

PSYCHOSOCIAL RISK FACTORS AND THE IMPACT OF WORKING HOURS STRESS AMONG HOTEL RECEPTIONISTS IN BAIXO ALENTEJO (PORTUGAL)

Vera Mónica Sampaio¹, vera.ameixa@hotmail.com
Marta Isabel Casteleiro Amaral², marta.amaral@ipbeja.pt
Carla Maria Lopes Santos² carla.santos@ipbeja.pt

1. CTGA - Centro Tecnológico de Gestão Ambiental, 3045, Coimbra, Portugal.
 2. Docente Instituto Politécnico de Beja, CiTUR (Centre for Tourism Research Development and Innovation), 7800, Beja, Portugal.
1. Docente Instituto Politécnico de Beja, 7800, Beja, Portugal.

Submitted: 19/09/2024. Accepted: 10/12/2024
Published: 28/03/2025

ABSTRACT

Purpose: The aim of this article is to present an analysis of the level of work-related stress among receptionists at tourist resorts in the Baixo Alentejo region who work shift and night shifts, including consideration of the possible impact of the COVID-19 pandemic as a stress factor.

Methodology/Approach: The empirical research was based on a quantitative methodology, with the application of a questionnaire structured in three parts: sociodemographic characterization; Occupational Stress Questionnaire General Version (QSP-VG); issues related to the impact of the COVID-19 pandemic. A total of 30 receptionists were surveyed, with a response rate of 67% (20 respondents).

Findings: The results obtained from the study led to the conclusion that the main risk factors for work-related stress include: (i) excessive and/or overloaded working hours; (ii) lack of stability in marital and/or personal life; (iii) management of clients' serious problems; (iv) lack of time to carry out professional tasks properly and to maintain good relationships with those closest to them.

Research Limitation/implication: The study results present some limitations related to the sample size and also to the typology of the selected tourist enterprises.

Originality/Value of paper: The results may constitute an important basis for hotel managers, helping them to implement measures to reduce stress and improve the working environment for the receptionists in those establishments.

KEYWORD: accommodation, psychosocial risks, work stress, working hours, tourism.

FATORES DE RISCO PSICOSSOCIAL E O IMPACTO DO HORÁRIO DE TRABALHO NO STRESSE DOS RECEPCIONISTAS DE HOTEIS DO BAIXO ALENTEJO (PORTUGAL)**RESUMO**

Objetivo: Com o presente artigo pretende-se apresentar uma análise do nível do stress laboral em rececionistas de empreendimentos turísticos, do Baixo Alentejo, que trabalham em horário laboral por turnos e noturno, incluindo a consideração do eventual impacto da pandemia COVID 19, como fator de stress.

Metodologia/Abordagem: A pesquisa empírica baseou-se numa metodologia quantitativa, com a aplicação de um inquérito por questionário estruturado em três partes: caracterização sociodemográfica; Questionário de Stress Ocupacional Versão Geral (QSP-VG); questões relativas ao impacto da pandemia por COVID-19. Foram inquiridos 30 rececionistas, tendo-se obtido uma taxa de resposta de 67% (20 inquiridos).

Resultados: Os resultados obtidos com o estudo permitiram concluir que os principais fatores de risco para o stress laboral incluem: (i) excesso e/ou sobrecarga horária; (ii) falta de estabilidade na vida conjugal e/ou pessoal; (iii) gestão dos problemas graves dos clientes; (iv) falta de tempo para realizar adequadamente as tarefas profissionais e para manter uma boa relação com as pessoas mais próximas.

Limitações da pesquisa/implicações: Os resultados do estudo apresentam algumas limitações subjacentes à dimensão da amostra e também à tipologia dos empreendimentos turísticos selecionados.

Originalidade/Valor do artigo: Os resultados podem constituir uma importante base para os gestores de hotéis ajudando-os a implementar medidas para reduzir o stress e melhorar o ambiente de trabalho para os rececionistas destes empreendimentos.

PALAVRAS-CHAVE: alojamento, riscos psicossociais, stress laboral, horário de trabalho, turismo.

1. INTRODUCTION

Psychosocial risks and work-related stress are some of the most challenging health and safety at work, as they have a significant impact on the health of people, organizations and economies. In the globalized world, workers are suffering physically and psychologically; they spend many hours of their day at work and in organizations, dealing with a range of risk factors that can influence their behavior.

Working hours, and in particular, shift and night working hours, have increased especially in the last decade, because of society's demands for more and more services that were available at all hours, particularly in terms of health services, telecommunications, correspondence, shopping mall, petrol stations, tourism and leisure services (Sampaio, 2021).

Hospitality industry has always been criticized because of its working conditions which includes low salaries; long working hours (*work intensity*) and low work time quality of the tourism jobs which is associated with the continuous relationship with customers, irregular and unsocial hours, and night work and weekends; low job security; scarcity of promotional possibilities; contract types (Gjerald et al, 2023; Díaz-Carrión et al, 2020). Working in the tourism and accommodation sector, dedicating oneself completely to the well-being of tourists, providing them with unforgettable days, and working nights or shifts, are aspects that end up having an influence on the daily fatigue of their professionals, since the majority of tourist enterprises, particularly in the hotel industry, work 24 hours a day, every day. In tourism industry, more than two thirds of employees do shift work - often including night work, weekend or holiday work (Hunger & Seibt, 2022). These working conditions, when not adapted to human beings, generate an excessive stress factor (Souza & Cobêro, 2013). So, working in hospitality establishments involves high levels of stress, partially due to the anti-social shift rotations and the high levels of emotional labor needed. (Caiwei et al, 2021).

