

International Journal of Health Science

ISSN 2764-0159

vol. 5, n. 32, 2025

... ARTICLE 5

Acceptance date: 06/11/2025

WORK-RELATED MENTAL DISORDERS IN BRAZIL AND BAHIA: TEMPORAL TRENDS IN SINAN NOTIFICATIONS AND INSS LEAVE OF ABSENCE, 2007-2024

Laryssa Andrade da Luz Santos

Marcella Tosta Dias

Ana Flor Teixeira Soares

Rafael Vasconcelos Bispo Costa

Guilherme Rocha Sacramento

Anderson Karllos Silva Araujo de Oliveira

Marcus Vinicius Pinheiro Lopes

Ana Karine Freitas Cintra Carigé

Carla Viana Majdalani de Melo

Elicliede Dias da Silva Porto



All content published in this journal is licensed under the Creative Commons Attribution 4.0 International License (CC BY 4.0).

Abstract: **Introduction:** Work-related mental disorders are an important public health problem, yet they remain largely invisible in Brazilian surveillance systems. **Objective:** To analyze the temporal trend in notifications of work-related mental disorders in Bahia between 2007 and 2025 and compare these data with the number of leaves of absence granted by the INSS during the same period. **Methodology:** Ecological study based on secondary data from the Notifiable Diseases Information System (SINAN) and the National Social Security Institute (INSS). Simple linear regression analysis was performed to assess the trend in annual notifications. **Results:** A statistically significant upward trend in notifications was identified between 2007 and 2024, with an average of 10.2 additional notifications per year ($p < 0.001$). However, in 2024, SINAN recorded only 269 notifications, while INSS granted 14,062 leaves of absence for mental disorders, evidencing a discrepancy and probable structural underreporting. **Conclusions:** The findings reveal an increase in the reporting of work-related mental disorders in Bahia, but also indicate severe underreporting in health surveillance systems. Intersectoral actions are needed to integrate information systems, train professionals, and strengthen mental health surveillance of workers in Brazil.

Keywords: Worker Health. Mental Disorders. Disease Reporting. Health Information Systems. Underreporting .

INTRODUCTION

The contemporary work scenario has been marked by profound changes, resulting in increased pressure for productivity and job instability. Consequently, there has

been a resurgence in the number of mental health disorders among the working population. mental disorders related to work (TMRT) are currently one of the main global public health problems, responsible for significant morbidity, loss of productive years of life (DALYs), and high socioeconomic costs. In Brazil, the situation is no different, where mental illness is among the main causes of work absenteeism (Soares *et al.*, 2025; Ministry of Health, 2025).

In 2024, Brazil recorded a record number of absences, totaling 472,328 medical leaves, an increase of 68% over the previous year, reflecting the scars of the pandemic, changes in the labor market, and worsening psychosocial risks (Costa Júnior *et al.*, 2025; Ministry of Social Security, 2025; Souza, Santana, 2025).

Estimates indicate that 86% of Brazilian workers already face some work-related mental health problem, consolidating mental disorders among the main causes of leave in the country (Creditas Benefícios, 2024; Ferretti, 2024).

Despite the growing prevalence of the issue, the epidemiological landscape of TMRT in Brazil is still underestimated and little visible in official surveillance systems. Cross-referencing between the Notifiable Diseases Information System (SINAN) databases and the records of the National Social Security Institute (INSS) reveal important nuances: while notifications of occupational mental disorders in SINAN are underestimated due to institutional barriers, leave granted by the INSS for diagnoses such as anxiety, depression, and stress disorders has reached unprecedented levels (Machado *et al.*, 2024; Ribeiro, Souza, 2021). This discrepancy highlights systemic limitations in reporting, impacting occupational

health policies and reinforcing the need for coordinated oversight between epidemiological surveillance and social protection.

This gap between social security records (INSS) and health records (SINAN) represents a fundamental challenge for the planning and implementation of effective public policies for the prevention and promotion of workers' health. The discrepancy in reporting is an indicator of "epidemiological blindness" that prevents the adequate allocation of resources and timely intervention by the Reference Centers for Occupational Health (CERESTs).

In this context, the state of Bahia emerges as an important object of study, given its population size and the growing volume of mental illness reported by secondary data, placing the state among the leaders in registrations in the Northeast (DATASUS, 2024; INSS, 2024). Detailed investigation of reporting trends and the contrast with social security leave in the state offers valuable insights into understanding the phenomenon in the Northeast Region.

