
CLINICAL PSYCHODYNAMIC OF WORK WITH COLLECTORS OF RECYCLABLE MATERIALS IN TOCANTINS, BRAZIL.

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ABSTRACT

This study presents a case on Psychodynamic Clinic of Cooperation with recyclable material collectors. This clinical work is a reference to the field of mental health through seeking workers' subjective mobilization. Twelve sessions were conducted with the participation of 16 workers ranging from 39 to 78 years old. A change from individual management to collective management is being implemented, which is still in its structuring and learning process. A transition is observed on all levels, from a discussion forum to group deliberation, which has favored these workers' subjective mobilization. A new research agenda has been opened up in the field of clinical work, where the focus is on the subject of possibility, a subject that this clinic attempts to reveal, activating his/her desired capacity.

Key words: clinical cooperation; suffering, Psychodynamic of work, mobilization, cooperation.

1. Introduction

This study presents a report on a clinical work intervention named Psychodynamic Clinic of Cooperation, with a population segment peculiar to less developed countries: recyclable material collectors.

This clinical practice is a collective listening space regarding suffering at work. The Psychodynamic Clinic of Cooperation occurs through the creation of a space for discussion that aims to give voice to the suffering workers thus offering them the potential for subjective collective mobilization aimed at establishing rules for *working* and *living* in the workspace (Mendes & Araujo, 2012). After all, “work is not only about production; it is also learning to live together” (Dejours 2012, p. 85). Thus, this clinic is developed with workers who are not sick and who wish to discuss their suffering at work and aims to promote health as preventive action of collective mobilization aiming to act in the organization of work, as can be seen in the present report.

This clinic has its theoretical and methodological framework in the Psychodynamics approach of Work, developed by Christophe Dejours, in France, in the 1980s. The Psychodynamics of Work is a reference to the field of mental health and work, which has been widely used and has been offering great contribution to research and intervention in this area in Brazil (Mendes, Lima & Facas, 2007). However, this practice developed with workers linked to the Association of Collectors of Recyclable Materials in the Central North Region of Palmas (ASCAMPA), in Tocantins, Brazil, follows the methodological design proposed by Mendes and Araujo (2012), which differs from the original procedures of the Psychodynamics of Work (Dejours, 1992).

This reinterpretation of the method is mainly characterized by the difference between clinical research and clinical intervention. Although research is always an action where speech becomes an act, it is not Dejours’ suggestion (2011a) to use the clinic as a form of intervention, which requires different listening methods to those used in the clinical method of research. In this case, the clinic has been used for collectors as an intervention that inexorably includes research and analytical listening devices, and requires a clinical position that goes from researcher-clinician to clinician-researcher.

2. Work as an opportunity for social inclusion: the case of recyclable materials collectors

The workplace has undergone a lot of changes; however, according to Antunes (2000), the most brutal of them is structural unemployment, which affects the world on a global scale. A tortuous path can be observed in recent history: the reduction in formal jobs with stable employment ties and rights on the one hand and a large portion of the population getting by in precarious, temporary, subcontracted or outsourced employment on the other.

Poor, marginalized populations with history of psychological, social and economic difficulties find alternative work options in order to guarantee some sort of income, so as not to be cast adrift in the system. Movements such as cooperativism and solidarity economy present themselves to these workers as an alternative, while also offering social inclusion.

Social inclusion was observed in the studies of Sousa and Mendes (2006) with recycled material collectors; where they found employment as a collector, even if under conditions of extreme poverty and social vulnerability, is associated to a professional identity.

In this movement to *include through exclusion*, the dialectic of recycled material collectors becomes clear; they, rejected by the labor market for a huge variety of reasons, discover their lives collecting materials that can be reused for manufacturing however devoid of any legal support (Medeiros & Macêdo, 2006).

In Brazil, about 18% of the municipalities have implemented selective collecting: 66% have entered into a partnership with recycled material collectors (Besen 2011). There remains an aggravating factor to this precarious form of partnership – although collectors, through their work, are cleaning the urban and public spaces, they are not paid for this service (Ghizoni, 2013).

