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Evaluation of the lifestyle and self-esteem of hospital nursing professionals

Avaliação do estilo de vida e da autoestima de profissionais de enfermagem hospitalar

Evaluación del estilo de vida y autoestima de los profesionales de enfermería hospitalaria

Sergio Valverde Marques dos Santos[I]; Luiz Almeida da Silva[II]; Beatriz Maria dos Santos Santiago Ribeiro[I]; Leslie Diniz Alves[I]; Rita de Cássia Marchi Barcelos Dalri[I]; Maria Lucia do Carmo Cruz Robazzi[I]

[I]Universidade de São Paulo. Ribeirão Preto, SP, Brazil; [I]Universidade Federal de Catalão. Catalão, GO, Brazil

ABSTRACT

Objective: to evaluate the correlation between lifestyle and self-esteem, and their associations with sociodemographic, epidemiological, and work-related factors of nursing professionals. **Method:** this cross-sectional study was carried out with 289 workers from a hospital in the Southwest of Minas Gerais, using the *Questionário de Estilo de Vida Fantástico* (Fantastic Lifestyle Questionnaire) and the Rosenberg Self-Esteem Scale. Analysis using Pearson's Chi-square test and Person's Correlation Coefficient. **Results:** most professionals had average self-esteem and a good lifestyle. Age, physical activity, and length of time in the nursing profession were associated with self-esteem ($p<0.05$). Gender, age group, physical activity, alcohol consumption, type of housing, and work shift were associated with lifestyle ($p<0.05$). Self-esteem was correlated with the lifestyle of professionals ($p<0.05$). **Conclusion:** there is a need for changes in the lifestyle of these workers, as well as the promotion of actions that favor adequate self-esteem.

Descriptors: Occupational Health; Occupational Health Nursing; Self Concept; Life Style; Quality of Life.

RESUMO

Objetivo: avaliar a correlação entre o estilo de vida e a autoestima, e suas associações com os fatores sociodemográficos, epidemiológicos e laborais dos profissionais de enfermagem. **Método:** estudo transversal, desenvolvido com 289 trabalhadores de um hospital localizado no Sudoeste Minas Gerais, utilizando-o Questionário de Estilo de Vida Fantástico e Escala de Autoestima de Rosenberg. Análise por meio do teste Qui-quadrado de Pearson e Coeficiente de Correlação de Person. **Resultados:** a maioria dos profissionais apresentou autoestima média e bom estilo de vida. Faixa etária, prática de atividade física e tempo de profissão na enfermagem apresentaram associação com a autoestima dos profissionais ($p<0,05$). Sexo, faixa etária, prática de atividade física, uso de bebida alcoólica, tipo de moradia e turno de trabalho tiveram associação com o estilo de vida ($p<0,05$). Autoestima apresentou correlação com o estilo de vida dos profissionais ($p<0,05$). **Conclusão:** observa-se a necessidade de mudanças no estilo de vida desses trabalhadores, assim como a promoção de ações que favoreçam uma autoestima adequada.

Descritores: Saúde do Trabalhador; Enfermagem do Trabalho; Autoestima; Estilo de Vida; Qualidade de Vida.

RESUMEN

Objetivo: evaluar la correlación entre estilo de vida y autoestima, y su asociación con factores sociodemográficos, epidemiológicos y laborales de profesionales de enfermería. **Método:** estudio transversal, desarrollado con 289 trabajadores de un hospital ubicado en el Suroeste de Minas Gerais, utilizando el Cuestionario de Estilo de Vida Fantástico y la Escala de Autoestima de Rosenberg. El análisis se realizó mediante prueba Chi-cuadrado de Pearson y Coeficiente de Correlación de Pearson. **Resultados:** la mayoría de los profesionales tenían autoestima media y buen estilo de vida. El franja etaria, práctica de actividad física y tiempo de experiencia en enfermería presentaron asociación con la autoestima de los profesionales ($p<0,05$). El sexo, franja etaria, actividad física, consumo de bebidas alcohólicas, tipo de vivienda y turno de trabajo presentaron asociación con el estilo de vida ($p<0,05$). Autoestima presentó correlación con estilo de vida de los profesionales ($p<0,05$). **Conclusión:** es necesario que los trabajadores realicen cambios en el estilo de vida y que se promuevan acciones que favorezcan una adecuada autoestima.

