Literature Review



Strategies for worker's mental health maintenance in Covid-19 times: An Integrative Review

Estratégias de enfrentamento para manutenção da saúde mental do trabalhador em tempos de Covid-19: Uma Revisão Integrativa

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ABSTRACT | OBJECTIVE: To present scientific evidence of possible strategies that can be used in workers to minimize psychological distress resulting from the pandemic context. METHOD: During the month of May and June 2020, an integrative review of the scientific literature was carried out on the subject in question, using the descriptors indexed in the DeCS: coping strategies; coronavirus infections; mental health and workers. To carry out the research, the descriptors were combined in the Pepsic, Pubmed and Scielo databases. RESULTS: It was possible to identify the following preventive coping strategies: measures for early identification of mental symptoms, regular measures of rest and training of personnel. As well, it was possible to highlight measures to promote mental health to workers, such as: use of psychological first aid; participation of therapeutic groups; crisis management. And, in the area of mental health rehabilitation: use of meditation and mindfulness techniques, both to be performed by health professionals, at the organizational level, as well as by government actions. CONCLUSION: It is considered that the information on psychological techniques and practices aimed at the worker's psychological health can contribute to the identification and control of psychosocial risks and collaborate for the development in the field of Public Health in relation to the workers' health-illness processes, in particular, of the mental health problems resulting from the pandemic

KEYWORDS: Adaptation. Psychological. Coronavirus Infections. Mental Health. Occupational Groups.

RESUMO | OBJETIVO: Apresentar evidências científicas de possíveis estratégias que podem ser empregadas em trabalhadores para minimização de sofrimento psíquico decorrente do contexto pandêmico. MÉTODO: Durante o mês de maio e junho de 2020 realizou-se uma revisão integrativa da literatura científica acerca da temática em questão, sendo utilizados os descritores indexados no DeCS: estratégias de enfrentamento; infecções por coronavírus; saúde mental e trabalhadores. Para realizar a pesquisa, os descritores foram combinados nas bases de dados Pepsic, Pubmed e Scielo. RESULTADOS: Foi possível identificar as seguintes estratégias de enfrentamento de caráter preventivo: medidas de identificação precoce dos sintomas mentais, medidas regulares de descanso e treinamento de pessoal. Assim como, foi possível evidenciar medidas de promoção em saúde mental aos trabalhadores, tais como: utilização de primeiros socorros psicológicos; participação de grupos terapêuticos; gerenciamento de crises. E, na área da reabilitação em saúde mental: utilização de técnicas de meditação e mindfulness, tanto para serem executadas por profissionais de saúde, no âmbito organizacional, quanto por ações governamentais. CONCLUSÃO: Considera-se que a informação de técnicas e práticas psicológicas voltadas a saúde psíquica do trabalhador possa contribuir na identificação e controle dos riscos psicossociais e colaborar para o desenvolvimento no campo da Saúde Pública em relação aos processos de saúde-doença dos trabalhadores, em especial, dos agravos a saúde mental derivados da pandemia.

PALAVRAS-CHAVE: Estratégias de enfrentamento. Infecções por Coronavírus. Saúde mental. Trabalhadores.

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Introduction

Coping strategies, also known as coping, are cognitive responses in the form of thoughts or actions that aim to protect mental and physical health from the harmful effects caused by stress (Folkman, 2012). As Ramos et al. (2015) indicate in their studies on the coping approaches proposed by Lazarus and Folkman (1984), there are two types of coping related to the personal resources of each individual, they are: coping focused on emotion, in which the subject evaluates a situation based on emotional relief, seeking to manage the way he feels about the context and not the change of the problem itself; and problem-centered coping, related to objective situation management. Thus, when stressful episodes are evidenced, there is a depletion of mental, social, and physical resources, which leads to psychological suffering, making mechanisms necessary to help reduce the impacts that aggravate chronic stress, as well as the promotion of mental well-being (Folkman, 2012).

In crisis and emergencies, extrinsic coping strategies are essential since not all individuals have enough coping repertoire to deal with contexts of stress and trauma, and even those who have it may have their strategies reduced due to adverse situations. Thus, external resources act as relevant psychological support for new coping possibilities to be acquired in these contexts (Stone, 2020).

In 2020 when declared by the WHO as a pandemic, COVID-19, a disease caused by the new RNA virus from a family of beta-coronaviruses, named SARSCOV-2 (Guan et al., 2020), has generated a worldwide crisis of great social and economic impact, especially due to its ease of transmission. According to the Ministry of Health (2020), this virus has manifested itself from a simple cold to more severe conditions such as severe pneumonia. This virus has as main symptoms respiratory difficulty, fever, and cough, although Huang et al. (2020) highlight the possibility of fatigue, pain headache, sputum production, and diarrhea to a lesser extent.

In addition to the impacts on health, the effects on the social context, especially in the world of work, are evident. The adoption of measures such as distance and social isolation made it difficult to carry out work activities, which influenced the loss of income because he could not work or be fired. Still, on these impacts, there are changes in sleep routine and concentration level in daily activities; feelings of hopelessness; boredom throughout the day; procrastination and loneliness; beyond anger and frustration caused by the loss of autonomy and personal freedom (Costa, 2020).

