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# A phenomenological study: The dynamics of psychological well-being among mental health workers

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**Abstract**

*Mental health workers are a group that is particularly vulnerable to psychological distress. Limited availability of mental health personnel combined with excessive workload may adversely affect their psychological well-being, both at a personal level and in the delivery of mental health services. This study aimed to explore the dynamics of psychological well-being among mental health practitioner. A qualitative phenomenological approach was employed, with data collected through in-depth interviews with three participants. The findings indicate that the participants' psychological well-being was generally stable, despite the presence of work-related stress in the form of pressure and ongoing challenges. Internal factors contributing to psychological well-being included self-acceptance, adaptability, effective stress management, and a sense of meaning in both work and life. External factors, including interpersonal relationships and professional commitment, served as supportive elements for the internal factors. Together, these internal and external factors functioned as a balance against work-related stress. The study further revealed that each participant developed personal strategies to maintain and regulate their psychological well-being.*

***Keywords**: mental health; mental health workers; psychological well-being*

## INTRODUCTION

According to a World Health Organization (WHO) report, Indonesia is among 57 countries facing a healthcare workforce crisis. This situation has resulted in an unequal distribution of medical personnel across regions. Yet, approximately 80% of successful development in the health sector depends heavily on the availability and role of healthcare workers (Lestari et al., 2020).

The lack of skills in medical personnel is also a factor contributing to the high inequality in the distribution of medical personnel. For example, mental health workers require more skills and experience. Lack of human resources and training for mental health workers can impact the

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quality of care (Retnaningsih et al., 2023). In all community health centers, there is only one mental health nurse, most of whom are concurrently serving in other clinics, such as general clinics, geriatric clinics, and village midwives (Lestari et al., 2020). The limited availability of mental health workers inevitably leads to excessive workloads and ineffective service delivery, thus impacting the psychological well-being of mental health workers (Van Bogaert et al., 2012). Many factors contribute to increased stress and negatively impact nurse well-being, including excessive workloads, long working hours, a fast-paced work environment, lack of physical and psychological safety, demands for ongoing care, ethical dilemmas, uncertainty about job stability, workplace violence, workplace bullying, and minimal support from colleagues (Woo et al., 2020).

Anger et al. (2024) conducted a review of 50 intervention studies focusing on the mental health of healthcare workers, including nurses and mental health workers. They found that nurses are the group most vulnerable to psychological disorders. The main causes include heavy workloads, exposure to patient suffering, role conflict, and lack of organizational support. Most nurses also showed a decline in psychological well-being due to chronic work pressure and a lack of effective coping mechanisms. Field data revealed unequal distribution of healthcare workers, excessive workloads, and various psychological pressures faced by mental health workers.

Findings in Indonesia show a different trend from the results of these international studies. Fauzia and Batubara (2022) reported that mental health nurses at the West Java Provincial Mental Hospital continued to demonstrate high levels of psychological well-being. Ninety-six percent of respondents demonstrated positive self-esteem, were able to build healthy interpersonal relationships, and demonstrated the ability to manage their work environment. This indicates that a heavy and challenging workload is not always accompanied by a decline in psychological well-being, as nurses can still maintain psychological balance and demonstrate adaptive functioning in the face of professional pressure.

Another study by Isnawati and Yunita (2019) showed that the majority of mental health cadres in West Java have high psychological well-being, tending to exhibit happiness and positive feelings in carrying out their duties. This reflects their ability to carry out their roles responsibly and enthusiastically. The findings also indicate that psychological well-being not only influences an individual's emotional state but also impacts work effectiveness, service quality, and mental resilience in navigating the dynamics of mental health work.

Research in Indonesia generally shows that mental health nurses maintain a positive psychological state through strong adaptability, social support from colleagues and the organizational environment, and a positive sense of belonging to their profession despite the unequal distribution of healthcare workers, excessive workloads, and certain psychological stresses. These factors help mental health nurses maintain emotional balance and a sense of purpose in their work, enabling them to manage stress and continue to provide empathetic, professional, and effective care to patients. There are differences in psychological well-being between Indonesians and internationals. This is certainly an interesting finding to explore the

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causes of these differences. The gaps are compelling enough to warrant further research, exploring the subjects' experiences in depth, to gain a deeper understanding.

