

Gender, masculinities, and health in review: production of the field in the journal *Saúde e Sociedade*

Gênero, masculinidades e saúde em revista: a produção da área na revista *Saúde e Sociedade*

Marcia Thereza Couto

University of São Paulo. School of Medicine. Department of Preventive Medicine. São Paulo, SP, Brazil.
E-mail: marthet@usp.br

Suellen Maria Vieira Dantas

University of São Paulo. School of Medicine. Department of Preventive Medicine. São Paulo, SP, Brazil.
E-mail: dantas_suellen@yahoo.com

Abstract

This article analyses the bibliographical production on the theme of gender, masculinities and health published in the journal *Saúde e Sociedade*. The method used was the literature review of narrative, of qualitative character, which addressed the search according to the descriptors “gender” and “masculinities” on all issues of the journal which are available in the SciELO system. 49 abstracts were selected for descriptive analysis; among these, 13 articles that focused on men and women or which used only men as subjects of analysis were analysed in depth. The narrative analysis of the articles and the comparison with the themes, objects and conceptual perspectives of the field of Public Health point to the expansion of the field of research on gender, masculinity and health, but also to the incipient character of conceptual approaches, especially regarding the intersectionality of gender and other social markers of difference, such as social class, generation and sexuality. This critical review evidences an expanding research field in terms of its strengths and weaknesses.

Keywords: Literature Review; Qualitative Research; Gender and Health; Masculinities.

Correspondence

Marcia Thereza Couto
Dr. Arnaldo Av., 455, 2nd floor, room 2177.
São Paulo, SP, Brazil. CEP 01246-903.

Resumo

Este artigo analisa a produção bibliográfica sobre a temática de gênero, masculinidades e saúde publicada na revista *Saúde e Sociedade*. O método se constituiu de uma revisão bibliográfica de narrativa, de caráter qualitativo, que abrangeu a busca segundo os descritores “gênero” e “masculinidades” em todos os números da revista disponibilizados no sistema Scielo. Foram selecionados 49 resumos de trabalhos para análise descritiva; entre esses, foram analisados em profundidade treze artigos que apresentavam enfoque em homens e mulheres ou que utilizavam apenas homens como sujeitos de análise. A análise narrativa dos artigos e o cotejamento com temas, objetos e perspectivas conceituais do campo da saúde coletiva apontam para a expansão da área de investigação em gênero, masculinidade e saúde, mas também para o caráter incipiente das abordagens conceituais, especialmente quanto à interseccionalidade de gênero e outros marcadores sociais da diferença, como classe social, geração e sexualidade. Esta revisão crítica mostra uma área de pesquisa em expansão, em termos de suas potencialidades e fragilidades.

Palavras-chave: Literatura de Revisão; Pesquisa Qualitativa; Gênero e Saúde; Masculinidades.

Introduction

Researches on gender in Health constitute a complex and relational field with great possibilities of development. Complex, because it encompasses topics (health, illness and care) that can be addressed both by the fields of Health and Humanities and by the Social Sciences, independently, from a perspective of conciliation and collaboration between them. Relational, and with great possibilities of development, to the extent that different issues have been discussed, bypassing the process of illness and death, the modes of assistance and health care, the formulations in terms of social policies geared towards populations of men and women and, also, the training of professionals in the field of Health.

Originally, the application of the perspective of gender in researches in the field of Health occurred in themes of Reproductive Health and, in particular, in investigations that favored the female pole (maternal death, cesarean delivery, breastfeeding, cervical and breast cancer, among others). In the last two decades, studies began to revisit themes that used to be considered from the perspective of women (abortion and decision of labor procedure) and which focus attention on issues that require a relational approach of gender (male and female poles), such as violence, contraception, sexually transmitted diseases and HIV/aids. Such configuration is due, in part, to the fact that the category “gender” has emerged in the field of feminist reflection, which, having initially focused attention on women, began to gradually incorporate the male pole into investigations (Couto; Schraiber, 2005).

In Brazil, the penetration of the gender perspective in Health and, in particular, in the field of Public Health, has been following the international developments, in terms of the growth in the number of publications, mainly from the 2000s (Araújo; Schraiber; Cohen, 2011) and of theoretical-methodological debates. Publications geared towards the surveying and the reviewing of the national production (Aquino, 2006; Vilella; Monteiro; Vargas, 2009; Araújo; Schraiber; Cohen, 2011) highlight the main themes that incorporate gender perspective - sexu-

ality, reproduction, harms to health, gender violence and its variations, work and masculinities, plus other emerging or seldom explored themes, such as aging and mental health. Regarding the subfields of Public Health - Humanities and Social Sciences, Epidemiology and Policies, Planning and Evaluation -, the latter is the one that least incorporated the gender approach in researches (Aquino, 2006).

