

**ABSENTEEISM IN A SELECTED SERVICE CALL CENTRE IN CAPE TOWN,  
WESTERN CAPE, SOUTH AFRICA**

**By**

**EVELYN WANJIKU KANIARU**

**Dissertation submitted in partial fulfilment of the requirements for the degree**

**Master of Technology: Human Resource Management**

**in the Faculty of Business and Management Sciences**

**at the Cape Peninsula University of Technology**

**Supervisor: Dr GJ Dale**

**District Six Campus, Cape Town  
December 2020**

CPUT copyright information

The dissertation may not be published either in part (in scholarly, scientific or technical journals), or as a whole (as a monograph), unless permission has been obtained from the University.

## **DECLARATION**

I, Evelyne Wanjiku Kaniaru, declare that the contents of this dissertation represent my own unaided work, and that the dissertation has not previously been submitted for academic examination towards any qualification. Furthermore, it represents my own opinions and not necessarily those of the Cape Peninsula University of Technology.

**Signed Evelyne Wanjiku Kaniaru**

**Date December 2020**

## **ABSTRACT**

Absenteeism is a chronic problem that militates against consistency in any organisation's quality of service, reputation and productivity. It is imperative that businesses should implement appropriate interventions to avert the associated negative consequences.

Organisations with a reliable workforce deliver optimal, high-quality service to clients, with no exception. Service call centres strive to meet clients' requests effectively and efficiently. If this is achieved, a positive reputation and productivity are factors that influence the organisation's bottom line.

Absenteeism is an issue that affects service call centres, both the business and its employees. This has dire consequences if not curbed appropriately and timeously. The annual sickness rate at the company under study was excessive and the Employee Assistance Programme (EAP) was a strategy intended to mitigate high levels of absenteeism at the service call centre. Despite the availability of the EAP, absenteeism statistics continued to increase. The investigation intended to measure the relationship between absenteeism and utilisation of the EAP at a service call centre in Cape Town in the Western Cape, South Africa.

An online Likert scale questionnaire survey measured the relationship between absenteeism and the EAP, and received 109 responses. The participants comprised call centre representatives and management. Descriptive statistics and factor analysis assessed the collected data, with validity and reliability measured through Cronbach's alpha.

Respondents in the study accounted for 98.16%, of which 64% work in a rotational shift schedule as it is a 24/7 call centre. Illness was identified as the main factor for absenteeism, with 67%, followed by stress, which accounted for 7.3%, despite the fact that stress is strongly associated with service call centres and call centre work environments. Promotion of the EAP is active, as the organisation uses nine methods in this respect. The customer service representatives (CSR) are aware of the EAP in the organisation as it was reported by <65% of the respondents.

The respondents reported that management was the least method used to communicate the EAP. In addition, it was unknown that the EAP was implemented to reduce absenteeism by the CSRs, which accounted for <46%. Hence, it was deduced that there is a strong relationship between absenteeism and utilisation of the EAP in the call centre; however, with a 9% variation. Integrated results deduced that high absenteeism in the service call centre is not as a result of non-utilisation of the EAP.

Absenteeism is inevitable in any work environment. EAPs are implemented mainly to improve productivity and employee effectiveness, and to curb absenteeism. Effective awareness of EAP promotes utilisation of the programme, which improves employee well-being. This has a positive impact on employees' work creativity, performance, and the organisation's bottom line. Effective communication on the programme's objectives and implementation is imperative, and management should be at the forefront of this. This creates a sense of compassion and caring for the welfare of employees and should increase the use the EAP and result in a decline in absenteeism.

## **ACKNOWLEDGEMENTS**

### **I wish to thank:**

- My Heavenly Father for His blessings and for affording me the strength and encouragement to complete this journey.
- Friends and family, for their prayers, love and provision.
- Ian Ohlson, Jeanine Brink, Moneeba Adams, Ute Zander, Natasha Oliver-Bennet and the rest of the work (extended) family. Thank you for the opportunity that you afforded me to undertake this project. Your love, aid and laughter encouraged me throughout the journey and made this possible.
- Siphokazi Bukani, who is a blessing to every postgraduate student. Thanks for her chats, encouragement, and most of all, succour.
- Dr John Gilbert Dale – his support and encouragement are highly appreciated.
- Dr Corrie Uys, for her invaluable assistance.
- Mr Jerome Kiley, for his help.
- CPUT postgraduate support staff.
- CPUT Department of Human Resources faculty staff.

## TABLE OF CONTENTS

<b>DECLARATION</b> .....	<b>i</b>
<b>ABSTRACT</b> .....	<b>ii</b>
<b>ACKNOWLEDGEMENTS</b> .....	<b>iv</b>
<b>TABLE OF CONTENTS</b> .....	<b>v</b>
<b>LIST OF FIGURES</b> .....	<b>ix</b>
<b>LIST OF TABLES</b> .....	<b>ix</b>
<b>GLOSSARY</b> .....	<b>xi</b>
<b>ABBREVIATIONS</b> .....	<b>xii</b>
<b>CHAPTER 1: INTRODUCTION AND BACKGROUND TO THE STUDY</b> .....	<b>1</b>
<b>1.1 Introduction</b> .....	<b>1</b>
<b>1.2 Background to the study</b> .....	<b>3</b>
<b>1.3 Research problem</b> .....	<b>4</b>
<b>1.3.1 Main problem statement</b> .....	<b>5</b>
<b>1.3.2 Explanation of the problem(s)</b> .....	<b>5</b>
<b>1.4 Main question</b> .....	<b>6</b>
<b>1.4.1 Sub-questions</b> .....	<b>6</b>
<b>1.5 Aim and objectives of the study</b> .....	<b>7</b>
<b>1.6 Main objective</b> .....	<b>7</b>
<b>1.6.1 Sub-objectives</b> .....	<b>8</b>
<b>1.7 Hypothesis</b> .....	<b>8</b>
<b>1.8 Research methodology</b> .....	<b>9</b>
<b>1.9 Delineation of the research</b> .....	<b>10</b>
<b>1.10 Significance of the research</b> .....	<b>10</b>
<b>1.11 Outline of chapters</b> .....	<b>11</b>
<b>1.12 Summary</b> .....	<b>12</b>
<b>CHAPTER 2: LITERATURE REVIEW</b> .....	<b>13</b>
<b>2.1 Introduction</b> .....	<b>13</b>
<b>2.2 The service call centre</b> .....	<b>13</b>
<b>2.2.1 Development of call centres</b> .....	<b>15</b>
<b>2.2.2 Functions of a call centre</b> .....	<b>16</b>
<b>2.2.3 Characteristics of work in a call centre</b> .....	<b>18</b>
<b>2.3 Absenteeism</b> .....	<b>23</b>
<b>2.3.1 Types of absenteeism</b> .....	<b>24</b>
<b>2.3.2 Model of absenteeism</b> .....	<b>25</b>

2.3.3 Measuring absenteeism .....	27
2.3.4 Effects of absenteeism .....	31
2.3.5 Causes of absenteeism .....	31
2.3.6 Costs associated with absenteeism .....	35
2.3.7 Analysing absenteeism.....	36
<b>2.4 Strategies that deal with absenteeism.....</b>	<b>37</b>
2.4.1 Employee benefit programmes.....	37
2.4.2 Improving communication channels .....	40
2.4.3 Human resource metrics .....	41
2.4.4 Attendance management policy .....	42
2.4.5 Leave.....	43
2.4.6 Attendance incentives .....	44
2.4.7 Implementing disciplinary measures.....	44
2.4.8 Dealing with generational type .....	46
<b>2.5 Evaluating the EAP programme.....</b>	<b>47</b>
<b>2.6 Summary .....</b>	<b>48</b>
<b>CHAPTER 3: RESEARCH METHODOLOGY .....</b>	<b>50</b>
<b>3.1 Introduction .....</b>	<b>50</b>
<b>3.2 Problem and purpose of the study .....</b>	<b>50</b>
<b>3.3 Research questions .....</b>	<b>50</b>
3.3.1 Hypothesis.....	51
<b>3.4 Research approach .....</b>	<b>51</b>
<b>3.5 Research design.....</b>	<b>52</b>
3.5.1 Secondary data .....	52
3.5.2 Primary data .....	53
<b>3.6 Research setting .....</b>	<b>53</b>
3.6.1 Target population and participant selection .....	54
<b>3.7 Data-collection methods.....</b>	<b>54</b>
3.7.1 Pilot study.....	55
3.7.2 Questionnaires .....	55
3.7.3 Web-based surveys.....	56
<b>3.8 Data level of measurement .....</b>	<b>59</b>
<b>3.9 Validity and reliability.....</b>	<b>60</b>
3.9.1 Validity.....	60
3.9.2 Reliability .....	60
<b>3.10 Ethical considerations .....</b>	<b>61</b>
<b>3.11 Data analysis .....</b>	<b>62</b>

<b>3.12 Factor analysis</b> .....	<b>63</b>
3.12.1 Approach to factor analysis .....	64
3.12.2 Requirements for factor analysis .....	65
3.12.3 Kaiser-Meyer-Olkin and Bartlett's test .....	66
3.12.4 Factor extraction and rotation methods .....	66
3.12.5 Number of factors to retain .....	67
3.12.6 Naming of the factors .....	68
3.12.7 Limitations of factor analysis .....	68
<b>3.13 Summary</b> .....	<b>69</b>
<b>CHAPTER 4: PRESENTATIONS OF RESULTS</b> .....	<b>70</b>
4.1 Introduction .....	70
4.2 Population and setting .....	70
4.3 Descriptive statistics .....	70
4.3.1 Biographical data .....	71
4.4 Secondary data .....	80
4.5 Questionnaire results .....	82
4.5.1 Factor analysis results .....	82
4.5.2 KMO and Bartlett's test – Test of adequacy of sample .....	83
4.5.3 Eigenvalues .....	84
4.5.4 Factor extraction and rotation .....	86
4.5.5 Naming of the factors .....	86
4.6 Reliability .....	87
4.6.1 Awareness of EAP .....	88
4.6.2 Absenteeism .....	88
4.6.3 Utilisation of the EAP .....	88
4.6.4 Work attendance .....	88
4.7 Normality tests using SPSS .....	89
4.8 Rank order correlation (Spearman's rho) .....	89
4.9 Coefficient of determination .....	92
4.10 Summary .....	94
<b>CHAPTER 5: DISCUSSION AND INTERPRETATION OF RESULTS</b> .....	<b>95</b>
5.1 Introduction .....	95
5.2 Summary of the study .....	95
5.3 Main research findings .....	95
5.3.1 Absenteeism and utilisation of the EAP .....	96
5.3.2 Underlying issues of absenteeism .....	97
5.3.3 Awareness of and accessibility of the EAP .....	98



5.3.4 Utilisation of the EAP and attendance .....	99
5.3.5 Causes and remedies in relation to absenteeism.....	100
5.4 Summary .....	102
<b>CHAPTER 6: CONCLUSIONS AND RECOMMENDATIONS .....</b>	<b>103</b>
6.1 Introduction .....	103
6.2 Conclusion in relation to the study objectives .....	103
6.2.1 Main Objective:.....	103
6.2.2 Objective 2: .....	104
6.2.3 Objective 3: .....	105
6.2.4 Objective 4: .....	105
6.2.5 Objective 5: .....	106
6.3 Recommendations to organisation.....	107
6.4 Recommendations for further studies.....	108
6.5 Study limitations, implications and suggestions for future research.....	108
6.6 Conclusions .....	110
6.7 Summary .....	111
Reference List.....	112
<b>APPENDIX A: CUSTOMER SERVICE AGENT.....</b>	<b>131</b>
<b>APPENDIX B: MANAGERS .....</b>	<b>139</b>
<b>APPENDIX C: EIGEN COMPONENT TABLE .....</b>	<b>148</b>
<b>APPENDIX D: PATTERN MATRIX.....</b>	<b>149</b>
<b>APPENDIX E: SECTION B RESULTS (CSRs) .....</b>	<b>152</b>

## LIST OF FIGURES

	TITLE	PAGE
Figure 2.1	Model of absenteeism	26
Figure 2.2	Steps to deal with absenteeism using absence data	
Figure 2.3	Reasons for absenteeism	32
Figure 4.1	Respondent age	73
Figure 4.2	Shift schedule category	74
Figure 4.3	Different ways of communication of EAP	75
Figure 4.4	Management team's gender category	77
Figure 4.5	Management race category	78
Figure 4.6	Management 's age category	78
Figure 4.7	Company tenure for management team	79
Figure 4.8	Average annual sick rate from 2010 to 2016 from Company A	81
Figure 4.9	Scree plot	85

## LIST OF TABLES

	TITLE	PAGE
Table 2.1	Growth in South Africa for call centre operations	16
Table 2.2	Tools for short-term absence	45
Table 2.3	Tools for long-term absence	45
Table 2.4	Generation type	47
Table 4.1	Respondents' gender	71
Table 4.2	Respondents' race group	72
Table 4.3	Respondents' age	72
Table 4.4	Respondents company tenure	74
Table 4.5	Average annual sick rate from 2010 to 2016 for Company A	81
Table 4.6	KMO and Bartlett test table	83
Table 4.7	Eigen values - total value explained	84
Table 4.8	Results populated through the Promax rotation	86
Table 4.9	Cronbach's consistency table	87
Table 4.10	Tests of normality	89
Table 4.11	Spearman correlation matrix table	90



## GLOSSARY

**Absenteeism** is defined as an employee's from their regular responsibilities when scheduled to work (Basariya, 2015:141). It will also be referred to as longer absences from work.

**Careways** is an external service provider that provides employee assistance programmes to employees at the call centre.

**“Customers** are individuals who purchase goods or services from a shop or business” (Cambridge Dictionaries, 2020).

**Customer service representative (CSR)** also known as a customer care agent/consultant, is an employee that works with customers to assist with problems or related issues (150 *Great Tech Prep Careers*, 2009:151).

**Employee assistance programmes (EAPs)** are programmes that workplaces offer employees, providing personal and social services (Mogorosi, 2014:343).

According to the Labour Relations Act 66 of 1995 section 200A it defines an **employee** as:

*(a) any person, excluding an independent contractor, who works for another person or for the State, and who receives, or is entitled to receive, any remuneration; and*

*(b) any other person who in any manner assists in carrying on or conducting the business of an employer.*

*and ‘employed’ and ‘employment’ have meanings corresponding to that of an employee,* South Africa, (1995:200).

A **payment credit industry** refers to a paperless work environment to avoid sensitive customer information being used for fraud.

An **online questionnaire** is also known as a web-based survey.

**Well-being** refers to an individual's wellness or well-being.

## ABBREVIATIONS

<b>ACD</b>	Automatic Call Distribution
<b>BCEA</b>	Basic Conditions of Employment Act
<b>BPESA</b>	Business Enabling Process in South Africa
<b>BPO</b>	Business Process Outsourcing
<b>CIPD</b>	Chartered Institute of People Development
<b>CSR</b>	Customer Service Representative
<b>Delhi-NCR</b>	Delhi National Central Region
<b>EAP</b>	Employee Assistance Programme
<b>EFA</b>	Exploratory Factor Analysis
<b>EWP</b>	Employee Wellness Programme
<b>IBEC</b>	Irish Business and Employers Confederation
<b>IBM SPSS</b>	International Business Machines Statistical Program for the Social Sciences
<b>KMO</b>	Kaiser-Meyer-Olkin
<b>LRA</b>	Labour Relations Act
<b>ONS</b>	Office for National Statistics
<b>PCA</b>	Principle Components Analysis
<b>PCI</b>	Payment Card Industry
<b>TPB</b>	Theory Planned Behaviour
<b>TRA</b>	Trained of Reasoned Action
<b>UK</b>	United Kingdom
<b>USA</b>	United States of America
<b>US</b>	United States

## **CHAPTER 1: INTRODUCTION AND BACKGROUND TO THE STUDY**

### **1.1 Introduction**

Service call centres are growing at a rapid pace, as indicated in workforces across the globe. This sector comprises 5% of the workforce in the United States of America, 1.3–4% in Europe and 2% in the United Kingdom (Norman, 2005:3). According to Abraham (2008:98), it is the most rapidly developing global international work environment. Deloitte (2013:6) reports that service call centres are in demand owing to the information and services that consumers expect, and their growth has been progressive. Brand and Gauche (2010:21) add that the service call centre phenomenon is that of a 24/7 business operation that responds to customers' expectations and demands.

Service call centres in South Africa are increasingly utilised to ensure customer satisfaction. The South African BPO (Business Process Outsourcing) industry accounted for 1% of the global BPO revenue in 2014 and is expected to account for 4% of global revenue by 2030 (Deloitte, 2016:4). Sought-after destinations for establishing offshore BPOs are India, the Philippines and sub-Saharan Africa, specifically Kenya and South Africa (Pandy & Rogerson, 2014:209).

South Africa is a lucrative country for off-shore service call centres owing to its high levels of customer service at cost effective rates (NelsonHall, 2015). Therefore, South Africa is a preferred destination in this respect as it offers major cost-saving alternatives of at least sixty percent when compared with other source destinations such as the United Kingdom (BPESA, 2016).

Service call centres have been perceived negatively over the years, being labelled as 'human battery farms' and 'dark satanic mills of the 21<sup>st</sup> century' (Holman, 2002:35). The United Kingdom's popular press created the sweatshop image which has become embedded in people's perceptions (McPhail, 2002:42).

Work strain has a negative influence on employees' well-being for a number of reasons. High turnover rates and absenteeism are related to working in a stressful service call centre environment (Brand & Gauche, 2010:21).

Service call centres have specific characteristics. Several researchers agree that owing to long hours, unique job specifications, and contact performance monitoring, this industry has a high absenteeism rate. Moreover, employees often suffer burnout, resulting in high labour turnover (Janse Van Rensburg, et al., 2016:53). This has a negative impact on the welfare of employees, as noted by Charbotel, et al., (2008:748).

Absenteeism is a pervasive problem in organisations and has direct and indirect costs, as productivity is reduced (Guinsberg & Bayat, 2012:11). South Africa loses R12 billion every year owing to absenteeism because of illnesses (Robbins et al., 2009:512). The HR Pulse News Desk (2014) mentions that South Africa has seen an increase of 500 percent in sick leave since 2001, with a colossal loss of R19 billion every year as a result of absenteeism.

Negative perceptions, pressurised work environments, stress and burnout are all associated with service call centres and these affect the well-being of employees. Therefore, it is imperative that organisations should curb absenteeism to reduce the considerable losses that occur as a result of employee absence. To curb absence, companies need to implement interventions to reduce absenteeism and improve employee well-being so that employees are able to perform effectively and efficiently.

Employee assistance programmes (EAPs) are used as interventions to assist employees to counterbalance work-related stress, mental health and personal issues. They assist employees in coping with the physical, mental and emotional strain experienced in the service call centre environment. Joseph and Walker (2017:177) note that an EAP is a workplace panacea assisting employees with both personal and professional issues to benefit both employees and the organisation. A competitive business requires a

workforce that is present, reliable and consistent, and in order to curb absenteeism, organisations implement EAPs.

These EAPs should be readily available, efficient and effective at promoting employees' well-being and improving productivity. Understandably, in order to achieve this, employees should utilise this programme in the workplace.

## **1.2 Background to the study**

The service call centre under investigation is situated in Cape Town in the Western Cape province of South Africa. It is the only service call centre in Africa affiliated to the international airline. The organisation has over fifteen years of experience in the service call centre industry. The service call centre brands itself as a competitive preferred service provider owing to its industry experience, international brand and skilled employees that service an international clientele.

A competitive business requires a workforce that is present, reliable and consistent. Service call centres are highly pressured work environments. It is through the EAP intervention provided by the employers that employees can find mechanisms to cope, be productive and perform effectively and efficiently.

The service call centre under investigation is a highly pressurised work environment. Customer service representatives (CSRs) deal with work-related stress and psychological and mental health issues, as well as emotional and personal issues. Employees unable to cope with these issues take excessive time off, resulting in high levels of absenteeism. As a solution to reduce this high absenteeism, the EAP was introduced and implemented in this service call centre. An EAP is an employee benefit which is used to reduce absenteeism (Simelane, 2007:35). In addition, it is also utilised by employees who are healthy, perform as per stipulated standard, and who hardly miss work (Bray, 2012:12).



Despite an EAP in place, the CSRs continue to be absent from work and often exceed their stipulated sick leave allocation as detailed by company policy and pertinent legislation, while some individuals even take unpaid leave. Absent employees increase the workload of other team members, prolong working hours and increase overtime costs, and these result in low job dissatisfaction, low work morale and burnout. These, in turn, affect the quality of customer service and negatively impact the company's reputation.

As a competitive international service call centre, the call centre in question must provide excellent and effective service to its clientele. Since 2013 there has been an increase in annual absenteeism. The sickness rate is one strategy used to measure absenteeism by the human resource administrator at the service call centre. High levels of absenteeism made it imperative to implement the EAP.

The EAP was implemented as a strategy for the CSRs to find measures to cope in a stressful work environment and to improve their well-being. Use of the EAP would also assist in decreasing absenteeism, rendering the CSRs to be productive, satisfy client needs and ultimately increase the organisation's profits.

### **1.3 Research problem**

Absenteeism becomes a problem as it reduces productivity and employee morale, and negatively affects the company's bottom line. A CSR that experiences high levels of absenteeism results in unanswered calls, which in turn affect the organisation's revenue and reputation. Munro (2007:22) reports that absenteeism costs include overtime payments for those work colleagues who have to ensure that the organisation remains efficient and effective in respect of its services to customers. The overall impact is disgruntled team members who experience prolonged work hours and deliver compromised service.

The EAP is provided to promote healthy employees that are present and productive. However, in spite of the availability of the EAP, absenteeism remains extremely high. The

investigation sought to determine why the EAP is not curbing high absenteeism and its associated problems.

### **1.3.1 Main problem statement**

The high levels of absenteeism are unacceptable as a result of the non-utilisation of the employee assistance programme by the call centre representatives at the selected service call centre in Cape Town, measured as 5.5% per annum from 2012 to 2016.

### **1.3.2 Explanation of the problem(s)**

Absenteeism is an organisational problem, regardless of the industry, which causes low productivity and performance (Viveka, 2013:80; Kocakülâh et al., 2016:89). The costs incurred have a negative impact on the workplace. As absenteeism escalates, it can be detrimental to the smooth running of an organisation (Bydawell, 2000:18). In a service call centre, the negative impact would be low-quality customer services and poor organisational performance, as well as reputational damage. Employees that receive EAPs from the employer evince reduced absenteeism, higher productivity and revenue increases (Sieberhagen et al., 2011). The acceptable absenteeism rate is between 3.5% and 6% in the majority of South African businesses, which is higher than the acceptable standard of 3% (Singh et al., 2016:114).

The organisation implemented EAP at the service call centre as a strategic intervention to reduce the high levels of absenteeism which were negatively impacting the business. The standard rate for absenteeism in the service call centre is an average of 5.5% percent annually. However, despite the implementation of the EAP, absenteeism remains high. As a result, workloads of those staff who are at work have increased, resulting in dissatisfied employees, low morale and burnout. In addition, the quality of service, organisational revenue and the organisation's reputation are all compromised.

### **1.3.2.1 Sub-problems**

As result of the main research problem, the sub-problems identified are detailed below.

- 1) There may be associated issues relating to the high levels of absenteeism in the service call centre.
- 2) The CSRs may not be aware of the employee assistance programme or how to access it.
- 3) The CSRs may not be aware of how to utilise the employee assistance programme.
- 4) What the causes of absenteeism are at the service call centre and possible remedies.

### **1.4 Main question**

The research endeavoured to answer the following study questions. The main question is given below.

Is there a relationship between the high levels of absenteeism and the non-utilisation of the employee assistance programme in the selected service call centre?

#### **1.4.1 Sub-questions**

The following questions were researched in support of the main research question:

- 1) What are the associated issues of absenteeism in the service call centre?
- 2) Are the CSRs aware of the employee assistance programme and its accessibility at the service call centre?
- 3) Are the CSRs aware of how to utilise the employee assistance programme?
- 4) What are the causes of absenteeism and its probable solutions at the service call centre?

## **1.5 Aim and objectives of the study**

Absenteeism in any business is catastrophic and needs to be addressed as it affects both employees and organisational performance. The sickness rate is one of the measurements of absenteeism at the service call centre under investigation. Nonetheless, it has been increasing above the acceptable 5.5% rate as per the company measurement policy. Careways, an EAP, was introduced as a remedy to minimise absenteeism. It is under this premise the research endeavoured to ascertain if the high levels of absenteeism are the result of the non-utilisation of EAP at the service call centre by the CSRs, by proving the existence of (or lack of) a relationship between absenteeism and the utilisation of EAP by the CSRs, identifying the associated issues pertaining to absenteeism at the service call centre, and probing the awareness, accessibility and utilisation of EAP at the service call centre. Finally, the probable causes of the high absenteeism were investigated and remedies proposed.

The investigation's aim was to find the best probable solutions to minimise absenteeism, in collaboration with the EAP at the call centre, by (i) determining the association between absenteeism and utilisation of the EAP; (ii) identifying the issues relating to absenteeism in the service call centre; (iii) establishing the extent of awareness, accessibility and utilisation of the EAP by the CSRs; and finally (iv) mitigating the root cause of absenteeism at the service call centre with the exploration of other alternative remedies.

## **1.6 Main objective**

The following is the main objective and focus of the study:

To investigate if a relationship exists between absenteeism and utilisation of the employee assistance programme.

### 1.6.1 Sub-objectives

- 1) To determine the underlying issues with regard to absenteeism in the service call centre
- 2) To determine awareness and accessibility of the employee assistance programme that the service call centre offers
- 3) To determine the extent of utilisation of the employee assistance programme by the CSRs at the service call centre
- 4) To determine the causes of absenteeism and explore the solutions at the service call centre.

The overall intention of the study is to address the main problem stated above and to achieve the objectives as related to the research problems and questions.

### 1.7 Hypothesis

There is an assumption that absenteeism is above an acceptable level, owing to non-utilisation of the EAP in the service call centre under study. The following section details the generated hypothesis.

Assumption: There are high levels of absenteeism at the service call centre as the customer service representatives do not utilise the employee assistance programme. The research endeavoured to verify the following:

**H<sub>0</sub>:** The unacceptable levels of absenteeism are not as a result of non-utilisation of the employee assistance programme among customer service representatives at the service call centre; and

**H<sub>1</sub>:** The unacceptable levels of absenteeism are as a result of non-utilisation of the employee assistance programme among customer service representatives at the service call centre.

## **1.8 Research methodology**

The investigative process observed the archival strategy for its research methodology framework. Various primary and secondary sources were referenced from multiple disciplines, including, but not restricted to, human resource management, medicine, business, economics, psychology, and sociology. As it is a social problem, the quantitative research approach that examined absenteeism relating to the utilisation of the EAP in the service call centre. Mooney et al., (2012:3) defines social problem as social condition in need of solutions as a segment of the society views as detrimental to members of society. CSRs absenteeism at the service call centre has negative consequences it was imperative to be addressed.

The research was undertaken at a service call centre of an international airline in Cape Town in the Western Cape province of South Africa. It is the only service call centre in Africa affiliated to the international airline.

The organisation's population comprised at least 300 employees. De Vos et al., (2005:196) suggest that 20 percent of the sample should be considered for a research study. This constitutes 60 respondents for the current study. However, owing to the company's work environment and regulations, sampling was not possible. Each CSR needed to participate in the research.

A Likert online biographical self-set questionnaire was utilised to measure the CSRs' attitudes and opinions. The management questionnaire was administered through the organisation's internal electronic mailing system. An online survey was selected for the research to adhere to the organisation's PCI (Payment Card Industry) data security standard.

Pre-testing research allows the researcher to ensure successful commencement and completion of the study (De Vos et al., 2005:205). Validity of the research method was tested through a pilot study, where the questionnaires were distributed to colleagues and friends. Their feedback allowed for applicable amendments.

Both descriptive and qualitative analysis allowed for data to be read, interpreted and verified, while the researcher was able to draw conclusions. Tables, charts and figures aided the process. Factor analysis available in the IBM SPSS Statistics and with Microsoft Excel software assisted with data analysis. Factor analysis was used to summarise data so that the relationships and patterns could be easily interpreted and understood (Miller et al., 2009:174; Yong & Pearce, 2013:79).

The research examined the relationship between two variables, while the factor analysis technique identified common themes which aided condensation of the data to identify patterns and relationships, followed by easier descriptions and interpretations.

Reliability is an important factor when one selects an instrument, as it enhances the power of a study to detect significant differences or relationships that occur in the population under study (Selebi & Minnaar, 2007:55). Cronbach analysis was used to measure the reliability of the factor analysis in the investigation.

### **1.9 Delineation of the research**

The investigation focused on the unacceptably high levels of absenteeism and the utilisation of the employee assistance programme among customer service representatives. The project was undertaken at an international customer service call centre in the Western Cape province of South Africa. The company has a staff complement of at least 300 employees, of which the target group comprised CSRs and management. The study did not include employees from other departments, such as finance, information technology, or workforce planners.

### **1.10 Significance of the research**

The significance of the study is to determine the root causes of absenteeism and understand the implications of absenteeism at a service call centre. The EAP was implemented as a strategy to address the high levels of absenteeism. Awareness of the

EAP and its objectives among the CSRs needed to be investigated. The aim was to determine if the programme was being communicated to the CSRs or not. The CSRs' utilisation of the programme in order to deal with the high levels of absenteeism was significant to the study. This determined usage of the programme for absenteeism or other purposes.

The outcomes and results of the study are beneficial to a variety of stakeholders. The organisation's management can use the information to be aware of the reasons for not utilising EAP and undertaking other measures to reduce absenteeism. In addition, the organisation may implement other measures to adapt and improve the EAP so that it will be beneficial to employees.

The research may be published in South Africa and on the African continent to contribute to the body of knowledge, and could be beneficial to human resource management practitioners and organisations. The study could be presented at human resource management conferences as means to share information with other HR practitioners. The research provides greater insight into the contact centre industry in respect of trends and challenges in service call centres and could benefit other studies. Information regarding absenteeism and EAP in service call centres could be beneficial to other organisations to overcome similar problems, or to comprehend the phenomenon under study.

### **1.11 Outline of chapters**

The sequence of chapters in this research report is as follows.

**Chapter 1** introduces the research topic, outlines the background to the study, and details the main research problem. The chapter also presents the study's rationale and research methodology, and delineates the significance of the research.

**Chapter 2** details the literature reviewed, providing the theoretical background to the research topic. This includes an introduction and a description of why the research problem exists, thus contributing to a better understanding of the research topic.



**Chapter 3** outlines the research methodology, briefly noted in Chapter 1, and reviews the background to the problem as well as the purpose of the investigation. Thereafter, the chapter discusses the study's research design, ethical considerations, qualitative analysis methods, and the study's validity and reliability.

**Chapter 4** examines the study's results and findings from the collected data, and provides a summary of these with statistical analysis and interpretations. The use of figures and tables allows for easy interpretation and understanding of the results.

The chapter highlights, explains and interprets common themes determined by the factor analysis.

**Chapter 5** presents a discussion of the research study's results. It also provides further clarification and evaluation of the findings in relation to the literature review, and conclusions are drawn based on the study's research questions.

**Chapter 6** concludes the study and presents recommendations; it also reflects on the study's research questions. The chapter also provides recommendations for further studies.

## **1.12 Summary**

This chapter presented and outlined the background to the problem of absenteeism and an employee assistance programme at a service call centre in the Western Cape. It outlined the main research problem and the associated sub-problems. It clarified the aim of the study, questions that guided the research, its objectives and the demarcated hypothesis. Finally, the chapter provided a summary of the research methodology and included the delineation and significance of the study.

## **CHAPTER 2: LITERATURE REVIEW**

### **2.1 Introduction**

This chapter examines the available literature the researcher reviewed for the study. The chapter affords the reader theoretical information, greater insight and a better understanding of service call centres, absenteeism, and EAPs.

### **2.2 The service call centre**

Service call centres are utilised to provide help desk services or telemarketing as a means to retain loyal customers and attract new customers. In addition, it is through call centres that businesses maintain a relationship with customers. Several researchers assert that there is growth in firms that use service call centres through agents who build customer relations and improve customer satisfaction (Tuten & Neidermeyer, 2004:26; Kamboj et al., 2015:994). Businesses use service call centres to ensure customer relationships are maintained, and this has a positive impact on the business in terms of the bottom line.

The service call centre concept does not have a universally accepted definition, (Norman, 2005:1). In order to understand the research problem, it is vital to understand what a call centre is. Van Wyk and Taute (2010:262) define a call centre as follows:

A work environment in which the main business is mediated by computer and telephone-based technologies that enable the efficient distribution of incoming calls (or allocation of outgoing calls) to available staff, and permit customer–employee interaction to occur simultaneously with use of display screen equipment and the instant access to, and inputting of, information.

A service call centre is a work setting where call agents handle customer requests by telephone or computer-based technologies (Zito et al., 2018). A service call centre is a function of the business whereby employees interact with customers using a telephone and a computer, while providing them with a service. In addition, the organisation's success depends on the quality of service employees provide. Service call centres currently enable companies to offer very high service quality and offer their

customers a variety of services and customer facilities to assist in cost reduction (Zito et al., 2018).

It is because of these services that consumers contact companies as they provide an attractive strategy for customer retention and new business. Customers can either contact call centres by calling for the services or the service call centre can call the customers to offer them a variety of services. It is through the type of services that service call centres can be defined either as inbound or outbound services.

Certain conditions exist for call centres (Hauptfleisch & Uys, 2006:23). The agents have direct contact with clients in either inbound or outbound calls, or have a combination of both. Inbound calls occur when consumers contact the business so that the business can provide them with a service. Conversely, customers can call the call centre to complain when they face a problem – this is referred to as a passive role (Zito et al., 2018).

Telecommunications and information systems technologies (Benninghoven et al., 2005:409) allow employees to interact with customers telephonically, while concurrently entering information into a specialised computer program. When the customer calls, the agents utilise the computer system to provide a necessary service or information to the client, based on the query. Automatic call distribution (ACD) or predictive dialling systems allow managerial control as it assists work allocation and sets work pace, allowing managers to measure employee performance. Equally, this telephonic facility manages the distribution of calls to the agents in the business.

It must be noted that not all call centres are the same (Hannif et al., 2010:180). The complexity of the service and the skilled nature of the industry require highly trained call centre staff. This means that required skills range from low-skilled to highly skilled personnel, based on the type of commercial trade. The differences in service call centres depend on the type of business, type of technology used, work organisation, degree of control and autonomy (Hannif et al., 2010:180). The customer demands exceptional service, carried out effectively and efficiently, regardless of the similarities or differences of a service call centre. This is because the bottom line is impacted by the type and quality of service. It is important that this is emphasised to employees.

## 2.2.1 Development of call centres

Researchers claim that service call centres first appeared in the 1900s. They have become an integral source of customer contact and job creation for millions in countries such as the USA, the majority of European countries, Australia, and more recently, India (Russell, 2008:195). Service call centres in the USA started in 1908 in the form of telephone advertisements (Norman, 2005:2).

The service call centre industry is increasing globally as a result of the high demand in customer services in a competitive business environment (Mwendwa & Gitonga, 2017:417). This creates a high demand for businesses and generates employment. The world's fastest growing industry has been the service call centre since the start of the 21<sup>st</sup> century (Dhanpat et al., 2018). The development of service call centres globally is at a rate of 40% (Berkbigler & Dickson, 2014:233). Boston-based HfS Research details that India and the Philippines lead the international market for back-office services, with outsourcing expected to grow 5.1 percent to \$304-billion (*Mail & Guardian*, 2013). A 50% annual growth is expected in the United Kingdom call centre industry (Mwendwa & Gitonga, 2017:417).

The industry's progress creates employment that is vital to the economy. Service call centre businesses are vitally important today as they create employment for millions across the globe and serve as major customer care networks for firms in a variety of different industries (Aksin et al., 2007:665). Furthermore, both developed and developing countries employ large numbers of service workers in service call centres (Bohle et al., 2011:219).

South Africa is the preferred destination for off-shore service call centres in the growing economy for business process outsourcing and offshoring (Pandy & Rogerson, 2014: 215). The unemployment rate in South Africa stands at an estimated 27.4 percent (Fin24, 2019). This has identified South Africa as a lucrative hub for service call centres that create employment. Service call centre sector jobs within South Africa increased from 50 000 in 2005 to 180 000 in 2010, with a prediction that by 2015 approximately 100 000 jobs will be created (Dhanpat et al., 2018). There are 40 000 call centre

workers in South Africa that provide services to destinations across the globe (BPESA, 2016).

The table below details call centres' growth in South Africa.

**Table 2.1:** Growth in South Africa for call centre operations (Pandy & Rogerson, 2014: 211).

Year	Estimation of number of call centres
1997	185
2002	535
2004	653
2007/8	1342
2012	1500

Service call centre development and use continue to grow rapidly to handle a variety of facets of customer relationships to provide customer service, technical support, telemarketing and other services (Tuten & Neidermeyer, 2004:26). Hence, it is vital that businesses use service call centres to build and maintain relationships with customers as they contribute to the organisation, as well as to the economy.

