



NURSING AND PUBLIC POLICIES ON MAN'S HEALTH

Jamile Filgueira de Almeida

Materdei Higher Education Institute, Street Leonardo Malcher, n° 1086, Manaus, Brazil.

ABSTRACT

The objective of this work is to verify the nursing care in men's health from the construction of the National Policy for Attention to Men's Health (PNAISH). Its specific objectives are: to identify the difficulties facing the realization of man's policy; list the main diseases that increase the male morbidity and mortality rate; highlight programs aimed at preventing men's health; show nursing care in men's health. The methodology used for the elaboration of this was bibliographic research, it is also a qualitative research that allows the study of knowledge and practices. It was found that the National Policy for Attention to Men's Health still needs to be closer to the reality of men, as they still need to go through this metamorphosis of knowledge regarding their rights acquired by the policy in action. Nursing in men's health needs to be increasingly prepared and organized, as well as carrying out its interventions with regard to caring for men's health, as it is a right that has been achieved through existing public policies.

KEYWORDS : Nursing, Man, Health, National Policy**INTRODUCTION**

In Brazil, health care is public and free of charge destined to all Brazilians without distinction. The creation of policies aimed at this context only adds to a better care with regard to the prevention and treatment of diseases affected by men, however, women for decades have fought and conquered more specific rights to their health than men. Since the creation of the 1988 constitution, several possibilities have opened up, new public policies have been developed to better serve and provide access to health.

Mortality rates, regardless of the causes, stand out the common evidence in health studies: more men than women die. Epidemiological coefficients reveal male mortality as 50% higher than female mortality, assuming its highest rate in the age group from 20 to 39 years old, in the ratio of three male deaths to one female (LAURENTI et. Al, 2005).

The index of neglect on the part of men with regard to their health was created by several programs, as well as strategies, with the objective of providing a more humanized reception within the context of several diseases most affected by men. Based on the above, in August 2008, in the milestones of the 20 years of SUS, through the Health Care Secretariat, of the Ministry of Health, PNAISH was created, whose main objectives are to promote health actions that contribute significantly to the understanding of the singular male reality.

The difficulty for men to seek early care with regard to health care, as well as the high mortality rate, is becoming increasingly relevant for society to implement public policies aimed at men.

METHODOLOGY

The research is a literature review, Boccato (2006) states that bibliographic research seeks to solve a problem (hypothesis) through published theoretical frameworks, analyzing and discussing the various scientific contributions. The research is qualitative and allows the study of knowledge and practices, as well as their relationships and questions in the specific context of the research (FLIK, 2009), so as to better answer the problem in question.

LITERATURE REVISION

The man is still seen as a being that has a self-resistant body, in this sense, according to Júnior and Maia (2009), they indicate that in our society, the male body is still seen as a resistant body that faces any difficulty. However, this body needs care mainly when it comes to preventive health.

For Schwarz (2012), the first studies about men's health appeared in the late 1970s, in the United States, mainly focused on health problems. Still according to the authors, their part pointed out that, although more powerful than women, men were at a disadvantage in relation to mortality rates.

Although there is a wide discussion about masculinity in the health area, in general, Gomes affirm, that there are still few studies on the

will of men to seek to have a healthy lifestyle.

It is likely that men prefer to use pharmacies or emergency rooms, as they would be seen more quickly and would be able to expose their problems more easily (FIGUEIREDO, 2005).

Research carried out in São Paulo, Brazil, according to Kalckmann (2005), with low-income men, on sexual health, concluded that there was a shortage and inadequacy of services for both men who depended on public health services and those who depended on plans.

In Brazil, it is clear that public health communication services and strategies favor health actions for children, adolescents, women and the elderly. In this sense, this finding has aroused, in recent years, the interest on the part of the Ministry of Health, in discussing and promoting the relationship of men with primary health care services, which have difficulties in triggering prevention and health promotion practices for men. (BRASIL, 2008).

