SLEEP DEPRIVATION AND TEACHER HEALTH: A STUDY ON QUALITY OF LIFE AT WORK

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ABSTRACT

This study investigates the relationship between sleep quality and well-being among public school teachers. Several factors, such as the work environment, stress, and personal conditions, directly affect the health of teachers, with sleep being a central aspect for physical and mental balance. The study reveals that teachers with better sleep quality tend to have a higher perception of quality of life (QoL) and quality of life at work (QWL), while those with poor sleep demonstrate impairments in both aspects. Sleep deprivation affects several aspects of health, increasing vulnerability to diseases, such as mental and cardiovascular disorders, in addition to impairing performance and physical adaptation. The study, conducted in Passo Fundo, Rio Grande do Sul, used logistic regression analysis, showing that stress increases the chances of poor sleep among teachers by 3.32 times. In addition, those who reported good health are more likely to maintain quality sleep. The research reinforces the need for educational policies to reduce teacher stress, promoting the integral health of these professionals who play an essential role in the formation of society.

Keywords: Sleep quality. Teacher stress. Quality of life at work. Mental disorder.

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INTRODUCTION

The World Health Organization (WHO) defined, in 1946, health as a state of complete physical, mental and social well-being and not just the absence of disease or infirmity. As for the definition of quality of life (QoL), the WHO describes it as the "individual's perception of their position in life, in the context of the culture and value systems in which they live, and in relation to their goals, expectations, standards, and concerns." In relation to sleep, changes in its quality, quantity, and compliance can occur naturally or pathologically, leading to increased mortality, economic losses, and physical and mental impacts (Amaro; Dumith, 2018).

There may be many divergences in the environment, infrastructure, available resources or even the particular daily life of each institution and each teacher who works in it. However, what becomes the same in each of these realities is the importance of teaching as a career, as a relevant part of the life and health of the individual behind it. According to a study carried out with university professors, it is understood that the teaching career is made by effort and commitment, however some of its peculiarities interfere negatively in aspects related to health, with reflection on the quality of life (QoL) and quality of life at work (QWL) of the professor, such as low sleep quality, reduced number of leisure activities, low physical activity index and poor diet, specifically in sleep quality, both in relation to QoL and QoL. The teachers evaluated who reported having very good sleep had a significantly better perception of QoL and QoL, when compared to those who reported having regular or poor sleep quality, as well as those who said they had good sleep quality, presented a significantly better QoL, when compared to those with regular sleep and poor sleep, and sleep quality and quality of life are closely related (Crepaldi and Carvalhais, 2020; Sanchez *et al*., 2019).

Sleep, essential for organic balance, plays an important role in the body's homeostasis. When this regulation is compromised, mental disorders, decreased immunity, reduced physical performance, and adaptation difficulties arise, which increases the body's vulnerability (Quinhones and Gomes, 2011). Good sleep is essential for a healthy life, so it is possible to avoid the emergence of cardiovascular, endocrine, immunological, psychological and cognitive diseases, in addition to increasing life expectancy (Tworoger *et al*., 2003).

Therefore, it is important to investigate the perception of sleep quality in each individual, regardless of their particularities. However, this analysis is even more relevant when applied to education professionals, especially teachers. It is essential to understand whether these professionals are in good or bad health, taking into account the adequacy of

sleep, in terms of quantity and quality. In addition, it is important to recognize their contribution to the formation of citizens and the daily adversities faced, highlighting the human factor behind the profession and the daily consequences of being an educator in Brazil.

In this sense, the objective is to investigate the perception of sleep quality and sociodemographic characteristics, life habits, working conditions and the health status of teachers.

MATERIALS AND METHODS

This is a cross-sectional, descriptive and observational study, with a quantitative approach, carried out in the municipal and state school system in the city of Passo Fundo - RS.

This study is an excerpt from a research project on the theme "Health assessment of teachers in the public school system". Data collection was carried out from 06/01/2019 to 12/15/2019, through the Google *Forms form.* The project was approved by the Ethics Committee for Research with Human Beings of the UFFS, under opinion No. 3.314.996 (CAAE 11528919.0.0000.5564), carried out in accordance with Resolution 466/2012 of the National Health Council.

The initial contact with the school principals was made by telephone, with the aim of explaining the project in detail. Subsequently, face-to-face visits were made to the institutions. However, in some schools, due to the difficulty in scheduling visits, information about the project was provided by telephone, and both the data collection form and the Informed Consent Form (ICF) were sent by e-mail.

