



# Effects Of Sleep Deprivation On Cognitive Functioning Indian Context.

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## Abstract

Research on sleep deprivation's effects on cognitive functioning, with a particular emphasis on false-triggering, forgetfulness, and distractibility, has been conducted. Online data collection was done using a convenience sample method. We used a total of 53 questions in our questionnaire, which included 28 questions from a sleep quality scale (by Hyeryeon Yi, Kyungrim Shin, and Chol Shin, 2006) and 25 items from a cognitive failure assessment questionnaire (by Donald Broadbent and his colleagues, 1982). 90 employed individuals, 48 women and 42 men, between the ages of 21 and 60, participated in the study. The results indicate that people with more sleep deprivation show significantly higher levels of forgetfulness, distractibility, and false triggering. The t-test was used to analyze the data, and it also indicated statistically significant differences across all three cognitive functions with p values. These findings align with existing literature on the detrimental effects of sleep deprivation on cognitive performance and underscore the importance of adequate sleep for maintaining cognitive function.

**Keywords:** sleep deprivation, cognitive functioning, forgetfulness, distractability, false-triggering, and employed individuals.

## I. INTRODUCTION

Participants aged 21 and 60 who were employed were chosen for this study to examine the effects of an unbalanced sleep pattern on their cognitive domains.

The mental processes of acquiring knowledge through experience, thought, and the senses are referred to as cognition. It encompasses various mental activities and functions that allow us to perceive, process, store, retrieve and use information.

The mental processes that enable us to do tasks like thinking, reasoning, memory, learning, and decision-making are called cognitive functioning. It includes a broad spectrum of mental tasks like information processing, comprehending and interpreting our environment, and reacting suitably to various circumstances.

There are various categories of cognition, such as executive functions, language, attention, memory, perception, and problem-solving. Perception is the process by which humans interpret sensory data; memory is the capacity to retain and retrieve information; and attention is the ability to concentrate on certain stimuli while disregarding others. While problem-solving and reasoning enable us to think critically and make judgments, language includes the knowledge and use of words. Executive functions are higher-order cognitive processes that are responsible for organizing, coordinating, and managing impulses, among other cognitive tasks. Humans can successfully explore and interact with their environment thanks to the combination of these several cognitive processes.

### **Forgetfulness:**

A widespread cognitive phenomenon is forgetfulness, which is the temporary or permanent loss of memories of events or knowledge. It can happen for several reasons, such as the aging process that naturally occurs in the brain, interference from new information, improper encoding during the initial learning process, or trouble accessing stored memories. While minor forgetfulness is common, particularly as we get older, chronic or severe memory problems could be signs of underlying medical disorders. Active recall exercises, leading a healthy lifestyle, managing stress, and making use of memory aids like notes or digital reminders are some strategies to fight amnesia.

### **Distractibility:**

Distractibility is the propensity for internal thoughts or outside stimuli to quickly divert one's attention from the work at hand or from their current focus. This frequent cognitive issue has the potential to impair learning, productivity, and general performance in a variety of spheres of life. Very distractible individuals may find it difficult to focus for long periods, frequently switching their focus between various tasks or stimuli. Factors like the surrounding environment, stress levels, weariness, or underlying medical disorders like ADHD can all have an impact on this feature. While some degree of distraction is acceptable, significant difficulties in focusing can interfere with day-to-day activities and may need to be managed with tactics or interventions.

### **False triggering:**

As a system or equipment is accidentally activated as a result of inaccurate or deceptive inputs, this is referred to as false triggering. This can occur in several settings, including voice-activated alarm systems, sensors, and alarms. For example, in voice recognition technology, a system may falsely trigger if it interprets a word that sounds similar to background noise as the activation instruction. Similar to this, environmental elements like wind, animals, or even changes in light can result in a false trigger in security systems. In general, false triggering should be avoided as, depending on the situation, it may result in inefficiencies, annoyances, or even security flaws.

### **Sleep deprivation:**

When a person does not receive the recommended amount of sleep for their body's needs, it is known as sleep deprivation and can have various negative effects on the body, mind, and emotions. Numerous things, such as stress, lifestyle decisions, health issues, or obligations at work, might cause it. Chronic sleep deprivation raises the risk of mental health conditions like anxiety and depression and decreases cognitive abilities including memory, concentration, and decision-making. In terms of health, it impairs immunity, increases the chance of heart problems, and can cause hormonal imbalances that result in weight gain. A healthy sleep schedule is crucial for overall well-being, and skipping sleep can have detrimental long-term effects on one's health.

