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Manejo del estrés laboral en psicólogos que trabajaron en teleconsultas en pandemia

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Objetivo: Analizar el manejo del estrés ocupacional en psicólogos de Lima Metropolitana que implementaron la teleconsulta durante la pandemia del COVID-19. Método: Investigación cualitativa con diseño de análisis temático reflexivo, que comprendió 12 entrevistas semiestructuradas a psicólogos que trabajan en el ámbito público y privado, quienes tuvieron en promedio una experiencia previa en teleconsultas de 1.5 años y un entrenamiento de un año. Resultados: Los resultados muestran que la pandemia conllevó una demanda laboral que supuso una carga de trabajo cognitiva y emocional, y se utilizaron diferentes formas de gestionar el estrés, como la percepción de control en el trabajo, a la vez que se utilizó el apoyo social emocional, instrumental e informativo. Conclusiones: Los psicólogos tratan de afrontar el estrés laboral a través de la percepción de control en el trabajo y su búsqueda de apoyo social.

Palabras clave: estrés laboral; teleconsulta; COVID-19; psicólogos; métodos cualitativos

Occupational Stress Management in Psychologists Who Adopted Teleconsultation during Pandemics

Objective: This study aimed to analyze occupational stress management in psychologists from Metropolitan Lima who implemented teleconsultation during the COVID-19 pandemic. Methods: Qualitative research was conducted following a reflexive thematic analysis design, comprising 12 semi-structured interviews with psychologists working in public and

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private spheres, who had an average of 1.5 years of previous experience in teleconsultations and one year of training.
Results: The results show that the pandemic led to a labor demand that entailed a cognitive and emotional work burden, and different ways of managing stress were used, such as perception of control at work, while using emotional, instrumental, and informative social support. Conclusions: Psychologists seek to cope with occupational stress through the perception of control at work and their search for social support.
Keywords: occupational stress; teleconsultation; COVID-19; psychologists; qualitative methods

Gestão do estresse no trabalho entre psicólogos que trabalharam em teleconsultas durante a pandemia

Objetivo: Analisar o gerenciamento do estresse ocupacional em psicólogos da região metropolitana de Lima que implementaram a teleconsulta durante a pandemia da COVID-19. Métodos: A pesquisa qualitativa foi conduzida seguindo um desenho de análise temática reflexiva, compreendendo 12 entrevistas semiestruturadas com psicólogos que trabalham nas esferas pública e privada, os quais apresentavam, em média, experiência prévia em teleconsultas de 1,5 anos e um ano de treinamento. Resultados: Os resultados mostram que a pandemia levou a uma demanda de trabalho que implicou uma carga de trabalho cognitiva e emocional, e diferentes formas de gerenciar o estresse foram usadas, como a percepção de controle no trabalho, enquanto se usava apoio social emocional, instrumental e informativo. Conclusões: Os psicólogos procuram lidar com o estresse ocupacional por meio da percepção de controle no trabalho e da busca de apoio social.
Palavras-chave: estresse ocupacional; teleconsulta; COVID-19; psicólogos; métodos qualitativos

The rapid spread of the SARS-CoV-2 virus forced countries worldwide to take harsh measures to protect public health (Amir-Behghadami & Janati, 2021). Once the pandemic was declared, the use of Information and Communication Technologies (ICTs) became essential to mitigate the risks and consequences of the spread of the disease. Thus, teleconsultations became popular among psychologists thanks to their ease of use and the safe provision of clinical care services (Garfan et al., 2021).

In the field of mental health, online psychological support services have gradually expanded and diversified therapeutic interventions even before the COVID-19 pandemic (Mathieu-Fritz, 2018). The mandatory lockdowns turned teleconsultation into the best strategy to continue following up on outpatients suffering from any psychological disorder (Montoya et al., 2022). This also became a means of support for manifestations of stress, depression, and anxiety, the main psychological problems suffered by the population due to the COVID-19 pandemic (Lozano-Vargas, 2020; Ozamiz-Etxebarria et al., 2020). In this regard, the effectiveness of teleconsultations has been proven in studies conducted among Nepali migrant workers (Sapkota et al., 2022), where it helped decrease anxiety levels in individuals looking for responses to questions concerning COVID-19 symptoms, and in Italy, where teleconsultation helped mitigate negative psychological effects in transgender patients (Gava et al., 2021) and decrease stress levels in epileptic patients with sleeping disorders (Olivo et al., 2021).

