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# PSYCHOSOCIAL RISK FACTORS IN THE HEALTH SECTOR AND PSYCHOLOGICAL DEMANDS, SOCIAL SUPPORT AND LEADERSHIP

# FACTORES DE RIESGO PSICOSOCIAL EN EL SECTOR SALUD Y EXIGENCIAS PSICOLÓGICAS, APOYO SOCIAL Y LIDERAZGO

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## Psychosocial Risk Factors in the Health Sector and Psychological Demands, Social Support and Leadership

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#### **ABSTRACT**

**Introduction:** The increasing complexity and demands of the work environment in the health sector have placed psychosocial risk factors as one of the main concerns for the health and well-being of health workers. These risks, defined as those elements present in the organization, the content and the performance of the work that can negatively affect the physical and mental health of employees. **Objective:** The main objective is to carry out a theoretical sweep of the psychosocial risk factors that affect health workers at a national and international level. **Methodology:** The methodology of the article is based on a qualitative approach with bibliographic review and documentary analysis. Heuristics are used to discover and compile documents related to psychosocial risk factors in the health sector, especially in Colombia, and hermeneutics is used to interpret existing texts and research in order to understand the variables involved. **Results:** It is evident that health sector workers are chronically exposed to psychosocial risk factors, especially high psychological demands, low social support and poor quality of leadership. It was identified that these factors generate a high risk for the mental and physical health of healthcare personnel, manifesting in symptoms such as emotional exhaustion, digestive disorders, insomnia, muscle tension and emotional exhaustion.

**Keywords:** psychosocial risk factors, social support, work stress, mental health, working conditions

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# Factores de Riesgo Psicosocial en el Sector Salud y Exigencias Psicológicas, Apoyo Social y Liderazgo

#### **RESUMEN**

Introducción: La creciente complejidad y las demandas del entorno laboral en el sector salud han situado a los factores de riesgo psicosocial como una de las principales preocupaciones para la salud y el bienestar de los trabajadores sanitarios. Estos riesgos, definidos como aquellos elementos presentes en la organización, el contenido y la realización del trabajo que pueden afectar negativamente la salud física y mental de los empleados. **Objetivo:** El objetivo principal es realizar un barrido teórico sobre los factores de riesgo psicosocial que afectan a los trabajadores de la salud a nivel nacional e internacional **Metodología:** La metodología del artículo se basa en un enfoque cualitativo con revisión bibliográfica y análisis documental. Se utiliza la heurística para descubrir y recopilar documentos relacionados con los factores de riesgo psicosocial en el sector salud, especialmente en Colombia, y la hermenéutica para interpretar los textos e investigaciones existentes con el fin de comprender las variables implicadas. **Resultados:** Se evidencian que los trabajadores del sector salud están expuestos de manera crónica a factores de riesgo psicosocial, especialmente a altas exigencias psicológicas, bajo apoyo social y deficiente calidad de liderazgo. Se identificó que estos factores generan un alto riesgo para la salud mental y física del personal sanitario, manifestándose en síntomas como desgaste emocional, trastornos digestivos, insomnio, tensiones musculares y agotamiento emocional.

**Palabras Claves:** factores de riesgo psicosocial, apoyo social, estrés laboral, salud mental, condiciones laborales





#### INTRODUCTION

Exposure to psychosocial risk factors in the health sector represents a growing challenge for the health and well-being of health workers, who daily face high psychological demands, little social support, and challenges related to institutional leadership. These factors not only affect the mental and physical health of staff, but also affect the quality of care provided to patients and organizational efficiency. In a context where work overload, emotional pressure and adverse working conditions are common, it is essential to analyze how psychological demands, social support and leadership style influence the perception and impact of these psychosocial risks.

This research project aims to carry out an exhaustive review of national and international literature to identify and understand the main psychosocial risk factors present in the health sector, as well as their relationship with psychological demands, social support and leadership. Based on this analysis, we seek to provide a theoretical framework that will guide future prevention and intervention strategies, promoting healthy work environments that favor the comprehensive well-being of workers and, therefore, the quality of service in health-providing entities.

The health sector is characterized by being a highly demanding work environment, where workers constantly face psychosocial risk factors that can affect their physical and mental health. Among these factors, the psychological demands of direct patient care stand out, the quality of social support received by colleagues and superiors, as well as the leadership style present in the institutions. These elements, when unfavorable, increase the probability of the appearance of work stress, emotional exhaustion and other disorders that impact not only the well-being of the staff, but also the quality of the service provided.

