

TEMPERAMENT AND PSYCHOSOCIAL FACTORS PREDICTING BURNOUT IN CALL CENTER EMPLOYEES

Dr. Zahid Mahmood

*Department of Clinical Psychology, School of Professional Psychology, University of Management and
Technology, Lahore, Pakistan*

Corresponding Author: *

Dr. Zahid Mahmood

Received	Accepted	Published
01 January, 2025	21 February, 2025	31 March, 2025

ABSTRACT

This study examined temperament styles, psychosocial issues, and burnout tendency among 188 call center employees in Lahore (94 men, 94 women; ages 18–40; 1–21 years of experience). Using the Psychosocial Issues Scale, Temperament Scale, and Burnout Tendency Scale, Pearson correlation revealed significant positive relationships among these variables. Hierarchical regression identified age, work experience, impulsive temperament, and depressive symptoms as key predictors of burnout. Gender differences were significant, with men and women differing in burnout levels, while marital status and work shifts showed no impact. One-way ANOVA indicated significant differences across age groups and experience levels on study variables. The findings highlight the need for targeted interventions in call centers to address psychosocial challenges and reduce burnout, ultimately enhancing employee well-being and productivity.

Key Words: - Temperament, Psychosocial Issues, Burnout Tendency, Call Center Employees.

INTRODUCTION

Pakistan has been ranked as 12 biggest call center industries in the Asia with workforce consist of thousands of employees according to global services location index ranking (Kearny, 2019). In Pakistan, the call centers are based on working on the outsourced projects of the companies located primarily in Europe and America. These companies outsource their sales and customer services to the call centers and the call centers facilitate the customers in resolving their issues. This means that the employees have to work in rotation shift i.e. morning and evening with most of the work is done in night shifts to align the working hours with those companies which are located in the west.

Researchers suggested that employees working in rotation shift and night shift are more prone to develop job stress, burnout and various mental health issues in them (Fujino et al. 2001). These psychosocial issues i.e. stress and burnout tendencies are often linked to the predisposition of the individuals often

explained through their temperament. Given the current scenario, it is highly likeable that the employees working in the call centers in Pakistan are likely to get affected by the rigorous work routine and they might be facing similar psychological and mental health issues. This study focuses on exploring the temperament, psychosocial issues and burnout tendencies in the Pakistani call center employees working across morning, evening and night shift and across the gender in order to find out which particular temperament style is most prevalent in employees with high psychosocial issues and burnout tendencies.

Temperament is defined as an early appearing biological traits of an individual which are stable in nature and which further develops into the personality (Strelau, 2020). Temperament has said to have a long and deep impact on the psychological functioning of an individual and temperament vastly determines our personality in later years of life and temperament is also

responsible for how we deal to 11 certain stressors (Rotella et al., 2015). Research suggest that temperament has a deep impact on psychological wellbeing and functioning of individuals and certain temperament can lead to mental health issues (Nigg, 2006).

Psychosocial issues are defined as the combination of both psychological and social issues that an individual might be facing at the same time. The psychosocial issues affect an individual simultaneously and failing to cope with the psychosocial issues an individual is facing, severe mental health complications could be developed. Researcher states that the Occupational Health Problems in the form of Physical, Mental and Psychosocial Health Problems are widely reported among the Call Centre Workers and an appropriate prevention strategy needs to be carried out in order to enable them to work effectively (Subbarayalu, 2013).

Burnout is state of emotional, physical and mental exhaustion caused by excessive or continuous exposure to environmental stressors. Burnout decreases productivity and takes away all the energy of a person. Burnout has been associated with helplessness, poor pressure handling, stress, depression and anxiety as well as physical symptoms i.e. muscle pain and headache (Smith et al., 2019).

The pre-existing literature led to shape the direction of the current study to focus on finding the psychosocial issues and the burnout tendencies in the call center employees of Pakistani call center employees as due to their rigorous routine and night shift work, there might be similar issues which have not been addressed yet. It is quite possible that call center employees also experience burnout because of their working routine. The current study focuses on exploring the temperament, psychosocial issues and burnout tendencies in the call center employees in Pakistani call centers.

1.1 Hypotheses

H1. There is a likely to be a significant relationship between Temperament, Psychosocial Issues and Burnout tendency in call center employees.

H2. Temperament and Psychosocial issues and are likely to be predictors of burnout tendency in call center employees.

