WORKING CONDITIONS AND ENVIRONMENT AND HEALTH

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Abstract

For decades now and under the impetus of the ILO, the work process began to be directly related to the workers' health. It revealed that those who work – any status in the company or organization – involve their bodies when placing in a job, and have to adopt productive postures and gestures that generate fatigue. On the other hand, they must get involved using mental and psychological dimensions (affective and relational aspects) due to when facing the company demands, they must make a creative effort to compensate the problems arising in the description of their tasks, if incidents happen, malfunctions appear, or involuntary interruptions take place, requiring them to make an effort to develop the activity and achieve the purposes.

The researches of ergonomists, sociologists and labor economists, as well as those who study the psychodynamic of work, have highlighted the psychosocial risks at work. This new perspective is a challenge for guidance professionals, since in the past these issues were ignored.

Key words: work – health – purposes - psychosocial risks.

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Introduction

This article continues the concepts developed in our digital book, “Los riesgos psicosociales en el trabajo. Una contribución para su estudio” (The psychosocial risks at work. A contribution for its study). It deals with a situation which is not always present when career and professional activities are carried out. An interdisciplinary contribution is very useful for everyone.

Our studies and researches allow us to state that the main cause (even if it is not the only one) that determines the working conditions and environment is the working process, through the organization and the work content.

Working Conditions and Environment

The concept of working conditions and environment, as an introduction to the psychosocial risks at work, implies the articulation between the working environmental risks and the working conditions that we shall mention briefly below.

The health risks provided from the environment may be physical, chemical, biological, and technological and safety factors, or may be caused by natural catastrophes and ecological instabilities. The working conditions (resulting from socio-technical and organizational factors) may compensate or intensify such risks and impact on the work time and setting the organization and the work content, the wage system, the effect of the scientific and technological change and the learning of+ the use of new technologies. Also, in the existence of preventive devices of the occupational risks, the

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access to the health and social welfare insurance offered by the companies to their employees, the legal status of the wage relationship (i.e. its permanent and precarious basis) and the possibilities that workers take part effectively in the risk identification, suggest preventive measures and participate in their execution and evaluation. (Neffa, 1986)

In this mentioned sense, an increasing heterogeneity among the jobs prevails, some of them are more arduous than others and they are exposed to one or various risk factors of the working environment, subject to leave indelible, recognizable and irreversible signs about health.

The strong physical restrictions are imposed by the workstation (as the long physical efforts, loading and unloading heavy objects, workers work permanently in painful postures and bear vibrations, situations that predominate in the industry, the construction, the transport and the agriculture activities), and they represent an aggressive context due to:

a) the environment risks (the long exposure to the action of dangerous chemical and biological agents, activities in environments subject to pressures and extreme temperatures, humid, bad lightening, high level of sounds, etc.),

b) situations related with the work intensity and rhythm (simple jobs, of short and repetitive cycles, with high cadence and salary according to their performance) or with the work length of time and setting (work days which length is more than the limit socially acceptable, situation of availability according to the business needs, overtime hours, night work, by rotating teams). These factors produce joint pains, lower back and musculoskeletal disorders (MD) over the years.
In spite of the technical progress, there is a high quantity and amount of workers who still work in a powerful, painful and heavy way, including in the PCI. For example, according to Anne-Françoise Molinié (2012a) and since the surveys made in France, the 50% of women and the 60% of the asked men, worked in different areas of the activity, declare that they work in demanding postures and this amount corresponds to the 70% of the construction sector. And as age increased, the posture restrictions are more and more arduous (VOLKOFF, BUISSET, MARDON, 2010). To certain extent, the experience and perception of arduousness depends not only on the scope of them, but also the individual abilities of workers’ resistance and adaptation, but workers may naturalize and accept them as if they were inherent to their jobs and, underestimate the impact on their health.

