Teachers’ working conditions and illnesses on the agenda of a labor union

As condições de trabalho e o adoecimento de professores na agenda de uma entidade sindical

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ABSTRACT The purpose of this article is to analyze how the National Confederation of Education Workers has problematized the relation between working conditions and illnesses of teachers and to identify what role it has played regarding the issue. From documental research and interviews with labor union members it can be stated that the issue of health and work was problematized in the late 1990s. It started to be tackled from the proposal to collectivize the phenomenon and to become institutionally organized to meet the demands generated by the introduction of the health theme of education workers in the labor union agenda.

KEYWORDS Faculty. Occupational health. Working conditions. Labor unions.

RESUMO O objetivo deste artigo é analisar como a Confederação Nacional dos Trabalhadores em Educação problematizou a relação entre as condições de trabalho e o adoecimento dos professores, bem como identificar que papel assumiu diante da questão. Por meio de pesquisa documental e entrevistas com sindicalistas da instituição, afirma-se que foi no final de 1990 que a questão saúde e trabalho passou a ser problematizada, e seu enfrentamento deu-se a partir da proposta principal de coletivizar o fenômeno e se organizar institucionalmente para atender às demandas geradas pela introdução do tema saúde dos trabalhadores da educação na sua agenda sindical.

**Introduction**

The process of basic education universalization initiated in Brazil in the 1990s produced an unprecedented increase of teacher workforce incorporation into schools. This contingent of teachers is distributed throughout 26 state systems and 5,570 municipal systems of education; this means teachers work in diversified economic, social, cultural and educational realities.

In this context, the issue of teachers’ illnesses resulting from working conditions has become nationally an object of study, in the academy, research institutions, and labor unions. Several studies (APEOESP, 2012; CALDAS, 2012; GASPARINI ET AL., 2005) based on documents produced by official medical examination have identified among teachers the prevalence of mental and behavioral disorders as the main reasons for absenteeism, followed by voice disorders and musculoskeletal disorders. In the same direction, a research coordinated by Leite and Souza (2011) based on theses, dissertations and book collections covering the period from 1997 to 2006, found the prevalence of themes related to teachers’ mental health, comprising the sub-themes stress, burnout syndrome, and malaise.

In face of this scenario, it is considered that labor unions play a crucial role as representatives of education workers’ interests. Historically, labor unions have produced the tension concerning the dynamics between working conditions and health, either denouncing or demanding improvements for the working class.

The objective of this article is to analyze when and how a given teachers’ labor union – the National Confederation of Education Workers (Confederação Nacional dos Trabalhadores em Educação – CNTE) – has been problematizing the relation between teachers’ working conditions and illnesses, and identify which role it has assumed in dealing with the problem as a professional category issue. Its representativeness on behalf of education workers justifies it having been chosen for this study, which intends to contribute to the discussion on the role of labor unionism in the issues related to occupational health.

**Methodology**

CNTE’s history is related to the organization of teachers in Brazil since 1960. In 1990, after the conquest of rights registered in the 1988 Constitution of Brazil, CNTE was inaugurated as a labor union entity representing not only fundamental and medium education teachers of the public system but also other education workers (administrative workers, education specialists and principals) in public schools (VIEIRA, 2010). In 2015, there were fifty labor unions affiliated to CNTE.

In order to reach the proposed objectives, documental research was carried out and complemented with information resulting from semi-structured interviews with unionist teachers. The criteria for the selection of volunteers were: to be a teacher; an unionist; and have been a member of the departments of workers’ health, labor union education, or the general secretariat of the executive direction of CNTE, in any of the four last administrations: 2005 to 2008; 2008 to 2011; 2011 to 2014; and 2014 to 2017. The intended intentional sampling would be up to ten participants; however, only three of the subjects who fulfilled the inclusion criteria accepted taking part. From the history of the subjects’ involvement in the union during the last two decades it was considered that they were essential for the data collection. The interviews were transcribed and the speeches were organized in thematic unities, which were analyzed and interpreted. The research project was approved by the Research Ethics Committee under Report number 902.548, dated December 3, 2014.
Results and discussion

The problematization of teachers’ health/illness by CNTE

By the end of the 1990s, while facing a complex set of unresolved educational issues – among which funding, teachers’ education and career, educational management, and curricular organization – the teachers’ labor union movement realized the need to know about the working conditions of teachers in the country and which relation they would have with the illness processes of these professionals.