In Palmas - Tocantins, in the north of Brazil, where the field research was carried out, there is no public policy regarding the collectors of recyclable material. It is worth noting that Palmas is not unique in this respect; in Fortaleza - Ceará, in the northeast of the country, selective collection takes place in isolation and without the effective participation of the municipality, which only enhances the welfare practices: collectors perform a public service by cleaning the streets; however, without remuneration (Feitosa, 2011).

It is important to note that on August 2, 2010, after over 20 years in the making, Law No. 12 305 entered into effect, which established the National Policy on Solid Waste and created the Interministerial Committee of the National Solid Waste Policy and Steering Committee for the Implementation of Reverse Logistics Systems (Brasil, 2010; Feitosa, 2011). This law sets deadlines for the states and municipalities in Brazil to develop their solid waste management plans in collaboration with collectors.

Carvalho (2008) states that the work of collectors becoming a professional category of employment only begins to make sense once the group of workers is organized in cooperatives or associations. For, according to the author, the collective establishes the union based on the similarities of their work.

There are various types of collectors in Brazil – the ‘roamers’, for example, who move from city to city, with no fixed home, collecting aluminum cans or cardboard for daily sale in order to survive. There are the “garbage collectors”, who scavenge day and night through open dumps, work their own hours and do this either long term or only when they are not working in other employment as painters, for instance. These workers can work individually or as members of cooperatives or associations, usually living near the dump in unsanitary conditions. There are also the ‘individual collectors’, who, as the name implies, prefer to work independently pulling carts often borrowed from the buyer (the scrap dealer), the majority are not members of cooperatives or associations. Finally, there are the ‘organized collectors’ in cooperatives or associations which are usually developed from the gathering of individual collectors (Gonçalves, 2003).

Being or becoming a collector is intriguing: people may often wonder “what did these people do before they started in this occupation?” It was found both in the literature and in the research for this study that they used to have a number of diverse previous occupations. They were retirees, pastors and security guards, with fixed incomes, who now seek a second source of income. But there were also workers who had previously been circus clowns, bricklayers assistants, locksmiths, truck drivers, salespeople, bankers, domestic assistants and others (Carvalho, 2008).

Severo (2008) divides the profiles of collectors into two categories: the older collectors, who have suffered with the changing world, especially with the decline in unskilled work; and the younger collectors who have suffered with structural unemployment and end up turning to the informal job market, such as scavenging waste.

What is commonly observed among workers of scavenging (or recycling, as some prefer), regardless of the country’s region, is unemployment, and a lack of opportunities in the formal job market, fixed salary and legal rights (Almeida, Elias, Magalhães and Vieira, 2009; Santos and Silva, 2009; Medeiros and Macedo, 2006; Porto *et al.*, 2004).

It is worth highlighting that “unemployed” in this study means the individual without work although available, and who is seeking employment. Those between 15 and 64 years old, whether working or looking for work, are considered active population. Retirees and students are excluded from the studies (Cattani, 2000). The profile of the vast majority of collectors in Brazil is: poor, black, unemployed, with little or no schooling and over 40 years old. These details are confirmed by the studies of Porto *et al.* (2004), Medeiros and Macedo (2006), Severo (2008), Bortoli (2009), and Sterchile and Batista (2011).

3. The Psychodynamic Clinic of Cooperation

The Psychodynamics of Work is a field of reference of mental health and work that has been widely used and has offered great contribution to research and interventions in Brazil (Mendes, Lima & Facas, 2007). Studies have been found of intervention in the banking sector (Barbarini, 2001; Rossi, 2008; Santos-Junior, Mendes & Araujo, 2009; Martins, 2010), with hospital workers (Sznclwar & Uchida, 2004; Traesel, 2007; Magnus, 2009; Beck, 2010), and with workers connected to military institutions in the area of public safety (Baierle, 2007; Castro, 2010; Muller, 2012). A significant number of studies has been carried out with various types of public servants: in the federal sphere (S.C. Lima, 2010; Diniz & Goes, 2010; Mendes, Alves & França, 2011; Merlo, Dornelles, Bottega & Trentini, 2012; Silva & Mendes, 2012; A. S. Ferreira, 2013 and Carvalho Vasconcelos, 2014), at the state level (Magnus, 2009; Garcia, 2011; Medeiros, 2012; Garcia, Lima & Moraes, 2013; Merlo *et al* 2013) and municipal level (Bottega, 2009; Rosas 2012; P. A. M. Lima, 2013).