The “renovating” conception about the working conditions and environment made in the CEIL-PIETTE (Centre of Labour Studies and Researches- Programme of Economic Researches about Technology, Work and Employment), praises that work is not a divine punishment resulting from an original fault, but a value which remains and its practice generates rights. The working conditions and environment are modified permanently because of the scientific and technological change, since the innovations of products and processes cause new risks. As the risks impact on the working group, to prevent them is not sufficient to require the equipment of individual protection (EIP), so as the prevention may not be strictly individual and instead of isolating to each worker from the risk, the risk attempts to eliminate, reduce or control in its own source and ensure prevention for all the working group. There is not a natural predisposition to an occupational accident or sickness and the injured or the sick people are, generally, victims of the poor working conditions and environment that may be modified and they are not “impossible to eliminate”. The different risks act synergistically, i.e. that may be
neutralized between them but, generally, what it happens is that they strengthen mutually increasing the damage. Due to its complexity, the analysis and the prevention of the working conditions and environment require to make a work team formed by inter and multidisciplinary groups.

The use of the work force is made in certain working conditions and environment and the work load caused by them produce fatigue, and physical, psychological and mental risks that acquire different importance in regards to their intensity and the length of time of exposure, according to the area and the activity where they are produced.

**As health is not a product, the monetary compensations (risk premiums) may not be admitted as legal in return of the passive acceptance of risks.**

Clearly, working is not always a health generator. The natural counterpart of working in certain working conditions and environment is the fatigue; if it exceeds the worker’s resistance and adaptation abilities and it is accumulated because it is impossible to recover with rest hours, healthy food, familiar life, physical activity and recreation, it may become a chronic and pathological condition, that causes suffering and predisposes to develop illnesses with social and economic results.

With the ILO (International Labour Organization) contribution, indicators of frequency and gravity of the OA (occupational accidents) that permit the international comparison\(^2\), have been established.

Due to these reasons, there is a great number of paid employees of different areas and

\(^2\) The frequency index (FI) is the number of accidents for 1000 workers. The frequency rate (FR) of work accidents is the number of accidents for a million of worked hours. The gravity rate (RG) of temporal disabilities is the number of days off due to a temporary disability for 1000 work hours without counting the deaths caused by such accidents. The gravity index (GI) of permanent disabilities (99%) is the total of the permanent disabilities rates for a million of work hours, where the deaths for such causes are included.
branches of the activity who state that they suffer distress symptoms related with the working conditions and environment and the psychosocial risks at work. The surveys made in countries which are worried about that (for example, in France, SUMER, 2003) reveal the increasing of paid employees who declare to suffer and estimate that their health has become worse as a consequence of the stress at work. As well as the amount of those people who have been subject to verbal or physical violence (committed by the company staff or external people), work or moral harassment, mobbing, burnout or sexual harassment. These factors have among themselves synergetic and combined effects.

In view of the paid employees’ growing complaints and demands and the demanding attention to this issue by the work inspection services, the companies are complicated and they do not have the means nor the technical support to fight against the effects of the psychosocial risks at work. The management of the workforce perceives the individual dimensions of such risks, but their prevention actions are based on the paid employees, to control their stress, denying or leaving in a second place the source of the risks generated by the work organization and content, and the working conditions and environment that predominate in the company.

The analysis and the experience of the prevention services have noted a group of indicators of the existence of psychosocial risks at work and their consequences in the companies and organizations. We will detail below a list of them, which does not aim to be exhaustive.

a) The direct costs of the occupational accidents or illnesses may be summarized here: the interruption of the productive process, the damage of machines, tools and supplies, the compensations and the costs of the inherent trials, the amount of the insurance premiums against the work risks and the tension climate created by the
insufficiency or the lack of effective preventive measures, which the management has to take first responsibility.

b) The hidden costs are also exacerbated such as the absence from employment, the failure to comply with the working hours, the rupture of interpersonal relationships, complaints and requests about changes in terms of the workstations, the aggression and violence at work that interrupt the productive process, fragment the working group, disclose the organizational climate of the company and get worse the quality of life at work (INSHT, 2001b).

c) A high time length of annual work as well as the establishment of “atypical” working hours and the resource in terms of availability may increase the work impact on private life.

d) High rates of job rotation and voluntary resignations although the labour market does not operate under conditions of full employment, are facts of labour dissatisfaction and social discomfort.

e) The workstations offered and those ones which are not covered by in-house mobility may indicate stress or the refusal to assume certain physical, psychic and mental risks by workers.

f) When in a company drops in productivity or obstacles to increase it, difficulties with the compliance of delivery terms, the deterioration of quality and discouragement among workers are shown, for example workers reject to work extra hours in order to respond to increased demands which may indicate the influence of the psychosocial risks at work.

