

## PLEASURE AND SUFFERING OF READAPTED WORKERS AFTER WORK ACCIDENT

## PRAZER E SOFRIMENTO DE TRABALHADORES READAPTADOS APÓS ACIDENTE DO TRABALHO

## PLACER Y SUFRIMIENTO DE LOS TRABAJADORES READAPTADOS DESPUÉS DEL ACCIDENTE DE TRABAJO

Érika Maria Izaias<sup>1</sup>, Paloma de Souza Cavalcante Pissinati<sup>2</sup>, Maria José Quina Galdino<sup>3</sup>, Maynara Fernanda Carvalho Barreto<sup>4</sup>, Sonia Silva Marcon<sup>5</sup>, Maria do Carmo Fernandez Lourenço Haddad<sup>6</sup>

### ABSTRACT

**Objective:** to unveil the feelings of pleasure and suffering of workers who have been readapted after an occupational accident. **Methods:** qualitative research conducted with six readapted workers from a public university. Data were collected by semi-structured interviews, subjected to content analysis and discussed in the light of Dejourian Work Psychodynamics from the pre-categories: feelings of pleasure and suffering of workers readaptated after work accident. **Results:** the pleasure was related to the support received by coworkers, the recognition of new activities and their ability to work. The suffering resulted from the devaluation of the worker by the institution, work overload, inadequacy of duties and non-acceptance of limitations by team members. **Conclusions:** knowing reports resulting from functional readaptation processes due to occupational accidents allows the planning of surveillance actions that promote health and pleasure in the workplace.

**Descriptors:** Employment, Supported; Occupational Health; Emotions.

### RESUMO

**Objetivo:** desvelar os sentimentos de prazer e sofrimento de trabalhadores readaptados após acidente do trabalho. **Métodos:** pesquisa qualitativa realizada com seis trabalhadores readaptados de uma universidade pública. Os dados foram coletados por entrevistas semiestruturadas, submetidos à análise de conteúdo e discutidos à luz da Psicodinâmica do Trabalho Dejouriana a partir das pré-categorias: sentimentos de prazer e de sofrimento dos trabalhadores readaptados após acidente do trabalho. **Resultados:** o prazer esteve relacionado ao apoio recebido por colegas de trabalho, ao reconhecimento das novas atividades desenvolvidas e de sua capacidade laboral. Já o sofrimento decorreu da desvalorização do trabalhador pela instituição, sobrecarga de trabalho, inadequação de funções e não aceitação das limitações por membros da equipe. **Conclusões:** conhecer relatos decorrentes dos processos de readaptação funcional devido aos acidentes do trabalho permite planejar ações de vigilância que promovam saúde e prazer no ambiente laboral.

**Descritores:** Readaptação ao emprego; Saúde do trabalhador; Emoções.

1 Enfermeira. Especialista em Gerência dos Serviços de Enfermagem. Prefeitura Municipal de Nova Europa.

2 Pós -Doutoranda. Programa de Pós-Graduação em Enfermagem, Universidade Estadual de Londrina (UEL).

3 Doutora em Enfermagem. Docente do Departamento de Enfermagem da Universidade Estadual do Norte do Paraná (UENP).

4 Doutoranda em Enfermagem. Universidade Estadual de Londrina (UEL).

5 Doutora em Enfermagem. Docente do Departamento de Enfermagem da Universidade Estadual de Maringá (UEM).

6 Doutora em Enfermagem. Docente do Departamento de Enfermagem. Universidade Estadual de Londrina (UEL).

## RESUMEN

**Objetivo:** desvelar los sentimientos de placer y sufrimiento de los trabajadores que han sido readaptados después de un accidente laboral. **Métodos:** investigación cualitativa realizada con seis trabajadores readaptados de una universidad pública. Los datos se recopilaban mediante entrevistas semiestructuradas, se sometieron a análisis de contenido y se analizaron a la luz de la Psicodinámica del trabajo de Dejourian desde las precategorias: sentimientos de placer y sufrimiento de los trabajadores readaptados después de un accidente de trabajo. **Resultados:** el placer estuvo relacionado con el apoyo recibido por los compañeros de trabajo, el reconocimiento de las nuevas actividades y su capacidad para trabajar. El sufrimiento provino de la devaluación del trabajador por parte de la institución, la sobrecarga de trabajo, la insuficiencia de los deberes y la no aceptación de las limitaciones por parte de los miembros del equipo. **Conclusiones:** los informes de conocimiento resultantes de los procesos de readaptación funcional debidos a accidentes laborales permiten la planificación de acciones de vigilancia que promueven la salud y el placer en el lugar de trabajo. **Descriptor:** Empleos subvencionados; Salud laboral; Emociones.