Descriptores: Salud Laboral; Enfermería del Trabajo; Autoimagen; Estilo de Vida; Calidad de Vida.

INTRODUCTION

With technological evolution, various factors have led to changes in the world of work, which has reduced the quality of life and lifestyle of many workers. Some contemporary factors present in the workplace can affect the health of these individuals. In hospital environments, factors such as long working hours, a hostile and stressful environment, frequent shift rotations, low pay, and other circumstances have mainly affected nursing professionals, leading them to fall ill[1,2].

Corresponding author: Sergio Valverde Marques dos Santos. E-mail: sergiovalverdemarques@hotmail.com
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In this context, it is possible to note that the work process of nursing professionals can impact their physical and mental conditions and interfere with their lifestyle, which can reduce self-esteem[2,3]. From this perspective, a healthy lifestyle plays an important role in promoting health and preventing health problems in the workplace, comprising a complex system composed of various elements, one of the main ones being health[4]. This highlights the importance of a healthy lifestyle for workers, especially those involved in health services, such as nursing professionals.

Lifestyle can be influenced by the working conditions to which the nursing category is exposed. The nursing profession deals with the highest rates of family history of addiction, problems with benzodiazepines, and psychiatric comorbidities. In addition, there are also factors such as psychological distress, generalized anxiety disorder, fear of falling ill, and sleep disorders, which can lead to a poor lifestyle and can cause a change in the self-esteem of these professionals, which can directly reflect on the care offered to users of health services[5].

Self-esteem has been associated with feelings of confidence, happiness, pleasure, freedom, health, and the need for respect. It generates trust and fosters better and more balanced relationships, capable of promoting well-being and assertiveness in the work process. Therefore, for individuals to feel competent and secure, it is necessary to maintain adequate self-esteem[6]. In this way, it is believed that nursing professionals may be exposed to various illness factors due to low self-esteem, which their working conditions and inadequate lifestyle can cause[7].

There are still few studies that have looked into the relationship between lifestyle and self-esteem among nursing professionals, and the use of quantitative data collection to identify them[8]. Given the above, there is a need to evaluate the correlation between lifestyle and self-esteem among nursing professionals, and to verify the association between lifestyle and self-esteem and the sociodemographic, epidemiological, and work-related characterization variables of these workers, to produce scientific knowledge on the subject, and to evaluate the factors that need to be improved in the work environment and the lives of these workers. Thus, it is believed that the production of research on this theme can contribute to preventive policies and actions being implemented in hospital environments.

This study therefore aims to answer the following questions: Is the lifestyle of hospital nursing professionals correlated with changes in self-esteem? Are sociodemographic, epidemiological, and work-related factors associated with self-esteem and lifestyle among nursing professionals?

To answer these questions, this study aimed to evaluate the correlation between lifestyle and self-esteem, and their associations with sociodemographic, epidemiological, and work-related factors among nursing professionals.

METHOD

This is a cross-sectional, analytical study, with a quantitative approach, carried out with nursing professionals from a hospital located in the Southwest of Minas Gerais, between October and November 2021. This municipality is considered to be the fourth largest in the South/Southwest of Minas Gerais. The hospital that was part of the study is a large general hospital, a reference in urgent/emergency care, with 279 adult and children's beds with a capacity for approximately 1650 admissions/month for care in 50 medical specialties, 70% of which comes from the Unified Health System (*Sistema Único de Saúde*, SUS).

The study population consisted of nursing professionals who worked at the hospital, including nursing assistants, technicians, and nurses, working on any shift. Thus, there was a population of approximately 600 individuals. The study sample was obtained by convenience, in a non-probabilistic format, and everyone was invited to take part in the research.

The following inclusion criteria were adopted: nursing assistants, technicians, and nurses who worked at the healthcare institution studied and who had been working there for more than three months. Workers who were on sick leave, pregnant, or on vacation were excluded.

