

## EXPANDING THE FOCUS ON MEN'S HEALTH IN A MUNICIPALITY IN WESTERN SANTA CATARINA: STRATEGIES IN PRIMARY CARE

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**Abstract:** Embracing human suffering is not an easy task, and requires support and preparation, creating ways to develop knowledge about humanization so that we understand what ideal reception is, through the eyes of those who perish. Therefore, this subject was chosen due to the need for humanization and reception for men in basic health units. Humanization corroborates the theme, proving to be relevant in healthcare services. Since the service provided in principle includes comprehensive assistance, participation of the user and companion, among others, it revives the review of good service practices, and values the dignity of the user. With this, the objective is to promote men's health by emphasizing primary care when planning and programming actions in relation to male users in basic health units in the municipality of Caçador, Santa Catarina.

**Keywords:** Health. Man. Care.

## INTRODUCTION

Several comparative studies prove that male individuals are more vulnerable to various diseases (mostly serious and chronic), having a lower life expectancy than female individuals, and dying prematurely (NARDI et al., 2007). Men do not seek primary care services in the same way as women, due to their greater vulnerability and high morbidity and mortality rates. Thus, it is clear that many situations and diseases could be avoided if men carried out all primary health care and prevention procedures (FIGUEIREDO, 2005; PINHEIRO et al., 2002).

Resistant to prevention and self-care services, most men seek health care late, placing a financial burden on society (with increased treatment costs for a now worsening problem) and, above all, generating physical and emotional suffering for the patient. and his family in the fight to preserve their health and quality of life (MINISTRY OF HEALTH,

2008).

An issue pointed out by men for not seeking health services is linked to their position as provider, as they claim that the opening hours of health services coincide with their working hours. It cannot be denied that in men's concerns, work has a prominent place, especially among people of low social status, which reinforces the role historically attributed to men as being responsible for supporting the family (MINISTRY OF HEALTH, 2008).

Although this may constitute a major barrier, in many cases it must be highlighted that a large proportion of women from all socioeconomic categories are now part of the productive force in the labor market, and that they do not stop looking for health services (MINISTRY OF HEALTH, 2008).

Therefore, it is clear that part of the non-adherence to comprehensive care measures, on the part of men, stems from culture. Men have difficulty recognizing their respective needs, rejecting the possibility of becoming ill. Thus, the following project was developed with the aim of minimizing illness in the male population, based on the promotion of men's health in primary care, due to men's difficulty in recognizing their respective needs, rejecting the possibility of becoming ill.

## **METHODOLOGY**

The present study constitutes qualitative research with the clear purpose of implementing strategies aimed at promoting men's health in basic health units in the municipality of Caçador, Santa Catarina. To achieve this objective, the research involved a practical approach that included home visits by Community Health Agents (CHA) to identify patients. Furthermore, a comprehensive awareness campaign was undertaken, based on various means, such as videos, folders, posters and the strategic use

of social media. This work, therefore, stands out not only for its qualitative nature, but also for the integrated and multifaceted approach adopted to effect concrete improvements in the promotion of men's health in the local community. The qualitative research carried out to implement actions to promote men's health at the Basic Health Unit in Caçador adopted an interpretative approach. The aim was to understand not only objective patterns, but also the perspectives, attitudes and experiences of the individuals involved, including both patients and healthcare professionals. As for the data search methodology, this involved an effective foray into the field through home visits, allowing the direct identification of patients, offering a close and contextualized view of health conditions and the specific demands of the community.

## **THEORETICAL FOUNDATION**

### **WELCOME**

According to Bork (2005, p. 36), accepting human suffering is not an easy task, it requires support and preparation. Therefore, we need to create ways to develop knowledge about the art of welcoming, so that we can see what the ideal welcome is, through the eyes of those who perish.

It is the role of the health team to welcome the user, from the moment they arrive, taking full responsibility for them when listening to their complaints, allowing the expression of concerns and anxieties, and at the same time, setting the necessary limits, ensuring resolute attention and coordination with other health services for continuity of care when necessary (CIAMPONE M.H. T. et al, 2004).

