

**EXPLORING THE PREDICTIVE INTERPLAY BETWEEN
CYBERLOAFING BEHAVIOUR, PROCRASTINATION AND
MENTAL HEALTH OF NURSES IN OWERRI
MUNICIPALITY**

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ABSTRACT: The study explored the predictive interplay between cyberloafing behaviour, procrastination and mental health of nurses in Owerri municipality. In the cross-sectional study, the participants were drawn using the convenience sampling technique. The study recruited 250 nurses from private hospitals located in Owerri municipality. The participant's ages ranges between 22- 58 years with a mean age of 30.83 years and a standard deviation of 9.06. Data was gathered using self-report inventories; Cyberloafing Behaviour Questionnaire (CBQ), General Procrastination Scale (GPS), and Nurse's Workplace Mental Health Questionnaire (NWMHQ). Analysis of acquired data was done using descriptive statistics and Hierarchical Multiple Regression. The study found that cyberloafing behaviour and procrastination negatively predicted mental health of nurses in Owerri municipality, ($\beta = -.65$, $t = -13.46$, $p < .01$), ($\beta = -.48$, $t = -8.18$, $p < .01$), respectively. The implication of the study informs the development of target workplace interventions aimed at mitigating cyberloafing and procrastination and these strategies may include time management training, stress reduction programs, and initiatives promoting a healthy work-life balance.

Keywords: Cyberloafing Behaviour, Procrastination, Mental Health, Nurses

INTRODUCTION

Mental health is an often-overlooked aspect of our general wellbeing, but it is by no means any less important than our physical health. The WHO (2014) views mental health "as a state of well-being in which an individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to his or her community". A critical look into this definition underscores the complexity of mental health, which encompasses emotional, psychological, and social well-being (CDC, 2013), affecting how individuals think, feel, and act (American Psychiatric Association, 2013). Undoubtedly true mental health disorders remain a leading cause of disability worldwide. The nursing profession, by its nature, exposes individuals to high levels of stress, trauma, and emotional exhaustion, which can have severe implications for their mental health (World Health Organization, 2019). Nurses remain the first point of contact for patients in healthcare settings. They are solely responsible for providing care, comfort, and support to patients, even under challenging circumstances. McGillis (2019) has observed that this constant exposure to suffering, death, and high-stress situations can birth mental health challenges such as anxiety, depression, and post-traumatic stress disorder (PTSD). Scholars have also suspected that the mental health of nurses is influenced by a variety of factors, including but not limited to biological, psychological, environmental and socio-economic factors.

A construct such as cyberloafing, an environmental factor, is suspected to have an impact on nurse's mental wellbeing. Al-Ghaith (2018) views cyberloafing as the act of wasting work time by using the internet for non-work purposes. With the advent of technology, there have been a series of revolutions in the healthcare industries in general and nursing practices in particular (McGonigle & Mastrian, 2017). In this technological age, nurses currently get to use computers and the internet for various tasks including patient documentation, medication administration, and communication etc. While these technological advancements have improved efficiency and patient's safety, they have also opened the door to cyberloafing behaviour. In practice, cyberloafing can manifest in various ways, such as nurses browsing social media platforms, engaging in online shopping, streaming videos, or checking personal emails during work hours or at work (Lim & Chen, 2012). This diversion of attention from work-related tasks can result in decreased productivity, as well as potential repercussions for nurses in terms of job performance and workplace ethics. Nurses often grapple with the challenge of managing cyberloafing in the workplace, balancing the need for internet access for legitimate work purposes with the potential for misuse. A popular study by Kalisch, Lee and Rochman (2010) have found that the stressful nature of nursing work may cause nurses to seek relief through online activities. In this case, cyberloafing can be seen as a coping mechanism. Thus, it provides a temporary escape for nurses from work-related stress. According to Lim (2002) cyberloafing could be classified into two categories: productive and non-productive. Whereas productive cyberloafing includes activities that indirectly contribute to work, such as reading news articles related to the industry, non-productive cyberloafing includes activities like online shopping or social networking, which do not contribute to work in any way. Cyberloafing behaviour most especially non-productive cyberloafing leads to significant losses in productivity (Moody & Siponen, 2013).

