

Reflecting the interface between rural work and mental health of citriculture workers

Ana Cláudia Santos^a, Sandra Aiache Menta^b

^aUniversidade Federal de Sergipe – UFS, Lagarto, SE, Brasil.

^bDepartamento de Terapia Ocupacional, Universidade Federal de Sergipe – UFS, Lagarto, SE, Brasil.

Abstract: Objective: This descriptive study provides an overview of the health surveillance of rural workers aiming to describe the agricultural structure and working conditions of citriculture workers in the region of Lagarto/SE and reflect the relationship between citriculture work and the worker's mental health, expressed through the alcohol abuse. Method: This is an exploratory study of empirical nature with the qualitative approach developed from the documental study, observation and interviews in four services that are directly or indirectly involved in the scope of the comprehensive health care of workers. Data collection occurred during the period from December 2014 to March 2015. Results: The study evidenced the lack of a database with information on citrus growers in the municipality, demonstrating a weakness in the effectiveness of actions towards workers' health. The discussion addressed the Psychodynamics of Work by Dejours, reflecting on the work organizational aspects that affect the workers' psyche, which can significantly contribute to the alcohol abuse. Thus, it is necessary to analyze the link between mental health and work, as the process of becoming ill is specific to each, taking into account their daily life. Conclusion: From this we can infer that the occupational therapist plays a differentiated role in the workers' healthcare, as they take into consideration the historical, economic and social dimensions to understand the world of work. The study ends with reflections that aim to encourage a new perspective on the rural workers' health, as well as local changes.

Keywords: *Occupational Health, Rural Health, Mental Health, Occupational Risks, Occupational Therapy.*

Refletindo a interface entre trabalho rural e saúde mental dos trabalhadores da citricultura

Resumo: Objetivo: Este estudo descritivo apresenta um panorama geral da organização da vigilância em saúde do trabalhador rural, objetivando descrever a estrutura agrária e as condições de trabalho no cultivo da laranja do município de Lagarto-SE, refletindo a relação do trabalho na citricultura com a saúde mental do trabalhador, expresso por meio do abuso de álcool. Método: Trata-se de um estudo exploratório de natureza empírica com abordagem qualitativa, desenvolvida a partir de estudo documental, observação e entrevistas em quatro serviços existentes no município que, de forma direta ou indireta, estariam envolvidos no escopo da atenção integral à saúde do trabalhador. A coleta de dados ocorreu no período de dezembro de 2014 a março de 2015. Resultados: A pesquisa evidenciou a inexistência de um banco de dados com informações sobre os citricultores do município, demonstrando uma fragilidade na efetividade das ações destinadas à saúde do trabalhador. A discussão pontuou a Psicodinâmica do Trabalho trazida por Dejours, refletindo os aspectos da organização do trabalho que afeta o psiquismo dos trabalhadores. Conclusão: Faz-se necessário um olhar quanto ao nexo da saúde mental com o trabalho, pois o processo de adoecer é específico para cada indivíduo, envolvendo o seu cotidiano. Infere-se que o terapeuta ocupacional exerce um papel diferenciado na atenção à saúde do trabalhador, pois a entende a partir da compreensão do mundo do trabalho em suas dimensões históricas, econômicas e sociais. Finaliza com reflexões que visam a despertar um novo olhar para a saúde do trabalhador rural, bem como mudanças em nível local.

Palavras-chave: *Saúde do Trabalhador, Saúde da População Rural, Saúde Mental, Riscos Ocupacionais, Terapia Ocupacional.*

1 Introduction

In the contemporaneity, the relationship between work and health workers in Brazil are a complex set, which causes coexist multiple work situations characterized by different stages of technological incorporation, different forms of organization and management, relationships and forms of contract work, reflecting on the life, the sicken and dying of workers. This diversity of work situations, living and illness patterns have been accentuated due to political and economic circumstances. A different reality can be seen in the world of rural labor, as they are placed in different work processes: from the family production in small farms and the extraction to large agribusiness enterprises, multiplying in different regions of the country.

Traditionally, the rural activity is characterized by work relationships based on the Brazilian laws. Hiring of the temporary workforce for periods of harvest generates the phenomenon of workers called “buoy-cold,” subjected to poor working conditions, since the transport they use to get to the workplace to occupational risks they experience daily in the work environment (PIETRAFESA, 2011; OLIVEIRA, 2014).

In the Brazilian rural areas, the citriculture has significant numbers, reflecting the great economic and social importance of this activity for the country's economy. Brazil has nearly 30% of the world production, followed by the United States, with 17.6% of this total (NEVES et al., 2010).

Although including other citrus fruits, the citriculture has the orange as its main product, nearly 20 million of 32 million tons are the orange production of (NEVES et al., 2010).

In Sergipe, the orange production is the second largest permanent crop of the state, with 50,733 hectares of planted area and estimated production of 822,468 tons. Nationally, it represents only 3.7% of the production, but it is more than 40% of all production in the Northeast (INSTITUTO..., 2013).

Orange is an expressive culture in socio-economic terms, especially for small and medium-sized farms in the south-central region of Sergipe, involving a considerable number of workers, due to be a manual activity most times, with the use expressively unskilled workforce. The city of Lagarto has about 10% of the production and planted area of Orange in the State of Sergipe, and more than 50% of the Lagarto population is located in the rural area (SERGIPE, 2010).

