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Occupational Stress and Its Relation to Job Performance

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Abstract:
Occupational stress is a significant health issue that affects workers' productivity. Managerial skills can help organisations improve employees' effectiveness and reduce work-related stress. The current study aimed to determine the relationship between occupational stress and job performance and identify contributing factors. A cross-sectional research design was used. Data were collected in January 2024 using a self-administered questionnaire. 60 employees from Derna College of Medical Technology were systematically selected. The data was analysed using the SPSS program. A p value less than 0.05 was considered statistically significant. The majority of participants were under 45 years of age. Workload has been identified as a major source of occupational stress, with difficulty concentrating at work considered a sign of stress. 29 (48.33%) of the participants were exposed to pressure, while 20 (86.96%) of those exposed reported that professional pressures affected their job performance. 9 (45%) of those who had low performance suffered from decreased productivity due to stress. Among the participants, 57 (95%) believed that occupational stress could be reduced. The most recommended way to reduce stress among participants is stress management training. 53 participants (88.33%) knew that stress at work could be harmful to their health. 30 (50%) of participants indicated that there was a high probability that their previous illness was caused by stress at work. The results of the study showed that occupational stress and job performance differ statistically significantly. This is in line with previous research conducted to prove this association.

Keywords: Occupational Stress, Relationship, Job Performance, Derna College, Libya.

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الإجهاد المهني وعلاقته بالأداء الوظيفي

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الملخص
يعد الإجهاد المهني مشكلة صحية كبيرة تؤثر على إنتاجية العمال. يمكن أن تساعد المهارات الإدارية المؤسسات على تحسين فعالية الموظفين وتقليل التوتر المرتبط بالعمل. هدفت الدراسة الحالية إلى تحديد العلاقة بين الضغوط المهنية والأداء الوظيفي مع التعرف

على العوامل المساهمة لتلك العلاقة. لإجراء الدراسة تم استخدام تصميم البحث المقطعي حيث مثل العاملين بكلية التقنية الطبية درنة مجتمع الدراسة وذلك باختيار 60 مستخدما بشكل منهجي. لتحليل البيانات تم استخدام برنامج الحزمة الإحصائية للعلوم الاجتماعية وقد تم اعتبار قيمة p أقل من 0.05 ذات دلالة إحصائية. لقد كانت أعمار غالبية المشاركين أقل من 45 عامًا. تم تحديد عبء العمل كمصدر رئيسي للإجهاد المهني مع اعتبار صعوبة التركيز في العمل علامة على التوتر. تعرض 29 (48.33%) من المشاركين للضغوط المهنية، في حين أفاد 20 (86.96%) من بين هؤلاء المعرضين بأن تلك الضغوط قد أثرت على أدائهم الوظيفي. 9 (45%) من المتأثرين بانخفاض الأداء الوظيفي قد عانوا من انخفاض الإنتاجية بسبب التوتر. يعتقد 57 (95%) من المشاركين أنه يمكن التقليل من التوتر المهني، ويعد التدريب على إدارة التوتر هو الحل الاكثر اقتراحا من قبل المشاركين للحد من المشكلة. 53 (88.33%) من المشاركين على دراية بأن ضغوط العمل يمكن أن تؤثر سلباً على صحتهم. لقد افاد 30 (50%) من المشاركين أن هناك احتمالًا كبيرًا بأن يكون المرض في الماضي نتيجة للضغوط المرتبطة بالعمل. أخيرا أثبتت الدراسة وجود فروق ذات دلالة إحصائية بين الضغوط المهنية والأداء الوظيفي، وهذا يتفق مع دراسات سابقة أجريت لإثبات ذات العلاقة.

الكلمات المفتاحية: الإجهاد المهني، العلاقة، الأداء الوظيفي، كلية درنة، ليبيا.

