

65 - JOÃO PESSOA CITY – PB TERRITORIAL ANALYSIS: ENVIRONMENTAL, SOCIAL AND HEALTH PROBLEMSMILENA NUNES ALVES DE SOUSA¹ELISANGELA VILAR DE ASSIS²KYLVIA LUCIANA PEREIRA COSTA³EDINEIDE NUNES DA SILVA⁴UBIRAÍDYS DE ANDRADE ISIDÓRIO⁵

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1 INTRODUCTION

Since Brazil discovery the country passed through changes in health scenery with intense debates and constant mobilizations, in order to guarantee the universal access, integrality of attention and harmony between resource and demand (BRASIL, 2009). Beside various policies, it is recognized as a particular moment the creation of the Unified Health System (UHS) acting since 1990 with the creation of Health Organic Laws (HOL) of nº 8.080 and nº 8.142 and various other norms and emitted by Health Ministry which are instruments of system regulation.

The referred system edification wasn't simple, many events needed to happen. However, it is recognized as unquestionable mark, according to Bravo (2002), the occurrence of the 8th Health National Conference, carried out in March of 1986, in Brasília. The event proposed, besides the SUS, the Brazilian Sanitary Reform. With the SUS institution, the conception of health becomes bigger. If it was understood before as mere lack of illness, now it passes to be determined by various factors as education conditions, work, habitation, environment and sanitation (NASCIMENTO; OLIVEIRA, 2010; PEREIRA; CANABRAVA, 2005).

According to the authors, in step with Federal Constitution of 1988, with the SUS is guaranteed health attention in a holistic, equitable and universal manner. Also, with the creation of the Basic Operational Norms (BON), health actions decentralization occurs, that drives the intervention and its resolvability to the cities, from health promotion, seen, nowadays, "as one of the strategies of health production, [...] as a way of thinking and operating [...] in Brazilian health system, contributes to the construction of actions that turns to respond to social needs in health" (BRASIL, 2006, p. 10). Being like this, is proper to the county the interventions over health-disease process.

Facing these prerogatives, as well as the public intervention obligatoriness, specially by the county, over population health-disease process, this study proposed to identify the situation of João Pessoa-PB regarding to local population environment, social and health determinants problems. The justification of this research reflect itself over the municipal management and, as priority, over the population of the referred city, once along the documentation/cataloguing process of the environment, social problems and, consequently, of health, are proposed improvements and interventions, aiming the residents life quality.

2 METODOLOGY

This investigation regarding to the issue was of exploratory and descriptive type. Concerning to the means, was carried out a bibliographic and documental research, based in secondary sources (OLIVEIRA, 2001).

The search for sources occurred in Health Ministry data basis (MS/DATASUS), of Geographical and Statistical Brazilian Institute do (SGEBI), of João Pessoa Municipal Prefecture (JPMP), of United Nations for the Development Programme (UNDP), of the Applied Economic Research Institute do (AERI) and in the site of Scientific Electronic Library Online (SciELO), among others. The data were collected in the period of August to October of 2011 and were consulted sites and official files. The analysis was based in the qualitative approaching, from the bibliographies that treated in a direct and indirect manner questions referring to environmental, social and health problems of João Pessoa, capital of Paraíba.

3 RESULTS AND ANALYSIS**3.1 JOÃO PESSOA CITY**

Founded in 1585 with the name of Filipéia de Nossa Senhora das Neves, João Pessoa is the capital of Paraíba, the third city more antique in Brazil and also the last to be founded in the country in XVI century (PMJP, 2011).

Because of its geographical location, it is known as "Sun Gateway", once the city is located at Ponta do Seixas, which is the more oriental point of the Americas (PMJP, 2011). It is also considered the "second greenest city in the world", with more than 7m² of forests per habitant, loosing just for Paris, France. This denomination was conferred during the United Nations for Environment and Development Conference or ECO-92, carried out in Rio de Janeiro in 1992 (PINA; ALMEIDA; PINA, 2010).