### **2.2.2 Functions of a call centre**

A service call centre can offer a variety of services based on the customer's needs. The following segment details the different types of services.

#### **2.2.2.1 Inbound and outbound services**

Service call centres can offer both outbound and inbound services, or one or the other. They can receive calls that offer both consumer services and sales prospects, or can call the customer to provide sales or other customer deals. An inbound service call centre involves customers calling the service call centre for a service and at a cost, depending on the agent's handling of the calls, which work across different time zones, as they cater for the international markets (Aksin et al., 2007:665). Outbound service call centres make calls to offer sales opportunities through telemarketing to the public (Tuten & Neidermeyer, 2004:26). The South African domestic service call centre market represents 91%, which is mostly inbound customer service calls rather than outbound calls (Benner et al., 2007:4).

### **2.2.2.2 Customer service**

The main task of a service call centre is to deliver a service to the customer. The customer demands exceptional customer service that is effective and efficient. Customers' expectations are met when the CSR has assisted the customer with the required information. A customer representative/agent as being the first contact person when a customer engages with the company on a day to day basis and who provides the service in a timeous, effective and efficient way that signifies what a company stand for, (Blacharski, 2006:84; Gibson,2012 :6). The agent is at the forefront of the business and must be equipped with information and skills to be able to provide the quality service that consumers expect to receive from the organisation. Customer service workers are expected to have the following critical skills to ensure successful interaction with customers: they must be at work on time, and answer calls timeously; and they must be confident, knowledgeable, have a positive work attitude, and excellent listening skills (Oodith & Parumasur, 2015:482). This is ultimately good for the business, as satisfied customers will return for more business.

Customer service is the ability of enthusiastic, knowledgeable employees to provide goods and services to both internal and external customers for the achievement of customer satisfaction of their needs which will result in favourable referrals for the business (Oodith & Parumasur, 2015:482). As customers demand their money's worth, businesses should adjust to meeting their demands as it impacts on the business's bottom line. Hence, the agent is a central part of the organisation's success. As a competitive differentiator, 62% of companies' view that customer experience is delivered by contact centres, (Jaiswal, 2019).

Van Wyk and Taute (2010:263) list measures that detail exceptional service:

- Answering calls in less than five seconds. This means that calls are answered quickly.
- The customer's needs and wants are met effectively and efficiently. The customer's request is answered with the appropriate information provided by the CSR. Although the request may not be processed, the agent may offer other options to the customer. This too can be considered exceptional service.

- Being informed of the product at all times. The CSRs are updated with the necessary product information such as increase in prices, product offers, terms and conditions, or after-sales service to provide the necessary information the customer requested.
- Attention to detail. The agent is meticulous in his/her tasks by ensuring that no mistakes are made. Avoiding mistakes will ensure that the customer is not irritated and that the organisation does not lose the customer or its reputation for good service delivery.
- Service improvement based on ideas provided by the customer service representative (CSR). The CSR works with clients daily and can propose ideas to improve services and products to retain customers and increase sales.

It is of utmost importance that CSRs are aware of the importance of excellent customer service as this will have a positive effect on the bottom line for the organisation and will enhance customer satisfaction.

### **2.2.3 Characteristics of work in a call centre**

There are common themes that can be identified in any service call centre. This section outlines those common variables.

#### **2.2.3.1 Modern form of Taylorism**

Taylor's scientific management aimed at the promotion of employee's efficiency's, in addition to cutting down labour costs, (Tirintetaake, 2017). There are common factors that can be identified in service call centre organisations.

Frederick Taylor (1856–1916) was a proponent of scientific management and workflow theory, and elements of Taylorism are found in service call centres and result in a stressful working environment. Zapf et al. (2003:311) attest that a modern form of 'Taylorism' is characterised by a low level of control for the service call centre agents, and by routine tasks. In addition, high levels of work stress emanate from work tasks and customer interactions. McFarlane et al. (2015:399) add that one in every three employees in a service call centre experiences work stress. Poor well-being of agents has a negative impact on customer service, which in turn can result in high absenteeism, high turnover and low productivity. Hingst (2006:2) describes the service call centre as a form of Taylorism, as noted by Peaucelle (2000:461) as follows:

Conditions prevailing in this situation resemble those of Taylorian workshops, where work rates are close to the maximum that workers can manage. There are very few breaks in between different tasks and the deadlines create a high level of tension.

According to the Shepell-fgi Research Group (2008:3) and McFarlane et al. (2015:399), factors associated with service call centres include:

- high work-related stress;
- poor psychological well-being;
- low job satisfaction;
- physical health problems;
- low ranks of job control; and
- monotonous tasks, high job demands and uncertainty.

They have an impact on the well-being of agents and negatively impact the organisation. Service call centres are also characterised by constant monitoring, the prevalence of targets, short breaks, high workloads, management support and feedback from the monitoring (Taylor & Bain, 2005:266; McFarlane et al., 2015:399). The associated negative impacts on the agents occur when they become pressurised and stressed at work, leading to emotional fatigue and withdrawal, resulting in overall absenteeism.

### **2.2.3.2 Working hours**

In order to meet the service levels that customers demand, service call centres operate in a 24/7 environment. This accessibility is to ensure they provide effective customer satisfaction (Feinberg et al., 2005:1; Van Wyk & Taute, 2010:262). However, the working hours are less desirable than those of other white-collar jobs and this causes stress.

Employees in service call centres face mental stresses, high work pressures and undesirable working hours (Pandy & Rogerson, 2014:210). This may impact the agents negatively and result in high labour turnover and absenteeism. Service call centres can be described as a highly demanding job environment with unusual working hours (Benninghoven et al., 2005:409).



In a service call centre, shift-based working hours are imperative to satisfy customers' needs and offer quality service. Consequently, rotational shift hours are indispensable.

### **2.2.3.3 Performance monitoring**

It is a requirement to meet targets in service call centres and agents' calls are monitored and screened regularly; this good practice allows for regular feedback. However, it may also place additional pressure on agents as they may feel they are under constant scrutiny. Pandey and Rogerson (2014:210) outline that performance monitoring prompted the descriptive analogy of "the bird cage model of call centre work", owing to its intensive application.

Benner et al. (2007:6) perceive performance monitoring as a corrective measure to identify training requirements and to improve performance. Despite this, constant monitoring is often associated with work stress and anxiety in a service call centre. Stress is a major concern that employees face as a result of high demand and continuous monitoring at call centres, and results in high levels of absenteeism, staff turnover, and low commitment, coupled with low organisation attachment (Khalid et al., 2013:59; Harry, 2015).

Performance monitoring refers to agent calls which are constantly checked to ascertain if the required quality and number are achieved as per set guidelines. This continuous monitoring ensures that customer service is excellent, with high performance levels from service call centre employees. However, continuous monitoring creates pressure that results in stress for agents. Therefore, it is important to obtain contact feedback so that the agent knows that performance targets are being met; however, it is equally important to ensure collaboration and understanding to avoid further stress and anxiety.

### **2.2.3.4 Stress and a highly pressurised environment**

Several researchers concur that service call centres have been widely criticised owing to their negative working conditions. Since their inception, call centres have been referred to as sweatshops, as agents work in rows of cubicles, answering calls with

unacceptable psychological work settings, while monitored by managers (Strandberg & Wahlberg, 2007:116; Harry, 2015).

Other descriptions of call centres include 'cyber coolies', 'electronic sweatshops', 'assembly lines in the head', and 'dark satanic mills' because of stressful work environments and limited career growth (Pandy & Rogerson, 2014:210). In addition, as the centre of communication, there is a high demand for customer satisfaction, efficiency and quality service from call centre agents (Miller & Hendrickse, 2016:51). Call centre workplaces challenge the occupational health and safety of employees, which could negatively impact employee well-being.

Van Wyk and Taute (2010:264) outline that call centres follow strict guidelines, and these create a stressful working environment. This is because the CSAs must meet these expectations effectively and efficiently. In addition, CSAs are frequently monitored to ensure that customers' needs are met and their expectations exceeded. Performance monitoring is prevalent in all service call centre practices (Holman, 2002:36). Service call centre agents are pushed to achieve greater levels of performance and are constantly monitored (Miller & Hendrickse, 2016:51).

Despite many negative opinions of service call centres, there are researchers that see them as having evolved since their inception; the perception of their being referred to as sweatshops thus has changed and is outdated (Cranwell-Ward & Abbey, 2005:67; *Mail & Guardian*, 2013). There are differences in opinion in relation to the sweat shop perception between inbound and outbound service call centres, based on the experiences of employees. Literature appears to be influenced by experiences from outsourced service call centres rather than inbound service call centres (Strandberg & Wahlberg, 2007:126).

Service call centre careers do not always have a harmful impact on employees, but instead have a positive effect (Mukherjee & Maheshwari, 2014:53). Hence, service call centres should not be referred to as sweatshops (Sato, 2018:200).

Service call centres are highly pressurised environments for a variety of reasons; however, organisations should ensure that there are mechanisms that assist

employees to overcome the pressures so that they are able to work effectively and efficiently. Organisations should provide the necessary resources and strategies to ensure employees' well-being so that they can be productive at work.

#### **2.2.3.5 Well-being of agents**

There are factors in service call centres that influence the well-being of customer service representatives (Holman, 2002:35). These include major psychological pressures, high work intensity and undesirable working hours, identified in a recent Australian study (Pandy & Rogerson, 2014:210). When an employee's well-being is negatively impacted, the employee will not be productive at work, and this could lead to absenteeism, a high labour turnover and a decrease in the business's bottom line. Service call centre workplaces are a challenge to occupational health and safety (Benninghoven et al., 2005:409; McFarlane et al., 2015:13), since they impact employees' health negatively which leads to either high absenteeism or high employee turnover. Several researchers add that features such as poor health and well-being, as well as employee burnout are associated with call centre work, which is highly demanding and control based (McDonnell et al., 2014:215; Pandy & Rogerson, 2014:210; Harry, 2015). However, McDonnell et al. (2014:215) also view service call centres as workplaces that lead to work satisfaction owing to their high developmental opportunities and workplaces where service call centre agents experience high levels of self-sufficiency through work-related tasks.

The Shepell-fgi report for Canadian service call centres (2008:3) identified that little or no autonomy, a limited variety of tasks, job uncertainty, and high work demands are associated with service call centres. In addition, there are other factors associated with stressful work environments. These include insufficient job resources, low team leader support, unfair pay, poor performance appraisals, inadequate training, and ergonomically poor work stations.

Agents become demotivated and this affects their well-being, often leading to their performing poorly and having low job satisfaction, with high absenteeism and labour turnover, all affecting the services that customers expect and leading to overall business profit decline.

However, some researchers disagree, stating that service call centres are not stressful. Cranwell-Ward & Abbey (2005:67) note other factors that create a stressful work environment, such as job design, call monitoring systems, performance expectations, and call responses; these are based on the degree of freedom and management support which can all influence stress at work. McDonnell et al. (2014:215) add that service call centre agents face considerable levels of autonomy, resulting in greater work satisfaction which increases development opportunities.

Despite the conflicting views, service call centre organisations should encourage their agents to maintain healthy well-being that guarantees that customers' expectations are met timeously, effectively and efficiently to ensure the success of the business.

### **2.3 Absenteeism**

An organisation requires that employees should be healthy, reliable and present at work. Absenteeism in a service call centre has considerable cost implications. These include, though are not limited to, increased workload for the rest of the CSRs, unanswered calls, low levels of customer service and loss of revenue, as well as low service level agreements. In addition, owing to the workload, customer service levels are compromised because of the pressures of trying to meet targets.

Absenteeism is failure to arrive to work (Robbins et al., 2009:18). An employee who is not at work is not able to perform his/her contractual obligation and the organisation suffers a loss, as productivity is low.

Absenteeism can be seen as the failure to report for work as scheduled, regardless of the reason (Guinsberg & Bayat, 2012:11).

The absence of an employee from work when he is scheduled to be at work, is unauthorized, unexplained, unavoidable, and wilful absence from work (Patel & Thakkar, 2014:71).

However, there are inconsistent findings in studies on absenteeism that result in ill-defined meanings (Kalburgi & Thyagaraja, 2013:9). A report by the Australasian Faculty of Occupational Medicine (1999:8) and Bohlander and Snell (2010:96) both state that there is no universal definition of absenteeism. In light of this and the above

definition, the common meaning of absenteeism is when an employee is not at work, as required, regardless of the reason.

### **2.3.1 Types of absenteeism**

There is a variety of different types of absenteeism that organisations need to recognise. The next section details this.

#### **2.3.1.1 Scheduled absence**

Scheduled absence implies that there are reasons why an employee is absent from work. This occurs when an employee is not at work owing to uncontrolled and unavoidable reasons (Patel & Thakkar, 2014:71). Examples are death, rest periods, accidents, and other personal reasons. There are company policies that allow employees to be absent for a limited number of days in a year as prescribed by legislation. The statutory law of South Africa BCEA No. 75 of 1997 detail the types of leave that employees are entitled to, and by which the company must abide (South Africa, 1997:22). Employees are allowed to accumulate annual leave, sick leave, paternity leave or family leave for number of days worked, to rest or use it to for any issue pertaining to or having an impact on the wellness of the individual.

#### **2.3.1.2 Unscheduled absence**

Unscheduled absence is a chronic problem that occurs when an employee is not at work, and without a valid reason. The employer neither plans nor schedules this, and it leads to operational disruptions that are neither planned nor budgeted for (Mogobe, 2011:17). However, when employees exceed their sick leave, the result is unpaid sick leave. This exceeded unpaid sick leave is considered to be unscheduled absence.

There is a sense of entitlement and benefit regarding leave that is stipulated by law and by company policy (Mathis & Jackson, 2008:82; Anderson, 2009:2). Employees, however, tend to misinterpret their entitlement to sick leave, leading to its abuse. Employees should be educated on the importance of their being at work and the repercussions of unauthorised absence. In addition, absence impacts other team members and the organisation's bottom line.

### **2.3.1.3 Sick absence**

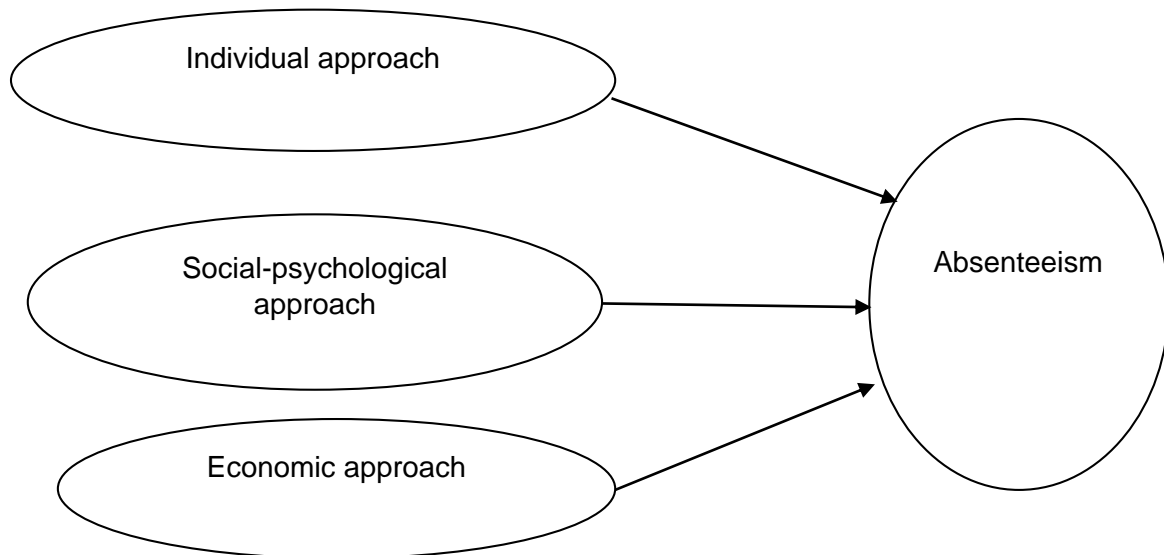
When an individual becomes unwell physically and hence is unable to work, it is counted as sick leave according to the organisation's absence policy. Anderson (2009:13) cites sick absence as a worker's reason for being absent owing to ill health. Sick absence is an operational disruption that is neither planned nor budgeted for by an employer (Tomar, 2014:162). It is costly for businesses to manage because of overtime and recruitment costs, and low productivity. Sick absence is considered involuntary absence as occurs beyond one's control. This type of absence occurs when being absent overrides the motivation to work. Sick absence and unscheduled absence are used interchangeably in some studies, as they have similar meanings. The most common reason for unscheduled absence from work is sick leave, for which an employee must have a valid medical certificate (Tomar, 2014:162).

According to the Basic Conditions of Employment Act No 75 of 1997, employers are required to validate medical certificates from employees (South Africa. Basic Conditions of Employment Act, 1997:24). Statutory law offers guidelines that organisations use to authenticate medical certificates in conjunction with company policy. This ensures adherence to the sick leave policy and that there is no abuse of sick leave,

In order to comprehend the concept of absenteeism, it is imperative to identify the different types of absenteeism and to take necessary measures to eradicate or minimise the issue, as absenteeism can have dire consequences if not dealt with appropriately and timeously.

### **2.3.2 Model of absenteeism**

Absenteeism can be understood from a holistic approach intended to better manage the issue. Various studies have been conducted over the years, which have formulated absenteeism models (Steel et al., 2007:182). The model of absenteeism that appears to be most influential and, which is often cited in absenteeism literature, is that of Steers and Rhodes (1978) (Anderson, 2009:28). The Løkke Nielsen absenteeism model, shown in Figure 2.1 below (Tomar, 2014:163), places absenteeism in perspective.



**Figure 2.1:** Model of absenteeism (Tomar, 2014:163)

There are three approaches to absenteeism, which are outlined here. The individual approach involves reasons for not attending work. The impact of not attending work is on the individual or those around him/her. Tomar (2014:164) states that the model of absenteeism recognises that factors that drive an individual to be absent are determined internally to the individual, and are influenced by individual responses to stimuli at work or outside of it. This could relate to reasons such as illness, family issues or stress.

The socio-economic approach refers to the social environment (Tomar, 2014:164). There are factors that affect the individual externally, for example, the work environment. The company's culture can be a reason for high absence. A report (Australasian Faculty of Occupational Medicine, 1999:15) cites that the effects of physical and social work environments, group norms and the workplace are descriptors of organisational factors. If an employee observes the good conduct of management and his/her colleagues in respect of company policy on attendance and absenteeism, then the individual will adopt such behaviour.

The theory of planned behaviour (TPB) was later developed by Ajzen, and was an extension of trained or reasoned action (TRA) owing to the former's limitations in understanding individual behaviour (Forte, 2017:12). It is understanding human

behaviour that allows strategy formulation in dealing with absenteeism. Forte (2017:112) contends that by implementing effective absenteeism policies, organisational objectives improve, resulting in high worker engagement and productivity.

There are different models of absenteeism with varying conclusions. Regardless of which model is selected to explain the various approaches to absenteeism, it is imperative to recognise its effects and to detect its causes timeously in order to minimise negative impacts.

### **2.3.3 Measuring absenteeism**

In order to determine appropriate measures to curb excessive absenteeism, it must be measured. In 2012 the Chartered Institute of Personnel Development (CIPD) reported that among United Kingdom and Irish organisations, the average level of absenteeism per employee was 6.8 days per year (Bermingham, 2013:10). In 2007 the average full-time employee lost 10.2 days owing to personal reasons (Kocakülâh et al., 2016:89). Organisations measure absenteeism rates to examine if their measures are effective in managing the issue. It is through benchmarking that companies can ascertain if absenteeism is above or below the accepted rate.

The Office for National Statistics (ONS) in the United Kingdom (UK) noted that absenteeism has been at its lowest since 2008 at 1.9% (Office of National Statistics, 2018). Singh et al. (2016:114) estimate the absenteeism rate to be between 3.5% and 6% in the majority of South African businesses, which is higher than the acceptable standard of 3%. The BCEA of South Africa outlines that the acceptable absenteeism rate for an organisation is 4% (Anderson, 2009:1). Gouws (2015:21) states that the acceptable absenteeism rate in South Africa companies is between 3.5% and 6% almost twice the acceptable level.

In order to gauge a true reflection of absenteeism, it is important to establishment the measurement of absenteeism in the organisation. This will indicate trends, so that appropriate remedies may be applied.



The employee rate of absence is calculated by dividing the frequency by the number of employees in the organisation. Employees' absence patterns/trends are observed to show any misappropriation of sick days. The average duration of absence indicates periodic patterns, which can range from monthly, yearly, or over a couple of years, to show if there is an increase or decrease of the rate.

It is imperative for an organisation to measure its sickness rate to ensure that necessary measures are implemented, trends are identified and strategies are adhered to as a means to reduce any costs associated with absenteeism.

### **2.3.3.1 Bradford Factor**

To comprehend absenteeism and its effects, organisations measure it periodically to ascertain contributing factors. It is imperative to monitor workplace absenteeism by using an effective measurement tool, such as the Bradford Factor, which calculates absenteeism frequency. According to Howarth (2005:4), utilising the Bradford Factor measurement will ensure fairness in terms of absence management. It is calculated by squaring the total number of periods of absence and then multiplying it by the total number of days absent.

Number of Absences (S) x Number of Absences (S) x Total Number of Days Absent

$S \times S \times D = \text{Bradford points score}$

or

$B = S^2 \times D$

(Bermingham, 2013:11).

S is the number of occasions of absence in the last 52 weeks.

D is the total number of days' absence during the last 52 weeks.

#### **2.3.3.1.1 Advantages**

There are possible issues that can be identified surrounding an individual's prolonged absence (Tucker, 2019). The Bradford Factor analysis assists management in

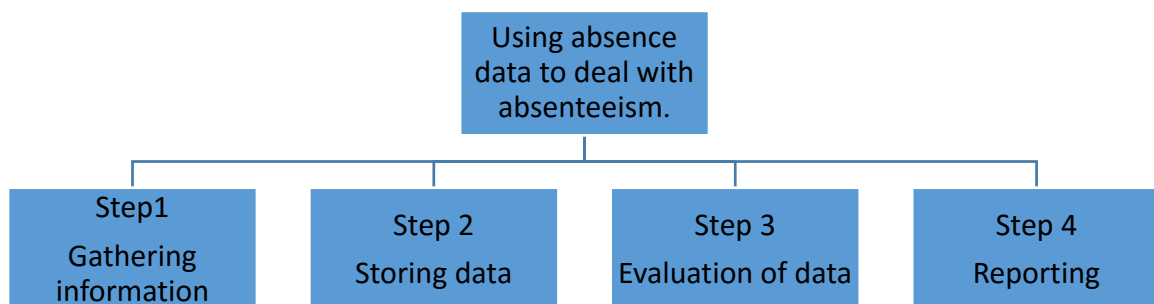
controlling short-term absences (Armstrong & Taylor, 2020:358). The information can be used to decide the most appropriate action. Organisations can identify necessary strategies based on patterns and select the most effective method to reduce the high level of absenteeism.

### 2.3.3.1.2 Disadvantages

The Bradford scale cannot be relied on as it calculates short absences only (Bermingham, 2013:11). This can prevent organisations from determining trends or patterns in absences and allowing them to take appropriate measures.

Organisations should measure and determine the sickness ratio periodically. This is to determine trends, and to check if sickness management policies or other strategies are effectively implemented to reduce absenteeism. If this not the case, the organisation should implement other appropriate methods.

There are other methods that can be utilised to measure absenteeism effectively. Data directs organisations to implement appropriate measures. Bermingham (2013:12) identified four steps that organisations can use for absence data to deal with absenteeism.



**Figure 2.2:** Steps to deal with absenteeism using absence data (constructed by researcher, 2019).

Referring to Figure 2.2 above, the steps are discussed below.

- 1) Gather correct absence information. This involves collecting data every time an employee is absent and following up with back-to-work absence sessions. This information can be gathered through back-to-work sessions once the employee submits documented, supporting documents, or from the information that is captured when an employee is absent.
- 2) Data must be recorded in a user-friendly format. The data must be easily recorded in a format that allows any party requiring the absenteeism data to comprehend it, and to deduce the reasons for the absenteeism.
- 3) Evaluate the data regularly. Once the information is recorded, the data can be examined to deduce. If a pattern exists then that has negative consequences, the management must address to the issue timeously especially with the employee. This will entail using programs to access the collected data for easy interpretation.
- 4) The findings must then be reported to the relevant parties. Once data is evaluated, one can draw conclusions and deduce trends. Thereafter, necessary procedures can be implemented. This can pertain to the employee once a trend emerges of an unacceptable number of absent days as per company policy.

Appropriate action should then be implemented such as sickness counselling sessions. However, new technology has allowed businesses to deal with absenteeism in a way that has created a deeper understanding of the factors in managing absenteeism. Best practices in managing absenteeism are based on implementing strategies that foster a disciplined company culture that employees adhere to. De Stobbeleir et al. (2018:2106) note that employer brand image may be a more effective driver in minimising absenteeism than employee perception.

A further example is an automated time and management system. Sultana et al. (2015:1) state that an automated time and attendance system entails the use of electronic tags, barcode badges, magnetic stripe cards, and touch screens. The information is automatically computerised and analysed should attendance be an issue.

### **2.3.4 Effects of absenteeism**

Prolonged absences can have negative consequences for the organisation if not dealt with effectively. Tomar (2014:166) recognises the negative impacts of absenteeism, as outlined below.

Decreased costs. Absent workers result in low production and low bottom line. In order to rectify the situation, overtime and recruitment of more employees result in taking from already set budgets.

Decreased motivation. Colleagues have to work to compensate for absent colleagues. Increased overtime pressure to meet the required work standards and higher work expectations from both work and customers all result in low motivation, low morale, and disgruntlement in the workplace.

Job dissatisfaction. Pressure to meet customer satisfaction, service levels and company targets while working overtime owing to absent work colleagues also results in job dissatisfaction. In addition, if absenteeism is not dealt with in the workplace and is noticed by peers, it creates low credibility. Low job dissatisfaction results in high employee turnover and is negative for the organisation's performance.

Low customer satisfaction and loyalty. Employees are the ambassadors for an organisation. If absenteeism is high, it results in work overload that affects the quality of customer satisfaction, and which is detrimental to customer loyalty. An employee who has low morale will not work optimally, and this influences the quality of service that the client obtains. The company's reputation will suffer.

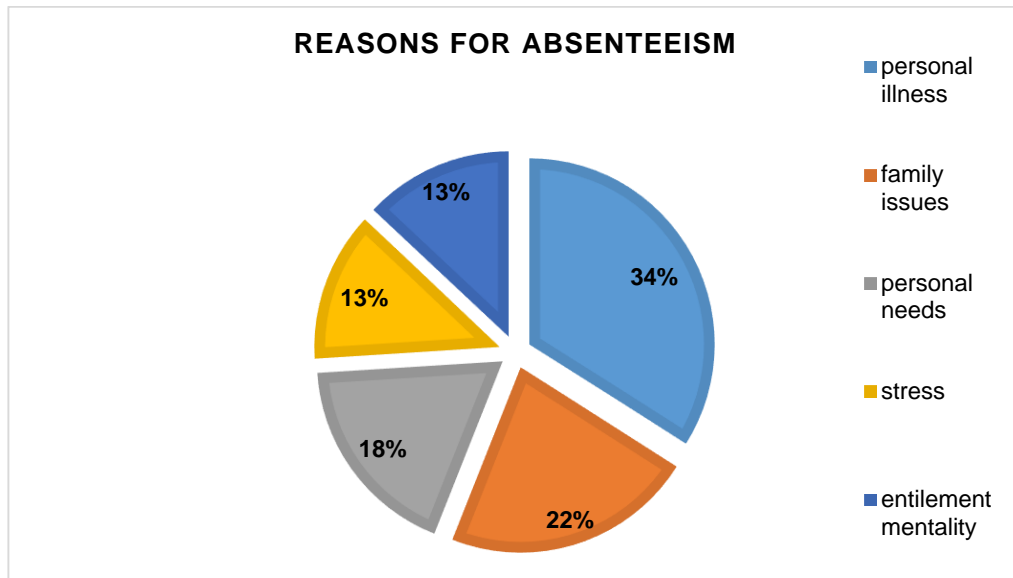
It is imperative that any organisation identify the causes and effects of absenteeism to find the most appropriate strategies to curb absenteeism, and hence ensure optimal productivity within the organisation.

### **2.3.5 Causes of absenteeism**

In order for organisations to address absenteeism, the causes must be investigated. Ascertaining the source of absenteeism and its cure is difficult, as one cannot quantify, qualify or rectify it since it is influenced by interrelated factors (Kalburgi & Thyagaraja, 2013:9). Economic, health, financial, personal and social factors are all grounds for

absenteeism (Tomar, 2014:161). Overall, it is important that organisations understand the root cause of absenteeism in order to choose appropriate remedies.

The overleaf below identifies reasons for absenteeism in an organisation.



**Figure 2.3:** Reasons for absenteeism (Tomar, 2014:165).

Munro (2007:22) and Forte (2017:23), also identify causes of absenteeism as outlined below which can be identified in Figure 2.3.

- Nature of work, which refers to the type of job. Call centre environments are stressful. The way contact centre jobs are designed influences levels of employee well-being (Cranwell-Ward & Abbey, 2005:67). According to Holman (2002:35), employees' well-being is negatively impacted in call centres. A different study concluded that employees sometimes reported physical conditions, but also frequently reported psychological distress (Charbotel et al., 2009:754). Citing Winkel and Mathiassen (1994), the exposure-effect model for call centre work identified that long exposure to it results in disability and sick leave (Norman, 2005:5).
- Leadership in the workplace. The main roots of absenteeism relate to poor management style and poor working conditions (Tomar, 2014:161). If team leaders treat CSAs poorly, this will affect their morale, which may lead to absenteeism. One factor that affects the well-being of employees in a call centre is team leader support (Holman, 2002:35). A team leader who does

not offer any assistance or even feedback regarding performance will cause employees to have little satisfaction in their respective jobs and possibly not report to the workplace as required. Leadership and staff relationships are low as factors identified as root causes of absenteeism (Čikeš et al., 2018).

- Stress in the workplace. Figure 2.3 identifies stress as one of the reasons for absenteeism in service call centres. Stress is identified as one of many causes of absenteeism in the workplace and it is phenomenon in service call centres (Khalid et al., 2013:59; McFarlane et al., 2015:13). There is a relationship between absenteeism and stress which is negative; in a study in Canada, 75% of stressed call centre employees displayed rates of high absenteeism and turnover (Joo & Garman, 1998:2; Khalid et al., 2013:59). The negative associations of service call centres, such as long working hours, constant monitoring and customer demands, can cause high levels of stress that affect the well-being of agents, resulting in their absence from work. Cranwell-Ward and Abbey (2005:67) view that leaders' way of managing can minimise stress levels. In addition, job design influences levels of employee well-being in service call centres, call monitoring systems, performance targets, non-script call responses, and management levels.
- Examples of added costs are those of finding other employees to work overtime and employing temporary employees. This occurs because an absent call agent requires colleagues to work overtime to ensure that the organisation continues to deliver effective and efficient service to customers.
- Impact of shift work. The service call centre under study is a 24/7 work environment, thus employees work shifts. This means that the company works around the clock to cater for different time zones. The pressures of working in different shifts and coping with the work environment can lead to stress. There is an expectation from CSCs to deal with the demanding nature of the work but also with rotational shift schedules that may impact employee well-being (Hannif et al., 2010:181). Other causes, apart from job stress, can be work hours and work culture (Kalburgi & Thyagaraja, 2013:11).
- Personal illness. Figure 2.3 refers to personal illness as a reason for absenteeism. When an employee is ill, going to work is not an option, as the

person will need to rest and recover. However, should illness persist, it will lead to recurring absenteeism which would impact productivity.

- There is consensus among researchers that service call centre employees are prone to high musculoskeletal problems (Norman, 2005:37; Charbotel et al., 2009:748). Service call centre agents are prone to physical, mental and social health issues, as these are associated with the job profile (Raja & Bhasin, 2014:177). It is imperative that appropriate support is offered to employees so that they are able to cope with the work environment.
- Work environment. In order to meet customers' expectations and organisation targets, the service call centre agents have to work under pressure and in extended shifts which affect their quality of sleep. This may result in absenteeism. Long working hours owing to the 24/7 work environment, highly pressurised work demands, and continuous and extensive control, are common factors in service call centres (Hannif et al., 2010:178). Behaviour further exacerbating organisational health is low morale, high stress levels, poor communication, and when leadership and staff relationships are poor (Čikeš et al., 2018).
- Alcohol and drug abuse affect employees' productivity, resulting in high absenteeism in the workplace (Roche et al., 2016:236). This has huge cost implications for both the organisation and employee. In addition, work colleagues are impacted as work load increases result in job dissatisfaction, long working hours and/or stressful work conditions. Assistance and support should be afforded to employees to deal with both the abuse as well as the absenteeism collectively.
- Family and work balance. Working in a service call centre can be stressful. It is associated with working extended hours that disrupt sleep quality. This factor negatively affects family life and employee health. The ability to achieve adequate personal and work balance for service call centre agents is problematic (Hannif et al., 2010:181). Carrasco-Campos, et al., (2017:140) refers to work and family life balance as an indicator to quality of life if employee work long working hours. In respect of service call centre agents, there is the fear of missing out on family life due in call centre and in the hope of balancing both work and family life.

- **Demographics.** This refers to the groups identified in the work force, including age, race, gender, and skill level. Information such as age in relation to absenteeism can offer insight into what is required to improve work attendance. Absenteeism and age appear to have a positive relationship, as the younger generation is more susceptible to absenteeism than the older generation (Bii, 2016:366; Čikeš et al., 2018:26).

It is of utmost importance for organisations to identify the root causes of absenteeism so that appropriate remedies can be implemented to ensure that employees are at work and can perform effectively and efficiently.

### **2.3.6 Costs associated with absenteeism**

A survey showed that absenteeism costs results to about 14.3% of company's expenses (Steel et al., 2007:181). A survey was conducted among 94 000 workers by Gallup-Healthways to assess well-being across 14 major professions in the US. It found endemic chronic conditions, resulting in a total cost of lost productivity of 84 billion dollars owing to absenteeism (Forbes, 2013). Canadian statistics indicate that absenteeism costs companies between 15% and 20% of their direct and indirect payroll expenses (Kocakülâh et al., 2016:91)

Momentum Employee Index research reveals that South African companies lose an estimated R25 billion per year as a result of absenteeism. Over half of this is considered over and above the reasonable quota, depending on the organisation's size (FIN24, 2018). South African organisations lose revenue owing to absenteeism of R200 per employee per day, according to Robbins et al. (2009:18) and lose at least 17% of their payroll yearly (Leblond, 2019). Absenteeism has a significant effect on an organisation's bottom line and must be curbed. These costs have an impact on the organisation, on individuals and on society, and also influence both the social and economic milieus (Carlsen, 2012:129).

High absenteeism costs include direct compensation and recruitment costs, and loss of production (Čikeš et al., 2018:26). Costs associated with absenteeism (Cascio & Boudreau, 2011:56) include the following factors:



*Loss of revenue.* In a call centre there are service levels that are tiered with work performance periodically. These include number of calls over a period of time, average time taken to handle a call, and first call resolution. An absent CSC means that the number of calls is not met, hence customers are not serviced, which means that no revenue is generated.

*Managing costs with absenteeism.* In order to meet the company's targets, an absent employee implies that available employees have to work longer hours, which has a ripple effect. Costs include both time and revenue. Examples are overtime remuneration, time spent drafting documents associated with absent employees, communicating with relevant parties, and possibly time spent in planning disciplinary procedures.

*Reduced quality of performance.* An employee required to work overtime is expected to work longer hours and thus may not work effectively. This adversely affects the overall performance of the employee. There may be reduced quality in respect of replacement employees, and hence reduced quality in customer service.

*Costs of recruitment and training such as recruiting temporary employees.* This occurs when there is a high volume of calls requiring attention and support. This means seconding employees from other departments, who may have been agents previously, to assist.

Regardless of the costs, call centres (or any other companies) ought to reduce these costs, as they require labour that is reliable and constant. Therefore, the organisation must encourage employees to utilise the EAP to ensure productivity continues.

### **2.3.7 Analysing absenteeism**

Employees must take time off, whether to recover from health issues or recoup after working for a long period, as per statutory regulations and company policies. However, if employees take extended unplanned time off, it creates a variety of problems which have cost implications. In order to determine if absenteeism is a problem, there are steps that employers should take. Steps in analysing absenteeism include

understanding the problem, determining the root cause/s and reason/s for absenteeism, and later implementing interventions (Kocakülâh et al., 2016:91).

When absenteeism is calculated in terms of lost revenue or statistically, it places the issue into perspective. A solution cannot be found unless it is comprehended. Investigation into the reasons for frequent absence can lead to trend patterns, detailing roots and causes. By understanding absenteeism, and ascertaining the motives and sources, one can implement appropriate strategies to curb the situation. Organisations that follow these steps are able to cope with absenteeism effectively through preventative measures post analysis.

## **2.4 Strategies that deal with absenteeism**

There are six to eight initiatives to control absenteeism and reduce it by up to 28%, making it worthwhile in respect of time and investment (Marchington & Wilkinson, 2012:297). The following sections detail strategies that organisations use to curb absenteeism.

