This pattern of results suggests that both breach and violation undermine employees' ability to fully function at work. In a sample of police officers, Duran et al. (2021) found that fairness and self-efficacy fully mediated the relationship between violation/stress and anxiety. Perhaps the imbalance in exchange that is associated with violation is a trigger for anxiety for police given the uncertainty this creates in their demanding and stressful jobs. Empirical evidence linking breach and violation to employee health is quite limited yet provides promising avenues for development.

Fulfillment and health. There have been some studies that have focused on the health-enhancing effects of PC fulfillment. First, Parzefall & Hakanen (2010) tested a model of the effects of PC fulfillment and found that although it did not have direct effects on health, work engagement fully mediated the relationship fulfillment had with mental health. Second, Rogozińska-Pawełczyk (2023) concluded that fulfillment was associated with both workplace well-being and life well-being. This suggests that the employee's perception of a reciprocal and balanced set of obligations with the organization as reflected in fulfillment provides a work setting that promotes well-being and that transcends organizational boundaries to positively affect life well-being. A third study reported similar findings (Ruokolainen et al. 2018) by showing that either strong and balanced or average and balanced PCs were superior to unbalanced contracts in relation to enhanced vigor at work. Similarly, van der Vaart et al. (2015) found that fulfillment was associated with employee well-being, which in turn negatively predicted employees' intention to leave. To summarize, this set of studies supports the logic of social exchange theory that a balanced and fulfilled PC promotes a more effective EOR but also contributes to understanding this relationship by showing the mediating effect of employee well-being as a psychological mechanism underlying the exchange relationship. However, considering the limited research on fulfillment and health, more studies are needed to determine whether well-being mediates the myriad links between PCs and both attitudinal and behavioral outcomes (Zhao et al. 2007), or if there are other mechanisms that explain these links.

Overall, the emerging findings support the undermining effect of breach and violation on employees' physical and mental health. The potentially health-promoting effects of fulfillment have been studied less frequently, raising questions as to whether the health-promoting effects of fulfillment are weaker than the harmful effects of breach and violation.

Perceived Organizational Support: Empirical Evidence

The research linking POS and health is evolving, although it is not as well developed as that linking POS to organizationally beneficial outcomes. The available empirical evidence supports a direct link between POS and health and also reveals that POS acts as a buffer to stressful work environments.

In a meta-analysis by Kurtessis et al. (2017), there was some evidence that POS is negatively related to mental health including burnout and emotional exhaustion. A recent review article by Eisenberger et al. (2020) additionally concluded that POS is related to several well-being variables including job satisfaction, positive mood, and improved health. These findings support the idea that POS is a source of socioemotional need fulfillment. Several studies have utilized the need fulfillment logic to argue that POS should influence health via emotions and well-being.

Arnold & Dupré (2012) found that both negative (e.g., anxious, bored) and positive (e.g., calm, excited) emotions at work served as mediators in the relationship between POS and self-reported physical health. Full mediation was supported for negative emotions whereas partial mediation was shown for positive emotions. These results suggest that POS has an impact on individual physical health through the emotions employees experience at work. Another study examined the relationship POS has with well-being and found that POS enhanced thriving and flourishing, which in turn positively mediated the relationship between POS and work engagement (Imran et al. 2020). This study indicates that through enhancing well-being by providing support, organizations also increase the likelihood of reciprocation that raises the probability of organizational success. O'Neill et al. (2009) argued that employees are likely to see low POS as a lack of concern for their well-being and that organizational support is something they feel entitled to. Based on this logic, the authors expected low POS to be associated with negative emotions such as anger, and for anger in turn to lead to both negative outcomes for the organization (turnover intentions, accidents, and absences) and employee health-undermining behaviors (e.g., tobacco product use, not having regular physical examinations). They found evidence for both predictions, suggesting further that emotions may link POS with both organizational outcomes and personal, health-related outcomes. In sum, these studies indicate that emotions may serve as the underlying mechanism through which POS is related to health.

Individual differences may be important in explaining how employee health is affected by POS. In a longitudinal study, Marchand & Vandenberghe (2016) found that while POS was unrelated to subsequent emotional exhaustion, for employees high in negative affect, there was a positive relationship between POS and emotional exhaustion. The authors suggested that negative affect is an element of personality that involves a pessimistic perception of the environment, so that POS might be viewed as a "demand rather than as a resource" (p. 367). Similarly, Ni & Wang (2015) examined the influence of core self-evaluations, "a broad, integrative trait indicated by self-esteem, locus of control, generalized self-efficacy, and (low) neuroticism (high emotional stability)" (Judge 2009, p. 58). They concluded that core self-evaluation moderates the association between POS and psychological well-being such that it is more strongly related for employees who are higher, compared with those lower in core self-evaluation. These studies thus suggest the potential importance of individual differences in the impact of POS on health.

Eisenberger et al. (2020) summarized literature showing the buffering effects of POS on stressful work environments, signifying that POS may reduce the emotional or cognitive burden felt by employees when dealing with work difficulties. Consistent with this perspective, a study of humanitarian volunteers in traumatic contexts showed that perceived helplessness (PH), a measure of stress, and perceived self-efficacy (PSE) fully mediated the relationship between POS and mental health outcomes (well-being and adverse mental health, including anxiety and depression)

(Aldamman et al. 2019). POS lowered PH and enhanced PSE, suggesting the critical role of POS for people working in difficult situations to protect their mental health. Likewise, Rineer and colleagues (2017) expanded on research showing that perceptions of unfairness, a source of stress, are associated with both physical and mental health (Robbins et al. 2012), by examining the potential buffering effects of POS when employees experience unfair treatment. Specifically, they examined the moderating role of POS as a boundary condition for these relationships. POS was shown to moderate the effects of procedural justice, but not distributive justice, on three objective cardiovascular health measures, specifically, heart rate, systolic blood pressure, and diastolic blood pressure. This study shows the importance of fair procedures in combination with organizational support to enhance cardiovascular health. Another study by Wang and colleagues (Wang et al. 2013) examined the effects of customer mistreatment on employee well-being and health. They found that on days a service employee received more mistreatment, they ruminated more at night about negative interactions with customers. This in turn was associated with higher levels of negative mood the next morning. As predicted, POS moderated the effect of customer mistreatment on rumination, such that this effect was weaker among those who had higher levels of POS. This result is consistent with research on social exchange and reciprocity in which trust between parties to the EOR is a key element (Shore et al. 2006). Specifically, POS may serve to make the employee feel more confident that the organization will not hold them responsible for customer mistreatment.

Several studies examined the effects of POS during the pandemic. First, a study of doctors and nurses in Wuhan, China, during the COVID-19 pandemic showed that POS indirectly affected well-being outcomes of resilience and thriving through enhancing use of individual strengths in response to the COVID-19-related chaos (Chen et al. 2021). This pattern is consistent with the caring that is transmitted through POS, showing its ability to assist employees in dealing with difficult work situations. Second, a study by Walsh & Kabat-Farr (2022) examining changes in support during the pandemic found that higher-than-normal POS enhanced job satisfaction but was not associated with job insecurity, anxiety, or depression. This study was conducted during the early stage of the pandemic (March to April 2020) when little was known about COVID-19 so that efforts by the organization to be supportive to employees may not have been impactful on employee mental health given the generalized fears due to the unknown nature of the virus. Third, Yang et al. (2020) concluded that POS moderated the link between psychosocial stress caused by the pandemic (e.g., loss of sleep, anxiety) and work stress among hotel workers in China during the pandemic (March 2020), with support lessening the negative impact.

In sum, these studies indicate two important roles POS may play in promoting health in challenging situations. First, POS promotes health by providing signals from the organization to employees that they are cared about. Such caring lowers stress levels and enhances employee well-being. Second, POS provides a buffering effect for negative work events because it contributes to employee perceptions that the organization will fulfill the obligations inherent in a high-quality exchange relationship by providing needed backing.

Conclusion

Research linking the EOR and health has established that fulfilled contracts and high levels of POS are good for employee health. In contrast, breach and violation or low POS are harmful for employee health. The types of health outcomes associated with the EOR seem primarily to be measures of well-being, with few studies focused on physical measures of health. This raises questions as to the nature of the relationship between the EOR and health—whether the EOR is primarily a distal contributor to physical health and a more proximal antecedent to mental health.

EXPLANATIONS LINKING THE EMPLOYEE-ORGANIZATION RELATIONSHIP WITH HEALTH

There are two explanations in the EOR literature that have garnered empirical attention to explain why the EOR would affect health: balance in exchange and emotions.

