



RESEARCH PAPER

Impact of Depression and Anxiety on Employee Performance: An Empirical Analysis

Dr. Muhammad Zia-ur-Rehman*¹ Khadija Shakoor²
Muhammad Arif Nawaz³

1. Associate Professor, Department of Leadership and Management Studies, National Defence University, Islamabad, Pakistan
2. Research Scholar, National Defence University Islamabad, Pakistan
3. Ph. D Scholar, Department of Commerce, Bahauddin Zakariya University Multan, Punjab, Pakistan

DOI

[http://doi.org/10.47205/plhr.2022\(6-II\)10](http://doi.org/10.47205/plhr.2022(6-II)10)

PAPER INFO

ABSTRACT

Received:

February 19, 2022

Accepted:

April 05, 2022

Online:

April 15, 2022

Keywords:

Anxiety,
Depression,
Employee
Performance

***Corresponding Author**

drziaofficial@gmail.com

The focus of this study is to investigate the effect of despair and anxiety on workers' overall performance. The research is extensive in nature as it demonstrates how to overcome unhappiness and maintain employees' effectiveness and depression-free. The consolidated speculation has been well-known, implying that despair and anxiety have negative effect on employees' overall performance, i.e., if people are unhappy, they would not contribute effectively. Employees who are depressed, are considered as a problem instead of solution, for this reason it's far critical for corporations to preserve their personnel out of depression, hold a wholesome work environment, and preserve to adopt recognition applications to make sure that they are taken care of by the company in all aspects. The study might be useful resource for businesses in recognizing depressive signs, and organizations should overcome depression with a view to accomplish long term oriented organizational objectives.

Introduction

Gloom is clarified as misery or distress which includes gain or loss of craving, resting jumble, weakness, decrease of body developments and considerations, view of being useless, loss of euphoria in something generally delighted. Melancholy, which implies lengthen negative opinions, powerlessness to concentration and act consistently and other related burdensome symptomatology, is an authentic issue and a customary issue in the workplace.

Despair characterizes cautioning circumstance for association by work fulfillment just as non-attendance and worker turnover (Osman & Ladan, 2011).

Similarly, nervousness is characterized as a sensation of dread, pressure, or disquiet brought about by the assumption for risk, which may be inside or outside (Diagnostic and Statistical Manual of Mental Disorders, 1980).

Nervousness is really a psychological state portrayed by tense sensations, stressed contemplations, and substantial changes, for example, hypertension etc. Intermittent nosy musings or concerns are a sign of tension and since they are concerned, they might stay away from specific circumstances.

Representative execution is characterized as a complete expected worth got from a worker's activities throughout a predefined time span (Schmidt, 1997). Based on this, depression can be considered as the loss in physical growth as well as official discouragement that reduces laborers' productivity and increases worker turnover. Depression further can create disorders leading to incapacitation; and depression has a higher prevalence rate than other mental illnesses in the workplace. Therefore, depression in employees is disproportionately linked to low productivity and job termination, that can cause greater incidence rate at work than other mental issues, and it is closely be associated to low productivity and job retention among workers.

Employers consider workers that are depressed to be low performers, and as a result, companies ought to address the reasons of depression so as to gain regular performance from their employees. When employees feel sad, their vitality is drained, making it harder for them to perform their tasks and obligations to their maximum potential. The relationships of depressed persons with others are disturbed, which has a negative influence on organizational performance. Employees also fail to assume responsibility for their employment and lose attention on work-related activities.

Depression is also commonly caused by workplace stress and pressure, thus employee turnover is also a result of depression, which affects workflow while also raising human resource expenses through rehiring and processes. As a result, such experts must be present within the organizations to monitor their workers' conduct and ensure that any inappropriate employee behavior may be dealt effectively and quickly in order to achieve maximum efficiency. Additionally, not only organizations find the most effective techniques in dealing with depression in order to increase worker performance, but also, they can also foster individual growth and indenting in order to furnish a better workplace and thus a better society and citizenship. Mostly, employees are less acknowledged and recognized, with less awards given even if they contribute their best. Increase in rate of worker termination, a lack of job security, no development routes, and no corporate assessment system might all be symptoms of depression (

A few supervisors accept that by increasing pressure on their group can assist with expanding efficiency. While this might work for certain individuals (and for a brief timeframe), for a great many people, it just adds to sadness and nervousness. . Depression saps employees' vitality, preventing them from carrying out their tasks and obligations to their full potential. Depressed people's relationships with others are strained, which has a negative impact on organizational performance. Despite this, representatives' loss of focus on business-related activities can lead to failure in taking responsibility of their duties.