Various psychologists define sleep deprivation as a state brought on by continuous periods of insufficient or inadequate sleep, either in terms of quantity or quality. It can arise from regularly obtaining less sleep than what is required for optimum functioning as well, not just from one night of insufficient sleep.

Psychologists stress that lack of sleep can harm one's ability to think, control one's emotions, and maintain general mental health. Prolonged sleep deprivation can cause problems like mood swings, diminished focus, memory loss, and increased stress, all of which can negatively impact a person's psychological health and day-to-day functioning.

Sleep deprivation significantly impacts work life by reducing productivity, impairing cognitive functions, and increasing the likelihood of errors. People who lack sleep have trouble focusing, making decisions, and solving problems, which makes them less productive and perform at work more slowly. Prolonged sleep deprivation can also have an impact on mood, making people more agitated and stressed out, which can damage relationships at work and undermine teamwork. Moreover, sleep deprivation might impair immunity, increasing the likelihood of illness and absenteeism. These elements may eventually lead to lower job satisfaction, fewer prospects for professional advancement, and an increased risk of burnout.

## II. LITERATURE REVIEW

**Pitcher et al. (1996)**, Effects of Sleep Deprivation on Performance: A Meta-Analysis. According to a meta-analysis of 19 studies, sleep deprivation has a major negative influence on human functioning, with mood being more impacted than cognitive or motor function. Compared to either short-term or long-term sleep deprivation, partial sleep deprivation has a more significant impact on functioning. These results imply that the consequences of sleep deprivation can be understated.

**Alhola, P. et al. (2005)**, Sleep deprivation, cognitive performance, and hormone therapy in postmenopausal women. According to the results of this study, animals who experience sleep deprivation (SD) may exhibit abnormalities in their hippocampus long-term potentiation (LTP) and behavioral function. It is unknown, therefore, how SD affects cognitive function and long-term neural plasticity. A 24-hour SD in mice causes a decrease in NMDA receptor (NMDAR) subunit NR1 surface expression and NMDAR-mediated excitatory post-synaptic currents at hippocampal perforant path-dentate granule cell synapses, as well as decreased hippocampus-dependent contextual memory and LTP. SD-induced deficiencies in long-term synaptic plasticity and hippocampus-dependent contextual memory may be caused by a decrease in functional NMDAR in hippocampus neurons. Lack of sleep in postmenopausal women affected their ability to see and pay attention, but this effect was short-lived because, after one rebound night, performance was better than it was at baseline. Hormone treatment did not affect cognitive function. during sleep deprivation.

**Chuah et al. (2010)**, Sleep Deprivation and Interference by Emotional Distractors. This study implies that there is an increase in emotional inputs that lead to distraction following sleep loss. Additionally, the functional relationship between the prefrontal cognitive control areas and the amygdala is deteriorating. These findings shed light on the brain foundations of interindividual variation in how sleep-deprived people could become sidetracked by unpleasant emotional stimuli.

**J.C. Lo (2016)**, Cognitive Performance, Sleepiness, and Mood in Partially Sleep Deprived Adolescents: The Need for Sleep Study examined how teenagers' mood, subjective tiredness, and cognitive function were affected by sleep deprivation. 56 healthy teenagers between the ages of 15 and 19 participated in the study and were randomized to either the Control or Sleep Restriction (SR) groups. The findings demonstrated that SR participants' working memory, executive function, sustained attention, subjective drowsiness, and positive mood all declined. The control group's mood, level of drowsiness, and cognitive function remained at baseline. According to the study's findings, high-achieving adolescents' mood, subjective alertness, and cognitive abilities are all negatively impacted by a week of partial sleep deprivation.

**Anderson, S. et al. (2017)**, The Effects of Sleep Deprivation on the Basic Level of Cognitive Function. The purpose of the study was to look into how sleep deprivation affects cognitive performance. 57 students between the ages of 20 and 22 took part in a survey and took multiplication, stroop, and response tests. The findings for intrapersonal and interpersonal correlations were not entirely consistent. More sleep was linked to better math performance, although the Stroop test revealed less sleep. Cognitive tests and sleep did not significantly correlate.

