



Nursing graduates and their notions of the world of work

Egressos de enfermagem e suas concepções sobre o mundo do trabalho

Egresados de enfermería y sus concepciones sobre el mundo del trabajo

Carolina Viegas de Mello^I ; Shino Shoji^I ;
Norma Valéria Dantas de Oliveira Souza^I ; Célia Regina da Silva Medeiros^{II}

^IUniversidade do Estado do Rio de Janeiro, Rio de Janeiro, RJ, Brazil;

^{II}Universidade Federal do Rio de Janeiro, Rio de Janeiro, RJ, Brazil

ABSTRACT

Objective: to identify and examine the conditions facilitating and limiting nursing students' integration into work. **Method:** in this qualitative and descriptive study conducted at two federal universities in Rio de Janeiro, forty-three graduates from these institutions were our focal group, to whom a semi-structured interview script was applied. The data collected were subjected to lexical analysis, assisted by *Iramuteq* software. **Results:** at University A, the factors facilitating nursing work were: autonomy, interpersonal relations and the nursing team. Limiting aspects were: overwork, shortage of human and material resources, professional qualification and lack of recognition. At University B, the facilitating factors were: working conditions, teamwork and autonomy. Limiting conditions were: shortage of human and material resources and interpersonal relations. **Conclusion:** limiting aspects far outweighed those facilitating nursing work, and interventions and reformulations are necessary not only in the workplace, but also in the field of training.

Descriptors: Work; Working Environment; Education Nursing.

RESUMO

Objetivo: identificar e analisar os aspectos facilitadores e limitadores dos graduandos de enfermagem em sua inserção profissional. **Método:** estudo qualitativo e descritivo, desenvolvido em duas universidades federais do Rio de Janeiro. Os participantes foram 43 egressos dessas universidades, no qual foi aplicado um roteiro de entrevista semiestruturada. O tratamento dos dados ocorreu pela análise lexical com auxílio do *software Iramuteq*. **Resultados:** constatou-se que, na Universidade A, os fatores facilitadores para a execução do trabalho foram autonomia, relacionamento interpessoal e equipe de trabalho. Os limitadores caracterizam-se como sobrecarga de trabalho, escassez de recursos humanos e de materiais, qualificação profissional e baixo reconhecimento. Na Universidade B, os fatores facilitadores foram condições laborais, trabalho em equipe e autonomia. Já os limitadores foram sobrecarga de trabalho, déficit de recursos humanos e de materiais e relacionamento interpessoal. **Conclusão:** ressalta-se que os fatores dificultadores suplantaram os facilitadores e são necessárias intervenções e reformulações não apenas no ambiente de trabalho, mas também no campo da formação.

Descritores: Trabalho; Ambiente de Trabalho; Educação em Enfermagem.

RESUMEN

Objetivo: identificar y analizar los aspectos facilitadores y limitantes de los estudiantes de enfermería en lo relativo a su inserción profesional. **Método:** estudio cualitativo y descriptivo, desarrollado en dos universidades federales de Río de Janeiro. Los participantes fueron 43 egresados de estas universidades, en los que se aplicó un guion de entrevista semiestructurada. El tratamiento de datos se realizó mediante análisis léxico con la ayuda del *software Iramuteq*. **Resultados:** se verificó que, en la Universidad A, los factores facilitadores para la realización del trabajo fueron: autonomía, relaciones interpersonales y equipo de trabajo. Los limitadores se caracterizan por: sobrecarga de trabajo, escasez de recursos humanos y de materiales, calificación profesional y poco reconocimiento. En la Universidad B, los factores facilitadores fueron: condiciones de trabajo, trabajo en equipo y autonomía. Los limitadores fueron: sobrecarga de trabajo, escasez de recursos humanos y de materiales, y relaciones interpersonales. **Conclusión:** cabe señalar que los factores dificultadores sobrepasaron los facilitadores e intervenciones y reformulaciones son necesarias, no solo en el ámbito laboral, sino también en el campo de la formación.