Concerning the mental health of workers in Brazil, a study carried out by the Surveillance of Health Workers' Diseases, between the years 2006 and 2017, estimates that the main diagnoses in mental health linked to the work sector are a reaction to severe and adaptation disorders (47%), depressive episodes (24%), anxiety disorders (17%), recurrent depressive disorder (7%), among others (5%) (Reference Center in Occupational Health, 2019). Considering these data and observing all the possibility of damage to the psychological health of the worker, in the current pandemic circumstances, the preservation of the workers' mental health is an essential task (Fiho et al., 2020), especially to contain the progress of problems mental disorders already commonly present in the world of work.

According to Ornell et al. (2020), health professionals who remain in their activities present, among various manifestations, an increased risk of contamination, a sense of loss of the presumed world since there are still no specific protocols to deal with the crisis context, as well as suffering is often due to the anticipated mourning experienced. These variables increase greatly the risk of manifestation of mental suffering and/or serious and persistent mental disorders related to the work activities performed, as explained by Ho et al. (2020) and Zhang et al. (2020) by highlighting the possibility of developing Post Traumatic Stress Disorder, Depression and Anxiety.

According to Lazarus and Folkman (1984), the perception about coping should not be compared to a kind of domain over the external environment, mainly, because many sources that provide emotional changes cannot be controlled, therefore, effective coping in these conditions is that that allows the person to tolerate, minimize, accept or ignore what cannot be controlled. That said, this notion converges with the current context of the COVID-19 pandemic, since it trit raises the possibilities of emotional and/or behavioral responses of the subjects.

Thus, when the subject can not experience the exposed situation with his own psychic attributes, using extrinsic coping strategies becomes essential to support this adverse moment, helping developing new emotional and behavioral resources. External strategies can be mentioned, such as the exercise of self-care and the promotion of a safe psychosocial environment for workers so that they can cope more healthily with the effects of the pandemic, minimizing the impacts of an environment with a high level of stress and the demands of an unprecedented situation, in a scenario of many uncertainties and deaths (Fiho et al., 2020; Stone, 2020).

As an integrative review, the article aims to systematize the main strategies and measures associated with the worker's mental health, understanding its relevance at present by addressing resources that can assist the worker in facing the pandemics' effects. To this end, an integrative review of the articles published on this topic was carried out in May and June.

Method

This integrative review aims to present scientific evidence about the main coping strategies being recommended and used to verify the mental health situation of workers resulting from COVID-19 in a pandemic context, and about the prevention of psychological distress, promotion of mental health and instruments for detecting psychological distress in workers.

This type of review has a broader character in literature searches since it allows the inclusion of both observational and experimental studies, as well as review studies (Souza et al., 2010).

The first step in the development of this study was to raise the research question: "What strategies have been recommended and used in a pandemic context to support workers' mental health?". Subsequently, a survey was made at the DeCS (Health Sciences Descriptors), using the descriptors: Coping strategies; Coronavirus infections; Mental health; Workers. Also, the following crossings were carried out: "Coronavirus infections" and "Mental health" or "Coping strategies" or "Workers". The sample survey for this research was carried out in the SciELO, PubMed, and PepsiC databases, in the period from May to June 2020.

The studies were chosen using the following inclusion criteria: original articles, review studies, experience reports, applied research, and cross-sectional cohort studies that presented measures aimed at workers' mental health during the COVID – 19 pandemics, there is no language restriction and neither the working class. As exclusion criteria, we opted to exclude articles that did not address the mental health of the worker or that, although directed at the mental health of the workers, did not manifest measures and strategies for the prevention, promotion, or evaluation of the mental health of the professionals, as well as studies without methodological clarity, and with an undefined objective and conclusion.

In the search process, 447 articles were initially found, of which 403 were excluded after reading the titles and checking those that did not mention mental health. Then, the abstracts of the 44 remaining articles were read, 20 of which did not mention the workers' mental health, and were excluded. The 24 studies were read in full, with 4 being excluded after analysis of the methodological quality of the studies, that is, those that did not present measures of prevention, promotion, or evaluation of mental health, as well as indication of the objective and final consideration in line with the study.

 $\textbf{Table 1.} \ \ \textbf{Demonstratives of the categories listed by database}$

| Data base | Recovered Articles | Articles excluded after applying the exclusion criteria 1st stage | Articles after applying the exclusion criteria 1st stage | Articles excluded after applying the exclusion criteria 2nd stage. | Articles after applying the exclusion criteria 2nd stage. | Articles excluded after applying the exclusion criteria 3rd stage. | Articles after the 3rd stage. |
|--------------|-----------------------|---|--|--|---|--|-------------------------------------|
| Scielo | 65 | 50 | 15 | 9 | 06 | 1 | 5 |
| PubMed | 382 | 353 | 29 | 11 | 18 | 3 | 15 |
| PepsiC | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 447 | 403 | 44 | 20 | 24 | 04 | 20 |