## INTRODUCTION

The occupational accident covers the typical accident due to sudden or unexpected causes, commuting accidents and occupational diseases, whether they are triggered by the exercise of work or acquired by the conditions in which the work is performed. Regarding its definition “*work accident is what occurs due to the exercise of work [...], causing bodily injury or functional disturbance that causes death or the loss or reduction, permanent or temporary, of the ability to work.*”<sup>1</sup>

Studies demonstrate that occupational accidents are among the main reasons for mortality, disability, illness and temporary leave of workers, being considered as one of the most important public health problems worldwide, due to the high individual, social and economic costs.<sup>2-3</sup> In Brazil, over the years, there has

been a gradual increase in the number of occupational accidents recorded at the National Institute of Social Security. In 2013, the highest incidence of cases was related to injuries and fractures of the upper and lower limbs, and musculoskeletal diseases, such as synovitis, tenosynovitis and back pain.<sup>4</sup>

Returning to work after the accident has been considered a major challenge in the area of occupational health, as it presents elements that can constitute facilitators or barriers such as pain, psychosocial factors, work demands, time off and social and organizational support, which requires the development of intersectoral policies.<sup>5</sup>

Workers who present physical and/or mental changes after occupational accidents may evolve with limitations that lead to temporary or permanent

restrictions, making it impossible for them to perform the duties of the position for which they were appointed. Thus, it is necessary to implement preventive measures that help to minimize stress on workers, such as the adequate dimensioning of human resources.<sup>6</sup>

In view of the above, readaptation constitutes a moment in which the worker will experience a new situation in his professional life, in which new feelings and changes to be faced can emerge. Thus, the following question emerged "what are the feelings of pleasure and suffering experienced by workers readapted after a work accident?". It is believed that investigating the repercussions of this process from the perspective of the worker may allow the development of strategies by managers and the workers themselves, as well as subsidize the improvement of Return to Work Programs, in order to contribute to the biopsychosocial well-being of these individuals.

Thus, this study aimed to reveal the feelings of pleasure and suffering of workers readapted after an accident at work.

## **METHODS**

Descriptive, qualitative research carried out on a public university in

southern Brazil. It is a higher education institution with 1682 professors and 3841 university agents, mostly public servants with public contracts.

Possible research participants were identified by a survey with the Specialized Service in Safety Engineering and Occupational Medicine of the institution under study, seeking to identify the records of occupational accidents that occurred from January 2009 to December 2013, and that resulted in functional readaptation.

A total of 10 readapted workers were obtained, and therefore, all of them were invited to participate in this research; however, four refused. Data were collected through six individual semi-structured interviews, from June to July 2014, through which the proposed objective was achieved. The interviews lasted an average of 30 minutes, were recorded and carried out at locations and times previously defined by the participants.

The interview script was composed of closed questions for the characterization of the interviewees, and, in order to unveil the object of study, the following question was used: "What are the feelings related to functional readaptation after the work accident in your life?".

The participants' speeches were transcribed in full and submitted to content analysis, which consists of three stages. In

the pre-analysis, the corpus was organized through floating reading, with empirical data being exhaustively explored; in the exploration of the material, the content was classified to reach the core of text understanding and the categories that represented the expressions that emerged from the workers' narratives; finally, the results were processed, by inference and interpretation.<sup>7</sup>

Data were analyzed and discussed in the light of the theoretical framework of Psychodynamics of Dejourian Work that makes reference to the relationship between work and the experiences of pleasure and suffering. For Dejours, the organization and work relationships trigger subjective feelings that are pleasurable or harmful to the worker, who tends to react and seek defense strategies to stay in the work environment in a healthy way. However, when he is unable to live with these factors, he becomes ill, which can manifest itself through physical or psychological changes.<sup>8</sup>

To this end, two analytical pre-categories were defined: "feelings of pleasure of workers readapted after an accident at work" and "feelings of suffering of workers readapted after an accident at work". These were listed in accordance with the objective of the study and theoretical framework adopted.

The development of the study respected the ethical requirements of the Brazilian resolution of research involving human beings, starting with the approval of the ethics committee according to opinion number 736,639. All respondents announced their participation by signing an Informed Consent Form. To preserve anonymity, each participant received an alphanumeric code, composed of the initial letter of the word worker followed by the order number of the testimony (W1, W2).