Introduction

Occupational stress is a worldwide problem that affects both rich and developing nations' economies and health [1]. It is commonly understood to be a progressive process whereby each person's cognitive evaluation of their work pressures leads to poor health and serious behavioral repercussions [2]. Extreme pressure, little decision-making flexibility, high workloads, information scarcity, and poor control are a few examples of "toxic" work settings that lead to occupational stress [3, 4, 5]. As a result, one organizational resource that influences an employee's work environment is the psychosocial safety climate (PSC). The PSC is a symbol of how important mental health and well-being are in the workplace [6]. That is, management works to create a work environment that is healthy for staff members by implementing policies, practices, and procedures that are designed to safeguard and enhance staff members' physical and mental well-being [7]. Over the past few decades, occupational stress in the workplace has become a common, complex, and costly phenomena [8]. According to the International Labor Organization (ILO) [1], the global financial crisis and globalization have had a substantial influence on the workplace, increasing demand and leading to stress and associated concerns. For instance, in the United Kingdom, stress is the primary cause of employee absenteeism [9]. In the European Region, over 50% of workers said that stress was "commonplace" [10]. 83% of American workers say they experience stress at work [11]. Occupational stress is seen to be a negative feature of the workplace, with the potential to substantially jeopardize employees' welfare and create health-related impairments on a worldwide scale [13], in addition to its impacts on workers' happiness and health [12]. Thus, workplace mental health promotion and prevention have gained global recognition according to the World Health Organization (WHO). Consequently, a growing number of companies, educational institutions, business educators, and practitioners have started to pay attention to the psychological health of their employees [12, 13]. Furthermore, a substantial number of studies have been carried out in a range of occupations during the previous 40 years [9], including community health care [14, 15, 16, 17], police, firemen, teachers, manufacturing workers [12], and correctional officers [18] in different countries. It is meant to help professionals comprehend its sources, the crucial relationships with results that are important to employees, how organizations operate, and how to minimize its pervasiveness. [9, 13] However, the bulk of research in this field has been done in highly educated, industrialized Western nations.

Material and Methods

The College of Medical Technology in Derna, Libya, was established in 1991 to provide higher education in allied medical fields such as public health, laboratory medicine, radiology, medical care, pharmacy technology, dental technology, and genetic engineering. This study aimed to examine the impact of occupational stress on job performance among college staff. The sample size of 60 respondents was determined using a systematic sampling method to select participants, where the first second name was selected and then the difference between two was used to select the rest. Participants received the surveys in person. They included both open-ended and closed-ended questions to allow respondents to freely share their thoughts. In order to better comprehend and get clarification on the respondents' responses, interviews were held. The cross-sectional survey method was chosen by the study as its research approach. The data was analyzed using the Statistical Package for Social Sciences (SPSS), which allowed for the creation of tables and other statistical conclusions.

The data obtained from the completed questionnaire was reviewed for consistency, and responses were reported as percentages.

Results and Discussion

Table 1: Respondents Socio-demographic Characteristics. n=60

Variables	Frequency	Percentage
Gender		
Male	33	55
Female	27	45
Age (Years)		
15 – 24	2	3.33
25 – 34	15	25
35 – 44	27	45
45 – 54	12	20
≥ 55	4	6.67
Marital Status		
Single	11	18.33
Married	43	71.67
Divorced	5	8.33
Widowed	1	1.67
Level of Education		
Preparatory Level	2	3.33
Secondary Level	6	10
Intermediate Diploma	7	11.67
Higher Diploma	9	15
Graduate	17	28.33
Postgraduate	19	31.67
Working Categories		
Administrative Staff	45	75
Academic Staff	15	25

Table 1 indicates that 55% of the respondents were males and 45% were females. As for the age distribution, 2 (3.33%) and 15 (25%) of the respondents, respectively, fell in the 15–24 and 25–34 age brackets. 27 (45%) and 12 (20%), respectively, fell in the 35–44 and 45–54 age brackets. The remaining 4 (6.67%) fell in the 55-year-old and above age bracket. Consequently, it can be inferred that the majority of the respondents are below the age of 45, thus Derna College of Medical Technology has a youthful workforce. In terms of marital status, 43 (71.67%) of the respondents were married and 11 (18.33%) were single, while the remaining 5 (8.33%) were divorced and 1 (1.67%) were widowed. There were employees in the research sample who were literate and had varying degrees of schooling. Consequently, the greatest levels of education held by 17 (28.33%) and 19 (31.67%) of the respondents were a first degree and a postgraduate degree, respectively. Of them, 7 (11.67%) and 9 (15%) had intermediate diplomas and higher diplomas, respectively. One may argue that the security guards and cleaners are just at a secondary or preliminary stage. The same data shows that 15 (25%) and 45 (75%) of the responders, respectively, were academic staff and administrative staff.

Table 2: Knowledge of Occupational Stress. n=60

Response	Frequency	Percentage
Yes	54	90
No	6	10

The table above shows that 54 participants (90%) answered positively regarding knowledge of occupational stress, while the remaining 6 (10%) answered negatively.

