

Gender Differences in Common Mental Disorders and Suicidal Thoughts Among Formal Workers in Brazil

Diferenças de Gênero Em Transtornos Mentais Comuns e Pensamentos Suicidas Entre Trabalhadores Formais no Brasil

Diferencias de Género en Trastornos Mentales Comunes y Pensamientos Suicidas Entre Trabajadores Formales en Brasil

RESUMO

Este estudo aborda saúde mental e pensamentos suicidas entre trabalhadores no Ceará. **Objetivo:** descrever a prevalência de pensamentos suicidas e Transtornos Mentais Comuns, considerando gênero e cargo. **Método:** estudo descritivo transversal de dados coletados entre 2021 e 2022, utilizando o Self Questionnaire Report e questionário sociodemográfico, com aprovação prévia do Comitê de Ética em Pesquisa da Universidade de Fortaleza. **Resultados:** maior prevalência de pensamentos suicidas entre mulheres (2,7%, n=23) do que entre homens (1,0%, n=27). Maior prevalência de Transtornos Mentais Comuns entre mulheres (12,0%, n=102), do que entre homens (3,2%, n=84). A prevalência de mulheres com Transtornos Mentais Comuns e pensamentos suicidas foi maior nos cargos administrativos (84,6%, n=11); entre homens, em cargos operacionais (47,6%, n=10). **Conclusão:** ratifica-se a associação de risco de depressão e ansiedade às mulheres e recomenda-se prevenção ao suicídio abrangendo contextos de trabalho.

DESCRIPTORIOS: Saúde mental; Trabalhadores formais; Suicídio; Transtornos mentais.

ABSTRACT

This study examines mental health and suicidal thoughts among workers in Ceará. **Objective:** To describe the prevalence of suicidal thoughts and Common Mental Disorders by gender and job position. **Method:** Cross-sectional study with data from 2021–2022, using the Self-Report Questionnaire and a sociodemographic survey, approved by the University of Fortaleza Ethics Committee. **Results:** higher prevalence of suicidal thoughts among women (2.7%, n=23) than among men (1.0%, n=27). Higher prevalence of Common Mental Disorders among women (12.0%, n=102) than among men (3.2%, n=84). The prevalence of women with Common Mental Disorders and suicidal thoughts was higher in administrative positions (84.6%, n=11); among men, in operational positions (47.6%, n=10). **Conclusion:** The association between the risk of depression and anxiety in women is confirmed and suicide prevention is recommended in work contexts.

DESCRIPTORS: Mental health; Formal workers; Suicide; Mental disorders.

RESUMEN

Este estudio examina la salud mental y los pensamientos suicidas entre los trabajadores de Ceará. **Objetivo:** Describir la prevalencia de pensamientos suicidas y Trastornos Mentales Comunes por género y puesto de trabajo. **Método:** Estudio transversal (2021–2022) con Self-Report Questionnaire y cuestionario sociodemográfico, aprobado por el Comité de Ética de la Universidad de Fortaleza. **Resultados:** mayor prevalencia de ideas suicidas entre las mujeres (2,7%, n=23) que entre los hombres (1,0%, n=27). Mayor prevalencia de Trastornos Mentales Comunes entre las mujeres (12,0%, n=102) que entre los hombres (3,2%, n=84). La prevalencia de mujeres con Trastornos Mentales Comunes e ideas suicidas fue mayor en puestos administrativos (84,6%, n=11); entre los hombres, en puestos operativos (47,6%, n=10). **Conclusiones:** Se confirma la asociación entre el riesgo de depresión y ansiedad en mujeres y se recomienda la prevención del suicidio en contextos laborales.

DESCRIPTORIOS: Salud mental; Trabajadores formales; Suicidio; Trastornos mentales.