Balance in Exchange

As argued in social exchange theory and the norm of reciprocity (Blau 1964, Gouldner 1960), it is important that social exchanges reflect a degree of balance or equivalence in contributions by parties to that relationship. Aligned with this logic, the review of current literature described above showed that imbalance in exchange between employee and employer as shown in breach and violation of the PC had significant negative effects on both mental and physical health. This conceptual element is also consistent with research on ERI (Siegrist 1996), which provides both reasoning and empirical evidence for the impact of imbalance in the employment relationship on health.

Siegrist (1996) introduced the ERI model to capture occupational stressors in employment relationships and the effects on health. Reciprocity lies at the heart of the employment contract in which efforts exerted by employees are exchanged for adequate rewards. Failed reciprocity occurs when effort is high and rewards are low, eliciting negative emotions and harmful effects on health; the effects are accentuated for individuals exhibiting an excessive degree of commitment. Negative effects on mental health are likely to occur for the following reasons as a result of ERI. First, ERI may lead to feelings of humiliation and low self-esteem (Rugulies et al. 2017). Second, where there is a lack of alternatives, individuals may experience entrapment and learned helplessness (Rugulies et al. 2017). Finally, ERI may lead to dysregulation of the hypothalamic-pituitary-adrenal stress axis (Rugulies et al. 2017).

Siegrist et al. (2019) found that high ERI was associated with elevated depressive symptoms in a general sample of 24,327 French employees. Among UK academics, ERI was associated with poorer mental health (Kinman 2016). Compared to the general population, Hinz et al. (2016) found that German teachers reported greater ERI and more mental health problems. A similar finding is reported for Norwegian priests, who experience greater ERI compared to the general population, impacting anxiety and depression. Ndjaboué et al. (2014) found that ERI was prospectively associated with medically certified absence for mental health problems among white-collar workers. In their meta-analysis, Rugulies et al. (2017) found that ERI was associated with a 1.5-fold increased risk of depressive disorders. Barrech et al. (2017) found that stress management led to an improvement in ERI, and this significantly predicted lower anxiety and depression 7 years later. ERI was highly predictive of burnout among nonhealthcare hospital workers (Clinchamps et al. 2021) and childcare workers in Germany (Koch et al. 2017).

Many studies have examined the effects of ERI on physical health. Higher ERI was associated with worse sleep quality among community health workers in China (Deng et al. 2021) and higher musculoskeletal symptoms among childcare workers (Koch et al. 2017). Wege et al. (2024) found that high effort in combination with low reward at work was significantly associated with a moderately increased risk of diabetes 9 years later. This US finding corroborated previous empirical research in Europe (Pena-Gralle et al. 2022) on the adverse effect of ERI on increased risk of diabetes. In a cohort study of 90,164 individuals in 6 European countries, ERI at work was associated with an elevated risk of coronary heart disease controlling for job strain (Dragano et al. 2017). Additional evidence suggests that employees returning to work following a myocardial infarction were at increased risk of coronary heart disease in the subsequent 4 years when they experienced ERI at work (Aboa-Éboulé et al. 2011).

Emotions

Both the PCs and the POS literatures have found evidence consistent with the view that emotions may mediate the relationship between the EOR and health (Kurtessis et al. 2017, Rees 2022). Interestingly, the PC literature has primarily focused on the link that breach and violation have with negative emotions, whereas the POS literature has primarily focused on positive emotions. According to Rhoades & Eisenberger (2002, p. 699), "the caring, approval, and respect connoted by POS should fulfill socioemotional needs, leading workers to incorporate organizational membership and role status into their social identity." In contrast, when the employee perceives that there is breach, violation, or low POS, then this implies that the relationship is not one of social exchange and will no longer serve as a source of socioemotional need fulfillment. Considering the personification of the organization inherent in the EOR (Coyle-Shapiro & Shore 2007), breach, violation, and low POS can all serve as indications that the relationship is endangered. This may thwart an individual's need to belong, a fundamental human need (Baumeister & Leary 1995). There is a large body of research showing that threats to belonging such as rejection and exclusion bring forth a variety of emotions, such as anxiety, hurt feelings, and sadness (Leary 2021). In examining these negative emotions, Leary (2021) concluded that a key central feature was low perceived relational value. "Relational value refers to the degree to which people regard their relationship with another person as important, valuable, or close" (Leary 2021, p. 8). In contrast, fulfillment of belonging needs is beneficial and enhances positive emotions (Baumeister & Leary 1995). Thus, the role of emotion linking the EOR and health may be based on the support for or threat to belongingness needs and the employee's perception of relational value.

In summary, evidence shows that balance in exchange and emotions are key theoretical mechanisms for linking the EOR with health. Specifically, balance in exchange explains why and emotions clarify how the EOR impacts health. Next, in the model below (**Figure 2**) in which we incorporate these theoretical mechanisms, we explain how the disruptive effects of the pandemic may have increased employee focus on health as a core element of the EOR.
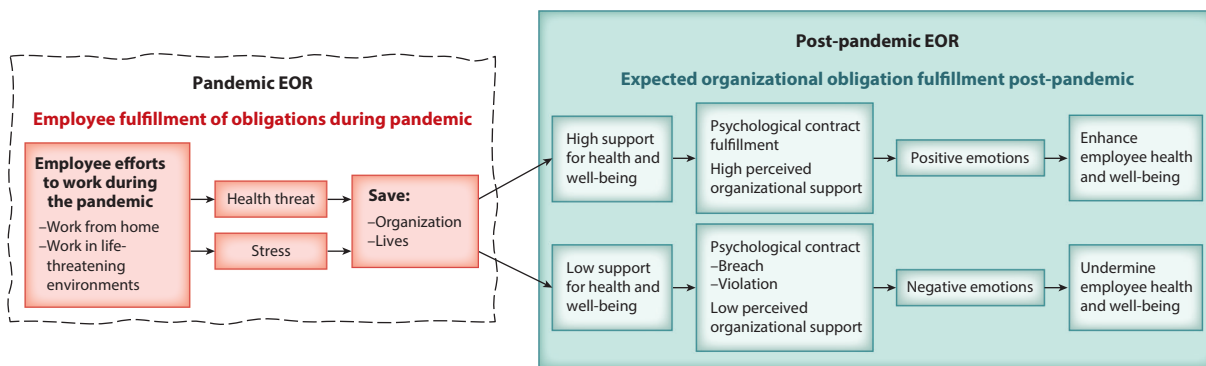

Figure 2

During the pandemic, the employee-organization relationship (EOR) involved organizational expectations for employees to expand efforts to fulfill obligations to their organization by working from home or in life-threatening environments, which led to health threat and stress to save the organization from decline or death, and to save lives in the case of medical and first responder employees. Post-pandemic, such sacrifice increased employee expectations for organizational obligations focused on health and well-being. If health and well-being organizational obligations are fulfilled, these in turn enhance psychological contract fulfillment and perceived organizational support, leading to positive emotions and enhanced employee health and well-being. In contrast, low support for employee health and well-being post-pandemic decreases psychological contract fulfillment and perceived organizational support, leading to negative emotions and undermined employee health and well-being.

MODEL OF PANDEMIC DISRUPTIONS AND INCREASING HEALTH EMPHASIS IN THE EMPLOYEE-ORGANIZATION RELATIONSHIP

The COVID-19 pandemic brought many changes to the EOR. This included employee flexibility and working from home, employer focus on the physical and mental health of employees, and work-life balance because many employees could no longer send their children to school while they were at a work setting. Employers also expected employees who were public facing such as nurses, teachers, first responders, and construction workers to risk their health and well-being by interacting with people who may have had the virus. A critical question is whether these experiences have substantially changed the EOR.

There are several possible effects of the pandemic disruption on the EOR. First, the self-sacrificing efforts made by employees may have contributed to an expansion of the perceived obligations of employers. Following the norm of reciprocity, the efforts employees made to save businesses and lives during the pandemic are likely to increase their expectations for reciprocation by their employer. Löffert & Diehl (2023) found that employees were willing to make sacrifices during the pandemic including accepting a lack of employer fulfillment of obligations in their PC but expected a future return from their employers for the compromises made. Employer post-pandemic treatment of employees may be crucial in determining whether the social exchange relationship as reflected in a fulfilled PC or high POS continues. Organizational requirements that employees RTO full-time may be viewed as a betrayal by employees who completely upended their lives but made needed adjustments to support the organization. Many employees discovered that they prefer flexible work arrangements for work-life balance and well-being (Gibson et al. 2023). Organizational RTO requirements may signal to employees that the employer is not willing to reciprocate the sacrifice and contributions provided during the pandemic, suggesting potential breach or even violation. Likewise, return to work requirements may be perceived as low organizational support, showing a lack of concern for employee well-being.

