



iJERResearch

International Journal of Education and Research

Vol. 1, Number 2, September - 2026 | Peer-Reviewed Journal

ISSN 2764-9733 | ijerresearch.org

DOI: 10.5281/zenodo.23062217

THE MENTAL HEALTH OF EARLY CHILDHOOD EDUCATION TEACHERS: PSYCHOLOGICAL DISTRESS, WORKING CONDITIONS, AND INSTITUTIONAL POLICIES

AUTHOR

Alaide Palagano Ferreira: Master's degree holder and doctoral candidate in Education Sciences at UNIDA University, Paraguay; Director of Education and Training at APROMAM, Mauá, São Paulo, Brazil; Municipal Education Supervisor in Mauá, São Paulo, Brazil; Coordinator and Professor at the University Center of Mauá (UNI-FAMA), São Paulo, Brazil.

Contact: alaidepalagano@hotmail.com

ABSTRACT

This article analyzes the mental health of Early Childhood Education teachers from a critical, broad, and intersectoral perspective. Drawing on authors such as Ferreira, Freud, Campos, and Viegas, as well as the DSM-5-TR, it examines teachers' psychological distress not as an individual pathology, but as a legitimate expression of the structural and institutional tensions that permeate pedagogical work. This qualitative literature review identified three central categories: a broad conception of mental health; working conditions as factors contributing to illness; and the inadequacy of public care policies. The findings showed that teachers' psychological distress is associated with work intensification, emotional overload, loss of autonomy, and the absence of permanent institutional spaces for listening and support. The study also highlights the precarious nature of government policies addressing teachers' emotional health, which are characterized by isolated, informational, and nonpreventive initiatives. It concludes that ensuring educators' mental health is a collective responsibility, requires integrated and continuous policies, and is indispensable to the quality of public education. Caring for teachers means caring for education.

Keywords: Mental Health. Early Childhood Education. Psychological Distress. Teaching Work. Public Policies.

INTRODUCTION

Mental health has become a central issue in discussions about the well-being of education professionals, particularly in the context of public Early Childhood Education. This stage requires teachers to possess not only cognitive skills, but also an intense affective and physical commitment, making them particularly vulnerable to adverse conditions in the school environment. The COVID-19 pandemic further exposed these professionals' emotional vulnerabilities, underscoring the urgent need to understand and promote mental health in educational settings.

According to the World Health Organization (WHO, 2022), mental health is a state of well-being in which individuals recognize their abilities, cope with the normal stresses of life, work productively, and contribute to their communities. However, this broad definition faces challenges in everyday school life, where teachers frequently encounter exhausting work schedules, a lack of institutional support, and multiple emotional demands.

As early as 1930, Freud (2021 [1930]) warned that psychological suffering is an unavoidable part of social life, especially when the demands of work and culture conflict with individual desires and needs. Complementing this perspective, Ferreira (2021) distinguishes psychological distress from mental illness, emphasizing that the former is a natural and legitimate response to adverse conditions, whereas the latter indicates more severe impairment of emotional health.

This article aims to analyze the definition and importance of mental health in educational settings, especially with regard to teachers in public Early Childhood Education. It seeks to understand the effects of working conditions on these professionals' mental health and to discuss the need for institutional policies that promote teacher care and well-being.

METHODOLOGY

This study is characterized as qualitative, bibliographic, and exploratory research that seeks to understand and analyze conceptions of and impacts on mental health in the context of teachers working in public Early Childhood Education. The choice of a qualitative approach is justified by the need to investigate subjective, social, and institutional aspects related to these professionals' psychological distress and emotional health.

The research corpus consisted of secondary sources selected according to criteria of thematic relevance, currency, and contribution to understanding the object of study. Books, scientific articles, official World Health Organization documents (WHO, 2022), and classic works such as Freud (2021 [1930]) were analyzed. The time frame encompassed publications from 2021 to 2024, ensuring that the discussion remained current.

The sources were selected from recognized academic databases, including SciELO, Google Scholar, and institutional repositories, using keywords related to mental health, psychological distress, early childhood education, teaching work, and public policies. Sources that were strictly clinical or focused exclusively on individual treatments were excluded in order to prioritize a sociopsychological and institutional perspective.

Content Analysis based on Farias Filho and Arruda Filho (2013) was used to analyze the bibliographic data. This methodology enabled an in-depth understanding of the multiple dimensions of mental health in the school environment by connecting the subjective aspects of psychological distress with the structural conditions of teaching work and institutional responses.

