IMPLEMENTATION OF THE NATIONAL POLICY FOR INTEGRAL ATTENTION TO MAN’S HEALTH FROM RADIO PROGRAM: CASE STUDIES

ABSTRACT
Objective: describing the actions taken to raise awareness of men to participate in actions of health promotion and disease prevention from a radio show. Method: a descriptive study, experience report of actions conducted by Radio Program for the male population awareness on health promotion and disease prevention held in the Family Health Strategy of the Municipality of Rio Grande do Piauí/PI, Brazil. This study was approved by the Ethics Committee of Uninovafapi, CAAE: 31072214.2.0000.5210. Result: of the 384 people participating, 179 made measuring blood pressure, 143 blood glucose test, 205 attended the lecture on Prostate Cancer Prevention. Conclusion: the Radio Program can contribute to health promotion, educating people, implementation of the National Policy for Integral Attention to Men’s Health. Descriptors: Men’s Health; Health Promotion; Disease Prevention.

RESUMO

RESUMEN
Objetivo: describir las medidas adoptadas para aumentar la conciencia de los hombres a participar en las acciones de promoción de la salud y prevención de enfermedades a partir de un programa de radio. Método: este es un estudio descriptivo, reporte de experiencia de acciones realizadas por el Programa de Radio para la conciencia de la población masculina en la promoción de salud y prevención de enfermedades, celebrada en la Estrategia de Salud de la Familia de la Municipalidad de Rio Grande do Piauí/PI, Brasil. Este estudio fue aprobado por el Comité de Ética de Uninovafapi, CAAE: 31072214.2.0000.5210. Resultado: de las 384 personas participantes, 179 hicieron medir la presión arterial, 143 prueba de glucosa en la sangre, 205 asistieron a la conferencia sobre la Prevención del Cáncer de Próstata. Conclusión: el Programa de Radio puede contribuir a la promoción de la salud, la educación de las personas, la implementación de la Política Nacional de Atención Integral a la Salud de los Hombres. Descriptors: Salud del Hombre; Promoción de la Salud; La Prevención de Enfermedades.
INTRODUCTION

During the time when it was discussed in several spaces, the relevance of gender relations in social and health-disease process and with respect to health practices related to men, it shows the need for a public health policy aimed at the male population. Establishing, then, the National Policy for Integral Attention to Men’s Health, (PNAISH) formalized on 27th of August, 2009. Since then, in Brazil, human health has been inserted gradually in the public health agenda, from Primary Care and at all levels of government.1

The importance given to Human Health Policy highlights through assistance directed at the man with the effective practice of protective actions, health promotion and disease prevention, which may reduce male mortality by preventive and preventable causes, contributing to increase the life expectancy of this population.1

The implementation of PNAISH meets a desire of society to recognize that injuries and diseases of the male population are public health problems. Thus, the Ministry of Health established in 2008 the National Policy for Integral Attention to Men’s Health (PNAISH), launched in 2009. The policy seeks to strengthen health promotion and disease prevention through actions that are designed with the primary care professionals. In addition to promoting within their powers inter-sector collaboration with, in the community and other civil organizations, proposals for attention to men’s health with quality and effectiveness, essential to create mechanisms consolidation and qualification of primary care.2

It should be noted that under the Primary Health Care should be presented as an proper care space to implement actions and strategies that target social, economic, biological and cultural determinants of the health/disease/health promotion in order to accomplish through practice of health promotion, disease prevention and health education.3

Among the forms and tools used for health promotion, radio is considered as a means conducive to disclosure of various themes, including health-related, due to its peculiar features as language, low cost and mobility, factors that enable the transmission of information to a more heterogeneous audience, considering social factor, cultural and gender issues.3

Radio stations, in turn, must also take educational role and provide services and therefore give priority themes of social relevance such as scientific disclosure in relation to social welfare, quality of life related to the care of health and disease prevention. It is a free access of vehicle and available in the most remote places of residence people eager to improve knowledge about the health/disease process.3

The National Policy for Integral Attention to Men’s Health gradually has been inserted in the health services; one must consider that it is a policy formulated for a short time and needs to be widely discussed and implemented. From this thought became interested in making use of a radio program to disseminate policy and sensitize the subject himself “the man” as co-responsible for the care of his health. In order to promoting changes in thinking of the male population becoming co-participant of health promotion and disease prevention process.1,4

From this perspective, this study aims to describe the actions taken to raise awareness of men to participate in actions of health promotion and disease prevention from a radio show.