**Rose, S. et al. (2017)**, Effect of sleep deprivation on the academic performance and cognitive functions among the college students: cross-sectional research. According to a study, a substantial portion of college students (95.3%) slept fewer hours than the suggested 7-8, which had an impact on their cognitive and academic performance. This was especially noticeable for those with lower GPAs. According to the study, getting enough sleep is essential for improved cognitive function and academic achievement.

**Patrick, Y. et al. (2017)**, Effects of sleep deprivation on cognitive and physical performance in university students. A randomized controlled crossover trial was conducted with sixty-four volunteers, twenty-two  $\pm$  4 years old (mean  $\pm$  SD), and fifty-eight percent male (n = 37). One-night sleep deprivation or regular sleep were the two conditions into which participants were randomized. Cognitive results included working memory (derived from the Simon game) and executive function (Stroop test); physical results included lung function (spirometry), response speed (ruler drop testing), rate of perceived exertion, heart rate, and blood pressure during submaximal cardiopulmonary exercise testing. MANOVA and paired two-tailed T-tests were used to evaluate the data. After sleep deprivation, there was a substantial increase in both reaction time and systolic blood pressure after exercise (mean  $\pm$  SD change: reaction time:  $0.15 \pm 0.04$  s, p = 0.003; systolic BP:  $6 \pm 17$  mmHg, p = 0.012). Other variables showed no discernible changes. While other cognitive and cardiovascular measures did not dramatically change, university students' reaction times and vascular responses to exercise were considerably impacted by sleep loss. These results suggest that in young, healthy university students, acute sleep loss may affect physical but not cognitive capacity.

**Skurvydas, A. et al. (2020)**, One night of sleep deprivation impairs executive function but does not affect psychomotor or motor performance. According to a study published in the Biology of Sport, a single sleepless night

affects psychological health and executive function but does not affect motor control or the maximum effort needed to complete motor activities. Thirty healthy male young adults participated in the study and underwent a 24-hour sleep deprivation treatment. The findings demonstrated that while sleep deprivation affected executive function, it did not affect simple reaction time, motor control ability, arm and leg muscular contraction, or central and peripheral motor exhaustion.

**Saksvik-Lehouillier, I et al. (2020)**, Mild to moderate partial sleep deprivation is associated with increased impulsivity and decreased positive affect in young adults. According to a study with 52 healthy participants ages 18 to 35, young adults who experience mild to moderate partial sleep loss exhibit higher levels of impulsivity and lower levels of positive affect. For the final three nights of the study regimen, the participants were instructed to sleep for two hours less than they typically do. Reaction time, performance, and positive affect all decreased linearly, but commissions and exertion exhibited a strong quadratic trend. Faster reaction times were achieved by sleeping 1.5–2 hours less than usual, although there were more commission errors and a smaller positive impact.

**Pekçetin, S et al. (2021)**, The effect of one-night sleep deprivation on cognitive functions in healthy young adults. This study assessed how one night of sleep deprivation affected the cognitive function of healthy adults. The Montreal Cognitive Assessment and the Trail-making test were used to evaluate twenty-one healthy young individuals between the ages of 18 and 30. According to the results, there was no discernible

impact of sleep deprivation on cognitive function, indicating that one night of sleep deprivation had no bearing on cognitive function.

**Choshen-Hillel, S et al. (2021)**, Acute and chronic sleep deprivation in residents: cognition and stress biomarkers. According to a study looking at the effects of both acute and chronic sleep deprivation on medical professionals, especially resident physicians, their long-term night shift patterns put them at risk for medical blunders. According to the study, inhabitants had higher hs-CRP levels and lower morning cortisol levels, as well as chronic sleep disruption and deprivation. Residents also exhibited shorter thinking times, more impulsivity, and decreased global executive function. According to the study, enhancing work schedules through longer sleep duration may reduce immediate and possible long-term dangers for aspiring medical professionals.

**Kiriş, N. (2022)**, Effects of partial sleep deprivation on prefrontal cognitive functions in adolescents. A study involving eighteen teenagers found that partial sleep restriction had a negative impact on spatial working memory performance on cognitive tests. There were no appreciable differences in performance on tasks that assessed executive functioning, cognitive flexibility, simple attention, and steady attention. The findings suggest that teenagers who endure long-term partial sleep deprivation may be more susceptible to the detrimental impacts of sleep deprivation on their capacity for strategic thought and visuospatial working memory. The results highlight the need for additional research on the effects of sleep loss on cognitive functions.