H3. Employees with more Psychosocial issues are likely to have high Burnout Tendency than employees with less psychosocial issues.

H4. There will be a significant difference between male and female call center employees in terms study variables

H5. There will be a significant difference between morning and evening shift employees in terms of study variables

H7. There will be a significant difference in working experience of center employees in terms of study variables.

1. Methodology

2.1 Research Design

The Correlational research design was used in this study. In correlational research design, Survey method research was conducted in which self-report questionnaires were used.

2.2 Sample

Sample consisted of 188 call center employees (Men = 94, Women = 94), having age range of 18 to 40 with working experience of 1 year to 21 years working in various call centers of Lahore were made part of the study.

2.3 Sampling Strategy

Purposive sampling strategy was used in this study to collect data.

2.4 Assessment Measures

2.4.1 Demographic Sheet.

Demographics were collected using a self-made demographic sheet that includes age, gender, working shift (morning or evening), working experience in years and marital status of the employees

2.4.2 Temperament Scale (Durrani & Mahmood, 2013).

The Temperament in the call center employees was measured by using 57 item, 4 Likert Temperament Scale (Durrani & Mahmood, 2013). The temperament scale has 6 factors which are apprehensions, impulsivity, submissiveness, cautiousness, introversion and

extroversion. The reliability of the temperament scale was noted to be $\alpha = .88$

2.4.3 Psychosocial Issues Scale (Sultan & Mahmood, 2020)

Psychosocial Issues Scale (Sultan & Mahmood, 2020) indigenously developed for the study, was used to measure the psychosocial issues. The psychosocial issues scale consist of 23 items, 4 point Likert scale which has two factors which are depressive symptomology and work related fatigue. The reliability of this scale in the current study was $\alpha = .93$

2.4.4 Burnout Tendency Scale (Daud & Mahmood, 2016)

Burnout Tendency Scale (Daud & Mahmood, 2016) was used to assess the burnout tendency. This scale was consist of 36 item, 4 Likert scale and it consist of three factors which are feeling of dysfunctionality, feeling of exhaustion and somatic complaints. The reliability of the burnout tendency scale was noted to be $\alpha = .91$

2.5 Procedure

The procedure included acquisition of the scales through proper channel. The participants were presented with a demographic sheet and the self-report measures. It was made sure that the questionnaires were filled in a quiet environment so that external factors i.e. noise does not affect the participant's concentration. Furthermore, the participants were informed to fill the questionnaires without thinking too

much on any question as taking too much time on a question can also affect the natural response.

2.6 Ethical Consideration

Permission was taken from the concerned authors to use scales for data collection. Permission and consent was taken from the call center employees and only those employees were made part of the study who showed willingness. The participants were briefed about the nature of the research and also about the scope and utilization of the study. The right to withdraw from the research was also given to the participants.

2.7 Statistical Analysis

Data was analyzed using SPSS package. Pearson Product Moment Correlation analysis was used to find out correlation between the temperament, psychosocial issues and burnout in call center employees. Hierarchical regression was used to explore the predictive relationship between the variables. Independent sample t-test and ANOVA analysis were used to explore the demographic difference in study variable.

2. Results

In this section, the characteristics of the sample population i.e. age, gender, marital status, working experience are described on the basis of frequency, percentage, mean and SD depending upon the type of the variable. The psychometric properties of the

Table 1: Descriptive Statistics of the Participants (N = 188)

Variables	M	SD
Age	27.81	4.69
Working experience (in years)	5.35	4.76

Note, M = Mean, SD = Standard Deviation

The table 1 depicts the mean and the standard deviation of the continuous variables which are age and working experience. The results show that the average age of the participants is around 27 years and the average working experience is 5 years. The minimum age

reported is 18 years whereas the maximum age reported is 40 years. The minimum working experience of the call center employees taking part in the study is reported to be 1 year whereas maximum working experience reported is 21 year.