The population, according to IBGE (2007), is of 723.514 habitants, with a demographical density of 3.146,6 hab./km². About the population number is important to detach that over the last decades João Pessoa has developed considerably. Between 1980 to 2010 the population migrated from 329.942 to 723.514 habitants, an increase of more than 100% (PMJP, 2011). Regarding to the economic aspects, according to the institution, the tourism is a great income producer and jobs generator, besides the commerce. It might be also considered its industrial park (the bigger of the county), formed by various segments: nutriment, automobilist, drinks, minerals, among others.

These characteristics turn possible the city to have a greater economy and collection of taxes for the county, with the gross domestic product (GDP - R\$ 7.661.218,505). Still, the city was among the hundred greater GDP of the country occupying the 60th position in national ranking (IBGE, 2007).

The city is the 2nd capital more sanitized of Nordeste, with more than 83% of the city sanitized, 100% of the houses attended by electrical energy and 100% related to water supply (PMJP, 2011). In the Human Development Atlas in Brazil of 2000, the illiteracy tax is of 14% (PNUD, 2011). Despite this, it has an education network with education institutions of university, high and fundamental level, public and privates (IBGE, 2010). In health, the child mortality tax is of 13,3 per thousand live births, even

so, has got one of the lower taxes of child mortality. Moreover, the life expectation at birth is of 71,3 years (IBGE, 2000).

To conclude, it is indeclinable to detach the Human Development Index (HDI). From 1991 to 2000, the city HDI turned from 0,719 to 0,783, presenting an evolution of 9%. In comparison to the county HDI, that is of 0,678, it is observed that the same is higher (PNUD, 2011; PINA; ALMEIDA; PINA, 2010). Despite this, the capital is the less unequal of Nordeste, according to the Recife Human Development Atlas (PREFEITURA MUNICIPAL DO RECIFE, 2005).

3.2 MAIN ENVIRONMENT PROBLEMS

We observed the presence of many environment difficulties experienced by local population that were related in literature (COELHO et al., 2011; BECK; ARAÚJO; CÂNDIDO, 2009; MORAIS, 2009; SILVA, 2009), detaching: The accentuated metropolization and vertical process; the urban infrastructure saturation from the indiscriminate population densification; the environment comfort change, with ventilation blockage and heat islands, beaches environmental pollution, mangroves and coast ecosystems, besides the diminution and pollution of water subterranean; water pollution and water resources siltation; erosion and environment fragility, specially in altiplano Cabo Branco; and the Urban Solid Residues (SR) problematic – final disposition.

Specifically over the SR, 100% of the domestic residues produced in Capital are being left in sanitary landfill, when 50% could be composted and transformed in fertilizing, and 35%, that constitute recyclable material, are going to the waste, when there are industries that could reuse them (BECK; ARAÚJO; CÂNDIDO, 2009). Then, by the problems related it is indispensable to act on them, once it is unquestionable the link between the health and the environment, as reference Pina; Almeida; Pina (2010) and Freitas (2003).

3.3 MAIN SOCIAL PROBLEMS

Morais (2009), Silva (2009) and Barbosa (2005) mentionate the following: social stratification – it is the 3rd capital proportionally with the greater number of rich families in Nordeste region according to Fundação Getúlio Vargas (FGV) research with 2010 Census data, the city just is behind Recife-PE and Aracaju-SE; population peripherization, violence, prostitution and high drugs consumption; the social exclusion promoted by the housing speculation; the services enhancement, urban taxes, and public services deterioration; life quality reduction – caused by rivers and beaches pollution; and high income concentration.

3.4 MAIN HEALTH INJURIES

According to Malta et al. (2006) the main injuries that have compromised the population are the non-transferable diseases, and the external causes. Regarding to the diseases among João Pessoa residents there are some transferable as: tuberculosis, leprosy, syphilis etc.; non transferable: hypertension and diabetes; external causes: urban violence and traffic accidents (MS/DATASUS, 2011; MS/DATASUS, sd apud PREFEITURA MUNICIPAL DE SALVADOR, 2010; COSTA, 2007).