**Kumareswaran, S. et al. (2023)**, Relationship between Sociodemographic Factors and Cognitive Failures among Employees. According to a study that involved 327 employees of the health department, 89% of them had normal cognitive function ratings. Nonetheless, a connection was shown between distractions when sleeping, working out, and being with family. This implies that sociodemographic variables that impact well-being and job competencies, like forgetfulness, distraction, and false triggers, can lead to cognitive failure. The results may aid in the creation of practical preventative measures for cognitive impairment.

### III. METHODOLOGY

Quantitative study Exploring the effects of sleep deprivation on cognitive functioning

#### Aim:

To understand the effects of sleep deprivation on cognitive functioning.

#### Objectives:

To understand the effects of sleep deprivation on cognitive functioning.  
To investigate the effects of sleep deprivation on forgetfulness.  
To investigate the effects of sleep deprivation on distractibility.  
To investigate the effects of sleep deprivation on false triggering.

#### Hypothesis:

1. There will be significant effects of sleep deprivation on forgetfulness.
2. There will be significant effects of sleep deprivation on distractibility.
3. There will be significant effects of sleep deprivation on false-triggering.

**Sample:**

A convenience sample technique was used to gather the data online. We employed a cognitive failure questionnaire with 25 items and a sleep quality scale with 28 questions, for a total of 53 questions in our questionnaire. This study had 100 participants (50 male and 50 female) aged 21 to 60.

**Tools Description:**

The sleep quality scale (Hyeryeon Yi, Kyungrim Shin, and Chol Shin, 2006) is a measure intended to assess each person's overall sleep quality. Sleep satisfaction, trouble falling and staying asleep, difficulty waking up, daytime symptoms, and sleep restoration after sleep are the six categories of sleep quality that are evaluated by its 28 items. The scale was created with the intention of offering broad, useful metrics for evaluating sleep quality that could be used with a variety of patients and study populations. The sleep quality scale's construct validity and reliability have been demonstrated to be good, with an internal consistency of .92 and test-retest reliability of .81.

The Cognitive Failures Questionnaire (Donald Broadbent and his colleagues, 1982) is a self-assessment instrument that is meant to quantify cognitive failures that are commonly encountered in daily tasks but are typically not assessed in traditional cognitive exams. It measures a person's tendency to make common mistakes or gaps in cognitive function. A range of cognitive errors and lapses are covered in the 25 items in the CFQ, including losing things, forgetting things, and making mistakes due to being easily distracted. Participants rate the frequency of each of these failures on a 5-point Likert scale. Good concept validity and internal consistency have been demonstrated for the validity and reliability of the CFQ.

**Procedure:**

The research aims to understand how sleep deprivation effects on cognitive function. The individuals were given access to a Google form that included the Cognitive Failures Questionnaire scale created by Donald Broadbent and colleagues in 1982 and the sleep quality scale created by Hyeryeon Yi et al. in 2006. They were requested to provide their details on the Google form. All of the replies were gathered once the form was completed. The researcher assessed the recorded participant responses. Participants' group data was combined, and a t-test was used to determine how sleep deprivation effects cognitive functions.

**IV. RESULT TABLES**

Table 1 Showing mean scores and T-value measures of sleep deprivation on cognitive functioning.

		Mean difference	DF	T	Mean	Std. Deviation	Sig (two-tailed)
Forgetfulness	Equal variance assumed	-4.37799	88	-3.751	10.2281	4.94620	.000
	Equal variances not assumed	-4.37799	57.409	-3.569	14.6061	5.95787	.001

Distractability	Equal variance assumed	-3.76715	88	-2.848	12.5965	6.01148	.005
	Equal variances not assumed	-3.76715	66.084	-2.836	16.3636	6.10747	.006
False triggering	Equal variance assumed	-3.69697	88	-3.115	9.0000	5.25425	.002
	Equal variances not assumed	-3.76715	62.443	-3.045	12.6970	5.71448	.003