Despite advances in registration mechanisms, significant challenges remain in adequately characterizing the epidemiological profile, defining the causal link between illness and work, and implementing integrated prevention strategies.

The heterogeneity of employment relationships, underreporting of cases, and barriers to data circulation hinder understanding and delay the adoption of effective measures to promote mental health at work (Machado *et al.*, 2024; Soares *et al.*, 2025). It is therefore essential to map and critically analyze the available evidence on the evolution of leave and notifications for

work-related mental disorders in Brazil and, in particular, in Bahia.

Therefore, the objective of this study was to analyze the temporal trend of notifications of work-related mental disorders in Bahia and Brazil from 2007 to 2024, comparing these data with the leave granted by the INSS for mental disorders in the same period, in order to inform the debate on structural underreporting and planning in Occupational Health.

METHODS

Sample and Type of Study

This is an ecological study of temporal trends, developed with the objective of analyzing the evolution of notifications of work-related mental disorders and temporary disability leave due to mental disorders among workers in the state of Bahia, from January 2007 to December 2024.

To this end, a sample was used consisting of aggregated annual records from two important official databases: the National Notifiable Diseases Information System (SINAN), which collects notifications of mental disorders associated with the work context throughout Bahia, and the National Social Security Institute (INSS), which concentrates information about temporary disability benefits related to mental disorders classified in chapter F of the ICD-10 for insured workers in the state.

Data collection was carried out by extracting public reports available on the official websites of the Ministry of Health (regarding SINAN) and the Ministry of Social Security (regarding the INSS Statistical Panel). The entire extraction process took

place in July 2025, considering only aggregated, consolidated, and officially available records up to December 2024 and, partially, up to September 2025, thus ensuring the timeliness and reliability of the information analyzed in the study.

Research Design

The design of this study followed the standard for ecological time trend studies, using as the unit of analysis population groups aggregated by year, diagnosis, sex, and age group, when this information was available. The main objective was to map patterns and trends in notifications and leaves of absence due to mental disorders over the selected period, using only public, anonymized, and aggregated data.

All SINAN notifications and INSS benefits related to mental disorders (chapter F of ICD-10) registered for residents of Bahia from January 2007 to December 2024 were included in the analysis, considering all genders and age groups that fell under employment or temporary disability due to mental illness. Duplicate, incomplete, or inconsistent records were excluded, as well as cases from locations other than Bahia and benefits or notifications whose main illness did not fall under chapter F of ICD-10.

After organizing the data in spreadsheets (Microsoft Excel®), absolute and relative frequencies were calculated, as well as the distributions of the main diagnoses and sociodemographic profiles. Next, a temporal trend analysis was performed. Simple linear regression was applied to assess the statistical trend of annual SINAN notifications (Brazil and Bahia). The number of notifications was used as the dependent variable, and the time variable (year) as the predictor. The sta-

tistical significance of the trend was verified by the p-value of the angular coefficient (slope), with a p-value <0.05 considered significant. The coefficient of determination (R²) was calculated to measure the proportion of variation explained by the temporal factor.

Ethical Considerations

As it uses only aggregated, public, and anonymized secondary data, the research is exempt from evaluation by the Research Ethics Committee, as provided for in Resolution No. 510/2016 of the National Health Council.

RESULTS

Between 2007 and 2024, Brazil experienced an epidemiological transformation in the field of occupational mental health, evidenced by the exponential growth in TMRT notifications in SINAN, totaling **28,270 cases** recorded in the period.

Analysis of the national historical series revealed a persistent and **statistically significant** upward trend. Simple linear regression showed a positive average trend of **181.2 additional reports per year** ($p<0.001$), with the time factor explaining **71%** of the variance in national records ($R^2=0.71$). The **historical peak** occurred in **2024**, with **4,892 cases** (Figure 1).

Figure 1 illustrates this growth, which accelerated in the post-2020 period. Between 2007 and 2019, the annual average was 1,156 notifications, jumping to 2,846 cases/year in the 2020-2024 period (an increase of 146%).