In the case of Peru, this method has also become essential given the critical circumstances of the healthcare system and the population's needs. Therefore, Legislative Decree No. 1490, aimed at strengthening the scope of telehealth was issued on May 10, 2020 (Decreto Legislativo No 1490, 2020). The decree defines teleconsultation as a remote health service provided by healthcare workers through ICTs, which

should be prompt and accessible, with the primary goal of offering promotional, prevention, diagnostic, treatment, recovery, and even rehabilitation services to patients. The tools used include phone calls, mobile applications, the National Medicine Network, and a coronavirus self-assessment to be administered online, which establishes whether users should get tested for COVID-19 or not; meanwhile, among the tools to be used by healthcare staff were an application where health professionals can self-report their health status and view the status of all doctors during the pandemic and an online platform with an emotional support program for doctors infected with COVID-19, helping them prevent occupational stress and escalated emotional issues (Curioso & Galán-Rodas, 2020).

In this context, the challenges brought about by the health crisis, such as the lack of clear information from government agencies and employers, as well as overwhelming and sometimes contradictory emotions related to their stressful circumstances (Chandler et al., 2023; Zemnil et al., 2023), feelings of fatigue, helplessness, a sense of being deprived of freedom, and of being ill (Da Silva et al., 2024), have deeply affected the work of mental health professionals worldwide (Heidari et al., 2022; Montoya et al., 2022). Their practice through teleconsultations has raised concerns about its efficacy due to the lack of appropriate training (Montoya et al., 2022), in addition to the emotional overload caused by overtime, the lack of personal or professional support, as well as the increase in responsibilities (Kercher et al., 2024). In this case, stress has been one of the main reactions of the health care personnel at a global scale (Prasad et al., 2021).

According to Patlán (2020), occupational stress is an adaptative psychological condition characterized by different psychological, physiological, and behavioral responses, involving an imbalance between the demands and pressures faced by the worker. Although few studies provide information about the perception of stress among mental health professionals offering teleconsultation services, studying this topic is essential to understand the emotional consequences and possible labor risks that may be suffered by this population (Garfan et al.,

2021), especially in Peru, where the number of mental health workers seems to be insufficient to manage the amount of cases that require support. This may be inferred from data obtained from several reports, such as those published by the National Institute of Health, indicating that 47 professionals had to conduct over 15,000 therapy and psychological counseling sessions during the pandemic (Diario Oficial El Peruano, 2021). Another report claims that professionals working at a single hospital located in Villa el Salvador completed more than 4,000 teleconsultations (Agencia Peruana de Noticias, 2021). In light of this, the Association of Psychologists of Peru called upon the proper use of new technologies for Telepsychology, emphasizing the ethical criteria employed and safeguarding the emotional health of psychologists (Colegio de Psicólogos del Perú, 2020).

In this vulnerable situation, workers develop stress associated with the fear of being infected or transmitting the disease to their loved ones, increasing the manifestations of emotional overload (Prasad et al., 2021; Wang et al., 2020). In addition, Rosario-Rodríguez et al. (2020) and Rugel & Romero (2020) highlight that changes in workers' working modality during the pandemic negatively affected their labor demands caused by overtime hours. Likewise, psychological–cognitive demands were impacted, because workers adapted to new forms of interpersonal communication, and their technological demands showed negative effects as a result of lack of technical support and Internet connectivity issues. Conversely, new labor demands arose in emotional terms, leading to anxiety and depression among healthcare professionals (Flores & Arguello, 2020; Monterrosa-Castro et al., 2020; Zhu et al., 2020).

From the perspective of stress management, Johnson and Hall (1988) propose three areas: on the one hand, *demands*, which refer to workload and physical and cognitive demands, including time pressure, information processing, and insufficient rest. On the other hand, *control* refers to the degree to which the worker regulates his or her performance, integrating discretion in the use of skills and autonomy to decide. Finally, *social support* encompasses relationships with colleagues and supervisors. In this regard, high demands combined with

low control and limited support increase occupational stress; however, if high demands are managed through judgment skills (Riva et al., 2015), this reflects a certain degree of authority in decision-making regarding one's functions. The latter is consistent with the findings of Bonilla (2021), who claims that health teleworkers are self-sufficient.