Table 2: Descriptive Statistics of the demographic variable of Participants (N = 188)

Variables	F	%
-----------	---	---

Age (Categorical)		
18-25 Years	66	35.1
26-30 Years	70	37.2
31-40 Years	52	27.6
Gender		
Male	94	50
Female	94	50
Working Shift		
Morning	90	47.9
Evening	98	52.1
Marital Status		
Married	66	35.1
Unmarried	122	64.9
Working Experience		
1-5 Years	80	42.6
6-10 Years	60	31.9
11-21 Years	48	25.5

Note, f = Frequency, and % = Percentage

The table 2 depicts the demographic statistics of the participants in terms of the gender, working shifts and the marital status. The results revealed that there are equal number of male and female participants i.e. 94 (50 %) male and 94 (50%) female participants in the study. In terms of the working shifts, the morning shift participants are 90 (47.9 %) whereas the evening shift participants are 98 (52.1 %). In terms of the marital status, the married participants are 66 (35.1 %) and the unmarried participants are 122 (64.9 %) respectively. Age and working experience were converted into categories.

In terms of age, it was divided into three categories. 18 to 25 years, 26 to 30 years and 31 to 40 years. There are 66 (35.1%) participants ranging from 18 years to 25 years of age. From 26 years to 30 years there are 70 (37.2%) participants and there are 52 (27.6%) participants ranging from 31 years to 40 years of age range. In terms of working experience, there are 80 (42.6%) participants who have more than one year but less than 5 years of experience. 60 (31.9%) participants have experience ranging from 6 years to 10 years and 48 (25.5%) participants have experience ranging from 11 years to 21 years.

Table 3: Cronbach's Alpha of the Total and Subscales of Psychosocial Issues scale and the Burnout Tendency Scale (N=188)

Factors	No. of items	α
Psychosocial Issues Scale	23	.93
Burnout Tendency Scale	36	.91
Temperament Scale	57	.88

The table 3 indicate the internal consistency or the Cronbach's alpha of the psychosocial issues scale and its subscales and the other two scales used in the research i.e. the burnout tendency scale and the temperament scale. The psychosocial issues scale showed reliability of

$\alpha = .93$ whereas the Burnout tendency scale showed reliability of $\alpha = .91$ and the temperament scale established reliability if $\alpha = .88$. All the scales showed good internal consistencies which shows that all the scales and the subscales are reliable for this research.

Table 4: Inter-correlation, Mean and Standard deviation of Temperament, Psychosocial Issues and burnout Scale Along with Subscales

Factors	1	2	3	4	5	6	7	8	9	10	11	12	13
---------	---	---	---	---	---	---	---	---	---	----	----	----	----

1	---	.58**	.66**	.57**	.49**	.46**	.20*	.13*	.36*	.15*	.38**	.18*	.35*
2	---	---	.45**	.63**	.71	.32*	.56**	.41**	.52**	.32*	.60**	.54**	.55**
3	---	---	---	.62**	.51**	.57**	.23*	.17*	.30*	.05	.37*	.23*	.28*
4	---	---	---	---	.53**	.50**	.25*	.23*	.36*	.13*	.34*	.27*	.33*
5	---	---	---	---	---	.27**	.49**	.43**	.45**	.23*	.47**	.50**	.45**
6	---	---	---	---	---	---	.04	.02	.12*	.08	.19*	.05	.15*
7	---	---	---	---	---	---	---	.71**	.72**	.46*	.81**	.94***	.75**
8	---	---	---	---	---	---	---	---	.42*	.30*	.65**	.89**	.51**
9	---	---	---	---	---	---	---	---	---	.62**	.72**	.64**	.93***
10	---	---	---	---	---	---	---	---	---	---	.53*	.43*	.80**
11	---	---	---	---	---	---	---	---	---	---	---	.80**	.85**
12	---	---	---	---	---	---	---	---	---	---	---	---	.72**
13	---	---	---	---	---	---	---	---	---	---	---	---	---
M	15.3	17.3	20.0	11.2	5.4	7.6	17.1	14.0	18.2	12.6	11.4	29.6	42.3
SD	4.1	6.9	4.8	3.5	1.9	2.6	8.5	6.05	9.1	5.8	5.7	13.0	18.1

Note. 1 = Apprehensions, 2 = Impulsivity, 3 = Cautiousness, 4 = Introversion, 5 = Submissiveness, 6 = Extroversion, 7 = Depressive Symptomology, 8 = Work Related Fatigue, 9 = Feeling of exhaustion, 10 = Feeling of Dysfunctionality, 11 = Somatic Complaints, 12 = Total Psychosocial Issues Scale Score, 13 = Total Burnout Tendency Scale Score, M = Mean and SD = Standard Deviation

The table above depicts the scores of the inter-correlation between the Temperament, Psychosocial Issues and the Burnout Tendency scales and their subscales in order to find out the relationship between the study variables. Our primary hypothesis aimed to find out the relationship between temperament, psychosocial issues and burnout and their subscales in the call center employees of Pakistani call centers. All the study variables including their subscales showed significant positive correlation with each other ranging from low to moderate to high correlations between the variables.

