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I'M EXHAUSTED... HOW CAN I HAVE JOY?

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Abstract: The daily lives of workers in an organization are marked by several stressors that demand constant activation of coping resources in adverse circumstances. The illness arising in these situations can evolve into Burnout, a syndrome that arises from chronic work distress and failure of coping strategies. Thus, the theoretical study presented here aims to carry out a critical reflection on the role of joy in preventing Burnout syndrome. In this sense, the relationship between Burnout syndrome, Joy and Eucoping was studied from the perspective of Psychoneuroendocrinoimmunology. From our reflections it was possible to infer that joy, produced by Eucoping—an effective coping strategy—is a concept that underpins studies and programs that can be of great value in preventing Burnout and can also act in promoting well-being in organizations.

Keywords: *Burnout; Stress; Coping; Eucoping; Joy*

INTRODUCTION

Stress is part of everyday life, however, the way we perceive and react to adverse situations will provide circumstances favorable to well-being or trigger physical and/or mental illness. Keeping the necessary proportions in mind, we can say that stress is also present in the work environment, given that professional tasks play a fundamentally important role in people's lives, who spend a large part of their time dedicated to it. In an extremely competitive and constantly changing organizational environment, greater dedication, geographic mobility, flexible schedules, among other demands are required from the individual, which often become stressful factors that impact health and physical well-being and /or emotional of workers. We can consider, as an example, the effect of competition and prolonged pressure on the physical body, which can increase

heart rate, muscle tension, blood pressure and decrease the activity of the immune system.

The physical effects tend to be chronic and progressive. It must be considered, however, that such stressors do not affect all individuals exposed to them in the same way, since these are subjects with peculiar psychological characteristics. (MOTA, 2008). In other words, some professionals overcome the impact of work stress, while others become ill and may even develop Burnout Syndrome.

Burnout Syndrome manifests itself due to the failure of the coping strategies used (coping) in the face of exorbitant levels of stress and has been increasingly recurrent, gaining space even in academic debates, where this concept has already been approached from the most diverse perspectives (NAKANO, 2017). And, just as occurs in the individual/stressful situation relationship, vulnerability to Burnout is directly associated with the personal characteristics, environmental and work conditions carried out by a given individual.

Eucoping, an effective coping strategy in the face of occupational adversities, can be a potential preventive resource against illness. (VIEIRA, 2023). However, the research available on the topic of Burnout, in most cases, explored the emotions related to the symptoms and diagnoses of physical and mental exhaustion, thus creating a framework of few studies that associate it with the field of positive emotions, such as joy. in the work environment.

Taking this into consideration, the objective of this study is to critically reflect on the role of Joy in preventing Burnout and quality of life at work. Within the limits of this article, joy will be taken as a positive emotion that can minimize stress and the harmful effects caused in the professional environment. In this endeavor we will approach a theoretical framework that addresses the concepts of stress (Selye; Lipp),

coping (Lazarus), Eucoping (Vasconcellos), Burnout (Vasconcellos, Nakano, Bortoletti) and joy.

STRESS

The search for quality of life has become increasingly evident, given the transformations of the globalized world, so maintaining a balance between physical and mental health, personal and professional life, motivations and routine becomes a great challenge (Silva, 2023). There are several factors that promote an imbalance between personal and professional life, such as a feeling of overload, lack of interaction with friends and family, in-person and remote work that goes beyond pre-established working hours. All of these factors can trigger stress and health problems, compromising quality of life.

Stress can be considered a state of tension that causes a disruption in the internal balance of the body Lipp (2004). The concept of stress was coined by the Hungarian endocrinologist Hans Selye in the 1930s as being “the state manifested by a specific syndrome, consisting of all non-specific changes produced in a biological system” (SELYE, apud FRANÇA and RODRIGUES, 2009, p 64).

When resizing his studies on stress, Selye (1974) also coined the terms distress and eustress, with eustress being “a positive response of the organism to a stimulus”, while distress “is a negative phenomenon that can cause damage to the organism”.