According to the international review of Hammarström et al. (2014), these authors stress that, despite the increasing incorporation of the term in researches in the field of Health, especially in Public Health, the theoretical and epistemological reflections are still scarce and incipient. Additionally, in the case of intersectional approaches of gender and other social markers (class, race/color, sexuality, generation), they warn about the difficulty of incorporating them even in studies that are situated in the field of Gender and Health, which demonstrates that intersectionality is a very recent trend, but still seldom explored. Aquino (2006) points out that the use of gender transversality is challenge and potentiality at once. The gender perspective offers broad possibilities for enrichment of theoretical reflection on Health and, particularly, on Public Health. Gender, therefore, “must be added to other intellectual and political efforts for the understanding of the health-disease process and its determinants in the struggle against inequalities and for social justice” (Aquino, 2006, p. 128, free translation).

When focusing attention on the debate on the relationship between men and health from the perspectives of gender and masculinities, it is possible to see that about 40 years ago the first studies on the subject emerged in the United States, focusing mainly on the health deficits of male segments. Researches initially dealt in the investigation and answer to the paradox that, while men had greater power than women, they had disadvantages in what concerns the rates of morbidity and mortality (Gomes; Nascimento, 2006; Couto; Gomes, 2012). This paradox, among other ideas, propelled, from the early 1990s, researchers to focus on men not just as male bodies in the studies on the Health field, but also within the context of their singularities as social subjects in the health-disease process, based

on a relational perspective of gender. In short, in its recent history, it is possible to see that at some moments the debate on the relationship between men and health distanced itself from that which is the original primacy of gender studies (focus on the inequalities of women compared to men), due to the character of autonomy that part of the researchers sought for in the field of men’s studies. At other moments, however, this debate helped to relativize some reductions in gender studies exclusively geared towards women.

Focusing on the particularization of the way gender approach penetrated into the field of Health and in the interface between Social and Health Sciences, as well as designed themes, objects and research hypotheses, especially geared towards the relationship between men and health, this article performs a narrative review of the production disclosed by the journal *Saúde e Sociedade*.

Methodological aspects

For the surveying of the articles published by the journal *Saúde e Sociedade*, the Scientific Electronic Library Online (SciELO) was used, which provides the editions of the journal from its first volume, from 1992, and allows free and full access to articles. In light of the scope of the journal, which publishes the scientific production of the different fields of knowledge, on health practices, aiming at the interdisciplinary development of the field of Public Health, for the bibliographic search the keywords “gênero” (gender) and “masculinidades” (masculinities) were elected. From this search, held in June 2016, 66 full articles were found. For the final selection of the articles, the following inclusion criteria were used: the articles should have been published in the journal *Saúde e Sociedade* and have analytical or conceptual categories under the perspective of gender and/or masculinities. The articles that appeared more than one time in the search results were only considered once. In the following step, the reading of the titles and abstracts of the 66 articles was carried out and, based on the criteria for inclusion listed, the screening and selection of 49 articles for descriptive analysis were performed.

Then, the characterization of the productions and the descriptive analysis were conducted, which allowed sorting the articles by: author(s); year; gender as variable; gender as a central category of analysis; studies with focus on men and women as subjects of analysis; studies with men as subjects of analysis; studies with women as subjects of analysis; empirical, theoretical studies or literature review; intersectional studies. From this characterization the thirteen articles which focused on men and women or only on men as subjects of analysis were selected for full reading. The aim of this reading was getting to know the nature of the method and critical analysis used in the study and verifying the specificity of the theoretical framework concerning the analytical categories “gender” and “masculinities”. In the following step, the qualitative analysis of the themes and conceptual approaches of these thirteen articles was conducted. Thus, the analysis sought to seize the general content and to identify the conceptual approach used by the authors, to recognize the central ideas and theoretical perspectives in cores of meaning, to compare the different cores of meaning present in the texts analyzed, as well as to classify and interpret the cores of meaning in more comprehensive analysis axes and to make interpretive summaries based on the most recurrent cores of meaning in the studies (Minayo, 2008).

The production on masculinities and health in journals

As has been noted, for descriptive analysis, 49 abstracts of articles which had gender and/or masculinities as categories of analysis were selected. It is observed that the distribution of the publication of articles with gender as theme was erratic, with higher numbers from the year 2007, increases having happened in 2008 and 2011, from which most articles were originated. In addition, it is important to highlight that the first issue found with the categories “gender” and/or “masculinities” occurred in 1997, although the journal *Saúde e Sociedade* had its first edition published in 1992. Up to 2003, the journal was published only two times per year; between 2004 and 2007, three times per

year; and, since 2008, four per year. In addition, it was noticed that in 2008, 2010, 2011 and 2013 there were special issues, with studies aimed at the field of Public Health and Human and Social Sciences, which may explain the higher numbers of articles on gender and masculinity in those years. In 2008, the publication of thematic articles on “Gender, body and knowledge” and an issue with the theme “violence in the field of Public Health” occurred. In 2010, there was the publication of an issue related with HIV/aids and blackness. The first issue of 2011 featured articles originated from the event II Encontro Paulista de Ciências Sociais e Humanas em Saúde, and another issue of 2011 had four articles dealing with the transversality between gender and Public Health. In 2013, there was the publication of an issue with articles concerning the interfaces between Social Sciences and Public Health, with emphasis on gender issues.