Another way of coping with stress reported by teleworkers is related to social support. According to Rosario-Rodríguez et al. (2020), teleworkers claim to receive support from their family members to meet their psychological demands. However, the study performed by Bonilla (2021) points out that several problems may arise in terms of mental health as a result of this method, as families may become a burden when workers must deal with lack of space or time to properly carry out their jobs. However, this effect is mitigated when teleworkers have proper working areas, tools, case discussion, and training to conduct therapy sessions.

Other elements that may contribute to reducing burnout levels include resilience (Bellicoso et al., 2026; Kika et al., 2025), personal well-being (Kika et al., 2025), a positive attitude, social support (Crescenzo et al., 2021), as well as psychological support (Siddiqui et al., 2023; Sikioti et al., 2023). In relation to the above, psychologists who conducted teleconsultations showed lower levels of burnout than those who did not (Cavarretta et al., 2025); a similar result was found in other health professionals (Carpi et al., 2024). Finally, it was found that the greater the experience in caring for patients with SARS-CoV-2, the greater the resilience shown by healthcare personnel compared with those without such experience (Carpi et al., 2024; Sikioti et al., 2023).

In summary, if we consider that stress is one of the main causes of occupational risks (Zare et al., 2021) and that, in addition, there are several elements that may reduce burnout among healthcare professionals who provide teleconsultations (Bellicoso et al., 2026; Crescenzo et al., 2021; Kika et al., 2025; Siddiqui et al., 2023; Sikioti et al., 2023). Likewise, considering that this depends on different contextual factors (Carpi et al., 2024; Cavarretta et al., 2025; Sikioti et al., 2023), which have been studied mainly from a quantitative approach in Europe and the United States. For all these reasons, it is necessary to

conduct in-depth research on stress management in psychologists who adopted the teleconsultation method during the COVID-19 pandemic in Metropolitan Lima, one of the cities most affected by the pandemic worldwide (Diario Gestión, 2021). As mentioned above, this study aims to analyze occupational stress management in psychologists conducting teleconsultation sessions in Metropolitan Lima during the COVID-19 pandemic.

Method

Design

Aiming to at delve into the object under study (Mayan, 2023), qualitative research methodology was employed under a reflexive thematic analysis design, seeking to identify the most relevant patterns of meaning based on the accounts given by the participants (Braun & Clarke, 2022). The adoption of this design involved a process of reflexivity regarding the positionality of the authors throughout the research process. In this sense, the research team questioned the reasons why the study was proposed, the role of values in it, the methodological process followed, as well as the implications of the research (American Psychological Association, 2025).

Participants

Twelve psychologists who adopted the teleconsultation methodology during the pandemic participated in this study. Given the difficulties they perceived, a convenience sampling criterion was established to ensure the participants' homogeneity (Robinson, 2014). The inclusion criteria included psychologists who had been conducting teleconsultations in Metropolitan Lima for at least six months, those reporting diseases that may hinder the development of interviews were excluded. A total of five men and seven women, aged between 23–57 (M = 40), participated in the study. who were equally divided in groups

working in the private and public sectors (Table 1). Regarding the years of prior experience in teleconsultation, this ranged between one and two years (M = 1.5). Likewise, regarding teleconsultation training, participants reported that they learned while carrying it out, so this ranged between 0.9 and 1.2 years (M = 1). The daily hours devoted to teleconsultation ranged from 4 to 8 hours (M = 6.1). All participants reported that it was their only paid job. The referral sampling strategy was considered for participant recruitment purposes.

