









Inserting man in nursing academic level in the State of Piauí, Brazil

Inserção do homem na enfermagem universitária piauiense

Inserción de hombres en la enfermería universitaria en el Estado de Piauí, Brasil

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ABSTRACT

Objective: analyze the insertion of men, through professional registration, in nursing in Piauí, Brazil. **Method:** socio-historical study based on Aróstegui's assumptions, conducted from the number of registrations in the Regional Council of Nursing of Piauí from 1975 to 2021. The data were organized in chronological order and according to the gender of the participant, with analysis based on the concepts of Edward Palmer Thompson. **Results:** despite the fact that the first male enrollment occurred only in 1979, it is clear that, since then, there has been a progressive increase in the number of men in nursing. Such progression is justified by the university reform, which gave rise to the Federal University of Piauí; in addition to the creation of the COFEN/COREN System. **Final considerations:** the insertion of men in nursing in Piauí occurred slowly and unevenly, when compared to women. Socio-political, economic and social factors were essential to justify the growth.

Descriptors: Nursing; History; History of Nursing; Men.

RESUMO

Objetivo: analisar a inserção do homem, por meio do registro profissional, na enfermagem piauiense. **Método:** estudo de natureza sócio-histórica fundamentado por pressupostos de Aróstegui, conduzido a partir do número de inscrições no Conselho Regional de Enfermagem do Piauí do período de 1975 a 2021. Os dados foram organizados por ordem cronológica e de acordo com o gênero do inscrito, com análise pautada nos conceitos de Edward Palmer Thompson. **Resultados:** apesar da primeira inscrição masculina ocorrer apenas em 1979, percebe-se que, desde então, ocorreu um aumento progressivo de homens na enfermagem. Tal progressão é justificada pela reforma universitária, que deu origem a Universidade Federal do Piauí; além da criação do Sistema COFEN/COREN. **Considerações finais:** a inserção do homem na enfermagem piauiense ocorreu de forma lenta e desigual, quando comparada ao sexo feminino. Fatores sócio-políticos, econômicos e sociais foram essenciais para justificar o crescimento.

Descritores: Enfermagem; História; História da Enfermagem; Homens.

RESUMEN

Objetivo: analizar la inserción de los hombres, a través del registro profesional, en la enfermería en Piauí, Brasil. **Método:** estudio de naturaleza sociohistórica basado en los supuestos de Aróstegui, realizado a partir del número de registros en el Consejo Regional de Enfermería de Piauí de 1975 a 2021. Los datos fueron organizados en orden cronológico y según el género del participante, con análisis basado en los conceptos de Edward Palmer Thompson. **Resultados:** a pesar de que la primera incorporación masculina se produjo recién en 1979, es evidente que, desde entonces, se ha producido un aumento progresivo del número de hombres en enfermería. Tal progresión está justificada por la reforma universitaria, que dio origen a la Universidad Federal de Piauí; además de la creación del Sistema COFEN/COREN. **Consideraciones finales:** la inserción de los hombres en la enfermería de Piauí ocurrió de manera lenta y desigual, en comparación con la de las mujeres. Los factores sociopolíticos, económicos y sociales fueron esenciales para justificar el crecimiento.

Descriptores: Enfermería; Historia; Historia de la Enfermería; Hombres.

INTRODUCTION

Caring for others is described as the relationship between humans although, at a certain point, this assumption was linked to women due to their affective nature. In this sense, the history of nursing is sometimes confused with the history of women, especially after the 19th century, as it is designated by the sign of charity, donation, and religiosity, associating them with the maternal role and domestic activities as female functions^{1,2}.

The maternal role and the care provided by women have become a social imperative for governments to provide health care. From this perspective, women were submitted to a list of subordination to produce, replicate, and improve care in communities. According to Marie Françoise Collière (1986), the exclusive access and use of writing by clergymen allowed the male image to stand out over the female in terms of caring for the sick³.

However, there were “gylanic” or egalitarian societies in which the same social values were granted to agents regardless of gender. In this context, the historical provision of care requires understanding the activities carried out not only by women. Thus, it is revealed that the value granted to men and women in certain societies differentiated the actions of social agents and, as a consequence, the nursing care provided by men⁴.

