

Pleasure and suffering in the nursing group: reflection to the light of Dejour psychodynamics*

PRAZER E SOFRIMENTO NO TRABALHO DA EQUIPE DE ENFERMAGEM:
REFLEXÃO À LUZ DA PSICODINÂMICA DEJOURIANA

PLACER E SUFRIMIENTO EN EL TRABAJO DEL EQUIPO DE ENFERMERÍA:
REFLEXIÓN BAJO LA VISIÓN DE LA PSICODINAMICA DEJOURIANA

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ABSTRACT

The present study is a theoretical reflection which approaches the feelings of pleasure and suffering in the nursing team work in the perspective of the psychodynamic under Dejour optics. This reflection contributes to elucidate the importance of the organization processes of nursing team work, in special for considering the aspects related to the intersubjectivity and the singular history of each human being. The intervention in the health area organizations and in other institutions, consequently favors the diagnostic of the work situations, contributing for the improvement of the quality of life in the proper labor environment and also in the private life, among others.

KEY WORDS

Nursing.
Working conditions.
Occupational health.
Emotions.

RESUMO

O presente trabalho é uma reflexão teórica com o objetivo de refletir sobre as questões de vivências de prazer e sofrimento no trabalho da equipe de enfermagem, sob a ótica da psicodinâmica dejourina do trabalho. Esta reflexão contribui para elucidar a importância dos processos organizativos no trabalho da equipe de enfermagem, em especial por considerar os aspectos relacionados à intersubjetividade e à história singular de cada ser humano. Diagnosticar as situações cotidianas no ambiente de trabalho é importante para intervenções nas formas de organização do processo de trabalho, bem como em outras situações que forem necessárias, contribuindo, assim, para a melhoria da qualidade de vida no ambiente laboral e na vida privada.

DESCRIPTORIOS

Enfermagem.
Condições de trabalho.
Saúde do trabalhador.
Emoções.

RESUMEN

El presente trabajo es un ensayo teórico que tuvo como objetivo reflexionar sobre las cuestiones de experiencia de placer y sufrimiento en el trabajo del equipo de enfermería bajo la óptica de la psicodinámica dejouriana del trabajo. Esta reflexión contribuye a elucidar la importancia de los procesos organizativos del trabajo del equipo de enfermería, en especial por considerar los aspectos relacionados a la intersubjetividad y a la historia singular de cada ser humano. Diagnosticar las situaciones cotidianas en el ambiente de trabajo es importante para intervenciones en los modos de organización del proceso de trabajo, así como en otras situaciones en que fuera necesario hacerlo, contribuyendo de tal modo en la mejora de la calidad de vida en el propio ambiente laboral y, consecuentemente, en la vida privada.

DESCRIPTORIOS

Enfermería.
Condiciones de trabajo.
Salud ocupacional.
Emociones.

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INTRODUCTION

Nursing team workers are part of the group of health professionals. Thus, they are part of the multiprofessional team responsible for care delivery to individuals and their relatives.

In current society, work is fragmented by specialization, bureaucratization, tending towards mechanicism, executed according to standards and routines, imbued with sometimes obsolete or exaggerated demands that in many situations may prevent individuals from transforming and recreating their work⁽¹⁾.

The organization process of nursing teamwork is influenced by fragmentation, that is, it follows Taylorized principles and focuses on the sick subject. Hence, these professionals constantly face suffering, fear, conflicts, tensions, power disputes, anxiety and stress, contact with life and death, long work journeys, among so many other factors inherent in these workers' daily life.

Therefore, it is essential for nursing teamwork to be understood in all of its aspects, including the economic, cultural and social. In this context, it is of fundamental importance to understand issues involving the social production of subjectivity, people's physical and mental health⁽²⁾.

Another factor the nursing team experiences is the lack of autonomy, which in many aspects makes it difficult to achieve care and management goals, among others. It is also perceived that, in most cases, the workers do not allow themselves to seek strategies to move beyond the obstacles, which can create conflicts, dissatisfaction, stress, anguish and fears, which can arouse feelings of suffering at work⁽³⁻⁴⁾.

