THE RELATIONSHIP BETWEEN MENTAL HEALTH AND WORK: INTEGRATED MENTAL HEALTH OUTPATIENT CENTER STUDY

A RELAÇÃO SAÚDE MENTAL E TRABALHO: ESTUDO EM UM AMBULATÓRIO INTEGRADO DE SAÚDE MENTAL

LA RELACIÓN ENTRE SALUD MENTAL Y TRABAJO: ESTUDIO EN UN AMBULATORIO INTEGRADO DE SALUD MENTAL

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ABSTRACT
Objective: to analyze how work influences in the emergence of work-related mental disorders, treatment and recovery of patients. Method: this is a qualitative, descriptive, exploratory study developed at the Integrated Mental Health Outpatient Clinic of a Psychiatric Hospital, with patients of both genders, aged 21 to 78 years old. After reading and analyzing the information, it was possible to characterize the statements in three semantic categories, expressing in a significant and objective way the ideas of the interviewees about the subject. Results: three categories were built characterized by the similarities of their contexts: Work as a driving force for illness; Work as a therapeutic resource; Work as a social presupposition, important and necessary. The analysis allowed identifying that, according to the environment and the way it is performed, work can generate pleasure, satisfaction, psychic suffering or even mental disorder. Conclusion: when the work can generate damages at the psychic level, it can also be a generator of positive and rehabilitative experiences, in the sense that it enhances and dignifies the man.

Descriptors: Mental Health; Mental Disorders; Work; Occupational Health.

RESUMO
Objetivo: analisar como o trabalho influencia no surgimento dos transtornos mentais relacionados ao trabalho, no tratamento e na recuperação de pacientes. Método: estudo qualitativo, descritivo, exploratório, desenvolvido no Ambulatório Integrado de Saúde Mental de um Hospital Psiquiátrico, com pacientes de ambos os sexos, de 21 a 78 anos de idade. Após a leitura e análise das informações foi possível caracterizar as falas em três categorias semânticas, agrupando-as com base na semelhança de seus contextos, expressando de forma significativa e objetiva as ideias dos entrevistados acerca do assunto. Resultados: foram construídas três categorias caracterizadas pelas semelhanças de seus contextos: O trabalho como meio propulsor para o adoecimento; O trabalho como recurso terapêutico; O trabalho como pressuposto social, importante e necessário. A análise permitiu identificar que, conforme o ambiente e a forma como é realizado, o trabalho pode gerar prazer, satisfação, sofrimento psíquico ou até transtorno mental. Conclusão: o trabalho ao tempo em que pode gerar danos a nível psíquico pode também constituir-se em gerador de experiências positivas e reabilitadoras, no sentido em que potencializa e dignifica o homem.

Descritores: Saúde Mental; Transtornos Mentais; Trabalho; Saúde do Trabalhador.

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INTRODUCTION

Work is a material and eternal necessity of the human race, the man could not exist without it. Key for the survival of the human being, besides modifying nature, its development modifies the self, fostering or curtailing the development of its latent potentialities, being a means to achieve the interpersonal achievements and guarantor of the physical, material and right to a good quality of life, providing well-being and health.¹

Besides being a means of obtaining achievements, the changes that have been observed in society are that the work is often a propelling vehicle for the development of various mental and psychic disorders due to the high demands of its environment that influence the health of the worker and that have generated everyday problems in the work environment. The aspects related to their organization cause a great mental strain and, as a consequence, interfere in the social, familiar and mental health of these individuals.²

There are several disorders directly linked to the act of working. These disorders can be developed by many reasons, such as poor organization of work and division of labor, risks at work and unemployment. When the meaning of work is lost, there is a break in the link between subjectivity and the objectivity of work in our lives, leading to psychic suffering.³

It has become increasing and visible the number of workers affected by mental illness and psychic illness. In Brazil, mental disorders occupy the 3rd position among causes of social security benefits. In a study published in 2016, the relationship of common mental disorders to the servers of a public university was analyzed. The result of the study revealed that about 18% of the institution’s employees had some mental disorder, most of them being female, with a doctorate as the highest academic degree, in the age group between 33 and 40 years old, and considered their quality of life as regular.⁴

The work environment has been configured as a habitual place of disrespect to the physical and psychic limits of the human being, not to mention work accidents and pathologies that continue to kill and incapacitate them at the productive age. In unfavorable conditions, work has represented for many people only a means of guaranteeing sustenance, without allowing the worker to establish an interconnection of pleasure and satisfaction with his professional activity.⁵

Faced with the importance of the theme, the object of study of this research is mental illness related to work.