g) Likewise, the increase of customer and user complaints are indicators because of the low quality of attention, conflicts in the interpersonal relationships within the company or organization originated from the problems with the work organization.
h) The level of acceptance or questioning of the working conditions and environment and the psychosocial risks at work may be known conducting interviews with selected respondents, receiving workers’ complaints and comments and analyzing the development of the sessions in the minutes of the Comités Mixtos de Salud, Seguridad y Condiciones de Trabajo (CMHSyCT -Mixed Committee of Health, Security and Working Conditions)

i) The in-house labour conflicts (strikes, slowdowns, partial stoppages, etc.) and the disciplinary penalties are signs of a strained social climate and deterioration of the social relations.

j) Performance based remuneration, intensifying the work and identifying it, encourages the emergence of psychosocial risks at work.

k) Communication and cooperation problems within the work group that generate for the company relevant situations of planning, logistic and the necessity of a more supervised staff. (INSHT, 2001b)

l) The professional and permanent education may contribute to improve the working conditions and environment and control the psychosocial risk sources, as long as the programmes and the content respond to the workers’ expectations. Otherwise, they will be difficult to apply and they will cause health disorders.

m) The management in order to make a more intensive production, increasing the working control and the establishment of a competence among the paid employees, has a negative impact on mental health.

n) The occupational accidents may be a consequence of psychosocial risks at work which have disrupted workers’ attention and reduced employees’ concentration.

o) Most of the occupational sicknesses that affect the human body may be recognized as such and compensated but others not (varicose veins, lumbago, musculoskeletal
disorders). The analysis of illnesses related with working may make to appear illnesses which have not been recognized in the official lists yet.

p) If the registered data by the labour medical services or the first aids rooms in the companies are analyzed, certain signs of discomfort that the paid employees suffer could be more evident, as well as the consequences of the increase in the consumption of unhealthy products such as: tobacco, alcohol and self-medicating psychotropic drugs.

q) Negative stress is a risk factor that is a direct cause of the musculoskeletal disorders and the serious or degraded situations of the labour climate, the complaints against harassment, situations of verbal or physical violence, are indicators of a degradation of the social relationships, and even they may foster suicide trends. Furthermore, negative stress may stimulate the appearance of illnesses that cause absence from employment and result in disabilities, increase the aggression and cause the lack of cooperative relationships, increase the requests for changing workstations, require more supervision, increase the customers’ complaints against violence, appear interpersonal conflicts at work, increase the incidents and accidents, and the consumption of tobacco, alcohol and stimulating drugs has been grown.

r) The psychosocial disorders related with working concern the worker in a less direct and visible way than the physical pathologies, the occupational accidents and sicknesses described today. Thus, it is necessary to have the means that permit to identify quickly those risks to prevent. So that they may be recognized by the social safety system, the occupational illnesses character shall be stated as long as a direct and essential relation has been established between the daily activity and the illness. But the cause-effect relationships of these pathologies, whose effects are vague and
different, are difficult to state formally since they have a character based on multiple factors (Bressol, 2004)
s) Finally, as it is shown, macroeconomics as a whole suffers for the deterioration of the working conditions and environment and the problems generated by the psychosocial risks at work: loss of systematic competitiveness, due to the low productivity, the increase of the labour costs to recover the damaged health, the deterioration of quality, the workers’ resistance to the introduction of the technological or organizational changes and labour conflicts that lead to a strained social climate. This deterioration also impacts on the health and social safety systems since the staff needs increase for the healthcare and recovery, increasing the public budget or leaving great areas of the working population without protection.

In order to be made efficiently, work requires the mobilization of every human being. It implies to gather in an articulated way the physical force which is affected by gestures and postures, the mobilization of the psychic and cognitive capacities (emotional and relational) that consist of putting into practice the knowledge, professional grades, labour experience and accumulated competences. This cognitive dimension includes the implied knowledge gathered by the fact of being part of a work group and applying the creativity to compensate the failures of the prescribed work.

According to the requirements and restrictions caused by the working process and organization, employees have to defend, adapt and resist being in the normality limits. The job is lived as a result of a great effort and a true conquest that, at the same time it produces pleasure or suffering, or both.

By its very nature, the physiological fatigue, the involvement, the effort, the creativity and the attention that work requires, do not always encourage the feeling of belonging
and identity, nor the personality development. In order to overcome these limitations, workers sublimate this risk and try to find a sense of what they do to achieve a social recognition in their activity.