Another factor feared to impact on the nurse's mental health is procrastination. A concept such as Procrastination can be defined as a habitual and voluntary delay in starting or completing tasks (Steel, 2007). This habitual act is suspected to be driven often by various emotional and psychological factors. The very act of procrastinating can significantly impact the efficiency and effectiveness of healthcare delivery most especially in the nursing profession. Simply put, procrastination involves putting off necessary or meaningful activities despite knowing that the delay may have negative consequences. When procrastination becomes chronic or severe, it can contribute to or exacerbate mental health issues such as stress, anxiety, depression, and low self-esteem. A study by Sirois (2014) linked procrastination to higher levels of stress and lower levels of self-compassion. McVicar (2003) observed that the nursing profession is characterized by high levels of stress due to the nature of the work, which involves dealing with human life. The work accompanying stress can lead people into procrastination, as nurses may be seen delaying or putting off tasks to avoid the associated stress. For instance, a nurse may postpone writing a report or updating a patient's chart due to the emotional toll of the task (Ferrari, Johnson, & McCown, 1995). It is against this background that the current study leverages to explore the predictive role of cyberloafing behaviour and procrastination on the mental health of nurses in private sectors.

Statement of the Problem

Mental health problems have currently become a recurring problem in today's modern organizations due to its detrimental effects both on individuals and organizations (Kanten, 2014). Mental health can be seen as a crucial component for employees as it represents something the beyond the disease such as well-being and quality of life (Torp, Grimsmo,

Hagen, Duran & Gudbergsson 2012). Scholars (Fiabane, Giorgi, Sguazzin & Argentero 2013) have showed that healthcare workers particularly nurses have a higher risk to possess some mental health problems such as, anxiety, depression, stress etc. Given that hospitals are stressful environments as some certain conditions like accidents, injuries, deaths and other incidents are often handled in there. One can suspect that occupational stressors may be physical, chemical, biological, or psychosocial and may likely occur based on the working conditions more frequent among hospital workers (Mahdavinejad, Bemanian, Farahani, Tajik & Taghavi 2011). These are also important factors that may be contributing to mental and somatic health levels of nurses. Such mental health problems such as, loss of confidence, insomnia, social dysfunction, addiction to drugs, anxiety, and depression (Wainwright et al., 2001; Kanten, 2014; Brooks, Gerada & Chalder, 2011; Mark & Smith, 2011; Fiabane, *et al.*, 2013) are feared to have significant impacts on the person's performance and productiveness at work, level of both life and job satisfaction levels. Accordingly, it is suggested that mental health problems negatively affect employees' attitudes towards their social life but also their jobs and organizations. (Ueda & Niino, 2012). Kanten (2014) further suggested mental health problems may occur in hospital employees more than other people working in some other work places, and these problems may influence their daily activities and commitment level.

With technological advancements such as internet-enabled computer systems in various hospitals, it is suspected that the variables, cyberloafing and also procrastination of duties may creep into the health sector. Cyberloafing may lead to distraction and can interfere with the timely completion of tasks and potentially compromise the quality of patient care in a demanding field like nursing, where focus and attention are critical. And procrastination which involves delaying essential tasks may lead to increased stress, reduced job satisfaction, and compromised quality of care. Therefore, the impact of cyberloafing and procrastination on their mental health is an area that requires thorough investigation. This research aims to explore this relationship and provide insights that could help in developing strategies to mitigate these behaviours and their potential negative effects on mental health while contributing to existing literature in Nigeria precisely.

Purpose of the Study

The general purpose of this study is to investigate the predictive role of cyberloafing and procrastination on the mental health of nurses. Specifically, to:

1. Determine if cyberloafing will predict the mental health of nurses in Private Hospitals in Owerri Municipality, Imo state.
2. Determine if procrastination will predict the mental health of nurses in Private Hospitals in Owerri Municipality, Imo state.

METHOD

Participants

The researcher recruited two hundred and fifty nurses from various private hospitals located in Owerri Metropolis, Imo state, Nigeria. The hospitals randomly selected for the study includes; Imo State University Medical Center, St. David Hospital and the Medical City Hospital all in Owerri metropolis. The nurses in the various hospitals were selected using the convenience sampling techniques. Of import also is that only nurses who have served for a period of 5 years

and above were allowed to participate in the study. The participants comprised of one hundred and seventy-two (68.8%) female and seventy-eight (31.2%) males from the above listed hospitals. The mean age of participants is 34.83 years while the standard deviation is 9.06 years.

