

REPERCUSSÕES DA COVID-19 NA SAÚDE MENTAL DOS TRABALHADORES DE ENFERMAGEM

REPERCUSSIONS OF COVID-19 IN THE MENTAL HEALTH OF NURSING WORKERS

REPERCUSIONES DEL COVID-19 EN LA SALUD MENTAL DE LOS TRABAJADORES DE ENFERMERÍA

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RESUMO

Objetivo: Refletir acerca das repercussões da Covid-19 na saúde mental dos trabalhadores de enfermagem. **Método:** Trata-se de um estudo de abordagem teórico-reflexiva. Fundamenta-se em aspectos conceituais sobre os agravos à saúde, da equipe de enfermagem em tempos de pandemia, na perspectiva da saúde do trabalhador. **Resultados:** O dimensionamento de recursos humanos insuficiente, a complexidade assistencial, o aumento da carga de trabalho, o medo de contaminação na utilização dos equipamentos de proteção individual e as condições insalubres dos serviços de saúde são situações que podem ocasionar adoecimento. Destas, o Estresse Ocupacional, a síndrome de *Burnout*, os Distúrbios Psíquicos Menores e o Sofrimento Moral podem estar acentuados, nesse período da pandemia, e repercutir, negativamente, na saúde física e psíquica da equipe de enfermagem. **Conclusão:** A promoção da saúde laboral tem sido alvo de políticas e estratégias governamentais e institucionais. Aos gestores cabe a proposição de medidas efetivas direcionadas a ambientes de trabalho saudáveis para que possam ser minimizadas as repercussões da pandemia na saúde dos trabalhadores de enfermagem.

Descritores: Pandemias; Infecções por Coronavirus; Saúde do Trabalhador; Enfermagem; Equipe de Enfermagem.

ABSTRACT

Objective: to reflect on the repercussions of Covid-19 in the mental health of nursing workers. **Method:** this is a study with a theoretical-reflexive approach. It is based on conceptual aspects of health issues of nursing teams during pandemics, regarding workers' health. **Results:** the insufficient dimensioning of human resources, the complexity of caretaking procedures, the increased workload, the fear of contamination despite the use of personal protective equipment, and the unhealthy conditions in health services are situations that can cause illnesses. Of these, Occupational Stress, Burnout Syndrome, Minor Psychological Disorders and Moral Suffering may be accentuated, during this period of the pandemic, and have a negative impact on the physical and psychological health of the nursing team. **Conclusion:** occupational health promotion has been the target of governmental and institutional policies and strategies. Managers are responsible for proposing effective measures aimed at healthy work environments so that the repercussions of the pandemic on the health of nursing workers can be minimized.

Descriptors: Pandemics; Coronavirus Infections; Occupational Health; Nursing; Nursing, Team.

RESUMEN

Objetivo: reflexionar sobre las repercusiones del Covid-19 en la salud mental de los trabajadores de enfermería. **Método:** este es un estudio con un enfoque teórico-reflexivo. Se basa en aspectos conceptuales sobre los agravios en la salud del equipo de enfermería en tiempos de pandemia, desde la perspectiva de la salud del trabajador. **Resultados:** el dimensionamiento insuficiente de los recursos humanos, la complejidad asistencial, el aumento de la carga de trabajo, el miedo a la contaminación durante el uso de los equipos de protección individual y las condiciones insalubres en los servicios de salud son situaciones que pueden causar enfermedades. De estos, el estrés ocupacional, el síndrome de Burnout, los trastornos psicológicos menores y el sufrimiento moral pueden acentuarse, en este período de pandemia, y tener un impacto negativo en la salud física y psicológica del equipo de enfermería. **Conclusión:** la promoción de la salud ocupacional ha sido el objetivo de las políticas y estrategias gubernamentales e institucionales. Los administradores son responsables de proponer medidas efectivas dirigidas a ambientes de trabajo saludables para que puedan ser minimizadas las repercusiones de la pandemia en la salud de los trabajadores de enfermería.

Descritores: Pandemias; Infecciones por Coronavirus; Salud Laboral; Enfermería; Grupo de Enfermería.

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INTRODUCTION

The current global health context is affected by the pandemic caused by the new coronavirus, which causes Covid-19 (*Corona Virus Disease-19*). There are seven species of human coronavirus known, including *Severe Acute Respiratory Syndrome Coronavirus-2 (Sars-Cov-2)*, which causes Severe Acute Respiratory Syndrome. This emerged in the city of Wuhan, China, in 2019, and since then it has caused a large-scale pandemic. Their confrontation has been a priority target of the World Health Organization (WHO)⁽¹⁾.

