

AND THIS IS WHAT I STUDIED FOR?: SUBJECTIVE DISCOMFORT IN NURSING STUDENTS WHO ARE UNDER A LEARNING CONTRACT MODALITY

E FOI PARA ISSO QUE ESTUDEI?: MAL-ESTAR SUBJETIVO EM ESTUDANTES DE ENFERMAGEM QUE ESTÃO NA MODALIDADE CONTRATO DE APRENDIZAGEM

¿Y PARA ESTO ESTUDIÉ?: MALESTAR SUBJETIVO EN ESTUDIANTES DE ENFERMERÍA QUE SE ENCUENTRAN BAJO MODALIDAD DE CONTRATO DE APRENDIZAJE



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ABSTRACT: The article aims to characterize experiences of subjective discomfort in 10 students of the technical nursing course at a technical institute in the city of Cali, Colombia, during the period of professional practice. It is a qualitative, descriptive, and cross-sectional case study using the categorical content analysis technique. Subjective discomfort was identified as a result of internal and external factors. Psychological, physical, and relational symptoms are triggered. Faced with this discomfort, there are defenses, mainly with collective dialogue between apprentices and other employees, an escape and/or avoidance mechanism in moments of high levels of adversity, indicating few defense strategies. Experiences of subjective discomfort are mainly linked to the impossibility of putting into practice what they learned during the academic training process, converting the contractual condition into a cloudy position at an organizational level, with psychological, physical, and relational repercussions, and mainly, on educational and professional projections. The above has several consequences, such as significant changes in academic and professional life projects.

KEYWORDS: Subjective discomfort. Production phase. Learning contract. Technical education. Professional practice.

RESUMO: O artigo objetiva caracterizar experiências de mal-estar subjetivo em 10 alunos do curso técnico de enfermagem de um instituto técnico da cidade de Cali, Colômbia, no período de prática profissional. É um estudo qualitativo, descritivo e transversal; estudo de caso, que utilizo a técnica de análises categorial de conteúdo. Foi identificado mal-estar subjetivo em decorrência de fatores internos e externos. São desencadeados sintomas psicológicos, físicos e relacionais. Diante desse mal-estar há defesas, principalmente com o diálogo coletivo entre aprendizes e demais colaboradores, mecanismo de fuga e/ou evitação em momentos de alto nível de adversidade, indicando poucas estratégias de defesa. As experiências de mal-estar subjetivo estão principalmente ligadas à impossibilidade de colocar em prática o que aprenderam durante o processo de formação acadêmica, convertendo a condição contratual numa posição turva em nível organizacional, com repercussões psicológicas, físicas, relacionais e principalmente, nas projeções acadêmicas e profissionais. O exposto tem diversas consequências, como modificações significativas nos projetos de vida acadêmica e profissional.

PALAVRAS-CHAVE: Mal-estar subjetivo. Fase produtiva. Contrato de aprendizagem. Ensino técnico. Prática profissional.

RESUMEN: *El artículo tiene como objetivo caracterizar experiencias de malestar subjetivo en 10 estudiantes del curso técnico de enfermería de un instituto técnico de la ciudad de Cali, Colombia, durante el período de práctica profesional. Es un estudio cualitativo, descriptivo y transversal; estudio de caso, que utilizo la técnica de análisis categorial de contenido. Se identificó malestar subjetivo como resultado de factores internos y externos. Se desencadenan síntomas psicológicos, físicos y relacionales. Frente a este malestar existen defensas, principalmente con el diálogo colectivo entre aprendices y otros empleados, un mecanismo de escape y/o evitación en momentos de altos niveles de adversidad, indicando pocas estrategias de defensa. Las experiencias de malestar subjetivo están vinculadas principalmente a la imposibilidad de poner en práctica lo aprendido durante el proceso de formación académica, convirtiendo la condición contractual en una posición ambigua a nivel organizacional, con repercusiones psicológicas, físicas, relacionales y, principalmente, en las proyecciones académicas y profesionales. Lo anterior tiene varias consecuencias, como cambios significativos en los proyectos de vida académicos y profesionales.*

PALABRAS CLAVE: *Malestar subjetivo. Fase productiva. Contrato de aprendizaje. Formación técnica. Práctica profesional.*

Introduction

Asking about the subjective distress caused by work is pertinent given the evident need to understand that we are facing a scenario of frequent changes, and it is appropriate to anticipate many others that may come abruptly. Regarding the present study, it is necessary to inquire about the experiences of distress revolving around the development of the productive stage of a group of students in the auxiliary nursing technician course at a specific Vocational Training Institute. This first encounter with the work context may entail a series of implications in terms of psychological adjustment, involving symptoms, consequences, and defenses, where desires, fears, needs, and a myriad of other subjective and psychodynamic demands come into play (Orejuela, 2020; Dejours, 2012). It is worth noting, and understanding, that the reality of the work setting can lead to a rupture with the aspirations of those who invest in such action, a possibility of identity (Dejours, 2005), especially in defining their professional position in the short and medium term, which broadens the research panorama in terms of a clinical perspective of work that includes those contractual processes that have been overlooked, subsequently establishing work dynamics that enable students in the productive phase (apprenticeship contract modality) to better adapt to the demands of an environment that, as mentioned, is highly unpredictable (Celedonio, 2009; Gómez; Peñaranda, 2020; Andreozzi, 2011).