In particular, temperament's subscale "Impulsivity" showed moderate correlation with both the subscales of psychosocial issues scale i.e. "depressive symptomology" and "work related fatigue". Similarly, temperament's subscale "Submissiveness" also showed moderate correlation with the subscales of psychosocial issues scale. This shows that employees with Impulsive and submissive temperament are more likely to have high degree of psychosocial issues while working in a call center. Subsequently the

same subscales of temperament; "Impulsivity" and "Submissiveness" showed moderate correlation with the subscales of Burnout tendency scale i.e. "Feeling of Exhaustion", "Feeling of Dysfunctionality" and "Somatic Complaints". This shows that employees with this temperament style are more likely to feel exhausted, dysfunctional and have more somatic complaints while at work. Although the subscale "Extroversion" showed very low correlation with the psychosocial issues and the burnout tendency and their subscales. This means that employees who are extrovert by nature are less likely to experience that intensity of psychosocial issues and burnout at workplace. Similarly the subscale "cautiousness" of temperament showed very low level of significance with the "Feeling of Dysfunctionality" subscale of Burnout Tendency Scale.

The results as shown in table 4 above depicts that the psychosocial issues scale showed significant positive correlation with the burnout tendency scale. This shows that employees with more psychosocial issues are more likely to experience high burnout. In particular, the subscale "Depressive Symptomology" showed strong correlation with "Feeling of Exhaustion" and "Feeling of Dysfunctionality". This shows that employees facing more depressive symptoms are more likely to feel exhausted and dysfunctional at work. Similarly, the subscale "Work Related Fatigue" showed strong correlation with the "Feeling of exhaustion". This shows that

employees with more work related fatigue and stress and more likely to get exhausted. The results prove our hypothesis that employees

with more psychosocial issues have high tendency to experience burnout at work which also effects their physical and mental heal

Table 5: Hierarchal regression analysis of demographics, temperament and psychosocial issues as predictor of burnout in call center employees (N=188)

Note. B=Un-standardized Coefficient Beta. LL=Lower Limit, UL= Upper Limit, SEB=Standardized Error Beta, β =Beta, R^2 = R Square, ΔR^2 = Adjusted R Square, * $p < .05$, ** $p < .01$, *** $p < .001$
Hierarchal Regression was run to determine the factors which are predicting the Burnout in call center employees including demographic variables like age, gender, marital status, shift, temperament and psychosocial

issues. The table above shows that in step 1, Gender was found to be the predictor of burnout in call center employees. In step 2, neither working shift and marital status was found to be predictor of burnout in employees and in step 3, Both temperament and psychosocial issues were found to be the significant predictor of burnout in call center employees.

Table 6: Mean, Standard Deviation, t and p Values of male and female employees with factors of TS, PSI and BO (N=188)

Variable	B	95% CI		SE B	β	R^2	ΔR^2
		LL	UL				
Step 1						.03	.024**
Constant							
Age	-.52	-1.24	.19	.36	-.10		
Gender	6.79	.001	13.5	3.44	.14		
Step 2						.03	.013
Constant							
Working Shift	.79	-6.17	7.76	3.53	.017		
Marital Status	.50	-7.56	8.56	4.08	.011		
Step 3						.72	.711**
Constant							
Temperament	.33	.22	.45	.057	.67		
Psychosocial Issues	.97	.84	1.10	.066	.27		

