

## Anxiety Disorders and Work: When Stress Becomes Pathological

N. Baabouchi<sup>1\*</sup>, S. Riam<sup>1</sup>, L. Azizi<sup>1</sup>, S. Bahetta<sup>1</sup>, M. Sabir<sup>1</sup>, A. Ouanass<sup>1</sup><sup>1</sup>Psychiatric University Hospital Ar-Razi, Salé, Morocco, Faculty of Medicine and Pharmacy of Rabat, Mohammed V University, Rabat, MoroccoDOI: <https://doi.org/10.36347/sjmcr.2026.v14i07.007>

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**\*Corresponding author:** N. Baabouchi

Psychiatric University Hospital Ar-Razi, Salé, Morocco, Faculty of Medicine and Pharmacy of Rabat, Mohammed V University, Rabat, Morocco

## Abstract

## Original Research Article

Occupational stress is an adaptive response to work-related demands; however, when it becomes chronic and excessive, it may evolve into a pathological condition that promotes the development of anxiety disorders. These disorders represent a major public health concern due to their high prevalence and their impact on occupational functioning and workers' quality of life. This study aimed to assess the prevalence of anxiety disorders in the workplace, identify associated psychosocial factors, and evaluate their consequences on work performance. A cross-sectional analytical study was conducted among 312 employees from various occupational sectors. Anxiety symptoms were assessed using the Generalized Anxiety Disorder-7 (GAD-7) questionnaire, while psychosocial work-related factors were explored through workload, professional recognition, hierarchical relationships, decision-making autonomy, and social support. Multivariate analysis was performed to identify factors independently associated with anxiety disorders. The overall prevalence of anxiety disorders was 43%, mainly including generalized anxiety disorder, panic attacks, and social phobic symptoms. The main associated factors were excessive workload, lack of recognition, hierarchical tensions, and low decision-making autonomy. Women and workers under the age of 35 were at increased risk. Anxiety disorders were associated with decreased productivity, increased absenteeism, and significant professional disengagement. Workplace social support emerged as a protective factor. This study confirms the central role of occupational psychosocial factors in the development of anxiety disorders and highlights the need to strengthen psychosocial risk prevention strategies in the workplace.

**Keywords:** Anxiety disorders; occupational stress; psychosocial risks; workplace mental health; GAD-7; productivity; work environment.

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### I. INTRODUCTION

Mental health in the workplace has become a major public health issue worldwide. According to the World Health Organization (WHO), mental disorders are among the leading causes of disability globally, with substantial consequences for quality of life, social functioning, and occupational productivity. Among these disorders, anxiety disorders occupy a prominent place due to their high prevalence and significant functional impact. They encompass a range of clinical manifestations characterized by excessive worry, hypervigilance, somatic symptoms, and impaired daily functioning.

The workplace is one of the main settings in which anxiety may develop or worsen. While a certain degree of stress is inherent to professional activity and may even play an adaptive role by mobilizing individual resources to meet occupational demands, prolonged

exposure to excessive constraints can lead to harmful chronic stress. When work demands consistently exceed an individual's coping capacities, stress loses its adaptive function and becomes a major risk factor for mental health problems.

Over recent decades, profound transformations in the world of work have altered the nature of occupational constraints. Increased workload, higher performance expectations, job insecurity, digitalization of tasks, and evolving management practices have contributed to the emergence of new psychosocial risks. These risks encompass organizational, relational, and environmental factors that may negatively affect workers' psychological well-being. Common examples include excessive workload, interpersonal conflicts, lack of recognition, low decision-making autonomy, job insecurity, and insufficient social support.

Several theoretical models have been proposed to explain the relationship between the work environment and mental health. Karasek's Demand-Control Model suggests that high job demands combined with low decision latitude increase psychological distress. Similarly, Siegrist's Effort-Reward Imbalance Model emphasizes the detrimental effects of a discrepancy between efforts invested by employees and the rewards received in return, whether financial, social, or symbolic.

The consequences of anxiety disorders extend beyond the individual level. These disorders have been associated with decreased productivity, increased absenteeism, impaired work quality, and a higher risk of occupational disengagement and burnout. They also represent a substantial economic burden for organizations and healthcare systems.

Despite growing interest in psychosocial risks, data regarding the prevalence of anxiety disorders in occupational settings remain limited in several countries, particularly in middle-income nations. A better understanding of occupational factors associated with anxiety is essential to guide prevention strategies and promote mental health in the workplace.

Against this background, the present study aimed to assess the prevalence of anxiety disorders among employees from different occupational sectors, identify the main psychosocial factors associated with their occurrence, and evaluate their impact on occupational functioning.

## II. METHODS

A cross-sectional analytical study was conducted among employees working in various public and private occupational sectors. Participants were recruited over a six-month period using a convenience sampling method.

