

CHARACTERIZATION OF PSYCHOSOCIAL ASPECTS AND MENTAL DISORDERS OF THE NURSING TEAM OF A HOSPITAL IN GOIAS

CARACTERIZAÇÃO DE ASPECTOS PSICOSSOCIAIS E TRANSTORNOS MENTAIS DA EQUIPE DE ENFERMAGEM DE UM HOSPITAL GOIANO

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ABSTRACT

This research aimed to verify the mental health status related to occupational factors of nursing professionals in a public hospital in the State of Goiás, Brazil. This quantitative descriptive research characterized the psychosocial aspects and mental disorders developed by the nursing team in a public hospital in Goiás. The questionnaire application occurred during August and September 2020. The study sample was composed of 15 nursing professionals of a participating hospital in Goiás. The occupational health of nurses in a hospital may involve several challenges since their work environment may change according to each company reality. Thus, the professional may work in dangerous, risky, unhealthy, refrigerated, noisy, confined, or shared locations. We then conclude the mental disorders are present in the daily life of professionals who work in a hospital environment, especially nurses, and are related to circumstances experienced within the workplace itself, leading to gradual illness among the professionals.

Keywords: Mental disorders. Nursing. Occupational risks.

RESUMO

Esta pesquisa teve por objetivo verificar o estado de saúde mental relacionado a fatores ocupacionais dos profissionais de enfermagem atuantes em um hospital público goiano. Trata-se de uma pesquisa quantitativa de natureza descritiva que se preocupou em caracterizar os aspectos psicossociais e transtornos mentais desenvolvidos pela equipe de enfermagem, em um hospital público goiano. O questionário foi aplicado nos meses de agosto e setembro de 2020. A amostra deste estudo foi composta por 15 profissionais da equipe de enfermagem do hospital goiano. Ao analisar a saúde ocupacional do enfermeiro em ambiente hospitalar, verificou-se que pode envolver vários desafios, visto que, ele trabalha em ambientes diferentes conforme a realidade de cada empresa. Desse modo, pode atuar em locais perigosos, arriscados, insalubres, refrigerado, com ruídos, em confinamento ou coletivo. Conclui-se que transtornos mentais estão presentes no cotidiano dos profissionais que atuam em ambiente hospitalar, especialmente a enfermagem, sendo esse acometimento relacionado as situações vivenciadas dentro do próprio ambiente de trabalho levando as pessoas ao adoecimento gradativamente.

Palavras-chave: Enfermagem. Riscos Ocupacionais. Transtornos mentais.

INTRODUCTION

Working conditions have been the focus of scientists because it is considered a relevant factor both in the origin of illnesses and in the person's well-being. Among the risks to professionals in the workplace, psychosocial factors stand out as they affect the nursing professionals (CASAFUS *et al.*, 2017). Such factors can originate from the interaction between working conditions, the environment, contentment in the profession, and work conditions. As a consequence, psychosocial risks can compromise the workers' capacity, in addition to their needs (CASAROLLI *et al.*, 2017).

More flexibility and uncertain employment, work intensification, and interpersonal relationship problems in the workplace favor psychosocial disorders. These factors may trigger low performance in nursing and have consequences for physical and mental health (KIRCHHOF *et al.*, 2017). Therefore, the addition of social support at work by supervisors and colleagues acts as a moderator of tension, reducing the deterioration of workers (CASAFUS *et al.*, 2017).

Demands are high in the nursing environment since these workers deal with complex situations, time pressure, shortage of personnel and material, increasing the demand for high performance to guarantee the quality of care. Thus, nursing is a profession with a physically and emotionally demanding work structure (CASAFUS *et al.*, 2017).

Occupational health is defined as the area that seeks the physical, social, and mental well-being of individuals in their workplace, emphasizing preventive measures to reduce the change of illness. Health professionals, especially nursing professionals, are exposed to certain occupational risks, which, in the short or medium term, affect their performance at work, afterward transposing the workplace problems for their family (KIRCHHOF *et al.*, 2017).

