ISSN-e [2763-8847]

Global Clinical Research Journal

REVIEW ARTICLE

Mental health of university professors

Salud mental del profesorado universitário

Saúde mental do professor universitário

Aline Voltarelli[1*]
ORCID: 0000-0002-3491-616X
Elda Garbo Pinto[2]
ORCID: 0000-0003-0443-7501
Camilla Estevão de França[3]
ORCID: 0000-0003-3226-8709

Andrea Nascimento[1]
ORCID: 0000-0003-4171-2074
Christiano Miranda[4]
ORCID: 0000-0003- 2616-8744
Cássia Marques da Rocha Hoelz[2]
ORCID: 0000-0001-8721-9969

Rosangela Sakman[5]
ORCID: 0000-0003-1748-9490
Ellen Alvim Nascimento[1]
ORCID: 0009-0004-6343-3249
Ana Carolina Medeiros[6]
ORCID: 0000-0002-8809-0092

[1]Universidad de Ciencias Empresariales Y Sociales. Buenos Aires, Argentina.
[2]Universidade Estadual Paulista. São Paulo, Brazil.
[3]Faculdade Anhanguera. São Paulo, Brazil.
[4]Universidade Guarulhos. São Paulo, Brazil.
[5]Faculdade Sequencial. São Paulo, Brazil.
[6]Universidade de São Paulo. São Paulo, Brazil.
[*]**Corresponding author**: E-mail: alivolter@yahoo.com.br

Abstract

This research sought to identify occupational stress, which is an increasingly frequent problem among workers in the teaching field. Stress mainly affects teachers, causing a decrease in the quality of teaching. Factors that influence teachers' health include exhausting work hours, low pay, excessive activities, inadequate environment, and insufficient materials. The objective of this study was to analyze how teachers develop stress and what mechanisms can be used to minimize the impact on their lives. The research was designed as a bibliographic review based on articles, with a time frame from 2018 to 2023, using the descriptors stress, education, teaching, and health practices. The study demonstrated that exhaustion is the main cause of stress in teachers and that stress harms teachers' health and prevents them from working. The practice of taking care of yourself first comes as one of the strategies to prevent illnesses related to teaching in higher education, practicing sports, undergoing therapy, music therapy, leisure, and avoiding bad habits such as alcoholism, drug use, and smoking are equally important in managing stress.

Descriptors: Stress; Education; University Professors; Health Practices; Mental Health.

How to cite this article:
Voltarelli A, Pinto EG, França CE, Nascimento A, Miranda C, Hoelz CMR, Sakman R, Nascimento EA, Medeiros AC. Mental health of university professors. Glob Clin Res. 2024;4(1):e70. https://doi.org/10.5935/2763-8847.20210041

Submission: 04-24-2023
Approval: 09-04-2023

Resumén

Esta investigación buscó identificar el estrés laboral, un problema cada vez más frecuente entre los trabajadores del ámbito docente. El estrés afecta principalmente al profesorado, provocando una disminución en la calidad de la enseñanza. Los factores que influyen en la salud docente incluyen: jornadas laborales agotadoras, bajos salarios, exceso de actividades, entorno inadecuado y materiales insuficientes. El objetivo de este estudio fue analizar cómo el profesorado desarrolla estrés y qué mecanismos se pueden utilizar para minimizar el impacto en sus vidas. La investigación se diseñó como una revisión bibliográfica basada en artículos, con un marco temporal de 2018 a 2023, utilizando los descriptores estrés, educación, enseñanza y prácticas de salud. El estudio demostró que el agotamiento es la principal causa de estrés en el profesorado y que el estrés perjudica la salud del profesorado y les impide trabajar. La práctica del autocuidado se presenta como una de las estrategias para prevenir enfermedades relacionadas con la docencia en la educación superior, practicar deportes, someterse a terapia, musicoterapia, ocio, evitar malos hábitos como el alcoholismo, el consumo de drogas y el tabaquismo son igualmente importantes en el manejo del estrés.

Descriptores: Estrés; Educación; Profesorado Universitario; Prácticas de Salud; Salud Mental.