Instruments

The researcher used three instruments in this study, namely;

Cyberloafing Behaviour Questionnaire developed by Li and Chung (2006). The cyberloafing behaviour questionnaire showed good reliability and validity for the assessment of cyberloafing behaviour. The Cyber-loafing questionnaire was developed by Li and Chung (2006) and it consists of 24 items, answered on a five (5) point scale, ranging from 1 “(Almost) Never” to 5 “(Almost) Always”. The questionnaire measures social, informational, leisure, virtual emotional, development, recovery, deviance and addiction. The cyberloafing questionnaire has been revalidated by Ezeh, Etodike and Chukwura (2018) using Federal civil service employees in Anambra State, Nigeria. Ascertaining its reliability, the researcher administered the instrument to 50 nurses at the Federal Medical Centre, Owerri. Their age ranged from 25 years to 50 years with a mean age of 34.7. The instrument yielded a good Cronbach’s alpha of le at .79.

General Procrastination Scale developed by Lodha (2016). The General Procrastination Scale was developed by Lodha et al. (2016). With 23 items in total, the scale measures procrastination in 4 domains academic, workplace, medical and civic responsibilities related procrastination. All items are required to be rated on a 5-point Likert scale ranging from 1 to 5. The scores reveal a Procrastination Quotient (PQ). Ranging from 1 to 5. The scores reveal a Procrastination Quotient (PQ). Items 5, 8, 12, 16, 18, 21 and 23 are reversed scored. Scores are obtained as a sum of responses to each item and they range from 23 to 115. A higher procrastination for the individual test taker in terms of a higher Procrastination Quotient (P.Q.) was obtained. Revalidating the GPS, 100 adults (mean age = 40.70, SD 7.8 Males = 63, Females = 37) selected from Mbaitoli Local Government Area responded to copies of the scales alongside Procrastination Scale (PS) by Lay, (1986) and it yielded a concurrent validity coefficient (Cronbach’s Alpha) of .388. For the sake of establishing its reliability odd and even items of the scale were correlated and it yielded Guttman split half correlation of .37 (Duruaku, 2023). The norm for the scale is 66.78 implying that scores above the norm indicate presence of procrastination and scores below the norm indicate absence of procrastination.

Nurse’s Workplace Mental Health Questionnaire (NWMHQ) revised by Lai, Zhang, Hong and Li (2022). The NWMHQ contains six dimensions: 1) Emotional status; 2) Psychological security; 3) Positive relationships; 4) Resilience; 5) Self-efficacy; 6) Subjective well-being. For question 1~5, a score of 1~5 represents “Always”, “Often”, “Sometimes”, “Occasionally” and “rarely”. For question 6~32, a score of 1~5 represents “strongly disagree”, “disagree”, “general”, “agree” and “strongly agree”, respectively. The researcher reported Cronbach’s α coefficient was 0.948 and test-retest reliability was 0.850. The self-rating depression scale score was negatively related to the NWMHQ score ($r = -0.664, P < 0.01$). The exploratory factor analysis (EFA) yielded six factors (emotional status, psychological security, positive relationship, resilience, self-efficacy, and subjective well-being), consisting of 32 items. The cumulative variance contribution rate was 65.58%. Confirmatory factor analysis (CFA) showed an acceptable fit. The item-content validity index (I-CVI) of the questionnaire ranged from 0.750 to 1.000 V N and the average scale-level content validity index (S-CVI/Ave) was

0.906. The total score of the questionnaire ranged from 32 to 160. A higher score indicates better mental health. The NWMHQ has not yet developed a norm. In our study, data from 2815 Chinese nurses showed that the score of Chinese nurses was (139.94 ± 20.42) . The researcher revalidated the instrument using 50 Nigerian nurses (30 females and 20 males) recruited from the Federal Medical Centre, Owerri, Imo state. Their age ranged from 25 years to 50 years with a mean age of 34.7. The instrument yielded an internal consistency score of .59. The sub-dimension such as Emotional Status, Psychological Security, Positive Relationship, Resilience, Self-efficacy, and Subjective Well being produced internal consistency of .61, .39, .50, .64, .48, and .39 respectively.