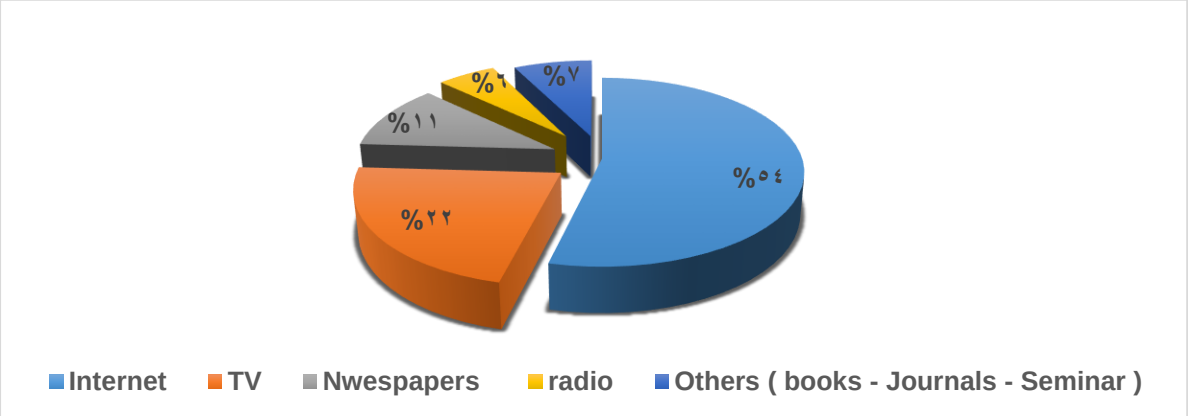

Figure 1: Medium of Knowledge of Occupational Stress. n=54

Out of 54 respondents, the figure above shows that 29 (54%) and 12 (22%) of the respondents, respectively, mentioned the internet and television as mediums of their knowledge of occupational stress. 6 (11%) mentioned newspapers. 4 (7%) mentioned that they read it from books and journals and heard about it at a seminar, with some saying it combines all three above. The remaining 3 (6%) mentioned radio.

Table 3: Constituents of Occupational Stress. n=60

Response	Frequency	Percentage
Workload	30	50
Role overload	15	25
Role ambiguity	9	15
Others	6	10

The table above indicates that 30 (50%) of the respondents mentioned workload as what constitutes occupational stress. 15 (25%) and 9 (15%) of them, respectively, mentioned role overload and role ambiguity as what, in their view, constitutes occupational stress. The remaining six (10%) mentioned work obstacles and work needs as causes of occupational stress. Based on the aforementioned, workload is the primary factor contributing to occupational stress.

Table 4: Signs of Occupational Stress. n=154

Response	Frequency	Percentage
Feeling anxious, irritable or depressed	38	24.68
Apathy, Loss of interest in work	35	22.72
Problems sleeping, fatigue	29	18.83
Troubles concentrating	50	32.47
Others	2	1.30

The table above displays 154 replies, of which 50 (32.47%) and 38 (24.68%) indicated difficulty focusing and feeling nervous, agitated, or sad as indicators of occupational stress, respectively. As indicators of professional stress, 35 respondents (22.72%) and 29 respondents (18.83%) preferred indifference, loss of interest in work, difficulty sleeping, and exhaustion.

Table 5: Occupational Stress and Job Performance. n=60

Variables		The Effect on Job Performance				Total	Percentage	P-Value
		Yes		No				
		Frequency	Percentage	Frequency	Percentage			
Prior Experience with Occupational Stress	**Yes**	20	86.96	9	24.32	**29**	**48.33**	**< 0.05**
	No	3	13.04	28	75.68	**31**	**51.67**	
Total		**23**	**100**	**37**	**100**	**60**	**100**	

According to Table 5, occupational stress affected 29 (48.33%) of the respondents in the past, and 20 (86.96%) of them said it affected their ability to do their jobs. However, 31 respondents (51.67%) have never experienced occupational stress, and 28 (75.68%) of them report that it has not affected their ability to perform their jobs. It is important to note that occupational stress and job performance differ statistically significantly in this case. People with high levels of occupational stress perform poorly at work. This is in line with other research that was done to demonstrate this association [19, 20].

Table 6: Effects of Occupational Stress on an Individual. n=20

Response	Frequency	Percentage
Absenteeism	4	20
Reduced productivity	9	45
Low morale	5	25
Poor work relations	2	10

The table above indicates that, out of 20 respondents, 9 (45%) and 5 (25%) of the respondents, respectively, stated that they had suffered from decreased production and low morale as a result of stress. 4 (20%) and 2 (10%) of the respondents, respectively, cited absenteeism and bad work relationships as consequences of stress.

