THE RELATIONSHIP BETWEEN THE VARIABLES WELL-BEING AT WORK AND PSYCHOLOGICAL SAFETY IN THE HOSPITAL ENVIRONMENT: AN INTEGRATIVE REVIEW

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ABSTRACT
This study presents an integrative review of the literature on the relationship between well-being at work and psychological safety of health professionals in hospital environments. The review covers articles published in the last decade, selected from academic databases using the PICO strategy to formulate the research question. Seven studies that fully met the eligibility criteria were included. The results indicate that the relationship between psychological safety and well-being at work, pointing out organizational contexts that offer inclusive leadership and adequate institutional support reinforce this relationship. Factors such as teamwork, support programs, and effective leadership emerge as promoters of a psychologically safe environment, while situations of harassment, abuse in the workplace, and emotional overload are significant barriers to mental health, increasing the risks of burnout and anxiety. The relevance of this study lies in the need to understand how the relationship between well-being and psychological safety can support the formulation of interventions and organizational policies aimed at improving working conditions in hospital environments, thus ensuring a more resilient context conducive to professional development and excellence in health care.

Keywords: Well-being. Psychological safety. Hospital environment. Hospital.

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INTRODUCTION

The hospital environment is characterized by intense demands and high stress, which puts significant pressure on healthcare professionals. These professionals face constant challenges ranging from strenuous workload and emotional pressure to the need to maintain high standards of care and accuracy (MOURA et al., 2023). In this context, the analysis of the factors that influence the well-being of these professionals is crucial to ensure not only their health and satisfaction, but also the quality of care provided to patients (ROSSI et al., 2020).

In view of this issue, an increase in illness due to work issues is perceived. Social Security data point out that in the period from 2021 to 2023, leaves from work for mental health reasons, with cases such as depression and anxiety, for example, increased alarmingly. Leaves went from 200,244 cases in 2021 to 288,865 in 2023, representing an increase of approximately 44.26%. Mental disorders represented the third leading cause of absence from work in Brazil. (DATAPREV, 2024; FARIAS, 2023).

Studies have shown that the time dedicated to work is a fundamental component for the construction and development of personal well-being and happiness (PASCHOAL; TAMAYO, 2008), which makes organizations seek strategies to value their employees and establish the necessary conditions for well-being in the work environment. As such, well-being at work has been linked to several benefits, including lower turnover, higher job satisfaction, and better mental health for employees(OLIVEIRA; GOMIDE JÚNIOR; POLI, 2020).

 Brazilian legislation, specifically in the area of Labor Law, already refers to the concern with the well-being of workers when the Consolidation of Labor Laws (CLT) establishes a series of rights and duties for both employers and employees, aiming to protect the physical and mental health of workers. The CLT signals a concern with creating a healthy and safe work environment, recognizing the importance of well-being in the environment of organizations. Through the Regulatory Standards (NRs), specifically NR-01, 05, 17 and 32 establish concerns not only with the prevention of accidents and occupational diseases, but also the general well-being of professionals and with the creation of measures that ensure their safety**.** (Brazil, 1946; Brazil, Ministry of Labor and Employment, 2022; Brazil, Ministry of Labor and Employment, 2022; Brazil, Ministry of Labor and Employment, 2023; Brazil, Ministry of Labor and Employment, 2024).

The importance of the topic means that NR 01 (2024) is updated and its modifications come into force in 2025, where it provides for the management of occupational risks and reinforces the measures that the CIPA (internal accident and harassment commission), regulated by NR05 (2023), must take to promote guidelines and develop supervision and awareness regarding the safety of professionals, inhibiting situations of harassment.

To promote well-being at work, it is essential to integrate actions aimed at individual development, building a healthy work environment, and offering opportunities for professional growth and development (RIBEIRO; VEIGA, 2022).