Procedure

The researcher sampled the private hospitals in Owerri metropolis and randomly chose Imo State University Medical Centre, St. David Hospital and The Medical City Hospital all in Owerri. An attempt was made to secure approval from head nurse who distributed the questionnaires and in some cases a nurse in a hospital was recruited as a research assistant. Consequently, the research assistants distributed the copies of questionnaires to their colleagues. The researcher and research assistants approached the participants and obtained participatory consent through the use of consent form which the participants all signed. The researcher further assured participants of confidentiality of their responses before administering the questionnaires to those who consented to participate in the study. They were assured that the data will be used for research purposes only and that they were free to withdraw or cancel their participation at any time they intend to during the study. Those who agreed to participate were given the questionnaire to complete individually. The researcher produced 300 copies of questionnaires for the study. Of the 300 copies of the questionnaires produced, 38 copies of the questionnaires were actually filled by nurses whose number of years since resumption at work were below 5 years and the remaining 12 copies were not properly filled. Only 250 copies of the questionnaires were correctly filled and thus used for further analysis.

Design and Statistics

The study is a cross-sectional survey design. This is because it gives an opportunity for researchers to study a section of a population within a particular period of time. Descriptive statistics and Hierarchical Multiple Regressions analysis was used in analyzing the data acquired.

RESULTS

The data obtained from respondents were analysed with the use of the statistical package for the Social Sciences (SPSS) 20. Means, standard deviations, along with inter-correlations of the study variables are presented in Table 1. The results of hierarchical multiple regressions for predictors of Mental Health are presented in Table 2.

Table 1: Means, Standard Deviations, and Correlations among the variables

		M	SD	1	2	3	4	5
1	Age	34.83	9.06	-				
2	Gender	1.69	.46	-.06	-			
3	Cyber-Loafing	82.83	19.80	-.10	-.02	-		
4	Procrastination	65.04	14.30	-.08	.01	.68**	-	
5	Mental Health	108.52	27.36	.05	-.02	-.65**	-.70**	-

Note N= 250; * = $p < .05$ (two-tailed), ** = $p < .01$

The results in Table 1 indicated that both age and gender did not have significant correlation with mental health of nurses in Owerri. Cyber-Loafing positively and significantly correlated with procrastination ($r = .68, p < .01$). On the other hand, cyber-loafing negatively correlated with mental health of nurses in private hospitals ($r = -.65, p < .01$). This implies that when the scores on Cyber-loafing Behaviour increases, the scores on General Procrastination increases; and when scores on Cyber-loafing Behaviour increases, the scores on Nurses Mental Health decreases respectively. In other words, an increased level of cyber-loafing behaviour leads to lower levels of mental health of nurses. The Table 1 further revealed that procrastination negatively correlated with the nurse's mental health ($r = -.70, p < .01$). This implies that the more the nurses procrastinate, the lower the levels of their mental health.

Table 2: Hierarchical multiple regression for predictors of Mental

Variable	Step 1 B	Step 2 B	Step 3 B	t
<i>Control</i>				
Age	.05			.745
Gender	-.01			-.220
<i>Predictors</i>				
Cyber-Loafing		-.65**		-13.46
Procrastination			-.48**	-8.18
R ²	.003	.426**	.549**	
ΔR ²	.003	.423**	.123**	
ΔF	.312	181.164	66.889	
df	1,247	3,246	4,245	
Durbin Watson	2.24			

** = $p < .01$; DV= Mental Health

In Table 2, Durbin-Watson of 2.24 falls within the accepted range ($1.5 < D < 2.5$), indicating that there is no autocorrelation problem in the data and that the error term is independent. Also, the Table depicts that both Model 2 and Model 3 were statistically significant.

Table 2 also shows that cyber-loafing behaviour negatively predicted mental health of nurses in private hospitals within Owerri. Hence the hypothesis, H_1 , which states that cyberloafing behaviour will predict mental health of nurses was confirmed ($\beta = -.65$, $t = -13.46$, $p < .01$). Cyberloafing behaviour accounted for 42.3% variance in mental health. This means that for every .65 unit decrease in cyber-loafing behaviour, mental health increased.

From the Table 2, Procrastination is a negative predictor of Mental health ($\beta = -.48$, $t = -8.18$, $p < .01$). Based on this, H_2 was confirmed as procrastination predicts nurses' mental health. Procrastination accounted for 12.3% of variance in mental health of nurses in private hospitals. This means that for every .48-unit decrease in procrastination, mental health increased.