Shift work and night work are also intrinsically linked to the profession of receptionists, especially in the hospitality industry, as it is a sector that requires continuous availability and the control of work processes during the 24 hours a day. If this feature of the organization of this work already assumes this psychosocial risk factor, it may have been exacerbated by the COVID-19 pandemic. In fact, the pandemic context and the lockdown periods imposed had an impact on the tourism sector, characterized by: (i) cancellations of bookings; (ii) insolvencies; (iii) more precariousness insolvencies; (iii) more precarious work; (iv) strict hygiene rules; (v) anxiety due to lack of knowledge about the disease, etc.

There was also a situation where most national (and international) tourism companies, especially in hospitality, restaurants, entertainment, etc., closed their businesses due to the COVID-19 outbreak; and restrictive measures were approved and imposed by the Government (Gonçalves, 2020; Zenker et al. 2021). The highly contagious nature of COVID-19 created insecurity and fear among people, leading to even fewer travels being made for that very reason (Zenker et al., 2021).

The research presented in this article was designed to investigate the relationship between shift and night work schedules and the prevalence of stress among professionals in the accommodation sector, with a specific focus on hotel receptionists. The study purpose is particularly pertinent and challenging for receptionists in hotel enterprises, whose profession already entails working conditions characterized by shift and night work schedules. During the global pandemic, the situation of these workers was further exacerbated, with significant changes in the sector associated with the impacts of the disease that may have placed even greater emphasis on their levels of work stress.

The investigation had two principal objectives. The first was to identify the main factors contributing to occupational stress in hotel receptionists in Baixo Alentejo (Portugal) who work shifts and night shifts. The second was to analyze the impact of the pandemic on the stress levels of

professional receptionists. The main results of this study intended to identify strategies for the prevention and monitoring of the physical, mental, and social well-being of all workers.

2. LITERATURE REVIEW

Workers are increasingly required to fulfil different roles. Labor employment relationships are becoming more precarious, and the organization of working time has undergone significant changes, particularly with regard to working hours. In this context, the individual is confronted with diverse experiences, with relationships whose impact on the body and mind vary somewhat. Nowadays, stress is one of the biggest causes of work-related illness.

Psychosocial factors are defined as conditions present in a labor situation that are directly related to working conditions and the structure of the company. These factors have the potential to affect the well-being and physical, psychological, and social health of the worker, as well as the development of the work carried out by the employee in the company. It can therefore be seen that job satisfaction is an increasingly difficult to achieve for a significant number of workers.

2.1. Psychosocial risk factors

The International Labor Organization (Organização Internacional do Trabalho [OIT], 2020) considers that psychosocial factors are the interactions that occur between the work environment, work content, organizational work content, organizational conditions and the abilities, needs, culture and living conditions outside the workplace. Thus, the balance established between these relationships influences health, performance, and job satisfaction (Freitas, 2016). Psychosocial risk factors are defined as the conditions present in work environment that either facilitate or hinder work activity, as well the quality of life and workers' health. They are usually related to working conditions, hierarchy, task performance and the environment. They are also a source of occupational stress and have the potential to cause psychological, physical or social damage to individuals (Gil-Monte, 2009, 2012; Jiménez, 2011; Rios, 2008 cited by Pinho, 2015).

Psychosocial risk factors can be categorized according to two different variables (EU-OSHA, 2020): (i) factors related to the demands of the job itself (e.g. workload and pace of work, work content, working hours, control, environment and equipment, organizational culture and function, interpersonal relationships at work, etc.); (ii) factors related to the demands of the work itself etc.); (ii) organizational factors, i.e. how workers are part of a group with its own rules and codes of conduct. The judgement of others regarding the quality of one's work is a significant factor in the work activity, as it affects the individual's mobilization and subjective investment. This subjective dimension plays a decisive role in the judgement of one's work.

The Directorate-General for Health (Direção Geral de Saúde, 2021) defines psychosocial risk factors as those that are perceived by the worker to be important to them; that involve demands that exceed their resources (e.g. knowledge, skills or possibilities), and are perceived as being out of control. In particular, when there is a co-existing perception of poor social support, which generates relatively persistent negative emotions, the aforementioned factors are particularly likely to be perceived as uncontrollable.

Psychosocial factors are those that impacts on mental, physical, and social health and are caused by working conditions and by organizational and relational factors subject to interactions with mental functioning (Antunes et al, 2023). Existing literature presents different categorizations of psychosocial risk factors. According to the well-known six dimensions of Gollac and Bodier (2011, cited by Costa, 2015), the risk factors, if deficient in some way, are as follows: (i) Work

intensity and working time (work pace complications; demands to fulfil sometimes vague objectives; work duration and working time; reconciling work with personal life); (ii) Emotional demands (relations with the public such as dealing with angry customers; work that involves not showing feelings; work that involves complex tasks); (iii) Lack of autonomy (e.g. the possibility of making decisions, having autonomy in the tasks and objectives to be met); (iv) Social relationships at work (relationships with colleagues or superiors; physical or non-physical violence); (v) Conflicts of values (e.g. ethical conflicts, situations in which the worker has to do something against their will); (vi) Insecurity in the work situation, including concerns about job security, salary, and career advancement.

