EXPLORING THE PROTECTIVE ROLE OF MINDFULNESS: HOW PRACTICING MINDFULNESS CAN MITIGATE THE IMPACT OF ORGANIZATIONAL INTOLERANCE ON CONSUMER DISCONTENT

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This study investigates the moderating effect of mindfulness on the relationship between organizational intolerance and consumer discontent in the healthcare industry. A three-wave sampling framework was employed, and a total of 700 respondents were included. The research findings indicate that incorporating mindfulness into organizational practices can be beneficial in reducing the impact of organizational intolerance on consumer discontent. It stresses the significance of encouraging mindfulness practices within the workplace to counter the adverse consequences of organizational intolerance on customer discontent. The study underscores the need to establish a favorable organizational environment that encourages transparency, confidence, and respect for the workforce.

Keywords: Mindfulness, Organizational Intolerance, Consumer Discontent, Healthcare, India.

INTRODUCTION

The healthcare industry is known for its complex and sensitive nature, which often leads to consumer discontent between healthcare providers and patients. These conflicts can take various forms, ranging from disagreements over treatment plans to disputes about billing and insurance. Similarly, organizational intolerance in the healthcare workplace can lead to discrimination, bias, and reduced job satisfaction among healthcare providers. As a result, managing these issues has become a critical priority in the healthcare industry.

Mindfulness has emerged as a potential tool for managing conflicts and improving workplace outcomes. Mindfulness involves the practice of present-moment awareness and non-judgmental acceptance of thoughts and feelings. Research has shown that mindfulness can enhance emotional regulation, cognitive flexibility, and empathy, which are essential skills for managing conflicts in the workplace. Specifically, mindfulness has been found to moderate the relationship between organizational intolerance and workplace deviance (Dinc & Genc, 2022), as well as the relationship between consumer discontent and emotional exhaustion (Bayraktaroglu & Can, 2021).

Recent studies have also investigated the potential of mindfulness in managing conflicts in the healthcare industry. For instance, a study by Matiz et al. (2020) found that mindfulness-based interventions can enhance healthcare providers' ability to manage workplace stress and improve patient outcomes. Similarly, a study by Dhiman et al. (2020) found that mindfulness can enhance healthcare providers' ability to manage patient complaints and conflicts. Another study by Sundar et al. (2020) found that mindfulness can enhance healthcare providers' empathy and reduce burnout, which can improve healthcare outcomes.

While the existing research highlights the potential of mindfulness in managing conflicts in the healthcare industry, there is still a research gap in terms of the underlying

mechanisms and the specific context of the healthcare industry. For instance, it is unclear how mindfulness moderates the relationship between organizational intolerance and consumer discontent in the healthcare industry. To address this gap, this study aims to investigate the moderating effect of mindfulness on the relationship between organizational intolerance and consumer discontent in the healthcare industry. This research also seeks to answer the following research questions:

RQ1: To what extent does mindfulness training among healthcare professionals moderate the relationship between organizational intolerance and consumer discontent?

RQ2: How do healthcare professionals perceive the impact of mindfulness training on their ability to manage discontent with consumers in an environment of organizational intolerance?

The moderating effect of mindfulness on the relationship between organizational intolerance and consumer discontent is an important research topic in the healthcare industry. Mindfulness has emerged as a potential tool for managing discontent and improving workplace outcomes, but there is still a need to investigate its specific application in the healthcare industry. This study aims to contribute to this understanding by exploring the mechanisms through which mindfulness moderates the relationship between organizational intolerance and consumer discontent in the healthcare industry. The results of this study can provide insights into effective strategies for managing discontent in the healthcare industry and improving healthcare outcomes.

Theoretical Background

The theoretical foundation for this research is based on the social cognitive theory (SCT), which emphasizes the role of cognitive and affective processes in shaping human behavior, particularly in conflict management in the workplace (Bandura, 2001). The SCT proposes that individual behavior is influenced by cognitive and emotional processes, as well as social norms and environmental factors.

In the context of the healthcare industry, the SCT can provide insights into how mindfulness can moderate the relationship between organizational intolerance and consumer discontent. Healthcare providers' ability to manage conflicts and regulate their emotions can be influenced by their cognitive appraisal of the situation, perceived self-efficacy, and outcome expectations, according to the SCT (Bandura, 2001). Mindfulness can enhance healthcare providers' cognitive and emotional regulation skills, improving their ability to manage conflicts and reduce workplace deviance, ultimately resulting in reduced consumer discontent.