It is evident that there are still few studies related to the process of professional practice and labor insertion, including nursing assistants, in the municipality of Cali (Rengifo, 2020); Therefore, it is timely to develop studies that better represent us in order to intervene effectively, to understand the objective and subjective reality of the professional practice experience and labor insertion of young graduates from technical and higher education institutions, and thus generate new knowledge in this regard. The few studies on the insertion of young people in the city of Cali, like most of Latin America, still focus on hard variables such as contract type, salaries, and insertion times, but there is a notable absence of studies focusing on subjective distress and the effects on mental health derived from the internship and labor insertion process. Indeed, the practice process as part of the formative stage is still under-studied, and those that address mental health variables in the practice process are even scarcer, if not nonexistent.

The issue of mental health among students in the health field (doctors, nurses, dentists, physiotherapists, etc.) is increasingly relevant and concerning, as these students show increasing symptoms of mental health impairment, as well as an increase in suicide attempts or effective suicide (Franceschi; Souto, 2017; Palácios, 2023; Pérez, S., 2022; Payá; Bracamonte, 2019). Hence, it is important to reflect on this distress, the affective aspect, and the correlative

effects on mental health that may be experienced in that initial encounter with the work context as part of their academic formation process, where the technical training student, which by its nature implies a very rapid passage through academia, even linked to a learning dynamic, must be inserted into an organization under a precarious contract such as the apprenticeship contract.

According to the aforementioned, the objective that guided this research was to characterize the experiences of subjective discomfort experienced during the productive phase in a group of nursing technical course students at an educational institution in the city of Cali, Colombia, who are enrolled in an apprenticeship contract modality. To effectively achieve this general objective, the following specific objectives were proposed: 1. Identify the causes of discomfort experienced during the productive phase in a group of nursing technical course students at a technical educational institution in the city of Cali under an apprenticeship contract. 2. Describe the symptoms of discomfort experienced during the productive phase in a group of nursing technical course students at a technical educational institution in the city of Cali under an apprenticeship contract. 3. Identify the coping strategies used to reduce discomfort during the productive phase in a group of nursing technical course students at a technical educational institution in the city of Cali under an apprenticeship contract. 4. Identify the consequences of discomfort experienced during the productive phase in a group of nursing technical course students at a technical educational institution in the city of Cali under an apprenticeship contract.

Subjective discomfort at work: Causes, symptoms, and consequences

The concept of discomfort has been present in the literature across a considerable number of studies for some time, implying a constant reflection on its usage in terms of the social, cultural, historical, and even political context in which humans develop. It carries a connotation that allows for the consideration of the individual as an agent capable of experiencing and simultaneously manifesting that generalized yet diffuse feeling, about which one can speak, but which clearly must find a way to be channeled to promote adjustment to external demands and good mental health (Dejours, 2012; 2005; Orejuela 2018: 2020).

Regarding this research, it was opportune to work with the concept of discomfort from the perspective of work psychodynamics, moving away from a medical definition that implies exclusivity in terms of purely physical discomfort, permeated by a pathological connotation, but rather as "a state of diffuse, psychic tension, indeterminate yet tolerable, related to work

(task) and its associated factors (organization, conditions, and relationships, etc.)" (Orejuela *et al.*, 2020, p. 8, our translation). With this clarity in mind, discomfort should be understood from its subjectivity, interpreted through each individual's relationship with their experience, avoiding a tendency towards generalization, and considering its particularities, along with analyzing the historical, social, political, and economic context. Otherwise, one might fall into a standardized discourse that seeks to reduce all actions to an analysis of variables applicable to large groups of individuals. To clarify, when referring to the psychodynamic function of work, we are addressing the centrality of work as a psychic organizer (Orejuela *et al.*, 2020).

Etymologically, it can be understood that discomfort tends to be diffuse but more assimilable than suffering in symbolic terms; in the words of Orejuela (2018), "the boundaries between one experience and another lie in the fact that discomfort is a diffuse and tolerable experience, capable of being symbolized and of low intensity, which is found in the pre-conscious or unconscious register (one may or may not be aware)" (p. 107, our translation). Hence, it is essential to understand subjective discomfort as an experience that, although it may be of low intensity in terms of its tolerance level, implies a latent need to be symbolized, and its causes can reside in internal agents inherent to the organization as well as in the dynamics established there, in addition to the subjective construction performed by each individual present, as well as in those external events that, in one way or another, are interrelated and cause this feeling. Discomfort is thus considered subjective, but it is clear that a situation involving collective action can imply disturbance, alteration of the capacity for adaptation and, therefore, coping with a situation involving distress, annoyance and disagreement.