The organization and publication of issues with gender-related themes seems to reflect a response from the editorial team to demands of the field of Health for themes, which had not been given proper value in publications in the field of Public Health up to that point, strongly contributing to the dissemination of new perspectives, concepts and approaches. Among the 49 abstracts analyzed in this phase, 40 had gender as variable for analysis and 39 had it as central analytical category, 30 abstracts having been found with gender both as central analytical category and variable for analysis. From these data, it is noticed that gender begins to be seriously conceptually apprehended, expressing and questioning the socio-historical relations and forms of existence of social reality based on this category. It was observed that gender studies dealing specifically with women prevail. Of the 49 studies, 10 had men and women as subjects of research, 4 worked with men only and 17 featured women as subjects. 18 studies were theoretical or literature reviews with gender or masculinities as themes, or introduced third parties (social operators and health professionals) as subjects to address the themes of gender and masculinities. As already pointed out, it is considered that the gender perspective has been gaining recognition and legitimacy, being present

as political and theoretical-methodological tool for problematizing and intervening on processes that establish and sustain inequalities between men and women. This process of institutionalization of gender perspectives resulted, in a multifaceted, rivaled and negotiated manner, in feminism and from it and women movements, in discussions on gender inequalities and oppressions suffered by women. However, despite the feminist struggles being legitimate and having made possible the recognition of the needs and rights of this group, the emphasis which was given to women at the beginning of gender studies may have hampered a broader look over gender inequalities, that the situations of inequality suffered by men were also worked on and that men would not be considered on behalf of women only (Meyer, 2004; Arilha, 2010). Couto and Gomes (2012) claim that this focus on studies related with men and masculinities has only gained some visibility in what concerns gender approaches in the past two decades in the country, which seems to be reflected in the studies of this periodical. Regarding the type of study, preponderance of empirical studies is observed - 36 articles based on the practical experiences of researches, with different methodologies; 10 theoretical articles; and 3 literature reviews. It is possible to note the prevalence of empirical studies, in light of the theoretical and epistemological productions, which aim at understanding not only how gender relations affect health, but also at problematizing the use of the concept of gender as a producer of scientific knowledge in Health, seeking new ways of perceiving the subject.

Another point to be questioned is the production concerning the planning of health policies with focus on gender, with three studies on the evaluation of policies: “Políticas de saúde materna no Brasil: os nexos com indicadores de saúde materno-infantil” (Santos Neto et al., 2008), “Uma análise das políticas de enfrentamento ao HIV/aids na perspectiva da interseccionalidade de raça e gênero” (López, 2011) and “Saúde do homem e masculinidades na Política Nacional de Atenção Integral à Saúde do Homem: uma revisão bibliográfica” (Separavich; Canesqui, 2013). We may ask ourselves about how this possible distancing of the gender perspective from theoretical

and political studies towards an approach of health practices can contribute to a gap concerning critical exercise and the production of knowledge that may instrumentalize these practices. In addition, the need to broaden the articulation of the gender category to others such as race/ethnicity, social class and generation, is noted. The presence of 16 (32%) studies that used the intersectionality of categories was observed. Gender, while marker which positions individuals in power relations and is conformed in association with markers of class and race/ethnicity, operates mechanisms that delimit particular experiences of illness and health care, as well as the access to health resources and use of services. It is noted that intersectionality has gained space in studies on Public Health; gender, generation, race/ethnicity and class are being considered for providing broad possibilities for the enrichment of theoretical reflection in this field, and can be possibly added to the understanding of mechanisms which delimit particular experiences of illness and health care, as well as of access to health resources and use of services. It is possible to notice from the qualitative analysis of the thirteen articles analyzed in depth, that the themes can be sorted into five subgroups: reproduction and contraception; health of the worker; gender violence; sexuality and health, with an emphasis on STD/aids; and aging. Among the thirteen articles which were analyzed deeply, three were found that work with the relationship between gender and health of the worker. In this theme, two qualitative studies and one quantitative study of epidemiological nature were found.