Another classification, proposed by Cox in 1993 (cited by Chagas, 2015), is as follows: (i) Work content (lack of variety, meaningless work, overqualification); (ii) Work overload and pace (workload – excessive or reduced; pace of machines; time pressure; constant subjection to deadlines); (iii) Autonomy/control (weak participation in decision-making, no control of rhythms, shift work); (iv) Work equipment (inadequate equipment, no maintenance or lack of resources, lack of space, poor lighting, excessive noise, among others); (v) Organizational culture and function (poor communication, lack of definition or consensus on objectives); (vi) Interpersonal relationships at work (physical or social isolation, poor relationships with managers and colleagues, lack of social support); (vii) Role in the organization and responsibilities (ambiguity of roles/functions, type of responsibilities for people); (viii) Career development (career stagnation or uncertainty, lack of progression, insecurity, reduced social value of work); (ix) Work-family reconciliation (conflict between professional and non-professional activities); (x) Working hours (shift work, night work, inflexible, unpredictable and/or long hours).

2.1.1 Working hours

According to Cox (1993 cited by Chagas, 2015), working hours are one of several psychosocial risk factors listed by the author, which, when deficient or in poor condition in the workplace/organization, can affect the physical and psychological state of the worker.

The authors Leka, Griffiths and Cox, 2003 (cited by Leka & Jain, 2010) identify working conditions that may be considered risk factors, including shift work, night work, Sunday work, inflexible and rigid working hours, unpredictable working hours, and long working hours that do not allow for socialization, or are incompatible with maintaining well-being.

While the term shift work is defined as "any organization of teamwork in which workers occupy the same workstations at a given pace, including rotating, continuous or discontinuous, and may work at different times over a given period of days or weeks" (art. 220 of the Labor Code); the term night time is defined as "work performed during a period of at least seven hours and no more than eleven hours, which encompasses the interval between midnight and 5 a.m." (art. 220 of the Labor Code).

For many decades, the risks associated with shift work were a forgotten reality, partly due to the lack of results showing a cause-and-effect relationship between this working pattern and workers' health. Shift work is now considered one of the most challenging factors in occupational health and safety. Not only do the risks affect workers' health, but they also clearly show that they are the main cause of their work-related stress. (Dias, 2015).

Long and unpredictable working hours lead to greater emotional exhaustion and a weakened sense of professional fulfilment and affect workers' health and well-being. Regardless of how they are organized, working hours (shifts and night shifts) can lead to physical and mental health problems and disrupt the social and family environment of those who work in this context (Araújo, 2020).

The practice of shift work and night shifts has an impact on workers' lifestyles, forcing them to adapt their biological rhythms to the inversion of activity and rest periods, with physical and psychological consequences (Costa, 2010; Baker, Ferguson & Dawson, 2003; Gadbois, 2004; Campos, 2014): (i) Sleep disturbances, fatigue and altered circadian rhythms (the forced alteration of the natural diurnal rhythm of human beings can cause great physiological stress and health problems; the absence of natural light and the reduced secretion of melatonin affect the quality of sleep, while shift work, especially at night, leads to fatigue and lack of energy in the body); (ii) Mental health problems (frequent emotional imbalances among workers, who are most susceptible to irritability, anxiety, depression and have difficulties in reconciling work life with family and social life); (iii) Physical illnesses (the immune system is more susceptible to disease due to the body's inability to regulate itself effectively, which can result in a range of complications, including digestive, cardiac and cardiovascular issues.); (iv) Problems with family and social relationships (shift work sometimes leads to incompatible schedules for spending time with family and friends, in particular because of the impossibility of socializing at the end of the day and at weekends).

2.2 Psychosocial risks and work stress

In recent decades, significant changes have taken place in the world of work (closely linked to the nature, organization and management of work), which have resulted in emerging risks and new challenges in the field of occupational health and safety, among them, the so-called psychosocial risks, which can lead to a serious deterioration in the physical and mental deterioration of workers' physical and mental health (Pinho, 2015).

Psychosocial risks arise from deficiencies in the design, organization and management of work; from a problematic social work context, and can have negative psychological, physical and social effects such as work-related stress, burnout or depression (EU-OSHA, 2013). According to the International Labor Organization (OIT, 1986), psychosocial risk is the likelihood of an adverse effect on a worker's mental, physical and/or social health, and its severity, arising from exposure to psychosocial risk factor(s) in the workplace.

The Department of Safety and Health at Work of the Portuguese General Workers' Union (UGT) (2014) presents the following psychosocial risks: (I) occupational stress; (II) moral harassment; (iii) sexual harassment; (iv) violence at work; (v) addition to work). Among the types of psychosocial risk presented, occupational or labor stress, i.e. work-related stress, can be seen as a pattern of emotional, cognitive, behavioral and physiological reactions to adverse components of work content, organization and the work environment (European Commission 1999 cited by Gonçalves, 2014).

Work-related stress is a strong negative emotional reaction to work conditions (Freitas, 2016). It is associated with aversive, negative and/or unpleasant emotional states that individuals experience in their workplace and is typically associated with negative affectivity which has an impact on the well-being of employees.

