

Job Satisfaction and Mental Suffering of Penitentiary Agents of the Female Prison of Porto Velho, Rondônia (Brazil)

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Abstract— *The study with the penitentiary agents that work in the female prison system of Porto Velho aimed to analyze the level of job satisfaction and the level of mental suffering of these workers. It is a descriptive and cross-sectional study. This study was performed with 34% of the penitentiary agents who carry out their activities at the Porto Velho Women's Penitentiary, Rondônia. For the data collection, three structured instruments were used: The Sociodemographic Questionnaire; the Self-Report-Questionnaire (SRQ-20), and the Occupational Stress*

Indicator (OSI), measured using a Likert scale. Satisfaction in the work had similar indexes to those found in the literature, presenting the highest proportion in the intermediate variables, that is, their higher frequencies are in the range of some dissatisfactions, with 40%; and 35% with some satisfactions. The highest level of dissatisfaction is in the variable to the form by which changes and innovations are implemented, with 55%. The results showed that the prison staff had lower psychiatric disturbances (19.59%), in the following order of

determination: decreased energy (23.33), depressed mood (23.33%), somatic symptom (21.25%), other symptoms of SRQ-20 (20%) and depressive thoughts (10%), considered as indicators of evidence of mental suffering. From the data collected in this study, it is possible to indicate a possible association between work dissatisfaction and mental suffering.

Keywords—penitentiary agents, job satisfaction, mental suffering, worker's health.

I. INTRODUCTION

It has long been known that the work, when performed under certain conditions, can cause disease. The end of the seventeenth century marked the history of knowledge about diseases of the work, as in 1700 is published the classic *De Morbis Artificum Diatriba*, considered the first work on Workers' Diseases, the Italian physician Ramazzini (1633-1714) taken as a reference to the nineteenth century. Later, he was considered the Father of Occupational Medicine, using today his famous statement about the need for the headboard of any patient, ask him where he was working to see if the source of their livelihood was not the cause of his illness.

According to Brazil¹ (2007), the work can be considered an important action to promote or not the health of people. Health, in this case, is "a complete state of physical well being, mental and social and not merely the absence of disease." As Mendes² (2002), the work is able to favor or not health, therefore, may also be a risk factor.

The penitentiary activity, in general, requires great physical and mental effort and puts the professionals working in the area in complicated situations in order to protect society from offenders, stress generators and consequently likely to develop behavioral changes that differ from his personality structure, leading to the possible development of a psychological distress, reaching even to the development of a mental illness. The stress that is purchased daily by these professionals, creates a mental fatigue that can lead to consequences in the development of its functional activities, such as for life in society. Whereas these professionals deal with prisoners, who were theoretically removed from the social environment to change their behavior.

In the scenario of the Brazilian penitentiary system, we have the prison officers who are responsible for keeping out of the interaction of society, women convicted of various crimes such as murder, drug trafficking, among others.

Through the data collected in the interviews with the prison guards, one realizes that certain topics are more relevant than others that allows a better approximation of the implications of the activity in the health of these workers. It takes into account that the daily lives of agents in prison is conditioned by requirements imposed by the

prison administration, difficulties in reconciling work life and life outside of work, and the lack of rise of perspective combined with professional devaluation. All these issues have the aggravation of being permeated by the phenomenon of violence, backdrop of all activity linked to security in prisons

These professionals are assigned the re-socializing function within prisons. However, living in a routine of tensions and insecurity must maintain order and discipline, which often necessitate the development of arbitrary actions due to the inefficiency of control mechanisms and the lack, often, of personal and material resources³.

"As Feitosa³, the work of correctional officers in prisons in Brazil, according to the literature, itenjoys common aspects that despite all the advances in structure and prison work and the progress of Human Rights can be quite unfavorable for these professionals who undergo identity crisis when faced with a lack of human and material resources to meet the expectations around your work. "

The company charges these professionals concrete actions for improvement, humanitarian policies, pedagogical actions. This same society condemns the system and marginalizes, disdains and devalues the activities of correctional officers, but are active viewers of the news of the crimes committed in society by putting in the hands of these servers, punishment, punishment and rehabilitation of this criminal.

Feitosa³ describes that "these professionals, unmotivated, disadvantaged by reality and neglect, are at high risk of acquiring somatic and psychosomatic diseases, as evidenced both studies who reported stress and work as those who defend the psychodynamics of work."

The prison guard is knowing that their role is to oversee, maintain discipline, promote the safety of the units and preserve the custody of the prisoner, but the conditions in which they now faced in prisons do not let you action alternatives and re-socializing function both defended by public policies seems is a very distant future.

The correctional officers are in charge of searching workers prisoners, cells, visitors, inmates conduct, conduct internal monitoring of Unity and discipline meal of prisoners. By having direct contact with internal and being seen by them as the one responsible for the maintenance of their confinement, these workers are often exposed to various stressful circumstances such as intimidation, assaults and threats, the possibility of riots in which, among others they run the risk of being killed or become hostages⁴.

Not even there is a plan for the occupation in practice comes close to such a purpose, as quoted Feitosa³, "the agent himself is confused with the paradox of his craft

between re-socializing agent, humanizing and disciplinary agent, constraining party."

