

Men as a focus for Public Health

The first possible reaction to proposing men as a focus for Public Health is that such a proposal may be read as contrary to the gender perspective, an approach that has become increasingly consolidated over the years. However, a closer look at the issue may indicate that to focus specifically on either men or women does not necessarily jeopardize the relational dimension of gender, since masculinity can only be viewed in relation to femininity, and vice versa. In this sense, to propose men as a focus for Public Health means, among other things, to pursue the uniqueness of one of the halves in the relationship and to highlight new demands for “re-signification” of maleness arising from shifts in the field of gender, in order to seek appropriate strategies in the field of health.

There is not exactly an invisibility of men on the Public Health agenda, since males have always been present both in the sphere of health services and the academic community as subjects or targets of actions. However, since the 1990s the theme of *men and health* has been consolidated as a demand that requires a differentiated focus. In recent years the theme has been traversed by discussions on the specificities and unequal distribution of power between the genders, related to socio-cultural issues and the singularities of health and disease among various male segments.

Specifically in the field of services in Latin America, there has been an increase in programmatic actions targeting males vis-à-vis sexuality, reproduction, fatherhood, and violence, seeking to capture male participation in achieving the objectives of these actions. In academia, studies on masculinities conducted mainly in the sphere of social sciences have identified links between the construction of maleness and the health-disease-care process.

The social sciences have made particularly relevant theoretical and methodological contributions to this approach in Public Health. Domestic and international socio-cultural studies on the construction of maleness point to the identity traits of a hegemonic view of maleness. Such traits are largely expressed by the following: the adoption of an almost exclusively active status; the belief that men must show invincibility; the association of maleness with the need to expose oneself to risk; taking for granted a lack of male sexual control; and the reduction of male sexuality to penetration. In light of this model of masculinity, studies have also emphasized that one cannot rule out the possibility that normative social aspects may be altered or re-signified by the subjectivity of social actors.

In short, inferences from this discussion refer to the idea that man, when influenced by hegemonic gender ideologies, may place both woman’s health and his own at risk. In this sense, an understanding of these and other issues by Public Health can create a new focus for dealing with certain forms of illness and for both male and female health promotion.

Finally, the recent interest in delving more deeply into the issue of male health promotion will mean new research undertakings and political and programmatic incursions into the universe of masculinities and the relations between men and women.

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