For better comprehension of the reality, the number of Congenital Syphilis in 2006 among nordeste capitals in the year of 2006 is particular, nevertheless, João Pessoa city is ahead of the following capitals: Teresina, Maceió and Aracaju in number of cases (MS/DATASUS, sd apud PREFEITURA MUNICIPAL DE SALVADOR, 2010). Even more, regarding transferable diseases, in January the city had 122 cases of tuberculosis and 76 of leprosy (MS/DATASUS, 2011).

About these diseases it is detached that they might be eradicated yet, once there are adequate mechanisms for these pathologies extinction. However, even recognizing the great changes, technical, scientific and information advances, it seems to be impossible to extinguish the diseases reappearance or to restrict the appearance of new ones. These problems, instead of being solved, continue to increase with taxes without precedents, while others reappear even being in the past decline or not occurring (CARVALHO et al., 2009; PERIAGO et al., 2007). It is added the conceptions of Almeida et al. (2009) for whom the moment is jumped over the reemergence of diseases as tuberculosis, leprosy and congenital syphilis.

More than that, data referring to the hypertension and diabetes evidenced, according to MS/DATASUS (2011), that in January the number of patients registered was of 59.534 and 15.707 patients, respectively. Comparing to the population number, is possible to perceive that the number of hypertensive and diabetics is high, reverberating over health promotion actions importance, once in this century, the nontransferable, chronicle diseases are considered a great public health problem (PACHECO; SANTOS; BREGMAN, 2006).

In a more global form, is fundamental to evidence the hospital morbidity factors of João Pessoa, Paraíba, according to the age group. These reports are in picture 1.

| Percentage distribution of causes of hospitalizations per group and age - CID 10 (by place of residence, 2005) | | | | | | | | | |
|--|--------|--------|--------|----------|----------|----------|----------|-------------|-------|
| Group causes | < de 1 | 1 to 4 | 5 to 9 | 10 to 14 | 15 to 19 | 20 to 49 | 50 to 64 | 60 and more | Total |
| Certain infectious and parasitic diseases | 29.7 | 44.9 | 30.5 | 15.3 | 1.3 | 2.9 | 3.5 | 4.5 | 9.7 |
| Neoplasms (tumors) | 0.3 | 2.2 | 2.5 | 5.4 | 3.9 | 6.0 | 9.8 | 7.6 | 5.7 |
| Blood diseases | 0.6 | 0.5 | 1.0 | 1.5 | 0.3 | 0.4 | 1.4 | 1.2 | 0.7 |
| Endocrine, nutritional and metabolic diseases | 0.7 | 1.2 | 2.2 | 2.5 | 0.6 | 1.0 | 3.2 | 5.8 | 1.9 |
| Mental and behavioral disorders | 0.2 | 0.2 | 0.3 | 1.5 | 2.1 | 7.6 | 7.3 | 0.4 | 4.6 |
| Nervous system disorders | 1.8 | 1.4 | 1.6 | 2.1 | 0.5 | 0.6 | 0.5 | 0.5 | 0.8 |
| Diseases of the eye and attached | 0.1 | 0.1 | 0.4 | 0.3 | 0.7 | 1.7 | 1.0 | 1.0 | 0.7 |
| Diseases of the ear and mastoid process | 0.1 | 0.1 | 0.3 | - | 0.1 | 0.1 | 0.1 | 0.1 | 0.1 |
| Diseases of the circulatory system | 0.1 | 0.3 | 1.6 | 1.3 | 5.9 | 23.0 | 23.0 | 26.7 | 9.2 |
| Respiratory diseases | 41.3 | 34.9 | 23.7 | 4.2 | 6.1 | 15.8 | 15.8 | 23.3 | 14.8 |
| Digestive diseases | 2.5 | 3.7 | 9.9 | 2.7 | 7.5 | 13.4 | 13.4 | 10.4 | 7.6 |
| Diseases of the skin and sub cutaneous tissue | 0.1 | 0.3 | 0.8 | 0.7 | 1.3 | 2.8 | 2.8 | 3.0 | 1.5 |
| Diseases of the musculoskeletal system and connective tissue | 0.1 | 0.3 | 2.1 | 3.5 | 0.7 | 1.6 | 1.8 | 1.5 | 1.4 |
| Diseases of the genitourinary system | 1.7 | 2.8 | 7.7 | 9.2 | 2.3 | 4.7 | 8.2 | 7.5 | 5.2 |
| ----- | - | - | 0.1 | 11.1 | 72.3 | 43.8 | 0.1 | 0.2 | 26.5 |
| Certain conditions originating in the perinatal period | 15.4 | 0.1 | 0.2 | 0.2 | - | - | 0.1 | 0.1 | 0.8 |
| Congenital malformations and chromosomal abnormalities | 3.1 | 2.0 | 2.7 | 2.3 | 0.2 | 0.2 | 0.1 | 0.1 | 0.7 |
| Symptoms, signs and abnormal clinical and laboratory findings | 0.6 | 0.7 | 1.5 | 1.1 | 0.5 | 1.1 | 1.7 | 1.8 | 1.1 |
| Injury, poisoning and other external causes | 1.5 | 4.3 | 10.5 | 15.5 | 5.7 | 6.9 | 5.4 | 4.5 | 6.1 |
| External causes of morbidity and mortality | - | - | 0.1 | 0.1 | - | - | 0.1 | 0.1 | - |
| Contacts with health services | - | 0.1 | 0.3 | 0.3 | 0.1 | 1.9 | 0.1 | 0.2 | 0.9 |