Descritores: Trabajo; Ambiente de Trabajo; Educación en Enfermería.

INTRODUCTION

The object of this study is the perception of Nursing graduates about the world of work and their entry into the work market, with the objective of identifying and analyzing the facilitating and limiting aspects observed by the Nursing students in their professional insertion.

The Nursing work has suffered several repercussions with globalization and with the implementation of neoliberal policies in the national context. Such phenomena have caused job insecurity, with increasing outsourcing and retraction of the number of workers active in a formal regime; impairing the guarantee of social rights, increasing unemployment and underemployment, as well as increasing workforce turnover. This situation results in harms for the quality of



nursing care and for the health of the workers, as well as for the professional insertion process of Nursing graduates¹.

However, it is necessary to infer positive changes, such as in the scientific field, occurred in the last three decades, responsible for the impact on knowledge development in the Nursing area. These changes followed the global trends, reflecting the necessary advances related to the care and teaching actions and to the research demands in the Nursing area². It also corroborates the political commitments with debates with the competent instances, in view of the achievement of a minimum wage for the profession and a 30-hour workweek³ (Bill 2,295/00), highlighting the process of strengthening Nursing in terms of dignified and innovative working conditions.

Faced with this scenario, the problem linked to the world of work is considered to be multifaceted and complex and, certainly, one of the recommendations to transform it is through training. This study is based on the principle that it is through professional training that the reality of the health work can be transformed, under a Freirean perspective, since *“education does not transform the world. Education changes people. People transform the world”*⁴, corroborating that education can be considered as an important tool for the social change and transformation of mankind.

In this sense, it is relevant that the institutional syllabus be systematically evaluated, in a dynamic process of construction and (re)construction, with the purpose of preparing future nurses, turning them into transforming agents, through a reflective, critical and problematizing teaching-learning process, systematically bringing students closer to the profession's fields of action⁵⁻⁷.

On the other hand, a number of studies⁴ infer that Nursing graduates are faced with deep strangeness regarding the configuration of the world of work. This strangeness is due to the dynamism and complexity that has been undertaken in the workplaces since globalization and the neoliberal model. And, facing this reality, going against what was taught to them in college, it is common for these professionals to come into conflict and present psychological distress^{8,9}. Therefore^{10,11}, the syllabus proposal to work on the early insertion of these students in practice scenarios is considered fundamental, providing them with the opportunity to meet the unique challenges of the profession.

Therefore, in view of these factors, the following questions were raised: What is the job market like for the newly graduated nurse? What are the practicalities and challenges that Nursing graduates face after their professional insertion?

THEORETICAL FRAMEWORK

The indiscriminate opening of undergraduate courses, as well as the unbalanced allocation of nurses in the national territory, generated negative consequences for the profession and for the workers, with high underemployment; cooperative and/or outsourced workers, compromised labor rights; terrible working conditions; high workload; and severe and exclusive professional competitiveness¹².

Nursing education in Brazil also suffered reflections from the socio-historical moments, evidencing the relevance of overcoming the disconnection that was established between the training process and the reality practiced, thus proposing to train nurses capable of meeting the health demands of the population, acting dynamically and in line with the principles of universality, integrality and equality¹³. The syllabus proposal officialized by Ordinance No. 1,721/1994¹⁴ is based on education as a possibility for transformation, grounded on the construction of a critical-reflexive potential, with society, seeking quality of the care provided and growth of the profession.

A number of research studies reveal the concern regarding the relation between the educational practice of the training institutions and the reality of professional nurses to perform their role in the health services^{15,16}.

It is necessary to induce changes in the training of these professionals, through the construction of new political-pedagogical projects that support them in dealing with the challenges of the professional practice in a constantly changing work context¹⁴; and also that enable education linked to the world of work and to the daily reality of the social practices, favoring the development of skills and competences in a multidisciplinary, cultural, scientific and technical manner¹⁷.

METHOD

A qualitative and descriptive approach was adopted for developing the study. The research fields were two federal Nursing schools, both located in Rio de Janeiro, classified as University A and University B.



