



Advance Social Science Archive Journal

Available Online: <https://assajournal.com>

Vol.3 No.1, January-March, 2025. Page No.1634-1646

Print ISSN: [3006-2497](#) Online ISSN: [3006-2500](#)

Platform & Workflow by: [Open Journal Systems](#)



WORKPLACE BULLYING, SELF COPING AND PSYCHOLOGICAL WELL BEING IN CALL CENTRE AGENTS

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ABSTRACT

High stressful environments such as call centers ostensibly cause workplace bullying that could upend employees' coping mechanisms and psychological well-being. In this study, the relationship among workplace bullying, self-coping strategies and the psychological wellbeing of call center agent is taken up for examination. It used a correlational research design, the selection of a sample of 400 employees (361 male, 39 female) aged 19 to 35 years; M = 22.62, SD 1.724; from multi call centres using purposive sampling, participants responded to standardized measures such as Workplace Bullying Scale (Anjum Ambreen et al.) Coping Strategies Scale (Chesney Margaret) and Ryff's Psychological Well-Being Scale. The informed consent and data confidentiality were strictly followed. Descriptive statistics, reliability analysis, correlations, regression and independent samples t-test were applied to data to explore relationships and demographic variations using SPSS version 25 and we found a significant positive correlation between workplace bullying and self-coping strategies and workplace bullying with psychological wellbeing. However, no relationship was found between self-coping and psychological well-being, meaning that, the employees when not hit by the bullies do not develop any kind of coping mechanisms however they still do not feel good. Based on the research, proactive workplace interventions in preventing bullying and promoting psychological resilience for employees are required. Targeted policies to create a supportive work environment, have to be implemented by organizations to promote mental well-being and better adaptive coping mechanisms. The implications of these findings are meaningful for both policymakers themselves and mental health professionals dealing with their employees in call centres.

Keywords: workplace bullying, psychological well-being, self-coping, call centre agents, call centre, association, and correlation.

Introduction:

Being a prevalent issue, workplace bullying negatively affects employees' mental health, productivity, and the degree of job satisfaction (Einarsen et al., 2020). Workplace bullying refers to repeated negative behavior an employee when directed towards another student (Branch et al., 2018). It is defined as verbal abuse, social exclusion and psychological intimidation. Bullying employees feel emotional distress, lower self-esteem, and increased psychological strain, however all of this can damage a person's wellbeing (Nielsen & Einarsen, 2018). With high job demands, repetitive tasks, and strict performance monitoring, high bullying workplaces that include call centers exist (Hutchinson & Jackson, 2015). Under such stressful conditions of a labor environment, especially a call center, it is important to investigate how workplace bullying impacts employees' coping strategies and psychological well-being.

The study is based on the Job Demands–Resources (JD–R) Model, which suggests that workplace conditions comprise of demands (such as workload, bullying) and resources (such as coping strategies, social support) and influence on the wellbeing of employees (Demerouti et al., 2001). Under this model, psychological resources should be depleted by excessive job demands like workplace bullying to cause stress and to decrease well-being (Bakker & Demerouti, 2017). Furthermore, there is a framework by which people manage stressful situations, such as Lazarus and Folkman's (1984) Stress and Coping Theory. According to this theory, coping strategies (e.g., problem-focussed increase stressors, psychological outcomes (Carver et al., 1989). These models guide the application so as to clarify the interrelation between workplace bullying, coping, and psychological well - being among call center employees.

The evidence linking workplace bullying to unsavoury outcomes like anxiety, depression, and burnout is aichey (Zapf et al., 2020). Victims of workplace bullying report lower levels of job satisfaction and higher psychological distress (Salin & Hoel, 2013). With regards to mental health disorders, Verkuil et al. (2015) conducted a meta-analysis and determined that prolonged exposure to workplace bullying increases the possible likelihood. In the case of call centers where employees frequently experience customer hostility and performance pressure, workplace bullying worsens the psychological well-being resulting in lower stress levels (van den Broeck et al. 2017).

The ways in which individuals cope with workplace bullying is an important determinant of how individuals deal with the situation. Active attempts to deal with the bullying behaviors, called problem focused coping, contributes to better

psychological adjustment (Lazarus, 1999). Comparatively, emotion focused coping, which is avoidance or denial, can provide temporary relief but often has long term negative result (Bond et al., 2010). It has been shown in studies that employees that depend on social support and coping mechanisms can manage the effects of workplace bullying better (Hogh et al., 2011).