Although work can be a source of suffering, on the other hand, it enhances experiences of pleasure, as it is through work that human beings build their life and are inserted in the labor world, not only as a form of survival, but also to achieve personal and professional accomplishment. Hence, work permits the formation of individuals in their technical, political, cultural and artistic productivity, involving subjectivity.

In certain conditions, the result of the worker's relation with work can unleash experiences of suffering. A correlation exists between the individual's personality, his/her individual project and the prescription of work that does not take into account the subjectivity aspect inherent in this relation⁽⁵⁾.

Nursing teamwork, especially at critical units like Intensive Care Units (ICUs) and Emergency Units (EUs), is characterized by care delivery to extremely severe clinical cases,

considered as patients at risk of imminent death. This demands a set of skills from the team, including: rapid thinking, agility, leadership, problem solving, and high technology use, among others.

Health professional' work however, even at places like ICUs and EUs, does not involve only suffering. The possibility of relieving pain, saving lives, feeling useful, collective work, among other factors, can be a source of comfort and satisfaction that contributes to the feeling of pleasure and favors the workers' mental balance.

In view of the above considerations, this theoretical study aims to reflect on experiences of pleasure and suffering in nursing teamwork from the perspective of Dejours' psychodynamics of work. In this perspective, the relation between man and work involves the identification of work as a place where mental meanings are produced and social relations are constructed, mediation between the mental and the social, the private and the collective.

Although work can be a source of suffering, on the other hand, it enhances experiences of pleasure, as it is through work that human beings build their life and are inserted in the labor world, not only as a form of survival, but also to achieve personal and professional accomplishment.

The approach of psychodynamics of work involves breaking with the Taylorized principles of work and seeking new work organization paradigms aimed at integration between know-how and results, as well as the decentralization of decisions, autonomy, hierarchical flexibility, creativity, encouragement, participation, valuation and qualification, as well as each individual's singular history⁽⁵⁻⁶⁾.

Thus, the organization of work is understood together with all of its characteristics related to the institutionalization of work, including the institution's philosophy, organizational chart, work process, products, machines, equipment and, mainly, individual workers and groups with their particularities and specificities.

CONTEXTUALIZING THE PSYCHODYNAMICS OF WORK: A VIEW ON CRISTOPHE DEJOURS' PROPOSAL

In Dejours' perspective, the psychodynamics of work refers to studies on the psycho-affective movements produced by the evolution of inter-subjective and intra-subjective conflicts existing between the prescribed and actual organization of work⁽⁷⁾.

Hence, in this theoretical reflection, it is considered that work organization forms that are fully or partially guided by the bases of the scientific management school do not take workers' holistic health into account, that is, do not treat the work organization as a dynamic process that involves individuals' subjectivity – concerns are directed at physical health. It is fundamental, however, to understand the inter-relations that exist in the work environment, con-

sidering physical and mental health, as well as the work organization forms⁽⁵⁾.

In this sense, Dejours' psychodynamics highlights that human relations in institutions are determined by the different ways in which work is organized, which means understanding that, in organizational models, workers' subjective aspects are relevant.

Understanding the influence of work organization on workers' quality of life, on the creation of experiences of pleasure, suffering, exhaustion, satisfaction and illness, is extremely important to understand and intervene in various work situations and also to overcome classical work organization models⁽⁸⁾.

The psychodynamics of work departs from the premise that workers are able to protect themselves, to seek alternatives and take a new hold of the transformation and reconstruction of an established reality, and especially of the way the work process is organized. Thus, workers can seek collective or individual solutions to avoid or mitigate the feelings of suffering⁽⁹⁾.

According to psychodynamics, it is the subjective process that permits the social management of individual interpretation of actual work, the creation of new knowledge, tasks and activities, which can contribute to a more logical identification between prescribed and actual work and workers' pulsional investments⁽⁵⁾.

