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DOSSIER: HEALTH, LABOUR AND TRADE UNION ACTION



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DOSSIER: HEALTH, LABOUR AND TRADE UNION ACTION

Over the past four decades we have witnessed a fast political and economic transformation, deeply impacting work in both its technical and organizational dimension and its regulation. Among these impacts, most visible for society are present trade union negotiation guidelines. However, some of them have negative result for workers, for example: the employment issue, flexibility of wage contracts and working hours, outsourcing and labor rights deregulation.

On the other side, some issues related to labour although being less visible to the society and having lesser centrality in discussion and negotiation processes have permanent influence in male and female workers, generating important impact in their health. Among others: management implementation through objectives and goals, increasing working intensity, rise of pressure, control and responsibilities and competition among workers and physical, mental and emotional overload (CARDOSO, 2014).

Partially depicted in official labour accidents data, worker's health is still an unfortunately less visible consequence of these changes. Work related suffering and diseases increase and diversify. Among others we can mention: general fatigue, muscle pain, stress, anxiety, anguish, depression, fear, burnout, panic syndrome, repetitive strain injury (LER), work related musculo-skeletal disorder (DORT), blood pressure and heart disease, etc (Rivolier, 1989; Gollac, 2005; Dal Rosso, 2008; Seligmann-Silva, 2011).

Base in this context, in 2009¹, DIEESE's trade union management decided to include worker's health in axe's structure orienting its production: employment; income; collective bargaining; development; public policies and worker's health. The objective would be contributing to improve worker's health discussion already being held in trade unions, government bodies, academic groups and other social actors. Therefore the "Health, Labour and Trade Union Action" program was created, based in the understanding than possible interventions in illness determining is directly related to a capacity of transforming working processes and modify risk and suffering situations.

Guiding principle of this program was discussion regarding how to

1 Since a long time ago, DIEESE is doing studies on public health and workers' health. Since 2008, as required by trade union management, DIEESE began a systematic process of incorporating this subject to its acting. Seminars, courses and research on supplementary health and sanitary surveillance and its relationship with public health and workers' health have been done through agreements with the National Agency of Supplementary Health - ANS and the National Agency of Sanitary Surveillance - ANVISA. Also the National Forum of Central Trade Union Organizations on Workers' Health (FNCSST) began acting from the training research coordinated by DIEESE. And from 2010, the Forum composed by all Trade Union centrals, DIEESE and DIESAT has regular meetings. DIEESE also had an active participation at the IV National Conference on Workers' Health. Regarding trade union training, the institution develops many activities related with these issues.

address worker's health issue. Based in what concept of health? Based in what understanding of the relationship between health and disease? Or from what look between labour and health relationship? How contributing to trade union action in its diverse operation spaces? What information is needed to do it?

DIEESE, in accordance with lines including health beyond its strictly biological and individual dimension, took as starting point seeing health as result of historical and social process having labour as main determinant, be it because in its social and sexual division are origins of social differences and contradictions, or because of unequal distribution of risk conditions and factors. (RODRIGUEZ)

Then health will reflect from one side the historical, economic, political and social context of each season and working processes characteristics of various production sectors, and from other side workers' possibilities to intervene in difficult and troubled situations arising from environment conditions, norms and controls, working remuneration and intensification, or other contractual requirements and labour organization.

In this way, worker's health is above all a political issue cutting across worker's set of demands. Therefore it is a cross cutting subject fully focused by trade union action and not only the Internal Commissions for Accident Prevention (CIPA) and health professionals.

This point of view concurs with theory on social determinants of health-sickness process by enhancing that biological and physical determinants must be analyzed, but above all social determinants of this process (BUSS e PELLEGRINI, 2007). Or in other words when health is seen as a socially determined process, this opens space for actions and interventions of subject and social actors in what decides and influences suffering, sickening and accidents at work.

Thus analyzing social determinants will allow better understanding relationship between life conditions and worker's health situation, highlighting factors influencing / determining health problems occurrence (BUSS and PELLEGRINI, 2007). This logic questions still existing idea that origin of sickening must always be found in individuals, due to its physical, physiological and psychosocial peculiarities, or to its core family history of life; that reason of getting sick or having an accident at work are workers' faults – because they did not pay enough attention, or take advantages or are lazy, etc. (Maeno and Paparelli, 2013). Besides, it is worth mentioning that danger of blaming workers is even greater when talking about mental/emotional diseases, since they are rarely considered as fruit of their work (DIEESE, 2013).

If the objective is understanding health-disease process, it is essential to study labour, know how it is currently performed in each sector, in each workplace. But what is the meaning of studying labour? To know all its true dimensions, its technical and organizational conditions, strategies used by workers to achieve their tasks and other requirements, and at the same time, cope with suffering; to know about working relationships, management policies and en-

vironmental conditions, among others. It also means understanding dimensions of dialogue with values of society and the historical moment (DIEESE, 2013). And especially understanding how workers experience jobs (Dal Rosso, 2008). More specifically, it means understanding current physical, emotional and cognitive workers' demands, regarding amount of work, its intensity and pace, targets and objectives, pressure to *reduce time* required to *accomplish activities*. But also understanding complexity of work, their level of responsibilities and scope of constant changes (regarding working colleagues, its coordination, functions, products and norms among others). This because according to Dal Rosso (2008) main issue is that capital is demanding each time more work from same workers, also stated by several authors this high working intensification in last decades (Durant, 2004; Gollac, 2005; Jégourel, 2010; Alves, 2011 and Cardoso, 2013).