Table 2 Group Statistics

Sleep quality		N	Mean	Std. Deviation	Std. Error mean
Forgetfulness	less sleep-deprived	5	10.2281	4.94620	.65514
	More sleep	7	14.6061	5.95787	1.03713
	derprived	3			
		3			
Distractability	less sleep-deprived	5	12.5965	6.01148	.79624
	More sleep	7	16.3636	6.10747	1.06317
	derprived	3			
		3			
False triggering	less sleep-deprived	5	9.0000	5.24425	.69594
	More sleep	7	12.6970	5.71448	.99476
	derprived	3			
		3			

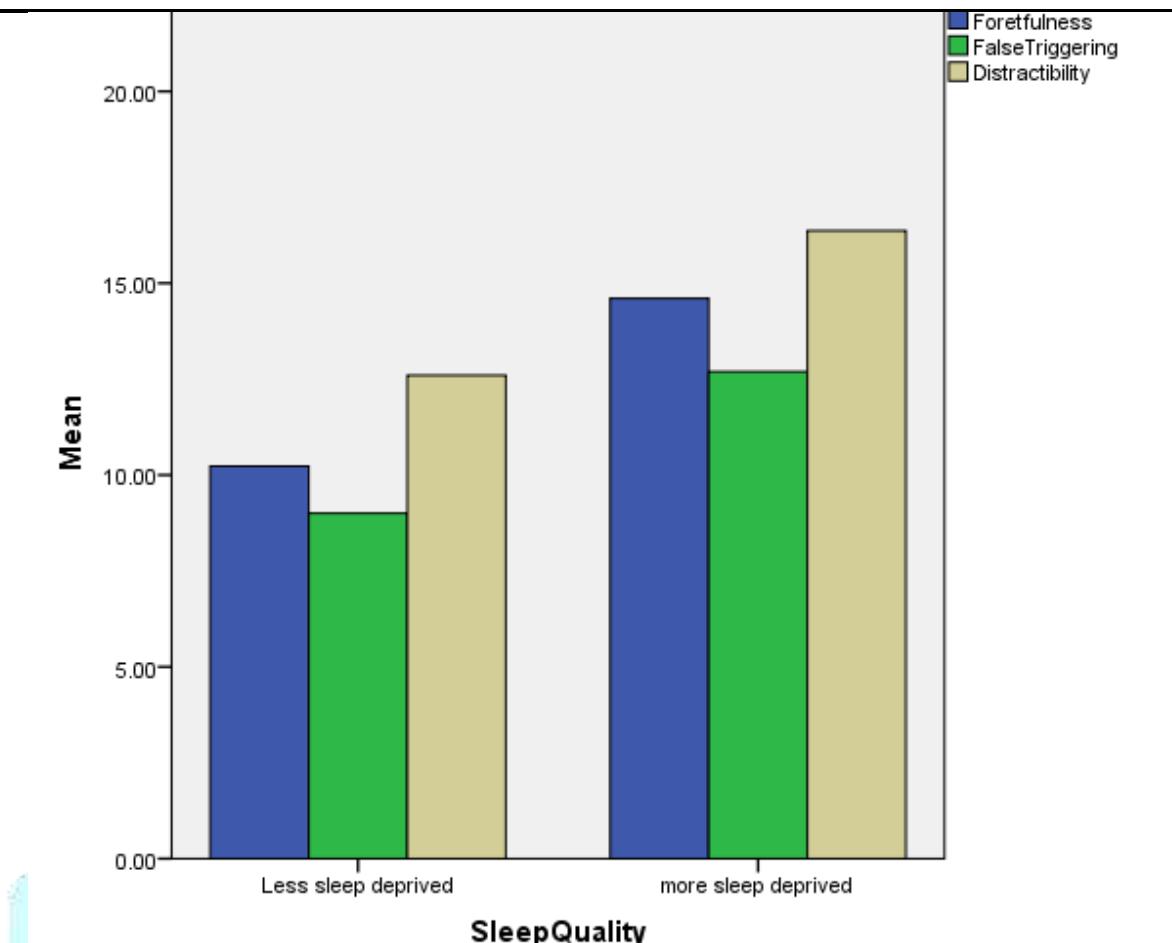


Figure 1: Mean scores of sleep deprivation on cognitive functions.

## V. DISCUSSION

The purpose of the study was to determine the sleep deprivation effects on cognitive functions. The information was collected online using a convenience sample technique. Our questionnaire consisted of 53 questions total, consisting of 25 items from a cognitive failure assessment and 28 questions from a sleep quality scale. 90 people, ages 21 to 60, participated in this study: 42 men and 48 women.