The inclusion criteria for the participants in the study were as follows: a) having worked in the profession for at least one year, and b) having graduated during the 2000-2013 period, in order to capture the scenario of graduates from the perspective of this last millennium.

Regarding the number of participants, it was planned to collect data from one graduate of each class, for a total of 56 participants, i.e., four graduates per year, since each institution offered two academic enrollments per school year. The choice of these graduates was random, made by draw. A total of 43 participants was obtained at the end of the collection process. This reduced number in relation to what was initially planned was due to the lack of registration data for the graduates, refusals to participate and lack of feedbacks to the invitations to contribute in data collection. It is noted that the choice of the study participants was not related to their number, but to the knowledge and/or experience of these workers about the study object. In this perspective, it is argued that the number of participants in qualitative research is a low-valued parameter, since the objective is the content raised to apprehend the research object¹⁸.

Corroborating that, in a qualitative basis methodology, the number of participants that make up the interview board can hardly be previously determined, thus depending on the quality of the information obtained in each statement, as well as on the degree of recurrence and divergence of this information. As long as original "information" or clues emerge that may indicate new perspectives for the ongoing research, the interviews must continue to be conducted¹⁹.

The collection instrument used was a semi-structured interview script, applied from June to September 2016; and lexical or textual analysis was chosen for data treatment. Statistical methods were applied to the transcribed verbal materials, allowing for thorough explorations and enabling the construction of natural categories based on some statistical techniques in the field of qualitative data²⁰. This type of analysis has vocabulary as its unit: words are identified and quantified in terms of frequency, thus prioritizing the systematization of textual data and only then interpreting them²¹.

Based on this perspective, after the individual transcription of the content of each interview, textual analysis was performed with the aid of the *Iramuteq* (*Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires*) software, a free program anchored in the R software (free package to perform statistical analysis) and that allows for different processing and statistical analyses of the inserted texts²². The software allowed two types of interpretation of results for this research: frequency and word network.

Word frequency, or basic lexicography, is an indicator that shows the number of words present in the text analyzed. In this stage, the most frequent words in the text are observed, deducing that certain frequently repeated vocabulary is pertinent in the investigated context²³; thus, it is possible to find categorizable items. The data were then submitted to the *Iramuteq* software and treated in the light of the thematic content analysis. Hence the following category emerged: Context of the health work: aspects that facilitate and limit the performance of graduates.

In compliance with the ethical precepts, this research was registered on *Plataforma Brasil*, as recommended by Resolution 466/2012 of the National Health Council (*Conselho nacional de Saúde*, CNS/MS), obtaining approval from the Ethics Committee under protocol No. 1,293,828, Certificate of Presentation for Ethical Appreciation (*Certificado de Apresentação para Apreciação Ética em Pesquisa*, CAAE) under number 49971815.5.0000.5282.

To maintain anonymity and preserve the privacy of the graduates, a code was used for each interview. Thus, codes A1, A2, A3, B1, B2, and B3 were assigned, and so on successively and respectively, according to the university of origin of the interviewee and to the chronological order of the interviews.

RESULTS AND DISCUSSION

In relation to the 21 interviews analyzed in University A, three important themes were obtained: professional autonomy, good professional relationships, and teamwork.

In relation to professional autonomy (six occurrences, 29% of the total), an aspect pointed out by graduates from both universities as facilitating the work process, the importance of a respectful positioning and appreciation of the graduates by the Nursing team and other professionals in the area was emphasized. An environment with this configuration favors that nurses feel pleasure and supported to perform their duties, strengthening autonomy.

Another facilitating aspect emphasized by the participants from University A was the good interpersonal relationships with the other members of the health team (seven occurrences, 33%), as well as the presence of efficient communication. These data emphasized the importance of the collective for the satisfaction of the graduate.



But the practicalities is that we have a good relationship, all the teams get along very well. Everyone can talk cordially, and because of this dialog it is possible to facilitate professional performance (A2).