Resumo

Nessa pesquisa buscou-se identificar o estresse ocupacional na qual é um problema cada vez mais frequente entre os trabalhadores na área do ensino, o estresse atinge principalmente os docentes causando diminuição na qualidade de ensino. São fatores que influenciam na saúde do professor: jornada de trabalho exaustiva, baixa renumeração, excesso de atividades, ambiente inadequado e material insuficiente. O objetivo deste estudo foi analisar como docentes desenvolvem o estresse e quais os mecanismos podem ser utilizados para minimizar o impacto em suas vidas. A pesquisa teve como delineamento a revisão bibliográfica baseada em artigos, com recorte temporal de 2018 a 2023 com utilização dos descritores estresse, educação, docência e práticas de saúde. O estudo demontrou que a exaustão é a principal causa de estresse em professores e que o estresse prejudica a saúde do professor e o afasta de suas atividades laborais. A prática de se cuidar em primeiro lugar vem como uma das estratégias para prevenir as doenças relacionadas à docência no ensino superior, a pratica de esportes, realização de terapia, musicoterapia, lazer, evitar maus hábitos -como o alcoolismo, uso de drogas e tabagismo - são igualmente importantes no manejo do estresse.

Descritores: Estresse; Educação; Docentes Universitários; Práticas de Saúde; Saúde Mental.

Introduction

Work plays a fundamental role in structuring an individual's identity. It is through work that human beings feel they have the possibility of fulfillment, expression of skills, and social integration. Given the impacts caused by changes in values in the modern, globalized world, there was a restructuring of production that began in the 1990s, and the profile of work and workers changed to adapt to technological innovations with the new quality management models that were established[1].

The intensification of work, resulting from the increase in the pace, responsibilities, and complexity of tasks, also brings an increase in unemployment, informal work, changes in the ways of working, and the determinants of the health-disease process. Stress is a general state of physiological tension and is directly related to the demands of the environment. Occupational stress is an extremely unpleasant experience, associated with feelings of hostility, tension, anxiety, frustration and depression, triggered by stressors located in the work environment, and the contributing factors to occupational stress range from the individual characteristics of each person, through the style of social relationships in the work environment and organizational climate, to the general conditions in which the work is performed[2].

For mental disorders, currently, the main causes of absence from work are those that are for long periods. These are the ones that pose risks to the maintenance of mental health, through behavior and emotion, in the context of teaching, which is generally a highly stressful activity; there are clear repercussions on the physical and mental health and professional performance of teachers[3]. The objective of this study was to analyze how teachers develop stress and what mechanisms can be used to minimize the impact on their lives.

Methodology

This study is based on a bibliographic review and search for support through official institutional publications and documents on the mental health of university professors. The approach adopted is critical and reflective concerning the challenges faced by these professionals in the academic environment. To prepare this work, indexed articles from scientific journals, books, conference proceedings, technical reports, and other types of materials were used, using LILACS, MEDLINE, SciELO, and Google Scholar databases. The selected keywords were: “Mental Health”, “University Professor”, “Work Stress”, “Public

Health", and "Well-Being". The inclusion criteria included: studies in the form of articles or documents from competent bodies, such as the Ministry of Health, that addressed the central theme; published in journals indexed in the chosen databases, and in the period from 2019 to 2024. Duplicate studies in the databases and those that were not available in full-text format were also excluded. In total, 12 articles were found on the topic in question, as they all met the proposed objectives.

Results and Discussion

In Brazil, data from the National Institute of Social Security (INSS) show that mental disorders rank third among the causes of social security benefits for sickness benefits, due to temporary or permanent incapacity for work. Teachers, as workers, began to worry not only about their teaching duties, but also about issues based on the paradigm of industrial civilization, that is, with their career, their security, and remuneration[4].

The teacher's day-to-day life is quite hectic, from the morning onwards, often without time to eat properly and facing traffic or public transport, in short, when they arrive at the educational institution they are at a high level of stress, they still have to face shifts, be it one, two or sometimes three shifts with young people playing, talking and, often, undisciplined adults and, as if that were not enough, complaints from coordination, guidance and parents, all of this consists of facilitating frustrations, thus generating stress[5].

Stress is currently divided into phases, occurring when the individual meets the stressor. Symptoms of the alert phase: cold hands and/or feet; dry mouth; stomach pain; sweating; muscle tension and pain, for example in the shoulder region; clenching of the jaw/grinding of teeth or biting of nails/pen tip; temporary diarrhea; insomnia; accelerated heartbeat; shortness of breath; sudden and temporary increase in blood pressure; agitation. Resistance phase: the body tries to return to its balance; the organism can adapt to the problem or eliminate it. Symptoms of the resistance phase: memory problems; general malaise; tingling in the extremities (hands and/or feet); feeling of constant physical exhaustion; change in appetite; appearance of skin problems; high blood pressure; constant tiredness; prolonged gastritis; dizziness; excessive emotional sensitivity; obsession with the stressor; excessive irritability; decreased sexual desire[6].

