Caring for Those Who Care: A Theoretical Reflection on the Promotion of urses' Mental Health

Cuidar de quem cuida: Uma reflexão teórica sobre a promoção da saúde mental de enfermeiros

Cuidar a quienes cuidan: Una reflexión teórica sobre la promoción de la salud mental de los enfermeros

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RESUMO

Introdução: A saúde mental de enfermeiros tem ganhado destaque diante da sobrecarga laboral, da pressão emocional e de condições organizacionais que potencializam o sofrimento psíquico, reforçando a necessidade de refletir sobre estratégias de cuidado ao cuidador. Objetivo: Refletir teoricamente sobre os determinantes do sofrimento psíquico e as estratégias de promoção da saúde mental de enfermeiros, à luz de evidências contemporâneas. Métodos: Ensaio teórico-reflexivo elaborado a partir de debates acadêmicos, vivências profissionais e análise interpretativa de estudos recentes sobre saúde mental de enfermeiros, sofrimento moral, burnout, fadiga emocional e intervenções institucionais, utilizando como referência um conjunto de produções científicas previamente selecionadas. **Resultados**: O sofrimento psíquico decorre de múltiplos fatores, incluindo sobrecarga de trabalho, insuficiência de recursos, conflitos éticos, exposição contínua ao sofrimento humano e fragilidades organizacionais, resultando em ansiedade, estresse, exaustão emocional e prejuízos à qualidade do cuidado. Identificaram-se estratégias promotoras de bem-estar baseadas em políticas institucionais, apoio psicossocial, desenvolvimento de competências emocionais e práticas de autocuidado. **Conclusões**: Promover a saúde mental dos enfermeiros é um imperativo ético, humano e organizacional que requer ações integradas entre gestão, educação e apoio emocional, fortalecendo o bem-estar desses profissionais e contribuindo para práticas assistenciais mais seguras e humanizadas.

Descritores: Saúde mental; Enfermeiros; Promoção de Saúde.

ABSTRACT

Introduction: Nurses' mental health has gained prominence due to work overload, emotional pressure and organizational conditions that intensify psychological distress, reinforcing the need to reflect on strategies for caring for the caregiver. **Objective**: To theoretically reflect on the determinants of psychological distress and the strategies for promoting nurses' mental health, based on contemporary evidence. Methods: Theoretical-reflective essay developed from academic debates, professional experiences and interpretative analysis of recent studies on nurses' mental health, moral distress, burnout, compassion fatigue and institutional interventions, using a previously selected set of scientific sources as reference. Results: Psychological distress arises from multiple factors, including work overload, insufficient resources, ethical conflicts, continuous exposure to human suffering and organizational fragilities, resulting in anxiety, stress, emotional exhaustion and impaired quality of care. Strategies that promote well-being were identified, including institutional policies, psychosocial support, development of emotional competencies and self-care practices. **Conclusions**: Promoting nurses' mental health is an ethical, human and organizational imperative that requires integrated actions involving management, education and emotional support, strengthening professional well-being and contributing to safer and more humanized care practices

Descriptores: Mental health; Nurses; Health Promotion

RESUMEN

Introdução: La salud mental de los enfermeros ha adquirido relevancia frente a la sobrecarga laboral, la presión emocional y las condiciones organizacionales que intensifican el sufrimiento psíquico, lo que refuerza la necesidad de reflexionar sobre estrategias de cuidado al cuidador. **Objetivo**: Reflexionar teóricamente sobre los determinantes del sufrimiento psíquico y las estrategias de promoción de la salud mental de enfermeros, a la luz de evidencias contemporáneas. Métodos: Ensayo teórico-reflexivo elaborado a partir de debates académicos, experiencias profesionales y análisis interpretativo de estudios recientes sobre salud mental de enfermeros, sufrimiento moral, burnout, fatiga por compasión e intervenciones institucionales, utilizando como referencia un conjunto de producciones científicas previamente seleccionadas. Resultados: El sufrimiento psíquico deriva de múltiples factores, entre ellos la sobrecarga laboral, insuficiencia de recursos, conflictos éticos, exposición continua al sufrimiento humano y fragilidades organizacionales, generando ansiedad, estrés, agotamiento emocional y perjuicios en la calidad del cuidado. Se identificaron estrategias de promoción del bienestar basadas en políticas institucionales, apoyo psicosocial, desarrollo de competencias emocionales y prácticas de autocuidado. **Conclusiones**: Promover la salud mental de los enfermeros es un imperativo ético, humano y organizacional que requiere acciones integradas entre gestión, educación y apoyo emocional, fortaleciendo el bienestar profesional y contribuyendo a prácticas asistenciales más seguras y humanizadas.