Sample size was calculated based on a 95% confidence level, a study power of 80%, an unexposed/exposed ratio of 2:8, an expected outcome prevalence of 30%, and an expected prevalence among the unexposed of 16.7%. Thus, the necessary number of participants was estimated at 376.

The dependent variable used was "How do you consider the quality of your sleep?", evaluated on a scale of 1 to 5, but categorized in a dichotomous way: (a) perception of poor sleep quality with answers 4 (poor) and 5 (very poor) and (b) perception of good sleep quality with answers 1 (excellent; 2 (good) and 3 (regular). The independent variables considered in the study were gender, age, alcohol consumption, smoking, physical activity, health perception, type 2 diabetes mellitus, systemic arterial hypertension (SAH), stress, anxiety, and depression.

The data collected in the survey were exported to the PSPP software (free version) to perform statistical analysis. Absolute and relative frequency distribution tables were elaborated based on the independent variables. To examine the relationship between the dependent variable and the independent variables, binary logistic regressions were performed, including univariate and multivariate analyses. In these analyses, the *Odds Ratio* (OR), the confidence interval (CI) and the chi-square test (p) were calculated. In all tests, an error α of 5% and a 95% confidence interval (95%CI) were considered, and values of $p < 0.05$ were considered statistically significant.

THEORETICAL FRAMEWORK

QUALITY OF LIFE

According to the World Health Organization (WHOQOL Group, 1995), quality of life is defined as the individual's perception of the degree of satisfaction of their needs and the opportunities to achieve happiness and self-fulfillment, regardless of their physical state or socioeconomic conditions. This concept goes beyond physical health and involves emotional, social, and environmental aspects that directly influence the individual's well-being.

The quality of life of the teacher includes physical health, the balance between work, leisure and social relationships. In this sense, Rea and Parker (2014) highlight that these elements are linked to human development, while Nahas *et al.* (2009) argue that the positive balance between health, job satisfaction, the search for leisure and spirituality are essential for teachers to have a satisfactory quality of life.

According to Machado, Andrade and Gurgel (2023), the quality of life of teachers needs more attention, especially in the domains of social relations, environmental conditions and stress. The reduced levels of satisfaction and care with quality of life show the need to rethink public policies for workers' health and the characteristics of the teaching work.

The literature points out that different neuropsychiatric disorders are observed in elementary school teachers, such as: stress, anxiety, depression and *Burnout* syndrome, due to excessive workload, decreased leisure time and social interaction (Krug *et al.,* 2019). From this perspective, Machado, Andrade, and Gurgel (2023) point out that the quality of life of teachers requires greater attention, especially in the domains of social relations, environmental conditions, and stress levels, which indicates the need to rethink public policies aimed at workers' health and the specific conditions of teaching work. Krug *et al.* (2019) argue that the pressure for results and professional overload negatively affect the mental health of teachers, compromising their quality of life and well-being.

Thus, it is important to understand that the quality of life of teachers is related to working conditions and the school environment. Machado, Andrade, and Gurgel (2023) suggest that the implementation of measures that favor work-life balance, as well as the creation of healthier work environments, can have a positive impact on the quality of life of these professionals.

The quality of life of teachers also concerns the quality of their sleep, since sleepless nights can amplify stress and physical and emotional exhaustion, which impairs their professional performance

SLEEP QUALITY

The quality of sleep plays an important role in maintaining wakefulness and the proper functioning of the body. When sleep is compromised, it can result in cognitive, behavioral, and psychomotor changes, in addition to negatively affecting mood and increasing levels of stress, tiredness, and discouragement, which, in turn, compromises the individual's overall health and quality of life (Kim; Tufik; Andersen, 2017).

Araújo *et al.* (2016) and Vale (2011) converge in highlighting the impact of stress on the quality of teachers' sleep, directly affecting their physical and mental health. Araújo *et al.* (2016) underline that stress creates a vicious cycle that compromises the emotional health of teachers, further aggravating stress levels and impairing their quality of life. Similarly, Vale (2011) emphasizes that stress manifests itself in difficulties falling asleep, sleep interruptions and, in prolonged cases, chronic insomnia, which highlights the need for effective stress management strategies to improve sleep and professional performance. Several factors contribute to the spread of this condition, especially affecting educators, who are among the most affected professionals.