Lima *et al*⁵, show that the overall general condition of capitalism also reproduced in the particular context of the prison system workers. As an example, according to Lima *et al*⁵. There are the poor the prison system infrastructure conditions that affect all who are in that hostile environment, including not only the prisoners but also professionals and so the prison guards, causing damage to the health thereof; the correctional officer is the professional responsible for track and monitor the inmates in the prison unit, providing services in the security sector; are professionals who are continually exposed to risk situations, as well as intimidation, assaults, threats, killings and riots in which, among others, are at risk of being hostages as they have direct contact with inmates and are seen by them as being responsible by keeping them in prison; traumatic events, such as attacks, bring psychopathological consequences, such as post-traumatic stress, and also the reconstruction of troubled thoughts that are factors of cause and maintenance of mental disorders; the activities performed by correctional officers added to poor working conditions and the indifference of society to this group influence their physical and psychic health status; Besides the situations of risk exposure that impair the physical and mental health of the prison guard, the desktop still hidden dangers related to infection by infectious diseases, since proliferation of epidemics and contagious diseases are favored by the environment place which is characterized in overcrowded cells, instability and health hazards. the activities performed by correctional officers added to poor working conditions and the indifference of society to this group influence their physical and psychic health status; Besides the situations of risk exposure that impair the physical and mental health of the prison guard, the desktop still hidden dangers related to infection by infectious diseases, since proliferation of epidemics and contagious diseases are favored by the environment place which is characterized in overcrowded cells, instability and health hazards. the activities performed by correctional officers added to poor working conditions and the indifference of society to this group influence their physical and psychic health status; Besides the situations of risk exposure that impair the physical and mental health of the prison guard, the desktop still hidden dangers related to infection by infectious diseases, since proliferation of epidemics and contagious diseases are favored by the environment place which is characterized in overcrowded cells, instability and health hazards.

Given that the prison officer have direct contact with inmates are just susceptible to contamination by various diseases, the most common being tuberculosis, hepatitis and HIV / AIDS; still about mental health, it is known that emotional distress of these workers may join the

morbid conditions, such as metabolic syndrome, it has been detected a higher frequency of this condition among patients undergoing major psychological demands in professional practice; the deleterious nature, health, work in prisons influences, including sleep quality of its workers and there is a relationship between stress, sleep disturbances, decreased resilience, decreased work capacity and occurrence of incidents; the health situation presented reflects the working conditions of staff whose exercise activities as an escort; discipline and safety of prisoners, review and inspection of the entry and exit of people and vehicles in prisons, checking and magazine and daily conference of the prison population, in a repetitive, unhealthy and overloaded routine, making even sometimes roles are not his, how to judge the need for health care to the request of the prisoner showing the face of the State's failure to assign to the agent responsible for establishing the appropriate approach every time.

The agent is still in the midst of a hierarchy of duality, setting up a paradox that on the one hand, obey the orders of their superiors and, on the other, requires the convicts. Importantly, in addition to the psychological pressure suffered on the environment seen as threatening to the detriment of violence by prisoners, the agents are also under pressure from their superiors; demands of work imposed by higher imply less freedom of decision and less job control, causing professionals to become more tense and raise your stress level; all these factors only have to contribute to the illness of the group⁵.

In short, "the activities developed by correctional officers are exhausting both physically and emotionally, so studies investigating aspects related to the health of these professionals are needed"⁵.

Prison officials show changes in their behavior throughout his professional career. It was intended with this study, to investigate the mental suffering of the penitentiary agents is associated with dissatisfaction at work and, for this, a survey was conducted with agents that act on the Women's Penitentiary in Porto Velho from the following issues: a) What the job satisfaction level of prison officers of the female prison in Porto Velho, in Rondonia, western Amazonia?; b) What is the level of mental suffering of these workers?. With a view to the presented problem, we conducted a study involving 34% of all prison staff working in women's prison in Porto Velho, Rondônia, Brazil.

II. METHOD

We used a quantitative approach to a type characterized as epidemiological study, the model is transversal, which consists of a cut in the flow history of the event, wherein the display is observed simultaneously.

2.1. Instruments and Procedures

For this study, the following guiding instruments were used:

In the first step we applied the sociodemographic questionnaire divided into three blocks, with closed questions, in order to identify the socio-demographic profile of the penitentiary agents.

Block I - was conducted Profile survey of prison staff working in women's prison in the city of Porto Velho, seeking to identify the following variables: name (optional), your age, marital status, children numbers, time working in the prison system, level of education, working hours.

Block II - training or specialization, ie, what training they had to work in the prison and these trainings were enough, and yet, if they have higher level and what your expertise.

Block III - Survey of the conceptions of the agents about their work as a security guard in women's prison unit.

Second stage application of satisfaction scale work of OSI - *Occupational Stress Indicator*, for prison staff working in women's prison, Instrument organized by Cooper⁶, translated and validated for Portuguese by Swan, Moraes and Cooper (cited in Martinez⁷) - Portuguese version of the scale job satisfaction, available in Couto⁸.

Third step application of a detection instrument for non - psychotic psychological distress, the "*Self-Report-Questionnaire*" (SRQ-20). This instrument adapted by Borges; Argolo⁹, for use in studies of Psychiatric Morbidity in Primary Health Care Facilities in developing countries, coordinated by the World Health Organization.

