

The Precarization of Working Conditions for Cleaning Staff in Healthcare Services

A Precarização Das Condições De Serviço Dos Trabalhadores De Limpeza Em Serviços Da Saúde

La Precarización de las Condiciones Laborales de los Trabajadores de Limpieza en los Servicios de Salud

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How to cite: Bueno LL, Braga MFT, Martinez MR, Bueno LL. The Precarization of Working Conditions for Cleaning Staff in Healthcare Services. REVISA. 2026; 15(Esp.1): 110-113. Doi: <https://doi.org/10.36239/revisa.v15.nEsp1.p110a113>

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Received: 17/10/2025
Accepted: 24/12/2025

RESUMO

Objetivo: Este artigo teórico-reflexivo tem como objetivo analisar a condição de invisibilidade social e a precarização do trabalho dos profissionais que atuam nos serviços de limpeza em ambientes hospitalares. Considerando a relevância desses trabalhadores para o funcionamento e segurança das unidades de saúde, discute-se a contradição entre sua importância prática e o reconhecimento social que recebem. A partir da literatura científica e de dados sobre o perfil sociodemográfico e condições laborais desses profissionais, evidencia-se a marginalização social, os riscos ocupacionais enfrentados e as consequências psicossociais resultantes da desvalorização do trabalho. Conclui-se pela urgência de políticas e práticas institucionais que promovam o reconhecimento, a valorização e a proteção da saúde desses trabalhadores essenciais.

Descritores: trabalho invisível; limpeza hospitalar; invisibilidade social.

ABSTRACT

Objective: This theoretical-reflective article aims to analyze the condition of social invisibility and the precarization of work among professionals engaged in cleaning services within hospital environments. Considering the relevance of these workers to the functioning and safety of healthcare facilities, the discussion addresses the contradiction between their practical importance and the social recognition they receive. Based on scientific literature and data regarding the sociodemographic profile and working conditions of these professionals, the study highlights their social marginalization, the occupational risks they face, and the psychosocial consequences resulting from the devaluation of their work. It concludes by emphasizing the urgency of institutional policies and practices that promote recognition, appreciation, and protection of the health of these essential workers.

Descriptors: invisible work; hospital cleaning; social invisibility.

RESUMEN

Objetivo: Este artículo teórico-reflexivo tiene como objetivo analizar la condición de invisibilidad social y la precarización del trabajo de los profesionales que se desempeñan en los servicios de limpieza en entornos hospitalarios. Considerando la relevancia de estos trabajadores para el funcionamiento y la seguridad de las unidades de salud, se discute la contradicción entre su importancia práctica y el reconocimiento social que reciben. A partir de la literatura científica y de los datos sobre el perfil sociodemográfico y las condiciones laborales de estos profesionales, se evidencia la marginación social, los riesgos ocupacionales que enfrentan y las consecuencias psicossociales derivadas de la desvalorización del trabajo. Se concluye sobre la urgencia de políticas y prácticas institucionales que promuevan el reconocimiento, la valorización y la protección de la salud de estos trabajadores esenciales.

Descriptores: Trabajo Invisible; Limpieza Hospitalaria; Invisibilidad Social.

ESSAY

Introduction

Work is one of the main forms of social integration for individuals, also a marker of status. It serves as a pillar in the process of social integration, shaping identities and establishing roles within the collective body. However, the social value attributed to different professions does not always correspond to their practical relevance. Some occupations, such as cleaning professionals, have historically been marginalized, considered inferior, or even invisible to society¹.

In the hospital setting, these workers perform essential functions for maintaining hygiene, preventing infections, and ensuring a safe environment. Despite this, they are often undervalued, with their work reduced to "invisibility"². Social invisibility, according to Celeguim et al. (2009), refers to the denial of recognition of individuals whose activities, because they are manual or low-paying, are socially despised. Hospital cleaning professionals, because they perform essential yet silent tasks, are part of this scenario of symbolic exclusion. Thus, invisibility is not limited to a lack of recognition, but constitutes a structural flaw that compromises dignity and public health, revealing an ethical contradiction between the rhetoric of essentiality and the practice of devaluation.

The predominance of outsourcing as a hiring model intensifies the precariousness of working conditions, exposing these professionals to multiple risks – physical, chemical, biological and psychosocial – without adequate guarantees of protection³.