Researchers developed studies discussing occupational diseases and risks that nursing professionals are predisposed to have (TEIXEIRA; CASANOVA; SILVA, 2014; ALVES *et al.*, 2015; FORESTO *et al.*, 2015; SANTANA *et al.*, 2016; SOUSA *et al.*, 2019). According to the World Health Organization (WHO), twelve per cent of the nursing workforce suffer from problems related to occupational diseases. In Brazil, studies show that 13% of nurses report having acquired work-related illnesses (FORESTO *et al.*, 2015).

There are personality and psychological factors that turns the person more vulnerable to mental disorders. Finally, mental disorders may also have biological causes, dependent, for example, on genetic factors or biochemical brain imbalances. The promotion of mental health involves actions that bring living conditions and environments conducive to mental health, allowing people to adopt and maintain healthy lifestyles (ALMEIDA; SILVA; MORAES-FILHO, 2017).

Some series of actions aim to increase the chances of more people having better mental health. An environment of respect and protection of fundamental civil, political, socio-cultural, and economic rights is essential for promoting mental health. Without the security and freedom provided by these rights, it is harder to maintain a good level of mental health (CASAROLLI *et al.*, 2017).

Therefore, the pressure suffered by nursing professionals stands out, which can trigger avoidable psychosocial problems. Thus, this study aims to verify the mental health status related to occupational factors of nursing professionals working in a public hospital in the State of Goiás, Brazil.

MATERIAL AND METHODS

This research is quantitative and descriptive, concerned with characterizing the psychosocial aspects and mental disorders developed by the nursing team in a medium-sized public hospital in Goiás, with a capacity of 54 beds.

The study population consisted of 42 nursing professionals, distributed according to sectors of the institution. All were invited to participate in the research and sign the Informed Consent Form (ICF); however, only 15 agreed to be part of the sample.

The nurses in the sampled hospital have 12-hour shifts with 36 hours of rest. Nurses and nursing technicians were surveyed in their work environment, on alternate weekends, during their

rest time. The questionnaire lasted 15 minutes so would not compromise their work performance, with all participants signing the consent form.

For data collection, a semi-structured questionnaire containing 22 closed questions was applied. The questionnaire was applied during August and September 2020. The participants answered individually in the nursing room, a reserved place that provided security and comfort. The variables composed the sociodemographic profile (age group, gender, marital status, education, profession time, work sector, and qualification).

The information obtained was later typed and grouped to detect the psychosocial aspects of nursing professionals. Data were transcribed in full and stored using the Microsoft Excel software. Then, descriptive analysis was performed, with the results plotted and distributed as graphs.

The project was submitted to the Research Ethics Committee with CAEE n. 2979020.0.0000.5076 being approved on July 28 under Opinion No 4,119,181, as recommended in Resolution 466/12 of the National Health Council (CNS).

RESULTS AND DISCUSSION

The study sample was composed of 15 nursing professionals of a public hospital in Goiás.

According to sociodemographic data from the surveyed workers, most (33.3%) are 30-39 years old, 86.6% are nurse technicians, and only 13.3% are nurses. Most self-declared brown (80%) and 40% are single and 40% married. Besides, most (46.6%) own their house, and regarding education, 53.3% studied up to the high school level (Table 1).

Studies carried out between 1997 and 2009 showed a prevalence of common mental disorders (CMD) in health professionals ranging from 20.3% to 43.3%, with a higher frequency in women due to stressful situations in the workplace since women generally let their feelings flow according to the circumstances they face. In a study with 367 professionals from 24 different primary care units in the interior of the State of Rio Grande do Sul, the prevalence of disorders was similar, and women were also the most affected group. Thus, female nurses and nurse technicians are prevalent with psychological disorders at work (ALVES *et al.*, 2015; CARLOTTO *et al.*, 2016).

The occupational health of nurses in a hospital may involve several challenges since they work in different workplaces according to each company. They may work in dangerous, risky, unhealthy, refrigerated, noisy, confined, or shared places. Therefore, depending on the circumstances, the health worker may find difficulties in his performance, making it necessary to create strategies, develop leadership and decision-making capacity, take risks, innovate, and create possibilities, both to develop his work and benefit everyone's work. Occupational nurses have a fundamental role in the promotion of health, preventing accidents with chemical, physical, biological, and psychosocial (SENA *et al.*, 2015; CARVALHO; ARAÚJO; BERNARDES, 2016; ALMEIDA; SILVA; MORAES-FILHO, 2017).