The instrument called by SRQ is derived from four instruments existing psychiatric research. The original version consists of 24 items, the first 20 items for "screening" of non - psychotic disorders and the last 4 items for detection of psychotic disorders. As an instrument is intended for the detection of symptoms, it is well suited for the study population. It is a self administered instrument, containing a range of answers YES / NO. The Portuguese version adopted the first 20 items to non - psychotic morbidity, which used in Brazil the SRQ-20 in primary health care services in Porto Alegre.

2.2. Local Study and Number of Sampling

The survey was conducted at the Presidio Women's City of Porto Velho, capital of Rondonia State, which includes on its staff a total of 59 (fifty nine) penitentiary agents, and 34% participated in the study.

2.3. Criteria for Inclusion and Exclusion

Inclusion criteria: the research with the participation of twenty (20) prison officers working in women's prison unit in the city of Porto Velho.

Excluded from the search, prison officers who refused to participate.

2.4. Ethical aspects

The project was submitted and approved by the Ethics Committee of Research Institution of Higher Education - IES meeting the requirements of Resolution

196/96/CNS/MS procedures needed to perform the search. It was guaranteed to the participants the confidentiality of their identity at all stages of this research. All the subjects of the research signed the Term of Free and Informed Consent - TCLE.

2.5. Data analysis

In order to get important data for this study divided the sociodemographic questionnaire in three parts:

Block I - Profile Survey of active agents in prison female prison unit.

Block II - Training or expertise of prison officers.

Block III - Conceptions of prison officers on their work in women's prison unit.

2.6. Satisfaction at Work

The instrumental satisfaction with aspects of the work has 22 variables. Each analysis is categorized into satisfaction with the options: I - a) delighted b) very pleased, II - Intermediate: a) some satisfaction; III - Dissatisfaction: a) huge dissatisfaction and b) a lot of dissatisfaction.

Job satisfaction was assessed by adding the results of the variables presented, the degree of satisfaction or dissatisfaction as measured by the scale being assigned 6 for great satisfaction, 5 for many satisfactions, 4 for some satisfactions, 3 for some discontents, 2 for many dissatisfactions, 1 to massive dissatisfaction.

For the tabulation of the data we used the Microsoft Excel 2007 program, and the same process carried out to associate the design variables of the prison guard about his work in the prison unit with job satisfaction and mental suffering.

2.7. Mental Suffering

The mental distress was assessed using 20 variables, the response scale constituted from *yes* or *no*.

The categorization was made by five factors being addressed in the factor analysis 1 - decreased energy consisting up to six variables: (feels tired all the time, tires easily, finds it difficult to make decisions, is difficult to accomplish with satisfaction activities of daily life, have difficulty to think clearly, have difficulties in -your service work is painful, cause you suffering).

Then, the variables are the factor analysis 2 - somatic symptoms, consisting of four variables as follows: (headache is often have unpleasant sensation in the stomach, have poor digestion, lack of appetite).

As the variables of factor analysis 3 - of depressed mood, appear three variables, as follows: (feels nervous (a), tense (a) or worried (a), has lately felt sad, been crying more than usual).

And in the factor analysis 4 of depressive thoughts - is made up of four variables, as follows: (have lost interest in things, is unable to play a useful role in your life, a useless person feels, worthless, have no idea end life).

Finally the factor 5 organized by other symptoms of the SRQ-20, having three variables: (sleeps badly, startles easily, have hand tremors).

The mental distress was assessed by the sum of the variables presented in the SRQ-20, considering how 7 cutoff or more affirmative answers of 20 questions submitted for classification of the prison officers on suspicion of minor psychic disturbance, hence with possible mental suffering. The officers who responded less than 7 affirmative questions were categorized as not suspected of mental suffering or without mental suffering.

2.8. Work Limitations

This work was carried out only with the female because it is a women's prison and only female officers have direct contact with the women's prisoner. The questionnaire was administered every other day in order to reach the different shifts and always at night so as not to hinder the work of the agents, as the night the women's prisoner are in their cells and during the day they leave to study, go to the doctor, doing laundry, finally, the agents would not have enough time for a satisfactory data collection was made. So, we tried to always schedule an evening appointment with the agents, in which they had availability to answer the questionnaire with ease. Thus, questionnaires were completed in five different shifts, each consisting of five female agents, visits to the women's prison for the collection of data was authorized by the Director of Prisons.

III. RESULTS AND DISCUSSION

3.1. Sociodemographic Profile

Block I - Survey of the profile of penitentiary agents working in the female prison unit. Block I questionnaires show that the predominance of age was higher in the age group of 20 to 29 years, with 55% of respondents; followed by 40% in the range of 30 to 39 years; 5% aged 40 to 49 years. There were no interviewees between the ages of 50 and 59, or over 59 years of age. As for marital status, 45% of penitentiary agents are married or living in marital status, 45% are single, and 10% are separated, divorced or widowed. Regarding the number of sons, 45% of the agents have only one son, 35% have no sons, 15% have 2 sons and 5% have 3 sons. Regarding the length of time in the prison system, 45% work from 1 to 3 years in the system, 30% work from 4 to 6 years, 20% less than 1 year and 5% from 7 to 10 years. As for the educational level, 35% of the agents have complete secondary education; 30% incomplete upper level, 30% have completed upper level, and 5% have specialized courses. Of the agents with higher education 50% did not report the course they completed, 20% graduated in law, 15% graduated in Portuguese; 5% in biomedicine; 5% in accounting sciences and pedagogy. As for the working hours 60% have a workload of 40 hours a week, 35% more than 40 hours and 5% work 20 hours a week. Of the extra activities besides work in the female penitentiary, 75% do not dedicate hours of work to other activities,

15% dedicate from 1 to 5 hours a week; 5% dedicate from 6 to 10 hours and 5% dedicate from 16 to 20 hours.