Descriptores: Salud mental; Enfermeros; Promoción de la Salud.

Introduction

The mental health of nursing professionals has become a key focus for the quality of care and the safe functioning of healthcare systems. Globally, studies show that nurses work in environments characterized by intense emotional demands, high clinical complexity, and resource scarcity—conditions that foster psychological distress, anxiety, depression, and post-traumatic stress, particularly in crisis situations or during prolonged overload. During the COVID-19 pandemic, these tensions became even more apparent, increasing psychosocial risks from exhausting work shifts, exposure to traumatic situations, and ethical challenges in care, resulting in a substantial negative impact on nurses' emotional well-being in various countries.

However, the mental health deterioration of these professionals is not limited to emergency contexts. Symptoms such as emotional exhaustion, persistent sadness, irritability, sleep disturbances, and psychophysical wear are frequent among nurses who face intense routines and high responsibility in care. In many cases, these manifestations persist in an accumulated form, leading to chronic psychological distress, influenced by emotional burdens associated with continuous exposure to human suffering and high-pressure clinical situations. These findings reinforce the notion that, even outside critical periods, nursing practice involves emotionally demanding work that directly impacts mental health when adequate support is lacking.

Several occupational factors amplify this vulnerability. Work overload, reduced teams, interpersonal conflicts, lack of autonomy, organizational limitations, and recurring ethical dilemmas all contribute to increased emotional strain among nurses. Among these factors, moral distress stands out as an experience marked by the perception that ethically appropriate actions cannot be taken due to institutional or structural barriers. This phenomenon is associated with feelings of frustration, powerlessness, guilt, and professional dissatisfaction, and contributes to higher risks of burnout and diminished quality of care. At the same time, conflicts related to work pace, pressure for results, and the accumulation of technical and human responsibilities have been identified as important determinants of suffering in nursing.

The relational dimension of nursing also plays a significant role in the well-being of professionals. The expectations of patients and families, which include empathy, attentive listening, and emotional presence, require robust interpersonal skills and emotional availability, often compromised by adverse organizational conditions. A recent study points out that nurses face difficulties in maintaining quality therapeutic relationships when overload prevents adequate time for interaction, leading to emotional tensions, feelings of inadequacy, and burnout in care relationships. Additionally, negative attitudes, stigma, and communication challenges within teams can exacerbate psychological distress, particularly in more complex contexts such as mental health and emergencies.

In addition to these determinants, recent data highlight that psychological distress among nurses is strongly linked to persistent physical ailments, particularly chronic pain. A large-scale study in China demonstrated that chronic pain, often resulting from musculoskeletal overload and repetitive work patterns, shows a

robust association with anxiety, depression, fatigue, burnout, loneliness, and reduced subjective well-being, creating a feedback loop between pain and mental distress that worsens existing vulnerabilities within the nursing profession. Moreover, the coexistence of multiple pain sites was particularly impactful, indicating that the greater the number of affected areas, the more intense the indicators of emotional distress, reinforcing the understanding of mental health as a phenomenon integrated with the body and working conditions. This finding broadens the understanding of nurses' health by showing that physical fragility, often overlooked, directly interacts with mental health, intensifying psychological symptoms and compromising coping abilities in everyday work.

In this context, it becomes evident that the mental health of nurses is influenced by multidimensional factors, including emotional demands, ethical burdens, organizational conflicts, physical wear, persistent pain, and interpersonal vulnerabilities. Although advances have been made in characterizing risk factors, initiatives aimed at promoting emotional well-being and creating healthy work environments are still insufficient. Interventions that strengthen socioemotional skills, such as self-awareness, emotional regulation, communication, and conflict management, have shown potential to foster adaptation, reduce symptoms, and promote more humanized care practices, highlighting the relevance of emotionally intelligent programs for strengthening those who care for others.

Given this complex and multifactorial panorama, it is essential to reflect on strategies that promote the mental health of nurses in a broad, integrated, and sustainable manner. This theoretical-reflective study aims to explore the promotion of nurses' mental health within the context of healthcare work and seeks to analyze, in light of available scientific evidence, the determinants of this process and the possible paths to strengthen the emotional well-being of these professionals who are essential to society.