Araújo *et al.* (2016) carried out a study with 2,532 health workers, most female between 31 and 40 years old. They found that according to the psychosocial characteristics of the workplace, professionals develop high psychological demand, low work control, and high social support. These workers experienced high-strain work, a feeling of low reward, and the prevalence of common mental disorder (CMD) in 21% of surveyed professionals.

Carvalho, Araújo and Bernardes (2016) carried out a cross-sectional epidemiological study with 762 primary care workers in Feira de Santana, which corroborates the findings of this research. The majority of their surveyed professionals aged around 40 years, without higher education, without addictions or chemical dependencies, low level of physical activity and laser, and declared good health and quality of life. Although most have a permanent job contract (for more than five years), they revealed dissatisfaction with their job due to high pressure, psychological demand, and control over their work. Their results show that the working conditions have consequences on the psychological and mental illness of healthcare workers, where the mental disorders may occur due to work-related situations, especially in the hospital environment.

Table 1 – Sociodemographic data of health professionals from a public hospital in Goianesia-GO, Brazil, 2020.

Sociodemographic Data	Number (Percentage)
Age range	15 (100%)
18-29 years old	2 (13%)
30-39 years old	5 (33%)
40-49 years old	4 (26%)
49+ years old	4 (26%)
Profession	15 (100%)
Nurse technician	13(86%)
Nurse	2 (13%)
Color/Race	15 (100%)
White	3 (20%)
Brown	12 (80%)
Black	0 (0%)
Yellow	0 (0%)
Indigenous	0 (0%)
Marital Status	15 (100%)
Single	6 (40%)
Married	6 (40%)
Widowed	1 (6%)
Other	2 (13%)
Home	14 (93.333...%)
Owned	7 (46%)
Rented	3 (20%)
Other	4 (26%)
Education	15 (100%)
High School	8 (53%)
Undergraduate	3 (20%)
Graduate	2 (13%)
Technologist	1 (6%)
Other	1 (6%)

Source: Authors.

A study carried out with 74 nursing professionals from a hospital in the Brazilian Northeast region, 14 nurses and 60 nursing assistants and technicians, confirmed an association between sociodemographic, labor, CMD variables, with a variation of 0.015 among professional levels, considering that higher education and better social conditions can also influence the occurrence of disorders. Besides, regarding age and time of service, there was an overall prevalence of 25.7% of CMD, considered high values for the category (SOUSA *et al.*, 2019).

Among the interviewees, about 46.6% have been working at the hospital for 1-5 years, 26.6% for 5-10 years, and 26.6% for 10-20 years. As for working hours, 66.6% work during the day shift, 26.6% in the night shift, and only 6.6% in mixed work shifts. When asked about pressure, unhappiness, or dissatisfaction during their work routine, most (66.6%) responded dissatisfied. Regarding the difficulties at work, the majority (93.3%) indicated the professional devaluation, 66.6% indicated the lack of resources, 60% answered dissatisfaction with the excessive workload, 26.6% the occurrence of unnecessary disagreement and confusion in the workplace. Finally, the majority (86.6%) affirmed having developed mental disorders due to their job (Table 2).

Work overload combined with the lack of time to perform the tasks and the nursing work routine are considered risk factors that can influence mental disorders. Nursing routines often involve patient emergencies, deaths, double shifts, which imply emotional exhaustion due to the psychological pressures of the work environment (ALVES *et al.*, 2020).