It means that work also requires necessarily a subjective mobilization, i.e. a metal and psychic mobilization of the worker; it is necessary to compensate the failures of the conception and the work prescribed by others and to cope with the uncertain problems and incidents found in the reality of the labour process. Due to the central importance of working, i.e., it may be either a health operator, balance builder, or on the other hand, it may constitute a restriction to a personal development with pathological and destabilizing health effects. (Dejours, 1998a, 1998b)

With the purpose to define it, for us, “The working conditions and environment are formed by the socio-technical and organizational factors of the process of production implemented in the establishment (or working conditions) and by the risk factors of the work environment. Both groups of factors are the demands, requirements and limitations of the workstation, which synergetic or combined articulation provides the overall burden on the prescribed labour, which is assumed, assigned or imposed to each worker, causing immediately or shortly direct or indirect, positive or negative effects, on workers’ life and physical, psychic and/or mental health. Such effects depend on the activity or work effectively made, the personal characteristics, the workers’ respective adaptation and resistance abilities of the two groups of factors above mentioned. Those factors are determined at the end by the current working process which is the result from the social relationships and the inter-relations between the variables which act to the level of the socio-economic context and their own characteristics of the workplaces. This working process is what defines the specific
nature of the tasks to make by the work group and by each people who occupy such workstations.” (Neffa, 1986)

Since the industrial revolution became established the logic of the capitalist mode of production caused a brutal exploitation of workers, low salaries and a deterioration of their health. These circumstances were explained as consequence of the long working days which workers were subject to less time to recover, since they had to work the seven days of the week without paid leave for vacation. In this context, an Italian physician stirred an alarm signal and proposed a new orientation for the labour medicine.

During the XVIII century, Ramazzini published his book *Morbis Artificum*, translated into Spanish in 2004, describing the labour risks and the occupational illnesses of a hundred of jobs, stating curative and preventive measures. Most people considered him to be the father of the modern labour medicine and he became famous because he started to write a medical history of each patient asking him or her two questions: “what do you do? and where do you live?” This physician considered that the life conditions and specially the working conditions played a crucial role in the health problems that their patients declared. It is important to mention that, nowadays, the health care professionals do not perceive as adequate the existence of a direct or casual relation between work and patients’ health, and the writing of their medical history which does not start with the answer of these two questions.

As Ramazzini did (2004), some international organisms such as the WHO, the ILO, the PAHO, and many national professional associations of labour physicians, ergonomics engineers, lawyers, sociologists, psychologists and economists, maintain the theory that there are not only essential conditions, but also economic and social factors of health. They are: the economic, technological, social and politic context of a country in a given
historical time, the function of the labour market, the employment “status” and the workstation characteristics that a worker occupies in a specific place of an area or branch of the activity. The wage relation (defined as the institutions and rules that fix the level of true salaries, the part of the paid employees in the functional distribution of the earning and the protection grade by the social safety system) and the workers’ access to the education services, housing, urbanism and public services (electricity, gas, tap water, sanitation) are factors that in an articulated way contribute to the reproduction of the work force. All these variables put the paid employees in a specific place of the social stratification and insert them together with their families in the social life, establishing conflictive or solidarity-based relationships with other inhabitants who live near. (Ansoleaga, 2012)

From the articulation sometimes difficult among this group of variables are going to depend essentially on the general life conditions, which have impact on health. Dialectally, the exercise of the labour activity as a need and a right play an important role about the working conditions and environment and thus, health.

**From the Working Conditions and Environment to the Psychosocial Risks at Work**

Since this global concept of working conditions and environment we propose to make a transition towards a more specific concept in order to go in depth about factors that generate new risks for the workers’ psychical and mental dimensions: the psychosocial risks at work. The problem of the psychosocial risks at work is a theme that is also inserted within the Social Medicine because, according to Laurell (2004), she recognizes the small relationship among the modalities in which the working process is executed and by the other hand, the workers’ health, the possibilities of preventing or repairing the caused damages, not only to the individual worker but also to the work
group, since a job is considered within a social dimension.

