



Attention to human health: education and dialogue between service

Atenção à saúde do homem: interlocução entre ensino e serviço

Atención a la salud del hombre: interlocución entre enseñanza y servicio

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ABSTRACT

The study aimed to describe the experience of the Group for Study and Research on Men and Health, Federal University of Paraíba, as it developed health education activities during the first State Week of Attention to Men's Health, held at the institution's Center for Health Sciences, in order to contribute to the implementation of the National Policy for Integral Attention to Men's Health. During this process, important self-care deficits were discovered in this clientele, which have implications for determining the high rates of morbidity and mortality in men, demanding concrete actions and effective managers, professionals and education institutions, aiming at more effective inclusion this population segment in the services of Primary Health Care.

Keywords: Men's health; Health education; Primary prevention

RESUMO

O estudo objetivou descrever a vivência de ações de educação em saúde desenvolvidas pelo Grupo de Estudos e Pesquisas sobre Masculinidades e Saúde da Universidade Federal da Paraíba durante a primeira Semana Estadual de atenção à Saúde do Homem realizada no Centro de Ciências da Saúde na instituição supracitada, com o intuito de contribuir para a implementação da Política Nacional de Atenção Integral à Saúde do Homem. No processo, foi possível desvelar importantes *deficits* de autocuidado nesta clientela, que têm implicações na determinação dos altos índices de morbidade e mortalidade nos homens, exigindo, ações concretas e eficazes dos gestores, profissionais e das instituições de ensino, com vistas à inclusão mais efetiva desse segmento populacional nos serviços de Assistência Primária à Saúde.

Descritores: Saúde do homem; Educação em saúde; Atenção primária à saúde

RESUMEN

El estudio tuvo como objetivo describir la vivencia de acciones de educación en salud desarrolladas por el Grupo de Estudios e Investigaciones sobre Masculinidades y Salud de la Universidad Federal de Paraíba, durante la primera Semana Estatal de atención a la Salud del Hombre realizada en el Centro de Ciencias de la Salud en la referida institución, con la finalidad de contribuir a la implementación de la Política Nacional de Atención Integral a la Salud del Hombre. En el proceso, fue posible develar importantes *deficits* de autocuidado en esta clientela, que tienen implicaciones en la determinación de los altos índices de morbilidad y mortalidad en los hombres, exigiendo, acciones concretas y eficaces de los gestores, profesionales y de las instituciones de enseñanza, con miras a la inclusión más efectiva de ese segmento poblacional en los servicios de Asistencia Primaria a la Salud.

Descriptores: Salud del hombre; Educación en salud; Prevención primaria

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INTRODUCTION

The effectiveness of men's health-focused actions, aiming the prevention of aggravations, efficient diagnosis, treatment, rehabilitation, maintenance and health promotion, which are considered basic healthcare activities according to Ordinance n° 648-GM/2006⁽¹⁾, has been a challenge for healthcare professionals.

Understanding health phenomena related to such population generates a number of questions that involve, among other aspects, the health-disease determining factors, issues regarding gender, and the prematurity of the discussions, considering the health demands. Studies⁽²⁾ in this field mostly evidence an exploratory thought that follows the feminist theory and politics, and conceptually assume that experiencing the traditional masculinity causes a health deficit.

Such phenomena are reflected by the morbidity and mortality profiles related to male individuals. According to the Brazilian Department of Health⁽³⁾, more men die along life than women do, and many of such deaths could be avoided if men did not resist going to healthcare service centres.

The generating factors for such resistance have historically been related to different aspects, such as sociocultural aspects, which are linked to gender and issues regarding healthcare service centres. In this context, the Department of Health⁽³⁾ affirms that, with regard to the first factor, resistance comes from the fact a disease is considered a frailty sign, which men do not recognize as part of their biological condition; the institutional factors, on the other hand, are considered a problem due to the working hours and service dynamics, which are generally incompatible with males' work activities.