Table 1

Description of the participants

Pseudonym	Sex	Age (years)	Work-space	Previous experience in teleconsultation (years)	Training in teleconsultation (years)	Daily hours spent on teleconsultation
Alejandro	Male	26	Private	1.5	1	6
Susana	Female	28	Private	1.5	1	6
Julieta	Female	30	Private	1.2	0.9	5
Martin	Male	52	Private	1.5	1.4	5
Maria	Female	57	Private	2	1.1	4
Felipe	Male	30	Public	2	1	8
Marta	Female	40	Public	1.1	0.9	8
Mario	Male	53	Public	1.2	1	6
Monica	Female	57	Public	1.5	1	7
Luis	Male	46	Public	1.5	1.2	8
Emily	Female	47	Private	1	1	4
Lucia	Female	65	Public	1.5	1	7

Note: Elaborated by the authors

Data collection technique

A semi-structured interview was conducted, which allowed for reformulating or adding questions to explore the issues mentioned by participants (Kvale, 2011). The interview protocol was constructed

according to the research objective; for this purpose, a categorization matrix was used that included the topics to be addressed as well as the interview questions (Malvaceda-Espinoza & Flores-Pereyra, 2025). This was developed from the theoretical contributions of Johnson and Hall (1988), from which the topics of demand, control, and social support were proposed (Table 2). The questions were reviewed by three experts, both theoretical (2), with knowledge in the area of organizational psychology, and methodological (1), specialists in qualitative methodology. In addition, a pilot interview was conducted, which helped ensure the flexibility, as well as the coherence, clarity, and representativeness of the proposed questions. After the judges' review and the pilot interview, the questions corresponding to the area of control were modified and questions in the other two topics were refined.

Table 2

Thematic axis of the interview protocol

Topics	Interview script questions
Demand	Within your work activity: What events generate the most stress for you? What do you think about them? Could you comment on what aspects generate the most stress for you? How do you perceive the mentioned aspects? What do you think about these aspects? What skills do you have for the development of your work?
Control	How would you describe these skills? How do you distribute your skills in your workspace? What steps do you follow to make decisions in your work environment? Do you consider that you have autonomy in this? Why?
Social support	Do you sometimes feel that your work generates some emotional discomfort? To whom do you usually go to talk about these problems? How do they give you such support? Do you receive support in the work you do? What kind of support do you receive? Does your job provide you with the necessary information to be able to carry out your work satisfactorily?

Note: Elaborated by the authors

Procedure

The Ethics Committee of the Universidad Peruana Unión Graduate School approved our research (2022-CE-EPG-0000196). In addition, the ethical criteria outlined in the Declaration of Helsinki were considered (Asociación Médica Mundial, 2024). After which a key informant contacted the participants on our behalf, communicating the research purpose and requesting them to sign their informed consent, to which all agreed. Next, interviews were scheduled and conducted through phone calls and were recorded. Due to the pandemic, efforts were made to ensure that the interviewees were alone during the interviews, which were conducted by the research authors, making sure that only one of them was present in each case. Only one interview was conducted with each participant. These interviews took place between June and July 2021, lasting around 50 minutes. Each interview was audio recorded. No individuals refused to participate or were withdrawn from the study.

Quality criteria were applied, such as *dependency*, which allowed for proving the rigorous nature of the informative qualitative analysis, as the codification process was carried out by the first two authors, and later reviewed by each member of the research team. Any discrepancies were resolved through consensus. Meanwhile, the *credibility* criterion was applied as well, through which transcriptions and results were sent to the participants to check the information provided and evaluate the analysis performed (Mertens, 2024). Finally, the *auditability* criterion allowed for revision by an external expert in qualitative research; similarly, the information collection instrument was reviewed by judges and subjected to a pilot test for quality evaluation (Daniel, 2018).

Data analysis

The steps required by the reflexive thematic analysis (Braun & Clarke, 2022) were applied, leading to familiarization with data, transcribing the information provided by participants word by word; likewise, the highlighted elements (phrases, sentences, or paragraphs) were identified through the citations of the participants' narrations.

This was followed by codification, allocating names or labels to the previously identified citations, to then proceed with the preliminary identification of topics, a reflexive stage through which the potential topics to be addressed in the analysis were acknowledged. The following stage was topic review, where the code-generated topics and the context were compared to evaluate their relevance. Next, topics were established, specifying their definitions and charting the connections between them and the codes. Finally, the result report was drawn, which informed the results obtained from the analysis of citations (Braun & Clarke, 2022). ATLAS.ti 23 software was used as a tool for data analysis.