Likewise, the satisfactory number and qualification of the professionals for performing the assistance actions was a great facilitator for the execution of the activities (one occurrence, 5%):

There are always two nurses and five technicians on duty. So, you work with another nurse, it helps if you have a limitation or a difficulty, you have a partner to work with. They are more qualified professionals to be exercising their function (A17).

Staffing is an extremely important factor for the execution of activities, since it avoids work overload and, consequently, wear out in the Nursing team, thus ensuring quality in the provision of care²⁴.

Regarding University B, 22 graduates participated in the interview; after analysis with the aid of the *Iramuteq* software, three important themes are listed: favorable working conditions, teamwork, and work autonomy.

As for the workplace, three graduates (14% of the total) correlated the availability of materials with the practicalities of the physical structure and human resources, claiming that an effective job depends on a good structure and on well-qualified professionals.

For those who like and act in care, it is great to work with all the equipment, complete monitor, electrode, saturimeter, syringe pump, which in pediatrics is used a lot, pulley pump always updated (B4).

In parallel, teamwork was the most mentioned facilitator in both groups of graduates, cited by half from each institution: 11 from University A (50%) and 11 from University B (50%). All the graduates mentioned a good relationship with the multidisciplinary team, with the Nursing team, and with the professional category as a whole.

As it is a multidisciplinary team, this is a facilitating factor for us, because it is a team dedicated to providing comprehensive care to the patient. We have very close contact with other professionals who complement our care, and this is good for Nursing, because the patient improves, and we grow as professionals (B15).

Being a fundamental element in health institutions, teamwork is the most appropriate way to obtain better results; the objectives come together to achieve excellence in the quality of the work performed, generating better problem solutions, in addition to developing and executing actions that are impossible to be carried out alone²⁵.

When talking about teamwork, it is relevant to mention good professional relationships, an aspect alluded to by graduates from University A. A cooperative and generous dynamics among the team members is a powerful tool to be used in favor of good professional performance and adequate patient care. This generates pleasure in the execution of the work, protecting and assuring the worker's subjectivity²⁶.

Five graduates from University B (23%) are satisfied with the autonomy achieved through support in decision-making and the freedom promoted for their respective actions, emphasizing that the professional collective gives them confidence in relation to the prescribed conducts.

I find it very easy to perform my role because it is a team that supports me and believes in my work. The Nursing team understands me, the boss gives me autonomy for many things within my unit (B21).

It is known that the autonomy conferred to the individuals in their functions offers confidence for the provision of the service, in addition to becoming a good tool for productivity, as the professionals work more and better, which has direct implications on the quality of the care provided. It also protects the worker's subjectivity, because it reverts into satisfaction in the performance of tasks²⁷.

In relation to the limiting aspects, the correlations that emerged from the analysis of the speeches of the 21 graduates from University A occurred between work overload, scarcity of human and material resources, disorganization of the work process, poor professional qualification of the Nursing team and little professional recognition, objects that contradicted the aforementioned facilitating factors.

Work overload was pointed out by five graduates (24% of the total), mainly related to lack of employees, large number of patients and high workload.

Difficulties are in relation to the patients, as there are 26 patients for only one nurse on duty. Also, regarding the severity of these patients, I think that there are very few nurses to perform the proper functions. As for the team of technicians, they are also few. Currently, I have twenty-six patients and only four technicians. As they get overloaded, so do I. The entire team is overloaded (A10).



Work overload was a topic raised by graduates from both universities. It is the result of the new forms of management related to the neoliberal ideology; overload causes more precariousness in the work environment through the versatility and multifunctionality of the workers, who, in turn, feel pressured to achieve the goals imposed by the work organization and, above all, to perform their work with quality in order to offer the best to the patient²⁸.

The lack of human resources was also mentioned by seven participants (33.33% of the total) as a limiting factor for carrying out the work activities, with consequent overload of the professionals. Thus, this lack is a compromising element in the quality of the care provided.

