Social control in occupational health: a socio-environmental approach

ABSTRACT

Objective: to think through social control in occupational health by means of a socio-environmental approach to health. Method: reflective study with a descriptive nature about social control on occupational health and a socio-environmental approach to health, by using the environmental epistemology proposed by Leff. Results: the environmental epistemology works with five items: interdisciplinarity and interconnection of sciences; externality of the power environment in knowledge; environmental rationality - reason and value, thought and action; environmental knowledge - the other of knowledge; and the dialogue of knowledge kinds - being, knowledge, identity, and otherness. Through them, it was possible to establish a relation with occupational health and social control. Conclusion: this study enabled discussing the elements that constitute the environmental epistemology. Descriptors: Occupational Health; Social Participation; Social Control.

RESUMO

Objetivo: refletir sobre o controle social na saúde do trabalhador mediante uma abordagem socioambiental da saúde. Método: estudo reflexivo de cunho descritivo acerca do controle social na saúde do trabalhador com abordagem socioambiental da saúde, utilizando a epistemologia ambiental proposta por Leff. Resultados: a epistemologia ambiental trabalha com cinco itens: a interdisciplinaridade e articulação das ciências; a exterioridade do ambiente de poder no saber; a racionalidade ambiental - razão e valor, pensamento e ação; o saber ambiental - o outro do conhecimento; e o diálogo de saberes - o ser, o saber, a identidade e a alteridade. Por meio deles, foi possível estabelecer uma relação com a saúde do trabalhador e o controle social. Conclusão: este estudo possibilitou a discussão dos elementos que compõem a epistemologia ambiental. Descritores: Saúde do Trabalhador; Participação Social; Controle Social.

RESUMEN

Objetivo: reflexionar acerca del control social en salud laboral por medio de un abordaje socio-ambiental de la salud. Método: estudio reflexivo con un carácter descriptivo sobre el control social de la salud laboral con un abordaje socio-ambiental de la salud, mediante la epistemología ambiental propuesta por Leff. Resultados: la epistemología ambiental trabaja con cinco items: la interdisciplinariedad y la interconexión de las ciencias; la exterioridad del ambiente de poder en el saber; la racionalidad ambiental - razón y valor, pensamiento y acción; el saber ambiental - el otro del conocimiento; y el diálogo de saberes - el ser, el saber, la identidad y la autoridad. A través de ellos, fue posible establecer una relación con la salud laboral y el control social. Conclusión: este estudio posibilitó la discusión de los elementos que constituyen la epistemología ambiental. Descriptores: Salud Laboral; Participación Social; Control Social.

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The expression social control has been used as a synonym for civil society control over State actions, particularly in the field of social policies, since the redemocratization period in the 1980s. The use of an expression in this sense was caused by the context of political struggles for democratizing the country in face of the authoritarian State.1

To do this, social control comprises a form of regulatory action resulting from popular participation in State agencies and/or government actions. It aims at ensuring that public policies are planned in order to respond to social needs and their programs are met according to what was agreed.

In the health field, social control has materialized with the creation of the Brazilian National Health System (SUS), which brought, among its operational guidelines, popular participation.2 Later, in 1990, the Law 8,142 was passed, the so-called Organic Health Law, which provides for the operational levels of social control, as well as health boards and conferences.3

The health councils are collegiate agencies with a deliberative nature, which create and police public policies at all of the three government levels. They were established in order to set a space aimed at the exercise of social control.

The health councils are formed on a parity basis, i.e. they are members representing users, service providers, and health workers. Thus, having health workers as members of the health councils, there is a chance that health policies within this field are discussed and implemented along with municipalities.4

Health conferences, in turn, are public spaces of collective deliberation about the guidelines that should guide the organization and implementation of SUS, and there the principle of community participation explicitly takes a decision-making nature on the system configuration.

In the occupational health field, three National Conferences of Occupational Health were created. Such conferences enabled numerous advances in the field, by discussing workplaces, proposed the creation of health policies, and started discussing the occupational hazards at the workplace, something which had not occurred until that moment.