Depressed employees are considered as an obligation instead of to be a resource so it is fundamental for association to keep their employees out of gloom,

give workers a solid climate to work, continue to direct acknowledgment projects to let them feel that they are important for the company in all situation. Similarly, leadership style has a favorable impact on depression reduction (Kaisa, Ulla, & Taru, 2014). It is usually observed at the local level of organizations, giving your employees a psychological well-being programme is possibly the most effective thing one can do for their emotional well-being. Giving workers a suitable number of paid or unpaid days off and recognizing that they have a life outside of work might also help them feel less restless. Breaks from work are vital for mental cleaning and energy replenishment. It is so important that even taking 10 to 15 minutes for yourself during the day to stretch, relax, or go for a stroll outside may be quite beneficial.

Literature Review

During the 1950's and 60's, the concept of anxiety was considered as an uncommon disease. One of the most interesting information in inner health treatment, exploration, and policy is that why despair has come as dominating element. Anxiety became on the major issue of medical and psychiatric attention inside the United States during the 1950s and Sixties. Nevertheless, depression, which previously seemed to be an unusual complaint within the postwar period, has become a prime motive of internal health situation. One of the maximum baffling adjustments in present day psychiatric person history is why melancholy has handed anxiety as the maximum notably treated and examined inner fitness circumstance associated with the pressure subculture.

The strain lifestyle contains extensive variety of mental, physical, and interpersonal issues that usually rise up due to regular stressors (Selye 1968). Some of the unusual mental signs associated with those problems are nervousness, grief, and malaise. Physical signs and symptoms consisting of headaches, fatigue, backache, gastrointestinal complaints, sleep and appetite, worries are giant, and they're usually followed by interpersonal, economic, occupational, and health demanding situations. Outpatient psychiatric and, specifically, standard medical care is closely primarily based on these symptoms.

Until the twentieth century, specialists and laypeople alike were vulnerable to misinterpreting this complicated collection of symptoms as a "nerves" circumstance, emphasizing the physical issue of lawsuits (Shorter 1992). The similarly vague phrases pressure and apprehensive breakdown were used to describe the identical substantial gamut of mental and bodily signs and symptoms for most of the 20th century (Swindle et al. 2000). During this time, anxiety and its associated disorder, "neuroses," have become essential factors of what got here to be called the stress culture, which was encapsulated by using the poet W.H. Auden's term "age of anxiety" for the fear and malaise that troubled the populace following World War II (Auden 1947/1994).

Prior to the 1970s, melancholy was thought to be a very unusual condition marked by severe feelings of meaninglessness and worthlessness, which were frequently accompanied by vegetative and psychotic signs and symptoms, as well as preoccupations with death and dying (Shorter 2009). In addition, hospitalized

patients were more likely to be sad than patients of trendy practitioners or outpatient psychiatrists. However, starting in the 1970s and continuing today, despair has surpassed tension as the most often used term to express the wide spectrum of common intellectual and physical issues linked to the stress culture. Depression now governs clinical exercise, therapy, and research.

Theoretical Support

Most individuals think of depression as a passing phase or a case of the blues from which they can recover. Depression is an epidemic that impacts a person's mental fitness and causes them to behave inappropriately. People nowadays expect more with less, which leads to stress, which is one of the factors that contributes to depression. Workload, disagreements, a loss of energy, ambiguous call for, process insecurity, and several other intellectual distortions emerge as a result of the increased stress level (Julie, 2013). According to recent studies, the number of people suffering from work-associated intellectual contamination has risen.

Researchers have tossed the idea that the development of mind problems is more related to genetics biochemistry. Furthermore, it is suggested that anxiety is caused by a mis-regulation of normal stress (Whigham Desir, 1993). Clinical depression affects both highly paid CEOs and low-wage employees in the workplace. However, the depression mostly targets diligent, creative, and ambitious people. In addition, a variety of clinical variables and demographics might contribute to depression. It is also found that younger people are more impacted by depression than older persons.