The study on the subject of well-being is old and several scholars have been focusing on the subject since Ancient Greece (ROSSI et al., 2020). When we look at the history of the well-being construct, we can say that it has its roots in classical philosophies where there were philosophers who sought to understand happiness and its impacts on people's daily lives (ROSSI et al., 2020). Chicken and Brook (2005) point out that the ideas of the Enlightenment also permeated the construction of this construct, after all, in this period, society was going through a process where questions about the ideas of humanity's life purpose began, no longer being seen as a service to God and the King, but through the prism of life itself, happiness and personal development of each individual.

We can say that this social scenario is the background for the ideas of Hedonism and Eudaimonism about happiness to gain space in the discussions. Hedonism sees happiness as the sum of positive emotions, based on the avoidance of suffering, while eudaimonism sees happiness as personal fulfillment achieved through virtue and the development of human potential, emphasizing self-realization. (MENDONÇA et al., 2012; ROSSI et al., 2020)

In view of the changes that occurred in twentieth-century society, there is an expansion in terms of health and well-being (MENDONÇA et al., 2012; ROSSI et al., 2020), being defined in this period by the World Health Organization (WHO), the concept of well-being as a condition of people's collective health from a biopsychosocial perspective, covering the different domains of human life, such as work, leisure, finances and the self itself. (MENDONÇA et al., 2012)

The advancement of studies in the area promotes a separation between psychological well-being, which includes self-acceptance and personal development, and subjective well-being, which focuses on life satisfaction and positive and negative affects.

(CHICKEN; RIBEIRO, 2005; MENDONÇA et al., 2012; PAGE; TAMAYO, 2008) With this, authors such as Albuquerque and Tróccoli, (2004) They refer to well-being as the scientific study of happiness, emphasizing the development of personal strengths and the pursuit of a satisfying and meaningful life.

In recent years, the concept of well-being has been applied to the workplace, given concerns about the health and happiness of employees and the possible impact on productivity and organizational success. Thus, Paschoal & Tamayo (2008) conceptualize well-being at work as "the prevalence of positive emotions at work and the individual's perception that, in his work, he expresses and develops his potentials/skills and advances in the achievement of his life goals", thus considering both the affective and cognitive aspects.

Ribeiro and Veiga (2022) emphasize that it is a broad concept, which encompasses affective, cognitive and psychosomatic aspects, emerging as a crucial factor for the health and performance of health professionals.

Bringing to light not only the internal factors, we also have the environment where this person is inserted. When there is an atmosphere of safety, where professionals can share their perceptions and experiences, an environment is created that favors both individual well-being and collective efficiency, promoting an organizational culture focused on growth and continuous improvement. (EDMONDSON, 2020).

Psychological safety, in turn, refers to the environment in which individuals feel safe to express their opinions, doubts, and concerns without fear of reprisals (EDMONDSON, 1999). The studies that support the construction of this concept have been developed over the years, with the understanding of the importance of a work environment where professionals feel safe (CLARK, 2023; EDMONDSON, 1999).

Clark (2023) states that the concept of psychological safety began to be evidenced in the 1990s by psychologist William Kahn, however, he points out that since the 60s there were already researchers arguing that to facilitate organizational change and innovation it would be necessary to create an environment in which people felt safe to experiment and make mistakes without fear of negative repercussions.

In the 1990s, Amy Edmondson, a professor at Harvard Business School, significantly advanced the concept of psychological safety with her research on work teams. In 1999, Edmondson published an article entitled "Psychological Safety and Learning Behavior in Work Teans", in which he defined psychological safety as "the shared

belief that the team is safe for interpersonal risk-taking". Their research demonstrated that teams with high psychological safety were more likely to admit mistakes, seek feedback, and experiment with new ideas, which led to superior performance and greater innovation (EDMONDSON, 1999).

This idea that an environment where there is psychological safety is more conducive to innovations and has greater productivity, made several organizations begin to be interested in the construct. (PEDRO et al., 2016). Edmondson (2020) in his studies, brings that the growing appreciation of well-being and mental health at work will contribute to the advancement of studies on psychological safety.