In the article “Engendrando gênero na compreensão das lesões por esforços repetitivos” (Oliveira; Barreto, 1997), based on the reflection made concerning the care to female and male workers who bear repetitive strain injuries (RSI), the authors use the gender category to understand the different impacts that RSI may have on the health and general life of male and female workers. The quantitative study by Llorca-Rubio and Gil-Monte (2013), also using subjects of both sexes, analyzed the differences in preventive management of risks in companies according to the gender of workers; the authors endorse the existence of a negative

discrimination regarding female workers, who are at a disadvantage in what concerns prevention, despite being 45% of the workforce in Spain. Another study that focuses on gender and work is “Representações de trabalhadores portuários de Santos-SP sobre a relação trabalho-saúde” (Machin; Couto; Rossi, 2009), which analyzed the experiences of dockworkers from Santos regarding the changes in the process and conditions of work and in the work-health relationship from the perspective of gender and masculinities. In a mostly male work environment, based on the analysis of the experiences of masculinity of those interviewed regarding dock work and their meanings and consequences for health and care, the authors question the dimension of hegemonic masculinity among dockworkers as enhancer of the risk of illness.

In the three articles, there is in common the endorsing of the use of the gender perspective for the understanding of issues of work dynamics, their requirements and how they affect the health of the worker, with basis on the social relations and their contexts for construction of inferences. In addition, with relational studies of gender, the authors problematize the identification of the male work environment as universal, pointing out stereotypes of masculinity and femininity incorporated into the dominant logic of the sexual division of work which was previously constructed and is latent among the subjects. Among the studies which were analyzed in depth, all those which address adolescents focus on the themes of sexuality, with emphasis on contraception and prevention of various STDS and aids. In the ethnographic essay “A ‘fiel’, a ‘amante’ e o ‘jovem macho sedutor’: sujeitos de gênero na periferia racializada” (Pinho, 2007), through focus groups and interviews, the author sought to understand the structuring effects of modernization on the relational practices of gender and race among young residents of the low-income settlement of Jardim Catarina, in the metropolitan region of Rio de Janeiro. The author presents the experiences of the youth of Jardim Catarina and the objective conditions for the (re)production of gender inequalities and violence, elaborating on important issues for reflection on appropriate policies for this genera-

tional group. The article by Sampaio et al. (2011), “Ele não quer com camisinha e eu quero me prevenir: exposição de adolescentes do sexo feminino às DST/aids no semiárido nordestino”, sought to analyze the exposure of adolescents of both sexes to STD and aids in the semi-arid Northeast of Brazil. The authors emphasize the importance of gender inequities, as well as the organization and functioning of the health services on the effectiveness of prevention of STDs and aids among adolescents. Normalization practices which derail the dialogue with young people and their access to condoms, to reproductive planning and sexual health care are criticized. It is argued that the iniquities of gender preside over speeches, behaviors and daily relations, with direct effects on the quality of life of teenaged and adult women. Another article that deals with the issues of the interference of iniquities of gender on the sexualities of young people is the one by Sena et al. (2016), who discuss the construction of masculinities in the speech of teenagers concerning sexual and reproductive health. In a qualitative approach, the authors analyzed the perceptions of the subjects on the male body, noting the need of adolescents for concrete and visible aspects for assimilating the transformation of the body, there being difficulty and resistance to get in touch and discuss about their own bodies. In addition, the difficulty of adolescents in understanding gender relations and in formulating a conception on sexuality was noted, based on the divergent experiences for men and women, permeated by the stereotypical cultural constructions. Changes in the conceptions of parenthood were also noted. Among the three studies mentioned, there is in common the critique of the biomedical discourse and the association of the sexuality of young people as biological event only, explaining it as a result of raging hormones and natural impulsiveness of this phase of development; instead, there is the intent to analyze the socio-cultural context in which decisions on sexual practices are taken. However, the reflection on the focus given to the themes of contraception and prevention of STD and aids is still valid, signaling the discomfort and possible persistence of an assertive and normative character in the practices in the

sexual education of adolescents, which consist in the focusing of sex as “promiscuity” and “danger”, neglecting the empowerment of these subjects. Thus, one should be aware of the risk of the pathologizing of adolescences and of the superficiality of the “adolescence and sexuality” discussion, working on the issue of culture in the consolidation of gender roles. The prevalence of studies focusing on analyses of sexuality and reproductive health remains in what concerns adults, there being studies on conception, contraception and sexual health. Another aspect also present in these articles concerns the understanding of gender as a structural category in the way the sexual experience is perceived by the subjects, to the extent that the male and female experiences are shown as radically different, not due to the differences between their bodies, but mainly due to the way they build expectations and images regarding sexual experimentation in society.