Method

This is a theoretical-reflective essay, developed through debates, directed readings, and critical analyses conducted within the framework of the academic activities of the Graduate Nursing Program at the Federal University of Alfenas (UNIFAL-MG). The reflection emerged from discussions held throughout the subjects and academic experiences addressing nursing workers' health, subjectivity in care, psychological distress, and strategies for promoting mental health—topics that are part of the researcher's training journey and interact with their professional experience.

The essay is based on contemporary studies about nurses' mental health, burnout, moral distress, emotional fatigue, crisis of meaning at work, and institutional care interventions, complemented by recent scientific research compiled in the document provided to support the study. From this body of evidence, the text was structured through a dialogical and reflective process, integrating theory, critical problematization, and an expanded understanding of the phenomenon.

As this is a reflective study, no formal inclusion or exclusion criteria were defined for bibliographic materials, as the goal was not exhaustiveness but analytical depth. Therefore, references that contributed to understanding the determinants of

nurses' mental health, identifying psychosocial vulnerabilities, and discussing strategies for promoting emotional well-being in the healthcare work context were prioritized.

The reflection is structured based on the concerns generated by direct contact with the phenomenon of emotional distress in nursing and the critical analysis of the challenges faced in the daily lives of these professionals. A framework that integrates theory, professional experience, and scientific evidence was adopted, from which three central reflective categories emerged: 1) Structural and organizational determinants of nurses' psychological distress; 2) Emotional, psychosocial, and ethical repercussions of nursing work; 3) Institutional and individual strategies to promote the mental health of caregivers.

In this way, the essay aims to contribute to the academic and professional debate on the CARE of caregivers, emphasizing the need for healthy work environments and emotional support practices that strengthen nurses' well-being.

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Results and Discussion

Category 1 – Structural and organizational determinants of psychological distress

The analyzed studies show that nurses' psychological distress is deeply rooted in structural and organizational factors that shape daily work in healthcare services. Work overload, scarcity of human and material resources, and the accumulation of administrative responsibilities appear as recurring problems across different contexts. In Primary Health Care (PHC), authors highlight that the precariousness of working conditions, combined with the constant increase in care demands, creates an environment conducive to professional exhaustion and chronic stress.

Similarly, researchers have identified that the dimensions of organization, socio-professional relationships, and working conditions in Primary Health Care Units were classified as presenting "severe" or "critical" risk for psychological illness, revealing that PHC—despite being a space for bonding and longitudinal care—can also negatively affect professionals due to precarious structural conditions.

In hospital settings, especially in high-complexity units, this scenario is intensified. A recent study conducted with nurses working in Intensive Care Units shows that high emotional demands, rapid decision-making under pressure, and continuous vigilance favor the development of burnout and elevated stress. Researchers found that 43.26% of ICU nurses presented high stress levels, with emotional exhaustion being one of the most pronounced components of burnout, strongly influenced by shift work, sleep deprivation, and economic pressures.

In the international context, similar structural factors are observed. Authors point out that inadequate nurse-to-patient ratios are the main driver of burnout among hospital nurses in the United States, as each additional patient increases the likelihood of emotional exhaustion by 23%. This finding reinforces the centrality of staffing adequacy as a direct determinant of workers' mental health. In addition, holding multiple jobs—a common practice among nurses—was identified as resulting in higher levels of fatigue, sleep disorders, and burnout, revealing the direct impact of insufficient wages, financial strain, and the need for multiple employment contracts to ensure subsistence.

Taken together, these findings demonstrate that nurses' psychological distress is a structural and transnational phenomenon, influenced by management models, funding policies, working conditions, and service organization. Therefore, it is not merely a matter of individual vulnerability, but a systemic problem that compromises both professionals and the quality of care.

Category 2 – Emotional and psychosocial repercussions of nursing work

The literature reveals that adverse working conditions translate into multiple emotional and psychosocial repercussions for nurses. In PHC, emotional overload results in a high prevalence of common mental disorders, such as anxiety, stress, and depression, as well as feelings of devaluation and professional invisibility.

This scenario worsens when nurses deal daily with demands that exceed their operational capacity, leading to feelings of inadequacy and demotivation. In hospital environments, especially after the COVID-19 pandemic, emotional impacts became even more evident. Authors identified a significant increase in anxiety, depression, and burnout among nurses, influenced by fear of contamination, continuous grief, and the disruption of family support networks during social isolation. Daily coexistence with death intensified moral distress and highlighted the emotional vulnerability of frontline professionals.