Second, many executives view remote or flexible work as undermining workplace culture and collaboration (Gibson et al. 2023) and are expanding RTO requirements. In social exchange parlance, these requirements may signal a lack of trust in employees. Lowered trust threatens the social exchange relationship as a basis for the EOR as employees question whether the relationship has eroded. Third, the evidence of quiet quitting suggests that many employees may have given up on having a good relationship with their employer. Gallup's 2023 *State of the Global Workplace* report found that nearly 6 in 10 employees engaged in quiet quitting, in which they may be physically present or on their computer but are psychologically disengaged from work. Those who experience quiet quitting "don't have any supportive bonds with their coworkers, boss or their organization" (Gallup 2023). This trend signifies a serious erosion of the social exchange relationship and is a threat to employee health and well-being as well as the productivity and success of organizations.

Our model integrates the logic of social exchange theory and the norm of reciprocity including balance in exchange in the EOR; established links between the EOR, emotions, and health; and the impact of pandemic disruptions on the EOR. Prior to the pandemic, the EOR in most organizations was still primarily focused on a traditional exchange of workplace-based obligations between the organization and the employee. Traditional arrangements involving separation of work and personal life were the norm. Employees working full-time were expected to address health and well-being mostly through nonwork means. During the pandemic, the exchange relationship between the employee and organization necessarily changed. Employee efforts to fulfill organizational obligations during the pandemic posed a threat to their health and well-being through the expansion and revision of work and home obligations as well as exposure to

the COVID-19 virus in public-facing occupations, especially healthcare and first responders such as law enforcement, emergency medical services, and fire service (Lee et al. 2024). This sacrifice likely increased subsequent employee expectations post-pandemic for fulfillment of organizational obligations to the employee in return. Likewise, because many employers successfully provided support for health and well-being during the pandemic, employee expectations of continued support may be heightened. These heightened expectations as opposed to the return to pre-COVID business as usual may influence their assessment of whether they are receiving a fair and balanced return on their investment in the organization during the pandemic. Increasingly, after the pandemic, many employers expect a return to pre-COVID work arrangements, raising the likelihood of a perceived imbalance in the EOR by employees. This can result in PC breach, violation, and low POS, with associated negative emotions and harm to employee health and well-being. However, employers that continue to emphasize health and well-being through flexible work arrangements, healthcare benefits, paid sick leave, and supportive supervision are likely to enhance PC fulfillment and POS, positive emotions, and greater employee health and well-being.

PRACTICAL IMPLICATIONS

Employee health and well-being are not new topics of importance in the organizational psychology and organizational behavior literatures, but public interest in them has certainly increased due to the experience of the COVID-19 pandemic. At present, however, the effects of the pandemic on the EOR are not fully known. The perspective that employees want greater support from their employers for health and well-being is reflected in studies by Stringer (2023) and Dua et al. (2022). From a practical perspective, what does this greater support look like in terms of organizational practices and policies? Flexible work arrangements, benefits supporting health and well-being, and responsive supervisors who express caring and tangible support for employee health are all likely candidates. Research shows that more PC fulfillment and higher POS enhance employee well-being and health (Eisenberger et al. 2020) and result in higher commitment, better job performance, and lower turnover (Rees 2022). Thus, we expect that organizations that provide health-related support will continue to thrive.

Practically speaking, organizations can benefit through providing support for health and work-life balance based on the logic of social exchange and reciprocity underlying the EOR. Evidence gathered during the pandemic certainly highlights the importance of such benefits and the potential harm if the health and well-being of employees are ignored. It was established before the pandemic that long-term exposure to work environments that are physically and psychologically demanding can result in burnout (Halbesleben et al. 2014). Building on this pre-pandemic information, Lee et al. (2024) studied first responders' safety and well-being during the pandemic. They found that promoting a safe climate and alleviating emotional exhaustion can increase first responders' safety behavior and well-being. Furthermore, Hendrickson and colleagues (2022, p. 397) found that during the pandemic, healthcare workers and first responders experienced high levels of stress, "including fear for their own safety and that of their colleagues and family, exposure to death and suffering, separations from family, and prolonged periods of exhaustion and vigilance." In addition to psychiatric distress including depression and post-traumatic stress disorder, a high number of these employees planned to leave their current field. Suggested mitigation strategies by Hendrickson and colleagues included more adequate staffing to reduce work overload, better training, robust safety protocols, responsive leadership, clear communication from leadership, access to wellness resources and mental health care, protections from job and financial insecurity, and communication from the community. These mitigation strategies not only are relevant to the health and well-being of healthcare workers and first responders but also will be welcomed by employees more generally.

Table 1 Implications for practice

Support for employee health and well-being	Benefits to organizations	Benefits to employees
Provide flexible work arrangements	Increase employee retention	Lower employee stress
Expand health and well-being benefits	Increase employee retention	Improve employee health
Provide manager training on showing employee support	Enhance employee trust and strengthen the employee-organization relationship	Increase employee well-being
Show appreciation for employee sacrifices during the pandemic	Increase employee commitment and motivation	Increase employee-perceived organizational support through care shown
Show perceived organizational support when an employee is faced with a challenge at work	Increase employee retention	Increase trust and lower stress
Prepare for the next pandemic	Display organizational survival	Be ready for disruptive events

One important outcome of the pandemic is the turnover rates of employees who risked their own health during the pandemic due to work demands and adverse situations. Shen et al. (2024) found that there was a large and persistent increase in healthcare workforce turnover after the pandemic. A study of first responders found that personal or family risk during the pandemic contributed to decisions to quit (Remington et al. 2023). These studies point to the importance of incorporating health-supportive practices, especially for those who play especially critical public-facing roles for emergency handling.

In **Table 1**, we summarize some implications for practice based on linking the EOR and health and well-being. First, flexible work arrangements provide employees with opportunities to manage their personal demands and can also provide a safe environment for employees who have minoritized identities. Second, expanding health and well-being benefits will encourage employees to stay while also supporting their health. Third, managers are tasked with managing relationships in their work groups but differ in their abilities. Providing training that teaches managers how to provide support and develop trusting relationships will lower employee stress and strengthen the EOR. Fourth, expressing appreciation for the sacrifices made during the pandemic will increase employee commitment and motivation. Such communication lets employees know that they are valued for their extra effort. Fifth, evidence shows that POS provides a buffer for challenging work situations, resulting in lower stress and higher employee retention. Finally, many organizations were unprepared for the pandemic, which often meant that employees were expected to work longer hours in more difficult situations to help the organization survive or to serve the public in a life-threatening situation. Organizational preparation for future pandemics will benefit their employees, the public, and the organization itself.

DIRECTIONS FOR FUTURE RESEARCH

In light of the limited empirical research on the EOR and health, we now focus on a number of directions for future research.

Remote Work

During the COVID-19 pandemic, research showed that remote work was associated with work intensification (Shirmohammadi et al. 2022). This was likely due to the rapidity of the change and that many employees also had children at home or did not have a space that was conducive to working. Research on working parents during COVID-19 showed that even when both men and women worked remotely, women generally took more responsibility for education and childcare

(Dunatchik et al. 2021). Nonetheless, many employees were given an opportunity to test some of the benefits of remote and hybrid work through their experience, such as having better working conditions, less stress, and the ability to manage personal obligations more easily. This "preview" may have inspired many employees to anticipate employer support for remote or hybrid work arrangements if their work was completed as expected.