Among these studies is the one by Vargas (2010), which sought, through interviews with infertile couples, to analyze the uses of internet in the access to information on the subject of marital infertility, indicating that there are different impacts on gender in what concerns the impossibility of voluntary reproduction. The feeling of failure in light of the impossibility of having children rests mainly upon women, who bear the stereotype of caregivers, are associated with the figure of mothers and are subjected to derogatory stigmas when they do not have children. The article “Vulnerabilidades ao HIV/aids no contexto brasileiro: iniquidades de gênero, raça e geração” (Garcia; Souza, 2010) analyzed the knowledge of young and old, white and black people, who were sexually active and of both sexes, about STDs and aids, as well as their thoughts on condom use and sexual practices, from the racial, generational and gender perspectives. In the research, the authors highlight how important the issue of the vulnerability of women to HIV/aids is, especially among those in stable relationships, due to socio-economic and cultural aspects; also, they highlight the need for investments in information and communication actions for the general population in a continuous manner.

In a study performed in Spain with university students of both sexes, Lameiras et al. (2011) analyzed the perception of the subjects on the use of female condoms. The authors emphasize the need to encourage the knowledge and use of this method - which is controlled by women - through the developing of educational strategies that enable the possibility of use of the female condom and to discuss gender stereotypes and femininity which traditionally deny women the right to know their own bodies and explore sexual pleasure. This study, when discussing the possibility of female empowerment, presents factors of cultural and social order that make practices, expressions and manifestations of desires taboo for women, female sexuality being often embarrassed and silenced in many of these cases. While for men experiencing their sexuality is encouraged as something intrinsic to their nature, the same does not occur for women. Still on sexuality, the study “Redes sociais e comportamento sexual: para uma visão relacional da sexualidade, do risco e da prevenção” (Aboim, 2011), performed with a population between 18 and 65 years old in Portugal, investigated the impact of social networks on sexual behaviors of individuals. Through the normative perception of the subjects on the sexual morality of their friends and family, the author sought to obtain a portrait of social networks to understand the variety of sexual behaviors and the risks of infection of the individuals. According to the author, networks composed of more liberal friends in terms of sexual morality tend to influence the behavior of the subjects, leading to a more active exploration of sexuality, especially in the case of women.

Based on texts with themes related with sexuality, numerous factors which contribute to the structuring of egalitarian affective and sexual relations were observed, such as socioeconomic, racial and generational status, asymmetry in gender relations and social and emotional bond. It is noted that collective strategies are discussed, in opposition to models centered on individual action as a way of approaching the contexts which hamper the adhesion of subjects to safer sexual practices.

However, the lack of inclusion of men beyond the preventive character of infections and pregnancies stands out, in addition to the lack of reflection on the importance of the building of new arrangements that promote the demystification of hegemonic constructions and equality between genders, based on narratives that produce new health practices and forms of perceiving the experience of sexuality.

Dealing specifically with the relationship between men/masculinities and health, only one article that had only men or men and women as subjects of research was found. In “Masculinidades e práticas de saúde na região metropolitana de Belo Horizonte MG” (Nascimento et al., 2011), the social representations of health and illness and the health practices of adult men living in the metropolitan region of Belo Horizonte were investigated through interviews, highlighting the issue of the influence of hegemonic masculinities on health care. The authors point out the need for works that investigate, beyond the causes for the lack of care, the motivations identified by men who care properly for their own health.

The lack of studies concerning the health of men leads us to question the presence and the consolidation of this new field of knowledge in Health: this approach still undergoes the process of advancement or is a demand that is not recognized. The analysis on the men of different social strata, with their different specificities, would be necessary, as would be the engagement of health professionals, to anchor the discussion in an empirical field of production of knowledge that could instrumentalize the practices in men’s health.

The analysis of the articles also indicates the lack of studies concerning the impact of gender on the aging process, the generational category being seldom explored in the studies. “O sentido da velhice para homens e mulheres idosos” (Fernandes; Garcia, 2010) is the only analyzed article which addresses the theme “old age and gender”. The authors highlight the heterogeneity of old age and its experiencing, emphasizing the addressing of old age from a gender perspective and verifying differences in the perception of men and women concerning the aging process, there being among

men a more negative view of this period, associated with male stereotypes, with the social devaluation of retirement and the threat to their autonomy and independence.

Among the studies analyzed that dealt with the theme of violence, only one was among those that had men and women or only men as subjects of research. In it, through questionnaires, Mesquita Filho, Eufrásio and Batista (2011) showed the presence of prejudice in the manifestations of gender stereotypes and ambivalent sexism in male teenagers. The authors, based on the results found, discuss the association of the distorted representations of females with domination, discrimination and violence against women. According to Couto, d’Oliveira and Schraiber (2006), violence can be explained based on the historical and social conditions of relational construction between female and male, which generate different attributes, positions and expectations for the sexes in relation to their social environment, producing specific forms of violence: female violence experienced in the private space, male violence experienced in public spaces. However, it is noticed that, although the gender approach appears in the constitutive and explanatory dimensions of the relations between men and women, and even between men and between women, and although gender is understood as a category that is relational, transversal and which establishes and reproduces power asymmetries (Couto; Gomes, 2012), few studies included men and dealt with the vulnerabilities of men to the exposure to violence, as victims or aggressors.