In the citrus industry as in many agricultural activities, agricultural poisons are used on a large scale, considered one of the cultures using more pesticide in Brazil, consuming about 4.0% of the total inputs applied in the different cultures of national agriculture. This use is justified because the pesticides aim at ensuring and/or improve the productivity through phytosanitary problems control practices, according to the National Union of Products for Plant Protection (SINDICATO..., 2015).

However, the pesticides are among the most important risk factors for the health of workers and the environment. The occupational via is related to contamination of those handling pesticides. This contamination can occur both in the formulation process (mixing and/or dilution of pesticides for its use) and during handling (spraying, aid in conducting hoses sprays, waste disposal and contaminated packaging, washing equipment and disposal of contaminated clothing) and during the harvest (in which individuals have a contact with contaminated products) (DYMINSKI, 2006).

Together with the exposure of pesticides, the work in the citriculture exposes workers to high temperatures, risk of accidents with poisonous animals or work materials, submission to accelerated rates of production, high working hours, culminating in an activity that requires repetitive, monotonous movements and inadequate posture (SILVA et al., 2005; ALVES; GUIMARAES, 2012).

In this scenario where the citrus farmer is inserted, the agricultural sector has been widely recognized by the high risk of causing health problems related to various occupational exposures, being touted in some epidemiological studies, as the most dangerous work, making rural workers a group of more vulnerable to the harmful effects of health pesticides (FARIA, 2005). In Brazil, this fact becomes more worrisome because, since 2008, the country is the largest consumer of pesticides in the world (CARNEIRO et al., 2015).

The Agrochemicals Chronicles Intoxication Assessment Protocol explains that the exposure to a high amount of organophosphate (OP) can trigger neuropsychiatric manifestations, creating a condition known as chronic organophosphate-induced neuropsychiatric disorder or COPIND. This picture is observed in symptoms such as drowsiness, mental confusion, lethargy, anxiety, emotional lability, fatigue, irritability and depressive episodes, which are consistent with altered levels of the enzyme blood cholinesterase in the individual and may last for several months after acute and regress with cholinesterase levels to normal standards (PARANÁ, 2013).

Some Brazilian studies considered pioneers in the theme “Mental health of rural workers” showing the great rate of suicide and the high incidence of mental problems associated with exposure to pesticides in agricultural work, are brought by Faria et al. (1999), in a survey of farmers in the Serra Gaúcha. Some of the observed associations are the poisoning by pesticides with a strong association with minor psychiatric disorders and studies have shown persistent neuropsychological sequels in those who had moderate and severe acute poisoning by organophosphates.

A survey of Falk et al. (1996) held in Venâncio Aires-RS, shows the suicide rates in the population as one of the largest per hundred thousand inhabitants in Brazil and even in the world. The authors pointed out that there is sufficient evidence to formulate the hypothesis that the use of pesticides (especially organophosphates) is one of the main risk factors for suicide.

Araújo, Greggio and Pinheiro (2013) stated that the health profile of these workers is a clinical challenge, since the non-specific psychiatric disorders may be related to other diseases of labor origin and have a complex symptomatology. Most of the time, they are due to pesticide poisoning products, but they can also be associated with other factors such as accidents at work, work organization and poor conditions that involve working on the farm.

The health of worker has been a topic of several discussions by several professionals from different areas. However, there is still a paucity of data on the health of rural workers, with approaches that bring the interface between rural work and psychological distress, and the attention that has been focused on this population, with the development of actions that generate effective solutions to this reality.

This descriptive study shows an overview of the organization of health surveillance of rural workers, aiming to describe the agrarian structure and working conditions in the cultivation of orange in the city of Lagarto-SE and to reflect on the working relationship in the citrus industry to worker’s mental health.

2 Method

This is an exploratory study of empirical qualitative approach, developed from a documental study, observation and interviews, and focused on understanding the meanings of the orange farmers work process of the city of Lagarto - SE. This approach provides an overview of the interface between rural work and mental health of these workers.

This study was thinking of a research project initiated in 2013 by the Center for Research and Health Care Worker (NUPAST). This project involves the evaluation of biological markers of health and possible poisoning by organophosphates, determining the socioeconomic profile and the risk profile exposure to pesticides. The project is entitled “Analysis of health indicators and risk markers of exposure to pesticides on workers in orange crops in the regions of higher production in the state of Sergipe.” It has been approved by the Ethics Committee on Research of the Federal University of Sergipe, under CAAE 12988313.6.0000.5546, according to Resolution 466/12 of the National Health Council (BRASIL, 2013), and it is developed in partnership with the State Government, Municipal Government and the Ministry of Labor. It is an interdisciplinary project whose investigation aims at analyzing the worker’s health in citrus industries of the municipalities involved.

Through the experiences and observations during site visits by one of the researchers of NUPAST, it was sought to verify the attention given to the citrus farmer of the city of Lagarto-SE, by the services involved with them.

Thus, the existing services in the municipality were identified and directly or indirectly they have been identified, kept actions involving rural workers, with the fundamental purpose of a thorough evaluation that cut social unit - citrus industry workers - which according to Yin (2002), a way to investigate contemporary phenomena within their real life context, in situations where the boundaries between the phenomenon and context are not clearly established, and multiple sources of evidence is used.

The city of Lagarto has a population estimated by IBGE in 2016 of 103,188 (INSTITUTO..., 2016) with 119 rural communities, called settlements, where 6,458 workers are involved in the citrus industry. Through NUPAST, the towns with the highest concentration of citrus farmers were visited and surveyed, bringing a better understanding of this social reality. However, the survey data of this research was conducted in the services involved in the rural worker.