This study's limitations lie in its focus on mental health workers as the primary subjects and their dynamics, descriptions, and efforts to maintain psychological well-being. This study does not address age and gender. This research is expected to contribute significantly to a deeper understanding of the psychological well-being of mental health nurses, particularly in the context of mental hospitals in Indonesia. Through the results of this study, readers are expected to gain insight into how psychological well-being is formed, maintained, and tested in emotionally stressful work situations, specifically within the healthcare workforce. Furthermore, this research is also expected to serve as a basis for developing more effective psychological intervention strategies and organizational policies to maintain the mental balance of mental health workers. Thus, the findings of this study not only enrich the academic literature in the field of health psychology but also provide practical benefits for policymakers and hospitals in creating a work environment that supports psychological well-being and improves the quality of care for patients with mental disorders.

## METHOD

This study used a qualitative approach aimed at understanding the description and meaning of psychological well-being among mental health workers at the Sine Community Health Center. Specifically, this study employed a phenomenological approach, which attempts to explain the meaning of a person's life experiences regarding a concept (Creswell 2016). Through this phenomenological approach, the researcher explored in depth the dynamics, description, and meaning of psychological well-being for mental health workers. The sample was taken using a non-probability sampling technique, namely purposive sampling. Purposive sampling is a sampling technique with certain considerations, for example, the person or source considered most knowledgeable about the condition being studied (Sugiyono 2013). This study had three respondents with the criteria of being mental health workers: a mental health programmer (nurse), a village midwife, and a mental health cadre working at the Sine Community Health Center, Ngawi, East Java. Field sampling was conducted by considering health workers who come into contact with and provide direct care to mental health patients.

**Table 1. Demography of the Respondents**

| Name | Respondent 1 | Respondent 2 | Respondent 3 |
|---|---|---|---|
| Initial | N | A | W |
| Age | 45 | 39 | 55 |
| Profession | Nurse | Midwife | Cadre |
| Gender | Female | Female | Female |

The data collection process was conducted using semi-structured interviews. According to Herdiansyah (2015), the characteristic of semi-structured interviews is that the questions are open-ended, allowing participants to freely express their opinions. The interview guide was designed to uncover or explore the psychological well-being of mental health workers. Before

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conducting the interview, the researcher explained the purpose of the interview. After agreeing to the interview, the researcher asked participants to complete an informed consent form. Each interview lasted approximately 20-50 minutes.

The data analysis process began with creating verbatim transcripts of the interviews. Each participant's statement was coded. The resulting codes were recorded to describe the psychological well-being of mental health nurses, and the research findings were interpreted based on existing theories. Finally, the researchers elaborated on the results from all participants to obtain appropriate dynamics and accurately describe the situation (Creswell & Poth, 2018).

## RESULTS AND DISCUSSION

### Result

Based on the categorization results from interviews with three mental health workers with different psychological well-being experiences, several main themes emerged. These themes included stress, internal themes, and external themes. Each theme was then broken down into several subthemes as research findings. Interview excerpts in the results section are coded R1, R2, and R3, referring to Respondent 1, Respondent 2, and Respondent 3, respectively.

#### *Stress*

There is one sub-theme based on the results of interview coding related to the challenges faced by respondents at work.

*Challenges and pressure at work*

In carrying out her work, Respondent 1 faced various challenges, such as unstable moods and frequent feelings of fatigue and stress. However, despite these limitations, she continued to work, driven by a strong sense of empathy and humanity for others.

> "sometimes it is influenced by what it is for, my mood, for example in providing service when there might be things that I don't feel in the mood for that day, or maybe when we have a lot of work, sometimes I have limitations there." (R1)

> " Yes, I'm tired, thinking about myself, why are you like this? But then again, based on humanity, Miss, if not us, who else?" R1)

Besides mood swings, technological advancements also pose challenges. Respondent 2 experienced difficulty and stress when confronted with technology. The challenge she experienced was balancing her knowledge with the use of technology in her work.