Block II - Training or expertise of prison officers. Concerning the training or expertise, 55% of agents said they received training to work in the prison unit and 45% say they have not received training. Of the 55% who received training, only 85% had this training in the training course, 5% annually and 10% did not answer. Of agents who have received training 65% do not consider sufficient training to support their practice of service, 25% consider enough time to support their practice of service and 10% did not answer this question.

Block III - Conceptions of prison officers on their work in women's prison unit. The agents who participated in the survey 75% said they do not feel good when working with people who are deprived of their liberty, and 25% said yes. When asked if their work was important for the proper functioning of the prison, the agents were unanimous in answering yes, 100%, demonstrating that know the importance of their work to society. When asked if their work suits your professional expectations, 75% of agents said no and 25% yes. Asked if the prison's direction provided some psychological support for the penitentiary agents, 75% said no, only 25% said yes.

The study showed 55% with a mean age 20-29 years, and 45% of prison officers work less than four years in the profession. This result is due to the fact that it occurred a recent public tender, and all emergency penitentiary agents, who were the majority in the system, have been laid off, many of them were already in the system for over 10 years. So today, the women's prison in Porto Velho has an effective "young" in the prison system, result of the last public tender for state penitentiary agents. To be considered young professional, 35% do not have children, while 45% of agents have only one child.

Of the 20 officers who participated in the study, 30% have a university degree and 5% have graduate - expertise, 45% is acting between 1 to 3 years in prison units, and 60% have a weekly load of 40 hours. Of the individuals surveyed, 45% say they have not received enough training to work in prisons, however 55%, feels prepared to work in the prison system.

Vasconcelos¹⁰, Fernandes *et al*⁴ and Lopes¹¹ are some of the references to studies that address the working conditions of prison staff in Brazil.

To Vasconcelos¹⁰, "the prison institution, immersed in the dilemma between being the same exhaustive disciplinary apparatus and 'transformation tool for individuals, has demonstrated, through the ages, which way tends to choose. The very perpetuation of their character, inherently repressive, dispel any belief in achieving adequate resocializer purposes degraded social environment the prison guards use "institution and the experience" to be able to perform their activities, a situation which ultimately exacerbate the fear and

increase violence "forming a vicious cycle that is installed in a brutal and merciless universe."

Fernandes *et al*⁴, in cross-sectional epidemiological study of working conditions and health of correctional officers, via sample of 311 workers in prisons in the metropolitan area of Salvador - Bahia observed that it was the group with high education, stating that various agents had higher levels. To explain this finding, presented the hypothesis that individuals with higher education have provisionally entered the penitentiary activity, however, the high level of unemployment, would have remained in employment, mainly because of advantages offered by the public sector. The average working time as a prison guard found by the authors was 10.3 years.

Fernandes *et al*⁴ draws attention to the characteristics of prison labor, highlighting the need to deal with individuals who constantly question his authority. This is a situation that requires adequate training, so that agents do not use features such as violence or else give in the face of threats and attempted corruption of detainees.

Foucault¹² in a work entitled watch and punish, shows that prison labor is the most appropriate way for the transformation of the individual, for the time being we are stuck, have an occupation, and in time will lose their violent personality, and becoming a be quieter, more docile.

Paraguassu Chaves¹³ in his research "Work and Occupational Diseases" had already identified the profile of vulnerable groups of workers, susceptible and receptive, in a situation of imminent risk of suffering and illness in Rondônia. In their study traced demographic profile of workers in the public security system, health, education and others. Paraguassu-Chaves¹⁴ with his research entitled "GIS of occupational diseases in Rondônia in the last decade" traces the profile of the service provider framework in the public security system. This author has identified the predominance of the age group 20 to 29 years old, single marital status to a greater extent, with more than 50% with only child. And also states that the need for admission to public service by public tender, the younger population has sought at all costs a job opening on what is possible, including in the services considered highly dangerous and unsanitary.

Of Paraguassu-Chaves agreement¹⁵ on "Social Inclusion in Border Region", the level of education tends to increase over time because of the requirements for holding public office, regardless of higher education. The most diverse backgrounds professionals are seeking employment, not caring if it is within their area of training. Excessive workload has been one of the conditions to occupational stress. Because it is penitentiary agents "female", these in addition to the labor professional practice also perform household chores, overloading them.

To Paraguassu-Chaves¹³ training or expertise is not enough necessary to ensure satisfaction and work efficiency. The training must be systematic and application feasible on a daily of prison officers. The inefficiency of the counseling service directly affects the prison officers. Dealing with persons deprived of their liberty lead to unpleasant feeling. The very lack of a professional projection, a career in the prison system, an expectation of a future, leads to personal and professional frustration. Silva¹⁶ brings the law relating to labor law, as one of the professional development principles.

3.2. Satisfaction at Work

How do you feel about your work? The set of variables according to the satisfaction scale in the work of OSI - Occupational Stress Indicator, is who guides the construction of the level of job satisfaction.

