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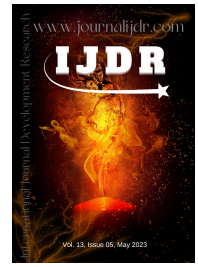
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RESEARCH ARTICLE

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ANALYSIS OF THE INTERPRETATION GESTURES PRESENT IN ORAL CANCER PREVENTION CAMPAIGNS

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ABSTRACT

According the World Health Organization (WHO, 1984, p. 9), "Health is a state of complete physical, mental and social well-being and not merely the absence of disease. This is an ideal to be followed, despite all the opacity involved in the meanings produced by this statement. The State launches public policies nationwide, aiming to make real the unattainable: a country without diseases and with socially and mentally healthy citizens. Affiliated to the French Discourse Analysis, this study aims to analyze and understand the meanings circulating in the government's campaigns on oral cancer. The analyzed material is available on the official website of the Ministry of Health, aired between 2013 and 2015, but still available and indicated as dissemination material today.

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INTRODUCTION

Cancer is a disease that affects millions of people around the world. Despite the evolution of science, this disease continues to be synonymous with suffering, pain and death. The word cancer refers to a set of diseases that can affect people and that can occur in different parts of the human body, among them the mouth and oropharynx cancer that was chosen in this research because it represents a serious public health problem, with high rates of morbidity and mortality. Just like the Dengue Fever prevention campaigns, the oral cancer prevention campaigns allow us to understand how the relationship between the State, the citizen and the public policies aimed at promoting health for all is established, as a fundamental right. Oral cancer is characterized by its high prevalence, mortality and low survival rates (MORO et al., 2018). According to INCA, it is the fifth cancer that affects more men and the twelfth among the female population. According to Falcão et al., (2010), the survival rate of patients is directly related to the clinical stage of the lesion, among the unresectable tumors, those located near vital organs and that are not completely removed during surgery, do not exceed 10%.

It is noteworthy that treatment varies strikingly: in first-world countries, patients are treated at an early stage, and in emerging countries, tumors are treated at a more advanced stage, consequently increasing the mortality rate. It is noteworthy that the statistical data account only for those who die, not involving information on social, economic and public policy issues. The disclosure of information and statistical data on cancer of the mouth and oropharynx is important, because the sooner it is identified and detected, the greater the possibility of patient survival (ONOFRE, 1997). The approach present in the Campaign signals that it would only be a matter of time and early diagnosis to increase the chances of cure; however, many times the poorest people do not have access to a doctor and treatment. In short, it is not a question of luck and access to information, but of inefficiency in the management of Public Health by the State. This work is affiliated to the French Discourse Analysis, based on the notion of discourse, seeking to contribute to the understanding of how the meanings are put and erased in the campaigns and their possible effects on society and the promotion of Public Health. To do so, the official portal of the Ministry of Health, currently entitled Old, was used. There is a page entitled Health from A to Z, which provides advertising pieces to be used by the States and Municipalities.

Analysis of the Advertising Pieces: For Carrozza (2018), advertising pieces should be looked at as material forms that relate to the way society is organized around a dominant ideological formation. Capitalism produces the capitalist subject form of rights and duties. In this way, when looking at an image or advertisement, one should consider not only its informative character, but also its attempt to add value to the advertised product, drawing the subject to a consumer good, which can be understood here as a type of behavior to be consumed in order to stay healthy.



Source: Brazil (2019a)

Figure 1. Do you know what mouth cancer is?