However, female care was restricted to the home environment as societies developed, and care for the sick was gradually also directed to monks and religious people who linked nursing to religion when aiding. Monks provided support but remained in restricted environments, which made their recognition difficult. Therefore, men were the protagonists for many centuries, contrary to traditional perception, although they continued to practice the profession more reservedly despite the changes in English society in the 19th century and, consequently, with their involvement in university nursing in Piauí¹.

The changes initiated by Florence Nightingale, the precursor of Modern Nursing, allowed the profession to enter the scientific field. Although Florence belonged to the upper strata of society, she provided space for female care, restricted to the home, to become institutionalized, highlighting the role of professional caregiver associated with women. This fact was ratified in 1919 when male professionals in Great Britain were not allowed to register with the Royal College of Nurses^{5,6}.

Women became agents present in the provision of care from Modern Nursing onwards, thus making the male gender a barrier to entry into the profession. However, men were still present even with this obstacle, especially in the context of psychiatric hospitals and asylums, in which masculine behavior and strength were necessary^{1,5}.

In Brazil, care practices were mostly carried out by men until 1889. However, the first course for training nursing professionals was offered at the Escola Profissional de Enfermeiros e Enfermeiras after that year with the departure of the nuns from the hospital environment at Hospício Dom Pedro II in the city of Rio de Janeiro. The course was offered to both genders, as observed in Europe, and the male figure was considered important in these institutions due to physical strength^{7,8}.

Historical data shows that nursing schools were aimed at women from Modern Nursing. An example is the United States, where only 1% of the 25,000 nurses graduating annually were men in 1930, while nursing schools in Canada refused to enroll men^{5,6}. These events show, historically, the difficulty for men to access this professional class.

The first man’s nursing training was recorded in 1918 at the School of Nursing of the University of São Paulo (USP), becoming the pioneer in Brazil⁹. Despite this, the term “Nurse” is inflected for men in a report from 1905 at the Hospício Dom Pedro II¹⁰. However, the Anna Nery School of Nursing, which began its activities in 1923, was guided by Nightingalian standards of guidance, which valued the entry of women, as was the School of Nursing at Saint Thomas Hospital, which saw the entry of the first men only in 1971 due to the reformulation of university education in 1968⁹.

Although there are studies about men in the nursing environment, there is a predominance of research that considers the profession to be more suitable for women, as they associate it with feelings such as affection, sensitivity, zeal, and caution as being emotions and acts of females, pushing men away from the profession over the years^{11,12}.

The term “nurse” is defined in remote documents from the Piauí Health Department in 1942 as an employee designated to work in the Leprosy Prophylaxis Service. There is also in the same State a record in the reports of the Santa Casa de Misericórdia of two male professionals, who were transferred to the Getúlio Vargas Hospital, which opened in 1941, after the end of the institution’s activities^{13,14}.

Although the recently opened hospital at that time absorbed male employees to provide care in the region, the first record of men’s professional training in nursing is found in documents dating back to the 1960s from the Sister Maria Antoinette Blanchot School of Nursing, opened in 1959¹⁵.

In this context, this study is justified by the low visibility regarding male participation in care, as an important portion of professionals in the area have deficient information, gaps, and questions still unanswered regarding professional training and the historical position played by men within nursing, providing information that allows the historicization of the History of the profession in Piauí, in the northeast region of Brazil, and contributing to the construction of the History of the Profession.

Based on this context of scarce research, this study aims to analyze the involvement of men, through professional registration, in nursing in Piauí.

METHOD

This is a socio-historical study based on the assumptions of Aróstegui,¹⁶ with the Regional Nursing Council of the State of Piauí (COREN/PI) as the study scenario, under the time frame of 1975, the year of creation of the regional CORENs, until 2021.

Data collection took place at COREN/PI, from July to September 2021, by surveying registrations at the body, which included registrations of men and women carried out between 1975 and 2021. Data were systematically organized in chronological order and according to the gender of the registrant (men and women), obtaining a corpus of documents based on relevance, sufficiency, exhaustiveness, representativeness, homogeneity, and organization¹⁷.

