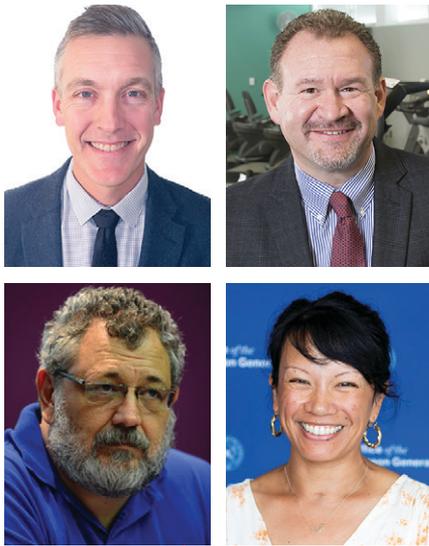


Health Worker Mental Health: Addressing the Current Crisis and Building a Sustainable Future



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The well-being of health workers is essential to provide health promotion, prevention, and care. There is mounting evidence, though, that the well-being of health workers is not being protected as it should be. Surveys have indicated health workers, including clinicians, community health workers, public health workers, mental health workers, emergency medical responders,

long-term care workers, as well as those in support roles, have been experiencing high levels of physical injury, harassment, stress, and burnout. Many such workers shared their intentions to leave their positions or the field altogether. Media reports have described heart-wrenching cases of physicians and nurses who died by suicide, and surveys have indicated unprecedented levels of poor mental health among health workers.

In 2021, the American Rescue Plan funded new research, intervention development, training, education, and dissemination, largely in response to the mental health crisis unfolding due to the COVID-19 pandemic. Since that time, the U.S. Centers for Disease Control and Prevention (CDC), the National Academy of Medicine, the U.S. Surgeon General, organized labor, and numerous other leaders and stakeholders have called for urgent action. This supplement was conceived by the CDC's National Institute for Occupational Safety and Health (NIOSH) to rapidly communicate the latest science guiding the development of responsive mental health and well-being resources for health workers.

Health workers, who already faced difficult and chronically stressful working conditions, experienced profound, negative mental health effects as a result of the pandemic—even more than other

HISTORY CORNER

20 YEARS AGO

Health Care System Changes and Reported Musculoskeletal Disorders Among Registered Nurses

Our survey data from more than 1000 nurses indicate that nurses are experiencing difficult work conditions that have an impact on their health over and above the psychological and physical job demands. . . . We found that health care organizational changes were associated with reported musculoskeletal disorders, even after we controlled for demographics, work characteristics, and psychological and physical job demands. The odds ratios for neck, shoulder, and back musculoskeletal disorders showed a consistent and increasing trend with the level of reported health care system change. The physical workload associated with lifting and transferring patients is responsible for many back musculoskeletal disorders among nurses. However, our findings indicate an association between organizational changes and musculoskeletal disorders that is independent of the effect of physical job demands. . . . [I]f changes in workload and work complexity are not addressed, there may be further negative implications for the health care delivery system and, ultimately, patient care.

From *AJPH*, August 2004, pp. 1433–1434

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essential workers ([Health Workers Face a Mental Health Crisis | VitalSigns | CDC](#)). The connection between mental health outcomes and how work is designed, organized, and managed is becoming increasingly clear. There is a growing body of science supporting the improvement of workplace mental health through healthy work design and systems-level well-being efforts within organizations. This supplement directly contributes to this literature in the context of the health sector.

In this supplement, several contributions explore the theme of *Health Worker Mental Health: Addressing the Current Crisis and Building a Sustainable Future*. The work presented in this supplement covers three main areas of interest: 1) updated data describing concerning trends in the state of health worker mental health and well-being, 2) original research and a systematic review that describe evidence-informed interventions aimed at improving health worker mental health and well-being, and 3) perspectives from organizations that are taking action to make equitable changes at the organization, state, and national levels.

As shown by the articles in this supplement, health workers are continuing to experience crisis-level poor mental health outcomes. However, employers, labor organizations, professional associations, government agencies, and other key players have moved swiftly to take action to improve health worker mental health, through training and treatment approaches that have demonstrated improvements in mental health among health workers. Despite this, there is a need for additional investment in the primary prevention of poor mental health outcomes at the organization and systems levels; most current resources focus on down-stream interventions instead of prevention. This body of work also emphasizes that protecting and supporting health worker mental health

has important implications for the nation's health system and public health infrastructure.

Health workers are vital and resilient, yet sometimes undervalued. Many were struggling long before the onset of the COVID-19 pandemic. This supplement can serve as a critical resource in supporting organizational change and represents one of many essential steps in our country's response to a national call to action to protect the mental health of health workers. **AJPH**

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HISTORY CORNER

60 YEARS AGO

Health Hazards to Health Workers—A Neglected Area

Occupational health has too long been concerned with a limited segment of our employed population, namely, the “industrial” worker. Health hazards to health workers, although significant, are dimly perceived and inadequately studied; the few programs of prevention and control are poor. . . . It would be useful to have morbidity and mortality rates, as well as occupational accident and illness rates for this population, but unfortunately such rates are not available. However, we do not need statistics to show us that workers in the health field do encounter special health hazards directly associated with their work. For most health workers today, the hazards may be less dramatic than several generations ago, when epidemic contagious diseases often took the lives of physicians and nurses who fought them. Certain of the more dramatic risks are still present today, but there are also other much more insidious and less easily identified risks that threaten the physical well-being of health workers. There is reason to suspect that chronic conditions among health workers are often the result of occupational exposure where the relationship to the work environment is not suspected or is difficult to trace.

From *AJPH*, June 1964, p. 1001