## RESULTS

The research participants were predominantly female, with an average age of 52.3 years and an average working time at the institution of 17 years. Four held positions in the administrative sector and two in the nursing care sector. As for the causes of work accidents that triggered the processes of functional readaptation, repetitive strain injury, spinal injury, fall, fracture and dermatological complications were found.

The narratives of the interviewed workers made it possible to identify the feelings of pleasure and suffering experienced after the work accident, which were presented through the following categories:

## **Feelings of pleasure of workers readapted after a work accident**

The interviewees evidenced the pleasure of returning to work after the accident and the importance of recognition in the new role, as shown below:

*I was welcomed. I made changes to the files and improved the service. I felt good to see my work giving good results. (W1)*

*I felt good because I was able to do what I know how to do. Currently I feel great! (W5)*  
*[...] I see readaptation as a chance for the employee to be seen as useful again for something. (W6)*

*Gradually people started to realize my condition, they helped me and I could evolve [...]*  
*I know that I help with my work and they don't treat me differently [...]*  
*I found myself in the new role. (W2)*

## **Suffering feelings of workers readapted after an accident at work**

In this category, the workers' suffering was related to negative feelings of fear of the unknown and of not being recognized in the new job, as manifested in the following speeches:

*When we arrive [at the new job], we are afraid and do not know how it will be. (W1)*

*I even thought about leaving here, at first [...], but then I thought: this is not fair, because this institution is very big and has a lot of place for me to work! (W3)*

*When I moved I was very upset [...]. I liked what I did. Then you feel a little useless [...],*

*until you adapt to another [activity] and people value you. (W3)*

It was also identified that the institutional organization before the functional readaptation was a source of suffering. The participants indicated the feelings of devaluation of the worker, work overload, unpreparedness of sectorial managers and human resources professionals for the management of the team that will receive the adjusted worker. In this sense, some reported:

*It's the people who go after it, look for where it goes, because the company doesn't get involved either. [...] it's more up to us. (W1)*

*When I brought the letter to the boss, she even thought it was a little bad; he said he had no other job to do [...] with me I was disappointed. (W4)*

*I was an administrative technician and they put me on medication separation. [...] I always think about all my knowledge, wasted there [...] after all, I have a college degree (W5)*

In addition, they reported that even after readjusting the activities performed, they were still not adequate to their limitations, requiring a new change of function. This fact also caused suffering, as evidenced by the following report:

*I had two readaptations: in the first sector I worked with two other employees, it was very 'easy!' We divided the sector according to the instructions. I did well! [...] I got out of there, because I needed more care for my*

*health; and I came to the current sector, which was also 'super quiet'. The employee was busy and I really came to work, it wasn't to be 'leaning', you know? (W6)*

From the perspective of the interviewees, in most cases, the work team does not understand the functional readaptation and the worker's limitations, making this process more painful, as identified in the following narratives:

*Is very sad! There are always colleagues who do not accept, who think you are being privileged [...]. Sometimes they don't verbalize it, but you can tell by the looks and postures. [...] few colleagues remember my condition. [...] honestly, there are days when you feel like asking for dismissal. (W2)*

*[...] but it is a lot of demands [...] because it is a stress, because you are readjusted they think you have to do everything. (W3)*

*The first people who 'make a case' are the people you work for [...] I heard comments that my illness is cool, that if it were serious I would have retired. [...] so leaving there was already a relief. (W6)*

*[...] thankfully, we have friends out here [...] because you feel abandoned, in the middle of the street. (W1)*

## DISCUSSION

Achieving pleasure after readaptation resulting from an occupational accident is a challenge for workers. In this study, it was observed that the support of team members was a factor

that contributed positively to adapt to this process. This result refers to the fact that a good interpersonal relationship and the appreciation of the other favors the development of humanization among workers and, thus, allows the construction of a healthy work environment for professional performance<sup>9</sup>, in order to facilitate coping with such situation.

In addition, workers expressed that recognition by coworkers was also a factor that generates pleasure after functional readaptation. Critical literature review identified that the welcoming and recognition by the team members acted as facilitators in the process of returning to work activities for individuals affected by work-related musculoskeletal disorders.<sup>5</sup>

For Dejours, recognition generates security and promotes the fulfillment of the worker's ego, understood as a symbolic retribution for the work done, which thus represents a source of pleasure.<sup>10-11</sup> Therefore, it favors the maintenance of the workers' mental health, in addition to promote organizational changes<sup>12</sup>, being fundamental for the adaptation of the readapted worker after a work accident.