Anchoring the analysis according to the objective of the study is necessary to be close to the concepts elaborated by Edward Palmer Thompson of experience linked to culture and social class, starting from a critical movement to understand how the popular classes move and make history, giving visibility and protagonism to people who, for a long time, had their experiences excluded and marginalized by the established historiography. Historical analysis, identification, and characterization of the time of origin of the source (date, place, and social context), the issuer of the data, the identification of intertextuality present in the source, and extraction/synthesis of the elements referring to the research object were used, thus considering the criteria of historical analysis¹⁷.

Regarding ethical aspects, the research did not need to be submitted to the Research Ethics Committee (CEP), as the research did not use human beings. However, an application was made to COREN/PI, requesting authorization to use these data, which were anonymized through grouped statistical analysis, considering the precepts of the Personal Data Protection Guide¹⁸.

RESULTS

The results revealed the absence of males in the profession in the first years of the emergence of COREN/PI, with a significant increase in the involvement of men in nursing over the years, thus establishing a female predominance.

Figure 1 shows this growing increase over the years and a comparison of the number of registrants relative to gender.

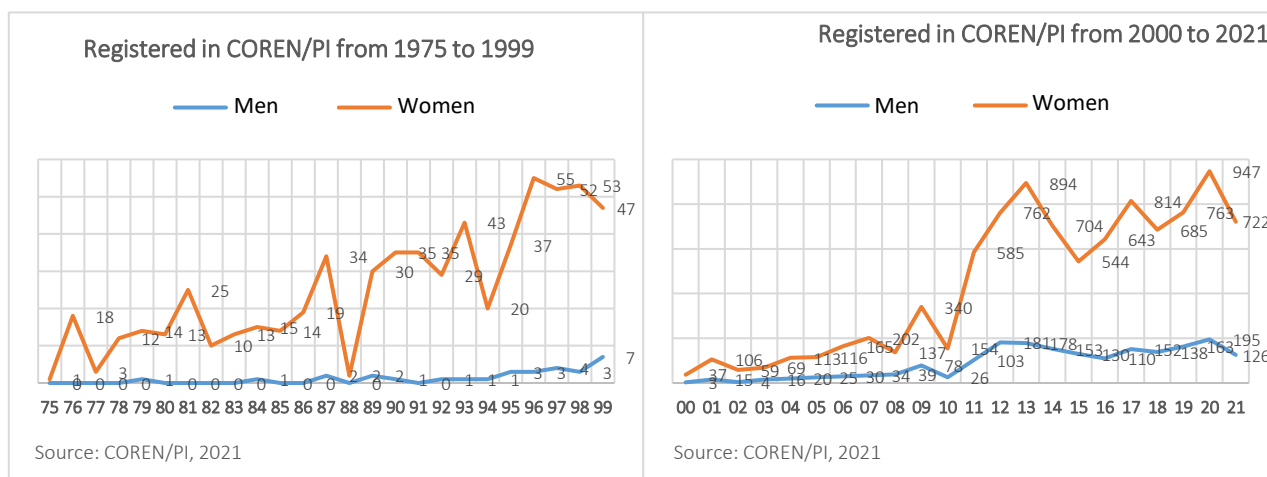


Figure 1: Comparison of the number of nurses registered with the Regional Nursing Council-COREN/PI from 1975 to 2020. Teresina, PI, Brazil, 2021.

The dominance of female presence is still high despite the increasing male presence in the profession, exhibiting the characteristics of nursing from the past. The first man was registered with the Council only in 1979.

The comparison of the first 25 years of men's involvement in nursing since the creation of COREN/PI shows slow but progressive growth, which is justified by the origins of training in the area, thus prioritizing female entry to the detriment of male entry.

The results show a growing increase in the number of men in the profession, especially in the last ten years, demonstrating a recent progressive increase. This increase is justified by the opening of the job market and the expansion of nursing courses when considering the literature and current events in health.

DISCUSSION

Understanding how the involvement of men in nursing in Piauí began requires the search for information on how the state's society was organized, as well as the national milestones that favored the configuration of health care in the state. The first point to be considered is the university reform approved by Law No. 5,540, of November 28, 1968, article 17, letter a, which allowed access for students who completed high school or similar, as well as having obtained classification and approval in the entrance exam. This fact allowed students who were successful in the entrance exam to study the graduation or bachelor's degree they chose, regardless of the candidate's gender¹⁹.