Communication and form of information flow in the company in which you work: of the 20 interviewed prison officials, 40.0% claim to have some dissatisfactions and 35.0% claim to have some satisfactions.

His relationship with others in the company where you work: Many options satisfactions and dissatisfactions Some have the same percentage with 30.0%.

The feeling you have as to how their efforts are evaluated: 45.0% have some dissatisfactions and 30.0% have some satisfactions.

The content of the work it does: 35.0% of prison officers are with some satisfactions and 30.0% with many satisfactions.

The degree to which you feel motivated by their work: 35.0% have some satisfactions and dissatisfactions Some 30.0%. personal opportunities in your current career: 45.0% of agents have some dissatisfactions and 25.0% Some satisfactions.

The level of security in your current job: 40.0% claim to have many grievances and 25.0% have some dissatisfaction.

The extent to which you identify with the external image or performance of your company: 45.0% of respondents answered that they have some grievances and 40.0% having some satisfactions.

The supervisory style that his superiors use: 40.0% of prison officials said they have some satisfactions, 20.0% which has many satisfactions and 20% having some dissatisfaction.

The way in which change and innovation are implemented: 55.0% have some dissatisfaction and 30% have some satisfactions.

The way in which innovations and changes are implemented: 55.0% have some satisfactions and 20% that has some dissatisfaction.

The degree to which you feel you can grow and develop in their work: 60.0% of the interviewed agents have some satisfactions and 15.0% have some dissatisfaction.

The way in which conflicts are resolved: 30.0% of respondents answered that they have some satisfactions and the same percentage some dissatisfactions.

The opportunities that their work offers towards achieving their aspirations and ambitions: 45.0% of workers said they have some satisfactions and 25% having many dissatisfactions.

Their degree of participation in important decisions: 25.0% of the surveyed said they have some satisfactions and dissatisfactions some 25.0%.

The degree to which the organization absorbs the potential you think you have: 35.0% claim to have some satisfactions and dissatisfactions some 30%.

The degree of flexibility and freedom that you have judges in their work: 45.0% said they have some satisfactions and 20% having many satisfactions.

The psychological climate that prevails in the company you work: 45.0% of agents claim to have some dissatisfactions and satisfactions some 20%.

His salary in relation to their experience and the responsibility that has: 30.0% of respondents claim to have many grievances and 30.0% Huge dissatisfaction.

The organizational structure of the company you work: 35.0% of respondents claim to have some dissatisfaction and 30% Many dissatisfactions.

The amount of work you have to solve: 40.0% said they have some satisfactions and 30% Many satisfactions.

The degree to which you judge to be developing their potential in the company where you work: 35.0% claim to have some dissatisfactions and 30.0% with some satisfactions.

Table.1: Satisfaction Scale OSI Labor - Occupational Stress Indicator

HOW DO YOU FEEL ABOUT YOUR WORK?	ES	%	MS	%	SS	%	SD	%	MD	%	HD	%
Communication and form of information flow in the company where you work.	3	15	0	0	7	35	8	40	1	5	1	5
His relationship with others in the company where he works.	3	15	6	30	3	15	6	30	2	10	0	0
The feeling you have as to how their efforts are evaluated.	0	0	3	15	6	30	9	45	1	5	1	5
The content of the work you do.	2	10	6	30	7	35	5	25	0	0	0	0
The degree to which you feel motivated by their work.	1	5	2	10	7	35	6	30	4	20	0	0
personal opportunities in your current career.	1	5	2	10	5	25	9	45	2	10	1	5
The level of security in your current job.	0	0	0	0	0	0	5	25	8	40	7	35
The extent to which you identify with the external image or performance of your company.	1	5	0	0	8	40	9	45	1	5	1	5
The supervisory style that his superiors use.	1	5	4	20	8	40	4	20	2	10	1	5
The way in which change and innovation are implemented.	0	0	0	0	6	30	11	55	3	15	0	0
The type of task and the work in which you are charged.	2	10	2	10	11	55	4	20	1	5	0	0
The degree to which you feel you can grow and develop in their work.	1	5	2	10	12	60	3	15	1	5	1	5
The way in which conflicts are resolved.	2	10	2	10	6	30	6	30	3	15	1	5
The opportunities that their work offers towards achieving their aspirations and ambitions.	1	5	0	0	9	45	2	10	5	25	3	15
Their degree of participation in important decisions.	1	5	2	10	5	25	5	25	4	20	3	15
The degree to which the organization absorbs the potential that you think have.	1	5	3	15	7	35	6	30	2	10	1	5
The degree of flexibility and freedom you think you have in your work.	2	10	4	20	9	45	2	10	3	15	0	0
The psychological climate that prevails in the company you work.	0	0	2	10	4	20	9	45	2	10	3	15
His salary in relation to their experience and the responsibility you have.	0	0	0	0	3	15	5	25	6	30	6	30
The organizational structure of the company you work for.	1	5	1	5	5	25	7	35	6	30	0	0

The amount of work you have to solve.	0	0	6	30	8	40	4	20	1	5	1	5
The degree to which you judge to be developing their potential in the company where he works.	1	5	4	20	6	30	7	35	1	5	1	5

Legend: ES = enormous satisfaction (6 weight); Many satisfactions MS = (weight 5); Some satisfactions SS = (w 4); Some dissatisfaction SD = (w 3); MD = Many dissatisfactions (weight 2); Huge dissatisfaction HD = (w 1)

Martinez⁷ states that the distribution of data in a central value is natural, most employees has intermediate levels of satisfaction, the lowest percentages are distributed in levels of greater satisfaction and less dissatisfaction; this assertion of the author can be supported in this work.