Some of the groups that may benefit the most from remote or hybrid arrangements are employees who are physically or mentally disabled, women who have childcare and eldercare responsibilities, and those with minoritized sexual and gender identities. First, there has been a rise in employment among disabled employees in the United States and the United Kingdom during the COVID-19 pandemic and beyond (Ruhi et al. 2023, US Bur. Labor Stat. 2023). Disabled employees benefited from remote and hybrid work experiences during the pandemic by being able to show that they fulfilled their work obligations. In the United States, employees with disabilities who successfully worked from home during the pandemic may request the opportunity to continue with such an arrangement as a reasonable accommodation under the Americans with Disabilities Act (EEOC 2024). Second, the gap between the amount of unpaid work performed by women and men is large and consistent across the globe, averaging 83 minutes a day for men and 265 minutes a day for women (Hayes & Lee 2023). This gap continued during the pandemic, with caretaking for children and elderly family members done more frequently by women (Del Río-Lozano et al. 2022). While remote work for women has benefits in terms of the flexibility to handle family responsibilities, it can also affect women's career opportunities, especially when working in the office is perceived by managers as a sign of loyalty and dedication. Third, a study by Amerikaner et al. (2023) on the LGBTQ+ community during the COVID-19 pandemic found that LGBTQ+ adults felt significantly less stressed and tired while doing paid work at home than while working at a workplace. The authors point out that LGBTQ+ adults often experience discrimination and harassment at the workplace, creating a very stressful environment, which can be alleviated to some extent by working at home. In sum, working remotely has become more common and was increasingly normalized during the pandemic. The health and well-being benefits shown in particular for disabled employees or those with minoritized identities highlight the perceived value for some groups. Employees may view remote and hybrid work as an expected part of the EOR, considering the evidence that organizations can be successful with these types of work arrangements. At the same time, organizations are struggling with the assumption that RTO is critical to effective collaboration and positive cultures (Gibson et al. 2023).

An important issue pertaining to the tension between employees and organizations related to RTO is how this is linked to the EOR. Social exchange theory and the norm of reciprocity point to the criticality of trust. If employees perceive the RTO requirements as a lack of employer trust, especially after the sacrifices made during the pandemic, this can undermine a high-quality relationship. Furthermore, breach, violation, and low POS have all been associated with higher levels of turnover (Kurtessis et al. 2017, Rees 2022). Research is needed to examine the effects remote and hybrid work have on the EOR, and the potential threat of changes in these work arrangements on employee well-being and health.

Changes in Attitudes Toward Health and the Workplace

According to Stringer (2023), attitudes about employee mental health have shifted dramatically, with increased recognition that the work environment can increase or prevent mental health challenges. This is a major shift from before the pandemic when mental health was likely to be assumed to be the responsibility of employees through managing their stress levels. Further, the concern shown by employers for employee health during the pandemic had temporary but positive effects

on employee perceptions of organizations caring about their well-being (Harter 2022). According to Harter (2022), prior to COVID-19, only about 25% of employees strongly agreed that their employer cared about their overall well-being. Interestingly, 49% of employees felt their employer cared about their well-being in 2020 at the beginning of the pandemic, but that percentage had dropped to 24% by 2022. Harter attributed efforts made by employers to protect employee health as a likely source of this upward shift in 2020. Harter (2022) suggested that employee expectations of work may have dramatically changed after the pandemic experience. "Many learned new ways of working and may have an updated definition for what an employer caring about their overall well-being means." Due to employee experiences during COVID-19, opportunities for remote work, better work-life balance, and concern for employee health may be part of the increased expectations employees hold when considering the obligations of their employer in the EOR. Our model suggests that health-supportive practices are expected post-pandemic, but research is needed to establish whether this is the case.

Threat to Belongingness and Low Perceived Relational Value

The personification of the EOR in which actions by agents of the organization are viewed as a reflection of the employee's relationship with the organization itself points to some important issues for organizations. When employees believe that the organization values the relationship as shown through fulfillment of the PC and POS, then they are more likely to feel that they belong in the organization, enhancing strong relational ties. In contrast, when the EOR involves breach, violation, or low POS, the employee may perceive that they are viewed by their organization as offering low relational value. Such treatment may be interpreted by the employee as involving a decrement in the social exchange relationship and thus precipitate the types of negative emotions associated with rejection. Perceived rejection in relationships has been linked to negative emotions such as hurt feelings, loneliness, shame, embarrassment, sadness, and anger; however, the nature of those negative emotions depends on the situation (Leary 2021).

Managers may interpret an employee's negative affect, desire for remote work, or lower engagement as a threat to a social exchange–based EOR involving trust and reciprocity. Recent research has concluded that managers generally prefer employees to come back to the office. Parker et al. (2021) found that managers were having trust issues with employees who were remote during the pandemic. Similarly, in a review of the literature, Pianese et al. (2022) found that trusting relationships is an area that is challenged by remote work. Thus, research raises questions as to how organizations can recover from the potentially negative effects of the pandemic on the EOR. One possibility is the consideration of the agent who is best able to reinstate or repair loss of trust. Zhang et al.'s (2008) research suggests that the supervisor needs to play a key role in reinstating or retaining trust in the EOR. They found that low supervisory support is associated with low employee trust, regardless of the type of EOR. The supervisor may enhance trust through behavior that shows care and concern for employee health and well-being. However, without support from upper management for remote work or other health-promotive benefits, the effects of supervisor treatment may be limited. Future research is needed that specifically examines supervisor and organizational treatment related to well-being and health concurrently to determine if both have a positive impact on the EOR.

While it has been established that the EOR is associated with emotions, much more research is needed to establish the conditions under which these occur. For example, if the employee views the changes in the EOR as discretionary as opposed to forced by external factors (Eisenberger et al. 1997), this may influence their emotional reactions. Many of the changes made to the EOR during the pandemic were more likely viewed as forced by the situation. However, unforced changes

made after the pandemic may precipitate employee anger or hurt feelings with the calculus that the organization "chose" to modify the EOR without considering the health and well-being of the employee. Organizations who return to pre-pandemic work arrangements may unknowingly be contributing to quiet quitting. Much more research is needed to understand how employees make sense of changes in the EOR and the associated emotions that may influence health and well-being.

Imbalance in Exchange

A great deal of research has established that imbalance in exchange relationships can undermine health and well-being. A clear challenge for organizational leaders is that the EOR involves perceptions by employees, and employees act on those perceptions by supporting or undermining the accomplishment of organizational goals and strategies. It is also clear that emotions and health and well-being are affected by imbalance in which employers are perceived as offering much less than they expect to receive from employees. Much more research is needed to understand how leaders can manage changes in the EOR in a manner that is not associated with breach, violation, or low POS. The pandemic was a very disruptive event, causing many deaths, changes in employment arrangements, and challenges to health and well-being. This disruption may have provided the stimulus for some organizations to insert greater imbalance into the EOR to the point that their employees feel exploited. As evidence from the exploitation of migrant workers suggests, there are wide-ranging deleterious consequences on the mental and physical health of these workers (Potter & Hamilton 2014, Moyce & Schenker 2018). This experience is not confined to migrant workers, as Hallett (2022) reports that over a half a million healthcare workers quit in August 2021 as a result of the exploitative nature of their work, representing a 20-year high. Whether this current of exploitation travels further into other occupations and categories of workers should provide pause for thought for organizational leaders. Leaders have a unique opportunity to consider the impact of their actions on the health of employees from the perspective that employee health is the organization's wealth.

Purpose in Exchange

Recent attention on corporate purpose by strategy scholars highlights organizational purpose that "extends beyond wealth creation to human actualization, quality of life" (McGahan 2023). This decentering of the organization in favor of creating value for all stakeholders will require a refocus on the priorities of organizational researchers; for organizations, it will require embracing organizational purpose that promotes employee health.

This is particularly important at this juncture, as Kaplan (2023) argues: "[W]hen COVID-19 hit, the resulting health, jobs and economic consequences brought even further attention to what companies should be doing in the face of such dramatic societal dislocations" (p. 288).

What is the impact of organizational purpose on the EOR and employee health? As purpose requires an organization to go above and beyond its financial performance, it should put people first (Sisodia & Gelb 2019), foster employee well-being and engagement (Bajer 2016), and integrate the needs of society (Metcalf & Benn 2012). Van Tuin et al. (2020) found that organizational purpose enhanced employee work engagement. Having a personal purpose is thought to have beneficial effects on meaning in life and well-being (Shuck & Rose 2013). The confluence of the ascendency of organizational purpose and changing societal expectations regarding the importance of health provides several directions for future research.

Important questions have been raised as to whether organizations that enact purpose prioritize employee health and well-being. Heaphy & Dutton (2008) argue that a common identity

and shared fate among organizational members will enhance positive connections that in turn positively affect cardiovascular, immune, and neuroendocrine systems. Does the enactment of organizational purpose provide fertile ground for positive connections and employee health? Does organizational purpose create ideologically infused PCs that give employees a sense of meaning if fulfilled? Does this sense of meaning and contribution to society have a positive impact on employees' mental and physical health? These questions are critical to advancing research on the EOR and health.