### **2.4.1 Employee benefit programmes**

There are a variety of employee benefit programmes that organisations adapt and that are beneficial to employees. Employee assistance programmes (EAPs) and employee wellness programmes (EWPs) deal with issues in the work environment (Sieberhagen et al., 2011). In dealing with absenteeism, the effective adoption of employee wellness programmes might diminish the rate of absenteeism and result in increased productivity and improved overall organisational performance (Tomar, 2014:162).

#### **2.4.1.1 Employee assistance programmes (EAPs)**

When tackling absenteeism, organisations should ensure that means are available for employees to deal with non-work-related issues. EAPs assist employees to overcome any issues that militate against their productivity in the organisation. EAPs are intended to assist employees with personal issues, such as intoxication, job fatigue or family problems (Grobler et al., 2011:234; Kocakülâh et al., 2016:92). McCann et al. (2011:284) note that EAPs are used to deal with drug or alcohol problems in an organisation.

An EAP is an intervention that offers a variety of services aimed at identifying personal problems such as drug abuse, financial problems, and relationship and emotional issues that affect employee well-being (Nel et al., 2011:317). In addition, the programme helps employees alleviate pressures around issues such as parental and marital problems while at work (Kocakülâh et al., 2016:92). Researchers view EAPs as holistic interventions as they recognise, assess, observe, refer, counsel and engage in follow-up actions with the goal of addressing employees' problems (Berry & Mirabito, 2011:335; Sieberhagen et al., 2011).

Organisations must offer effective EAPs that promote and support employees who face emotional, physical, or psychological problems. This creates a sense of caring and support that will assist in improving work attendance.

#### **2.4.1.1.1 Benefits of EAPs**

EAPs have advantages for both the employer and employee. This section details the benefits. Simelane (2007:35) identified the following as benefits of EAPs.

*Reduction in absenteeism.* Absenteeism is a major problem that managers try to manage (Munro, 2007:21). An EAP is an initiative that can be used to reduce absenteeism. Rajin (2012:19) explains that an EAP is a strategic tool used to reduce absenteeism and to aid the development and retention of employees.

An agent that endures stress at both home and work may leave the organisation for another, where employers support their employees in this respect.

*Enhanced morale.* Employees' morale increases when the organisation provides support to assist them with any negative situations. This also creates a sense of loyalty, knowing that the employer cares about the employee's well-being and is willing to provide different mechanisms so that the employee is able to cope. This results in high morale and loyalty to the organisation. Employees' perceptions of employers that provide EAPs are positive; they feel cared for and important (Kocakülâh et al., 2016:92).

*Increased cooperation.* When all parties are involved in promoting positive well-being, necessary policies, procedures and interventions are implemented. Training is

provided to ensure that management and supervisors are familiar with what is required should a situation occur that requires an EAP or when employees enquire about the programme. This is usually beneficial to the employer also, as it prevents direct and indirect costs associated with absenteeism. As the employee's well-being is promoted, productivity increases.

*Affected employees assisted.* Management should be educated and trained on the use of EAPs to assist any employee that requires assistance by referring them to the programme. This ensures a wider coverage of assistance than having only specific people who promote EAPs. Mostly importantly, it improves relations between management and employees and creates a sense of management's caring for employees.

*Enhanced productivity.* EAPs are implemented in organisations to ensure the well-being of employees. EAPs assist agents in using the necessary mechanisms to cope with stress, improve well-being, and promote attendance and effective and efficient performance at work.

*Decreased costs.* EAPs decrease indirect and direct costs and problems associated with absenteeism, such as overtime, loss of productivity, hiring temporary labour, and negative reputations. Absenteeism and unplanned absences are addressed by having EAPs in organisations, as these reduce the associated costs (Terblanche & Van Wyk, 2014:33).

*Onsite and external EAPs* Pomp et al., (2017:8) state evidence show that regardless of the location of the EAP, both are equally effective in relation to workplace outcomes. It is imperative that employers ensure that the EAP is beneficial to employees' well-being as well as to the organisation.

#### **2.4.2 Wellness programme**

Wellness programmes are structured programmes offered with the objective of promoting an employee's fitness and well-being as a means of mitigating absence (Sieberhagen, et al., 2011:2; Losina, et al., 2017:2). Employers offer structured, sponsored wellness programmes to employees to implement and sustain behaviours

that improve quality, reduce health risks, enhance effectiveness, and affect the bottom line positively (Berry & Mirabito, 2011:335). By promoting physical well-being in the organisation, one promotes healthy living which is essentially good for the business. Healthy employees are motivated, satisfied with their jobs, productive, and present at work.

#### **2.4.2.1 Benefits**

An organisational wellness programme encourages employees to take care of their physical health. There are also associated benefits. The rewards are valuable to both the employee and the organisation. A well-organised and effective programme promotes a healthy company culture that encourages employees to be effective and efficient at work. The programme should offer guidelines to employees to follow a regime that encourages healthy living that then translates into productive workers.

A wellness programme also reduces the cost of medical health insurance. An employee using the wellness programme reduces his or her chances of becoming ill, which means fewer visits to a doctor. Employees who are physically healthy miss fewer days at work (Bray, 2012:12), resulting in tasks performed more effectively and efficiently because they are at work. Such wellness programmes encourage employees to improve their health. Organisations that offer effective wellness programmes improve workplace morale, and workers are motivated to continue working for the company for longer periods. This is due to a sense of caring, as management promotes healthy living among employees. Wellness programmes also generate greater revenue for the organisation (Bray, 2012:13).

It should be noted that EAPs and EWP's deal with similar issues to promote employee wellness, based on the definitions (Sieberhagen et al., 2011:2). It is important that regardless of the objectives of the programme, it should promote the health and well-being of workers, as both employer and employees benefit.

#### **2.4.2 Improving communication channels**

Ineffective communication from management leads to low staff morale and productivity, and decreases the company's chances of success (Forte, 2017:89). A study by Singh et al. (2016:129) revealed that 17.24% of the respondents cited lack of

communication as a cause of absenteeism. Improved communication channels could be used to reduce absenteeism. Effective communication ensures that all parties involved know what is required, should an issue occur.

Management should monitor the agent's performance and attendance so that in the event of an attendance issue, it is dealt with promptly. Open communication channels ensure that employees understand the impact of absenteeism on the company and thus seek assistance accordingly. Managers should counsel those employees who exceed their absence days or those who are close to doing so. This will ensure that the employee understands the effects and impact of their absence on colleagues as well as on the organisation. An employee's well-being improves if there is supportive leadership (Brand & Gauche, 2010:25). Kocakülâh et al. (2016:92) state that a successful EAP should encourage employees to use it, and public communication channels are useful in advertising its benefits. Overall, absenteeism decreases when the organisation employs a supportive EAP.

### **2.4.3 Human resource metrics**

An organisation should use human resource metrics to measure absenteeism. Metrics will identify patterns, trends and causes, so that interventions can be implemented.

Mathis and Jackson (2008:85) show how an organisation can measure absenteeism:

$$\text{Absenteeism rate} = \frac{\text{number of absent days}}{(\text{Average number of employees}) \times (\text{number of working days})} \times 100$$

Four percent is the acceptable rate based on the Basic Conditions of Employment Act, No. 75 of 1997 (Anderson, 2009:1). The absenteeism rate at South African call centres has increased from 5 to 11 percent (Jacobs & Roodt, 2011:2).

#### **2.4.3.1 Advantages**

The company is able to monitor trends and identify issues that arise from absenteeism, while taking necessary measures to control or alleviate the problem. The information

is also used to analyse the prediction of monthly, yearly and seasonal trends (Secord, 2003:37).

Improvements are made in the worst cases as average absenteeism is calculated and the necessary strategies are adopted to mitigate the problem. It ensures that the attendance management policy is effectively implemented and that all parties understand that adherence is beneficial to the company.

#### **2.4.3.2 Disadvantages**

The absenteeism rate formula has some limitations, as the average absence rate can relate to a longer duration of a few absences or several shorter absences, or both. This is applicable if the underlying absence behaviour has changed over time, when the absence rate can remain relatively stable (Irish business and employers confederation, 2011:8).

#### **2.4.4 Attendance management policy**

It is important for any organisation to have an attendance policy so that both the employer and employee can understand the rights and obligations of each party in the relationship. It is good practice for an organisation to have an attendance management policy so that both employee and employer know what is required of them in accordance with statutory or company policy. Attendance management incorporates programme guidelines that are clear and consistent, integrated with legal requirements, and implemented across the organisation (Tomar, 2014:166).

Viveka (2013:81) notes that an organisation must implement an employee-friendly absence policy that allows paid and unpaid leave when appropriate. Absence management information should be communicated as means to rehabilitate and intercede as a management and reduction tool for absenteeism in the workplace (Mogobe, 2011:27). An employee must fulfil his or her obligations by being at work as per contract. If a situation occurs where the employee is not present for whatever reason, certain procedures need to be followed. This guarantees that there are no misunderstandings on the part of both the employee and the organisation. If there is a misunderstanding, then certain procedures need to be followed in respect of disciplinary measures. The company must also be consistent and fair in terms of

guidelines. For example, employees should be allowed to take time off to recuperate after working for a period of time, as this is in accordance with statutory legislation.

## **2.4.5 Leave**

Leave refers to time off from work to recover so that employees may return well rested and be productive at work. There are various types of leave.

### **2.4.5.1 Annual leave**

A well-rested employee is productive and efficient. An intervention used to control absenteeism is annual leave, as it is consolidated (Cascio & Boudreau, 2011:70). According to the BCEA No.75 of 1997, employees are entitled to 21 consecutive days for every year that they have worked in a company (South Africa, 1997:22). The employer must inform the employee of annual leave days and when these may be taken to ensure that the employee takes the rest period and returns well rested. This promotes well-being that benefits the company also.

#### **2.4.5.1.1 Benefits**

According to the International Labour Organization (2004:2), annual leave allows the employee to be well rested and motivated again after a period of time. This minimises burnout in employees. Annual leave promotes employee well-being in the organisation and creates an opportunity for employees to have time to recoup physically, emotionally and psychologically before returning to work.

#### **2.4.5.1.2 Disadvantages**

A call centre earns its bottom line from agents who take calls. Thus, not all agents can go on annual leave at the same time. It is therefore important that the organisation has a fair and consistent annual leave policy to ensure that each employee is well rested and interruptions in the company's operations that affect the bottom line are avoided.



#### **2.4.5.2 Sick leave**

In South Africa employees are entitled to a number of sick leave days per year as stipulated by regulation and according to period of service.

During every sick leave cycle an employee is entitled to an amount of paid sick leave equal to the number of days an employee would normally work during a period of six weeks (South Africa. Basic Conditions of Employment Act, 1997:22).

It is important that employees notify employers when they are ill and unable to work. However, it is important that the employee understands that even though sick leave is a right, it should not be abused. The organisation's attendance policy must stipulate specific provisions in respect of an illness and taking time off for illness.

#### **2.4.6 Attendance incentives**

Hannas (2008:165) suggests rewards for good attendance to encourage employees to attend work regularly, thereby reducing high absenteeism. This means that employees will ensure they are fit to be at work more often, benefiting both employees and organisation. Such rewards could include extra time off, financial incentives, or even company branded merchandises. Tina Basi (2009:73) proposes bonuses for all call centre employees to control absenteeism and encourage employees to commit to a good attendance record. The use of financial incentives, time off and recognition rewards improve attendance (Aamodt, 2013:382).

Communication is key to ensuring a clear understanding of sick leave. However, encouraging an employee to be at work when ill is counter-productive. An unwell employee jeopardises other healthy colleagues and thus creates an unhealthy work environment.

#### **2.4.7 Implementing disciplinary measures**

An organisation must establish absenteeism policies and procedures to prevent any misunderstanding of what is required in this respect by both employee and employer. Disciplinary measures are executed as an intervention to control absenteeism. These

measures must be communicated to everyone in the organisation. They should be stipulated in the employee handbook and presented during the induction process. Mathis and Jackson (2008:82) contend that disciplinary measures are used to control absenteeism and should be known and comprehended by all parties. Employees should be aware of the processes with regard to both not reporting for work and on returning to work. Management should deal with absenteeism issues at an early stage, whether in respect of short or long periods.

**Table 2.2:** Tools to manage short and long absences (Marchington & Wilkinson (2012:299).

Top six tools used	Top six most effective
<ul style="list-style-type: none"> <li>• Return-to-work interviews</li> <li>• Disciplinary procedures</li> <li>• Appropriate immediate managers provided with sickness absence information</li> <li>• Trigger mechanisms to review absence</li> <li>• Primary responsibility taken by line managers</li> <li>• Family leave obligations</li> </ul>	<ul style="list-style-type: none"> <li>• Return-to-work sessions with line managers</li> <li>• Review absences to appropriate mechanisms</li> <li>• Disciplinary procedures</li> <li>• Sick pay according to valid reasons</li> <li>• Primary responsibility taken by line managers</li> <li>• Training provided to the leadership in absence management</li> </ul>

**Table 2.3:** Tools for long term absences (Marchington & Wilkinson (2012:299).

Top six tools used	Top six most effective
<ul style="list-style-type: none"> <li>• Return-to-work interviews</li> <li>• Occupational health involvement</li> <li>• Risk assessment to aid return to work after long sick leave</li> <li>• Information provided about the illness to line managers</li> <li>• Review absences to trigger mechanisms</li> <li>• Rotational shift work in the workplace</li> </ul>	<ul style="list-style-type: none"> <li>• Occupational health involvements</li> <li>• Changes to shift work patterns or settings</li> <li>• Restriction on sick pay</li> <li>• Return-to-work interviews</li> <li>• Flexible working hours/shifts</li> <li>• Rehabilitation programmes</li> </ul>

It should be noted that back-to-work discussions are important for both long and short absences. These are conducted over a specified time frame as stipulated in the absence management policy. These discussions are not disciplinary sessions, and this should be explained to the employee. The written report details cause of and clarification for frequency of absence by the employee and what is being done to improve attendance. If there is a pattern, then necessary disciplinary sessions can be implemented. However, if the pattern is due to underlying medical conditions, then additional assistance should be offered to the employee.

Critical documents should be provided, such as valid medical certificates. If the employee has longer absences from work owing to a medical condition, then management should implement the incapacity procedure. This occurs when the company resorts to dismissal once all other avenues have been exhausted to allow the employee to improve attendance.

The process must follow the Code of Good Practice as stipulated in Items 10 and 11 of Schedule 8 of the Labour Relations Act (LRA) No. 66 of 1995 (South Africa, 1995:155). This is to ensure there that the process is consistent and fair.

Organisations should select suitable and appropriate measures to control absenteeism and utilise these successfully so that they are beneficial to both employees and employer. Absenteeism is unavoidable so long as there is support for both employee and employer.

#### **2.4.8 Dealing with generational type**

The workforce comprises a variety of generations. Organisations try to adapt the work culture to fit all generational types. Offering flexible work schedules as well as incentive programmes are means of keeping employees happy (Kocakülâh et al., 2018:128). However, it is not easy to keep everyone satisfied. Each generation expects a certain work culture in the workplace. If the organisation does not meet employees' expectations in this regard, employee turnover, as well as job hunting, increases. An employee looking into the job market may not necessarily divulge such information and the reason for this is not necessarily known. Certain changes in behaviour can result in short- or long-term absences.

Table 2.4 overleaf shows the different generation types and corresponding behaviour types.

**Table 2.4:** Generational type (Kocakülâh et al., 2018:128).

Years	Era type	Generation type	Generation
1901–1924	Unravelling	Civic	G.I.
1925–1945	Crisis	Adaptive	Silent
1946–1964	High	Idealist	Boomers
1965–1981	Unravelling	Reactive	Gen X
1982–2000	Crisis	Civic	Gen Y
2001–20??	High	Adaptive	Gen Z

Creating a holistic, conducive culture that allows coexistence for all generational types promotes work retention and prevents job hunting; thus, absenteeism decreases. A variety of methods can be used to deal with absenteeism. However, it is imperative to select one that is appropriate, depending on management’s resources and commitment levels.

## 2.5 Evaluating the EAP programme

It is important for any organisation to evaluate and determine if the implemented strategy is attaining its set objectives. EAPs are implemented to curb high absenteeism and associated problems. Organisations therefore should evaluate their effectiveness. Company goals include promoting and utilising the EAP, improving employee well-being, decreasing absenteeism, lowering stress, increasing job satisfaction and, of course, increasing the organisation’s bottom line. EAPs are implemented to address absenteeism, poor work performance, emotional issues, and high rates of accident (Moore, 1989:508).

Evaluating the EAP in an organisation makes good business sense. It is important to know that the programme is working and meeting its objectives. If the programme is not working for the organisation, then the obstacles should be addressed, which in turn will save cost and time for the organisation. Moore (1989:508) postulates that an EAP assesses itself to determine whether or not it is achieving its objectives, validating return on investment for management, and improving performance. There is a positive

association between the efficacy of an EAP and the productiveness of people processes within an organisation (Compton & McManus, 2015:32).

## **2.6 Summary**

Customer service calls are performed by employees using computerised and telephonic technologies to provide a service to customers in order to maintain customer relations. There have been huge developments since the 1900s, and the phenomenon has increased globally as a result of the high demand for customer services in a competitive business environment. The progress of the service call centre industry creates employment that is vital for the economy, both globally and locally.

Service call centre growth and utilisation continue to grow rapidly, as call centres offer a variety of customer relationship services. These include both inbound and outbound customer services and a combination of the functions, depending on the nature of the business. Common themes have been pervasive to service call centres since their inception. However, there are various and conflicting views on service call centre factors. Some of the factors are viewed to have a negative impact on the well-being of CSRs. As a result, absenteeism has become an issue in the organisation under study and has decreased the efficiency, effectiveness and overall performance of the service call centre. Despite the conflicting views, service call centre businesses must fulfil a healthy well-being mandate to their employees to ensure the success of the business's bottom line.

Absenteeism is when an employee is not at work as required, regardless of the reason. Identifying the type of absence mandates the organisation to take necessary action to remedy the issue as it has considerable cost implications and must be avoided. There are a variety of costs incurred as a result of absenteeism. This problem must be addressed timeously and effectively, and solutions must be implemented to minimise these costs. In order to distinguish what appropriate measures are essential to curb excessive absenteeism, it must be calculated.

It is by benchmarking with acceptable global standards that an organisation can ascertain if absenteeism is above the acceptable rates. Thereafter investigations should be conducted to understand and subsequently analyse the issue. Absenteeism

statistics and costs place the issue in perspective as trends or patterns are identified. The root cause is identified and appropriate strategies are implemented to reduce absenteeism. Organisations should select suitable and appropriate measures to control absenteeism, beneficial to both employees and employer. Absenteeism is unavoidable, but so long as there is support for both employee and employer, the issue can be managed effectively and efficiently.

It is imperative to evaluate an appropriate strategy to curb absenteeism. In this study, the EAP was implemented to curb high absenteeism and its associated problems at the service call centre. Evaluating EAP in an organisation makes good business sense. It is important to know that the programme is working and meeting the set objectives. If not, other measures should be implemented to improve the situation or the organisation should select another appropriate strategy.

The next chapter details the research methodology that the study used to address the research problem, namely absenteeism at a selected service call centre in the Western Cape.

## **CHAPTER 3: RESEARCH METHODOLOGY**

### **3.1 Introduction**

This chapter presents the process and steps followed to examine why there are high levels of absenteeism, despite the availability of the employee assistance programme, at a service call centre in the Western Cape, South Africa. These steps had to be followed stringently in accordance with the study's objectives. The process spanned from identifying the problem and the purpose of the investigation, to detailing the assumptions of the study, its research design, methods of data collection and analysis and interpretation.

### **3.2 Problem and purpose of the study**

The research problem centred on absenteeism in relation to utilisation of the EAP at the service call centre. The EAP was implemented at the organisation as an intervention to curb the high levels of absenteeism in the service call centre. However, in spite of the availability of the EAP in the service call centre, there has been absenteeism averaging 5.5% per annum from 2012 to 2016. The data was sourced from the service call centre annual human resource report with the assistance of the human resource administrator from the company under investigation.

As a result of absenteeism, employees' workloads have increased to meet customer satisfaction, while employees have suffered from low morale and burnout. The purpose of the research was to answer the research questions aimed at proving the hypothesis. Hypothesis testing may confirm that a relationship exists and these the findings can be used to improve workplace performance through reduced employee absence (Sekaran & Bougie, 2016:103).

### **3.3 Research questions**

The study questions guided the investigation as Chapter 1 of the study outlined the following key research questions:

- 1) Is there a relationship between the high levels of absenteeism and the non-utilisation of the employee assistance programme in the selected service call centre?

- 2) What are the associated issues of absenteeism in the service call centre?
- 3) Are the CSRs aware of the employee assistance programme and its accessibility at the service call centre?
- 4) Are the CSRs aware of how to utilise the employee assistance programme?
- 5) What are the causes of absenteeism and its probable solutions at the service call centre?

The investigation endeavoured to achieve the study objectives by answering the research questions.

### **3.3.1 Hypothesis**

There is an assumption of the existence of an association between absenteeism and utilisation of the EAP in the service call centre under study. The following assisted in the formulation of the hypothesis.

Assumption: There are high levels of absenteeism as a result of non-utilisation of the employee assistance programme by customer service representatives.

**H<sub>0</sub>:** The unacceptable levels of absenteeism are not as a result of non-utilisation of the employee assistance programme among customer service representatives at the service call centre.

**H<sub>1</sub>:** The unacceptable levels of absenteeism are as a result of non-utilisation of the employee assistance programme among customer service representatives at the service call centre.

### **3.4 Research approach**

The investigation examined absenteeism in the service call centre in relation to utilisation of the EAP. Positivist perspectives in social research are associated with quantitative research methods. The logic stipulates that this type of research includes the collection of data using a set array of variables which explores patterns of unpremeditated relationships between variables. The researcher then tests a given theory to confirm or refute the hypothesis (Henn et al., 2009:133).



### **3.5 Research design**

A research design involves selecting the research methods and procedures that will be used to conduct the study (Gravetter & Forzano, 2009:33). The research design is a plan that guides the investigation. Bless et al. (2006:71) add that the research design includes the steps taken to test whether or not the hypothesis is true.

An exploratory and descriptive research design was utilised in the study. Exploratory design aims to achieve new insights into a phenomenon and in this case understanding the high levels of absenteeism at the service call centre (Akhtar, 2016:73). A descriptive research design is used to identify and obtain data from a specific group and to describe the situation (Akhtar, 2016:75). The selected research design elicited pertinent results from the study, allowing the researcher to draw clear conclusions that validated the objectives of the investigation while fulfilling the purpose of the research study.

#### **3.5.1 Secondary data**

Secondary data comprises second-hand archived information retrieved from documents, interviews, ethnographic accounts, photographs or conversations, and consists of sources of data and other information that others have collected (Stewart & Kamins, 1993:1; Smith, 2008:5).

Secondary analysis is a research strategy that utilises already existing quantitative or qualitative data for the purpose of investigating new questions or verifying previous studies (Goodwin, 2012:14). This ensures that the research is completed timeously and is cost effective. Stewart and Kamins (1993:4) concur that secondary data analysis is usually cost effective and timeous, which is also associated with primary data.

Past, present and current information about absenteeism and EAPs was retrieved from South African and international literature. These literature sources included company reports, industry research reports, journals, books, research articles and industry publications. This information was reviewed to ascertain what had previously been documented and provided insight into the research regarding the study topic.

Secondary data concerning employee absenteeism was sought to provide more insight into the trends in absenteeism rates from 2012 to 2016. The data was limited to the period 2012 to 2016, as the researcher wanted to investigate the three years before and after the EAP was introduced at the service call centre. The information was extracted from the workforce report, known as the human resource report, by the researcher with the assistance of the human resource administrator of the organisation under study. In addition, the researcher consulted a variety of reliable publications on the relationship between the utilisation of an EAP and absenteeism to contextualise the study.

Overall, it was imperative that the researcher categorised, analysed and referenced the data relevant to the research, thereby supplementing the body of knowledge on the study topic.

### **3.5.2 Primary data**

Primary data is data that is original, valuable, and unique, as it leads to new insights and adds greater credibility to the outcomes of the research. This can be useful to students who wish to use their research experience as a basis for careers in consulting or management, (Easterby-Smith et al., 2008:1; Ajayi, 2017). The researcher's aim was to understand why absenteeism is high, despite the existence of the EAP offered to CSRs. Collecting data gives the researcher control over the data collected as well as the structure of the sample. This demonstrates confidence that the data will match the study's objectives (Easterby-Smith et al., 2008:219). An online questionnaire survey was conducted via the company's internal internet. The raw data obtained from the survey was coded and later analysed.

### **3.6 Research setting**

The empirical study was conducted at a service call centre for a well-known international airline company. It is the only service call centre in the African continent based in Cape Town, South Africa. The organisation has been in the call centre industry since 1999, and employs approximately 300 people and over 250 CSRs in Cape Town. As an international organisation, it caters for an international market in five different languages, offering a variety of services to the airline customer service

industry. In order to meet global market demands in respect of customer service, the service call centre operates in a 24/7 work environment. This means that employees work in shifts.

### **3.6.1 Target population and participant selection**

In order to obtain the data required for the study and achieve the research objectives, the researcher targeted a particular group. A population is a group with a specific set of complete elements relevant to the study project (Bryman, 2004:34; Easterby-Smith et al., 2008:212). The population comprised 300 employees from the service call centre.

An appropriate selection method of sampling cannot be overemphasised for a research investigation (Sekaran, 2003:67). De Vos et al. (2005:196) suggest that 20 percent of the sample should be under study. The company staff complement comprises 300 employees working in various departments. To achieve the research study's objectives, the researcher was interested in responses from the customer service representatives. The CSRs at the service call centre constitute at least 250, and each response was crucial for this study's data collection. Sampling was not possible in this regard.

The respondents received web-based questionnaires through the company's internal website, while management received theirs via internal electronic mail.

### **3.7 Data-collection methods**

The process of data collection is vital, as inaccurate data will have a negative impact on a study's results and may nullify the findings of a study. If the data technique is appropriate, it accomplishes the study's objectives. Research methods are selected as the best tools produce information required for a particular project, (Leavy, 2017:14).

There are several forms of data collection in social research (Henn et al., 2009:152; Flick, 2011:104). These include survey questionnaires, which can be distributed online or by post, interviews, documents, and observations. The researcher opted to use a questionnaire in the investigation.

### **3.7.1 Pilot study**

A pilot study was conducted prior to commencement of the research study. Pre-testing research allows the researcher to ensure successful commencement and completion of the study (De Vos et al., 2005:205).

A pilot study reveals the strengths of and flaws in the research study. In addition, it tests the study's suitability, validity, and reliability, and checks whether it is error free and sufficiently effective to obtain the results to answer the problem under study. The questionnaires were distributed randomly to friends and family. The feedback was that the respondents did not understand some of the questions. The feedback was acknowledged and the necessary changes were made to the questionnaire. Overall, the pilot study increased the researcher's confidence in the chosen instrument as appropriate to the study.

### **3.7.2 Questionnaires**

A questionnaire was used as measuring instrument to collect data and obtain greater perspective on the topic under study. According to Clark-Carter (2004:8), a structured questionnaire is used to elicit a set of responses. This saves time, as the researcher does not need to be present and it reduces logistics. In addition, responses are set with a number of options, as questions are presented in a standard format and the responses are quantifiable.

The researcher used a structured questionnaire for the investigation. An attitude scale, namely a Likert scale, was implemented in the questionnaire for information on the CSAs' attitudes, behaviours, concerns, and motivations. The responses varied from 'fully aware', 'aware', 'neutral', 'slightly unaware', and 'strongly aware'. Welman and Kruger (2001:150) define an attitude scale as being centred on different assumptions about the relationship between individual responses and the items, and attitudes towards these.

The researcher distributed the questionnaires to the customer service representatives online. Jones (2014:148) notes the following advantages and disadvantages of using questionnaires as a measuring instrument.

- **Accessibility:** The researcher does not need to be present to ask the questions. Internet-based questionnaires enable a global audience to be contacted.
- **Potential reduction in bias:** A well-defined questionnaire cannot be tampered with easily, compared with researcher interviews.
- **Anonymity:** Responses are obtained easily, as there is no fear of victimisation or influence by the researcher, which improves the information's validity.
- **Structured data:** Highly structured data is obtained through questionnaires and can be compared easily, either between subject groups, or between the same groups, over a period of time. The information can also be converted easily into graphs for statistical analysis.
- **Increased time for respondents:** The use of questionnaires permits respondents to participate at a convenient time. Alternatively, respondents may return to the questions at a later stage.

The following points detail some disadvantages of using questionnaires.

- **Complex questions create problems:** Questionnaires need to be clear and and comprehensible. If this is not the case, problems such as incorrect or inaccurate data can impact the research negatively.
- **No control over who completes the questionnaire:** The questionnaire can be completed at a convenient time but sometimes a respondent can give it to somebody else to complete. This occurs if there are no specified respondents.
- **No opportunity to probe:** The responses are structured, which limits the researcher's obtaining more information to probe the respondents.
- **Potential low response rate:** Responses from questionnaires are notoriously poor and can be as low as five percent. This can have a serious impact on the study's reliability and validity.

### **3.7.3 Web-based surveys**

Modern technology, such as web-based surveys, is commonly used to send questionnaires to respondents who have access to the Internet (Easterby-Smith et al., 2008:220). The website address is sent to the respondents and all online data responses are stored in a database for data processing later.

Web-based surveys have certain advantages (Easterby-Smith et al., 2008:220). Internet-based surveys can be customised with pop-up guidelines and drop-down boxes for individual respondents who need further understanding. The downloaded data is easily accessible for analysis on programs such as Excel or IBM SPSS.

Online questionnaires were used because of the organisation's PCI (Payment Card Industry) regulations. This creates a paperless environment that ensures that customers' credentials are not violated as per company procedures and policies. The web-based survey was formulated to obtain the customer service representatives' responses. It was populated on the call centre's internal website with the assistance of a communication coordinator from the organisation. This created easier accessibility for the respondents. The researcher provided both assistance and feedback to those respondents who had queries. A questionnaire comprising similar questions was sent to management via internal electronic mail. The responses were later populated on the IBM SPSS program for further analysis. The survey instrument was structured into five sections that focused on the topic of the study, ensuring that the research questions were addressed. It comprised:

A) Biographical information

Nominal data obtained from this section detailed demographics about the respondents as well as extra information about the target group.

Sections B to E elicited responses which allowed respondents to choose between 'fully aware', 'aware', 'neutral', 'slightly unaware' and 'strongly aware', based on the questions in each section. The questions were formulated to provide responses that would answer the research questions.

B) Awareness of the EAP (Careways)

Information extracted from this section referred to the respondents' attitudes and opinions of the EAP.

### C) Communication

This section sought to elicit whether respondents had been informed of the organisation's EAP.

### D) Utilisation of employee assistance programme

The section referred to whether the respondents were aware of the how to utilise the organisation's EAP.

### E) Work

The researcher's intention was to establish whether the respondents understood or recognised the underlying issues of absenteeism.

### F) Absenteeism

This section aimed to obtain information to ascertain the reasons for employees' absence from work.

A pilot study was conducted prior to the investigation and relevant feedback was considered. Once approved by the researcher's supervisor, both the web-based surveys and questionnaires were distributed to the respondents. A copy of the questionnaire is attached as Appendix A for CSRs, and as Appendix B for management.

Forty-one questions were formulated, taking 15–20 minutes for respondents to complete. The web-based questionnaire was posted on the company's intranet with the assistance of the communication coordinator. The respondents were tasked to answer the questions by clicking on the appropriate answer, using the Likert scale options. The investigation's aim was to deduce the relationship between absenteeism and utilisation of the employee assistance programme at the service call centre. The Likert scale measured the attitudes and opinions of the respondents with regard to the topic.

Likert scales assess attitudes by presenting a set of statements on the topic and requesting the level of the answers to be indicated by each respondent in terms of either 'strongly agree', 'agree', 'neutral', 'disagree' or 'strongly disagree' (Ary et al., 2009:209; Krabbe, 2016:79). Each question provided the respondent with a selection

of options in respect of either choosing fully aware, agree, neutral, unaware or strongly unaware, based on their opinions and attitudes. A Likert scale has benefits such as being fairly easy to construct, generally used, while respondents have more choices, and the data derived from the scale is more useful for statistical procedures (Monette et al., 2011:352; Krabbe, 2016:86). Owing to these advantages, interval measurement was recommended for the study.

All responses were downloaded from Excel and the statistical program, IBM SPSS, was used for further analysis, understanding and interpretation of the relationship between the variables.

### **3.8 Data level of measurement**

The collected data was measured and analysed by statistical methods, followed by meaningful presentation and interpretation. Monette et al. (2011:404) note the importance of choosing an appropriate statistical method for the level of measurement.

The research study's collected data was categorised into nominal and ordinal data. The next section details the type of data that was extracted, explored, and measured statistically in relation to the study.

#### **3.8.1 Nominal data**

Monette et al. (2011:404) state that nominal data measurements involve organising observations into categories with no mathematical value. Nominal variables can be referred to as qualitative variables in literature, as no mathematical properties exist, (David & Sutton, 2011:222).

The questionnaire provided the respondents with options to choose from a set of questions. For example, in the gender category, the respondents had to indicate an appropriate option between male or female.

#### **3.8.2 Ordinal data**

Albers (2017:202) describes ordinal data as orderly data sets; however, the distances between them are unknown. Examples are categories that differentiate size from small,



medium to large. Galderisi (2015:28) adds that other data considered to be ordinal would be any survey item that is calculated on a standard Likert scale, such as 'strongly disagree' to 'strongly agree'. Ordinal data measurements were used to measure the opinions and attitudes of the respondents in relation to the study.

The questionnaire used a Likert scale to rate respondents' opinions and attitudes. The options ranged from 'fully aware', 'aware', 'neutral', 'unaware' or 'strongly unaware'. Welman and Kruger (2001:150) state that attitude scales are constructed on the basis of assumptions about the relationship between the individual responses. The researcher's aim was to investigate the respondents' opinions on and attitudes to the topic in order to draw conclusions based on the responses.

### **3.9 Validity and reliability**

The research methods used required that these should be appropriate, effective and proficient in data collection as per the study. The next section explains the validity and consistency of the data-collection instruments.

#### **3.9.1 Validity**

Validity was tested through a pilot study the researcher conducted prior to the investigation. This permitted the researcher to guarantee successful initiation and completion of the study (De Vos et al., 2005:205). The pilot study was randomly distributed to friends and colleagues. The respondent asked questions based on articulation and feedback was provided. Thus, respondent level of comprehension was noted and key changes were made to revise the questionnaires. Overall, the pilot study increased the investigator's confidence in the chosen instrument which was found to be appropriate.

#### **3.9.2 Reliability**

Measuring instruments for data collection are required to meet the standards of reliability, validity and truthfulness. This was imperative in the investigation to guarantee that interpretation and conclusions would be error free and would reflect accuracy. Burns and Burns (2008:412) define reliability as error-free measurement in

a measuring instrument. Stability and consistency are scores for reliability in an instrument (Mohamad et al., 2015:164). The measuring instrument measures what is required to be tested so that the data can be rendered precise and error free. The less constant, the greater the error, and the less accurate the collected data would be. The selection of an instrument is vital as it strengthens the study in the identification of large variances or relationships that arise from the population under study (Selebi & Minnaar, 2007:55).

Cronbach analysis was used to measure the reliability of the factor analysis in the investigation. This was only possible after factor analysis was used as a method to identify common themes in the study. The research study had to be consistent to warrant appropriate analysis. Burns and Burns (2008:417) describe Cronbach analysis as the measurement of reliability that equals the average of the split half relationships from all possible splits into half correlations and from all possible splits into halves of the items in the measuring instrument.

Cronbach's alpha is valuable as a means to develop questionnaires and attitude scales, as the reliability specifies if the items are evaluating the same concept (Burns and Burns, 2008:416). Gliem and Gliem (2003:88) add that it is imperative to calculate and report Cronbach's alpha when using Likert-type scales for internal consistency. The Likert scale was used for the research study's survey; therefore, Cronbach's alpha measured the reliability of the investigation.

### **3.10 Ethical considerations**

The research was executed subject to the code of ethics of the department and the Research Ethics Committee of the Faculty of Business and Management Sciences of the institution. Permission to conduct the research was sought from the organisation's human resource manager prior to commencement of the investigation. The participants were informed about the study and its purpose, and they consented to participate in it. In addition, they were informed of their right to choose whether or not to participate, that they could withdraw at any time, and that their views would be protected.

### 3.11 Data analysis

The research information was populated on both the Excel and IBM SPSS programs for presentation in a comprehensible format. Frey (2018:1352) states that quantitative data is analysed through statistical methods. Statistical data analysis was possible by using the IBM SPSS analysis program with the assistance of the Cape Peninsula University of Technology's registered statistician.