The purpose of this research article is to carry out an exhaustive review of national and international literature to identify and analyze the main psychosocial risk factors that affect health sector personnel. Special attention is paid to the interaction between psychological demands, social support and leadership, fundamental elements that influence the mental health and work-related well-being of these workers. Through this analysis, we seek to build a solid theoretical framework that allows us to understand the complex dynamics of these factors and serve as a basis for the design of effective prevention and intervention strategies. The final objective is to promote healthy work environments





that promote the comprehensive well-being of workers and contribute to the continuous improvement of the quality of service in health-providing entities, in a context where work overload, stress and adverse psychosocial conditions are determining factors in occupational health.

#### **Background**

The background on psychosocial risk factors in the health sector shows that workers in this area are chronically exposed to risks related to psychological demands, social support and the quality of leadership. Research carried out in public hospitals has identified that these factors represent a high risk for the mental and physical health of healthcare personnel, manifesting in symptoms such as emotional exhaustion, digestive disorders, insomnia and muscle tension.

Studies in different countries, such as Chile, Spain and Mexico, agree that work overload, stress, job dissatisfaction and poor leadership contribute significantly to psychophysiological discomfort and work accidents.

In Colombia, it has been documented that factors such as work overload, work pace, insecurity, lack of social support, poor communication and the absence of professional growth opportunities negatively affect the health and performance of health personnel.

In addition, the importance of current regulations is recognized, such as Resolution 2646 of 2008, which establishes obligations for the prevention, diagnosis and monitoring of these psychosocial risks in the workplace.

These antecedents underline the need to guide employers and design effective strategies to improve safety, work coexistence and the comprehensive well-being of workers in the health sector, thus guaranteeing better-quality in-patient care.

It is recognized that psychosocial risk factors have a negative impact on the emotional, cognitive, behavioral and physiological health of workers, producing stress responses and associated diseases such as anxiety, depression, cardiovascular and musculoskeletal disorders.

Furthermore, the theoretical framework highlights the importance of addressing these risks from a systemic approach that considers the interaction between the individual, the job and the work environment.



Regarding psychological demands, high quantitative and emotional demands, the need to hide emotions, role conflict and poor relationships with superiors and colleagues are mentioned, which increase psychosocial risk and affect mental health. Social support and leadership are key protective factors that can mitigate these risks, improving the well-being and job satisfaction of healthcare professionals.

The background of the article includes studies and reviews that show the prevalence of these factors in the health sector, especially in healthcare areas, where work overload and intense work pace are predominant. Interpersonal conflicts, lack of clarity in tasks, job insecurity and violence in the work environment are also reported, which contribute to deterioration of health and increased absenteeism and staff turnover.

In summary, the theoretical framework and background of the article are based on the identification and analysis of psychosocial factors that affect health workers, with emphasis on psychological demands, social support and leadership as fundamental elements to understand and address psychosocial risks in this sector.

The historical background on psychological demands in the health sector dates back to the evolution of health psychology, which emerged mainly in the 1970s as a response to the need to overcome the traditional biomedical model focused exclusively on disease. This new approach incorporates a more comprehensive perspective, considering psychological and social factors that affect health and the health-disease process.

In particular, health psychology developed in the United States in the 1970s, with specific academic programs and discussions at the American Psychological Association that promoted the study of psychosocial factors related to health. At the same time, in Latin America, the discipline was consolidating since the late 1960s, with a preventive and social focus that included primary care and the integration of psychologists at various levels of the health system.

Psychological demands in the health sector are linked to the high emotional and cognitive demand faced by professionals, including stress management, conflict management, intense workload and the need to hide emotions, factors that have been recognized as psychosocial risks that affect the mental and physical health of healthcare personnel.



Furthermore, psychosomatic medicine, developed in the 1940s, is an important antecedent that related stress to the appearance and aggravation of physical illnesses, laying the foundations for health psychology to focus on the study of stress and its effects in the health sector.

The historical background shows that psychological demands in the health sector have been studied from a perspective that integrates biopsychosocial factors, with a growing emphasis on prevention and social support, recognizing the complexity of the health work environment and the emotional and cognitive demands faced by its workers.

The biopsychosocial model, proposed by George L. Engel in 1977, played a fundamental role in the development of health psychology and related disciplines by offering a comprehensive vision of the health-disease process. This model surpassed the traditional biomedical approach, which was reductionist and focused exclusively on the biological aspects of the disease, by also incorporating the psychological and social factors that influence a person's health.