Adjusting what was mentioned above about discomfort at work and the psychodynamics of work, it is essential to mention Dejours (2009), who states that "the feeling of uselessness, another no less present experience than indignity, refers first to the absence of a name and destiny for work" (p. 55, our translation). Understanding, in this way, that the lack of coherence between what is expected based on the execution of assigned functions and what is effectively performed can lead to a feeling of uselessness that is related to the desire for dignity through previously acquired knowledge, in addition to the value that is socially attributed to the achieved goal.

The above opens the need to mention the concepts of prescribed work, honest work, and real work (Orejuela, 2018), which are simultaneously linked to the real, symbolic, and imaginary, since on one hand, there is what the organization expects (work context) to be executed, achieved, and therefore accomplished, and similarly, the subject executing a certain

function establishes an imaginary of what will be achieved, where ambivalences between what was initially expected to achieve and what is actually realized in the process as such can manifest.

Along the same lines, other sources of discomfort are recognized, where lack of autonomy (Dejours, 1999) implies absolute control, which in turn can generate limitations in terms of the free development of one's desire for a sense of usefulness, the desire for recognition, and the desire to demonstrate knowledge, simultaneously causing inadequacy in accomplishing a given task. On the other hand, work intensification leads to frequent exposure to the need to respond to numerous demands, whereas individualization implies a lack of collective resources that would enable coping with diminishing subjective resources to meet the demands of a changing and poorly structured environment. Ultimately, it is the need for recognition and hence its absence that can reinforce this sense of uselessness, causing discomfort at work; as Orejuela (2018) mentions, "the symptoms are the discursive articulation of discomfort that aspires to recognition" (p. 113, our translation), understanding the symptom as a possible unconscious strategy used to gain admiration for work that points towards a position in society through work level; In short, all suffering generally points towards recognition.

To complement the above, it is worth highlighting the fear of incompetence, a term developed by Dejours (2005), which implies thinking about a gap between the prescribed organization of work and the actual organization of work, where the development of activities in the dynamics of the current context promotes the need to perform independently of the conditions of a largely precarious scenario, where respect for prescriptions is often nullified, which can cause discomfort. Linked to this is ethical suffering, where the individual must work against their values and thus fulfill assigned functions, seeking to remain in work, and it is the strong fear of incompetence that limits the possibility of verifying skills in the face of the assigned task. The latter can cause difficulty in establishing self-esteem as a minimal sign of narcissism, self-respect, and self-care (Dejours, 2005).

Regarding symptoms of discomfort, focusing more concretely on what has been previously discussed, it can be understood that these symptomatic manifestations are often subdivided into three forms of expression (Orejuela, 2018): physical, psychological, and relational, where the former can be evidenced first around changes at the organic level, physiological disturbances. Regarding psychological symptoms, Orejuela (2018) mentions:

There are experiences of emotional exhaustion, such as depression, self-doubt, feelings of emptiness or lack of meaning, a sense of uncertainty and unbearable risk, experience of negative emotions (fear, irritability, helplessness, and resentment), and in general, what has been called pathologies of loneliness, among the most dramatic is work-related suicide (p. 116, our translation).

Lastly, relational symptoms can be permeated by a rupture of previously established bonds and/or by the weakening of social ties (Orejuela, 2018). Recognition of skills among coworkers and solidarity can be disrupted, possibly due to increased individualization marked by a frequent sense of competition, aiming for greater and better positioning in work in terms of meeting increasingly high social demands that do not correspond to the same work reality.

However, all of this undoubtedly generates consequences for the working individual, understanding that "the organization of work exerts a specific action on man, whose point of impact is the psychic apparatus" (Dejours, 1980, p. 133, our translation). Thus, it can impact the psychological dynamics of individuals, which in turn involves relational changes and conflicts in establishing goals and/or projections linked to motivations and/or desires regarding professional life.

It is important, then, to question the cost of discomfort at work and its implications, where there is a constant struggle due to dissatisfaction, marked by a quest for usefulness, dignity, recognition, and satisfaction, thus, "the frustrations arising from significant content inadequate to the potentialities and needs of the personality can generate considerable adaptation efforts" (Dejours, 2009, p. 59, our translation). This, in turn, is linked to psychological, relational, and work-based consequences.

Defense Strategies Against Workplace Discomfort

As a means to deal with situations causing discomfort, individuals seek various ways to reduce the negative impact on the subjective environment of a given situation and avoid everything that is not closely related to pleasurable experiences. Therefore, it is important to understand how certain work experiences, under certain contractual conditions, These different mechanisms, strategies, and/or resources, both internal (intrapsychic, subjective) and external (contextual: conditions, organization, work relationships, etc.), are mobilized or deployed with practical intelligence to confront any sensation implying discomfort and the risk of mental health loss. Ways to alleviate discomfort can vary, where, in the words of Lhuillier (2006), "the body bears the traces of imposed cadence, but also what remains unprocessed, what is not

verbalized, and a self-acceleration in service of thought anesthesia" (p. 93, our translation). This makes it clear that understanding how people defend themselves against discomfort involves an analysis not only of words but also of manifestations and/or changes in the body, thought, and relationships.