Vasconcellos (2002), who approaches stress from the perspective of the psychoneuroendocrinoimmunological model, focused on the relationship between the body's systems and the psychological apparatus in this process. This author exemplifies Selye's conceptual field by remembering that, in general, the human body works in tune with all organs, the heart beats at the appropriate rhythm, as well as the

lungs, pancreas and stomach, also has its own rhythm.

According to Vasconcellos (2017), according to the individual's perception of an event in their work environment, such a situation can be understood as a stressor (distress), which puts them in a state of tension. When this happens, there may be an accelerated heart rate, stomach pain, insomnia, among other symptoms that take the individual out of homeostasis and lead to a state of imbalance. Faced with this situation, each individual will respond in a different way, that is, they will use a coping strategy that can be effective or ineffective.

COPING

We know that every human being has and uses strategies to achieve the desired state of well-being. Therefore, we all develop coping strategies in the face of stress and displeasure. The objective of the coping strategy is, therefore, to reduce or eliminate the stressful threat, and its effectiveness depends on the circumstances, the different personality types and the resources used to combat potential dangers. (Vasconcellos, 2017).

Lazarus (1980) developed the concept of coping to explain how the psychophysiological apparatus (brain and psychological functions of emotion and cognition) processes and elaborates stimuli and information. The author theorized the two dimensions of evaluation that precede decision-making or the behavioral reaction to the stressful stimulus, which are: the primary evaluation elaborated by the neocortex (called cognitive) and secondary evaluation processed by the limbic system (called emotional). Lazarus (1980) also classified the different stress coping strategies into emotion-focused coping and problem-focused coping.

In the future, Vasconcellos (2017) classified coping strategies according to their

effectiveness, coining the terms eucoping, when the strategies were successful, and discoping, when they were not. The different coping possibilities were defined by this author as follows:

In the face of a distressing situation, if Eucoping occurs, the individual can return to homeostasis; In the face of a Eustress situation, if there is Eucoping, the individual can return to homeostasis; Faced with a Eustress situation, if there is Discoping, he may become ill. (Vasconcellos, 2017)

Vasconcellos (2017) presents the scheme that contemplates the possible combinations of reactions and coping strategies (Coping):



Figure 1- Stress, Coping, Burnout, Resilience.

Source: Vasconcellos (2017, p.290)

As it was shown in the figure above, the possible combinations between Eustress and Distress with Coping are:

1. Eustress-eucoping – When a pleasurable stressful situation generates an equally pleasurable strategy to reduce the exhausting effect of stress activation. Examples: relaxation after intense physical activity; after a period of longing, meeting your loved one; make ice packs after a long-distance run;
2. Eustress-discoping – When a pleasant stressful situation generates an inefficient coping strategy to reduce the harmful effect of neuroendocrine activation. Examples: use of medication to combat the effects of binge drinking; driving after

a large intake of alcohol; use drugs and go riot on the city streets;

3. Distress-eucoping – When an unpleasant situation generates a pleasurable strategy to combat the harmful effect of the situation. Examples: taking a long-awaited trip after heartbreak; contentious separation that generates parents more dedicated to their children; obesity and diet with great weight loss;

4. Distress-discoping – When an unpleasant stressful situation generates an inefficient combat strategy. Example: increase in taxes to fill a budget deficit hole; unemployed take out a loan; placing a criminal in a cell overcrowded with criminals. Since Coping is a reaction to a stressful situation, it can also generate, in itself, a new stressful situation, different from the initial one;

5. Eucoping-eustress – The processed strategy generates a state of pleasurable relief, but with strong activation of stress;

6. Eucoping-distress – The Coping strategy, despite being effective, generates a new state of stress, negative for the body;

7. Discoping-eustress – A bad strategy, however, generates a pleasant level of stress; 8. Discoping-distress – When an ineffective coping strategy generates an unpleasant stressful situation. (Vasconcellos, 2017, p. 289)

Of the formulations above elaborated by Vasconcellos, the ones that interest us most directly are those of Eucoping, which are effective coping strategies, useful for strengthening the individual in the face of stressors and maintaining satisfaction and well-being at work.