The labour risk is the possibility that a worker suffers a specific damaged caused by working due to the exposition to the risks at work and the prejudice that may cause to them. According to Last “The general risk factors are the working means, the suppliers and the raw material, the working conditions and environment and the characteristics of the workstation which from epidemiological studies and the accumulated experience by the ILO and the WHO have been shown that they have a negative impact on health, causing occupational accidents and illnesses”. (Last, 1995)

The present risk factors in the labour activity include the place, the objects, the suppliers, the working means and energy sources, as well as the work content and organization which may cause a short, medium or long term of occupational accidents and illnesses which hurt the workers’ physical and biological health. Progressively, meanwhile the working process were changing and the researches are not limited to the impact of work in human beings, the factors of psychosocial risks at work have specific dimensions and impact on the worker’s psychic and mental dimension.

The risks may have different nature: external agents to the organism that have impact on the biological dimensions of a worker who mobilizes his or her adaptation and resistance abilities to defend individually or collectively against them, or they may be psychosocial risk factors that affect the psychic and mental mechanisms causing tensions or stress which then may be externalized. Both risks may affect at the same time to one worker.

It has been confirmed –from epidemiological and experience studies accumulated by the ILO and the WHO- that the labour risks and their consequences have a negative impact on health and may cause occupational accidents and illnesses. But sometimes the causes
are mixed or confused (the conditions and risk factors) and the consequences (stress, bullying, sexual harassment, violence, anguish, depression, musculoskeletal disorders).

According to the European Union (2005), “the (working) risks may have different nature: external agents to the organism that have impact on the biological dimensions of a worker who mobilizes his or her adaptation and resistance abilities to defend individually or collectively against them, or they may be psychosocial risk factors that affect the psychic and mental mechanisms causing tensions or stress which then may be externalized. But the impacts of this second modality are not so easy of seeing as the first ones: their effects are sometimes intangible or nonspecific but although it is difficult to measure them, they may be perceived by the subject and they begin causing a psychic workload (affective and relational factors) or a mental workload affecting the cognitive process which may modify the human behaviour (alcohol, tobacco, drugs and self-medication addictions) and then be precursors of illnesses or directly externalized them”.

Unlike the risks caused by the working environment whose impacts – in first place on the human body- take certain time to become occupational illnesses, the factors of psychosocial risks at work may have a shorter development cycle. Another difference consists that fortunately and also in a short time, preventive and reparation measures may give positive results.

The occupational risks of the working environment (formed in the traditional ideas of hygiene and safety) and by the other hand, the risks of the working conditions may be identified, measured and evaluated objectively through census or surveys and epidemiologic studies, or the need of adopting a systematic conception is imposed since the risks interact among them in a synergetic and combined way, being able to cancel mutually. However, the most frequent is that they will be added or promoted. The
overall workload effectively borne by workers is always bigger than the amount of the risks borne individually by each of them.

In our present state of the scientific knowledge there is no a total consensus about the “state of the art” in regards to the conception and treatment of the psychosocial risks at work or about the damages caused. The issue is being discussed within several disciplines, as we shall discuss later.

The factors of the working conditions and environment impact on human beings and specifically people gifted of a productive knowledge and cognitive and psychic abilities, thus there is a possibility that they first perceive – and vividly- the effect that the working conditions and environment have on their life and health even they do not have the scientific knowledge about the nature of the risks inherent to the productive process of goods and services, or about the operative mechanisms. Likewise, the participation of the actors of the working process who are at the same time victims and “sensors” of the risks becomes an essential element both identifying them and perceiving their consequences and proposing efficient preventive measures according to their experience and making the follow-up. It explains the stimulating results obtained by the “Comités Mixtos de Salud, Seguridad y Condiciones de Trabajo” (CMHSyCT -Mixed Committee of Health, Security and Working Conditions) which have to identify the risks and participate in their prevention, but unfortunately, our current National Laws about Labour Risks have not included them in a general way yet.

When statistical studies are carried out through surveys about the workers’ perception and experience in regard to the effects that have the conditions and environment on health, the historical experience has proved that generally, those people who are surveyed do not exaggerate nor underestimate the negative aspects, by ignorance, because they have been accustomed to, and they have considered as normal, and they
are not always aware of all the risks that may be taken daily by the simple fact of working, with the consequences that may bring to their health.