Final considerations

In an attempt to promote a debate on the issues that guide the studies in the field of gender, masculinities and health and the production disclosed by the journal *Saúde e Sociedade*, a first aspect is worthy of consideration: the set of published articles points to the recognition of the legitimacy of the argument that social processes related with gender (and masculinities in particular) produce differences in the pattern of morbidity and mortality in men and women, as well as in health protection

behaviors. In the direction of such recognition, the harmony between the issues that mobilize researchers of the Social Sciences and Health disciplinary fields is worthy of attention - including how and how much the health care aspects are addressed in the practices of men and women, what are the strategies that men and women use to deal with illnesses and the way the behaviors in various spheres of life (leisure, family, sexuality, work, among others) reflect on the collective pattern of morbidity and mortality for the segments of men and women in the population - and the production of the journal, especially in the last decade.

The issue that the previous pages sought to answer consists of: what is the importance of the gender perspective and masculinities for the analyses on men and women in terms of the health-illness and care processes?

Without doubt, the accumulation of empirical researches and especially of ethnographic works, synthesized by different authors in the early 2000s, reveals two important aspects, which can also be viewed in the analyzed production: the lack of a single masculinity or of a specific pattern of masculinity and the fact that masculinities can change (Vigoya, 2001). These two arguments may seem unimportant, but they are not. The recognition of the plurality of masculinities was particularly relevant for the development of forms of applied knowledge. The field of Health, for example, was penetrated by this new research agenda, from the use of the generic notion of man (or as predominant category in biomedical studies) to the search of the particularities of the ways of being a man and the relationship with the health-illness and care processes. A second aspect that draws attention is the still incipient theoretical conceptualization and appropriation of the perspective of masculinities. However, what do we mean by masculinity? What is the importance of the investigations presenting and operationalizing the concept? We may by start pointing out that the need of using the term *masculinity* refers to the importance of referencing

a field of research in the field of gender studies. "Masculinities", in conceptual terms, reports to cultural meanings which are ideologically referred to the grounds of the "essence" of men, applicable through metaphorical processes, to a variety of fields of human interaction and of the cultural and social life. *Men's studies* was an alternative found to create symmetry in relation to *women's studies*, still in the 1980s, but both are unfortunate terms, as they situate gender in sex, in a primary perspective of social construction which sees gender as the cultural development of a supposed natural sex, making it dependent on a previous biological gender (Vale de Almeida, 2005).

Connell (1995), one of the most cited authors in what concerns the benchmarks of masculinity in the production analyzed, addresses the general and local configurations of gender in masculinities and develops a benchmark of analysis that intersects gender with other social markers (race/color, social class, generation). To the author, to understand gender, then, it is necessary to constantly go beyond gender itself, and vice versa. We cannot understand neither class, nor race or global inequality without constantly considering gender. This perspective of intersectionality¹ lead Connell, from her earlier texts (Connell, 1995) to the most recent (Connell; Messerschmidt, 2005; Connell, 2014), to analyze the power relations between men from the notion of *hegemonic masculinity and subordinate masculinities*. For her, it is not about fixing the types of masculinities, but to understand and analyze power relations (between men) as games, and not states. To this end, she assumes that the (collective) power of men is not built only in the ways through which men internalize, individualize and strengthen it, but also in (and by) the social institutions.

Finally, it is necessary to emphasize that the contribution of intersectionality in researches in the field of Public Health in Brazil, which has productions in the journal that seem to constitute a mirror, is scarce and requires commitment in terms of investigative and analytical urgent effort.

¹ The origin of the term comes from the theoretical production of Kimberlé Crenshaw, an Afro-american feminist from the early 1990s, when she discussed the intertwining of differences in the production of social inequalities (Henning, 2015). The "intersectionality" expression or field has in its origins anti-racist and feminist traces (Moutinho, 2014).

It should be recognized that the debate on the perspective of intersectionality of social markers of difference in Health is recent, having gained space only in the last decade. There is also a lack of conceptual clarity, in addition to the need for further theoretical development and of problematization of the use of central theoretical concepts like sex, gender, embodiment, equality and equity. The improvement in the conceptual rigor in the use of these concepts would enable progress in the studies, as well as in the communication between researchers in the field of Health and in the interdisciplinary dialogue with other fields, specifically with the social sciences (Hankivsky, 2012; Connell, 2014).

For Hankivsky (2012), intersectionality is a powerful tool that should be used in the studies of women's health and men's health and in the relationship between gender and health. Intersectionality potentiates rethinking models and research methods, as well as practices and health policies. However, Hankivsky (2012) also points out that, if the adopted perspective of intersectionality favors a gender marker - as the first and main dimension of Health -, we may witness the failure of the efforts to understand and intervene in the complex process of health, illness and care of both men and women. For the author, considering that gender, social class, race and sexuality are socially constructed and interact mutually depending on time and place, it is important to use intersectionality as a guiding tool for analyses in which no social marker of difference is, a priori, regarded as the most "oppressor", that is, as if one of them had greater power of explanation over others.