When performing the work, the individual needs recognition, since it is from then on that the other fragile burdens of this process will be relieved, since the disappointments and anguishes will also be

honored. At that moment, the worker can find the positive relationship he has with his work.<sup>8</sup>

The return to the work environment, even after experiencing an accident at work, can become pleasurable from the moment that the worker starts to feel useful again when performing a new function. In this context, the pleasure of returning to work will depend on the meaning he attributes to this activity, as well as the feelings aroused that permeate the cognitive and emotional fields.<sup>5,11</sup>

Psychodynamics of Work focuses on the need that man has to conquer otherness from his work and, thus, form his identity throughout life. The real sensation of living under a constant evaluation process makes individuals to constitute their uniqueness according to the different exchange processes in daily relationships.<sup>11,13</sup>

Throughout their professional trajectory, workers seek a balance between healthy and insane. Between these two paradoxes is suffering, the result of coercions in the work environment, which tend to exclude or relocate individuals in a situation of disability. The difficulty in achieving this balance contributes to the occurrence of occupational disease, which can be evidenced primarily by

psychological changes, even before physical manifestations.<sup>11</sup>

The suffering present in the reports indicates that issues such as exclusion and depreciation associated this moment with the negative situations that marked this professional phase. Therefore, it became evident that post-accident functional readaptation at work was also marked by psychological stress, characterized by internal confrontation in the face of the limitations of the new work condition.<sup>14</sup>

The workers expressed their fear of performing new activities and adapting to the unknown. The return to work after a period of absence can be accompanied by a feeling of caution, related to the insecurity in being able to perform the activities, uncertainties regarding their well-being and physical or mental health<sup>15</sup>, a situation that can be intensified when it involves new functions, not previously executed.

Some reports pointed to the lack of support from the team as a generator of instability in professional performance and a cause of retraction in the new team. Therefore, the professional routine tends to be impaired as the worker feels insufficient for the professional evolution process.<sup>14,16</sup>

For Dejours<sup>11</sup>, there are some dimensions in the work environment that cannot be fully indicated and imposed by the manager, as they depend, first, on the

availability of those involved. Among them, cooperation between workers and subjective motivation, which consists of proposing trusting relationships to workers; however, the actual involvement will depend on ethical and even affective factors.

It is emphasized the importance of managers to implement worker monitoring programs after returning to work. The adoption of such a strategy is based on the fact that many individuals may have difficulties in carrying out the designated activities, in addition to seeking to prevent them from performing the previous function, which may be inadequate due to the current state of health.

In this sense, it is important to analyze the new work activities, as well as the peculiarities of the readjusted workers, in order to provide assertive indications to employees who are in a state of functional readaptation. It is necessary to consider previous experiences in order to improve performance in the work process and observe the positive repercussions for both the individual and the institution.<sup>14,16</sup>

Carefully examining the behavioral changes presented by workers, who suffered an accident at work and need functional readaptation, includes paying attention to the gradual return to activities, in order to allow the readapted one to

elaborate coping strategies in the face of changes.<sup>18</sup> In 1987, Dejours already considered the work organization as a reference for the results favorable or not to the psychic performance of the worker.<sup>13</sup>

In *Psychodynamics of Work*, there is an abstract relationship between human beings and work, which permeates employers and makes them jointly responsible for the quality of life and the illness of their subordinates. This premise leads to reflect that the readapted employees, moved by the wear and tear of this process and exposed to psychological suffering after accidents or occupational diseases, may be more prone to the difficulty of adapting to the new.<sup>11,13</sup>

Contrary to the statements of some participants, for others, the process of functional readaptation was marked by the incomprehension of other co-workers in relation to functional limitations. In this sense, it is emphasized that readapted individuals tend to seek individual strategies to get used to the new routine. However, overcoming prejudices and the exclusion of team members still represents a challenge, since many do not believe in illness and consider it a strategy to escape the performance of work activities.<sup>16</sup>

Even if he is part of a certain team, the worker who experiences a process of rehabilitation presents the feeling of

exclusion and isolation in his old team and, after being relocated to his new role, he may not feel properly prepared to perform the proposed activities. Often his work will be seen as less complex in relation to colleagues and this can be understood as the loss of his own personality.<sup>14,16</sup>