Three instruments were used for data collection, the first of which was a semi-structured questionnaire developed by the researchers, with 20 questions to evaluate data on the sociodemographic, epidemiological and work-related characterization of nursing professionals, containing the variables gender, age, marital status, monthly family income, type of housing, physical activity, alcohol and tobacco consumption, professional category, length of time in the nursing profession, length of time working in nursing at the institution, weekly workload, work period/shift, sector of work. This instrument was submitted to a refinement process with judges, to check that its items represented the universe of

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content that would allow the objectives set to be achieved[8]. Subsequently, the instrument was pilot-tested with 20 nursing professionals from another hospital institution.

The second instrument used was the *Questionário de Estilo de Vida Fantástico*, validated in Brazil. This is an auxiliary tool that is used by health professionals to understand and measure lifestyle. It consisted of 25 closed questions that explored nine domains of the physical, psychological, and social components of lifestyle and were identified with the acronym "FANTASTICO": F - Family and Friends (*Família e Amigos*); A - Physical Activity/Association (*Atividade Física/Associativismo*); N - Nutrition (*Nutrição*); T - Tobacco (*Tabaco*); A - Alcohol and Other Drugs (*Álcool e Outras drogas*); S - Sleep/Stress (*Sono/Stress*); T - Work/Personality Type (*Trabalho/Tipo de personalidade*); I - Introspection (*Introspecção*); C - Health and Sexual Behaviors (*Comportamentos de saúde e sexual*); O - Other Behaviors (*Outros Comportamentos*). The sum of all the points gives a total score that classifies individuals into five categories: "Excellent" (85 to 100 points), "Very good" (70 to 84 points), "Good" (55 to 69 points), "Regular" (35 to 54 points) and "Needs improvement" (0 to 34 points)[9].

The third instrument was the Rosenberg Self-Esteem Scale, used worldwide to measure the self-esteem of workers. Although the original instrument was developed by Rosenberg in 1965 in English, a Portuguese version was translated, adapted, and validated in Brazil. This instrument is structured with ten questions, five of which are designed to evaluate the individual's positive feelings towards themselves, and five negative feelings, using a Likert-type response scale. The possible range of this scale is from 10 (ten items multiplied by a value of 1) to 40 (ten items multiplied by a value of 4). It is conceptualized as a unidimensional instrument capable of classifying the level of self-esteem into low, medium, and high. Thus, self-esteem is classified using the following scale: a score of more than 30 points = high (satisfactory) self-esteem, a score of 20 to 30 points = average self-esteem, and a score of less than 20 points = low (unsatisfactory) self-esteem[10].

Data collection used an electronically structured form. The nursing coordinator was asked for a list of all the professionals working at the institution and their telephone/email contacts. Potential participants received electronic invitations to take part in the research via the Internet (emails, WhatsApp® groups, and social networks). Participants were sent a link to a Google Forms® document, which contained the Free and Informed Consent Form (FICF), advising them of the possible risks and benefits of taking part in the study, and the researcher's readiness to help them fill in the form when necessary. Subsequently, participants who agreed to take part in the research were given access to the questions in the instrument.

The data collected by the instruments was tabulated in a Microsoft Excel® spreadsheet, version 2010, to create a database. Subsequently, the Statistical Package for the Social Science (SPSS®) software, version 17.0, was used to develop the descriptive statistical analysis, presenting relative and absolute frequencies. The normality of the quantitative variables was checked using the Kolmogorov-Sminorv test with Lilliefors correction.

The Cronbach's Alpha Coefficient was used to evaluate the reliability of the Rosenberg Self-Esteem Scale and the Fantastic Questionnaire to evaluate internal consistency and whether the data correlates to one another. The value achieved by the Cronbach's Alpha Coefficient can vary between zero and one. Thus, the higher the value, the greater the internal consistency and reliability of the instrument, or the greater the coherence between the variables, showing homogeneity in the measurement of the same phenomenon. For this reason, it is recommended that the Cronbach's Alpha value is above 0.70[11]. In this study, the Rosenberg Self-Esteem Scale showed a value of 0.77, and the *Questionário de Estilo de Vida Fantástico* a value of 0.78.

Pearson's chi-square test was used to verify the existence of an association between the independent variables related to sociodemographic, epidemiological, and work-related factors and the Lifestyle and Self-esteem of nursing professionals. For this study, the dependent variables were dichotomized into: good/bad Lifestyle x excellent/Very good Lifestyle; and, high Self-esteem x medium/low Self-esteem. A 5% significance level was adopted for all the analyses, that is, the data was statistically significant for $p<0.05$.