Table 2. Final evaluation of the included studies according to the list in Table 3 (to be continued)

| METHOD | PARTICIPANTS | GOAL | CONCLUSION |
|---|---|--|---|
| 1. Systematic review based on the patient care protocols with COVID-19, PAHO documents and scientific articles. | X | Synthesize actions for the management of psychological security of health professionals. | Health professionals need to be the object of psychological security management, given the psychological problems that the studies found mention. |
| 2.Cross-sectional cohort study | STEP 1: 92 participants STEP 2: 10 participants STEP 3: 58 participants | Develop and evaluate digital learning package related to the psychological well-being of UK healthcare workers. | The package was considered useful, meaningful and adequate to the psychological needs of health professionals as a complement to their well-being strategies. |
| 3. Literature review | X | Review of studies on the psychological stress of health workers caused by the COVID-19 pandemic. | Considering the frequency of mental symptoms during COVID-19 in health professionals, it is necessary to carry out mental health interventions to facilitate their coping. |
| 4. Experience report. | Medical team | Development of psychological interventions for the medical team. | Maintaining the team's mental health is essential for controlling the impact of COVID-19 infections. |
| 5. Literature review | X | Present physical and mental health interventions to protect health workers on the African continent. | Protecting the health and mental well- being of frontline professionals in Africa will have a long-term impact on social, economic and security stability on the continent. |
| 6. Experience Report | X | Establish the measures that health managers must implement to protect the mental health of health professionals. | Health managers must minimize the psychological risks of medical staff in the face of the pandemic. |
| 7. Qualitative research | X | Assist governments, hospitals and communities to develop mental health strategies to control the fear and panic of viral transmission. | The outbreak of COVID-19 highlighted the mental fragility and the need to have a national psychological intervention plan. |
| 8. Cross- sectional cohort study | 246 professionals from the medical team. | Investigate the mental health of the frontline medical staff at COVID-19 and provide a theoretical basis for psychological intervention. | Given the high incidence of anxiety and post-traumatic stress in the medical team, institutions must train the psychological skills of professionals. |

Table 2. Final evaluation of the included studies according to the list in Table 3 (continuation)

| METHOD | PARTICIPANTS | GOAL | CONCLUSION |
|---|---|--|---|
| 9. Experience Report | Health professionals | Inform about the efficiency and quality of crisis interventions used by a public health emergency for health professionals. | The psychological interventions used obtained good results with the team. |
| 10. Cross- sectional cohort study | 1,257 health professionals | Investigate the mental health of China's healthcare professionals who are treating patients with COVID-19. | Among Chinese health workers, frontline nurses are at high risk for damage to their mental health requiring psychological support or interventions. |
| 11. Cross- sectional cohort study | 2,299 participants, 2,042 of whom are medical and 257 are administrative staff. | Evaluate the psychological status of professionals working in the hospital context. | Medical professionals working in the respiratory, emergency, ICU and infectious diseases departments are more susceptible to psychological disorders and need effective strategies to improve mental health. |
| 12. Original article | X | Demonstrate how the pandemic impacts the mental health of healthcare professionals. | Evidence highlights that mental health care needs to be developed urgently. |
| 13. Integrative Review | X | Present scientific evidence on the factors associated with the occupational and psychological impact caused by the pandemic on health professionals. | This study allowed us to verify that there is strong evidence available in the scientific literature on the factors associated with the occupational and psychological impact on health professionals who have experienced pandemic situations. Implications for the field of psychology were revealed, as the psychological impacts of the experiences of professionals in health services during pandemic situations were verified. |
| 14. Original article | X | Investigate and assess the existence of a fear pandemic with the COVID-19 pandemic. | It is necessary to implement public mental health policies as a pandemic response strategy. Mental health professionals must be at the forefront and play a role in leading this planning. |
| 15. Narrative Review | X | Cite the main mental health disorders developed, strategies and instruments from previous pandemics that can be used to promote mental health in the current pandemic. | Importance of investing in promoting the mental health of professionals working on the front lines, both in terms of research, and in terms of prevention and treatment. |
| 16. Original article | X | Summarize the first recommendations for the reduction of stress and psychological burden in health professionals during the COVID-19 pandemic. | This article presents guidelines for healthcare professionals and healthcare team leaders who help maintain mental health during the COVID-19 pandemic. |
| 17. Narrative Review | X | Systematize knowledge about implications for mental health and psychological interventions in the face of the new coronavirus pandemic. | In short, it is understood that Psychology can offer important contributions to face the repercussions of COVID-19, which has been considered the greatest public health emergency facing the international community in decades. |
| 18. Qualitative Study | 20 nurses | Investigate the mental health of nurses who care for patients with COVID-19. | During an epidemic outbreak, positive and negative emotions from frontline nurses intertwined and coexisted. In the initial stage, negative emotions were dominant and positive emotions gradually appeared. Self-care styles and psychological growth played an important role in maintaining nurses' mental health. |

Table 2. Final evaluation of the included studies according to the list in Table 3 (conclusion)

| METHOD | PARTICIPANTS | GOAL | CONCLUSION |
|-------------------------|-----------------------------|---|---|
| 19. Clinical research | 120 medical teams aged | Understand the changes in psychological factors and the sleep state of COVID-19's | There are psychological and sleep symptoms in the frontline medical team that takes part in the fight against COVID- |
| | between 25 and 59 years. | frontline medical staff and provide evidence of interventions to alleviate symptoms. | 19 and they affect each other. Hospitals should improve emergency management measures, strengthen psychological counseling for first-rate medical staff, strengthen exercise intervention, and improve sleep quality and mental health. |
| 20. Original article | X | Demonstrate the impact of the pandemic on the mental health of the population and especially on health professionals. | The importance of early intervention and being vigilant for signs of psychiatric illness is still relevant at this critical moment. |

^{*} The "X" symbol on the participants axis, mentions the absence of population in the study.

Results

The review consisted of a collection of 20 publications on the prevention, promotion and intervention measures applied to the mental health of the working class during the COVID-19 pandemic. Primarily, measures were used with a view to mental protection of health professionals due to their greater exposure to the physical and psychological consequences of the pandemic, but they can also be used in other sectors of work.