In the following decades, this concept was adopted by several organizations that recognize its benefits for productivity and innovation. (Pedro et al., 2016) Thinking like this, an environment that promotes psychological safety allows employees to adapt, quickly, learn from mistakes, and contribute creative ideas (Clark, 2023).

In view of the above, this study sought to evaluate the scientific productions on well-being at work and psychological safety in articles from the last 10 years in the hospital environment. The study is justified by the relevance of the proposed theme, considering that the understanding of this relationship can provide valuable subsidies for the formulation of organizational policies oriented to the development of healthier and more sustainable hospital environments for workers, which, ultimately, will benefit not only professionals, but also patients and society as a whole.

Literature review is considered an essential stage of any academic research, as it allows the survey, analysis and synthesis of existing knowledge on the topic studied. The choice for the integrative literature review was due to the fact that, according to Souza et al. (2010), the broadest, having a methodological approach that allows the inclusion of experimental and non-experimental studies seeking a complete understanding of the phenomenon analyzed. In the context of this work, it is fundamental to gather the available evidence on well-being at work and psychological safety, facilitating the identification of patterns, contradictions and practical implications relevant to the hospital environment.

METHOD

The present study is an integrative literature review, which allows the inclusion of several designs and the understanding of a set of phenomena to be analyzed, namely: well-being at work and psychological safety.

Therefore, for this review, the protocol of Souza et al (2010), which provides for the following steps: elaboration of the guiding question, search or sampling in the literature, data collection, critical analysis of the included studies, discussion of the results and presentation of the integrative review.

To define the research question of the review study, the PICO (Patient/Problem, Intervention, Comparison and Outcome) strategy was used (SANTOS; PEPPER; NOBRE, 2007). Where P (Population) are workers who work in a hospital environment, I (Intervention or Factor of Interest) is well-being at work, C (Comparison) is the absence of psychological safety practices or less psychological support, and O (Outcome) is psychological safety. This methodology allowed for the structuring of the central elements of the investigation in a clear and objective way, guiding the search for relevant scientific evidence and contributing to the systematization of the data collected. Thus, the question remains: is there a relationship between the variables well-being at work and psychological safety in workers who work in a hospital environment?

Continuing with the stages of the study, the second stage was the search in the literature and for this we will use the search for articles in academic databases such as PubMed, Scielo, BVS and Lilacs, using the keywords: "well-being at work" and "psychological safety" and their correlates in English and Spanish that were combined using the Boolean operator AND in all databases. In this search, the banks of theses and dissertations were not considered. Thinking about the topicality and relevance of the topic, studies published between 2014 and 2024 were included.

The search strategy stage took place from May to October 2024 and the inclusion criteria were to be studies that investigated workers in the hospital context, including doctors, nurses, nursing assistants, technicians, and other health professionals, to be free access articles, and to be studies published in the last 10 years (2014-2024) to ensure the relevance and timeliness of the information.

The exclusion criteria were not to relate the constructs in any way, to be paid or incomplete articles, theses and dissertations.

During the initial search process, 2 studies were found in the Scielo database, 20 in Lilacs, 314 in the VHL and 705 in PubMed, totaling 1,041 studies found. The first selection was based on the selection criteria, with the requirement that they be texts that talk about the hospital context, thus leaving 80 articles. The Zotero software was used to analyze the duplicate publications, where we found 13 texts, and these were removed. After reading

the titles and abstracts, 48 studies were selected, proceeding to the full reading of the selected articles, thus leaving 36 studies that partially met the inclusion and exclusion criteria. The selected studies were presented to three judges who removed 16 articles by consensus, leaving 20 studies. This step is a security to avoid selection bias. These studies were reread in full and studies that did not fully meet the inclusion criteria were withdrawn, leaving only 7 articles.