After these analyses, the odds ratios (OR) of the independent variables with the dependent variables Lifestyle and Self-esteem were estimated, with the respective 95% confidence interval. Logistic regression was used for the regression analyses, given the dummy variables nature. The study's dependent variables were presented dichotomously. The independent variables, which were also dichotomized, were selected using Bayer's method[12].

Thus, all the independent variables were included in the analysis. Possible combinations of variables were selected until those that fit the model were reached. For the final model obtained, the corresponding odds ratios (OR) of the parameters were calculated.

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To verify the possible correlation between Lifestyle and Self-esteem among nursing professionals, the Person Correlation Coefficient was checked, also adopting a significance level of 5% ($p<0.05$). This coefficient measures the intensity and direction of linear relationships between variables, which refers to the degree of relationship between two variables.

Based on Resolution 466/2012, which deals with Research Involving Human Beings, the research protocol was approved by the Research Ethics Committee of the proposing institution and all participants informed their consent to take part in the study.

RESULTS

The study sample consisted of 289 nursing professionals, which corresponds to 48.2% of the total population, the majority of them female (89.6%), aged between 30 and 39 years (40.5%), with a mean age of 35.2 (+8.38) years, with a minimum age of 21 years and a maximum of 29 years. The majority were married or living with partners (51.4%) owned their own home (62.9%), had a monthly family income of between R$1,501.00 and R$3,000.00 (55.9%), with an average income of R$3,631.50 (+2,669.65), a minimum of R$1,000.00 and a maximum of R$28,000.00. The epidemiological data showed that the majority of professionals consumed alcohol (55.2%), were non-smokers (94%), and did not practice physical activity (47.2%).

When evaluating the distribution according to professional category, it was observed that the majority belonged to the group of nursing technicians, with up to ten years of professional experience in nursing and working at the institution, working up to 40 hours a week at the institution, on the morning shift and working mainly in the medical clinic and Oncology sectors.

When evaluating the self-esteem of nursing professionals, it was possible to verify that 30.77% of them had high self-esteem. It is worth noting that there was a significant percentage of professionals classified as having medium self-esteem (68.18%), and only 1.05% of professionals had low self-esteem.

According to the evaluation of the participants' lifestyle, it was observed that most of the participants were classified as having a “good” lifestyle (43.71%). On the other hand, 9.09% of the participants had a ”regular“ lifestyle, according to the questionnaire scores. Table 1 shows the results of the bivariate analyses for self-esteem and the lifestyle of nursing professionals.

Table 1: Bivariate analysis of factors associated with self-esteem and lifestyle of nursing professionals (n=289). Southwest of Minas Gerais, Brazil, 2021.

	Self-esteem		
Variables	**Low/Medium**	**High**	**p- value***
Age group (years old)			<0.001
20-39	152 (76.8%)	46 (52.3%)	
40+	46 (23.2%)	42 (47.7%)	
Physical activity			0.001
Do not practice physical activity	106 (53.5%)	29 (33.0%)	
Practice physical activity	92 (46.5%)	59 (67.0%)	
Length of time in the profession (years)			0.035
Up to 10	121 (61.1%)	42 (47.7%)	
10+	77 (38.9%)	46 (52.3%)	
Age group (years old)			0.015
20-39	84 (62.2%)	114 (75.5%)	
40+	51(37,8%)	37 (24.5%)	
Physical activity			<0.001
Do not practice physical activity	47 (34.8%)	88 (58.3%)	
Practice physical activity	88 (65.2%)	63 (41.7%)	
Type of house			0.027
Own	94 (69.6%)	86 (57.0%)	
Others	41 (30.4%)	65 (43.0%)	
Work shift			0.045
Morning/Afternoon	114 (84.4%)	113 (74.8%)	
Night	21 (15.6%)	38 (25.2%)	

Notes: *Pearson's Chi-square test

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The variables age (p<0.001), physical activity (p=0.001), and length of time working in nursing (0.035) were significantly associated with self-esteem. Thus, it can be said that professionals aged between 20 and 39 are more likely to have medium or low self-esteem, as are those who do not practice physical activity and who have worked in nursing for up to ten years.