It has been verified that work can be a health generator but also a pathogenic destabilizer; however, it is never neutral, and the studies confirm the importance of work in the construction of identity, as points out Dejours (2011a).

Thus, suffering is inherent in both living and working; however, creative suffering arises as a healthy alternative that can lead to subjective mobilization through the development of public space for discussion, cooperation and practical intelligence pervaded by the dynamics of recognition. In this process, work acquires the status of a mediator for health through strengthening the identity of workers in the collective to which they are connected (Mendes & Duarte, 2013; Vieira, Mendes & Merlo, 2013).

Subjective mobilization is, therefore, “characterized by the subject’s movement that enables the capacity to feel, think and create in order to perform work” (J.B. Ferreira *et al.*, 2013, p. 101). It is important to understand the movement that occurs with workers who are willing to take dialogue from the discussion level to the deliberation level, as occurred in the study of Ghizoni (2013) with recyclable material collectors, described below.

Thus, the Psychodynamics of Work is a clinic of work as it “investigates” the subject in a real life situation, granting workers a privileged space for discussion of their suffering at work in a more ontological than pathological perspective (Lhuilier, 2011). This same author emphasizes the importance of listening to the efforts of individuals in life despite the suffering, and their forms of resistance and defense.

The model adopted for the clinical listening of the collectors’ suffering is outlined in the following item.

4. Materials and methods

Participants: 16 collectors (nine men and seven women) and two young (male) assistants participated in this clinical practice. The vast majority have been a member of the Association since its founding in 2005. Their ages varied between 39 and 78 years old. Most have little schooling, although three have completed high school.

Tools: This Clinical Practice followed the conditions described by Mendes and Araujo (2012): 1. Research Organization; 2. Construction and analysis of demand; 3. Establishment of rules of conduct of the collective research (one clinical researcher, one intern and volunteer collectors) and supervision of the collective (the clinical researcher, the intern and two psychologists); 4. Constitution of the talking and listening space; 5. Data sets: a) audio recording (after authorization by the participants), b) individual field diary, c) Session

Transcript, d) Supervision and e) Construction of the memorial; 6. Presentation of reports at the Final Meeting; and 7. Clinical Evaluation. The detailing can be found in Ghizoni (2013) and in Ghizoni and Mendes (2014).

Procedures: There was an initial meeting (01/28/2012) to invite collectors to participate in the clinical practice, with the participation of 13 out of the 34 member collectors. There were twelve sessions between February and June 2012, each lasting 1 hour 25 minutes on average. The meetings were attended by four to ten collectors per session. One month after the completion of the clinic, the Meeting for Discussion of the Final Report was held (07/06/2012), with the participation of eleven collectors. Nine months after the meeting, a Collective Interview was held to assess the effects of the clinical practice after the departure of the clinical researchers (04/05/2013), with the participation of nine collectors. Along the entire process five supervision sessions took place in Brasília-DF and six in Palmas-TO (where the clinical practice occurred). There were also two presentations for discussion with the Laboratory Study Group of Psychodynamic and Clinical Labor of UnB. As a way of returning the data to the population of the study, a general presentation was held to the collectors of ASCAMPA on September 28, 2013, where a printed copy of the researcher's thesis was given the members – a study approved by the Committee for Ethics and Research of the Federal University of Tocantins of research involving human subjects.