> " My challenge is when I meet new things… But I think, 'oh my,' maybe I'm not tech-savvy in this, but I'm not tech-savvy in that… As the times develop, I have to be able to keep up… So that's the challenge." (R2)

Based on the interview, unstable emotional changes and rapid technological advances are challenges and pressures that arise at work.

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***Internal***

There are 5 sub-categories according to the results of interview coding related to internal matters related to psychological well-being.

*Self-Acceptance*

Respondent 1 is aware of her own abilities and will provide assistance according to her capacity. She feels she cannot yet give her best, but she is still striving to do her best within her capacity.

> " I may not be able to provide the best possible service for the residents here, but at least I try my best in terms of service."(R1)
>
> " Yes, we just do what we can, Miss. So if we can be of use to others, that's probably the way to go." (R1)
>
> " Even if the assistance is still within my capacity and perhaps I am capable, I will try to help." (R1)
>
> "Yes, the point is that I can carry out my function and also carry out my role in all the lines that I have to play, I feel that is enough, Sis." (R1)

Respondent 2 recognized her own abilities and accepted them with open arms. Furthermore, she consistently upgraded herself to develop skills that could support her potential.

> "...In my opinion, I'm okay with my abilities. This way, my image is already quite relaxed. The important thing is that people judge us, if we are as capable as we can be... later if my shortcomings are still this, then I won't hone them anymore... I can do several workshops a month... So I can be like you too." (R2)

Respondent 3 did not feel that he had any advantages, but interpreted her role as someone who had to "embrace" patients and be a friend to both patients and their families.

> "I don't feel like I have any advantages, I'm just happy because I have to embrace them... I'm just taking it easy hahahaha" (R3)

Based on the interviews, the responses from all three respondents demonstrated an awareness of their abilities. With these perceived shortcomings, respondents engaged in self-upgrades to develop their skills.

*Adaptive*

Respondent 1 acknowledged her limitations but was able to adapt to them and continue to strive to fulfill her role as a mother and caregiver. She was also open to differences and didn't force them to be the same.

> " I'm here as a mother, yes. I have two children, so I'm here as a mother… I'm a single mom, yes. So, no matter what, I remain positive, or not positive, I still have to fight for the survival of my two children, my job, and my dignity as a nurse." (R1)
>
> ".... we each have our own unique way of serving patients. So, communication, service, touch, and so on will all be different, and it's up to the patient to decide whether they're comfortable with this or not. So, we can't force things, like, "It has to be this, it has to be that."" (R1)

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Respondent 2 demonstrated adaptability when involved in work conflicts. She was able to make sound decisions. She also didn't feel burdened by differences of opinion during the conflict.

> “With the community? With the patient? Well, of course. There's bound to be conflict. Sometimes I wish it were this way, because midwives have to make decisions quickly. Because patients need them immediately. I'm not too burdened, and the patient is safe. The family is safe too. That's it.” (R2)

According to three respondents, making accurate and quick decisions is paramount. They avoided feeling burdened and focus on solutions. They also welcomed input and criticism from colleagues or patients' families.

> “ And that was once, Sis, we left for the hospital at 8 PM, bringing her to the mental hospital. Yes, at 8 PM. It was a relapse from before Maghrib until after Isha, then we left for the mental hospital to take her. We arrived home at 2 PM.” (R3)

Based on the interviews, the three respondents were able to adapt to their roles and responsibilities, make quick and accurate decisions, and maintain emotional resilience when faced with conflict. Their openness to differences, focus on solutions, and willingness to accept input reflect personal resilience and professionalism in carrying out their roles as healthcare workers.

*Adaptive stress management*

Respondent 2 had good stress management and did mix personal and work issues.