	Men (n= 94)	Women (n= 94)		95% CI		
Variables	M(SD)	M(SD)	t(186)	LL	UL	Cohen's d
Apprehensions	14.36 (3.77)	16.30 (4.34)	-3.26***	-3.10	-0.76	0.47
Impulsivity	17.13 (6.53)	17.55 (7.33)	-0.42	-2.42	1.57	0.06
Cautiousness	19.68 (4.78)	20.49 (4.96)	-1.13	-2.21	0.59	0.16
Introversion	10.62 (3.51)	11.81 (3.54)	-2.31***	-2.20	-0.17	0.33
Submissiveness	5.45 (1.67)	5.38 (2.16)	0.22	-.49	0.61	0.03
Extroversion	7.47 (2.97)	7.74 (2.31)	-0.71	-1.04	0.49	0.10
DS	17.77 (8.51)	16.51 (8.54)	1.00	-1.20	3.71	0.14
WRF	14.02 (5.56)	14.04 (6.54)	-0.02	-1.77	1.72	0.02
FE	18.87 (8.51)	17.68 (9.71)	0.89	-1.43	3.81	0.12
FD	13.81 (5.89)	11.53 (5.56)	2.72***	0.62	3.92	0.39
SC	11.85 (5.52)	11.04 (5.96)	0.96	-0.84	2.46	0.02

Note. CI= Confidence Interval: LL= Lower Limit: UL= Upper Limit, M = Mean, SD = Standard Deviation, DS = Depressive Symptomology, WRF = Work Related Fatigue, FE = Feeling of exhaustion, FD = Feeling of Dysfunctionality, SC = Somatic Complaints. * $p < .05$. ** $p = .001$.

The table above showed the results of the independent sample t-test between the gender and the study variables of the research. The study variables of the research were temperament, factors of psychosocial issues scale and the factors of burnout tendency scale. The results of the independent sample T-test revealed that there was a significant Difference for men ($M=14.36$, $SD=3.77$) and women ($M=16.30$, $SD=4.34$; $t(186) = -3.26$, $p = .001$) on the factor 1 of the temperament scale that is apprehensions. This means that female employees have more apprehensive temperament as compared to male call center employees. The means scores showed that women score high apprehensions trait as compared to men and magnitude of differences in the means of men and women was found to be large effect of $r = 0.47$. Similarly, there was significant difference found in male ($M=10.62$, $SD=3.51$) and females ($M=11.81$, $SD=3.54$; $t(186) = -2.31$, $p = .022$).

In terms of factor four of temperament that is Introversion. women were found to be more introvert as compared to males and magnitude

of differences in the means of men and women was found to be effect of $r = 0.33$.

Furthermore, there was no significant difference found in the male and female employees in terms of temperament which means that apart from apprehensions, both the male and female employees depicts more or less similar temperamental traits i.e. cautiousness, impulsivity, submissiveness and extroversion.

In terms of psychosocial issues, no significant difference was found in the male and female employees working in call center. Both the factors of psychosocial issues scale that are depressive symptomology and work related fatigue showed no significant difference. This means that all the employees regardless of the gender are equally effected psychologically and socially due to their nature of the job.

In terms of burnout tendency, there was a significant difference for men ($M=13.81$, $SD=5.52$) and women ($M=11.53$, $SD=5.96$; $t(186) = 2.72$, $p = .007$) in terms of feeling of dysfunctionality. Men were reported to have high tendency to feel dysfunctional as compared to female employees with the magnitude of the difference was found to be .039, on the other hand, no significant difference in the other factors of the burnout tendency was found between male and female employees. This shows that male and female employees tend to show similar burnout tendency except for feeling of dysfunctionality.

Table 7: Mean, Standard Deviation, t and p Values of morning and evening shift employees with factors of TS, PSI and BO (N=188)

	Morning (n= 90)	Evening (n= 98)		95% CI		
Variables	M(SD)	M(SD)	t(186)	LL	UL	Cohen's d
DS	16.11 (7.43)	18.08 (9.36)	-1.60	-4.39	0.45	0.23
WRF	13.58 (6.05)	14.45 (6.06)	-0.98	-2.61	0.87	0.14
FE	18.29 (8.24)	18.27 (9.90)	0.18	-2.61	2.65	0.01
FD	13.07 (5.99)	12.31 (5.67)	0.89	-0.91	2.44	0.12
SC	11.27 (5.28)	11.61 (6.00)	-0.41	-1.99	1.30	0.05

Note. CI= Confidence Interval: LL= Lower Limit: UL= Upper Limit, M = Mean, SD = Standard Deviation, DS = Depressive Symptomology, WRF = Work Related Fatigue, FE = Feeling of exhaustion, FD = Feeling of Dysfunctionality, SC = Somatic Complaints.