The near-exhaustion phase is characterized by: (newly discovered phase) when tension exceeds the limit of what is manageable, physical and emotional resistance begins to break down, there are still moments when the person can think lucidly, make decisions, laugh at jokes and work, but all of this is done with effort and these moments of normal functioning are interspersed with moments of total discomfort, there is a lot of anxiety in this phase[7].

The person experiences an emotional rollercoaster. Cortisol is produced in greater quantities and begins to have the negative effect of destroying the immune defenses. Illnesses begin to appear. Exhaustion phase: in this phase, various physical impairments in the form of illness can arise. Symptoms of the exhaustion phase: sexual difficulties; tingling in the extremities; insomnia; nervous tics; confirmed high blood pressure; prolonged skin problems; extreme change in appetite; accelerated heartbeat; frequent dizziness; ulcers; inability to work; nightmares; apathy; excessive tiredness; irritability; anguish; emotional hypersensitivity; loss of sense of humor[8].

The set and division of tasks that make up the professional's workload are associated with important work-related stressors, which can be significantly aggravated by poor work organization conditions, ranging from low recognition and remuneration, mismatch between prescribed and performed tasks, to severe resource shortages and infrastructure problems. Stress, depression, and/or anxiety are the main causes of absence from work and are responsible for 46% of absenteeism; in Brazil, teachers rank second among the professional categories with occupational diseases[9,10].

The demands of teaching performance can lead to positive feelings of satisfaction, pleasure, creativity, and personal and collective achievement, but they can also characterize stressful work, carried out with suffering, associated with impositions. The chronic experience of stress at work leads professionals to react and seek strategies to develop the activities under their responsibility. Coping strategies refer to "cognitive and behavioral efforts aimed at managing internal or external demands or requirements that are assessed as overloading the individual's resources", which aim to maintain balance, mitigating the effects of stressful situations[10].

The different reactions that workers present when faced with the same potentially stressful daily routine arise from several factors, such as genetic predisposition (favoring greater or lesser organic excitability), perception of the severity of the event and the possibility of using psychosocial resources (which partly make up personal vulnerability). When professional performance involves frequent suffering, the worker experiences physical and psychological exhaustion, a condition that can lead to what is called occupational stress - dissatisfaction with work and high levels of fatigue and anxiety are common in occupational stress, which are accompanied by emotional problems and can contribute to the development of behavioral problems. Stress can arise from teacher frustration, when there is an inability to achieve goals, aggressive and avoidant behavior, loss of focus, insistence on ineffective practices, constant changes in teaching plans, disregard for the school's pedagogical project and baseless criticism become frequent[10].

In the most common causes of teacher discomfort, the cause is the constant struggle with pressures from teenagers, peers, parents, politicians, and administrators, many of which are conflicting and nearly impossible to meet. Teachers face the ongoing challenge of maintaining control of their classrooms; they do not have clear limits on their working hours; much of their work is taken home; they are open to criticism from inspectors, parents, principals, the media, and politicians; they do not have sufficient resources and opportunities for regular and comprehensive refresher

training; paradoxically, they are expected to keep up to date with new formats and developments in their subject matter; depending on the principal, they may have little say in the administration of the institution and in decision-making; they have their own sense of professional standards and are frustrated by their failure to meet them; they have limited scope for seeking advice or discussing difficulties with colleagues; and they have difficulty coping with change[3].

The psychological repercussions of teacher discomfort cover a wide range, divided into at least twelve levels: feelings of discontent and dissatisfaction with the real problems of teaching practice, in contradiction with the ideal image that teachers would like to achieve; development of inhibition mechanisms to reduce personal involvement in the work; requests for transfer to avoid conflict situations; a clear desire to abandon teaching (whether realized or not); absenteeism as a way of relieving accumulated tension; exhaustion; constant physical fatigue; generalized or situational anxiety; stress; depreciation of self-image; self-blame for the difficulty in improving teaching; anxiety associated with diagnoses of mental disorders; and depression. Currently, research on the mental and physical health of teachers has gained greater relevance, attracting the attention not only of scholars, but also of society in general, professional associations, educational administrators, educators and health professionals, with emphasis on discussions about the impacts of the profession on the daily teaching routine and the centrality of psychological well-being in this debate[11].