From the moment health was established as every person's right and a State's duty – operated through the *Sistema Único de Saúde* (*SUS* – Brazilian Health System) – modifications to the healthcare model have been receiving emphasis, aiming to prioritize the basic care level⁽⁴⁾. It is relevant to highlight that, although the terms 'Primary Healthcare' (PHC) and 'Basic Healthcare' (BHC) are used indistinctively, PHC is the internationally recognized and used terminology⁽⁵⁾. Considering that, the National Council of Health Secretaries adopted the basic healthcare naming standard to define PHC through the Family Health Strategy, and such designation was adopted by *SUS*, emphasizing the Healthcare Model reorientation⁽⁶⁾.

Primary Healthcare is the preferential doorway for the country's health system, and it represents an effort towards *SUS* consolidation, in an attempt of making it more efficient, strengthening the bond between the service and the population, thus contributing to everybody's access to health, and guaranteeing a more complete and equal healthcare⁽⁷⁾.

It is important to mention the male population low accessibility to primary healthcare services, which exposes a vulnerability point for such individuals. This is a public health problem, considering that, when such individuals finally go to a healthcare service centre, they normally present a chronicle morbidity picture that brings biopsychosocial impacts to their quality of life, and represents a significant burden for *SUS*.

Therefore, aiming to provide healthcare actions that focused on men's health, aged between 20 and 59 years, the Brazilian Department of Health presented, in 2008, one of the government priorities: the National Policy for Men's Integral Healthcare (PNAISH, in the Brazilian abbreviation).

To make such policy effective, institutional responsibilities were deliberated and defined according to the guidelines established by the Pact for Health, from 2006, for states do abide by. Among them is "promoting health information, education, and communication actions among the population, aiming to spread the proposed policy, as well as promote, within their competence area, the intersectoral and interinstitutional articulation, necessary for the Policy implementation⁽⁸⁾".

The Department of Health, through PNAISH, aligned to the PHC, which is the entry way to the *Sistema Único de Saúde* (Brazilian Healthcare System), has made consistent efforts to strengthen the development of actions and services aiming to prevent aggravations, promote diagnosis, treatment, rehabilitation, maintenance and health among the male population.

In this context, the Government of Paraíba State, through Law n.º 8,772 from 15/04/2009, established a Week for Men's Health in the State⁽⁸⁾. The first week was called "Warning for Men", and a set of actions was defined and executed during that week by the Paraíba State Department of Health, regional health management offices, and through governmental and non-governmental intersectoral partnerships, such as with higher education institutions.

Therefore, Universidade Federal da Paraíba (UFPB), through its Health Sciences Centre, and particularly through the Research and Study Laboratory on Masculinity and Health, which is connected to the Nursing Post-Graduation Program, took part in the week with actions aiming to provide education on health matters. Thus, the present article aimed to describe the actions developed by the Research and Study Group on Masculinity and Health of UFPB during the first Week for Men's Healthcare in the State, intending to contribute to the implementation of the National Policy for Men's Integral Healthcare.

REPORTING THE EXPERIENCE

In order to report the dialogue between education

and healthcare activities related to men's health, the methodological planning, followed by the action experience, will be described.

Action Methodological Planning

The participation of Universidade Federal da Paraíba through the Research and Study Laboratory on Masculinity and Health in the Week for Men's Health – "Warning for Men" – which took place from the 10th to the 14th of August 2009, was preceded by an invitation sent by the Paraíba State Department of Health, and planning meetings, organized by the Laboratory leader with its researchers, in order to define the educational actions on health that would be implemented for the male community.

In order to develop such actions, UFPB's Health Sciences Centre hall was chosen, due to the fact that a high number of men walk through it, among them, University employees and outsourced workers, students, and users of the services provided by the clinical units, which are part of the health courses offered by the Institution.

A stand was built at that location and educational material focused on Men's Health was available, as well as a male pelvis model and other equipment. Folders acquired along with the Paraíba State Department of Health and BEMFAM (Brazilian Well-Being Program for Families), were distributed to the public, emphasizing the main aggravations to men's health; banners on the theme were also built.

The development of actions promoting health and preventing aggravations among the male population was performed through a problematizing approach to education, presented by Paulo Freire, for according to the author, it enables reflection based on men's reality, making them feel like the action subjects, increasing their self-knowledge level⁽⁹⁾.

The group decided that an experience report would be elaborated, regarding the participation of the Research and Study Laboratory on Masculinity and Health members in the first Week for Men's Health in the state, aiming to cooperate with the implementation of the National Policy for Men's Integral Healthcare.