Data collection took place from December 2014 to March 2015, in the following services: Agricultural Development Company of Sergipe (Emdagro), Occupational Health Reference Center (CEREST), Union of Rural Workers and Municipal Health (Epidemiologic Surveillance Service).

Basic techniques were used such as a semi-structured interview with a script previously developed by the

researchers. The contact with the organizations was held, and the objectives of the study were presented and clarified, being part of NUPAST and then, the time and place of the interview were scheduled with the responsible for the necessary information exposed by the researcher at the time of collection. There was no interference of the researchers in the choice by organizations as the indication of the respondents.

The data searching in the selected places, both documentary and through the interview, followed the parameters according to Glina, Rocha and Batista (2001), Lima (2003, 2006) and Brotto and Dalbello-Araujo (2012), listed and adapted to the tests required for the purpose of this study on the job situation. The interview was guided by the following topics: working conditions, work organization, professional relationships, identification of the risks of accidents and health problems, the union activity identification issues related to warranty rights.

It was sought to list the information available in the databases of the above services, as well as to record the interviews in written text by the researcher, and subsequently analyzed in the based on the theoretical reference used in this study.

It was understood that one of the fundamental conditions for the knowledge of the integrated policy actions of the health of the citriculture worker goes beyond the health services. It was decided to hear the institutional stakeholders understand the systemic complexity of the focus relationships, in a transdisciplinary, cross-sectoral and intersectoral perspective, recognizing that research is not complete or runs out a service in a subject or a professional group.

The theoretical reference of Dejours (1994) was used through the work psychodynamics to understand the work activity, such as agrarian structure data, agricultural production, mechanization level and occupational exposures, and to search for information on the abuse of alcohol and notifications of occupational accidents, to finally get the data necessary for an analysis of the case, and more specifically, analyzing the mental health of workers through Lançman (2011). Subsequently, it was attempted to correlate the data in the literature, through literature review with data found in the study, basing the analysis proposed in this paper.

3 Results and Discussion

The National Policy of the Worker's Health recommends that the Occupational Health Reference Centers (CEREST) promote actions to improve

working conditions and worker's quality of life through the prevention and surveillance. It is up to this body to promote the integration and coordination of the network of health services of the Unified Health System (SUS), in the Worker's Health incorporation into his routine activities, aiming to identify and respond to accidents and injuries related to work in all SUS care levels, full and hierarchically and based on Diseases List Related to Work or compulsory notification (BRASIL, 2009b).

In the city studied, CEREST works as a regional center of worker's healthcare. Visiting the center for data collection, it was stated that there is a database with the information requested, but, based on visits to the territory, it is known how is the work of the citrus farmer, his organization and the environmental risks he is exposed, as described below.

The occupational risks that citrus workers are exposed are 1. Physical: Non-ionizing radiation (exposure to the sun for a long time daily); 2. Chemical: Use of pesticides throughout the citrus growing region, which may lead to intoxication. 3. Ergonomic: Poor posture, repetitive movements, weight overload, no pause for rest. 4. Mechanical: needle stick accidents (hoe, sickle) and journey accident. The most used means of transport by these citrus farmers of this region is the bike because workers live in neighboring towns to the workplace.

As observed in most cases, the form of work is informal, being paid daily or by production. When production pays it, the need to produce more is related to what they gain, influencing directly in increased physical and ergonomic occupational risks.

The identification of health problems has been reported as a problem of alcohol use and abuse by the employees. During the technical visits in the territory by the technicians of CEREST, it was common to find workers in their job under the influence of alcohol. Most of them claim that the drink and clinical examinations carried out in by CEREST during the last year (2014), had abnormal liver for most workers. They do not know what caused this change, whether the use of alcohol or pesticides.

The Notifications Work Accident reported that there are very few notifications, which does not mean that accidents do not happen, because, during the technical visits, CEREST technicians saw or were informed of some cases. It was emphasized that these data are in the Epidemiological Surveillance sector of the Municipal Department of Health, and the notifications are made for injuries and not by classes of workers. There is no data to indicate the

amount of the citrus farmers' work accidents, and there is not such information in CEREST.

The Rural Workers Union (STR) was considered a research field by having this role to represent and defend the rights of rural workers; defend labor rights, whether of rural social security, education, and health to the countryside and land reform to strengthening agriculture families. The STR acts as an interlocutor of family farmers and could press various public bodies so that they carry out policies, organizing effective actions that benefit farmers in general (LOURENÇO, 2009; MALAGODI; BASTOS, 2003).

Despite their important role, there is not a database on citrus employees in the municipality. Even at the level of verbal information, it was reported that they do not have data on the requested points, since the STR works with associates and not with citrus farmers in general, having great demand for labor issues involving social security.

Another body that assumes the significant role with rural workers is the Agricultural Development Company of Sergipe (EMDAGRO). It performs the technical service center, with important actions for the development of the state agriculture. It performs different projects, programs, and activities to generate benefits for the society and especially for small rural workers. It works on the development of public policies for the promotion of sustainable rural development.

In the city of Lagarto, there are two offices of the institution. One is in the urban area of the city, and the other one is in the countryside, which is the only head office located in a rural area of the state because the region concentrates a significant population of citrus farmers.

The two offices have been consulted. However, the urban area did not have the information requested. In the Emdagro of the town Colônia Treze, there was not an available database, but the information collected were quite detailed, and the requested data were included as described: agricultural production and the level of mechanization, and, from soil preparation to harvesting the fruit, the procedures are performed manually, including the application of herbicides is given by spraying. Only in large properties this process is, for the most part, mechanized and trailed.