The studies by Santos and Vidal (2017) highlight that stress is one of the main health challenges, severely affecting the teaching class, due to the intense dedication to work, often unrecognized, generating negative effects on the quality of teaching, physical and mental health. Similarly, Tostes *et al.* (2018) point out that the devaluation of the role of the teacher, reduced to an instrument for employability, has emptied the meaning of professional practice, harming their health.

STRESSORS

Cabral (2016) highlights that teaching in Basic Education is influenced by several factors that, together, are essential to ensure quality education and contribute to social development. Among these factors are: the number of students per class, the availability of

pedagogical materials, school infrastructure, teaching methodologies, the presence of laboratories and the appreciation of teaching professionals. Each of these aspects has its own meaning and importance, integrating the scenario of a public school suitable for teaching.

Lucena and Freitas (2020) report that the physical structure of the school plays an important role in the well-being of teachers, as pointed out by 6 out of 10 teachers interviewed, who identified the lack of air conditioning and overcrowding of classrooms as the main stress factors. These aspects make the work environment uncomfortable, with temperatures reaching 40°C, which hinders the ability of teachers to teach their classes effectively, controlling the concentration of students, who are also affected by excessive heat. The authors highlight that the emotional challenges faced by teachers are recurrent behaviors, such as student indiscipline, noise, out-of-turn conversations, name-calling, and lack of respect for colleagues and teachers. Added to this is the lack of commitment of students to their subjects and the absence of responsibility of parents in relation to school demands, which intensifies the emotional overload of educators.

These factors, according to Lucena and Freitas (2020), result in a work environment in constant stress. Teachers often feel devalued and held responsible for not being able to meet the numerous demands imposed on them.

IMPLICATIONS OF STRESS IN THE TEACHING-LEARNING PROCESS

Studies show that the school environment contributes to the emergence of occupational stress in teachers, affecting the teaching-learning process. Webber and Vegani (2010) highlight that the lack of structure, class overload and the fatigue generated by the routine cause dissatisfaction, harming health and teaching performance. The physical and emotional exhaustion generated by this tension can lead to the emergence of depressive conditions and feelings of dissatisfaction with one's own work, as added by Batista *et al*. (2016), this scenario is especially worrisome in the educational context, as teachers under constant stress tend to have a reduced performance in the classroom, which can harm the teaching-learning process.

Work overload, combined with stress, can generate physical and emotional symptoms in teachers, as highlighted by Webber and Vegani (2010). The authors mention that problems in the digestive and circulatory systems, as well as tiredness, fear, anger and anxiety, compromise performance in school activities, making it difficult to maintain a balanced life. Lucena and Freitas (2020) add that stress negatively affects teaching and learning, making teachers less effective in the classroom.

STRESS COPING STRATEGIES (COPING)

According to the approach of Folkman and Lazarus (1980), the coping process involves four main characteristics: the constant interaction between the individual and his environment; the focus on managing the stressful situation rather than mastering it; the evaluation of the situation to cognitively interpret and represent its impact on the individual's life; and the mobilization of efforts through cognitive and behavioral actions to manage the internal or external demands that arise in this interaction. Ryan-Wenger (1992) emphasizes that coping strategies are intentional and conscious actions that can be acquired, applied, and abandoned as needed, with the primary goal of working with perceived stress.

In conclusion, it is important to emphasize that the quality of life of teachers is related to their physical, mental and emotional health. When teachers experience high levels of stress and a lack of restful sleep, their emotional and physical capacities are impaired, interfering with the quality of education offered to students.

RESULTS

From the sample data, composed of 225 teachers, 91.1% are female, and 64.4% were in the age group of 31 to 50 years. It was found that 71.1% of the teachers consumed alcoholic beverages occasionally, while the majority (86.7%) stated that they did not smoke. Regarding physical activity, 44.4% practiced it occasionally and 18.2% performed it frequently. With regard to sleep quality, 48.4% of the teachers reported having poor sleep, while 51.6% considered their sleep to be of good quality.

Regarding self-reported health status, 56% of the professors considered their health to be good, 37.3% classified it as regular and 6.7% indicated poor health. In terms of health conditions, 8% of the professors reported having type 2 diabetes *mellitus*, while 25.9% mentioned systemic arterial hypertension. Regarding mental health, the data revealed that 76.4% of the professors had stress, 31.6% reported depression and 64% indicated suffering from anxiety.