Prior to coding, the responses from the web-based survey were already on the Excel program. Coding is the process of assigning numbers to variables (Leech et al., 2005:24). Numerical codes were allocated to collected data, so that it could be analysed easily using the IBM SPSS analysis program. Descriptive statistics presented the data in a meaningful, presentable format to allow the researcher to reach the necessary conclusions on the topic under investigation. Frey (2018:1352) defines descriptive statistics as meaningful scientific results derived from mathematical formulas that summarise large numbers of observations in an organised manner. Hence, the results allowed the researcher to interpret and describe the data and present it in a comprehensible report.

Factor analysis was considered for this study to condense the data to identify, describe and interpret patterns and relationships easily. This technique summarises data so that relationships and patterns can be easily interpreted and understood (Miller et al., 2009:174; Yong & Pearce, 2013:79).

Burns and Burns (2008:440) further state that factor analysis clarifies a large number of other related variables by recognising basic underlying factors. There were requirements that factor analysis needed to meet to be considered as a statistical technique. Pallant (2007:182) explains that there are various steps involved in factor analysis.

Correlation coefficient analysis was necessary to measure the relationship between the identified variables. Burns and Burns (2008:341) define coefficient correlation as the measurement of the relationship between the variables. Frey (2018:1352) adds that coefficient correlation is calculated to show the strength and direction of the

relationship. There were common themes identified during the factor analysis, thus it was imperative that the strength and direction between the themes were measured.

The ordinal data measured respondents' opinions, ranging from 'fully aware', 'aware', 'neutral', 'slightly unaware', and 'strongly aware'. It was necessary to find an appropriate analytical tool to elicit conclusive results from the study. Ordinal measurements of data were used in the study. One of the major analytical methods using ordinal data measurements is the Spearman rank-order correlation coefficient (Burns & Burns, 2008:95). The best simple statistic correlation coefficient in factor analysis is Spearman's product-moment correlation coefficient, as it reduces the effects of extreme assumptions (Child, 2006:12; Field, 2013:23). This was the preferred appropriate method for the study.

There is criticism of the percentage correlation coefficient measurement of the relationship between variables not being a true reflection (Burns & Burns, 2008: 348; Schober et al., 2018:1763). The correlation coefficient provided insight into the variables under study and further analysis was conducted to ensure accuracy and validity.

Hypothesis testing was paramount for the research study as it determined if the variables had a significant correlation. This determined if there was a relationship between the variables under study. The confidence level and hypothesis testing criteria were used to decide whether significant correlation occurred between two variables and the direction of the correlation. The series values measured a range from +1.00 through 0.00 to -1.00, for the association coefficient (Miller et al., 2009:16).

### **3.12 Factor analysis**

An appropriate statistical technique was considered for the empirical research. This section details factor analysis as the preferred technique for analysis in relation to the topic under investigation. Factor analysis is a scientific method used for the purpose of summarising interrelationship variables in a brief but precise manner as an aid in conceptualisation (Gorsuch, 2014:2). Yong and Pearce (2013:80) note that the analysis method involves a range of variables from a series of test studies which can be reduced to obtain an underlying concept for later analyses.

### 3.12.1 Approach to factor analysis

There are objectives in choosing a factor analysis approach in the social sciences: identification of effects on overt behaviour, data reduction, and validation of hypothesis regarding effects on behaviours (Coughlin, 2013:23; Yong & Pearce, 2013:80).

Exploratory factor analysis (EFA) is appropriate for social science studies (Costello & Osborne, 2005), and is an approach for factor analysis (Pallant, 2007:179). This is because once data is collected from research, it is easier to structure it into common themes for easier understanding and interpretation.

Literature has diverse views on factor analysis, and this has created confusion for researchers in respect of how the terms are used. Factor analysis and principal component terms are similar in many ways and are used interchangeably (Costello & Osborne, 2005; Pallant, 2007:179). Principle Components Analysis (PCA) is a default extraction method used in IBM SPSS statistical software, as it is a general class of dimension reduction analysis that is simplified computation (Coughlin, 2013:25; Osborne & Banjanovic, 2016:1). Costello and Osborne (2005) suggest that PCA is the preferred method for factor analysis.

Other authors contend that there are different views due to misunderstandings. Osborne and Banjanovic (2016:1) state that such misconceptions result from the following:

- Modern researchers use the terms PCA and EFA interchangeably, or use PCA when conducting analysis that is more appropriate for EFA.
- PCA is used as a default extraction technique in statistical software, including SAS.

Despite the differences or similarities, principal component analysis is the choice of extraction by default, as the literature does not specify the prescribed methods that are to be used (Costello & Osborne, 2005; Pallant, 2007:180). The distinction must be clear when conducting different analyses (Pallant, 2007:180). As IBM SPSS software was utilised, EFA was the chosen method for the study.

### 3.12.2 Requirements for factor analysis

There are conditions for factor analysis to be applied to a study to ensure that the statistical technique is appropriate. Rajaretnam (2016:15) outlines the conditions for factor analysis below:

- A large sample size is necessary, preferably at least 300 observations for factor analysis to be possible. Yong and Pearce (2013:79) agree and recommend that a sample size should comprise at least 300 participants, while the variables that are subjected to factor analysis should each have at least 5 to 10 observations. The target population for this study comprised an average of 250 participants in the service call centre.
- However, Pallant (2007:181) differs. The size of the sample is of less consequence than the ratio of subjects to items. The author recommends a ratio of 10 cases to 1 for item factor analysis.
- There is an assumption that a linear relationship exists between the factors and each of the variables. Pallant (2007:280) agrees that the sample size and strength of the relationship among the variables should be considered as a step for factor analysis.
- A lower coefficient correlation value of less than 0.3 means a weak relationship between variables, thus it must be 0.3 or higher. Pallant (2007:181) recommends coefficients greater than 0.3 on the correlation matrix. With less than 0.3, factor analysis may not be appropriate.
- There is an assumption that the error term should normally be distributed with a mean of 0 and variance of 1.
- Data used in factor analysis should at least be free from outliers.
- Normal distribution of the variables in factor analysis is a requirement for multivariate and univariate normality within the data.
- Labelling and interpretation of factors are difficult, as a factor should have at least three variables, and this should be done with caution.
- Costello and Osborne (2005) add that researchers must decide how many factors should be retained for rotation after extraction. This is possible with most statistical software packages to retain all factors with eigenvalues greater than

1.0. Velicer and Jackson (1990:9) and Costello and Osborne (2005) agree that this Kaiser criterion is the least appropriate method, due to its lack of accuracy.

The researcher must decide how many factors to retain for rotation after extraction, (Costello & Osborne, 2005). This step-in factor analysis is required for statistical software packages to retain all factors with eigenvalues greater than 1.0. The Kaiser criterion method is used despite its being the least appropriate. Velicer and Jackson (1990:9) and Costello and Osborne (2005) agree that the Kaiser criterion is the least appropriate method.

The above requirements must be met to choose the most appropriate conditions in relation to factor analysis. They guarantee results that are reliable, valid, and easy to interpret. Watson (2017:237) advises that the outcome of interpretable and meaningful factor structures is possible so long as the researcher adopts critical decisions that affect the ability of each step.

### **3.12.3 Kaiser-Meyer-Olkin and Bartlett's test**

Kaiser-Meyer-Olkin (KMO) and Bartlett's test are statistical measurements generated by the IBM SPSS program to assess appropriateness and suitability in factor analysis. KMO and Bartlett's also test the validity of factor analysis through the IBM SPSS analysis program. KMO calculates sampling appropriateness which must be higher than 0.5 for factor analysis to continue (Burns & Burns, 2008:354).

Bartlett's Test of Sphericity measures relations between the variables to check if the correlation is an identity matrix (Hinton et al., 2004:349; Denis, 2018:182). If there were no associations between the variables, then factor analysis would not have been appropriate. In the present study there was an association between the variables which measured higher than 0.5, hence the next step for the factor analysis was possible.

### **3.12.4 Factor extraction and rotation methods**

Extraction is a step-in factor analysis that assists in simplifying data for easy interpretation. Costello and Osborne (2005) argue that IBM SPSS offers a variety of extraction methods. Watson (2017:233) defines factor extraction as a separation method of the mutual variance in each variable from its unique and error variance. PCA

is a default extraction method used in IBM SPSS statistical software (Coughlin, 2013:25; Osborne & Banjanovic, 2016:1). The principal component of analysis was the extraction method used for the study.

Rotation is the next step in EFA that aims to clarify the factor structure and make the EFA results easy to interpret (Costello & Osborne, 2005; Osborne & Banjanovic, 2016:7). The two methods of rotation are orthogonal and oblique. Orthogonal rotation conjectures that the factors are uncorrelated and are rotated from each other at 90 degrees (Yong & Pearce, 2013:84), while oblique rotation allows factors to be correlated (Costello & Osbourne,2005) and the rotation of factors is not at 90 degrees (Yong & Pearce, 2013:84). Promax is an oblique rotation method in the IBM SPSS software computation. Promax rotation achieves a simple structure, resulting from raising the loadings to a power of four, and the effects are greater correlation among the factors (Yong & Pearce, 2013:84).

### **3.12.5 Number of factors to retain**

Factor analysis is the reduction of factors, and not all the factors can be considered. It interprets the data easily as per study, while there will be some factors that need to be retained. It is imperative to choose the most appropriate criterion when determining the number of factors to retain.

The eigenvalues and screen test are techniques recommended when deciding on the number of factors to retain (Pallant, 2007:182; Yong & Pearce, 2013:85). An eigenvalue greater than 1 is the Kaiser criterion that should be retained for analysis (Watson, 2017:233). However, it should be noted that this method is considered to be the least accurate (Velicer & Jackson, 1990:10; Coughlin, 2013:36). The Kaiser criterion is the default method used in computer programs, with over-extraction being a common problem in published articles (Velicer & Jackson, 1990:10).

A screen test is a screen plot (Miller et al., 2009:179) which is an alternative that determines the number of factors to be retained until the decreasing eigenvalues stop declining (Coughlin, 2013:37). Identification of the necessary number of factors is the goal for factor retention, as it accounts for correlations among the measured variables (Coughlin, 2013:37). Excluding valued common variances by extracting a few factors



while a lot of factors are undesirable, may present error variance (Yong & Pearce, 2013:85).

### **3.12.6 Naming of the factors**

The naming of the factors is the final step in factor analysis once the number of factors to be retained is known. Yong and Pearce (2013:91) mention that there are no rules to apply to name the factors, as it is an art. In the study the researcher named the factors based on the best common representation of the variables in the study. The researcher examined the variables adequately, identified the common themes, and labelled them accordingly.

### **3.12.7 Limitations of factor analysis**

Factor analysis is the selected statistical analytical method for multivariate and bivariate analysis. Factor analysis however has its drawbacks. This section details these.

The researcher identified common themes after using factor analysis. The variables identified in the investigation were awareness of EAP, absenteeism, underlying issues of absenteeism, and employee work attendance. However, should another researcher examine the themes, these theme names may be changed. Naming the themes appropriately can be a limitation in factor analysis (Burns & Burns, 2008:358; Rajaretnam, 2016:15).

The factor analysis method can only be achieved if the investigator has collected an adequate set of product attributes (Rajaretnam, 2016:16). This means that the researcher should have adequate information about the investigation. There could have been concealed factors pertaining to interesting relationships that the researcher may have disregarded during the analysis. Factor analysis assigns a single factor to the variables, which are mostly highly related and separated from other items (Rajaretnam, 2016:16). The separated variable could be used to add more value to the study.

The factor analysis results permitted the researcher to assess and ascertain the findings and draw conclusions. The next chapter reports on the results for the investigation once the analysis was completed.

### **3.13 Summary**

A quantitative research approach was applied in the investigation at a designated service call centre. The service call centre was identified as the population, and the customer service representatives comprised the target group for the research. Each response from the customer service representatives was relevant to the research. The management consisted of ten team leaders, a human resource manager, and two customer service managers.

Online questionnaires were distributed through the internal website (intranet) for easy access by respondents. The researcher had to adhere to the company's PCI rules and regulations in this regard. Management received the questionnaires through the company's designated electronic mail. Raw data was retrieved from an Excel spreadsheet, coded and then populated to the IBM SPSS program for analysis. Factor analysis assisted in identifying common themes, resulting in new information for analysis and interpretation.

Chapter 4 presents results from the descriptive and factor analysis which aided exploration, demonstration and clarification.

## **CHAPTER 4: PRESENTATIONS OF RESULTS**

### **4.1 Introduction**

This chapter presents and discusses the results of the collected data in the form of data analysis. It discusses the research findings in the light of the data analysis methods. The findings are extrapolated from data emanating from the research questions that guided the study. Data was analysed to identify, describe and explore the relationship between utilisation of the EAP and absenteeism in the service call centre selected for this study.

### **4.2 Population and setting**

The research was undertaken at a service call centre of an international airline in Cape Town in the Western Cape, South Africa. It is the only service call centre in Africa affiliated to the international airline.

The measuring instruments were utilised for both the customer service representatives and management. The duration of data collection for CSRs lasted a month, and for management, a week.

The population comprised approximately 300 employees of whom 250 constituted CSRs. A total of 109 responses were received, with 98.16 percent used in the study. Administrative employees also participated in the survey, although this was not a requirement, as the questionnaire was available on the company's intranet where every employee had access to it. Although the responses could have added value to the study, it did not constitute the target group.

### **4.3 Descriptive statistics**

The data was collected, coded, analysed, described, and presented clearly and meaningfully. Graphs, charts and tables facilitated comprehension and interpretation to ascertain any patterns discerned from the analysed data.

Data was presented in the form of descriptive statistics which are used to summarise and present large numbers of observations to explain the data and present it in a meaningful manner (Frey, 2018:1352).

The web-based survey was circulated via the intranet for easy access and anonymity. Management’s online questionnaire was distributed through the internal electronic mail system. The raw data was retrieved from a Microsoft Excel program that the researcher populated easily and then coded to the IBM SPSS analysis program (version 25) for evaluation. This was done with the assistance of a statistician. There was a 43.60 percent response rate from the 250 CSRs in the study. There were 109 respondents, of whom 98.16 percent were used in the study. This is because not all responses were considered, as employees from all departments participated in the online questionnaire survey.

### 4.3.1 Biographical data

It is imperative that information on respondents is described and examined to detail their characteristics. This information can be used to ascertain any trends or patterns relative to the collected results as a means to draw conclusions. The sub-sections below present these features.

#### 4.3.1.1 Respondents: Call centre representatives

The responses comprised 109 of the 250 CSR target group. Part of the management team included 7 team leaders, 2 customer service managers, and 1 human resource manager.

This section details the demographic analysis of the respondents based on gender as per investigation. The responses from each category permitted the researcher to draw conclusions as per the results.

**Table 4.1:** Respondents’ gender (derived from IBM SPSS program)

		Frequency	Percent
Valid	Female	68	62.4
	Male	41	37.6
	Total	109	100.0

The females represented 62.4 % of the responses, referring to Table 4.1. This means that the majority of the respondents who work in the organisation are women. The findings could have indicated different opinions and attitudes in relation to gender responses.

Table 4.2 refers to the racial demographics of the participants. The listed categories for the research study were African, white, coloured, Indian and Other.

**Table 4.2:** Respondents' race (derived from IBM SPSS program)

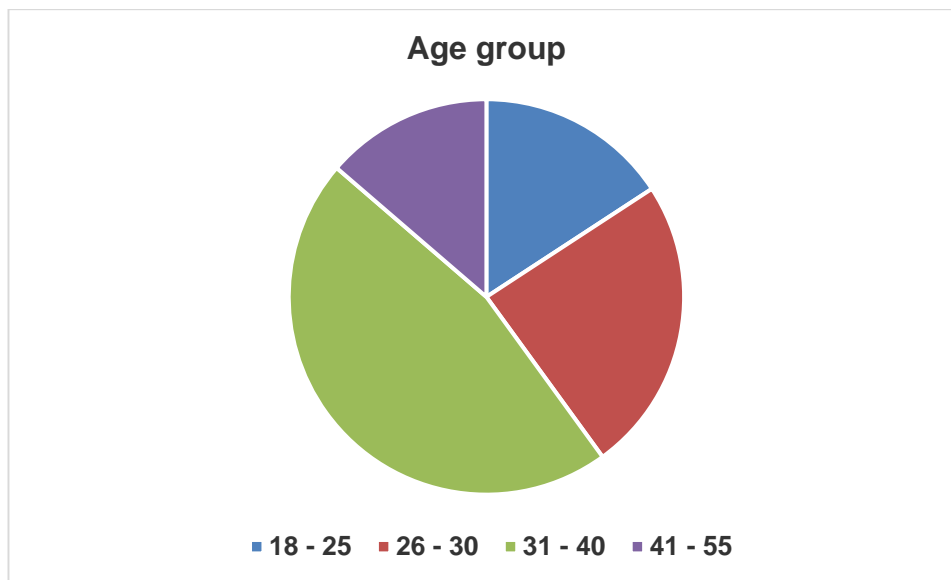
		Frequency	Percent	Valid Percent
Valid	African	15	13.8	15.5
	Coloured	52	47.7	53.6
	White	28	25.7	28.9
	Indian	2	1.8	2.1
	Total	97	89.0	100.0
	Other	12	11.0	
<b>Total</b>		109	100.0	

As indicated in Table 4.2, the majority of the respondents were 53.6% (coloured), followed by 28.9% (white), 15.5% (African), 2.1% (Indian) and 'Other' with no representation. 'Other' could have represented respondents who preferred not to state their race group or from a different race to any of the four groups categorised. The findings indicated the different race groups that work in the call centre.

**Table 4.3:** Respondents' age groups (derived from IBM SPSS program)

		Frequency	Percent
Valid	18 – 25	15	15.8
	26 – 30	23	24.2
	31 – 40	44	46.3
	41 – 55	13	13.7
	Total	95	100.0

Table 4.3 shows the different age groups. The data details the ages represented in the organisation under investigation. The findings indicated which age group is predominant in the service call centre. The majority of respondents constituted 31–40 years, representing 46.3%; 24.2% were between 26 and 30 years; and 15.8% were in the youngest age category of 18–25. The oldest age group of 41–55 years comprised 13.7%. Figure 4.1 reflects the age groups of respondents in the study.



**Figure 4.1:** Respondents' age category (retrieved from IBM SPSS program)

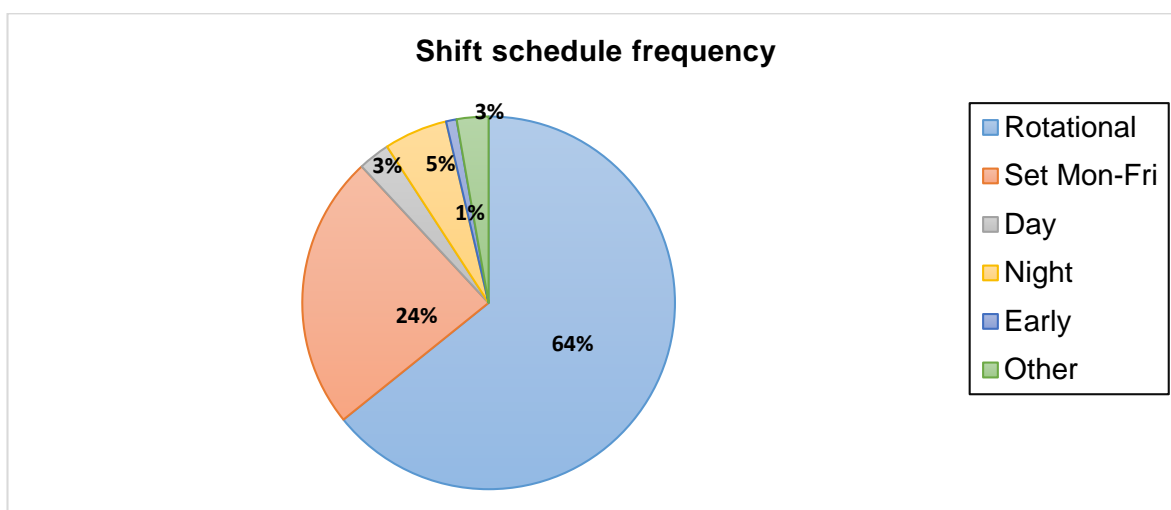
Company tenure refers to the number of years that the respondents have been working at the organisation. The researcher wanted to ascertain whether the CSRs' company tenure would have any influence on their responses. There was a choice of five options in the questionnaire: 0–2 years, 3–5 years, 6–8 years, 9–10 years, and 11 years or more. The findings indicated that the majority, 37.6%, had been working at the company for 0–2 years, followed by 33% for 3–5 years, while 18.3% had worked there for 6–8 years. The least accounted for were those who had been working there for 9–10 years, namely 1.8%, while 9.2% worked there for 11 years or more, as reflected in Table 4.2.

**Table 4.4:** Respondents' company tenure (derived from IBM SPSS program)

		Frequency	Valid Percent
Valid	0 – 2 years	41	37.6
	3 – 5 years	36	33.0
	6 – 8 years	20	18.3
	9 – 10 years	2	1.8
	11 years or more	10	9.2
	Total	109	100.0

The company under investigation is an international service call centre functioning twenty-four hours a day, seven days a week, servicing clients across the world in different time zones.

Figure 4.2 presents the types of shift work based on time zones. The researcher needed to understand if working different shifts affected the respondents' accessibility to and utilisation of information about the EAP.



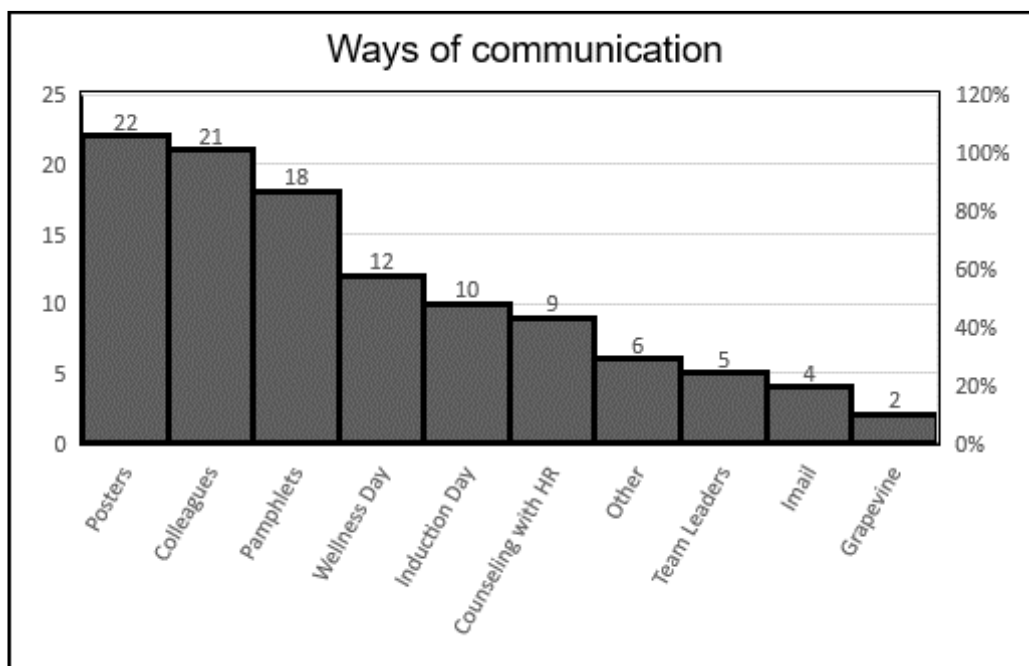
**Figure 4.2:** Shift schedule frequency

The pie chart above represents respondents' shift schedules, showing that 64% of the respondents work rotational shifts that change monthly. A total of 24% of respondents work set shifts, which means they work Monday to Friday at set times, while 6% work both day shift and part-time (other). This means that the respondents work a scheduled number of hours, for example, the day shift equals six hours of work whereas part-time work is four hours. Lastly, 5% of respondents work set night shifts, which means from 08:00 to 17:00, depending on the language that they service.

The investigation needed to ascertain the respondents' awareness of the EAP, and Section B of the questionnaire queried this (refer to Appendix E for the results). The Likert scale option was used in this regard. Based on the results, 61.5% of the responses ranged from strongly aware to being aware of the purpose of EAP. In addition, 65.1% of respondents are aware of how to contact the EAP for services when needed. Lastly, 52.3% of respondents are aware of the type of services provided by the EAP that promotes use of the programme. The responses per Likert scale ranged from 'strongly aware' to 'aware'. This shows that there is general awareness of the EAP in the service call centre.

The respondents are aware that the EAP was implemented as a benefit to promote individuals' well-being at the company. This is indicated by a 58% response that ranged from 'strongly aware' to 'aware'. Overall it can be deduced that there is both an awareness and use of the EAP at the call centre by the respondents to promote individual well-being.

In order to ensure CSRs are aware of the EAP, there are different ways of communicating it to them. Section C of the questionnaire queried what means of communication the organisation commonly used for this purpose.



**Figure 4.3:** Different ways of communication of EAP by responses



Figure 4.3 details the techniques of communicating Careways EAP to employees in descending order. Colleagues and posters comprised 39.4% of the responses, while 16.5% said that pamphlets are commonly used for this purpose. A total of 20.2% stated that the organisation used its induction period and Wellness Day to communicate the programme to the respondents, and 1.8% said that they heard about it via the grapevine. It should be noted that 4.6% of the respondents mentioned that they heard about the programme from team leaders who represent the organisation's management. This is quite low, considering that as part of the leadership they should be at the forefront in promoting the programme for the sake of CSRs' well-being. This would further create a sense of empathy on the part of management.

Section D of the questionnaires probed utilisation of the EAP as the researcher needed to ascertain if the respondents knew how to use the EAP. The responses would have showed if this influenced utilisation of EAP and perhaps whether or not it impacted on levels of absenteeism. The Likert scale was used to specify options for the responses. It appears that CSRs are aware of how to use EAP, since 36.8% responded affirmatively. However, the same number of respondents also stated that they do not know how to use it. A total of 26.3% of the respondents remained neutral in this regard or chose not to answer the question.

Section E of the questionnaire referred to accessibility of the EAP at the service call centre where the CSRs work within a 24/7-hour shift schedule. The researcher needed to determine if the shift schedule influences utilisation of the EAP as well as communication about the EAP. The Likert scale option was used in this regard. The results revealed that 43.2% of the respondents said that they were either 'strongly aware' or 'aware' that they could access the EAP, regardless of their shift, while 34.7% of the respondents were either 'slightly unaware' or 'strongly unaware'. A total of 22.1% of the respondents remained neutral in this regard.

Section F of the online questionnaire probed responses based on awareness of issues associated with absenteeism. The Likert scale was used to measure the responses regarding associated issues such as workload increases, high levels of stress, and a decline in the organisation's profitability due to high absenteeism.

The majority (76.33%) of respondents mentioned that they were aware of these issues in relation to absenteeism. It can be construed that the respondents are strongly aware of the underlying issues of absenteeism. Hence, it may be concluded that the respondents recognise that if one staff member is frequently absent from work, colleagues' workloads will increase and they will be prone to high stress levels. This will impact on the organisation's service levels in the form of low-quality customer service.

#### 4.3.1.2 Respondents: Management

The management team included seven team leaders and three managers. Two are customer service managers while the third is the human resource manager. It was important to analysis the collected data to ascertain and understand the respondents and to draw conclusions based on identified patterns or trends as a result of the results.

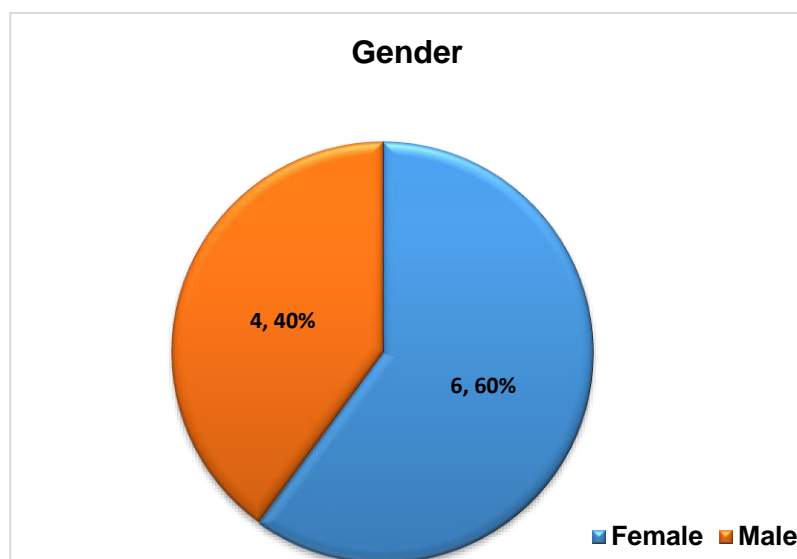
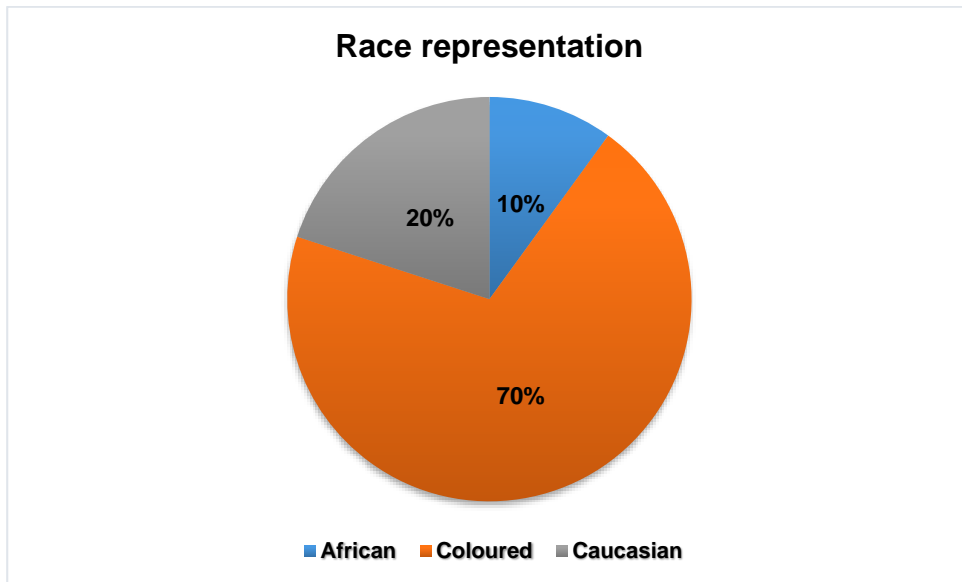


Figure 4.4: Management team's gender category

In respect of Figure 4.4, 60% of the management team is female and 40% is male; hence women are in the majority regarding management gender representation.

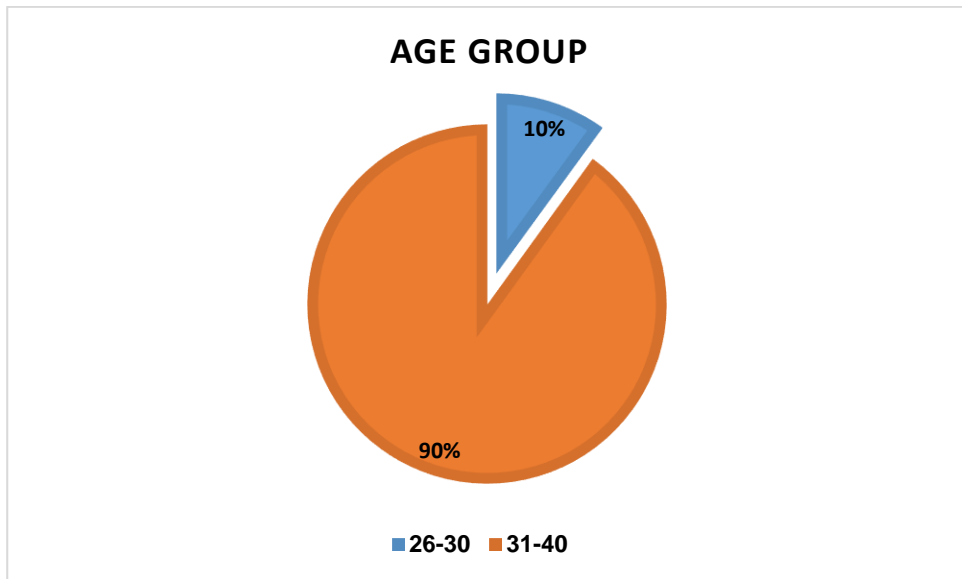
The responses would have established if there was any influence on the research study's objectives, based on the gender category.

In respect of management's race, 70% (the majority) are coloured, 20% white and 10% African. This is shown in Figure 4.5. These racial categories represent South Africa's racial composition.



**Figure 4.5:** Management race representation

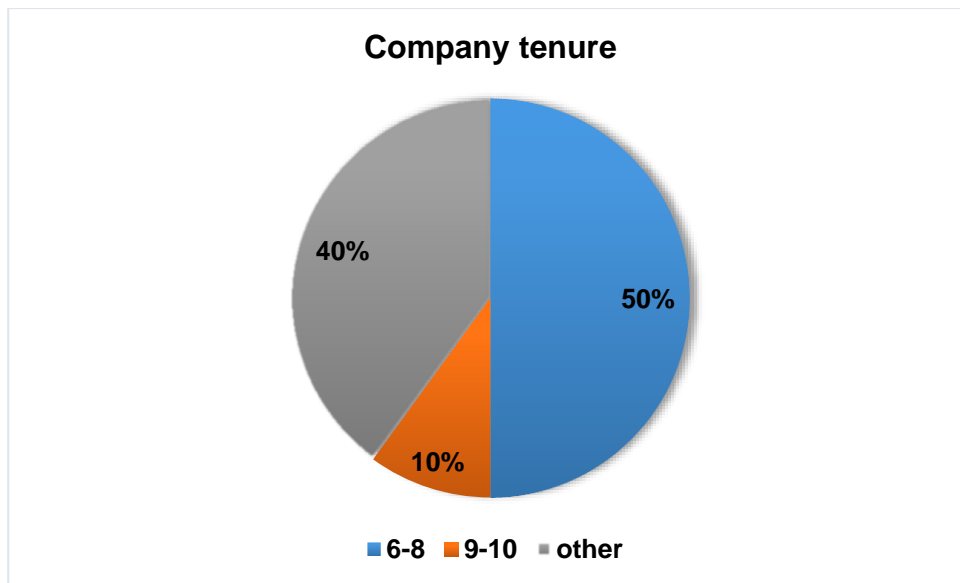
Respondents were given six age-group categories from which to select their respective ages, namely 18–25, 26–30, 31–40, 41–55, and 56–65 years. Figure 4.6 below shows the age group categories.



**Figure 4.6:** Management's age groups

Figure 4.7 depicts the respondents' respective company tenure. Five categories were provided for the respondents but only three were chosen. A total of 50% of the management team had been working at the organisation for 6–8 years, 10% for 9–10

years, and 40% for 10 years and more. This result indicated that the management team's respondents are experienced and would have been familiar with the EAP, thus promoting the programme to reduce absenteeism among the respondents.



**Figure 4.7:** Company tenure of management team

Section B of the questionnaire probed the awareness of Careways EAP in the organisation. The Likert scale was utilised to measure the responses. A total of 90% of the management team responses claimed that they were aware of the programme. This also included awareness of the EAP's purpose, how to contact the EAP for services needed, and the awareness that the EAP was implemented to promote individual well-being. This shows that managers are well aware of the EAP and can refer CSRs to the programme to promote employee wellness.

In order for the EAP to be used, management should recognise how to use it and communicate this effectively to the respondents. Section C of the questionnaire explored communication of the EAP at the service call centre. The Likert scale was used to measure the responses.

There was general acknowledgement by management that various methods were used to communicate the EAP at the service call centre. Based on the responses, 60% have knowledge of whom to contact about EAP (responses ranged from 'strongly

aware' to 'aware'). In addition, the majority of management are aware that they can contact the EAP themselves. It can be deduced that the management are well aware of the EAP at the call centre, as relevant information about Careways is communicated in the call centre using the various methods of communication.

Section D of the questionnaire probed the utilisation of the EAP. This would have showed if management knew how to use the EAP (Careways). The EAP was implemented for all employees to use at the service call centre. A total of 60% of the respondents indicated that the team leaders are acquainted with the EAP (Careways). According to the Likert scale, responses were mostly 'aware'. This indicates that management use it or find information about the programme to promote employee wellness among CSRs. This can be supported, as 90% of the management respondents use the EAP to cater for their own needs.

The remaining 40% implied that management were unaware of how to use the system and therefore could not promote Careways; responses ranged from 'neutral', to 'slightly unaware'.

Section E of the questionnaire referred to accessibility of the EAP at the service call centre where the respondents work within a 24/7 shift schedule. There was an overall awareness by management of how to use the EAP to promote well-being, regardless of when or where. This meant that management advised the use of the EAP, regardless of the shift the CSR, worked in the promotion of individual healthy well-being.

Illness was identified as the most common reason for absenteeism. This was part of Section F of the questionnaire. Illness could be caused by a variety of factors that affect the wellness of CSRs. 'Other' was identified as the least reason for absenteeism. This relates to any factors not identified on the list provided in the management questionnaire.