Table 7: Influence on Supplies and Equipment. n=60

Response	Frequency	Percentage
Very much	7	11.67
Somewhat	8	13.33
A little	27	45
Not at all	18	30

Table 7 shows that 8 (13.33%) and 7 (11.67%) of the respondents, respectively, stated that they had a moderate and very significant effect on the availability of the tools and materials they required for their work. Of the respondents, 27 (45%) claimed to have little control over the availability of the tools and materials they require for their work. The remaining 18 (30%) people stated they had no control over the availability of the tools and resources they required for their work. From the foregoing, it may be concluded that the majority of employees at Derna College of Medical Technology lack control over the equipment supplies necessary for them to do their daily tasks. Their production at work is impacted by this, which may quickly lower their productivity.

Table 8: Influence on Order of Task Performance. n=60

Response	Frequency	Percentage
Very much	18	30
Somewhat	18	30
A little	21	35
Not at all	3	5
Very much	18	30

The table above indicates that 18 (30%) persons each, respectively, claimed to have a great deal of influence and somewhat influence on task performance. 21 (35%) said they have little influence, while the remaining 3 (5%) said they have no influence at all. We can conclude from the above table that most of the college's employees cannot work in a way that relieves them from work pressures.

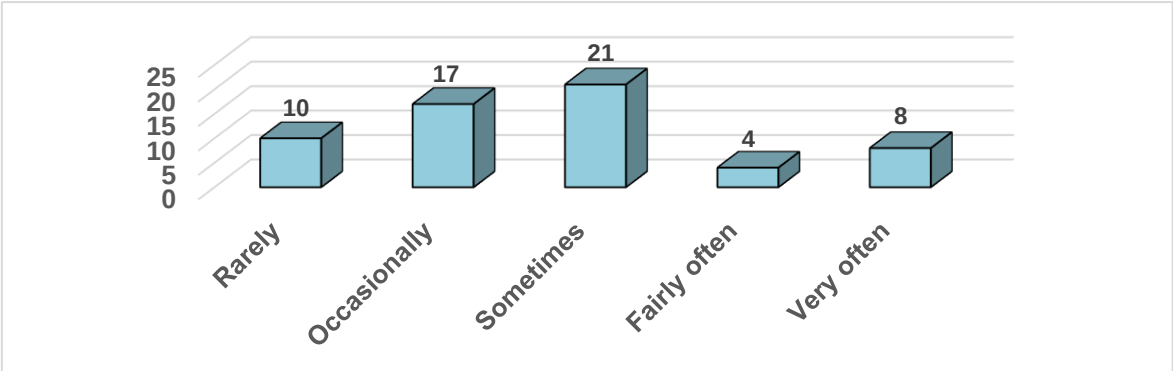

Figure 2: Effects of Time Pressure on Job Performance. n=60

Figure 2 shows that 10 (16.67%) and 17 (28.33%) of the respondents, respectively, stated that their type of work leaves them with limited time to complete tasks on a rare and occasional basis. Once again, 21 (35%) and 4 (6.67%) of them stated that their jobs sometimes and fairly often left them with little time to complete tasks. As for the remaining eight (13.33%), they reported that their work very often leaves them little time to complete tasks. It is clear from the above that many college staff do not have adequate time to complete their tasks.

Table 9: Minimization of Occupational Stress. n=60

Response	Frequency	Percentage
Yes	57	95
No	3	5

Table 9 shows that as many as 57 (95%) of the respondents were of the view that occupational stress can be minimized. The remaining 3 (5%) believed that occupational stress could not be minimized.

Table 10: The Way to Minimize Occupational Stress. n=57

Response	Frequency	Purpose
Work redesign	13	22.81
Stress Management Training	26	45.61
Management Development	6	10.53
Organizational Development	10	17.54
Early detection	2	3.51

Out of 57 respondents, the table above reports that 13 (22.81%) and 26 (45.61%) stated that work-related designation and stress management training can reduce occupational stress, respectively. Organizational development was noted by 10 (17.54%) and managerial development by 6 (10.53%) of the respondents, respectively. According to the remaining 2 (3.51%), early detection is the most effective strategy to reduce occupational stress.