Due to cultural reasons –and because there is not enough information that should be provided by the employers- they imagine difficultly that their work may be performed in a safety, clean, healthy and pleased way, in their minds they do not associate the deficient working conditions and environment nor the factors of psychosocial risks at work with the risk against their health and as they have made a great effort to resist and adapt to them, they assume and accept as a natural aspect that could be impossible to eliminate (Volkoff et al., 1993).

In order to copy with those problems and respond to the workers’ demands and the needs for those responsible of health and social safety public policies, in many countries policies referring to improve the working conditions and environment have been adopted and they are based on researches that identify risks and try to measure them. Thus, epidemiologic studies have been made about certain population measuring their impact over time, the use of ergonomic in its different modalities has been promoted to make a more secure, efficient, comfortable and healthy job, offering information, learning and advice to the social actors, as well as technical assistance, cooperation and funding to the productive units and institutions so that they make improvements.

Thus, instead of paying waged premiums to compensate in advance to the workers for their exposition to environment risks, offering premiums in concept of “control attendance” or obliging systematically workers to use individual protection equipment that increase the fatigue, firstly prevention has to attempt to aisle workers in regards to the risks, limit their harmful effects, but having as a final objective a permanent attitude of prevention and “being aware”.

The evolution of the health concept and its relation with work

The innovative approach of the working conditions and environment focuses on the impact that they have on health, in all its dimensions, but even the relation among them is direct, all the workers’ health problems have not been caused by working and in particular, those problems referred to mental health.

So there is a closed relation –but not one direction- between the working process and health. The workers’ life and health are strongly affected and even determined by the working conditions and environment with direct implications for the budgets of health and social safety public systems. By other hand, the workers’ state of health and their adaptation and resistance abilities may have an influence to make more or less serious the impact on the working conditions and environment.

People build defensive strategies, which are difficult of achieving as a whole, in order to stay healthy and normal at work and so that suffering does not cause illnesses. The suffering is a subjective dimension of the psychic life of aspects which are considered as unpleasant and unstable, but workers do not suffer passively the suffering generated by the work content and organization, may build defenses and in spite of suffering, people may continue working, resulting in a “suffering normality”. (Dejours & Molinier, 1994) If they may not sublimate or change the suffering through their imagination, they will defend guiding their ways of thinking and acting in order to avoid what they believe that make them suffer, without changing the reality or avoiding the risks. Symbolic media has been used such as concealment, denial, euphemism, rationalization and naturalization, which modify affects, thinking and mental states. The suffering becomes a pathogen and the subject gets ill when he or she may not control the risks.
Health is not simply “the absence of a sickness”, nor an idyllic “optimum state of physical, mental and social well-being”, but the result of a continuous equilibrium research of human beings with their fellow men and with the environment, which depend on the resistance and adaptation abilities of the subject before the risk factors.

“Health is not something that we may have as a property, but as a way of functioning in harmony with the environment (work, rest, social life, and ways of living in general). Not only does it mean to be free of pains or illnesses, but also to be free to develop and maintain their functional abilities. […] As a working environment constitutes an important part of the whole environment where human beings live, health depends on the working conditions”. (Epelman, 1990)

In accordance with Ch. Dejours and I. Gernet (2012), mental and psychic health is not a state, nor the result of tensions between stimulus and answers, but the result of a dynamic and unstable equilibrium between, the individual’s development need, his or her resistance and adaptation abilities to cope with physical, psychic and mental work demands that impose restrictions to execute an activity and reach certain productivity and, by the other hand, the social rules of which depend on.

As we shall see when we analyze the psychosocial risks at work, the efficiency of the workers’ defense strategies depends on their capacity for hiding or immobilizing the perception of what in the job reality increases the vulnerability and the suffering. The defenses do not act on the real world: in particular, they do not transform the risks or restrictions, but they act by symbolic means such as the concealment, use of euphemisms, changes of attention or pseudo-rationalization, resources that modify affects, thinking and mental states. (Molinier, 2004). As we duly mentioned, workers have individual and collective defense strategies against the risk existence.
Suffering caused by the job is each time more perceived and recognized by workers, supervisors and businessmen. The attention is now directed to identify what its nature is, which causes and their impact on health occur, in order to imagine in what ways it might be controlled or reduced.