Employees are 10 times more likely than their grandfathers to suffer from major depression as a result of stress. Organizations must respond to depression's manifestations, which include physical disease. According to recent studies, roughly fifty five percent of depression is caused by decreased productiveness and absence. Anxiety and Depression causes tangible problems in the body, such as back pain , increase in blood pressure, headaches, and so on. Due to their despair, workers are unable to focus on their work. Over time working hours, less salary, bad evaluation, job instability, neglecting employees by management, working atmosphere, stagnated career, and so on are all factors that contribute to employee turnover (Nicole, Ann, Vinita, Jane, & Jacqui, 2014). Ongoing education and promotions should also focus on assisting employees in recognizing the symptoms of depression in themselves, as well as conducting on-site counselling supporting groups, with proper identifications and treatments. Almost 80-90% of workers can be helped, sending a good message to millions of individuals who are afflicted and the majority of firms who have implemented effective programmes are restoring worker health, which invariably leads to increased labor efficiency (Adrian & Aseel, 2014).

The association between work and depression has recently been accepted and this interest stems from an increasing realization that depressive illnesses are all too common in the workplace, and that they have a bad influence on productivity, performance, absence, and disability expenses. It is because of stigma, uncertainty about cost-effective therapy, and a lack of powerful interference given at work, The attributional reformulation of the learned helplessness model (Abramson et al., 1978)

and Beck's cognitive theory (Beck et al., 1979) are the two most widely recognized modern cognitive models of depression (Vázquez et al., 2000). The impact of depression on an employer remains unsolved (Kathryn & colleagues, 2015). In a nutshell, this theory states that repeated exposure to unpredictable and harsh environmental stimuli gradually lead to the idea that the uncomfortable circumstance is unavoidable, and a sense of helplessness develops. Thus as a result of this helplessness, depression develops.

Beck's cognitive theory is a theory that attempts to explain how our brain functions, and it takes into account of depression's subjective symptoms, such as a pessimistic view of oneself, the world, and the future. According to this paradigm, psychopathological states are extreme or excessive expressions of normal cognitive, emotional, and behavioral functioning. According to Aaron T. Beck's cognitive theory of depression, persons who are prone to depression develop inaccurate/unhelpful core ideas about themselves, others, and the environment as a result of their learning histories. These beliefs may have been dormant for a long time before being reawakened by key life experiences. The basic ideas that render someone subject to depression include; feelings of being unlovable, useless, weak, and inept. Information processing deficiencies, selective attention, and memory biases toward the negative are also discussed in cognitive theory.

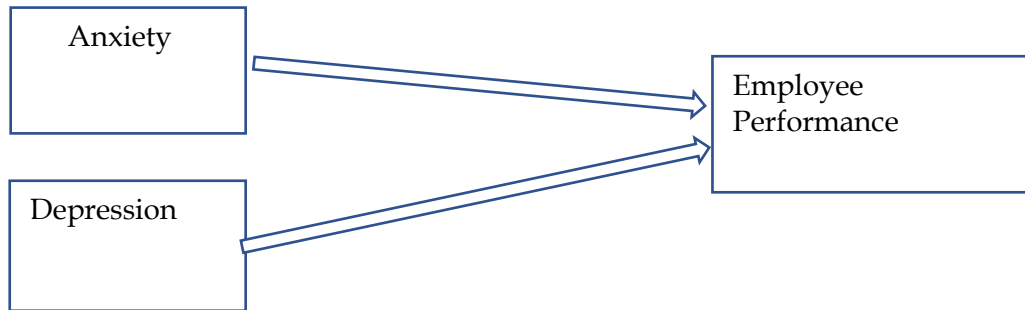
Psychoanalysis aims to make patients conscious of their inner conflicts, whereas behavioral therapies aim to alleviate anxiety symptoms, frequently through the extinction process. The benefits of these two techniques, as well as the advantages of the more recently discovered "cognitive" therapies, are still fiercely contested. Some authors even contend that the psychoanalytic approach, through the therapist-created climate of trust, makes major use of the extinction process. As a result, psychoanalysis can be viewed as yet another method of "rewiring" the brain, particularly key neuronal circuits that regulate the amygdala.