Regarding lifestyle, the variables age group, physical activity, type of housing, and work shift were found to be significantly associated with the lifestyle of nursing professionals (P<0.05). It can therefore be said that professionals aged between 20 and 39 are more likely to have a good or regular lifestyle, as are those who do not practice physical activity, own their own home, and work the morning shift.

Table 2 shows the statistically significant results of the analysis of the parameters of all the independent variables with the lifestyle of nursing professionals, using the logistic regression model,

Table 2: Evaluation of the parameters of the logistic regression model of the independent variables with the lifestyle of nursing professionals (n=289). Southwest of Minas Gerais, Brazil, 2021.

Variables	Estimate	Standard Error	OR*	CI (95%)†	p-value
Gender - female	-0.844	0.48	0.43	0.168-1.102	0.079
Consumption of alcoholic beverages- yes	1.044	0.277	2.839	1.651-4.883	<0.001
Practice physical activity - no	1.101	0.285	3.008	1.720-4.258	<0.001

Notes: *OR=Odds ratio; †CI= Confidence Interval (lower/upper).

The variables gender, alcohol consumption, and physical activity were found to be associated with lifestyle, resulting in a final adjusted model. The final model indicates that being female was a potential protective factor, reducing the chance of being classified as having a bad or good lifestyle by 57%. On the other hand, for workers who drank alcohol and did not practice physical activity, the chances of having a bad or good lifestyle were 183% and 200% higher, respectively.

After analyzing the parameters of all the independent variables with the self-esteem of nursing professionals, using the logistic regression model, it was found that no variable showed a significant association with self-esteem, resulting in no final adjusted model.

Figure 1 shows the findings for the analysis of the correlation between self-esteem and lifestyle among nursing professionals.

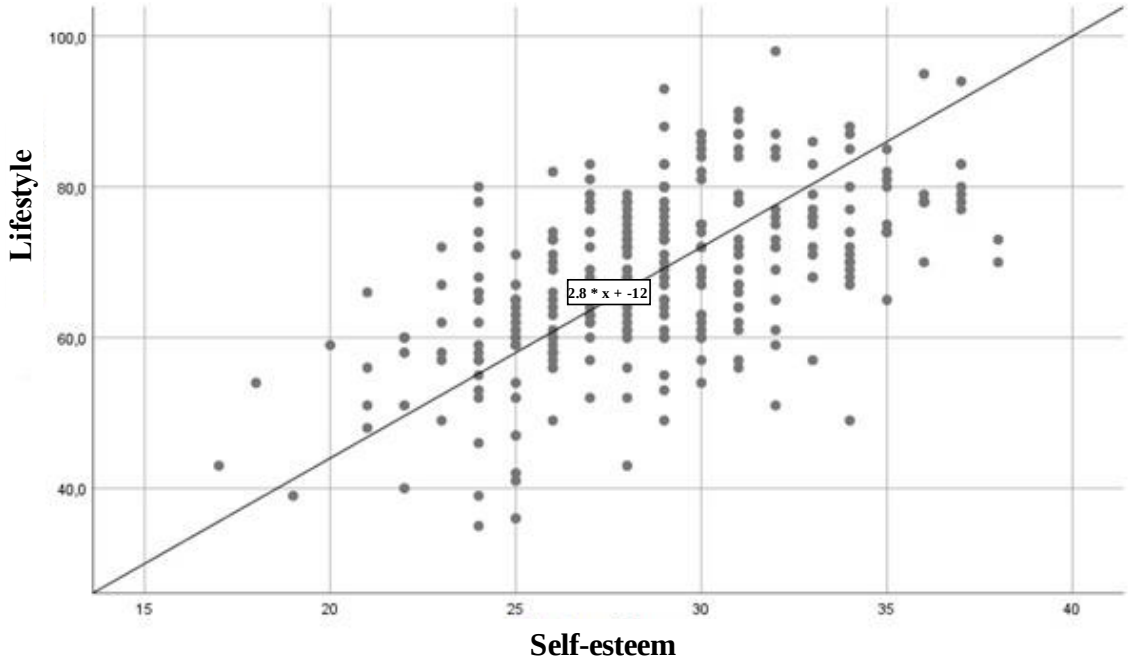

Figure 1: Pearson correlation analysis between self-esteem and lifestyle of nursing professionals (n=289). Southwest of Minas Gerais, Brazil, 2021.