Picture 1: Hospital Morbidity – João Pessoa-PB
Source: (SIH/SUS/MS/DATASUS, 2005).

About the external causes, the homicide taxes put the region as one of the more violent of the world, with an index twice greater than the world average: 22,9 per a hundred thousand habitants against 10,7. The classification of external causes (or violent) gather the subgroups: accidental; intentionally auto provoked injuries (suicides); aggressions (homicides); events whose intention is undetermined; legal interventions and operations of morbi-mortality, urban violence and traffic accidents (COSTA, 2007).

5 CONCLUSION

The data collected evidenced that, João Pessoa, even with many characteristics and positive particularities, has experienced serious problems, as: infrastructure saturation, pollution and hydric, social stratification and others. These can be caused by various factors, as for example, because of inadequate public policies or even by an inadequate management.

This way, as there were many health injuries, the environment and social problems, proposes itself the following improvements and interventions, aiming the residents life quality: Realization of campaigns referring to environment education; Elaboration and delivery of manuals to the residents about selective collection; Creation of the Tourism Conduct Code Against Sexual Exploration in Children and Adolescents; Generation of Work, Income and Solidary Economy; health promotion actions induction: control of vectors; stimulation to physical activities regular practice; combat to alcohol abusive use and other drugs; stimulation to healthy food practices; establish education and communication program for habits promotion that reduces diseases risks; Promote legal measure revision that are capable of reducing the impact of the risks to the health from the consumption of products potentially harmful to health; and promote actions of confrontation of iniquities and inequalities in health or even social.

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TERRITORIAL ANALYSIS OF THE JOÃO PESSOA-PB CITY: REGARDING ENVIRONMENTAL, SOCIAL AND HEALTH PROBLEMS

ABSTRACT

Objective: identify the situation of João Pessoa-PB regarding to local population environment, social and health determinants problems. Methodology: The authors conducted exploratory research, descriptive bibliographical and documentary. Data were collected between August and October 2011 and were consulted websites and official files. Results: João Pessoa has experienced serious problems, such as saturation of infrastructure, and water pollution, social stratification, peripherization population, urban violence, and other income concentration. Conclusion: knowing that profile is extremely relevant, since it is possible to promote strategies for the promotion of health and prevention, indispensable attributes for the new proposed health intervention in the country, assisting in the performance of Primary Health with quality, equity and universality.