BURNOUT SYNDROME

Burnout syndrome, also known as “chronic stress” or “Professional Burnout Syndrome”, is now considered an occupational disease due to the new classification of the World Health Organization (W.H.O., 2019) and was included in the 11th Revision of the International Classification of Diseases (ICD-11) since 2022 with the following definition:

“Burnout is a syndrome conceptualized as resulting from chronic stress in the workplace that has not been successfully managed and is characterized by three dimensions: feelings of exhaustion or depletion of energy; increased mental distance from one’s work, or feelings of negativity or cynicism related to one’s work; and reduced professional effectiveness.”

According to Freudenberger 1972 (apud Vasconcellos et al, 2017), Burnout Syndrome was defined as a state of fatigue or frustration produced by dedication to a cause with which it was expected to obtain positive results, which conflicts with a reality that does not meet expectations. The syndrome can be triggered by institutional and personal factors, which can generate physical, psychological, social, professional and legal repercussions.

Burnout symptoms can be the result of an effort that is not very adaptive and realistic, causing exhaustion as a result of neglecting one’s own needs in favor of full dedication to work (MORENO-GIMENEZ, 2007). From this approach, it is possible to verify that this exhaustion suffers internal and external interference, that is, both from individual characteristics (idealistic people, highly motivated, identified with work, empathetic, with high expectations, responsible and perfectionists), and from the work environment. (interpersonal relationships, excessive workload, unhealthy work environment, type of activity, work overload, lack of organizational support, pressure, lack

of autonomy, among others) (BORTOLETTI, 2017).

The repercussions of Burnout affect several areas of an individual’s life. In the psychic sphere, the individual feels finished, without energy for work reflecting in other areas, unmotivated to live. Displays increased aggression and irritability; drop in self-esteem; compromises social life, triggering progressive social isolation; affects family life, making communication difficult and increasing the chances of divorce; depressive states, among others. As Burnout is a result of stress, acquired diseases such as sexual dysfunctions, diabetes, heart disease, hypertension, gastritis, muscular diseases, headaches, among others, can occur in the physical sphere. At the institutional level, there is a drop-in productivity and quality of work, an increase in absenteeism and work accidents, resulting in financial losses to the organization. In the professional sphere, there is a worsening in interpersonal relationships, an impression of lack of aptitude, a drop-in self-confidence and a feeling of incompetence, a feeling of helplessness, a negative perception of the institution, a drop in achievement in the work, the risk of errors appearing with consequent vulnerability to lawsuits. legal (BORTOLETTI, 2012).

Briefly, we can state that Burnout is due to the failure to seek Eucoping in the face of a distressing situation.

Bortoletti (2012, 2017) argues that psychological support associated with the Burnout Assistance Protocol can be considered an effective strategy used in the treatment and prevention of Burnout. This protocol was developed based on research carried out to investigate the triggers of Burnout in doctors at a public university in the State of São Paulo – Brazil. The resources recommended by the Protocol involve personalized interventions in different areas, involving psychological,

neurological and endocrinological actions, as shown in the following model:

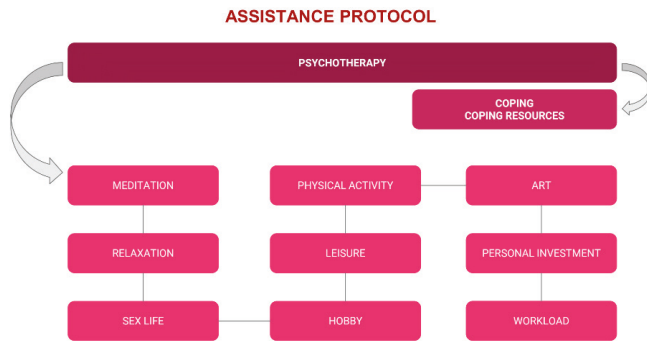


Figure 2 – Burnout Assistance Protocol
(Source: Bortoletti, 2007)

Meditation is an instrument that helps access internal resources through an altered state of consciousness; relaxation promotes balance of bodily functions; satisfactory sexual activity promotes the release of hormones that cause pleasure, increasing performance in daily activities; personalized physical activity promotes the release of endorphins; leisure promotes joy and motivation; the hobby is work chosen for pleasure; artistic activity stimulates creativity, favoring pleasure and joy; personal intellectual investment is food to replace the emptiness causing well-being; and, managing the workload is the path to productive work activity without excessive exhaustion.