These strategies can then be individual and/or collective, aiming to reduce dissatisfaction conditions (drive) that compromise the subject's psychic life and provoke a constant struggle to generate an adaptive process under inadequate working conditions, based on the worker's subjective analysis (Orejuela, 2018). Therefore, defensive strategies become mechanisms of protection around mental health, promoting tolerance to discomfort arising from various factors in the workplace setting. Thus, an individual and collective struggle is generated to maintain psychic balance amidst the chaos that may arise in terms of work demands. In the tradition of work psychodynamics developed through C. Dejour's research (2005), some of these better-recognized defense strategies include: self-acceleration, virile defense, listening and deliberation groups, circles of words, actions for work reorganization and flexibility, voluntary servitude, among many others (Dutra de Moraes, 2013; Dejours, 2005).

It is in this relationship with oneself and others, within a scenario permeated by demands, especially concerning the immediate adjustment of one's own needs, that imaginaries, fears, desires, pleasure, symptoms, malaise, among others, are elaborated. According to Dejours, cited by Orejuela (2018), "Work malaise is determined by the impossibility of working autonomously, in cooperation and without recognition, or being forced to work against one's moral principles" (p. 278, our translation). This is the key to understanding the malaise derived from work dynamics.

Apprenticeship Contract: Professional Internship Phase

Among the various types of contracts in Colombia, the one relevant to this research is known as the apprenticeship contract, which, according to the Ministry of Education:

It is one by which an employee is obligated to render services to an employer, in exchange for the latter providing the means to acquire a methodical and comprehensive professional training in the art or craft for which they were hired, for a specified time, and paying them the agreed-upon salary (Lei 188 de 1959, Article 1) (Colombia, 1959, our translation).

As evidenced, this contractual period not only includes a salary benefit for the employee but also provides a space for continuous training related to what the individual is studying or

has completed in terms of their knowledge acquisition process. It is understood, therefore, that the apprenticeship contract promotes a potential benefit for the learner, enabling access to support and, at the same time, providing a work environment that allows ongoing education in terms of knowledge, thereby promoting labor insertion. Despite this, it is pertinent to consider the reasons why a particular entity should undertake the hiring of apprentices, when:

Regulated companies with more than 15 employees must hire 1 apprentice for every 20 workers, and an additional apprentice for every fraction between 10 and 20. An obligated company that decides not to sign one or more contracts from its quota may opt to pay monthly monetization, notifying SENA of this decision. As a general rule, the amount paid to SENA for monetization is equivalent to 1 monthly minimum wage for each contract not executed (Unit for Comprehensive Entrepreneurship Support - UAIE, n.d., our translation).

Reflecting on the above, clarity regarding a potential sense of obligation on the part of companies in the apprenticeship hiring process may lead to the treatment they receive, fostering possibilities for developing a sense of belonging, work identity, task assignment, and motivation toward achieving goals.

In everyday discussions, the apprenticeship contract is seen as providing many young people with rapid access to the job market in Colombia and also offers support to complete their studies or provide assistance for their livelihood. However, it is pertinent to conduct research that addresses the potential discomfort this contractual condition may bring, understanding that company policies and/or their view of trainees may not always align with expectations.

Now, analyzing what has been mentioned regarding the work context and its implications on individuals' psyche, it is worth considering that "today, in the organizational world more than ever, there is a discourse of social responsibility in which their own employees seem not to be included, as they have no scruples in marginalizing and prejudicing them" (Orejuela, 2018, p. 183, our translation), where students under the apprenticeship contract modality can be analyzed in terms of their potential precariousness.

Method

Study Type

This study is descriptive, aiming to identify characteristics within the research universe, examining the association between variables (Méndez, 2007). Therefore, it generates a description of these variables without seeking causality. It is characterized using qualitative methods, as it produces descriptive data from people's own spoken and/or written words. In

terms of time, it is a cross-sectional study, as a single sample of data will be taken at one point in time.

The research design will be characterized as a case study, aiming to conduct an intensive analysis with a group of technical training students in the production phase, collecting as much information as possible to identify and describe the various factors influencing the studied phenomenon (Martínez, 2006): experiences of discomfort encountered during the production phase among a group of nursing students at a technical education institute in the city of Cali who are under the apprenticeship contract modality.

Participants

The participants in this research were 10 students from the nursing assistant program at a Technical Education Institute in the city of Cali, Colombia, who are under apprenticeship contracts and are, therefore, in their final training period, required to complete their production phase equivalent to professional practice in various companies in the city. The sample was intentionally selected without regard to gender or age (See Table 2).

