

WORK INSTABILITY VERSUS MENTAL HEALTH

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Summary

This contribution is part of a research on guidance and employment in La Plata, province of Buenos Aires (Argentina) undertaken jointly by the Chairs of Preventive Psychology and Vocational Guidance, both pertaining to the course of studies for Psychology at the National University of La Plata. This research is based on four axes, namely, education-work-social policies-health.

This paper shall focus around the health axis, which is not provided with placement and employment services. Some unsystematical guidance experiences from the services of Adolescence and Mental Health are currently under way in the area. Research points to the existence of new demands of psychological treatment from a population (“the new poor”) afraid of losing their jobs -or even unemployed- who was not in the habit of going to the public hospital. In the casuistry explored here, people afraid of losing their jobs present more psychosomatic complexities. Local population is also analysed and the said analysis is linked with several national and international research projects.

Key words: Health axis; work instability; stress; new demands; mental health

Introduction

This paper is part of the research project “Profile in Occupational Counselling and Placement and Employment Services”, undertaken by the Chairs of Career Guidance Counselling and Preventive Psychology from the course of Psychology at the Universidad Nacional de La Plata (National University of La Plata), in the Province of Buenos Aires, Argentina.

This research aims at getting to know the state of coverage, level of intervention, training, methodologies and practice of Occupational Counselling and Placement and Employment Services in the region of La Plata and Greater La Plata.

Its immediate referents and precedents are the investigations undertaken by Dr Anthony Watts, from England, and by Dr Stuart Conger and Dr Hebbert Bryan (1), from the Canadian Guidance and Counselling Foundation. From the former we considered ‘Occupational Profiles of Vocational Counsellors of the European Community’ and, in particular, its Summary Report presented to the European Centre for the Development of Vocational Training (CEDEFOP) (1992).(2)

It is also based on the abundant papers of the specialized literature regarding the redefinition of Occupational Counselling and on our own research papers on the topic, which aim at conceptualising the new role of the counsellor and the current forms of

counselling, and their connection with the working world and the unemployment phenomenon (Gavilán, M. 1996(3); 1997(4); 1999(5)).

Within the first stage of the project we proceeded to define two instances operationally: Occupational Counselling Services and Placement and Employment Services:

1. *Occupational Counselling Services*: within Occupational Counselling Services we include every institution, working team and/or professionals that, in the different institutions to be surveyed, carry out specific Occupational Counselling tasks, at preventive, assistance and community levels (either individually or in groups); both those who belong to the institutions and those externally summoned by them.
2. *Placement and Employment Services*: those working teams, independent professionals and/or non-professionals, who carry out tasks related to the work placement of unemployed people, to work retraining and/or to the collaboration in the search for their first job.

This research embarked on the search for provincial and municipal organization charts, so as to put an order and systematize the field of work and to find the placement of the institutions.

When we realized that the structures that appeared in the organization charts were smaller than those that the complexity of the local reality reflected, it was decided to undertake a journey of our own, along four axes that answered to the objective of the investigation. In each of them, we include the organizations surveyed:

- a) *Educational Axis*: Dirección General de Cultura y Educación de la Provincia de Buenos Aires (General Board of Culture and Education of the Province of Buenos Aires), through the Secretaría de Educación (Education Secretariat) and the main local referents: area inspectors; every school, both at EGB and Polimodal levels and in every level and mode of the system, and the school counselling teams which depend on the Dirección de Psicología y Asistencia Social Escolar (Board of School Psychology and Social Work); Universidad Nacional de La Plata (National University of La Plata) – all of its colleges and those secondary schools which depend on it, career guidance counselling centres and programmes of work counselling (PROLAB); Universidad Tecnológica de La Plata (Technological University of La Plata) situated in Ensenada, and the Universidad Católica de La Plata (Catholic University of La Plata).
- b) *Health Axis*: all of the hospitals in the area of La Plata and Greater La Plata, Berisso and Ensenada and the departments which, from those, provide some response of career guidance counselling (Dirección de Salud Mental – Departamento de Adolescencia; Mental Health Board – Adolescence Department).
- c) *Social Programmes*: Consejo Provincial de Desarrollo Humano y la Familia (Provincial Council on Human Development and Families); Consejo Provincial del

Menor (Provincial Council on Minors); Consejo Provincial de las Personas con Discapacidad (Provincial Council on Disabled People); Secretaría de Prevención y Asistencia de las Adicciones (Secretariat for Prevention and Assistance to Addictions); NGOs (non-governmental organizations); schools and professional associations.