The activity made by the worker has a subjective and vividly dimension that expresses the initiative, the ingeniousness and the creativity to replace the work mistakes or failures as it was prescribed. The resistance of the matter to be transformed, the malfunction between the reception time of it and the moment in which it is needed, the difficulties to process the information, the technical and social incidents that force to interrupt the work cause suffering because workers should make an additional effort at the prescribed work and they are afraid of facing the failure risk. This suffering may be sublimated when due to the grades, competences, ability and cleverness accumulated, workers may improve those limits and obstacles and be recognized as part of the other members of the work group, which permit them to build and consolidate their identity.

When a worker executes continually simple repetitive gestures as consequence of the TQO (total quality control) and/or rhythm and cadence of the assembly line, a psychic conflict is produced as if in these conditions a worker attempted to think, he or she would have to decrease the work cadence to whom is forced and in order to maintain it he or she would need self-acceleration or over-involvement, saturating his or her system of perception – consciousness. (Dejours & Gernet, 2012).

By other hand, the current statutory characteristics of working and employment play a more relevant role: the division of the labour market (that generates the heterogeneity between “primary and secondary” employments, between “in-house and external markets”), the most precarious character of employment (which is unstable and insecure), the “labour decline” moving the treatment of the labour relationships and
conflicts from the field of the labour justice to the civil and/or commercial justice, the mobility and the versatility imposed to cope with the absence from employment and changes in the workstation, the work intensification to compensate the staff reduction and react quickly to changes in demand. All are processes generators of suffering.

Another problem that causes suffering is the lack of coordination, or including the conflict for the lack of accurateness between the time of working and the familiar life; especially with families with children or people in charge. By the other hand, anguish is also caused by the failures between the life trajectory and the possibility of building in the economic unit a professional career, due to the lack of recognition, not knowing the fact that as time passes grades, competences are acquired and the experience accumulated must be recognized.

The impact on worker’s health is not only verified in the human body. The working psychopathology, which expression was proposed firstly by P. Sidavon (1952), may be defined as “the psychodynamic analysis of the inter-psychic and inter-subjective processes that appear during the working period”. The expression “working psychopathology” refers generally to a group of theoretical knowledge which involves the pathogen results of working on mental health.

The psychic function and the emotional life are inevitably unstable by the confrontation with the economic and social reality, in which bosom the working tie occupies a central place. The work is presented as an irreplaceable mediator between unconscious and social field, because it gives the subject the possibility of overthrowing the determinisms that weigh on his or her identity. (Dejours & Gernet, 2012).

Health preservation is not the result of an individual dynamic: it is built collectively, in a relation with others, by communication, cooperation, interchange, recognition, the social support of the colleagues and the technical support of the hierarchy. If they are
not eliminated, reduced or controlled, the damaged effects of the psychosocial risks at work in a company or organization will be: the motivation loss, the lack of involvement, labour and interpersonal conflicts above mentioned that have an effect on the increase of the costs by misusing of supplies, misunderstanding or mistakes due to the lack of attention, the productivity decrease, the deterioration of quality, as well as the occupational incidents and accidents.

Due to the problems related with the life quality at work and the lack or insufficiency of compensation, retribution or reward by the job made, it is more difficult and it may create a feeling that it will no longer be able to bear to do like this during the whole active life, which is a perception or living indication about the suffering of the impact that these working conditions and environment cause on their life and health, and in regards to these they will face requesting changes in the work place, to miss frequently or rotate looking for another employment.

The content and organization of the working process create strong constraints since according to its nature, the worker may or may not give a sense to his or her labour life, living as a creative activity, generator of value, a means for his or her personal development and fulfillment of his or her professional identity. In turn, it may be an occasion to establish solidarity – based, exchange and cooperation relationships with others and thus to take part consciously of a group, with the possibility of learning, acquiring knowledge and experiences that may be valued, justifying not only a monetary but also moral and symbolic recognition.

In the labour activity, the suffering is always present as a subjective experience, since it refers to a singular experience linked to specific working situations and practices. It is caused by unsuitable working conditions and environment and especially by the work content and organization, factors which have changed substantially in the last decades.
because of the economic crisis that caused drastic and progressive restructuring processes.

It is observed the introduction of new ways of organizing the companies, the production and work, which intensify them due to the incorporation of new technologies of information, and communications and wage systems according to results, the same occurs due to the tensions generated by the job just in time (JIT), the systems of total quality control (TQC), the flexibility in the use of the work force above mentioned, the polyvalence demands, management methods of the work force according to the competences and the personalized control of the results.