Table 2 - Information about healthcare professionals in a public hospital in the municipality of Goianesia, Goias, Brazil, 2020

Work-related data	Number (Percentage)
Profession time at the hospital	15 (100%)
1 to 5 years	7 (46%)
5 to 10 years	4 (26%)
10 to 20 years	4 (26%)
Work shift	15 (100%)
Day	10 (66%)
Night	4 (26%)
Mixed	1 (6%)
Feel pressure, unhappiness, or dissatisfaction during your work routine	15 (100%)
Yes	5 (33%)
No	10 (66%)
Difficulties at workplace	15 (100%)
Employee shortage	6 (40%)
Lack of resources	10 (66%)
Excessive workload	9 (60%)
Excessive disagreement and confusion	4 (26%)
Professional devaluation	14 (93%)
Lack of social support	6 (40%)
Authoritarian leadership	2 (13%)
Have mental disorders caused by work	15 (100%)
Yes	13 (86%)
No	2 (13%)

Source: Authors.

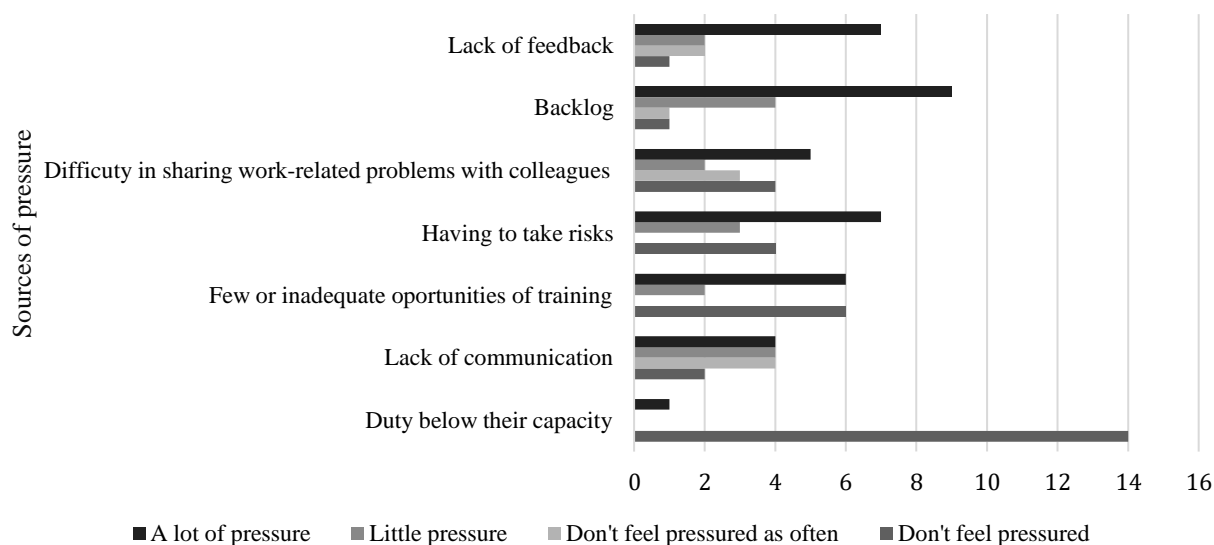
A study with 359 nursing professionals indicates that the time of work and the working hours, particularly when they perform consecutive shifts, represents an aggravating factor for the development of psychosocial disorders. The longer the duration of work, the higher the prevalence of mental disorders. The most common complaints are overwork, tension, stress, and professional devaluation, which, due to low pay, end up accepting several shifts, becoming an aggravating factor for diseases (ALVES *et al.*, 2015).

Regarding the pressure on the workplace (Figure 1), most (93%) affirmed that they do not feel pressured in performing a job below their capacity. Besides, 29% affirmed to feel significant pressure regarding communication and information, and only 14% answered no. As for inadequate training opportunities, 43% believe that they feel much pressured and 14% less pressured. Most (50%) feel much pressure on taking risks, and 21% said that they don't feel pressured as often. Regarding the difficulty in sharing work-related problems with colleagues, most (36%) feel a lot of pressure and 14% little pressure. They also answered about the backlog, and most (60%) said they feel a lot of pressure, and 6% don't feel pressured. Finally, most (58%) answered that they feel much pressure about the lack of feedback, and 8% don't feel pressured (Figure 1).