At the same time, the state of **Bahia** showed progressive growth, with **1,540 cases** recorded in the period and a peak of **269**

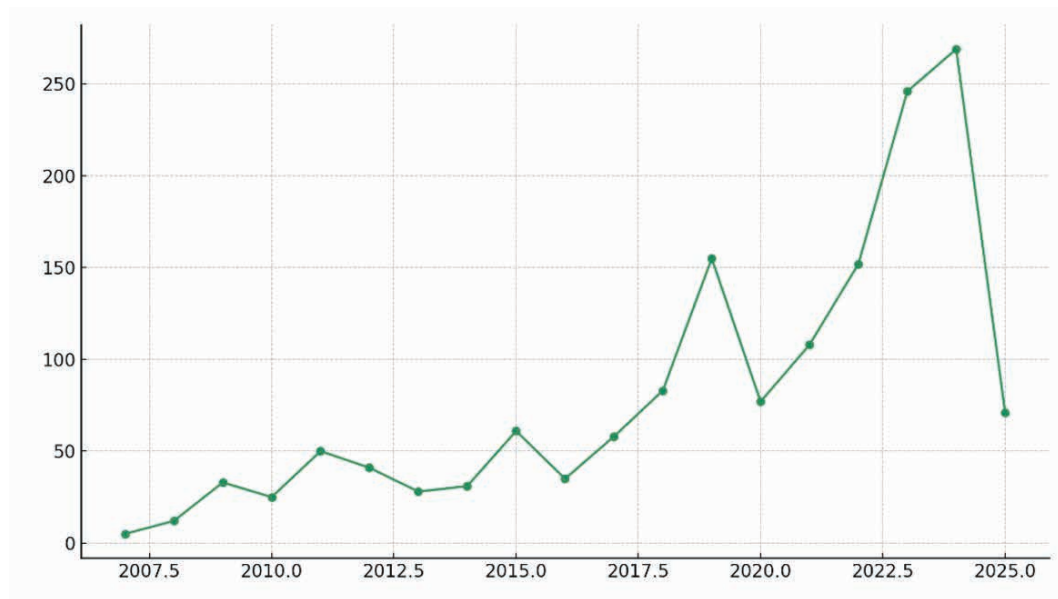


Figure 1: Temporal evolution of notifications of work-related mental disorders in Bahia (2007–2024), according to SINAN.

Source: Own elaboration with data from SINAN (2025).

Year	TMRT Notifications (Brazil)
2007	122
2008	189
2009	361
2010	407
2011	713
2012	674
2013	723
2014	891
2015	1,189
2016	1,456
2017	1,921
2018	1,816
2019	2,379
2020	1,351
2021	1,869
2022	2,572
2023	3,843
2024	4,892
2025 (Partial)	881

Table 1: Temporal Evolution of TMRT Notifications (SINAN - Brazil, 2007–2025)

Source: Own elaboration based on SINAN data, (2024).

Category (ICD-10)	Cases	%
F40-F48 (Neurotic, stress-related, and somatoform disorders)	14,120	49.9
F30-F39 (Mood/affective disorders)	5,913	20.9
Z73.0 (Burnout/Exhaustion Syndrome)	1,923	6.8
ICD not active	2,923	10.3
Other categories	3,391	12.1
Total	28,270	100.0

Table 2. Distribution of notifications of Work-Related Mental Disorders (WRMD) by diagnostic category (ICD-10) in Brazil, 2007–2024.

Source: Own elaboration with data from SINAN (2025)