The university reform, starting with Law no. 5540/1968, boosted the construction of new Higher Education Institutions (HEIs), thus encouraging the creation of new nursing courses throughout Brazil. Piauí benefited from this new norm by creating in 1971 the Federal University in the State, being the last unit of the federation in the Brazilian northeast to receive a Higher School linked to the Federal Government.

The creation of the nursing course at the aforementioned institution in 1973 provided students with access to an area lacking these professionals in the state, remaining the only training course available in the area for more than 20 years, during the 1970s, 1980s, and mid-20th century. In this sense, this degree offered a great contribution to social assistance and health care in the Piauí community²⁰.

Another fact to be considered was the creation of the COFEN/COREN System. The emergence of the Federal Nursing Council and its respective sections led to the opening of the professional field, which now has a Council that ensures rights, as well as the construction and approval of the Law on Professional Nursing Practice, thus providing security to professionals in the area. The intense political work to regulate Law No. 7,498, of June 25, 1986, the Law on the Professional Nursing Practice, the institution of a project to monitor the practice of nursing, and the elaboration of the Code of Ethics for Nursing Professionals stand out among the main achievements of these class entities²¹.

In 1988, with the promulgation of the new Brazilian Constitution, health was seen as a social right, based on the principles of social equity and human rights, for the first time in the History of Brazil. The enactment of Law No. 8,080/1990 created conditions for the protection and recovery of health, organization, and operation of corresponding services.

The involvement of men in nursing was limited during this period, with an average of only 2.30 registrations per year between 1979 and 1999. The creation of the Unified Health System (SUS) was an advance not only for the expansion of health care for the Brazilian people but also for health professionals²².

Changes that occurred in the health sector in Brazil led to the need for qualified labor, with nursing degree. However, nursing did not have the number of professionals to meet this need during this period. The political changes of the 20th century that occurred in health led the Federal Government to need qualified professionals, which caused a search for places in undergraduate nursing courses in public and private HEIs²³.

The expansion of nursing courses in Brazil was caused by political and management issues: in the past to contain epidemics and, currently to provide care coverage throughout Brazil at a time when the prospects of universal access to health with comprehensive care have been experienced. These procedures were encouraged by historical-social moments linked to political interests, favoring the growth of the profession in quantity and social importance, and strengthening the organization of the category.

In Brazil, data from the Anísio Teixeira National Institute of Educational Studies and Research (INEP) from 1991 to 2017 confirm homogeneity in the period, when the continuous expansion of the creation of courses is observed, mainly from 2004 to 2009, when 354 courses were created in five years, and 98 courses were created between 2009 and 2015. Eighty new courses were created after 2015 in the period of one year, totaling 178 new courses between 2009 and 2016²⁰.

The 1980s were very special in Brazil because there was an expansion of the political activity of the people with the mobilizations of social organizations, incipient in the late 1970s, who took to the streets and squares to demand the end of the military dictatorship, the search for democracy, improved living conditions, and social justice. Social movements reorganized themselves under the military dictatorship until 1984, articulating different segments of Brazilian society, fighting for citizenship rights and, among them, the right to health²⁴.

Nursing also stood out, albeit in a timid way, as it contributes to the general achievement of society and health rights. Moreover, it acts as an important workforce in the health sector, seeking to meet the specific needs of the population. Participatory movements that were born, grew, and consolidated in the 1980s are the hallmarks of nursing in that historical context²⁴.

The success in the quality of Primary Health Care as a result of the Community Health Agent Program (ACS) allowed its restructuring to contemplate the SUS guidelines and open up the field of work for health professionals, with the implementation of a multidisciplinary team. The success of this experience promoted the consolidation of the Family Health Strategy in 2000, which reduced the numbers associated with infant mortality and cardiovascular diseases, as well as allowed the entry of new professional specialties for Primary Health Care²⁵.

The information about Piauí shows that the pilot project for joining the Family Health Program began in 1994 in the capital, Teresina, with three workgroups, which was increased to 20 workgroups in 1997, a value that was doubled in the following year (1998), totaling 263 workgroups at the end of 2019.²⁶ This reality was also reflected in the State, as 2,946 workgroups were registered in 2021²⁷.