The existing literature identifies potential stressors at work. Sutherland and Cooper (1990, cited by Gonçalves, 2014) propose a model which considers several factors, including the individual's own characteristics. These include individual's personality type, their tolerance of ambiguity, and their ability to cope with change. The aforementioned factors include motivation, overwork, time pressures, decision-making, and unpleasant physical working conditions. The role of the organization is also a significant contributor to stress, with factors such as role ambiguity, non-participation in decision-making, and responsibility being particularly important. Additionally, the professional career structure, including the prospect of advancement, promotion/demotion, and insecure employment, can also contribute to stress. Finally, the relationships within the company, including poor communication, lack of support, and conflict, can also be significant sources of stress. The relationship with one's immediate superior, colleagues, or subordinates; difficulties in

delegating responsibilities; the company's relations with the outside world (e.g. company demands versus family; company demands versus personal interests); and the structure and climate of the organization (e.g. lack of effective supervision, company policy, restrictions on behavior).

It can be argued that irregular working hours, which are a defining feature of many modern workplaces, can also be considered a stressor. This is because they can impact on biological health (e.g. sleep cycles) and psychosocial and emotional health. For example, they can lead to difficulties in reconciling family and professional life or interpersonal relationships.

According to Leka et al. (2003), the consequences of work stress on the individual/worker include: (i) behaviors and feelings of negative emotion, leading to low motivation, job dissatisfaction, absenteeism and presenteeism, and addictive behaviors (ii) physiological illnesses (e.g. increased blood pressure, heart rate, insomnia, migraines, etc.), (iii) psychological disorders (e.g. depression, anxiety, passivity/aggressiveness, impulsiveness, low self-esteem).

2.3 Hotel receptionists, shifts and working hours

In the tourism sector, particularly in hotels, the receptionist is the professional who manages all the requests and booking systems, as well as welcoming clients and applying customer service techniques to clients who often have different nationalities. They are also the professionals who help visitors discover the tourist sites and services they need. Another of their duties is to manage and resolve complaints in order to improve customer satisfaction and provide opportunities for improvement at the hotel (Hospedin, 2020). In addition to direct client contact, the role of the hotel receptionist encompasses a technical aspect, including the ability to operate the technological equipment (software) available at the reception desk. Furthermore, the receptionist is responsible for controlling, storing and dispensing materials at the reception area.

In the accommodation sector, and specifically in relation to hotel establishments, the reception department is typically operational 24 hours a day. Consequently, it is necessary to establish work shifts, which may extend beyond the recommended limits. These can be fixed (i.e. the worker always works the same hours) or rotating (i.e. shifts in which the worker works different hours, with more or less alternation). Shift work in the hotel reception area is organized differently from the usual organization of working time and is carried out by different successive groups. In accordance with Soares (2013), the hotel industry adheres to a practice of three shifts, as follows: (i) 1st shift: 7am to 3pm; (ii) 2nd shift: 3pm to 11pm; (iii) 3rd shift: 11pm to 7am.

2.4 Effects of the COVID-19 pandemic on the hotel industry

The COVID-19 pandemic has brought about a significant disruptions and challenges to hotel operators (Milovanovic, 2021) and, in general, a new way of looking at tourism and hospitality. But mainly it significantly affected demand for hotel services and guests' behavior, but also financial stability of hotel enterprises and hotel employees who had to face double fear – the fear of infection and the fear of losing job (Milovanovic, 2021, p.571).

Hotel managers had to adapt to a new reality, new for everyone, and rethink the objectives and even the mission of their establishments (Gomes, 2021). With the increase in COVID-19 infections, some tourist resorts not only suffered temporary closures, but also served to help the country in this delicate situation, making their spaces available to accommodate health professionals on the front line against COVID-19 who couldn't go home; and even COVID-19 patients who needed accommodation because their place of residence was being disinfected (elderly people in nursing homes); or for other situations that justified it.

The pandemic has effectively changed the reality of hotel management, bringing with it significant impacts, namely: (i) the loss of customers; (ii) changes to the physical spaces of accommodation centers, which were forced to adapt at the request of the Government and the

General Directorate of Health, due to the number of infection cases; (iii) working environment of the employees (including working hours, income, lack of clients); (iv) management (prevention measures, reinvention through marketing and sales to remain active in the market, among others) (Laranjeiro, 2021).

Apart from other modern organizational changes that are seen as job stressors (i.e. new technological solutions), COVID 19 appeared as a significant job stressor as it directly affected job insecurity and employees' fear of getting infected (Milovanovic, 2021). In the tourism industry, the ongoing global pandemic had a profound impact on the well-being of workers with the hospitality industry bearing the brunt of the crisis. According to Meirinho (2021), in addition to the difficulty in managing emotions already associated with stress for the community in general due to the severity of the consequences of the pandemic, there are other factors that can lead to psychosocial risks for employees in this sector, including: (i) job insecurity/risk of unemployment; (ii) temporary closure of imposed businesses (e.g. during lockdown); (iii) specificities of workers with roles in emergency response and services; (iv) fear of being left in the dark; (v) lack of access to personal protective equipment (PPE) and assistive devices; (vi) working in environments with reduced capacity to implement effective security and health measures; (vii) increased workload (staff reductions, longer hours and consecutive shifts); (viii) reduced rest periods; (ix) increased violence and harassment (both physical and psychological); (x) increased social stigma and discrimination (due to perceived association with the disease).