- d) *Work Axis*: Ministerio de la Producción y el Empleo de la Provincia de Buenos Aires (Ministry of Production and Employment of the Province of Buenos Aires), situated in La Plata and its actions in Berisso and Ensenada; Dirección Nacional del Empleo (National Employment Board) situated in the city of La Plata; trade unions and professional associations which groups them; Ministerio de Asuntos Agrarios (Ministry of Agricultural Affairs).

This presentation is referred to the Health Axis, since from the survey carried out in the aforementioned context arose the analysis of the problem called 'work instability'.

In order to analyse this category of workers we took into consideration five levels of methodological analysis, that is the reason why this paper is divided into five instances:

- Previous and current investigations by the research team undertaken in the same geographical universe.
- Investigations from other world contexts.
- Interviews with key referents of the services of Mental Health from Public Hospitals in the region that constituted our object of study.
- Interviews with people that are within this work category.
- Stress Assessment Scales, by Fernández Seara and Mielgo Robles.(6)

I. Previous and current investigations by the research team:

During the 1992 - 1994 period the research called 'How Adolescents Choose Today' was undertaken and in the 1994 - 1998 period the research called 'Social Imaginary - Occupational Reality'. In a final comparative analysis the following indicators appeared:

1. The concern about work increased at all the social levels included in the sample. Work is positioned as a decisive variable when it comes to making a vocational decision. The issue of youth unemployment that affects the population between the ages of 16 to 25, which has been given widespread coverage lately, and the unemployment or the fear the parents feel of losing their jobs has increased the importance given to work and it has turned it into a social problem of utmost necessity, interference and consideration for the studying youth, although study and training prevail.
2. The 'parent' variable has increased in weight as regards the making of vocational decisions. The family, within a social and economic context in crisis, is becoming of

paramount importance as a frame of reference and containment in the decisions of young people who study.

3. The concern about the future with a negative visualization has increased. The situation in Argentina and its uncertain destiny, together with a local situation of diminution and recession, the retraining and closure of work sources, generate in the universe studied a certain emotional climate, as we had perceived before, that has a special influence on adolescents and their vision of the future.

The current research 'Profile in Occupational Counselling and Placement and Employment Services', in its Work Axis, led us in the year 2000 to go deeper into the influence of regional unemployment through the paper 'A Dismantled System. The Counselling - Work Relationship'(7). That research makes reference to the fact that, in the population studied, there appeared four categories related to regional unemployment, with different implications and levels of psycho-social risk:

- a) The unemployed with no previous training. These people lack social security or unemployment funds. They used to belong to the least favoured work levels and have begun to resort to the search for jobs that require less training and that are less profitable. These occupations are mostly covered by workers from neighbouring countries, who have formed real colonies or neighbourhoods in the zone studied (Bolivians and Peruvians). This situation generates rejection, since they work for sums of money notably inferior to those historically recognized by the mass of Argentinian workers.

The group mentioned begins their search as day labourers, and since they get no answer they resort to any activity, ranging from self-employment to mendicancy. Frequently this complements with the wives' work possibilities, which produces a change of roles in the family situation and in the couple, with unfavourable psycho-social consequences.

- b) The unemployed from State-owned companies. These people generally belong to the middle or working classes, with little training, but who have received through retirement an economic compensation. At the beginning it acted as an incentive and palliative, generating the utopia of the private enterprise with different activities related to services ('locutorios'—communications centres—laundrettes, convenience shops, private-hire taxis, etc.). The excessive amount of supply and low demand, and the restrictions in the market destroyed the illusions and projects. This kind of unemployed, who had good social inclusion, insurance, health care and plans as to their children's studies, are in a situation of exclusion that turns them into one of the unemployed groups that are most vulnerable and with the highest impact regarding personal and social crises, as revealed by the analysis that we are carrying out in the

Mental Health Services of the Public Hospitals in the area. The inclusion of this group in the job market is very difficult and it depends both on their possibility of retraining and on the systems of family support and personal relationships.