RECEIVED: 02/10/2025 APPROVED: 02/19/2025

How to cite this article: Morais KMA, omes JA, Batista MH, Bezerra APAM, Gascón S. Diferenças de Gênero Em Transtornos Mentais Comuns e Pensamentos Suicidas Entre Trabalhadores Formais no Brasil. *Saúde Coletiva* (Edição Brasileira) [Internet]. 2025 [acesso ano mês dia];15(93):14875-14880. Disponível em: DOI: 10.36489/saudecoletiva.2025v15i93p14875-14880

ID **Kassandra Maria de Araújo Morais**
Doctoral student of the Postgraduate Program in Public Health at the Federal University of Ceará.
ORCID: <https://orcid.org/0000-0001-8228-5713>

ID **Josimeire de Araújo Gomes**
Master in Development and Environment, Federal University of Ceará
ORCID: <https://orcid.org/0009-0008-8085-540X>

ID **Maxmiria Holanda Batista**
Doctor, Federal University of Ceará.
ORCID: <https://orcid.org/0000-0002-9069-678X>

ID **Ana Patrícia de Aragão Marques Bezerra**
Master, University of Fortaleza.
ORCID: <https://orcid.org/0000-0002-9710-0475>

ID **Santiago Gascó**
Doctor, Universidad de Zaragoza.
ORCID: <https://orcid.org/0000-0002-3723-0673>

INTRODUCTION

A report by the Third Sector Observatory states that gender issues and social factors are positively associated with the prevalence of mental disorders and suicidal thoughts among women. ⁽¹⁾ Authors such as Scott ⁽²⁾ and Butler ⁽³⁾ state that gender constructions are based on social and historical norms that produce and maintain differences between men and women, especially in the workplace.

The Diagnostic and Statistical Manual of Mental Disorders, DSM-V, of the American Psychiatric Association ⁽⁴⁾, defines Common Mental Disorders as the presence of symptoms of depression and/or anxiety of sufficient intensity and/or frequency to impair the individual's ability to function adequately, even in situations where there is no formal diagnosis of a condition or illness. Studies by Lund ⁽⁵⁾ and collaborators show that women have a higher risk of developing depressive and anxiety disorders, while men have a higher risk of suicide and substance use disorders.

According to Durkheim ⁽⁶⁾, Suicide is the deliberate and conscious act of inflicting death on oneself. It can be fatal if completed or non-fatal when manifested by ideation or attempt.

Durkheim addressed the issue of suicide by emphasizing the relationship between the individual and the norms of the society in which he or she lives, highlighting suicide in the context of groups and social facts, as a manifestation of the rupture of social ties. Durkheim's conception suggests that the traditional role of women in the domestic sphere represents protection against suicide, with female participation in the labor market being related to the increase in stress and social pressure resulting from a substantial change in traditional family structures. However, society's conception of this act has changed based on several variables, such as historical moment, model of civilization and religious beliefs. From the 19th century onwards, suicide began to be analyzed in the social dimension as a health problem with multifactorial causes. Pampel ⁽⁷⁾ argues that the social transformations involved in the entry and expansion of women's participation in the labor market can benefit society as a whole, as models that promote independence, social support, well-being and mental stability of individuals are adopted. Data presented by Parente ⁽⁸⁾ and collaborators in a documentary study of 269 medical records of women treated between 2017 and

2018 at a specialized outpatient clinic in Piauí, a Brazilian state bordering Ceará, indicate significant associations between women with paid work and symptoms of mental disorders with suicide attempts. The association of the variable paid employment with suicidal behavior pointed out by the study suggests that working outside the home does not promote benefits to mental health; however, it does not argue that paid work is the cause of the problem either. American Psychiatric Association ⁽⁹⁾ warns that the lack of diagnosis and treatment of mental disorders contributes to failures in self-perception of psychological distress, favoring suicidal thoughts.