Studies Arvey *et. al*¹⁷ about the job satisfaction determinants have analyzed variables related to organizational culture as generic factors.

Job satisfaction, facing the raised discussions, can be characterized as a multifactorial variable. And the most studied according to surveys, are the nature of work, working conditions, and the climate in which it is performed. According to statistics from Social Security mental disorders occupy the third position among the causes for granting social security benefits. The survey data points to the lines of business that have more cases of expulsion for mental disorders: oil extraction, real estate, air transport, collection, treatment and distribution of water and manufacture of textile products, leading to the conclusion that, depending on the occupation, the risks increase. Weds still frequent victims of assaults in the workplace;

Herzberg¹⁸ and Locke¹⁹ claim that the individual must meet needs or answer values to feel satisfied at work.

On the discussions presented, it can be said that even after decades of research, there is no consensus in the literature about the job satisfaction components.

Much has been said about health and job satisfaction, but satisfaction at work cannot be isolated from the life of the individual as a whole. According to Rodrigues²⁰ "Employees who have an unsatisfactory family life have work as the sole or greatest means for the satisfaction of many of their needs, especially social." Thus, the work assumes enormous dimensions in man's life.

Martinez⁷ describes that job satisfaction has been placed by theorists such as influencing process in occupational health, highlighting how researchers Henne; Locke²¹, which identify dissatisfaction at work as an unpleasant psychological state, triggering of significant conflicts for the individual to exercise a job that would prefer to avoid, can this emotional state cause him to have health problems.

In a study presented by Rock²² with system analysts in São Paulo, on the relationship between health and work, it was found that job satisfaction appeared also negatively associated with medical consultation demand and as the

negative interference reduction factor work in family and personal life.

A survey by Martinez⁷ on the relationship between job satisfaction and health of workers, held with 224 administrative employees of a managed care company in health and pension plans in São Paulo, found that job satisfaction is related to each aspects of the mental health of the study, and this is independent of socio-demographic variable.

Rebougas, *et. al*²³, in a study on satisfaction and the impact of work on 133 professionals from four mental health services in Rio de Janeiro, concluded that 62.4% of study subjects reported moderate levels of satisfaction, whereas, moreover, the greater the education of the respondents, the lower the satisfaction. Research Almeida Filho & Rouquayrol²⁴ they point out that the cross-sectional studies have certain limitation by the inability to established causal relationship between job satisfaction and mental health, because this exhibition and event are analyzed at the same time cut. However, this type of study provides an assessment of relations through measures of association, whose objective is to evaluate the coincidence of a given disease or health-related event in the presence of a condition attributed hypothetically as a risk factor.

Epidemiological studies, despite its advantages, also have some disadvantages, both transverse and longitudinal, because it does not explain the dynamics of the identified correlations. A quantitative research provides qualitative data describing characteristics of a population or sample, and also establishes associations, risks and probabilities between variables. However, depending on their reductive character, just not including the investigation of the processes and dynamics of the observed relationships, which restricts the analysis of social and / or subjective aspects. Thus, epidemiological research in addition to using epidemiological techniques need to be used for theoretical support of other sciences such as anthropology, sociology, psychology, immunology, biostatistics, clinical and other^{24, 19}.

Establish the relationship between health and job satisfaction is no easy task, because not always can prove to the satisfaction produces health, and health produces satisfaction or if both are the result of some other factor, and thus, a relationship not yet been set the epidemiological point of view²¹.

The well - being, in terms of psychological burden, comes not only the absence of its operation, but rather, a free running, dialectically articulated with the job content, expressed, in turn, the job itself²⁵.

Paraguassu-Chaves¹³ to report their findings analyzes on certain paradoxes between the variables made in the scale of job satisfaction of the OSI - Occupational Stress Indicator. In his study the author presents a new proposal using factor analysis beyond the OSI scale. The salary aspect regarding your experience and the responsibility that has been the variable "A lot of dissatisfaction" with 85%; The amount of work you have to solve; The level of security in your current job; The way in which conflicts are resolved; Their degree of participation in important decisions were the most important variables in "Some dissatisfaction" with 40%.

It is important in this dynamic analyze what are the possible destinations for the suffering, which can be transformed into pleasure and creativity or result in frustration and illness²⁶. Work can be a source of pleasure, to allow the application of intelligence and also when it recognizes the importance of this for the labor organization. The work is thus perceived as health, because the relationship of that become mediators of the subject and the construction of their identity achievements²⁷. When the worker's activity is recognized and valued by the organization, the work becomes structuring the identity of the individual. But when this same activity is not significant for the subject, to the organization or to society, it can be a source of suffering²⁸.

3.3. Mental Suffering

Data on mental suffering will be presented according to the classification of Iacoponi & Mari²⁹, a sequential manner, Factor 1, power reduction; Factor 2, somatic symptoms; Factor 3, depressed mood; Factor 4, depressive thoughts and Factor 5, other symptoms of the SRQ-20.