In Table 3, it is possible to identify the origin of the research and, consequently, the countries with the most productions that deal with the workers' mental health strategies, highlighting: United States (28.58%), United Kingdom (19.04%), Brazil (19.04%), China (14.30%), Germany (9.52%), Ecuador (4.76%) and Singapore (4.76%).

Table 3. Distribution of articles containing prevention, promotion or coping strategies aimed at the worker's mental health (to be continued)

| NUMBER | AUTHOR'S | TITLE | INDEXER | COUNTRY |
|--------|--|---|---------|-------------------|
| 1 | Almaguer, A, C., Alvarez, A, K, G., Santos, E, Z. | Gestión de seguridad psicológica del personal sanitario en situaciones de emergencia por COVID-19 en el contexto hospitalario o de aislamiento | Scielo | Ecuador |
| 2 | Blake, H., Bermingham, F., Johnson, G., & Tabner, A. | Mitigating the Psychological Impact of COVID-19 on Healthcare Workers: A Digital Learning Package | Pubmed | United Kingdom |
| 3 | Bohlken, J., Schömig, F., Lemke, M., Pumberger, M., & Riedel-Heller, S. | COVID-19 Pandemic: Stress Experience of Healthcare Workers - A Short Current Review | Pubmed | Germany |
| 4 | Chen, Q., Liang, M., Li, Y., Guo, J., Fei, D., & Wang, L. et al. | Mental health care for medical staff in China during the COVID- 19 outbreak | Pubmed | China |
| 5 | Chersich, M., Gray, G., Fairlie, L., Eichbaum, Q., Mayhew, S., & Allwood, B. et al. | COVID-19 in Africa: care and protection for frontline healthcare workers | Pubmed | United Kingdom |
| 6 | Greenberg, N., Docherty, M., Gnanapragasam, S., & Wessely, S. | Managing mental health challenges faced by healthcare workers during covid-19 pandemic. | Pubmed | United Kingdom |
| 7 | Ho, C. S., Chee, C. Y., & Ho, R. C. | Mental Health Strategies to Combat the Psychological Impact of COVID-19 Beyond Paranoia and Panic | Pubmed | Singapore |

Table 3. Distribution of articles containing prevention, promotion or coping strategies aimed at the worker's mental health (conclusion)

| NUMBER | AUTHOR'S | TITLE | INDEXER | COUNTRY |
|--------|---|--|---------|---------|
| 8 | Huang, J. Z., Han, M. F., Luo, T. D., Ren, A. K., & Zhou, X. P. | Mental Health Survey of Medical Staff in a Tertiary Infectious Disease Hospital for COVID-19 | Pubmed | China |
| 9 | Kang, L., Li, Y., Hu, S., Chen, M., Yang, C.,;Yang, B,X., Wang, Y., Hu, J., Lai, J., Ma, X., | The mental health of medical workers in Wuhan, China dealing with the 2019 novel coronavirus | Pubmed | China |
| 10 | Lai, J., Ma, S., Wang, Y., Cai, Z., Hu, J., & Wei, N. et al. | Factors Associated With Mental Health Outcomes Among Health Care Workers Exposed to Coronavirus Disease 2019 | Pubmed | EUA |
| 11 | Lu, W., Wang, H., Lin, Y., & Li, L. | Psychological Status of Medical Workforce During the COVID-19 Pandemic: A Cross-Sectional Study | Pubmed | EUA |
| 12 | Neto, M., Almeida, H. G., Esmeraldo, J. D., Nobre, C. B., Pinheiro, W. R., de Oliveira, C., Sousa, I., Lima, O., Lima, N., Moreira, M. M., Lima, C., Júnior, J. G., & da Silva, C. | When health professionals look death in the eye: the mental health of professionals who deal daily with the 2019 coronavirus outbreak | Pubmed | EUA |
| 13 | Oliveira, W., Oliveira- Cardoso, É., Silva, J., & Santos, M. | Impactos psicológicos e ocupacionais das sucessivas ondas recentes de pandemias em profissionais da saúde: revisão integrativa e lições aprendidas | Scielo | Brazil |
| 14 | Ornell, Felipe, Schuch, Jaqueline B., Sordi, Anne O., & Kessler, Felix Henrique Paim. | Pandemic fear" and COVID-19: mental health burden and strategies | Scielo | Brazil |
| 15 | Ornell, F., Halpern, S, C., Kessler, F, H, P., & Narvaez, J, C. | The impact of the COVID-19 pandemic on the mental health of healthcare professionals | Scielo | Brazil |
| 16 | Petzold, M., Plag, J., & Ströhle, A. | Dealing With Psychological Distress by Healthcare Professionals During the COVID- 19 Pandemia [Umgang mit psychischer Belastung bei Gesundheitsfachkräften im Rahmen der Covid-19- Pandemie] | Pubmed | Germany |
| 17 | Schmidt, B., Crepaldi, M, A., Bolze, S, D, A., Neiva-Silva, L., Demenech, L, M. | Saúde mental e intervenções psicológicas diante da pandemia do novo coronavírus (COVID-19) | Scielo | Brazil |
| 18 | Sun, N., Wei, L., Shi, S., Jiao, D., Song, R., & Ma, L. et al. | A qualitative study on the psychological experience of caregivers of COVID-19 patients | Pubmed | EUA |
| 19 | Wu, K., & Wei, X. | Analysis of Psychological and Sleep Status and Exercise Rehabilitation of Front-Line Clinical Staff in the Fight Against COVID-19 in China | Pubmed | EUA |
| 20 | Yahya, AS., Khawaja, S., Chukwuma, J | The Impact of COVID-19 in Psychiatry | Pubmed | EUA |