Table 11: Immediate Supervisor Support at Work. n=60

Response	Frequency	Purpose
Very much	21	35
Somewhat	19	31.67
A little	17	28.33
Not at all	3	5

Table 11 shows that 21 (35%) and 19 (31.67%) of the respondents, respectively, stated that their immediate supervisors very much and somewhat eased their lives at work. 3 (5%) people said their superiors do not at all make life easy for them, while 17 (28.33%) said their supervisors only give them little leeway to do so. It is clear from the above that Derna College of Medical Technology employees' supervisors, by their acts, generally make life simpler for their subordinates in their area of employment.

Table 12: Colleagues Support at Work. n=60

Response	Frequency	Percentage
Very much	8	13.33
Somewhat	28	46.67
A little	23	38.33
Not at all	1	1.67

Table 12 indicates that 8 (13.33%) and 28 (46.67%) of the respondents, respectively, stated that other college colleagues very much and somewhat aided them in their job performance. 23 people (38.33%) claimed to get some help from their peers to make their work simpler. One person (1.67%) said that their colleagues do not help them with their work. The aforementioned suggests that, once again, largely, colleagues assist employees in doing their jobs in a way that makes their lives simpler.

Table 13: Family and Friends Support at Work. n=60

Response	Frequency	Percentage
Very much	15	25
Somewhat	21	35
A little	18	30
Not at all	5	8.33
Don't have any such person	1	1.67

Regarding the support from friends, family, and spouses, the table above reveals that 15 (25%) and 21 (35%) of the respondents, respectively, said they get it. Out of the 30 percent who responded, 18 said they get little help from their spouse, friends, and family to make their work easier, and 5 (8.33%) stated they get no help at all. One person, or 1.67% of the total, stated they had no spouses, friends, or family to help them or ease their workload.

Table 14: Dependence on Immediate Supervisor at Work. n=60

Response	Frequency	Percentage
Very much	11	18.33
Somewhat	17	28.33
A little	28	46.67
Not at all	4	6.67

When things get tough at work, table 14 indicates that 11 (18.33%) and 17 (28.33%) of the respondents, respectively, claimed that they can very much and somewhat rely on their immediate supervisors. 28 (46.67%) claimed they could rely on their bosses with only a little confidence. 4 (6.67%) of them said there is no way their supervisors can be relied upon.

Table 15: Dependence on Colleagues at Work. n=60

Response	Frequency	Percentage
Very much	10	16.67
Somewhat	20	33.33
A little	27	45
Not at all	3	5

When things get tough at work, table 15 reports that 10 (16.67%) and 20 (33.33%) of the respondents, respectively, stated they can rely on colleague staff to a great and moderate extent. 27 (45%) said they rely on their colleague staff to a small extent, while the remaining 3 (5%) stated they cannot at all.

Table 16: Dependence on Family and Friends at Work. n=60

Response	Frequency	Percentage
Very much	17	28.33
Somewhat	10	16.67
A little	20	33.33
Not at all	13	21.67

When things get tough at work, table 16 reveals that 17 (28.33%) and 10 (16.67%) of the respondents, respectively, claimed they can very much and somewhat rely on their spouses, friends, and family. Twenty respondents (33.33%) indicated that spouses, friends, and family can offer little support. 13 (21.67%) said that they cannot ever rely on their friends, spouses, or family.

Table 17: Effects of Work on Health. n=60

Response	Frequency	Percentage
Yes	53	88.33
No	7	11.67

Table 17 shows that 53 (88.33%) of the respondents say their work can affect their health, while 7 (11.67%) gave a negative response. Based on the information provided above, it can be concluded that most employees have demanding work schedules, which negatively affects their health.