Data analysis: The clinical practice was the result of a doctoral thesis (Ghizoni, 2013). The results were presented in three stages, comprising the Clinical Analysis of Labor (Mendes & Araujo, 2012): 1. Analysis of Clinical devices; 2. Psychodynamic Analysis of Work of collectors; and 3. Analysis of Collective Work Mobilization in the Association. However, this article focuses on the discussion of the real and the collective management of these collectors' work, the overall result of the three steps.

5. Results

The ASCAMPA was officially created on September 25, 2005 (Minutes of the General Assembly of ASCAMPA Foundation, 2005), with 16 collectors and 69 (Ghizoni & Cançado, 2011); at the time of this study, the first semester of 2012, there were 34 registered collectors. In this historical context, the Association was managed by a founding collector with a board composed of four member collectors: president, vice-president, secretary and treasurer, who hardly, if at all, involved themselves in the deliberations of the Association. Before the clinical practice power was centralized and a low level of participation by its members was clearly evidenced.

During the clinical practice, however, it was possible to observe along the series of sessions the group's transition from discussion to deliberation, as summarized below.

From the first to the third sessions, collectors detailed their work routine; they complained of and demanded that their problems should be resolved by someone else. The clinical researchers encountered difficulties with the reality of the clinical practice and mobilized themselves to form a local supervisory collective.

From the fourth to the sixth sessions, development was observed in the group. They began to speak about the weaknesses of the work collective, such as types of suffering, fears, stress, difficulties of sharing the tasks and individual differences.

From the seventh to the ninth sessions, the problems with the Administration of ASCAMPA arouse and were externalized. There were clashes with the Headquarters Administrator, permeated by the group's mistrust and growing courage to speak. They began to discuss the organization of their work.

It is noteworthy that in the seventh and eighth sessions the Headquarters Administrator was not present, which resulted in several important speeches, especially as the collectors began to realize that they could be organized in a collective without the Administrator. Thus, they began to hold meetings, both after the clinic sessions and in the Association's headquarters, culminating in the creation of a management of the collective, who came to understand and organize the work processes within the Association.

The ninth session, albeit the few participants present, was when the confrontation with the Headquarters' Administrator occurred. It was clear that this mobilization followed the decision made by the collectors to overcome their fears and reaffirm what they had discussed in the two previous sessions. The Administrator's defense strategy, of victimization and justification of all the criticism received did not affect all the collectors, some having settled for the collective reorganization of the Association including themselves, despite the difficulties. Thus, it was then that time the group shifted from discussion to deliberation, in spite of the clinical researcher's reservations in that period.

In the tenth and eleventh sessions, it was observed that the deliberations were occurring on a daily basis at the ASCAMPA. They set up a management collective composed by four collectors that previously worked only in the streets, who got together and began to work in the Headquarters with the Administrator, plus the Presser and the Weigher/Scorer. In this manner, they collectively created the work rules and also rules of coexistence. "They formed a work collective and began to 'get their hands dirty' at the ASCAMPA Headquarters. Previously there were four people based in the Headquarters (one administrator, one presser and 2 young assistants), now there are also 4 collectors, forming a collective of 7 people" (Final Report July 6, 2012).

The twelfth session was the last for this clinical practice, but it was the first in the ASCAMPA headquarters (the previous sessions were held in a partner institution of the Association, as initially chosen by the collectors themselves), which showed the management collective's strength, now mobilized in promoting changes to the organization of the Association's work.

It was observed that the work of the ASCAMPA member collectors went through a process of change during the clinical practice: what was previously individual became collective. It was noticed that for the collectors trust was perceived as the basis of cooperation, which was recognized in the meeting to discuss the Final Report of the Clinical Practice, which was considered crucial to the continued mobilization of the Collective.

The clinic is over, but this mobilization of the collective continues, new demands arise and are accompanied by technical assistance through the University to which the first author is connected. This is likely to be the case now and in the future.

6. Discussion

It is important to note that this is a job category born from waste, from what people no longer want and so reject and discard. It is on such "leftovers" that collectors survive. This subjection of the human condition made them vulnerable, as they exist as an Association, but in reality they experience servitude, lacking knowledge of the entire work process and fulfilling only the production stage of collecting material in the streets, individually. This situation favored these collectors' voluntary servitude, as even when disagreeing with the practices, they kept silent. Such a situation reflects what Mendes (2008) pointed out: survival, security and power are dimensions of human condition and ultimately strengthen the subjection of workers, regardless of the type of organization that they form.