Engel proposed that health and illness cannot be understood only from biology, but are the result of the dynamic interaction between biological (genetics, physiological processes), psychological (emotions, behaviors, thoughts) and social (social context, interpersonal relationships, socioeconomic conditions) factors. This allowed a more holistic and human approach, considering the patient not only as an object of study, but as an active subject in their health and disease process.

In clinical practice and research, the biopsychosocial model has promoted interdisciplinary integration between doctors, psychologists, social workers and other professionals, facilitating more complete and personalized interventions that address both physical symptoms and the emotional and social factors that affect the patient. In addition, it has influenced the development of health policies that recognize the importance of these multiple factors for comprehensive well-being.

In summary, the biopsychosocial model was key to the development of health psychology and related disciplines, by offering a theoretical framework that understands health as a complex and multifactorial phenomenon, surpassing the traditional biomedical view and promoting a comprehensive and humanistic approach to health care.

These risks are associated with consequences such as work stress, burnout syndrome, psychosomatic disorders, anxiety, depression, absenteeism and decreased professional performance. In specific services





such as dialysis, ICU and sterilization, high risks are observed in esteem, social support and psychological demands.

In summary, the most frequent psychosocial risks in the health sector combine high work demands, lack of control and support, and difficulties in reconciling personal life, which negatively impacts the health and performance of workers.

Poor change management negatively influences the mental health of healthcare personnel by generating uncertainty, stress and a feeling of lack of control over their work environment. When organizational changes are implemented without clear communication, without staff participation and without adequate support, psychological demands increase and the perception of security and autonomy is reduced, causing anxiety, frustration and emotional exhaustion.

During crisis situations, such as the COVID-19 pandemic, the rapid need to adapt to new skills, protocols and working conditions without adequate support exacerbated these effects, increasing stress, mental fatigue, anxiety and depression among healthcare workers. The lack of reliable information and the fear of contagion, added to the feeling of abandonment by the administration, intensified the emotional burden and the deterioration of mental health.

On the other hand, the absence of committed leadership and policies that integrate mental health in change management makes it difficult to create a conducive work environment, affecting the motivation and well-being of staff. The WHO highlights that to improve mental health at work, the participation of workers in decisions, investment in resources and the integration of mental health into organizational policies are essential, aspects that are often missing in poor change management.

In summary, poor change management in the health sector generates a direct impact on the mental health of health personnel, manifesting itself in chronic stress, anxiety, depression and exhaustion, which affects both their personal well-being and the quality of the care provided.

#### **METHODOLOGY**

The methodology is documentary type, based on the review and analysis of scientific and technical literature on the subject, without the application of direct quantitative or qualitative instruments to a specific sample of health workers. The approach is systemic, considering the interaction between individual, work and environment.





The article uses a theoretical review or literary review methodology. Its main objective is to carry out a theoretical sweep of the psychosocial risk factors that affect health sector workers both nationally and internationally.

The information collected is used to carry out an epidemiological analysis that allows determining risk-protection profiles by area within health organizations. The need to have updated sociodemographic data and the application of psychometric and clinical instruments by experts to evaluate individual factors is emphasized.

#### RESULTS AND DISCUSSIONS

Health sector workers are chronically exposed to psychosocial risk factors, the most prominent being psychological demands, low social support and quality of leadership; it was identified that insufficient compensation or payments also constitute a determining risk factor.

Prolonged exposure to these risks generates negative consequences on both the mental and physical health of workers, increasing the prevalence of diseases such as anxiety, depression, hypertension, heart attacks and other psychosomatic disorders.

Specific factors that affect health professionals include: work overload, high work pace, long hours, poor safety conditions (especially in emergency services), poor clarity in activities, mismatch between demands and rewards, lack of growth opportunities, poor communication and frequent organizational changes without prior notice.

Insufficient leadership and social support are related to greater psychosocial risk, affecting the work environment and employees' ability to cope with stress.

High psychological demands at work, such as excessive workload, intense pace and emotional involvement, generate stress when they exceed the worker's ability to cope with them, which can lead to mental health problems such as exhaustion, anxiety, depression and even suicidal thoughts. These conditions also affect physical health, increasing the risk of cardiovascular disease and musculoskeletal disorders.