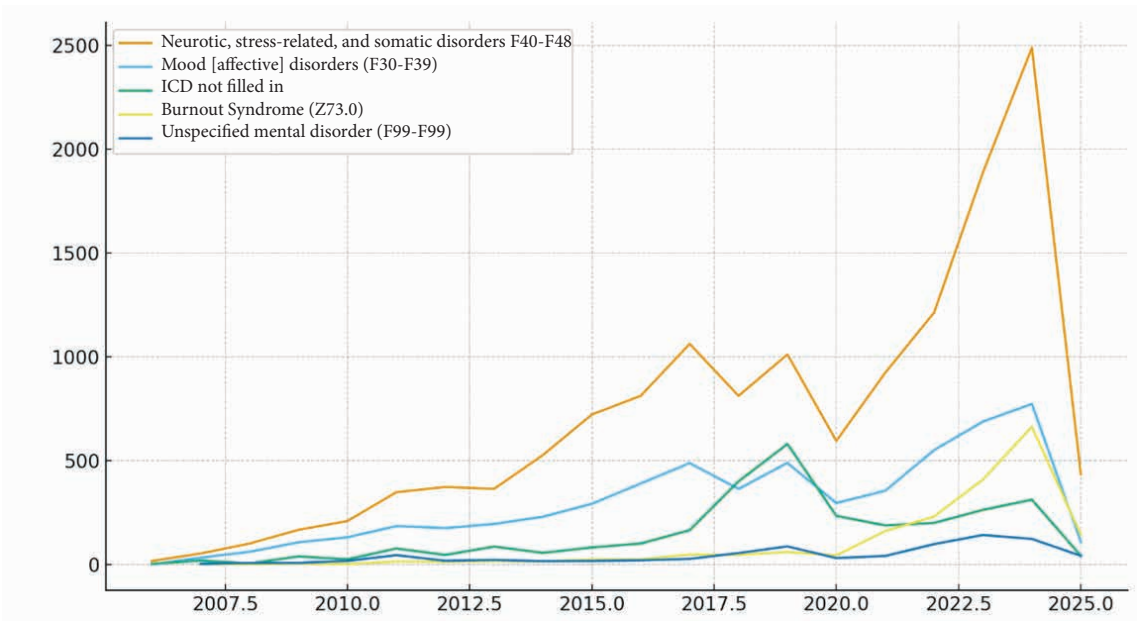


Figure 2: Evolution of the main categories of work-related mental disorders in Brazil (2007-2025)

Source: Own elaboration based on SINAN data (2024).

Indicator	Brazil	Bahia	BA/BR Participation
Total notifications	28,270	1,540	5.4
Annual peak (2024)	4,892	269	5.5
Annual average 2006-2019	1,156	62	5.4
Annual average 2020-2024	2,846	154	5.4
Growth 2020-2024 vs. 2006-2019	+146	+148	-

Table 2. Comparative analysis of notifications between Brazil and Bahia (2007-2025)

Source: Own elaboration with data from SINAN (2025).

cases in 2024. The simple linear regression for the state revealed a positive average trend of **10.2 additional notifications per year** ($p=0.0001$), with the time factor explaining **59%** of the variation in records ($R^2=0.59$).

The comparative performance between Bahia and Brazil is detailed in **Table 1**, showing that Bahia's share in the national scenario remained stable at around **5.4%**, indicating that state growth proportionally followed the national trend.

National growth reveals a persistent upward trend, with a particularly sharp increase in the post-2020 period. Between 2007 and 2019, the annual average was 1,156 notifications, while in the 2020-2024 period, this average jumped to 2,846 cases/year, representing an increase of 146%. The peak in 2024 (4,892 cases) represents a 29% increase compared to 2023, highlighting the intensification of the problem in the post-pandemic context.

Analysis of diagnostic categories in the 2007-2025 period reveals a significant concentration in specific disorders (Table 1):

Analysis of diagnostic categories in the period 2007–2024 reveals a concentration of specific disorders in the national scenario. (Table 2)

The F40-F48 group (Neurotic, Stress-Related Disorders) led with 49.9% of cases, followed by F30-F39 (Mood/Affective Disorders) with 20.9%. Burnout Syndrome (Z73.0) accounted for 6.8% of national cases. The evolution of the main diagnostic categories over the historical series is illustrated in Figure 2.

It is crucial to highlight that 10.3% of national notifications were classified as “ICD not active” or had errors in their com-

pletion, highlighting a limitation in data quality.

In Bahia, the profile of illness due to social security leave (INSS) in 2024 corroborates the weight of mental conditions, with the five main categories accounting for more than 85% of leaves (Table 2). Anxiety disorders (F41) led the benefits granted, with 32.1% of cases, followed by depressive episodes (F32), with 23.6%.

The annual growth in Bahia reveals a persistent upward trend, with an increase of 365% between 2017 (58 cases) and 2024 (269 cases).

The peaks observed in 2019, 2023, and 2024 follow the national pattern and indicate critical moments of intensification in notifications, possibly related to the worsening of psychosocial conditions at work, the expansion of occupational health surveillance, or greater professional and institutional awareness of the issue.

Bahia's share of the national total remained stable at around 5.4%, indicating that the state's growth is in line with the national trend. The temporal distribution in Bahia shows that, in the last three years alone (2022 to 2024), there were specifications exceeding 43% of all notifications for the entire period, reinforcing the emerging nature of the issue at both the state and national levels.