Through the resources recommended by the Burnout Assistance Protocol, the individual can develop Eucoping in situations of distress and, consequently, the immune system is strengthened.

JOY AND EUCOPING IN THE ORGANIZATIONAL ENVIRONMENT

We can describe Joy based on texts found in literature that permeate understanding in its physiological, psychological and social aspects. According to Morin (2013), man is a singular subject but contains the human trinity (individual, society and species). He is potentially destined to feel love, sadness, jealousy, anger, joy, in short emotions that are shared. Man is capable of creatively expressing his emotions through various performances, whether in music, theater or dance. Because he is a social being, human beings seek to communicate in an affectionate and cordial way with others, generating well-being and joy around them.

Joy is often confused in common sense with pleasure, as pleasure is related to the five human senses - sight, hearing, taste, smell and touch. We can cite as an example, the sensation when tasting a glass of good wine or feeling a pleasant sensation when listening to music that touches your heart. Furthermore, pleasures are perishable and momentary.

In the book "Happiness, Has It Gone Away?" Betto, et al (2016) defines joy as an affection that causes us momentary well-being, for example, when we meet a loved one again or when we are recognized for a deserved achievement for overcoming a professional challenge.

It is therefore clear that when we talk about Joy we are using a polyphonic concept that has been the subject of reflection by both academics in the human and biological sciences, in addition, of course, to novelists, poets, playwrights and filmmakers. But with regard to this research, we are interested in thinking about joy in the organizational environment in order to prevent psychophysiological illness. A brief reflection on the psychoneuroendocrinoimmunology

dimension of Joy is then necessary.

Joy at work has still received little attention from organizational scholars. Some authors such as Bakke, 2005; Varila, 2014; Warr and Clapperton, 2010 apud Cruz et al (2020) presented theoretical considerations about the construct, but did not develop instruments capable of operationalizing its propositions. Joy at work is characterized as a positive psychological experience, which covers not only the personal level, as in the case of prosperity, but also the interpersonal and organizational levels (Pradhan and Jena, 2017). Joy at work thus contrasts with this subjective well-being, as it refers to positive experiences such as gratitude, concern, tranquility or inspiration.

In summary, according to Pradhan and Jena (2017), joy at work is characterized as an indicator of eudaimonic well-being at work, associated with the experience of positive states that contribute to self-development and a full working life. According to CRUZ (2020) Job satisfaction consists of a positive intimate state, resulting from work performed that is expressed affectively and cognitively (De Gieter, Hofmans, & Bakker, 2018). The use of the Joy at Work Scale presented initial evidence of internal structure validity and convergent validity in a Brazilian sample. Therefore, it can be considered as an appropriate measure for evaluating how happy people are in their work environments, which recommends its future use in research and organizational diagnoses.

But joy, from a psychoneuroendocrinology point of view, can be considered a primary emotion, a particular form of expression of humor or even a positive emotion that is accessed through Eucoping, an effective coping strategy, in the face of emerging stressors in the organizational environment, such as: seeking proximity between people; reduce the distance between hierarchical levels; relaxation and stress relief in the face of a

tense situation, among other possibilities.

Dalgalarrondo (2008) also states that joy belongs to the realm of positive bodily sensations and the feelings in the sphere of joy are euphoria, contentment, satisfaction, confidence, gratification, hope, expectation, etc. Research in psychosomatic medicine and psychology has also proven that the cultivation of positive emotions strengthens the immune system and gives people greater resistance to illnesses.