Regarding the use of Personal Protective Equipment (PPE), the institution guides for the use of gloves, boots, mask, and overalls. However, during the visits, it was common to find workers using herbicides without the use of PPE. It is important to highlight that it is

not up to the Emdagro but the Federal Ministry of Agriculture inspecting and fining. What is observed is that there is an awareness among workers about the real benefits of PPEs and the actual damage that pesticides can bring to health.

In general, the use of pesticides decreased in this region by their high cost. The owners have replaced them by Manipueira (liquid extracted from cassava flour mills, which is discarded). It is high in hydrocyanic acid, it is natural, it does not contaminate the environment, and it is good for control pests. Neutral detergent is another product used. For its application, the machining is the same as when herbicides are applied (manual or mechanical).

Regarding the organization of work, there are four classes of workers, always being informal: 1. **Owners of the land**; 2. **Farm workers**: are those who do the planting and maintenance, and are paid daily; those who do the harvest, the payment is calculated by production, by harvested box; 3. **Cartwright**: performing the collection of oranges, paid per night; 4. **Loader**: they are hired by the truck owner and not the by the property owner.

Regarding the main occupational risks and health problems the citrus farmers are exposed, there were: **Exposure to pesticides** that they may contract acute problems when intoxicated when using them or chronic problems through continued use of the product, and future damage will be contracted; **Locomotion**: mainly loaders are transported to the job site on trucks, and when the trucks are loaded with orange, the risks increase because the citrus farmers have not any protection. Other means of transport used by other workers is the bike; **Alcohol use**: in contact with the owners during the technical visits, they reported that often the workers harvest and load the truck under the influence of alcohol. There are many cases and, when severe, they are unable to continue working, and then released from work, further increasing the frequency and quantity of use; **Work accident notifications**: such supervision is not up to the institution, but, during the visits, it is observed, or they are informed of the existence of some accidents, but these are not notified.

For verification of information on occupational accidents and health problems, data from the Epidemiological Surveillance were also collected. It provides support for the implementation of disease and injury control activities, requiring updated information on the occurrence. Their main way to get information is through reports of injuries and diseases by health professionals (BRASIL, 2009a).

Notifications of accidents and work-related diseases during 2013 and 2014 were requested. Due to the data is not per worker class, all notifications of these two years were checked, checking the profession. Among the notifications, none of them was farm worker; most were healthcare professionals (nurses and nursing technicians), occurred in outpatient care at the hospital.

Based on the data collected, both CEREST as the Emdagro reported the occurrence of injuries and accidents involving rural workers. However, this is not confirmed in data from the Epidemiological Surveillance, having a mismatch of information between what is perceived during the experiences of technical visits and what is recorded in information systems.

At the end of the collection, it was observed that the working conditions found in the citriculture of the area surveyed are consistent with the conditions that involve the rural work in other different rural activities. Such conditions have been the focus of few studies in the scientific literature that show the working relationship full of precarious conditions, exposure to high risks of excessive wear, as factors that can cause or trigger mental disorders, including the use and abuse of alcohol, in a causal relationship. Moreover, it appears that rural labor is a socially discredited occupation without labor laws and seen in its various forms as one of the most dangerous occupations to health and worker safety (ALESSI; NAVARRO, 1997; ALVES; GUIMARÃES, 2012; BRASIL, 2001; LIMA, 2003; VAISSMAN, 2004; FARIA, 2005; LOPES et al., 2006).

These research works include the study of Lima (2003), held in a psychiatric institution, revealing that some occupational categories tend to have very specific mental disorders. Among the 23 occupations classified, the most frequent occupational category was the rural labor (19.1%), with primary diagnosis identified of Mental Disorders Related to the Use of Alcohol (48.5%). According to the author, epidemiological data show a higher incidence of certain diseases, such as excessive use of alcohol in certain professional categories.

The research carried out by NUPAST with citrus farmers of Lagarto region; there are some partial results available. In one of the studies, 303 workers were evaluated, finding a prevalence of 30.7% alcohol consumers workers. The authors pointed out that were not studies found in the literature to assess alcohol consumption in this population of rural workers, complicating the interpretation of the real extent of alcohol consumption in individuals investigated in this work (ALMEIDA et al., 2013).

In the other study (MOREIRA et al., 2013), there were 60 rural workers participating who are exposed, directly or indirectly, to organophosphate pesticides. According to this study, 32.1% used alcohol, 20.8% were smokers, and 28% of workers had some sign of depression. These results show a high prevalence of smoking and alcohol consumption, situations that, in association with exposure to organophosphates, may be linked to the high rate of patients with hypertension, respiratory diseases, and signs of depression.

Before the data and prioritizing one of health problems appointed by the services surveyed as recurrent among workers of citrus production along with the partial results of the above studies, and the findings in the literature investigated in other studies of rural workers, it is reflected on how work can contribute to worker's mental illness, evidenced by the use and abuse of alcohol. Would the abuse of alcohol be a way to live with the poor working conditions? Is it possible or not to establish a link between certain mental disorders, and certain forms of work organization?

One of the most striking theories that explain the relationship between mental health and work is elucidated by Dejours (1994), through the Work Psychodynamics. It emphasizes the centrality of work in the lives of workers, examining aspects of this activity that can favor health or illness. By analyzing the correlation between mental health and work, the author emphasizes the role of the work organization for the negative or positive effects that this can have on the mental functioning and the worker's mental life. Through the work psychodynamics, he tries to understand how the workers find a right mental balance when subjected to stressful working conditions (DEJOURS; ABDOUCHELI; JAYET, 1994).

