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Workaholism and Sleep Disorders in Employees: The Moderator Roles of Workaholism in the Relationships Between Insomnia and Affective Symptoms

ABSTRACT

Sleep disorders are a growing concern in occupational health due to their strong associations with emotional distress and impaired functioning. Employees with severe insomnia symptoms are at increased risk for affective symptoms such as anxiety and depression. However, this relationship may vary depending on work-related behavioral patterns. Workaholism, a compulsive drive to work excessively, may act as a moderator, intensifying the impact of sleep disturbances on affective symptoms and vice versa. This study aimed to assess sleep disorder risk among employees, examine differences in sleep disorder severity based on workaholism levels, and investigate the moderating roles of workaholism in the relationships between insomnia severity and affective symptoms. The sample consisted of 459 day-working employees (68.41% female, Mage = 41.14, SD= 10.90) who completed measures of demographics, workaholism, and sleep disorders. Results showed that 40.31% were at risk for at least one sleep disorder, and 28.98% for multiple. Compared to employees with lower workaholism, those with higher workaholism had significantly higher scores of breathing-related sleep disorder, insomnia, narcolepsy, restless legs/periodic limb movement disorder, and circadian rhythm sleep disorder. Moderation analysis revealed that workaholism significantly moderated the relationship between insomnia severity and affective symptoms, but not vice versa. As workaholism increased, the relationship between insomnia severity and affective symptoms became stronger. These findings suggest a high prevalence of sleep disorders among employees and that workaholism can exacerbate the affective burden of insomnia. Targeted interventions addressing both sleep health and workaholism may be critical for improving employee well-being.

