Abstract

Objective: To conduct a study about the theme “right to health” from the thought of Michel Foucault.

Method: Reflective analysis of research dealing with the issues included on the right to health articulating them with the thought of the philosopher Michel Foucault.

Results: It was observed the articulation of the right to health in relation to Foucault’s thought regarding the biopolitics of health, knowledge, power and subjectivity as inseparable instances. These instances have to do with the culture and the “care of oneself” in the work.

Conclusion: Studies about the right to health allow a better execution and enhancement of subjective and social dimension in health practices and a critical analysis work of the thought about the right to health and the care of oneself.

Keywords
Right to Health; Health Policy; Nursing.

Background
The challenges of today’s society imposes to discuss the human rights and particularly, the rights to health, especially when considering the...
iniquities committed to human beings and working class including the health professional by means of the Ocidental History.

In this sense, “to work is not only to produce economic wealth; it is also a way to make [oneself]’’ [1]. It’s a subjective process and so, the notion of work can be considered as a social construction [2]. Thus, the right to work, the duty to work and the citizen’s rights are intrinsically together1 as well as the right to health, since it is known that there is satisfaction, pleasure, personal fulfillment and suffering when working [3-4].

The right to health is not seen as a result of the humanitarian ideals of solidarity, social justice and basic needs articulated with survival, but as result of social contradictions and effects of the system products. The right to health is a complex item and the confrontation between its scope and its content is fundamental [5].

The Health of the professionals working in the Brazilian Unified Health System [SUS] is an important focus of interest of the Ministry of Health. A fundamental improvement in the health of workers in this area, is the designation of the guidelines of the National Policy Health Promotion of Worker health system - SUS [7] Until then, the health of SUS professionals was supported by general rules.

This important policy aims to improve the health conditions of the SUS’ worker through the confrontation between general and specific aspects of environments and work organization that can provide the occurrence of health problems, the workers’ empowerment [social actors of these transformations] and by ensuring access to actions to complete health care services.

The National Policy for the Promotion of the Health System Occupational Health - SUS considers as workers, all of those who are directly or indirectly in health care institutions that make up the SUS. This important political bases its guidelines considering the following prerogatives: the quality of work and the worker health promotion [these imply, among other things, the existence of career plans, positions and salaries]; “poor” working relations; distribution and provision of personnel; adequate environments and work processes tailored to the specific characteristics of services. The scope and object of the National SUS Occupational Health Promotion Policy link up to the Health Worker areas; to the Work and Health Education Management, establishing a strategic link between the development of the SUS and the commitment of the managers, between workers and employers with quality of work and with valuation of workers.

It must be pointed out that these professionals perform their functions in healthy conditions and also present their workplace in adequate security conditions, since it’s known that health professional occupational hazards [biological, physical, chemical, ergonomic and mechanical] may occur. So, the risks at the workplace should be identified in order to diminish the consequences that these risks factors may provide to these professionals. Thus, it is up to employers, employees and managers of services to meet what is recommended by regulatory Standard No. 32 (NR-32) [7].

The NR-32 is a law of the Ministry of Labour and Employment that establishes protection and safety measures to the health of health professional who work in care, teaching or research. This law provides that the responsibility for preventing accidents and illnesses caused by work in health professionals is a shared responsibility, that is, the responsibility lies on the contractors and on those who are contracted [7].

After all that has been said before, this research is to perform a reflective analysis about the right to health from the thought of Michel Foucault. It is noteworthy that the articulation of the theme with the thought of Foucault is justified to the extent that the thinker works with conceptual operators of disciplinary technology order, disciplinary society and biopolitics, and regulation [8].
This reflection may contribute to the expansion of studies in the field of health care sciences strengthening one’s own care as well as one’s own knowledge.

The right to health and to knowledge
The right to health, as a duty guaranteed by the State, also requires that the person be aware of his rights to exert his citizenship. In this perspective, the very construction of the meaning of “the right to health” is something historically constructed within the relations among the men of a society in which the discourse itself about this right must be analyzed and thought from a social-historical horizon according to Foucault’s researches in his Archaeology of Knowledge [9]. So, considering the National Health Promotion of Health System Labor policy - SUS should “spread knowledge about the social determinants of health among managers and workers of the SUS” [6]. This fact brings important implications to the field of health since it enables the understanding of the way this knowledge is being produced and coordinated by each person. Then, each period is producing a type of knowledge and a type of speech that is historicity.

If one knows he is the possessor of rights and duties, he knows himself especially as a citizen, and Nursing offers a fundamental contribution to this training process for the critical awareness of this health system user. The user is not only a repeater of a hegemonic discourse speech.

The awareness of the right to health places the subject facing his “power-being”, and able to reflect and to question about the normalizing sanctions he belongs to. He takes part in his own care and in his own health process [10].

The right to health and to power
More and more people are interested in the rights of the citizen and also in his rights. The sphere of knowing is related to knowledge. The popular movements advocate the right to health; the 3rd National Health Conference in late 1963 brought this flag. The cellars of the dictatorship called for this right and, above all, the constitutional question that health is a Citizen’s Right and a Duty of the State [11].

Several factors bring out the question about knowledge, that is, it has always been managed and that every day it breaks out and gives to the worker and to every single citizen political conditions to fight for health. This fight is, ultimately, a fight for his citizenship and that’s because it must be discussed in order to make people understand that any politicization involves duties in relation to the people who are citizens. All this claim is in the bases of the democratic state of rights and duties. If we take this statement into account, it’s possible to corroborate the policy when it says that “the negotiation in health work, requires establishing a permanent negotiation process of interests and conflicts inherent to labor relations” [7].