The author Meirinho (2021) argues that these factors can lead to negative consequences for workers' mental health, including: (i) increased fatigue and stress; (ii) adverse impact on mental health and well-being; (iii) elevated risk of accidents and accidents at work; (iv) elevated stress, anxiety, depression and burnout; (v) reduced motivation; (vi) low compliance with safety measures (higher incidence of accidents at work).

3. MATERIAL AND METHODS

The study was based on a quantitative methodology, employing a systematic process of data collection. This empirical methodology involved the gathering of observable and quantifiable data, as well as descriptive characteristics. The initial decision was to conduct an exploratory literature review on the problem, based on books, articles, dissertations and official statistics.

Following a comprehensive literature review, a number of hotel establishments in Baixo Alentejo were contacted in person and by telephone in order to obtain authorization from the business owners to administer a questionnaire survey to their employees.

Therefore, the target population is made up of reception staff working in shifts in tourist establishments, namely hotels (Decree-Law No. 80/2017 of 30 June) that meet the criteria of 3 or 4 stars, including rural hotels, with 24-hour reception, located in the geographical area of the district of Beja. To delimit the target population, a database of tourist establishments of the above-mentioned typologies located in the Baixo Alentejo region was used (according to Turismo de Portugal Office and the National Tourism Register - RNT).

To collect the data, and with the aim of knowing and analyzing psychosocial risk factors and work stress in professional hotel receptionists with shift work, a questionnaire survey was used. The questionnaire was divided into three parts. In the first part, a socio-demographic questionnaire; in the second part, the Questionnaire on Stress at Work General Version (QSP-VG) developed by Gomes (2010) on the basis of the original works of Cruz and Melo (1996), Gomes (1998) and Melo and Cruz (2000). The questions in the QSP-VG questionnaire use a Likert scale ranging from "no stress" to "little stress", "moderate stress", "a lot of stress" and "high stress" which the employee experiences in relation to his working conditions.

The third part was the questionnaire on the perception of the impact of the Covid-19 pandemic on the stress of receptionists, which included the following questions: (i) what has been the effect of the COVID 19 pandemic on your level of stress? (increased; remained the same; decreased); (ii) to what extent do the following factors increase your level of stress? (never - always scale); and (iii) name two factors that have caused you the most stress in the workplace.

After a favorable opinion from the Ethics Committee and the Data Protection Officer, the next step was taken. In Beja and Mértola hotels, the approach was face to face, and after duly explaining the study, e-mails were sent after the initial contact; in the remaining hotel establishments in Baixo Alentejo, contact was made by telephone and then the relevant e-mails were sent, explaining the study and the questionnaire.

A total of 30 receptionists at hotels were surveyed, 20 professionals responded, corresponding to a response rate of 67%. After collecting the data, statistical treatment was carried out, using Microsoft Excel spreadsheet software.

4. RESULTS

The analysis of the results made it possible to carry out a socio-demographic characterization of the respondents, concluding that: (i) the number of female receptionists is equal to the number of male receptionists; (ii) the predominant age group, 45%, is between 25 and 35 years old; (iii) 65% (n=13) of the receptionists have secondary education and 35% (n=7) have a bachelor's/graduate degree; (iv) 50% (n=10) of the professionals have an indefinite contract, 45% (n=9) have a fixed-term contract; (v) 78.9% of the sample (n=16) have been working in the tourism sector for 1 year or more, and only 21.1% (n=4) for less than 1 year. 1% (n=4) for less than 1 year; (vi) and of those working as receptionists in their current hotel establishment, 70% have been there for 1 year or more and only 30% for less than 1 year.

About the characteristics of the working hours of hotel receptionists, it can be seen that 95% (n=19) of the total population in question work shifts, and only 5% (n=1) do not work rotating shifts. Regarding the type of shift regime practiced by receptionists, it can be seen that the majority, 80% (n=16), work rotating shifts and only 20% (n=4) work daytime hours only.

4.1 Labour stress factors for hotel receptionists

Regarding the general objective of identifying the main labor stress factors in hotel receptionists who work shifts, the following results were obtained:

- Distribution of receptionists according to the number of hours they work per shift - it was concluded that a large proportion of receptionists suffer a great deal of stress due to the fact that they work several hours in a row, thus showing a percentage of 47% (n=9). Only 18% (n=4) of the surveyed population do not experience any stress. There is evidence showing that shift work, especially night work, causes disturbance in the circadian rhythm and sleep pattern (Comes, 1998 cited by Almeida, 2009), which can deregulate the internal rhythm of the body, causing various symptoms.

- Distribution of receptionists according to lack of stability in their marital and/or personal life due to professional responsibilities - it was observed that there was a great deal of discrepancy between the answers, which ranged from 'no stress whatsoever' to 'higher stress' (this one with a small percentage of 10%, n=2). However, in 30% of the population and this being the highest figure, the lack of stability and security in their marital and/or personal life due to professional responsibilities generates 'a lot of stress'. Problems of the home-work interface are related to both lack of time and commitment to perform tasks, such as lack of support. In this way, the family is seen usually as the "family support team" (Steven et al, 1986 cited by Almeida, 2009).

- Distribution of receptionists according to the lack of time to maintain a good relationship with the people closest to them (e.g. spouse, children, friends, etc.) - the majority of receptionists,

representing 45% of the population, consider that the lack of time to maintain a good relationship with the people closest to them causes a great deal of stress, and 15% consider that it causes a fair amount of stress.