It's said that one can't diagnose someone for depression at work unless one is a certified clinician, so such practice may not be attempted without having expertise, however, it's critical to have a sense for common symptoms. If someone has been experiencing five or more of the symptoms listed below for more than two weeks, it is considered important to talk to them and encourage them to seek help: a melancholy, apprehensive, or "empty" emotion that persists, appetite suppression and/or weight reduction, or appetite stimulation and weight gain, Irritability and restlessness. Concentration, memory, or decision-making difficulties; the ability to make decisions is hampered, fatigue is a term used to describe a lack of energy, productivity dropped, morale issues, cooperation is lacking, accidents and hazards to safety, absenteeism, frequently making claims about always being weary, aches and pains that aren't explained, abuse of alcohol and/or drugs, sleeping insufficiently or excessively are such symptoms.

Material and Methods

Based on the review of literature, a theoretical framework was developed showing the variables and their association.

Theoretical Framework



Hypotheses

Based on the above theoretical framework, the following are hypothesized.

H1: Depression has negative impact on employee performance.

H2: There is a negative impact of anxiety on employee performance.

Material and Methods

Research design is cross sectional in nature. There is negative impact of depression and anxiety on employee performance because due to depression and anxiety employees cannot perform well. Educational industry is managed by managers and supervisors. They manage from hiring and admissions to daily smooth running of organization. The targeted population of supervisors and middle level managers was around 1000 to 1200 and out of that, a sample we took from in Rawalpindi an Islamabad region was around 300 to 350 to collect primary data.

We sourced the questionnaire about the variable that is employee performance from the study conducted by The Ohio State University that depression and anxiety has negative impact on employee performance. The questionnaire about perceived organizational support is sourced from the study conducted by University of Delaware in 1984. Question no 7, 8,9, and 10 in variable depression questionnaire are reversed questions so we dropped such reverse items.

Around 200 questionnaires were printed and distributed by hand. After a wait of two months, follow up was carried out and got 180 questionnaires back. Out of 180 questionnaires we discarded were 9 questionnaires due to non compliance. We finalized 179 questionnaires for final analysis. For analysis, we employed SPSS 21. Various tests were run including; demographic analysis, reliability test, correlation analysis, and regression analysis. At the end we checked our hypotheses and found that both H1, H2 were accepted.

Results and Discussion

After the reliability analysis we found as below:

Table 1
Reliability

	Cronbach's Alpha	No. of items
Depression	.907	6
Anxiety	.914	4
Employee Performance	.804	21

Demographic Analysis**Table 2**
Age

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Below years	88.9	88.9	88.9
	30 - 40	11.1	11.1	100.0
	Total	179	100.0	100.0

Table 3
Gender

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	22.2	22.2	22.2
	Female	77.8	77.8	100.0
	Total	179	100.0	100.0

Table 4
Education

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	High School	22.2	22.2	22.2
	Bachelor's	66.7	66.7	88.9
	Masters/PD	11.1	11.1	100.0
	Total	179	100.0	100.0

Table 5
Experience

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 3 Years	66.7	66.7	66.7
	3 or more years	33.3	33.3	100.0
	Total	179	100.0	100.0

Table 6
Correlation

		Depression	Anxiety	Employee Performance
Depression	Pearson Correlation	1		
	Sig. (2-tailed)			
Anxiety	Pearson Correlation	.591**	1	
	Sig. (2-tailed)	.024		
Employee Performance	Pearson Correlation	-.341**	-.420**	1
	Sig. (2-tailed)	.000	.000	

The results from the Correlation table show that there is a significant negative relationship between Depression - Employee Performance, and Anxiety - Employee Performance. Similarly, the results also show that there is a significant positive relationship between Depression and Anxiety.

Regression

Table 7
Regression Analysis

Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	2.461	.942		2.612	.035
	Depression	.276	.254	-.380	1.087	.035

a. Dependent Variable: Employee Performance

For Regression Table (Hypothesis 1):

From the results in table it can be seen that the beta value is -0.380 and the significant is less than 0.050 which means that there is a negative relation between Depression and Employee Performance. This shows that the proposed hypothesis 1 is accepted

Table 8
Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.989	.735		2.706	.030
	Anxiety	.411	.201	-.612	2.049	.040

a. Dependent Variable: Employee Performance

From the results in the Table, it can be seen that the Beta value is -0.612 and the significant is less than 0.050 which means that there is a negative relation

between Anxiety and Employee Performance. This shows that the proposed second hypothesis is accepted.

Conclusion

One of the most essential issues that corporations face is figuring out the cause of depression and Anxiety in their employees. Almost each employer goes through extensive change in shape, which incorporates remote places outsourcing, retrenchment, and international reforms. As a result of these adjustments, employees are less likely to rise to the pinnacle with performance. There are numerous different troubles that have been identified as causes of high turnover and lack of efficiency amongst people, which includes un fulfillment of simple obligations.