Although the relationships between Joy and the organizational environment most often point to an increase in individual production, there are other uses of this positive emotion in work environments linked to health, where what is sought is the humanization of relationships. Based on the premise that the experience of child hospitalization is permeated by traumatic situations for children, their families and health professionals themselves, the Doutores da Alegria initiative introduces play into the scope of children's hospital care. "Doutores da Alegria" is an artistic organization that takes the work of professional actors into hospitals using the clown as a scenic element. The group was a pioneer in hospital intervention with this artistic approach. Similar work, also inspired by the "Doctors of Joy", is that carried out by "Companhia do Riso" in the Pediatrics of the Hospital das Clínicas of the Faculty of Medicine of Ribeirão Preto of "Universidade de São Paulo", (Nogueira, 2015). The work of these Alegria professionals aims to promote health through laughter, from the perspective of humanizing care and promoting health.

The founder of "Associação Doutores da Alegria", Nogueira (2015), states that "a good antidote against bad mood and, consequently, to have joy is to learn to breathe and try to laugh at yourself". Thus, humor can be used as a strategy for coping with work stress because it promotes relaxation, relaxation in the face of

existing tension and anguish. The promotion of a good mood can be considered a Eucoping strategy (SILVA et al, 2020).

In summary, the joy expressed in the work environment consists of a manifestation of well-being at work, which is reflected in the fusion of life satisfaction and satisfaction with work, and joy can be measured using the Joy at Work Scale (CRUZ, 2020).

The emotional experience varies from person to person, therefore, Joy is experienced in a unique way because each person seeks their own pleasure. When the individual is happy, they produce hormones such as endorphins, serotonin, dopamine and oxytocin, which generate well-being and can be Eucoping resources. If the individual gives new meaning to the stressful situation, they can develop joy and benefit from well-being, which can contribute to better professional performance. It is worth mentioning that serotonin is the neurotransmitter responsible for the transmission of nerve impulses and acts as a messenger of good and bad feelings. It acts on the brain and other body systems and provides a feeling of well-being and its dysregulation can generate disorders.

FINAL CONSIDERATIONS

The analysis was carried out based on the theoretical concepts of Joy and Eucoping in the prevention of Burnout syndrome from the perspective of Psychoneuroendocrinology.

Joy is a positive psychological experience, which functions as an indicator of well-being at work, deserving attention for new research, as in addition to contributing to a full working life, it can be a preventive measure against psychophysiological illness (Pradhan and Jena, 2017). This emotion can become an effective coping resource, Eucoping, to manage stressful situations as laughter, laughter or facial expressions of joy are useful strategies for bringing people together, reducing distances between hierarchical levels and generating relaxation in the face of a stressful situation (SILVA, 2023).

Bortoletti (2012, 2017), in the Burnout Assistance Protocol, presents several tools that favor Eucoping, among them, the author states that carrying out leisure activities is potentially an effective strategy from which joy emerges.

It is possible to affirm that the use of Eucoping: an effective strategy, capable of promoting joy, contributes to promoting the individual's well-being and the consequent prevention of Burnout.

Therefore, it can be stated that there is an extensive field for new studies in this area, thus correlating the relationships between Burnout, Eucoping and Joy. This way, we understand that promoting reflections and exploring affections as a Eucoping proposal can serve as subsidies for future political and theoretical projects.