In Ceará, a state in the Brazilian Northeast that comprises 184 municipalities, female participation in formal employment has increased significantly. Around 30% of the population is located in the capital, Fortaleza, and 40.1% of the population aged 16 or over has formal employment. According to the IBGE ⁽¹⁰⁾, The state's Human Development Index (HDI) ranks 12th in relation to other states of the Federation, and the Basic Education Development Index (IDEB - Índice de Desenvolvimento da Educação Básica) is the best in the country.

In this context, investigating mental health conditions and the presence of suicidal ideation in certain social groups is essential to define and implement preventive and health promotion actions.

METHOD

Cross-sectional, quantitative study conducted in five service units of the Social Service of Industry (SESI). The sample consisted of employees of private companies in the State of Ceará, aged 18 or over. The selection was carried out by previously trained personnel, adopting simple random sampling, with one in every three eligible workers served by the Unit being invited, seeking to capture at least 20% of the workers for a minimum confidence level of 95% and a maximum margin of error of 5%. Each selected employee was invited to voluntarily participate in the research, and was presented with the Free and Informed Consent Form for understanding and signing.

The research project was approved by the Research Ethics Committee (CEP) of the University of Fortaleza (UNIFOR), registered under number 5,182,188 and CAAE 52443621.5.0000.5052. The Self-Report Questionnaire (SRQ-20) was used to identify whether symptoms of Common Mental Disorder (CMD) and suicidal thoughts were present in the last six months. A sociodemographic questionnaire was used to collect gender, position and employer. Previously trained health professionals with technical level performed the collection. The consolidation and evaluation of results was done considering CMD cases in which the score is greater than or equal to 7 for women and 6 for men in the SRQ-20.⁽¹¹⁾ Affirmative responses to item 17 ("Have you ever thought about ending your life?") indicated the presence or history of suicidal thoughts. Data were analyzed using SPSS software, using descriptive statistics and hypothesis

testing methods to compare prevalence between genders.

RESULTS

A total of 8,754 eligible workers were recruited and 3,435 workers joined, resulting in a 99% confidence interval and a 2% margin of error. Males accounted for 75.3% (n=2,586) of the sample and females for 24.7% (n=849). The sample represents 204 companies,

of which 83.3% (n=170) are from the industrial sector and 16.1% (n=33) are from the service sector. Of the 170 industries, 58.2% (n=99) are consumer goods companies and 41.8% (n=71) are intermediate goods companies. No type of position had a female majority, but operational and administrative positions showed a smaller imbalance between the proportion of men and women. Table 2.

Position Type	Women		Men	
	n	%	n	%
Management	45	44,12	57	55,88
Administrative Operations	381	47,57	420	52,43
Production Operations	423	16,71	2109	83,29
Grand Total	849	24,72	2586	75,28

Source: the author (2024)

Somatic symptoms were most frequent in the workers' reports, followed

by depressed mood and decreased vital energy and depressive thoughts. Table 3.

Symptom type	Item	Women		Men		Total	
		n	%	n	%	n	%
Somatic	1. Do you have frequent headaches?	669	78,8	1001	38,7	1670	48,6
	2. Do you have a lack of appetite?						
	3. Do you sleep poorly?						
	5. Do you have hand tremors?						
	7. Do you have indigestion?						
	19. Do you have unpleasant sensations in your stomach?						
Depressive humor	4. Are you easily frightened?	601	70,8	786	30,4	1387	40,4
	6. Do you feel nervous, tense, or worried?						
	9. Have you been feeling sad lately?						
	10. Have you been crying more than usual?						

Original Article

Morais KMA, omes JA, Batista MH, Bezerra APAM, Gascón S
Gender Differences in Common Mental Disorders and Suicidal Thoughts Among Formal Workers in Brazil

Decreased vital energy	8. Do you have difficulty thinking clearly?	497	58,5	624	24,1	1121	32,6
	11. Do you have difficulty carrying out your daily activities with satisfaction?						
	12. Do you have difficulty making decisions?						
	13. Do you have difficulties at work (is your work arduous, causing you suffering)?						
	18. Do you feel tired all the time?						
20. Do you tire easily?							
Depressive thoughts	14. Are you unable to play a useful role in your life?	124	14,6	163	6,3	287	8,36
	15. Have you lost interest in things?						
	16. Do you feel useless, worthless?						
	17. Have you had thoughts of ending your life?						