- c) The unemployed with previous training. Those with the possibility of being absorbed by the job market or retrained (executives, professionals, highly skilled workers). This group has more opportunities of finding a new job, even though most of them in more unfavourable conditions than those reached previously.
- d) The employed with unstable posts. Those who have a job, but that due to the socio-economic situation and the high rate of unemployment are afraid of losing it.
- e) Due to the large number of inhabitants who are within this last category and the implications of this problem, we were interested in studying this new variable in depth.

II. Investigations from other world contexts:

The '90s was a decade of great loss of jobs, changes, transformations and restructuring at work level, in every world context. In this case in particular we refer to some lines of investigation pursued in the United Kingdom.

In this country, phenomena like the decrease in the number of employees in the big manufacturing companies, the reduction in the amount of civil servants, the privatisation of nationalized industries, the increase in the demand for production that had to be absorbed by the few existent professionals and the introduction of new technologies, generated still less jobs, and the workers that remained in their posts were submitted to negative working conditions.

Ferrie et al(8), in 1955, carried out a research on 20 departments of civil servants in the United Kingdom. The changes in health of employees of a government department that was faced with a privatisation were taken into consideration, with the resulting work alteration. This was confronted with data from employees of other departments from the same institution that were not exposed to instability. The results proved that health tended to deteriorate in the employees who anticipated the privatisation as compared to the rest of the cohort.

Heaney et al carried out a research in 1994 in the car industry for a period of 13 months, which included people who were subjected to work instability. As a result of this evaluation it was found that work insecurity acts as a chronic stressor, the negative effects of which increase proportionally to the length of exposure to the instability(9) .

The variables 'degree of economic situation', 'social support of the members of the family' and the individual differences were analysed by Hamilton et al (1990) and subsequently by Dew et al (1992), who report that these influence directly on the intensity of the discomfort.

III. Interviews with key referents in the Public General Hospitals of La Plata, Greater La Plata, Berisso and Ensenada:

Interviews with key representatives were held, mostly with psychologists and psychiatrists, from the Mental Health Services of the following Hospitals:

- Hospital Interzonal General de Agudos 'Gral. San Martín'
- Hospital Interzonal General de Agudos 'San Roque'
- Hospital Interzonal Especial de Agudos y Crónicos Neuropsiquiátrico 'Alejandro Korn'
- Hospital Zonal General de Agudos 'Dr Ricardo Gutiérrez'
- Hospital Interzonal General de Agudos 'Profesor Rodolfo Rossi'
- Hospital Interzonal General de Agudos 'Dr Mario Larrain'

As a result of those interviews, two problems arise. One of them related to the issue of unemployment, and the other regarding work instability.

In the first case, there is an increase in the number of patients, since those who previously did not resort to public hospitals became incorporated, the so-called 'new poor', who used to have their own health insurance. Apart from these, there are the 'structural poor', who at the moment do not resort to these services, because they cannot afford the fare of the journey or destine that amount to food; they tend to seek assistance at the neighbourhood centres.

The second issue, that of work instability, is related to the change in the demand for attention, with a prevalence of depressive manifestations, attempted suicide, phobias, insomnia, inhibitions. All of these states tend to appear, in many cases, in people with unstable jobs, who have been forced in these last years to accept extremely unfavourable situations at work (increase in the amount of hours, workload, time availability, salary cuts, etc.). This is due to the so-called 'trashy contracts', which the worker, in order not to lose the work source, accepts but responds to with his his/her health. Moreover, through these contracts, he loses rights (totally or partially) as regards health insurance, and these, in turn, due to the so-called 'pago en negro' (illegal wages), are emptied, since they do not receive the contributions of the employees and therefore, these have to resort to public hospitals.

On the other hand, public hospitals – which are not exempted from the downsizing of the State – produce the vicious circle, since they try to collaborate with and help the patients, while at the same time the medical staff is afraid of losing their jobs, as many professionals and technicians have temporary contracts and others work pro bono (for free).

The professionals interviewed mentioned that, out of the interrelationship with other services of the hospital, there has been an increase in the frequency of cardio-respiratory,

dermatological, gastroenterological and traumatological diseases, generated in relation to work instability. It also shows that in this situation several problems are revealed: bad relationships with peers, an increase in individuality, and that these problems are extended to the family. The population affected by this problem ranges between the ages of 30 and 60.