DESCRIPTORS: Territory. João Pessoa. Problems. Health Promotion.

ANALYSE TERRITORIALE DE LA MUNICIPALITÉ DE JOÃO PESSOA-PB: LES PROBLÈMES AMBIENTAUX, SOCIAUX ET DE SANTÉ

RÉSUMÉ

Objectif: identifier la situation de la municipalité de João Pessoa-PB par rapport aux problèmes environnementaux, sociaux et leurs impacts sur la santé de la population locale. Méthodologie: On a réalisé une étude à caractère exploratoire, descriptif, bibliographique et documentaire. Les données ont été récoltées dans la période entre Août et Octobre de 2011 et ont été consultées des sites et des archives officiels. Résultats: João Pessoa a vécu des problèmes sérieux, comme la saturation des infrastructures, et la pollution de l'eau, stratification sociale, la population périphérisation, violence urbaine, concentration de la richesse entre autres. Conclusion: sachant que le profil est extrêmement important, car il est possible de promouvoir des stratégies pour la promotion et prévention de la santé, condition indispensable en direction à un nouveau modèle pour le pays d'intervention en santé, aidant à l'exécution de l'Attention Primaire en Santé de qualité, de l'équité et d'universalité.

PALAVRAS-CHAVE: Territoire Urban. João Pessoa. Problèmes de Santé. Promotion de La Santé.

ANÁLISIS TERRITORIAL DEL MUNICIPIO DE JOÃO PESSOA-PB: LA PROBLEMÁTICA AMBIENTAL, SOCIAL Y SALUD

RESUMEN

Objetivo: identificar la posición de la ciudad de João Pessoa respecto a los impactos ambientales, sociales y de salud para la población local. Metodología: los autores llevaron a cabo la investigación exploratoria, descriptiva bibliográfica y documental. Los datos fueron recolectados entre agosto y octubre de 2011 y se consultaron sitios web y archivos oficiales. Resultados: João Pessoa ha experimentado problemas graves, como la saturación de las infraestructuras y la contaminación del agua, la estratificación social, la población periférisación, la violencia urbana y la concentración de otros ingresos. Conclusión: sabiendo que el perfil es muy relevante, ya que es posible promover estrategias para la promoción de la salud y prevención, atributos indispensables para la intervención sanitaria propuesta de nuevo en el país, la asistencia en el desempeño de Primaria de Salud con calidad, equidad y la universalidad.

PALABRAS CLAVE: Territorio. João Pessoa. Problemas. Promoción de la Salud.

ANÁLISE TERRITORIAL DO MUNICÍPIO DE JOÃO PESSOA-PB: OS PROBLEMAS AMBIENTAIS, SOCIAIS E DE SAÚDE

RESUMO

Objetivo: identificar a situação do município de João Pessoa-PB quanto aos problemas ambientais, sociais e seus impactos sobre a saúde da população local. Metodologia: realizou-se pesquisa de cunho exploratório, descritivo, bibliográfico e documental. Os dados foram coletados no período de Agosto a Outubro de 2011 e foram consultados sites e arquivos oficiais. Resultados: João Pessoa tem vivenciado graves problemas, tais como saturação da infraestrutura, poluição e hídrica, estratificação social, periferação da população, violência urbana, concentração de renda e outros. Conclusão: conhecer o referido perfil é extremamente relevante, visto que é possível fomentar estratégias em prol da promoção e prevenção da saúde, atributos indispensáveis para a nova proposta de intervenção em saúde do país, auxiliando na atuação da Atenção Primária da Saúde com qualidade, equidade e universalidade.

PALAVRAS-CHAVE: Território. João Pessoa. Problemas. Promoção da Saúde.