REFERENCES

- BERK, L.; TAN, S.A.; BERK, D. **Cortisol and Catecholamine stress hormone decrease is associated with the behavior of perceptual anticipation of mirthful laughter.** *Faseb Journal*, 2008, Vol.22.
- BERK, R. A. **The active ingredients in humor: psychophysiological benefits and risks for older adults.** *Educational gerontology*, 2001.
- BETTO, F.; BOFF, L.; CORTELLA, M.S. *Felicidade foi-se embora?* Petrópolis, RJ, Vozes, 2016. *BÍBLIA – Bíblia de Jerusalém.* São Paulo: Paulus, 2002.
- BORTOLETTI, F.F. et all. **Triggering risk factors of the Burnout Syndrome in Ob/Gyn physicians from a reference public University of Brazil.** *Internacional Scholarly Research Network. ISRN Obstetrics and Gynecology*, 2012a. Article ID 593876 doi: 10.5402/2012/593876
- BORTOLETTI, F.F. **Fatores desencadeadores da Síndrome de Burnout em Obstetras.** Dissertação de Mestrado. Universidade Federal de São Paulo – Brasil, 2012b.
- BORTOLETTI, F.F.; VASCONCELLOS, E.G.; SEBASTIANI, R.W. **A síndrome de Burnout: quando o cuidador adocece. Uma abordagem neuropsicoendocrinológica.** In: Angerami VA, editor. *E a psicologia entrou no hospital ...* Editora Artesã, Belo Horizonte, 2017.
- BORTOLETTI, F.F.; VASCONCELLOS, E.G.; SEBASTIANI, R.W. **Burnout em profissionais que laboram em Obstetrícia. Uma visão psiconeuroendocrinológica.** Book of proceedings. V Congresso Ibero-Americano e Luso -Brasileiro de Psicologia da Saúde – Universidade de Algarve. 2019.
- CRUZ, Roberta Pérez de Souza; FERREIRA, Maria Cristina; GABARDO-MARTINS, Larissa Maria David. **Evidências de validade para a escala de alegria no trabalho.** *Rev. Psicol., Organ. Trab., Brasília*, v. 20, n. 1, p. 941-946, mar. 2020. Disponível em < [HYPERLINK “about:blank”& HYPERLINK “about:blank”pid=S1984-66572020000100011 HYPERLINK “about:blank”& HYPERLINK “about:blank”lng=pt HYPERLINK “about:blank”& HYPERLINK “about:blank”nrm=iso”nrm=iso>. acessos em 20 nov. 2023](http://pepsic.bvsalud.org/scielo.php?script=sci_arttext&about:blank)
- DALGALARRONDO, P. **Psicopatologia e semiologia dos transtornos mentais.** Porto Alegre, Porto Alegre : Artmed, 2008.
- DAMASIO, A. R. **O Erro de Descartes: Emoção, Razão e o Cérebro Humano.** Companhia das Letras, São Paulo, 1996
- DE GIETER, Sara; HOFMANS, Joeri; BAKKER, Arnold B. **Need satisfaction at work, job strain, and performance: A diary study.** *Journal of occupational health psychology*, v. 23, n. 3, p. 361, 2018.
- FRANÇA, A.C. L. e RODRIGUES, A.L. **Stress & Trabalho: uma abordagem psicossomática.** São Paulo: Editora Atlas, 2009
- GALASSO, LMR. (2005). **Humor e estresse no trabalho: fatores psicossociais estressores e benéficos no trabalho dos operadores de telemarketing.** São Paulo. Disponível em <http://www.teses.usp.br/teses/disponiveis/6/6134/tde-15092011-103819/>. Acesso em 20 de junho de 2019.
- LAZARUS, R S. FOLKMAN, Susan. **Stress, appraisal, and coping.** Springer publishing company, 1980
- LIPP, M. E. N. **O stress está dentro de você.** 6 ed. São Paulo: Contexto,2004.
- MARQUES-DEAK, A.; STEMBERG, E. **Psiconeuroimunologia: a relação entre o sistema nervoso central e o sistema imunológico.** *Rev Bras Psiquiatr.* 2004.
- MORNENO- JEMÉNEZ, B.; HERRER, M.G.; HERNANDEZ, E.G. **Burnout: Sofrimento psíquico dos profissionais que atuam em Obstetrícia.** In: *Bortoletti FF, Moron AF, Bortoletti Filho J, Nakamura UM, Mattar R, Santana RM. Psicologia na prática obstétrica – Uma abordagem Interdisciplinar.* São Paulo: Editora Manole, 2007.
- MORIN, E. **O método cinco: A humanidade da humanidade- A Identidade Humana.** Porto Alegre: Editora Sulina, 2013.

MOTA, Carolina Maria; TANURE, Betania; NETO, Antonio Carvalho. **Estresse e sofrimento no trabalho dos executivos.** Psicologia em Revista, v. 14, n. 1, p. 107-130, 2008.