The Analysis of Clinical Devices was extensively discussed in Ghizoni and Mendes (2014); it is important to emphasize that the formation of clinical and supervision devices with the clinical collective was essential to the subjective mobilization of the collectors. It is important to focus on the group that will carry out the clinic before looking at the group that will participate in that clinic for a non-mobilization or the difficulties which may arise may not emerge only from the workers' movement but also from the clinical researcher's. Therefore, the clinical view of this collective, via supervision, is fundamental to decision-making throughout the sessions.

It was observed in this Clinic that the creation of space for discussion led to the breaking of silence and rethinking of individualism, encouraging the mobilization of a Management collective to implement changes in the organization of work in ASCAMPA. Bortoli (2009) also created spaces for discussion among collectors, although not part of the Clinical Work, and provided for over two years a project for the exchange of experiences between collectors in the south of Brazil. Such movements to enable talking, listening, meeting, fostering trust and discussion are essential for building a collective, in an attempt to change the logic of individualism and strengthen preventive health.

In the case of the Psychodynamic Clinic of Cooperation, the clinical listening of suffering is its psychoanalytical base and consequently its origins are at the clinical method of investigation and intervention. The psychoanalytical listening seeks to articulate fragments of a discourse in free associative chains the meaning of which is gained *a posteriori*, returning to the discourse in the form of remarks and interpretations (Martins & Mendes, 2012).

It was observed that having a forum for discussion established amongst the collectors brought major changes to the work organization of the ASCAMPA and to the collectors' lives. They had the opportunity to rethink their practices, views and attitudes as well as to be able to experience the feeling of being heard "by another person who is open to listening, interacting and discussing what has been experienced by the subjects in relation to their work" (Mendes and Araujo, 2012, p.129). It is in this discussion space that the rules of work and coexistence can be built and rebuilt, and where the recognition of workers' commitment happens. It is the place where opinions can be developed (Rossi, 2008).

The workers' speech provoked action, which came as a result of the discomfort that repetition caused throughout the sessions. This resistance was dealt with through the collective of clinics' interpretations in every session and was overcome by the workers in a continuous process. Collectors rebuilt meanings and began to rewrite the history of the Association, starting with the creation of the management collective. Thus, they came to realize that capacity and power of change lay in the work collective and in the unity of their individual strengths.

Regarding the Psychodynamics Analysis of Work, it was perceived that, initially, the group of collectors did not know everything about the tasks of an Association. They worked based on their life experience. Those who worked collecting in the streets did so individually, without dealing with administrative, financial and political issues of the ASCAMPA. This group often reported that working in the streets had its pleasures, but also a lot of stress when arriving at the Headquarters for weighing materials and dealing with financial details of payments. Those who worked in the Headquarters acted as owners of junkyards, detached from the values of Solidarity Economy and unaware of proper procedures particular to an association. Rules were inexistent or unclear. There was a centralizing management, but one that complained about overwork. The type of management of ASCAMPA was, therefore, disorganized and lacking clarity on finances, which created a lot of stress between the administrator and collectors. There was much suffering experienced in the relationship between these two groups. Morrone and Mendes (2003)

investigated experiences of suffering linked to social and professional relationships, in the case of market vendors. A similar trend was observed with the collectors of ASCAMPA, especially with regard to individualism, disunity, discussion about work rules and Association Financial Management.

When workers have opportunities, they describe their conflictive situations with their peers or superiors and, consequently, speak about their suffering (Medeiros, 2012; Lima, 2011; Magnus, 2009). Thus, “work, primarily passes through the emotional experience of suffering, or the pathic. There is no suffering without a body to experience it” (Dejours, 2004, p. 29). This experience with the real work and the unusual events that occur at work also raises the awareness of the weakness, impotence and relentless search for the truth of not knowing (J.B. Ferreira *et al.*, 2013; S.C. da C. Lima, 2012). Other types of suffering apart from the relationships are revealed by the collectors, confirming the assumptions of the Psychodynamics of Work that “relations established in the organization of work produce specific forms of suffering and functionality of the work collective in its different dimensions” (J.B. Ferreira *et al.*, 2013, p. 106).