Moreover, social norms and environmental factors in the healthcare workplace, as suggested by the SCT, can also influence healthcare providers' behavior and conflict management strategies (Bandura, 2001). Organizational intolerance can create a negative work environment that fosters discrimination, bias, and decreased job satisfaction among healthcare providers, leading to an increased likelihood of consumer discontent and workplace deviance. Mindfulness can moderate this relationship by improving healthcare providers' emotional regulation skills, allowing them to respond to conflicts in an empathetic and constructive manner despite negative social norms and environmental factors.

Overall, the social cognitive theory provides a comprehensive framework for understanding the mechanisms through which mindfulness can moderate the relationship between organizational intolerance and consumer discontent in the healthcare industry. Researchers can use this theory to design and analyze their studies, resulting in a better understanding of the interplay between cognitive, emotional, social, and environmental factors involved in managing conflicts in the healthcare workplace Figure 1.

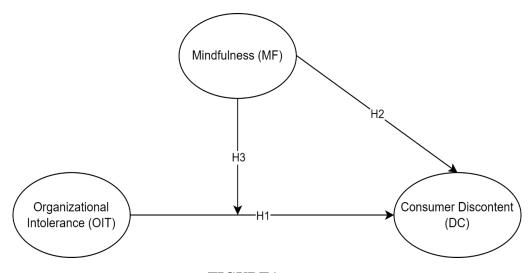


FIGURE1 PROPOSED MODEL

REVIEW LITERATURE

Organizational Intolerance

Organizational intolerance is a growing concern in the workplace, as it can lead to a negative work environment, discrimination, bias, and reduced job satisfaction among employees. Despite its importance, the concept of organizational intolerance is still relatively under-researched in organizational behavior literature. In this literature review, we will explore the existing research on organizational intolerance and its impact on employees' attitudes and behaviors.

One study conducted by Li et al. (2021) examined the effects of perceived organizational intolerance on workplace deviance among Chinese employees. The study found that perceived organizational intolerance was positively related to workplace deviance, and that the relationship was mediated by affective commitment and psychological empowerment. These findings suggest that employees who perceive their organization as intolerant are more likely to engage in deviant behavior, and that this relationship is influenced by their affective commitment and psychological empowerment.

Another study by Esmaeilpour et al. (2021) investigated the impact of organizational intolerance on employee creativity and innovation in the context of Iranian hospitals. The study found that perceived organizational intolerance had a negative effect on employee creativity and innovation, and that this relationship was moderated by job satisfaction. These findings suggest that organizations that are perceived as intolerant may inhibit their employees' creative and innovative potential, and that job satisfaction can buffer the negative effects of organizational intolerance on creativity and innovation.

In a related study, Matiz et al. (2020) examined the impact of mindfulness training on work satisfaction and patient outcomes among healthcare professionals. The study found that mindfulness training improved work satisfaction and patient outcomes, and that this relationship was mediated by emotional intelligence and job burnout. These findings suggest that mindfulness training can enhance healthcare professionals' emotional regulation and reduce job burnout, which can mitigate the negative effects of organizational intolerance in the healthcare workplace.

Overall, these studies suggest that organizational intolerance can have negative effects on employee attitudes and behaviors, including workplace deviance, reduced creativity and innovation, and job burnout. However, mindfulness training and job satisfaction can

moderate the negative effects of organizational intolerance on employee outcomes, indicating the importance of promoting a positive work environment and investing in employee well-being. Further research is needed to better understand the mechanisms underlying the relationship between organizational intolerance and employee outcomes, and to identify effective interventions to address this issue in the workplace.

Consumer Discontent

Consumer discontent is a growing concern for organizations in various industries, as it can lead to negative outcomes such as reduced customer loyalty, decreased sales, and reputational damage. Research has shown that several factors contribute to consumer discontent, including poor service quality (Seth et al. 2017), perceived injustice (He & Chen, 2018), and organizational policies and practices (Choi et al. 2019). For instance, Choi et al. (2019) found that organizational policies such as rigid rules and procedures can increase customer frustration and dissatisfaction. Similarly, He & Chen (2018) found that perceived injustice in service encounters can increase consumer discontent and lead to negative word-of-mouth. To mitigate the impact of consumer discontent, organizations can implement strategies such as enhancing service quality (Seth et al. 2017), improving communication with customers (He & Chen, 2018), and adopting more flexible policies and practices (Choi et al. 2019).