> “No, not really. For example, if a patient is in a bad mood and is being treated badly. No, it’s like that. Well, it’s human, sometimes there might be problems at home and then there’s this (affecting feelings), but that’s okay. If it’s not good, just make it easier. Find a friend who can (cope) with it.” (R2)

Based on the interviews, all three respondents demonstrated good stress management skills. They tried not to bring personal problems into work and recognized the boundaries between home and professional responsibilities.

*The meaning of work*

Although the current job wasn't Respondent 1's dream, she continued to give her best, viewing her work as valuable, and she lived it with sincerity and resignation. She believed that her work always had value and was recorded by God.

> "But after I became a nurse for private sector patients, I've become more down-to-earth. The important thing is that we can provide better things for others. So I'm better, even though I may not have had aspirations like this before... But now that I'm here, employed here, I can be close to them and perhaps provide a little service like that." (R1)

> "Yes, it's very valuable to me. At least I think God is keeping track of everything, although I don't know." (R1)

Respondent 2 defined her work as a calling. For her, becoming a midwife has been a long-cherished dream. She felt that her calling lies in serving the community. She was proud and confident in her profession, as evidenced by the progress she has made.

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> "Becoming a midwife is indeed my desire. It's my dream. So, despite the onslaught of this and that, I just go with it, because it's my goal. So, whatever they say, because I'm already happy, that's it. I just make people happy... I love interacting with the community. Yes, that's my calling..." (R2)

Respondent 3 interpreted working as fighting for the dignity of others, besides that, according to the source, this work can help people with disabilities to be recognized by society.

> "What's clear is that I want them to be recognized by society. At least, they'll get attention from their families or neighbors." (R3)

Based on the interview, the three respondents interpreted their work as something that had the value of worship, service to the community and meaning in life, which helped the respondents to persist in carrying out their roles optimally.

*Meaning of life*

Respondent 1 expressed satisfaction and gratitude for her current situation from the work she had done. She became more down-to-earth and changed her perspective on the future, but she still had goals she wanted to achieve.

> "First, we should be incredibly grateful. Perhaps we're still sane right now, alhamdulillah. I might also imagine myself if a family member were suffering like that, how stressful that would be." (R1)

> "So, personally, it might be easier to realize that, as I said earlier, I'm more down-to-earth, understanding things perhaps simply and perhaps not so grandiosely. So, in essence, I'm also better able to appreciate other things or small considerations, which might not be so important to me, but they might be to others." (R1)

> "So, perhaps, even though my perspective has changed regarding looking forward, there are still things I need to achieve beyond that, perhaps related to my future." (R1)

Based on the interview, respondents interpreted life with gratitude for the psychological well-being they had and appreciated the little things around them more.

***External***

There are two sub-themes based on the results of interview coding related to external factors of psychological well-being.

*oRelationships with Others*

Interview results with Respondent 1 revealed a positive relationship built between the interviewees. There was cooperation and mutual assistance among coworkers, as well as a sense of usefulness and joy when sharing.

> "...alhamdulillah, everything is fine. I mean, the coordination is running smoothly…so far, the working environment at this Community Health Center has been very comfortable for me…although there may be some things that are a bit tough or perhaps there are some things that are a bit difficult in coordinating services in the field, but in line with that, we can also still compromise with ourselves." (R1)

Respondent 2 had good and positive relationships with those around her. This is evident in the interviewee's description of her relationships with family, coworkers, and patients. She also frequently exhibited prosocial behavior by helping colleagues and the community and working

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wholeheartedly.

> "With family, so far it's been safe and under control... It's the same with friends... cooperation is also good... Yes, I help as much as possible. Yes, what they need. Maybe they need this, maybe they need something else." (R2)

Respondents demonstrated empathy for patients with disabilities. Respondent 3 also had good relationships with patients, their families, and coworkers.

> "Because I'm happy, I'm happy. I feel sorry for them, especially the neighbor next door, because she doesn't have the term, right? No, no one pays attention." (R3)

> "Thank God, I'm happy and feel... cared for. The family feels cared for." (R3)

Based on the interviews, all three respondents demonstrated positive social relationships with coworkers, family, patients, and the community. These relationships made them feel useful and happy, thus strengthening their psychological well-being.