Inclusion criteria comprised employees aged over 18 years, engaged in regular occupational activity for at least six months, and willing to participate after being informed about the objectives of the study. Workers on prolonged sick leave at the time of the survey, as well as incomplete questionnaires, were excluded from the analysis.

Collected sociodemographic data included age, sex, educational level, occupational sector, professional seniority, and marital status. Occupational characteristics assessed included perceived workload, decision-making autonomy, hierarchical relationships, professional recognition, and workplace social support.

Anxiety symptoms were assessed using the Generalized Anxiety Disorder-7 (GAD-7) questionnaire, a widely used and validated instrument in epidemiological research. A score of 10 or higher was

Occupational consequences of anxiety were explored through indicators including absenteeism, self-rated productivity, work motivation, and level of professional engagement.

Statistical analyses were performed using SPSS software version XX. Qualitative variables were described using frequencies and percentages, while quantitative variables were presented as means and standard deviations. Associations between occupational factors and anxiety disorders were assessed using bivariate analyses followed by multivariate logistic regression to identify factors independently associated with anxiety. Statistical significance was set at  $p < 0.05$ .

## III. RESULTS

The study included 312 participants, comprising 169 women (54%) and 143 men (46%). The mean age was  $36.4 \pm 8.7$  years, with a predominance of workers under the age of 40. Participants were employed across various sectors, including administration, education, services, healthcare, and private industry.

The overall prevalence of anxiety disorders, defined by a GAD-7 score  $\geq 10$ , was 43%, indicating a particularly high frequency of anxiety symptoms within the studied population. Among the observed clinical manifestations, generalized anxiety disorder was the most common (28%), followed by panic attacks (9%) and social phobic symptoms (6%).

Analysis of occupational factors revealed several variables significantly associated with anxiety disorders. Excessive workload emerged as the strongest associated factor (OR = 2.7;  $p < 0.001$ ), indicating that employees exposed to high occupational demands were nearly three times more likely to develop anxiety symptoms. Lack of professional recognition was also significantly associated with anxiety (OR = 2.3;  $p = 0.004$ ), as were hierarchical tensions (OR = 1.9;  $p = 0.01$ ) and low decision-making autonomy (OR = 1.8;  $p = 0.02$ ).

From a sociodemographic perspective, women were significantly more likely to experience anxiety disorders than men (OR = 1.6;  $p = 0.03$ ). Workers younger than 35 years also appeared more vulnerable (OR = 1.5;  $p = 0.04$ ).

The occupational consequences of anxiety disorders were substantial. Employees with anxiety reported an average 21% reduction in productivity. They also exhibited significantly higher absenteeism rates, averaging 4.1 days per month compared with 1.6 days among non-anxious employees. Furthermore, more than half of affected workers reported reduced motivation and progressive disengagement from their professional activities.

## IV. DISCUSSION

Our study revealed a particularly high prevalence of anxiety disorders among the working population, affecting nearly one out of every two employees. This prevalence exceeds that reported in several studies conducted in the general population and highlights the major contribution of occupational factors to the development and persistence of anxiety symptoms.

Our findings are consistent with international literature identifying excessive workload as one of the main determinants of psychological distress in the workplace. Prolonged exposure to excessive occupational demands may progressively deplete psychological resources and promote a state of hypervigilance characteristic of anxiety disorders.

The association between lack of professional recognition and anxiety is particularly noteworthy. According to Siegrist's Effort-Reward Imbalance Model, the perception of a discrepancy between efforts invested and rewards received constitutes a major source of chronic stress. Lack of recognition may therefore generate feelings of organizational injustice capable of adversely affecting mental health over time.

Hierarchical tensions observed in our study further emphasize the importance of workplace relationships in employees' psychological well-being. Conflicts with supervisors and poor communication may reinforce feelings of occupational insecurity and exacerbate anxiety symptoms.

The greater vulnerability observed among women is consistent with international epidemiological findings. Several biological, psychosocial, and cultural explanations have been proposed, including the greater mental burden associated with balancing professional and family responsibilities.

Finally, workplace social support emerged as a protective factor. Employees benefiting from a supportive work environment appeared better equipped to cope with occupational constraints. This finding highlights the importance of fostering organizational cultures that promote cooperation, communication, and solidarity.

## V. CONCLUSION

This study demonstrates a high prevalence of anxiety disorders among workers and confirms the

central role of psychosocial occupational factors in their occurrence. Excessive workload, lack of professional recognition, hierarchical tensions, and low decision-making autonomy emerged as the main occupational determinants associated with anxiety, whereas social support acted as a significant protective factor.

These findings underline the need to integrate mental health into occupational health policies and to develop prevention strategies targeting psychosocial risks. Improving working conditions, promoting supportive leadership practices, and strengthening psychological support services may contribute to reducing the burden of anxiety disorders and improving workers' well-being.

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