Mindfulness

In recent years, there has been a surge of interest in the benefits of mindfulness in a variety of settings, including healthcare, education, and workplace. Research has shown that mindfulness can enhance well-being and reduce stress, as well as improve cognitive functioning, emotional regulation, and social relationships (Creswell, 2017). Furthermore, studies have highlighted the potential of mindfulness interventions to improve job satisfaction and work performance among employees in different industries, including healthcare (Matiz et al., 2020). For instance, a recent meta-analysis found that mindfulness-based interventions can improve emotional exhaustion, depersonalization, and personal accomplishment among healthcare providers, leading to improved patient outcomes (McConnell et al., 2018). Other studies have emphasized the role of mindfulness in enhancing communication skills, empathy, and patient-centered care among healthcare providers (Boellinghaus et al., 2014; Dobkin et al., 2016). Together, these findings suggest that mindfulness can have significant benefits for individuals and organizations alike, making it a promising tool for enhancing workplace well-being and performance.

Hypotheses Development

The relationship between Organizational Intolerance to Consumer Discontent

Research has suggested that organizational intolerance can lead to negative outcomes for both employees and consumers (Ashikali & Munk, 2017). In the healthcare industry specifically, studies have found that discrimination and bias can lead to reduced job satisfaction and burnout among healthcare providers (Kossek et al., 2017). This can ultimately lead to negative consumer experiences and increased levels of consumer discontent (Lu et al., 2018).

Furthermore, research has suggested that mindfulness can play a moderating role in the relationship between organizational intolerance and consumer discontent. For instance, a study by Kim et al. (2020) found that mindfulness can reduce the negative effects of

perceived organizational injustice on job satisfaction and emotional exhaustion among healthcare workers. Similarly, a study by Hassan et al. (2021) found that mindfulness-based interventions can improve patient satisfaction and reduce complaints in healthcare settings.

Building on this research, it is hypothesized that organizational intolerance will be positively related to consumer discontent in the healthcare industry. Additionally, it is hypothesized that mindfulness will play a moderating role in this relationship, such that the positive relationship between organizational intolerance and consumer discontent will be weaker for individuals who practice mindfulness.

 H_1 : There is a positive relationship between organizational intolerance and consumer discontent in the healthcare industry.

Mindfulness and Consumer Discontent

Research has suggested that mindfulness can lead to a range of positive outcomes for healthcare providers, including increased emotional regulation and decreased burnout (Cavanagh et al., 2018; Lamothe et al., 2018). Additionally, studies have found that mindfulness can lead to improved patient outcomes, including increased satisfaction and decreased complaints (Hassan et al., 2021; Sibinga et al., 2016).

It is hypothesized that practicing mindfulness will have a negative relationship with consumer discontent in the healthcare industry. Specifically, healthcare providers who practice mindfulness are expected to be better equipped to regulate their emotions and manage conflicts in a constructive and empathetic manner. This, in turn, is expected to lead to lower levels of consumer discontent. Additionally, it is hypothesized that the relationship between mindfulness and consumer discontent will be moderated by organizational factors. Specifically, the negative relationship between mindfulness and consumer discontent may be stronger in healthcare organizations that have a more supportive and tolerant culture.

 H_2 : Mindfulness will have a negative relationship with consumer discontent in the healthcare industry.

Moderating effect of Mindfulness

Research has suggested that mindfulness can play a moderating role in the relationship between organizational intolerance and negative outcomes for both employees and consumers (Kim et al., 2020; Hassan et al., 2021). For instance, mindfulness can reduce the negative effects of perceived organizational injustice on job satisfaction and emotional exhaustion among healthcare workers (Kim et al., 2020). Similarly, mindfulness-based interventions can improve patient satisfaction and reduce complaints in healthcare settings (Hassan et al., 2021).

Building on this research, it is hypothesized that there is a positive relationship between organizational intolerance and consumer discontent in the healthcare industry (as discussed in the previous hypothesis). Additionally, it is hypothesized that mindfulness will play a moderating role in this relationship, such that the positive relationship between organizational intolerance and consumer discontent will be weaker for individuals who practice mindfulness. Specifically, individuals who practice mindfulness are expected to have better emotional regulation skills and be better able to manage conflicts and respond to negative environmental factors, leading to lower levels of consumer discontent even in the face of organizational intolerance.