Figure 01 has reddish tones, establishing a relationship with the red of the lips and the inside of the mouth. The only image that shows the place where cancer affects the person appears at the bottom of the advertisement, almost imperceptibly: a shaded lip, with a small line in the middle. It is noteworthy that the lip is healthy, without any wound or compromised structure that could refer the speaker to mouth cancer. In the upper part of the figure, in small words, next to a small yellow bar, there are the words: MOUTH CANCER PREVENTION WEEK. The correct date is not mentioned, because, according to Law 13.230/2015, it must occur every first week of the month of November, throughout the country (BRASIL, 2015a). This type of advertising is carried out this way, so that the art is enjoyed for a long time. The law provides that in this specific week the public authorities, represented by health managers from all health secretariats, nationwide, make a prevention campaign in their area of activity. Therefore, the definition of the date would be necessary for the Ministry of Health to be committed to communication actions, in social networks, TV and radio, to inform what the disease is, how to prevent it, and to orient about where and which oral health services are available to the population. The establishment of a week for discussion and prevention marks the sense of anticipation: a week reserved for prevention of the disease is anticipating that this action will promote preventive health for a whole society, and that this uniform action will reach everyone at once, regardless of the conditions of production and the gestures of interpretation produced from the information conveyed. Without making any mention of dates, these words are written in white and in capital letters. The words YOU KNOW WHAT IT IS are highlighted in the middle of the poster; in red, the words CANCER OF THE MOUTH, written in capital letters, in white and bold; beside these words there is a question mark in red, covering the space of the two lines, inviting the interlocutor to reflect on the subject. According to Baudrillard (2005), the belief that images can testify a reality is an illusion, because the image is a representation beyond the real, and can be both presence and absence. This relation of representation of reality with the image is interesting, because when a somber but apparently healthy mouth is presented, it produces an absence of the senses of the disease, of its real aspect and seriousness. As an illustration and counterpoint, the images below show the aspect of mouths affected by mouth cancer:

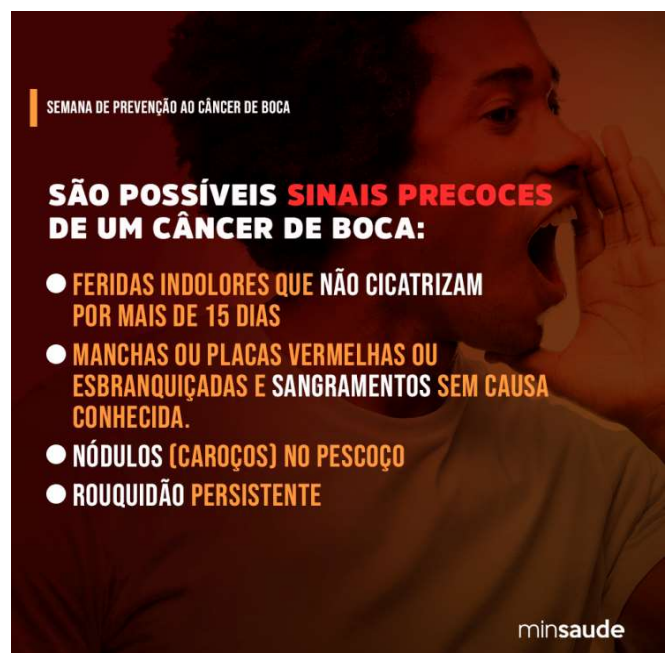
In the Official Campaigns, there is no allusion to the loss of teeth, deformed tongue and full of wounds that can generate pain, discomfort, bad breath, with an erasure of the real conditions of this disease in the Campaigns that always show a healthy mouth, in the certainty that the slippage of senses to illness will happen.



Fonte: Cancro... (2016).

Figure 2. Aspects of the mouth affected by oral cancer

The point is that the meaning may be different and the image may not generate the expected understanding or the anticipated meanings.



Source: Brazil (2019a).

Figure 3. Signs of mouth cancer

Figure 03 follows the same pattern as the previous Campaign: it has a reddish-brown tone, alluding to the tone of the mouth; the poster is very colorful, presenting a game of colors and words, where what is more complex to understand is presented in parentheses, as in the case NODULES (BUDS) ON THE NECK. In the background, the image of a man who symbolically screams are used in order to provoke a gesture related to the alert. The hands are around the mouth, enhancing the fact of shouting, summoning the interlocutor to be attentive to the information being conveyed. The advertising piece above is intended to inform how to identify oral cancer early. There is a game of colors that goes from white to red, from white to orange. The game of colors occurs from white to red, alluding to the color of the mouth and mucous membranes, producing an effect of a sense of attention, like the traffic signal in which red signals STOP! You need to identify the early signs of mouth cancer. It is noteworthy that, at the same time, the advertising encourages to STOP and to ACT carefully, early.

Below is the description of the signs:

<ul style="list-style-type: none"> ● Painless Wounds that do not Heal for more than 15 days; ● Red or white spots or plates and bleeding with no known cause; ● Nodules (buds in the neck) ● Persistent hoarseness
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The words NODULES/BUDS are presented intentionally, apparently to meet a division between those who understand and those who do not understand the meanings linked to the disease and its symptoms, in a language closer to medical discourse. The poster above is addressed almost exclusively to the literate population, as essential information does not appear in the image, but in the description and decoding of the signs of the disease.