Studies corroborate that several factors are causing mental disorders in healthcare workers, such as work overload, compromised sleep pattern, low pay, psychological pressure from the workplace, medical procedures with insufficient time for execution, conflicts between workers, high risks and demands, few opportunities for training, performing function below capacity, and lack of professional training. All these factors lead to physical and mental wear, which can lead to mental disorders. The pressure and tension of the accumulation of activities, unexpected situations can cause anxiety, depression, dissatisfaction with work, especially with a shortage of materials and human

resources (ALVIM *et al.*, 2017; CORDEIRO; ARAÚJO, 2018; FERNANDES; SOARES; SILVA, 2018; FERREIRA *et al.*, 2019; ALVES *et al.*, 2020).

Figure 1 – Source of work-related pressure.



Source: Authors.

Regarding psychosocial problems or mental disorders resulting from work activities, most (80%) of the participants have stress, 46.6% Generalized Anxiety Disorder, 13.3% Major Depressive Disorder, and 15% other problems. Concerning job satisfaction, most 46.6% are not very satisfied, 33.3% are satisfied, 13.3% are very satisfied, and 6.6% are dissatisfied. When asked about the leave due to health problems arising from work, the majority (73.3%) said no. Besides, most (86.6%) said they do not receive any psychological counseling. And as for the work environment, 40% find it very stressful, 40% partially stressful, and 20% not very stressful. Regarding religion, 66.6% answered Catholic and 46.6% Evangelical. Finally, 46.6% do not practice physical activity, 40% practice often, and 13.3% sometimes (Table 3).

In this study, the main difficulties found at work were the lack of resources and the stress caused by conflicts between co-workers. In this sense, Munhoz *et al.* (2018) agree that the nurse is exposed to situations of medium to high level of stress in a continuous and prolonged way. The disorders often arise from risk factors related to workload, and stressors, such as conflicts between co-workers, shortage of resources, work overload, and high physical and mental effort that can lead to psychosomatic illnesses, leaves, or even disability retirement.

There are personality and specific psychological factors that make a person more vulnerable to mental disorders. Moreover, mental disorders also have biological causes, dependent, for example, on genetic factors or biochemical brain imbalances. The promotion of mental health involves actions that create living conditions and environments that are conducive to mental health and allow people to adopt and maintain healthy lifestyles, such as physical activity (ALMEIDA; SILVA; MORAES-FILHO, 2017).

The pressures of everyday life have significant psychosocial consequences. Psychological damage, in this case, might be less visible than with other illnesses; however, it usually takes much longer to recover from an emotional impact. The provision of early support and adaptation processes, respecting local customs concerning mental health or psychological recovery, allows a damaged population to better face a tough situation (MACHADO *et al.*, 2016).

Table 3 - Specific information from health professionals from a public hospital in the municipality of Goianesia, Goiás, Brazil, 2020.

Type of information	Number (%)
Psychosocial problems or mental disorders arising from work activities	15 (100%) – More than one answer per participant.
Stress CID10 F43;	12 (80%)
Generalized Anxiety Disorder (GAD) CID10 F41;	7 (46%)
Major depressive disorder CID10 F32;	2 (13%)
Other;	6 (15%)
Job satisfaction	15 (100%)
Very satisfied;	2 (13%)
Satisfied;	5 (33%)
Not very satisfied;	7 (46%)
Dissatisfied;	1 (6%)
Absence due to health problems arising from work	15 (100%)
Yes;	2 (13%)
Always;	0 (0%)
Sometimes;	2 (13%)
No;	11 (73%)
Received psychological counseling	15 (100%)
Yes;	0 (0%)
Always;	1 (6%)
Sometimes;	1 (6%)
No;	13 (86%)
Workplace	15 (100%)
Very stressful;	6 (40%)
Not very stressful;	3 (20%)
Partially stressful;	6 (40%)
Practice physical activity	15 (100%)
Yes;	6 (40%)
No;	7 (46%)
Sometimes;	2 (13%)

Source: Authors.

