

Psychosocial risks and mental health at work: Challenges for Latin America and the Caribbean

Riesgos psicosociales y salud mental: desafíos para América Latina y el Caribe

Riscos psicossociais e saúde mental no trabalho: desafios na América Latina e no Caribe

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ABSTRACT

Introduction: Work-related psychosocial risks have gained increasing relevance in international occupational health policies, particularly in light of contemporary transformations in work and their impacts on workers' mental health.

Objective: To analyze the recent update of the Brazilian Regulatory Standard No. 1 (NR-1) and discuss convergences, advances, and challenges related to the management of psychosocial risks in Latin America and the Caribbean.

Methods: A theoretical-reflective essay was conducted based on a narrative review of the international and Latin American scientific literature, as well as regulatory documents concerning occupational mental health and work-related psychosocial risks.

Results: Countries such as Colombia and Chile were found to have more consolidated regulatory experiences regarding the assessment and surveillance of psychosocial risks at work. The update of NR-1 brings Brazil closer to international trends in occupational health prevention, although challenges related to surveillance systems, the use of valid assessment instruments, labor informality, precarious work, and the digital transformation of work remain.

Conclusions: The incorporation of psychosocial risks into regulatory policies represents an important advance for occupational health in Latin America and the Caribbean. However, its effectiveness depends on the articulation between scientific production, public policies, institutional surveillance, and the transformation of organizational working conditions.



Keywords: occupational health; psychosocial risks; mental health; working conditions; work psychology

RESUMEN

Introducción: Los riesgos psicosociales relacionados con el trabajo han ido cobrando creciente relevancia en las políticas internacionales de salud ocupacional, especialmente frente a las transformaciones contemporáneas del trabajo y sus impactos sobre la salud mental de los trabajadores.

Objetivo: Analizar la actualización de la Norma Reguladora nº 1 (NR-1) de Brasil y discutir aproximaciones, avances y desafíos relacionados con la gestión de los riesgos psicosociales en América Latina y el Caribe.

Métodos: Se realizó un ensayo teórico-reflexivo fundamentado en una revisión narrativa de la literatura científica y de documentos regulatorios internacionales y latinoamericanos sobre salud mental ocupacional y riesgos psicosociales relacionados con el trabajo.

Resultados: Se observó que países como Colombia y Chile presentan experiencias regulatorias más consolidadas en la evaluación y vigilancia de los riesgos psicosociales laborales. La actualización de la NR-1 acerca a Brasil a las tendencias internacionales de prevención en salud ocupacional, aunque persisten desafíos relacionados con la vigilancia, el uso de instrumentos de evaluación válidos, la informalidad laboral, la precarización y la transformación digital del trabajo.

Conclusiones: La incorporación de los riesgos psicosociales a las políticas regulatorias representa un avance importante para la salud ocupacional en América Latina y el Caribe. Sin embargo, su efectividad depende de la articulación entre la producción científica, las políticas públicas, la vigilancia institucional y la transformación de las condiciones organizacionales de trabajo.

Palabras clave: salud ocupacional; riesgos psicosociales; salud mental; condiciones de trabajo; psicología del trabajo

RESUMO

Introdução: Os riscos psicossociais relacionados ao trabalho vêm assumindo crescente relevância nas políticas internacionais de saúde ocupacional, especialmente diante das transformações contemporâneas do trabalho e de seus impactos sobre a saúde mental dos trabalhadores.

Objetivo: Analisar a atualização da Norma Regulamentadora nº 1 (NR-1) brasileira e discutir aproximações, avanços e desafios relacionados à gestão dos riscos psicossociais na América Latina e no Caribe.

Métodos: Realizou-se um ensaio teórico-reflexivo fundamentado em revisão narrativa da literatura científica e de documentos regulatórios internacionais e latino-americanos sobre saúde mental ocupacional e riscos psicossociais relacionados ao trabalho.



Resultados: Observou-se que países como Colômbia e Chile apresentam experiências regulatórias mais consolidadas na avaliação e vigilância dos riscos psicossociais laborais. A atualização da NR-1 aproxima o Brasil das tendências internacionais de prevenção em saúde ocupacional, embora persistam desafios relacionados à vigilância, utilização de instrumentos válidos de avaliação, informalidade laboral, precarização e transformação digital do trabalho.

Conclusões: A incorporação dos riscos psicossociais às políticas regulatórias representa importante avanço para a saúde ocupacional na América Latina e o Caribe. Entretanto, sua efetividade depende da articulação entre produção científica, políticas públicas, vigilância institucional e transformação das condições organizacionais de trabalho.