Looking at workplace bullying research without paying special attention to it and the call center employees, which are the most sensitive to workplace stress and mistreatment, makes one miss the crux of the matter. Studies of the effects of workplace factors on health recovery from work have generally not focused on call center agents, whose performance is tightly monitored, with no autonomy in the job (Grandey et al., 2007). Secondly, coping strategies are known to be important in stress management, while there is no research on ways to diminish the psychological consequence of workplace bullying in call centers. Given that these relationships can be understood, targeted interventions to support employees' wellbeing may be based on these relations. The purpose of this study is to specifically: Examine the relationship between workplace bullying and psychological wellbeing for call center employees. This empirical work contributes to the expanding area of occupational psychology which is exploring the impact of workplace bullying on call center employees' psychological wellbeing.

Method

The research for this study followed a correlational research design with regard to the relationship between workplace bullying, self-coping strategies and psychological wellbeing in the call centre employees. A quantitative approach was adopted and the use of validated psychometric scales were made to ensure reliability and validity of findings. The sample was 400 call center employees (361 males, 39 females, 19–35 years as mean age, $M = 22.62$, $SD = 1.724$). Purposive sampling was used to select participants, with emphasis on employees in high stressful customer service role. To participate, participants had to be of the stipulated age range, be employed in a call center, and active at the time of the invitation. Due to the need for homogeneity in the sample, those with physical or psychological (psychological sequelae) disabilities were excluded.

Demographic survey such as age, gender, marital status, working years, work shift, family income and medical history was done on participants. Thus, study variables were assessed using three standardized scales namely Workplace Bullying Scale (Anjum Ambreen et al.). Workplace bullying is measured with this 21-item scale with two sub-dimensions of work related bullying (10 items; $\alpha = 0.87$) and person related bullying (11 items; $\alpha = 0.89$). Reliability of the total scale was 0.87 and items were rated on a 5 point Likert scale. Coping Strategies Scale – 26 items ($\alpha = 0.91$); emotion focused coping

– 4 items and social support coping – 3 items ($\alpha = 0.80$); Coping Strategies Scale (Chesney Margaret, 1996). Responses to the scale were gathered using a Likert scale format and the overall reliability of the scale was 0.90. The Psychological Well-Being Scale (Ryff, 2005) 42 items ($\alpha = 0.72, 0.66, 0.60, 0.65, 0.56, \text{ and } 0.63$, respectively) for six dimensions: self-acceptance, autonomy, positive relationships, environmental mastery, purpose in life, and personal growth. Responses were recorded on a 6 point Likert scale and the overall reliability of the scale was 0.83. The approval was granted by ethical approval from the Faculty of Humanities, and official permission was received from call centre management. All participants gave informed consent to participate in the study on a voluntary basis and thus also consented to data confidentiality. The questionnaires were personally distributed by the researcher to employees and the employees took 15 to 20 minutes to fill them. In order to collect this data, I performed data collection in a variety of call centers. All 400 surveys were recovered and confirmed as valid for analysis.

SPSS version 25 was used for data analysis. Demographic as well as study variables were summarized with descriptive statistics. The internal consistency of the scales was measured using Cronbach's alpha. Workplace bullying, coping strategies and psychological well-being were examined using Pearson correlation analysis. Bullying's predictive role with regard to coping strategies and psychological well-being was assessed by regression analysis. Independent samples t-tests were also run to determine how study variables varied from one demographic category to another.

Results

Table 1: *Demographic Characteristics of the Sample (N=400)*

<i>Variables</i>	<i>f (%)</i>	<i>M (SD)</i>
<i>Age (in years)</i>		22.62(1.72)
<i>No. of sibling</i>		4.13(2.209)
<i>Gender</i>		
<i>Men</i>	361(90.3)	
<i>Women</i>	39(9.8)	
<i>family Income (PKR)</i>		68370.0(33397.9)
<i>Family System</i>		
<i>Nuclear</i>	209(50.3)	
<i>Joint</i>	191(47.8)	
<i>Work duration</i>		
<i>Month</i>	212(53.0)	
<i>Years</i>	188(47)	
<i>Marital status</i>		
<i>Single</i>	388(97)	
<i>Divorced/separated</i>	1(0.3)	
<i>Married</i>	11(2.8)	