The table represents the results of the T-test for equality of means for three variables: forgetfulness, distractibility, and false triggering. These tests examine whether sleep deprivation has a statistically significant impact on these cognitive functions. Forgetfulness scores suggested that the t-value is -3.569 for equally assumed variances and -3.751 for assumed variances. Both are statistically significant ( $< 0.000$  and  $<0.001$ ), indicating that there is a difference in forgetting between the groups that are less and more sleep-deprived. The more sleep-deprived group exhibits noticeably higher forgetfulness than the less sleep-deprived group, as indicated by the mean difference of -4.37799. The difference's dependability is further supported by the confidence interval, which runs from -6.83 to -1.92. Kumareswaran, S. et al. (2023) suggested a study involving 327 health department employees that found that 89% had normal cognitive function scores. However, a link was found between distraction during sleeping, exercising, and residing with relatives. This suggests that sociodemographic factors, such as forgetfulness, distraction, and false triggers, can contribute to cognitive failure, affecting well-being and job competence. The findings could help develop effective strategies to prevent cognitive dysfunction.

Distractibility scores suggested that the T-values of -2.848 (equal variances assumed) and -2.836 (equal variances not assumed) are significant with p-values ( $<.005$  and  $<.006$ ), respectively. This shows a considerable difference in distractibility between the groups. The mean difference of -3.76715 indicates that

sleep-deprived participants are considerably more distractible than their less sleep-deprived peers, with a confidence interval of -6.42 to -1.11. Chuah et al. (2010) findings suggested that sleep deprivation increases emotional distraction and decreases amygdala-prefrontal cognitive control, highlighting interindividual variance in distractibility due to negative emotional cues.

False triggering scores suggested that for the equal and unequal variances, the t-values are -3.115 and -3.045, respectively, and both are significant at p-values ( $<.002$  and  $<.003$ ). This attests to a noteworthy distinction between the two groups. The more sleep-deprived group appears to have a higher rate of false triggering, as indicated by the mean difference of -3.69697. The robustness of this conclusion is supported by the confidence interval, which ranges from -6.12 to -1.27. Glick et al. (2023) Results indicated that sleep problems among workers have a detrimental effect on workplace performance, raise expenses for companies, and may necessitate interventions such as blue-light-filtering glasses, shift scheduling, and insomnia medication.

Typically, the graph is plotted with mean values on the y-axis and cognitive functions (such as forgetting, distractibility, and false triggering) on the x-axis. The graph reveals a direct link between sleep deprivation on cognitive functions, with more sleep-deprived individuals experiencing worse cognitive tasks, higher forgetfulness, distractibility, and false triggering scores. The graph reveals the varying effects of sleep deprivation.

The study has limitations, including potential bias in self-report measures and a restricted age range, as participants may underreport or overreport cognitive impairments and sleep deprivation due to memory biases and age-related brain function changes. Future research should focus on longitudinal studies to investigate the causal relationship between sleep deprivation and cognitive deficits. A diverse sample of people from various age groups, ethnic backgrounds, and health concerns would improve generalizability. Objective sleep measures, such as actigraphy or polysomnography, could provide more accurate assessments of participants' sleep deprivation levels.

## VI. CONCLUSION

The results of the study demonstrate the substantial negative impacts of sleep deprivation on cognitive functions such as distractability, forgetting, and false triggering. The t-test results show substantial differences between the mean scores of these cognitive deficits and sleep deprivation, all of which are supported by highly significant p-values. The three domains—forgetfulness, distractibility, and false triggering—all appear to exhibit a coherent pattern that indicates a strong link between sleep deprivation and impaired cognitive functioning, according to the significant negative t-values. This suggests that sleep deprivation effects not just physical health but also cognitive performance and efficiency in a major detrimental way. The visual representation of the graphs reveals a direct link between sleep deprivation on cognitive functions, with more sleep-deprived individuals experiencing worse cognitive tasks, higher forgetfulness, distractibility, and false triggering scores. The graph reveals the varying effects of sleep deprivation. In summary, this study highlights the critical need for getting enough sleep to maintain cognitive health and highlights the risks associated with extended sleep deprivation on day-to-day tasks. The educational and professional environments as well as mental health treatments that seek to enhance sleep quality to enhance cognitive performance may be significantly impacted by these findings.