Workers develop defensive strategies with psychological constraints brought by work, individually or collectively. Abnormality or balance occurs due to the dynamic between suffering and defense against it. When this balance point is lost, and the suffering is no longer supported, then there is the illness. It

[...] emerges when the worker used all intellectual and psycho-affective resources to deal with the activities and demands imposed by the organization and realized that he nothing can do to adapt and/or transform the work (LANCMAN 2011, p. 273).

Several aspects of the work situation and extra work can act together in the development of mental disorders. Thus, it is important to pay attention to how these various aspects are interrelated, since

to understand the connection between illness and work situation is not simple since this process is specific to each, involving his history of life and work (HELOANI; LANCMAN, 2004).

Santos et al. (2007) bring a study of the relationship between work and alcoholism, investigating the working conditions that favor the development of alcoholism among workers. Based on Vaissman (2004), the authors reflect the issue of alcohol dependence not as an organic cause disease but as a phenomenon in which the Biopsychosocial aspects of the subject are observed. They address the risk factors related to the work that may be inherent to the specificity of the occupation, the conditions under the work is performed, the type of stressors and how these factors act physically and psychologically for the worker. On the other hand, there are the features and the vulnerability of the character on the workplace, which favors or not the abuse.

The reports collected in this study indicated how common is the abuse of alcohol among the workers of the citrus industry in the region. We have seen in the literature how much work is part of the constitution of individual identity and social relationships. Therefore, there is another question: Besides the relationship between the use and abuse of alcohol in the organization of work, generating suffering not only physical but mental, would another contributory factor use be the need of belonging to the group?

The identity of the individual involves the characteristics of the subject who are like the other subjects of the same class. Being a man is to have featured in common with all the other men. To be an adult is to have common features with the adult class. [...] This part of the identity that situates the subject in the social field is also significant relevance to class, a group, a collective, a *métier*, community (of relevance) (LANCMAN 2004, p. 73).

Dejours (1994) corroborates this thinking when he brings that the Psychodynamics of the Work includes work as a central element in the construction of health and identity of individuals, an influence beyond the time of the working day, as it extends to all family life and the not working time.

From the "view of the other," the subject is constituted as a subject, being in a relationship to the other is recognized in the process of searching for similarities and differences (LANCMAN 2011, p. 275).

Therefore, the work can be seen as having a psychic function, as one of the great foundations of the constitution of the subject and its network of meanings, being a constituent of identity and individual subjectivity, with direct involvement in various forms of integration and social participation, the constitution of affective and economic exchanges; in short, being the basis of people's everyday lives (LANCMAN; GHIRARDI, 2002).

The intention of the reflective discussion was to highlight aspects of work organization contributing significantly to the abusive use of alcohol at work, as a reliever of stress as a defense against the dangers faced and against all causes suffering. Also, it is important to reflect on the need and to seek to identify with the group to which it belongs, feeling part of it, a mutual influence of relationship in which the individual aspects, intrinsic of each subject will influence the way of interaction.

As discoursed before, it is realized that the factors involving the organization of work in the citriculture of Lagarto consistent with the forms found in the Brazilian scene of other rural activities, including its relationship with mental health. From this work, there is a more precise reflection at the local level, for the attention that has been given to the health of rural workers of this municipality, verifying database of absence and the lack of information found in a competent body to conduct surveillance, which does not contribute to the promotion and the articulation of the network - CEREST.

Lack of database culminates in a fragile and fragmented service because the development of effective actions directed to the real needs of citrus farmers depends on a well-fed information system. Regarding the CEREST, although it has been present in all the research, it was noted that its performance was shy before the central allocation of offer matrix support, such as specialized technical rear the entire SUS network. They have carried out some actions informed the approaches of Occupational Health and Occupational Medicine, which are distinguished from the SUS option for workers' health, without coordination with the Environmental Health and organ performance constraint with the workers in the formal sector (PONTES; RIGOTTO, 2014).

It was noticeable that the representatives of CEREST demonstrated a lack of clarity about the role of the institution, exemplified by the paucity of surveillance actions in occupational health, central to its mission. In part, this may be related to fear of conflict with municipal managers, as these actions may interfere with economic and hegemonic

political interests, and reflect on the city collection and sponsorship of election campaigns.

The activities in the health care protocols recommended by the Ministry of Health are focused that while essential, they do not realize the complexity of health problems resulting from production processes in the concreteness of each territory. They also suffer the implications of precarious work and the difficulties to work in all municipalities in their area.

This brings the challenge of rethinking the role of CEREST and the profile of its workers, to incorporate the approach considered in this article. It was also identified a need to reconsider the criteria for selection and training of workers who make up this instance of the Unified Health System, anchoring in the Occupational Health paradigm, based on the theoretical contributions of Public Health.

It is essential to building a linked network, with updated data on the reality, and the multidisciplinary team which compose the CEREST to act in attention to workers' health, with a subjective work point of view, a knowledgeable staff to discuss this illness/suffering, to seek actions that produce risk prevention and occupational diseases, as well as minimizing injuries. A team that can develop a work permeated by a holistic view in attention that pervades the worlds objective and subjective work.

To this end, it is essential that actions in occupational health have changes in work processes that address the health-work-disease relationships in all their complexity, through interdisciplinary, intersectoral and multidisciplinary activities. According to Daldon (2012), to better contextualization, interpretation and understanding of the working world, the CEREST team must be composed of professionals from different areas of knowledge, such as occupational physicians and other specialists, social assistants, dentists, public health educators, nurses, engineers, speech therapists, physiotherapists, psychologists, sociologists, occupational therapists, among others.