Concern for mental health is also essential in the field of worker health, since the losses resulting from this illness are significant. Furthermore, a large proportion of absences and leaves of absence from work are related to psychological distress. However, it is observed that several studies address the precariousness of work and teacher illness, focusing on work conditions and organization and their relationship with illness, many of them as a result of macroeconomic changes[11].

In 2002, Congress moved to discuss the topic of "teacher health", in response to a request from unions during negotiations on healthcare within the Unified Health System (SUS). The process was carried out through debates, surveys, and specific studies on the subject. Individuals who are deeply involved in their activities, believe they have full control over situations, face adversity with optimism, and take full responsibility for their successes or failures are more likely to develop symptoms. Prevention is crucial, and it is essential to avoid using lack of time as an excuse to neglect physical exercise, health care, leisure time with friends and family, and excessive consumption of alcohol or other substances to alleviate anxiety and depressive symptoms[11,12].

It is essential to constantly assess whether working conditions are affecting your quality of life and physical and mental health. Seeking help and preserving your well-being are essential rights for every human being. For teachers, the main recommendations include maintaining a balanced diet with professional guidance; exercising regularly; dedicating yourself to relaxation activities; setting aside days off; seeking medical or therapeutic assistance when necessary; sharing difficulties with colleagues and supervisors; and, above all, organizing your time by establishing clear priorities for a more balanced routine.

Lifestyle and the degree of professional satisfaction have a direct influence on daily work, since motivated workers with healthy habits are better able to maintain their physical and mental well-being. The growing demand for more education to enter the job market reflects the new demands of production systems, which expect institutions - and especially teachers - to train versatile and multifunctional professionals. However, attempts to increase teacher autonomy often come up against limitations imposed by educational policies, generating negative impacts both on the practice of the profession and on the health of teachers.

In the interior of São Paulo, a study with 79 teachers identified the five main symptoms reported: feeling worn out at the end of the day, generalized tension, stress in relationships with students, physical exhaustion, and constant nervousness. As the strategies most used to alleviate these problems, teachers mentioned: seeking dialogue with colleagues when facing school difficulties, maintaining an exchange of ideas with other professionals, maintaining good physical and mental health, and counting on family support in work issues. The main sources of stress identified were overcrowded classrooms, students' lack of interest, excessive time dedicated to managing indiscipline, lack of parental involvement in solving behavioral problems, and students' constant distraction during teaching activities[13].

Dehumanization is a defining element of Burnout syndrome, differentiating it from other disorders such as stress or depression. From a psychosocial perspective, Burnout is not merely psychological stress, but rather an adaptive response to chronic sources of occupational stress, particularly in the relationships between service providers and recipients. It is a specific coping and self-protection mechanism that emerges both in service relationships and in professional-organizational dynamics. The main triggers of Burnout Syndrome, according to specialized literature, include work environments with insufficient resources that compromise work effectiveness; personal characteristics of the professional and their ability to deal with occupational demands; and the complex interaction between these elements. Intervention and prevention strategies are organized into three main axes: actions focused on the individual response, the occupational context, and the interface between the individual and the work environment[13].

According to the authors, preventive programs are classified into three levels of action: primary prevention, which acts to identify potentially stressful situations before they occur; secondary prevention, when the individual already presents reactions to stress, but without evident clinical symptoms; and tertiary prevention, aimed at cases in which there are consolidated symptoms that compromise well-being and health. Regarding relaxation techniques to reduce anxiety, the following stand out: controlled

breathing; Jacobson's progressive relaxation; Schultz's autogenic training (mental control); guided visualization; meditation; sensory contact (selective perceptive awareness); biofeedback (monitoring of physiological responses); dream therapy (integration between wakefulness and dreaming); artistic expression; yoga; music therapy; dynamic postural relaxation; supervised pharmacological intervention; and sports practice[10-12].

Being a teacher is a profession that goes far beyond the transmission of knowledge. Teachers are required to have not only technical competence but also interpersonal skills to deal with parents, colleagues, and other professionals in the school environment. The workload is significant, ranging from planning lessons and preparing teaching materials to participating in meetings, forming study groups, and constantly updating their professional skills. The routine also extends beyond the school hours, with tasks such as preparing assessments, correcting papers, and developing educational projects often being carried out at home. This accumulation of functions, combined with the need to manage inevitable conflicts in the daily routine of an educational institution, makes for a particularly physically and emotionally exhausting professional activity[11-13].