Source: Brazil (2019a).

Figure 4. What is oral cancer

Orlandi (2012) explains that the analyst works the outside inside, the historicity, how the senses are organized in the relationship between language and exteriority, producing effects. Exteriority must be thought of, considering the conditions of production as constitutive historicity of the discourse. Some issues are linked to the demands of today's society, such as the search for an aesthetic smile and white teeth. These factors are linked to the current conditions of existence, which were not considered at other times. Figure 04 reproduces an official *folder* of the Government that displays, as if in a footnote, all the symbols that lead to the identification of the State that individuates the subjects through its institutions and public policies. By analyzing the material in circulation, we will know if it is an Official Campaign. The background color of the *folder* is light pink and the words are written in blue. There are several images of mouths, but despite being dealing with risk factors for oral cancer, the images are of people of different ethnicities and ages, but apparently of privileged social class, considering the whitening, alignment and structure of smiles. A child is shown brushing his teeth. At the top of the *folder* is presented, in bold and in dark blue, the phrase: WHAT IS MOUTH CANCER, relating the information to the images of well-groomed mouths and smiles. The well-groomed mouths that appear in this poster erase the real conditions that the body goes through when affected by this disease. At no time do wounds, loss of teeth, the sequelae of diseases that leave the face disfigured appear; these conditions are simply erased, showing only healthy mouths, with teeth whitened and aligned. In the phrase WHAT IS MOUTH CANCER, the letter O refers to a definite article, used to refer to a specific noun, in this case, cancer, but not any cancer, but oral cancer. The use of the definite pronoun is used in an attempt to stabilize the interpretation of the facts, ruling out the possibility of other interpretations.

Below, the words are written in black and in lowercase:

It is a type of malignant tumor that affects:
Lips, Gums, Cheeks, Roof of the mouth (palate), Tongue (especially the edges), Floor of the mouth (region under the tongue).

Note that the speaker used words from medical speech or more specific to the health area (cyst) to explain the place where the tumor affects the mouth, but later uses parentheses to explain, in simpler words, in an attempt to reach everyone.

Ex: Floor of the mouth (region under the tongue)

According to Pêcheux (1997), there is a relationship between the sciences considered stabilized and those that give possibilities of equivocal formations, through the interpretation established by the reader subject. According to the author, the same event, due to the opacity of the language, can have several meanings in different utterances. Health sciences and all matters connected with it are considered stabilized sciences. To maintain this stabilization, the author states that a logical homogeneity is used that is crossed by a series of misunderstandings, which can generate different interpretations. The stabilization of spaces of interpretation is one of the demands of the State to make society manageable, this action is imposed on the pragmatic subject by scientists, specialists and administrative officials, yet it becomes unsustainable when we consider the possibilities of interpretation.

[...] This need for borders coincides with the construction of bonds of dependence in the face of multiple things - namely, considered as reserves of accumulated knowledge, machines of knowledge against threats of all kinds: the State and institutions function most often - at least in our society - as privileged poles of response to this need or demand (PÊCHEUX, 1997, p. 34).

Pêcheux (1997) states that the discourse analyst must be aware of two tasks: the first, related to the discourse as a structure; it must, therefore, recognize the real of language, overcoming its conception as an "invariable base", since the symbolic is inseparable from lack. Therefore, procedures must be built to neutralize unwanted or unanticipated interpretations. When analyzing the photos of the Mouth Cancer Campaign, regardless of what is written, we would hardly make a relationship between the images on the *flyer* and the severity of the disease addressed by the campaign. This mismatch in the way of formulation in relation to the severity of the disease can promote a misinterpretation of the importance of its prevention. The other is related to the discursive event, which must be incorporated, in its analyses, listening to daily circulations, without losing sight of the fact that every discourse is subject to interpretation and linked to the misunderstanding of language.



Source: Brazil (2019a).

Figure 5. Risk factors for oral cancer

Relating these considerations to the oral cancer campaign that features people with straight smiles and white teeth, the subject can

perform their interpretation gestures not linked to the severity of the disease and its prevention, but rather to the aesthetic need, established by the beauty standards of current generations. Pechêux (1997) emphasizes that there is the work of interpreting and the work of describing, since the real of the language undergoes the manipulation of stabilized meanings, of standardized meanings and also undergoes transformations of meaning, generating a series of interpretations that can be described in different ways. according to the position and identification of points present in any texts. From the above, it is concluded that event and structure must be considered together in an analysis, as any interpretation is subject to slippage in all social spaces, based on historical affiliations and their confrontations.