As regards the gender, and specifically in one of the aforementioned hospitals, they manifested that in the women's ward there was an increase in the consultations due to attempted suicide (psychoactive drugs) of women between the ages of 30 and 40, most of them heads of a family with no jobs or about to lose it.

In the men's ward, there was a remarkable increase in alcoholism, due to unemployment and/or work conflicts with the employers. Besides, it was noticed that in the on-duty services of the outpatient services there has been an increase in patients that seek advice due to domestic violence.

The work teams interviewed expressed that, because of the large demand they are faced with and the scarce resources they can count on, they have elaborated different strategies that could be summarised as:

- Reduction in the schedule and in the attention time.
- Inclusion of the family or supporting family in the treatment.
- Possibility of working in a team with other services of the Hospital.

IV. Interviews with people that are within this work category (work instability):

Six interviews were held in depth with people of both genders whose ages ranged between 30 and 50, and whose working situation was as employees with full benefits, in state-owned and private institutions, with different degrees of instability, and who belonged to the sample studied.

As a result of the interviews, the following subjects arose:

Younger people were more readily prepared for a change, and although the loss of the job meant a delay in their projects to continue their studies, purchase assets or formalize a relationship, they had already taken measures or made plans to find a new occupation, even if it had no positive results. Those who showed more concern were those subjects who had previously been confident of their stability and had contracted debts and did not know how to face them. Among their plans was the possibility of travelling abroad, alone or with their couple. None of the young interviewees had children, what made them feel freer regarding decision-making.

As to the gender characteristics, (two) interviewed women appeared to be less concerned about their work situation. One of them, even though she had a two-year old child, had a husband with a fairly stable job. Both received family support. In spite of this, they

admitted that lately, due to the situation of conflict at work level, they felt uncomfortable, and there were rivalries within the members of the group since each of them wanted to stand out in order not to lose their work source. This was more marked in private spheres, since in the case of those who worked for ministries or official departments the loss of their job would be due to a restructuring or expiration of contracts, in which personal situations would not have much influence.

The older interviewees, people who were 40 - 50 years old of both sexes, showed a more profound state of anguish regarding instability: they expressed their recurrence in the topic, their permanent fears of not being able to support their families, the work and family conflicts that this situation led them to, the permanent comparison they established with friends or family who were already unemployed. There was a higher degree of anguish among men, heads of the family, who had no economic support from the family.

Their representation in this situation was like retiring with no salary, since they failed to envision the possibility of finding another occupation, especially those subjects who were not professionals or had no proper training.

The population studied expressed that they had problems of irritability and depression, their relationship with their jobs and their workmates was a source of conflict, they had problems as regards family relationships, they had resorted to medical services due to ailments and some of them had resorted to a psychologist for the first time.

The situation of these people varied according to their personal or family histories, what makes them different when it comes to starting a new search, in the short and long run.

V. Stress Assessment Scales by J.L.Fernández Seara and M.Mielgo Robles

The Stress Assessment Scale is divided into four independent scales, whose objective is to evaluate the incidence and weight of the different events in the lives of the subjects.

Their theoretical framework can be found in the papers by Holmes (1967) and Rahe (1966).(10)

- E.A.E-G: General Stress Scale
- E.A.E-A: Scale of Stressful Events for the Elderly
- E.A.E- S: Social/Labour Stress Scale
- E.A.E-E: Stress Scale when Driving

These scales present three categories of analysis:

- presence or absence of stressful events in the life of the subject
- intensity with which those stressful events have been or are being coped with
- validity of the stressful event

Administration time: 25 to 30 minutes for each scale

Target population: 18 to 85 years of age, according to the scale

We took into consideration, for the purposes of our research, two scales: 1) the E.A.E-G: General Stress Scale, and 2) the E.A.E-S: Social/Labour Stress Scale.

We define stress as a normal mechanism of reaction of our body to disruptions in the environment. It is a defence mechanism that helps us to overcome dangers. It has a clear biological dimension, since it is regulated by the autonomous nervous system and the endocrine system.

Stress is not the cause, but the effect produced by the stressor agents. These may be physical dangers or psychological dangers. The harmful action of stress will depend on the intensity and frequency of the stressor agents, and the singularity and capacity of the subject to adapt to them.