Thus, Figure 1 lists the studies found and selected based on the methodological design.

Figure 1: Flow chart of the selection of studies
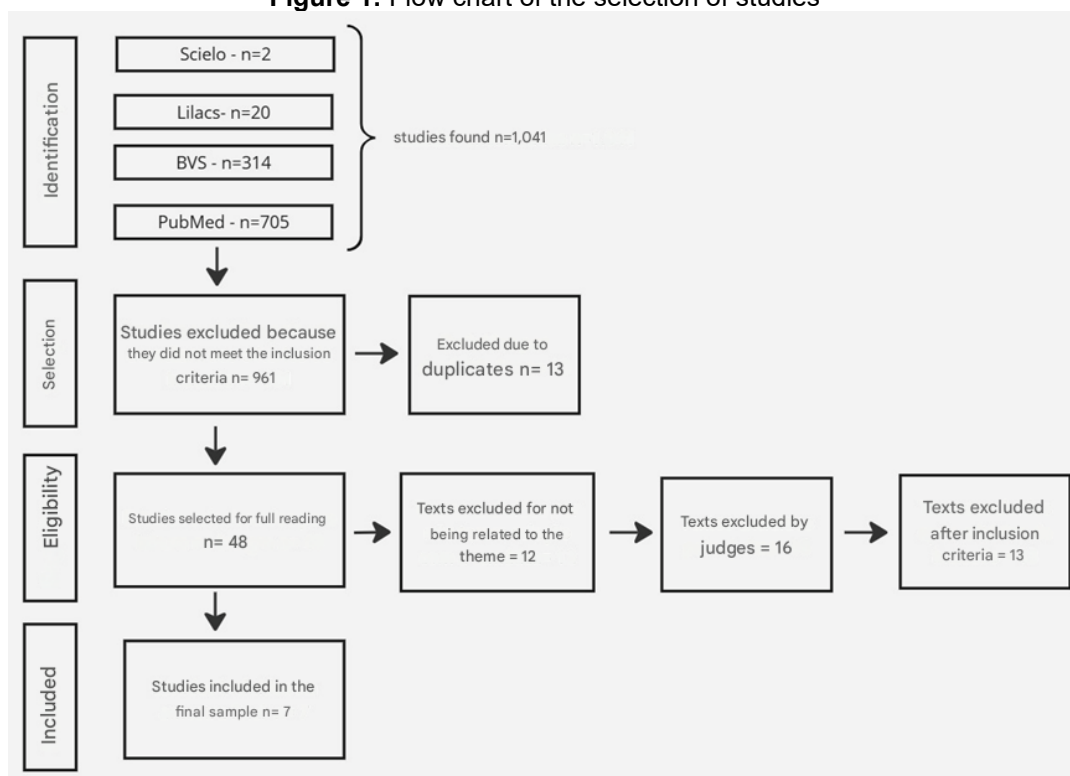
Source: (The authors)

The data from the selected studies were synthesized according to the protocol Souza et al. (2010), enabling a careful extraction of information relevant to the understanding of well-being and psychological safety in the work environment of health professionals. The critical analysis of the data, systematized in Chart 1, was guided by a rigorous approach to the studies. This systematization also provided an integrated view of the evidence, facilitating the identification of patterns and gaps in the literature, promoting a critical reflection on the subject.

Chart 1: Description of the studies selected for review.