Reconciling work and family it is considered as a psychosociological factor and literature argues that working hours and work shifts promote this as a negative factor. Work-Family Conflict is understood as a phenomenon bidirectional, that is, experiences in the family domain can negatively affect the domain, as well as experiences in the domain of work can affect negatively the domain of the family (Greenhaus and Beutell, 1985 cit. by Carvalho, V., 2016).

- Distribution of receptionists according to how they manage serious customer problems – 40% of the population (n=8) consider that managing customers' problems causes them a lot of stress, and 5% (n=1) consider that they have a high level of stress about the situation.

One of the explanations for the responses to stress lies on the greater demand for interaction with others, which means a greater number of meetings and the mobilization of others to meet deadlines, that is, functions of managers (Almeida, 2009).

- Distribution of receptionists according to work overload or excess work - it was observed that situation causes a lot of stress for more than half of the receptionists with a percentage of 55% (n=11).

- Distribution of receptionists according to lack of time to carry out professional tasks - it was observed that a large proportion of the receptionists, 40% of the population (n=8) consider that the lack of time to properly professional tasks cause a lot of stress.

Quantitative and qualitative overloads are interlinked. The first refers to the amount of work and arises from the situations in which the worker has too many tasks to accomplish with insufficient time to accomplish them; while the qualitative is associated with difficulty pertaining to the performance of these tasks, and is related to the incapacity that the worker feels to manage his professional life, considering that the standards of demand are excessive because they lack the necessary skills to deal with the demands imposed. These contexts can trigger high levels of levels of emotional pressure, mental load and stressful situations (Almeida, 2009).

4.2 Impact of the COVID-19 pandemic on hotel receptionists professionals

Based on the objective of analyzing the factors that increase stress at work, it was observed that the outbreak of the COVID-19 pandemic among professional receptionists led to a notable increase in stress levels. The data obtained indicated that there was a highly significant increase in the level of stress at work in 80% (n=16) of hotel receptionists.

These results, which show an increase in stress levels, are in line with the perspective of studies on this issue at work. According to Oracle and Workplace Intelligence (2020), a study published on the Randstad website, showed that COVID-19 has increased levels of stress and anxiety at work, with around 70% of workers revealing that they had experienced higher levels of stress and anxiety than in any previous year and this has negatively affected the mental health of 78% of workers worldwide.

It was also concluded that, for this group of individuals, the factors that led to a greater increase in work-related stress as a result of the pandemic were an increase in interpersonal problems with the people closest to them; an increase, overload or excess of work due to the situation; and work due to the situation and; job (ins)tability and the contractual relationship with the company during the pandemic phase.

With regard to the factors that caused the most stress at work during the pandemic period and according to the opinion of the receptionists surveyed, the following stand out: (i) work

overload; (ii) rotating schedules; (iii) instability at work; (iv) lack of respect from customers when it comes to complying with COVID-19 hygiene rules; (v) excessive working hours; (vi) general lack of respect; (vii) lack of time to spend with family.

These observations, particularly those referring to overload or additional work, can be corroborated by the findings of Meirinho (2021), who states that in March 2020 all Portuguese people were confined, as an extreme public health measure to prevent the spread of SARS COV 2 and this implied that in one week, companies and their workers had to adapt as best they could in order for the companies to maintain their activity, and for the workers to keep their jobs, thus causing an increase in labor.

5. CONCLUSION

Professionals in the tourism sector, and especially those working in the reception area of hotel companies, are exposed to immense stress, not only because of the nature of their work, but also because of the working hours that many of them are exposed to, which are considered in the literature and proven by empirical studies to be psychosocial risk factors. In addition, the COVID-19 pandemic has had a major impact on the tourism sector. In the context of the numerous impacts that COVID-19 had on the daily life of receptionists in tourist hotels, it can be seen that the companies were not well prepared to deal with crisis situations. This pandemic has effectively changed the reality of the hotel industry, causing a great deal of inconvenience, from the loss of customers to changes in the physical spaces of accommodation establishments, which have been forced to adapt at the request of organizations such like the Government and the General Directorate of Health, due to the proportions of the number of cases of infection (Gomes, 2021).

The main problem faced by this group of workers is the difficulty of reconciling their working hours with their private lives, as well as excessive working hours and/or overwork, which leads to disorders such as stress, with various consequences for the worker and, consequently, for the company, as they end up producing less over time.

Cycle control is a systematic process by which risks are identified, analyzed and managed, and employees are given the opportunity to work in a more efficient way. This problem-solving approach is well established as a strategy for tackling physical and psychological risks at work. It can be said that hotels that place a high value on prevention and protection have a better chance of survival, competitiveness and employee satisfaction, thereby increasing productivity, involvement and commitment to the organization.

In the context of the numerous effects that the COVID-19 pandemic had on the daily life of receptionists, it can be said that the companies were not well prepared to deal with crisis situations (Sampaio, 2021).

In conclusion, the study has some limitations in terms of the size of the sample used or even with the statistical analysis strategy which is still exploratory. Research will gain more depth with the expansion of the sample mainly with other accommodation typologies, and with combination of complementary methodologies of a more qualitative nature, based on semi structured interviews to better deepen first descriptive results of the questionnaire.