Social control plays a major role with regard to occupational health, because this, which is materialized in the health councils and conferences, provides workers, organized and represented, with the possibility to claim for better working conditions.5

Given this framework established and considering the need to promote greater control over workers’ labor and social situation at the national level, there emerged a need for social control actions as a way to tackle health problems resulting from work.

Work is a result of human needs. In addition to the needs related to the reproduction and survival of the biological body, this human being, which consists in a social being, must meet a number of requirements for living.6

Work seen as a process is a relatively recent construction. Its formulation is a result of the Marxist theory, which sees labor as a transformation of matter by the hands of human beings, in a dynamic continuum where both undergo changes.6

Marx thought the subjects of history are human beings. Men who work, and materialize in work, who build the world and themselves through work, but in capitalism they are fully deprived of production means, something which results in the highest degree of alienation already reached by workers in history, however, the end of such alienation will occur by eliminating the division of labor and private property. Thus, work will become a means of emancipation instead of alienation. The human being will set free not only her/his alienated consciousness, but she/he will set free at an economic level.7

The relationship established between social control and occupational health is involved with the environmental approach to health, because it encompasses knowledge about the complexity of the world. The environment is not ecology, but the complexity of the world. It is knowledge about the ways how the world and nature are appropriated through the power relations that have been inserted in the dominant forms of knowledge, resulting in an environmental complexity, which has environment as its research object.8

It is worth providing a reflection on the socio-environmental approach to social control and occupation health. The environmental approach helps us to understand the relations established between the environment, with all of its social, political, economic, cultural, and even physiological complexities, and social control related to occupational health.

It may be emphasized that workers are inserted in these environments and they are always establishing relations of adequacy or inadequacy with the environment. Contexts
that constitute the various socioeconomic environments where human beings live.⁹

In this context, this essay aims to: think through social control in occupational health by means of a socio-environmental approach to health.

**METHOD**

A reflective study with a descriptive nature was conducted to address social control on occupational health of workers under a socio-environmental approach in the light of Enrique Leff. The essay was prepared through reflections whose focus were social control on occupational health and the relationship established with the socio-environmental approach. To better understand these issues, we resorted to the environmental epistemology proposed by Leff, who works with the following items: interdisciplinarity and interconnection of sciences; externality of the power environment in knowledge; environmental rationality - reason and value, thought and action; environmental knowledge - the other of knowledge; and the dialogue of knowledge kinds - being, knowledge, identity, and otherness.⁸

**RESULTS AND DISCUSSION**

♦ Social control on occupational health under a socio-environmental approach

Social control may be seen as the interconnection, mobilization, and interference of civil society with planning, implementation, evaluation, and control of State actions. Thus, social control is a way how civil society ensures its participation in decisions related to public policies. So, citizens enlarge their participation, they intervene in the management process of the resources required to put actions into practice.¹⁰

As for social control, we may say that the precursor, in this regard, was the health field in Brazil, which, in 1990, created and implemented the Law 8,142, the so-called Organic Health Law, which, by addressing community involvement to provide health issues with a direction, was responsible for the creation of health conferences and councils at each government level as guiding and deliberative collegiate instances, respectively. So, it enabled an effective participation of citizens in the health field.¹¹

Health councils are spaces for exercising citizenship through political power, allowing civil society to act along with the State in decisions, thanks to the culture of democratic politics. It is expected that the space of councils is a place of conflict, resistance, and tensions, in order to seek solving the problems to meet population’s health needs.¹²

In turn, the conferences are a public space for collective deliberation about the guidelines that should guide the organization and implementation of SUS, and there the principle of community participation explicitly takes a decision-making nature with regard to system configuration.

In the occupational health field, we had 3 Brazilian National Conferences of Occupational Health (CNST). The 1ˢᵗ was held in 1986, which included one of the proposals for unfolding the notes that took place in the VIII Brazilian National Health Conference, which was held in the same year. The 2ⁿᵈ CNST, held in 1994, had as its central theme “Building an occupational health policy.” Finally, in 2011, the 3ʳᵈ CNST took place.¹³⁻¹⁵

It is worth emphasizing that all of these CNSTs were preceded by municipal and state steps, which comprised moments of intense social mobilization in the policymaking process, allowing the dissemination of themes regarded as priorities by the society.