Occupational therapy is providing significant contributions in the health and work area, understanding the health of workers from the understanding of the working world in their historical, economic and social dimensions (WATANABE; NICOLAU, 2001).

By nature, man is an occupational human being established in most of his life, a relationship with the work, which gives identity and social role. Thus, it is understood that a remarkable area of operation of Occupational Therapy is the Occupational Health (WATANABE; NICOLAU, 2001).

The occupational therapist has as object of attention in Health and Work area,

[...] the relationship established between the work activity and the worker expressed about himself (illness), with his work (pleasure and satisfaction in the office) and the company (culture and current policy - appreciation and recognition) [...], enhancing the personal skills (LANCMAN, 2004, p. 42).

In CERESTs, occupational therapist is linked to other health activities, within a multidisciplinary team and can perform various functions: direct intervention in work situations through surveillance activities; individual assistance and/or focus groups with workers; preventive approaches; monitoring the conditions and jobs; functional assessments; assessment of the psychological aspects of the work; awareness of the risks of accidents or illnesses, the effects of work on the individual, and relocation programs for individuals with occupational restrictions in other functions and jobs more suited to them, and develop educational actions in health and work (LANCMAN, 2004).

Thus, it appears that the occupational therapist plays a unique role in worker's healthcare because human labor has always been a highly valued activity by the Occupational Therapy. As in psychodynamics of work means that work can be a cause of suffering and illness, debasement and exploitation of man by man, and there may be forms of dehumanizing and harmful work, and others that can promote autonomy and health (WATANABE; NICOLAU, 2001).

It is understood that the participation of Occupational Therapy professionals in interdisciplinary research on workers' health is essential to understand the daily life of these workers and contribute effectively to the comprehensive care of their health.

Thinking about Occupational Therapy as developing actions together with workers with problems related to abuse of alcohol and other drugs requires the development of actions aimed at the achievement of specific objectives.

Conducted a study seeking to identify the practice of occupational therapists with people in the problematic use of alcohol and other drugs, Nogueira and Pereira (2014) listed the objectives of the proposed activities. Both in individual or a group care, the professionals surveyed were seeking rescue personal and social values; reframing everyday activities, both the basic activities of daily living and instrumental activities of daily living; expanding the family co-responsibility in the treatment, and encouraging the expression of feelings and

internal conflicts, and offering moments of leisure and relaxation, reducing anxiety and irritability of these people.

These same authors bring that the discussion of this issue is still a challenge, as they check scarce production that discusses the role of occupational therapists in the care of people with problems related to alcohol and other drugs (NOGUEIRA; PEREIRA, 2014). Therefore, it becomes more challenging still discuss the role of the occupational therapist in assisting rural workers with problems related to the use and abuse of alcohol and other drugs.

4 Conclusion

From the principle that workers' health is a transversal and intersectoral action to be incorporated at all levels of care and SUS management levels, the participation of occupational therapy in the composition of professional teams involved in worker's care would increase the ability to identify the relationship between work and health-disease process that should be implemented from the primary to the tertiary level in healthcare network, including the Health Surveillance actions.

The conditions and requirements of the labor market today impact the mental health of workers in different ways. Today, besides its direct relation to the work itself, which affects the workers' psyches there are the poor relationships between work - employment instability, partial and/or temporary contracts, subcontracting, etc. Such poor relationships are present in the reality of the citrus industry workers, who need a look to the mental health link with the work because the process of becoming ill is specific to each, involving their daily lives. This work brought us the knowledge of the work organization in the citrus industry, involving a significant number of workers who experience hard, menial, repetitive work, exposing them to all sorts of occupational risks and health problems, either by external or internal cause, influencing directly on the biopsychosocial aspects of the subject. It is important to highlight that these workers suffer from the exclusion of attention to the non-range of actions undertaken by the care network to worker health.

It is not our intention to close this reflective debate here. We understand that it is a subject with gaps in the literature and needs to change at the local level. Therefore, we hope that this work has contributed to reflections, stimulating a new look at the health of rural workers.