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Self-esteem was found to have a positive correlation with the lifestyle of nursing professionals ($p<0.001$), with a Person correlation coefficient of 0.551. This means that workers with medium or low self-esteem are more likely to have a good or bad lifestyle (Figure 1).

DISCUSSION

After analyzing the data and the literature, it can be seen that the sociodemographic, epidemiological, and work-related findings of nursing professionals corroborate other studies that also evaluated the sociodemographic, epidemiological, and work-related characteristics of hospital nursing professionals.

In this study, the majority were female, aged between 30 and 39, married or living with a partner, owning their own home, with an average monthly family income of 3,631.50 Reais, consumed alcohol, and were not smokers, most of them did not practice physical activity. It was also found that the group was mostly made up of nursing technicians, with up to ten years of professional experience in nursing and working at the institution, working up to 40 hours a week at the institution, on the morning shift and working mainly in the medical clinic and Oncology sectors.

In an investigation carried out at a university hospital in Rio Grande do Sul, Brazil, in 2019, it was pointed out that nursing is composed of the majority of female professionals, with an age range of 30 to 39 years, composed of the majority of nursing technicians and the largest nursing workforce allocated to the morning work shift[13]. In the international context, data from hospitals in China, obtained from 717 nursing professionals, showed that the majority of professionals had technical and auxiliary training and had worked in the institution for up to ten years[14]. In South Korea, a study of 226 nursing professionals found that they worked shifts of 8 hours a day and 40 hours a week and had worked for up to eight years[15].

When evaluating the self-esteem of nursing professionals, it was observed that most of them were classified at an average level, which is not consistent with good self-esteem. As for lifestyle, most of the participants were classified as having a “good” lifestyle, which also does not represent an adequate lifestyle for an individual, this being an element of self-concept that is determined as the set of personal thoughts and feelings, which has the individual himself as a referential object[6].

Regarding self-esteem, these data differ from a study carried out with 393 nursing professionals, the majority of them had high self-esteem (70.2%)[7]. Workers who have high self-esteem show signs of positive self-regard. In this way, it can be developed through each person's life experiences[6].

In nursing, it is important for professionals to have good self-esteem, especially because they are caring for other people. For this reason, attention is drawn to health service managers to promote actions aimed at the mental health of nursing workers.

Regarding lifestyle, it is not so desirable for professionals to reach the “good” classification because the lower the score, the greater the need for lifestyle changes[17]. It is therefore believed that nursing professionals may be exposed to various illness factors, such as mental illness or low self-esteem, which can be caused by their working conditions and lifestyle[7].

In a study of 235 health workers in the north of Minas Gerais, an overall average lifestyle score of 72.38 points was observed, which predicts a “Very good” lifestyle. These data indicate that these professionals can have an adequate lifestyle. However, there is still a need for greater investment to promote quality of life at work for nursing professionals[15].

This study also found that the variables age group, physical activity, and length of service in nursing were significantly associated with the self-esteem of nursing professionals. This shows that these workers may have medium or low self-esteem as a result of these associated factors.

In a study carried out in the eastern region of Paraná, it was found that length of professional experience, lack of physical activity, and age are factors that can influence self-esteem, highlighting the need to carry out preventive interventions for young people to become satisfied professionals with adequate self-esteem. In another study in the northern region of Paraná, it was observed that the length of time in the profession, working in the institution, and the workload are determining factors for the occurrence of mental disorders, such as burnout syndrome and reduced self-esteem in nursing professionals[18].

It should be noted that self-esteem can also be influenced by factors such as anxiety, aggression, and violence, as well as religiosity and spirituality[19-22]. This shows how important it is to maintain adequate self-esteem

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among nursing professionals, especially as they are exposed to a variety of adversities in the hospital work environment.

As for lifestyle, only the variables gender, age group, physical activity, alcohol consumption, type of housing, and work shift were associated with the lifestyle of nursing professionals. These results indicate that these variables can modify the lifestyle of nursing professionals. A study has shown that the use of alcoholic beverages among nursing professionals and the fact that many do not practice physical activity corroborates a higher prevalence of factors associated with minor mental disorders, which may influence the lifestyle of these workers[23].