The funds raised by the collectors were (and continue to be) a reason for suffering. In addition to being very low and calculated without clear criteria, collectors had no date for receiving their wages, which led the majority of them to sell materials to middlemen and junkyards, neighbors of ASCAMPA – a movement that was also noticed in studies by Carvalho (2008) and Bortoli (2009).

One may then ask: *what makes these workers continue in this activity?* The management collective itself has presented difficulties with its payments, given they prioritize collectors’ payment, yet they still continue to perform their duties. At first glance, it seems impossible for someone to dedicate so much work and receive nothing or very little as the majority live on less than the monthly minimum salary (USD\$282). It is seen as a harsh reality of the poor and excluded populations, who, in the absence of other opportunities, find themselves facing this chance of work and of recognition however small it may be as they cling to this hope for survival.

It is also worth mentioning that in the case of the ASCAMPA collectors the financial issue is not the “heart of the matter” as besides enjoying the work they feel valued as part of the Association, feel recognized and part of a larger group: the National Movement of Collectors of Recyclable Materials. The contradiction lies in their little political, administrative and financial participation in the ASCAMPA; often unaware of the real meaning of an Association that values solidarity, cooperation, without exploitative relations within the workforce, as they had experienced until the confrontation with the Headquarters’ Administrator.

The form of work the ASCAMPA collectors are building collectively, experimenting, evaluating and restarting is clearly the result of a healthy work organization that offers opportunities for negotiation. There is now a “degree of freedom for the worker to adjust the reality of work to their wants and needs; the socio-professional relations are open, fair and democratic; and the process of recognition, pleasure and transformation of suffering is possible” (Mendes, 2008, p. 14).

In this study with the ASCAMPA collectors as in that of Morrone and Mendes (2003) with informal workers at the market of imported goods in the Federal District, it was observed that the workers did not experience organized work; they are autonomous, control the process of work, creating and recreating the rules and have the freedom to change the organization of work.

This previous movement, in the case of the collectors, led them to seek a solution after experiencing the reality – with a difference in relation to the conventional formal organizations, they have the freedom to create and recreate the rules in accordance with the decisions of the collective. From what we have seen,

these decisions have gone through three stages: they were initially unilateral decisions taken by the Headquarters' Administrator; with the clinical practice, the management collective experimented with and put into practice ideas that emerged in the group discussion in order to evaluate them and modify them when necessary. Currently, more than two years after the clinic, there is a new period of repetition, where the management is again centralized, and generating discontentment in the Board of the Association.

It was observed both in the clinical evaluation and in the current situation that the management collective is still learning how to deal (autonomously) with the power to make collective decisions, moving from servitude to taking action as protagonists. Although the lack of a perfect job troubles the collectors, they have moved toward seeking their improvement. As stated by Carvalho (2008), the group realizes that to becoming able to think of strategies and evaluate actions is a growth process, a great change in their lives, which were occupied only by their individual work in the streets, or following the decisions of an administrator, as noted in the clinical practice with the collectors of ASCAMPA.

The work in the Psychodynamic Clinic is represented by what the collectors have been doing: discussing rules for coexistence; rules for work; experimenting; evaluating; and putting practical intelligence into practice. It is the "engagement of the body, the mobilization of the intelligence, the capacity to reflect, to interpret and to react to situations, the power to feel, think and invent" (Dejours, 2004, p.28). Thus, we see work as a constituent of the individual.

The Analysis of the Mobilization of this work collective is noted in this clinical practice through cooperation established between collectors from the forum for discussion, where practical intelligence was put into action through the creation of the management collective that implemented changes in the organization of work which remain today, more than two years after the closing of the clinic.