The 3ʳᵈ CNST had as its thematic axis social control in occupational health. So, the conference proposed the creation of forums to monitor the deliberations, in the case of occupational health, discussions on the management of SUS’ labor and workers and professionals.¹⁵

Thus, we may see a strong link between occupational health and social control, as it is believed that social control comprises, from Gramsci’s perspective, a project that seeks building a political culture with a new hegemony able to overcome the capitalist rationality, in order to think of occupational health with a view to promoting quality of life among these individuals and their families. Through the theoretical framework of the Italian Marxist, Gramsci, where there is no opposition between State and civil society, but an organic relationship, because the actual opposition takes place between social classes, it may be inferred that social control happens in the fight between these classes for hegemony in civil society and the State.¹⁶

Given these complexities involving the relation established between social control and occupational health, it is worth thinking through this theme from a socio-environmental approach to health. Environmental health in the occupational health field comprises a scenario of social practices, which seeks bringing together social
needs and the possibilities that work leads to the principles of environmental rationality, i.e. the environment provides the conditions needed for quality of labor and life among workers.9

According to Leff, we must act with a view to examining, in each environment, the relations between natural and social processes and acting in the scenario from a global perspective, observing socio-cultural differences.17 The concept of socio-environmental health comprises the notion that goes beyond the environment that essentially considers the biological, chemical, and physical aspects, but a broader concept, which gives rise to economic and socio-cultural issues. Thus, over the years and the need for a sensitive awareness of environmental problems, the paradigms have changed, reflecting the pursuit of sustainable development and environmental sustainability.18

Faced with the need to provide a socio-environmental approach through the development of a thought that carries its primary questions, opening new windows that enrich them, without denying the analyses that maintain relevance, Leff works with the term environmental epistemology.8

Environmental epistemology is a field to apply epistemology to the understanding of a new object of knowledge: the environment. This term “new” emerges denoting that, previously, science regarded the “environment” as an appendix. Within this perspective, it establishes the epistemological conditions to think of an interconnection of sciences that enables grasping the environmental complexity by means of a multicausality of processes from various orders of materiality and their own objects of knowledge.8

Given this, we may reflect that environmental epistemology acts as an ally in the perspective that we are thinking through relationships that are established between social control on occupational health and socio-environmental issues. Environmental epistemology dives in the waters of five oceans, namely: interdisciplinarity and interconnection of sciences; externality of the power environment in knowledge; environmental rationality - reason and value, thought and action; environmental knowledge - the other of knowledge; and the dialogue of knowledge kinds - being, knowledge, identity, and otherness.8

Regarding interdisciplinarity and interconnection of sciences, Leff argues that the environmental crisis launches a new order to sciences, seeking their systemic reunification, guided by a holistic and ecological thinking. The fragmentation of knowledge emerged as an environmental crisis and an obstacle to understanding and solving complex socio-environmental problems. If science in its search for unity and objectivity, ended up fracturing and fragmenting knowledge, the environmental sciences, guided by an interdisciplinary method, were called to the mission of achieving a new re-totalization of knowledge.8

Environmental epistemology opens the way to new knowledge and this will lead to an analysis of the strategies of power in knowledge and a subject’s function in the mobilization of theories through the wish to know.8

As for mobilization, social control emerges as a constitutive element of the public sphere, it must be linked to the other social, political, and cultural processes, mediating and shaping the public sphere. For its effectiveness, there is a need to face some of the challenges associated with mobilization and participation, above all increased participation of users of the health system.19

In the field of occupational health, popular mobilization is important and it becomes possible by means of health conferences and councils, as they include moments of intense popular participation in the formulation of public policies.