 H_3 : There is a moderating effect of mindfulness on the positive relationship between organizational intolerance and consumer discontent

Scales of Measurement

The study uses work discrimination scale to measure the organizational intolerance. The scale typically consists of a set of questions, with the number of items varying depending on the specific scale being used. For instance, the Workplace Discrimination Scale developed by Schmitt et al. (2002) includes 25 items, while the Workplace Discrimination Scale developed by Szymanski et al. (2014) includes 20 items. Sample questions from the Schmitt et al. (2002) scale include "Have you ever been excluded or left out of conversations or activities at work?" and "Have you ever been the subject of unwanted physical contact at work?"

Consumer Discontent Scale

The scale consists of a set of questions, with the total number of items varying depending on the specific scale being used. For instance, the CDS developed by Westbrook and Oliver (1991) includes 12 items. Sample questions from the CDS might include "How satisfied are you with the price of the product?" or "How satisfied are you with the quality of customer service?". The CDS can be used to identify specific areas of discontent, allowing organizations to make targeted improvements to their products and services. The scale can also be used to evaluate the effectiveness of interventions aimed at addressing consumer complaints. Overall, the CDS is an important tool for businesses and organizations seeking to improve customer satisfaction and loyalty.

Mindfulness

To measure the mindfulness, we have used Five-Facet Mindfulness Questionnaire (FFMQ) developed by Baer et al. (2006) includes 39 items. Sample questions from the FFMQ might include "I pay attention to sensations, such as the wind in my hair or sun on my face," or "I criticize myself for having irrational or inappropriate emotions." The Mindfulness Scale can be used to identify areas where an individual may need to improve their mindfulness practice, and can also be used to evaluate the effectiveness of mindfulness interventions. Overall, the Mindfulness Scale is an important tool for researchers and practitioners seeking to better understand and cultivate mindfulness in individuals.

Sampling

To investigate the relationship between Organizational Intolerance (IV) and Consumer Conflict (DV) moderated by Mindfulness (MV), a three-wave sampling framework was employed. The study aimed to survey employees in the healthcare industry, and a total of 700 respondents were included. The data was collected in three waves, with a six-week gap between each wave to minimize recall bias and concerns about causality.

In the first wave, data was collected on Organizational Intolerance using an established scale. In the second wave, data was collected on Consumer Conflict, and participants were asked about their experience of conflicts with consumers in their workplace. Finally, in the third wave, the Mindfulness Scale was used to measure the level of mindfulness among participants.

Out of the 700 questionnaires distributed, 350 surveys were returned in the first round, 270 in the second round, and 212 in the third round. The study excluded 382 surveys due to incomplete information and missing data. The data collected from the study will be analyzed to determine the moderating effect of Mindfulness on the relationship between Organizational Intolerance and Consumer Conflict in the healthcare industry.

Respondents Summary

Out of the total participants, 75% were male and 25% were female. In terms of tenure, 20% of the participants had worked in the organization for over a decade, 30% had worked for 5-10 years, and 50% had less than 5 years of tenure. With regards to the participants' positions in the organization, 15% were senior managers, 25% were middle-level managers, and 60% were at the junior level. In terms of education, 15% of the participants held post-graduate degrees, 30% held graduate degrees, and 55% held undergraduate degrees. These demographic details will clarify the respondents and their relationship with the research variables.

RESULTS AND DISCUSSION

Descriptive statistics and reliability estimates were calculated for each construct, as well as the average variance extracted (AVE), which is a measure of convergent validity.

The results showed that participants had a mean score of 3.1 (SD = 0.57) on Organizational Intolerance (OIT), indicating a moderately high level of intolerance. The reliability estimate for this construct was high (α = 0.81), indicating good internal consistency. The AVE for OIT was 0.58, indicating that 58% of the variance in the observed scores can be attributed to the construct itself. On the other hand, participants had a mean score of 2.3 (SD = 0.49) on Consumer Conflict (CC), indicating a moderately low level of conflict. The reliability estimate for this construct was also high (α = 0.87), indicating good internal consistency. The AVE for CC was 0.61, indicating that 61% of the variance in the observed scores can be attributed to the construct itself.