Meaning-generation criteria were applied (Malvaceda-Espinoza, 2023), such as *representativeness*, which made it possible to identify the relevance of codes emerging in a consistent manner (patterns) across all interviews, or at least in a group of interviews. Furthermore, the frequency criterion was considered, referring to the magnitude at which a code is presented instead of others, and specifically if it is above the average (selected as the cut-off point) of the code frequency (in this case, the average was 30). Finally, the *density* criterion evidences the links between codes and their connection to topics. This criterion considers the link to be significant if the code has a density equal to or greater than 2 (average code density). In accordance with the above, the codes must meet any of the abovementioned conditions to be considered relevant for the analysis.

Results

The analysis of relevant topics regarding occupational stress management in psychologists working under the teleconsultation methodology allowed us to identify, on the one hand, the underlying categories and the labor demand caused by the pandemic and, on the other hand, two elements that help understand management stress—perception of control at work and social support in the working environment (Figure 1).

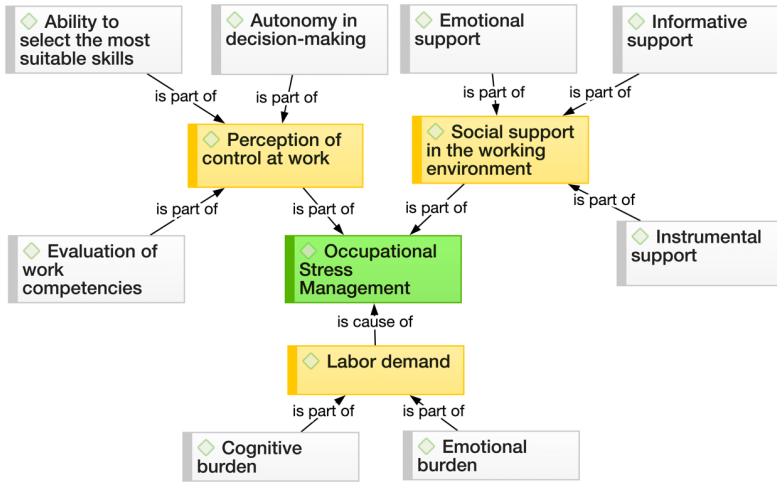

Figure 1. Semantic map of occupational stress management

Labor demand

The participants declared that the new situation they had to deal with during the pandemic led to a higher labor demand, entailing an emotional and *cognitive burden*. The latter can be understood as the labor demands linked to the mental efforts required of workers to optimally fulfill their duties. The participants reported that this load was the result of their lack of organization, their inexperience in remote work, working overtime hours, and the changeable media.

For lack of organization, participants claimed that this was due to the of their work centers improper administrative management, which in turn was related to the lack of expertise in remote work. As they were unfamiliar with this new modality, they failed to consider the implications and requirements of virtual appointments, leading to them having to work overtime hours. "I don't call my doctor or psychologist whenever I want to. There are given rules and standards established within the therapeutic context, right?" (Alejandro, 26 years old).

Likewise, psychologists admitted to being self-demanding, as they loved their jobs and duties; they tended to work more than is usually expected by their superiors. In addition, the influence of changeable mass media was observed, referring to the low quality of telephone networks and Internet connections, which were reported by the interviewees as causes for their difficulties in conducting their therapy sessions. "Internet is also an issue… At first, we had to deal with the intense traffic overload on the Internet. Websites and video calls froze, and stuff like that" (María, 57 years old).

Meanwhile, *emotional burden* involves the affective demands linked to the jobs. In this regard, the interviewees identified feelings of unrest and sadness, which were the result of the sudden changes in their working routine. Many psychologists were considered to be vulnerable to COVID-19 and were therefore forced to stop offering face-to-face sessions as a prevention measure. A related element was emotional strain, evidenced by the permanent they suffered as a consequence of listening to their patients' stories, as well as of having to deal with the general context of the pandemic.

> Of course; well, what is more… I can even say this is not just stress, but a sort of depression as well, because the difference is that I used to work in the morning, in the afternoon, but then suddenly they tell you to stop doing so and prevent you from working. Although I gave online lessons, everything demanded a change, changes that one was always willing to accept, to settle them (Lucía, 65 years old).