Hence, in the psychodynamics of work, although its reference is directly connected with the concrete, concepts are elaborated based on singular history, beliefs, desires, a constructed viewpoint, how man sees the objective world and the tasks that need to be performed. It is in rationality, in action, in the organization of the work process that the subject attempts to make work mean not only suffering, but also mediate pleasure⁽⁹⁻¹⁰⁾.

Thus, physical wellbeing and pleasure are simply the freedom highlighted in each person's desire in the organization of his/her life and, consequently, in work; freedom is considered regarding the content of work, task division and the existing relation with oneself and others.

The way health work is developed influences the worker-user relation, the reduction of the universe of needs and the specific knowledge needed. This turns the process predictable and structured and can make its agents cease being subjects and turn into mere task performers by replacing the complexity of life by the simplicity of reasoning, making procedures and therapeutic acts efficient by themselves and justified in most cases by the coldness of scientific rigor, considering health as complete physical, mental and social wellbeing⁽¹¹⁾.

For the psychodynamics of work, however, health is above all an end, a goal to be achieved, a state we attempt to reach, as social, mental and even physical wellbeing are not stable so that, even when they are achieved, there is no guarantee that they can be maintained forever⁽¹⁰⁾.

According to the psychodynamics of work, the classical separation that exists between *inside work* and *outside work* is ignored, as mental functioning cannot be divided. Health professionals do not leave their mental functioning behind in the changing room; they take mental concerns with them and need the family circle to keep up their defenses in order to go back to work⁽⁹⁾.

In line with the psychodynamics of work, harmonious contact with the family, oneself and other people favors more fruitful relations at work and in life as a whole, that is, the interferences of work do not remain restricted to the work environment. This affects work situations, family life and workers' lives^(10,12).

Also, the psychodynamics of work considers work a health generator or, on the opposite, a pathogenic constraint. It is never neutral; it acts in favor of health or leads individuals to decompensation⁽¹³⁾.

As work is considered a fundamental element in the construction of human beings, revealing its mediating role between the unconscious and the social, the private and the collective, the way work organization happens permits evidencing that work by itself is not harmful or dangerous, as if these were inherent attributes. Instead, what can provide these characteristics is the way individuals organize the work.

Thus, new work organization concepts should be sought. A commitment needs to be established, negotiated on between the people who organize and those who perform, leading to evolution and transformation that cause changes ranging from the institution's plant to work relations. This organization is a social relation, a compromise between the goals that need to be reached, procedures and actual difficulties to perform work.

In a study of ICU nurses⁽¹⁴⁾, it was evidenced that the way the sector was organized facilitated patient care delivery and offered the nurses more security. In the same study, the professionals informed that patient care efforts involving direct contact were compensated by the *feeling of being useful* and the *feeling of complying with one's duty towards the weakest and most dependent people*, that is, despite the efforts made, work aroused feelings of pleasure.

Based on this understanding, work organization should depart from the premise that it is marked by collective reflection, which workers should participate in as active agents instead of mere spectators.

Collective reflection supposes joint discussions, with a view to a common understanding, conducted by the comprehension of agreements, standards and new work rules. Therefore, it is fundamental to create a space for people to express themselves and listen, so that the transformation of the work organization process can truly occur⁽¹⁵⁾.

Understanding that workers can think, express their ideas and reach an interpretation can favor space for nego-

tiation, to seek new proposals and, thus, make the work organization process develop jointly. This does not mean that it will not cause suffering, dissatisfaction, tensions, among others but, when establishing this space, possibilities for negotiation exist at any time, for transformation and recreation of new work processes that respond to the workers, institution and users' true needs.

According to the psychodynamics of work, it is in the group that the meaning of suffering experiences is constructed and through communicative actions that feelings are shared. Hence, a space for workers to share their feelings, in which a common language can be created that leads to a new understanding, a new interpretation and a new sense for work, exerts a positive effect in the process of cooperative relations and knowledge exchange. In turn, these affect individuals' feelings of pleasure when doing their work⁽¹⁵⁾.