The table 8 shows the T-test results of the factors of the psychosocial issues and burnout tendency in terms of shifts of call center employees that are morning and evening shift. The results of the test revealed that there was no significant difference found in the

psychosocial issues and burnout tendency in morning and evening shift employees. This might be due to same rigorous routine of both

the shifts as employees of both the shifts work in same environment and have same working routine.

Table 8: Mean, Standard Deviation, t and p Values of Married and Unmarried Employees with Factors of TS, PSI and BO

	Married (n= 66)	Unmarried (n= 122)		95% CI		
Variable	M(SD)	M(SD)	t(186)	LL	UL	Cohen's d
DS	16.42 (8.50)	17.52 (8.55)	-.84	-3.67	1.47	0.12
WRF	13.64 (6.67)	14.25 (5.71)	-.62	-2.43	1.22	0.12
FE	18.64 (8.63)	18.08 (9.40)	0.39	-2.20	3.31	0.06
FD	12.06 (5.60)	13.00 (5.93)	-1.05	-2.69	.81	0.16
SC	10.52 (5.46)	11.95 (5.85)	-1.64	-3.16	.29	0.25

Note. CI= Confidence Interval: LL= Lower Limit: UL= Upper Limit, M = Mean, SD = Standard Deviation, DS = Depressive Symptomology, WRF = Work Related Fatigue, FE = Feeling of exhaustion, FD = Feeling of Dysfunctionality, SC = Somatic Complaints. *p< .05. **p= .001.

The result of the independent sample T-test between the married and unmarried call

center employees on psychosocial issues and burnout tendency indicate that there was no significant difference between the married and unmarried call center employees in terms of psychosocial issues and burnout tendency. Call center employees regardless of their marital status, face same level of psychosocial issues and burnout effect.

Table 9: One Way Analysis of Variance (ANOVA) of Three Age Ranges and Psychosocial issues and Burnout Tendency

	18-25 years (n=66)		26-30 years (n=70)		31-40 years (n=52)		F	η^2
Variables	M	SD	M	SD	M	SD		
Depressive Symptomology	18.07	10.32	18.19	8.03	13.16	5.17	5.43	.05
Work Related Fatigue	13.61	6.89	14.72	5.37	12.95	6.28	1.36	.25
Feeling of Exhaustion	20.71	10.50	18.53	8.30	14.05	7.48	6.42	.00
Feeling of Dysfunctionality	13.71	6.15	13.32	5.49	9.53	5.14	7.50	.01
Somatic Complaints	11.29	6.77	12.36	5.54	9.42	3.89	3.67	.07

Note. Between Groups df =2, Within Group, df = 185, Total Group df= 187

As shown in table above, the result of the one-way ANOVA shows that there was significant difference in the three age categories in terms of depressive symptomology. Employees aged from 26 years to 30 years scored high on depressive symptomology as compared to other two age ranges. No significant differences were found among the three age ranges of the employees in terms of work related fatigue. This means that employees regardless of their age range face same level of fatigue due to work.

Furthermore, Employees aged 18 to 25 years scored high on feeling of exhausted as

compared to other two age ranges. Furthermore, employees from 26 years to 30 years of age scored high on feeling of dysfunctionality. Employees aged 26 to 30 years scored high on somatic complaints as compared to other two age ranges. This means that employees aged 26 to 30 years report more somatic complaints as compared to other two age range groups.

The post hoc results revealed that there was significant difference between 18-25 years old employees and 31-40 years old employees in terms of depressive symptomology. Similarly, there was significant difference found between 26- 30 and 31-40 years old employees. Although no significant difference was found

between 18-25 to 26-30 years old employees in terms of depressive symptomology. In terms of feeling of exhaustion, significant difference was found between 18-25 and 31-40 years old employees and 26-30 and 31-40 years old employees. No significant difference was found between age ranges 18-25 and 26-30. In terms of feeling of dysfunctionality, no significant difference was found among 18-25

and 26-30 age ranges although the rest two age ranges were found to be significantly different from each other. Lastly, talking about somatic complaints, there was significant difference found between age ranges 26-30 and 31-40. No significant difference was found between 18-25 and 26-30 age ranges and 18-25 and 31-40 age ranges.