On the other hand, social support from both management and colleagues acts as a protective factor that can mitigate the negative effects of psychological demands and other psychosocial risks. Lack of



social support is associated with greater work stress and psychological distress, while good social support and quality leadership contribute to reducing stress and improving workers' mental well-being. Together, psychological demands and social support significantly influence the mental health of workers, and can explain up to 30% of psychological discomfort when they act in combination. Therefore, work environments that balance demands with social support and effective leadership favor mental health and work performance, while the absence of these elements increases the risk of mental disorders and deterioration in the quality of work life.

Contradictory demands at work, that is, receiving instructions or expectations that contradict each other or that generate confusion about functions, negatively affect the mental health of workers because they generate constant stress and tension. This lack of clarity and coherence in job demands makes it difficult for employees to adequately carry out their tasks, which increases the feeling of frustration, insecurity and psychological exhaustion.

These types of conflicting demands are considered an important psychosocial risk, since they contribute to chronic work stress, which can lead to mental health problems such as anxiety, depression, emotional exhaustion and even suicidal intentions. In addition, the prolonged stress associated with these conditions can also affect physical health, increasing the risk of cardiovascular diseases and musculoskeletal disorders.

In the organizational context, conflicting demands affect performance, increase absenteeism and staff turnover, and can generate a conflictive and unhealthy work environment. Therefore, it is essential that organizations promote clear, coherent and participatory work management to minimize these risks and protect the mental health of their workers.

Job insecurity directly influences anxiety levels because it generates a constant feeling of vulnerability and fear of losing your job, which causes emotional distress and chronic stress. This uncertainty about job stability affects mental health by increasing concern about the economic and professional future, generating symptoms such as irritability, difficulty concentrating, fatigue, sleeping problems and a feeling of being overwhelmed.

Additionally, job insecurity can decrease confidence in oneself and the work environment, contributing to a cycle of anxiety that affects job performance and personal satisfaction. This situation





can lead to social isolation at work, reduced productivity and a negative impact on quality of life both inside and outside the workplace.

In summary, job insecurity is a psychosocial factor that significantly increases job anxiety, affecting both the mental health and general well-being of the worker. Therefore, it is essential to have work environments that provide stability, social support and adequate leadership to mitigate these negative effects.

Job insecurity influences physical symptoms such as fatigue and insomnia through chronic stress generated by uncertainty about job stability. This prolonged stress produces physical and mental exhaustion known as work fatigue or burnout, which manifests itself in emotional exhaustion, persistent tiredness, sleeping difficulties and physical problems such as headaches and muscle tension. Work fatigue is closely related to sleep disorders, including insomnia, since stress and overload hinder the quality of rest and destabilize circadian rhythms. Studies show a strong correlation between fatigue and sleep disorders, indicating that the greater the fatigue reported, the greater the severity of problems such as insomnia. This cycle of fatigue and poor sleep compromises a worker's ability to manage stress, further affecting their mental and physical health.

Additionally, job insecurity can increase muscle tension, blood pressure, and heart rate, contributing to the appearance of stress-related physical symptoms. Therefore, job insecurity not only affects emotionally, but also triggers a set of physical symptoms that deteriorate the worker's general health. In summary, job insecurity generates chronic stress that causes fatigue and sleep disorders such as insomnia, affecting both the mental and physical health of workers, and creating a negative cycle that impacts their well-being and work performance.

Stress due to job insecurity affects the quality of sleep mainly because it generates anxiety and high emotional and physiological activation that makes it difficult to fall asleep and maintain a deep and restorative rest1. The constant worry about job stability causes intrusive thoughts and greater activation of the nervous system, which delays the onset of sleep and fragments the deep and REM sleep phases, essential for physical and mental recovery.

This chronic stress also activates the hypothalamic-pituitary-adrenal (HPA) axis, increasing the secretion of cortisol, the so-called "stress hormone," which disrupts circadian rhythms and contributes





to poor sleep quality. Lack of sleep, in turn, increases sensitivity to stress, creating a vicious circle where stress due to job insecurity and insomnia feed on each other, progressively worsening mental and physical health.

Furthermore, poor sleep quality resulting from work stress affects concentration, mood, decision-making ability, and increases irritability, which negatively impacts both work performance and overall quality of life.

In summary, job insecurity generates sustained stress that alters the physiological and emotional processes necessary for adequate sleep, causing insomnia and a significant deterioration in the quality of rest and the worker's mental health.