In the sphere of CNTE, it was a period when the union entity began partnerships aiming at the achievement of researches on this issue. Among various researches analyzed to identify how CNTE problematized and conducted the introduction in its agenda of the issue teachers’ health/illness, it can be inferred that two studies were fundamental: ‘National research on work, organization and health of education workers in Brazil’ (CODO, 2002) carried out in the late 1990 and ‘Portrait of Schools 3’ (CNTE, 2003) carried out in 2003.

The first study provided the basis for the book ‘Education: Kindness and Work – burnout, the syndrome of educators’ desistance, which can lead to the failure of education’, organized by Wanderly Codo and published in 1999 (CODO, 2002). This research marked the agreement between CNTE and the Work Psychology Laboratory of the University of Brasilia (LPT/UnB); its theme was the work of educators (teachers, administrative workers, and education specialists) of state systems. In the results and analysis of the research, burnout syndrome was one of the health problems associated with work in education. The understanding of the elements that form the concept of ‘burnout syndrome’ – a group of signs and symptoms such as depersonalization, emotional burnout, and the loss of personal involvement, as well as their implication on teachers’ work and health – greatly contributed to the introduction of the theme education workers’ health in the national debate.

It can be stated that the study carried out in partnership with LPT/UnB contributed to the problematization of the issue of teachers’ working conditions and illness in the following aspects: 1) it enabled the identification of the profile of Brazilian teachers’ illnesses, among other education workers, as characterized by mental health problems; 2) it made evident the relationship between the specificity of teachers’ work, working conditions, and health; 3) it subsidized the demands for better working conditions and it also marked a period of proximity between CNTE and Brazilian universities and other institutions, aiming to carry out researches in order to subsidize the labor union demands.

The other study that problematized and conducted the introduction of the issue of teachers’ health/illness in CNTE’s political agenda was published in 2003 under the title ‘Portrait of Schools 3: the reality without retouch of education in Brazil – Report of the research on the situation of workers in basic education’ (CNTE, 2003), carried out in association with the Departamento Intersindical de Estatística e Estudos Socioeconômicos (Dieese).

According to Vieira (2003), the research ‘Portrait of Schools 3’ sought to produce knowledge about three aspects concerning health issues among teachers: the incidence of diseases; medical leaves; and incidence of surgeries. One of the results was that 30.4% of educators reported having had health problems, which Vieira (2003, p. 24) considers a worrisome finding, since “one third of the educators are not healthy”, and also that there is a significant amount of medical leaves, corresponding to 22.6% of the sample of 4,565 educators.

Considering those two studies, it can be stated that it was through the
problematization of the education workers’ – including teachers’ – mental health that the labor union inaugurated in 1999 the debates on the theme and, in 2003, sought to further the studies as to include other aspects of education workers’ health condition.

The aspects identified as harmful to those workers’ health were work overload and/or its intensification. According to CNTE (2003), in the study ‘Portrait of Schools 3’, the weekly working hours are different in the various state and municipal systems; in all of them, the problematic issue was the amount of time worked beyond the daily working hours performed outside the working place. For CNTE (2003), the conditions of work overload for teachers are associated with two main elements: a) the weekly education work carried out at teachers’ homes due to the insufficient amount of official hours hired; b) teachers’ dedication to extra work as a means to increase their income.

According to Vieira (2003, P. 51), in the first case,

[...] it is practically a full working day outside the main work place. This has many consequences over health conditions, family relationship, and quality of work.

Cumulatively, extending the working day generates effects on teachers’ health and on the expected results of their work, since work overload has consequences on the quality of education and on students’ proficiency or learning, as verified by CNTE (2003).

Regarding work overload and teachers’ health, two elements may be mentioned as being determinant for the start of illness processes. One of them is the decrease or lack of free time outside work for other activities of life and leisure. Another element is carrying out work under stress conditions, which may lead to predictable consequences on health due to the exposure to extreme situations, especially workers under continuous stress (overcrowded classrooms, excess of classes) and whose work requires physical conditioning (long working hours with intensive use of voice and hands, and excessive standing hours). (CNTE, 2003, P. 12).

