THE EXPLANATORY CONCEPTION OF THE CONCEPT OF VULNERABILITY, AND NURSING

The conceptual picture of Vulnerability is used in the areas of Human Rights and Health, as an explanatory conception, less punitive and discriminatory, regarding the occurrence of diseases, especially the AIDS epidemic, and for the expansion of the limit of interventions, re(discussing) the concepts of group, risk behavior and situation. When analyzing the applicability of the concepts of vulnerability and risk, it is considered that they are different concepts, in spite of the strict relationship between them, although the systematization of risk continues to be fundamental to science. For the interpretation of the health-disease process, it is considered that risk indicates probabilities, and that vulnerability is an indicator of social iniquity and inequality.

Perhaps, the greatest contribution in the conceptual dialogue between risk and vulnerability is in the displacement of the notion of individual risk to a new conception of social vulnerability. Without considering that every human being is biologically susceptible, social conditions put some subjects and groups in situations of greater vulnerability, which allows for a better perception of how inequality and injustice, prejudice and discrimination, oppression, exploration and violence in society accelerate the dissemination of epidemics in different countries.

When discussing an event under the aegis of vulnerability, three interdependent dimensions are considered for its determination: individual, programmatic and social. Individual vulnerability regards the knowledge about aggravations and the existence of behaviors that enable the occurrence of infections. It should be understood that behaviors are not determined only by a person’s voluntary action, but especially by his or her capacity of incorporating, or rather, of applying the knowledge he or she has, transforming the behavior that makes him or her susceptible to aggravations.

Programmatic vulnerability takes into account the access to health services, the form of organization of the services, the bond users of the services have with the professional, the reception of the user by the service, preconized actions for prevention and control of aggravations, and existing social resources in the scope area of the health service.

Social vulnerability assesses the social dimension of the sickening process, using indicators capable of revealing the profile of the population when it comes to access to information, expenses with social and health services, access to health services, mortality rate of children younger than five years old, the situation of women, human development index, and the relationship between expenses with education and health.

To nursing, the relevance of the knowledge about the vulnerability to health-related events is in the identification of the health needs of those who are vulnerable, with the aim of ensuring them greater protection. The analysis of vulnerability allows comprehending the differences in the way each subject, individually and collectively, faces the health-disease process, with the construction of markers that can be used to assess the living and health conditions of individuals and groups, and to subsidize interventions aimed at the determinants of the vulnerability state.

It is also possible to endow health actions with a greater comprehensiveness, by extending intervention proposals to all three vulnerability dimensions and to the influences exerted by each one of them, constructing intervention with a multidisciplinary character that goes beyond punctual and emergency measures, respecting the complexity of the health object and of its causality.

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