The results of the binary logistic regression, when analyzed in univariate terms, indicated statistically significant associations between the variables stress (p=0.001), depression (p=0.006), anxiety (p=0.005), regular practice of physical activity (p=0.017) and the perception of good health (p=0.001). However, in the multivariate analysis, the final model identified two variables as significant predictors of sleep quality: stress (p=0.002) and the perception of good health (p=0.003).

In the univariate analysis, it was observed that teachers who reported stress were 5.06 times more likely to have poor sleep quality compared to teachers who did not report

stress (OR=5.06, 95% CI 2.44 – 10.48, p=0.000). Teachers with depression were 2.23 times more likely to have poor sleep quality than those who did not suffer from depression (OR=2.23, 95% CI 1.25 – 3.97, p=0.006). Similarly, teachers who reported anxiety were 2.24 times more likely to have poor sleep quality compared to those who did not report anxiety (OR=2.24, 95% CI 1.28 – 3.93, p=0.005). The variables regular (always) (OR=0.39, 95% CI 0.18 – 0.85, p=0.017) and occasional (sometimes) (OR=0.53, 95% CI 0.30 – 0.96, p=0.037), as well as good perception of health (OR=0.03, 95% CI 0.18 – 0.85, p=0.017) and regular perception of health (OR=0.14, 95% CI 0.02 – 1.14, p=0.067) were not shown to be predictors of sleep quality. Both had lower odds of influence, with confidence intervals lower than 1, except for the variable regular health perception, which had a confidence interval higher than 1, which suggests that this variable may not be a determining factor for sleep quality.

In the multivariate model, only the stress variable stood out as a significant predictor of sleep quality. Although the variable perceived health had a significant "p" value (0.014), its confidence interval (95% CI 0.01 – 0.58) lower than 1 suggests that it does not have a clear predictive effect on sleep quality. This indicates that stress is the main influential factor in this context. Based on the adjusted values of the multivariate analysis, teachers who reported stress were 3.32 times more likely to have poor sleep quality compared to those who did not report stress. On the other hand, those who indicated a good perception of health were significantly less likely to experience poor sleep quality when compared to those who rated their health as poor.

DISCUSSION

This study aims to explore the perception of sleep quality among participants, revealing that 48.4% of the sample indicated a poor or regular perception of sleep. Comparatively, in a population-based study, Gajardo *et al.* (2021) identified a lower percentage (14.9%) of the Brazilian population reported difficulties with sleep. In another study carried out at a Federal Institution in Bahia, Freitas *et al.* (2021) found a higher prevalence, with 61.3% of participants reporting poor sleep quality. These variations indicate that the perception of sleep quality is influenced by multiple factors, including the geographic context, for example, in regions with less noise pollution, sleep quality may be better; In areas where the population has better socioeconomic conditions with access to quality health services and lower stress index, the perception of sleep quality can be more positive, among others.

In the present study, no association was found between the variable gender and poor sleep quality, despite the predominance of women in the sample (91.1%). Carvalho (2018) had already observed this trend in basic education teachers, with a slight inclination towards gender balance. In another study, Milagres *et al.* (2014) reported a prevalence of 75.3% of female participants. However, Gajardo *et al.* (2013) identified that poor sleep quality was more common among women, with 45.3% reporting poor or regular sleep.

When analyzing the relationship between sleep quality and age group, no statistically significant differences were found. However, most of the study participants were in the age group of 31 to 50 years, representing 64.4% of the sample. According to Carvalho (2018), there is a trend of aging among teachers, with an increase in the percentage of teachers over 50 years old, which went from 15% in 2009 to 21% in 2017. This data reveals that the pace of renewal of the teaching staff has not kept up with the aging of professionals who are approaching retirement.

The prevalence of alcohol consumption among the professionals in this study was 71.1% (occasional consumption), a value significantly higher than that recorded by Santos and Marques (2013) in a survey with 414 municipal teachers in Bagé/RS, where alcohol consumption of 21.6% was observed. It is noteworthy that approximately half of the teachers who reported consuming alcohol also mentioned having poor or regular sleep quality. This data is supported by the literature, which suggests that frequent alcohol consumption or dependence can increase the frequency of nocturnal awakenings and the time to fall asleep, which ends up reducing total sleep time (Garcia and Salloum, 2015).