Regarding work overload, it is important to highlight that one of the issues in the struggle of teachers’ labor unions in the country, and therefore of CNTE, was about limiting the weekly working hours, with the inclusion of time for the preparation of pedagogical activities. The national legislation of education – Lei de Diretrizes e Bases da Educação Nacional (LDB), Law nr 9394/1996 – instituted 40 working hours per week for teachers including 20% as activity-hours.

Limiting the amount of working hours and including time for the preparation of pedagogical activities are among the determining aspects for the improvement of the quality of education. Regarding teachers’ health, those are elements that contribute to their well-being and quality of life. For one of the respondents it is necessary to work under a different logic, in a way that “being a teacher is not only giving classes” (teacher B); it is also part of the job to get qualified to prepare a good class, and prepare and correct tests.

This work overload is also analyzed as a process of intensification of the teaching work; according to Oliveira (2003), it results from a production increase without changes in the workforce or, otherwise, from a workforce decrease without changes in the production. The author explains that work intensification may result from extending working hours inside the school without extra pay, and also from increasing the amount of requirements of work within paid working hours. The author stresses the fact that it is in the second way that occurs “the most subtle and less visible exploitation strategies”, i.e.,
teachers incorporate new functions and responsibilities pressed by the need to respond to the requirements from the system and also from the community (OLIVEIRA, 2012, P. 308-309).

The other way of work intensification identified in this study relates to what Oliveira (2003) explains about the various roles that the teacher must perform, which go beyond his/her training, i.e., carrying out functions of public agent, social assistant, nurse, psychologist, among others.

These aspects constitute part of the tensions that permeate teachers’ work, thus implying each one’s answers to his/her daily life. According to a respondent “the issue of our health is also related to the role we think we must perform in a changing society, with subjects under transformation” (teacher C). Furthermore, “health is also related to our anguish regarding the tasks that we think we must fulfill in the society” (teacher C). In short, it is possible to identify that the intensification of work may also happen due to subjective factors arising from objective conditions of changes in the school environment and its surroundings.

Besides those two situations, it may also be added that the process of intensification of work is strongly related to the educational management. In the last decade, there has been a reproduction of the idea that human resources management by the public administration must be oriented by propositions such as paying bonus to teachers or some other kind of compensation, which is measured with the assessment of teachers’ performance. This educational management policy, especially the bonus policy, is currently much disseminated in the country, and its essence lies on setting goals to be achieved in order to obtain a greater amount of financial resources. In this sense, teachers who are under this bonus regime become pressed by the circumstances and there can be no work absence even for illness reasons.

Paro (2012) elaborates a criticism on merit pay for teachers saying that it is an undue measure that shows the lack of knowledge about the conditions of pedagogical activities and reveals two suppositions: “the supposition of teachers neglect to their duties” and in need of incentive such as in the capitalist production; and, the second supposition, “the (not explicit) recognition that teachers’ salary is insufficient to provide the minimum working conditions” (PARO, 2012, P. 601).

The policy of compensation may harm teachers’ health, both from the pressure to which they are submitted in order not to lose points in the assessment and from working without having the conditions to do so, because they may lose the compensation during absence. In this regard, Vieira (2003) refers that in face of the increase in the amount of absence cases due to health treatment, instead of seeking the solution to the problem the public administration applies measures that worsen the situation, as in the case of rewarding individuals for their assiduity, which stimulates teachers to go to work even when they are ill in order not to suffer financial loses.

It is against those procedures that labor unionism must have the necessary attention when the issue is education workers’ health. In this regard, Leão (2012, P. 303) highlights the need that the public administration recognizes the illnesses that affect the profession in the sense of treating urgently and with dignity the professionals who are ill, which means once the illnesses related to the profession are detected, it is necessary to find out their origins, eliminate the causing agents, and treat those who are ill in a continuing way.

According to Leão (2012, P. 303), negative attitudes are being reproduced by accusing workers who are ill of being little assiduous and, therefore, of being “directly responsible for occasional ‘failures’ of pupils in the standardized assessment”. The same author
argues that regarding the labor unions, due to their denouncing attitude, the same public administration pejoratively treats them as being corporatists.