PRESENTATION AND DISCUSSION OF RESULTS

The analysis of the selected bibliographic material identified three central categories for addressing the mental health of Early Childhood Education teachers: (1) a broad conception of mental health; (2) working conditions and teachers' psychological distress; and (3) the inadequacy of institutional policies for care and emotional support.

A broad conception of mental health

The World Health Organization (WHO, 2022) defines mental health as a state of well-being that extends beyond the mere absence of mental disorders and encompasses an individual's ability to recognize their own potential, cope with the stresses of everyday life, carry out activities productively, and participate in community life. This conception expands the traditional understanding of mental health, which is often associated with the presence or absence of illness, by recognizing that psychological well-being is also related to the social, relational, and environmental conditions in which an individual lives.

From this perspective, mental health should be understood as a multidimensional phenomenon involving emotional, cognitive, social, and relational aspects. It is therefore not a permanent state of happiness or an absence of conflict, but a condition that enables individuals to develop resources for coping with different life situations and to maintain their participation in personal, social, and professional activities (WHO, 2022). This understanding is especially important when analyzing workers' mental health because the work environment and working conditions are significant dimensions of everyday life.

Ferreira (2021) complements this understanding by emphasizing that mental health involves emotional and cognitive balance, allowing individuals to recognize their own abilities and face the challenges encountered throughout their lives. This balance, however, does not mean the absence of difficulties, conflicts, or negative emotions. Suffering is part of the human experience and may arise in response to adverse situations, changes, losses, interpersonal conflicts, or circumstances that, at a particular moment, exceed the resources available for coping. It is therefore necessary to distinguish experiences of psychological distress from the existence of a mental disorder itself (Ferreira, 2021).

This distinction is essential because not every manifestation of emotional distress constitutes an illness or mental disorder. Feelings such as sadness, fear, worry, anxiety, and stress may be part of normal human responses to difficult events. Clinical understanding requires consideration of the intensity and persistence of these manifestations, as well as their effects on an individual's functioning and on the different contexts in which that person lives (APA, 2022).

In this regard, the DSM-5-TR - Diagnostic and Statistical Manual of Mental Disorders, Text Revision - helps distinguish expected emotional manifestations from conditions that may constitute mental disorders. The manual establishes specific diagnostic criteria and considers, among other factors, the presence of clinically significant distress or impairment in social, occupational, or other important areas of functioning (APA, 2022). Thus, identifying isolated symptoms is not sufficient to characterize a mental disorder; a professional evaluation considering the full set of manifestations is required.

Considering context is also essential to understanding experiences related to mental health. Individuals do not experience emotions in isolation, but in constant interaction with their social, family, professional, and cultural realities. Accordingly, conflict, overload, instability, relational difficulties, or adverse conditions may affect psychological well-being, although it is not appropriate to establish an automatic causal relationship between a particular external condition and the

development of a mental disorder (WHO, 2022; APA, 2022).

This understanding becomes particularly relevant when examining the professional context of teaching. A teacher's work involves various dimensions beyond the performance of pedagogical activities. Teachers maintain ongoing relationships with children, families, colleagues, and administrators; plan instruction; monitor learning processes; manage conflict situations; and respond to institutional and social demands. In Early Childhood Education, these demands are also associated with the specific characteristics of working with young children, which simultaneously involves education, care, supervision, and relationship building.

Thus, the concrete conditions under which work is performed may contribute to teachers' experiences of well-being or distress. Activity overload, institutional demands, structural difficulties, conflict in professional relationships, insufficient resources, lack of recognition, and pressure to meet multiple demands may create tension in everyday professional life. This does not mean that these factors, in isolation, cause mental illness, but it does recognize that working conditions form part of the context in which experiences of health, distress, and illness may develop (WHO, 2022; Ferreira, 2021).

Along these lines, Ferreira (2021) emphasizes the importance of considering social and institutional aspects when seeking to understand mental health. Psychological distress should not be analyzed exclusively as an individual difficulty because it may be related to an individual's experiences in different spheres of participation. In the professional context, this perspective makes it possible to understand that caring for workers' mental health cannot be reduced to the individual responsibility of developing strategies to endure pressure or adversity.

It is therefore important to distinguish among mental health, psychological distress, and mental disorder. Mental health refers to a broad condition of well-being and capacity to function; psychological distress concerns experiences of emotional pain, discomfort, anguish, or difficulty coping that may occur at different moments in life; and a mental disorder corresponds to a clinical condition that must be identified through assessment and specific diagnostic criteria (WHO, 2022; Ferreira, 2021; APA, 2022).