This measurement or evaluation of psycho-social stress is based on 'main vital events'. The main vital events were defined as events of higher or lower degree of importance referred to the family, economic, work or health spheres that imply some kind of change with respect to the habitual adjustment (such as moving house, a divorce, the death of a spouse, death of a child, dismissal or work instability, etc), considering that those changes may trigger different psychological and/or psycho-physiological reactions.

Following Erikson, we draw a difference between 'expectable developmental crises' and 'accidental crises'. The former take place in different developmental stages of people, and even though they provoke changes and modifications, at times with a certain amount of suffering, they do not alter their general structure. On the contrary, they frequently produce pleasure and growth; for instance: change of developmental stage, marriage, beginning of superior studies, marriage of children, death of parents, etc.

'Accidental crises' are those which are not expected, the ones that burst into the life of people and which they are not ready to face, they are the ones which provoke deep psychological alterations (death of a child, divorce, high-risk illness, unemployment and work instability, etc). These unexpected crises and the intensity of the personal imbalance that they produce are related both to the individual and personal situation, and to the family and social environment of the person. This scale specifically refers to this second level of crises.

While some authors, such as Lazarus (1990) and Santús (1995), believe that this concept of stress leaves aside the personal history of the subject and the individual possibilities of coping, despite the methodological and theoretical difficulties of an instrument, these flaws can be corrected if other methodological instances are employed – as has been done in this research –, and/or the records are expanded with other techniques of psychological exploration.

Administration and Qualitative Analysis

From a non-representative population sample of 20 subjects, whose ages ranged from 23 to 40 years old.

The General Stress Scale (EAE-G) and the Social/Labour Scale (EAE-S) were used.

The EAE-G consists in 53 elements distributed in 4 large themes:

- Health
- Human Relationships
- Lifestyle
- Work and Economic Issues

For the analysis of the questionnaires those stressful events which are present in the life of the subject were taken into consideration, which still affect him/her and with the highest degree of intensity.

Those stressful events which were repeatedly present in most of the subjects were:

- Socio-political situation of the country
- Lack of safety in the city
- Constant increase in the cost of living ⁽⁺⁾
- Personal or family economic problems ⁽⁺⁾
- Debts, loans, mortgages ⁽⁺⁾
- Illness of a loved person

We can observe that the interviewed subjects are mainly influenced by those events that are included within the themes related to work and economic issues.

The EAE-S consists in 50 statements distributed into 3 context areas:

- Work in itself
- Work context
- Relationship of the subject with his/her job

From the analysis of the questionnaires it was evaluated that the most meaningful stressor agents were related to the area of work context; this is related to events, anxiety situations, moments of tension, uneasiness and/or frustration, which are present in the current life of the subject and which are those of the highest intensity (it affects them 'a lot – terribly')

Such stressful events are:

- Personal or family economic situation (++)
 - A period of decline in work (++)
 - Debts, loans, mortgage (++)
 - Depending on a car or any other means to go to work (++)
-

- Professional future (++)
- Lack of acknowledgement and incentives in the job (+++)
- Low remuneration or decrease in the income (+++)
- Job insecurity (+++)

In this first approximation to the questionnaires it can be observed that in both of the scales used, in the General Scale as well as in the Social/Labour Scale, those stressful factors, events and/or situations mainly related to the work sphere and economic issues appear repeatedly.

It can also be seen in these events a concatenation of these, which is reflected in the worries related to the personal economic situation and in that of the country, concern for the periods of decline in work, as well as for the low remuneration or decrease in the income, which would entail insecurity in the job. In addition to these events, there is the problem of debts, loans and mortgages, which is also a stressful factor.

In the comments made by the subjects during the gathering of data for the scales, several questions could be observed:

- In some subjects, the interest was constant throughout the whole questionnaire.
- As regards the verbalizations referred to situations of work instability, we observed that this issue appears in a naturalized way in most of the younger people among whom this test was administered, and this was reflected when they said, for instance:
 - “... at the moment, everybody faces work instability...”
 - “... my workmate was fired, I'll be fired any minute now...”

As a hypothesis, two interpretations could be made of this naturalization in the face of instability:

- Is it assumed and they are ready to be dismissed?, or
- Is it a denial of their reality in order to go on functioning, producing?