In summary, it can be asserted that the labor demand during the pandemic led to an emotional and cognitive burden on psychologists. This resulted in a lack of organization to adjust to the demands from patients and the institutions that the psychologists worked in. Similarly, their lack of experience in remote work broadened the cognitive burden and involved working overtime hours and adjusting to unsteady means of communication. As for emotional burden, feelings of unrest and sadness could be observed in participants, which brought in a state of emotional strain that was evidenced by the constant exhaustion suffered by psychologists.

As noted above, labor demand gives rise to a burden at emotional and cognitive levels, which results in occupational stress situations, which psychologists seek to manage through the perception of control at work and social support in the working sphere, as discussed below.

Perception of control at work

The context of the pandemic created new challenges, in which psychologists were constantly assessing and making decisions regarding their working performance. Thus, they *evaluated their job skills*, which entailed theoretical and technical knowledge management. In this sense, according to psychologists from the public and private sectors, their basic training and work experience acquired was crucial to efficiently assist patients. This can be observed in the identification of patients' needs, which was more representative among psychologists working in the public sector. Likewise, focus at work played a crucial role in the perception of the psychologists' ability to make accurate diagnoses, as they declared that, to identify the patient's conditions, it was mandatory for them to be active listeners and pay attention to what was expressed during therapy sessions in their patient's gestures and attitudes.

> Having high listening skills, i.e., empathic ability, which is linked to information analysis and deduction because you must start your diagnosis simultaneously as you are speaking with the other person and the patient should not notice you are asking certain questions because you are evaluating their mind or personality (Luis, 46 years old).

Another relevant element in this perception of control at work comprises personal skills such as tolerance to frustration, which was important for participants, as they felt capable of being calm and assertively responding to different inconveniences that arose in this new modality (failed Internet connections and unexpected noises, among other issues), which required acting assertively.

> So, I´ve had some changes in which, for instance, the patient's mother, sister, wife call me… they want me to work with their husband, their brother, or their son, and they also want to tell me different things. I say I can't do that because sessions are individual and I am currently working with only that patient (Emily, 47 years old).

In addition, the *ability to select the most suitable skills* at work in the context of the pandemic entails, on the one hand, solving conflicts narrated by their patients, helping them find alternative solutions they may have not considered. On the other hand, empathy was employed, which allowed psychologists to become closer to their patients and better understand their problems. Didactic skills were also developed to teach patients about the findings in each session and the consequences of the diagnosis.

> Depending on the case, I teach all the time; you teach empathy in every session, as well as experience, the vital nature of communication, even more with a patient. Your communication method should be simple and timely. Finally, focus on the work I am doing during therapy or an appointment with a patient (Luz, 65 years old).

Other skills were developed as well—coordination and constant communication with the organization's team of psychologists, which was representative among psychologists working in the private sector. This collective work evidenced the concern for the team's wellbeing, developed mainly by the female psychologists through internal coordination performed alongside the rest of their team to find solutions to the patients' problems.

> We work as a team here; we split our responsibilities and, in case of a given need, such as in high stressful situations among the medical staff, I provide mindfulness workshops once a week. They relax, learn relaxation techniques, and de-stress (Felipe, 30 years old).

A final element identified in the perception of control at work is *autonomy in decision-making*, which involves making free decisions

based on previously established rules, expressed under the premise that the participants could manage their schedules and arrange appointments with their patients, although adhering to the standards set forth by the organization they worked in. This is associated with free decision-making; however, the latter refers to the full freedom of participants to manage their own jobs (for example, in therapy dynamics).

> Overall, the first session is an interview. From the second session, I begin delving into their thoughts about the preceding weeks, later used in the middle of the session to make my assessment. I always work under this methodology, and in the next week, I share the results of the tests, and this is how we make progress (María, 57 years old).

As can be noted, the perception of control at work arises from stressful situations, which can be evidenced through the perception of working performance, among which tolerance to frustration and assertiveness stand out, in addition to the ability to select the most appropriate skills for work, such as conflict resolution, empathy, teaching skills, and coordination and communication. Finally, autonomy is present in decision-making, either when working as part of an organization or in private settings.