OBJECTIVES

- To analyze how work influences the emergence of work-related mental disorders, treatment and recovery of patients.
- To identify the types of work-related mental disorders in treatment patients in an Integrated Mental Health Clinic.
- To discuss how work influences the onset of the disorder, in the treatment and recovery of people who have acquired these pathologies.

METHOD

This is a qualitative, descriptive, exploratory study developed at the Integrated Mental Health Outpatient Clinic of a Psychiatric Hospital, located in the city of Teresina-Pi. The subjects were patients of both genders, from 21 to 78 years old. The inclusion criterion was patients who developed some type of disorder due to their work, and the exclusion criterion was those who developed disorders due to other factors and situations.

The guiding questions for the work were: How does work influence the emergence of work-related mental disorders in patients from an Integrated Mental Health Outpatient Clinic in Teresina-Pi? How does work influence the treatment and recovery of these people?

Data collection was performed through an interview guided by a semi-structured script and the speech recorded in an MP3 player, performed from June to July 2014. The approaches were performed during nursing consultations with an average duration of 20 minutes.

After reading and analyzing the information, it was possible to characterize the statements in three semantic categories, grouping them based on the similarity of their contexts, expressing in a meaningful and objective way the ideas of the interviewees about the subject. They
were categorized into: Work as a driving force for illness; Work as a therapeutic resource; and Work as a social presupposition, important and necessary. It was decided to use the first letters of their profession to preserve the anonymity of the deponents. The letters followed a numbering that determines the order of the interviews.

The research was authorized by the General Direction of the Psychiatric Hospital and approved by the Research Ethics Committee of the University Center UNINOVAFAPI (CAAE Number 10894812.0.0000.5210). All subjects signed the Free and Informed Consent Form, according to ethical precepts of Resolution 466/2012 of the National Health Council.

RESULTS

Some data were collected to formulate the characterization of these subjects, such as gender, age, profession and diagnosis of the presented pathology. In the gender category, fourteen were males, corresponding to 70% of the respondents, and six were females, obeying a percentage of 30%. In relation to age, only one participant was in the age group of twenty years old, and in the others there was no prevalence in prominence, perceiving a certain balance, although in the age group of thirty years there was a slightly higher number.

In this study, the male gender prevailed as the major gender affected by work-related disorders, since they constitute the largest number of participants in this research.

It was possible to identify several mental and psychic disorders caused by the influence of work in a variety of professions. The most important profession was the military police and civil construction workers, followed by commercial and drivers. Banking agent, teacher, community health agent, seamstress, stevedore and domestic also emerged in this scenario.

The most diagnosed diseases were: Schizophrenia (40%), seven of the Paranoid type and one of the Residual type; Anxiety Disorders (25%), two of the Mixed Anxiety-Depressive type and three of the Generalized Anxiety type; and Depressive Disorders (20%), including a Recurrent Depressive Disorder with no Psychotic Symptoms, a Recurrent Depressive Disorder and two of the Depressive Episode subtype, one being moderate and the other mild. Furthermore, it was possible to identify other disorders in a smaller number, such as Alcohol-Induced Organic Amnestic Syndrome or other Psychoactive Substances, Personality and Behavior Disorder and Bipolar Affective Disorder.

DISCUSSION

Work as a driving force for illness

In this category, we highlight factors and conditions that influence the development of pathologies that affect the worker nowadays. Thus, it was possible to identify several situations from the testimonies that contributed to the illness of the interviewees, as can be observed in the following statements:

I was not sick, I started getting sick after I started working, there was a lot of pressure from the bosses, a lot of noise, the work there was very heavy and it made me sick (CCO).

It was disturbing. Things that happened at work moved me. When I got home I could not sleep, I was thinking about what had happened in that night's routine that I had worked on, and the consequences of people dealing with thugs, seeing homicides, watching them, seeing deaths, were things that marked me a lot (PPM1).