<i>Employment status</i>		
<i>Part time</i>	148(37)	
<i>Full time</i>	144(36)	
<i>Self</i>	108(27)	
<i>Shift preferences</i>		
<i>Morning</i>	16(4)	
<i>Night</i>	210(52.5)	
<i>Evening</i>	174(43.5)	
<i>Location</i>		
<i>Near to home</i>	205(51.2)	
<i>Far away from home</i>	195(48.8)	
<i>Position in organization</i>		
<i>Boss</i>	18(4.5)	
<i>Employ</i>	382(95.5)	
<i>Nature of organization</i>		
<i>Local</i>	208(52)	
<i>Multinational</i>	192(48)	
<i>Birth order</i>		
<i>Frist born</i>	144(36)	
<i>Middle born</i>	145(36.5)	
<i>Last born</i>	111(27.8)	
<i>Religion</i>		
<i>Muslim</i>	394(98.5)	
<i>Non-Muslim</i>	6(1.5)	
<i>Family background</i>		
<i>Urban</i>	187(46.8)	
<i>Rural</i>	213(53.3)	
<i>Physical illness in previous5 years</i>		
<i>Yes</i>	20(5.0)	
<i>No</i>	380(95)	
<i>Psychological illness in previous5 years</i>		
<i>Yes</i>	14(3.5)	
<i>No</i>	386(96.5)	

Note. For gender; 1= Male and 2= Female; for family system; 1= Nuclear and 2= Joint; For family background; 1 = urban and 2 = rural Birth Order: first born = 1, middle = 2 , youngest = 3, Employment status: employed = 1 unemployed = 2 self= 3 Marital status: married = 1, single = 2,divorced/separated=3,religion; muslim=1, non-muslim=2, position in organization; boss=1,employ=2, organization nature; local=1,multinational=2,work duration;months=1, years=2, location; near to home=1, far away from home=2, shift preferences; morning=1, evening=2, night=3, Physical illness in previous5 years; yes=1,no=2, Psychological illness in previous5 years; yes=1, no=2.

Demographics of the sample are presented in table 1, with 90.3% male (SD = 1.72, 97% single, 22.62 years (SD = 1.72)) Full-time (37%) or part-time (36%) were most common types of employment with almost a third (27%) self-employed. Nuclear (50.3 percent) and joint families (47.8 percent) were nearly so divided. In addition, a large number of employees (52.5%) worked night shifts, and 43.5% worked evening shifts.

Table 2

Descriptive Statistics of Study Variables (N=400)

Study Variables	No. of Items	A	M	SD	Range
Workplace bullying	21	.89	45.01	14.96	23-86
Self-coping	26	.89	168.17	38.04	87-233
Psychological wellbeing	18	.88	68.02	6.59	41-86

Note. M=Mean, SD=Standard Deviation

Descriptive statistics and reliability coefficients for the variables studied are given in Table 2. The mean of the Workplace Bullying Scale was 45.01 (SD = 14.96) and the internal consistency of the scale was high ($\alpha = 0.89$). The mean of Self-Coping Scale was 168.17 (SD = 38.04), $\alpha = 0.89$, and Psychological Well-Being Scale mean 68.02 (SD = 6.59), $\alpha = 0.88$. All scales have high reliability, according to the Cronbach's alpha values.

Table 3

Correlation of Demographics and Study Variables

	2	3	4	5	6
1. Age	-.05	.05	.26**	.03	-.01
2. Gender	–	-.04	.04	.05	.00
3. Shift time		–	-.01	.01	-.06
4. Workplace bullying			–	.12*	.17**
5. Psychological wellbeing				–	.07
6. Self-coping`					–

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Table 3 shows correlation analysis results. Workplace bullying had a positive significant correlation with age ($r = .26$, $p < .01$). A positive relationship between workplace bullying and self-coping ($r = .12$, $p < .05$), psychological wellbeing ($r = .17$ $p < .01$), and no significant relationships between self-coping and psychological wellbeing ($r = .07$, $p > .05$).