In order to face efficiently these requirements and achieve the objectives that are fixed, workers will have a bigger grade of autonomy, control their emotions and mobilize their psychic and mental dimensions, process which is invisible to the eyes of the business executives and the administration managers of the work force, since the evaluation that they generally take, only refers to the results.

The suffering is also caused when – as it occurred mostly- a worker may not carry out the activity as the job is prescribed and has difficulties to achieve the fixed objectives by the direction and experiments a confrontation with an inadequate work organization. If workers may not give a sense to their existence due to the content restrictions and the work organization, so they will suffer. (Molinié, 2011)

According to Dejours, suffering is a psychic state that implies a reflexive movement on the ego, which is different from the anguish. For the working psychodynamic, each person is inserted in a workstation with his or her more or less conscious expectations, in regards to his or her history and professional career, but each person reacts in a different way before the risk factors. It is necessary to be recognized in our jobs, because that contributes to preserve health. We do not work to be recognized, but we
look for the recognition by the fact of working. The recognition is like a tax of the “beauty judgment” expressed by the workmates and the “profit judgment” which is granted by the hierarchy of the company or organization. Frequently, the two judgments are in contradiction when in a productive unit there is no discussion or debate about work. Sometimes the customer’s or user’s recognition is important since they give support, motivate and grant a sense to the job, but it may also discriminate, in regards to the compensations of one and all.

In certain occasions, boring and monotony lose the sense of working and in other situations; it is produced by the “automation” due to repetitive tasks that must be made in an accelerating rhythm. The repetitive work and with strong cadences is not a sublimated job because at such speed it is a job that delimits the possibility of thinking and the margin of personal initiative.

As we duly remember, the activity is different from the prescribed job. The resistance of the matter to be transformed, the difficulties to process the information and the incidents that must interrupt the work cause suffering because a worker must have an additional effort to which was prescribed and face to the risk of failure.

Suffering may be sublimated when, due to the grades, the competences, the accumulated know how to act and the workers’ ability, those limits and obstacles are exceeded and there is a recognition by part of the others, who allow them to build or consolidate their identity. It has negative impacts on health and considers a way of ethic suffering the “frustrated quality”, i.e. when it is asked to work quickly and although it would need to do it in a lesser rhythm in order to take greater care and do a job of quality. (Dejours, 1998).
Due to this fact, various alternatives are presented to face the suffering caused by the mentioned factors, if prevention actions are implemented in the company or organization such as:

a) Any attempt to eliminate the risk in its own source, as a radical solution, although it is not always implemented immediately,

b) Any attempt to aisle a worker with respect to the risks: for example, obliging the use of Equipment of Individual Protection (EIP) but without modifying the situation that generates them;

c) Proposing the elimination or mitigation of the risk impact as objective (for example, reducing the working time or the risk exposition);

d) Considering that due to a decision made by the company or organization authorities could be adopted preventive measures and that the work content and organization might change so that no more risks are created. Even together with this last initiative, the workers’ action is promoted by means of information and learning and the right to withdraw their workstation must be recognized before a serious and imminent risk against their health. Also there is a possibility where workers may take part of the general organization of production so that they face collectively the situation, participating in the implementation of measures and according to their experience, identifying the risk causes, making proposals to control them.

**Final Reflections**

In my opinion, to preserve workers’ health, so that they do not lose their lives where they should earn a living from their jobs, is one the final objectives of the increasing and development policies, which look for the population happiness and the Nation nobility. To prevent the psychosocial risks at work is necessary: 1) to see them (although labour
laws do not recognize them and there needs to become aware because they have been naturalized), 2) to show their collective character and that it will not affect only to each worker, 3) to look for their deep causes in the content and the organization of the working process and 4) we should not believe that they are inevitable, because prevention is possible. Because of these reasons, instead of a printed book (to respect ecology) that may remain at the mercy of the laws of the market, and reduce its dissemination, we socialize it due to the ICT (information and communication technologies). Comments and reviews are welcomed, because the theme is not closed with this analysis, but the only purpose of it was to open other perspectives.

Work has an impact on the physical, psychic and mental health and moreover on life. However, laws about Labour Risks are obsolete and workers have considered the risks as natural!!