About the focus of the publications, preventive measures were identified, as well as, to promote the mental health of workers, both to be carried out by mental health professionals by deliberation of the organization in which they work and by government action. Besides, psychological instruments were recognized, such as the use of tests, scales, and questionnaires to track symptoms that point to the manifestation of psychological distress or even to possible cases of Psychopathological Disorders. Finally, we observed using strategies, interventions, and psychological techniques as tools to support preventive measures and promote mental health. Therefore, to demonstrate in detail the data found, these were exemplified in Tables 4, 5, 6, and 7,

The most recurrent mental health prevention measures among the researched jobs (shown in Table 4) are: rotating work shifts (28.6%), periods of regular rest (23.8%), training of personnel (23.8%), early identification of symptoms (19%), direct and clear communication (19%), dissemination of support services and psychosocial measures (14.3%) and identification of professionals' demands through face-to-face or virtual dialogue, adapting the general guidelines and specificities of the place (14.3%). When observing those responsible for implementing these measures, it is possible to note that of the 7 mentioned, 6 are performed by organizations, which shows the importance of corporations in caring for the mental health of their employees and, consequently, contributing to the health of the general population.

Table 4. Mental health prevention measures according to the list in Table 3

| ITEM | MENTAL HEALTH PREVENTION MEASURES | ARTICLES | RESPONSIBLE FOR IMPLEMENTING THE MEASURES | QUANTITY OF ITEMS THAT PROPOSE MEASURE |
|------|--|-----------------------------------|---|---|
| 1 | Rotating work shifts | [1]; [2]; [3]; [7]; [9]; [16]. | Organization. | 6 |
| two | Provide regular rest periods | [1]; [7]; [16]; [17]. | Organization. | 5 |
| 3 | Conducting personnel training | [1]; [7]; [9]; [14]; [15]. | Organization. | 5 |
| 4 | Early symptom identification | [7]; [10]; [14]; [15]. | Mental health professionals. | 4 |
| 5 | Direct and clear communication | [2]; [7]; [16]. | Organization. | 4 |
| 6 | Dissemination of support services and psychosocial measures | [15]; [16]. | Organization. | 3 |
| 7 | Identify the demands of professionals through dialogue, adapting the general guidelines to the specificities of the place. | [1]; [4]; [7]. | Organization. | 3 |
| 8 | Identification of psychological risk group. | [10]; [15]. | Mental health professionals. | two |
| 9 | Early psychological and psychiatric interventions. | [15]; [18] | Mental health professionals. | two |
| 10 | Establish a contingency preventive plan to deal with more serious psychiatric symptoms | [14]; [15]. | Mental health professionals. | two |
| 11 | Recognition of efforts put into work | [1]; [16]. | Organization. | two |
| 12 | Define tools to monitor mental health. | [15] | Mental health professionals. | 1 |
| 13 | Identify professionals with previous psychiatric conditions (depression, burnout, anxiety disorders, bipolar disorder, trauma) | [15] | Mental health professionals. | 1 |

In relation to measures to promote mental health, most found in studies in Ecuador, the United Kingdom, Brazil, Germany, and Singapore, the work of professionals in the area is recognized as an important factor for the care and treatment of those who are suffering the impacts of the pandemic. Among the most cited promotion measures are: Providing psychological support to health professionals to facilitate emotional expression (33.3%); Assist in identifying needs, most recurring concerns, and development strategies (28.6%); Develop psychoeducational and informational materials that promote mental health care (23.8%); Carry out psychological treatment plans and provide psychological counseling (23.8%); Crisis management (23.8%); Provide a healthy organizational climate;

Looking at Table 5, it is also possible to identify that responsibilities are divided between mental health professionals, government actions, and organizations, with the mental health professional being responsible for 6 of the 8 most used measures.

Table 5. Measures to promote mental health according to the list in Table 2.

| ITEM | MEASURES TO PROMOTE MENTAL HEALTH | ARTICLES | RESPONSIBLE FOR IMPLEMENTING THE MEASURES | QUANTITY OF ITEMS IT PROPOSESIN MEASURE |
|------|--|--|---|--|
| 1 | Provide psychological support to health professionals to facilitate emotional expression | [2]; [8]; [13]; [15]; [16]; [17]; [19]. | Mental health professionals. | 7 |
| two | Provide assistance in identifying needs, recurring concerns and development strategies | [1]; [2]; [3]; [7]; [9]; [16]. | Mental health professionals. | 6 |
| 3 | Develop psychoeducational and informational materials that promote mental health care. | [2]; [3]; [9]; [14]; [15] | Mental health professionals + Government. | 5 |
| 4 | Carry out psychic treatment plans and provide psychological counseling | [5]; [7]; [12]; [15]; [20]. | Mental health professionals. | 5 |
| 5 | Crisis management. | [1]; [7]; [16]; [17]. | Mental health professionals. | 5 |
| 6 | Provide a healthy organizational climate. | [1]; [7]; [9]; [14]; [15]. | Organizations. | 5 |
| 7 | Perform clinical psychological interventions | [3]; [9]; [15]. | Mental health professionals. | 4 |
| 8 | Standardize psychotropic drugs and make them available | [2]; [7]; [16] | Governments | 4 |
| 9 | Provide remote psychological assistance and support network. | [1]; [4]; [7] | Mental health professionals. | 3 |
| 10 | Develop actions focused on mental health care after the end of the pandemic. | [6]; [15]. | Mental health professionals. | two |
| 11 | Implement mental health care actions. | [1]; [15]. | Mental health professionals. | two |
| 12 | Provide emergency care and psychological first aid | [7]; [15]. | Mental health professionals. | two |
| 13 | Mental support therapeutic groups | [1]; [16] | Mental health professionals. | two |