Study	Authorship and Year	Title	Study Type	Sample	Country of origin
1	Kahsay et al. 2020	Sexual harassment against female nurses: a systematic review	Systematic review of the literature	20 articles	Iran
2	Wawersik et al. 2023	Individual Characteristics That Promote or Prevent Psychological Safety and Error Reporting in Healthcare: A Systematic Review	Systematic review of the literature	28 items	USA
3	Kirby et al. 2021	COVID-19 and its influences on the nursing team's perception of palliative oncology care.	Qualitative and interpretative study	20 nurses	Brazil
4	Zhao, Ahmed, and Faraz 2020	Caring for the caregiver during COVID-19 outbreak: Does inclusive leadership improve psychological safety and curb psychological distress? A cross-sectional study	Cross-sectional study	451 nurses	China
5	Ojute et al. 2024	Investigating Workplace Support and the Importance of Psychological Safety in General Surgery Residency Training	Multi-method study	Focus group: 28 residents. Questionnaire: 251 residents	California
6	Vera San Juan et al. 2023	Frontline Health Care Workers' Mental Health and Well-Being During the First Year of the COVID-19 Pandemic: Analysis of Interviews and Social Media Data	Cross-sectional study	94 health professionals and 2,000 tweets	United Kingdom
7	Titler et al. 2024	Best time for Registered Nurses' Well-Being in Michigan 2022	Cross-sectional study	7316 nurses	USA

Source: (The authors)

RESULTS

The results of this integrative literature review show a significant methodological diversity, demonstrating the scope of the approaches employed by the researchers. Among the articles analyzed, three were classified as cross-sectional studies, while the others comprise two systematic reviews of the literature, a qualitative study of an interpretative nature, and a multimethod study. In this sense, it is possible to perceive the indication of the need for deepening the issues investigated, so that they can provide a more complex and multifaceted view on the relationship of the themes under analysis.

Regarding geographic distribution, the studies present contributions from different sociocultural and economic contexts. The highest concentration was observed in the United States, where we have two studies representing 28.55%, while Brazil, Iran, China, California, and the United Kingdom were responsible for one study each (14.29%). This diversity of geographic origins may reflect the global nature of the phenomena investigated, reinforcing the relevance of varied contexts for the enrichment of the analyses and pointing to a possible spread of these studies in a greater cultural diversity so that we have more robust evidence on the relationship between the variables well-being and psychological safety.

An important point to highlight is that 42.86% of the articles talk about the period of the COVID-19 pandemic, with studies 3, 4 and 6 being shown in Chart 1, and indicate that the fear of COVID-19 infection and the possibility of transmission to family, colleagues and friends emerged as one of the main concerns of health professionals, profoundly impacting their well-being. We know that this period was very critical for the entire population, but health professionals may have experienced this moment with more intensity. In this context, the protection of the family, both in terms of infection prevention and in terms of financial security, was considered a coping strategy (KIRBY et al., 2021; VERA SAN JUAN et al., 2023; ZHAO; AHMED; FARAZ, 2020).

The data also highlights factors that affect well-being and psychological safety in both positive and negative ways. Elements such as inclusive leadership, teamwork and institutional support programs were explicitly mentioned as promoters of a safer and more welcoming environment in studies 4 and 7. (TITLER et al., 2024; ZHAO; AHMED; FARAZ, 2020). However, issues such as sexual harassment, workplace abuse, emotional overload, and fear of retaliation emerge as significant barriers, contributing to increased rates of burnout, emotional exhaustion, and anxiety in studies 1 and 2. (KAHSAY et al., 2020; WAWERSIK et al., 2023).

The results also reveal the centrality of well-being and psychological safety as fundamental pillars for maintaining mental health and the performance of health professionals in studies 1, 2, 6 and 7. The authors Kirby et al., (2021), in study 3, highlight that spirituality and social support can be used as coping mechanisms for health professionals to deal with the negative impacts of work on mental health.

DISCUSSION

Well-being and psychological safety were widely explored as interdependent elements in all selected studies. Psychological safety, defined as the perception of an environment where individuals feel safe to express concerns and take interpersonal risks, emerges as a crucial factor in strengthening well-being at work. The included studies indicate that organizational environments with inclusive leadership and clear communication promote greater trust and engagement among professionals. (KIRBY et al., 2021; OJUTE et al., 2024; WAWERSIK et al., 2023).