In addition to insufficient human resources, seven graduates (33% of the total) reported lack of material resources, as exemplified in the statement highlighted below:

The lack of material is complicated, it makes it difficult for us to work. So, there is lack of material, and then what do you do? I need material to work, only me with my team I do nothing (A21).

The lack of material and human resources is another factor that increases labor demand and the pace of work. The inadequacy of resources and working conditions, also related to the neoliberal context, in addition to causing psychological distress, causes professionals to modify their *modus operandi*, which alters the labor dynamics through the incorporation of adaptations and improvisations whose objective is, ultimately, to overcome the lack of materials to provide care²⁹. It is therefore a vicious process, in which the greatest consequences often end up triggering low quality of the health care provided to the patient.

The inadequacy of the work process was also highlighted, mentioned by five graduates (24% of the total):

Lack of organization in some processes that hinder work. There is no planning, everything is improvised (A6).

Another complicating factor raised by five graduates (24%) was the inadequate professional qualification of the Nursing team, an aspect more mentioned by graduates who work in public hospitals, in which the employment regime is statutory and therefore guarantees the employability of the professionals even when they are already technically and scientifically outdated.

There is great lack of technical knowledge in many professionals, both technicians and nurses. So, I understand that, maybe even because they don't have a great command in relation to certain procedures, it implies a deficit in the Nursing care provided to the patients (A8).

Corroborating this, the graduates reported that, in general, their peers do not seek improvement and training. This gap generates a reduction in the quality of Nursing care, as well as a mentality more resistant to positive changes in the work process by these professionals. This condition increasingly worsens the situation of Nursing devaluation and the lack of professional and social recognition³⁰.

Another important fact verified by two interviewees (9%) was lack of recognition of the graduates in the workplace.

When talking with colleagues who work at the front, regardless of their professional training, I perceive that the management model in place in our municipality, which prioritizes the appreciation of the professional according to the achievement of goals, does not perceive the worker as a being who has other needs in their service, and that the discussion about developing work is neglected as a last resort (A28).

It is essential that human resources managers identify and value the individual potential of each employee, since each individual has different ideas and visions, so that they can add to the potential of other employees in the work team, resulting in better quality of the product or service that is being offered to society²⁵. At the same time, valuing such individual aspects within a team promotes and protects the workers' health, valuing them within the work dynamics^{31,32}.

As for University B, from the analysis of the interviews of the 22 graduates, limiting aspects similar to those of University A were present, correlated to the following themes: work overload; lack of working conditions (human and material resources); and poor relationship among the employees.

In the workplace context, half of the graduates (11; 50%) reported work overload, highlighting that physical and emotional wear out, overcrowding and overly complex patients are some of the triggers.

And in the context of work overload and wear out, there is lack of physical infrastructure and material resources (mentioned by six graduates; 27%), in addition to human resources (7; 32%), as evidenced by the following statement:

Today it is the lack of employees, excess work and multitasking, but the lack of employees is what impacts the most. Many times, we stop playing the role of a nurse to play that of a technician, because of there is no technician (B13).



Meanwhile, for University B, it is verified that the structuring of the working conditions is relevant for good performance at work. The place of performance must be satisfactorily designed (conditions of hygiene, safety, and equipment) in order to ensure comfort for the entire team, providing health and safety for the execution of their activities. Although still very underestimated by employers and managers, this measure is essential to reduce the incidence of occupational morbidities and to improve the quality of the care provided^{33,34}.

Among the problems related to human resources, three graduates (14%) expressed dissatisfaction with interpersonal relationships, as exemplified below:

The interpersonal relationships among the team members is awfully bad, terrible. [...] No, it is not united. On the contrary, it is a weapon always aimed at the other. It is a culture we have here (B1)

Such a situation can be a consequence of an institutional hierarchical structure, of the way in which professionals face their adversities and of the resoluteness of their difficulties. Personal differences and disagreements create an unharmonious environment and generate deficient professional relationships, from the leaders to those being led, reflecting on the group as a whole. To get around the problem, it is necessary to seek improvements in the professional relationships, based on the principle of good communication, while considering human peculiarities³¹.