Experiencing Men's Healthcare

From the five days of event, the authors of the present report participated in three. On the first day, a stand was assembled and the educational material offered guidelines on the prevention of aggravations and men's health promotion. An example is the male pelvic model, used to demonstrate penis cancer prevention actions, and how to correctly use condoms, promoting safe sexual relations. A sphygmomanometer and a stethoscope were available for blood pressure checks, as well as a metric

tape, to measure the abdominal circumference and identify risk indicators for hypertension.

The reason why the above mentioned aspects received more attention is the high penis amputation rate, especially in the Northeast region, which presented a higher incidence⁽¹⁰⁾; besides that, circulatory diseases are the second main cause of male mortality in the age bracket 25-59 years old, according to the National Department of Health⁽³⁾.

Aiming to make the men's health educational actions effective, on the same day the stand was assembled men were actively brought to it from the Departments, Course Coordination offices, and other sectors of the Health Sciences Centre of UFPB. During such process, questions were asked to these men, aiming to collect information about their health and deconstruct the "magical thought", presented at PNAISH⁽³⁾, that rejects the possibility men ever get sick.

The planned actions were performed in a relational and dialogical way, considering the participants' experiences (re)building knowledge. Therefore, effective communication was the main used tool, aiming to confront the view that healthcare actions prioritize children, adolescents, women, and elderly people. Communication⁽¹¹⁾ is extremely important for the investigation of users' health problems, and to encourage them to express their feelings. It was possible to verify the communication importance throughout the educational actions focused on the male population on that week.

On the days that followed, demand for information occurred spontaneously; the same aspects defined for the health promotion and aggravation prevention actions related to the male population were maintained. The guidance also aimed to present and increase awareness about PNAISH and the educational actions for this group throughout Paraíba, related to the "Warning for Men" week, with the objective of generating awareness among such population about the *Sistema Único de Saúde*, through basic healthcare.

It is relevant to highlight that, during the actions execution, some men's reactions and attitudes towards the educational material were often laughter and embarrassment. When these reactions occurred, as well as on other cases, an ethical-professional approach was used, in an attempt to understand such reactions as a sociocultural response of one's masculinity, trying to value and use them in the construction of new learning that could be significant, that is, essentially respecting the apprentice⁽¹²⁾, which requires a sensitive, empathic, and careful listening of what they have to say.

The moments experienced among the male clientele represented an important space to provide self-care tools to men⁽¹⁰⁾, aiming to reduce morbidity and mortality rates due to preventable causes, as well as increase life

expectancy⁽³⁾.

It is also important to highlight that a lot of participants were surprised by the existence of a policy focused specifically on their health, and satisfied with the possibility of being included in the PHC services. This shows how responsible healthcare professionals have to be when preparing their actions. Such healthcare level, based on *SUS* principles, is characterized⁽⁵⁾ by continuous and coordinated actions, as well as an integral care approach.

It is possible to affirm that such clientele presents important self-care deficits, which has resulted in the occurrence of high morbidity and mortality rates, thus demanding consolidated and effective actions, aiming to include them to the PHC. Some attributes related to the masculinity⁽⁷⁾ are: invulnerability, low self-care and adherence to healthcare practices.

The implementation of educational actions focused on the male population is a great challenge for healthcare professionals, considering the academic educational deficit, as well as the continuous and permanent education

of professionals in this area. However, it is possible to observe, only very recently in the Brazilian reality, an attempt to reformulate course pedagogical projects, so as to also focus on the individuals in question and their needs, as well as attention from the Brazilian Department of Health⁽¹⁰⁾, aiming to qualify professionals in the area, as described in the National Plan of Action (2009-2011), to implement the PNAISH.

FINAL CONSIDERATIONS

The experience acquired during the “Warning for Men” week revealed, on one hand, the male population knowledge deficit with regard to health promotion and aggravation prevention, and on the other hand, the great challenge of implementing educational actions to break such individuals’ self-care deficits, as well as those presented by healthcare professionals. Therefore, the National Policy for Men’s Integral Healthcare is essential for an effective dialogue between education and the healthcare service centres.

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