6. REFERENCES

- Almeida, D. (2009). O Stress Ocupacional: As Fontes de Stress e suas Associações. [Master's thesis ISPA]. Repositório Instituto Superior de Psicologia Aplicada em Lisboa. <https://repositorio.ispa.pt/bitstream/10400.12/4353/1/13577.pdf>;
- Antunes E. D., Bridi, L. R. T., Santos M. & Fischer F. M. (2023). Part-time or full-time teleworking? A systematic review of the psychosocial risk factors of telework from home. *Frontiers in Psychology*, 14. 1-19. DOI=10.3389/fpsyg.2023.1065593

- Araújo, T. (2020). O horário de trabalho por turnos e os riscos psicossociais: Diagnóstico de um setor de Gestão Estratégica de Recursos Humanos. [Master's thesis Universidade da Maia]. Repositório Aberto da Universidade da Maia. <https://repositorio.umaia.pt/handle/10400.24/1922>
- Baker, A., Ferguson, S., & Dawson, D. (2003). The perceived value of time: Controls versus shiftworkers. *Time & Society*, 12(1), 27-39. <https://doi.org/10.1177/0961463X03012001>
- Ma, C.; Ren, L.; Zhao, J. (2021). "Coping with Stress: How Hotel Employees Fight to Work," *Sustainability*, MDPI, vol. 13(19), pages 1-18, September.
- Campos, I. (2014). *Consequências do trabalho por turnos. A influência do sono no quotidiano dos trabalhadores por turnos*. [Master's thesis, Instituto Politécnico de Setúbal]. Repositório Aberto do Instituto politécnico de Setúbal. <https://comum.rcaap.pt/handle/10400.26/8208>
- Chagas, D. (2015). Riscos Psicossociais no Trabalho: Causas e Consequências. *International Journal of Developmental and Educational and Psychology*, 1 (2), 439-446. <https://www.redalyc.org/articulo.oa?id=349851784043>
- Costa, G. (2010). Shift Work and Health: Current Problems and Preventive Actions. *Safety Health Work*, 1, 112-123.
- Costa, L (2015). *Avaliação dos fatores psicossociais de risco nos trabalhadores da recolha de resíduos sólidos urbanos*, [Master's thesis. Instituto Politécnico de Coimbra]. Repositório Aberto do Instituto Politécnico de Coimbra. <https://comum.rcaap.pt/bitstream/10400.26/14494/1/Maria%20Margarida%20Ribeiro%20Oliveira.pdf>
- Díaz-Carrión, R., Navajas-Romero, V., & Casas-Rosal, J. (2020). Comparing working conditions and job satisfaction in hospitality workers across Europe, *International Journal of Hospitality Management*, Vol. 90, 102631, <https://doi.org/10.1016/j.ijhm.2020.102631>.
- Direção Geral de Saúde (2021). *Guia Técnico "Vigilância da saúde dos trabalhadores expostos a fatores de risco psicossocial no local de trabalho"*. Lisboa: Direção-Geral da Saúde. file:///C:/Users/35191/Downloads/7518i028179_GuiaTec3_DGS_sintese.pdf
- EU-OSHA (2020). *Psychosocial Risks and Stress*. <https://osha.europa.eu/pt/themes/psychosocialrisks-and-stresse>
- EU-OSHA (2013). *Well-Being at Work: Creating a positive work environment*. Publications Office of the European Union, Luxembourg
- Freitas, L. (2016). *Segurança e Saúde do Trabalho* (3ªed.). Lisboa: Edições: Sílabo
- Gadbois, C. (2004). Les discordances psychosociales des horaires postés: Questions en suspens. *Travail Humain*, 67(1), 63-85.
- Gjerald, O., Furunes, T. & Mathisen, G.E. (2023), "'What else is new?' identifying emerging psychosocial risk factors in hospitality employment", *Employee Relations*, Vol. 45 No. 4, pp. 966-982. <https://doi.org/10.1108/ER-10-2022-0490>
- Gomes, B. (2021). *O Impacto do Novo Coronavírus (COVID-19) na Hotelaria através da Perspetiva dos Colaboradores*. [Master's thesis. Universidade Portucalense Infante D. Henrique]. Repositório Aberto da Universidade Portucalense. <https://repositorio.upt.pt/entities/publication/9139c3c9-8dc2-4908-a578-2f88fa6f692d/full>
- Gomes, R. (2010). *Questionário de Stress para Profissionais de Saúde (QSPS)*. Braga. Universidade do Minho
- Gonçalves, M. (2020, abril 3). Coronavírus: 75% da restauração e hotelaria encerrada e muitas empresas ponderam não reabrir. *Jornal Público*. <http://www.publico.pt/2020/04/03/economia/noticia/coronavirus-75-restauracao-hotelaria-encerrada-empresas-ponderam-nao-reabrir-1910852>
- Gonçalves, S., (2014). *Psicologia do Trabalho e das Organizações*. s.l.: Pactor.
- Hospedin, (2020). *Tendências na hotelaria e turismo para 2020*. <https://blog.hospedin.com/tendencias-para-2020/>
- Hunger, B., & Seibt, R. (2022). Psychosocial Work Stress and Health Risks - A Cross-Sectional Study of Shift Workers From the Hotel and Catering Industry and the Food Industry. *Frontiers in public health*, 10, 849310. <https://doi.org/10.3389/fpubh.2022.849310>
- Laranjeiro, A. (2021). *Hotelaria de novo sem Páscoa vê início do ano "severamente comprometido"*. Diário de Notícias. https://www.ccdralg.pt/site/sites/default/files/recortes/20210405_diarionoticias_hotelariasempascoa.pdf
- Leka, S., Griffiths, A. & Cox, T. (2003). *Work Organization and Stress. Protecting Workers' Health Series*, 3. Geneva: World Health Organization.
- Leka, S., Jain, A. (2010). *Health impact f psychosocial hazards at work: an overview*. Geneva: Wold Health Organization.
- Meirinho, M. (2021). O novo desafio na segurança e saúde no trabalho, deixado pela Covid-19. *Noticias EcoSaúde*. <https://noticias.ecosaude.pt/2021/04/27/o-novo-desafio-na-seguranca-e-saude-notrabalho-deixado-pelo-covid-19/>