Palavras-chave: saúde ocupacional; riscos psicossociais; saúde mental; condições de trabalho; psicologia do trabalho

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Introduction

Contemporary changes in work are causing deep shifts in how work is organized and in work-related psychosocial harms. Processes like work intensification, flexible production, hyperconnectivity, the expansion of remote work, job insecurity, and the digitalization of professional activities have increased the focus on psychosocial risks in international occupational health agendas. In this context, there is growing recognition that organizational and psychosocial working conditions are important determinants of workers' mental health and of work-related health problems.

In recent decades, international organizations like the International Labour Organization (ILO)⁽¹⁾ and the World Health Organization (WHO),⁽²⁾ have been emphasizing the need to incorporate psychosocial risks into occupational health and safety policies. The publication of the document Mental health at work ⁽¹⁾ has internationally established the understanding that psychosocial factors should be part of regulatory strategies, public policies, and organizational interventions aimed at preventing work-related health issues. More recently, the WHO has also come to recognize burnout as a phenomenon associated with the work context in the International Classification of Diseases (ICD-11), increasing the international visibility of discussions about mental health at work.



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In Latin America and the Caribbean, however, the inclusion of psychosocial risks in regulatory policies happens in a mixed way, reflecting different institutional capacities, legal traditions, and levels of social protection. While countries like Colombia, Chile, Mexico, and Brazil have recently made more progress in including psychosocial risks in occupational health policies, the Latin American region still faces significant challenges related to informal work, job insecurity, limitations of occupational health surveillance systems, and the persistence of structural social inequalities.

In this context, the recent update to Regulatory Standard No. 1 (NR-1) in Brazil represents an important milestone by explicitly incorporating psychosocial risk factors within Occupational Risk Management (ORM).⁽³⁾ Originally established by Ordinance No. 3,214, on June 8, 1978, from the then Ministry of Labor, NR-1 is the main general Brazilian occupational health and safety standard, setting out provisions common to the other Regulatory Standards related to the protection of workers' health and safety.

With the most recent revision, the standard started to emphasize Occupational Risk Management (ORM) as the main framework for preventive actions in work environments. In this context, psychosocial factors began to be formally recognized within policies for preventing and managing work-related risks, expanding the traditional understanding of occupational hazards beyond just physical, chemical, biological, and ergonomic agents. Although the regulatory updates had been published earlier, the mandatory enforcement of the new requirements related to psychosocial factors only started in May 2026, after several delays and debates about how to technically implement the measures within the Brazilian organizational context.

Such a change brings Brazil closer to international trends aimed at expanding the understanding of occupational risks beyond the physical, chemical, and biological agents traditionally prioritized by occupational health and safety policies, more explicitly incorporating mental health and organizational conditions as central elements in strategies to prevent work-related psychosocial harms.

This article is a theoretical-reflective essay based on a narrative review of international and Latin American scientific literature, as well as regulatory documents related to psychosocial risks, mental health at work, and occupational health policies.

Development

Psychosocial Risks and Occupational Health in Latin America and the Caribbean

The Latin American experience shows that simply including psychosocial risks in regulations does not, by itself, guarantee real changes in working conditions. Putting these policies into action depends on the coordination between inspections, specialized technical training, production of scientific evidence, valid assessment tools, and the institutional capacity to implement preventive strategies.



Initiatives related to managing psychosocial risks in Latin America and the Caribbean show different levels of institutionalization, regulatory scope, and implementation capacity. Although several countries have made progress in incorporating mental health into occupational health policies, there is noticeable variation in the tools used, surveillance strategies, and the degree of integration between regulation, prevention, and inspections. Chart 1 lays out some of the main Latin American regulatory experiences related to psychosocial risks at work.

Chart 1. Latin American regulatory experiences related to psychosocial risks at work

País	Strategy/regulation	Main characteristics	Identified challenges
Brazil	NR-1 Update (2025)	Explicit inclusion of psychosocial risk factors in Occupational Risk Management (GRO)	Need for technical operationalization, enforcement, and valid assessment tools
Colombia	Battery of Instruments for the Evaluation of Psychosocial Risk	Factors Structured system for evaluating intra- and extra-work factors associated with occupational mental health	Organizational implementation limitations and labor inequalities
Chile	CEAL-SM/ Superintendence of Social Security of Chile (SUSESO)	National monitoring of psychosocial factors related to the work environment	Expansion of coverage and preventive strengthening
Mexico	Official Mexican Standard NOM-035-STPS-2018, regarding psychosocial risk factors at work	Identification, analysis, and prevention of psychosocial risk factors at work	Inequalities between large companies and small organizations
Argentina	Protocols and recommendations in occupational mental health	Emphasis on workplace violence, burnout, and mental health at work	Regulatory fragmentation and monitoring difficulties
Uruguay	Strategies linked to worker health and psychosocial prevention	Integration between occupational health and social protection	Institutional limitations and need for more systematization
Peru	Emerging discussions on psychosocial risks and occupational mental health	Growing inclusion of the topic in occupational health and safety agendas	Weak regulations and low institutionalization
Cuba	Integrated occupational health and worker health surveillance strategies Integrated occupational health and worker health surveillance strategies	Integration between occupational health, public health system, and workplace health prevention	Need to strengthen surveillance and prevention strategies in occupational health

Source: own elaboration based on ILO,⁽¹⁾ WHO,⁽²⁾ Villalobos,⁽⁴⁾ SUSESO⁽⁵⁾ and national regulations.