Still according to Hankivsky (2012), it is not a question of giving the same weight to all variables (social markers) in the analysis, but of understanding that the intersection between them operates in a complex logic. Furthermore, when working with social markers, intersecting them, it is necessary to think how the categories act in combination, potentiating a specific marker at the expense of other.

In light of the recognition of the growth of the production in gender and masculinities in the field of Public Health and, in particular, in the interface between the Humanities, Social Sciences and Health, and of the tendencies of the investigations

in terms of themes, objects and methodological-theoretical contributions, the presented review potentiates a critical view of this expanding research field in terms of its strengths and weaknesses.

References

- ABOIM, S. Redes sociais e comportamento sexual: para uma visão relacional da sexualidade, do risco e da prevenção. *Saúde e Sociedade*, São Paulo, v. 20, n. 1, p. 207-224, 2011.
- AQUINO, E. M. Gênero e saúde: perfil e tendências da produção científica no Brasil. *Revista de Saúde Pública*, São Paulo, v. 40, p. 121-132, 2006. Edição especial.
- ARAÚJO, M. F.; SCHRAIBER, L. B.; COHEN, D. D. Penetração da perspectiva de gênero e análise crítica do desenvolvimento do conceito na produção científica da saúde coletiva. *Interface - Comunicação, Saúde, Educação*, Botucatu, v. 15, n. 38, p. 805-818, 2011.
- ARILHA, M. *Nações Unidas, população e gênero: homens em perspectiva*. Jundiaí: In House, 2010.
- CONNELL, R. *Masculinities: knowledge, power and social change*. Berkeley: University of California Press, 1995.
- CONNELL, R. *The study of masculinities. Qualitative Research Journal*, Cardiff, v. 14, n. 1, p. 5-15, 2014.
- CONNELL, R. W.; MESSERSCHMIDT, J. W. Hegemonic masculinity: rethinking the concept. *Gender & Society*, Oakland, v. 16, n. 6, p. 829-859, 2005.
- COUTO, M. T.; D'OLIVEIRA, A. F.; SCHRAIBER, L. B. Violência e saúde: estudos científicos recentes. *Revista de Saúde Pública*, São Paulo, v. 40, p. 112-120, 2006. Edição especial.
- COUTO, M. T.; GOMES, R. Homens, saúde e políticas públicas: a equidade de gênero em questão. *Ciência & Saúde Coletiva*, Rio de Janeiro, v. 17, n. 10, p. 2569-2578, 2012.
- COUTO, M. T.; SCHRAIBER, L. B. Homens, saúde e violência: novas questões de gênero no campo da