Among the interventions and strategies presented in Table 6, it is noted that self-care strategies, strengthening support networks, and the practice of physical exercises are the most frequent, which can be found in studies published in countries such as Ecuador, Germany, Brazil, and United Kingdom, and more applied to healthcare professionals.

Table 6. Psychological interventions and strategies listed according to Table 2

| ITEM | PSYCHOLOGICAL INTERVENTIONS AND STRATEGIES | ARTICLES | QUANTITY OF ITEMS THAT CITE DADA INTERVENTION |
|------|--|----------------------------|--|
| 1 | Self-care strategies | [1]; [16]; [17]; [19]. | 5 |
| two | Strengthening support networks through phone calls, text messages and audios | [1]; [2]; [9]; [17]; [19]. | 5 |
| 3 | Physical exercise and diet (yoga, tai chi, qigong) and nutrition | [1]; [15]; [19]. | 4 |
| 4 | Stress management strategies | [15]; [17]; [19]. | 3 |
| 5 | Psychological First Aid Kits | [1]; [15]; [16]. | 3 |
| 6 | Psychiatric and pharmacological treatment for severe cases | [12]; [14]; [15]. | 3 |
| 7 | Peer support | [15]; [16]; [20] | 3 |
| 8 | Post-traumatic stress interventions | [15]; [19]. | two |
| 9 | Individual counseling | [3]; [15]. | two |
| 10 | Mental health assessments | [15]; [19]. | two |
| 11 | Psychological visits to rest areas for listening to professionals | [17]; [19]. | two |
| 12 | Mindfulness techniques | [15] | 1 |
| 13 | Guided meditation | [15] | 1 |
| 14 | Musical meditation | [18] | 1 |
| 15 | Psychoeducational interventions | [15] | 1 |
| 16 | Burnout prevention protocols | [15] | 1 |
| 17 | Therapeutic groups | [15] | 1 |
| 18 | Positive Psychology Strategies | [15] | 1 |
| 19 | Brief anxiety and depression interventions | [15] | 1 |
| 20 | Suicide prevention protocols | [15] | 1 |
| 21 | Mindfulness and meditation techniques | [15] | 1 |

Source: The authors (2020).

In Table 7, it is possible to notice that the most used instruments are psychometric instruments with a focus on assessing the state of anxiety, with 03 different tools cited for analyzing this construct. The instrument for assessing the level of depression was the second most cited among studies.

Table 7. Psychological instruments listed according to Table 2

| ITEM | INTRUMENTS | ARTICLES | QUANTITY OF ARTICLES THAT CITE A CERTAIN INSTRUMENT |
|------|---|-------------|---|
| 1 | Generalized Anxiety Disorder (GAD-7) | [3]; [10]. | two |
| two | Hamilton Anxiety Scale (HAMA) | [11]; [15]. | two |
| 3 | Hamilton Depression Scale (HAMD) - | [11]; [15]. | two |
| 4 | Anxiety and Self-Assessment Scale (SAS) | [12]; [15]. | two |
| 5 | Event Impact Scale (IES-R) | [3] | 1 |
| 6 | Health Questionnaire-9 (PHQ-9) | [3] | 1 |
| 7 | Burnout: Maslach Burnout Inventory - Human Services | [15] | 1 |
| 8 | Research (MBI-HSS) | [15] | 1 |
| 9 | Stress at work: Job Stress Scale (JSS) | [15] | 1 |
| 10 | Tracking non-psychotic mental disorders: self-report Questionnaire (SRQ-20) | [15] | 1 |
| 11 | Tracking mental disorders: multi-level symptom of the DSM-5 Scale | [15] | 1 |
| 12 | Alcohol and drugs: alcohol, smoking and substances | [15] | 1 |
| 13 | WHO screening test (ASSIST) / WHO | [15] | 1 |
| 14 | Quality of life: Quality of Life of the World Health Organization | [15] | 1 |
| 15 | Short version (WHOQOL-bref) | [15] | 1 |
| 16 | Operation: Brief Operation Scale (FAST) | [15] | 1 |
| 17 | Resilience: Scale of resilience pillars (EPR) | [15] | 1 |
| 18 | Self-Classification Scale for Posttraumatic Stress Disorder (PTSD-SS). | [8] | 1 |
| 19 | Insomnia Severity Index | [10] | 1 |

Discussion

The spread of COVID-19 on a global scale has generated impacts worldwide, saturating health systems and bringing unprecedented changes in the field of work. As a result, the possible effects on the mental health of the worker are noted, especially those who work in the front line to combat the pandemic, facing daily pressures and the stigma of the profession. However, the psychological damage to this population is capable of transcending the current moment, and it can generate trauma with medium- and long-term duration, as indicated by Ornell et al. (2020), based on data from previous respiratory outbreaks such as the SARS of 2003 and the MERS of 2015 and how they caused psychological damage to health professionals even after they left the work environment.