In this scenario, on January 30, 2020, WHO declared that the outbreak of the disease, caused by the new coronavirus, constitutes a Public Health Emergency of international importance, being the Organization's highest alert level, as provided for in the International Health Regulations⁽²⁾. Covid-19 spread to several countries, arriving in Brazil on February 26, 2020, when the Ministry of Health reported the first confirmed case in Brazilian territory. On March 11, 2020, Covid-19 was characterized by WHO as a pandemic⁽¹⁾.

As a result, it is necessary to reflect on work-worker relations in the context of this pandemic, especially for nursing workers, considering that they act directly in the prevention and comprehensive care of infected patients. The work environment is permeated by factors that negatively affect the worker's health. Such interference can compromise your performance as a professional, as well as your ability to develop work activities, which can have an impact on the quality of care provided⁽³⁾.

In the Covid-19 scenario, there are significant changes regarding the reality of the work. Organizations, whether public or private, try to respond and adapt to the requirements of that moment, such as resizing and reorganizing human and material resources, elaborating and implementing protocols, among others. Health workers, on the other hand, are exposed to the strong pressure for productivity and results, associated with the intensification of technological changes and the risk of contamination and illness by Covid-19. Also, due to the constant threat of exposure of their family members to infection by the virus.

When we recognize that, worldwide, there is still no effective preventive and rehabilitation treatment for Covid-19, such as vaccine or drug

treatment, the spotlight is on those on the front line, among them nursing workers. For that, it is necessary to have a careful and reflective look at this new work reality, which has been imposing a modified work process, sometimes loaded with anxieties, alertness and tension. This may result in damage to the physical and psychological health of nursing workers⁽⁴⁾.

Given this context that permeates the pandemic, it is considered that, despite the advancement of knowledge about the health of the nursing professional, situations that may predispose to occupational illness persist. This can result from occupational illnesses, accidents at work, physical and psychological exhaustion⁽⁴⁾, especially Occupational Stress⁽⁵⁾, Burnout Syndrome⁽⁶⁾, Minor Psychological Disorders (MPD)⁽⁷⁾ and Moral Suffering (MS)⁽⁸⁾. In this perspective, this study aims to reflect on the repercussions of Covid-19 on the mental health of nursing workers.

METHOD

This is a study with a theoretical-reflective approach. It is based on conceptual aspects about the mental health problems of the nursing team, from the perspective of workers 'health, the authors' experience in professional practice and current research related to the theme, as well as in the news published on the impact of the pandemic.

We sought to discuss the repercussions of the Covid-19 pandemic, especially with regard to Occupational Stress, Burnout, MPD and MS in nursing workers. The analyzed articles led to the realization of two thematic axes: "Repercussions of Covid-19 on the mental health of nursing workers" and "Occupational Stress, Burnout, Minor Psychological Disorders and Moral Suffering: possible aggravations to the workers' mental health as a reflection of the pandemic Covid-19".

RESULTS AND DISCUSSION

Repercussions of Covid-19 on the mental health of nursing workers

The labor process of nursing workers is routinely dynamic and complex. In the context of a pandemic, (re)organization is required. In this perspective, understanding and discussing work processes requires considering historical, cultural and structural contexts⁽⁹⁾.

Historically, it is known that the Brazilian public health system is underfunded. However, when we compare the Covid-19 scenario to previous epidemics, we realize that the moment now experienced is more serious. In this, there is an increased need for highly complex care to serve thousands of infected patients. This care, performed for human beings, is the primary work object of Nursing. This professional category represents the most effective in health institutions⁽⁹⁾ and, in the face of the pandemic, nursing workers are now recognized as protagonists in coping with Covid-19.

However, there is a historical paradigm related to the devaluation, discredit, lack of protection and invisibility of nursing workers in a general context⁽⁹⁻¹⁰⁾. This devaluation is evident in a study, pointing out that a quarter of nursing workers do not feel welcomed, with respect and kindness, by other colleagues in the health area and 47.2% feel disrespected by users and their families⁽⁹⁾.