Besides, dismissals could be thought of not as a sudden and surprising act, but as a process that develops in the work situation, after experiencing the dismissals of workmates and the individual situation of work instability.

We are aware that our subjectivity is mostly predetermined by our working and living conditions. So the lack of a job and the period of job search are experienced by most of the subjects as situations that generate anguish and anxiety. Besides, feelings of being forsaken, discouraged and uneasy are observed in the face of the absence of job offers and/or the increase in the job competitiveness that is demanded.

Due to what was previously expressed, several subjects could not face the Questionnaires, since these reminded them of their personal situations. Such an attitude shows a special state of vulnerability, with a reduction in the psychological defenses.

We can also observe in those subjects who do have a job, how they must fight to sustain it, to take care of it, and to accept any working condition, with the only purpose of keeping it.

General Considerations

Due to the social value that work has in our culture, as a facilitator of personal and family support, of the construction of new projects, of economic achievements, of a place in society, of personal realization, of contact with others, etc; the fear of losing it generates in the individuals inadequate behaviours of acceptance and submissiveness in relation to their bosses and superiors, and of competitiveness with their peers. Individualism and 'every-man-for-himself' attitudes appear, the bonds of solidarity with workmates are lost. As we have already observed, 'the so-called globalization of the economy alters the situation of men in the world, since the ethical dimension is usually lost and the economic and social bipolarisation takes place, where the rich are richer and the poor even poorer, with the consequent loss of the bonds of social solidarity.'(11)

Around the year 1991, Argentina comes out of the hyperinflationary period and stabilizes. Since then, the reigning paradigms were the privatisation, the reduction of the role of the State and finally the 'work flexibility', paradigm of the new model, which substituted the work bond between employer and employee. The work reform in Argentina (1998) created expectations at least from the official discourse: it would allow the appearance of new posts. Employers, on feeling free from certain demanding aspects of contracts, would hire workers temporarily, would not close work sources and generate new posts. But this flexibility, in a country with a profound recession due to its economic indebtedness (among other variables), did not generate jobs. Quite the contrary, factories were closed, companies were emptied, and the new contractual relationships, with more burdens and demands, produced degrees of work instability with the stressful consequences we are presenting in this paper.

Conclusions

What was presented earlier is a summary of our research. On processing the information of the methodological strategies 4 and 5, based on the hypotheses and the results obtained up to the moment, the following conclusions could be drawn:

- The fear of losing their job leads the person it affects to accept each time more reductions in his/her benefits (more working hours, fewer days off, salary cuts, less social benefits, etc). This generates stressful situations that lead him/her to suffer psychological and psychosomatic problems, some of them irreparable.

- Work insecurity acts as a chronic stressor, whose negative effects are made deeper depending on the amount of time they are exposed to this instability.
- The fear of losing their job and its consequences depend on personal factors, the developmental stages, the previous training and the systems of family and social support.
- The work instability varies the stressful characteristics according to the developmental stages, with large differences in their implications and acceptance. For the younger population, it is part of the framing of current work relationships; for older people it is a new intervening variable with negative connotations and scant resources for overcoming it.
- Work instability has different levels of impact if the person who experiences it is the only one who supports the family.
- Work instability brings about changes in the social and family relationships, which are extended into the social field. In these situations solidarity disappears, and the increase in individualism and the 'every-man-for-himself' attitude are manifested.
- Out of our analysis derived the main theme of this paper: 'Work Instability versus Mental Health'.