METHOD

This is a descriptive, experience report awareness of men in health promotion and disease prevention held in a FHS of Rio Grande do Piauí/PI, Brazil, from a radio program.

In the production of radio activity is looked as a radio program can contribute to health promotion strategy, implementation of PNAISH and awareness of the male population in the pursuit of health promotion and disease prevention.

We used communication vehicle also to make a collective call of the male audience to participate in an action in culmination to education and health promotion and disease prevention, which was held in the municipal town in a Gym, with the participation of health professionals with the performance of tests of blood glucose, blood pressure measurement, distribution of educational flyers and a lecture with the theme “Prostate Cancer Prevention”, focusing on support for “Blue November” campaign.

Thus, it stresses that communication through radio, in addition to reaching the long distance, still favor the mass media to have accessible language that facilitates understanding of the information by the public and encourages the pursuit of knowledge adapted to the daily lives of the listeners, of clear and attractive way.

Participants of the action as health promoters, has been a Nurse (Master’s student of Health Family Program of UNINOVAFAPI
University Center), the Guidance and five (05) students of the Nursing Technical Course; counting even with the contribution of the City Health Department and Director of a Municipal Hospital, which had provided some necessary materials, such as tape and lancets for capillary glycermia test.

Related to invited participants, 384 people attended the event, and the prevalence was the male audience (356) and only 28 were women. Of this number 179 made measuring blood pressure and 143 were examined blood glucose. To talk about prevention of prostate cancer, the public was of 205 participants.

Everyone who attended the event received the explanatory folder about Prostate Cancer and a blue ribbon as a symbol of the campaign “Blue November”.

Data production took place in various stages, in stage 1 there were prepared the material to publicize the event and call of the male population, in stage 2 there was held an interview on Radio FM Grande Rio, explaining the National Policy for Integral Attention to Men’s Health and making the invitation to the male population participate in the action for health promotion and disease prevention. Although three CDs were produced two shaped “programei” to be passed on Radio 12 shows daily for 30 days. The first CD approached on PNAISH and the second CD explicit health promotion on some diseases such as hypertension, diabetes and prostate cancer and the third CD was an invitation to the public to participate in action in favor of human health.

We study the research project approved by the Ethics Committee of Uninovafapi, CAEE: 31072214.2.0000.5210.

RESULTS

The use of a Radio Program for Health Promotion Strategy was another initiative used by the Master of the Master’s Program in Health of the University Center UNINOVAFAPI in health promotion of men. The idea came from the time they felt the need to present the attention of National Policy Integral to Men’s Health, to promote health and prevent diseases, as well as make a call of the male population to participate in an event related to care to human health with actions aimed at prevention of Prostate Cancer, Diabetes and Hypertension. About the proposed action there was promoted health education through distribution of educational flyers and lectures. Taking advantage of the time that had occurred the campaign “Blue November” to support the prevention of prostate cancer.

The initiative proposed among other actions to seek and expand health care forms, which is not limited only to spontaneous search for the male audience to health services, but that evokes this audience to be promoters of their own health and encourage improvements in quality life, and beyond disease prevention and health promotion through the educational process, sensitization and awareness, we intend to expand actions for search strategies of Social Welfare.

Disease prevention and health promotion articulated integrated into the health recovery work, thinking up so the concept of universality and comprehensiveness of health care, seeking to increase the areas, promoting broad spectrum in order to bring knowledge about the health of the male population and the general community in order to make them aware of co-participation in the health disease process.