Table 2 made by the factor 1 - Power reduction, has a higher frequency in the variable "are difficulties in carrying out their daily activities with satisfaction" with 30%; then 25% of the variables "Do you feel tired (a) all the time", "If tired easily" and "find it difficult to make decisions." The variables "has difficulties in service (your job is painful, cause you distress) with 15% and" It's difficult to think clearly with 5% were the lowest frequencies. Mean Decrease Power Factor was 23:33%.

Table.2: Frequency on the Factor 1 - Energy Reduction.

QUESTIONS	(YES)	%	(NO)	%
Do you feel tired (a) all the time?	5	25	15	75
Do you get tired easily?	5	25	15	75

Finds it difficult to make decisions?	5	25	15	75
Finds it difficult to perform with satisfaction your daily activities?	6	30	14	70
Has trouble thinking clearly?	3	15	17	85
It has difficulties in service (your job is painful, cause you suffering?)	4	20	16	80

In factor 2 (Table 3) the frequency of somatic symptoms, had its highest rate variable "has headaches often" 25%; Then the variable "has unpleasant sensations in the stomach" and "have poor digestion" of 20%; there was no manifestation regarding the variable "has no appetite." The average factor was Somatic Symptom 21.25%.

Table.3: Frequency on the Factor 2 - Somatic Symptom

QUESTIONS	(YES)	%	(NO)	%
Do you have headaches often?	5	25	15	75
It has unpleasant sensations in the stomach?	6	30	14	70
You have indigestion?	4	20	16	80
Lack of appetite?	2	10	18	90

The factor 3 (table 4), the frequency of depressed mood, as often was the variable "Do you feel nervous tension or upset" at 40%, followed by the variable "It has recently felt sad" with 20% and less frequently with the variable "has been crying more usual, with 10%. The average factor Depressed Mood was 23:33%.

Table.4: Frequency on the Factor 3 - Depressed Mood

QUESTIONS	(YES)	%	(NO)	%
Do you feel nervous (a) tense (a) or worried (a)?	8	40	12	60
You have felt sad lately?	4	20	16	80
She has been crying more than usual?	2	10	18	90

In factor 4 (Table 5), with respect to the depressing thought, the variables "has lost interest in things", "he is unable to play a useful role in your life" and "You feel a useless person, useless "and" Any idea to end the life "predominate with 10%. The average factor depressing thoughts was 10%.

Table.5: Frequency on the Factor 4 - Depressive Thoughts

QUESTIONS	(YES)	%	(NO)	%
He has lost interest in things?	2	10	18	90
It is unable to play a useful role	2	10	18	90

in your life?				
You feel a useless person, useless?	2	10	18	90
Any idea of ending life?	2	10	18	90

In other symptoms of SQR-20 had more often the variables, "scares up easily" 20% "Sleep evil" with 15%, followed by the variable "has hand tremors" with 5%. The average factor Other Symptoms of SRQ-20 was 20%.

Table.6: Frequency relative to Factor 5 - Other Symptoms of SRQ-20.

QUESTIONS	(YES)	%	(NO)	%
Sleep badly?	5	25	16	80
Startles easily?	5	25	15	75
You have hand tremors?	2	10	18	90

The female prison system inmates agents of Porto Velho, Rondonia are presented 19:59% with minor mental disorders, in the following order of determination: power decrease (23:33), depressed mood (23:33%), somatic symptom (21:25%), other symptoms of SRQ-20 (20%) and depressive thoughts (10%).

The results of the studies Fernandes *et al*⁴ showed that 30.7% of prison guards had minor psychological disorders (now called mental disorders), reviews the application of self-reporting-Questionnaire, SRQ-20 percent considered high compared with those obtained studies in other professional categories. Studies by Fernandes *et al*⁴ was developed with correctional officers (male), unlike research in the female prison in Porto Velho.

The authors found a positive association between psychological distress (common mental disorders) and various working conditions, among which, working for more than nine years in the prison system, excessive working hours, inadequate environment from the psychological point of view, insufficient infrastructure, lack of time for leisure and not sports.

According to Dejours²⁸ contrary to what one imagines, the exploitation of suffering the organization of work does not create specific mental illness, so there is work psychoses. The biggest critics of psychiatric nosology to date, failed to demonstrate the existence of a mental illness arising from work.

The Gomes study³⁰ found that most identified health problems were ill feeling intense be generalized; anxiety, tension, nervousness, irritability, depression, anxiety and exhaustion; sleep disorders; digestive problems; breathing and voice problems. Cunha in a study³¹ found that the most frequent health problems are the uncomfortable feeling in the stomach, indigestion, gastritis (30.0%) and headache (17.4%).

Tartaglini & Safran³², show that police officers and inmates as submitted professionals to a high risk for the disease reported as debilitating stress. These authors found prevalence of anxiety, behavioral disorders and higher alcohol abuse among inmates agents than the general population. Reported among these workers, a prevalence of emotional disorders of 18.6%, alcohol abuse, 4.5% and 7.9% anxiety disorders.