References

- ALESSI, N. P.; NAVARRO, V. L. Saúde e trabalho rural: o caso dos trabalhadores da cultura canavieira na região de Ribeirão Preto, São Paulo, Brasil. *Cadernos de Saúde Pública*, Rio de Janeiro, v. 13, n. 2, p. 111-121, 1997.
- ALMEIDA, N. O. et al. Análise dos Níveis Séricos de Enzimas Hepáticas e Pancreáticas Associadas ao Uso de Álcool em Trabalhadores Rurais do Município de Lagarto-Se. In: ENCONTRO INTERNACIONAL DE PRODUÇÃO CIENTÍFICA – UNICESUMAR, 7., 2013, Maringá. *Anais...* Maringá: Centro Universitário Cesumar, 2013. Disponível em: <http://www.cesumar.br/prppge/pesquisa/epcc2013/oit_mostra/trabalhos.php>. Acesso em: 30 set. 2016.
- ALVES, R. A.; GUIMARÃES, M. C. De que sofrem os trabalhadores rurais? – Análise dos principais motivos de acidentes e adoecimentos nas atividades rurais. *Informe Gepec*, Toledo, v. 16, n. 2, p. 39-56, 2012.
- ARAÚJO, J. N. G.; GREGGIO, M. R.; PINHEIRO, T. M. M. Agrotóxicos: a semente plantada no corpo e na mente dos trabalhadores rurais. *Psicologia em Revista*, Belo Horizonte, v. 19, n. 3, p. 389-406, 2013.
- BRASIL. Ministério da Saúde. Secretaria de Políticas de Saúde. Departamento de Atenção Básica. Departamento de Ações Programáticas e Estratégicas. Área Técnica de Saúde do Trabalhador. Brasília, 2001.
- BRASIL. Ministério da Saúde. Secretária de Vigilância em Saúde. Departamento de Vigilância Epidemiológica. *Guia de vigilância epidemiológica*. Brasília, 2009a.
- BRASIL. Portaria MS/GM nº 2.728, de 11 de novembro de 2009. Dispõe sobre a Rede Nacional de Atenção Integral à saúde do Trabalhador (RENAST) e dá outras providências. *Diário Oficial [da] República Federativa do Brasil*, Brasília, DF, 12 nov., 2009b. p. 75-77.
- BRASIL. Conselho Nacional de Saúde. Resolução nº 466, de 12 de dezembro de 2012. Aprova normas regulamentadoras de pesquisas envolvendo seres humanos. *Diário Oficial [da] República Federativa do Brasil*, Brasília, 13 jun. 2013.
- BROTTO, T. C. A.; DALBELLO-ARAUJO, M. É inerente ao trabalho em saúde o adoecimento de seu trabalhador? *Revista Brasileira de Saúde Ocupacional*, São Paulo, v. 37, n. 126, p. 290-305, 2012.
- CARNEIRO, F. F. et al. (Org.). *Dossiê ABRASCO: um alerta sobre os impactos dos agrotóxicos na saúde*. Rio de Janeiro: EPSJV; São Paulo: Expressão Popular, 2015.
- DALDON, M. T. B. *Processo de trabalho dos profissionais de saúde em Vigilância em Saúde do Trabalhador*. 200 f. Dissertação (Mestrado em Ciências da Reabilitação) - Universidade de São Paulo, São Paulo, 2012.
- DEJOURS, C. *Psicodinâmica do trabalho: contribuições da escola dejouriana à análise da relação prazer, sofrimento trabalho*. São Paulo: Atlas, 1994.

- DEJOURS, C.; ABDOUCHELI, E.; JAYET, C. *Psicodinâmica do trabalho: contribuições da Escola Dejouriana à análise da relação prazer, sofrimento e trabalho*. São Paulo: Atlas, 1994.
- DYMINSKI, A. S. *Contaminação de solos e águas subterrâneas*. Curitiba: Universidade Federal do Paraná, 2006. Disponível em: <http://www.cesec.ufpr.br/docente/andrea/TC019_Contaminacao_de_solos.pdf>. Acesso em: 28 mar. 2015.
- FALK, J. W. et al. *Suicídio e doença mental em Venâncio Aires-RS: consequência do uso de agrotóxicos organofosforados*. Porto Alegre: INCA, 1996. Relatório preliminar de pesquisa. Disponível em: <http://www2.inca.gov.br/wps/wcm/connect/observatorio_controle_tabaco/site/status_politica/fumicultura_e_saude>. Acesso em: 30 set. 2016.
- FARIA, N. M. X. *A Saúde do Trabalhador Rural*. 2005. 253 f. Tese (Doutorado em Epidemiologia) - Universidade Federal de Pelotas, Pelotas, 2005.
- FARIA, N. M. X. et al. Estudo transversal sobre saúde mental de agricultores da Serra Gaúcha (Brasil). *Revista de Saúde Pública*, São Paulo, v. 33, n. 4, p. 391-400, 1999.
- GLINA, D. M.; ROCHA, L. R.; BATISTA, M. L. Saúde mental e trabalho: uma reflexão sobre o nexos com o trabalho e o diagnóstico, com base na prática. *Cadernos de Saúde Pública*, Rio de Janeiro, v. 7, n. 3, p. 607-616, 2001.
- HELOANI, R.; LANCMAN, S. Psicodinâmica do trabalho: o método clínico de intervenção e investigação. *Revista Produção*, Florianópolis, v. 14, n. 3, p. 77-86, 2004.
- INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA – IBGE. *Levantamento sistemático da produção agrícola, Sistema IBGE e recuperação automática - SIDRA*. Rio de Janeiro, 2013. Disponível em: <www.ibge.gov.br>. Acesso em: 3 mar. 2015.
- INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA – IBGE. *Cidades@*: Lagarto. Disponível em: <<http://cidades.ibge.gov.br/xtras/perfil.php?lang=&codmun=280350&search=sergipe|lagarto|infograficos:-informacoes-completas>>. Acesso em: 3 jun. 2016.
- LANCMAN, S. *Saúde, Trabalho e Terapia Ocupacional*. São Paulo: Roca, 2004.
- LANCMAN, S. Psicodinâmica do Trabalho. In: CAV-ALCANTI, A.; GALVÃO, C. *Terapia Ocupacional: fundamentação & prática*. Rio de Janeiro: Guanabara Koogan, 2011. p. 271-277.
- LANCMAN, S.; GHIRARDI, M. I. G. Pensando novas práticas em Terapia Ocupacional, Saúde e Trabalho. *Revista de Terapia Ocupacional da Universidade de São Paulo*, São Paulo, v. 13, n. 2, p. 44-50, 2002.
- LIMA, M. E. A. A polêmica em torno do nexos causal entre distúrbio mental e trabalho. *Psicologia em Revista*, Belo Horizonte, v. 10, n. 14, p. 82-91, 2003.
- LIMA, M. E. A. Os problemas de saúde na categoria bancária: considerações acerca do estabelecimento do nexos causal. *Boletim da Saúde*, Porto Alegre, v. 1, n. 20, p. 57-67, 2006.
- LOPES, E. S. et al. Avaliação do Esforço Físico Despendido por Trabalhadores nas Atividades de Colheita de Erva mate (*Ilexparaguariensis* A. St.-Hil.). *Floresta*, Curitiba, v. 36, n. 1, p. 13-22, 2006.
- LOURENÇO, E. A. S. *Na trilha da saúde do trabalhador: a experiência de Franca/SP*. 2009. 426 f. Tese (Doutorado em Serviço Social) - Universidade Estadual Paulista, Franca, 2009.
- MALAGODI, E.; BASTOS, V. S. Sindicato de Trabalhadores Rurais e Agricultura Familiar. GT 21: Sindicatos e Ações Coletivas. In: CONGRESSO BRASILEIRO DE SOCIOLOGIA, 2003, Campinas. *Anais...* Campinas: Sociedade Brasileira de Sociologia, 2003. Disponível em: <<http://www.sbsociologia.com.br/portal/>>. Acesso em: 30 set. 2016.
- MOREIRA, R. S. et al. Análise do perfil toxicológico e de saúde de trabalhadores rurais do pólo citricultor do município de Lagarto – Sergipe. In: ENCONTRO INTERNACIONAL DE PRODUÇÃO CIENTÍFICA – UNICESUMAR, 7., 2013, Maringá. *Anais...* Maringá: Centro Universitário Cesumar, 2013. Disponível em: <http://www.cesumar.br/prppge/pesquisa/epcc2013/oit_mostra/trabalhos.php>. Acesso em: 30 set. 2016.
- NEVES, M. F. et al. *O Retrato da Citricultura Brasileira*. Ribeirão Preto: FEA/USP, 2010.
- NOGUEIRA, A. M.; PEREIRA, A. R. Ações de terapias ocupacionais na atenção à pessoa com problemas relacionados ao uso de álcool e outras drogas. *Cadernos de Terapia Ocupacional da UFSCar*, São Carlos, v. 22, n. 2, p. 285-293, 2014.
- OLIVEIRA, A. C. *Trabalho temporário: bóias-frias na agroindústria canavieira no município de Inhumas-GO*. 2014. 133 f. Dissertação (Mestrado em Serviço Social) – Pontifícia Universidade Católica de Goiás, Goiás, 2014.
- PARANÁ. Secretaria de Estado da Saúde. Superintendência de Vigilância em Saúde. Centro Estadual de Saúde do Trabalhador. *Protocolo de Avaliação das Intoxicações Crônicas por Agrotóxicos*. Curitiba, 2013.
- PIETRAFESA, J. P. A questão trabalhista no mercado sucroalcooleiro no Estado de Goiás. In: JORNADA DE ENSINO, PESQUISA E EXTENSÃO DA UNIEVANGÉLICA, 2., 2011, Anápolis. *Anais...*Anápolis: NEP-DPCT Editora, 2011. p. 12-45.
- PONTES, A. G. V.; RIGOTTO, R. M. Saúde do Trabalhador e Saúde Ambiental: potencialidades e desafios da articulação entre universidade, SUS e movimentos sociais. *Revista Brasileira de Saúde Ocupacional*, São Paulo, v. 39, n. 130, p. 161-174, 2014.