In addition, nursing workers are immersed in a structural process and work environment permeated by conditions that favor exposure to biological, physical, chemical, ergonomic and psychosocial risks⁽⁴⁾. In addition, they are at the mercy of the precariousness process, labor and financial instability, flexible work with extensive hours and low wages, forcing them to work twice a week to supplement their wages⁽⁹⁻¹⁰⁾.

At this time, the concern regarding the health of nursing workers is directed to the risk of exposure and contamination by the coronavirus, that is, to the protocols with recommendations for individual protection measures, in order to contain the spread of the virus⁽¹¹⁾. These include environmental control, such as hygiene and disinfection, early detection and notification of cases, social distance and the use of Personal Protective Equipment (PPE) in health services⁽¹¹⁻¹³⁾.

In the context of the pandemic, frontline nursing workers are at high risk for mental illness due to the intensification of some situations. These include insufficient dimensioning and assistance complexity, causing an increase in the workload, fear of contamination by the invisible enemy in the use of PPE, the lack of structure and the unhealthy conditions of health services⁽¹²⁾. In addition to these situations, there is family and

social isolation, daily living with suffering and the high mortality rates of colleagues⁽¹²⁾.

It is recommended that health workers, who work directly in the care of patients with or without infectious disease, make the appropriate use of PPE^(11,13). In view of this, there are international protocols that regulate the dressing and the dressing, in order to avoid contamination⁽¹³⁾. These protocols provide greater occupational safety for health professionals, as well as quality care for assisted patients^(11,13).

However, to follow them, workers are subjected to long working hours, with a view to reducing the flow of people in the environment and favoring the rational use of PPE, with a consequent decrease in expenses for institutions⁽¹⁴⁾. The physical and psychic consequences are clear for the health of these workers and include skin lesions, in the region of the face, due to the excessive use of the N95 mask and urinary retention, due to extensive periods of wear, fatigue/tiredness, among others⁽¹⁴⁾.

In addition, there is the suffering of nursing workers related to the care of patients affected by Covid-19⁽¹⁴⁾. This is experienced in living with patients in isolation, who do not have the opportunity to have a family member physically present, during hospitalization and, also, in delicate situations, such as before sedation for invasive procedures, such as endotracheal intubation. Also, due to living with the impossibility for family members to hold funerals, according to their cultural tradition, which can interrupt the grieving process⁽¹²⁾.

Thus, the work performed by the nursing team, active in assisting patients affected by Covid-10, may result in physical and psychological illness⁽¹⁴⁾. In response, it is observed that there are timely and relevant policies and strategies, at the global, regional and local level, aimed at promoting occupational health in times of pandemic^(12,14). These include the recommendations of WHO and the Ministry of Health, governmental and institutional policies, telehealth services and direct communication channels for access to specialized services for workers' health care^(12,14). Still, the constant monitoring of nursing workers infected with Covid-19, carried out by the COFEN Observatory⁽¹⁵⁾, stands out.

Occupational Stress, Burnout, Minor Psychological Disorders and Moral Suffering: possible damage to workers' mental health as a reflection of the Covid-19 pandemic

It is in this context of precariousness, inadequate conditions and reorganized work processes⁽⁹⁾ that it is understood as necessary to discuss the reflexes of the pandemic in nursing work, as well as some of the possible injuries to the mental health of nursing workers. Among these, Occupational Stress and Burnout Syndrome, MPD and MS.

Occupational stress and Burnout Syndrome

With regard to stress, nursing workers stand out among the professions that are susceptible to their development⁽¹⁶⁾. One of the forms of this problem is related to the individual's interaction with the work environment, called occupational stress. This is associated with high psychological demands, low control over work and low social support received in the work environment⁽⁵⁾. Still, it is related to the mental demands that imply the professional's work. Thus, the greater the work demands, the greater the professional's psychological demand^(5, 17).

Occupational stress is considered one of the factors that influence the performance of the team, during the provision of health services, since excessive demands increase psychological demands^(5, 17). In the face of the pandemic scenario, these requirements can be enhanced, while the nursing team suffers from tension, time pressure, interruption of tasks, among others⁽¹⁷⁾. Therefore, it is necessary to develop control over them. For example, there is the use of skills (degree that work involves learning, repetition and creativity) and decision-making authority (ability to make decisions at work and influences on management policy)^(5, 17).

Nevertheless, the ability to control psychological demands may be limited in the face of situations experienced in a pandemic. In addition, as regards coping with stressors, there is insecurity regarding the possibility of lack of PPE, as well as other material and human resources, the possible need for isolation from close people and the fear of being infected by the new coronavirus⁽¹²⁻¹³⁾.