*Professionalism*

Respondent 1 carried out her duties and responsibilities responsibly and professionally. She understood the existence of differing opinions and perspectives, but was willing to be open and collaborative with those differences. She also understood the various roles she played and was able to adapt well to each of them.

> "Yes, Miss. There are differences in perceptions of each problem, but no matter what, there's always a solution to be found. Having a common understanding doesn't have to be the same, but at least we find a middle ground where both people can work together and be comfortable together. So far, the conflict has been resolved amicably." (R1)

> "...But here I have to work as a community servant, okay. But at home I have to be a mother, so I play my role. Even in society, I'm expected to be a good member of society, so that's my role." (R1)

Respondent 2 also worked with an understanding of the limitations of her own abilities and maintains professionalism. When she encountered challenges in providing care, she collaborated with colleagues. She could also work both individually and in a team, accepting input, suggestions, and intervention in decision-making.

> "In situations where I really can't handle it. I'm at a dead end... if I really can't, then I'll just call Ms. Nia, Mr. Babinsa... As long as the intervention is rational, I'll just accept it... I'll just enjoy it here, and work with loyalty." (R2)

Respondent 3 described the challenges she experienced at work, such as rejection and stigma surrounding mental health patients. However, she still accepted these challenges openly.

> "I'll just do it like this, sis, I try to be nice, but if he thinks I'm not nice, that's fine. The important thing is that I try to be nice, that's all... I still ask for help. Help from other people sometimes too." (R3)

The interviews revealed that the three respondents demonstrated a sense of responsibility, ability to work in a team, and acceptance and respect for others' opinions. These attitudes contribute to building positive interpersonal relationships and supporting positive psychological well-being.

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**Discussion**

This study aims to explore the dynamics and characteristics of the psychological well-being of psychiatric nursing staff. Based on interviews with three mental health workers, several findings illustrate the dynamics of psychological well-being. Psychological well-being can be assessed by the type of stressor and how individuals cope with it. Among mental health workers, various stressors were found to arise from work challenges. The first respondent stated that challenges that became stressors at work were related to mood swings and work environment conditions, such as the emergence of difficult patient behavior. In healthcare settings, nurses play a crucial role in providing patient care. The most common challenge faced is the pressure and stress that accompany difficult patient behavior. This is in line with research conducted by Nugroho and Riyadi (2023) which discussed work stress. It was found that several factors contribute to high levels of stress in mental health nurses, including limited knowledge, dissatisfaction with interpersonal relationships, lack of social support, and frequent direct interaction with patients with various diagnoses.

Rapid developments require rapid adaptation for mental health workers. Skills related to the use of the latest technology present a challenge for mental health nurses in treating patients. Limited skills in operating computers and the latest technology can impact the delivery of healthcare services. Research conducted by Bimerew (2024) examined the barriers and supporting factors to the adoption of digital technology to facilitate healthcare providers. It was found that barriers to digital technology use include workload, time constraints, limited computer access, and lack of information-seeking skills.

Several internal factors can alleviate stress caused by challenges in working for mental health workers. Self-acceptance is an internal factor that is quite helpful in reducing stress. Self-awareness is a necessary characteristic in nursing practice, especially in psychiatric nursing. This is in line with research by Parastesh et al. (2025), which found that a professional is someone who knows themselves, namely someone who understands their qualities, both in terms of personal qualities, character traits that support work, and factors that hinder them in carrying out their duties. Furthermore, accepting one's limitations is a form of awareness that can motivate individuals to further develop themselves. In research conducted by Li et al. (2022), there were significant differences in nurses or clinical health workers who participated in the Nursing Ladder Program training. Health workers who participated in the training had significantly higher levels of motivation, satisfaction, perceptions of increased professional competence, and a sense of accomplishment. Continuous professional development can be carried out through various trainings and further formal education to support the provision of services to the community (Fitriana & Amir, 2021).