Organizations must handle these difficulties in order to achieve efficient work, while personnel must be subjected to continuous learning programs. The majority of the time, employees have issues with personal, professional, and career development, which has a direct impact on employees' performance. To meet long-time strategic objectives, it is discovered that several of these troubles are still unresolved. It would undoubtedly wreck the worker's ability to execute efficiently for a specified length of time.

Recommendations

A wide variety of suggestions that can be taken into consideration and completed for future studies. In future one should collect sample from different areas as well instead of just collecting samples from one region. Based on this, the outcome will be more powerful, strong and representative. Researchers may consider more variables so that we can obtain extra suitable findings. Future studies may, for example, look into the influence of tracking different areas of depression and anxiety.

References

- Beddoe, L., & Maidment, J. (2013). *Social work practice for promoting health and wellbeing*. In *Social Work Practice for Promoting Health and Wellbeing* (pp. 19-30). Routledge.
- Chassen-López, F. (2014). The Traje de Tehuana as national icon: Gender, ethnicity, and fashion in Mexico. *The Americas*, 71(2), 281-314.
- Eble, M., & Gaillet, L. L. (2019). *15 Re-Inscribing Mentoring*. Retellings: Opportunities for Feminist Research in Rhetoric and Composition Studies. edited by Jessica Enoch and Jordynn Jack, Parlor
- Doherty, E. M. (2006). Viewing work historically through art: Incorporating the visual arts into organizational studies. *Journal of Management History*, 12 (2), 137-153.
- Fassoulis, K., & Alexopoulos, N. (2015). The workplace as a factor of job satisfaction and productivity: A case study of administrative personnel at the University of Athens. *Journal of Facilities Management*, 13(4), 332-349

- Gaillet, L. L., & Eble, M. (2019). Re-inscribing Mentoring. *Retellings: Opportunities for Feminist Research in Rhetoric and Composition Studies*, edited by Jessica Enoch and Jordynn Jack, Parlor P, 283-303.
- Hosie, P. J., & Sevastos, P. (2009). Does the “happy-productive worker” thesis apply to managers?. *International Journal of Workplace Health Management*, 2 (2), 131-160
- Houliort, N., Philippe, F. L., Vallerand, R. J., & Ménard, J. (2014). On passion and heavy work investment: Personal and organizational outcomes. *Journal of Managerial Psychology*, 29(1), 25-45
- Johnson, P. R., & Indvik, J. (1997). “The scourge of the workplace”: depression at work. *Journal of workplace learning*, 9(1), 12-16
- Karatepe, O. M., & Tizabi, L. Z. (2011). Work-related depression in the hotel industry: A study in the United Arab Emirates. *International Journal of Contemporary Hospitality Management*, 23(5), 608-623
- Khan, A., & Sultan, F. (2020). Impact of Depression on Workers’ Retention and Efficiency. *Depression*, 1(2), 1-18
- Lee, N. K., Roche, A., Duraisingam, V., Fischer, J. A., & Cameron, J. (2014). Effective interventions for mental health in male-dominated workplaces. *Mental Health Review Journal*, 19(4), 237-250
- Lindsey, L. L. (2020). *Gender: Sociological Perspectives*. Routledge.
- Pamela, R. J., & Julie, I. (1997). Blue on blue: depression in the workplace. *Journal of Managerial Psychology*, 12(6), 359-364.
- Peri, K., Kerse, N., Moyes, S., Scahill, S., Chen, C., Hong, J. B., & Hughes, C. M. (2015). Is psychotropic medication use related to organisational and treatment culture in residential care. *Journal of health organization and management*, 29(7), 1065-1079
- Perko, K., Kinnunen, U., & Feldt, T. (2014). Transformational leadership and depressive symptoms among employees: Mediating factors. *Leadership & Organization Development Journal* 35(4), 286-304
- Russo, J. A., & Waters, L. E. (2006). Workaholic worker type differences in work-family conflict: The moderating role of supervisor support and flexible work scheduling. *Career Development International*, 11(5), 418-439
- Salmela-Aro, K., & Nurmi, J. E. (2004). Employees' motivational orientation and well-being at work: A person-oriented approach. *Journal of Organizational Change Management*, 17(5), 471-489