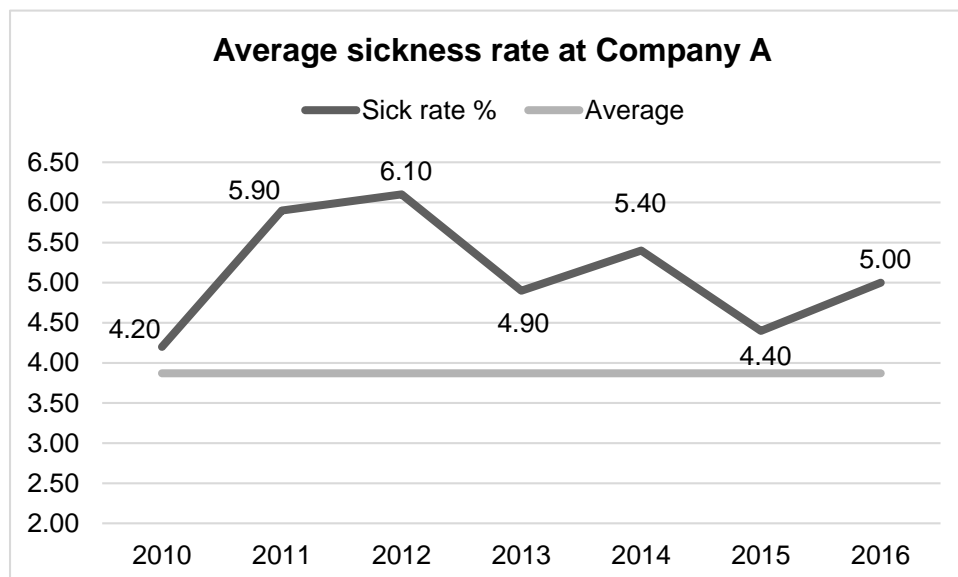
#### **4.4 Secondary data**

Secondary data was vital to provide insight into the topic under study. This data referred to the sickness rate prior to the EAP's implementation in the organisation and

subsequent to it. The data was sourced from the company’s human resource report with permission from management and with the assistance of the human resource administrator. The researcher retrieved data from 2010 to 2016. The years selected encompassed three years before and after the EAP’s introduction and implementation. The information was analysed and it was deduced that the accepted sickness rate in the organisation was 3.87%. The table below details the annual sickness ratio from 2010 to 2016, with the annual number of CSRs implicated.

**Table 4.5:** Average annual sickness rate from 2010 to 2016 from company A (referred from HR report from organisation)

Year	Annual sickness rate in %	Annual number of CSRs
2010	4.2	240
2011	5.9	244
2012	6.1	240
2013	4.9	244
2014	5.4	257
2015	4.4	279
2016	5.0	255



**Figure 4.8:** Average annual sickness rate from 2010 to 2016 from company A (constructed by researcher with reference to Table 4.4)

Figure 4.8 indicates collected data from the HR report at the company under study.

Table 4.5 above shows the annual sickness rate in the service call centre. From 2010 to 2012, the sickness rate increased annually, and this was prior to the EAP's implementation. There was a 1.7% increase between 2010 and 2011. From 2012 to 2013 there was a 0.2% increase. At this time there were no assistance programmes to assist CSRs with this high rate of sick leave.

There was a decline of 1.2% in the sickness rate from 2012 to 2013. The EAP was implemented in 2013 and between 2013 and 2014 there was an increase of 0.5% in the organisation's sickness rate. This could mean that Careways was not used during this period.

There was a 1.0% increase in the sick rate from 2014 to 2015; however, the CSRs were informed of the EAP by way of a variety of communication methods. Despite the EAP's implementation in the organisation, there was still an incline of 6% in the organisation's sickness rate from 2015 to 2016.

Overall, the above chart shows that there is both an incline and decline in the organisation's sickness rate before and after implementation of the EAP in the service call centre. This would suggest that there is probably no significance between using the EAP and absenteeism in relation to the sickness rate. Further analysis was conducted to provide more insight in this respect.

#### **4.5 Questionnaire results**

It was necessary for the raw data to be summarised, analysed and described in a presentable and meaningful statistical manner. The researcher was able to decipher and interpret the data easily and draw conclusive results in relation to the investigation. The researcher applied the IBM SPSS analysis program (version 25) in this regard, with the assistance of the Cape Peninsula University of Technology statistician to analyse the collected data.

##### **4.5.1 Factor analysis results**

Factor analysis, a statistical method, was applied as it entailed no prior existing functional relationships and was an appropriate method for data reduction. This permitted recognition of dominant core factors, as factor analysis reduces large

numbers of variables to a limited number of core factors. The following presents the process of factor analysis that the investigation used.

#### 4.5.2 KMO and Bartlett's test – Test of adequacy of sample

Factor analysis was tested to ensure appropriateness in terms of validity as based on the IBM SPSS program. KMO and Bartlett's' test authenticated this method. Table 4.6 below details the KMO and Bartlett's test, populated through the IBM SPSS software program.

**Table 4.6:** KMO and Bartlett test table (IBM SPSS output KMO and Bartlett's test)

<b>KMO and Bartlett's Test</b>		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.914
Bartlett's Test of Sphericity	Approx. Chi-Square	3835.924
	Df	435
	Sig.	.000

Kaiser-Meyer-Olkin (KMO) measured sampling adequacy of  $< 0.5$ .

The measurement was 0.914, which was close to 1, rendering the sample satisfactory.

#### Test hypothesis for interrelationships between the variables

**H<sub>0</sub>:** There is no statistically significant interrelationship between the variables that affect absenteeism at the service call centre.

**H<sub>1</sub>:** There is a statistically significant interrelationship between the variables that affect absenteeism at the service call centre.

Bartlett's test measures any association between variables; therefore, it tests the null hypothesis. The  $p$ -value (Sig.) of  $.000 < 0.05$  suggests that there are variables that have some correlation to each another. One would reject the null hypothesis and accept the alternative hypothesis, meaning that there may be a statistically significant relationship between the variables. Overall, KMO and Bartlett's test are acceptable, making factor analysis appropriate.



### 4.5.3 Eigenvalues

In the interpretation of factor analysis, the eigenvalue rule assists the researcher to decide the number of factors to retain. The rule is that factors with eigenvalues of 1.0 or more should be retained (Pallant, 2007:182). Table 4.7 below shows that the eigenvalues were considered to be retained for the investigation.

IBM SPSS OUTPUT

**Table 4.7:** Eigenvalues – Total value

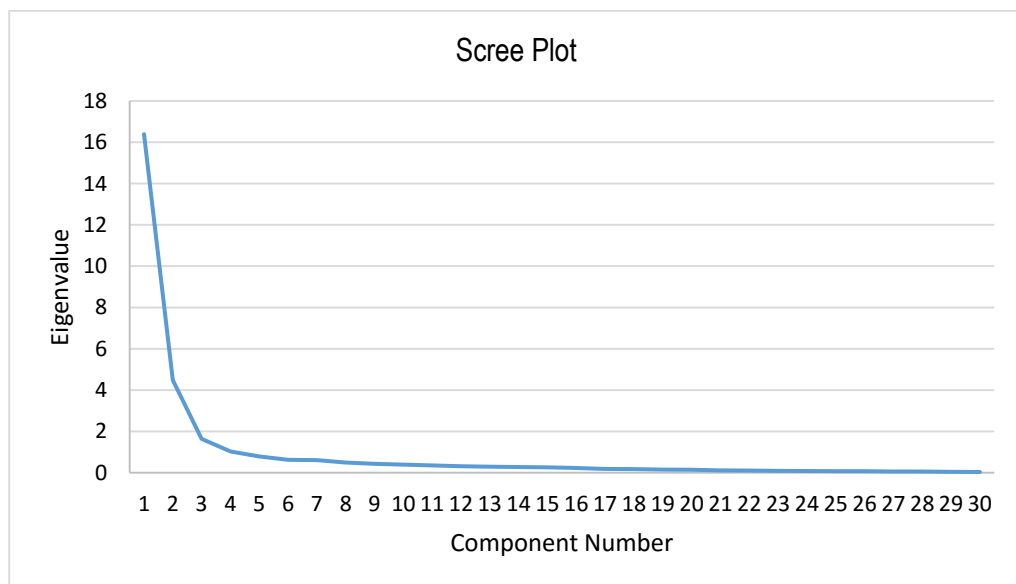
Total Variance Explained							
Component	Initial eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings <sup>a</sup>
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total
1	16.390	54.633	54.633	16.390	54.633	54.633	15.423
2	4.481	14.937	69.570	4.481	14.937	69.570	8.084
3	1.639	5.464	75.034	1.639	5.464	75.034	10.192
4	1.025	3.416	78.450	1.025	3.416	78.450	5.418
5	.790	2.635	81.085				
6	.625	2.083	83.168				
Extraction Method: Principal Component Analysis							
a. When components are correlated, sums of squared loadings cannot be added to obtain a total variance.							

As shown in Table 4.7 above, there are 1–6 components. The complete table for 30 components can be referred to in Appendix C. The component columns are the number of variables used in the factor analysis process. The variances of the components are the eigenvalues; however, not every eigenvalue was considered for the study.

In the table, components 1 to 4 has an eigenvalue > 1. The total initial eigenvalues are 16.39, 4.41, 1.639 and 1.025 respectively. This means that components 1 to 4 have total initial eigenvalues, which should be retained factors, as per the factor analysis process.

The first factor indicates that the number of variances most accounted for has the highest eigenvalues. The second factor takes on the rest of the variances and this applies to the subsequent factors. The table shows these components arranged in descending order with regard to the eigenvalues.

The percentage variance represents the portion that each factor accounts for. The first factor represents 54.63%. The cumulative percentage details increase in percentage as one moves to each factor on the table. As four factors are retained, this means that the cumulative percentage is 78.45%.



**Figure 4.9:** Scree plot indicating that the data has four factors

Figure 4.9 is the scree plot populated through the IBM SPSS program. It is another interpretation of factor analysis to determine how many factors can be accepted. It details the rotated eigenvalues as shown on the y axis, while the components are indicated on the x axis.

The point where the slope of the curve is smooth indicates the number of factors that should be considered. Based on the above figure, component 4 on the x axis will be accepted. This means that only four factors were retained, as illustrated in the scree plot.

#### 4.5.4 Factor extraction and rotation

Extraction and rotation methods are used to analyse data in a simple and meaningful manner to retain number factor appropriateness for the study. Using the IBM SPSS program (version 25), the principal component analysis as a default choice was used as method of extraction.

The oblique rotation method that the investigation used was the Promax rotation with Kaiser normalisation. The investigation's objective was to see if correlations existed between the variables. Promax allowed for correlations between the factors. Table 4.8 shows the results for the Promax rotation.

#### IBM SPSS OUTPUT

**Table 4.8:** The results populated through the Promax rotation

<b>Component Correlation Matrix</b>				
Component	1	2	3	4
1	1.000	.385	.660	.407
2	.385	1.000	.244	.317
3	.660	.244	1.000	.395
4	.407	.317	.395	1.000
Extraction Method: Principal Component Analysis				
Rotation Method: Promax with Kaiser Normalisation				

Table 4.8 indicates the results of oblique rotation (generated through the IBM SPSS program) as the correlations between the factors were set to 0. Therefore, the factors are highly correlated.

#### 4.5.5 Naming of the factors

The pattern matrix table was populated through the IBM SPSS statistical software program. This table is attached as Appendix D. The information assisted the researcher to select retention items for each factor (component), and to name the factors.

The pattern matrix table details how all the variables were grouped according to each factor with the highest value horizontally, while variables with the highest variable y were grouped vertically. Component 1 loaded variables 1 to 15 to Factor 1, Component

2 loaded variables 16 to 22 to Factor 2, Component 3 loaded variables 23 to 28 to Factor 3, and lastly, Components 29 to 30 to Factor 4.

The researcher reviewed each variable adequately which assisted her to name the factor accordingly. The four common themes identified in the study were awareness of EAP, absenteeism, utilisation of EAP, and work attendance.

#### 4.6 Reliability

The factor analysis statistical technique tested the consistency and validity of the collected data. This was necessary to allow the researcher to reach a conclusive summary in relation to the study. This section considers the study's reliability and validity.

Cronbach's alpha is a test reliability method applied to each identified theme in the study as Likert-type scales were used in the survey questionnaires. The normal ranges for the alpha coefficient are between 0 and 1, and there is no lower limit. The closer the alpha coefficient is to 1, the higher the consistency of the items in the scale (Gliem & Gliem, 2003:87).

Table 4.9 details the overall reliability results derived from the IBM SPSS statistical program on each identified factor.

**Table 4.9:** Cronbach's consistency table

<b>Factor</b>	<b>Number of items</b>	<b>Cronbach's alpha: Internal Consistency</b>	<b>Strength of consistency</b>
1. Awareness of employee assistance programme: Q1 – Q15	15	0.974	Acceptable
2. Absenteeism: Q16 – Q22	7	0.958	Acceptable
3. Utilisation of EAP: Q23 – Q28	6	0.908	Acceptable
4. Work attendance: Q29 – Q30	2	0.878	Acceptable

#### **4.6.1 Awareness of EAP**

The first common theme identified in the factor analysis method may be seen in Table 4.9. This table displays the Cronbach alpha reliability test for the theme, awareness of employee assistance, namely Factor 1. The alpha was .978 which is close to 1, meaning that there was a high consistency in the number of 15 items on the scale. This statistically indicates that the above identified theme proved to be highly reliable.

#### **4.6.2 Absenteeism**

Absenteeism was the second common theme that the factor analysis method identified. As shown in Table 4.9 populated for the Cronbach alpha reliability test, the alpha was .958 for the 7 items on the scale, which was close to 1, and this means that it can be interpreted to be highly reliable.

#### **4.6.3 Utilisation of the EAP**

The third theme as shown in Table 4.9 shows results populated for the Cronbach alpha reliability for the theme utilisation of EAP. Six items in the scale had an alpha close to 1, as the values were 0.908. It can be interpreted that there was a high reliability consistency in the analysis.

#### **4.6.4 Work attendance**

The fourth theme identified in Table 4.9 details the results populated for the Cronbach alpha reliability for the theme, work attendance. The two items for the common theme, work attendance, had an alpha value of 0.878, which was close to 1. This means that there was a reasonable reliability consistency in the scale of the items.

Despite the fact that the four identified common themes had a reliability consistency close to 1, it does not mean that the scale was unidimensional. Glime and Glime (2003: 88) contend that in spite of a high value for the Cronbach's alpha to prove higher consistency, it does not explain that the scale is unidimensional. The above researchers add that factor analysis determines the dimensionality of a scale.

In this research study the factor analysis defined the common themes and therefore the scales are dimensional.

#### 4.7 Normality tests using SPSS

Sample distribution was compared with the shape of the normal curve, which was derived from the normality tests. The Shapiro–Wilk W-test was used as the sample size, namely  $n = 109$ . Table 4.10's results were populated through the IBM SPSS statistical program. Four common themes were identified from the factor analysis technique as shown in Table 4.10. The values shown in the right-hand column for Shapiro–Wilk were used for interpretation.

**Table 4.10:** Tests of normality

	Shapiro–Wilk		
	Statistic	Df	Sig.
Awareness of Employee Assistance Programme	.945	108	.000
Absenteeism	.856	108	.000
Utilisation of EAP	.968	108	.011
Work attendance	.917	108	.000

For tests on samples of  $n = 3$  to 2000, use Shapiro–Wilk; for those of  $n > 2000$ , use Kolmogorov–Smirnov.

All the values were  $p \leq 0.00$  for EAP, absenteeism and work attendance, except utilisation of EAP, which was .0011.

As the  $p$  was  $< 0.05$ , it can reject the null hypothesis as the test is significant, thus the observed distribution does not fit the normal distribution.

#### 4.8 Rank order correlation (Spearman's rho)

In the research study, ordinal intervals measured the collected data, utilising Spearman's rank-order correlation. Table 4.11's results were populated through the IBM SPSS program.

IBM SPSS OUTPUT

**Table 4.11:** Spearman correlation matrix table

Correlations					
Spearman's rho		Awareness Employee Assistance Programme	Absenteeism	Utilisation	Work attendance
Awareness Employee Assistance Programme	Correlation Coefficient	1.000	.421**	.808**	.545**
	Sig. (2-tailed)	.	<0.001	.000	.000
	<i>N</i>	109	108	109	108
Absenteeism	Correlation Coefficient	.421**	1.000	.303**	.326**
	Sig. (2-tailed)	.000	.	<.001	<.001
	<i>N</i>	108	108	108	108
Utilisation	Correlation Coefficient	.808**	.303**	1.000	.574**
	Sig. (2-tailed)	.000	<.001	.	.000
	<i>N</i>	109	108	109	108
Work attendance	Correlation Coefficient	.545**	.326**	.574**	1.000
	Sig. (2-tailed)	.000	<.001	.000	.
	<i>N</i>	108	108	108	108

\*\* . Correlation is significant at the 0.01 level (2-tailed).

There are sixteen boxes in the above table. The information shown in the boxes from top left to bottom right represents the relationship of each variable with itself, while the correlation is 1.000 as shown on the table. *N* refers to the number of cases. It should be noted that information in the matrix in Table 4.11 shows that the results are repeated in the top right to the bottom left diagonal boxes.

The Spearman correlation matrix table above refers to the strength and direction of the relationship. Preliminary analysis was conducted to ensure that there were no violations, assumptions of normality, linearity and homoscedasticity. Referring to Table 4.11, Schober et al. (2018:1765) and Burns and Burns (2008:346) assisted the researcher to indicate the strength and direction of the relationship in terms of the magnitude of the relationship for correlation.

- a) Spearman's rho revealed a statistically significant relationship between the CSRs' awareness of EAP and absenteeism in the call centre, since  $\rho = .42$ ,  $n = 10$ ,  $p$  is  $\leq 0.01$ . There was also a moderate relationship between the variables.
- b) Spearman's rho revealed a statistically significant relationship between the CSRs' awareness of EAP and attendance at work, since  $\rho = .54$ ,  $n = 108$ ,  $p$  is  $\leq 0.01$ . This indicates a positive relationship between awareness of EAP and attendance at work.
- c) Spearman's rho revealed a statistically significant relationship between absenteeism and attendance at work, since  $\rho = .32$ ,  $n = 108$ ,  $p$  is  $\leq 0.01$ . This indicates a weak association between absenteeism and work attendance, as per the table of magnitude. However, it indicated a positive relationship between the variables.
- d) Spearman's rho revealed a statistically significant relationship between utilisation of the EAP and work attendance, since  $\rho = .57$ ,  $n = 108$ ,  $p$  is  $\leq 0.01$ , and there was also a positive relationship between the variables.
- e) Spearman's rho revealed a statistically significant relationship between absenteeism and utilisation of EAP, since  $\rho = .303$ ,  $n = 109$ ,  $p$  is  $\leq 0.01$ , and there was a positive relationship between the variables in the call centre.
- f) Spearman's rho revealed a statistically significant relationship between the CSRs' awareness of EAP and utilisation of the EAP, since  $\rho = .80$ ,  $n = 109$ ,  $p$  is  $\leq 0.01$ . Rho was close to 1, thus there was a stronger relationship between the variables.

### **Hypothesis testing (*P*-value approach)**

Hypothesis testing was measured by the  $p$  value derived from the IBM SPSS statistical program. The significance value or alpha was set at .01, as shown in Table 4.11.

### **The following indicates the research study's hypothesis.**

**H<sub>0</sub>:** The unacceptable levels of absenteeism are not as a result of non-utilisation of the employee assistance programme among customer service representatives at the service call centre.

**H<sub>1</sub>:** The unacceptable levels of absenteeism are as a result of non-utilisation of the employee assistance programme among customer service representatives at the service call centre.



As shown in Table 4.11, the  $p$  value  $\leq .001$ , the null was rejected and the alternative was accepted. The results showed that a high significance exists.

The deduction is that there is a significant association between absenteeism and utilisation of the EAP.

#### 4.9 Coefficient of determination

Correlation coefficient is criticised for not having true interpretation, (Schober, 2018:1763). Thus, coefficient of determination ( $R^2$ ) was considered to measure the strength of the relationship more precisely. Table 4.12 below indicates the coefficient of determination for the variables.

#### IBM SPSS OUTPUT

**Table 4.12:** Coefficient of determination

Coefficient of determination ( $R^2$ )					
Spearman's rho		Awareness of EAP	Absenteeism	Utilisation of EAP	Work attendance
Awareness Employee Assistance Programme	Correlation Coefficient	1.000	.177	.65	.29
Absenteeism	Correlation Coefficient	.177	1.000	.09	.10
Utilisation of EAP	Correlation Coefficient	.65	.09	1.000	.32
Work attendance	Correlation Coefficient	.29	.10	.32	1.000

\*\* . Correlation is significant at the 0.01 level (2-tailed).

The variance will be multiplied by 100 to obtain percentages.

a) The awareness of EAP and absenteeism correlation coefficient was  $\rho = .421$ ,  $R^2 = .177$ , as shown in Table 4.12, and the percentage was 17.7%. This means that 17.7% of the variance absenteeism can be explained by the variance of awareness of EAP, meaning that as the CSRs become more aware of the EAP, the more absenteeism decreases. (The Likert scale gave 'strongly unaware' a higher numerical value/code than 'fully aware', resulting in a positive rather than a negative correlation.)

b) The correlation coefficient  $\rho = .808$ ,  $R^2 = .65$  and the 65% indicate the variance of awareness of EAP which can be explained by utilisation of the EAP.

Similarly, the percentage of absenteeism was explained by awareness of the EAP as there was a positive correlation.

c) Work attendance and absenteeism was  $\rho = .32$ ,  $R^2 = .10$ . This means that 10% of the variance in work attendance can be explained by the variance of absenteeism. This can be interpreted as more CSRs attend work and absenteeism decreases. (The Likert scale on the questionnaire gave 'strongly unaware' a higher numerical value/code than 'fully aware', resulting in a positive rather than a negative correlation.)

d) Spearman's  $\rho = .545$  has  $R^2 = .29$ , thus a figure of 29%. This means that 29% variance of awareness of the EAP was explained by work attendance. Correspondingly, the variance 29% of work attendance is explained by awareness of the EAP and there is a positive correlation between utilisation of the EAP and work attendance.

e) The Spearman's  $\rho = .574$  has a  $R^2 = .32$ , and a figure of 32%. This means 32% variance of utilisation of the EAP in relation to CSR work attendance. There is a positive correlation, because when the CSRs utilise the EAP, it means that they attend work.

f) The Spearman's  $\rho = .303$  has  $R^2 = .09$  and the figure was 9%. This means the variance 9% of utilisation of the EAP can be explained by absenteeism. (The Likert scale on the questionnaire gave 'strongly unaware' a higher numerical value/code than 'fully aware', resulting in a positive rather than a negative correlation.)

Overall, the results across the themes were not consistent. The variances were from 9% to 65%, the lowest to highest values, respectively. The sample sizes were 108–109, indicating a small difference. Additionally, the variance between each variable ranged from a small to a big gap difference.

Thus, the findings revealed that there was no consistency between the themes. Based on the main research question, it can be said that there was no consistency between absenteeism and utilisation of the EAP in the service call centre.

#### **4.10 Summary**

Chapter 4 examined and analysed the data retrieved from the 109 CSR respondents and the 10 management respondents at the service call centre under study. The questionnaire was distributed by an online survey to the CSRs, while the management team received the questionnaire by internal electronic mail.

Descriptive statistics summarised the data characteristics of the study representation in a meaningful way. This permitted emergent trends or patterns to be identified. The factor analysis method, using the IBM SPSS program, permitted further analysis, examination and understanding of the populated results. Common themes in the research were identified through factor analysis and examined. Further analysis revealed the relationships among the variables, allowing for a better understanding of the results.

Chapter 5 elaborates on the discussion of the results and attempts to ascertain if the study objectives were achieved.

## **CHAPTER 5: DISCUSSION AND INTERPRETATION OF RESULTS**

### **5.1 Introduction**

Chapter 5 discusses the research findings detailed in Chapter 4. Furthermore, examination and elucidation of the research findings also references information from the literature review presented in Chapter 2. The purpose is to align this research with previous studies in the domain and to contribute to the existing body of knowledge. The researcher also compares studies where appropriate. In addition, a summation is provided to ascertain whether or not the objectives of the study have been achieved.

### **5.2 Summary of the study**

The focus of the investigation was to determine why there are high levels of absenteeism, despite the availability of an employee assistance programme, at a service call centre in the Western Cape, South Africa.

The EAP was implemented to curb high levels of absenteeism. However, there were still unacceptably high levels of absenteeism at the call centre. The study focused on factors such as awareness, usage, communication, accessibility of the programme, and problems associated with absenteeism. The research was completed in a service call centre comprising approximately 350 employees, with 109 responses obtained through an online questionnaire survey. A quantitative study was carried out and the time frame to administer the online questionnaires was five weeks.

### **5.3 Main research findings**

The results are presented and discussed in relation to the study's objectives, outlined below:

- 1) To investigate if a relationship exists between absenteeism and utilisation of the employee assistance programme.
- 2) To determine the underlying issues with regard to absenteeism in the service call centre
- 3) To determine awareness and accessibility of the employee assistance programme that the service call centre offers

- 4) To determine the extent of utilisation of the employee assistance programme by the CSRs at the service call centre
- 5) To determine the causes of absenteeism and explore the solutions at the service call centre.

### **5.3.1 Absenteeism and utilisation of the EAP**

The EAP was implemented in the organisation as an intervention to reduce high absenteeism. The EAP should reduce the high absenteeism experienced in the service call centre among CSRs if used appropriately. The factor theme 'absenteeism and utilisation' was identified in the factor analysis and relates to Study Objective 1.

The findings show that the purpose of intervention through the EAP is not acknowledged by the CSRs; neither is it a strategy to reduce high absenteeism. However, the CSRs were aware that Careways was implemented for their well-being. The CSRs were aware that they can access the EAP, despite their working in a 24/7 environment. In addition, they were aware that the EAP is readily available for their use. Management promotes the EAP by using a variety of methods, such as advertising posters and collegial word of mouth. Management was identified as the least used technique to communicate the EAP to boost its awareness.

Illness was identified as a major reason for high absenteeism in the call centre. This could be the result of stress, the nature of the job, or other high-pressured environmental factors associated with working in a service call centre that influence health. Service call centre CSRs are prone to physical, mental and social health problems, as these are associated with their job profiles (Raja & Bhasin, 2014:177). High expectations of management at the service call centre, high customer satisfaction anticipation, and performance monitoring all contribute to stress in the workplace (De Ruyter et al., 2001:23; Miller & Hendrickse, 2016:53). Additional factors such as extra work loads and pressure to meet targets have a negative impact on the physical, emotional and mental well-being of the call centre CSRs, resulting in high absenteeism. Stress was identified as the least likely cause of absenteeism in the investigation, despite its being a factor associated with absenteeism in a service call centre work environment. Call centre CSRs generally experience stress due to work and the work environment as a result of the job and work context (Miller & Hendrickse, 2016:53).

Viveka (2013:81) identifies stress as a factor in the workplace that often influences employees to the point where they opt to avoid work.

Studies regarding stress as a factor associated with service call centres often differ. Mukherjee and Maheshwari (2014:53) found that service call centre careers do not always have a harmful impact on employees and can also have a positive effect. In accordance with their research findings, stress is a factor that results in absenteeism. However, it is not necessarily associated with service call centres and was in fact identified as a least likely factor to impact employees' absenteeism. Rather, they identified illness as a common reason for absenteeism in their study, which could be due to physical, psychological and emotional problems that are not necessarily related to the person's job profile or work environment.

As shown in Figure 4.8, the sickness rate from 2010 to 2016 fluctuated in spite of accessibility to and utilisation of the EAP. There was no decrease in absenteeism before or after using the EAP. Further analysis in the investigation report established that there was little significance between absenteeism and utilisation of the EAP as there were other factors that influenced both variables. Despite the CSRs using Careways, there was little difference in the service call centre's absenteeism levels. Hence, one may infer that illness is a factor that results in high levels of absenteeism. However, utilisation of the programme had little to no impact on reducing absenteeism.

### **5.3.2 Underlying issues of absenteeism**

The service call centre CSRs recognised the issues associated with absenteeism and the implications for colleagues and the organisation as shown by this research study's results. This suggests that employees realise that being absent is detrimental to the organisation financially and that it impacts their colleagues. CSRs are educated about the importance of work attendance and its impact when they do not adhere to this core organisational requirement. The organisation does communicate, and employs a number of strategies for the CSRs as means to minimise absenteeism. The effects of absenteeism include increased workloads, overtime, disgruntled co-workers, low morale and pressure to meet high-quality customer service expectations.

Studies show that absentee behaviour that exacerbates organisational health includes low morale, high stress levels and poor communication, while leadership and staff relationships are low (Čikeš et al., 2018:26). Absenteeism costs have an impact on the

organisation, and on individuals and society, while also infringing on social and economic spheres (Carlsen, 2012:129). This relates to direct compensation costs, recruitment costs and loss of production, which are a few of the negative consequences (Čikeš et al., can be used as an intervention to reduce absenteeism through clear stipulated attendance policies, (Mogobe, 2011:27: Forte, 2017:32). 2018:26). Furthermore, the findings showed that effective communication channels

### **5.3.3 Awareness of and accessibility of the EAP**

The EAP is used to deal with health issues to minimise absenteeism and benefit both employees and the organisation. It is through effective communication channels that employees become aware of the EAP and how to access it. The study found that 52.6% of the CSRs were aware of the EAP (Careways) and knew that it is easily accessible. Communication channels include word of mouth via colleagues, posters, pamphlets, team leaders and the grapevine. These methods are used to boost awareness of the EAP to access and use at the service call centre.

Research studies show positive consistency between EAP accessibility, efficacy, effective management of the EAP, EAP support, greater awareness of the EAP, knowledge of the EAP and employee usage of EAP services (Azzone et al., 2009:346). Kocakülâh et al. (2016:92) state that the benefits of a successful EAP encourage employees to use it through ongoing public communications channels.

However, team leaders do not promote the EAP's accessibility and the utilisation of Careways effectively to reduce high absenteeism at the service call centre. An employee's well-being improves if there is supportive leadership (Brand & Gauche 2010:25). Higher efficacy is achieved when management is at the forefront of boosting the EAP to the CSRs. Improving communication channels can be used as an intervention to reduce absenteeism (Miller, 2015:38). Management should be at the forefront of promoting organisational wellness and creating the sense of an empathetic and compassionate leadership. This type of approach will have holistic value for both workers and the organisation.

### **5.3.4 Utilisation of the EAP and attendance**

The findings show that as an EAP, the organisation's employees are aware of Careways as the organisation uses different techniques to promote Careways. The CSCs use it to improve their well-being at the service call centre. However, most of the CSRs are not aware that the EAP was introduced to assist the organisation to reduce absenteeism. This means that the employees use it to improve their well-being, but not necessarily to assist them in improving their attendance and curbing their absenteeism.

The investigation revealed that the organisation's high levels of absenteeism are not due to non-utilisation of the EAP (Careways). EAP is recognised and utilised as it is appropriately communicated to colleagues. However, employees were not aware that the EAP was implemented to assist in reducing absenteeism and thus improving attendance.

Further analysis showed that there is a positive association between awareness of the EAP and attendance. The degree of effect was a 29% variation, which indicated a slight change. The slight change is possibly due to non-awareness of the CSRs that Careways was implemented to assist in improving attendance by reducing the sickness ratio.

A successful EAP boosts the utilisation of EAP through ongoing public communications channels (Kocakülâh et al., 2016:92). The CSRs indicated that there was no communication with regard to the EAP in minimising absenteeism, which means that the results do not concur with the literature. Greater awareness of the EAP programme, knowledge of the EAP, and employees' use, all contribute to positive consistency associated with the programme (Azzone et al., 2009:346). CSRs may not fully understand the aim of the EAP strategy to improve attendance. EAP is targeted to achieve changes in absenteeism, poor work performance, emotional issues and the high rate of accidents (Moore, 1989:508). In relation to the research study, the EAP may not be achieving its targets. Overall, effective communication is not adhered to, and as a result, there is a slight change in utilisation of the EAP and attendance. However, the EAP's aims are not met.



The study's common themes indicated that there is a positive relationship between utilisation of the EAP and attendance. Attendance has increased at the service call centre since the CSRs have used Careways. An EAP is beneficial as a strategic tool to assist with personal issues, minimise absenteeism and for the development and retention of employees (Simelane, 2007:35; Grobler et al., 2011:234; Rajin, 2012:19; Kocakülâh et al., 2016:92). The study's results are aligned with the literature in this respect; not necessarily to minimise absenteeism but rather to assist with or prevent other problems that the CSRs face at the service call centre.

### **5.3.5 Causes and remedies in relation to absenteeism**

Illness was identified as the main cause of employee absence. Although the results did not specify the source of illness, it could relate to the physical, emotional and psychological well-being of CSRs owing to the job profile. Physical health problems are associated with service call centres (Shepell-fgi, 2008:3; McFarlane et al., 2015:399). Neck/shoulder and arm/hand strains, as well as eye discomfort are symptoms associated with prolonged deskbound computerised jobs, but are also stress-related problems (Norman, 2005:4).

Service call centres are considered to be stressful and pressurised working environments that could lead to CSRs becoming ill. Factors such as job monotony, lack of job diversity and high work demands are causes of job-related stress in service call centres (Holman, 2002:35). Overall, this impacts employees' well-being, as service call centre jobs depend on the level of employee wellness (Cranwell-Ward & Abbey, 2005:67).

According to the research findings, stress was identified as the least cause of absenteeism. However, according to the literature, stress is a major concern that employees face as a result of their jobs' high demands and continuous monitoring at call centres (Khalid et al., 2013:59). McFarlane et al. (2015:399) add that one in every three employees in a service call centre experiences work stress. Service call centre jobs are identified as one of the most stressful jobs, since employees provide services to customers and manage emotionally intense situations, further exacerbated by the general working environment (Cranwell-Ward & Abbey, 2005:66). Hence, employees opt not to go to work, resulting in high absenteeism, high turnover and low productivity.

Other studies disagree that stress is associated with service call centres. Holman's (2002) study argues that service call centres are neither electronic sweatshops, nor are they stressful.

Service call centre leaders have the option of managing the entity in a manner that reduces stress levels (Cranwell-Ward & Abbey, 2005:68). This signifies that in spite of stress being identified as a cause of absenteeism, it is not necessarily related to service call centres. In addition, illness is identified as the major cause of absenteeism; however, this could be the result of stress.

Transport, finance and family were other causes identified as root causes of absenteeism. The service call centre operates in a 24/7 environment, which means that CSRs work in different world time zones and have different work schedules. CSRs are expected to accept rotational shift schedules that may impact on their wellness (Hannif et al., 2010:181). These work schedules make it difficult for employees to maintain a healthy balance between their work and family life, while finances or transport are other root causes of absenteeism. Family and personal responsibilities often mean a higher rate of absenteeism (Čikeš et al., 2018:5). The achievement of adequate personal and work balance for service call centre CSRs is questionable (Hannif et al., 2010:181). This affects CSR's' general wellness negatively. Family-work balance as a factor exacerbating absenteeism in a service call centre is in fact in line with the literature. While finance and transport are recognised as absenteeism factors, these may be connected to other factors within the service call centre. For example, financial constraints that result in absenteeism could be due to the employee's salary package, while transport problems may be caused because of the employee's work shifts.

The research study's findings on solutions for absenteeism reveal that the CSRs are aware of Careways and acknowledge that it is used in the service call centre. Various methods of communication are used to create awareness about it in the organisation. Posters and colleagues are commonly used, while promotion of the system by team leaders was noted as a method least used. Other solutions to prevent absenteeism and improve attendance include company policies and procedures that should be

followed. The CSCs acknowledge that they are aware of the implications of their absenteeism, both for the organisation and their colleagues.

#### **5.4 Summary**

This chapter provided a detailed discussion of the study's objectives with reference to the findings revealed in Chapter 4. Interpretations from the descriptive and statistical analysis and results offered further insights within the context of the literature reviewed in Chapter 2.

Chapter 6 is the final chapter and completes this research study by correlating the research study's objectives, the reviewed literature, and the statistical findings. In addition, it proffers recommendations for the organisation and for further research to add to the existing body of knowledge. Study limitations, implications and suggestions are also addressed. The dissertation ends with conclusions based on the research findings.

## **CHAPTER 6: CONCLUSIONS AND RECOMMENDATIONS**

### **6.1 Introduction**

Chapter 6 reflects on discussions from Chapter 5 and draws conclusions in relation to whether or not the study's objectives were achieved. Thereafter, it proposes recommendations for the service call centre, as well as for future related studies. Finally, the chapter outlines some limitations of the research, its implications, and concludes the study.

### **6.2 Conclusion in relation to the study objectives**

The problem statement explains that the aim of the study was to examine the high levels of absenteeism at a service call centre as a result of employees not using the EAP. Colleagues work overtime to meet customers' service demands. This has an impact on employee morale and sometimes leads to burnout or stress. The EAP is offered at the service call centre; nonetheless there have been abnormally high levels of absenteeism – an average of 5.5% per annum from 2012 to 2016. The next section discusses the research objectives and draws conclusions from the study.