This distinction is especially important in studies investigating teachers' health because reports of anxiety, stress, sadness, sleep disturbances, feelings of exhaustion, or psychosomatic manifestations are not, by themselves, sufficient to establish the existence of a mental disorder. Such manifestations must be understood by considering their frequency, intensity, duration, context, and possible effects on the individual's personal and professional life (APA, 2022).

At the same time, recognizing that particular distress does not necessarily correspond to a clinical diagnosis does not mean minimizing its importance. Psychological distress may compromise quality of life, interpersonal relationships, professional performance, and perceived well-being, and may indicate a need for compassionate reception, listening, and support. Care initiatives therefore need not depend on the existence of a diagnosis, because promoting mental health also involves prevention, support, and improvements in living and working conditions (WHO, 2022; Ferreira, 2021).

This approach also makes it possible to question excessively individualizing perspectives on teachers' distress. Although personal coping resources are important, they do not replace the responsibility of institutions and public policies to create conditions favorable to mental health. Promoting mental health at work requires attention to professional relationships, the organization of activities, worker participation, material conditions, professional recognition, and the availability of institutional spaces for dialogue and support (WHO, 2022).

In educational settings, promoting mental health therefore means going beyond isolated measures directed at individual teachers. The organization of work and the conditions under which teaching is

performed must be considered. Creating professional environments that foster respectful relationships, communication, participation, recognition, and support can help establish conditions that are more conducive to the well-being of education workers (WHO, 2022; Ferreira, 2021).

Integrating the contributions of the World Health Organization, Ferreira, and the DSM-5-TR therefore makes it possible to understand mental health as a complex and multidimensional phenomenon. Mental health is not limited to the absence of disorders, just as psychological distress should not automatically be interpreted as mental illness. These concepts are related but distinct and must be analyzed by considering both individual characteristics and the social, relational, and institutional contexts in which people live (WHO, 2022; Ferreira, 2021; APA, 2022).

This understanding is fundamental to analyzing the mental health of Early Childhood Education teachers because teaching involves intense human interaction, educational responsibility, emotional demands, and institutional requirements. Considering these different dimensions enables a more careful analysis of professionals' experiences of distress and avoids both normalizing their suffering and immediately pathologizing it.

Thus, promoting teachers' mental health should be understood as a responsibility shared among individuals, institutions, and public policymakers. Care should not be provided only after distress has intensified or a diagnosis has been established; it should also be provided through preventive measures and the promotion of work environments that foster well-being. This perspective contributes to building healthier educational spaces and valuing the professionals responsible for educational work (WHO, 2022; Ferreira, 2021).

Working conditions and teachers' psychological distress

The working conditions of Early Childhood Education teachers, characterized by long hours, multiple responsibilities, limited professional recognition, and a lack of institutional support, contribute significantly to psychological distress. These factors frequently trigger anxiety, chronic stress, emotional exhaustion, and, in more severe cases, mental illness (Campos and Viegas, 2021).

In their investigation of mental health in teaching work, Campos and Viegas (2021) show that intensified activities, task overload, and limited pedagogical autonomy are structural factors that compromise teachers' subjectivity.

When teachers are deprived of the freedom, creativity, and sufficient planning time needed to practice their profession, the meaning of their work is disrupted. This loss of meaning in educational practice deepens feelings of frustration, powerlessness, and emotional strain, turning teaching into an often exhausting and dehumanizing experience, as described by Campos and Viegas (2021).

Ferreira (2021) proposes an essential distinction between psychological distress and mental illness, understanding the former as a subjective response, situated in context, to the objective conditions of professional practice. According to the author, psychological distress serves as a signal from the body and mind in response to situations perceived as threatening, disproportionate, or unsustainable, but which do not yet constitute a pathological clinical condition, as in the case of mental illness.

Distinguishing distress from pathology is fundamental to developing institutional strategies for care, prevention, and support, particularly in teaching, a profession marked by constant emotional and symbolic demands (Ferreira, 2021).

This interpretation aligns with the Freudian perspective presented in *Civilization and Its Discontents*, written in 1930, in which Freud (2021 [1930]) argues that suffering is inherent to the human condition, but intensifies when individual desires are continually repressed by social and

cultural demands. From this standpoint, work can be a source of either fulfillment or oppression, depending on the material and symbolic conditions that shape it.