Notes

1. "Conger, S.; Bryan, H. "Counselling de carrière et d'emploi au Canada". Commission Canadienne de mise en valeur de la main-d'oeuvre. Fondation canadienne d'orientation et de consultation. Canada, 1994.
2. "Perfiles Profesionales de los Consejeros de Orientación en la CEE (Informe de Síntesis) CEDEFOP". Berlin, 1992.
3. Gavilán M. Nuevas Estrategias en Orientación Vocacional Ocupacional. La Plata. Edit. de la UNLP, 1996.
4. Gavilán M. "El Desempleo Juvenil, Evaluación de Estrategias". Acta Psiquiátrica y Psicológica de América Latina, Buenos Aires, 1997. 43 (1)
- Gavilán M. (1997) "Intervention Strategies Youth Unemployment – Compensatory Programs". Revista de Pedagogie, Bucarest: Institutul de Stunte Ale Educatei. Edit. Geron-Design, 1997, N°1.
5. Gavilán, M. "Perspectivas de Cambio en Orientación". Revista Estudios e Investigaciones, Facultad de Humanidades, UNLP; 1999, N°35.
6. Seara, J.; Mielgo Robles, M.: Escalas de Apreciación del Estrés, Edit. TEA, Madrid. 1992.
7. Gavilán, M. y colab.: 'Un sistema desarticulado: la relación Orientación y Trabajo'. Alternativas, Universidad de San Luis, Argentina, Facultad de Ciencias Humanas, N° 19.
8. Buendía, J. (ed). Estrés Laboral y Salud. Madrid: Biblioteca Nueva, Colección Psicología Universidad. 1998.
9. Heaney, C.A.; Israel, B.A. y House, J.S. Chronic job insecurity among automobile workers: Effects on job satisfaction and health, Social Science and Medicine. 1994.

10. Holmes, T. y Rahe, R.H. The Social Readjustment Rating Scale, *Journal of Psychosomatic Research*, 1967, 11: 213-218.

(+) Work and Economic Issues.

(++) Field of work context.

(+++ Work in itself.

11. Gavilán, M. El desempleo juvenil, op cit, p 55.

References

1. Bassett P. (1995). Spread of the new British disease. *The Times (Business News)*, 27 de octubre.
2. Buendía J. (Ed.) (1997). *Estrés laboral y Salud*. Madrid: Biblioteca Nueva, Psicología y Universidad Autónoma de Madrid.
3. CEDEFOP. (1992). *Perfiles profesionales de los Consejeros de la CEE* (Informe de síntesis). Berlín.
4. Conger S.; Bryan H. (1994) *Counselling de carrière et d'emploi au Canada*. Commission Canadienne de mise en valeur de la main-d'oeuvre. Fondation canadienne d'orientation et de consultation. Canadá.
5. Frost B. y Tieman R. (1995). Squeeze on workers time blamed for increased stress. *The Times (Business News)*, 6 de junio.
6. Gavilán M. (1997). *Nuevas estrategias en Orientación Vocacional – Ocupacional*. La Plata, Argentina: Editorial de la Universidad. U.N.L.P.
7. Gavilán M. El desempleo Juvenil Evaluación de estrategias. (1997). *Acta Psiquiátrica y Psicológica de América Latina*, Buenos Aires, 43 (1): 46-56.
8. Gavilán M. (1997). Intervention Strategies youth unemployment – compensatory programs. *Revista de Pedagogie*. Institutul de Stunte Ale Educatei. Edit. Geron-Desing, Bucarest, Rumania, 1: 23-40.
9. Gavilán M. (1999). Perspectivas de Cambio en Orientación, *Revista Estudios e Investigaciones*, 35, La Plata, Argentina: Facultad de Humanidades, UNLP.
10. Gavilán M; Quiles C; Cha T; Neer R. *"Imaginario Social - Realidad Ocupacional"*. (1994-97).La Plata, Argentina: Secretaría de Ciencia y Técnica, UNLP.
11. Gavilán M. y colab. (2000). Un sistema desarticulado: la relación Orientación y Trabajo. *Revista Alternativas*, 19, Facultad de Ciencias Humanas, Universidad de San Luis, Argentina.
12. Heaney CA; Israel BA; House J.S. (1994). Chronic job insecurity among automobile workers: Effects on job satisfaction and health, *Social Science and Medicine*, 38: 1431-1437.
13. Holmes T y Rahe RH. The Social Readjustment Rating Scale, *Journal of Psychosomatic*.
14. Guerin L; Roskies E. (1990). Job insecurity in managers: Antecedents and consequences. *Journal of Organizational Behaviour*, 11: 345-359.
15. Labourdette S; Gavilán M. (2000). *Estrategias de Evaluación para Programas Sociales*. La Plata, Argentina: Edit. de la Facultad de Humanidades, UNLP.

16. Lazarus R; DeLongis A. (1983). Psychological stress and coping inaging, *American Psychologist*, 38: 245-254.
17. Peiro J. (1998). *Desencadenantes del Estrés Laboral*. Madrid: Pirámide.
18. Seara J; Mielgo Robles M. (1992). *Escalas de Apreciación del Estrés*, Madrid: Tea.

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