I think so, because of the pressure from the boss, the work was heavy, and after I had the accident I stayed some time there even after my leave (OCC1).

I worked a lot (COS).

As can be seen in the interviewees' statements, work-related factors can positively or negatively influence the individual, contributing to the worker's illness that is, influencing the onset of pathologies.

Attributed as a necessity of man, work has been presented every day as a risk to life. The various transformations that have been perceived in labor relationships have been increasingly perverse and detrimental to the physical and mental health of workers. It is not the activity developed by them, but rather the links and relationships in their environment, the process and organization, the boss-employee connection, and how they are meaningful to the workers.6
The exhausting conditions and situations end up generating diverse health problems from physical to psychic, having been reported in many speeches:

I think it was a lot for my head, I worked ten years in a gas station, I left because I found a better job, I was not even two years old, I went to another gas station, I was already sick (GPG).

Yes, a lot of running, a lot of pressure, a lot of noise (BAN).

In this work, the disease became stronger because it was not sleeping, it was very heavy, in my time you worked 24 hours and only had 24 hours (PPM2).

It was a lot of work, it took a lot of weight, before my accident I worked as a dozer, carrying bags, after the accident I spent two more years at work doing cleaning services (EST).

It started at work due to dust, noise, engine vibration (OCC3).

Un desses efeitos maléficos está relacionado ao estresse relacionado às atividades repetitivas e de muito esforço físico, como pode ser constatado a seguir:

Corroborating with the idea that strenuous work is a preceptor of diseases, the reports pointed out the exhausting conditions and situations that can be generating both physical and mental harm to the individual.

One of these bad things effects is related to the stress related to repetitive activities and physical exertion, as can be seen below:

Washing clothes hurt me a lot, it was lots of bundles of heavy clothes, I was washing and ironing out, I spent all day washing clothes (LAV).

I felt a lot of headache and dizziness, I was not concentrating on my job (CCM).

Mental and psychic suffering can arise from the inability of the worker to adapt to his work, as he cannot adapt to the conflicts and anguish that the work pace inevitably provides. This lack of work organization ends up being the mediator between the individual and the appearance of pathogenic factors. The organization of work functions as a catalyst for suffering at work, since mental suffering is found between the decompensated mental illness and psychic comfort.7

The structuring of the work began to prioritize more its productive growth than its producer agent, the man becoming a provider of new risks and consequently demanding more of the worker. These factors can be configured as rhythm and

long hours of work, pressure from the boss, greater demands on tasks that become repetitive and monotonous, lack of autonomy in decision-making in relation to their activities, interpersonal conflicts and control of workforce. In this interconnection of the individual conditions of the worker with the demands lived daily in his place of work, they end up negatively affecting his physical and mental health.8

The worker who is dissatisfied with his work ends up being degraded by the capitalist system, which only seeks to supply the subsistence of the individual, causing the worker to deny himself and not recognize himself, altering his real purpose that is, human achievement and transformation.

This complex impact of man's relationship with his work is the main determinant of the health-disease process resulting from new ways of approach and management in the workplace. Work as it ceases to be a pleasurable activity becomes a stressing and provoking agent that disturbs the mental health of individuals.9

♦ Work as a therapeutic resource

In the analysis of this category, we found the controversy between the sickness and the well-being that the work can provoke in the life of an individual. If on one hand dissatisfaction with their professional activities provoke and causes psychic damage, at the same time work can be the source of help to cure mental illness as well as alleviate this suffering brought about by work.

Work must be understood as something other than a physical effort and forced compulsory activity to survive, it must be something gratifying and arising his innumerable specialties in the human being, from its creativity to perform a function to awaken feelings of pleasure and satisfaction, that can together propel man to a state of well-being and physical and mental recovery. Then, working would be a therapeutic form to guarantee a healthy life, although this one was the provocateur of the physical and mental illness. We found it in the following statements:

O trabalho ajudou muito no meu tratamento, a me recuperar, me sentia útil na sociedade, não pensava em coisas ruins (PRO).
The relationship between mental health... experiences that guide them to growth.

They attribute to the fact of exercising a function as a means of being inserted in an activity of importance for life, being necessary for their survival. The following statements represent this thought:

- It's good, at first I worked with pleasure, I grew up with the experiences gained, because of the work I've known countless cities (MOT).
- It's all, you get up and know what you have to do, it encourages me. It is very good for my life (DOM).
- Work for me is the most precious thing you have on the earth (TXT).