The magnitude of underreporting of work-related mental disorders in Bahia. In 2024, for each formal notification registered in SINAN, more than 50 benefits were granted by the INSS. This ratio (52.3:1) suggests the existence of a hidden volume of cases that, although recognized in the social security sphere, are not registered as work-

-related injuries in the health surveillance system (Table 3).

Extrapolating this ratio to the national scenario, where 4,892 notifications were recorded in SINAN in 2024, it is estimated that the actual number of leaves of absence due to work-related mental disorders in Brazil may have exceeded 255,000 cases in the same year, highlighting the continental scale of underreporting. (Figure 4).

Simple linear regression revealed a positive average orientation of 181.2 reports per year (p -value < 0.001), with a significant update in the post-2020 period. The coefficient of dependence ($R^2 = 0.71$) suggests that the time factor explains 71% of the variance in national records.

Simple linear regression revealed a positive average trend of 10.2 notifications per year (p -value = 0.0001). The coefficient of determination ($R^2 = 0.59$) suggests that the temporal factor explains 59% of the variation in state records, although institutional, social, and economic factors also exert a decisive influence.

This pattern reinforces the hypotheses of a changing epidemiological scenario both nationally and regionally, providing greater visibility and recognition of occupational mental disorders as a public health problem.

In Bahia, the National Social Security Institute (INSS) granted 14,062 benefits for mental disorders in 2024 alone. This number is more than 50 times higher than the number of notifications recorded by SINAN in the same year (269 cases), highlighting a serious and systematic gap between health records and social security reality.

Together, the five main categories accounted for more than 85% of leaves of absence, corroborating the growing weight of mental health conditions in the contemporary occupational illness profile and aligning with the national profile observed in SINAN.

DISCUSSION

The results of this study show a growing and statistically significant trend in reports of work-related mental disorders in Bahia between 2007 and 2025, with a significant increase since 2018. Linear regression analysis revealed an average slope of 10.2 additional reports per year ($p < 0.001$), suggesting a systematic increase in the institutional visibility of work-related mental suffering. This growth is in line with the national trend, where the peak in 2024 (4,892, d cases) reinforces the urgency of the issue. (Santos *et al.*, 2024) contextualize the urgency of this problem by pointing out that Brazil ranks second worldwide in cases of burnout, highlighting the global importance of mental health in the Brazilian workplace.

This upward trend can be interpreted from two complementary perspectives: on the one hand, a progressive improvement in reporting mechanisms and greater awareness of mental health at work; on the other, a real deterioration in working conditions. The intensification of production demands, the precariousness of employment in the post-labor reform context, and the increase in informality constitute a hostile occupational scenario.

The 146% increase in the annual average number of notifications in the post-2020 period (compared to 2007-2019) suggests that the health and economic cri-

Indicator	2024
Notifications (SINAN)	269
Leave of absence (INSS)	14,062
INSS/SINAN ratio	52.3:1

Table 3. Comparison between the number of notifications of mental disorders in SINAN and leave granted by the INSS in Bahia in 2024

Source: Own elaboration with data from SINAN and INSS (2024).

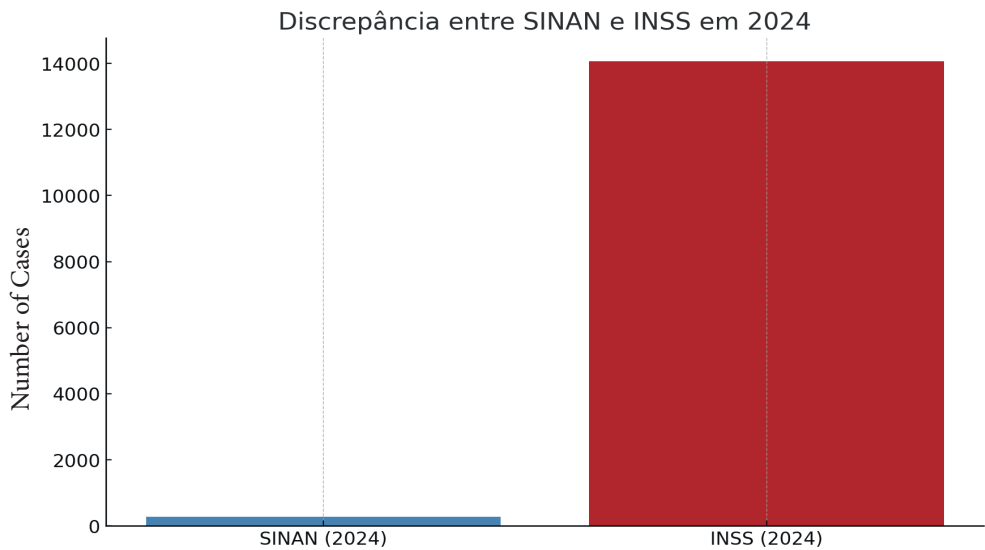


Figure 4. Discrepancy between notifications of work-related mental disorders in SINAN and leaves granted by INSS in Bahia in 2024.