Among oncology nurses, the presence of compassion fatigue—related to prolonged exposure to patients' suffering and the inability to fully meet the emotional demands of care—has been identified. Authors demonstrate that burnout and secondary traumatic stress are significantly associated with high emotional workload, revealing that professionals in long-term care settings face specific risks of psychological illness.

Another important aspect concerns stigma related to seeking professional help. Nurses with high levels of emotional exhaustion show greater resistance to seeking psychological support, perpetuating the cycle of suffering and hindering early interventions. Moreover, stigma is more pronounced among men and among professionals exposed to long working hours and highly stressful environments.

This finding challenges traditional understandings of self-care by showing that cultural and institutional barriers directly influence access to psychological care. Burnout affects both personal life and professional performance, resulting in sleep disorders, behavioral problems, and impairment of the immune, digestive, and circulatory systems. Authors emphasize that chronic stress and the absence of adequate coping strategies make burnout a self-perpetuating process, whose repercussions extend beyond the workplace and affect workers' overall health.

These findings reveal that the emotional repercussions of nursing work are not isolated events, but expressions of multifaceted suffering involving emotional vulnerability, cognitive overload, physical exhaustion, and social and family impacts. Caring for those who care requires recognizing these dimensions as a central part of nurses' work experience.

Category 3 – Institutional and individual strategies for promoting mental health

In view of a scenario largely marked by adverse structural conditions and significant emotional repercussions, studies converge on the need for robust strategies to promote nurses' mental health. At the institutional level, policies aimed at professional recognition, ensuring decent working conditions, and strengthening emotional support programs are identified as essential actions. Studies highlight the importance of implementing emotional support policies, qualified listening spaces, discussion groups, and the creation of psychosocial care centers specifically for nursing professionals.

In international settings, authors emphasize the importance of organizational support programs, access to psychological counseling, and the establishment of flexible schedules as effective measures to reduce stress and prevent burnout. In addition, legislative policies ensuring adequate staffing levels are essential to reduce overload and prevent turnover, representing one of the most consistent pieces of evidence for reducing hospital burnout.

Individual strategies also play a relevant role. Researchers demonstrate that the development of emotional regulation skills can act as a mediator between stress and compassion fatigue, reducing avoidance behaviors and strengthening emotional resilience. Practices such as mindfulness, physical activity, and participation in reflective groups have proven effective in intensive care contexts.

Constructive coping strategies, such as planning, positive reinterpretation, and seeking emotional support, are associated with lower levels of burnout. In contrast, maladaptive strategies—such as substance use, behavioral disengagement, and self-blame—significantly exacerbate psychological distress and should be the target of preventive and educational interventions.

Another relevant aspect is the importance of educational actions. Continuing education and the development of emotional competencies are central components enabling nurses to recognize signs of distress, mobilize self-care strategies, and develop resilience in the face of care-related challenges. During and after the pandemic, researchers have pointed out that remote psychological support strategies, active listening, and continuous emotional support were fundamental in mitigating severe impacts of psychological distress, highlighting the role of mental health care technologies.

The literature converges on the assertion that caring for those who care is an institutional and collective responsibility, requiring coordinated actions, long-term policies, and emotional care practices that go beyond individual effort. Educational strategies, structured psychosocial support, professional recognition, and safe working environments constitute essential pillars for promoting mental health, ensuring quality care, and sustaining the nursing workforce.

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Conclusion

The reflection developed in this essay highlights that nurses' mental health constitutes an essential pillar for the ethical, safe, and humanized sustainability of healthcare delivery, reaffirming that psychological illness among these professionals cannot be understood in isolation, but rather as a multifactorial phenomenon influenced by structural, organizational, emotional, and ethical conditions that permeate everyday work. Anxiety, chronic stress, emotional exhaustion, moral

distress, and compassion fatigue emerge in contexts marked by work overload, resource scarcity, multiple demands, and continuous exposure to human suffering, compromising professional well-being, therapeutic relationships, and the quality of care.

Thus, the need is recognized to transform the structural determinants of suffering, understand the psychosocial repercussions that permeate work processes, and implement robust mental health promotion strategies that integrate healthy work environments, psychological support, adequate staffing levels, professional recognition, strengthening of emotional competencies, self-care practices, social support, and qualified listening spaces.

Caring for those who care must be consolidated as a structuring axis of health policies, management practices, and nursing education, since ensuring nurses' emotional well-being is an indispensable condition for the humanization of care, patient safety, and the construction of more ethical, sensitive, and sustainable healthcare systems.

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