When the contributions of Ferreira, Freud, Campos, and Viegas are considered together, they converge in their criticism of reductive and individualizing approaches to psychological distress. For these authors, distress is not a personal "defect," but an authentic response to the obstacles and contradictions present in labor relations and institutional models. Freud (2021 [1930]) denounces the repression of desires in the face of civilizational demands; Ferreira (2021) interprets distress as a necessary signal calling for the transformation of working conditions; and Campos and Viegas (2021) identify intensification, overload, and loss of autonomy as central sources of distress.

Teachers' psychological distress should therefore not be addressed solely at the individual level, but understood as an expression of institutional dysfunction that requires collective, political, and structural intervention, according to Campos and Viegas (2021) and Ferreira (2021). Promoting mental health among Early Childhood Education teachers necessarily involves valuing teaching work, expanding teachers' autonomy, recognizing the emotional conditions that permeate daily school life, and implementing integrated public policies for care and support (Campos and Viegas, 2021; Ferreira, 2021).

Loss and Lyra (2023) emphasize that teaching is considered one of the most stressful professions in the world, alongside health care and public safety, because of work overload, low salaries, inadequate infrastructure, and interpersonal problems in the school environment. These factors make emotional management a constant demand for teachers and negatively affect their mental health.

According to Loss and Lyra (2023), the longstanding lack of qualified education in emotional matters and of policies encouraging attention to teachers' mental health impedes the development of self-care and emotional intelligence, thereby entrenching teachers' psychological distress.

The inadequacy of institutional policies for care and emotional support

The literature analysis indicates that, although psychological distress among Early Childhood Education teachers is widely recognized, institutional policies for promoting mental health remain rudimentary, fragmented, and often inadequate to address the complexity of school realities. Isolated initiatives, generally based on palliative or emergency measures, do not provide a structured response to the emotional needs of education professionals (Loss and Lyra, 2023).

Campos and Viegas (2021) emphasize that the absence of permanent strategies for support and prevention aggravates emotional vulnerability while relieving government authorities and educational institutions of responsibility for creating a genuinely healthy work environment.

Rendering teachers' psychological distress invisible contributes to the normalization of illness by treating emotional strain as inherent to the profession rather than recognizing it as a direct consequence of precarious conditions, work intensification, and insufficient institutional support (Campos and Viegas, 2021).

To a large extent, this omission reflects a managerial and productivity-oriented logic in educational policies, in which measurable performance - such as targets, indicators, and external assessments - takes precedence over care for the person who teaches. From this perspective, teachers' distress is silenced, depoliticized, and individualized, as though it resulted from personal weaknesses rather than structural factors permeating everyday school life (Campos and Viegas, 2021).

Both Campos and Viegas (2021) and Loss and Lyra (2023) indicate that the absence of integrated policies demonstrates the urgent need to rethink the role of educational institutions in promoting mental health as a right of education workers. This entails investing in continuous programs of

qualified listening, providing permanent spaces for professional learning and reflection on pedagogical practice, guaranteeing time for collective planning, and fostering mutual-care practices in everyday school life.

In this context, promoting mental health in teaching work should be understood as a collective and intersectoral responsibility connecting education, health, and social assistance, particularly in Early Childhood Education. Recognizing the centrality of emotional health in educational practice is a fundamental step toward transforming working conditions and ensuring the retention and well-being of education professionals (Loss and Lyra, 2023).

Loss and Lyra (2023) state that Brazil has no effective government public policies specifically directed toward teachers' emotional care. The few existing initiatives are predominantly informational or palliative, focusing on general guidance without a structure for preventive and continuous action. There is a structural gap in the provision of permanent programs for listening, emotional management, and psychological support within school systems.

Deficiencies in initial and continuing education concerning emotional well-being also compromise teachers' ability to recognize, name, and manage their own emotional states, directly affecting interpersonal relationships, the quality of pedagogical interactions, and the school environment as a whole. This educational gap underscores the urgent need for public policies that institutionalize emotional education as an inseparable dimension of teacher preparation and professional recognition (Loss and Lyra, 2023).

As an alternative, the authors cited above propose adopting self-education and preventive practices, such as reflective narratives and sensitive listening, institutionalized within school systems as permanent strategies for strengthening teacher well-being and collectively addressing distress.

These proposals should be coordinated with existing legal guidelines, such as Federal Law No. 14,819/2024, which establishes the National Psychosocial Care Policy in School Communities and seeks to promote the mental health of students, teachers, and other members of the school community. This legislation represents progress by recognizing that the school environment must also be a space for care and emotional protection. For teachers in particular, the law proposes a sensitive approach to working conditions and the emotional demands arising from teaching (Brazil, 2024).