Environmental externality and power relations in knowledge are seen by Leff as an environmental branch of epistemology that recognizes the effects of knowledge forms on the construction/deconstruction of reality, while re-appreciating theoretical knowledge as a means of apprehending and grasping the world, undoing the plots of power associated with the instrumental use of sciences.5

In the construction of knowledge, concerning social control in occupational health, an emancipatory expectation seems to be key, as the transmission of knowledge must provide the fixation of an ethical and political perspective to guide workers in their public service.20

When we speak of the need to build knowledge, it is worth remembering to take into account the political, economic, and cultural context where the subjects are inserted and their everyday life knowledge. This is occurs due to the fact that an emancipatory work comes from the reality of segments with which it works and not from realities unrelated to their experiences.21
The following item, which is inserted in one of the elements of Leff’s environmental epistemology, encompasses environmental rationality: reason and value, thought and action. The concept of rationality allows addressing the system of rules of thought and behavior of social actors that legitimize actions providing a meaning to social organization.⁸

Environmental rationality brings into play the value of theory, ethics, cultural meanings and social movements in the creation of a new social rationality, with a prevalence of the values of sustainability, diversity, and difference in face of the world homogenization, the economic profit, the practical interest, and the submission of means to ends plotted in advance by the utilitarian worldview.⁸

Given this concept of environmental rationality, we can notice that it has a relationship with social control in occupational health, as counselors, in the case of health councils, and delegates, in health conferences, advocate for interests of the other subjects; however, for this to truly happen, such delegates and councilors must undergo educational processes to grasp the role they play as social representatives.²²

Education comprises a tool for social change, where people’s liberation and awareness take place. Its main objective is social leadership, i.e., the development of critical thinking and population awareness the main characters of their history and the authors of their inclusion.

Concerning environmental knowledge: the other of knowledge, according to Leff, brings, in addition to objective knowledge and determinations of real, the scientific interdisciplinarity that overflows towards the dialogue between knowledge kinds; knowledge opens to the other: environmental knowledge. The environment is the other of metaphysical thinking, the scientific logos, and the economic rationality. From this perspective, the purpose of internalizing environmental knowledge within the paradigms of knowledge is established in a clash of rationalities and traditions, in a dialogue of otherness and difference.⁸

In face of this, environmental knowledge not only generates rather complex and objective scientific knowledge, but it also produces new social meanings, new subjectivity forms, and political positions in face of the world. This is a knowledge kind that does not escape the issue of power and the production of civilizing meanings.⁸

Power is also observed along with the exercise of social control on occupational health. The clash between civil society, or sections of it, and the State within the instances of social control, i.e., health councils and conferences, is a major indicator that, anchored in a legal statute, they can not only cause significant noise in order to put traditional mechanisms of power into question, but change social conditions and realities.²³ Thus, workers’ participation along with the health councils and conferences is key for full exercise of social control in this field.

Through power exerted along with the health councils and conferences, which are instances of social control, significant changes may occur at the workplaces, improving quality of life and occupational health, however, for the occurrence of changes in this scenario, it is worth having an urgent work of motivation and awareness of people to popular participation.¹²

Finally, the last item addressed by Leff along with environmental epistemology concerns the dialogue of knowledge kinds: being, knowledge, identity, otherness. Leff brings that environmental crisis is above all a knowledge program, which leads to rethink the complex world, grasp its complexification routes, and, from then on, open up new knowledge avenues, towards a reconstruction and repossession of the world. So, learning to learn the environmental complexity implies a process of deconstructing thought to think, to unfold our most intimate knowledge and promote something unprecedented, risking to give our recent certainties and putting into question the building of certainty.⁸

Based on this assumption, it is noticed that uncertainties also permeate social control on occupational health. Among the many uncertainties, we have a lack of understanding, on the part of a majority of the population, and even by workers, about what social control is.

The lack of spaces to exercise social control comprises one of the obstacles to democracy and participation. Thus, it is necessary to bear in mind that the key principle of health conferences and councils is popular participation. Without it, such instances have no reason to exist. The participation of society is a condition needed so that the population has an effective representation, consistent and deliberative, aimed at improving people’s health and quality of life.

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J Nurs UFPE on line., Recife, 10(Suppl. 2):887-93, Feb., 2016 891
CONCLUSION

We may think it is worth thinking of the socio-environmental approach in order to understand the relations between social control and occupational health. To do this, the environmental epistemology proposed by Enrique Leff allowed us to reflect on this theme from a new approach, the socio-environmental one.

All the issues involved in the environmental approach made it possible that we could discuss the elements constituting the environmental epistemology with a view to better understand the relations between social control in occupational health. Many are the obstacles observed in this field, however, we realize that the difficulty of implementing social control in occupational health encompasses complex issues that require commitment of the State and the population as a whole.

REFERENCES