In order to talk, however, first, one needs to listen so as not to break the dynamics created in an open space of work organization for creativity and initiative. Therefore, testimonies need to occur at all hierarchical levels and in relations of equality. This presupposes that those who talk should be ready, as well as those who listen. Courage from both sides is needed as, for those who talk, it is very difficult to say what they are doing, mainly when work practice is somewhat distanced from prescribed procedures. It is only through the courage of taking risks, however, that the fundamental components of work become visible and comprehensible⁽¹⁶⁾.

Another factor that needs to be taken into account with regard to the feelings of suffering the nursing team experiences is the fact of dealing with people's suffering and pain and daily contact with death, which can arouse increasing work-related stress in professionals, as this goes against their purpose of saving lives. Professionals lack preparation to deal with issues related to death and the dying process, as this theme is little discussed in health institutions and schools⁽¹⁷⁻¹⁹⁾.

Based on the presented fundamentals, it can be inferred that the feelings of pleasure and suffering are basically determined by the dynamics established between work organization and the worker's life history, that is, his/her meaning of life at work and of private life.

There are no rules or recipes for workers to maximize feelings of pleasure and minimize feelings of suffering. It is fundamental, however, for workers to be committed to their tasks and give them meaning, as well as to create spaces for discussion and spaces for contact, whose challenges cannot be restricted to technical, scientific or productive activity problems, but should also include human contact, with a view to common experience. Sociability rules favor the social world of work, protecting the ego and, in turn, collaborating with a view to healthy subjectivity among professionals in nursing and related areas⁽¹⁵⁾.

Thus, it is essential to establish dialogue, not marked by verbalism though, but in search of exchanging ideas, lib-

erating, implying commitment to oneself and others, in the incessant search for actions to transform workers, in the attempt to improve their quality of life and, consequently, care delivery to users and their relatives, and also to transform the institution involved.

FINAL CONSIDERATIONS

In this study, it was evidenced that work, from Dejours' perspective on the psychodynamics of work, is directly related with the situations experienced in workers' daily reality. The organization form of work and the human being should not be a strict set, but based on flexibility. With a view to stability in this relation, evolution and transformations should be permitted as, if work organization forms are blocked, hampered or crystallized, they impede workers' growth, which can suggest inefficiencies at work, conflicts, tensions, stress, feelings of suffering, among others.

On the other hand, if man's relation with the activity organization process is positive, work can provide feelings of pleasure. For this to occur, however, activities need to correspond to the worker's aspirations and favor ways to express subjectivity, participating in the organization of the work process, modifying it, so that it complies with the true needs of all stakeholders in this process.

Nursing teamwork arouses ambiguous feelings. Sometimes, it can collaborate to experiences of pleasure, and other times to suffering. This is the case because the work can be useful while professionals serve, help and comfort. When they are confronted with other people's suffering, however, with death and/or situations that are difficult to overcome, workers suffer as well.

Moreover, the fact that these professionals were prepared in undergraduate programs to save lives, which often does not occur, creates experiences of suffering.

It is important for nursing professionals to understand that suffering and pleasure are dialectical feelings in work. Their understanding is highly relevant to promote workers' health and to improve the quality of care delivery. Knowledge about the causal factors of pleasure and suffering can be the starting point for organizations and workers themselves to drive work in a more pleasurable and collaborative and, hence, more human sense. This can avoid physical or mental illnesses related to suffering at work.

This theoretical reflection, guided by the psychodynamics of work, can collaborate to clarify and/or reaffirm the importance of work organization processes inside organizations which involve nursing teams, especially because it takes into account aspects related to inter-subjectivity and each human being's singular history.

This reflection is limited by the fact that this is a complex theme that involves different variables. It is considered valuable, however, to attract attention to the psychodynamics of work as an actual possibility to represent an

important reference framework to support new nursing work organization paradigms. Although various researchers are developing research on the psychodynamics of work

from Dejours' perspective, further studies are fundamental with a view to the application of a dynamic intervention model in health organizations and other institutions.