Social support in the working environment

Social support refers to socioemotional integration and confidence in the relationship between the participants and their superiors, and the people close to them, who may help them fulfill their duties effectively. This includes *emotional support*, encompassing the support of people around them, a term used by the participants when speaking to their family members and friends about their problems at work so they may feel listened. Although emotional support occurred among psychologists who worked in both the public and private sectors, it was more representative among the latter: "[I tend to turn to] my sisters, friends, or my partner; they know how to listen to me and unconditionally support me" (Julieta, 30 years old).

Meanwhile, *instrumental support* involves the provision of technical skills for the proper performance of their jobs. Participants received training and updates from the organization they worked in, which they consider to be crucial for making accurate diagnoses. It is worth mentioning that instrumental support was present among psychologists who worked in both the public and private sectors; however, it was representative of the former.

> Being updated is one of the primary valuable skills, as this is really helpful. My specialization includes many disorders you will not treat on a daily basis, and I have the ability to be quickly informed of it or contact other professionals to ask for some advice from them. Gathering this information makes me feel more competent or confident in treating my patients (Susana, 28 years old).

Finally, it was possible for us to identify the concept of *informative support*, concerning the discussion of complex cases with colleagues. At this point, psychologists sought the opinion of their peers and/or superiors to gather various opinions on a given problem and the best way of solving it. Nonetheless, some participants preferred to look for information on their own and collect information from previous research and books, as they considered them to be more precise and scientific.

> Maybe, as I said, as I have been working for just two years, I had a case which I felt I could not properly handle and asked for support, so my work was overseen. In this case, a psychologist supervises you, you present the case and they guide you on what you are emotionally going through so you don't feel like you can't handle it" (Emily, 47 years old).

In short, it can be seen that social support arises from the stress suffered due to the individual context of the participants. At this point, they seek emotional support from people who are close to them. Moreover, they look for instrumental support regarding technical tools and training to improve their performance with patients. Finally, informative support can be identified regarding the management and discussion of complex cases, for which they rely on other psychologists and consult bibliographic references.

Discussion

This study assessed occupational stress management in psychologists who adopted the teleconsultation method during the COVID-19 pandemic. The information obtained from 12 interviews with psychologists who worked via teleconsultations were analyzed, showing the situation of labor demand underlying their working environment, as well as the participants' perception of control at work and social support. as well as the perception of control at work and the social support of participants, which is consistent with what Johnson and Hall (1988) proposed. Although the propositions of the original theory are pertinent for understanding stress management, in the present study each of these dimensions has distinctive characteristics.

Regarding job demands, the most significant cognitive burden was adapting to changing means of managing work and personal life. This cognitive burden hindered communication, causing discontinuities in work and generating occupational stress. This observation is supported by the findings of Chandler et al. (2023), Rosario-Rodríguez et al. (2020), Rugel and Romero (2020), and Zemnil et al. (2023), who identified that adapting to changing means generated a greater cognitive burden among healthcare personnel. The foregoing allows us to understand the connection between adaptation to changing means, communication problems, and occupational cognitive burden.

Due to the sudden shift to virtual working methodologies and a lack of expertise concerning efficient time management skills, psychologists experienced significant stress due to overtime hours, lack of experience, and poor organization in remote settings. These observations are in line with the findings of Kercher et al. (2024), Prasad et al. (2021), Rosario-Rodríguez et al. (2020) and Wang et al. (2020), who reported that these changes hindered the fulfillment of the participants' duties. What was previously noted, together with the communication problems that arose in this context, generated significant stress among psychologists.

Meanwhile, psychologists considered emotional burden as a stressor, among which feelings of unrest and sadness are notable, as they

empathized and identified with the problems raised by their patients caused by the pandemic. This agrees with the findings of Chandler et al. (2023), Flores y Arguello (2020), Monterosa-Castro et al. (2020), Zemnil et al. (2023) y Zhu et al. (2020), who argued that healthcare workers show anxiety and increase in depression levels as a result of the COVID-19 pandemic arising from the fear of contracting the disease and human losses. As can be seen, the presence of emotional and cognitive burdens shows a profound psychological impact at the level of the demands placed on psychologists who worked in teleconsultations.