On this aspect, Ribeiro (2013) declares that, habitually, firms and State as employers exempt themselves from the responsibility for their employees’ illnesses. Therefore, from the employers’ perspective, the point is not the worker’s health or illness; as Ribeiro (2013, p. 62) refers,

> The relevance is on the worker’s absence, and the management’s concern is directed to the delay in returning to work, re-adapting, costs with time not worked, and productivity decrease.

In order to prevent those loses, stronger control rules are implemented to avoid that workers are absent from work.

Other problems that permeate teachers’ work and were identified both in CNTE’s documents and in the respondents’ speeches are related with infrastructure and violence in schools. In the first case – infrastructure – the harmful aspects involve from the lack of conditions of buildings and appropriate furniture, ventilation, and illumination, to excessive noise and lack of basic sanitation; all of them are indispensable components for a salubrious work environment. In the second case – violence in schools – there are repercussions on teachers’ working conditions and, directly, on their health and safety.

The relation between working conditions and their effects on teachers regarding health damages has implications not only for teachers but also for the entire educational structure. Thus, there is close relation between teachers’ health and the quality of their work; as it has been observed in the speech of a respondent, the absence of teachers from school causes great disturbance because it promotes “discontinuity in the educational process” (teacher B). Students must adapt to a substitute teacher, who in his/her turn needs time to learn about the reality of the students and the community.

It is necessary to highlight that there are two aspects of the problematization regarding the issue of teachers’ health/illness. One aspect derives from the teacher’s absence from the work activities, as mentioned; the other aspect, perhaps the most harmful to the quality of the educational work (and for the teacher him/herself) is the work done under illness conditions, which leads to the consideration that there is an invisible dimension of the problem.

If, in one hand, there are teachers who feel the need to express themselves about their health condition, as one respondent referred, on the other hand there are those who keep silent and carry on doing their work until they become incapacitated and cannot continue. This situation may be explained as a condition generated by the current circumstances of work in capitalism in which, according to Ribeiro (2013, p. 49),

> the social relations of work with the loss of health are no longer so explicit because contemporary work tends to ‘burn from inside out’ the working body without there being a visible combustion.

> It is an invisible process in which workers initially present an impairment of their psychic function, affection, and subjectivity, later on reaching visible impairments, i.e., in the organs and body functions (RIBEIRO, 2013).

Vieira (2003, p. 8) refers that data reinforce the thesis that, more than a conjuncture situation, education workers experience a process of identity expropriation as a component and reflection of the reduction of the role of education in this historic period.

The CNTE has been seeking to insert the debate about the enhancement of education workers in regard to the working conditions and its relation with health. According to the unionists’ speeches, the increase in
the number of cases of teachers' illnesses results not only from the lack of policies for workers' health and safety regarding prevention or even medical care, but above all it is a problem related to the lack of policy for the enhancement of education professionals; this is utterly related to the issues of salary and infrastructure in the working place, including the great problematic of educational management. In this sense, it is observed that there is a process in which the teachers’ work becomes precarious, with deleterious consequences both for teachers' health and the quality of education.

Regarding the issues related to prevention and medical care, it is important to highlight that there is a tendency within labor unionism in general to request private health plans in its demands and collective conventions. In this sense, labor unionism is distant from the request of health as a right.

Lacaz and Santos (2010) and Dias and Hoefel (2005) observe that the existing threat of unemployment has been keeping workers away from campaigning for safety and health at work, which has been leading to a withdrawal from the proposals of workers regarding this issue. According to these authors, structural unemployment, work precariousness, and the growth of the informal economy, with the loss of labor and social security rights, has repercussions on the labor unions’ organization, leading to a displacement of the traditional focus of struggles towards that of keeping jobs, thus putting in second place the debate and claims regarding the conditions in which work is performed.

In this context, campaigns for health may not represent improvement in working conditions. In other words, when focusing the campaigns for health in the strict context of demands for private health plans, disconnected from improvements in working conditions and health and safety policies, workers lose sight of health as a social right to be guaranteed by public policies, thus becoming vulnerable to the moves in the job market, which makes them oscillate between the condition of being employed and unemployed. For public workers, the tendency of this kind of claim is to lead to the differentiation of health care according to the norms of each private health plan, narrowing the access to needed diagnosis exams and treatments.