The expansion of this work niche favored the offering of positions through public competitions to hire specialized professionals to fill the shortage, which also promoted the offering of specialization courses in public health and Family Health Strategy both by public and private institutions²⁸.

The graphs show an average of 26.4 men enrolled per year in the period from 2000 to 2010, justifying the increase in the number of courses offered throughout the state, the opening of private institutions, and the creation of student financing such as the Higher Education Student Financing Fund (FIES), a student financing program, and the University for All Program (PROUNI) of the federal government, which offers partial and full scholarships at private colleges²⁰.

PROUNI is a program implemented in 2005, which has already benefited more than 2 million students to enter undergraduate studies with offers of 50% scholarships and full study. FIES, created by the Ministry of Education (MEC) in 1999, aims to primarily serve low-income students²⁰.

The increase in the number of annual public competitions, especially in the last ten years, was an incentive for the entry of both genders into the nursing area and an increase in the number of male nurses registered with the Council from 2010 to 2020. There was growth in the entry of these professionals, with an average of 150 registrations per year, more than triple compared to previous averages. The search for stability, good pay and the opportunity to work are benefits that mean that this field is gaining great visibility and demand, which reaffirms nursing as a profession.

Data show that the largest number of male nurses registered with COREN occurred in 2020, totaling 195 registrations. This considerable increase is justified by the need for professionals to work on the front lines of hospitals, Emergency Care Units (UPA), and Primary Care due to the new type 2 coronavirus (COVID-19). This opening of positions for nursing was a path to this growth. The pandemic allowed the world to reframe the contribution and value of nursing professionals' work in the face of the humanitarian crisis, bringing visibility to the category in the media. However, the health and safety of professionals remained at risk, with insufficient measures to compensate for the additional risk posed by the disease²⁹.

The masculinization of nursing has been gradually gaining ground in research, but the core of the issue lies in the development of the field of professional practice and contemporary nursing actions that become complex and expand in the globalized world, in which an entrepreneurial and autonomous profile in all areas of activity is required from professionals regardless of gender, determining essential practices for Brazilian political and economic status³⁰.

Study limitations

This study had difficulties in achieving its objectives, as there were no sufficient records to support the analysis of men's entry into professional nursing in the state of Piauí, with historical milestones of when this insertion into the job

market began, which was achieved through data from the registrations of these professionals at COREN/PI from its creation until 2021.

FINAL CONSIDERATIONS

The results showed that the male figure occurred slowly and unevenly when compared to females. Furthermore, the research results showed a significant increase in male inclusion over the years, from the first nurse registered with COREN/PI in 1979 to the configuration of the current situation in Piauí in 2020.

Given this perception that nursing is a profession of the feminine world, that is, a profession related to gender, the barriers faced by men when entering nursing, the prejudice due to being male in areas with a feminine predominance, and discrimination in the past stand out, still revealing traces in the present, especially in some specific fields such as obstetrics.

This study evidences the importance of carrying out research that highlights the involvement of men in nursing in other Brazilian states. Moreover, reconstructing the history of men in nursing through the identification of historical personalities who contributed to the profession to rescue and value their contributions to the consolidation and social recognition of Nursing is essential.