Goldberg *et al*³³ in a study conducted in France, with all categories of prison workers, observed prevalence of 24% of depressive symptoms, 24.6% of anxiety disorders and 41.8% of sleep disorders. In Fernandes study *et al*⁴ The prevalence of minor psychological disorder found (30.7%) was higher than those found by Araujo *et al*³⁴ 20.1% Borges³⁵ 19.0% Fernandes³⁶ 19 to 24%, Pitta³⁷ 20.8%, in particular school teachers samples of Salvador teaching, metallurgical, processing of data workers and hospitals, respectively.

In the research of Santana; Cruz³⁸, the most prominent symptom was Depressive-Anxious Humor, since the most pointed question was "he is nervous all the time and worried about the masculine gender (n = 120) (88.2%) and the feminine gender (n = 80) (100%). It is a psycho-emotional symptom whose characteristic is supposed to be intrinsic to work, because the work routine of prison staff needs constant attention and vigilance, generating tension and worry.

This assumption is consistent with the concept of anxiety defined by Castillo *et al*³⁹ "Anxiety is a vague, unpleasant feeling of fear, apprehension, characterized by tension or discomfort or derived from danger anticipation of something unknown or strange.

The ansiogenia is also noted in the work Dos Santos *et al*⁴⁰, to get results, as the exposure of Prison Guards to situations that cause high anxiety.

Studies conducted in Spain with correctional officers by Ghaddar *et al*⁴¹ and France with prison workers by Goldberg *et al*³³ also observed the existence of anxiety symptoms.

The research Tartaglini and Safran³² regarding mood, reported a prevalence of disorder in 18.6% of the Prison Guards, inferring that this incidence is higher than in the general population. For the term psychopathology *Depression* is a generic form which means pathological sadness designating the change of mood in both its inhibition and in his exaltation. The Humor is part of affectivity and the change can become a pathological state. It is taken as the person's mood and defined as "affective tone of the subject"⁴².

For Santana; Cruz³⁸'s Symptoms Depressive Mood, Somatic Symptoms and Decrease in Vital Energy in the issue of "feeling tired all the time" women had higher incidence rates than men accounting for the greater part.

What is the reason? We dare suppose to be a question of attribution to the dynamics of power that can represent oppression of the feminine gender in a Penitentiary Institution, constituting a possible remnant of masculinism. Or the possibility of women being more sensitive to issues related to affectivity. Which would give us a better direction where we begin the movement of change: paying attention to what sensitivity can teach us.

There was representation in high SRQ-20 in relation to the short time profession. This similarity is characterized by those with less than three years of work, given that in their daily practice still have close relationship with the inmates. Already with long, they are usually in other positions, in administrative or higher positions, moving away from functional practices and exposure to situations of great psychological demands to which professionals with little time are subject³⁸. This demand suggests a *burnout* as described by Pereira⁴³ "a typical suffering of occupations where relational and affective aspects of the subject are required at work."

Paraguassu Chaves¹³ used the same instrument "Self-Reporting Questionnaire-, SRQ-20", and found similar indicators and contradictory to that found in this study. The study was conducted on a group of women who work as prison officers in Porto Velho. About 50% of respondents in Paraguassu-Chaves¹³ search are the same prisoners agents who participated in this research. On energy reduction in load (factor 1) found the highest prevalence in the variable "find it difficult to make decisions," with 45% and "find it difficult to perform with satisfaction their daily activities" with 30%, similar to the survey of the prison officers the women's prison in Porto Velho. In factor 2 the frequency of somatic symptoms, had its highest rate variable "has headaches often" with 45%; "It unpleasant sensations in the stomach" is 30% higher than the present study. In factor 3 of depressed mood, most often it got the "Do you feel nervous or tense worried" variable with 40%. In the fourth factor that refers to the depressing thought, the variables "has lost interest in things," he was predominant with 25% followed by "Any idea end life" of 20%. In other symptoms of the SRQ-20 had more often the variables, "Sleep evil" with 25%.

IV. CONCLUSIONS

The study showed a mean age category 20-29 years, and 45% is less than four years in the profession. This result is due to the fact that it occurred a recent public tender, and all emergency penitentiary agents, who were the majority in the system, have been laid off, many of them were already in the system for over 10 years. So today, the women's prison in Porto Velho has an effective "young"

in the prison system, result of the last tender for Agents State Penitentiary.

Of the 20 officers who participated in the study, 30% have a university degree and 5% have graduate - expertise, 45% is acting between 1 to 3 years in prison units, and 60% have a weekly load of 40 hours. Of the individuals surveyed, 45% say they have not received enough training to work in prisons, however 55%, feels prepared to work in the prison system.

The data presented show that 40% of the women have some dissatisfaction, followed by some 35% fulfilled. They are delighted 15% of respondents; 5% with many dissatisfactions, and 5% with huge dissatisfaction. The aspect in which the agents show more satisfaction refers to the extent to which they feel they can grow and develop in their work with 60%, and most dissatisfaction index refers to the way in which changes and innovations are implemented with 55%.

The female prison system inmates agents of Porto Velho, Rondonia are presented 19:59% with minor mental disorders, in the following order of determination: power decrease (23:33), depressed mood (23:33%), somatic symptom (21:25%), other symptoms of the SRQ-20 (20%) and depressive thoughts (10%), considered as evidence of mental distress indicators. And if added together, the total number of agents that are with huge dissatisfaction with the ones with a lot of dissatisfaction, we arrive at a worrying picture. This suggests a possible association between job dissatisfaction and mental suffering.

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