Studies present a radio program as a means of mass communication that enables greater optimization of collective actions making room for that community members can give their evidence and explain their views of reality and understanding of logic. Which leads to popular education, with its appreciation of popular knowledge and exchange of knowledge, contributing to the quest of community autonomy and flexibility of character for the actions of free individual initiative of the project participants highlighting the potential and abilities of each one with volunteer spirit and commitment which are valued practical and concrete actions work, conscious informally that generates a great power of creation, for this type of action resulting from transformation and recovery of citizenship.5

I have focused on the male population we used the proposal as a way to promote opportunity for the men were aware of the National Policy for Integral Attention to Men’s Health.5

Implemented by Ordinance No. 1994 of 27th of August, 2009; the National Policy for Integral Attention to Men’s Health (PNAISH), has as its key objective: promoting the improvement of health conditions of the male population of Brazil in reducing morbidity and mortality of this population, instituting measures to facilitate access to stock and comprehensive care services to health.1,6

Thus developed an action to promote the male public opportunity to participate, gain skills and become promoters and co-participants in health care.
Most of the population served was male, 92.7%, only 7.3% were female. It was considered the presence in most of the male, due to the invitation to participate in health promotion have been directed to this public action, because it is the implementation of the National Policy for Integral Attention to Men's Health (PNAISH).¹

It is notable that the male population presents significant morbidity and mortality index representing a serious public health problem. It is to consider male mortality indicators which have a significant degree of elevation in relation to female mortality rates. Thus, the health minister, considering the need to establish a health care network that ensures a specificity of focused comprehensive care for the male population and the need to prioritize actions and health promotion activities to facilitate and expand access to health services by the target audience and institute under the Unified Health System (SUS), the National Policy for Integral Attention to Men's Health to promote the improvement of health conditions of the Brazilian male population.¹

Thus, it highlights the need for change in thinking of the male population as co-participant care of their own health and that of their families. The policy proposes the creation, deploy, qualify and humanize, in all spheres of government, comprehensive care to human health, as one of the main points is to promote the improvement of the health condition of men, with regard to health promotion and prevention of diseases and disorders. The PNAISH points the social determinants of vulnerability of the male population to diseases, noting that the lack of awareness of men to health services is a cultural factor genre with a view that the disease expresses the fragility.⁷

Among the diseases of the male population, is the Hypertension with high Indian co-morbidity. Thus was held blood pressure measurement of the target audience.

### Table 2. Classification of blood pressure (BP) in accordance with the measure of Office for persons over 18 years old (participants of the action in health promotion), Rio Grande (PI), 2014.

<table>
<thead>
<tr>
<th>Classification BP</th>
<th>Systolic Blood Pressure</th>
<th>Diastolic Blood Pressure</th>
<th>n</th>
<th>Percentage %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>≤ 120</td>
<td>≤ 80</td>
<td>97</td>
<td>54.18</td>
</tr>
<tr>
<td>Normal</td>
<td>≤ 130</td>
<td>≤ 85</td>
<td>21</td>
<td>11.73</td>
</tr>
<tr>
<td>Borderline</td>
<td>≤ 130 - 139</td>
<td>≤ 85 - 89</td>
<td>07</td>
<td>3.91</td>
</tr>
<tr>
<td>Hypertension Stage I</td>
<td>140 - 159</td>
<td>90 - 99</td>
<td>47</td>
<td>26.25</td>
</tr>
<tr>
<td>Hypertension Stage II</td>
<td>160 - 179</td>
<td>100 - 109</td>
<td>07</td>
<td>3.91</td>
</tr>
<tr>
<td>Hypertension Stage III</td>
<td>≥ 180</td>
<td>≥ 110</td>
<td>00</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>179</td>
<td>100</td>
</tr>
</tbody>
</table>