It was found that being a female nursing professional was a protective factor, reducing the chance of being classified as having a bad or good lifestyle. Data from another study with university students showed that males were more likely to have a better lifestyle. However, those workers who used alcohol were more likely to have a poor or good lifestyle, with a greater influence on the prevalence of negative health perception[24]. A study with adolescents showed that not doing any physical activity or a low level of activity led to a poor lifestyle[25].

Other studies have also shown the influence of certain lifestyle variables, such as alcoholism, smoking, poor diet, sleep, spirituality, and quality of life[25-27]. Despite the significant advances in quality of life in the health services provided to workers, even so, most of the time health professionals act in favor of their clients' well-being, neglecting to take care of their health, which interferes with their healthy lifestyle[28].

Finally, this study demonstrated that self-esteem has a positive correlation with the lifestyle of nursing professionals, determining that workers who have average or low self-esteem are more likely to have a good or bad lifestyle. Thus, it is believed that nursing professionals may be exposed to several factors of illness, such as mental illness, due to low self-esteem, which the working conditions and inadequate lifestyle of these workers can cause[7].

In this context, it is important to mention that the hospital is a favorable environment for nursing workers to become ill. The changes that have occurred in recent years have had an impact on the health of professionals, causing changes in work relationships, lifestyle, and self-esteem of workers[2,7].

Currently, there is an increase in workload, with nursing professionals who do not have an adequate environment to work, with a lack of materials, an overload of tasks, in addition to low professional and financial appreciation. These factors can generate high consumption of physical and spiritual energy, affecting their daily lives outside of work, leading to problems such as addictions, eating disorders, insomnia, and emotional dysfunctions, which interfere with a healthy lifestyle and cause a reduction in the professional's self-esteem in the workplace[2,7].

Given the above, about the lifestyle of nursing professionals, it is necessary for health institutions to develop policies that ensure the prevention of occupational health, especially those that can provide an adequate lifestyle[24]. It is recommended that projects be implemented to improve the quality of life in the workplace, occupational safety, fair pay, and the promotion of a healthy lifestyle. In this way, nursing professionals will be able to develop adequate self-esteem, which will consequently have a positive impact on the quality of care offered to users of health services.

Study limitations

An important limitation of this study is its cross-sectional and localized design, which does not allow for establishing direct causal relationships and generalizations. However, it contributes to the advancement of scientific knowledge, especially in nursing.

Therefore, it is suggested that additional research be carried out focusing on this topic, especially investigating the cause-and-effect relationships between lifestyle changes and nursing professionals' self-esteem. This can expand existing knowledge and support the implementation of effective actions to promote the health of these workers.

CONCLUSION

The results of this study indicated that most nursing professionals had average levels of self-esteem, and some of them demonstrated a healthy lifestyle. It was observed that variables such as age, physical activity, and time working in nursing can influence self-esteem. In addition, it was identified that certain factors, such as

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gender, age, physical activity, alcohol consumption, type of housing, and work shift, can impact the workers' lifestyle.

Additionally, it was found that self-esteem is positively correlated with the lifestyle of nursing professionals, indicating that those with average or low self-esteem are more likely to adopt a lifestyle considered good or bad.

These findings highlight the importance of promoting lifestyle changes for these professionals and implementing actions that encourage healthy self-esteem. Healthcare institutions that consider this theme can develop strategies, programs and support initiatives in the workplace to promote healthy habits and improvements in self-esteem, which can result in reduced healthcare costs for workers, better working conditions, and higher quality of care provided to healthcare users.

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Author's contributions

Conceptualization, S.V.M.S., L.A.S. and M.L.C.C.R.; methodology, S.V.M.S. and L.A.S.; software, L.A.S.; validation, R.C.M.B.D. and B.M.S.S.R.; formal analysis, B.M.S.S.R. and L.D.A.; investigation, S.V.M.S. and L.A.S.; resources, S.V.M.S. and M.L.C.C.R.; data curation, L.A.S. and R.C.M.B.D.; manuscript writing, S.V.M.S., B.M.S.S.R. and L.D.A.; writing – review and editing, M.L.C.C.R. and R.C.M.B.D.; visualization, L.A.S.; supervision, M.L.C.C.R.; project administration, S.V.M.S. All authors read and agreed with the published version of the manuscript.