Figure 05 presents the causes that can act as facilitators of the emergence of oral cancer. The poster features the logo of official government agencies. On the left side appears information and on the right-side photos of several people, of different ethnicities and age groups, all with healthy expressions, with perfect smiles, white and aligned teeth, in an attempt to reach everyone. The use of images would supposedly facilitate understanding, regardless of the education of the target audience, but when presenting healthy and happy people, the existence of the disease, its symptoms and damages is erased. In the poster above, the use of the CAN modal is very significant to indicate that POOR food CAN be associated with the disease, producing an effect of possibility and non-responsibility of the State for poor, insufficient food, or as if the type of food were only a matter of individual choice. By placing only poor food, difficulties, the price of food, unemployment, and social differences within the country are erased. Another point to be highlighted is that in a poster there must presumably be a relationship between the text and the image presented; both must generate, in the interlocutor, an understanding of a certain subject. In this case, on the right side of the poster, information about the factors that cause oral cancer appears, but on the left side of the poster, the images are not easily associated with the severity of the disease highlighted, leaving a dissociation between image and text. HOW TO HAVE A PERFECT AND HEALTHY SMILE seems to be the text most associated with those images. However, what you read is:

KNOW THE RISK FACTORS FOR MOUTH CANCER
HPV TYPE XVI VIRUS TRANSMITTED BY ORAL SEX

When analyzing an image, it is necessary to highlight not only its semiotic elements, but, above all, to question its conditions of production and circulation. Therefore, the image must not be taken by itself, but in relation to its significant chain of meanings in the discourse. Based on this reflection, the relationship between the images and the information presented above is questioned. Information about the HPV type 16 virus is not very clear, as it is not known what it is and what are the characteristics of the HPV type 16 virus. It is noticed that in an attempt to present a pattern of behavior, a rupture between image and text.

There is also the sentence:

POOR FOOD OF VEGETABLES AND VEGETABLES CAN
ALSO CAUSE DISEASE.

The image not only works, as stated by Pêcheux (1999, p. 51), as “an operator of social memory, comprising within itself a reading program, a path written discursively elsewhere”, but also as a materiality to be deopacized through an investment of meaning. Once again, there is a rupture between text and image, most likely to silence the Government's responsibility in promoting health, silencing the difficulties of a large part of the population to obtain food, especially healthy ones. The high price paid for the consumption of fruits and vegetables is erased and the type of food consumed seems to be the responsibility of the individual, thus silencing the reality experienced by the people most affected by the diseases.



Source: Brazil (2021a).

Figure 6. How to discover mouth cancer

Figure 06 presents the same characteristics mentioned above, with a small difference: it contains information on how mouth cancer is discovered. The poster, like the previous ones, presents a pink background and healthy people, with an aesthetically perfect smile; none of them are performing the self-examination, they only report the need for a clinical examination, emphasizing that it can only be performed by a dentist or doctor.

The words that appear in Figure 06:

HOW DO I DISCOVER ORAL CANCER?

This sentence was formulated as a question, but the way it was worded, there is no inquiry or address. Thinking of a reformulation that would address and summon the reader more directly, we would have: DO YOU KNOW HOW TO DISCOVER ORAL CANCER?

The following information is:

Clinical examination of the mouth performed by a doctor or dentist, in any Health Unit

The exam can be performed by any of the specialists, but it has to be performed in a Health Unit, and cannot be performed in any other place, as if the lumps in the mouth, the swelling, the bumps could only be noticed in an exam. clinical condition and can be diagnosed only by doctors and dentists. However, this perception can even happen at home, during brushing, through a self-examination, without the need for a doctor or dentist.

The exam does not require special instruments and can be performed at medical and dental appointments

Despite making it clear that there is no need for special instruments, there is no mention of the fact that it is possible and even desirable, in order to have an early diagnosis of the disease, to perform self-examination at home. Among the people that appear in the *folder*, only the child is undergoing the exam: the child who was supposedly taken to the Health Unit by a responsible, informed adult who is aware that the dentist is the right person to perform the exam to detect the cancer, which performs it through specific equipment, clinical and complementary exams, capable of identifying changes in this content. From the analysis of this image in association with the texts, an attempt is perceived to trigger the interlocutor's memory, when “it makes available sayings that affect the way the subject means in a given discursive situation” (ORLANDI, 2015, p. 29), despite stating

that there is NO need to use special instruments, he relates it to dental instruments.