Source: Own elaboration based on data from SINAN and INSS (2024).

ICD-10	Diagnosis	Number of Cases	%
F41	Anxiety disorders	4,517	32.1
F32	Depressive episodes	3,313	23.6
F33	Recurrent depressive disorder	1,701	12.1
F31	Bipolar affective disorder	1,494	10.6
F20	Schizophrenia	998	7.1
Other	Other categories	2,039	14.5
Total		14,062	100.0%

Table 4: Main diagnoses of mental disorders associated with leave of absence by the INSS in Bahia in 2024

Source: Own elaboration based on INSS data (2024).

ses have amplified work-related stressors, culminating in an intensification of the associated psychological distress. However, when comparing SINAN data with INSS leave records, a massive structural discrepancy stands out, which is the central finding of this study.

In 2024, the number of social security benefits granted for mental disorders exceeded the number of formal notifications in the surveillance system by more than 50 times. The ratio of 52.3:1 represents not only a statistical gap, but also a political and epistemological chasm between the recognition of the condition by the social security system and its registration by health surveillance.

This dramatic disparity is corroborated by Ribeiro *et al.* (2024), who document the rapid growth of leave due to professional exhaustion, and Teófilo Filho *et al.* (2023), who point to a fragmented structure of information systems. Analysis of the diagnostic profile (Table 2) indicates that neurotic conditions and mood disorders (F40-F48 and F30-F39) account for more than 70% of notifications in Brazil, with Burnout Syndrome (Z73.0) accounting for 6.8% of cases. It is important to note the consistency with the profile of INSS leave in Bahia (Table 4), where Anxiety Disorders (F41) and Depressive Episodes (F32) lead. This concentration reinforces the impact of psychosocial factors at work.

However, the robustness of this analysis is compromised by the high rate of inactive/unfilled ICDs (10.3%), a finding that prevents the accurate identification of the morbidity burden, as also indicated by Morais *et al.* (2025) when analyzing national data from SINAN. The data on failure to complete the ICD, an indicator of poor data quality, is a direct manifestation of the

lack of technical preparation and low value placed on reporting.

In addition to interinstitutional fragmentation, several factors contribute to the phenomenon of underreporting. Bailo (2024) reinforces the need for more refined interpretations that go beyond purely numerical logic and consider the limitations of administrative records. The absence of clear protocols for establishing causal links, the technical unpreparedness of professionals in primary care and occupational health services, and the persistence of social stigma surrounding mental suffering in the workplace are operational and cultural barriers.

Workers, for fear of retaliation or dismissal, often omit the causal relationship, resulting in the registration of a common, rather than occupational, disease in SINAN. Added to this scenario is an institutional logic that operates according to a technical rationality, detached from the reality experienced by workers. As argued by Dejours (2015) and authors who interpret him in the field of psychodynamics of work (Lancman; Uchida, 2021), the contemporary organization of work tends to individualize suffering, silencing the collective and structural determinants of illness.

This tendency prevents the formal recognition of the connections between mental suffering and working conditions, even when there is a clear loss of functional capacity attested to by the INSS. From an epidemiological point of view, this invisibility compromises the production of reliable situational diagnoses and distorts the formulation of evidence-based public policies.

Instead of acting as an active surveillance tool, SINAN ends up operating with low sensitivity, which limits its useful-

ness in identifying vulnerable groups, monitoring trends, and planning intersectoral actions. The graphical analysis presented in this study, which contrasts the notification curve with INSS data, highlights this disconnect and reinforces the urgency of restructuring the health information system. In political-institutional terms, the maintenance of fragmented systems fuels structural negligence.