Therefore, this study raises the following guiding question: What is the perspective of the invisible work of professionals working in hospital cleaning services?

This study aimed to describe the perspective of the invisible work of hospital cleaning professionals, identifying and characterizing their socioeconomic profile and employment relationship, as well as the consequences arising from this relationship.

Methodology

This is a theoretical and reflective essay, based on studies and discussions on invisible work in the healthcare sector, focusing on hospital cleaning professionals. Aspects related to socioeconomic profile, employment relationships, and the consequences of the devaluation of this role were analyzed.

The bibliographic review was done using PubMed and Web of Science databases, using controlled descriptors in Portuguese and English: "work", "hospital cleaning service", "invisible work", "psychodynamics of work" and "acknowledgment." Only articles that directly addressed the topic of hospital cleaning services were included. The analysis considered both quantitative and qualitative aspects of the selected studies.

Results and Discussions

According to Dejours (2022), invisible work corresponds to the part of labor that, although essential, is not perceived or valued socially. This invisibility affects professionals whose work is indispensable but silent, such as cleaning workers. It manifests itself in low pay, a lack of symbolic recognition, and institutional contempt. This condition is not accidental, but reflects a social hierarchy that disregards manual labor and, in doing so, compromises both the dignity of workers and the healthcare system itself.

Outsourcing reinforces this scenario by weakening labor rights, fostering high turnover, limiting opportunities for ongoing training, and weakening biosafety protocols—increasing occupational risks and compromising workers' physical and mental health.^{4,2} This is a structural contradiction: the pursuit of cost reduction compromises safety and quality of work, neglecting the dignity of those who support the essential functioning of health services.

In addition to physical and biological risks, psychological illness related to contact with pain, suffering, and death, often without the necessary support, stands out. Symbolic devaluation exacerbates this situation, leading many professionals to perceive themselves as socially disposable. This process impacts self-esteem, motivation, and mental health, highlighting the urgent need for a more humane and inclusive approach to this category.

Finally, the disregard for manual labor, a legacy of a class-based social structure, reinforces historical inequalities. Overcoming this chasm requires adopting a paradigm of dignity that goes beyond pay or prestige, recognizing that every labor contribution is intrinsically valuable.

Conclusion

The work of hospital cleaning professionals is essential to the safety and operation of healthcare facilities. However, social invisibility and precarious working conditions place them in a situation of physical, emotional, and symbolic vulnerability.

The prevalence of outsourcing, combined with low levels of education and intense exposure to risks, reinforces the urgent need for public and institutional policies that promote better working conditions, ongoing training, psychosocial support and, above all, recognition of the dignity of this category.

Breaking with the logic of invisibility and devaluation is an essential condition for reaffirming the central role of manual labor in the hospital structure, consolidating a culture of respect and appreciation for all individuals who contribute to health promotion.

References

1. Do Nascimento JCP. A invisibilidade pública e social dos trabalhadores: uma revisão da literatura sobre trabalhos invisíveis na sociedade. *Rev Ibero-Am Hum Ciênc Educ.* 2022;8(12):149-60.
2. Pereira LAS, et al. Riscos ocupacionais no trabalho de limpeza hospitalar: percepções de especialistas em segurança e saúde do trabalhador. *Rev Enferm UERJ.* 2022;30:e67919.
3. Rocha MRA, Marin MJS, Macias-Seda J. Condições de vida, trabalho e saúde mental: um estudo com trabalhadores brasileiros e espanhóis que atuam em serviço de limpeza hospitalar. *Ciênc Saúde Coletiva.* 2020;25:3821-32.
4. Druck G. A terceirização na saúde pública: formas diversas de precarização do trabalho. *Trab Educ Saúde.* 2016;14:15-43.
5. Celeguim CRJ, Roesler HMKN. A invisibilidade social no âmbito do trabalho. *Interação Rev Cient Fac Am.* 2009;3(1):1-19.
6. Dejours C. Trabalho vivo. Vol. 2: Trabalho e emancipação. São Paulo: Editora Blucher; 2022.
7. Andrade CB, Monteiro I. Desvelando o trabalho e a saúde de trabalhadores(as) de limpeza hospitalar. *Trab Soc.* 2020;(34):109-22.

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