The ability to adapt and be open to differences of opinion is closely related to psychological well-being. Research conducted by Saptoto (2010) revealed how adaptive coping skills enable individuals to manage their emotions and resolve conflicts appropriately, as well as adapt effectively to demands and changing situations. In providing mental health care, it is not uncommon for staff to encounter conflict, whether with colleagues, patients, or their

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families.

Based on the experiences of the three respondents, conflicts with the patient's family were found. Some families remain in denial about the patient's condition. Families often ask mental health workers to delay medical care and prioritize alternative treatments. When healthcare workers are faced with conflict with a patient's family regarding care and treatment, it is crucial for them to maintain the family's well-being. Empathy and consideration are essential in providing care. In a study by Mehter et al. (2018), to reach the best decision, healthcare workers need to provide emotional support to the patient's family. Therefore, good self-regulation is needed for mental health workers to be able to provide effective healthcare services without compromising personal psychological well-being. This aligns with Gross's (2015) findings, which state that good emotional regulation plays a crucial role in maintaining psychological well-being in high-stress professions.

Mental health workers with good psychological well-being naturally manage stress effectively. They avoid mixing personal and work-related issues. Therefore, in addition to providing excellent service, mental health workers also maintain good psychological balance. In their research, Kinanti et al. (2025) explained that the better their ability to manage stress, the higher their level of psychological well-being. Education on good stress management can also improve midwives' knowledge and attitudes in providing health services (Kristanti et al., 2025). This means that respondents in this study demonstrated adaptive work management, resulting in a balanced psychological well-being.

Meaningfulness in work provides a balance of psychological well-being for mental health workers. Respondent one defined her work with gratitude for the circumstances she faced. Meeting various types of mental patients fostered gratitude within the respondent, both in terms of life and the work she faced. Research by Wnuk (2025) found that gratitude for the work undertaken creates meaning. Another finding was that meaning in life, hope, and gratitude cannot be found without a commitment to God as a source of support in stressful situations. In addition to the meaning of work, Respondent one gained meaning in life through her work, namely understanding the importance of mental health for each individual. By working as a mental health nurse, Respondent one better understood the meaning of gratitude for psychological health. Research by Cholilah (2020) stated that meaningfulness in life and gratitude within an individual are positive emotions related to fulfilling needs and positive self-functioning. Individuals who understand this meaning make their lives more productive and prosperous, thereby improving their performance in the workplace.

Meanwhile, Respondent 2 interpreted her work as a calling, an ideal, and a source of personal pride in serving the community. Linhares (2012) explained that the meaning of life as a calling for midwives in carrying out their profession provides a sense of purpose, self-identity, and direction in life. Awareness of this enables midwives to survive emotionally and psychologically in facing the demands, pressures, and complexities of work practice. In a study by Buchanan et al. (2025), several findings relevant to the interviewee's opinion were that emotional work in the midwifery profession is meaningful when recognized, but can become

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a source of exhaustion when exploited in the workplace. Furthermore, work flexibility, control over shift patterns, managerial support, and the opportunity to work within a continuity of care model enable midwives to experience joy, satisfaction, and full presence in practice.

Respondent 3 interpreted her work as having a social purpose. She aimed to ensure that mental patients were socially recognized. She also perceived her work as a means of fighting for the dignity of others and for social recognition, as this is a right of every human being. Achieving the social goals he strives for will enhance her psychological well-being. This finding aligns with Steger (2012), who stated that the meaning of work contributes significantly to psychological well-being.

Internal factors are crucial for supporting an individual's psychological well-being. Self-acceptance, good adaptation, adaptive stress management, meaningful work, and a positive sense of life contribute to a positive psychological well-being for mental health workers. Furthermore, external factors can balance internal factors, including relationships with others and professionalism.