**CNTE’ role on the issue of teachers’ health/illnesses**

Based on data collection from documental sources at CNTE such as studies, journals, books and congress resolutions referring to the period from 1999 to 2014, it was possible to prepare a list of the main actions regarding the issue of teachers’ health in the sphere of the labor union under focus, as follows:

a) 1999: the book ‘Education: Kindness and Work’, organized by Wanderley Codo, is published, as a result of a research carried out in association with LPT/UNB;

b) 2003: the study ‘Portrait of Schools 3: the reality without retouch of education in Brazil – Report of the research on the situation of workers in basic education’ is published; and also the book ‘Expropriated identity: portrait of Brazilian educators’, by Juçara Dutra Vieira, is published;

c) 2005: the Collective of Working and Health Conditions is created in CNTE;

d) 2008: the Department of Education Workers’ Health is created in CNTE;

e) 2009: the 1st National Seminar on Education Workers’ Health takes place;

f) 2010: the dossier on the theme of Education Workers’ Health is published in the journal ‘Education Notebooks’, number 22;
g) 2012: another dossier is published in the journal ‘Portraits of Schools’, volume 6, number 11, on the Working and Health Conditions of Education Professionals;

h) 2013: the National Collective of Health is created and the National Seminar on Working and Health Conditions of Education Workers takes place.

From this list of actions carried out in the period and the information reported in the respondents’ speeches, it is understood that the role CNTE identified that it should play regarding the issue of education workers’ health/illness may be related to the following themes that will be further analyzed: collectivization of the problem; creation of health collectives for the interlocution with local labor unions; institutionalization of the Department of Workers’ Health (an instance of its own right within CNTE to be dedicated to the issue of health); labor union education; publications (dossiers); and the inclusion of the theme health/illness and working conditions in the educational policies for the enhancement of education professionals.

Regarding the collectivization of the problem of teachers’ illnesses it may be understood from two perspectives. One refers to the perception that certain diseases are more recurrent in specific groups or social classes and are related to the health-disease process of the collectivity. The other one corresponds to the problematization of teachers’ health-disease processes as an issue of the professional category collectively rather than as an individual problem.

In the first perspective, contributions from the areas of health sciences and social sciences help to reflect about the necessary differentiation between the approaches on a teacher’s illness in his/her relation to work by means of practices of individual clinic and collective health. According to Ribeiro (2013), in the sphere of the clinic, the health problem may appear to an individual and his/her caregiver as an individual problem. To the same author, when these health problems are seen collectively in a professional group or category, there is the need for a specific epistemological model, beyond that of the clinic and epidemiology applied to the clinic. As an example, the association of voice disorders with teachers’ work is an inference that is more epidemiological than clinic. In this case, the investigation of the causality of the collectivization of this health problem led to the understanding that it is a biosocial phenomenon, thus requiring public prevention (Ribeiro, 2013).

In the second perspective, the collectivization of the illness problem is a political problem, i.e., the discussion of the problem is no longer in the individual realm and becomes an issue of the category collectively. It is in relation to this process that it was possible to identify the role of CNTE since 1999; according to the understanding of the labor union entity, during the publication of the research that resulted in the book organized by Codo (2002),

it is neither a ‘personal problem’ of each individual nor a fatality of our country, reinforcing the advocacy of better working conditions for the professional category. (CNTE, 1999, P. 46).

The achievements in relation to the treatment of the issues of teachers’ illnesses in a collective perspective have improved both in the possibilities of the reach of rights for the category and in the sense of preventing that victims are blamed for their illnesses. In this sense, collectivizing the phenomenon also means giving it social visibility, turning it into an issue that is socially problematized and of interest to the entire society. In the case of teachers of the public education system, according to the example presented by Ribeiro (2013), despite the recurring absences from work and the advanced impairment of the organs involved in the production and maintenance of the voice, the social invisibility of the problem became
visible for the category only when it started to be treated as a collective problem.

Overcoming an individualist perspective results from inserting teachers’ health/illness issue in the unionist agenda, i.e., having a specific space to debate, discuss, and design intervention proposals. This challenge to produce intervention alternatives aiming to find ways to socially resolve the problem or make it explicit has led CNTE to assume another role, which is related to the creation of institutional spaces to deal with this issue of the professional category.