As argued by Costa Júnior *et al.* (2025), mental health still occupies a marginal position in occupational health surveillance and is often ignored in local and national plans, which hinders the implementation of protection and remediation actions. The research by Silva *et al.* (2024) adds a qualitative dimension to the debate by identifying, in the perception of notifiers, that the low number of records is directly related to a lack of knowledge of the flows and the low institutional value placed on notification, converging with the finding of numerical discrepancy. Given this scenario, it is urgent to promote structural and operational changes.

Technological integration between the SINAN and INSS systems, with interoperability and automated cross-referencing of anonymized data, is a fundamental step toward correcting systemic flaws. It is imperative to address the cultural and institutional barriers that render occupational mental disorders invisible, through coordinated actions between the fields of health, labor, social security, and justice, including the restructuring of the Reference Centers for Occupational Health (CERESTs) and the enhancement of the strategic role of reporting as a tool for social care and protection.

As suggested by Soares *et al.* (2025) when discussing strategies for effectiveness

in the workplace. Among the limitations of this study is the use of secondary databases from systems with different objectives and methodologies, which affects the direct comparability between records.

The ecological nature of the analysis prevents individual inferences or direct causalities. Nevertheless, the robustness of the identified trend, combined with the magnitude of the discrepancy observed between the SINAN and INSS data, validates the argument that there is structural underreporting and a serious compromise in the surveillance of work-related mental disorders.

CONCLUSION

It is concluded that there is a growing and statistically significant trend in the reporting of work-related mental disorders in the Bahia State Health Network (Bahia), especially since 2018, which may indicate both greater institutional recognition of the problem and worsening working conditions. However, the significant discrepancy between SINAN records and leave granted by the INSS reveals a scenario of structural and persistent underreporting.

This mismatch compromises the health surveillance system's ability to reflect the reality of mental illness at work and to guide public policies consistent with the magnitude of the problem. Thus, despite the advances observed in reporting, the data analyzed reinforce the need for integration between information systems, professional training, and addressing the institutional and cultural barriers that hinder the formal recognition of occupational mental disorders.

REFERENCES

- ASSUNÇÃO, AA *et al.* Transtornos mentais em trabalhadores de hospitais gerais no Brasil. *Cadernos de Saúde Pública*, Rio de Janeiro, v. 11, e00024317, 2017. DOI: 10.1590/0102-311X00024317.
- BAILO, CA Aspectos epidemiológicos dos transtornos mentais relacionados ao trabalho no Brasil, 2013-2023: uma análise da base de dados do SINAN. *Revista de Direito do Trabalho e Proteção Social*, v. 2, pág. 89-108, 2024. Disponível em: <https://revitardp.org.br/revista/article/view/695>. Acesso em: 3 out. 2025.
- CORREIO 24 HORAS. Afastamentos de trabalho por doenças mentais aumentam 200% na Bahia em dez anos. Salvador, 25 set. 2024. Disponível em: <https://www.correio24horas.com.br/asteriscao/afastamentos-de-trabalho-por-doencas-mentais-aumentam-200-na-bahia-em-dez-anos-0925>. Acesso em: 3 out. 2025.
- COSTA JÚNIOR, VA *et al.* Saúde mental no trabalho: desafios e disciplinas. *Revista Brasileira de Implantologia e Ciências da Saúde*, v. 7, n. 2, pág. e5187, 2025. DOI: 10.36557/2674-8169.2025v7n2p01-15. Disponível em: <https://bjih.emnuvens.com.br/bjih/article/view/5187>. Acesso em: 3 out. 2025.
- DEJOURS, C. A loucura do trabalho: estudo de psicopatologia do trabalho. 6. ed. São Paulo: Cortez, 2015.
- GIGLOBO. Crise de saúde mental: o Brasil tem maior número de afastamentos por ansiedade e depressão em 10 anos. Rio de Janeiro, 10 mar. 2025. Disponível em: <https://g1.globo.com/trabalho-e-carreira/noticia/2025/03/10/crise-de-saude-mental-brasil-tem-maior-numero-de-afastamentos-por-ansiedade-e-depressao-em-10-anos.ghtml>. Acesso em: 3 out. 2025.
- JORNAL DA USP. Afastamento do trabalho por transtornos mentais cresce 68% no Brasil. São Paulo, 2 abr. 2025. Disponível em: <https://jornal.usp.br/campus-ribeirao-preto/afastamento-do-trabalho-por-transtornos-mentais-cresce-68-no-brasil/>. Acesso em: 3 out. 2025.
- LANCMAN, S.; UCHIDA, S. Trabalho e subjetividade: o olhar da psicodinâmica do trabalho. *Cadernos de Psicologia Social do Trabalho*, São Paulo, v. 6, p. 79-90, 2021. DOI: 10.11606/issn.1981-0490.v6i0p79-90.
- MINISTÉRIO DA PREVIDÊNCIA SOCIAL. Painéis Estatísticos da Previdência Social - Saúde e Segurança do Trabalhador. Brasília: MPS, 2025. Disponível em: <https://www.gov.br/previdencia/pt-br/assuntos/estatisticas-da-previdencia>. Acesso em: 3 out. 2025.
- MINISTÉRIO DA SAÚDE. Saúde Mental em Dados - Edição nº 13. Brasília: MS, fev. 2025. Disponível em: <https://www.gov.br/saude/pt-br/assuntos/saude-de-aaz/s/saude-mental/saude-mental-em-dados/saude-mental-em-dados-edicao-no-13-fevereiro-de-2025/view>. Acesso em: 3 out. 2025.
- MORAIS, LS *et al.* Perfil epidemiológico de trabalhadores com transtornos mentais relacionados ao trabalho no Brasil: análise de dados do SINAN 2019-2023. *Revista Eletrônica Acervo Saúde*, v. 25, p. e19095, 2025. DOI: 10.25248/reas.e19095.2025. Disponível em: <https://acervomais.com.br/index.php/saude/article/view/19095>. Acesso em: 3 out. 2025.
- OCAMPOS, M. *et al.* Prevalência de síndrome de burnout em profissionais de saúde de Mato Grosso: análise epidemiológica 2007-2023. *Revista Brasileira de Implantologia e Ciências da Saúde*, v. 7, n. 3, pág. e5267, 2025. DOI: 10.36557/2674-8169.2025v7n3p01-18.