Table 4

Regression of workplace bullying, self-coping, on psychological well-being (N =4 00)

	Model for Psychological well being		t	Sig.
	B	Std. Error		
(Constant)	133.89	3.6	37.07	.00
Workplace bullying	-.08	.01	-4.6	.00
Self-coping	-.40	.04	-8.4	.00

The regression analysis results from Table 4 show that workplace bullying had a negative effect ($B = -0.08$, $p < .01$) on psychological well-being and a negative effects ($B = -0.40$, $p < .01$) on psychological well-being as well. The results of the independent t test on workplace bullying, self-coping and psychological wellbeing between the urban and rural participants are presented in table five, which indicates no significant differences between the urban and rural participants on all the variables of the study.

Table 5

Mean difference between urban and rural area of people in workplace bullying, self-coping and psychological wellbeing (N=400)

	Urban (n = 187)		Rural (n = 212)		t(df)	p
	M	SD	M	SD		
Workplace bullying	42.13	13.97	43.64	14.39	-1.06(397)	.28
Self-coping	169.48	37.07	167.01	38.92	.645(398)	.51
Psychological well being	68.06	7.05	67.99	6.20	.104(397)	.91

In table t-test of the independent samples examination of differences in workplace bullying, self-coping, and psychological wellbeing between urban and rural employees is presented in able 5. It is found that the results are statistically non-significant for urban ($M = 42.13$, $SD = 13.97$) compared to rural ($M = 43.64$, $SD = 14.39$) participants in workplace bullying ($t(397) = -1.06$, $p = .28$). Likewise, the urban ($M = 169.48$, $SD = 37.07$) and rural ($M = 167.01$, $SD = 38.92$) participants did not differ significantly in scores of self-coping ($t(398) = .645$, $p = .51$). Also, there was no significant difference in urban ($M = 68.06$, $SD = 7.05$) and rural ($M = 67.99$, $SD = 6.20$) employees on psychological wellbeing ($t(397) = .104$, $p = .91$).

Such findings indicate the employees' geographical background does not make a great difference in the workplace bullying, self-coping mechanisms and psychological

wellbeing. Whether an urban or rural setting, employees experience workplace bullying and their psychological response to the environment appears similar. This points out that workplace bullying is a problem that exists in call center worldwide because employees are not spared, and intervention strategies can be used appropriately towards all demographic groups.

Discussion

The present study was intended to investigate the relationship between workplace bullying, self-coping and psychological wellbeing in call center agent. For this purpose Ambreen Anjum workplace bullying scale (WBS), Chesney Margaret self-coping scale (SCS) and Ryff's Psychological Well Being Scale (PWBS) were utilized. It was hypothesized that Workplace bullying, self-coping is likely to predict psychological wellbeing in call center agents. Secondly there will be a significant predictive association between psychological well-being and workplace bullying in call center agents. Thirdly there will be a significant positive association between coping strategies and the psychological well-being of call center agents. Fourthly there will be a significant negative association between workplace bullying and the psychological well-being of call center agents. Pearson correlation and regression was assessed through SPSS. This Chapter includes discussion of findings in the light of previous literature review and relevant Researches. Moreover, conclusion, limitations, suggestions and implications about the current study are given in the end of this chapter.

The prediction regarding the impact of workplace bullying on the psychological wellbeing of call center agents was validated. The research outcome depicted that indeed workplace bullying positively predicts psychological wellbeing of call center agents. In previous studies like Walker's in 2020, he reported that bullying at work is an all pervasive issue and being bullied has serious long lasting systemic and personal consequences for the individuals bullied and for their workplace's which is organizationally. There is a plethora of literature which highlights the bullying at work and beyond severe and chronic traumatic outcomes to the bullied like mental health disorders and in some rare cases even suicidal tendencies. The structure of emergency service organizations is purposefully designed with a hierarchy that commands power and can heighten the susceptibility to bullying. It is already established through literature that the percentage of workplace bullying among first responders in emergency service organizations is in excess of 60 percent (which is six times the national average). It is well accepted that because of the already heightened stress levels associated with being a first responder, the existence of bullying among first responders is common along with the sustained damage to their physical, mental, and overall health that constitutes a crisis to the CPS community.

Kanami Tsuno (2022) conducted research on organizational outcomes of witnesses and physical health outcomes of victims and witnesses were revealed, there were many reports on mental health outcomes of workplace bullying victims. It follows that this study thus aimed to investigate whether there is a relationship between bullying victimization through witnessing and physical and mental health outcomes as well as with organizational outcomes including sickness absence, work performance and job satisfaction. Bullying witnessed was significantly related to psychological distress, physical complaints, subjective poor health, physician-diagnosed mental disorders and job dissatisfaction.