Table 10: One Way Analysis of Variance of Work Experience Categories with Psychosocial Issues and Burnout Tendency

	1-5 years (n=80)		6-10 years (n=60)		11-21 years (n=48)		F	η^2
Variables	M	SD	M	SD	M	SD		
Depressive Symptomology	18.42	8.83	14.35	8.11	14.50	4.92	4.72	.21
Work Related Fatigue	14.23	5.97	12.10	6.39	16.60	4.83	4.02	.10
Feeling of Exhaustion	19.75	9.43	15.70	7.32	14.00	8.13	5.73	.04
Feeling of Dysfunctionality	13.88	5.79	10.60	4.40	9.10	6.11	9.86	.12
Somatic Complaints	12.09	6.16	10.50	4.95	9.20	3.36	2.93	.05

Note. Between Groups $df=2$, Within Group, $df= 185$, Total Group $df= 187$

The table above depicts the results of the one-way analysis of variance of the three categories of work experience with the factors of psychosocial issues and burnout tendency. The results showed that there was significant difference between the three work experience groups of the employees. Employees with work experience of 1 to 5 years scored more of depressive symptomology as compared to employees with 6 to 10 years or 11 to 21 years of work experience. Similarly, employees with 11 to 21 years of work experience scored more on work related fatigue as compared to other two groups. Similarly, employees with 1 to 5 years of experience scored more of feeling of exhaustion as compared to employees of other two work experience groups. Furthermore, employees from 1 to 5 years of experience reported more to have feeling of dysfunctionality. Lastly, somatic complaints were also reported higher in employees with work experience of 1 to 5 years as compared to other two age groups.

Results of Post Hoc analysis in terms of depressive symptomology, there was significant difference found between 1-5 years of working experience and 6-10 years of working experience. In terms of work related

fatigue, there was significant difference found between 6-10 years of working experience and 11-21 years of working experience. No significant difference was found between 6-10 years of working experience and 1-5 years of working experience and 11-21 years of working experience. Talking about feeling of exhaustion, significant difference was found between 1-5 years of working experience and 6-10 years of working experience and 1-5 years of working experience with 11-21 years of working experience. No significant difference was found between 6-10 years of working experience and 11-21 years of working experience. Lastly, in terms of somatic complaints, significant difference was found between 1-5 years of working experience and 11-21 years of working experience. No significant difference was found between 6-10 years of working experience 1-5 years and 11-21 years of working experience.

In terms of feeling of dysfunctionality, there was significant difference found between 1-5 years of working experience and 6-10 and 11-21 years of working experience. No significant difference was found between 6-10 and 11-21 years of working experience. Lastly, in terms of somatic complaints, significant difference was found between 1-5 years of working experience and 11-21 years of working experience. No significant difference was found between 6-10 years of working experience 1-5 years and 11-21 years of working experience.

Discussion

Call center employees in Pakistan have one of the toughest duty because along with morning shift, they also have to work in night shifts which disturbs their sleep wake cycle and everyday routine which precipitates various physical and psychological issues in them. It is hard for them to maintain a positive mind and work at their full pace as they have to deal with multiple internal and external stressors simultaneously. They work as a liaison between customers and the companies and work hard to sell or provide customer services for various companies. In Pakistan, call center having international campaigns sets their working hours in accordance to the time zone of foreign countries i.e. American and European countries which is why they are more prone to stress and mental health problems due to their hectic schedule and little or no time for rest. The present study focused on finding the relationship between temperament, psychosocial issues and burnout tendency in call center employees of both genders and various ages having multiple years of experience and working in both morning and evening shifts. The main aim of the study is to explore the relationship of the study variables and find the differences in the demographic variables.

First hypothesis of this study states significant relationship among temperament, psychosocial issues and burnout. Findings of the current research showed significant positive correlation in temperament, psychosocial issues and burnout in call center employees. This fulfils our hypothesis that employees with more psychosocial issues tend to face more burnout and vice versa. To further explore the predictive relationship between the temperament, psychosocial issues and burnout, regression was used which further gave model wise representation of relationship of the study variables. Researchers suggests the factors i.e. psychosocial issues and burnout tend differ in male and female employees and also it differ from working shift to working shift (Maslach & Leiter, 2006).