Instruments

Information was collected through semi-structured interviews, considering the following tracking categories for subsequent analysis: *Causes of workplace discomfort during the production phase, symptoms of workplace discomfort during the production phase, defensive strategies against workplace discomfort during the production phase, and consequences of workplace discomfort during the production phase* (see Table 1 below).

Table 1 – Relationship between specific objectives and tracking information categories

Specific objectives	Data Tracking/Analysis Categories
Identify the causes of discomfort experienced during the productive phase in a group of students under a learning contract	Causes of malaise at work during the productive phase malaise
Describe the symptoms of malaise felt during the productive phase in a group of students under a learning contract	Symptoms of malaise at work during the productive phase
Identify the defense strategies used to reduce discomfort during the productive phase in a group of students in the learning contract modality	Defense strategies used to reduce discomfort during the production phase
Identify the consequences of discomfort experienced during the productive phase in a group of students in the learning contract modality	Consequences of discomfort experienced during the production phase

Source: Author's elaboration.

Procedure

The research was conducted in three phases. The first phase involved theoretical contextualization, which allowed for establishing the state of the art concerning organizational change, capturing research developments through a matrix, and subsequently constructing the theoretical framework. The second phase consisted of fieldwork, during which the data collection instrument was developed and applied to the participant subjects. The third phase focused on organizing, presenting, and analyzing the data, employing categorical content and meaning analysis based on a set of structured analysis matrices closely related to the specific objectives and conceptual framework. This systematic content analysis will begin with transcribing interviews, followed by content discrimination, to locate and group them according to pre-established categories. Finally, data will be analyzed categorically, with significant discourse fragments taken as empirical evidence for each category to structure the narrative of the results. The study will conclude with a discussion of the findings and study conclusions.

Regarding ethical considerations, it is important to clarify that this research falls under the category of low or no harm studies. Participation in the study was entirely voluntary and anonymous, ensuring strict confidentiality of identity. Participants voluntarily completed and signed an informed consent form. Participant data have been anonymized and are securely held by one of the study authors. This research underwent ethical review by the Master's Committee in Work and Organizational Psychology at Universidad EAFIT, Medellín, Colombia.

Results

The fieldwork conducted in this research adheres to the data and procedures outlined in the interview protocol. The sociodemographic data of the participant subjects and the analysis of the collected data are detailed below:

Table 2 – Sociodemographic Data

#	Age	Gender	Marital status	Academic level	Area assigned in the company	Functions assigned in professional practice	Time elapsed since signing the learning contract
1	25	M	Bachelor	Bachelor	Emergency	Explanation of rights and duties towards the patient Patient guidance Supply of medicines	4 months

						Patient education	
2	28	F	Single	Technician	Emergency	General health processes	2 months
3	20	F	Single	Bachelor	Hospitalization	Vital signs measurement	3 months
						Plumbing	
						Electrocardiograms	
						Supply of medicines	
4	19	M	Bachelor	Bachelor	ICU	Administrative procedures	2 months
						Get rid of medicines	
						Health processes	
5	23	F	Single	Bachelor	Hospitalization	General health processes	3 months
6	20	F	Bachelor	Bachelor	Orthopedic reception	Print and send medical records	Four months
						Disinfect medical supplies	
						Reports	
						Check doctor's orders at reception	
7	18	F	Single	Bachelor	Hospitalization and emergencies	Healing and taking vital signs	5 and a half months
8	20	F	Single	Bachelor	EPS	Administrative procedures	Four months
9	18	F	Single	Bachelor	Hospitalization	Administrative procedures	3 months
						Head nurse support	
10	19	F	Single	Bachelor	Recovery/post-surgery	Channel	5 months
						Daily patient care	
						Patient education	

Source: Author's elaboration.

Causes of Subjective Discomfort

Initially, it is analyzed that the tasks assigned to some interns generate a state of emotional tension. Although this tension is bearable and allows them to continue their daily performance, the conditions created are not well accepted by them; this is evident in the following narrative:

Participant 4

In the clinic where I am, they give us a task notebook listing the tasks we have to do throughout the day. So, I have some tasks, and others have different tasks. Once, a colleague asked me, 'Have you bathed patient 510?' I told her no because that's her patient. I've already bathed patients in areas 501 to 506 and two more patients who are hers. I left you one, and she said to me, 'Ah, but you should bathe him because you're the student.'

Part of Participant 3's discourse (detailed in the following paragraph) allows us to highlight the fear of incompetence, a concept used by Dejours (2005), where the reality of work

is defined as "that which resists knowledge, knowing how to do, and overall control" (p. 42, our translation). Understanding in this way that there is a conflict between what is demanded, what is actually allowed, and the discomfort around a possible sense of incompetence, which, as an apprentice, can be exacerbated in the desire to demonstrate skills in a completely new scenario as part of their training process. This is also linked to the concept of subjective underemployment, as it shows that the working conditions they are subjected to tend to be below their academic qualifications and the preparation they have received.