MORIN, E. **Ensinar a viver: Manifesto para mudar a educação.** Porto Alegre: Editora Sulina, 2015.

NASCIMENTO, E.; QUINTA, E.M. **Terapia do Riso.** 4ed. São Paulo: Editora Arbra, 1998.

NAKANO, EFM. **Burnout, discurso do sujeito coletivo e aspectos psicossociais de pastores.** 2017, 138f. Dissertação (Mestrado) - Instituto de Psicologia, Universidade de São Paulo, 2017.

NOGUEIRA, W. in Masetti, M. **The Ethics of Joy in the Hospital Context.** Rio de Janeiro: Folio Digital: Letra e Imagem, 2015.

ORGANIZAÇÃO MUNDIAL DA SAÚDE. Síndrome de Burnout. 2019. Disponível em: <<https://nacoesunidas.org/sindrome-de-burnout-e-detalhada-em-classificacao-internacional-da-oms/>> Acesso em: 20 jun. 2019.

PRADHAN, Rabindra Kumar; JENA, Lalatendu Kesari. **Employee performance at workplace: Conceptual model and empirical validation.** Business Perspectives and Research, v. 5, n. 1, p. 69-85, 2017.

SILVA, L. **Transição radical de carreira: Análise de fatores que impulsionam ou dificultam a mudança.** 2023. Dissertação (Mestrado em Psicologia Social) - Instituto de Psicologia, Universidade de São Paulo, São Paulo, 2023. doi:10.11606/D.47.2023.tde-05092023-170119. Acesso em: 2023-11-19.

SILVA, L. et al. **Alegria como recurso de enfrentamento (Eu coping): Reflexões a partir da Psiconeuroendocrinologia.** In: FERREIRA, E. M. (Org.). Investigações conceituais, filosóficas, históricas e empíricas da Psicologia 2, v 1. Ponta Grossa, PR: Editora Atena, 2020. p. 166-178. Doi: <https://doi.org/10.22533/at.ed.218202311>.

SILVA, C **Relatório de Qualificação “Longevidade Conjugal: O papel do Eu coping nas relações conjugais contemporâneas”** apresentado ao Instituto de Psicologia da Universidade de São Paulo para a obtenção do grau de Mestre em Psicologia em 2023.

SELIGMAN, M. E. P. **Aprenda a ser otimista: como mudar sua mente e sua vida.** Rio de Janeiro: EDITORA SCHWARCZ S.A, 1990.

PEKELMAN R., FERRUGEM, D., Minuzzo, F. A. O., & Melz, G. (2009). **A arte de acolher através da visita da alegria.** Revista De APS, 12(4). Recuperado de <https://periodicos.ufjf.br/index.php/aps/article/view/1444>

SELYE, H. (1959). **Stress: a tensão da vida.** São Paulo: Ibrasa.

SELYE, H. (1965). **Stress: a tensão da vida. 2. ed.** São Paulo: Ibrasa.

TONETE, Vera Lúcia Pamplona; ESPÍRITO SANTO, Renata Mattos do; PARADA, Cristina Maria Garcia de Lima. **Percepções da equipe de enfermagem sobre os médicos da alegria e a hospitalização de crianças.** REME rev. min. Enferm, p. 173-181, 2008.

VASCONCELLOS, E.G. **Stress, Coping, Burnout, Resiliência: Troncos da mesma raiz.** In: Silva Jr N, Zangari W. (organizadores) *Psicologia Social e a questão do hfen.* Editora Bluher, 2017: 20,285-294.

VASCONCELLOS, E.G. **O modelo psiconeuroendocrinológico de stress.** In: SEGER, L. *Psicologia e odontologia: uma abordagem integrada.* 4 ed. São Paulo: Ed. Santos. 2002. p.137-159.

VIEIRA, L. C. **Relatório de Qualificação “Síndrome de Burnout em médicos residentes : coping , resiliência e a percepção do adoecimento na formação”** apresentado ao Instituto de Psicologia da Universidade de São Paulo para a obtenção do grau de Mestre em Psicologia em 2023.