In our study, the study variables were used to find the difference among them in terms of temperament, psychosocial issues and

burnout. The results revealed that females were more apprehensive and introverts as compared to male employees. Similarly, male employees were noted to have high degree of feeling of dysfunctionality as compared to female counterpart. No other significant difference was found between male and female employees except these three differences. Surprisingly, psychosocial issues remained same in male and female employees as no significant difference was found. The literature suggests significant difference in mental and physical health of office employees working in difference shifts (Vogel et al., 2012) but in current study no significant difference was found in the psychosocial issues and burnout tendency of employees working in morning and evening shifts. This gives us culturally relevant finding that employees of Pakistani call center face same kind of mental health, physical health and social issues regardless of their working shifts. Furthermore, in terms of other demographic variables i.e. marital status, age, working experience etc., certain differences were found in term of psychosocial issues and burnout and certain factors showed no significant differences.

3. Implications

The current study has vast implications in the call center industry as the trend of hiring the services of clinical psychologist for assessment and management of emotional and behavioral issues of employees in any private or public sector organization is very low. Only few multinational industries hire the services of psychologist for therapeutic purposes. By keeping in view the results if this study, we are certain that employees do face burnout due to psychosocial issues which they face and if not properly dealt with, it can turn into mental dysfunctionality up to pathological level. This study provides are framework and upon which, foundation can be laid by call center organization by early identifying psychosocial issues of employees and by dealing with the issues of employees to avoid any burnout in future.

4. Conclusion

A strong significant relationship was found between all the study variables i.e. temperament, psychosocial issues and burnout tendency. The demographic variables showed significant differences in certain factors of the study and didn't show significant difference in some. The working experience, age and psychosocial issues were found to be predictors of burnout in call center employees. The Pakistani call center employees reported high level of depressive symptoms, work related fatigue which increases their chances of facing exhaustion and somatic issues which leads to becoming dysfunctional. In order to overcome the high risk psychological issues, steps should be taken and comfortable and flexible working environment should be provided to the call center employees as call center industry in Pakistan is on a rise and thousands of young workforce helps boost out country's economy. They are our valuable and precious capital and we should take care of their psychological health as the tiring and hectic working routine is making them prone to develop serious mental health issues in future if they tend to face same level of psychosocial issues and burnout.

REFERENCES

- Daud, S., (2016). Burnout Tendencies and Mental Health Issues of Administrative Staff of the University (Doctoral dissertation, University of Management & Technology).
- Durrani, S. M., Mahmood, Z., & Saleem, S. (2017). The Development and Validation of Temperament Scale for University Students. *FWU Journal of Social Sciences*, 11(1).
- Fujino, Y., Mizoue, T., Izumi, H., Kumashiro, M., Hasegawa, T., & Yoshimura, T. (2001). Job stress and mental health among permanent night workers. *Journal of occupational health*, 43(6), 301-306.
- Kearney, A. (2019, June 13). A.T. Kearney's 2019 global services location index (GSLI) resonates with digital change. PR Newswire: press release distribution, targeting, monitoring and marketing. <https://www.prnewswire.com/news-releases/at-kearneys-2019-global-services-location-index-gsli-resonates-with-digital-change-300867002.html>
- Maslach, C., & Leiter, M. P. (2006). Burnout. *Stress and quality of working life: current perspectives in occupational health*, 37, 42-49.
- Nigg, J. T. (2006). Temperament and developmental psychopathology. *Journal of Child Psychology and Psychiatry*, 47, 395-422.
- Rotella, F., Fioravanti, G., Godini, L., Mannucci, E., Faravelli, C., & Ricca, V. (2015). Temperament and emotional eating: A crucial relationship in eating disorders. *Psychiatry Research*, 225, 452-457.
- Smith, M., Segal, J., Robinson, L., & Segal, R. (2019). Burnout prevention and treatment techniques for dealing with overwhelming stress. Last updated June.
- Stenfors, C. U., Hanson, L. M., Oxenstierna, G., Theorell, T., & Nilsson, L. G. (2013). Psychosocial working conditions and cognitive complaints among Swedish employees. *PloS one*, 8(4), e60637.
- Strelau, J. (2020). Temperament. *Encyclopedia of personality and individual differences*, 5388-5407.
- Subbarayalu, A. V. (2013). Occupational health problems of call center workers in India: A cross sectional study focusing on gender differences. *Journal of Management Science and Practice*, 1(2), 63.
- Vogel, M., Braungardt, T., Meyer, W., & Schneider, W. (2012). The effects of shift work on physical and mental health. *Journal of neural transmission*, 119, 1121-1132.