**6.2.1 Main Objective:** Investigate the relationship between absenteeism and utilisation of the EAP

Absenteeism was identified as a problem at the service call centre and the EAP was implemented for the CSRs to minimise this problem. The study aimed to identify the association between the utilisation of the EAP and absenteeism as its main objective. The results revealed a negative association between use of the EAP and absenteeism, with a slight variation. This means that as more CSRs used the EAP facilities, absenteeism was reduced, with a slight variance change. Employees used the EAP to assist them in improving their well-being but not to diminish the high illness ratio or to increase attendance. In addition, employees used the EAP for financial, personal and psychological reasons.

EAPs are beneficial to organisations to reduce absenteeism (Sutherland & Cooper, 2000:24; Rathod & Reddy, 2012:82). Spetch, Howland and Lowman (2011:124) reveal that Canadian retail employees who used EAP over a three-year period had higher

rates of absenteeism than non-users during the same year of the programme. However, use of the EAP does improve attendance and reduce absenteeism which benefits organisations, and this appears to be in line with what the literature recommends.

**6.2.2 Objective 2:** To determine the underlying issues of absenteeism in the call centre

Underlying issues of absenteeism affect both the service call centre and the CSRs. Financial implications for the organisation can be high if absenteeism is not dealt with accordingly. The questionnaire posed questions to the CSCs to ascertain their awareness of the underlying issues with regard to absenteeism. The findings revealed that they are aware of associated problems with absenteeism, such as costs and the impact of longer absences on work colleagues. This includes workload increases for their colleagues, stress, overtime costs, low morale, recruitment costs and low service levels. This underscores research studies that Carlsen (2012:129) and Cascio and Boudreau (2011:56) conducted that identified associated absenteeism factors. In addition, Kocakülâh et al. (2016:90) also note there are numerous underlying costs associated with absenteeism. These costs are incurred when CSRs engage in longer absences from the service call centre which have proved to be detrimental to both the service call centre and the other CSRs.

The organisation has made employees aware of these implications to ensure they understand the consequences of their long absences from the service call centre. It is important for the organisation to educate employees about this and make them aware of the organisation's sickness policy through counselling sessions at their service call centre. Organisations must inform all concerned parties of the effects of absenteeism and its associated problems continuously. This will assist in promoting a strategy to prevent or diminish absenteeism in the service call centre. Policies and procedures are implemented consistently, fairly and timeously to avoid any confusion; all parties, therefore, are aware of the processes. In addition, the impact of CSRs' longer absences from work should be communicated.

**6.2.3 Objective 3:** To determine awareness of and accessibility to the EAP at the call centre

The study aimed to reveal if the CSCs use the EAP because they are aware of it and have access to it. The questionnaire posed questions to the CSRs relative to the second objective. The results showed that employees are aware of EAP (Careways) and that it is accessible to use as an extra benefit. Various methods are used to communicate Careways to employees. Primarily, colleagues and posters are the most common means that inform them about Careways and its uses and benefits. Hence, it can be deduced that CSRs utilise the programme as there are diverse methods used to create awareness and it is readily accessible. Thus, the study's second objective was achieved.

Kocakülâh et al. (2016:92) emphasise the importance of promoting the use of an EAP through ongoing public communication channels. The current study's respondents identified various methods to create awareness in the service call centre so that employees utilise the EAP. This supports the literature reviewed with reference to the topic. Management was one of the methods least employed to encourage use of the EAP. It can be reasoned that owing to ineffective communication, management does not promote the EAP and therefore it has had little impact on reducing absenteeism in the service call centre.

Management should be at the forefront of communicating the EAP to its employees. This would create a sense of caring from the employees' point of view about their wellness. Overall, compassionate employers can boost productivity, efficiency and return on investment for the service call centre. In addition, effective communication methods should be used to promote the use of EAPs to boost inclusive, healthy lifestyles.

**6.2.4 Objective 4:** To determine the extent of utilisation of the EAP at the call centre

The study aimed to ascertain how the programme is used in the service call centre in relation to absenteeism. The findings revealed that employees recognise the EAP programme and use it. However, the findings also indicated that the CSRs are unaware

that Careways can be used to cater for individual needs and to boost their well-being. This suggests that employees may use the programme if there is a situation that requires further assistance to prevent or alleviate any absenteeism-related issue

EAPs can be utilised effectively if employees are made aware consistently that the programme is available to contribute to their wellness and well-being, and to minimise absenteeism and promote work attendance. This is only possible if there is effective communication. Continual communication with the CSRs on Careways' objectives and benefits will certainly create awareness. This should prompt employees to use it for their well-being and to improve attendance; this in turn should enhance the organisation's success as its CSRs will be healthy and productive at work.

**6.2.5 Objective 5:** To determine the causes of high absenteeism at the service call centre and possible solutions to decrease it.

The study aimed to establish the root of absenteeism that resulted in long absences from the service call centre. In the questionnaire, CSRs were probed to identify a variety of potential causes for the high levels of absenteeism as referenced in the literature. Illness was the most common reason identified, owing to physical, psychological, emotional and/or mental health problems, found to be prevalent in the service call centre. Service call centres are considered to be stressful work environments, hence stress is regarded as being at the root of the illnesses that occur. However, stress was identified as the least cause of absenteeism.

Illness can be as a result of negative factors that influence CSRs' wellness. In addition, it can be construed that stress occurs because of issues that affect the wellness of the CSRs and not because of the service call centre working environment. The literature identified various reasons for employee absenteeism. Transport was named as one such factor; however, the respondents in the research study did not identify it as contributing to the service call centre's absenteeism problem. The service call centre operates in a 24/7 work setting and this could be a contributory factor to its levels of absenteeism. Previous studies neither supported nor disagreed with finance and transport as major issues in respect of absenteeism.

The CSRs identified various causes of absenteeism but mentioned that they were unaware that Careways had been implemented to deal with absenteeism or attendance. Objective 5 was achieved but the CSRs were unaware of the solutions.

Stress is not necessarily the cause of absenteeism in the service call centre. There are other factors such as illness, finance and transport that occasion longer absences. Identifying the roots of absenteeism is imperative so that appropriate and collaborative solutions may be implemented to prevent or mitigate longer absences. As a strategy, the EAP must be implemented and communicated effectively, and be understood by the service call centre's CSRs. This will create awareness of the intervention as a means of access and support, but most importantly should reduce the high sickness ratio. Ultimately, it should increase productivity and efficiency in the workplace.

### **6.3 Recommendations to organisation**

CSRs are aware of the EAP and how to utilise it. However, its objectives and rationale are not known. The programme was implemented to curb the excessive absence due to illness and the associated business ratios in the service call centre. Management must clarify the programme's objectives in respect of its implementation. This will promote understanding and use of the programme among CSRs. Management must be at the vanguard in promoting the programme to ensure the EAP's effectiveness at the service call centre. This should create a sense of empathy among employees in terms of their well-being, and should boost use of the programme.

The programme is used at the service call centre, but the findings revealed that it has had little effect on absenteeism. Further investigation over a period of time should identify the real root causes of absenteeism. Collaborative appropriate strategies should be implemented to reduce the high levels of absenteeism. Further investigations should be conducted to reveal other reasons for CSR use of the EAP.

An assessment of the EAP should be conducted. Moore (1989:508) emphasises that the effectiveness of an EAP is determined if both the organisation and employee evaluates the programme in respect of whether or not it has satisfied their needs. The service call centre should assess and evaluate its effectiveness based on the services provided and their efficacy and suitability to CSR needs.



The service call centre management should encourage feedback based on the services provided to the CSRs and periodic statistics in relation to usage of the programme. Moore (1989:508) states that organisations that offer EAPs should recognise that the programmes are not static and should be assessed periodically. The feedback should advise management whether or not the programme meets the set objectives and needs of its users. The information may reveal other reasons for longer absenteeism at the call centre.

#### **6.4 Recommendations for further studies**

The research study took place at a service call centre situated in the central business district in the Western Cape province in South Africa. The research results from one service call centre may be different from those of another, hence the researcher recommends that further research be conducted. Furthermore, such research should identify if there are similar results and conclude whether or not there is a proven phenomenon. The research was conducted over a short period of time and the results gave a slight reflection of the topic under examination. Further research should be undertaken at the service call centre periodically to verify the findings of the current research study, and to effect adjustments.

Studies on absenteeism in the service call centre thus should be conducted periodically in order to reflect fully on the results. This allows for effective decisions and necessary and appropriate amendments. Using any changes or trends from the information collected, management can make suitable decisions for future predictions. The researcher found numerous studies on service call centres and wellness programmes, but little on EAPs. It is recommended that future research be done on EAPs and absenteeism in service call centres, especially in southern Africa.

#### **6.5 Study limitations, implications and suggestions for future research**

This section details the limitations, effects of the study and proposals for further studies. There were some unanticipated circumstances that restricted the process and progression of the investigation. The nature of the service call centre and industry

created some limitations for the study which the researcher could not predict. The researcher initially planned to distribute the questionnaires to respondents at the service call centre during the data-collection phase. However, to adhere to company policies and regulations, the researcher was advised to use the organisation's web-based survey. The questionnaire was populated online with the assistance of the organisation's communication department. Time constraints were an issue as it took time for the questionnaire to be made available online. However, printing costs were reduced. In addition, the service call centre deals with customers' sensitive information, which includes personal information and credit card details. The researcher had to abide by the service call centre's payment card industry (PCI) data security standards. While employees (CSRs) received the questionnaire survey online via the Web, management received theirs via their internal work email system.

The web-based survey was accessible to all employees at the service call centre and the target group was the CSRs. Hence, there were responses that were not used for the study as some back-office employees participated in the survey. This influenced the number of responses received for analysis. The service call centre functions in a 24/7 work environment.

There were CSRs that did not get to participate owing to the different shift work schedules, even though the questionnaire was readily available online regardless of shifts. CSRs were able to participate only during work and when taking calls. In addition, because time management is important at the service call centre, CSRs could not engage with the online survey during work, but only during their breaks. This affected the number of responses received, as they were unwilling to use their breaks to participate in the online survey. The CSCs could not anticipate when to take the next call and the responses could have been influenced if the survey was done hastily.

External environmental forces affected the time frame and respondent participation. As it is an international organisation that services various countries, differences in culture, weather, and technology may have interfered with the research study. For example, cancellation of flights meant high volumes of calls that prevented some CSRs from participating in the study or rushing through it to participate in the online survey. This limited the number of responses received.

The EAP was implemented to prevent or diminish the high levels of absenteeism at the service call centre. The CSCs recognise the programme and use it; however, they do not necessarily regard it as a means of reducing absenteeism or assisting in improving attendance. In addition, the CSRs do not know that Careways was implemented to improve absenteeism. The implications of the study thus affect the following stakeholders:

Team leaders and customer managers should educate CSRs on the EAP's strategy, objectives and benefits in respect of their using it to improve attendance, well-being and reduce absenteeism.

CSRs should be encouraged not only to use the EAP to reduce absenteeism, but also to boost well-being among employees at the service call centre.

Management should improve communication methods to ensure that all stakeholders are aware of strategies to minimise absenteeism in the organisation.

Stress has been associated with service call centres since their inception, but was the least significant reason for absenteeism. The implications of this finding for the organisation is that physical, emotional or environmental issues may also affect CSRs, causing them to be absent from work for longer periods. The researcher found a great deal of information on absenteeism, service call centres and EAPs internationally. The results of the current study add to the body of knowledge, and should encourage further research on the topic. Service call centres are evolving globally, hence this research has contributed to the body of knowledge. Further studies should be conducted on service call centres, absenteeism, and EAPs.

## **6.6 Conclusions**

Absenteeism is a common human resource problem in any organisation and appropriate measures should be taken to mitigate the problem as it has detrimental associated costs. Research studies have categorised service call centres as being stressful work environments that impact both employee wellness and the organisation. EAPs are implemented at the service call centre to reduce absenteeism and aim to promote healthy wellness among employees and add value to the company.

Recognition of an EAP in an organisation endorses its use while promoting health and wellness among employees and ultimately ensuring high returns owing to productivity and efficiency. Organisations should promote EAPs by communicating them effectively to employees to create awareness of the programmes, as well as their objectives and benefits. Management should emphasise this for better effectiveness of the programme in the service call centre. This would encourage the service call centre CSRs to use the programme more often to reduce the high absences.

## **6.7 Summary**

As the EAP, Careways is recognised in the service call centre as it is accessible and promotes employee wellness. However, the CSRs are unaware that the programme was implemented to assist in reducing absenteeism and to improve employee attendance. Diverse methods are used to promote awareness of the EAP and encourage its use. The techniques mainly used include colleagues and posters, while team leaders and pamphlets are used least.

There is an overall understanding of the implications of associated costs of the high sick leave ratio and the effects of absenteeism on the service call centre, especially regarding work colleagues. Illness was identified as the major factor causing absenteeism, while stress was rated the least, in spite of the perception that service call centres are stressful work environments. The employee's physical, mental, emotional and psychological well-being is impacted and thus attendance is low.

## Reference List

- 150 great tech prep careers. 2009. 2<sup>nd</sup> ed. New York, NY: Ferguson.
- Aadomt, M.G. 2012. *Industrial/Organizational psychology: An applied approach*. 7<sup>th</sup> ed. Belmont, CA: Wadsworth, Cengage Learning.
- Abraham, M. 2008. Globalization and the call center industry. *International Sociology*, 23(2):197-210. <https://doi.org/10.1177/0268580907086376>
- Ajayi, O.V. 2017. Primary sources of data and secondary sources of data. [https://www.researchgate.net/publication/320010397\\_Primary\\_Sources\\_of\\_Data\\_and\\_Secondary\\_Sources\\_of\\_Data](https://www.researchgate.net/publication/320010397_Primary_Sources_of_Data_and_Secondary_Sources_of_Data) [5 May 2020].
- Akhtar, I. 2016. Research design. *Research in social science: interdisciplinary perspectives*, 68-84. [https://www.researchgate.net/publication/308915548\\_Research\\_Design](https://www.researchgate.net/publication/308915548_Research_Design) [7 March 2020].
- Aksin, Z., Armony, M. & Mehrotra, V. 2007. The modern call center: a multidisciplinary perspective on operations management research. *Production and Operations Management*, 16(6):665-688. <https://doi.org/10.1111/j.1937-5956.2007.tb00288.x>
- Albers, M.J. 2017. *Introduction to quantitative data analysis in the behavioral and social sciences*. Hoboken, NJ: John Wiley.
- Anderson, B. 2009. The relationship between absenteeism and on-site employer sponsored childcare. Unpublished MA dissertation, University of South Africa, Pretoria, South Africa.
- Armstrong, M. & Taylor, S. 2020. *Armstrong's handbook of human resource management practice*. 15<sup>th</sup> ed. London: Kogan Page.

Ary, D., Jacobs, L.C., Razavieh, A. & Sorensen, C.K. 2009. *Introduction to research in education*. 8<sup>th</sup> ed. Belmont, CA: Wadsworth.

Australasian Faculty of Occupational Medicine. 1999. Workplace attendance and absenteeism.

<https://www.racp.edu.au/docs/default-source/faculties-library/workplace-attendance-and-absenteeism.pdf?sfvrsn=4> [24 June 2019].

Azzone, V., McCann, B., Merrick, E.L., Hiatt, D., Hodgkin, D. & Horgan, C. 2009. workplace stress, organizational factors and EAP utilization. *Workplace Behavioral Health*, 24(3):344-356. DOI: 10.1080/15555240903188380

Basariya, S.R. 2015. Employee Absenteesim in Indian Industries. *International Journal of Science and Research*, 4(10):141-156, October.

<https://www.ijsr.net/archive/v4i10/SUB158515.pdf> [6 June 2020].

Benner, C., Lewis, C. & Omar, R. 2007. The South African call centre Industry: a study of strategy, human resource practices and performance. Part of the Global Call Centre Industry Project, June.

<http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.483.7294&rep=rep1&type=pdf> [1 September 2018].

Benninghoven, A., Bindzius, F., Braun, D., Cramer, J., Ellegast, R., Flowerday, U., Genz, A., Von der Heyden, T., Pfeiffer, W., Schittly, D., Schweer, R. & Stamm, R. 2005. CCall – Healthy and successful work in call centres. *International Journal of Occupational Safety and Ergonomics*, 11(4):409-421.

<https://doi.org/10.1080/10803548.2005.11076660>

Berkbigler, E. & Dickson, K.E. 2014. Required scripting and work stress in the call center environment: a preliminary exploration. *Journal of Organizational Culture, Communications and Conflict*, 18(1):233-255.

Bermingham, C. 2013. Employee's understanding of workplace absenteeism and the investigation of stress as a contributing factor. Unpublished BA (Hons) Human Resource Management thesis, National College of Ireland, Dublin.

Berry, L.L. & Mirabito, A.M. 2011. Partnering for prevention with workplace health promotion programs. *Mayo Clinic Proceedings*, 86(4):335-337.  
doi:10.4065/mcp.2010.0803

Bii, P.K. 2016. Age: a determinant of employee absenteeism in Trans Nzoia County. *Journal of Emerging Trends in Economics and Management Sciences*, 7(6):363-368.

Blacharski, D.W. 2006. *Superior customer service: how to keep customer racing back to your business – Time tested examples from leading companies*. Ocala, FL: Atlantic.

Bless, C., Higson-Smith, C. & Kagee, A. 2006. *Fundamentals of social research methods*. 4<sup>th</sup> ed. Cape Town: Juta.

Bohlander, G. & Snell, S. 2010. *Managing human resources*. 15<sup>th</sup> ed. Mason, OH: South-Western Cengage Learning.

Bohle, P., Willaby, H., Quinlan, M. & McNamara, M. 2011. Flexible work in call centres: working hours, work–life conflict & health. *Applied Ergonomics*, 42(2):219-224.  
<https://doi.org/10.1016/j.apergo.2010.06.007>

BPESA. 2016. South Africa business process services key indicator report. <https://www.bpesa.org.za/index.php/invest-in-southafrica/useful-documents/2016-key-indicator-report.html> [18 July 2017].

Brand, H. & Gauche, C. 2010. A study of employee reported factors influencing wellness in a South African international call centre environment. *Occupational Health Southern Africa*: 21-27, March/April.

Bray, I. 2012. *Healthy employees, healthy business: easy, affordable ways to promote workplace wellness*. 2<sup>nd</sup> ed. Berkeley, CA: Nolo.

- Bryman, A. 2004. *Social research methods*. 2<sup>nd</sup> ed. Oxford: Oxford University Press.
- Burns, R.B & Burns, R.A. 2008. *Business research methods and statistics using SPSS*. Los Angeles, CA: Sage.
- Bydawell, M. 2000. Managing people who don't come to work. *People Dynamics*, 18:15-19.
- Cambridge Dictionaries. 2020. *Meaning of customer in English*.  
<https://dictionary.cambridge.org/dictionary/english/customer> [30 April 2020].
- Carlsen, B. 2012. From absence to absenteeism? A qualitative cross case study of teachers' views on sickness absence. *Journal of Socio-Economics*, 41(2):129-136.
- Cascio, W.F. & Boudreau, J.W. 2011. *Investing in people: financial impact of human resource initiatives*. 2<sup>nd</sup> ed. Upper Saddle River, NJ: Financial Times Press.  
<https://doi.org/10.1016/j.socec.2011.12.007>
- Carrasco-Campos, A., Moren, A. & Luis-Carlos Martínez, LC. 2017. Quality of life, well-being and social policies in european countries. Boas, A.A.V. (ed). *Quality of life and quality of working life*. Rijeka: Intech.
- Charbotel, B., Croidieu, S., Vohito, M., Guerin, AC., Renaud, L., Jaussaud, J., Bourboul, C., Imbard, I., Ardiet, D. & Bergeret, A. 2008. Working conditions in call-centers, the impact on employee health: a transversal study. Part II. *International Archives of Occupational and Environmental Health*, 82(6):747-756.  
<https://doi.org/10.1007/s00420-008-0351-z>
- Child, D. 2006. *The essentials of factor analysis*. 3<sup>rd</sup> ed. London: Continuum.
- Čikeš, V., Maškarin Ribarić, H. & Črnjar, K. 2018. The determinants and outcomes of absence behavior: a systematic literature review. *Journal of Social Science*, 27, Article 120. <https://doi.org/10.3390/socsci7080120>



Clark-Carter, D. 2004. *Quantitative psychological research: a student's handbook*. 2<sup>nd</sup> ed. Hove: Psychology Press.

Compton, R. & McManus, J.G. 2015. Employee assistance programs in Australia: evaluating success. *Journal of Workplace Behavioural Health*, 30(1-2):32-45.  
<https://doi.org/10.1080/15555240.2015.998971>

Costello, A.B. & Osborne, J. 2005. Best practices in exploratory factor analysis: four recommendations for getting the most from your analysis. *Practical Assessment Research & Evaluation*, 10, Article 7. <https://doi.org/10.7275/jyj1-4868>

Coughlin, K.B. 2013. An analysis of factor extraction strategies: a comparison of the relative strengths of principal axis, ordinary least squares, and maximum likelihood in research contexts that include both categorical and continuous variables. Unpublished PHD dissertation, University of South Florida, Tampa, FL, USA.

Cranwell-Ward, J. & Abbey, A. 2005. *Organizational stress*. New York, NY: Palgrave Macmillan.

David, M. & Sutton, C.D. 2011. *Social research: an introduction*. 2<sup>nd</sup> ed. City Road, London: Sage.

De Ruyter, K., Wetzels, M. & Feinberg, R. 2001. Role of stress in call centers: its effects on employee performance and satisfaction. *Journal of Interactive Marketing*, 15(2)23-35. <https://doi.org/10.1002/dir.1008>

De Stobbeleir, K E.M., De Clippeleer, I., Caniëls, M C.J., Goedertier, F., Deprez, J., De Vos, A. & Buyens, D. 2018. The inside effects of a strong external employer brand: how external perceptions can influence organizational absenteeism rates. *International Journal of Human Resource Management*, 29(13):2106-2136.  
<https://doi.org/10.1080/09585192.2016.1239120>

De Vos, A.S., Strydom, H., Fouché, C.B. & Delpont, C.S.L. 2005. *Research at grass roots: for the social sciences and human service professions*. 3<sup>rd</sup> ed. Pretoria: Van Schaik.

Deloitte. 2013. Global contact center survey results report on call centres. <https://www2.deloitte.com/content/dam/Deloitte/us/Documents/process-and-operations/us-sdt-consulting-2013-global-contact-survey-051513.pdf> [20 April 2017].

Deloitte. 2016. BPO industry growth in SA: factors at work that inhibit and uplift the telecommunications market. [https://www2.deloitte.com/content/dam/Deloitte/za/Documents/process-and-operations/ZA\\_BPO\\_Industry\\_growth\\_300816.pdf](https://www2.deloitte.com/content/dam/Deloitte/za/Documents/process-and-operations/ZA_BPO_Industry_growth_300816.pdf) [18 July 2017].

Denis, D.J. 2018. *SPSS data analysis for univariate, bivariate, and multivariate statistics*. Hoboken, NJ: John Wiley.

Dhanpat, N., Modau, F.D., Lugisani, P., MaboJane, R., & Phiri, M. 2018. Exploring employee retention and intention to leave within a call centre. *SA Journal of Human Resource Management*, 16, Article 905. <https://doi.org/10.4102/sajhrm.v16i0.905>

Easterby-Smith, M., Thorpe, R. & Jackson, P.R. 2008. *Management research*. 3<sup>rd</sup> ed. London: Sage.

Feinberg, R., De Ruyter, K. & Bennington, L. 2005. *Cases in call center management: great ideas (th)at work*. West Lafayette, IN: Purdue University Press.

Field, A. 2013. *Discovering statistics using IBM spss statistics*. 4<sup>th</sup> ed. City Road, Londond: Sage.

Fin24. 2018. Distracted employees cost SA businesses up to R89bn a year – report. 10 September. <https://www.news24.com/fin24/economy/distracted-employees-cost-sa-businesses-up-to-r89bn-a-year-report-20180910> [5 June 2020].

Fin24. 2019. Unemployment rate rises to 27.6%, nears 15-year high. May, 14. <https://www.fin24.com/Economy/just-in-unemployment-rate-rises-to-276-in-first-quarter-of-2019-20190514> [18 July 2019].

Flick, U. 2011. *Introducing research methodology: a beginner's guide to doing a research project*. London: Sage.

Forbes. 2013. The causes and costs of absenteeism in the workplace. 10 July. <https://www.forbes.com/sites/investopedia/2013/07/10/the-causes-and-costs-of-absenteeism-in-the-workplace/#766e68653eb6> [17 July 2019].

Forte, A.N.S. 2017. Strategies for reducing employee absenteeism for a sustainable future: a Bermuda perspective. Unpublished Doctor of Business Administration dissertation, Walden University, Minneapolis, MN, USA.

Frey, B.B. (ed.). 2018. *Sage encyclopedia of educational research, measurement, and evaluation, Vol. 3*. Thousand Oaks, CA: Sage.

Galderisi, P. 2015. *Understanding political science statistics: observations and expectations in political analysis*. New York, NY: Routledge.

Gibson, P. 2012. *The world of customer service*. 3<sup>rd</sup> ed. Mason, OH: South-Western Cengage Learning.

Gliem, J.A. & Gliem, R.R. 2003. Calculating, interpreting and reporting Cronbach's alpha reliability coefficient for Likert-type scales. Paper presented at the Midwest Research-to-Practice Conference in Adult, Continuing, and Community Education, Ohio State University: Columbus, OH, 8–10 October.

Goodwin, J. (ed.). 2012. *Sage secondary data analysis, Vols 1–4*. London: Sage.

Gorsuch, R.L. 2014. *Factor analysis*. Classic 2<sup>nd</sup> ed. London: Routledge.

Gouws, W.J.S. 2015. The relationship between absenteeism and physical workplace conditions at Tshepong mine. Unpublished MBA dissertation, University of the Free State, Bloemfontein, South Africa.

Gravetter, F.J. & Forzano, L.A.B. 2009. *Research methods for the behavioral sciences*. 3<sup>rd</sup> ed. Belmont, CA: Wadsworth Cengage Learning.

Grobler, P.A., Warnich, S., Carrell, M.R., Elbert, N.F. & Hatfield, R.D. 2011. *Human resource management in South Africa*. 4<sup>th</sup> ed. Andover: Cengage Learning.

Guinsberg, T. & Bayat, M.S. 2012. A hospitality industry case study: the impact of workers absenteeism at the Vineyard Hotel and Spa Western Cape. *Singaporean Journal of Business Economics, and Management Studies*, 1(3):11-22.

Hannas, A. 2008. Absenteeism and turnover. In Rojas, E.M. (ed.). *Construction productivity: a practical guide for building and electrical contractors*. Fort Lauderdale, FL: J. Ross Publishing: 159-200.

Hannif, Z., McDonnell, A., Connell, J. & Burgess, J. 2010. Working time flexibilities: a paradox in call centres? *Australian Bulletin of Labour*, 36(2):178-193.

Harry, N. 2015. Constructing a psychological coping profile in the call centre environment: wellness-related dispositions in relation to resiliency-related behavioural capacities. *SA Journal of Industrial Psychology*, 41(1), Article 1265.  
<http://dx.doi.org/10.4102/sajip.v41i1.1265>

Hauptfleisch, S. & Uys, J.S. 2006. The experience of work in a call centre environment. *SA Journal of Industrial Psychology*, 32(2):23-30.  
<https://doi.org/10.4102/sajip.v32i2.231>

Henn, M., Weinstein, M. & Foard, N. 2009. *A critical introduction to social research*. 2<sup>nd</sup> ed. London: Sage.

Hingst, R.D. 2006. Perceptions of working life in call centres. *Journal of Management Practice*, 7(1):1-9.

Hinton, P.R., Brownlow, C., McMurray, I. & Cozens, B. 2004. *SPSS explained*. London: Routledge.

Holman, D. 2002. Employee wellbeing in call centres. *Human Resource Management Journal*, 12(4):35-50. <https://doi.org/10.1111/j.1748-8583.2002.tb00076.x>

Howarth, J. 2005. Absence management. *Strategic Direction*, 21(9):3-4.  
<http://dx.doi.org/10.1108/02580540510616610>

HR Pulse News Desk. 2014. Employee wellness programmes to save SA economy? 20 March. <http://www.hrpulse.co.za/news/230713-employee-wellness-programmes-to-save-sa-economy>. [19 December 2017].

International Labour Organization. 2004. Paid annual leave. Geneva: International Labour Office.  
[https://www.ilo.org/wcmsp5/groups/public/---ed\\_protect/---protrav/---travail/documents/publication/wcms\\_170703.pdf](https://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---travail/documents/publication/wcms_170703.pdf) [8 June 2019].

Jacobs, C. & Roodt, G. 2011. A human capital predictive model for agent performance in contact centres. *South Africa Journal of Industrial Psychology*, 37(1), Article 940.  
<https://doi.org/10.4102/sajip.v37i1.940>

Jaiswal, S. 2019. All the customer experience statistics you should care about. March 20. <https://omoto.io/academy/customer-experience-statistics/> [7 June 2019].

Janse Van Rensburg, Y., Boonzaier, B. & Boonzaier, M. 2013. The job demands-resources model of work engagement in South African call centres. *SA Journal of Human Resource Management*, 11, Article 484.

Jones, I. 2014. *Research methods for sport studies*. 3<sup>rd</sup> ed. London: Routledge.

Joo, S. & Garman, E.T. 1998. Personal financial wellness may be the missing factor in understanding and reducing worker absenteeism. *Personal Finances and Worker Productivity*, 2(2):172-182.

Joseph, B. & Walker, A. 2017. Employee assistance programs in Australia: the perspectives of organisational leaders across sectors. *Asia Pacific Journal of Human Resources*, 55:177-191. <https://doi.org/10.1111/1744-7941.12124>

Kalburgi, M.J. & Thyagaraja, C.M. 2013. Employee absenteeism: a case study of logistics firms of Hyderabad Karnataka Region. *International Journal of Advanced Trends in Computer Science and Engineering*, 2(6):9-13.

Kamboj, S., Rani, V., Kohli, S. & Malik, A. 2015. Emotional competence and quality of work life in call center employees: a gender-based study. *Indian Journal of Health and Wellbeing*, 6(10):994-998.

Khalid, A., Sarfaraz, A., Ahmed, S. & Malik, F. 2013. Prevalence of stress among call center employees. *Pakistan Journal of Social and Clinical Psychology*, 11(2):58-62.

Kimme, M. 2005. *Calling the customer – An industry analysis of call center as business process outsourcing providers*. Munich: Grin.

Kocakülâh, M.C., Bryan, T.G. & Lynch, S. 2018. Effects of absenteeism on company productivity, efficiency, and profitability. *Business and Economic Research*, 8(10):115-135. <https://doi.org/10.5296/ber.v8i1.12395>

Kocakülâh, M.C., Kelley, A.G., Mitchell, K.M. & Ruggieri, M.P. 2016. Absenteeism problems and costs: causes, effects and cures. *International Business & Economics Research Journal*, 15(3):89-96. <http://doi: 10.19030/iber.v15i3.9673>

Krabbe, P. 2016. *The measurement of health and health status: concepts, methods and applications from a multidisciplinary perspective*. Amsterdam: Academic Press.

Leavy, P. 2017. *Research Design: quantitative, qualitative, mixed methods, arts-based, and community-based participatory research approaches*. New York, NY: Guilford Publications.

Leblond, N. 2019. Your office is losing 100's of days a year to absenteeism: what can you do about it?

<https://blog.initial.co.za/update-your-office-is-losing-100s-of-days-a-year-to-absenteeism-what-can-you-do-about-it> [8 April 2019].

Leech, N.L., Barrett, K.C. & Morgan, G.A. 2005. *SPSS for intermediate statistics: use and interpretation*. 2<sup>nd</sup> ed. Mahwah, NJ: Lawrence Erlbaum.

Losina, E., Yang, H.Y., Deshpande, B.R., Katz J.N. & Collins J.E. 2017. Physical activity and unplanned illness-related work absenteeism: Data from an employee wellness program. *PLoS ONE*, 12(5), e0176872.

<https://doi.org/10.1371/journal.pone.0176872>

*Mail & Guardian*. 2013. South Africa ideal for call centres, accent 'sounds British'. 2 December. <http://mg.co.za/article/2013-12-02-south-africa-ripe-for-call-centre-expansion> [5 September 2016].

Marchington, M. & Wilkinson, A. 2012. *Human resource management at work*. 5<sup>th</sup> ed. London: Chartered Institute of Personnel and Development.

Mathis, R.L. & Jackson, J.H. 2008. *Human resource management*. 12<sup>th</sup> ed. Mason, OH: Thomson South-Western.

McCann, M., Harker Burnhams, N.H., Albertyn, C. & Bhoola, U. 2011. *Alcohol, drugs and employment*. 2<sup>nd</sup> ed. Cape Town: Juta.

McDonnell, A., Connell, J., Hannif, Z. & Burgess, J. 2014. Having “a say”: forms of voice in Australian call centres. *Employee Relations*, 36(3):214-234. <https://doi.org/10.1108/ER-01-2013-0005>

McFarlane H., Neil R., Backx K. 2015. Stress, health and wellbeing in call centre employees. Paper presented at the Contemporary Ergonomics and Human Factors Conference, Daventry, Northamptonshire, UK, 13–16 April.

McPhail, B. 2002. What is ‘on the line’ in call centre studies? A review of key issues in the academic literature. Unpublished thesis, University of Toronto, Canada.

Miller, N. & Hendrickse, R. 2016. Differences in call centre agents’ perceptions of their job characteristics, physical work environment and wellbeing. *Problems and Perspectives in Management*, 14(1):51-63. [http://dx.doi.org/10.21511/ppm.14\(1\).2016.06](http://dx.doi.org/10.21511/ppm.14(1).2016.06)

Miller, S. 2015. Exploring incivility toward employee absenteeism, productivity, and effective communication: veterans health administration. Unpublished Doctoral dissertation of Philosophy Public Policy and Administration, Walden University, United States.

Miller, R.L., Acton, C., Fullerton, D.A. & Maltby, J. 2009. *SPSS for social scientists*. 2<sup>nd</sup> ed. New York, NY: Palgrave Macmillan.

Mogobe, T.H. 2011. Guidelines for developing an absenteeism management programme within an institution for higher learning. Unpublished Master of Social Sciences dissertation, University of Pretoria, South Africa.

Mogorosi, L. 2014. Employee assistance programmes: their rationale, basic principles and essential elements. *Social Work/Maatskaplike Werk*, 45(4):343-359.

Mohamad, M.M., Sulaiman, N.L., Sern, L.C. & Salleh, K.M. 2015. Measuring the validity and reliability of research instruments. *Procedia – Social and Behavioral Sciences*, 204:164-171. <https://doi.org/10.1016/j.sbspro.2015.08.129>



Monette, D.R., Sullivan, T.J. & DeJong, C.R. 2011. *Applied social research: a tool for the human services*. 8<sup>th</sup> ed. Belmont, CA: Brooks/Cole Cengage Learning.

Mooney, L.A., Holmes, M.M., Knox, D. & Schacht, C. 2012. *Understanding social problems*. 4<sup>th</sup> ed. Toronto: Nelson Education.

Moore, T. 1989. Employee assistance program evaluation: employee perceptions, awareness, and utilization. *AAOHN Journal*, 36(12):508-512.

Mukherjee, T. & Maheshwari, S. 2014. The positive side of call centers: an Indian perspective. *South Asian Journal of Global Business Research*, 3(1):36-53. <https://doi.org/10.1108/SAJGBR-03-2012-0030>

Munro, L. 2007. Absenteeism and presenteeism: possible causes and solutions. *The South African Radiographer*, 45(1):21-23.

Mwendwa, L. & Gitonga, A.K. 2017. Factors influencing call center agent attrition: a case of Kenya Power call center. *International Academic Journal of Information Sciences and Project Management*, 22(1):415-434.

NelsonHall. 2015. Analysis of South Africa as a BPO delivery location. <http://docplayer.net/9853655-Analysis-of-south-africa-as-a-bpo-delivery-location-2015-compiled-by-nelson-hall.html> [18 July 2017].

Nel, P.S., Werner, A., Poisat, P., Sono, T., Du Plessis, A. & Ngalo, O. 2011. *Human resources management*. 8<sup>th</sup> ed. Cape Town: Oxford University Press Southern Africa.

Norman, K. 2005. Call centre work – characteristics, physical and psychosocial exposure, and health related outcomes. Unpublished doctoral thesis, Linköping University, Sweden.

Office of National Statistics. 2018. Sickness absence falls to the lowest rate on record. 30 July.

<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/articles/sicknessabsencefallstothe-lowest-rate-in-24-years/2018-07-30>  
[6 June 2019].

Oodith, D. & Parumasur, S.B. 2015. Call centre ease of communication in customer service delivery: an asset to managing customers' needs? *Problems and Perspectives in Management*, 13(Special issue 2):482-494.

Osborne, J.W. & Banjanovic, E.S. 2016. *Exploratory factor analysis with SAS*. Cary, NC: SAS Institute.

Pallant, J. 2007. *SPSS survival manual: a step by step guide to data analysis using SPSS for Windows (Version 15)*. 3<sup>rd</sup> ed. Sydney: Allen & Unwin.