According to a respondent, one of these spaces is the National Council of Entities that holds its meetings in the country’s capital Brasília and provides time for the discussion of the demands of states’ labor unions. In this process, the collective demands that will become part of the CNTE agenda are identified.

In the process of constitution and consolidation of a collective space for discussion and design of actions related to health, the 1st National Seminar on Education Workers’ Health (I Seminário Nacional sobre Saúde dos Trabalhadores em Educação) took place in November 2009, promoted in association of several departments of CNTE, including the Department of Health and the Education School (Esforce), with the support of Central Única dos Trabalhadores (CUT). The document resulting from this thematic meeting registers the consensus among participants on the need to stimulate the creation and operation of health collectives and a health department in each labor union affiliated to the Confederation (CNTE, 2010). For this purpose, the main guidance for actions to be achieved were in the sense of promoting labor union and political education that would articulate the discussion on education workers’ health with the general discussion on health, and the need to produce information and communication material. One of the aims of those actions would be the creation of a platform of united demands so that the theme may reach relevance and become dully incorporated in the agendas of demands, gaining centrality in the struggle for better working conditions and quality of life. (CNTE, 2010, P. 132).

Two important guiding decisions of the event refer to CNTE’s work for the strengthening of the Brazilian Unified Health System (Sistema Único de Saúde – SUS) and the inclusion of the themes of health and working conditions in education at the National Conference on Education (Conferência Nacional de Educação), as well as basic-documents for the design of the National Plan of Education (Plano Nacional de Educação).

What can be assimilated from the described proposals is that involving labor unions and their bases in a process of apprehension of policies on workers’ health designed and implemented in the country may help understanding the issue of health as a constitutionally guaranteed right, and include in the unionist agenda the discussion on the implementation of those policies for public sector employees.

In the second aspect, related to the inclusion of the theme of education workers’ health in the discussion and design of educational policies, a concern of the participants at the event can be apprehended as to include the discussion of the theme not only in the matters of labor legislation, but also in the educational policies regarding the enhancement of education workers. It can be considered that this explicit concern is one more role assimilated by CNTE in the sense of guidance on how to conduct this issue.

Finally, regarding the mentioned seminar, the discussions registered in the document help to understand that, at that moment, among debaters and participants there was a stand as to carry the discussion forward, and assume a propositional attitude regarding the theme of education workers’ health, in two senses: to approach the theme “not as an argument but rather as a policy of
negotiation for the promotion of health and prevention of diseases” (CNTE, 2010, P. 131); and to include in this process the deepening of a debate on the reasons for the continuous increase in cases of illness, absence, re-adaptation, and invalidity retirement, by means of researches and specific campaigns. (CNTE, 2010, P. 131).

It is considered, thus, that CNTE understands that the labor union’s role regarding the issue of teachers’ health and illness is to be a protagonist in collective negotiations, based on the knowledge of workers’ health and the needs of the professional category. In this sense, dealing adequately with the issue would be to surpass its inclusion in the labor unions’ struggles as a secondary matter, because not seldom the struggle for laws and policies that deal with illnesses resulting from work is relegated to a second level, even appearing as an appendix in the long list of claims and demands. (SARATT, 2010, P. 10).

In 2013, during another event convened by CNTE (National Seminar on Education Workers’ Working Conditions and Health – Seminário Nacional de Condições de Trabalho e Saúde dos Trabalhadores em Educação), the National Collective of Health (Coletivo Nacional de Saúde) (CNTE, 2013) was created, following deliberation and election by the participants, with the aim to follow-up the issue in the education workers’ daily life, and work together with CNTE’s Department of Health “in the sense of requiring from the Ministry of Education the definition of national policies that deal with the category’s health prevention” (CNTE, 2013, n.P.).

The issue that permeates the discussions held at CNTE is that better working conditions and the health of education workers are associated with the other struggles of the category. Therefore, the demands related with education workers’ and teachers’ health became part of the list of problems taken by the labor unions to those collective spaces, and with the creation of the Collective of Health the intention was to create a space for debate and to deal with the specificities of those demands. According to a respondent, it was in this movement of discussion in the Collective of Health that the need came up to create a specific department of health within CNTE.