Smoking among teachers was low, with only 2.7% reporting being smokers and 10.7% indicating that they were former smokers. These numbers are lower than the estimate of the Vigitel Telephone Surveillance Survey (2019), which points out that 9.8% of the Brazilian population is a smoker (Brasil, 2019). Nicotine, being a caffeine-like stimulant, should be avoided to promote good sleep hygiene (Buysse, 2013). In addition, smoking tends to decrease as the level of education increases, which corroborates the percentages observed in the present study.

The practice of physical activity demonstrated a statistically significant association with sleep quality. Among individuals who exercise regularly, the prevalence of poor or regular sleep was 36.6%, increasing to 44.0% among those who exercise occasionally, and reaching 59.5% among those who do not perform any physical activity. These data indicate that the regular practice of physical activity plays a protective role against poor sleep quality. In addition, those who engage in leisure activities also had less negative impact on sleep quality. Buysse (2013) supports this relationship, stating that regular exercise, especially

when performed at least six hours before bedtime, contributes to adequate sleep hygiene.

In the present study, the variable "perception of health" was statistically significant (p=0.001), indicating a relevant association with sleep quality. Of the teachers evaluated, 44% classified their health as regular, bad or very bad. In comparison, a study conducted by Santana and Peixoto (2016) with professors from a federal university in Minas Gerais revealed that 24.5% of the participants did not consider their health to be good. Similarly, Silva and Silva (2013), in a survey of preschool teachers from the municipal and state schools of Pelotas/RS, found that 18.9% of the teachers did not evaluate their health as good, results lower than those observed in the present study. The data also show that the worse the health assessment, the higher the prevalence of poor sleep. Among faculty members who reported having excellent or good health, only 31% indicated a negative perception of their sleep quality. However, this percentage jumped to 66.7% among those who classified their health as regular, and reached 93.3% among those who considered themselves to be in poor or very poor health.

In the present study, SAH had a prevalence of 25.9% among teachers. In comparison, Mota Junior *et al.* (2020) reported a slightly higher prevalence, with 29.3% of teachers reporting the presence of SAH. On the other hand, the study by Amaro and Dumith (2018), carried out with university professors, recorded a lower prevalence of 17.4%. Despite this, SAH was not associated with the perception of sleep quality, since 41.8% of hypertensive teachers reported poor sleep perception, compared to 49.7% among those without the condition, suggesting that other factors may more significantly influence sleep quality in this population, including excessive workload and occupational stress.

Stress was reported by 76.4% of the teachers in this study, and was identified as a factor associated with the perception of sleep quality (p=0.001). In a study conducted by Zille and Cremonezi (2013) in a state public school system in Belo Horizonte/MG, 69.1% of the teachers interviewed also had some degree of stress. The main sources of stress included the students' indiscipline, low pay, fast pace of life, the need to work on Saturdays, lack of time for personal issues, and the overload of simultaneous activities. Similarly, Silva *et al.* (2018) observed that 58% of teachers suffered from stress, attributing it to violence in schools and excessive workload, with many working two shifts or more.

Teaching, especially in the context of Brazilian public education, has become increasingly challenging, facing difficulties such as precarious infrastructure and episodes of school violence, which contributes to increased stress among educators. These conditions directly affect their physical and mental health, compromising their professional and personal performance. However, it is important to consider the specifics of each work environment to avoid generalizing stress as an inherent condition of all educators. Factors such as the perception that teachers have of their responsibilities, the resources and

working conditions available, the ability to adapt to daily challenges and possible changes in work dynamics are essential to determine whether stress will become a constant part of teaching life (Silveira *et al.,* 2014). This highlights the need for an individual approach.

In this study, depression was identified in 31.6% of the teachers, presenting a statistically significant association with the perception of sleep quality (p=0.008). In the literature, however, the rates vary. In a cross-sectional study with elementary and high school teachers in Londrina/PR, the prevalence of depression was 15.4% (Meier, 2016). In the study by Ferreira-Costa and Pedro-Silva (2019), 30.5% of teachers had some degree of depression, evidencing the high prevalence of adverse emotional conditions among educators. Batterham *et al.* (2012) reinforce this relationship, associating sleep disorders with inflammatory factors, anxiety and depression, which corroborates the relevance of these conditions in the lives of teachers.