Global Reactions to the Pandemic

Silver & Connaughton (2022) examined how people in countries around the globe responded to government handling of the pandemic. Interestingly, the highest percentage of people who viewed their country as failing to effectively handle the virus was in the United States (66%) and the lowest was in Singapore (24%). While research has found that cultural, social, and institutional factors played a role in the spread of COVID-19 (Dheer et al. 2021), comparisons of how organizations across the globe may have altered the EOR due to the pandemic have not been examined in management research (for an extensive review, see Bolino et al. 2024). An important research question is whether culture played a role in organizational treatment of employees, including the creation of health-promoting systems, during the pandemic. Likewise, an investigation into longer-term effects of the pandemic on the EOR is merited. Hofstede & Minkov (2010) pointed out that cultures differ in their time orientation, with countries such as China and Japan having a long-term and the United States a short-term orientation. Short term–oriented cultures appreciate recent and past times and quick achievements, whereas long term–oriented cultures focus on the future and value long-term planning (Hofstede & Minkov 2010). This suggests the possibility that country cultures with a long-term orientation may incorporate more health-promoting elements into the EOR in preparation for future disrupting health events. Future research should explore links between culture and changes in the EOR based on major environmental events.

CONCLUSION

While the EOR literature has consistently shown the value of social exchange relationships in the EOR, it is not entirely clear how to maintain those types of relationships based on changes in the global economy. In an age of extreme financialization of the economy, there has been a shift in power away from managers to investors (Dundon & Rafferty 2018). Investors are typically far removed from concerns about maintaining the EOR but instead are motivated by profit. During the pandemic many organizations were faced with choices that supported survival, and employees and investors understood that even though changes were not best for them individually, this was a situation beyond the control of the organization. After the worst period of the pandemic, the pressure on organizations toward business as usual and investor power have returned in full force, creating challenges for the EOR. Organizational actions that show caring and investment in employees are more difficult under this power dynamic. However, as pointed out by Kraak et al. (2024), "[t]o make an exchange relationship viable over time necessitates effort to build a more caring organization, where the employer—and by extension its managers—acts as a buffer to personal and external influences." Short-term organizational strategies that undermine the EOR are unlikely to support organizational accomplishments in the longer term. Employees are key to organizational success, and the EOR based on social exchange is a stabilizing influence that promotes the welfare of the organization and the health and well-being of employees.

It is important for organizational leaders to consider the critical role of the EOR for long-term success and also for society at large. Work and employment are key features of modern

life, influencing not only individuals but also the broader society. The many deaths and serious illness brought about by the pandemic have caused people to reexamine the function of work in their lives (Fuller & Kerr 2022). The EOR is one area that may be critical to considerations as to what is deemed best for the individual. As Guest (2017) has argued, there is an emphasis on increasing employee performance in the human resource management literature. However, efforts to increase performance rarely consider the potential effects on employee well-being. Quiet quitting is merely one trend that may be in part due to the experience of the pandemic and the changing organizational environment. Another is the gig economy as people seek ways to support themselves outside of the high-pressure environment organizational leaders face. These responses are a natural outgrowth of human needs for high-quality relationships, belonging, and health and well-being. The current business environment is not sustainable considering the mismatch of the employment exchange with basic human needs. Our review and model are calls to action. It is critical to understand not just the factors that undermine the EOR but also the actions that organizations can take in the current environment to sustain employees and organizations through high-quality EORs that protect and promote employee health. As individuals, the experience of the pandemic reminded us that our health is our wealth. Our leaders in organizations and society more broadly need the same reminder. Let us unite around this inspiring goal of promoting health and well-being!

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LITERATURE CITED

Abbas AA, Al Hasnawi HH. 2020. Role of psychological contract breach and violation in generating emotional exhaustion: the mediating role of job procrastination. *Manag. Lett.* 20(3):15–28. **https://doi.org/10.5295/cdg.181021aa**

Aboa-Éboulé C, Brisson C, Maunsell E, Bourbonnais R, Vézina M, et al. 2011. Effort-reward imbalance at work and recurrent coronary heart disease events: a 4-year prospective study of post-myocardial infarction patients. *Psychosom. Med.* 73(6):436–47. **https://doi.org/10.1097/PSY.0b013e318222b2d8**

Achnak S, Griep Y, Vantilborgh T. 2018. I am so tired... How fatigue may exacerbate stress reactions to psychological contract breach. *Front. Psychol.* 9:231. **https://doi.org/10.3389/fpsyg.2018.00231**

Achnak S, Schippers A, Vantilborgh T. 2021. To deny, to justify, or to apologize: Do social accounts influence stress levels in the aftermath of psychological contract breach? *BMC Psychol.* 9:5. **https://doi.org/10.1186/s40359-020-00505-2**

Adisa TA, Antonacopoulou E, Beauregard TA, Dickmann M, Adekoya OD. 2022. Exploring the impact of COVID-19 on employees' boundary management and work–life balance. *Br. J. Manag.* 33(4):1694–709. **https://doi.org/10.1111/1467-8551.12643**

Aldamman K, Tamrakar T, Dinesen C, Wiedemann N, Murphy J, et al. 2019. Caring for the mental health of humanitarian volunteers in traumatic contexts: the importance of organisational support. *Eur. J. Psychotraumatol.* 10(1):1694811. **https://doi.org/10.1080/20008198.2019.1694811**

Ali M, Bilal H, Raza B, Usman Ghani M. 2019. Examining the influence of workplace bullying on job burnout: mediating effect of psychological capital and psychological contract violation. *Int. J. Organ. Leadersh.* 8(2):1–11. **https://doi.org/10.33844/ijol.2019.60467**

Allen TD, Cho E, Meier LL. 2014. Work–family boundary dynamics. *Annu. Rev. Organ. Psychol. Organ. Behav.* 1:99–121. **https://doi.org/10.1146/annurev-orgpsych-031413-091330**

Allgood M, Jensen UT, Stritch JM. 2024. Work-family conflict and burnout amid COVID-19: exploring the mitigating effects of instrumental leadership and social belonging. *Rev. Public Pers. Admin.* 44(1):139–60. **https://doi.org/10.1177/0734371X221101308**

Amerikaner L, Yan HX, Sayer LC, Doan L, Fish JN, et al. 2023. Blurred border or safe harbor? Emotional well-being among sexual and gender minority adults working from home during COVID-19. *Soc. Sci. Med.* 323:115850. **https://doi.org/10.1016/j.socscimed.2023.115850**

Anand P, Sevak P. 2017. The role of workplace accommodations in the employment of people with disabilities. *IZA J. Lab. Policy* 6:12. **https://doi.org/10.1186/s40173-017-0090-4**

APA (Am. Psychol. Assoc.). 2023. *2023 Work in America Survey*. Rep. Am. Psychol. Assoc. **https://www.apa.org/pubs/reports/work-in-america/2023-workplace-health-well-being**

Arnold KA, Dupré KE. 2012. Perceived organizational support, employee health and emotions. *Int. J. Workplace Health Manag.* 5(2):139–52. **https://doi.org/10.1108/17538351211239171**

Bajer J. 2016. What's the point? The search for purpose at work. *Strateg. HR Rev.* 15(1):25–28. **https://doi.org/10.1108/SHR-12-2015-0094**

Barrech A, Riedel N, Li J, Herr RM, Mörtl K, et al. 2017. The long-term impact of a change in Effort–Reward imbalance on mental health—results from the prospective MAN-GO study. *Eur. J. Public Health* 27(6):1021–26. **https://doi.org/10.1093/eurpub/ckx068**

Baumeister RF, Leary MR. 1995. The need to belong: desire for interpersonal attachments as a fundamental human motivation. *Psychol. Bull.* 117(3):497–529. **https://doi.org/10.1037/0033-2909.117.3.497**

Blau PM. 1964. *Exchange and Power in Social Life*. New York: Wiley & Sons

Bolino MC, Henry SE, Whitney JM. 2024. Management implications of the COVID-19 pandemic: a scoping review. *J. Manag.* 50(1):412–47. **https://doi.org/10.1177/01492063231195592**

Chafi MB, Hultberg A, Yams NB. 2022. Post-pandemic office work: perceived challenges and opportunities for a sustainable work environment. *Sustainability* 14:294. **https://doi.org/10.3390/su14010294**

Chambel MJ, Oliveira-Cruz F. 2010. Breach of psychological contract and the development of burnout and engagement: a longitudinal study among soldiers on a peacekeeping mission. *Mil. Psychol.* 22(2):110–27. **https://doi.org/10.1080/08995601003638934**

