The mental and emotional health among nurses in critical care settings have been affected by stressors in the workplace. Stressors include death of patients, limited coping strategies, and negative interactions with the healthcare team. Exposure to stressors can lead to deviations in mental and emotional health.

The aim of this literature review was to identify research related to the mental and emotional status of critical care nurses, as well as potential solutions to their emotional and mental strain.

A systematic review of studies related to the mental and emotional health of critical care nurses was conducted using the Academic Search, CINAHL, MEDLINE, and PsycINFO databases. The data reviewed was published between 2012 and 2017. The initial search produced 1,082 articles. After the application of the inclusion criteria and reviewing the articles, 10 were chosen that were relevant to the study.

There is a significant incidence of issues including PTSD, depression, anxiety, burnout, and exhaustion among nurses in the critical care role. According to the literature, 86% of nurses reported experiencing Burnout Syndrome, and 46% reported a psychological issue, such as anxiety, depression, and PTSD (Janda & Jandová, 2015; Ntadntana et al., 2017). Fatigue and work stress are common symptoms in critical care nurses.

Nurses in critical care settings would benefit from education related to the coping skills needed for the situations they face daily. Programs such as resilience training, which lead to decreased negative symptoms caused by stress, would be an excellent tool to help nurses cope with stress (Mealer, Conrad, Evans, 2014). In addition, social meetings with department staff can improve relationships and reduce work-related depression (Lin T., Lin H., Cheng, Wu, Ou-Yang, 2014). Further research should be done to find what type of coping skills work best for nurses in each environment.

The critical care setting puts an immense amount of stress and fatigue on a nurse. These mental and psychological issues can affect the nurse negatively causing barriers in providing quality patient care. Nurses will continue to deal with these problems until outlets like resilience training and social meetings are more readily available.