## VII. REFERENCES

1. Pilcher, J. J., & Huffcutt, A. I. (1996). Effects of sleep deprivation on performance: a meta-analysis. *Sleep, 19*(4), 318-326.
2. Lo, J. C., Ong, J. L., Leong, R. L., Gooley, J. J., & Chee, M. W. (2016). Cognitive performance, sleepiness, and mood in partially sleep deprived adolescents: the need for sleep study. *Sleep, 39*(3), 687-698.
3. Alhola, P., Tallus, M., Kylmälä, M., Portin, R., & Polo-Kantola, P. (2005). Sleep deprivation, cognitive performance, and hormone therapy in postmenopausal women. *Menopause, 12*(2), 149-155.
4. Anderson, S., Becker, T., Flannery, A., Gustafson, L., Sarmiento, G., & Sreeram, A. (2017). The effects of sleep deprivation on cognitive function.
5. Rose, S., & Ramanan, S. (2017). Effect of sleep deprivation on the academic performance and cognitive functions among the college students: A cross sectional study. *J Chalmeda Anand Rao Institute Med Sci, 14*(1), 52.
6. Patrick, Y., Lee, A., Raha, O., Pillai, K., Gupta, S., Sethi, S., ... & Moss, J. (2017). Effects of sleep deprivation on cognitive and physical performance in university students. *Sleep and biological rhythms, 15*, 217-225.
7. Skurvydas, A., Zlibinaite, L., Solianik, R., Brazaitis, M., Valanciene, D., Baranauskiene, N., ... & Kamandulis, S. (2020). One night of sleep deprivation impairs executive function but does not affect psychomotor or motor performance. *Biology of sport, 37*(1), 7-14.
8. Saksvik-Lehouillier, I., Saksvik, S. B., Dahlberg, J., Tanum, T. K., Ringen, H., Karlsen, H. R., ... & Olsen, A. (2020). Mild to moderate partial sleep deprivation is associated with increased impulsivity and decreased positive affect in young adults. *Sleep, 43*(10), zsaa078.
9. Pekçetin, S., Öztürk, G., Çetin, B., & Öztürk, L. (2021). The effect of one-night sleep deprivation on cognitive functions in healthy young adults. *Sleep Science, 14*(3), 224-228.
10. Choshen-Hillel, S., Ishqer, A., Mahameed, F., Reiter, J., Gozal, D., Gileles-Hillel, A., & Berger, I. (2021). Acute and chronic sleep deprivation in residents: cognition and stress biomarkers. *Medical Education, 55*(2), 174-184.
11. Kiriç, N. (2022). Effects of partial sleep deprivation on prefrontal cognitive functions in adolescents. *Sleep and Biological Rhythms, 20*(4), 499-508.
12. Chuah, L. Y., Dolcos, F., Chen, A. K., Zheng, H., Parimal, S., & Chee, M. W. (2010). Sleep deprivation and interference by emotional distractors. *Sleep, 33*(10), 1305-1313.
13. Glick, D. R., Abariga, S. A., Thomas, I., Shipper, A. G., Gunia, B. C., Grandner, M. A., ... & Wickwire, E.M. (2023). The economic impact of insufficient and disturbed sleep in the workplace. *Pharmacoeconomics, 41*(7), 771-785.
14. Kumareswaran, S., Muhadi, U., Farhan, A., & Sathasivam, J. (2023). Relationship between sociodemographic factors and cognitive failures among employees. *European Journal of Humanities and Social Sciences, 3*(1), 16-22.
15. Semwal, R., Ranjan, S., Dhama, A., Chauhan, A., Bairwa, M. K., & Madhav, R. C. (2023, September). Conceptual Framework: Leveraging Artificial Intelligence for Enhanced Travel Review Analysis and Insights. In *2023 6th International Conference on Contemporary Computing and Informatics (IC3I)* (Vol. 6, pp. 2176-2181). IEEE.
16. Semwal, R., Tripathi, N., Singh, A., & Saxena, S. R. (2024). Reviving Narratives: Virtual Reality and Historical Reconstruction in Tourism. In *Dimensions of Regenerative Practices in Tourism and Hospitality* (pp. 269-284). IGI Global.
17. Semwal, R., Tripathi, N., Tyagi, P. K., & Nadda, V. (2024). Neural Networks and Customer Connectivity. In *Integrating AI-Driven Technologies Into Service Marketing* (pp. 477-498). IGI Global.