Job insecurity affects long-term mental health, generating chronic stress that can lead to problems such as anxiety, depression, emotional exhaustion (burnout) and low motivation. This prolonged stress arises from uncertainty about job stability, fear of dismissal and lack of recognition, which creates an unfavorable work environment marked by work overload, lack of support and interpersonal conflicts. On a psychological level, job insecurity increases the incidence of mental disorders such as anxiety and depression, also affecting self-esteem and the ability to face work and personal situations. Furthermore, the persistence of these psychosocial factors deteriorates quality of life, generates job dissatisfaction and can lead to a burnout syndrome that significantly reduces performance and productivity.

Physically, the stress associated with job insecurity can manifest itself in symptoms such as muscle tension, increased blood pressure, cardiovascular problems and sleep disorders, which in turn aggravate emotional and mental discomfort.

Finally, job insecurity also negatively impacts the organizational environment, increasing absenteeism, staff turnover and decreasing commitment and innovation, which affects both the worker and the company in the long term.

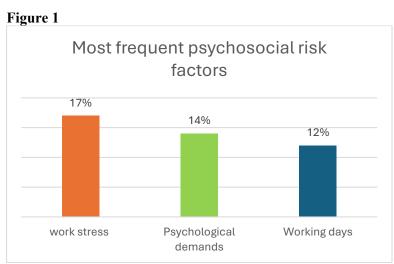
In summary, job insecurity generates a cycle of chronic stress that affects the mental and physical health of the worker, deteriorates their well-being and performance, and can trigger severe psychological disorders if these psychosocial risks are not adequately managed.



The percentages of psychosocial risk factors in the health sector vary according to different studies and contexts, but the following relevant data can be highlighted:

In Colombia, it is reported that two out of every three workers in the health sector are exposed to psychosocial risk factors during their work day, and between 20% and 33% report feeling high levels of stress

A study in Bogotá found that the most frequent psychosocial risk factors in the health sector are work stress (17%), psychological demands (14%), work hours and days (12%) and work overload (15%).



Fountain: Pabon, H. (2025)

In Chile, 50% of the health worker population reports negative psychosocial risk factors, related to simultaneous activities, lack of breaks, overload and responsibility for personal safety, which causes emotional exhaustion.

In Venezuela, a study reported that 70% of health sector workers are at a level of psychosocial exposure unfavorable to health, due to the speed of work, decisions under stress and constant pressure. In a highly complex pediatric hospital in Chile, 34% of workers presented high levels of distress, 23% had depressive symptoms, and these results were associated in 48% with low decisional latitude, 41% with low social support and 67% with the imbalance between effort and reward.

In summary, psychosocial risk factors affect a significant percentage of health sector workers, with exposure levels ranging between 50% and 70% in some studies, and with work stress, psychological demands and overload being the most prevalent. This shows the need for interventions aimed at improving working conditions and mental well-being in this sector.





The variation in the percentages of psychosocial risks in the health sector between different countries reflects differences in the working, cultural and regulatory conditions of each region:

In Europe, more than 57% of companies in the health sector report the presence of relational conflicts with patients or users, and 42.5% acknowledge being exposed to psychosocial risk factors such as time pressure and interpersonal conflicts. In Nordic countries such as Sweden and Denmark, the perception of these risks is greater, with 37-38% of workplaces identifying them as significant challenges

In Latin America, the percentages tend to be higher. For example, in Venezuela 70% of workers in the health sector are at an unfavorable level of psychosocial exposure, due to the speed of work, pressure and constant stress. In Chile, 50% of the health worker population reports negative psychosocial risk factors related to overload and simultaneous activities.

In Colombia, psychosocial risk factors occupy a prominent place, with studies showing that two out of every three workers in the health sector are exposed to these risks, and 20-33% report high levels of work stress. Furthermore, exposure to psychosocial risks has increased in recent years, with an increase in the recognition of work-related mental disorders such as anxiety and depression.

In Spain, where the concept of psychosocial risk and occupational health originated, several studies have been published that also show the relevance of stress and other psychosocial factors in healthcare personnel, although with somewhat lower percentages compared to Latin America.

In summary, although psychosocial risk factors are present in the health sector globally, their prevalence and perception vary: in Europe they tend to be around 40-60% in different dimensions, with variations depending on the country and size of the organization; In Latin America, the percentages tend to be higher, reaching up to 70% unfavorable exposure in some countries, reflecting more adverse working conditions and higher levels of stress.