In the process of creation of CNTE’s Health Department, it was registered that in 2005, at the 24th National Congress of Education Workers (XXIX Congresso Nacional dos Trabalhadores em Educação), took place the creation of the Collective of Working and Health Conditions (Coletivo de Condições de Trabalho e Saúde) (CNTE, 2005), and in 2008, at the following edition of the Congress, occurred the creation of the Department of Education Workers’ Health (Secretaria de Saúde dos Trabalhadores em Educação). At the latter forum, CNTE’s Statute was changed in its article 41, section IV, referring to the national executive board in which the new department’s competence is mentioned:

a) formulate public policies proposals aiming to respond to specific issues of education workers’ health; b) promote studies to diagnose the causes of problems affecting education workers’ health. (CNTE, 2008, P. 40).

It has been understood in this study that within CNTE’s role regarding the issue of teachers’ health/illness there is the labor union education and, in this context, the elaboration of dossiers on the theme.

The objective of labor union and political education regarding the theme under study was to subsidize and strengthen unionist action in relation to education workers’ health (CNTE, 2010). One of the strategies used by CNTE for labor union education, besides the publication of research results,
as previously presented, was the elaboration of dossiers in its journals, as was observed in the years 2010 and 2012.

The first publication corresponds to the ‘Education Notebooks’ (‘Cadernos de Educação’); the theme of edition number 22 was ‘Education workers’ health’ and resulted from the debates that took place at the 1st National Seminar on Education Workers’ Health. Saratt (2010, p. 10) informs that this publication, which expresses CNTE’s concern about the theme by subsidizing and fomenting the discussion about work and health, presents a political and pedagogical role in the sense of providing centrality to health as part of the agenda in the collective negotiations and salary campaigns of education workers’ labor unions, thus enabling for a stronger intervention in the safeguarding of the working class rights.

The second publication is the journal ‘Portraits of Schools’ (‘Retratos da Escola’), volume 6, number 11, with the theme ‘Working and health conditions of education workers’. According to the editorial, the dossier deepens the theme drawing on approaches that place it in the national and international scenario [...], problematizing the macro issues on the enhancement, but especially drawing on the vertical analysis of studies and researches about the working and health conditions of education workers. (DOURADO, 2012, P. 297).

Finally, another identified role of CNTE was that to include education workers’ health as a theme within educational policies, as observed in two occasions: at the 1st National Conference in Education – Conae 2010 (I Conferência Nacional de Educação – Conae 2010) and at the 2nd National Conference on Education – Conae 2014 (II Conferência Nacional de Educação – Conae 2014). The final document of the latter forum, named Axis VI (Eixo VI), was dedicated to the enhancement of education professionals, which included training, salary, career and working conditions. The propositions and strategies regarding education workers’ health were held as necessary for an integral care project – from prevention to care – considering ‘health care and physical, mental, and emotional integrity of education professionals as a condition for the improvement of the educational quality’ (FNE, 2014).

Conclusion

CNTE began problematizing the issue of teachers’ illnesses specifically at the moment when it inaugurated a new strategy in the sphere of its unionist actions, translated into the achievement of empirical researches in a national ambit to subsidize the struggle for labor rights and educational policies, which would also contemplate the enhancement of education professionals. This study has identified that teachers’ health was included in CNTE’s concerns as an issue collectively problematized by teachers within the context of the publication and discussion of the results of the first research on the theme of mental health and work, in 1999.

Although the relation between teachers’ work and certain diseases was traditional (e.g., voice and musculoskeletal problems) and present as a demand from local labor unions, it can be stated that at CNTE it acquired emphasis as from 1999, when a process was initiated toward the insertion of this demand in the institutional agenda. It became evident from the documents that in 2005, during the 24th CNTE National Congress, the institution assimilated the issue of workers’ health in its labor union agenda and from then on assumed it as a permanent policy.

In view of verifying the intensification of
health problems concerning the professional category, CNTE developed a process regarding its role in conducting the struggle for the health issue in articulation with the demand for better working conditions.

Despite having identified CNTE’s advancements with the inclusion in its agenda of the workers’ health, there is much yet to be constructed in the sphere of the institution in order to qualify the debate and the demands from a perspective guided by the health of workers as a public policy and having the discussion held nationally at schools.

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