I receive instructions from two people, and they both tell me different things. One lets me perform various activities, but the other reprimands me for everything, so I don't know what to do. I have the knowledge, but as an apprentice, sometimes they don't want to let me do anything. They prefer the patient to suffer, and I am also afraid of making mistakes.

Similarly, one of the participants refers to the relational dynamics generated within the workplace, identifying discomfort in terms of a sense of competition and permanent rivalry, which weaken solidarity and recognition as conditions that ensure subjective well-being at work (Dejours, 2005).

Participant 5

You don't see camaraderie; you enter the operating room, and those in the operating room tear down anyone, and they are friends. This is an area that is normal in any company, where they are peeling teeth, as they say, but it's not true. I experienced this in the operating room.

The feeling of uselessness is recognized as an experience related to indignity, stemming from the absence of recognition and the purpose of the work itself (Dejours, 2015). Thus, understanding that the lack of coherence between expectations from performing tasks as an apprentice and what is actually done leads to a feeling of uselessness related to the desire for dignity based on previously acquired knowledge. Additionally, "work becomes a source of suffering when the worker perceives that it does not contribute to any socio-cultural transcendence" (Orejuela, 2018, p. 95, our translation). This can be observed in Participant 4's story:

I don't have to do many things like that, I mean, yes, it's heavy, but compared to the assistants who have more workload, sometimes I even sit there as if there's nothing else to do, we've done everything.

There is evident difficulty in finding meaning in the efforts made, a discrepancy between personal skills and job requirements, and company impositions in terms of achievement desire, which is undeniably related to the concept of subjective underemployment, where "there is a tendency to highlight, as a common characteristic, the number of working hours below desired levels, higher educational qualifications than required, and over-qualification in terms of skills and experiences" (Ocampo, 2015, p. 23, our translation).

Participant 4:

I am useless here; I feel like a bother.

Regarding external causes of agitation, it is evident that transportation conditions in the city, exacerbated after the national strike in May 2021 and linked to the economic adversities the country is currently facing, are the main causes of this agitation. This is evident in the accounts of some of the interviewees:

Participant 1:

You do the math and the fare is 2,500, if it rains it's already 8,000 uber, so you do the math, and I also have to do the math from Monday to Saturday, I'm the only one with this schedule because everyone goes until Friday.

Symptoms of Subjective Discomfort

Regarding the psychological symptoms of initial discomfort, it is pertinent to mention that participants show a work demand leading to excessive effort based on the desire to remain after the end of their productive phase, which in turn is related to a permanent feeling of uncertainty and risk. This can be validated in the following account:

Participant 1

Sometimes, the boss asks me if I can stay longer hours, and I feel obligated to say yes because I want to continue working there after finishing as an apprentice. If I say no, they won't say that I don't want to learn, they always look at the bad, they won't say oh and she kills herself all day long.

Humiliation, as an action contrary to recognition, produces, in the words of Orejuela (2018), "shame, that feeling of being unworthy or having caused some irreparable harm" (p. 230, our translation), which implies in apprentices a feeling of ignorance, disadvantage in terms of knowledge, and a position of inferiority compared to other workers:

Participant 3

I feel angry when I am reprimanded for something unfair or forced to do things that are not my responsibility. Stress as well.

Regarding the physical symptoms of discomfort, it is worth noting that for an apprentice to be absent from their workplace, they must do so exclusively under a medical condition justified by health personnel; otherwise, it may be a radical cause for contract termination and, thus, loss of their academic semester. Similar to what Dejours (2009) does when generating an analysis around a solution for suffering linked to physical illness, thus masking the aforementioned mental suffering, which is justified under a medical certificate, the following account is evidenced:

Participant 1

My asthma has worsened now, like it did in early February. This hasn't happened to me since I was 5 years old.

There is a recognized tendency towards somatization, possibly due to the apprentices' latent difficulty in finding a different outlet for discomfort, understanding that "claiming to be ill" may be more socially accepted than undergoing a psychological conflict, which in turn could imply rejection not only by the Education Institute as a symbolic agent of merit, but also by the effort and dedication, but also by their peers, teachers, and other collaborators of the designated company.

Regarding relational symptoms, they could be particularly pronounced in a frequent sense of competition and, simultaneously, social isolation, understanding that "the individualization of work is understood as the pushing of responsibilities onto individuals to face the demands of work and the reality of work in a context of peer competition and loss of protections" (Orejuela, et al., 2020, p. 113, our translation)

Participant 2

It generates a bit of frustration, dissatisfaction among teammates because we are under constant pressure, this in addition to the fact that we have physical fatigue in quotes, there is also mental fatigue and receiving orders, and all this leads us to be competitive among ourselves. We have to socialize and work with apprentices from other institutes and they are looking for our downfall, they make complaints and everyone wants to stand out to the boss.