Chen Y-FN, Crant JM, Wang N, Kou Y, Qin Y, et al. 2021. When there is a will there is a way: the role of proactive personality in combating COVID-19. *J. Appl. Psychol.* 106(2):199–213. **https://doi.org/10.1037/apl0000865**

Clinchamps M, Auclair C, Prunet D, Pfabigan D, Lesage FX, et al. 2021. Burnout among hospital non-healthcare staff: influence of job demand-control-support, and effort-reward imbalance. *J. Occup. Environ. Med.* 63(1):13–20. **https://doi.org/10.1097/jom.0000000000002072**

Conway N, Briner RB. 2005. *Understanding Psychological Contracts at Work: A Critical Evaluation of Theory and Research*. Oxford, UK: Oxford Univ. Press

Conway N, Guest D, Trenberth L. 2011. Testing the differential effects of changes in psychological contract breach and fulfillment. *J. Vocat. Behav.* 79(1):267–76. **https://doi.org/10.1016/j.jvb.2011.01.003**

Costa SP, Neves P. 2017. Forgiving is good for health and performance: how forgiveness helps individuals cope with the psychological contract breach. *J. Vocat. Behav.* 100:124–36. **https://doi.org/10.1016/j.jvb.2017.03.005**

Cotterell N, Eisenberger R, Speicher H. 1992. Inhibiting effects of reciprocation wariness on interpersonal relationships. *J. Pers. Soc. Psychol.* 62(4):658–68. **https://doi.org/10.1037/0022-3514.62.4.658**

Coyle-Shapiro JAM, Shore LM. 2007. The employee–organization relationship: Where do we go from here? *Hum. Resour. Manag. Rev.* 17(2):166–79. **https://doi.org/10.1016/j.hrmr.2007.03.008**

Del Río-Lozano M, García-Calvente M, Elizalde-Sagardia B, Maroto-Navarro G. 2022. Caregiving and caregiver health 1 year into the COVID-19 pandemic (CUIDAR-SE Study): a gender analysis. *Int. J. Environ. Res. Public Health* 19(3):1653. **https://doi.org/10.3390/ijerph19031653**

Deloitte. 2024. It's not a stretch: Gen Z and millennials want flexibility and balance. *Deloitte*. **https://action.deloitte.com/insight/3375/its-not-a-stretch-gen-z-and-millennials-want-flexibility-and-balance**

Deng X, Fang R, Cai Y. 2021. Evaluation of the correlation between effort-reward imbalance and sleep quality among community health workers. *BMC Health Serv. Res.* 21(1):490. **https://doi.org/10.1186/s12913-021-06526-w**

Dheer RJ, Egri CP, Treviño LJ. 2021. A cross-cultural exploratory analysis of pandemic growth: the case of COVID-19. *J. Int. Bus. Stud.* 52:1871–92. **https://doi.org/10.1057%2Fs41267-021-00455-w**

Diener E, Scollon CN, Lucas RE. 2004. The evolving concept of subjective well-being: the multifaceted nature of happiness. In *Advances in Cell Aging and Gerontology*, Vol. 15, ed. PT Costa, IC Siegler, pp. 187–220. Amsterdam: Elsevier

Dragano N, Siegrist J, Nyberg ST, Lunau T, Fransson EI, et al. 2017. Effort–reward imbalance at work and incident coronary heart disease: a multicohort study of 90,164 individuals. *Epidemiology* 28(4):619–26. **https://doi.org/10.1097/ede.0000000000000666**

Dua A, Ellingrud K, Kirschner P, Kwok A, Luby R, et al. 2022. Americans are embracing flexible work— and they want more of it. *McKinsey & Company*, June 23. **https://www.mckinsey.com/industries/real-estate/our-insights/americans-are-embracing-flexible-work-and-they-want-more-of-it**

Dunatchik A, Gerson K, Glass J, Jacobs JA, Stritzel H. 2021. Gender, parenting, and the rise of remote work during the pandemic: implications for domestic inequality in the United States. *Gender Soc.* 35(2):194–205. **https://doi.org/10.1177/08912432211001301**

Dundon T, Rafferty A. 2018. The (potential) demise of HRM? *Hum. Resour. Manag. J.* 28(3):377–91. **https://doi.org/10.1111/1748-8583.12195**

Duran F, Woodhams J, Bishopp D. 2021. The relationships between psychological contract violation, occupational stress, and well-being in police officers. *Int. J. Stress Manag.* 28(2):141–46. **https://doi.org/10.1037/str0000214**

EEOC (US Equal Employ. Oppor. Comm.). 2024. The ADA: your responsibilities as an employer. *US Equal Employment Opportunity Commission.* **https://www.eeoc.gov/publications/ada-your-responsibilities-employer**

Eisenberger R, Cotterell N, Marvel J. 1987. Reciprocation ideology. *J. Pers. Soc. Psychol.* 53(4):743–50. **https://doi.org/10.1037/0022-3514.53.4.743**

Eisenberger R, Cummings J, Armeli S, Lynch P. 1997. Perceived organizational support, discretionary treatment, and job satisfaction. *J. Appl. Psychol.* 82:812–20. **https://doi.org/10.1037/0021-9010.82.5.812**

Eisenberger R, Huntington R, Hutchison S, Sowa D. 1986. Perceived organizational support. *J. Appl. Psychol.* 71(3):500–7. **https://psycnet.apa.org/doi/10.1037/0021-9010.71.3.500**

Eisenberger R, Rhoades Shanock L, Wen X. 2020. Perceived organizational support: why caring about employees counts. *Annu. Rev. Organ. Psychol. Organ. Behav.* 7:101–24. **https://doi.org/10.1146/annurev-orgpsych-012119-044917**

Erikson EH. 1963. *Childhood and Society*. New York: Norton. 2nd ed.

Fuller J, Kerr W. 2022. The great resignation didn't start with the pandemic. *Harv. Bus. Rev.* 23:389–403

Gajendran RS, Ponnapalli AR, Wang C, Javalagi AA. 2024. A dual pathway model of remote work intensity: a meta-analysis of its simultaneous positive and negative effects. *Pers. Psychol.* In press. **https://doi.org/10.1111/peps.12641**

Gallup. 2023. *State of the global workplace 2023: Gallup report*. Rep., Gallup, Washington, DC

Garcia PRJM, Bordia P, Restubog SLD, Caines V. 2018. Sleeping with a broken promise: the moderating role of generativity concerns in the relationship between psychological contract breach and insomnia among older workers. *J. Organ. Behav.* 39(3):326–38. **https://doi.org/10.1002/job.2222**

Gibson CB, Gilson LL, Griffith TL, O'Neill TA. 2023. Should employees be required to return to the office? *Organ. Dyn.* 52(2):100981. **https://doi.org/10.1016/j.orgdyn.2023.100981**

Gouldner AW. 1960. The norm of reciprocity: a preliminary statement. *Am. Sociol. Rev.* 25:161–78. **https://doi.org/10.2307/2092623**

Griep Y, Bankins S, Vander Elst T, De Witte H. 2021. How psychological contract breach affects long-term mental and physical health: the longitudinal role of effort–reward imbalance. *Appl. Psychol.* 13(2):263–81. **https://doi.org/10.1111/aphw.12246**

Guest DE. 2017. Human resource management and employee well-being: towards a new analytic framework. *Hum. Resour. Manag. J.* 27(1):22–38. **https://doi.org/10.1111/1748-8583.12139**

Halbesleben JR, Neveu JP, Paustian-Underdahl SC, Westman M. 2014. Getting to the "COR": understanding the role of resources in conservation of resources theory. *J. Manag.* 40(5):1334–64. **https://doi.org/10.1177/0149206314527130**

Hallett N. 2022. Wage theft and worker exploitation in healthcare. *AMA J. Ethics* 24(9):890–94. **https://doi.org/10.1001/amajethics.2022.890**

Harter J. 2022. Percent who feel employer cares about their wellbeing plummets. *Gallup*, March 18. **https://www.gallup.com/workplace/390776/percent-feel-employer-cares-wellbeing-plummets.aspx**

Hayes AR, Lee D. 2023. Women, work, and families during the COVID-19 pandemic: examining the effects of COVID policies and looking to the future. *J. Soc. Issues* 17(10):1088–105. **https://doi.org/10.1111/josi.12510**

Heaphy ED, Dutton JE. 2008. Positive social interactions and the human body at work: linking organizations and physiology. *Acad. Manag. Rev.* 33:137–62. **https://doi.org/10.5465/amr.2008.27749365**