Based in the Headquarters, the management collective learns things they did not know, such as how to separate white paper, easier ways to remove book covers and so on. Individual practices contrast with the collectiveness, and some members still have difficulties saying what they believe is right. However, gradually, they learn, often through experience with others.

In the Final Report Discussion Meeting, it was noticed that the workers have grown to have one eye on the future, bringing about problems they have experienced and reflecting on how to overcome them.

It was also noticed that the confrontation with the reality of work in managing the ASCAMPA awakened elements of subjectivity of the work collective that had not been dealt with or needed rethinking to enable being tackled. In doing so, the group increasingly engaged in the organization of the work of ASCAMPA, which still requires adjustments and improvements as they go along.

The practice of the Psychodynamic Clinic of Cooperation experienced with the collectors of ASCAMPA marks a methodological difference between the procedures of the Psychodynamics of Work as proposed by Dejours (1992). This difference is based on the practices developed by The Psychodynamics of Work Laboratory at *UnB - Universidade de Brasilia, Universidade Federal do Rio Grande do Sul and Universidade Federal do Amazonas* (Martins *et al.*, 2013), which started implementing adjustments to the original method.

It is noted that the empirical reality will take a different form to the original proposal, as stated in the studies of Santos-Junior (2009), which analyzed the relationship between the organization of work, experiences of pleasure-suffering and the strategies for mediating suffering by professionals who work in a Psychosocial Care Centre (CAPs); S.C. Lima (2010), who presents the experience of intervention in work psychodynamics with a group of public servants of the Judicial Branch in Brasília; Gomes, Lima and

Mendes (2011), who favored listening to the suffering in work clinical sessions with professionals from the area of training and development of an institution of the Judiciary Power; and Mendes, Alves and França (2011) who worked with stenographers in Distrito Federal.

Through experiencing the method of the Psychodynamic Clinic of Cooperation proposed by Mendes and Araujo (2012) the studies of Medeiros (2012) were developed with air monitoring pilots of the National Transport Department in Distrito Federal (Ghizoni, 2013; Carvalho and Vasconcelos, 2014).

Hence, it can be inferred that the Psychodynamic Clinic of Cooperation emerges as an opportunity to methodologically advance the field of listening to the suffering in the work environment.

This opens a new research agenda in the field of work clinics, where the focus is on the individual who is meant as a subject of opportunity, a subject that this clinic intends to unveil, activating his/her capacity to desire, and thus the space for discussing the political effectiveness of the clinical practice.

Finally, it is worth emphasizing that this debate on the application of the methodology in work psychodynamics, in particular in the theoretical-methodological approach of the work clinic, gains strength in the study of Mendes (2014), who rethinks the Psychodynamic Clinic of Work published by Mendes and Araujo (2012), pointing out the prospect of an analytical listening to the suffering that is revealed in a proposal an Analytical Clinic of Work.

7. Final comments

The shift from discussion to deliberation, culminating in the creation of a collective management was the mobilizing force for the changes in the organization of the work of the ASCAMPA. The group went on to discuss the division of labor, the rules, schedules, rhythms, demands for the implementation of work as well as the socio-professional relations.

It must be stated that in this clinical practice, workers traded the real work for the prescribed work for the freedom that comes with being a member of an Association. It is precisely this movement that has improved the mental health of the collectors in spite of the many adversities they have been through.

The discussion space established between the collectors through the Psychodynamic Clinic of Cooperation led to changes not only in the organization of work but also in the lives of the collectors, who came to rethink their practices, views and attitudes.

The clinic is the materialization of a provisional idea. The limits of the clinical practice, as developed with the collectors, are in the availability of the group of workers to present their vulnerabilities in regards to the professional field, to speak about their suffering with confidence. It also emerges from this relationship of transference that understands change can occur in the organization of work – the only way to seek health rather than illness in the workplace.

The Clinical Practice has been completed and new projects have been designed for ASCAMPA. Technical assistance will continue through the *Universidade Federal do Tocantins*, meeting the demands of business management, above all regarding issues involving finance and coexistence.

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