The constant external humiliation is exacerbated by the fact of being apprentices, which implies a tendency to impose superiority and reflect greater knowledge, trajectory, and experience on the part of those around them, where selfishness in the face of learning becomes

a possible form of psychological manipulation, where the apprentice is seen as a contractual obligation imposed by a governmental system that implies every company with a certain number of workers must have this contractual value. It also generates a precariousness of cooperation, a loss of solidarity and appreciation, a regime of indifference that triggers loneliness pathologies (Orejuela, 2018). This can be evidenced in the following accounts:

Participant 1

Sometimes they call me 'little girl,' and I am older; I don't like them to be demeaning. I always expect respect. Sometimes it's like 'oh you, little girl!' and no, my name is Carla³.

In conclusion, it is evident that psychological, physiological, and relational symptoms are generated in apprentices that companies overlook, thus placing little importance on their performance in relation to the goals set. Physiological symptomatology implies a strong tendency towards somatization, which simultaneously involves the fear of manifesting such discomfort as part of work rejection and the constant feeling of threat based on contract cancellation and thus loss of the third period of academic training.

Strategies for Coping with Subjective Discomfort in the Context of Professional Practice

This research identifies various ways of addressing workplace discomfort, emphasizing the necessity of maintaining ongoing dialogues with fellow learners undergoing similar processes. Such interactions can provide a sense of calm by revealing shared stories regarding what troubles them, thereby serving as a significant collective defense strategy. As mentioned in item 5:

We are a group of 4 interns, we always get together to talk about what we do, vent sometimes, and go out to eat and everything.

Similarly, in considering individual defenses, it is observed that most interviewed apprentices resort to actions of escape and avoidance, acknowledging a potential lack of strategies to cope with experienced workplace discomfort. This often leads to emotional repression (Dejours, 2005). Furthermore, feelings about events must be suppressed to avoid

³ It should be clarified that the name "Carla" here is a pseudonym used to reserve identity, it does not correspond to Participant 1's real name.

external rejection and potential self-judgment during the training process, which may hinder academic progression. This is evidenced in the following accounts:

Participant 3:

I just try to do the right things, leave, ignore, not say anything about what I feel.

Consequences of Workplace Discomfort

Regarding subjective or psychological consequences, there is substantial evidence of increased frustration regarding one's role in the work environment. This, in turn, impacts the desire to engage in similar tasks in the short, medium, and long term. It also results in a lack of leisure time for recreational activities and social interaction. Therefore, the use of time away from work implies that very few workers can organize their breaks according to their desires and needs (Dejours, 1980, our translation). This is reflected below:

Participant 1

Maybe yes, it doesn't make me want to do anything, just rest. I have no social life. I want my home and sleep. It's not like before, I won't party anymore, and I love to dance; I've done that, and no, on Sunday I'll get sick and not drink liquor. It's just that every day I wake up at 4 a.m. and it ends at 2 p.m. and that's right. And he came to my house for lunch around 3 p.m.

As a significant consequence, it is essential to highlight the shifts that arise around restructuring the meaning of work in relation to the training process undertaken. Here, the practice setting, instead of being a source of motivation and validation for career aspirations, becomes a limitation where this sense of purpose is altered. Orejuela (2018), in his analysis of the meaning of work in modernity, mentions that "new forms of work organization have effects on individuals' work trajectories and life projects" (p. 206, our translation). This is evident in the following discourse:

Participant 6

One thinks: is this really for me at the work level? When you meet such complex people, it's a strong shock that makes you feel like you don't want to continue your career. I thought about continuing as a senior nurse, but no.

Regarding relational consequences, it becomes clear how the need to adapt to work demands as apprentices disrupt healthy relationship processes outside the work context. This leads to a lack of social utility and a sense of support, reduced interaction, and thus, distancing

from the possibility of establishing a solid support network during times of adversity, including within the family sphere. Now, the priority is solely responding to the needs of the employing company. There is therefore a fragility in social bonds and the possibility of building meaningful relational dynamics; this is evidenced below.

Participant 4

There are no more outings with friends like before, because as I said, you only try to rest. Before, on weekends, we only studied Monday to Friday mornings, and there was plenty of free time. You used to see your partner, not anymore, and that affects you. There's no more freedom, like when I was just a student.

Discussion and Conclusions

Regarding the causes of workplace discomfort among nursing assistants, it becomes evident initially that the tasks assigned by employing companies are not, for the most part, fully aligned with these apprentices' skill levels or, at least, some tasks tend to induce emotional tension and thus lack acceptance. Generally, they are not entirely connected to what they learned during their technical training process, thereby prompting a sense of utility deficiency and inequality, especially concerning contractual benefits and emotional rewards. The lack of recognition based on their roles and/or activities performed, which in turn relates to feelings of incompetence, inequity in contractual benefits, and fear of incompetence, constitutes a latent cause of discomfort among apprentices, resulting in a loss of meaning regarding the time dedicated to their studies and the economic and psychological conditions this entails.