Pandy, W.R. & Rogerson, C.M. 2014. South Africa's call centre industry: the emerging challenges of a growing destination in the global South. *Mediterranean Journal of Social Sciences*, 5(8):208-217. DOI: 10.5901/mjss.2014.v5n8p208

Patel, A. & Thakkar, S. 2014. A study on factors affecting absenteeism in pharmaceutical industry in Gujarat. *Global Journal for Research Analysis*, 3(9):71-73.

Pompe, J.C., Jacobson Frey, J., Sharar, D.A., Imboden, R. & Bloom, L. 2017. An Internal EAP may still be right for your organization. *Journal of Employee Assistance*, 47(2):8-10.

Raja, J.D. & Bhasin, S.K. 2014. Health issues amongst call center employees, an emerging occupational group in India. *Indian Journal of Community Medicine*, 39(3):175-177. DOI: 10.4103/0970-0218.137156

Rajaretnam, T. 2016. *Statistics for social sciences*. New Delhi: Sage.

Rajin, J. 2012. Employee assistance programme in the South African Police Service: a case study of Moroka Police Station. Unpublished MTech: Public Administration thesis, University of South Africa, Pretoria.

Robbins, P. Judge, T.A., Odendaal, A. & Roodt, G. 2009. *Organizational behaviour: global and southern perspectives*. 2<sup>nd</sup> ed. Cape Town: Pearson Education.

Roche, A., Pidd, K. & Kostadinov, V. 2016. Alcohol- and drug-related absenteeism: a costly problem. *Australian and New Zealand Journal of Public Health*, 40(3):236-238. <https://doi.org/10.1111/1753-6405.12414>

Rathod, R. & Reddy, B. 2012. Employee absenteeism: a study at titan industry limited, Bangalore. *The International Journal of Engineering and Science*, 1(1):80-84. <http://theijes.com/papers/v1-i1/M011080084.pdf> [12 July 2017].

Russell, B. 2008. Call centres: a decade of research. *International Journal of Management Reviews*, 10(3):195-219. <https://doi.org/10.1111/j.1468-2370.2008.00241.x>

Sato, H. 2018. Are call centers sweatshops? *Annals of Business Administrative Science*, 17(5):193-202. <http://doi.org/10.7880/abas.0180830a>

Schober, P., Boer, C. & Schwarte, L.A. 2018. Correlation coefficients: appropriate use and interpretation. *Anesthesia & Analgesia*, 126(5):1763-1768. doi: 10.1213/ANE.0000000000002864

Secord, H. 2003. *Implementing best practices in human resources management*. Toronto: CCH Canadian.

Sekaran, U. 2003. *Research methods for business: a skill-building approach*. 4<sup>th</sup> ed. New York, NY: John Wiley.

Sekaran, U. & Bougie, R. 2016. *Research methods for business: a skill-building approach*. 7<sup>th</sup> ed. Chichester: John Wiley.

Selebi, C. & Minnaar, D. 2007. Job satisfaction among nurses in a public hospital in Gauteng. *Curationis*, 30(3), Article 1102:53-61.

<https://doi.org/10.4102/curationis.v30i3.1102>

Shepell-fgi. 2008. Employee health and well-being: trends in the call centre sector. *2008 Series*, 2(1):1-10.

[https://www.workplacestrategiesformentalhealth.com/pdf/Call\\_Centre\\_Workers\\_Trends\\_in\\_the\\_Call\\_Centre\\_Sector\\_Resource.pdf](https://www.workplacestrategiesformentalhealth.com/pdf/Call_Centre_Workers_Trends_in_the_Call_Centre_Sector_Resource.pdf) [1 October 2016].

Sieberhagen, C., Pienaar, J. & Els, C. 2011. Management of employee wellness in South Africa: employer, service provider and union perspectives. *SA Journal of Human Resource*, 9(1):1-14.

<https://sajhrm.co.za/index.php/sajhrm/article/view/305/313> [5 April 2016].

Simelane, S.N. 2007. Perceptions of supervisors regarding their referral role within the Employee Assistance Programme. Unpublished MSD dissertation, University of Pretoria, South Africa.

Singh, K. 2007. *Quantitative social research methods*. New Delhi: Sage.

Singh, T., Chetty, N. & Karodia, A.M. 2016. An investigation into the impact of absenteeism on the organisational performance of a private security company in Durban, KwaZulu-Natal. *Singaporean Journal of Business Economics, and Management Studies*, 4(11):105-159.

Smith, E. 2008. *Using secondary data in educational and social research: conducting educational research*. Maidenhead: Open University Press.

Spetch, A., Howland, A. & Lowman, R.L. 2011. EAP utilization patterns and employee absenteeism: results of an empirical, 3-year longitudinal study in a national Canadian retail corporation. *Consulting Psychology Journal: Practice and Research*. 63(2):110-128. DOI: 10.1037/a0024690

South Africa. 1995. Labour Relations Act, No. 66 of 1995. Pretoria: Government Printer.

South Africa. 1997. Basic Conditions of Employment Act, No. 75 of 1997. *Government Gazette*, 390(18491), 5 December.

[https://www.gov.za/sites/default/files/gcis\\_document/201409/a75-97.pdf](https://www.gov.za/sites/default/files/gcis_document/201409/a75-97.pdf)

Steel, R.P., Rentsch, J.R. & Van Scotter, J.R. 2007. Timeframes and absence frameworks: a test of Steers and Rhodes' (1978) Model of Attendance. *Journal of Management*, 33(2):180-195. <https://doi.org/10.1177/0149206306298656>

Stewart, D.W. & Kamins, M.A. 1993. *Secondary research: information sources and methods*. London: Sage.

Stranberg, C. & Wahlberg, O. 2007. All call centres are not “electronic sweatshops”! On leadership and psychosocial work conditions in Swedish in-house call centres. *Journal of E-Working*, 1:116-136.

[https://www.researchgate.net/publication/26492384\\_All\\_call\\_centres\\_are\\_not\\_electronic\\_sweatshops\\_On\\_leadership\\_and\\_psychosocial\\_work\\_conditions\\_in\\_Swedish\\_in-house\\_call\\_centres](https://www.researchgate.net/publication/26492384_All_call_centres_are_not_electronic_sweatshops_On_leadership_and_psychosocial_work_conditions_in_Swedish_in-house_call_centres) [5 May 2019].

Sultana, S., Enayet, A. & Mouri, I.J. 2015. A smart, location-based time and attendance tracking system using android application. *International Journal of Computer Science, Engineering and Information Technology*, 5(1):1-5. DOI: 10.5121/ijcseit.2015.5101

Sutherland, C.J. & Cooper, C.L. 2000. *Strategic stress management: an organizational approach*. London: Macmillan.

Taylor, P. & Bain, P. 2005. 'India calling to the far away towns': the call centre labour process and globalization. *Work, Employment and Society*, 19(2):261-282. <https://doi.org/10.1177/0950017005053170>

Terblanche, L. & Van Wyk, A. 2014. Critical incidents and critical incident stress management (CISM) – an employee assistance programme (EAP) perspective. *Social Work/Maatskaplike Werk*, 50(1):19-37. <https://doi.org/10.15270/50-1-14>

Tirintetaake, A. 2017. Scientific management theory vs human relation theory. ResearchGate, April.

[https://www.researchgate.net/publication/316464967\\_Scientific\\_Management\\_Theory\\_vs\\_Human\\_Relation\\_Theory](https://www.researchgate.net/publication/316464967_Scientific_Management_Theory_vs_Human_Relation_Theory) [9 June 2020].

Tina Basi, J.K. 2009. *Women, identity and India's call centre industry: routledge research on gender in Asia series*. Abingdon, Oxford: Routledge.

Tomar, J.S. 2014. Improving employee attendance: dealing with absenteeism in the workplace. *Research Journal of Social Science & Management*, 3(12):161-171.

Tirintetaake, A. 2017. Scientific management theory vs human relation theory. Research Gate, April.

[https://www.researchgate.net/publication/316464967\\_Scientific\\_Management\\_Theory\\_vs\\_Human\\_Relation\\_Theory](https://www.researchgate.net/publication/316464967_Scientific_Management_Theory_vs_Human_Relation_Theory) [9 June 2020].

Tucker, F. 2019. What is the Bradford Factor? 26 April.

<https://citrushr.com/blog/leave-absence/what-is-the-bradford-factor/> [1 September 2019].

Tuten, T.L. & Neidermeyer, P.E. 2004. Performance, satisfaction and turnover in call centers: the effects of stress and optimism. *Journal of Business Research*, 57(1):26-34. [https://doi.org/10.1016/S0148-2963\(02\)00281-3](https://doi.org/10.1016/S0148-2963(02)00281-3)

Van Wyk, D. & Taute, F. 2010. Stressors affecting employee assistance programme personnel within a call centre environment in South Africa. *The Social Work Practitioner-Researcher*, 22(2):259-276.

Velicer, W.F. & Jackson, D.N. 1990. Component analysis versus common factor-analysis: some issues in selecting appropriate procedure. *Multivariate Behavioral Research*, 25(1):1-28. [https://doi.org/10.1207/s15327906mbr2501\\_1](https://doi.org/10.1207/s15327906mbr2501_1)

Viveka, G. 2013. A literature review on absenteeism and its impacts on organization. *Innovative Journal of Business and Management*, 2(4):80-82.

Watson, J.C. 2017. Establishing evidence for internal structure using exploratory factor analysis. *Measurement and Evaluation in Counseling and Development*, 50(4):232-238. <https://doi.org/10.1080/07481756.2017.1336931>

Welman, J.C. & Kruger, S.J. 2001. *Research methodology for the business and administrative sciences*. 2<sup>nd</sup> ed. Cape Town: Oxford University Press Southern Africa.

Yong, A.G. & Pearce, S. 2013. A beginner's guide to factor analysis: focusing on exploratory factor analysis. *Tutorials in Quantitative Methods for Psychology*, 9(2):79-94.

Zapf, D., Isic, A., Bechtoldt, M & Blau, P. 2003. What is typical for call centre jobs? Job characteristics, and service interactions in different call centres. *European Journal of Work and Organizational Psychology*, 12(4):311-340.  
<https://doi.org/10.1080/13594320344000183>

Zito, M., Emanuel, F., Molino, M., Cortese, C.G., Ghislieri, C. & Colombo, L. 2018. Turnover intentions in a call center: the role of emotional dissonance, job resources, and job satisfaction. *Plos One*, 13(2):e0192126.  
<https://doi.org/10.1371/journal.pone.0192126>

## APPENDIX A: CUSTOMER SERVICE AGENT



### **EMPLOYEE FEEDBACK SURVEY ON EMPLOYEE ASSISTANCE PROGRAMME**

Thank you for taking part in this questionnaire. This is a study on absenteeism and the Employee Assistance Program (EAP).

This is your opportunity to provide feedback on your experience about the employee assistance program (Careways). **This survey is private and confidential, and the information will be used for academic purposes only.**

Please answer the questions as honestly as you can.

The questionnaire will take about **10-15 minutes to complete.**

**If you have any questions regarding the survey or the research project, in general, please contact** Evelyne from the Human Resource Business Unit (021 415 6909).

**Your cooperation will be highly appreciated.**



**A: Biographical information: Please indicate your answer by placing an X in the appropriate box.**

**Please indicate your gender.**

<b>1. Gender:</b>	1. Female	2. Male
-------------------	-----------	---------

<b>2. Race: Please indicate your preferred race qualification.</b>					
1.	African	2.	Coloured		
3.	White	4.	Indian	5.	Other

**What is your age group?**

<b>3. Position: Please indicate which age group you fit in.</b>						
	1. 18-25	2. 26-30	3. 31-40	4. 41-55	5. 56-65	6. Other

If other, please specify.....

<b>4. Type of contract: Please indicate your hours of work.</b>				
	1. Full time	2. Part time- 6	3. Part time- 4	4. Other

If other, please specify.....

<b>5. Position: What is the title of your position?</b>		
1. Service Delivery Specialist	2. Team Leader	3. Customer Service Consultant
4. Manager	5. Other	

If other, please specify.....

<b>6. Language of the team: Please indicate the language used in your team.</b>						
	1. Dutch	2. English	3. French	4. German	5. Hebrew	6. Other

If other, please specify.....

<b>2. Team: Please indicate which team you belong to.</b>					
1.	Cargo	2.	Dutch	3.	English Groups
4.	English Scandinavian	5.	English Swiss	6.	English Travel Agent
7.	English UK	8.	French Genres	9.	French groups
10.	French Travel Agent	11.	German Lufthansa	12.	German Swiss
13.	Hebrew	14.	Miles and More	15.	Other

If other, please specify.....

<b>8. Company tenure: Please indicate the number of years you have worked for the company.</b>									
1.	0-2	2.	3-5	3.	6-8	4.	9-10	5.	other

If other, please specify.....

<b>9. Shift schedule: Please indicate your shift schedule.</b>											
1.	Rotational	2.	Set Monday– Friday	3.	Day	4.	Night	5.	Early	6.	Other

If other, please specify.....

**B. Awareness of the employee assistance program (Careways). Please indicate your answer with an X.**

		Strongly aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
<b>10.</b>	I am aware of the purpose of the Careways program.	1	2	3	4	5
<b>11.</b>	I am aware how to contact Careways, should I need to use the services.	1	2	3	4	5
<b>12.</b>	I know that Careways can be contacted at any time and from anywhere.	1	2	3	4	5
<b>13.</b>	I aware of the type of services that Careways provides.	1	2	3	4	5
<b>14.</b>	I am aware that Careways was introduced as a benefit for my well-being.	1	2	3	4	5

If other, please specify.....

**C. Communication. This section seeks to discover how the Careways program is communicated to employees.**

<b>15. Please indicate, which of the following means is commonly used to communicate the Careways program. Indicate your answer with an X.</b>				
	1.	Colleagues	5.	Counselling with HR
	2.	Posters	6.	Iemail (internal email)
	3.	Grapevine	7.	Team leaders

	4.	Induction Day	8.	Wellness Day
	9.	Pamphlets	10.	Other? Please specify.

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
16.	I know who to contact about the Careways program.	1	2	3	4	5
17.	I have been made aware that I can contact Careways by myself.	1	2	3	4	5
18.	Careways is communicated to me regardless of the shifts that I work.	1	2	3	4	5
19.	I am regularly updated about new information pertaining to Careways.	1	2	3	4	5
20.	I have been made aware that the Careways program is an extra benefit for me.	1	2	3	4	5

**D. Utilisation of employee assistance programme. Please indicate your answer with an X.**

		Fully aware 1	Aware 2	Neutral 3	Slightly Unwar e 4	Strongly unaware 5

21.	I know how to use the Careways program.	1	2	3	4	5
22.	I can use Careways any time and from anywhere to promote my well-being.	1	2	3	3	5
23.	I use the services provided by the Careways program, as these cater for my needs.	1	2	3	4	5
24.	I use Careways to assist at work, or for my personal life to ensure my well-being.	1	2	3	4	5
25.	Careways is often promoted to be utilised to ensure my well-being.	1	2	3	4	5

**E. Availability. This section seeks to determine whether or not the Careways program is accessible to employees. Please indicate your answer with an X.**

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
26.	I am aware that Careways is readily available to use at any time and from anywhere.	1	2	3	4	5
27.	It is easy to obtain information about Careways' services, regardless of one's shift.	1	2	3	4	5
28.	I know where to access information about Careways.	1	2	3	4	5
29.	Team leaders assist in accessing Careways' services and information.	1	2	3	4	5
30.	The organization has made it easy to access Careways.	1	2	3	4	5

**F: Work. This refers to underlying issues of absenteeism. Please indicate your answer with an X.**

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
31.	I am aware that colleagues who are frequently absent increase workloads for others, which create stress at work.	1	2	3	4	5
32.	I am aware of the negative impact that absenteeism will have on my colleagues.	1	2	3	4	5
33.	Being absent has a negative impact on the company's revenue.	1	2	3	4	5
34.	Absenteesim increases workloads, and thus has a negative impact on customer service.	1	2	3	4	5
35.	The introduction of Careways has assisted to reduce absenteesim.	1	2	3	4	5

**G. Absenteeism. This section seeks to reveal reasons for employee absenteeism. Please indicate your answer with an X.**

36. Please indicate the most common reason for you being absent from work. Please choose one.						
	1.	Sickness	5.	Family	9.	Security
	2.	Transport issues	6.	Stress	10.	Drugs
	3.	Accommodation	7.	Security	11.	Finance
	4.	Finance	8.	Drug-related issues	12.	Other? Specify.

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
37.	I am aware that the Careways program was introduced to assist with employee attendance.	1	2	3	4	5
38.	The Careways program does provide further assistance to ensure that I am not absent from work.	1	2	3	4	5
39.	I am aware that being absent increases the workloads for my work colleagues.	1	2	3	4	5
40.	I am aware that owing to high absenteeism, my colleagues become more stressed at work because of the added workloads.	1	2	3	4	5
41.	I am aware that high absenteeism in the organisation decreases its profitability.	1	2	3	4	5

**Thank you for your participation. Your responses will be treated CONFIDENTIALLY, and will be used for academic purpose only.**

## APPENDIX B: MANAGERS



### **EMPLOYEE FEEDBACK SURVEY ON EMPLOYEE ASSISTANCE PROGRAM (EAP)**

Thank you for taking part in this questionnaire. This is a study on absenteeism and the employee assistance program.

This is your opportunity to provide feedback on your experience about the employee assistance program (Careways). **This survey is private and confidential, and the information will be used for academic purposes only.**

Please answer the questions as honestly as you can.

The questionnaire will take about **10-15 minutes to complete.**

**If you have any questions regarding the survey or the research project, in general, please contact** Evelyne from the Human Resource Business Unit, (021 415 6909).

**Your cooperation will be highly appreciated.**



**A: Biographical information: Please indicate your answer by placing an X in the appropriate box.**

**Please indicate your gender.**

<b>3. Gender:</b>	1. Female	2. Male
-------------------	-----------	---------

<b>4. Race: Please indicate your preferred race qualification.</b>					
1. African	2. Coloured				
3. White	4. Indian	5. Other			

<b>5. Position: What is your age group?</b>					
1. 18-25	2. 26-30	3. 31-40	4. 41-55	5. 56-65	6. Other

If other, please specify.....

<b>6. Type of contract: Please indicate your hours of work.</b>			
1. Full time	2. Part time- 6	3. Part time- 4	4. Other

If other, please specify.....

<b>7. Position: What is the title of your position?</b>		
1. Service Delivery Specialist	2. Team Leader	3. Customer Service Consultant
4. Manager	5. Other	

If other, please specify.....

<b>8. Language of the team: Please indicate the language used in your team.</b>					
1. Dutch	2. English	3. French	4. German	5. Hebrew	6. Other

If other, please specify.....

<b>9. Team: Please indicate, which team you belong to.</b>					
1	Cargo	2.	Dutch	3.	English Groups
4.	English Scandinavian	5.	English Swiss	6.	English Travel Agent
7.	English UK	8.	French Genres	9.	French groups
10.	French Travel Agent	11.	German Lufthansa	12.	German Swiss
13.	Hebrew	14.	Miles and More	15.	Other

If other, please specify.....

<b>10. Company tenure: Please indicate the number of years that you have worked for the company:</b>							
1.	0-2	2.	3-5	3.	6-8	4. 9-10	5. other

If other, please specify.....

<b>9. Shift schedule: Please indicate your shift schedule.</b>					
1. Rotational	2. Set Monday – Friday	3. Day	4. Night	5. Early	6. Other

If other, please specify.....

**B. Awareness of the employee assistance program (Careways). Please indicate your answer with an X.**

		Strongly aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
10.	I am aware of the purpose of the Careways program.	1	2	3	4	5
11.	I am aware how to contact Careways, should I need to use the services.	1	2	3	4	5
12.	I know that Careways can be contacted at any time and from anywhere.	1	2	3	4	5
13.	I am aware of the type of services that Careways provides.	1	2	3	4	5
14.	I am aware why Careways was introduced as a benefit for my well-being.	1	2	3	4	5

If other, please specify.....

**C. Communication. This section deals with how the Careways program is communicated to employees.**

15. Please indicate, which of the following is commonly used to communicate the Careways program. Indicate your answer with an X.				
	1.	Colleagues	5.	Counselling with HR
	2.	Posters	6.	Iemail (internal email)

	3.	Grapevine	7	Team leaders
	4.	Induction Day	8.	Wellness Day
	9.	Pamphlets	10.	Other? Please specify.

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
16.	I am aware who the agents should contact about the Careways program.	1	2	3	4	5
17.	I am aware that agents can contact Careways by themselves.	1	2	3	4	5
18.	Careways is communicated to the agents, regardless of the shifts that they work.	1	2	3	4	5
19.	Agents receive regular updates about information pertaining to Careways.	1	2	3	4	5
20.	The agents have been made aware that the Careways program is an extra benefit for them.	1	2	3	4	5

**D. Utilization of employee assistance program. Please indicate your answer with an X.**

		Fully aware 1	Aware 2	Neutral 3	Slightly Unware 4	Strongly unaware 5
21.	The agents know how to use the Careways program.	1	2	3	4	5

22.	The employees can use Careways any time and from anywhere to promote their well-being.	1	2	3	3	5
23.	The services provided by the Careways program cater for the employees' needs.	1	2	3	4	5
24.	Careways is used to assist employees at work, or in their personal life to ensure their well-being.	1	2	3	4	5
25.	Careways is often promoted to be utilised to ensure employees' well-being.	1	2	3	4	5

**E. AVAILABILITY. This refers to accessibility of the Careways program to the employee. Please indicate your answer with an X.**

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
26.	Careways is readily available to use at any time and from anywhere for the employees.	1	2	3	4	5
27.	It is easy to obtain information about Careways' services, regardless of shift.	1	2	3	4	5
28.	The employees know where to obtain information about Careways.	1	2	3	4	5
29.	Team leaders assist in accessing Careways services and information.	1	2	3	4	5
30.	The organization has made it easy to access Careways.	1	2	3	4	5

**F: Work. This refers to underlying issues of absenteeism. Please indicate your answer with an X.**

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
31.	Customer service agents who are frequently absent increase workloads for others, which create stress at work.	1	2	3	4	5
32.	The agents are aware of the negative impact that it absenteeism has on their colleagues.	1	2	3	4	5
33.	The agents are aware that being absent has a negative impact on the company's revenue.	1	2	3	4	5
34.	Absenteesim increases workload,, which has a negative impact on customer service.	1	2	3	4	5
35.	The introduction of Careways has assisted to reduce absenteesim.	1	2	3	4	5

**G. Absenteeism. This section reveals reasons for employee absenteeism. Please indicate your answer with an X.**

<b>36. Please indicate the most common reason for agents being absent from work. Please choose one.</b>						
	<b>1.</b>	Sickness	<b>5.</b>	Family	<b>9.</b>	Security
	<b>2.</b>	Transport issues	<b>6.</b>	Stress	<b>10.</b>	Drugs
	<b>3.</b>	Accommodation	<b>7.</b>	Security	<b>11.</b>	Finance
	<b>4.</b>	Finance	<b>8.</b>	Drug-related issues	<b>12.</b>	Other? Specify.

		Fully aware 1	Aware 2	Neutral 3	Slightly unaware 4	Strongly unaware 5
<b>37.</b>	The Careways program was introduced to assist with employee attendance.	1	2	3	4	5
<b>38.</b>	The Careways program does provide further assistance to ensure that employees are not absent from work.	1	2	3	4	5

39.	Employees are aware that being absent increases the workloads for their colleagues.	1	2	3	4	5
40.	Employees are aware that owing to high absenteeism, their colleagues become more stressed at work because of workloads.	1	2	3	4	5
41.	Employees are aware that high absenteeism in the organisation decreases its profitability.	1	2	3	4	5

**Thank you for your participation. Your responses will be treated CONFIDENTIALLY, and will be used for academic purposes only.**



**APPENDIX C: EIGEN COMPONENT TABLE**

Total Variance Explained							
Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings <sup>a</sup>
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total
1	16.390	54.633	54.633	16.390	54.633	54.633	15.423
2	4.481	14.937	69.570	4.481	14.937	69.570	8.084
3	1.639	5.464	75.034	1.639	5.464	75.034	10.192
4	1.025	3.416	78.450	1.025	3.416	78.450	5.418
5	.790	2.635	81.085				
6	.625	2.083	83.168				
7	.607	2.023	85.191				
8	.492	1.640	86.831				
9	.430	1.434	88.265				
10	.390	1.302	89.566				
11	.351	1.170	90.736				
12	.317	1.058	91.794				
13	.290	.968	92.762				
14	.280	.933	93.695				
15	.258	.859	94.554				
16	.234	.780	95.334				
17	.186	.621	95.955				
18	.179	.595	96.550				
19	.151	.504	97.054				
20	.147	.489	97.544				
21	.112	.374	97.918				
22	.105	.351	98.269				
23	.092	.305	98.574				
24	.082	.274	98.848				
25	.076	.254	99.102				
26	.073	.245	99.347				
27	.064	.213	99.560				
28	.057	.189	99.749				
29	.041	.138	99.887				
30	.034	.113	100.000				
Extraction Method: Principal Component Analysis.							
a. When components are correlated, sums of squared loadings cannot be added to obtain a total variance.							

## APPENDIX D: PATTERN MATRIX

Pattern Matrix				
	Component			
	1	2	3	4
Q1.I know that Careways can be contacted at any time and from anywhere.	.993			
Q2.I can use Careways any time and from anywhere to promote my well-being.	.957			
Q3.I am aware how to contact Careways, should I need to use the services.	.947			
Q4.I am aware that Careways is readily available to use at any time and from anywhere.	.925			
Q5.I am aware why Careways was introduced as a benefit for my well-being.	.910			
Q6.I aware of the type of services that Careways provides.	.906			
Q7.I have been made aware that I can contact Careways by myself.	.857			
Q8.I know how to use the Careways programme.	.852			
Q9.I am aware of the purpose of the Careways programme.	.850			
Q10.I have been made aware that the Careways programme is an extra benefit for me.	.830			
Q11.I know who to contact about the Careways programme.	.777			

Q12.It is easy to obtain information and services about Careways, regardless of one's shift.	.749			
Q13.I know where to obtain information about Careways.	.743			
Q14.Careways is communicated to me, regardless of the shifts I work.	.740			
Q15.The organisation has made it easy to access Careways.	.487		.422	
Q16.Being absent has a negative impact on the company's revenue.		.924		
Q17.Absenteesim increases workloads, which has a negative impact on customer service.		.921		
Q18.I am aware that high absenteeism in the organisation decreases its profitability.		.907		
Q19.I am aware that owing to high absenteeism, my colleagues become more stressed at work because of the increased workloads.		.903		
Q20.I am aware of the negative impact that absenteeism has on my colleagues.		.873		
Q21.I am aware that colleagues who are frequently absent increase workloads for others, thus creating stress at work.		.872		
Q22.I am aware that being absent increases workloads for my work colleagues.		.817		
Q23.The introduction of Careways has assisted to reduce absenteeism.			.725	.434
Q24.Team Leaders assist in accessing Careways services and information.			.718	
Q25.I use Careways to assist at work or in my personal life to ensure my well-being.	.316		.706	

Q26.I use the Careways programme's services, as these cater to my needs.	.353		.647	
Q27.I receive regular updates about Careways information.	.377		.559	
Q28.Careways is often promoted to be utilised to ensure my well-being.	.439		.534	
Q29.The Careways programme provides further assistance to ensure that I am not absent from work.				.866
Q30.I am aware that the Careways programme was introduced to assist with employee attendance				.821
Extraction Method: Principal Component Analysis.				
Rotation Method: Promax with Kaiser Normalization.				
a. Rotation converged in 6 iterations.				

## APPENDIX E: SECTION B RESULTS (CSRs)

Q10

<b>I am aware of the purpose of Careways programme</b>			
		Frequency	Percent
Valid	Strongly Aware	30	27.5
	Aware	37	33.9
	Neutral	18	16.5
	Slightly Unaware	13	11.9
	Strongly Unaware	11	10.1
	Total	109	100.0

Q11

<b>I am aware how to contact Careways should I need to use the services</b>			
		Frequency	Percent
Valid	Strongly Aware	37	33.9
	Aware	34	31.2
	Neutral	16	14.7
	Slightly Unaware	10	9.2
	Strongly Unaware	12	11.0
	Total	109	100.0

Q12

<b>I know that Careways can be contacted at anytime and anywhere</b>			
		Frequency	Percent
Valid	Strongly Aware	32	29.4
	Aware	39	35.8
	Neutral	20	18.3
	Slightly Unaware	4	3.7
	Strongly Unaware	14	12.8
	Total	109	100.0

Q13

<b>I aware of the type of services provided by Careways</b>			
		Frequency	Percent
Valid	Strongly Aware	24	22.0
	Aware	33	30.3
	Neutral	23	21.1
	Slightly Unaware	14	12.8
	Strongly Unaware	15	13.8
	Total	109	100.0

Q14

<b>I am aware why Careways was introduced as a benefit for my well-being</b>			
		Frequency	Percent
Valid	Strongly Aware	24	22.0
	Aware	37	33.9
	Neutral	23	21.1
	Slightly Unaware	11	10.1
	Strongly Unaware	14	12.8
	Total	109	100.0



P.O. Box 1906 • Bellville 7535 South Africa • Tel: +27 21 6801680 • Email: saliefa@cput.ac.za  
Symphony Road Bellville 7535

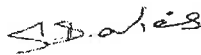
Office of the Chairperson Research Ethics Committee	Faculty: <b>BUSINESS</b>
--	--------------------------


At a meeting of the Research Ethics Committee on 16 September 2015, Provisional Ethics Approval was granted to KANIARU, EVELYNE WANJIKU (208021590) for research activities Related to the MTech/DTech: MTech: HUMAN RESOURCE MANAGEMENT at the Cape Peninsula University of Technology

Title of dissertation/thesis:	Absenteeism in a selected call center in Cape Town, Western Cape South Africa  Supervisor: Dr G John Dale
-------------------------------	--

Comments:

**Decision: PROVISIONALLY APPROVED**

	16 September 2015
Signed: Chairperson: Research Ethics Committee	Date

	06/10/2015
Signed: Chairperson: Faculty Research Committee	Date





18<sup>th</sup> December 2014

Senior Lecturer, Faculty of Business  
Cape Peninsula University of Technology  
PO Box 652, Cape Town  
8000

Dear Dr Braam Rust (Assoc. Prof)

**PERMISSION TO CONDUCT RESEARCH:** "Employee Assistance Programme and Absenteeism"

On behalf of Lufthansa InTouch, I am writing to formally indicate the research proposed by Ms Evelyne Kaniaru student number: 20802159, Human Resource Management student at the Cape Peninsula University of Technology, Cape Town, South Africa.

Evelyne request to conduct her research at Lufthansa InTouch on "*Employee Assistance Programme and Absenteeism*"

As the Human Resources Manager for Lufthansa InTouch Cape Town and responsible for employee relations I grant Ms Evelyne Kaniaru permission to conduct her research at our organization.

If you have any questions or concerns, please feel free to contact me.

Sincerely,



Ian Ohlson  
Manager Human Resources

Lufthansa InTouch  
CPT XR  
9<sup>th</sup> floor Picbel Parkade, Strand Street  
Cape Town 8001  
South Africa  
Phone: +27 (0)21 415 3806  
Fax: +27 (0)21 415 3569  
Mobile: +27 (0)72 400 9500  
Email: [ian.ohlson@dlh.de](mailto:ian.ohlson@dlh.de)  
[lh-intouch.com](http://lh-intouch.com)

## Frequencies

[DataSet1] C:\@Data\Research\Research  
PostGraduate\MTech\CPUT\2018\KaniEve\Careways Data 2.sav

## Frequency Table

### Section A

#### Q1

Please indicate your gender					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	68	62.4	62.4	62.4
	Male	41	37.6	37.6	100.0
	Total	109	100.0	100.0	

#### Q2

Please indicate your preferred race qualification					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	African	15	13.8	15.5	15.5
	Coloured	52	47.7	53.6	69.1
	Caucasian	28	25.7	28.9	97.9
	Indian	2	1.8	2.1	100.0
	Total	97	89.0	100.0	

#### Q3

What age group do you fall into?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	18 - 25	15	13.8	13.8	13.8
	26 - 30	25	22.9	22.9	36.7
	31 - 40	55	50.5	50.5	87.2
	41 - 55	14	12.8	12.8	100.0
	Total	109	100.0	100.0	

Q4

Please indicate which hours you work					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Full time	105	96.3	97.2	97.2
	Part time - 6	2	1.8	1.9	99.1
	Part time - 4	1	.9	.9	100.0
	Total	108	99.1	100.0	

Q5

What is the title of your position?					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Customer Service Consultant	83	76.1	76.1	76.1
	Manager	3	2.8	2.8	78.0
	Quality Specialist n/a	1	.9	.9	78.9
	Scheduling Specialist n/a	1	.9	.9	79.8
	Service delivery Specialist n/a	8	7.3	7.3	88.1
	Team leader	9	8.2	8.2	96.3
	Ticketing consultant	1	.9	.9	97.2
	Ticketing /DM	1	.9	.9	98.2
	Total	109	100.0	100.0	

Q6

Please indicate the language used in your team					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dutch	2	1.8	1.8	1.8
	English	88	80.7	80.7	82.6
	French	4	3.7	3.7	86.2
	German	8	7.3	7.3	93.6
	Hebrew	5	4.6	4.6	98.2
	Other	2	1.8	1.8	100.0
	Total	109	100.0	100.0	

Q7

Please indicate which team you belong to					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Cargo	5	4.6	4.6	4.6
	Dutch	2	1.8	1.9	6.5
	English Groups	7	6.4	6.5	13.0

	English Scandinavian	7	6.4	6.5	19.4
	English Swiss	21	19.3	19.4	38.9
	English Travel Agent	6	5.5	5.6	44.4
	English Uk	7	6.4	6.5	50.9
	French Genres	3	2.8	2.8	53.7
	French Travel Agent	1	.9	.9	54.6
	German Lufthansa	5	4.6	4.6	59.3
	German Swiss	3	2.8	2.8	62.0
	Hebrew	5	4.6	4.6	66.7
	Miles and More	8	7.3	7.4	74.1
	Other	28	25.7	25.9	100.0
	Total	108	99.1	100.0	

Q 7.1

Team Other					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Customer service Agent	104	95.4	95.4	95.4
	Back-office	2	1.8	1.8	97.2
	HR	1	.9	.9	99.1
	Total	109	100.0	100.0	

Q8

Please indicate the number of years you have been working for the company					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 - 2 years	41	37.6	37.6	37.6
	3 - 5 years	36	33.0	33.0	70.6
	6 - 8 years	20	18.3	18.3	89.0
	9 - 10 years	2	1.8	1.8	90.8
	11 years or more	10	9.2	9.2	100.0
	Total	109	100.0	100.0	

Q9

Please indicate your shift schedule					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Rotational	70	64.2	64.2	64.2

	Set Mon-Fri	26	23.9	23.9	88.1
	Day	3	2.8	2.8	90.8
	Night	6	5.5	5.5	96.3
	Early	1	.9	.9	97.2
	Other	3	2.8	2.8	100.0
	Total	109	100.0	100.0	

## SECTION B

### Q10

<b>I am aware of the purpose of Careways programme</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	30	27.5	27.5	27.5
	Aware	37	33.9	33.9	61.5
	Neutral	18	16.5	16.5	78.0
	Slightly Unaware	13	11.9	11.9	89.9
	Strongly Unaware	11	10.1	10.1	100.0
	Total	109	100.0	100.0	

### Q11

<b>I am aware how to contact Careways should I need to use the services</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	37	33.9	33.9	33.9
	Aware	34	31.2	31.2	65.1
	Neutral	16	14.7	14.7	79.8
	Slightly Unaware	10	9.2	9.2	89.0
	Strongly Unaware	12	11.0	11.0	100.0
	Total	109	100.0	100.0	

### Q12

<b>I know that Careways can be contacted at anytime and anywhere</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	32	29.4	29.4	29.4
	Aware	39	35.8	35.8	65.1
	Neutral	20	18.3	18.3	83.5
	Slightly Unaware	4	3.7	3.7	87.2
	Strongly Unaware	14	12.8	12.8	100.0
	Total	109	100.0	100.0	

Q13

<b>I am aware of the type of services provided by Careways</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	24	22.0	22.0	22.0
	Aware	33	30.3	30.3	52.3
	Neutral	23	21.1	21.1	73.4
	Slightly Unaware	14	12.8	12.8	86.2
	Strongly Unaware	15	13.8	13.8	100.0
	Total	109	100.0	100.0	

Q14

<b>I am aware why Careways was introduced as a benefit for my wellbeing</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	24	22.0	22.0	22.0
	Aware	37	33.9	33.9	56.0
	Neutral	23	21.1	21.1	77.1
	Slightly Unaware	11	10.1	10.1	87.2
	Strongly Unaware	14	12.8	12.8	100.0
	Total	109	100.0	100.0	

SECTION C

Q15

<b>Please indicate which of the following is commonly used to communicate to you about Careways program</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
	Colleagues	21	19.3	19.3	19.3
	Posters	22	20.2	20.2	39.4
	Grapevine	2	1.8	1.8	41.3
	Induction Day	10	9.2	9.2	50.5
	Counseling with HR	9	8.3	8.3	58.7
	Iemail	4	3.7	3.7	62.4
	Team Leaders	5	4.6	4.6	67.0
	Wellness Day	12	11.0	11.0	78.0
	Pamphlets	18	16.5	16.5	94.5
	other	6	5.5	5.5	100.0
	Total	109	100.0	100.0	