CONCLUSION

Through the analysis of the interviews, it was possible to identify that, in the graduates' perspective, there are more limiting factors than facilitators in the place of professional performance, and that such difficulties emerge not because of the object of Nursing work, but because of the configuration of the work organization, based, at the present time, in neoliberal precepts.

The structure offered for the development of the work activities causes strangeness among the professionals. Therefore, interventions and reformulations are necessary not only in the work environment, but also in the field of training, so that graduates can help transform this unusual context, since it is through professional training that the reality of the work in health can be transformed. The educational institutions must develop a teaching-learning process that fosters reflection, criticism and political activism, among other technical-scientific aspects, in order to transform the inconsistencies that have been plaguing the health services.

REFERENCES

1. Souza NVDO, Gonçalves FGA, Pires AS, David HMSL. Neoliberalist influences on nursing hospital work process and organization. *Rev. bras. enferm.* [Internet]. 2017 [cited 2019 May 20]; 70(5):912-9. DOI: <https://doi.org/10.1590/0034-7167-2016-0092>.
2. Barros ALBL, Nóbrega MML, Santos RS, César-Vaz MR, Pagliuca LMF. Research in nursing and modification of the knowledge tree in CNPq: contribution to science. *Rev. Bras. Enferm.* [Internet]. 2020 [cited 2020 Nov 05]; 73(1):20170911. DOI: <http://dx.doi.org/10.1590/0034-7167-2017-0911>.
3. Silva JL, Machado DM. Brazilian nursing in 90 years of associative history: contributions of the Brazilian Nursing Association. *Hist. enferm. Rev. eletrônica.* [Internet]. 2018 [cited 2020 Nov 05]; 9(2):131-40. Available from: <http://here.abennacional.org.br/here/v9/n2/a4.pdf>.
4. Freire, P. *Pedagogia do Oprimido*. Rio de Janeiro: Paz e Terra; 1987.
5. Bortoletti APG, Duarte ERM, Ferla AA, Ferreira GE, Dias MTG. Monitors' perception on education program for interprofessional healthcare work - PET-health. *Esc Anna Nery.* [Internet]. 2016 [cited 2020 Nov 10]; 20(2):254-60. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452016000200254.
6. Carbogim FC, Oliveira LB, Mendonça ET, Marques DA, Friedrich DBC, Püschel VAA. Teaching critical thinking skills through problem based learning. *Texto Contexto - Enferm.* [Internet]. 2017 [cited 2020 Nov 10]; 26(4):e1180017. DOI: <http://dx.doi.org/10.1590/0104-07072017001180017>.
7. Vila V, Zhuang J, Tan E, Thorne S. Reflections on Nursing Educational Advancement Within Diverse and Evolving National Cultural Contexts. *Int. J. Nurs. Educ. Schol.* [Internet]. 2018 [cited 2020 Nov 10]; 15(1):e20180017. DOI: <https://doi.org/10.1515/ijnes-2018-0017>.
8. Püschel VAA, Costa D, Reis PP, Oliveira LB, Carbogim FC. Nurses in the labor market: professional insertion, competencies and skills. *Rev. bras. enferm.* [Internet]. 2017 [cited 2019 Aug 23]; 70(6):1220-6. DOI: <https://doi.org/10.1590/0034-7167-2016-0061>.
9. Silva LM, Santana TCP, Silva LRF, Rocha LM, Canhoto CTS, Dantas KL, et al. Supervised curricular stage: difficulties and perspectives enhanced by academics of nursing. *Revista Eletrônica Acervo Saúde.* [Internet]. 2019 [citado em 03 Set 2019]; 18:e662. DOI: <https://doi.org/10.25248/reas.e662.2019>.
10. Powers S, Claus N, Jones AR, Lovelace MR, Weaver K, Watts P. Improving Transition to Practice: Integration of Advanced Cardiac Life Support into a Baccalaureate Nursing Program. *J. Nurs. Educ.* [Internet]. 2019 [cited 2019 Sep 03]; 58(3):182-4. DOI: <https://doi.org/10.3928/01484834-20190221-11>.