Studies show the prevalence of anxiety, stress, and depression in nurses, emphasizing that, in many professionals, these disorders may advance to panic disorder, bipolar disorder, and Burnout syndrome. Nursing is often part of very stressful environments. As mentioned above, many situations of the daily work combined with their demands can cause inconvenience and lead professionals to illness, such as the lack of materials to perform procedures, conflicts between colleagues, double work shifts, and emergency and terminal patients or with complex demands. Besides, unfortunately, many are unable to undergo treatment, and companies do not have psychosocial support (ALVES *et al.*, 2015; SENA *et al.*, 2015; SILVA *et al.*, 2015; CARTOLLO, 2016; MOREIRA *et al.*, 2016; SANTANA *et al.*, 2016; BERTUSSI *et al.*, 2017; OLIVEIRA *et al.*, 2017; JUNQUEIRA *et al.*, 2018; MORENO *et al.*, 2018; SOUSA *et al.*, 2018).

According to Mello *et al.* (2017), stress occurs when the work demands do not correspond to the professional's capabilities, resources, or needs. Lack of social support at work (pressure), work overload (especially supervisors), exposure to infectious diseases, problems with managers, work-related violence or threats, lack of sleep, ambiguity, and role conflict in case of staff shortage, besides dealing daily with critically ill patients.

The most common causes of stress in healthcare facilities are staff shortage, long working hours of many shifts, ambiguity in roles, exposure to hazardous and infectious substances, excessive

treatment for terminally ill patients or interpersonal conflicts with other employees regarding patient life expectancy, and psychological negligence (e.g., irritability, discontent). Stress is related to some types following types of behavioral (e.g., sleep problems, depression) and physical reactions. The priority for organizational change is to improve working conditions, develop strategies to deal with stressful situations, progressive relaxation, behavioral and cognitive techniques, interpersonal time management skills, and training in prevention and control measures (TEIXEIRA *et al.*, 2019).

Studies show that psychological pressures, as well as stress and Burnout syndrome, have significantly emerged since professionals deal with sick people, frustrations, daily pressures, and daily deaths. Professionals witness severe cases of critical patients and are particularly dedicated to quality service even in stressful environments, often unhealthy and exhausting, during intense work hours. They constantly live with triggering factors, whether physical or psychological factors, including repetitive tasks, pressures, double shifts, and workload, resulting in professional wear and exhaustion; thus, characterizing Burnout Syndrome (CESTARI *et al.*, 2017; FERNADES *et al.*, 2017).

The nurse's physical and mental wear combined with life-threatening situations has continuously contributed to occupational diseases. Depression is one of the phenomena with a great tie in the mental health of nursing professionals, thus, a public health issue which has its classification provided for in the ICD-10 (International Classification of Diseases), with symptoms such as strong feelings of hopelessness, sadness profound (PEREIRA *et al.*, 2017).

In this sense, any healthcare facility should assume the responsibility to implement and demand the necessary measures to maintain and improve efficiency levels in the workplace. Specifically, in Brazil, there is a significant concern regarding the incidence of work-related diseases. The healthcare facility, as an institution, should guarantee health well-being conditions to the workers in a workplace adequate and conducive to workers perform their functions (ALMEIDA; SILVA; MORAES-FILHO, 2017).

The individual must deal with the ordinary stresses of life, work productively, and contribute to their community (ASCARI *et al.*, 2018). In this regard, well-being becomes fundamental to our collective and individual capacity to think, express feelings, interact with others, earn a living, and enjoy life. On this basis, the promotion, protection, and recovery of mental health are vital concerns of people, communities, and societies worldwide (MATOS *et al.*, 2017).

Therefore, it is essential to frequently develop studies on the performance of nursing in different workplaces, evaluating their capacities and situations that may cause psychological disorders. The ideal would be to create a model to control these demands so that professionals are evaluated monthly to avoid progressing to more complex syndromes that can lead to paid leave, early retirement, extended leaves, and chronic diseases.

CONCLUSION

We conclude that mental disorders are present in the daily lives of professionals who work in a hospital environment, especially nursing, and this involvement is related to situations experienced within the work environment, leading people to gradually become ill. Professionals work in environments full of stressful situations that cause mild mental disorders that end up evolving into serious disorders due to lack of counseling and treatment.

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