Beyond the elements that contextualize the labor demand, the abilities required to handle this situation were identified. For the perception of control at work, the main skills used by psychologists were tolerance to frustration, assertiveness, concentration at work, knowledge management, and active listening, which identified the needs of the patient to make accurate diagnoses. This is in line with the proposal of Johnson and Hall (1988), who claim that, when faced with stressful situations, workers can develop judgmental skills Riva et al. (2015) that help them properly perform their duties. The foregoing is consistent with what was reported by Crescenzo et al. (2021) and Kika et al. (2025), who state that both a positive attitude and personal well-being contribute to reducing burnout levels. As can be seen, both judgment skills and a positive attitude are elements to be considered in control in the face of job demands.

Similarly, for the ability to select the most suitable skills at the workplace, coordination, communication, conflict resolution, and teamwork were identified. This is because efficient communication with patients and colleagues was crucial for the participants to follow-up on cases, jointly solve problems, and achieve greater effectiveness in diagnoses. The other relevant skills were empathy, teaching abilities, and autonomy in decision-making—either under the rules of the organization or developed on their own—as proposed by Johnson and Hall (1988). The observation regarding autonomy is in accordance with the observations of Bonilla (2021), who points out that most participants adopting remote working methodologies have a certain degree of autonomy in their jobs, as framed in their organizations' institutional policies.

Another way of managing occupational stress was through social support in the working environment, in this case, emotional support from people close to the participants, such as family members and friends. This is consistent with Crescenzo et al. (2021), Rosario-Rodríguez et al. (2020) Siddiqui et al. (2023) y Sikioti et al. (2023), who highlight the importance of psychological and social support among teleworkers during the lockdowns caused by the pandemic. However, it contradicts the argument of Bonilla (2021), who claimed that teleworkers felt that their families were a burden, as they occasionally interrupted their work and affected their concentration.

As for instrumental support, the provision of essential tools to provide teleconsultation services, such as ICT training using Zoom or Google Meet, was evident among psychologists working in public institutions. This is supported by Bonilla (2021), who reports that teleworkers should be provided with the information and materials required to successfully conduct their activities. Finally, the participants used informative support from specialists (such as peers, coaches, or superiors) to search for a second opinion or suggestions on cases they regarded as difficult. These allowed for case discussion, one of the means of support used by participants, in line with Bonilla (2021). As can be seen, social support, which includes emotional, instrumental, and informational support, is relevant for understanding how stress generated by the social context is managed.

This research had several limitations, including difficulties in reaching psychologists who met the inclusion criteria. In addition, some interviews had to be rescheduled due to emergencies. Finally, no additional information was collected from other sources or with other instruments that would have allowed for a deeper understanding of the phenomenon under study. These limitations may be addressed in the future, considering the possibilities of access to participants, as well as the application of other data collection instruments from the planning stage of the research design. It is considered that these limitations did not deeply affect the results, since the pandemic situation generated certain similar circumstances among psychologists who worked in teleconsultations.

Conclusions

The sudden change from face-to-face to remote work affected psychologists who adopted the teleconsultation method during the COVID-19 pandemic; their stressors were expressed in terms of labor demand, leading to a cognitive and emotional burden. On this basis, participants reported how they coped with stress, including perceptions of control at work, and assessed their theoretical, technical, and personal abilities to face this new challenge. They selected the most suitable skills for this purpose, such as coordination, constant communication, teamwork, and autonomy in decision-making, in private and institutional settings.

Finally, regarding social support in the workplace, emotional support could be identified as being provided by people close to the participant; this type of support was more representative among psychologists who were working in the private sector, whereas instrumental support, characterized by the provision of tools and informational input, was obtained through case discussions with colleagues and supervisors; this support was more representative among those psychologists who worked in the public sector.

Regarding the implications of the study, it highlights the need for organizations to implement more structured remote work management systems, as well as strategies to optimize workload. Likewise, individual skills such as frustration tolerance and decision-making should be strengthened. Finally, social support networks and spaces for professional exchange should be promoted as resources to mitigate the impact of occupational stress in highly demanding contexts.

Future research is encouraged to gather data from diverse sources and to employ additional data collection techniques, such as focus groups or participant observation, as these approaches allow for more in-depth insights. Furthermore, studies should be conducted that take into account gender differences, socioeconomic status, and other relevant factors.

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