REFERENCES

- Gutierrez BAO, Ciampone MHT. O processo de morrer e a morte no enfoque dos profissionais de enfermagem de UTIs. *Rev Esc Enferm USP* [periódico na Internet]. 2007 [citado 2010 jan. 21];41(4):[cerca de 7 p]. Disponível em: <http://www.scielo.br/pdf/reeusp/v41n4/16.pdf>
- Trevisan MJ, Robazzi MLCC, Garanhani ML. Sentimentos de prazer entre enfermeiros de unidades de terapia intensiva. *Ciênc Enferm* [periódico na Internet]. 2009 [citado 2010 jan. 21];15(3).[cerca de 9 p.]. Disponível em: http://www.scielo.cl/pdf/cienf/v15n3/art_06.pdf
- Leopardi MT. Processo de trabalho em saúde: organização e subjetividade. Florianópolis: Papa Livros; 1999.
- Martins JT. Prazer e sofrimento no trabalho do enfermeiro em Unidades de Terapia Intensiva: estratégias defensivas [tese]. Ribeirão Preto: Escola de Enfermagem de Ribeirão Preto, Universidade de São Paulo; 2008.
- Dejours C. A loucura do trabalho: estudo de psicopatologia do trabalho. 5ª ed. São Paulo: Cortez; 1992.
- Mendes AM, Abrahão JI. Organização do trabalho e vivências de prazer-sofrimento do trabalhador: abordagem psicodinâmica. *Rev Psicol Teoria Pesq*. 1996;12(2):179-84.
- Mendes AM. Psicodinâmica do trabalho: teoria, método e pesquisas. São Paulo: Casa do Psicólogo; 2007.
- Dejours C. Uma nova visão do sofrimento humano nas organizações. In: Chanlant JT, organizador. *O indivíduo na organização: dimensões esquecidas*. São Paulo: Atlas 1993. p. 45-65.
- Lancman S, Sznalwar LI, organizadores. *Christophe Dejours: da psicopatologia à psicodinâmica do trabalho*. Rio de Janeiro: FIOCRUZ; 2004.
- Dejours C. Por um novo conceito em saúde. *Rev Bras Saúde Ocup*. 1986;54(14):7-11.
- Merhy EE, Cecílio LCO, Nogueira RC. Por um modelo tecno-assistencial da política de saúde em defesa da vida. In: 9ª Conferência Nacional de Saúde; 1992 out. 10-13; Brasília, BR. Brasília: GTTCO; 1992. p. 30.
- Beck CLC, Budó ML, Gonçalves RMB. A qualidade de vida na concepção de professores de enfermagem: elementos para reflexão. *Rev Esc Enferm USP*. 1999;33(4):348-54.
- Dejours C. Subjetividade, trabalho e ação. *Rev Produção*. 2004;14(3):27-34.
- Shimizu HE, Ciampone MHT. Sofrimento e prazer no trabalho vivenciado pelas enfermeiras que trabalham em Unidades de Terapia Intensiva em um Hospital Escola. *Rev Esc Enferm USP*. 1999;33(1):95-106.
- Dejours C. Conferências brasileiras: identidade, reconhecimento e transgressão no trabalho. São Paulo: FUNDAP; 1999.
- Ferreira MC, Mendes AM. Só de pensar em vir trabalhar já fico de mau humor: atividade de atendimento ao público e prazer-sofrimento no trabalho. *Rev Psicol*. 2001;6(1):93-104.
- Oliveira JR, Brêtas JRS, Yamaguti L. A morte e o morrer segundo representações sociais de estudantes de enfermagem. *Rev Esc Enferm USP*. 2007;41(3):386-94.
- Bernieri J, Hides A. O preparo de acadêmicos de enfermagem brasileiros para viverem o processo da morte e morrer. *Texto Contexto Enferm*. 2007;16(1):89-96.
- Santana JCB, Leal AC, Lopes PAT, Guimarães RG. Percepções de acadêmicos de enfermagem sobre finitude em instituições hospitalares. *Rev Enferm UFPE On-Line* [periódico na Internet]. 2010 [citado 2010 jan. 25];4(1):[cerca de 5 p]. Disponível em: <http://www.ufpe.br/revistaenfermagem/index.php/revista/issue/view/16>