This sets up a conflict between the ideals established during the nursing assistant training process regarding productive stages and the significance of performing tasks closely linked to what was learned versus what is actually executed as part of workplace demands and thus designated by the company, ultimately causing ambivalence around prescribed work, actual work, and the reality of work (Orejuela, 2018). Rivalry is also evidenced as part of establishing connections with other team members, both apprentices from other training institutions and direct staff of the company, which falls into a cycle of continuous competition, leading to workplace discomfort among apprentices. Therefore, the subjective underemployment experienced by nursing interns, linked to this discomfort arising from assigned duties versus what they prepared for in their training process, is one of the most significant triggers of discomfort identified in this research.

Regarding external causes of workplace discomfort, it can be observed that nursing interns coincide in terms of adverse economic conditions that impact emotional well-being, likely linked to their socioeconomic status and the country's ongoing adversities in this regard. Furthermore, the city's transportation system is notably restricted, a factor exacerbated by actions stemming from the 2021 National Strike, thereby limiting connectivity within the system and concurrently heightening social insecurity in the city.

As a symptomatic response identified in the discourse of nursing interns, there is a strong tendency towards somatization from a physiological perspective. This entails evident difficulty in processing discomfort through words, possibly due to a latent fear of rejection, judgment, and/or not being considered for future contractual processes with the same company once their apprenticeship concludes. Hence, recurring symptoms such as migraines, nervous tics, asthma, and body pains manifest, indicating that the body becomes the mechanism of expression. Additionally, excessive effort based on assigned tasks, where individual particularities are not considered, also acts as a triggering factor. It's noteworthy that there is a strong tendency to postpone seeking medical attention, linked to the fear of being rejected due to illness and thereby jeopardizing their apprenticeship process, as if falling ill would result in prohibition during the 6-month productive phase.

However, the psychological symptoms embedded in the discourse of students during the productive phase of their nursing technical course primarily indicate feelings of fear, helplessness, and irritability. This is part of an almost constant sense of uncertainty and risk, where the desire for recognition and its absence indicates a latent symptom of fear. Feeling inferior compared to individuals without similar contractual status exacerbates feelings of powerlessness, inadequacy, and anger, leading to ethical conflicts regarding tasks they are sometimes asked to perform. Relational symptoms are linked, in this case, to feelings of injustice regarding their role as apprentices, culminating in frequent competitions and rivalries not only among students themselves in the productive phase but also with individuals directly employed by the company, triggering feelings of loneliness, lack of solidarity, and indifference.

Collectively, the defense strategies employed highlight a strong need for interaction and, therefore, processing through verbal communication, which generates discomfort. However, this is often impossible due to the fear of rejection. Thus, seeking spaces for sharing experiences among trainees perhaps stands as the primary strategy for coping with the experienced discomfort. On an individual level, there is a predominant tendency to resort to escape actions, where ignoring feelings, abandoning situations that cause discomfort, and suppressing thoughts

that may disrupt mental stability are actions that repress impulses and concurrently result in a significant lack of coping mechanisms for work situations involving discomfort.

Finally, it is identified that the consequences of occupational discomfort involved in the development process during the productive phase of nursing assistants are related to career projections. It is evident that there is a loss of desire to continue their academic studies in relation to what they are performing during their productive phase. Therefore, instead of being a scenario of motivation and added passion towards building an educational and professional life project, it implies a loss of desire for what previously involved so much enthusiasm and was a strong focus of their libidinal energy just a year ago.

Social relationships are also affected due to workplace discomfort, showing a loss of significant bonds due to the lack of leisure time and recreation caused by long working hours. The time available to continue studies is also altered, impacting the motivational dimension of participants in this training program.

Lastly, it is essential to consider that companies position the apprentice as a contractual figure linked to an obligation by the State, as indicated by the Integral Attention Unit to the Entrepreneur, stating that companies with more than 15 employees must hire one apprentice for every 20 employees under a different scheme, otherwise they will have to undergo a monetization process with SENA, the role of said student in the productive phase will be greatly blurred, undervalued, and with a low sense of utility, as clearly reflected in the discourse of the 10 participating nursing assistants.

This study was limited by the lack of research on the apprenticeship contract and its implications in different subjective and social spheres, considering that students in the productive phase are a population of limited research interest. However, this, in turn, becomes a novel factor, which represents an important step toward the need to focus research on this population, understanding that this contractual modality covers a large part of the country's educational population. In terms of practical value, the study allows for the expansion of research on workplace discomfort in a previously unaddressed population, potentially paving the way for modifications in this contractual process and enhancing the sense of utility granted to apprentices within different organizations. This is crucial in building an academic and professional life project, especially in the healthcare field. The research has mainly focused on the labor market integration process of young university students, overlooking the productive phase as their first encounter with the work context, which also, considering the contractual conditions, implies the need to address the discomfort present in this process.

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