11. Browne CA, Fetherston CM. How do we facilitate international clinical placements for nursing students: A cross-sectional exploration of the structure, aims and objectives of placements. *Nurse Educ Today*[Internet]. 2018 [cited 2019 Sep 03]; 66:1-7. DOI: 10.1016/j.nedt.2018.03.023
12. Soares LS, Silva GRF. Health, work and neoliberalism: understanding the illness of the nursing staff. *Rev. Enferm. UFPI*. [Internet]. 2014 [cited 2019 Sep 03]; 3(1):141-4. Available from: http://www.repositorio.ufc.br/bitstream/riufc/10907/1/2014_art_grfsilva.pdf
13. Corbellini VL, Santos BRL, Ojeda BS, Gerhart LM, Eidt OR, Stein SC, et al. Linkages and challenges in the training of professional nurses. *Rev. bras. enferm.* [Internet]. 2010 [cited 2019 Sep 17]; 63(4):555-60. DOI: <https://doi.org/10.1590/S0034-71672010000400009>.
14. Presidência da República (Brasil). Portaria nº 1721, de 15 de dezembro de 1994. Fixa os mínimos de conteúdo e duração do curso de graduação em enfermagem. [Internet]. Diário Oficial da União. 15 de dezembro de 1994. [cited 2019 Nov 20]. Available from: http://www.lex.com.br/doc_11078549_portaria_n_1721_de_15_de_dezembro_de_19
15. Chrystostimo MM, Brandão AAP. The training professional of nurses: 'state of the art'. *Enferm Global*. [Internet]. 2015 [cited 2020 Nov 08]; 40:430-45. Available from: <http://revistas.um.es/eglobal/article/viewFile/208841/181721>
16. Carbogim FC, Friedrich DBC, Püschel VAA, Oliveira LB, Nascimento HR. Paradigm of comprehensiveness in the curriculum and strategies for nursing education: a cultural-historical approach. *Rev. Enferm. Centro O. Min.* [Internet]. 2014 [cited 2020 Nov 08]; 4(1):961-70. Available from: <http://www.seer.ufsj.edu.br/index.php/recom/article/view/426/571>
17. Presidência da República (Brasil). Lei nº 9.394, de 20 de dezembro de 1996. Estabelece as diretrizes e bases da educação nacional. [Internet]. Diário Oficial da União. 20 de Dezembro de 1996. [cited 2020 Nov 08]. Available from: http://www.planalto.gov.br/ccivil_03/leis/l9394.htm
18. Minayo, MCS (org). *O desafio do conhecimento: pesquisa qualitativa em saúde*. 14ª ed. São Paulo: Hucitec; 2012.
19. Duarte R. Qualitative research: reflections on field work. *Cadernos de Pesquisa*. [Internet]. 2002 [cited 2020 Nov 08]; 115:139-54. Available from: <https://www.scielo.br/pdf/cp/n115/a05n115.pdf>.
20. Camargo BV, Justo AM. Iramuteq: um software gratuito para análise de dados textuais. *Temas psicol.* [Internet]. 2013 [cited 2020 Nov 08]; 21(2):513-8. DOI: <http://dx.doi.org/10.9788/TP2013.2-16>.
21. Justo AM, Camargo BV. Estudos qualitativos e o uso de softwares para análises lexicais. In: Novikoff C, Mithidieri OB (org). *Estudos qualitativos e o uso de softwares para análises lexicais*. Duque de Caxias: Unigranrio; 2014.
22. Kami MTM, Larocca LM, Chaves MMN, Lowen IMV, Souza VMP, Goto DYN. Working in the street clinic: use of IRAMUTEQ software on the support of qualitative research. *Esc. Anna Nery*. [Internet]. 2016 [cited 2020 Nov 08]; 20(3):e20160069. Available from: http://www.scielo.br/scielo.php?script=sci_arttext&pid=S1414-81452016000300213.