- Milovanović, V. (2021). The COVID 19 pandemic effects on the hotel industry. *Tourism Challenges Amid COVID-19* (TISC 2021). Thematic proceedings, 570-587. doi: 10.52370/TISC21570VM.
- Ministério da Economia (2017). Decreto-Lei nº80/2017. Diário da República n.º 125/2017, Série I de 2017-06-30, páginas 3315 – 3338.
- Oracle and Workplace Intelligence (2020). *Como a pandemia afetou a saúde mental no trabalho*. <https://www.randstad.pt/tendencias-360/employer-branding/como-a-pandemia-afetou-a-saude-mental-no-trabalho>
- Organização Internacional do Trabalho - OIT (2020), Novas Previsões da OIT: Covid-19 e o mundo do trabalho. DGERT. https://www.ilo.org/wcmsp5/groups/public/---europe/---ro-geneva/---ilolisbon/documents/publication/wcms_823075.pdf
- Organização Internacional do Trabalho – OIT 1984. Psychosocial factors at work: Recognition and control. Geneva: International Labour Office. 92-2-105411-X
- Pinho, R. (2015). *Fatores de Risco/riscos Psicossociais no local de Trabalho*, Programa Nacional de Saúde Ocupacional, Direção Geral de Saúde.
- Sampaio, V. (2021). O Stress Laboral Um Estudo dos Rececionistas de Estabelecimentos Hoteleiros, Antes e Após Pandemia por Covid-19. [Master's thesis. Instituto Politécnico de Beja]. Repositório Aberto do Instituto Politécnico de Beja. <https://repositorio.ipbeja.pt/handle/20.500.12207/5538>
- Soares, L. (2013, junho 17). *Jornada de Trabalho na Hotelaria, Hotelaria e Hospitalidade*. <https://hotelariahospitalidade.blogspot.com/2013/06/jornada-de-trabalho-na-hotelaria.html>
- Souza, V. & Cobêro, C. (2013, outubro 23.24.25). *Nível de Stress dos Colaboradores de um Hotel Fazenda em Baixa e Alta Temporada. Gestão e Tecnologia para a Competitividade*. <https://www.aedb.br/seget/arquivos/artigos13/22118153.pdf>
- União Geral dos Trabalhadores (UGT, s.d.), *A Europa está a caminhar para o eclipse dos "riscos psicossociais" no trabalho?*. <cvad4nfuasz4nz7tc7k4zore0dazufmadr9pspog.pdf> (ugt.pt)
- Zenker, S., Braun, E., & Gyimothy, S. (2021). Too afraid to Travel? Development of a Pandemic (COVID-19) Anxiety Travel Scale (PATS). *Tourism Management*, 84. <https://doi.org/10.1016/j.tourman.2021.104286>

DECLARATION OF CONTRIBUTIONS TO THE ARTICLE - CRediT

ROLE	Sampaio	Amaral	Santos
Conceptualization – Ideas; formulation or evolution of overarching research goals and aims.	x	x	x
Data curation – Management activities to annotate (produce metadata), scrub data and maintain research data (including software code, where it is necessary for interpreting the data itself) for initial use and later re-use.	x	x	x
Formal analysis – Application of statistical, mathematical, computational, or other formal techniques to analyze or synthesize study data.	x		x
Funding acquisition - Acquisition of the financial support for the project leading to this publication.			
Investigation – Conducting a research and investigation process, specifically performing the experiments, or data/evidence collection.	x	x	x
Methodology – Development or design of methodology; creation of models.	x	x	
Project administration – Management and coordination responsibility for the research activity planning and execution.	x		
Resources – Provision of study materials, reagents, materials, patients, laboratory samples, animals, instrumentation, computing resources, or other analysis tools.	x		
Software – Programming, software development; designing computer programs; implementation of the computer code and supporting algorithms; testing of existing code components.	x		x
Supervision – Oversight and leadership responsibility for the research activity planning and execution, including mentorship external to the core team.		x	x
Validation – Verification, whether as a part of the activity or separate, of the overall replication/reproducibility of results/experiments and other research outputs.		x	x
Visualization – Preparation, creation and/or presentation of the published work, specifically visualization/data presentation.		x	
Writing – original draft – Preparation, creation and/or presentation of the published work, specifically writing the initial draft (including substantive translation).		x	
Writing – review & editing – Preparation, creation and/or presentation of the published work by those from the original research group, specifically critical review, commentary or revision – including pre- or post-publication stages.		x	