Hendrickson RC, Slevin RA, Hoerster KD, Chang BP, Sano E, et al. 2022. The impact of the COVID-19 pandemic on mental health, occupational functioning, and professional retention among health care workers and first responders. *J. Gen. Int. Med.* 37(2):397–408. **https://doi.org/10.1007/s11606-021-07252-z**

Hinz A, Zenger M, Brähler E, Spitzer S, Scheuch K, Seibt R. 2016. Effort–reward imbalance and mental health problems in 1074 German teachers, compared with those in the general population. *Stress Health* 32(3):224–30. **https://doi.org/10.1002/smi.2596**

Hofstede G, Minkov M. 2010. Long- versus short-term orientation: new perspectives. *Asia Pac. Bus. Rev.* 16(4):493–504. **https://doi.org/10.1080/13602381003637609**

Imran MY, Elahi NS, Abid G, Ashfaq F, Ilyas S. 2020. Impact of perceived organizational support on work engagement: mediating mechanism of thriving and flourishing. *J. Open Innovat.* 6(3):82. **https://doi.org/10.3390/joitmc6030082**

Jamil A, Raja U, Darr W. 2013. Psychological contract types as moderator in the breach-violation and violation-burnout relationships. *J. Psychol.* 147(5):491–515. **https://doi.org/10.1080/00223980.2012.717552**

Judge TA. 2009. Core self-evaluations and work success. *Curr. Dir. Pyschol. Sci.* 18(1):58–62. **https://doi.org/10.1111/j.1467-8721.2009.01606.x**

Kanter AS. 2022. Remote work and the future of disability accommodations. *Cornell Law Rev.* 107:1927–54. **https://ssrn.com/abstract=4327135**

Kaplan S. 2023. The promises and perils of corporate purpose. *Strateg. Sci.* 8(2):288–301. **https://doi.org/10.1287/stsc.2023.0187**

Kinman G. 2016. Effort–reward imbalance and overcommitment in UK academics: implications for mental health, satisfaction and retention. *J. Higher Educ. Policy Manag.* 38(5):504–18. **https://doi.org/10.1080/1360080X.2016.1181884**

Koch P, Kersten JF, Stranzinger J, Nienhaus A. 2017. The effect of effort-reward imbalance on the health of childcare workers in Hamburg: a longitudinal study. *J. Occup. Med. Toxicol.* 12:16. **https://doi.org/10.1186/s12995-017-0163-8**

Kraak JM, Hansen SD, Griep Y, Bhattacharya S, Bojovic N, et al. 2024. In pursuit of impact: how psychological contract research can make the work-world a better place. *Group Organ. Manag.* 49(6):1425–53. **https://doi.org/10.1177/10596011241233019**

Kurtessis JN, Eisenberger R, Ford MT, Buffardi LC, Stewart KA, Adis CS. 2017. Perceived organizational support: a meta-analytic evaluation of organizational support theory. *J. Manag.* 43(6):1854–84. **https://doi.org/10.1177/0149206315575554**

Leary MR. 2021. Emotional reactions to threats to acceptance and belonging: a retrospective look at the big picture. *Aust. J. Psychol.* 73(1):4–11. **https://doi.org/10.1080/00049530.2021.1883410**

Lee C, Liu J, Rousseau DM, Hui C, Chen ZX. 2011. Inducements, contributions, and fulfillment in new employee psychological contracts. *Hum. Resour. Manag.* 50(2):201–26. **https://doi.org/10.1002/hrm.20415**

Lee J, Resick CJ, Allen JA, Davis AL, Taylor JA. 2024. Interplay between safety climate and emotional exhaustion: effects on first responders' safety behavior and wellbeing over time. *J. Bus. Psychol.* 39:209–31. **https://doi.org/10.1007/s10869-022-09869-1**

Löffert RM, Diehl M-R. 2023. A psychological contract perspective to managing the employment relationship during the COVID-19 pandemic in the aviation industry. *Int. J. Hum. Resour. Manag.* 34(15):3023–50. **https://doi.org/10.1080/09585192.2023.2215387**

Lub XD, Bal PM, Blomme RJ, Schalk R. 2016. One job, one deal…or not: Do generations respond differently to psychological contract fulfillment? *Int. J. Hum. Resour. Manag.* 27(6):653–80. **https://doi.org/10.1080/09585192.2015.1035304**

Marchand C, Vandenberghe C. 2016. Perceived organizational support, emotional exhaustion, and turnover: the moderating role of negative affectivity. *Int. J. Stress Manag.* 23(4):350–75. **https://doi.org/10.1037/str0000020**

McGahan AM. 2023. The new stakeholder theory on organizational purpose. *Strateg. Sci.* 8(2):245–55. **https://doi.org/10.1287/stsc.2023.0184**

Metcalf L, Benn S. 2012. The corporation is ailing social technology: creating a 'fit for purpose' design for sustainability. *J. Bus. Ethics* 111(2):195–210. **https://doi.org/10.1007/s10551-012-1201-1**

Morrison EW, Robinson SL. 1997. When employees feel betrayed: a model of how psychological contract violation develops. *Acad. Manag. Rev.* 22(1):226–56. **https://doi.org/10.5465/amr.1997.9707180265**

Mortensen M. 2023. Tension is rising around remote work. *Harv. Bus. Rev.* **https://hbr.org/2023/07/tension-is-rising-around-remote-work**

Moyce SC, Schenker M. 2018. Migrant workers and their occupational health and safety. *Annu. Rev. Public Health* 39:351–65. **https://doi.org/10.1146/annurev-publhealth-040617-013714**

Ndjaboué R, Brisson C, Vézina M, Blanchette C, Bourbonnais R. 2014. Effort–reward imbalance and medically certified absence for mental health problems: a prospective study of white-collar workers. *Occup. Environ. Med.* 71(1):40–47. **https://doi.org/10.1136/oemed-2013-101375**

Ni C, Wang Y. 2015. The impact of perceived organizational support and core self-evaluation on employee's psychological well-being. *J. Hum. Resour. Sustain. Stud.* 3(2):73–81. **http://dx.doi.org/10.4236/jhrss.2015.32011**

O'Neill OA, Vandenberg RJ, DeJoy DM, Wilson MG. 2009. Exploring relationships among anger, perceived organizational support, and workplace outcomes. *J. Occup. Health Psychol.* 14(3):318–33. **https://doi.org/10.1037/a0015852**

Parker SK, Knight C, Keller A. 2021. Remote managers are having trust issues. *Harv. Bus. Rev.* 30:6–20

Parzefall MR, Hakanen J. 2010. Psychological contract and its motivational and health-enhancing properties. *J. Manag. Psychol.* 25(1):4–21. **https://doi.org/10.1108/02683941011013849**

Pena-Gralle APB, Talbot D, Duchaine CS, Lavigne-Robichaud M, Trudel X, et al. 2022. Job strain and effort–reward imbalance as risk factors for type 2 diabetes mellitus: a systematic review and meta-analysis of prospective studies. *Scand. J. Work Environ. Health* 48(1):5–20. **https://doi.org/10.5271%2Fsjweh.3987**

Pianese T, Errichiello L, Vieira da Cunha J. 2022. Organizational control in the context of remote working: a synthesis of empirical findings and a research agenda. *Eur. Manag. Rev.* 20:326–45. **https://doi.org/10.1111/emre.12515**

Potter M, Hamilton J. 2014. Picking on vulnerable migrants: precarity and the mushroom industry in Northern Ireland. *Work Employ. Soc.* 28(3):390–406. **https://doi.org/10.1177/0950017013510760**

Pulido-Martos M, Cortés-Denia D, Lopez-Zafra E. 2021. Teleworking in times of COVID-19: effects on the acquisition of personal resources. *Front. Psychol.* 12:685275. **https://doi.org/10.3389/fpsyg.2021.685275**

Rees R. 2022. *But you promised! A meta-analytic investigation of the nomological net of psychological contract breach.* PhD Diss., Indiana Univ., Bloomington

Remington CL, Witkowski K, Ganapati NE, Headley AM, Contreras SL. 2023. First responders and the COVID-19 pandemic: how organizational strategies can promote workforce retention. *Am. Rev. Public Adm.* 54:33–56. **https://doi.org/10.1177/02750740231192968**

Rhoades L, Eisenberger R. 2002. Perceived organizational support: a review of the literature. *J. Appl. Psychol.* 87(4):698–714. **https://doi.org/10.1037/0021-9010.87.4.698**