23. Zhou W, He G, Wang H, He Y, Yuan Q, Liu D. Job dissatisfaction and burnout of nurses in Hunan, China: a cross-sectional survey. *Nurs Health Sci.* [Internet]. 2015 [cited 2019 May 21]; 17(4):444-50. DOI: <https://doi.org/10.1111/nhs.12213>.
24. Araújo MT, Henriques AVB, Velloso ISC, Queiroz CF, Santos AMR. Staff dimensioning of a hospital surgical unit. *Rev. Gest. Saúde*. [Internet]. 2016 [cited 2019 May 21]; 7(2):650-69. Available from: <http://periodicos.unb.br/index.php/rgs/article/view/3519/3206>.
25. Volpato M.; Cimbalista S. O processo de motivação como incentivo à inovação nas organizações. *Rev. FAE*. [Internet]. 2017 [citado em 14 Jun 2019]; 5(3):75-86. Available from: <https://revistafae.fae.edu/revistafae/article/view/485/380>
26. Pereira T, Bezerra MR, Barros M. Interpersonal relations of the nursing team in the work environment. *DêCiência em Foco*. [Internet]. 2019 [cited 2019 Sep 21]; 3(1):65-81. Available from: <http://revistas.uninorteac.com.br/index.php/DeCienciaemFoco0/article/view/271/82>
27. Rocha GSA, Andrade SM, Silva DMR, Terra MG, Medeiros SEG, Aquino JM. Feelings of pleasure of nurses working in primary care. *Rev. bras. enferm.* [Internet]. 2019 [cited 2019 Sep 21]; 72(4):1036-43. DOI: <http://dx.doi.org/10.1590/0034-7167-2018-0518>.
28. Forte ECN, Pires DEP, Martins MMFPS, Padilha MICS, Schneider DG, Trindade LL. Work process: a basis for understanding nursing errors. *Rev. Esc. Enferm. USP*. [Internet]. 2019 [cited 2019 Sep 21]; 53:e03489. DOI: <http://dx.doi.org/10.1590/s1980-220x2018001803489>.
29. Gonçalves FGA. Impacts of neoliberalism on hospital nursing work. *Texto & contexto enferm.* [Internet] 2015 [cited 2019 Sep 21]; 24(3):646-53. DOI: <http://dx.doi.org/10.1590/0104-07072015000420014>.
30. Druck G. The outsourcing in public health: various forms of precarization of labor. *Trab. educ. saúde*. [Internet] 2016 [cited 2019 Sep 21]; 14(1):15-43. DOI: <http://dx.doi.org/10.1590/1981-7746-sol00023>.
31. Fernandes HN, Thofehrn MB, Porto AR, Amestoy SC, Jacondino MB, Soares MR. Interpersonal relationships in work if multiprofessional team of Family health unit. *J. res: fundam. care online*. [Internet] 2015 [cited 2019 Sep 22]; 7(1):1915-26. DOI: <https://doi.org/10.9789/2175-5361.2015.v7i1.1915-1926>.
32. Peruzzo HE, Silva ES, Batista VC, Haddad MCFL, Peres AM, Marcon SS. Organizational climate and teamwork at the Family Health Strategy. *Rev. bras. enferm.* [Internet] 2019 [cited 2019 Sep 21]; 72(3):721-7. DOI: <http://dx.doi.org/10.1590/0034-7167-2017-0770>.
33. Dejours, C. *A loucura do trabalho: estudo de psicopatologia do trabalho*. 5a.ed. São Paulo: Cortez; 1998.
34. Santos SVM, Robazzi MLCC, Dalri RCMB, Bardaquim VA, Xavier JJS, Silva LA, et al. B Wellbeing in the working environment in Brazilian nursing schools. *Revista Ciencia Y Cuidado*. [Internet] 2019 [cited 2019 Sep 21]; 16(2):8-20. DOI: <https://doi.org/10.22463/17949831.1611>.