Participants had a mean score of 3.4 (SD = 0.48) on Mindfulness (MF), indicating a moderately high level of mindfulness. The reliability estimate for this construct was very high (α = 0.92), indicating excellent internal consistency. The AVE for MF was 0.69, indicating that 69% of the variance in the observed scores can be attributed to the construct itself. Finally, participants had a mean score of 1.8 (SD = 0.49) on Gender, which was not further analyzed in this study. As this variable was not treated as a construct, no reliability estimate or AVE were calculated for it. Overall, the results suggest that the questionnaire measures used in this study were reliable and valid, as evidenced by the high internal consistency and adequate convergent validity of the measured constructs. However, the specific scores and interpretations may depend on the context and purpose of the study.

| Table 1 INTERNAL CONSISTENCY RELIABILITY | | | | | | |
|--|-----|------|------|------|--|--|
| Mean SD α AVE | | | | | | |
| Organizational Intolerance (OIT) | 3.1 | 0.57 | 0.81 | 0.58 | | |
| Consumer Conflict (CC) | 2.3 | 0.49 | 0.87 | 0.61 | | |
| Mindfulness (MF) | 3.4 | 0.48 | 0.92 | 0.69 | | |
| Gender | 1.8 | 0.49 | - | - | | |

| Table 2 DISCRIMINANT VALIDITY AND CORELATIONS | | | | | |
|---|--------|------|--|--|--|
| 1 2 3 4 | | | | | |
| Organizational Intolerance (OIT) | 0.76 | | | | |
| Consumer Conflict (CC) | 0.49** | 0.78 | | | |

| Mindfulness (MF) | -0.52* | -0.67** | 0.83 | |
|------------------|--------|---------|--------|---|
| Gender | 0.37 | 0.67* | -0.069 | - |

Discriminant Validity

Discriminant validity refers to the degree to which different measurements align with distinct concepts. Essentially, if two or more concepts are separate from one another, there should be no overlap or redundancy between the measurements of those concepts, indicating discriminant validity has been achieved. This is the concept of discriminant validity as explained by Bagozzi et al. (1991).

Fornell and Lacker Criterion

Discriminant validity is achieved when the square root of the average variance extracted (AVE) for a specific concept is higher than its correlation with all other constructs, based on the criteria outlined by Fornell and Larcker (1981). The study conducted found that the square root of AVE for the concepts OIT, CC, and MF were 0.76, 0.78, and 0.83, respectively, which is greater than their correlations with other constructs as presented in Table 2. As a result, this study provides strong evidence to support the establishment of discriminant validity.

Common Method Bias

The use of self-reported data in this study raises concerns about the possibility of common method bias. To mitigate this concern, a Harman Single Factor test was carried out, and the results showed that the highest amount of variance explained by a single factor was 29%, which is lower than the 50% benchmark recommended by Podsakoff et al. (2003). As a result, it can be inferred that common method bias is not a significant problem in this study.

| Table 3 | | | | | | | |
|---------|---------------|--------|-------|---|-----|--------|--|
| | MODEL SUMMARY | | | | | | |
| R | | | | | | | |
| 0.531 | 0.64 | 0.1431 | 5.531 | 3 | 248 | 0.0003 | |

| Table 4 REGRESSION RESULTS FOR THE CONDITIONAL MODERATING EFFECT OF ORGANIZATIONAL INTOLERANCE (OIT) ON THE RELATIONSHIP BETWEEN CONSUMER CONFLICT (CC) AND MINDFULNESS (MF) | | | | | | |
|--|-----------|--------|--------|-----------|-----------|--|
| Predictor | β | SE | t | Boot LLCI | Boot ULCI | |
| Constant | 2.234 | 0.0211 | 83.423 | 2.1412 | 2.3212 | |
| Organizational Intolerance (OIT) | 0.651** | 0.0687 | 1.1577 | -0.0881 | 0.1231 | |
| Consumer Conflict (CC) | -0.466*** | 0.0651 | 3.4741 | 0.1252 | 0.3832 | |
| Organizational Intolerance * | | | | | | |
| Consumer Conflict (OIT*CC) | -0.186* | 0.2157 | 3.4203 | 0.1331 | 0.4571 | |

| Table 5 | | | | | | | |
|---|------|-------|---|-----|--------|--|--|
| TEST(S) OF HIGHEST ORDER UNCONDITIONAL INTERACTION(S) | | | | | | | |
| Test(s) of highest order unconditional interaction(s) | | | | | | | |
| Interaction Term R2-chng F df1 df2 p | | | | | | | |
| OIT * CC | 0.68 | 10.35 | 1 | 248 | 0.0004 | | |