According to the blood pressure classification, most of the participants showed great 54.18% pressure (systolic blood pressure ≤ 120 and diastolic blood pressure ≤ 80), and only a small portion 3.91% was indicative of blood pressure Borderline (systolic blood pressure ≤ 130-139 ≤ 80 and diastolic blood pressure ≤ 85-89) the same percentage had Stage II hypertension (systolic blood pressure 160-179 and diastolic blood pressure 100-109). Systemic Hypertension (SH) is diagnosed by detection of high and sustained levels of blood pressure (BP) by casual measurement. BP should be held throughout evaluation by physicians of any specialty and other health professionals. Pressure measurement procedures are simple and easy to perform.⁶

Of the 145 participants who underwent blood glucose presented the following results.
According to the obtained results, the majority of respondents 65 (44.82%) had great value of blood glucose and only 01 (0.6) presented an increased blood glucose level (between 201-220 mg/dl), considered diabetes mellitus if followed by classic symptoms.

However, the diagnosis of diabetes should always be confirmed by repeat testing on a different day unless unequivocal hyperglycemia with acute metabolic decompensation or obvious symptoms of diabetes mellitus.⁸

Table 3. Plasma glucose values (in mg/dl) performed by means of capillary glycemia (casual). Rio Grande (PI), 2014.

<table>
<thead>
<tr>
<th>Capillary glycemia</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>60 - 99</td>
<td>65</td>
<td>44.82%</td>
</tr>
<tr>
<td>100 - 120</td>
<td>55</td>
<td>37.93%</td>
</tr>
<tr>
<td>121 - 140</td>
<td>20</td>
<td>13.79%</td>
</tr>
<tr>
<td>141 - 160</td>
<td>02</td>
<td>1.3</td>
</tr>
<tr>
<td>160 - 200</td>
<td>02</td>
<td>1.3</td>
</tr>
<tr>
<td>201 - 220</td>
<td>01</td>
<td>0.6</td>
</tr>
<tr>
<td>Total</td>
<td>145</td>
<td>100%</td>
</tr>
</tbody>
</table>

There are three accepted criteria for the diagnosis of diabetes mellitus with use of glucose: a) symptoms of polyuria, polydipsia and weight loss plus casual plasma glucose ≥ 200 mg/dl. It is considered that random blood glucose performed at any time of day, regardless of mealtime; b) fasting glucose, minimum of eight hours without caloric intake ≥126 mg/dl; c) glucose after 75g glucose ≥ 200 mg/dl.⁸

CONCLUSION

The radio program can contribute significantly in health promotion strategy, educating people, as well as in the implementation of the National Policy for Integral Attention to Men’s Health.

In the action taken to promote health and disease prevention, awareness of the male population it was observed with respect to health care and acquisition of knowledge about disease prevention.

Thus emphasize that activities in health care for the man must be carried out more often, and the radio program showed satisfactory as a communication vehicle to disseminate knowledge and sensitize the population to participate in the actions developed in health promotion and disease prevention.

REFERENCES

5. Rocha VXM, FM F, Libório L, Cortês E, Chagas R, Rossini M, Vasconcelos EM.

Table 4. Plasma glucose values (in mg/dl) for diagnosis of diabetes mellitus and its preclinical stages. Rio Grande (PI), 2014.

<table>
<thead>
<tr>
<th>Category</th>
<th>Fasting</th>
<th>2 hours after 75 g Of glucose</th>
<th>Casual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal Glycemia</td>
<td>&lt; 100</td>
<td>&lt; 140</td>
<td>-</td>
</tr>
<tr>
<td>Impaired glucose tolerance</td>
<td>&gt; 100 a &lt; 126</td>
<td>≥ 140 a &lt; 200</td>
<td>-</td>
</tr>
<tr>
<td>Diabetes mellitus</td>
<td>≥ 126</td>
<td>≥ 200</td>
<td>≥ 200 (with classic symptoms)</td>
</tr>
</tbody>
</table>