Regarding self-examination in the oral cavity, the clipping makes no mention of the appearance of lumps and wounds, nothing that can awaken the layman's senses and direct them to seek the help of specialists, as is done, for example, in cancer self-examination campaigns. breast cancer, where posters teach the necessary procedures and changes to be aware of.

Finally, there is the sentence:

With it, it is possible to visualize suspicious lesions and diagnose oral cancer at the beginning.

In this sentence, there were two shifts of meaning, the first, if the entire *folder* said that oral cancer can be identified by the doctor and the dentist, "COM ELE", shifts from the plural to the singular, implying that it is the dentist, because who uses the instruments shown in the image is not the doctor but the dentist, who is a specialist in the mouth.

"Visualizing suspected lesions and diagnosing oral cancer at the early", the second shift occurs when the speaker explains that there are suspicious lesions and that the diagnosis, at the beginning, helps to cure oral cancer. If no specific instrument needs to be used for the exam, why not inform the population about the initial symptoms that should be the focus of attention and that could contribute to an early diagnosis and, therefore, to a more effective treatment of the disease?

Another point to be highlighted is the lack of information on where the health professionals responsible for the diagnosis can be found. The State, responsible for promoting the health of the population, in accordance with articles 196 and 198 of the Federal Constitution;

[...] Art. 196. Health is everyone's right and a duty of the State, guaranteed through social and economic policies aimed at reducing the risk of disease and other aggravations and at universal and equal access to actions and services for their promotion, protection and recovery.

Art. 198. Public health actions and services are part of a regionalized and hierarchical network and constitute a single system, organized according to the following guidelines:

I - Decentralization, with a single direction in each sphere of government;

II - Comprehensive care, with priority given to preventive activities, without prejudice to care services [...] (BRASIL, 1988).

According to the aforementioned article, Health is a right of all citizens and a duty of the State; in this way, it would be extremely important to inform, on the campaign posters, where there is a health professional who can perform the exam to detect mouth cancer, from the moment the first symptoms are detected, but this information IS NOT SAID by that one which has the DUTY to guarantee, through public policies, access to Health Services. In this case, we can conclude that the ineffectiveness of public health management by the State was silenced. By not saying, in the case above, the question of queues, lack of doctors, dentists, low wages and reduced working time of these professionals, indispensable prerequisites, when we think about the relationship between health and illness, in the days current. By not saying health is the right of "everyone", the precariousness of the Public Health System is erased, above all, the lack of comprehensive medicine, especially that medicine that should provide prevention services, bringing improvements to the health of the population. Who would be the most appropriate professional to obtain the diagnosis? Is the dentist or doctor best suited to identify oral cancer? The disparity in specification about the dental class in relation to the medical class could be highlighted as a bias in the present discussion. Public Health issues related to dental surgeons, when compared to doctors in these same services, who receive much higher salaries due to the inadequacy of terminology, highlight the question: is dentistry medicine or not? (CARVALHO *et al.*, 2017).

The focus on the development of Oral Cancer Prevention Policies in the pedagogical project of dentistry and medicine courses is highlighted, given that the areas are undefined as to which of them would be capable of performing diagnoses and treatments.



Source: Sorridents (2019).

Figure 7. Sorridents brush campaign

To close this section, we brought Figure 07, to show the dissociation between the campaign images and Mouth Cancer. Figure 07 is part of a toothpaste and toothbrush campaign, available on Colgate's website, aimed at encouraging the purchase of toothbrushes and toothpaste produced by the company. When analyzing the image, a pattern similar to the images of the oral cancer prevention campaign can be seen, offering the subject what he wants: an aligned, whitened smile and a healthy mouth. It is intended to show that the identification effect that one wants to produce is the same, dissociating itself from the objective of the Campaigns: one aimed at the prevention of a disease, the other aimed at the sale of merchandise. Although the objectives are different, the product that is sold is the same in both cases: the same pattern of a beautiful and healthy smile. A question could be asked: Is the campaign an advertising speech for sales of products, a good that is acquired or a campaign to prevent a disease, in this case mouth cancer?

It is considered that oral cancer prevention campaigns are presented, far from reality and not promoting an identification with the subject, who is often not included in the presented beauty parameters.

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