## **HUMANIZATION OF ASSISTANCE**

The theme of humanization is relevant in health care, since care carried out based on principles such as comprehensive care, user and companion participation, among others, rescues the review of good care practices, and values the dignity of the patient. user. Humanization sometimes appears to be closely linked to the daily hustle and bustle, lack of time and the stress of the work environment (CIAMPONE M.H.T et al, 2004).

It is essential that before thinking about walls, furniture and equipment, first consider the physical and emotional well-being of the user/companion and employees, as the humanized structure will emerge from their needs. However, there is a need to prepare family members, as well as the team, so that both interact for the benefit of the patient (BORK, 2005).

## **THE BASIC HEALTH UNIT**

Demand for health services can be understood as an explicit request that expresses all the user's needs. It can be carried out through consultation, access to exams, consumption of medicines, carrying out procedures, among other services that guide its offer (SILVA et al, 2000).

## **MEN'S HEALTH**

The promotion of men's health is the awareness of the body and the possible process of illness. It is noted that men enter the health service, generally looking for late treatment, resulting in an increase in morbidity and mortality. The promotion of men's health and the search for health by men must be a common element present in the daily life of basic health units, since prevention is better than treating any problem (CIAMPONE, M.H. T. et al).

To achieve this, the conception that man is the provider and never gets sick, being

an unshakable individual must be modified taking into consideration, that this is actually a social stigma inherent to the culture. Furthermore, it is necessary to recognize the importance of the activity of the family health team in this field of action, since mediation by the SUS gateway guarantees universal health with equal care, which has been strengthened through policies public (CHAKORA, E. S 2014).

Furthermore, studies have found that men make little use of health services, especially with regard to basic care. Therefore, professional guidance has a great contribution to promoting the encouragement and implementation of practices in favor of health promotion (DA ROCHA, J. et al. 2014).

In view of the above facts, in 2008, the National Policy for Comprehensive Attention to Men's Health (PNAISH) was launched in Brazil, which aims to serve the male public from 20 to 59 years old, with the aim of introducing men into the health service in a qualified manner, generating acceptance and equity in care, thus reducing rejection of prevention by men by providing awareness (SCHWARZ, A. et al. 2012).

## **RESULTS AND DISCUSSION**

The campaign to promote men's health began in October 2021, with home visits focused on men carried out weekly. There was collaboration with the Caçador Health Department. During the development of this project, several topics were addressed according to the patients' doubts and needs, allowing them to freely question the subject. It is believed that the implementation of this awareness was extremely important, as it was possible to identify a certain fear when seeking help and great doubts about self-care. Regarding the project's objectives, the aim is to expand reception and raise awareness among male users about health care in primary

## SCHEDULE

2nd semester of 2021							
Developed activities	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
Literature review							
Theoretical development of the project							
Preparation of all necessary materials							
Application of the Project at UBS							
Return of the affected group and Presentation of Partial Results							
SEDEPEX Submission							

1st semester/2022					
Developed activities	FEBRUARY	MARCH	APRIL	MAY	JUNE
Return to activities					
Continuation of project application at UBS					
Evaluation and organization of results					
Preparation and Delivery of Partial Report					
Feedback from the beneficiary institution – UBS Berger					
Final Report Delivery					
SEDEPEX Submission					

SOURCE: THE AUTHOR (2021)

care. The aim is, specifically, to achieve an improvement in the quality of men's health, to develop activities such as the dissemination and implementation of humanization and welcoming actions, as well as to carry out promotion, prevention, tracking/early detection of problems.

### FINAL CONSIDERATIONS

Based on the data presented in this project, we can conclude that it is crucial to raise awareness in primary care, since males are often prone to seeking help and care late. The work met the identified needs, serving as a stimulus for male professionals and individuals to engage in health promotion.

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