There is currently a significant increase in depressive and anxious disorders, post-traumatic stress, acute stress, and Burnout syndrome among health professionals. Most of this psychological suffering is caused by strenuous routines, a scenario of uncertainty, risk of contamination, fear of transmission to the family, among other factors that generate illness (Ho et al., 2020; Huang et al., 2020; Oliveira et al., 2020; Ornell et al., 2020; Sun et al., 2020; Wu & Wei, 2020). Given this situation, for tracking symptoms and identifying disorders, part of the studies collected used psychological instruments, especially those that assessed levels of anxiety and depression.

In a review study by Bohlken et al. (2020) on the psychological stress of healthcare workers caused by the current pandemic, in a sample varying between 37 and 1,257 participants, high levels of psychological impacts were also evidenced, in which symptoms of anxiety, depression, and stress stood out. Likewise, Lai et al. (2020), in a cross-sectional study with 1,257 health professionals, highlighted the preponderance of symptoms of depression, anxiety, insomnia, and suffering. Therefore, it is suggested that this is one of the main symptoms presented by health workers, which highlights the use and effectiveness of the instruments: Generalized Anxiety Disorder (GAD-7), Hamilton Anxiety Scale (HAMA).

Within this context, in addition to identifying signs and symptoms that are readily associated with psychiatric disorders, it is essential to think about strategies for preventing and promoting the mental health of professionals working to combat COVID-19, given that being on the front line, they are essential to maintain the functionality of the health system (Petzold et al., 2020) and, consequently, to fight the pandemic.

The measures to prevent mental health illustrated in Table 4 highlight the active role of organizations in providing greater possibilities for preventing possible damage to mental health, since such measures aim to reduce stress levels among health teams, identify possible demands and give guidance within the possibilities. This, in turn, highlights the importance of corporations in caring for the mental health of their employees and, thus, contributing to the health of the general population.

For Almaguer et al. (2020), when thinking of ways to prevent damage to the mental health of the worker, it is necessary to establish a clear, directive level of organization and, if possible, divided into phases, in which it becomes possible to think about the impacts caused by the work routine. According to the author, rotating work shifts can help prevent these impacts on mental health, given that, as Bohlken et al. (2020) in another study, the level of impact and damage to the worker's mental health may vary according to the level of exposure of the worker to the possibility of infection with the virus.

Still, on rotating shifts as a prevention strategy, Blake et al. (2020) developed and evaluated a digital learning package using the Agile methodology to minimize the impacts on workers' mental health. Among the strategies listed by the authors, according to the opinion of experts who helped with the package, rotating work shifts appear as a possibly effective strategy, especially for reducing the level of exposure and overload of workers.

It is worth noting that at the beginning of the pandemic, hospitals in China already used this strategy and, in a way, showed a lower level of damage to workers' mental health (Kang et al., 2020).

Although rotating work shifts stand out as the main preventive measure, other measures such as the period of regular rest, conducting personal training, early identification of symptoms, and direct and clear communication, are also too important.

According to Almaguer et al. (2020) and Blake et al. (2020), the provision of regular rest periods reduces possible impacts on the health of the worker, in turn, as well as the strategy of rotating work shifts. In line with this, Ho et al. (2020) emphasize the evident effectiveness that rests provide preventing these impacts and better psychological results.

Personal training and early symptom identification are efficient as they are well performed. According to Ornell et al. (2020), when referring to personal training, organized training is in mind, such as training based on stress, trauma, depression, and behavior management protocols risk. These trainings, therefore, can come to help in the early identification of symptoms. Therefore, these two strategies are structured as an essential tool to be used by organizations.

Regarding measures to promote mental health, the work of professionals in the area is recognized as an important factor for the care and treatment of those suffering the pandemic's impacts. Among these promotion measures, according to Blake (2020) and Petzold et al. (2020), providing psychological support to health professionals aiming to facilitate emotional expression provides a significant increase

in the psychological well-being of workers exposed to COVID-19. In addition, even based on Petzold et al. (2020), this emotional support can, consequently, decrease the cases of a high degree of damage to mental health (depression, anxiety, and stress) that are so frequent in the working population today. Therefore, it becomes possible to conclude and add that emotional expression is a strategy that provides the symbolization of the process of experiencing the pandemic.

Still aiming to promote the mental health of workers, the development of psychoeducational and informational materials that promote mental health care also become overly effective and important (Blake et al., 2020; Bohlken et al., 2020), since a good most health workers have a low level of education regarding psychological issues, especially in Brazil (Schmitd et al., 2020).

Among the measures, others stand out, such as the realization of mental treatment plans and the provision of psychological counseling based on the most frequent demands, as well as individual ones (Chersich, 2020; Ho et al., 2020; Yahya et al., 2020), as well as crisis management (Almaguer et al., 2020; Petzold et al., 2020).

Unlike the preventive measures that concentrated a large part of the responsibilities in organizations, the promotion measures are divided between mental health professionals, government actions, and organizations, with the mental health professional being the main agent in the execution of these measures, therefore, the most important. These data point to the importance of those who work with mental health to be equipped with the current demands and those that may arise after the crisis, as there is already a great need for attention to health professionals, which should be reflected in other sectors of work overtime. Thus, it is up to psychology professionals to develop tools to promote and prevent psychological health through support.