- SANTOS, A. B. et al. Alcoolismo e trabalho: como estão relacionados? In: ENCONTRO DE EXTENSÃO, 2007, João Pessoa. *Anais...* João Pessoa: UFPB, 2007. Disponível em: <<http://www.prac.ufpb.br/anais/IXEnex/extensao/documentos/anais/6.SAUDE/6PRACPEX01.pdf>>. Acesso em: 30 set. 2016.
- SERGIPE. Governo do Estado. Secretaria de Estado do Planejamento, Habitação e do Desenvolvimento Urbano. *Estatística Sergipe*. Aracaju: SEPLAN, 2010. Disponível em: <http://www.seplag.se.gov.br/attachments/article/1385/sergipe_em_dados_2009.pdf>. Acesso em: 28 mar. 2015.
- SILVA, J. M. et al. Agrotóxico e trabalho: uma combinação perigosa para a saúde do trabalhador rural. *Revista Ciência & Saúde Coletiva*, Rio de Janeiro, v. 10, n. 4, p. 891-903, 2005.
- SINDICATO NACIONAL DA INDÚSTRIA DE PRODUTOS PARA DEFESA VEGETAL – SINDIVEG. *Balanço 2015*: setor de agroquímicos confirma queda de vendas. São Paulo, 2015. Disponível em: <<http://www.sindiveg.org.br/docs/balanco-2015.pdf>>. Acesso em: 28 mar. 2015.
- VAISSMAN, M. *Alcoolismo no trabalho*. Rio de Janeiro: Garamond, 2004.
- WATANABE, M.; NICOLAU, S. M. A Terapia Ocupacional na interface da saúde e do trabalho. In: DE CARLO, M. M. R. P.; BARTALOTTI, C. C. *Terapia Ocupacional no Brasil: fundamentos e perspectivas*. São Paulo: Plexus, 2001. p. 155-171.
- YIN, R. K. *Estudo de caso: planejamento e métodos*. Porto Alegre: Bookman, 2002.

Author's Contributions

Ana Claudia participated in all the steps of the study, including data collection, analysis, and text editing. Sandra guided every step of the study, including data collection, analysis, and text-critical review. All authors approved the final version of the text.