These differences underline the importance of adapting prevention and intervention strategies to the specific contexts of each country and organization to improve occupational health in the health sector. Psychosocial risk factors at work are present worldwide, but their prevalence and recognition vary by country and work context:

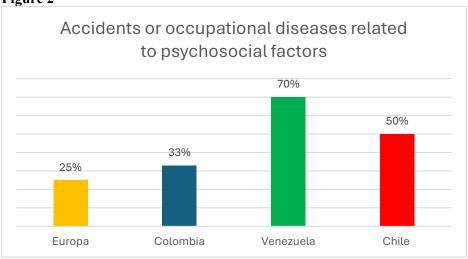
Globally, it is estimated that almost three million people suffer work-related accidents or illnesses related to psychosocial factors, including work-related stress, anxiety and depression.





In Europe, approximately 25% of workers report experiencing work-related stress, and a similar percentage indicate that their jobs negatively affect their health. In some European countries, such as Sweden and Denmark, up to 37-38% of workplaces identify psychosocial risks as a major challenge. In Latin America, the percentages tend to be higher. For example, in Colombia, two out of three health sector workers are exposed to psychosocial risk factors, with between 20% and 33% reporting high levels of work stress. In Venezuela, 70% of health sector workers have unfavorable levels of psychosocial exposure. In Chile, nearly 50% of health workers report negative psychosocial factors related to overload and simultaneity of activities.

Figure 2



Fountain: Pabon, H. (2025)

In general, the most common psychosocial risk factors include work overload, high work pace, job insecurity, lack of social support, poor leadership, and working conditions that generate emotional and physical stress.

In summary, the countries with higher levels of exposure to psychosocial risks in the health sector tend to be those with more adverse working conditions and less regulation or application of occupational health policies, mainly in Latin America, where exposure can reach up to 70%. In Europe, although it is also a relevant problem, the percentages are usually lower, around 25-40%, depending on the country and sector.

These differences reflect the need to adapt prevention and promotion strategies for occupational mental health to the specific contexts of each country and region.



High psychological demands at work, such as excessive workload, intense pace and emotional involvement, are recognized psychosocial risk factors that can exceed the worker's coping capacity. When this occurs, work stress is generated, which in turn can lead to mental health problems, including emotional exhaustion, anxiety, depression and even suicidal thoughts. In addition to the effects on mental health, these conditions also negatively affect physical health, increasing the risk of cardiovascular diseases and musculoskeletal disorders.

Social support in the work environment, both from management and colleagues, acts as a key protective factor against psychosocial risks. Lack of social support is associated with a higher level of stress and psychological distress, while a work environment with good social support and quality leadership contributes to reducing stress and improving the mental well-being of workers. Positive leadership and peer support can mitigate the negative effects of psychological demands, promoting resilience and job satisfaction.

Social support in the work environment, both from management and colleagues, is a fundamental protective factor against psychosocial risks. The absence of this support is linked to higher levels of stress and psychological distress, while an environment with good social support and quality leadership contributes to reducing stress and improving the mental well-being of workers.

Positive leadership and peer support can mitigate the negative effects of psychological demands, promoting resilience and increasing job satisfaction. This is especially relevant in sectors such as health, where work stress can be high and social support becomes a key resource for mental health and work performance.

#### **CONCLUSIONS**

The conclusions of the article "Psychosocial risk factors in the health sector and psychological demands, social support and leadership" are the following:

Psychosocial risks in the health sector are a set of factors that interact between the individual and the job, affecting the mental and physical health of workers, and are associated with pathologies such as anxiety, depression, hypertension and cardiovascular diseases.



In the health sector, especially in healthcare areas, factors such as work overload, accelerated work pace, long hours, high emotional demands, lack of social support and poor leadership predominate, which generate chronic stress and psychological discomfort.

The lack of social support and quality leadership increases the negative effects of psychological demands, while positive leadership and support from colleagues can mitigate these impacts, promoting resilience and job satisfaction.

The implementation of prevention, intervention and continuous monitoring policies is recommended to reduce exposure to these risks, promoting healthy and safe work environments that protect the physical and mental integrity of health sector workers.

Evidence shows that chronic exposure to these factors affects not only the health of workers, but also the productivity and quality of service in health institutions.

In summary, the article concludes that psychosocial factors in the health sector represent a significant risk to the mental and physical health of workers, and that social support and effective leadership are key to mitigating these risks and improving workplace well-being.

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