When analyzing the phase of suffering evidenced by workers during their return to work, it is necessary to refer to Dejours, who classifies episodes of unsuspected suffering related to human life and work. Therefore, the feeling indicated by the interviewees is discriminated against as current suffering, in its synchronous dimension, which occurred when the subject met with work.<sup>19</sup>

However, suffering originates from private stories, submitting to the social context and psychic construction of each individual, so that the reports also indicated what Dejours calls creative suffering, observed when the person who experiences suffering tends to develop favorable solutions for his life and, consequently, for his health.<sup>19</sup>

In the midst of the various sensations experienced during the moment of functional readaptation, the worker can reach overcoming when he realizes the harmony between his new activities and his subconscious desire to perform, because the psychic burden of the task

performed should reduce the psychic burden of work in itself. Overcoming will also depend on individual characteristics, which leads us to rethink the various cognitive constructions.<sup>11,13,19</sup>

The functional readaptation process aims to take the worker to new working conditions in which he can perform with his current physical capacity, aiming at physical well-being. However, it is also necessary to consider the cognitive satisfaction that will be responsible for easing the feeling of helplessness and disability. The reports indicated disapproval for the lack of psychological support at the time of readaptation, in which physical comfort is sometimes considered at the expense of the feelings of loss instilled in the performance of new functions.

## CONCLUSIONS

It was observed that the feelings of pleasure expressed by workers readapted after work accident were related to the support received by co-workers and to the recognition of the new activities developed and their work capacity. On the other hand, suffering was reported with greater intensity in this process, due to the devaluation of the worker by the

institution, work overload, inadequate functions and non-acceptance of limitations by the other team members.

In view of this, the managers' challenge regarding adverse conditions related to work overload and the logic of productivity is reinforced. Upon learning of reports resulting from functional readaptation processes due to occupational accidents, institutions have the possibility to plan surveillance actions in order to intervene in the work process, so to make the relationship between work and health constructive.

This study found some limitations during the interviews regarding the different conceptions and meanings that workers have regarding the issue, as well as the prevalence of negative views on the subject. However, it contributes to the practice of nurses, as team leaders and health service managers, by providing subsidies to understand the feelings that permeate the process of functional readaptation and plan strategies to manage their repercussions both for the affected individual and the organization that host him.

## REFERENCES

1. Ministério da Previdência Social (Brasil), Instituto Nacional do Seguro Social. Manual de acidente do trabalho. Brasília, DF: Instituto Nacional do Seguro Social; 2016[citado em 04 jun 2019]. Disponível em: <http://file.abiplast.org.br/download/2016/manualdeacidentedetrabalhoins2016.pdf>
2. Laal F, Modrek MJ, Balarak D, Mohammadi M, Rakhshani M, Rigi N. Relationship between quality of life and occupational accidents in South-East of Iran (Zahedan). *Glob J Health Sci.* [Internet]. 2017 [citado em 28 jun 2019]; 9(2):112-8. Disponível em: [https://pdfs.semanticscholar.org/e5d2/82b4aa41f466012fb1a5cb77f19025295531.pdf?\\_ga=2.216530326.127877110.1595520855-802585737.1595520855](https://pdfs.semanticscholar.org/e5d2/82b4aa41f466012fb1a5cb77f19025295531.pdf?_ga=2.216530326.127877110.1595520855-802585737.1595520855)
3. Gonzales-Delgado M, Gómez-Dantés H, Fernández-Niño JA, Robles E, Borja VH, Aguilar M. Factors associated with fatal occupational accidents among Mexican workers: a national analysis. *PLoS One* [Internet]. 2015 [citado em 02 jul 2019]; 10(3):1-19. Disponível em: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4366246>
4. ANUÁRIO ESTATÍSTICO DA PREVIDÊNCIA SOCIAL. Brasília, DF: Ministério da Previdência Social; 2013[citado em 10 jun 2019]; 22(350):1-899. Disponível em: <http://sa.previdencia.gov.br/site/2015/03/AEPS-2013-v.-26.02.pdf>
5. Saldanha JHS, Pereira APM, Neves RF, Lima MAG. Facilitadores e barreiras de retorno ao trabalho de trabalhadores acometidos por LER/DORT. *Rev Bras Saúde Ocup.* [Internet]. 2013 [citado em 10 dez 2018]; 38(127):122-38. Disponível em:

