

An essay on individual self-determination

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Abstract

There are several understandings about the role of human gender identity in the scientific field, this discussion correlates definitions of both social and biological basis. The current confusion in the conceptualization of “sex” and “gender” demonstrates the need for a comparative analysis of the scientific dynamic vocabulary, as well as the insertion of an interdisciplinary historical, social and cultural point of view together with the biological view outside the normative binary logic. The word “gender” can be defined as the social construction of sex, differing from the variable “sex” because it refers to a biological dimension of the anatomo-physiological characterization of humans, recognized as essential and innate in determining the distinctions between male and female. Therefore, the JHGD presents a thematic diversity that focuses on issues related to public health, demonstrating the need to develop knowledge and generate impact on public policy strategies, aiming at universality, equity and comprehensiveness in scientific research involving sex and gender and their impacts on health sciences.

Keywords: sex, gender identity, sexuality, self-management, personal autonomy.

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In the contemporary world several debates have been held about the issue of gender identity, its transformative impact on society, as well as the approach of the theme during the conduction of quantitative and qualitative research in the health sciences.

Taking an approach on human growth and development, as well as the definition of self as the expression of individual self-determination and universal right, it is common to find errors when researchers engage in the use of variables in their qualitative and quantitative studies addressing gender and sex.

The definition of sexuality and gender are understood as elements that guide human existence, constituting as pillars for the formation of the individual “self”, formed from biological, social, psychological and cultural factors, accumulated together with the individual experiences and generational changes over time.

For Health Sciences Descriptors (DeCS), Gender is defined as what a person has in himself to be male and man or feminine and female, or ambivalent, based in part on physical characteristics, parental responses, social and psychological pressures, being expressed by the gender identity of the individual. On the other hand, Sex is the totality of the reproductive structures, functions, phenotype and genotype that distinguish the male organism from the female^{1,2,3}.

The need to distinguish between the two biological sexes began in the 18th century⁴ from the differentiation of reproductive organs, and biological essentialism emerged at this time⁵. In the 70's, the term gender is conceptualized in Social Sciences as the “distinction between cultural attributes allocated to each sex and the biological dimension of beings”⁶, that is, it expresses a system of relationships that includes sex⁷, but transcends biological difference.

The concepts of sex and gender are terms that refer to two different fields: one expresses exclusively biochemical and physiological characteristics defined by the biosciences and the other encompasses the cultural and subjective dimension of what is meant by “being a woman”, “being a man”, or also the right not to be defined⁸.

The need for the analytical distinction between the concept of “gender” and “sex” is evidenced by the prevalent historical construction and the inequalities of gender relations⁹.

The concept of gender in epidemiological models should maintain instruments, methodologies

and concept that are convergent with other disciplines, especially the Social Sciences, to aggregate the involvement of the health-disease process¹⁰.

Gender is a cultural transcript of biological reality, that is, society builds sexual differences by assigning distinct social functions between men and women. Gender, therefore, refers to the social aspect of human sexuality¹¹.

The implementation of the concept of sex and gender in public health policies, in Brazil, is the result of social issues that emerge from the questions of social control social development along with the diversity of scientific research^{5,8}.

Thus, it was necessary to expand the areas of knowledge in health sciences and public health, as a product of interdisciplinarity, for example, the insertion of definitions in social sciences with epistemological issues which relates the proper objects of biology combined with sociology and anthropology. In this regard, other philosophical possibilities within the biosciences have proved useful in addressing biological diversity outside a normative binary logic⁸.

As a consequence, it is understood that gender is constituted through a dynamic of social relations, so it does not only imply saying that there are no concrete differences between men and women, but that gender is inscribed in the sexualized bodies, and that these are represented according to the social ideal presented in the culture^{7,12}.

And within this scenario, the search process for more concrete arguments reinforces that the sexual characteristics that cause the differences between the sexes, and these differences are transposed to social practices, in which gender as a cultural definition is a consequence of an environment. historical^{7,12}.

This social context deals with a controversial theme, the approach and understanding of the differences between the terms sex and gender, as well as their sociological and biological differentiation will guide science with a universalizing, plural and comprehensive view as its core.

The understanding of these concepts by health science researchers will allow published studies to take a more focused look at minorities, allowing them to understand more clearly and precisely their needs and the reality in which this portion of the population is inserted.

The lack of perception and the constant social invisibility of this part of the population, whose biological sex is different from their gender identity, hinders access to basic services, impairs their access

to health and marginalizes them, as if they were not part of society.

It is important to note that despite any choice or political definition, deny another citizen access to health go against basic principles of our federal constitution and violates principles of the International Declaration of Human Rights.

In order to achieve progress in a democratic, fair and cohesive manner, it is not right to discriminate any part of society that is made up of a gender, social and / or economic minority.

In this issue, It can be found articles on specific topics that include the development of infants and adolescents¹³⁻²⁰, including scientific articles focusing on neonatal mortality¹⁹, clinical conditions of newborns exposed to syphilis²⁰ malformations of the nervous system¹⁸, respiratory system¹⁵ and endocrine system²¹ resulting in the development of syndromes during their development, as well as articles on infant feeding through maternal colostrum and its composition¹³, including feeding issues¹⁴ and manual behavioral¹⁶.

In this edition there are articles that allow the identification of the impact of a minor surgical

procedure in the family health community²² and the analysis of the use of psychotropic drugs and their relationship with psychotherapy at the interface of mental health²³.

There were also included a collection of selected studies on cardiovascular research²⁴⁻²⁶ the characterization of cardiovascular rate control during spinal anesthesia²⁴ and weaning from mechanical ventilation²⁵, as well as the evaluation of new superficial venipuncture techniques²⁶.

You will also find validation of a Brazilian Portuguese language instrument of psychological measures that talks about the appearance of people living with HIV / AIDS in Brazil²⁷.

For this reason, the JHGD magazine presents a thematic diversity that focuses on issues related to public health, demonstrating a need for knowledge to generate new repercussions in public policy strategies, aiming at universality, equity and integrality in health processes, with the inclusion of new concepts for example in the discussion about gender and gender.

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Resumo

Existem diversas compreensões acerca do papel da identidade de gênero do ser humano no espaço científico, essa discussão correlaciona definições tanto de base social quanto biológica. A atual confusão na conceptualização de “sexo” e “gênero” demonstra a necessidade de uma análise comparativa do vocabulário dinâmico científico, assim como, a inserção de um ponto de vista histórico, social e cultural interdisciplinares em conjunto com a visão biológica fora de uma lógica binária normativa. O vocábulo “gênero” pode ser definido como a construção social do sexo, diferenciando-se da variável “sexo” porque esta se refere a uma dimensão biológica da caracterização anatomo-fisiológica dos seres humanos, reconhecida como essencial e inata na determinação das distinções entre macho e fêmea. Por isto, o JHGD apresenta uma diversidade temática que tem como foco questões voltadas à saúde pública demonstrando a necessidade do desenvolvimento de conhecimento para gerar impacto nas estratégias de políticas públicas, visando a universalidade, equidade e a integralidade nas pesquisas científicas que envolvem sexo e gênero, e seus impactos nas ciências da saúde.

Palavras-chave: autogestão, sexo, identidade de gênero, sexualidade, autonomia pessoal.

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