- saúde coletiva. In: MINAYO, M. C. S.; COIMBRA JR., C. E. A. (Org.). *Críticas e atuantes: Ciências Sociais e Humanas em Saúde na América Latina*. Rio de Janeiro: Fiocruz, 2005. p. 687-706.
- FERNANDES, M. D.; GARCIA, L. G. O sentido da velhice para homens e mulheres idosos. *Saúde e Sociedade*, São Paulo, v. 19, n. 4, p. 771-783, 2010.
- GARCIA, S.; SOUZA, F. M. Vulnerabilidades ao HIV/Aids no contexto brasileiro: iniquidades de gênero, raça e geração. *Saúde e Sociedade*, São Paulo, v. 19, p. 9 20, 2010. Suplemento 2.
- GOMES, R.; NASCIMENTO, E. F. Produção do conhecimento sobre a relação homem saúde: uma revisão bibliográfica. *Cadernos de Saúde Pública*, Rio de Janeiro, v. 22, n. 5, p. 901-911, 2006.
- HAMMARSTRÖM, A. et al. Central gender theoretical concepts in health research: the state of the art. *Journal of Epidemiology & Community Health*, London, v. 68, n. 2, p. 185-190, 2014.
- HANKIVSKY O. Women's health, men's health, and gender and health: implications of intersectionality. *Social Science & Medicine*, Oxford, v. 74, n. 11, p. 1712-1720, 2012.
- HENNING, C. E. Interseccionalidade e pensamento feminista: as contribuições históricas e os debates contemporâneos acerca do entrelaçamento de marcadores sociais da diferença. *Mediações, Londrina*, v. 20, n. 2, p. 97-128, 2015.
- LAMEIRAS, M. et al. Evaluación del uso del preservativo femenino promovido desde un programa de educación para la salud: un enfoque cualitativo. *Saúde e Sociedade*, São Paulo, v. 20, n. 2, p. 410-424, 2011.
- LLORCA-RUBIO, J. L.; GIL-MONTE, P. R. Occupational risks prevention and their relationships to workers' gender. *Saúde e Sociedade*, São Paulo, v. 22, n. 3, p. 727-735, 2013.
- LÓPEZ, L. C. Uma análise das políticas de enfrentamento ao HIV/Aids na perspectiva da interseccionalidade de raça e gênero. *Saúde e Sociedade*, São Paulo, v. 20, n. 3, p. 590-603, 2011.
- MACHIN, R.; COUTO, M. T.; ROSSI, C. C. S. Representações de trabalhadores portuários de Santos SP sobre a relação trabalho saúde. *Saúde e Sociedade*, São Paulo, v. 18, n. 4, p. 639 651, 2009.
- MESQUITA FILHO, M.; EUFRÁSIO, C.; BATISTA, M. A. Estereótipos de gênero e sexismo ambivalente em adolescentes masculinos de 12 a 16 anos. *Saúde e Sociedade*, São Paulo, v. 20, n. 3, p. 554-67, 2011.
- MEYER, D. E. Teorias e políticas de gênero: fragmentos históricos e desafios atuais. *Revista Brasileira de Enfermagem*, Brasília, DF, v. 57, n. 1, p. 13-18, 2004.
- MINAYO, M. C. S. *O desafio do conhecimento: pesquisa qualitativa em saúde*. São Paulo: Hucitec, 2008.
- MOUTINHO, L. Diferenças e desigualdades negociadas: raça, sexualidade e gênero em produções acadêmicas recentes. *Cadernos Pagu*, Campinas, n. 42, p. 201-248, 2014.
- NASCIMENTO, A. R. et al. Masculinidades e práticas de saúde na região metropolitana de Belo Horizonte MG. *Saúde e Sociedade*, São Paulo, v. 20, n. 1, p. 182-194, 2011.
- OLIVEIRA, E. M.; BARRETO, M. Engendrando gênero na compreensão das lesões por esforços repetitivos. *Saúde e Sociedade*, São Paulo, v. 6, n. 1, p. 77-99, 1997.
- PINHO, O. A "fiel", a "amante" e o "jovem macho sedutor": sujeitos de gênero na periferia racializada. *Saúde e Sociedade*, São Paulo, v. 16, n. 2, p. 133-145, 2007.
- SAMPAIO, J. et al. Ele não quer com camisinha e eu quero me prevenir: exposição de adolescentes do sexo feminino às DST/Aids no semiárido nordestino. *Saúde e Sociedade*, São Paulo, v. 20, n. 1, p. 171-181, 2011.
- SANTOS NETO, E. T. et al. Políticas de saúde materna no Brasil: os nexos com indicadores de saúde materno-infantil. *Saúde e Sociedade*, São Paulo, v. 17, n. 2, p. 107-119, 2008.

SENA, A. C. et al. Eu virei homem!: a construção das masculinidades para adolescentes participantes de um projeto de promoção de saúde sexual e reprodutiva. *Saúde e Sociedade*, São Paulo, v. 25, n. 1, p. 186-197, 2016.

SEPARAVICH, M. A.; CANESQUI, A. M. Saúde do homem e masculinidades na Política Nacional de Atenção Integral à Saúde do Homem: uma revisão bibliográfica. *Saúde e Sociedade*, São Paulo, v. 22, n. 2, p. 415-428, 2013.

VALE DE ALMEIDA, M. Masculinidade (verbete). In: MACEDO, A. G.; AMARAL, A. L. (Org.). *Dicionário da Crítica Feminista*. Porto: Afrontamento, 2005. p. 122-123.

VARGAS, E. P. Saúde, razão prática e dimensão simbólica dos usos da internet: notas etnográficas sobre os sentidos da reprodução. *Saúde e Sociedade*, São Paulo, v. 19, n. 1, p. 135-146, 2010.

VIGOYA, M. V. Contemporary Latin American perspectives on masculinity. *Men and Masculinities*, New York, v. 3, n. 3, p. 237-260, 2001. Disponível em: <<http://jmm.sagepub.com/content/3/3/237>>. Acesso em: 12 mar. 2012.

VILELLA, W.; MONTEIRO, S.; VARGAS, E. A incorporação de novos temas e saberes nos estudos em saúde coletiva: o caso do uso da categoria gênero. *Revista Ciência & Saúde Coletiva*, Rio de Janeiro, v. 14, n. 4, p. 997-1006, 2009.

Authors' contribution

Couto conceived the project, conducted the planning and data analysis, as well as bibliographic research, text writing and intellectual critical review. Dantas carried out the bibliographical research, reading of the material examined and treatment of the data, developed the analyses and drafted the first version of the text. Both worked on the writing of the final version.

Received: 8/12/2016

Approved: 8/22/2016