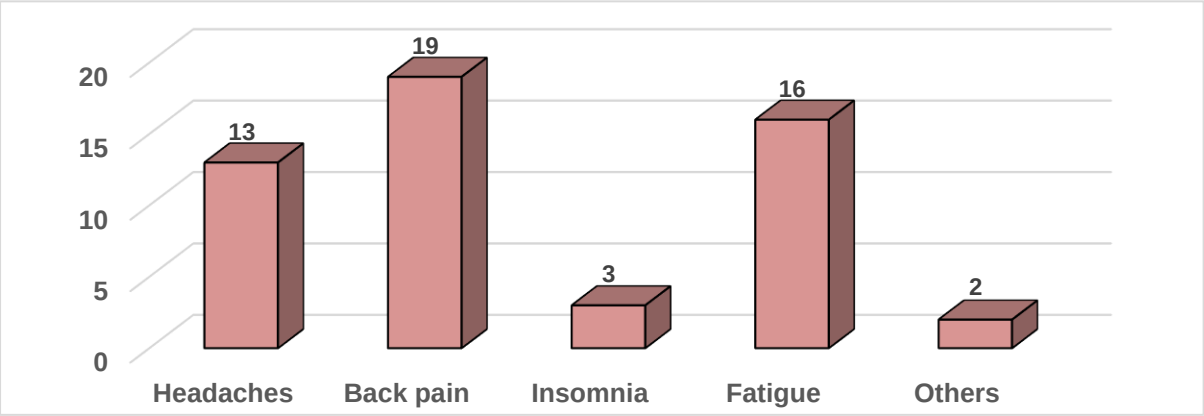

Figure 3: Symptoms of the Effects of Work on Health. n=53

Figure 3 shows that 13 (24.53%) and 19 (35.85%) of the respondents, respectively, reported having headaches and back pain. Out of the total respondents, 3 (5.66%) and 16 (30.19%), respectively, stated that their insomnia and fatigue were brought on by the stress they experienced. One of the effects of stress on the remaining 2 (3.77%) people cited was migraine. From the foregoing, it can be concluded that back pain and fatigue are the two primary consequences of stress on individuals.

Table 18: Occupational Stress and Cardiovascular Diseases. n=60

Response	Frequency	Percentage
Yes	50	83.33
No	10	16.67

Table 18 shows that 50 (83.33%) of the participants were aware that work stress can cause high blood pressure, while the remaining ten (16.67%) confirmed that they did not know that stress can cause cardiovascular diseases such as high blood pressure.

Table 19: Effects of Chronic Exposure to Stress. n=60

Response	Frequency	Percentage
Yes	42	70
No	18	30

Regarding the effects of chronic exposure to stress, the table above shows that 42 (70%) of the sample answered positively, while the remaining 18 (30%) answered negatively. The inference from the above is that college employees are largely aware that exposure to long-term stress can cause chronic diseases such as a malfunction in the immune system.

Table 20: Causes of Illness as a result of Work Stress. n=60

Response	Frequency	Percentage
Very high	3	5
High	30	50
Average	21	35
Low	2	3.33
Very low	4	6.67

The table above indicates that 30 (50%) and 3 (5%) of the respondents, respectively, believe that there is a high and very high probability that the illness in their past can be a result of work stress. 21 (35%) believe that there is a moderate probability that the current illness is the result of previous work stress. 2 (3.33%) and 4 (6.67%) of the remaining respondents, respectively, view that there is a low and very low probability that the current illness is the result of previous work stress.

Conclusion

Occupational stress is not something you should write off as a necessary component of your work or as a cost of advancing in your career. Heart attacks, strokes, high blood pressure, and many other stress-related illnesses are among the early and unexpected fatalities that stress, either directly or indirectly, causes. In many organizations, stress is still viewed as a sign of weakness and is kept secret to prevent negative consequences, despite the fact that unhealthy work conditions negatively impact employees' mental and physical health. There is a chance for organizations and employees to collaborate and provide space for adjustments that will lower the number of diseases linked to stress. Managers must understand that they have a moral and legal obligation to safeguard their employees if change is to occur at the top. This study has proven that occupational stress is closely linked to a low level of job performance at Derna College of Medical Technology. Therefore, it is critical to raise awareness of the pervasiveness of this issue and to educate individuals about the negative impacts of job stress. It is intended that this information will spur organizations to investigate the stressors that exist in their workplaces, implement measures to lessen and/or avoid stress there, and ultimately endeavor to preserve employees' health and well-being. Similar comparisons between professional groups within an organization, such as elementary and secondary school teachers, or between professionals and employees in the public and private sectors might provide insightful research.

Recommendations

Derna College of Medical Technology may encounter fierce competition in providing top-notch postsecondary education due to its youthful workforce. Establishing a well-organized, coordinated, and controlled work environment can help to maintain and improve individual well-being. Supervisors' lack of support during trying times has led to conflicts about workload and job-related stress that the college administration should address. Stress hinders performance because it decreases productivity by sending signals to the individual. Thus, formal organizational communication with employees reduces stress by lowering job uncertainty. Having the support of superiors and co-workers is a big help in reducing stress. To keep their employees motivated during tough times, managers should recognize their outstanding work and significant accomplishments. Including effective stress management in college administration procedures may improve employees' health and build closer relationships among them. One needs to keep up a very high level of personal health. Organizational-level treatments are required to prevent and treat workplace stress since organizations are often the source of stress. It is essential to promote an environment that values openness and understanding above criticism.

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