On the other hand, the challenges are equally evident. The high prevalence of sexual harassment and abuse in the workplace, combined with a lack of organizational support, reflects a worrying scenario. Not only do these factors negatively affect well-being at work, but they also create significant barriers to implementing a culture of safety and continuous learning (KAHSAY et al., 2020; OJUTE et al., 2024; WAWERSIK et al., 2023).

As such, healthcare organizations need to implement effective strategies to address these challenges. Inclusive leadership policies, creating anonymous reporting systems, and strengthening psychological support are necessary interventions to mitigate negative impacts and promote a healthier and more collaborative environment. In addition, as stated by OJUTE et al (2024) in their research, it is essential that initiatives such as these are accompanied by a broader cultural change, which values transparency, professional recognition, and mutual care among team members. These issues reinforce the need for coordinated actions that contemplate both the organizational and individual levels, contributing to the development of public policies and institutional practices that ensure a safer, more humane and productive work environment.

As already mentioned in previous studies (CHICKEN; RIBEIRO, 2005; MENDONÇA et al., 2012; PAGE; TAMAYO, 2008), the advancement of research in the area promotes a separation between psychological well-being, which includes self-acceptance and personal development, and subjective well-being, which focuses on life satisfaction and positive and negative affects. Authors such as Albuquerque and Tróccoli, (2004) already signaled that well-being is linked to the scientific study of happiness, emphasizing the development of personal strengths and the search for a satisfying and meaningful life. Therefore, organizations, through their leaders, must prioritize a leadership style that promotes an environment conducive to the well-being of workers, which in turn needs to be safe. According to Edmondson (1999), in his research, teams with high psychological safety

were more likely to admit mistakes, seek feedback, and experiment with new ideas, which led to superior performance and greater innovation.

With this, it is evident that well-being and psychological safety are intrinsically related and essential elements to promote healthy and productive work environments. However, to achieve lasting results, it is imperative that there is a real commitment from managers and a genuine change in organizational culture, where mutual respect, transparency, and learning are an integral part of the teams' routine.

CONCLUSION

This study aimed to identify and synthesize the available scientific evidence on the relationship between well-being and psychological safety in the hospital context.

The results indicated the relevance of well-being and psychological safety as central themes in discussions related to the health of professionals who work in a hospital environment, especially with regard to moments of crisis. Even in the face of a representative percentage of studies within this review, which portray the relationship between well-being and psychological safety in the pandemic period, we have few studies in the literature that address this relationship as far as health professionals are concerned. It is also noteworthy that the same professionals who were on the front line, facing the impacts of the pandemic, and had instability in their mental health, do not appear significantly in the research published on this theme, which leads us to question whether issues such as well-being at work and psychological safety should not be better explored and researched in the hospital context.

The data analyzed show that a significant part of the articles address these concepts, but not always in a direct or explicit way. This observation points to a gap in the literature, where well-being and psychological safety are often treated as secondary or implicit elements in broader studies on mental health, the work environment, and organizational dynamics.

Despite the significant contribution of the reviewed articles, we identified the need for studies that directly explore the interactions between well-being, psychological safety, and organizational practices. Many texts analyzed discuss factors such as burnout, sexual harassment, leadership, and organizational support, but without addressing in an integrated way how these aspects influence the well-being and psychological safety of

health professionals. This fragmentation makes it difficult to understand the impact of these variables on the daily lives of these workers in a broader and more detailed understanding.

Another gap observed refers to the scarcity of studies in the Brazilian context, despite the relevance of the cultural and structural specificities of the country's health system. The revised national studies highlight important aspects, such as spirituality and social support, but there is still room for a more comprehensive and in-depth investigation that contemplates local particularities.

In light of this, it is essential that future research explores the impact of psychological well-being and safety in a more direct and integrated way, broadening the focus to include different cultural, organisational and individual contexts. Longitudinal studies, for example, could provide more robust evidence on how specific interventions, such as inclusive leadership and psychological support programs, affect long-term psychological well-being and safety.

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