The accentuation of occupational stress, in the current period of the pandemic, among nursing workers, may be associated with the

nature of the work, which requires direct care for patients affected by Covid-19, with a high risk of contamination. Also highlighted as stressful situations is the fact that there is no set deadline for the end of the pandemic, the scarcity of PPE and pressure from institutions to rationalize their use⁽¹³⁾.

When there is excessive exposure to stressors, there may be a progression to a chronic process, leading the individual to develop Burnout Syndrome^(6, 18). This syndrome can be triggered, mainly, in individuals who develop their work attending people in direct contact⁽¹⁹⁾, for example, the nursing team. Still, when the individual is unable to use strategies to cope with stressors, he/she ends up getting sick⁽³⁾. In the context of the pandemic, the use of strategies, whether coping or fleeing, may be weakened.

Starting from the socio-environmental conception of Burnout Syndrome, there are multidimensional factors that consider individual aspects, associated with work conditions and relationships. Such factors are subdivided into three dimensions: emotional exhaustion, related to physical, mental and emotional exhaustion; depersonalization, indicating that the individual's personality is undergoing changes as a result of his work; and professional achievement, evidenced by (in) satisfaction with work activities^(6, 18).

When looking at the Covid-19 scenario, it can be seen that nursing workers are doomed to increase emotional exhaustion and depersonalization, as well as low professional achievement, resulting from physical and psychological exhaustion. Situations experienced by shifts, often doubled, to meet the demands of the institution due to the pandemic, for fear of contamination, for lack of materials and fear, for insecurity in relation to work and performance, as well as for experiencing the loss of lives in mass, are factors that can lead nursing workers to professional dissatisfaction, exposing them to Burnout Syndrome.

In addition, as nursing workers face occupational stressors, they are subject to increased emotional exhaustion⁽¹⁹⁾. Thus, many times, the individual does not realize that he/she has the syndrome, that is, he/she works sick and, with this, the interface between worker health and patient safety is compromised^(3,6, 19).

Minor Psychological Disorders

In this context, the MPD also stand out, which are mild mental disorders and are present among nursing workers⁽²⁰⁾. They refer to depressive, anxiety or somatization disorders⁽⁷⁾, which do not meet all the criteria for mental illness according to the International Classification of Diseases (ICD-10). MPDs are characterized by a set of non-psychotic symptoms, such as insomnia, fatigue, irritability, forgetfulness, decreased concentration and somatic complaints⁽⁷⁾.

Despite the difficulty in perceiving these symptoms as MPD, since they can be attributed to several causes, there is a scenario in which nursing workers develop their activities⁽²¹⁾ and exposure to situations that may favor the occurrence of MPD⁽²⁰⁾. In health institutions, psychological demands are significant as a result of living with suffering and precarious working conditions, strenuous hours, lack of training and even insufficient or unavailability of PPE. These factors are predisposing to emotional changes in the team, causing negative symptoms, and potentially causing psychological illness⁽²¹⁾.

In the context of the Covid-19 pandemic, there are situations that can lead to the development of symptoms of MPD. These include an increase in the number of confirmed cases, insecurity regarding effective treatment, constant exposure to the virus and the fear of becoming a potential vehicle for dissemination.

In addition to these situations, nursing workers live and witness the illness and death of some professional colleagues. According to the Federal Nursing Council (Cofen)⁽¹⁵⁾, in Brazil, until July 10, 2020, about 249 workers, diagnosed with Covid-19, died, with a lethality rate of 2.18%. Still, 23,363 thousand were removed from work activities due to Covid-19.

Thus, the imminence of illness causes anxiety and insecurity among nursing workers, who work to combat Covid-19. And, with that, it requires a demanding physical and emotional structure⁽²⁰⁾ of these workers, the result of the continuous contact with suffering, death, multiple hours, work overload and low remuneration⁽²¹⁾. In the face of the Covid-19 pandemic, these demands increase, which may increase the workers' mental load. This occurs due to work overload, the growing number of complex situations they experience, due to the

high demand of critically ill patients, who, in most cases, require intensive care and require high performance from the nursing team⁽²⁰⁾.

This high mental load can help the nursing worker to remain nervous or worried, to have headache and reduced sleep quality. Such a situation can cause tiredness and interfere with concentration. These symptoms, in addition to causing intense psychological distress, can be directly associated with reduced work capacity and predispose to the occurrence of adverse events⁽²⁰⁾.