Final Considerations

The study showed that teachers, especially those in the health field, need to organize themselves to meet professional demands efficiently, optimizing their time to avoid overload. It is important to note that early diagnosis of stressors in the workplace is essential for preventing occupational stress. In this context, self-care emerges as a primary strategy for preventing occupational diseases. The adoption of healthy practices such as regular physical activity, therapeutic monitoring, music therapy, leisure activities and abstinence from harmful habits (alcohol, drugs and tobacco) is recommended. It is suggested that future research address this topic holistically, considering the human being in its entirety to promote the quality of life of the teaching professional.

References

1. Neves DR, Nascimento RP, Felix Jr MS, Silva FA da, Andrade ROB de. Sentido e significado do trabalho: uma análise dos artigos publicados em periódicos associados à Scientific Periodicals Electronic Library. Cad EBAPEBR. 2018;16(2):318–30. https://doi.org/10.1590/1679-395159388
2. Silva JH. Trajetórias de trabalho: empregos precários e inserções provisórias. Pro-Posições. 2023;34(Pro-Posições, 2023 34):e20200107. https://doi.org/10.1590/1980-6248-2020-0107
3. Bitencourt GR, Souza PA, Ferreira AFM, Fernandes LLRA, Silva CS, Souza OS, Corrêa DBSF. Teoria de enfermagem padrões funcionais de saúde no contexto hospitalar: avaliação segundo Meleis. Glob Acad Nurs. 2023;4(1):e336. https://dx.doi.org/10.5935/2675-5602.20200336
4. Bosco PS, Santos MVF, Corrêa HVL. Os (des) caminhos da extensão universitária: contribuições e limites.Glob Acad Nurs. 2022;3(Spe.3):e311. https://dx.doi.org/10.5935/2675-5602.20200311
5. Araújo ARL, Sousa LMC, Carvalho RBS, Oliveira ADS, Amorim FCM, Sousa KHJF, et al. O trabalho remoto de enfermeiros docentes em tempos de pandemia. Esc Anna Nery. 2021;25(spe):e20210198. https://doi.org/10.1590/2177-9465-EAN-2021-0198
6. Araújo FJ, Lima LS, Cidade PI, Nobre CB, Rolim ML No. Impact of SARS-CoV-2 and its reverberation in global higher education and mental health. Psychiatry Res. 2020;288:e112977. http://dx.doi.org/10.1016/j.psychres.2020.112977
7. Matias AB, Falcão MTC, Grosseman S, Germani ACCG, Silva ATC da. A pandemia da COVID-19 e o trabalho docente: percepções de professores de uma universidade pública no estado de São Paulo, Brasil. Ciênc saúde coletiva. 2023;28(2):537–46. https://doi.org/10.1590/1413-81232023282.11972022
8. Ramos-Huenteo V, García-Vásquez H, Olea-González C, Lobos-Peña K, Sáez-Delgado F. Percepción docente respecto al trabajo pedagógico durante la COVID-19. CienciAmérica 2020;9(2):334-353.
9. Mishra L, Gupta T, Shree A. Online Teaching-Learning in Higher Education during Lockdown Period of COVID-19 Pandemic. Int J Educ Res Open 2020;1:100012.
10. Ferreira EC, Pezuk JA. Síndrome de Burn-out: um olhar para o esgotamento profissional do docente universitário. Avaliação (Campinas). 2021;26(2):483–502. https://doi.org/10.1590/S1414-40772021000200008
11. Almeida Filho. A noção de integração docente-assistencial: planejadores de saúde como intelectuais orgânicos. Rev bras educ med. 1980;4(1):57–71. https://doi.org/10.1590/1981-5271v4.1-009
12. Martins RF, Araujo ALGD, Amorim MA. Vínculo de trabalho c adoecimento docente: análise das licenças dos professores da rede estadual de educação de Minas Gerais. Educ rev. 2022;38:e26976. https://doi.org/10.1590/0102-4698-26976
13. Bogossian T. Implicações no direito fundamental da reforma trabalhista durante a pandemia da COVID-19. Glob Clin Res. 2022;2(1):e22. https://doi.org/10.5935/2763-8847.20220022