REFERENCES

1. Christensen M. Men in nursing: the early years. *J Nurs Educ Pract*. 2017 [cited 2021 Apr 04]; 7(5):94-103. DOI: <https://doi.org/10.5430/jnep.v7n5p94>.
2. Jiménez-Gutiérrez M, Torres-Lagunas MA, Arenas-Montañón G. The experience of men in nursing: a feminist approach study. *Int J Health Sci Res*. 2021 [cited 2022 Apr 04]; 11(1):134-44. Available from: https://www.ijhsr.org/IJHSR_Vol.11_Issue.1_Jan2021/IJHSR_Abstract.018.html.
3. Colliere MF. Invisible care and invisible women as health care-providers. *Int J Nurs Stud*. 1986 [cited 2023 Aug 30]; 23(2):95-112. DOI: [https://doi.org/10.1016/0020-7489\(86\)90001-5](https://doi.org/10.1016/0020-7489(86)90001-5).
4. Córdoba-Sánchez C, Guarnizo-Tole M, Hueso-Navarro F, Germán-Bes C. Aportaciones de las sociedades gilánicas y las cosmogonías indígenas, ante el peligro de Gaia – Pachamama. *Paraninfo Digital*. 2021 [cited 2022 Apr 04]. Video: 13 min 30seg. Available from: <https://www.youtube.com/watch?v=V9vP4EnzGbA>.
5. Evans J. Mens nurses: a historical and feminist perspective. *J Adv Nurs*. 2004 [cited 2021 Apr 04]; 47(3):321-8. DOI: <https://doi.org/10.1111/j.1365-2648.2004.03096.x>.
6. Arif S, Khokhar S. A historical glance: challenges for male nurses. *J Pak Med Assoc*. 2017 [cited 2021 Apr 04]; 67(12):1889-94. Available from: https://jpma.org.pk/article-details/8486?article_id=8486.
7. Moreira A. Profissionalização da Enfermagem brasileira. In: Oguisso T, editora. *Trajetória histórica da enfermagem*. 1. ed. Barueri: Manole; 2014. p. 147-156.
8. Geovanini T, Moreira A, Dornelles S, Machado WCA. *História da Enfermagem: versões e interpretações*. 4. ed. Rio de Janeiro: Thieme Revinter Publicações; 2019.
9. Aperibense PGGS, Silva CPG, Silva GTR, Santos TCF, Gomez-Cantarino S, Peres MAA. Admission of men in nursing undergraduation in Brazil: uniform and professional identity. *Cult Cuid*. 2021 [cited 2022 Apr 04]; 25(59):85-98. DOI: <http://dx.doi.org/10.14198/cuid.2021.59.10>.
10. Porto F, Amorim WM, Pellon LHC. Escola Profissional de Enfermeiros (1905). *R Pesq Cuid Fundam*. 2010 [cited 2023 Aug 30]; 2(1):636-8. DOI: <https://doi.org/10.9789/2175-5361.2010.v2i1.%25p>.
11. Campos PFS, Oguisso T. A Escola de Enfermagem da Universidade de São Paulo e a reconfiguração da identidade profissional da Enfermagem Brasileira. *Rev Bras Enferm*. 2008 [cited 2021 Apr 04]; 61(6):892-8. DOI: <https://doi.org/10.1590/S0034-71672008000600017>.
12. Lopes MJM, Leal SMC. A feminização persistente na qualificação profissional da enfermagem brasileira. *Cadernos Pagu*. 2005 [cited 2021 Apr 04]; 24:105-25. DOI: <https://doi.org/10.1590/S0104-83332005000100006>.
13. Piauí (Estado). *Relação de servidores da Diretoria de Saúde. Relatórios, programas oficiais dirigidos ao Delegado Federal de Saúde da 4 Região - 1941 a 1943*. Seção Saúde Pública, Piauí, 1941.
14. Piauí (Estado). *Relatório apresentado ao exmo. Presidente da República pelo interventor Leônidas de Castro Melo*. Seção Saúde Pública, Piauí, 1940.
15. Silva ACB. *O Ensino de Enfermagem no Piauí*. 1. ed. Teresina: Academia Piauiense de Letras; 2019.
16. Aróstegui J. *Pesquisa Histórica: Teoria E Método*. 1. Ed. Bauru: EDUSC; 2006.
17. Barros JA. A fonte histórica e seu lugar de produção. *Cad Pesq Cdhis*. 2012 [cited 2021 Feb 26]; 25(2):407-29. DOI: <https://doi.org/10.14393/cdhis.v25i2.15209>.
18. Almeida FF. *Guia de proteção de dados pessoais: pesquisa*. São Paulo: Fundação Getúlio Vargas; 2021. Available from: https://bibliotecadigital.fgv.br/dspace/bitstream/handle/10438/30879/fgvcepi_guia_dados_guia-pesquisa.pdf?sequence=1&isAllowed=y.