Q16

<b>I know who I should contact with regards to Careways programme</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	20	18.3	18.3	18.3
	Aware	33	30.3	30.3	48.6
	Neutral	22	20.2	20.2	68.8
	Slightly Unaware	12	11.0	11.0	79.8
	Strongly Unaware	22	20.2	20.2	100.0
	Total	109	100.0	100.0	

Q17

<b>I have been made aware that I can contact Careways by myself</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	30	27.5	27.5	27.5
	Aware	48	44.0	44.0	71.6
	Neutral	13	11.9	11.9	83.5
	Slightly Unaware	7	6.4	6.4	89.9
	Strongly Unaware	11	10.1	10.1	100.0
	Total	109	100.0	100.0	

Q18

<b>Careways is communicated to me regardless of the shifts I work</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	26	23.9	23.9	23.9
	Aware	35	32.1	32.1	56.0
	Neutral	18	16.5	16.5	72.5
	Slightly Unaware	14	12.8	12.8	85.3
	Strongly Unaware	16	14.7	14.7	100.0
	Total	109	100.0	100.0	

Q19

<b>Relevant information about Careways is made known to me regularly</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	8	7.3	7.4	7.4
	Aware	27	24.8	25.0	32.4
	Neutral	34	31.2	31.5	63.9
	Slightly Unaware	17	15.6	15.7	79.6

	Strongly Unaware	22	20.2	20.4	100.0
Total		109	100.0		

Q20

<b>I have been made aware that Careways program is an extra benefit for me</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	20	18.3	18.3	18.3
	Aware	44	40.4	40.4	58.7
	Neutral	15	13.8	13.8	72.5
	Slightly Unaware	15	13.8	13.8	86.2
	Strongly Unaware	15	13.8	13.8	100.0
	Total	109	100.0	100.0	

SECTION D

Q21

<b>I know how to use the Careways programme</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	15	13.8	13.8	13.8
	Aware	30	27.5	27.5	41.3
	Neutral	28	25.7	25.7	67.0
	Slightly Unaware	19	17.4	17.4	84.4
	Strongly Unaware	17	15.6	15.6	100.0
	Total	109	100.0	100.0	

Q22

<b>I can use Careways anytime and anywhere to promote my wellbeing</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	19	17.4	17.4	17.4
	Aware	42	38.5	38.5	56.0
	Neutral	19	17.4	17.4	73.4
	Slightly Unaware	14	12.8	12.8	86.2
	Strongly Unaware	15	13.8	13.8	100.0
	Total	109	100.0	100.0	

Q23



<b>I use the services provided by Careways programme as it caters for my needs</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	12	11.0	11.0	11.0
	Aware	21	19.3	19.3	30.3
	Neutral	30	27.5	27.5	57.8
	Slightly Unaware	15	13.8	13.8	71.6
	Strongly Unaware	31	28.4	28.4	100.0
	Total	109	100.0	100.0	

Q24

<b>I use Careways to assist at work or personal life to ensure my wellbeing</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	12	11.0	11.0	11.0
	Aware	22	20.2	20.2	31.2
	Neutral	30	27.5	27.5	58.7
	Slightly Unaware	13	11.9	11.9	70.6
	Strongly Unaware	32	29.4	29.4	100.0
	Total	109	100.0	100.0	

Q25

<b>Careways is often promoted to be utilised to ensure my wellbeing</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	17	15.6	15.6	15.6
	Aware	34	31.2	31.2	46.8
	Neutral	25	22.9	22.9	69.7
	Slightly Unaware	14	12.8	12.8	82.6
	Strongly Unaware	19	17.4	17.4	100.0
	Total	109	100.0	100.0	

## SECTION E

Q26

<b>I am aware Careways is readily available to use at anytime and anywhere</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	23	21.1	21.3	21.3
	Aware	39	35.8	36.1	57.4
	Neutral	21	19.3	19.4	76.9

	Slightly Unaware	14	12.8	13.0	89.8
	Strongly Unaware	11	10.1	10.2	100.0
	Total	108	99.1	100.0	

Q27

<b>It is easy to get the information and services about Careways regardless of shift</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	18	16.5	16.7	16.7
	Aware	31	28.4	28.7	45.4
	Neutral	26	23.9	24.1	69.4
	Slightly Unaware	15	13.8	13.9	83.3
	Strongly Unaware	18	16.5	16.7	100.0
	Total	108	99.1	100.0	

Q28

<b>I know where to get the information about Careways</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	16	14.7	14.8	14.8
	Aware	40	36.7	37.0	51.9
	Neutral	25	22.9	23.1	75.0
	Slightly Unaware	13	11.9	12.0	87.0
	Strongly Unaware	14	12.8	13.0	100.0
	Total	108	99.1	100.0	

Q29

<b>Team Leaders assist in accessing Careways services and information</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	5	4.6	4.6	4.6
	Aware	32	29.4	29.6	34.3
	Neutral	28	25.7	25.9	60.2
	Slightly Unaware	14	12.8	13.0	73.1
	Strongly Unaware	29	26.6	26.9	100.0
	Total	108	99.1	100.0	

Q30

<b>The organisation has made it easy to access Careways</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	14	12.8	13.0	13.0
	Aware	33	30.3	30.6	43.5
	Neutral	34	31.2	31.5	75.0
	Slightly Unaware	9	8.3	8.3	83.3
	Strongly Unaware	18	16.5	16.7	100.0
	Total	108	99.1	100.0	

SECTION F

Q31

<b>I am aware that colleagues who are frequently absent increase workload thus creating stress at work</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	50	45.9	46.3	46.3
	Aware	36	33.0	33.3	79.6
	Neutral	17	15.6	15.7	95.4
	Slightly Unaware	3	2.8	2.8	98.1
	Strongly Unaware	2	1.8	1.9	100.0
	Total	108	99.1	100.0	

Q32

<b>I am aware of the negative impact absenteeism will have on my colleagues</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	47	43.1	43.5	43.5
	Aware	38	34.9	35.2	78.7
	Neutral	16	14.7	14.8	93.5
	Slightly Unaware	2	1.8	1.9	95.4
	Strongly Unaware	5	4.6	4.6	100.0
	Total	108	99.1	100.0	

Q33

<b>Being absent has a negative impact on the revenue of the company</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	55	50.5	50.9	50.9

	Aware	28	25.7	25.9	76.9
	Neutral	18	16.5	16.7	93.5
	Slightly Unaware	3	2.8	2.8	96.3
	Strongly Unaware	4	3.7	3.7	100.0
	Total	108	99.1	100.0	

Q34

<b>Absenteeism increases workload thus has negative impact on customer service</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	53	48.6	49.1	49.1
	Aware	30	27.5	27.8	76.9
	Neutral	19	17.4	17.6	94.4
	Slightly Unaware	2	1.8	1.9	96.3
	Strongly Unaware	4	3.7	3.7	100.0
	Total	108	99.1	100.0	

Q35

<b>Introduction of Careways has assisted to reduce absenteeism</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	7	6.4	6.5	6.5
	Aware	14	12.8	13.0	19.4
	Neutral	37	33.9	34.3	53.7
	Slightly Unaware	21	19.3	19.4	73.1
	Strongly Unaware	29	26.6	26.9	100.0
	Total	108	99.1	100.0	

SECTION G

Q36

<b>Please indicate the most common reason for you being absent from work</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Sickness	73	67.0	67.0	67.0
	Transport Issues	3	2.8	2.8	69.7
	Finance	2	1.8	1.8	71.6
	Family	5	4.6	4.6	76.1
	Stress	8	7.3	7.3	83.5
	Other	18	16.5	16.5	100.0
	Total	109	100.0	100.0	

Q37

<b>I am aware that the Careways program was introduced to assist in dealing with employee attendance</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	9	8.3	8.3	8.3
	Aware	27	24.8	25.0	33.3
	Neutral	24	22.0	22.2	55.6
	Slightly Unaware	22	20.2	20.4	75.9
	Strongly Unaware	26	23.9	24.1	100.0
	Total	108	99.1	100.0	
Total		109	100.0		

Q38

<b>The Careways program provides further assistance in ensuring I am not absent from work.</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	6	5.5	5.6	5.6
	Aware	25	22.9	23.1	28.7
	Neutral	32	29.4	29.6	58.3
	Slightly Unaware	15	13.8	13.9	72.2
	Strongly Unaware	30	27.5	27.8	100.0
	Total	108	99.1	100.0	

Q39

<b>I am aware that being absent increases the work load for my work colleagues</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	41	37.6	38.0	38.0
	Aware	44	40.4	40.7	78.7
	Neutral	12	11.0	11.1	89.8
	Slightly Unaware	5	4.6	4.6	94.4
	Strongly Unaware	6	5.5	5.6	100.0
	Total	108	99.1	100.0	

Q40

<b>I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	44	40.4	40.7	40.7
	Aware	38	34.9	35.2	75.9
	Neutral	18	16.5	16.7	92.6
	Slightly Unaware	4	3.7	3.7	96.3
	Strongly Unaware	4	3.7	3.7	100.0
	Total	108	99.1	100.0	

Q41

<b>I am aware that high absenteeism in the organisation decreases profitability for the organisation</b>					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly Aware	45	41.3	41.7	41.7
	Aware	37	33.9	34.3	75.9
	Neutral	20	18.3	18.5	94.4
	Slightly Unaware	4	3.7	3.7	98.1
	Strongly Unaware	2	1.8	1.9	100.0
	Total	108	99.1	100.0	

### Factor Analysis

<b>Communalities</b>		
	Initial	Extraction
I am aware of the purpose of Careways programme	1.000	.797
I am aware how to contact Careways should I need to use the services	1.000	.816
I know that Careways can be contacted at anytime and anywhere	1.000	.797
I aware of the type of services provided by Careways	1.000	.868
I am aware why Careways was introduced as a benefit for my wellbeing	1.000	.789

I know who I should contact with regards to Careways programme	1.000	.719
I have been made aware that I can contact Careways by myself	1.000	.686
Careways is communicated to me regardless of the shifts I work	1.000	.701
Relevant information about Careways is made known to me regularly	1.000	.765
I have been made aware that Careways programme is an extra benefit for me	1.000	.763
I know how to use the Careways programme	1.000	.870
I can use Careways anytime and anywhere to promote my wellbeing	1.000	.842
I use the services provided by Careways programme as it caters for my needs	1.000	.761
I use Careways to assist at work or personal life to ensure my wellbeing	1.000	.787
Careways is often promoted to be utilised to ensure my wellbeing	1.000	.759
I am aware Careways is readily available to use at anytime and anywhere	1.000	.842
It is easy to get the information and services about Careways regardless of shift	1.000	.779
I know where to get the information about Careways	1.000	.762
Team Leaders assist in accessing Careways services and information	1.000	.617
The organisation has made it easy to access Careways	1.000	.766





1	16.390	54.633	54.633	16.390	54.633	54.633	15.423
2	4.481	14.937	69.570	4.481	14.937	69.570	8.084
3	1.639	5.464	75.034	1.639	5.464	75.034	10.192
4	1.025	3.416	78.450	1.025	3.416	78.450	5.418
5	.790	2.635	81.085				
6	.625	2.083	83.168				
7	.607	2.023	85.191				
8	.492	1.640	86.831				
9	.430	1.434	88.265				
10	.390	1.302	89.566				
11	.351	1.170	90.736				
12	.317	1.058	91.794				
13	.290	.968	92.762				
14	.280	.933	93.695				
15	.258	.859	94.554				
16	.234	.780	95.334				
17	.186	.621	95.955				
18	.179	.595	96.550				
19	.151	.504	97.054				
20	.147	.489	97.544				
21	.112	.374	97.918				
22	.105	.351	98.269				
23	.092	.305	98.574				
24	.082	.274	98.848				
25	.076	.254	99.102				
26	.073	.245	99.347				
27	.064	.213	99.560				
28	.057	.189	99.749				
29	.041	.138	99.887				
30	.034	.113	100.000				

Extraction Method: Principal Component Analysis.

a. When components are correlated, sums of squared loadings cannot be added to obtain a total variance.

<b>Component Matrix<sup>a</sup></b>				
	Component			
	1	2	3	4
I am aware of the purpose of Careways programme	.858			
I am aware how to contact Careways should I need to use the services	.860			

I know that Careways can be contacted at anytime and anywhere	.831			
I aware of the type of services provided by Careways	.900			
I am aware why Careways was introduced as a benefit for my wellbeing	.848			
I know who I should contact with regards to Careways programme	.794			
I have been made aware that I can contact Careways by myself	.780			
Careways is communicated to me regardless of the shifts I work	.813			
Relevant information about Careways is made known to me regularly	.818			
I have been made aware that Careways programme is an extra benefit for me	.854			
I know how to use the Careways programme	.892			
I can use Careways anytime and anywhere to promote my wellbeing	.871			
I use the services provided by Careways programme as it caters for my needs	.744	-.309		
I use Careways to assist at work or personal life to ensure my wellbeing	.737	-.317		.329
Careways is often promoted to be utilised to ensure my wellbeing	.814			
I am aware Careways is readily available to use at anytime and anywhere	.856			
It is easy to get the information and services about Careways regardless of shift	.847			
I know where to get the information about Careways	.864			

Team Leaders assist in accessing Careways services and information	.642		.348	
The organisation has made it easy to access Careways	.853			
I am aware that colleagues who are frequently absent increase workload thus creating stress at work	.416	.741		
I am aware of the negative impact absenteeism will have on my colleagues	.499	.732		
Being absent has a negative impact on the revenue of the company	.496	.745		
Absenteesim increases workload thus has negative impact on customer service	.550	.768		
Introduction of Careways has assisted to reduce absenteesim	.552		.629	
I am aware that the Careways programme was introduced to assist in dealing with employee attendance	.608		.496	-.470
The Careways programme provides further assistance in ensuring I am not absent from work.	.555		.630	-.405
I am aware that being absent increases the work load for my work colleagues	.520	.692		
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.	.484	.748		
I am aware that high absenteeism in the organisation decreases profitability for the organisation	.533	.734		
Extraction Method: Principal Component Analysis.				
a. 4 components extracted.				

Pattern Matrix <sup>a</sup>				
	Component			
	1	2	3	4
I am aware of the purpose of Careways programme	.850			
I am aware how to contact Careways should I need to use the services	.947			
I know that Careways can be contacted at anytime and anywhere	.993			
I aware of the type of services provided by Careways	.906			
I am aware why Careways was introduced as a benefit for my wellbeing	.910			
I know who I should contact with regards to Careways programme	.777			
I have been made aware that I can contact Careways by myself	.857			
Careways is communicated to me regardless of the shifts I work	.740			
Relevant information about Careways is made known to me regularly	.377		.559	
I have been made aware that Careways programme is an extra benefit for me	.830			
I know how to use the Careways programme	.852			
I can use Careways anytime and anywhere to promote my wellbeing	.957			
I use the services provided by Careways programme as it caters for my needs	.353		.647	
I use Careways to assist at work or personal life to ensure my wellbeing	.316		.706	

Careways is often promoted to be utilised to ensure my wellbeing	.439		.534	
I am aware Careways is readily available to use at anytime and anywhere	.925			
It is easy to get the information and services about Careways regardless of shift	.749			
I know where to get the information about Careways	.743			
Team Leaders assist in accessing Careways services and information			.718	
The organisation has made it easy to access Careways	.487		.422	
I am aware that colleagues who are frequently absent increase workload thus creating stress at work		.872		
I am aware of the negative impact absenteeism will have on my colleagues		.873		
Being absent has a negative impact on the revenue of the company		.924		
Absenteesim increases workload thus has negative impact on customer service		.921		
Introduction of Careways has assisted to reduce absenteesim			.725	.434
I am aware that the Careways programme was introduced to assist in dealing with employee attendance				.821
The Careways programme provides further assistance in ensuring I am not absent from work.				.866
I am aware that being absent increases the work load for my work colleagues		.817		

I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.		.903		
I am aware that high absenteeism in the organisation decreases profitability for the organisation		.907		
Extraction Method: Principal Component Analysis. Rotation Method: Promax with Kaiser Normalization.				
a. Rotation converged in 6 iterations.				

<b>Structure Matrix</b>				
	Component			
	1	2	3	4
I am aware of the purpose of Careways programme	.874	.385	.549	.509
I am aware how to contact Careways should I need to use the services	.894	.402	.515	.400
I know that Careways can be contacted at anytime and anywhere	.882	.365	.484	.318
I aware of the type of services provided by Careways	.926	.356	.612	.465
I am aware why Careways was introduced as a benefit for my wellbeing	.882	.348	.539	.431
I know who I should contact with regards to Careways programme	.829		.638	.344
I have been made aware that I can contact Careways by myself	.807	.428	.462	
Careways is communicated to me regardless of the shifts I work	.829		.634	.347
Relevant information about Careways is made known to me regularly	.766	.339	.820	.387
I have been made aware that Careways programme is an extra benefit for me	.869	.391	.573	.422

I know how to use the Careways programme	.922		.697	.383
I can use Careways anytime and anywhere to promote my wellbeing	.916	.317	.579	.385
I use the services provided by Careways programme as it caters for my needs	.717		.835	.320
I use Careways to assist at work or personal life to ensure my wellbeing	.705		.856	
Careways is often promoted to be utilised to ensure my wellbeing	.777	.327	.802	.318
I am aware Careways is readily available to use at anytime and anywhere	.905		.629	
It is easy to get the information and services about Careways regardless of shift	.864		.694	.368
I know where to get the information about Careways	.859	.448	.626	.354
Team Leaders assist in accessing Careways services and information	.539	.324	.769	.398
The organisation has made it easy to access Careways	.809	.419	.768	.386
I am aware that colleagues who are frequently absent increase workload thus creating stress at work		.848		
I am aware of the negative impact absenteeism will have on my colleagues	.344	.885		.331
Being absent has a negative impact on the revenue of the company	.348	.901		
Absenteesim increases workload thus has negative impact on customer service	.404	.944		.324
Introduction of Careways has assisted to reduce absenteeism	.411		.734	.631

I am aware that the Careways programme was introduced to assist in dealing with employee attendance	.518	.373	.437	.902
The Careways programme provides further assistance in ensuring I am not absent from work.	.456		.505	.917
I am aware that being absent increases the work load for my work colleagues	.375	.860		.383
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.	.326	.892		
I am aware that high absenteeism in the organisation decreases profitability for the organisation	.397	.911		
Extraction Method: Principal Component Analysis. Rotation Method: Promax with Kaiser Normalization.				

<b>Component Correlation Matrix</b>				
Component	1	2	3	4
1	1.000	.385	.660	.407
2	.385	1.000	.244	.317
3	.660	.244	1.000	.395
4	.407	.317	.395	1.000
Extraction Method: Principal Component Analysis. Rotation Method: Promax with Kaiser Normalization.				

## Factor Analysis

<b>Communalities</b>		
	Initial	Extraction
I am aware of the purpose of Careways programme	1.000	.797



I am aware how to contact Careways should I need to use the services	1.000	.816
I know that Careways can be contacted at anytime and anywhere	1.000	.797
I aware of the type of services provided by Careways	1.000	.868
I am aware why Careways was introduced as a benefit for my wellbeing	1.000	.789
I know who I should contact with regards to Careways programme	1.000	.719
I have been made aware that I can contact Careways by myself	1.000	.686
Careways is communicated to me regardless of the shifts I work	1.000	.701
Relevant information about Careways is made known to me regularly	1.000	.765
I have been made aware that Careways programme is an extra benefit for me	1.000	.763
I know how to use the Careways programme	1.000	.870
I can use Careways anytime and anywhere to promote my wellbeing	1.000	.842
I use the services provided by Careways programme as it caters for my needs	1.000	.761
I use Careways to assist at work or personal life to ensure my wellbeing	1.000	.787
Careways is often promoted to be utilised to ensure my wellbeing	1.000	.759
I am aware Careways is readily available to use at anytime and anywhere	1.000	.842

It is easy to get the information and services about Careways regardless of shift	1.000	.779
I know where to get the information about Careways	1.000	.762
Team Leaders assist in accessing Careways services and information	1.000	.617
The organisation has made it easy to access Careways	1.000	.766
I am aware that colleagues who are frequently absent increase workload thus creating stress at work	1.000	.724
I am aware of the negative impact absenteeism will have on my colleagues	1.000	.786
Being absent has a negative impact on the revenue of the company	1.000	.825
Absenteesim increases workload thus has negative impact on customer service	1.000	.896
Introduction of Careways has assisted to reduce absenteesim	1.000	.714
I am aware that the Careways programme was introduced to assist in dealing with employee attendance	1.000	.843
The Careways programme provides further assistance in ensuring I am not absent from work.	1.000	.870
I am aware that being absent increases the work load for my work colleagues	1.000	.753
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.	1.000	.799
I am aware that high absenteeism in the organisation decreases profitability for the organisation	1.000	.839

Extraction Method: Principal Component Analysis.

Total Variance Explained							
Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings <sup>a</sup>
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total
1	16.390	54.633	54.633	16.390	54.633	54.633	15.423
2	4.481	14.937	69.570	4.481	14.937	69.570	8.084
3	1.639	5.464	75.034	1.639	5.464	75.034	10.192
4	1.025	3.416	78.450	1.025	3.416	78.450	5.418
5	.790	2.635	81.085				
6	.625	2.083	83.168				
7	.607	2.023	85.191				
8	.492	1.640	86.831				
9	.430	1.434	88.265				
10	.390	1.302	89.566				
11	.351	1.170	90.736				
12	.317	1.058	91.794				
13	.290	.968	92.762				
14	.280	.933	93.695				
15	.258	.859	94.554				
16	.234	.780	95.334				
17	.186	.621	95.955				
18	.179	.595	96.550				
19	.151	.504	97.054				
20	.147	.489	97.544				
21	.112	.374	97.918				
22	.105	.351	98.269				
23	.092	.305	98.574				
24	.082	.274	98.848				
25	.076	.254	99.102				
26	.073	.245	99.347				
27	.064	.213	99.560				
28	.057	.189	99.749				
29	.041	.138	99.887				
30	.034	.113	100.000				
Extraction Method: Principal Component Analysis.							
a. When components are correlated, sums of squared loadings cannot be added to obtain a total variance.							

**Component Matrix<sup>a</sup>**

	Component			
	1	2	3	4
I aware of the type of services provided by Careways	.900			
I know how to use the Careways programme	.892			
I can use Careways anytime and anywhere to promote my wellbeing	.871			
I know where to get the information about Careways	.864			
I am aware how to contact Careways should I need to use the services	.860			
I am aware of the purpose of Careways programme	.858			
I am aware Careways is readily available to use at anytime and anywhere	.856			
I have been made aware that Careways programme is an extra benefit for me	.854			
The organisation has made it easy to access Careways	.853			
I am aware why Careways was introduced as a benefit for my wellbeing	.848			
It is easy to get the information and services about Careways regardless of shift	.847			
I know that Careways can be contacted at anytime and anywhere	.831			
Relevant information about Careways is made known to me regularly	.818			
Careways is often promoted to be utilised to ensure my wellbeing	.814			
Careways is communicated to me regardless of the shifts I work	.813			

I know who I should contact with regards to Careways programme	.794			
I have been made aware that I can contact Careways by myself	.780			
I use the services provided by Careways programme as it caters for my needs	.744	-.309		
I use Careways to assist at work or personal life to ensure my wellbeing	.737	-.317		.329
Team Leaders assist in accessing Careways services and information	.642		.348	
I am aware that the Careways programme was introduced to assist in dealing with employee attendance	.608		.496	-.470
Absenteesim increases workload thus has negative impact on customer service	.550	.768		
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.	.484	.748		
Being absent has a negative impact on the revenue of the company	.496	.745		
I am aware that colleagues who are frequently absent increase workload thus creating stress at work	.416	.741		
I am aware that high absenteeism in the organisation decreases profitability for the organisation	.533	.734		
I am aware of the negative impact absenteeism will have on my colleagues	.499	.732		
I am aware that being absent increases the work load for my work colleagues	.520	.692		

The Careways programme provides further assistance in ensuring I am not absent from work.	.555		.630	-.405
Introduction of Careways has assisted to reduce absenteeism	.552		.629	
Extraction Method: Principal Component Analysis.				
a. 4 components extracted.				

Pattern Matrix <sup>a</sup>				
	Component			
	1	2	3	4
I know that Careways can be contacted at anytime and anywhere	.993			
I can use Careways anytime and anywhere to promote my wellbeing	.957			
I am aware how to contact Careways should I need to use the services	.947			
I am aware Careways is readily available to use at anytime and anywhere	.925			
I am aware why Careways was introduced as a benefit for my wellbeing	.910			
I aware of the type of services provided by Careways	.906			
I have been made aware that I can contact Careways by myself	.857			
I know how to use the Careways programme	.852			
I am aware of the purpose of Careways programme	.850			
I have been made aware that Careways programme is an extra benefit for me	.830			
I know who I should contact with regards to Careways programme	.777			
It is easy to get the information and services about Careways regardless of shift	.749			
I know where to get the information about Careways	.743			
Careways is communicated to me regardless of the shifts I work	.740			
The organisation has made it easy to access Careways	.487		.422	
Being absent has a negative impact on the revenue of the company		.924		
Absenteeism increases workload thus has negative impact on customer service		.921		
I am aware that high absenteeism in the organisation decreases profitability for the organisation		.907		
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.		.903		
I am aware of the negative impact absenteeism will have on my colleagues		.873		
I am aware that colleagues who are frequently absent increase workload thus creating stress at work		.872		
I am aware that being absent increases the work load for my work colleagues		.817		
Introduction of Careways has assisted to reduce absenteeism			.725	.434
Team Leaders assist in accessing Careways services and information			.718	
I use Careways to assist at work or personal life to ensure my wellbeing	.316		.706	
I use the services provided by Careways programme as it caters for my needs	.353		.647	
Relevant information about Careways is made known to me regularly	.377		.559	
Careways is often promoted to be utilised to ensure my wellbeing	.439		.534	

The Careways programme provides further assistance in ensuring I am not absent from work.				.866
I am aware that the Careways programme was introduced to assist in dealing with employee attendance				.821
Extraction Method: Principal Component Analysis.				
Rotation Method: Promax with Kaiser Normalization.				
a. Rotation converged in 6 iterations.				

<b>Structure Matrix</b>				
	Component			
	1	2	3	4
I aware of the type of services provided by Careways	.926	.356	.612	.465
I know how to use the Careways programme	.922		.697	.383
I can use Careways anytime and anywhere to promote my wellbeing	.916	.317	.579	.385
I am aware Careways is readily available to use at anytime and anywhere	.905		.629	
I am aware how to contact Careways should I need to use the services	.894	.402	.515	.400
I know that Careways can be contacted at anytime and anywhere	.882	.365	.484	.318
I am aware why Careways was introduced as a benefit for my wellbeing	.882	.348	.539	.431
I am aware of the purpose of Careways programme	.874	.385	.549	.509
I have been made aware that Careways programme is an extra benefit for me	.869	.391	.573	.422
It is easy to get the information and services about Careways regardless of shift	.864		.694	.368
I know where to get the information about Careways	.859	.448	.626	.354
Careways is communicated to me regardless of the shifts I work	.829		.634	.347

I know who I should contact with regards to Careways programme	.829		.638	.344
The organisation has made it easy to access Careways	.809	.419	.768	.386
I have been made aware that I can contact Careways by myself	.807	.428	.462	
Absenteesim increases workload thus has negative impact on customer service	.404	.944		.324
I am aware that high absenteeism in the organisation decreases profitability for the organisation	.397	.911		
Being absent has a negative impact on the revenue of the company	.348	.901		
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.	.326	.892		
I am aware of the negative impact absenteeism will have on my colleagues	.344	.885		.331
I am aware that being absent increases the work load for my work colleagues	.375	.860		.383
I am aware that colleagues who are frequently absent increase workload thus creating stress at work		.848		
I use Careways to assist at work or personal life to ensure my wellbeing	.705		.856	
I use the services provided by Careways programme as it caters for my needs	.717		.835	.320
Relevant information about Careways is made known to me regularly	.766	.339	.820	.387
Careways is often promoted to be utilised to ensure my wellbeing	.777	.327	.802	.318



Team Leaders assist in accessing Careways services and information	.539	.324	.769	.398
Introduction of Careways has assisted to reduce absenteesim	.411		.734	.631
The Careways programme provides further assistance in ensuring I am not absent from work.	.456		.505	.917
I am aware that the Careways programme was introduced to assist in dealing with employee attendance	.518	.373	.437	.902
Extraction Method: Principal Component Analysis. Rotation Method: Promax with Kaiser Normalization.				

<b>Component Correlation Matrix</b>				
Component	1	2	3	4
1	1.000	.385	.660	.407
2	.385	1.000	.244	.317
3	.660	.244	1.000	.395
4	.407	.317	.395	1.000
Extraction Method: Principal Component Analysis. Rotation Method: Promax with Kaiser Normalization.				

## Reliability

## Scale: EAP

<b>Case Processing Summary</b>			
		N	%
Cases	Valid	108	99.1
	Excluded <sup>a</sup>	1	.9
	Total	109	100.0

a. Listwise deletion based on all variables in the procedure.

<b>Reliability Statistics</b>	
Cronbach's Alpha	N of Items
.978	15

<b>Item-Total Statistics</b>				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
I am aware of the purpose of Careways programme	36.99	252.420	.854	.976
I am aware how to contact Careways should I need to use the services	37.10	250.597	.872	.976
I know that Careways can be contacted at anytime and anywhere	37.07	252.069	.857	.976
I aware of the type of services provided by Careways	36.76	249.026	.913	.975
I am aware why Careways was introduced as a benefit for my wellbeing	36.84	251.966	.862	.976
I know who I should contact with regards to Careways programme	36.57	250.938	.819	.977
I have been made aware that I can contact Careways by myself	37.15	256.912	.779	.977
Careways is communicated to me regardless of the shifts I work	36.80	251.790	.816	.977
I have been made aware that Careways programme is an extra benefit for me	36.78	252.156	.846	.976
I know how to use the Careways programme	36.49	250.832	.898	.976
I can use Careways anytime and anywhere to promote my wellbeing	36.76	250.540	.895	.976

I am aware Careways is readily available to use at anytime and anywhere	36.89	252.231	.886	.976
It is easy to get the information and services about Careways regardless of shift	36.58	251.217	.857	.976
I know where to get the information about Careways	36.72	253.754	.853	.976
The organisation has made it easy to access Careways	36.58	254.993	.810	.977

## Reliability

### Scale: Absenteeism

Case Processing Summary			
		N	%
Cases	Valid	108	99.1
	Excluded <sup>a</sup>	1	.9
	Total	109	100.0

a. Listwise deletion based on all variables in the procedure.

Reliability Statistics	
Cronbach's Alpha	N of Items
.958	7

Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
I am aware that colleagues who are frequently absent increase workload thus creating stress at work	11.38	31.359	.793	.955
I am aware of the negative impact absenteeism will have on my colleagues	11.30	29.874	.845	.951

Being absent has a negative impact on the revenue of the company	11.36	29.579	.862	.950
Absenteesim increases workload thus has negative impact on customer service	11.35	29.183	.925	.945
I am aware that being absent increases the work load for my work colleagues	11.19	29.616	.818	.954
I am aware that due to high absenteeism, my colleagues become more stressed at work due to the workload.	11.24	29.867	.850	.951
I am aware that high absenteeism in the organisation decreases profitability for the organisation	11.29	30.319	.880	.949

## Reliability

### Scale: Utilization

<b>Case Processing Summary</b>			
		N	%
Cases	Valid	107	98.2
	Excluded <sup>a</sup>	2	1.8
	Total	109	100.0
a. Listwise deletion based on all variables in the procedure.			

<b>Reliability Statistics</b>	
Cronbach's Alpha	N of Items
.908	6

<b>Item-Total Statistics</b>				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted

Relevant information about Careways is made known to me regularly	16.33	28.600	.798	.884
I use the services provided by Careways programme as it caters for my needs	16.17	27.537	.806	.882
I use Careways to assist at work or personal life to ensure my wellbeing	16.18	27.336	.813	.881
Careways is often promoted to be utilised to ensure my wellbeing	16.62	27.937	.786	.885
Team Leaders assist in accessing Careways services and information	16.21	29.831	.655	.904
Introduction of Careways has assisted to reduce absenteeism	16.02	30.924	.615	.909

## Reliability

### Scale: External\_Assistance

<b>Case Processing Summary</b>			
		N	%
Cases	Valid	108	99.1
	Excluded <sup>a</sup>	1	.9
	Total	109	100.0

a. Listwise deletion based on all variables in the procedure.

<b>Reliability Statistics</b>	
Cronbach's Alpha	N of Items
.878	2

<b>Item-Total Statistics</b>				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted

I am aware that the Careways programme was introduced to assist in dealing with employee attendance	3.35	1.595	.784	.
The Careways programme provides further assistance in ensuring I am not absent from work.	3.27	1.694	.784	.

## Explore

Case Processing Summary						
	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
Employee Assistance Program	108	99.1%	1	0.9%	109	100.0%
Absenteeism	108	99.1%	1	0.9%	109	100.0%
Utilization	108	99.1%	1	0.9%	109	100.0%
External Assistance	108	99.1%	1	0.9%	109	100.0%

Descriptive					
				Statistic	Std. Error
Employee Assistance Program	Mean			2.63	.109
	95% Confidence Interval for Mean	Lower Bound		2.41	
		Upper Bound		2.85	
	5% Trimmed Mean			2.59	
	Median			2.33	
	Variance			1.284	
	Std. Deviation			1.133	
	Minimum			1	
	Maximum			5	
	Range			4	
	Interquartile Range			2	
	Skewness			.505	.233
	Kurtosis			-.658	.461
	Absenteesim	Mean			1.88
95% Confidence Interval for Mean		Lower Bound		1.71	
		Upper Bound		2.06	

	5% Trimmed Mean		1.79	
	Median		1.86	
	Variance		.827	
	Std. Deviation		.909	
	Minimum		1	
	Maximum		5	
	Range		4	
	Interquartile Range		1	
	Skewness		1.249	.233
	Kurtosis		1.609	.461
Utilization	Mean		3.23	.103
	95% Confidence Interval for Mean	Lower Bound	3.03	
		Upper Bound	3.44	
	5% Trimmed Mean		3.25	
	Median		3.17	
	Variance		1.148	
	Std. Deviation		1.072	
	Minimum		1	
	Maximum		5	
	Range		4	
	Interquartile Range		2	
	Skewness		-.029	.233
	Kurtosis		-.799	.461
External Assistance	Mean		3.31	.117
	95% Confidence Interval for Mean	Lower Bound	3.08	
		Upper Bound	3.54	
	5% Trimmed Mean		3.34	
	Median		3.00	
	Variance		1.466	
	Std. Deviation		1.211	
	Minimum		1	
	Maximum		5	
	Range		4	
	Interquartile Range		3	
	Skewness		-.023	.233
	Kurtosis		-1.117	.461

Tests of Normality						
	Kolmogorov-Smirnov <sup>a</sup>			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Employee Assistance Program	.113	108	.002	.945	108	.000

Absenteesim	.166	108	.000	.856	108	.000
Utilization	.064	108	.200*	.968	108	.011
External Assistance	.147	108	.000	.917	108	.000
*. This is a lower bound of the true significance.						
a. Lilliefors Significance Correction						

## Correlations

Correlations					
		Employee Assistance Program	Absenteesim	Utilization	External Assistance
Employee Assistance Program	Pearson Correlation	1	.410**	.816**	.540**
	Sig. (2-tailed)		.000	.000	.000
	N	109	108	109	108
Absenteesim	Pearson Correlation	.410**	1	.337**	.345**
	Sig. (2-tailed)	.000		.000	.000
	N	108	108	108	108
Utilization	Pearson Correlation	.816**	.337**	1	.572**
	Sig. (2-tailed)	.000	.000		.000
	N	109	108	109	108
External Assistance	Pearson Correlation	.540**	.345**	.572**	1
	Sig. (2-tailed)	.000	.000	.000	
	N	108	108	108	108
**. Correlation is significant at the 0.01 level (2-tailed).					

## Nonparametric Correlation

Correlations						
		Employee Assistance Program	Absenteesim	Utilization	External Assistance	
Spearman's rho	Employee Assistance Program	Correlation Coefficient	1.000	.421**	.808**	.545**
		Sig. (2-tailed)		.000	.000	.000
		N	109	108	109	108



	Absenteesim	Correlation Coefficient	.421**	1.000	.303**	.326**
		Sig. (2-tailed)	.000	.	.001	.001
		N	108	108	108	108
	Utilization	Correlation Coefficient	.808**	.303**	1.000	.574**
		Sig. (2-tailed)	.000	.001	.	.000
		N	109	108	109	108
	External Assistance	Correlation Coefficient	.545**	.326**	.574**	1.000
		Sig. (2-tailed)	.000	.001	.000	.
		N	108	108	108	108

\*\* . Correlation is significant at the 0.01 level (2-tailed).