PNAISH came up with this proposal to meet the male demand due to the mortality rate among men, in addition to proposing a quality of care with regard to male health, as all of this influences the same living conditions.

PNAISH has great challenges with regard to its effectiveness, in this sense, it is up to men to fight for these rights already achieved through this policy. Thus, it is important to provide humanistic assistance by managers in addition to the professionals who are in the process of becoming effective.

It is necessary to strengthen and qualify primary care, thus guaranteeing health promotion and prevention of preventable diseases. Several comparative studies, between men and women, have proven the fact that men are more vulnerable to diseases, especially to serious and chronic illnesses, and that they die earlier than women (PNAISH 2008).

The Ministry of Health recognizes the need for greater investment, aiming at improving access to health services. In this sense, some goals were established in an attempt to expand SUS with quality work and, among these, is the implementation of actions aimed at the Attention to Men's Health (BRASIL, 2008). In this sense, to prevent the main diseases that affect men.

CONCLUSIONS

The creation of PNAISH in Brazil represents an achievement, as it is the first country in Latin America to implement a policy focused on men's health. Based on this achievement, there is a need for inspection, as well as monitoring by those who are ahead, because only then will PNAISH become a policy of effective service with regard to the health of the male population.

Neglect with male health also has a cost for the State, because according to doctors and other nursing professionals, prevention has a

lower cost benefit, as well as a greater chance of the patient being cured in men.

The results of this study can collaborate for future research, as well as making it possible for nursing professionals and managers to understand the difficulties and reasons why men leave health services and, of course, to propose new ways to bring the male population in the future. services offered to your preventive health care

REFERENCES:

- [1] LAURENTI, R. et al. Perfil epidemiológico da morbimortalidade masculina. *Ciência e Saúde Coletiva*, Rio de Janeiro, v. 10, n. 1, p. 35-46, 2005. <http://www.scielo.br/pdf/csc/v10n1/a04v10n1.pdf>
- [2] BOCCATO, V. R. C. Metodologia da pesquisa bibliográfica na área odontológica e o artigo científico como forma de comunicação. *Rev. Odontol. Univ. Cidade São Paulo*, São Paulo, v. 18, n. 3, p. 265-274, 2006.
- [3] JÚNIOR, Florêncio Mariano da Costa. MAIA Ana Cláudia Bortolozzi. *Concepções de Homens Hospitalizados sobre a Relação entre Gênero e Saúde*. 2009, Vol. 25 n. 1, pp. 055-063. Disponível em <<http://www.scielo.br/pdf/ptp/v25n1/a07v25n1.pdf>> acesso em 4 de fevereiro de 2020.
- [5] SHWARZ, Eduardo. Et al. *Política de Saúde de Homem*. Disponível em: <http://www.scielo.br/pdf/rsp/v46s1/co4221.pdf>. 2012. Acesso em 4 de fev. de 2020.
- [6] FIGUEIREDO, W. *Assistência à saúde dos homens: um desafio para os serviços de atenção primária*. *Ciência Saúde Coletiva* 2005; 10:105-9.
- [7] BRASIL. Ministério da Saúde. *Secretaria de Atenção à Saúde. Departamento de Ações Programáticas Estratégicas. Política Nacional de Atenção Integral à Saúde do Homem (princípios e diretrizes)*. Brasília, 2008
- [8] PNAISH-Política Nacional de Atenção Integral a Saúde do Homem, disponível em: <http://www.bvsm.sau.gov.br>. Acesso em 4 de fev. de 2020.
- [9] Ministério da Saúde. Brasília-DF, dezembro 2000. Disponível em: <http://bvsm.sau.gov.br/bvs/publicações/sus/principios.pdf>. Acessado em 4 de fev. de 2020.
- [10] Soares, F. S. P., de Almeida, F. P., Silva, G. M., Andrade, K. G. D. O., & Peixoto, S. L. *Fatores emocionais e como eles influenciam na aquisição do segundo idioma emotional factors and how them influence the acquisition of the second language*.