Work gratifies man and makes him a social and economic being. Able to be a source of conflict or social well-being, it enables the individual to be inserted into an activity of importance for life, being necessary for their survival.

Work is largely responsible for the socioeconomic structure of man. Through its innumerable meanings, it ennobles the human being and helps to build the profile of a citizen. However, in the midst of several divergences between suffering and the pleasure that the work provides, we observe in the subjects' discourses that as an active activity in people's lives, work acts as a helper to recover health.11

It is also the main link in the process of human self-construction, it has a central place in life, where there can be no man without work to stand in its midst. The performance of some activity that can be called work helps significantly in improving the clinical picture in people who are carrying some psychic evil, because when the man is inserted in a context that allows him to be in contact with others, creating ties, demonstrating their potential, autonomy, recognition, guaranteeing their financial independence and creating new professional expectations, it is reinvigorated by their actions, resulting in a feeling of being useful and productive.12

We can also verify in the statements that follow the importance that the deponents attribute to the work:

- My job was everything to me, I would even left my weekend if someone called me to work (GPG).
- Work is very important, especially in the financial issue (CCO).
Work is dignity, without it you are frowned upon in society. It helped to improve my life (ACS).

It is a source of stability, of affirmation between its environment of life, representation and social position that benefits and gratifies the human being in the world. Path to be followed and that allows to realize dreams. As the following reports show:

A way to grow in life, make dreams come true (BAN).

It means a lot, it is very important, a person without work is nothing (PRO).

Indispensable for people and society. It's good, if I could I worked more (PPM3).

The worker's mental health guarantee is entirely tied to his satisfaction and pleasure at work, with his organization, which must go beyond the perspective that work is only a method of ensuring his survival, but an activity capable of produce and reproduce life, from which it will enable the performance of dreams and desires. 13

The rescue of the autonomy of individuals suffering from psychic pathologies should be based on the exercise of citizenship, inserted in three basic scenarios: habitat, social network and work. These interrelated social values are enhanced through projects and therapeutic relationships with the aim of articulating these subjects with the family, the community and making them users of health services, in a process that generates health. 13

Work for years follows a segment that characterizes it as an activity that guarantees survival, occupation of the vacant hours that allows man to concretize his life projects, potentializing his abilities, exercises and conducting him in the search for choices, idealizing and impressing directions to the world. 14

This is an important factor for the man that enables him to be in movement with the environment that surrounds him and interact with everyone around him. When he is exercised with enthusiasm and identification, it ends up being a stimulus to continue in this activity.

It's good, if I could I worked more (CVD).

It is working, moving, using the body, being with other people (COM).

As difficult it may be, it often occupies a significant place in the life of the human being, building an affective and loving relation for the function it exercises. It is compared as a daily need, as important and necessary as sleep. Also, it consists in the means of acquiring, conquering and satisfying the basic needs of our body and our imagination. 15

It is also undeniable that work represents a dimension of meanings built within a social-historical context. These dimensions are named in psychological, social, economic and ontological. The psychological dimension includes work as the construction of personal identity, of representation of subjectivity, and achievements. The social dimension determines a form of insertion of the man in the society through the work that also is structuring of the social organization being a form of human social interaction. The economic dimension issue configures work as a means of economic and material support, a way of obtaining material needs and desires. The ontological characteristic constitutes a method of humanizing, which differentiates it from other beings, to distinguish it from the animal instinctive activity, since work is a teleological and generic quality of the human being. 16

It should be emphasized that the harmfulness of work is found in its organization, when it does not fit or is not adapted to the needs and desires of the worker, not being flexible with the own one. However, it can be a source of pleasure and satisfaction, bringing development and well-being when it is more than tolerable and favorable to physical and mental health. 11

CONCLUSION

Through the results of the research, it was found that several factors contribute to the triggering of job dissatisfaction that end up directly influencing the mental state of the individuals. The work environment, boss pressure, overwork, and workload are all reported as factors related to professional burnout and psychic illness.

This important aspect was also related to the relevance attributed to the need to be working as a medium that favors being in movement and in contact with other people. The work is seen as a therapeutic resource that can help in the
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