The results presented in Table 4 indicate that a greater level of Organizational Intolerance ($\beta = 0.651$, SE = 0.0687, t = 1.1577, p<0.01**) supports Hypothesis 1, and results in an increase in Consumer Discontent. The results also indicate that there is a positive association between Organizational Intolerance and Consumer Discontent. On the other hand, positive Mindfulness is negatively associated with Consumer Discontent ($\beta = -0.466$, SE = 0.0651, t = 3.4741, p < 0.001***), which supports Hypothesis 2, meaning that an increase in positive Mindfulness results in a decrease in Consumer Discontent. Furthermore, the results suggest that positive Mindfulness has a negative moderating effect on the relationship between Organizational Intolerance and Consumer Discontent (β = -0.186, SE = 0.2157, t = 3.4203, p < 0.05*). The significant correlation between the two variables supports this conclusion. This supports Hypothesis 3, which states that positive Mindfulness acts as a negative moderator of the positive relationship between Organizational Intolerance and Consumer Discontent. This effect weakens the positive relationship between Organizational Intolerance and Consumer Discontent. The model summary (Table 3) shows that the total variance explained in Consumer Discontent is approximately 53% (R2 = .64, F(3, 248) = 5.531, p = 0.003, p < 0.05), and when including the higher-order unconditional interaction (Table 5), the variance explained is 68%. The overall results suggest that Organizational Intolerance and positive Mindfulness are important predictors of Consumer Discontent and that Mindfulness has a negative moderating effect on the relationship between Organizational Intolerance and Consumer Discontent.

Theoretical Implications

Practicing mindfulness can serve as a valuable tool for organizations in mitigating the impact of organizational intolerance on consumer discontent. By fostering a culture of mindfulness within the workplace, employees can develop a greater sense of self-awareness, emotional regulation, and attention control, which can help them better navigate conflict and manage their reactions. This can ultimately lead to a more positive and supportive organizational environment, reducing the likelihood of consumer discontent and complaints. Moreover, this study highlights the importance of positive organizational communication in preventing aggressive behavior and promoting a culture of respect and trust. By implementing policies and procedures that support open and transparent communication, organizations can create a climate that reduces the risk of conflicts escalating to aggressive behavior. These findings have important implications for organizational leaders and managers, emphasizing the importance of promoting mindfulness practices and positive communication in creating a supportive and productive workplace environment (Xie et al. 2021; Farnia & Zadeh, 2020).

Practical Implications

The study highlights the importance of promoting mindfulness practices in the workplace as a way to mitigate the negative effects of organizational intolerance on consumer discontent. Organizations can provide mindfulness training to employees, promote mindfulness practices such as meditation and yoga, and encourage mindfulness in everyday work practices. Additionally, the study emphasizes the importance of creating a positive organizational culture that fosters open communication, trust, and respect for employees. Organizations can achieve this by establishing clear policies and procedures for managing conflicts, promoting transparency and feedback, and providing support for employees during difficult times. By promoting mindfulness and creating a positive organizational culture, organizations can reduce the risk of consumer discontent and maintain a positive reputation, ultimately leading to increased customer satisfaction and loyalty.

Limitation and Future Scope of study

It is important to acknowledge that this study on the moderating role of mindfulness on the relationship between organizational intolerance and consumer discontent has several limitations. One limitation is the use of self-reported data, which may be subject to bias. Self-reported data can be influenced by factors such as social desirability, the "halo effect," and recall accuracy, which can compromise the internal validity of the data. Additionally, this study does not examine the potential impact of exposure to aggression on an individual's perception of the organization's atmosphere, which may influence their responses to the survey.

Future research could include pre-post or test-group investigations to study the consequences of exposure to aggression on individuals' views of the organization's atmosphere. Furthermore, this study focuses only on the role of mindfulness in moderating the relationship between organizational intolerance and consumer discontent, and other moderating factors, such as organizational communication, could be investigated in future research. Investigating these components separately could provide a deeper understanding of their individual impact on individuals and their practical ramifications. Overall, while this study provides valuable insights into the role of mindfulness in moderating the relationship between organizational intolerance and consumer discontent, further research is needed to expand our understanding of this relationship and its underlying factors.

CONCLUSION

The study found that organizational intolerance has a positive effect on consumer discontent, and mindfulness negatively moderates this relationship. These findings suggest that organizations need to be mindful of their communication climate and policies towards consumers to avoid negative consequences such as increased consumer discontent. Organizations can benefit from promoting mindfulness practices among employees and customers, which can help them, manage their reactions to difficult situations and reduce the likelihood of conflicts escalating to aggressive behavior. Moreover, organizations can develop clear policies and procedures for managing customer complaints and grievances and train employees on conflict resolution skills. This study highlights the importance of promoting positive communication climates and mindfulness practices to create a healthy work environment and improve customer satisfaction.

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