Source: the author (2024)

Suicidal thoughts were more prevalent among women, at 2.7% (n=23), while among men it was 1.0% (n=27).

No reports of suicidal thoughts were identified among workers in management positions. Administrative operational positions had a higher prevalence,

at 3.4% (n=13) among women and 1.4% (n=6) among men. Table 4.

Table 4. Prevalence of Suicidal Thoughts by Gender and Job Type

Variables	Item 17. Have you had thoughts of taking your own life?			
	No		Yes	
Women	n	%	n	%
Management	45	100	-	-
Administrative Operations	368	96,6	13	3,4
Production Operations	413	97,6	10	2,4
Total	826	97,3	23	2,7
Men	n	%	n	%
Management	57	100	-	-
Administrative Operations	414	98,6	6	1,4
Production Operations	2088	99	21	1
Total	2559	99	27	1

Source: the author (2024)

The prevalence of CMD symptoms among women was 12.0% (n=102), and among men 3.2% (n=84).

Among women with CMD, suicidal thoughts were more prevalent in administrative operational positions, with 84.6% (n=11). Men with CMD

presented more suicidal thoughts in production operational positions, with 47.6% (n=10). Table 5.

Table 5. Prevalence of Common Mental Disorders and Suicidal Ideation

Variables	Common Mental Disorders				Total
	No	Yes	No	Yes	
	n	%	n	%	
Women	747	88	102	12	849
Management	33	73,3	12	26,7	45
No suicidal thoughts	33	73,3	12	26,7	45
Yes, they have suicidal thoughts	-	-	-	-	-
Administrative Operations	331	86,9	50	13,1	381
No suicidal thoughts	329	89,4	39	10,6	368
Yes, they have suicidal thoughts	2	15,4	11	84,6	13

Production Operations	383	90,5	40	9,5	423
No suicidal thoughts	376	91	37	9	413
Yes, they have suicidal thoughts	7	70	3	30	10
Men	2502	96,8	84	3,2	2586
Management	57	100	-	-	57
No suicidal thoughts	57	100	-	-	-
Yes, they have suicidal thoughts	-	-	-	-	-
Administrative Operations	399	95	21	5	420
No suicidal thoughts	395	95,4	19	4,6	414
Yes, they have suicidal thoughts	4	66,7	2	33,3	6
Production Operations	2046	97	63	3	2109
No suicidal thoughts	2035	97,5	53	2,5	2088
Yes, they have suicidal thoughts	11	52,4	10	47,6	21
Total Geral	3249	94,6	186	5,4	3435

Source: the author (2024)

DISCUSSION

The higher prevalence of suicidal thoughts and CMD among female workers is in line with the study by Parente⁽⁸⁾ which indicates significant associations between women in paid employment and symptoms of mental disorders and suicide attempts.

“

However, it is not possible to infer that formal work is in itself a risk factor for the mental health of female workers, since the results converge at the same time with the findings of

the systematic review by Lund⁽¹²⁾ et al., which indicates that women, in a general context, have a higher risk of developing depressive and anxiety disorders.

”

The high proportion of somatic symptoms should be considered holistically, considering hypotheses of suffering and psychological conditions or illnesses, since the difficulty in comprehensively analyzing the health of workers creates additional challenges for the diagnosis of CMD.

The high prevalence of CMD and suicidal thoughts among women confirms Jorgetto & Marolan⁽¹³⁾, who argue that although suicide is not a mental health condition, people with worse mental health conditions have

a higher risk of taking their own lives. These data converge with reports from Think Olga⁽¹⁴⁾, which show that women tend to present more symptoms of depression than men. Such symptoms deserve attention as possible precursors to suicide.