It is hypothesized that there is no relationship between self-coping and psychological wellbeing which shown by our findings and by previous research in 2000 R.G Barron, M.M Casullo and J.B Verdu revealed that Adolescents use of Coping strategies may influence their psychological development. This research bit focuses on the relations between coping and psychological well-being and the influences of age and sex there on. The sample was derived from 417 adolescents aged 15 to 18 years. Using ACS (Frydenberg & Lewis, 1996a) to evaluate coping and the BIEPS (Casullo & Castro, 2000) to evaluate wellbeing were used to evaluate the strategies. The results also demonstrated that there is not a tight relationship between age and coping and psychological wellbeing. For gender, adolescent women employed a wider range of coping skills and, in fact, had less skill at coping with problems than men. However, between age and gender, and between number of adverse life experiences and level of psychological well-being, the level of psychological wellbeing emerged as the more successful way of establishing clearer differences with respect to the particular coping strategies used. These attributes, capacities and their combination seem to be very important to take into account in the psychological coping profile of the call centre agent.

Navill and Havercamp (2019) found in their study that social support-seeking coping did not mediate the effect of job stress on the psychological well-being of workers. There was a high correlation of social support and psychological wellbeing which affected job satisfaction. Workers require resources to recover physical and psychological health, and social support from co-workers and families greatly aids in the recovery of psychological well-being. Therefore, there is need to focus continuous research on social support response for home-visiting workers. These studies focus on some regions of callers, and so caution needs to be made on when generalizing to all call center workers.

The existing literature on coping with bullying at the workplace reveals that very few women seek assistance from officials to help with workplace bullying. Instead, they seem to resort to optional coping strategies like absenteeism, being late to work, or

settling for subpar employment. Some of the responses involve evading the perpetrator and attempting to placate the situation without fighting back. Research suggests that the more direct and assertive the coping strategy is, the less frequently women employ that strategy (Fitzgerald, Swan, and Fischer, 2018). A considerable proportion of bullied women turn to peers or family for social assistance. Furthermore, women who have been victims of sexual harassment might be more likely to experience difficulties within interpersonal associations (Paludi, 2006).

There has been extensive literature and models regarding workplace bullying issues with the inclusion of topics related to social support, coping strategies, and psychological wellbeing. However Fitzgerald, Hulin, and Drasgow's model of antecedents and consequences of harassment, nevertheless, is true to the current study as it explains poor psychological health as a major consequence of workplace bullying and equally quote the common patterns of coping strategies that women usually employ after facing harassment. As the objective of current study is to determine the relationship among workplace bullying, coping strategies and psychological wellbeing, so the model is best related to the research topic.

The overall purpose of this study was to predict the relationship of workplace and self-coping with psychological wellbeing as well as combinations of the factors, contributed to predicting psychological. Findings suggested that workplace bullying play an important role in employee psychological wellbeing and that coping appeared to be used less by the current sample.

Limitations and Recommendations

This research contributes to the understanding of the relations between bullying at the workplace, coping strategies and psychological wellbeing, however, it includes some limitations which, in the future, should be addressed in research. The first limitation of the study was its reliance on self-reported data, which may be biased as employees might under report or overestimate their work place bullying experiences. Future studies could involve hiring employees, conducting qualitative interviews or building longitudinal designs to better understand employees' experience over time.

The second is focused on call center employees, and thus it has limited generalizability to other industries. Future research should focus on the workplace bullying across a variety of occupational settings, such as those with high job demands, for example, the healthcare and customer service industries. Furthermore, additional information could be gained by analyzing moderating variables such as social support, leadership style, and organizational policies, how they affect employees differently when there is workplace bullying.

Conclusion

This study results suggest that employees' psychological wellbeing is significantly reduced by workplace bullying and whereas coping self-strategies may not relieve employees from the negative effects of workplace bullying. This implies that organizations should not depend solely on the employees' coping means, but implement them actively to curb bullying and also support employee physical health. Future research should look also at other work place factors that support employees' capacity for managing bullying well, as well as evidence based interventions to create healthier work environments.

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