Discussion of Findings

In accordance with the result obtained, the first hypothesis which stated that cyberloafing will significantly predict the mental health of nurses in private hospitals in Owerri Municipality, Imo state was confirmed. The result implies that cyberloafing negatively predicts the mental health of nurses in private hospitals in Owerri Municipality, Imo state. This means that nurses who frequently participate in cyberloafing behaviour are more prone to experiencing poor mental health outcomes. Nurses face demanding and high-stress work environments, and the distraction of cyberloafing during their work hours could have several implications. For instance, constant interruptions from online activities may hinder their ability to focus on critical tasks, potentially leading to increased stress and decreased job satisfaction. The nature of nursing work, which often involves rapid decision-making and multitasking, makes the impact of cyberloafing on mental health particularly significant. Moreover, cyberloafing involves social media or other platforms where nurses may be exposed to distressing content, it could contribute to heightened stress levels. The blurring of professional and personal boundaries facilitated by online activities during work hours may also impact their overall mental well-being. This result supports the finding of Wu, Mei, Liu and Ugrin (2020) who found that cyberloafing affects mental health by ways of psychological detachment and fatigue, and the study of Khan, Naveed, Raheem, Sheraz and Awan (2023) who found that employee performance and mental health levels may be lowered as a result of cyberloafing. Also, the result supports the finding of Krishnan and Agrawal (2023) who found that cyberloafing behaviour negatively influences student's psychological wellbeing.

Similarly, the result of the second hypothesis which stated that procrastination will significantly predict the mental health of nurses in Private Hospitals in Owerri Municipality, Imo state was confirmed. The result implies that nurses, who frequently delay tasks may be more susceptible to experiencing adverse mental health outcome. Procrastination might lead to increased stress among nurses, especially, in high pressure environment where timely completion of tasks is crucial. Delay in handling responsibilities could also contribute to feelings of job dissatisfaction or burnout, further impact mental health. Additionally, the nature of the nursing profession involves dealing with critical and often time sensitive situations, and procrastination may hinder effective patient care, adding an additional layer of stress and potentially affect mental health. The result supports the findings of Abdullah (2017) who found that procrastination significantly predicts mental health and Gutić, Vukčević, Stevanović, Milidrag, Bulatović and Safiye (2023) who found that procrastination significantly predicts mental health.

Implications of the Study

The findings of this study have far-reaching implications and they are:

The study's findings could inform the development of targeted workplace interventions aimed at mitigating cyber-loafing behaviour and procrastination among nurses. Strategies may include time management training, stress reduction programs, and initiatives promoting a healthy work-life balance.

The findings call for training programs that equip nurses with effective coping mechanisms and time-management skills. These programs could enhance their ability to navigate workplace stressors, reducing the likelihood of engaging in counterproductive behaviours like cyberloafing and procrastination.

In addition, the study prompts healthcare institutions to review and adjust organizational policies related to technology use during work hours. Establishing clear guidelines and expectations regarding internet use can contribute to a more focused and productive work environment. Of interest, restructuring the firm's cyber services in such a way as to only permit medical related activities and answer medical related questions will not only reduce cyberloafing behaviours but will also improve the mental health of nurses in the firm.

Conclusion

The researcher explored the predictive interplay of cyberloafing behaviour, procrastination and mental health of nurses in Owerri municipality. The findings of the study confirmed two of the hypotheses. The first hypothesis states the cyberloafing behaviour will significantly predict the mental health of nurses in Owerri municipality was accepted. The result implies that cyber loafing behaviour significantly predicts the mental health of nurses in Owerri municipality. Similarly, the second hypothesis which states that procrastination will significantly predict the mental health of nurses in Owerri municipality was accepted. The results imply that procrastination significantly predicts the mental health of nurse's in Owerri municipality

Recommendations

Healthcare institutions should consider implementing training programs designed to enhance nurses' time management skills and provide strategies to cope with workplace stress. These programs could address the specific challenges associated with cyber loafing and procrastination.

Develop and communicate clear workplace policies regarding the appropriate use of technology during work hours. Establish guidelines that discourage excessive cyber loafing and procrastination while fostering a supportive and focused work environment.

Launch mental health awareness campaigns to reduce stigma and encourage open conversations about mental well-being among nurses. This could include workshops, seminars, or informational sessions on stress management and seeking mental health support.

Foster a workplace culture that prioritizes employee well-being. This involves creating supportive environments where nurses feel comfortable seeking help and discussing challenges related to mental health without fear of judgment or reprisal.

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