CONCLUSION

The data presented demonstrate that there is a distinction in mental health demands by gender, which points to the need for coping strategies that recognize the specific needs of women's social reality in the relationship between mental health and work. Common Mental Disorders can manifest as physical and emotional signs and can be underdiagnosed, making effective and early interventions difficult. Therefore, strategies that include assessments of social and occupational conditions are recommended. In this sense, we recommend future studies on intervention models and integration of psychosocial support programs with welcoming practices capable of helping companies build and maintain healthier work environments.

REFERENCES

- (1) World Health Organization. (2023). WHO policy brief on the health aspects of decriminalization of suicide and suicide attempts. Acesso em 05/11/2024. Disponível em: <https://www.who.int/publications/i/item/9789240078796>.
- (2) Scott, J. (1995). Gênero: uma categoria útil de análise histórica. *Educação e Realidade*, 20(2), 71–99.
- (3) Butler, J. (2016). *Problemas de gênero: feminismo e subversão da identidade* (10ª ed.). Rio de Janeiro, RJ: Civilização Brasileira.
- (4) Butler, J. (2017). Regulações de gênero. In I. Brandão, I. Cavalcanti, C. de L. Costa, & A. C. A. Lima (Orgs.), *Traduções da cultura: perspectivas críticas feministas* (pp. 692–716). Florianópolis, SC: EDUFAL.
- (5) American Psychiatric Association. (2020). Depression. Disponível em: <https://www.psychiatry.org/patients-families/depression/what-is-depression>. Acesso em 05/11/2024.
- (6) Durkheim, É., Cary, L., Garrido, M., & Esteves, J. V. (1977). *O suicídio: estudo sociológico* (2ª ed.). Lisboa: Presença.
- (7) Pampel, F. C. (1998). National context, social change, and sex differences in suicide rates. *American Sociological Review*, 63(5), 744–758.
- (8) Parente, J. B., Carvalho, R. C., & Amaral, G. P. (2019). Fatores relacionados ao comportamento suicidário em mulheres. *Revista de Enfermagem UFPI*, 8(4), 47–54.
- (9) Associação Psiquiátrica Americana. (1994). *Manual diagnóstico e estatístico de transtornos mentais (DSM-IV)*. Porto Alegre, RS: Artmed.
- (10) IBGE. (2022). Panorama do Estado do Ceará. Disponível em: <https://cidades.ibge.gov.br/brasil/ce/panorama>. Acesso em 17/10/2024.
- (11) Mari, J. J., & Williams, P. (1986). A validity study of a psychiatric screening questionnaire (SRQ-20) in primary care in São Paulo. *The British Journal of Psychiatry*, 148(1), 23–26.
- (12) Lund, C., Brooke-Sumner, C., Baingana, F., Baron, E. C., Breuer, E., Chandra, P., Kakuma, R., Medema-Mesker, T., Petersen, I., Shidhaye, R., & Thornicroft, G. (2018). Social determinants of mental disorders and the Sustainable Development Goals: A systematic review of reviews. *The Lancet Psychiatry*, 5(4), 357–369. [https://doi.org/10.1016/S2215-0366\(18\)30060-9](https://doi.org/10.1016/S2215-0366(18)30060-9)
- (13) Jorgetto, G., & Marolan, J. F. (2021). Autopercepção do sofrimento psíquico em indivíduos com sintomatologia depressiva e comportamento suicida: Percepción de depresión y comportamiento suicida. *Medicina (Ribeirão Preto)*, 54(4).
- (14) Think Olga. (2023). Esgotadas: Um olhar sobre a saúde mental das mulheres no Brasil. Acesso em 26/11/2024. Disponível em: <https://lab.thinkolga.com/wp-content/uploads/2023/10/LAB-Esgotadas-4out-1.pdf>.