19. Brasil. Lei nº 5.540, de 28 de novembro de 1968. Fixa normas de organização e funcionamento do ensino superior e sua articulação com a escola média, e dá outras providências. Diário Oficial da União, Brasília, 29 nov. 1968 [cited 2021 Oct 02]. Available from: <https://www2.camara.leg.br/legin/fed/lei/1960-1969/lei-5540-28-novembro-1968-359201-publicacaooriginal-1-pl.html>.
20. Martins LK, Rodrigues RM, Souza RK, Conterno SFR, Luz MS. Expansão dos cursos de graduação em enfermagem no Brasil entre 2004 e 2017. *Enferm Foco*. 2019 [cited 2021 Oct 02]; 10(6):63-9. DOI: <https://doi.org/10.21675/2357-707X.2019.v10.n6.2369>.
21. Matsumura ESS, França AS, Alves LMF, Siveira MKS, Sousa Júnior AS, Cunha KC. Spacial distribution of nursing graduate courses. *Rev Enferm UFPE on line*. 2018 [cited 2021 Oct 02]; 12(12):3271-8. DOI: <https://doi.org/10.5205/1981-8963-v12i12a236270p3271-3278-2018>.
22. Gomez CM, Vasconcellos LCF, Machado JMH. A brief history of worker's health in Brazil's Unified Health. *Cien Saude Colet*. 2018 [cited 2021 Oct 02]; 23(6):1963-70. DOI: <https://doi.org/10.1590/1413-81232018236.04922018>.
23. Silva FAA. Lutas simbólicas de docentes e discentes para criação de um curso de enfermagem [dissertação]. Piauí: Universidade Federal do Piauí; 2018.
24. Rezende J, Cruz I, Rezende M. A participação do movimento social na Reforma Sanitária Brasileira - entrevista com Jó Rezende e Isabel Cruz. *Saúde Debate*. 2019 [cited 2021 Oct 02]; 41(Spe 8):350-9. DOI: <https://doi.org/10.1590/0103-11042019S825>.
25. Giovanella L, Bousquat A, Schenkman S, Almeida PF, Sardinha LMV, Vieira MLFP. The Family Health Strategy coverage in Brazil: what reveal the 2013 and 2019 National Health Surveys. *Cien Saude Colet*. 2021 [cited 2022 Oct 02]; 26(Supl. 1):2543-56. DOI: <https://doi.org/10.1590/1413-81232021266.1.43952020>.
26. Rede de Pesquisa em Atenção Primária à Saúde (ABRASCO). Consolidação da Estratégia Saúde da Família como modelo único e universal de atenção primária à saúde e porta de entrada eletiva do SUS em Teresina. Rio de Janeiro: Rede de Pesquisa em Atenção Primária à Saúde (ABRASCO); 2019. Available from: <https://redeaps.org.br/wp-content/uploads/2020/11/Relato%CC%81rio-Teresina-APS-forte-Final-nov-2019.pdf>.
27. Brasil. Ministério da Saúde. Tecnologia da Informação a Serviço do SUS (DATASUS). Cadastro Nacional dos Estabelecimentos de Saúde. TabNet Win32 3.0. Brasília: Ministério da Saúde [cited 2021 Oct 02]. Available from: <http://tabnet.datasus.gov.br/cgi/tabcgi.exe?cnes/cnv/equipepi.def>.
28. Freitas MCMC, Nunes BMVT, Moura MEB, Santos TCF. Symbolic fights of nurses in implementation of the program of family health. *R Pesq Cuid Fundam*. 2013 [cited 2021 Oct 02]; 5(6):256-67. DOI: <https://doi.org/10.9789/2175-5361.2013.v5i6.256-267>.
29. Lopes EAB. Vivências de sofrimento e adoecimento em ambiente de trabalho: uma análise do cotidiano profissional de enfermeiras e enfermeiros num contexto pandêmico em dois centros de referência no atendimento a pacientes de Covid-19. *Cad Psicol Soc Trab*. 2020 [cited 2021 Oct 02]; 23(2):218-35. DOI: <http://dx.doi.org/10.11606/issn.1981-0490.v23i2p218-235>.
30. Osses-Paredes C, Suazo SV, Alvarado OS. Hombres en la enfermería profesional. *Enferm Glob*. 2010 [cited 2021 Oct 02]; 18:1-7. Available from: https://scielo.isciii.es/scielo.php?script=sci_arttext&pid=S1695-61412010000100016.

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