It is noted that countries like Colombia and Chile have more established experiences in evaluating and monitoring psychosocial work risks, especially due to the institutionalization of specific occupational surveillance tools. In the Cuban context, strategies historically focused on integrating occupational health, prevention, and the public health system stand out, particularly through the coordination between health surveillance, primary care, and occupational medicine developed within the Cuban national health system.^(6,7)

On the other hand, countries like Peru, Uruguay, and Argentina still have more fragmented actions related to psychosocial risk management, with less integration between regulatory policies, inspection systems, and organizational preventive strategies. In Brazil's case, the recent update of NR-1 represents an important step forward by explicitly recognizing psychosocial factors within occupational risk management.

Other Latin American countries, like Mexico, Argentina, and Chile, have also been expanding discussions about workplace violence, burnout, bullying, and work-related mental health issues, especially after the psychosocial impacts of the COVID-19 pandemic. However, it seems that many initiatives are still mostly focused on individual strategies for dealing with emotional strain or on support-based approaches, with less emphasis on organizational and preventive interventions.

Work transformations and contemporary challenges

The literature in Occupational Health Psychology and Worker Health has consistently shown that factors such as workload, low autonomy, role conflicts, job insecurity, and lack of organizational support are important determinants of psychosocial issues related to work.^(8,9,10) In this context, theoretical models like the Job Demands-Resources (JD-R) have been widely used to understand the impacts of working conditions on workers' mental health, especially in settings marked by work intensification, production flexibilization, and the digital transformation of work.

The JD-R model proposes that different work characteristics can be organized into two main categories: job demands and job resources. Demands refer to physical, cognitive, emotional, and organizational aspects that require continuous effort and can contribute to occupational burnout. Work resources, on the other hand, involve elements that can boost motivation, engagement, autonomy, organizational support, and protect workers' mental health.^(8,9)

More recently, contemporary discussions have expanded the JD-R model to account for the impacts of digital transformations in work, including hyperconnectivity, technostress, digital platforms, algorithmic management, and new forms of organizational monitoring mediated by smart technologies.^(10,11) These revisions highlight that digital technologies can act simultaneously as job demands and resources, depending on organizational conditions, the level of worker autonomy, and the management approaches adopted by organizations. In this context, the latest version of the model, called JD-R 3.0, aims to more explicitly



integrate aspects related to the digitalization of work, sociotechnical changes, and emerging psychosocial risks associated with contemporary digital transformation.⁽¹⁰⁾

Additionally, there is growing concern about the opacity of algorithmic decision-making processes and the ethical impacts related to digital surveillance, increased organizational control, and the shifting of responsibilities onto workers.⁽¹³⁾ These changes have been redefining boundaries between work and private life and increasing the complexity of challenges related to managing psychosocial risks in Latin America and the Caribbean. Regulatory, institutional, technological, and social aspects interact dynamically, making it difficult to implement effective preventive strategies in different work contexts. Chart 2 provides a summary of the main contemporary challenges related to managing psychosocial risks in the region.

Table 2. Contemporary challenges for managing psychosocial risks in Latin America and the Caribbean

Dimensão	Desafios principais	Impactos potenciais
Regulatory	Weak regulations and differences between countries	Difficulties in implementation, oversight, and harmonization of preventive strategies aimed at psychosocial risks
Organizational	Culture focused on formal compliance rather than prevention	Underreporting of risks, bureaucratization of psychosocial assessments, and low effectiveness of preventive actions
Scientific	Scarcity of validated tools and longitudinal studies	Limitations in identifying, monitoring, and evaluating work-related psychosocial factors
Technological	Hyperconnectivity, digital platforms, and algorithmic management	Increase in technostress, work intensification, digital surveillance, and reduction of job autonomy
Social	Informality, precariousness, and structural inequalities	Greater exposure to psychosocial risk factors, occupational vulnerability, and difficulties in accessing social protection
Institutional	Limitations in occupational oversight and monitoring	Low capacity for monitoring, implementing, and sustaining public prevention policies
Ethical	Individualization of work-related harm	Holding workers responsible for mental health problems and overlooking organizational and structural determinants of work

Source: Own elaboration.