Rineer JR, Truxillo DM, Bodner TE, Hammer LB, Kraner MA. 2017. The moderating effect of perceived organizational support on the relationships between organizational justice and objective measures of cardiovascular health. *Eur. J. Work Organ. Psychol.* 26(3):399–410. **https://doi.org/10.1080/1359432X.2016.1277207**

Robbins JM, Ford MT, Tetrick LE. 2012. Perceived unfairness and employee health: a meta-analytic integration. *J. Appl. Psychol.* 97(2):235–72. **https://psycnet.apa.org/doi/10.1037/a0025408**

Robinson SL, Kraatz MS, Rousseau DM. 1994. Changing obligations and the psychological contract: a longitudinal study. *Acad. Manag. J.* 37(1):137–52. **https://doi.org/10.5465/256773**

Rogozińska-Pawełczyk A. 2023. Inclusive leadership and psychological contract fulfilment: a source of proactivity and well-being for knowledge workers. *Sustainability* 15(14):11059. **https://doi.org/10.3390/su151411059**

Rousseau DM. 1989. Psychological and implied contracts in organizations. *Empl. Responsib. Rights J.* 2:121–39. **https://doi.org/10.1007/BF01384942**

Rousseau DM. 1990. New hire perceptions of their own and their employer's obligations: a study of psychological contracts. *J. Organ. Behav.* 11:389–400. **https://doi.org/10.1002/job.4030110506**

Rugulies R, Aust B, Madsen IE. 2017. Effort–reward imbalance at work and risk of depressive disorders. A systematic review and meta-analysis of prospective cohort studies. *Scand. J. Work Environ. Health* 43:294–306. **https://doi.org/10.5271/sjweh.3632**

Ruhi A, MacDonald-Wright S, Mayor T, Burley M. 2023. Employment of disabled people 2023. *Department for Work & Pensions, UK Government*. Oct. 26. **https://www.gov.uk/government/statistics/the-employment-of-disabled-people-2023/employment-of-disabled-people-2023**

Ruokolainen M, Mauno S, Diehl MR, Tolvanen A, Mäkikangas A, Kinnunen U. 2018. Patterns of psychological contract and their relationships to employee well-being and in-role performance at work: longitudinal evidence from university employees. *Int. J. Hum. Resour. Manag.* 29(19):2827–50. **https://doi.org/10.1080/09585192.2016.1166387**

Shaffakat S, Otaye-Ebede L, Reb J, Chandwani R, Vongswasdi P. 2022. Mindfulness attenuates both emotional and behavioral reactions following psychological contract breach: a two-stage moderated mediation model. *J. Appl. Psychol.* 107(3):425–43. **https://doi.org/10.1037/apl0000878**

Shen K, Eddelbuettel JCP, Eisenberg MD. 2024. Job flows into and out of health care before and after the COVID-19 pandemic. *JAMA Health Forum.* 5(1):e234964

Shifrin N, Michel JN. 2021. Flexible work arrangements and employee health: a meta-analytic review. *Work Stress* 36(1):60–85. **https://doi.org/10.1080/02678373.2021.1936287**

Shirmohammadi M, Au WC, Beigi M. 2022. Remote work and work-life balance: lessons learned from the covid-19 pandemic and suggestions for HRD practitioners. *Hum. Resour. Dev. Int.* 25(2):163–81. **https://doi.org/10.1080/13678868.2022.2047380**

Shockley KM, Clark MA, Dodd H, King EB. 2021. Work-family strategies during COVID-19: examining gender dynamics among dual-earner couples with young children. *J. Appl. Psychol.* 106(1):15–28. **https://doi.org/10.1037/apl0000857**

Shore LM, Coyle-Shapiro JAM, Chang C. 2017. Exchange in the employee-organization relationship. In *Handbook of Industrial, Work, and Organizational Psychology*, ed. D Ones, N Anderson, C Viswesvaran, HK Sinangil, pp. 499–536. London: Sage. 2nd ed.

Shore LM, Tetrick LE, Lynch P, Barksdale K. 2006. Social and economic exchange: construct development and validation. *J. Appl. Soc. Psychol.* 36(4):837–67. **https://doi.org/10.1111/j.0021-9029.2006.00046**

Shore LM, Tetrick LE, Taylor MS, Coyle-Shapiro JAM, Liden RC, et al. 2004. The employee-organization relationship: a timely concept in a period of transition. In *Research in Personnel and Human Resources Management*, Vol. 23, pp. 291–370. Leeds, UK: Emerald Group Publ. **https://doi.org/10.1016/S0742-7301(04)23007-9**

Shuck B, Rose K. 2013. Reframing employee engagement within the context of meaning and purpose: implications for HRD. *Adv. Dev. Hum. Resour.* 15(4):341–55. **https://doi.org/10.1177/1523422313503235**

Siegrist J. 1996. Adverse health effects of high-effort/low-reward conditions. *J. Occup. Health Psychol.* 1(1):27–41. **https://doi.org/10.1037/1076-8998.1.1.27**

Siegrist J, Wahrendorf M, Goldberg M, Zins M, Hoven H. 2019. Is effort-reward imbalance at work associated with different domains of health functioning? Baseline results from the French CONSTANCES study. *Int. Arch. Occup. Environ. Health* 92(4):467–80. **https://doi.org/10.1007/s00420-018-1374-8**

Silver L, Connaughton A. 2022. *Partisanship colors views of COVID-19 handling across advanced economies*. Rep., Pew Res. Cent., Washington, DC. **https://www.pewresearch.org/global/2022/08/11/partisanship-colors-views-of-covid-19-handling-across-advanced-economies/**

Sisodia R, Gelb ML. 2019. *The Healing Organization*. New York: Harper Collins

Stringer H. 2023. Worker well-being is in demand as organizational culture shifts. *Monit. Psychol.* 54(1):58. **https://www.apa.org/monitor/2023/01/trends-worker-well-being**

US Bur. Labor Stat. 2023. Employment–population ratio for people with a disability increases to 21.3 percent in 2022. *US Bureau of Labor Statistics*. **https://www.bls.gov/opub/ted/2023/employment-population-ratio-for-people-with-a-disability-increases-to-21-3-percent-in-2022.htm**

van der Vaart L, Linde B, De Beer L, Cockeran M. 2015. Employee well-being, intention to leave and perceived employability: a psychological contract approach. *S. Afr. J. Econ. Manag. Sci.* 18(1):32–44. **http://dx.doi.org/10.17159/2222-3436/2015/v18n1a3**

Van Tuin L, Schaufeli W, Van den Broeck A, Rhenen W. 2020. A corporate purpose as an antecedent to employee motivation and work engagement. *Front. Psychol.* 11:572343. **https://doi.org/10.3389/fpsyg.2020.572343**

Vaziri H, Casper WJ, Wayne JH, Matthews RA. 2020. Changes to the work family interface during the COVID-19 pandemic: examining predictors and implications using latent transition analysis. *J. Appl. Psychol.* 105(10):1073–87. **https://doi.org/10.1037/apl0000819**

Walsh BM, Kabat-Farr D. 2022. Investigating the implications of changes in supervisor and organizational support. *J. Occup. Health Psychol.* 27(6):585–98. **https://doi.org/10.1037/ocp0000339**

Wang M, Liu S, Liao H, Gong Y, Kammeyer-Mueller J, Shi J. 2013. Can't get it out of my mind: employee rumination after customer mistreatment and negative mood in the next morning. *J. Appl. Psychol.* 98(6):989–1004. **https://doi.org/10.1037/a0033656**

Wege N, Siegrist J, Li J. 2024. Prospective association of high effort and low reward imbalance at work with risk of diabetes: a cohort study in US workers. *Int. J. Behav. Med.* 31(1):151–55. **https://doi.org/10.1007/s12529-023-10168-z**

Yang Q, Huo J, Li J, Jiang Y. 2020. Research on the influence of the COVID-19 epidemic on work stress of returning workers in China: a study based on empirical analyses of industrial enterprises. *Work* 67(1):67–79. **https://doi.org/10.3233/WOR-203253**

Zhang AY, Tsui AS, Song LJ, Li C, Jia L. 2008. How do I trust thee? The employee-organization relationship, supervisory support, and middle manager trust in the organization. *Hum. Resour. Manag.* 47(1):111–32. **https://doi.org/10.1002/hrm.20200**

Zhao HAO, Wayne SJ, Glibkowski BC, Bravo J. 2007. The impact of psychological contract breach on work-related outcomes: a meta-analysis. *Pers. Psychol.* 60(3):647–80. **https://doi.org/10.1111/j.1744-6570.2007.00087.x**