It is also essential analyzing which means workers have to do their jobs, or which are conditions offered by companies to allow them doing required tasks. And here again we need to consider whole dimensions of labour. What level of autonomy / freedom do workers have? Are they invited to participate in organization changes and definition of working objectives? Do workers have training compatible with required tasks? Do they have enough information? Do they have enough time to do required tasks? Do they consider its remuneration being socially compatible with required tasks? Do they have support provided by coordinators or colleague workers, or does competition prevail among them? Do workers feel being attacked in their workplace? Are their jobs recognized? How are physical requirements at the workplace? Do workers feel safe at work or unsafe and scared? (Cardoso, 2015).

To face these challenges, DIEESE and the DIEESE *School of Labor Sciences*, based in its "Health, Labour and Trade Union Action" Program, is addressed to contribute to a systematization and production of knowledge and building a new area of practices able to reverse high rates of work-related accidents and diseases.

The "Dossier: Health, Work and Trade Union Action" hopes to help in this discussion by contributing with texts covering different approaches, points of view and activities from French, Belgian, Argentine and Brazilian authors, all committed with subjects of labour – men and female workers.

The first study, "Human labour and its centrality" written by Julio César Neffa is a broad reflection on work as human activity and its implications of its exercise in health-sickness processes. Neffa is a researcher at the Labor and Study Research Center (CEIL) attached to the National Council for Scientific and Technical Research (CONICET) from Argentina.

"Violent management and organizational pathology: reflections for an articulated intervention among academic groups, services and trade union movement" describes current common competitive business strategies, the so called "soul-sucking jobs" affecting workers' health. Their authors – Mara Takahashi, Paulo Montanher, Alessandro da Silva and Rodolfo Vilela work at

Workers' Health Reference Center (CEREST) and at the Faculty of Public Health of the University of São Paulo (FSP/USP). Their experience is driven to articulate interventions among academic research, workers' health social movement, trade union movement and public policies, strengthening struggle for transformations in labour organization.

Next text comes from Belgium and author is Laurent Vogel, researcher at the European Trade Union Institute, from European Trade Union Confederation. Title of his text is: "Health and safety at work in the European Union: A critical point of view based in trade union experience", describing issues related to negotiations at the beginning of the European Union, unionist achievements including worker's health preventive legislation and partial social control of working conditions, whose outcome was one of the best quality-of-life indicators for region. However neoliberal policies paralyzed these advances in last year's and brought uncertainty (and fear) of future scenario.

"Labour, health and trade union action in offshore oil activity at the Campos basin, in the state of Rio de Janeiro", written by professor Marcelo Figueiredo from Universidade Federal Fluminense (UFF) enhances very serious life risks to which are exposed workers aboard offshore oil platforms: to most evident and visible hazards must be added subjective sufferings, in view of alternate confinement periods and social gathering when being ashore, in a perverse combined physical and psychological decline. In view of countless serious and lethal accidents at work still going on in oil activities, Figueiredo proposes a broad debate and a concrete commitment from representatives of main companies, workers trade unions and public power to modify that reality.

Doctor in psychiatry Edith Seligmann-Silva's paper "Unemployment and mental wear – a challenge to public policies and Trade unions", develops her considerations regarding mental wear and disease in working and unemployment situations. The author states that social and material helplessness go together with "the subjective experience of helplessness or imminent threat of it to appear". Doctor Seligmann-Silva is an academic researcher and pioneering militant in Brazilian workers health studies and dialogues with subjects of work, and her presence in the DIEESE's Labour Sciences Journal is above all, an honor.

To conclude, a subject which cannot be missing in this report: health-disease related to gender in men and women workers. Régine Bercot's paper: "Gender malaise at work" discourses about relationships of belonging to one or another gender and differences between risks and disease within working environment. Going beyond this, Bercot questions which would be the appropriate methodological approach regarding that issue, since it implies analyzing a considerable volume of variables (or aspects). Madame Bercot is a professor at Université Paris 8 and member of the Center of Sociological and Political Research in Paris (GTM).

But the "Dossier: Health, work and trade union action" does not end here... The chapter of Essays brings very pertinent contributions to the main subject,

such as methodology of “Labour Collective Analysis (ACT): do you want to see it? “Just listen”, by Leda Leal Ferreira; “Disabled persons – overthrowing myths and prejudices”, by Carlos Aparício Clemente; and “Negotiations and claims on workers health”, by Ana Claudia Moreira Cardoso and Luciana Pena Morgado.

Our thanks to everyone who has contributed to this edition. We hope reading and discussing our ideas here stated could bring strategies for workers struggle, for trade union movement and social movements fighting to transform working activities. And do this by informing and struggling for sickening issues, pointing to achieve honorable jobs and life, rescuing and strengthening its positive dimension in health structuring.