- <https://www.scielo.br/pdf/rbso/v38n127/v38n127a14.pdf>
6. Cacciari P, Haddad MCL, Dalmas JC. Nível de estresse em trabalhadores readequados e readaptados em universidade estadual pública. *Texto Contexto Enferm.* [Internet]. 2016 [citado em 10 jul 2019]; 25(2):1-7. Disponível em: [http://www.scielo.br/pdf/tce/v25n2/pt\\_0104-0707-tce-25-02-4640014.pdf](http://www.scielo.br/pdf/tce/v25n2/pt_0104-0707-tce-25-02-4640014.pdf)
  7. Bardin L. *Análise de conteúdo*. Lisboa: Persona edições; 2011.
  8. Dejours C, Abdoucheli E, Jayet C. *Psicodinâmica do trabalho: contribuição da escola dejouriana à análise da relação prazer, sofrimento e trabalho*. São Paulo: Atlas; 2014. 145p.
  9. Martins JT, Galdino MJQ, Garanhani ML, Sammi KM, Trevisan GS. Humanização no processo de trabalho na percepção de enfermeiros de unidade de terapia intensiva. *Cogitare Enferm.* [Internet]. 2015 [citado em 10 dez 2018]; 20(3):589-95. Disponível em: <http://revistas.ufpr.br/cogitare/article/view/41521/26202>
  10. Dejours CA. A psicodinâmica do trabalho na pós-modernidade. In: Mendes AM, Cruz SC, Facas EP, organizadores. *Diálogos em psicodinâmica do trabalho*. 2ed. Brasília, DF: Paralelo 15; 2016.
  11. Dejours C. Análise psicodinâmica das situações de trabalho e sociologia da linguagem. In: Selma Lancman S, Sznelman LI, organizadores. *Christophe Dejours: da psicopatologia à psicodinâmica do trabalho*. Rio de Janeiro: Editora Fiocruz; Brasília: Paralelo 15; 2ed. 2008. p. 245-289.
  12. Mendes AM, Vieira FO. Diálogos entre a psicodinâmica e clínica do trabalho e os estudos sobre os coletivos de trabalho e práticas organizacionais. *Farol: revista de estudos organizacionais e sociedade* [Internet]. 2014 [citado em 08 jan 2018]; 1(1):144-89. Disponível em: <http://revistas.face.ufmg.br/index.php/farol/article/view/2608>
  13. Dejours C. *A Loucura do trabalho: estudo de psicopatologia do trabalho*. São Paulo: Cortez; 1987.
  14. Simplício SD, Andrade MD. Compreendendo a questão da saúde dos professores da rede pública municipal de São Paulo. *Psico.* [Internet]. 2011 [citado em 08 jan 2018]; 42(2):159-67. Disponível em: <https://revistaseletronicas.pucrs.br/ojs/index.php/revistapsico/article/view/7566/6517>
  15. Macaia AAS, Fischer FM. Retorno ao trabalho de professores após afastamentos por transtornos mentais. *Saúde Soc.* [Internet]. 2015 [citado em 08 jan 2018]; 24(3):841-52. Disponível em: <http://www.revistas.usp.br/sausoc/article/view/104880/103673>
  16. Souza KR, Rozemberg B. As macropolíticas educacionais e a micropolítica de gestão escolar: repercussões na saúde dos trabalhadores. *Educ Pesquisa.* [Internet]. 2013 [citado em 08 fev 2018]; 39(2):433-47. Disponível em: <https://www.scielo.br/pdf/ep/v39n2/aop967.pdf>
  17. Simonelli AP, Jackson Filho JM, Schneider BRL, Machado DR. Retorno ao trabalho de trabalhadores com amputação de dedos em Curitiba, PR, Brasil. *Rev Ter Ocup.* [Internet]. 2016 [citado em 04 jun 2018]; 27(2):138-45. Disponível em: <http://www.periodicos.usp.br/rto/article/view/105329/116567>
  18. Noordik E, Van der Klink JJ, Geskus RB, Boer MR, Van Dijk JJ, Nieuwenhuijsen K. Effectiveness of an exposure-based return to work program for works on sick leave due to common mental disorders: a cluster randomized controlled trial. *Scand J Work Environ Health.* [Internet]. 2013 [citado em 04 jun 2018]; 39(2):144-

54. Disponível em:  
<https://www.ncbi.nlm.nih.gov/pubmed/22951572>

19. Dejours C. Uma nova visão do sofrimento humano nas organizações. In: Chanlat J, coordenadora. O indivíduo na organização. São Paulo: Atlas; 1993. p. 149-173

RECEIVED: 07/29/2019  
APPROVED: 12/12/2019  
PUBLISHED: 07/2020