ONU BRASIL. Brasil: Afastamentos por problemas de saúde mental aumentam 134%. Brasília, 16 abr. 2025. Disponível em: <https://brasil.un.org/pt-br/292926-brasil-afastamentos-por-problemas-de-sa%C3%BA-de-mental-aumentam-134> . Acesso em: 3 out. 2025.

RIBEIRO, AC *et al.* Epidemia de burnout no Brasil: análise dos afastamentos por esgotamento profissional 2014-2024. Agência Brasil , Brasília, 21 atrás. 2024. Disponível em: <https://agenciabrasil.ebc.com.br/radioagencia-nacional/saude/audio/2024-08/afastamento-por-sindrome-de-burnout-cresceu-1000-em-relacao-2014> . Acesso em: 3 out. 2025.

SANTOS, PR *et al.* O Brasil é o segundo país com mais casos de Burnout e só perde para o Japão. Instituto de Psicologia da USP , São Paulo, 22 set. 2024. Disponível em: <https://www.ip.usp.br/site/noticia/brasil-eo-segundo-pais-com-mais-casos-de-burnout-e-so-perde-para-o-japao/> . Acesso em: 3 out. 2025.

SILVA, MA *et al.* Efeitos combinados de gênero, raça e estressores ocupacionais na saúde mental de trabalhadores baianos. Revista Brasileira de Saúde Ocupacional , São Paulo, v. 49, p. 1-15, 2024. DOI: 10.1590/2317-6369000001324.

SISTEMA DE INFORMAÇÃO DE AGRAVOS DE NOTIFICAÇÃO - SINAN. Notificações de transtornos mentais relacionados ao trabalho - Brasil e Bahia, 2006-2025. Brasília: Ministério da Saúde, 2025.

SOARES, LM *et al.* Saúde mental no ambiente de trabalho: estratégias corporativas e evidências de efetividade. Revista JRG de Estudos Acadêmicos , v. 18, pág. e082139, 2025. DOI: 10.55892/jrg.v8i18.2139. Disponível em: <https://revistajrg.com/index.php/jrg/article/view/2139> . Acesso em: 3 out. 2025.

TEÓFILO FILHO, A. *et al.* Estudo epidemiológico dos casos de transtornos mentais relacionados ao trabalho notificado no SINAN, Brasil, 2011-2020. Revista Lato , Sensu , v. 2, pág. 42-58, 2023. Disponível em: <https://periodicos.newsciencepubl.com/LEV/article/download/3219/3979/12443> . Acesso em: 3 out. 2025.