In this study, 64% of the teachers reported anxiety, and a statistically significant association was observed between this variable and the perception of regular or poor sleep quality (55.6%, p=0.010). In a survey by Meier (2016), 25.1% of public school teachers had anxiety, and among those with poor sleep, the prevalence reached 75%. Another study with early childhood education teachers, from the early years in public schools in Vale do Paraíba/SP, found that 41.9% of teachers manifested some level of anxiety, impairing their educational action and quality of life (Ferreira-Costa and Pedro-Silva, 2019). Anxiety, present in the daily life of any individual, is exacerbated in dynamic environments such as school, where social interactions and demands are intense. In this context, some level of anxiety is expected, but the challenge is to identify more severe conditions that negatively affect the perception of sleep quality and, consequently, the general well-being of teachers.

In the univariate logistic regression analysis, which compared statistically significant variables in isolation, stress was identified as a significant risk factor for poor sleep quality (OR=5.06, p=0.001). The use of sleep medications was also relevant (OR=3.30, p=0.002). In addition, teachers who reported depression had a considerable increase in the chances of having unsatisfactory sleep quality (OR=2.23, p=0.006), as well as those who reported anxiety (OR=2.24, p=0.005). On the other hand, the practice of physical activity (OR=0.39, p=0.017) and positive health perception (OR=0.03, p=0.001) were associated with a lower probability of reporting poor sleep quality, functioning as protective factors. These findings are in line with the study by Gajardo *et al.* (2021), which also identified sedentary behavior as a contributing factor to poor sleep quality, with a prevalence of 17.1% among sedentary individuals, compared to 14.0% among those who exercised regularly (p<0.01). This

reinforces the importance of healthy habits for maintaining good sleep quality, as well as highlighting the negative impact of emotional and mental health factors.

In the multivariate logistic regression analysis, which simultaneously evaluated the dependent variable "sleep quality" in relation to the independent variables, significant associations with poor sleep quality were identified. Stress was one of the variables that remained significant (OR=2.90, p=0.010), evidencing its negative impact. On the other hand, teachers who reported a good perception of health were significantly less likely to have poor sleep (OR=0.07, p=0.014). After adjusting the model, stress continued to stand out as a predictor of sleep quality, with an increase in the odds of poor sleep (OR=3.32, p=0.002). At the same time, those who reported good health were even less likely to have poor sleep quality (OR=0.05, p=0.003). These results corroborate the findings of Vertanen-Greis *et al.* (2020), who also identified stress at work as a significant factor for poor sleep quality (OR=6.53; 95% CI: 4.31−9.90), highlighting the importance of the work environment and perceived health in the well-being of teachers.

The results of this study suggest that teachers in the public school system are vulnerable to factors that compromise sleep quality, such as excessive demands, high work demands, pressures for results and self-demand. These conditions are aggravated by the expectations imposed by society on the role of teachers, increasing physical and emotional exhaustion, harming the well-being of these professionals.

This study has some limitations that should be considered. First, the minimum number of participants was not reached, which may compromise the robustness of the results. In addition, the self-administered nature of the questionnaire may introduce information biases, affecting the accuracy of the responses. The sample may also not be representative of the entire teaching population, which limits the generalization of the findings. It is essential to highlight the relevance of sleep quality for the physical and mental health of teachers, since these professionals often face a stressful work environment, characterized by high demands and emotional challenges. Therefore, the investigation of the relationship between factors such as stress, mental health and sleep quality should be prioritized in future research, aiming to promote the well-being of educators and improve working conditions in the school environment.

CONCLUSIONS

The sample was predominantly composed of female teachers (91.1%), with a mean age between 31 and 50 years (64.4%). Regarding sleep quality, 51.6% considered their sleep good, while 48.4% reported poor sleep quality.

Logistic regression analysis identified that the main factors associated with sleep quality were stress and perceived health. It was observed that teachers with stress are 3.32 times more likely to report poor sleep. Among the participants, 98 teachers with poor sleep also had elevated levels of stress. On the other hand, teachers who rated their health as good were less likely (OR=0.05) to report poor sleep, with 87 participants in this category.

These findings reinforce the need to intensify the development of educational health policies, with a special focus on mental health. Emotional well-being is fundamental for the quality of life of teachers, and also for their performance in the educational environment and in student learning. Unmanaged stress can severely affect mental balance, causing sleep disturbances, as well as physical and mental fatigue.

Therefore, it is essential for educational institutions to implement psychological support programs and promote self-care initiatives, offering resources that help teachers manage stress and improve perception with mental health. The study indicates the need for interventions, focusing on prevention and improvement of working conditions.

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