The law provides for integrated and intersectoral measures to promote, prevent, and provide mental health care, to be developed collaboratively among the fields of education, health, and social assistance. In this regard, institutional conditions must be ensured for welcoming educators and providing them with psychological follow-up, while respecting their individual circumstances and offering support in response to factors contributing to psychological distress, such as work overload, precarious employment conditions, and the profession's multiple demands.

In addition, the policy calls for continuing education for education professionals focused on mental health and well-being, enabling teachers to become active agents in building a culture of care in the school environment. Thus, Law No. 14,819/2024 not only recognizes teachers' psychological distress but also establishes concrete guidelines for implementing strategies to address it, thereby contributing to professional recognition and improved working and teaching-learning conditions (Brazil, 2024).

Promoting teachers' mental health is not an institutional concession, but an ethical, pedagogical, and fundamental requirement. It means ensuring humane working conditions and fulfilling the right to quality education. As long as mental health continues to be treated as an individual issue, projects for inclusive, human-centered, and transformative education will remain compromised (Loss and Lyra, 2023).

CONCLUSION

This article sought to analyze the mental health of Early Childhood Education teachers from a broad, critical, and interdisciplinary perspective. Based on the specialized literature, it was possible to identify that teachers' psychological distress does not arise exclusively from individual vulnerabilities, but is directly related to objective working conditions, task intensification, emotional overload, and the absence of structured institutional care policies.

By connecting the authors' contributions with current legislation, the study found that psychological distress should be recognized as a legitimate, context-dependent phenomenon that reveals the institutional contradictions permeating teaching practice. This understanding moves beyond a pathologizing and individualizing logic and proposes that mental health care be treated as a collective, political, and pedagogical issue.

The study also found that public policies promoting teachers' emotional health are still incipient, uncoordinated, and predominantly palliative. Institutional neglect of teachers' psychological distress contributes to its normalization and perpetuation, especially in Early Childhood Education, a stage that requires intense affective and emotional engagement from educators. The absence of education concerning emotional well-being, combined with the lack of permanent programs for listening, compassionate reception, and psychological support, compromises not only professionals' well-being but also the quality of pedagogical relationships and the school environment as a whole.

Promoting teachers' mental health should therefore be understood as a permanent ethical and intersectoral responsibility requiring public investment, a review of working conditions, and the reorganization of institutional practices. Educational policies must connect professional recognition with the creation of school cultures that acknowledge vulnerability as part of the human condition rather than as a sign of weakness or individual deviance.

Ensuring the mental health of Early Childhood Education teachers also means guaranteeing the right to education characterized by quality, care, meaning, and dignity. It means recognizing that human-centered education is not possible when educators become ill while practicing their profession.

REFERENCES

APA. Associação Americana de Psiquiatria. **DSM-5-TR, Manual Diagnóstico e Estatístico de Transtornos Mentais**. Quinta Edição, Revisão de Texto (DSM-5-TR®), 2022. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC3777342/> . Accessed on June 21, 2025.

BRASIL. Planalto. **Lei 14.819/2024**. Presidência da República. DF, 2024. Available at: https://www.planalto.gov.br/ccivil_03/_ato2023-2026/2024/lei/L14819.htm. Accessed on June 21, 2025.

CAMPOS, M. F. de; VIEGAS, M. F. **Saúde mental no trabalho docente: um estudo sobre autonomia, intensificação e sobrecarga**. Cadernos de Pesquisa, v. 28, n. 1, p. 172-186, 2021. Available at: https://www.researchgate.net/publication/357408218_SAUDE_MENTAL_NO_TRABALHO_DOCENTE_um_estudo_sobre_autonomia_intensificacao_e_sobrecarga. Accessed on June 22, 2025.

FARIAS FILHO, M. C.; ARRUDA FILHO, E. J. M. **Planejamento da pesquisa científica**. São Paulo: Atlas, 2013.

FERREIRA, L. **Saúde emocional do professor**. Rio de Janeiro, RJ: Litteris Editora, 2021.

FREUD, S. **O mal-estar na civilização**. Obra original: 1930. Tradução de Inês A. Lohbauer. São Paulo: Martin Claret, 2021.

LOSS, A. S.; LYRA, L. R. (Orgs.). **Educação emocional e profissão docente: processos autoformativos**. Curitiba: Editora CRV, 2023.

OMS. **Relatório Mundial sobre saúde mental**. 2022. Available at: <https://www.who.int/publications/i/item/9789240049338>. Accessed on June 21, 2025.