Paradoxically, the expansion of regulation of psychosocial risks happens in a context marked by the intensification of labor precariousness, the growth of flexible hiring arrangements, and the increasing digitalization of work. This scenario highlights a significant tension between the regulatory advances related to mental health protection and the persistence of organizational models focused on productivity intensification, hyperavailability, and the flexibilization of work relationships.



The challenges identified show that preventing psychosocial risks does not depend solely on the existence of regulatory norms but also on the institutional capacity for oversight, the production of contextualized scientific evidence, and the transformation of organizational practices. Additionally, that, factors like hyperconnectivity, digital platforms, job insecurity, and algorithmic management have been reshaping the processes of work-related wear and tear and increasing the need for interdisciplinary preventive strategies.

In this context, updating Brazil's NR-1 standard could represent an important opportunity to strengthen scientific research and preventive strategies related to psychosocial risks at work. However, it also highlights significant methodological challenges. The increased organizational demand for psychosocial assessments could lead to the indiscriminate use of simplified checklists, instruments without adequate evidence of validity, and evaluation practices that are weakly supported scientifically.

Another important challenge concerns the risk of bureaucratizing psychosocial assessments, reducing risk management to merely documentation practices or formal compliance with regulatory requirements. Without effective changes in organizational work conditions, there is a possibility that psychosocial assessment processes will be adopted only as administrative instruments for regulatory compliance, with low preventive effectiveness.

It becomes essential to strengthen research focused on the construction, cross-cultural adaptation, and validation of measures in Organizational and Work Psychology and Occupational Health, especially in the Latin American context. Although the adaptation of international instruments has significantly contributed to the progress of the field, greater investments are still needed in measures that are contextualized to the sociocultural and occupational specificities of the region, considering labor informality, structural inequalities, and different forms of work organization.

Challenges for prevention and public policies

Another critical aspect refers to the risk of individualizing psychosocial problems at work. In many organizational contexts, the discussion about workplace mental health still tends to emphasize individual strategies of adaptation, resilience, and emotional self-regulation, shifting attention away from the structural and organizational conditions associated with psychosocial risks and occupational burnout.^(1,2,15)

There is a risk that the increase in discussions about mental health at work may come with processes that turn organizational problems into psychological and individual issues, where work-related suffering starts to be seen mainly as an individual inability to adapt, insufficient resilience, or emotional weakness of workers. This perspective can make structural factors linked to work organization, labor inequalities, and contemporary management practices invisible. In this sense, regulatory policies related to psychosocial risks should focus on preventive approaches that address not just the individual, but also the transformation of organizational work conditions.



Moreover, the Latin American reality imposes additional challenges related to informality, outsourcing, economic instability, and persistent social inequalities, factors historically associated with labor precariousness and the social vulnerability of workers in the region.⁽²⁾ These elements make it more complex to implement preventive policies and occupational health surveillance systems capable of addressing different labor realities in Latin America, especially in organizational contexts marked by structural limitations and institutional implementation constraints.⁽¹⁶⁾ In the Latin American context, these challenges take on even more complex dimensions due to historical social inequalities, high labor informality, and institutional limitations related to occupational health inspection and surveillance. Thus, simply applying international regulatory models may not be enough to respond to the sociopolitics and economics specificities of the region.

Discussions about psychosocial risks also highlight the need to strengthen the connection between scientific research, public policies, and labor regulation. More than just adding new regulatory measures, the regional challenge is to build organizational cultures focused on prevention, continuous improvement of health and safety management systems, promotion of mental health, and valuing decent work.^(1,17)

Conclusions

Incorporating psychosocial risks into regulatory policies is an important step forward for occupational health in Latin America and the Caribbean. Updating Brazil's NR-1 brings the country closer to international trends aimed at preventing psychosocial illnesses related to working conditions and increases the visibility of mental health in the field of occupational health and safety.

However, the effectiveness of these policies depends on the coordination between scientific research, institutional oversight, inspections, specialized technical training, and changing organizational work conditions. Challenges persist related to job insecurity, informality, digital transformation of work, and limitations of systems for evaluating and monitoring psychosocial risks. In this context, Organizational and Work Psychology and Occupational Health have a strategic role in producing knowledge that is scientifically solid, socially contextualized, and committed to promoting healthier, more sustainable, and socially responsible work environments. More than just a technical or regulatory challenge, incorporating psychosocial risks into occupational health policies also represents an ethical, political, and organizational challenge related to building work practices that are healthier, more sustainable, and socially just in Latin America and the Caribbean.

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Conflict of interest

The authors declare that don't have conflict of interest.

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