Positive relationships built by healthcare workers with those closest to them can impact their mental health. Family support for healthcare workers can reduce work stress (Rahadiani et al., 2024). Good relationships with colleagues, especially midwives and nurses, have a positive impact on healthcare services. Positive social relationships enable mental healthcare workers to build mutually supportive interactions, thereby helping maintain and improve individual mental health. A study by Andualem et al. (2022) found that good relationships between midwives and patients can improve performance in patient care. Another study by Tampubolon et al. (2022) also explained positive relationships among nurses, revealing that good social relationships, which include social support, are closely correlated with stress experienced by nurses. With high social support, nurses will be able to manage the work stress they face well and can improve performance. Thus, the psychological well-being of mental healthcare workers or nurses can improve.

Patient satisfaction in the healthcare system can provide positive feedback for healthcare workers. Lack of communication can lead to misunderstandings and reduce the quality of care. Professionalism and good, effective communication will impact care. Research conducted by Puspita et al. (2023) showed that effective communication by healthcare workers has a significant relationship with patient satisfaction. This is in line with research by Winata and Risdawati (2024), which states that effective communication and a therapeutic relationship are important factors in care.

Based on the results of this study, a schematic of the dynamics of psychological well-being in mental health workers can be described.

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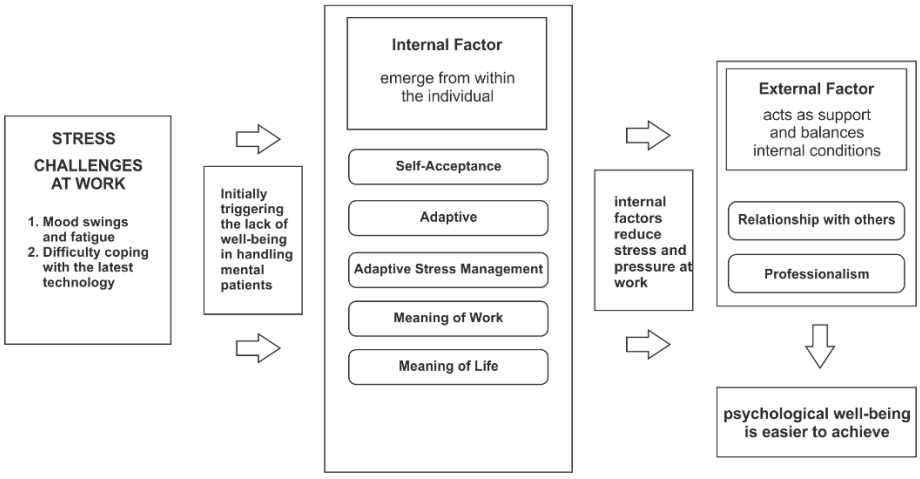


**Figure 1.** Dynamics of psychological well-being of mental health workers

Based on the explanation in the results and discussion, it was found that there were several different views from each informant as a mental health worker. However, the three informants essentially had a similarity: harmony in the dynamics of psychological well-being. Each informant had different problems and resolutions in resolving conflicts. Likewise, regarding the meaning of life and meaning in work. Therefore, it can be said that the psychological well-being of mental health workers is quite good. In line with research conducted by Fauzia and Batubara (2022), the psychological well-being of psychiatric nurses in hospitals in West Java is quite high. Supported by research by Isnawati and Yunita (2019), mental health cadres in West Java province also showed high psychological well-being, indicated by happiness and positive feelings in carrying out their duties. Although mental health workers face challenges in their work, in Indonesia, mental health workers still show high psychological well-being. This study found differences between domestic and international research. In a study conducted by Anger et al. (2024) conducted a review of 50 intervention studies and found that nurses or mental health workers are a vulnerable group experiencing a decline in psychological well-being.

## CONCLUSION

The results of this study found that the psychological well-being of mental health workers remains stable despite challenges in their work. The experiences of mental health workers with stress and technological advancements do not disrupt their psychological well-being due to the presence of supporting factors both internally and externally. Thus, the objective of this study, to explore the psychological well-being of mental health workers, has been achieved. No matter how challenging the challenges, it is still possible for mental health workers to maintain stable psychological well-being.

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