Regarding how these professionals can manage the impacts on their health with the use of coping strategies, the studies highlight the greater effectiveness of self-care and the strengthening of the support network, within the family and among the professionals themselves. The importance of strengthening the support network is supported by the high rate of depression cases, as mentioned above, as well as reports of loneliness experienced by professionals on the front lines (Almaguer et al., 2020; Wu & Wei, 2020)

The practice of physical activity and a regular diet also appears to be effective in coping with the current pandemic situation (Wu & Wei, 2020). According to the authors, adequate physical exercise and the level of exercise intensity can help to significantly improve sleep quality and mental and physical health.

However, according to Sun et al. (2020), each subject develops his own methods of coping, and through them, they can promote psychological adjustments both on an emotional and cognitive scale to support the adverse work scenario. Therefore, although most of the strategies explained here point to the execution by organizations or mental health professionals, the subject himself is also an active agent in the face of the uncertainties and adverse situations of the pandemic, highlighting, then, the capacity of each individual to develop their own strategies or use the strategies found here in their own way, validating the theory of Lazarus and Folkman (1984) around coping.

Thus, through this review, it was observed that few scientific studies address intervention models focused on the mental health of professionals involved in assisting patients with COVID-19, as well as other sectors of the work world. Of the 20 articles found, 19 focus on health professionals, while 2, in addition to addressing the professionals' mental health, touch the health of the general population - although these two studies mention the mental health of the working population together with the population in general, only proposals aimed at the working public and the organizational field were considered. That said, a limitation also observed was the lack of clarity about the profession of the workers surveyed. Generic terms like "Medical Team" are commonly used.

In addition, it was possible to observe that of the 20 articles, only 4 were carried out in Brazil, the majority being international, which implies language barriers and socio-cultural characteristics, in addition to demonstrating that, in general, there are few studies dedicated to the mental health of workers. Concomitant to this, the lack of research directed to other professionals in essential sectors was identified, such as employees of supermarkets, pharmacies, gas stations, and banks, among others who work directly with people assistance; as well as professionals who deal directly with death by COVID-19 and other health problems in a pandemic context, such as burials.

It is understood that, as pointed out by Lu et al. (2020), health professionals, when experiencing the shortage of equipment, frustration with the results, and uncontrolled pandemic, experience a greater tendency to mental suffering, a fact that is observed in their own research, in which the medical team showed a level of anxiety 14.2% higher than the administrative class, although these data do not negate the need to think about the psychic health of other working classes that in their own way face the COVID-19 pandemic.

Thus, the possibility that a large part of the measures and strategies listed here can be adapted and targeted at workers in other sectors is emphasized, with room for developing new procedures.

Conclusion

In the face of the humanitarian, social and economic crisis generated by the pandemic of COVID-19 and the impacts on the mental health of workers, especially health professionals who are currently working on the front lines to combat the virus, this work was sought to systematize the main measures recommended and applied to assist in the use of resources by workers to face the mental health emergency generated by the current context.

Among the main measures to prevent psychological suffering found are: the establishment of rotating shifts, the establishment of regular rests, training of personnel, in addition to early identification of signs and symptoms of psychological distress. Although there are actions developed by government agencies and mental health professionals in this regard, the ones listed are the responsibility of organizations.

Among the most cited measures to promote mental health, there are providing psychological support to professionals; identification of needs and concerns; psychoeducation to promote mental health care; carrying out plans for psychological care and psychological counseling; efficient crisis management, and providing a healthy organizational climate. The execution of these measures is mostly related to mental health professionals.

Concerning the psychological strategies and interventions found, the main ones are self-care strategies; strengthening support networks through phone calls, text messages, and audios; physical exercise, and nutrition. And, the most used instruments to identify psychological suffering and mental illness are Generalized Anxiety Disorder (GAD-7); Hamilton Anxiety Scale (HAMA); Hamilton Depression Scale (HAMD); Anxiety and Self-Assessment Scale (SAS).

Thus, through the mapping of these strategies, it became possible to organize in a single location the resources that are being used in order to promote and prevent the workers' mental health, facilitating the search for this information, noting that a good part of the available materials is not in the Portuguese language. That said, by bringing together in one space the techniques and practices aimed at psychic health, we intend to optimize the access of these possibilities to psychologists and psychologists who work in the organizational environment, as well as in other areas, as we observe that the practices can go beyond the hospital environment, benefiting workers from different sectors.

Lastly, the limitation of this study is found in the fact that the productions, in their majority, only contemplate the professional hospital environment and the work activities resulting from this field. In addition, it is worth emphasizing the need to expand studies on the mental health of workers during the coronavirus pandemic installed around the world, especially with regard to addressing coping strategies, as well as preventing and promoting mental health, aimed at all areas. As a recommendation, the importance of researching the mental health of professionals who perform essential activities both during the pandemic and in the post-pandemic is emphasized, as well as, it is necessary national works that put into action the measures listed here, so that know its effectiveness in the reality of Brazilian professionals.

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Authors 'contributions

Nascimento RB, Vieira ES, Araújo IFL and Oliveira ACA carried out integrative research, data extraction and discussion, as well as writing the article. Araújo RLMS critically reviewed the article and contributed to the writing of the scientific article.

Conflicts of interest

No financial, legal or political conflicts involving third parties (government, companies and private foundations, etc.) have been declared for any aspect of the submitted work (including, but not limited to, grants and funding, participation in advisory council, study design, preparation of the manuscript, statistical analysis, etc.).

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