Moral Suffering

Another health problem for nursing workers is the MS, defined as a psychological imbalance that occurs due to a situation in which the worker needs, through his moral judgment, to choose an appropriate ethical conduct to be followed. However, due to institutional constraints, he feels prevented from putting this action into practice⁽⁸⁾.

In this context, workers perceive that their posture and values are being violated and, as a result, negative aspects of health and well-being can occur, which can lead to illness⁽²²⁾. The frequency and intensity of these factors contribute to the tiredness and exhaustion of workers, thus interfering with the quality of care provided⁽²³⁾.

The manifestation of the MS can be expressed through devaluation, invisibility and impotence. In addition, the professional may feel unable to continue in the work environment and, many times, choose to abandon the profession⁽²⁴⁾. Such manifestations are related to the context in which workers are inserted, which may be associated with reduced job satisfaction and the ability to perform activities⁽²⁵⁾.

The forms of manifestations of the MS are associated with the experience of situations and particularities of the work environment, which can be emotional or physical. Among the emotional forms, frustrations, fear and feelings of helplessness stand out^(22,24). When returning to the Covid-19 pandemic scenario, they can be visible among nursing workers, given that they witness, daily, the overcrowding of patients and the lack of available beds for health care.

In extreme cases, nursing workers and the multiprofessional team are forced to perform screening, which can cause ethical dilemmas with

traumatic impact⁽¹³⁾. This screening relates to the availability of mechanical ventilators, which are decisive equipment for maintaining the airway of the patient affected by Severe Acute Respiratory Syndrome, for those affected by Covid-19.

This scenario provides the feeling of helplessness, in which the worker perceives the lack of power in deciding these situations related to the scarcity of resources and difficulties in management. As a result, he experiences MS and it can be aggravated by the risk of infection, since many health institutions do not have enough PPE⁽¹²⁾.

Another aspect, linked to the MS, is the social stigma, reported by nursing workers who work in the care of patients with Covid-19⁽¹²⁾. However, what they need is emotional support and social support, as they have to deal with anxiety about their condition, physical discomfort, isolation and be socially excluded and separated from families⁽¹²⁾.

Still, among the working conditions, there is a shortage of PPE and supplies. Such a situation is evidenced in the media worldwide, in which the search for these inputs becomes increasingly fierce among countries⁽¹³⁾. Thus, often, workers develop their activities in inadequate working conditions, which becomes something challenging for them, which can result in fear, anguish and insecurity, as well as influencing the quality of care provided⁽¹²⁾.

In addition, there is the pressure to witness the worsening of the clinical condition of patients, the fear of being contaminated, during the dressing and de-dressing of the PPE and the insecurity regarding the risk of contamination of family members. The sum of these situations can trigger physical manifestations such as crying crises, insomnia or reduced quality of sleep, loss of appetite, gastrointestinal disorders, among others^(23,25). In the current context of the pandemic, it is reflected that MS is intrinsic and also accentuated among nursing workers.

Insecurity in relation to treatment and prevention procedures, attention to family members, difficulties in the face of lack of equipment, trained human resources, as well as doubts about the conditions of the health system to absorb the demands of critically ill patients due to Covid-19, can favor the MS of these workers. These anxieties and uncertainties can weaken the moral judgment of the nursing

professional and, on the other hand, be an obstacle to the performance of qualified care.

CONCLUSION

The study allowed us to reflect on the repercussions and possible damage to mental health to which nursing workers may be exposed when facing the Covid-19 pandemic. Of these, Occupational Stress, Burnout Syndrome, MPD and MS may be accentuated in this period of the Covid-19 pandemic. Likewise, negatively influence the physical and psychological health of the nursing team.

It is noticed that this is a time when Nursing has a worldwide visibility and as a fundamental professional category in the care of infected patients. Therefore, the promotion of occupational health has been the target of governmental and institutional policies and strategies. Managers are responsible for (re)organizing work and proposing effective measures aimed at healthy work environments, so that the repercussions of the pandemic can be minimized.

It is evident the need for investments in mental health care, measures to monitor occupational overload and stress, psychological support, and in social support networks, for nursing workers, who seek to favor interpersonal relationships, as spaces for collective discussions and multiprofessional groups. Therefore, immediate efforts should be made, at all levels and across different areas of knowledge, as there are no clear expectations as to when the Covid-19 pandemic control will occur.

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