Indeed, the right to health is directly related to the question of power since power relations constitute a model of action on the action of the citizens. To live in society is, to some extent, to be subjugated to the power relations that are distributed not only vertically but also in horizontal relationships. They are micropowers instituted in several relationships. The access to health services are also related to the right to health and self care.

The Biopower refers to the nationalization of biological life and the biopolitics refers to the control of the body of the population [12]. The biopolitics will serve as a guiding basis for new technology production of oneself and its basis of knowledge power refers to the body.

The right to health and the “care of the self”
In an overview, it is observed that the studies about the right to health care show that this care has a dimension that thinks about the question of the citizenship. Thus, this thought is established as a dialectical perspective that sees it as submission and
subjection. The philosopher’s thought refers to kind of asceticism of the subject on himself, a fact that makes him a better person bringing implications to his citizen condition.

The care of the the self is a synthesis, a connection point between the history of subjectivity and the kinds of governance. According to Foucault, when the Greeks extolled the care of oneself, actually they referred to the care of the soul as a space for thought, for reflection, for dialogue and for the encounter with the other. In this sense, ethics is thought of as a privileged form of reflection on the ways of living, and life is treated as a work of art [11].

By means of this perspective, the care and especially the care of oneself, presupposes the understanding that there is the need to establish the relationship between the exercise of a person upon himself in a way to become a person, that is, to become a better human being and than, be able to exert his citizenship [11].

This way you can make oneself an artistic work, understanding the ethics of the the care of oneself as the ability to stylize and beautify life into a static real existence. It is, therefore, to take care of oneself and at the same time do not forget to take care of the others, to take care of the city, to take care of the polis. There is a relationship of the world, of the existence and, of life.

In fact, the experience of care of oneself is also the experience of freedom because it is a way to be oneself too. It is therefore, ethics as a way of life different from moral. The concern is not “you must” (moral concern) but “because you must” (scope of ethics).

The right to health is the right to life, the right to care of oneself, the guarantee of the rights of the others, of the world and, the right to care of oneself in your own death too so that it be dignified till the final moment. It is necessary to think about the limits of life, the limits of the biopolitics and the limits of government itself. Self care is related to “parrhesia”. This word became “libertas” in latin [freedom of speaking]. It is important to understand that the right to health and also the care oneself needs, must come together with the right of speech, that is, to give voice to the citizen. The right to health is the right of speech. It is freedom of expression with ethical and civic responsibility.

In this sense, the care of oneself is, to some extent, to take possession of life as a work of art and then, allow us to transform ourselves, as a result of new lifestyles that require from each person a plurality of experiments. Taking care of oneself is to get out of oneself and allow oneself to know oneself and to have experiences with one’s own life [13].

To think of self care is to think about the question of subjectivity too. The Professional who has the right to health, who has the right to take care of himself is a subjectivity. According to Foucault, subjectivity is considered as “the way by means of which the individual makes the experience of himself in a real game, and relates with himself” [14].

Taking care of oneself is much more than a moment, but it can prepare the individual to become elder. One must consider that the practices of ancient Greece indicate that the knowledge of oneself is part of an experience related with spirituality, still thought as wisdom and practice of a good life. And the care of oneself prepares the individual to govern and also to the public life, taking into account the whole life, the old age, the death [14]. In effect, it’s a matter of thinking about the understanding of oneself’s culture.

The right to health and the “culture of the self”

“Care” also means taking care when speaking and expressing oneself in liberty with responsibility. Speaking also means knowledge, recognition and hermeneutics of the individual by the individual.
Indeed, it is in the context not only of self-care, but primarily in the context of the possibility of re-foundation of the individuals and their agonistic.

The right to health and the care the self overcome the hermeneutics of the individual. So, he recalls to mind his own care and his own knowledge. Thus, the art of care of the self is a job to be done about oneself and above all, ethical and moral which implies the agonistic relationship for constitutional right to health.

In this sense, the individual, to take care of himself, produces a culture of itself. That is:

“The culture of oneself can be characterized by the fact that the art of existence – the techne tou biou. - is dominated and guided by the principle that it’s necessary to take care of oneself” [15].

This art of existence implies a taking of position especially about life, about the existence and about the being. The culture of the self means to be careful with oneself and the right to health comes into this delicate question. To be careful with oneself is to be careful not only with an objective dimension, but also with the subjective one. So, it’s a care that permeates many areas of existence and coexistence too.

The culture involves cultivating oneself in a way that it enables forms of critical and creative resistance to ethical, political challenges in many fields of the human being [16]. It’s an investment that results in self-knowledge, and allows the emergence of issues, but also contradictions and interdictions/permissions/transitions. In the culture of the self, the own individual emerges as an experimentation of himself and only himself is able to experience since he contributes to the development of a certain ethical-aesthetic mode existence [13, 16]. In all this, it is to be able to observe the importance of agonistic relationships between individuals and the increase in the fight for human rights through the right to health.

Conclusions

Studies on the theme about “the right to health” allow better execution and enhancement of subjective and social dimension in health practices and a critical work of thought about the use of pleasures and care of the self.

To take care of the self is to know oneself; to know oneself is somehow taking over oneself, an individual technique. To take over oneself is also an agonistic relationship between individuals and one of the greatest agonistic relationships that exist in the right to rights.

Thus, it follows that healthcare professionals can implement measures to self-knowledge, self care, through knowing duties and also rights, especially in relation to health through information that may result from training either permanent media search on official sites, interest groups, trade unions and research in universities.

Thus, it is hoped that this article has contributed to the expansion of studies in the field of health care sciences strengthening the perspective of the care of the self as the knowledge of oneself.

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