Os atos representacionais do falo no cotidiano do homem penectomizado: a amputação, religiosidade e a família

The acts of representational speak in day-to-day man’s penectomized: amputation, religiosity and family

Los actos representacionales de la habla en la vida diaria del hombre penectomizado: la amputación, la religiosidad y la familia

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Objective: To identify and analyze the social representations of patients after radical penectomy due to penile cancer and its implications for health. Method: This is a qualitative study, which uses the descriptive method in the form of case study and theoretical approach of social representations. The study included 30 patients, who were followed between the months of May to October 2011. The analysis of the findings occurred through the technique of discourse analysis. Results: the main findings of the study were the discussion about the amputation, religiosity and family facing this cancer. Conclusion: It came evidenced that penile cancer is a dreaded disease among men, holding a biological and symbolical representation, which controls the individual and the environment where he lives. Descritores: Men’s health, penile neoplasms, cancer, social psychology.

ABSTRACT

Objetivo: Identificar e analisar as representações sociais de pacientes após penectomia radical devido ao câncer de pênis e suas implicações para a saúde. Método: Estudo qualitativo que utiliza o método descritivo na modalidade estudo de casos e aporte teórico das representações sociais. Participaram do estudo 30 pacientes, os quais foram acompanhados entre os meses de maio a outubro de 2011. A análise dos achados ocorreu através da técnica de análise do discurso. Resultados: os principais achados do estudo foram: a discussão sobre a amputação, a religiosidade e a família frente ao enfrentamento do câncer. Conclusão: Evidenciou-se que o câncer de pênis é uma doença temida entre os homens, detentora de uma representação biológica e simbólica que controla o indivíduo e seu meio onde vive. Descritores: Saúde do homem, neoplasias penianas, câncer, psicologia social.

RESUMO

Objetivo: Identificar e analizar las representaciones sociales de los pacientes después de una penectomía radical por cáncer de pene y sus consecuencias para la salud. Método: Estudio cualitativo que utiliza el método descriptivo, en forma de estudio de caso y el enfoque teórico de las representaciones sociales. El estudio incluyó a 30 pacientes, que fueron seguidos entre los meses de mayo a octubre de 2011. El análisis de los resultados se produjo a través de la técnica de análisis del discurso. Resultados: las principales conclusiones del estudio fueron la discusión acerca de la amputación, la religiosidad y la familia frente a este tipo de cáncer. Conclusión: Demostró se que el cáncer de pene es una enfermedad temida entre los hombres, poseedora de una representación simbólica y biológica que controla el individuo y su medio donde vive. Descritores: Salud del hombre, neoplasias penianas, cáncer, psicología social.
INTRODUCTION

Why to discuss specifically the social representations of patients who have suffered amputation of penis cancer and men’s health? An argument that somehow we can use to answer the question may turn to the position that men take over your body before society, they need to strictly being seen and recognized both singularly and in the context of their relations in the field and more broad culture which dictates that the penis to the man symbolizes playfulness of being strong player, manly and brave, not fitting in this range of possibilities considered feminine characteristics as non possession of this body. In this sense, focusing on the uniqueness of man leads us necessarily to know the representational dimension that expression that penis exercises sick men’s health.

The penectomy, in this scenario fertilized by male imaginary, works as a mutilating surgery that can cause a narcissistic injury in man, because the body takes this socially representative of his manhood may cause feelings of anguish and lack that installs and impairment in their self-esteem in addition to effects on sexual life affective and social.¹

This organ is the distinction between the sexes, relating to culture relevant to each company, which makes man be strong and invulnerable, where even the very act of crying by pain or fear is reproached. This taboo imposed by society often reflected in seeking health, causing the man to delay seeking care, which reflects the late detection of diseases relating to cancer this reality, the sooner it is diagnosed the more likely patient will have to conservative treatment and reversible, something unusual in the detection of male cancers.

When a cure is not achieved, the surgical treatment of cancer, especially the penis, causing changes can trigger strong reflections on the body, the psyche of the individual and the social. Even after a planned surgery, with prior knowledge about the necessity of the procedure, the intervention can provide the experience to the subject of the lack of the phallus in life, requiring a work of reframing the loss of body organ. These changes can cause serious distress to the risks related to physical and mental health, mobilizing the use of defense mechanisms in an attempt to control and search strategies for coping.²

In the universe that surrounds the male, various malignancies are often represented without due recourse to the symptoms, and the formation of their identity structured, serving only ace cognitions, emotions and social messages that the situation evokes. The disease known as cancer is a threat to life that causes rapid deterioration and painful battle which consists of aggressive treatments, their evolution is uncertain and can bring psychosocial consequences for man to be marked on two “paths” extremely difficult to be chosen to are: healing through amputation of the penis or death if not done proper treatment, arises feelings of anguish, despair and insecurity, which can progress to even suicidal.³

This study contributes to community concerns in expanding the knowledge on social representations of penile cancer, as this disorder reaches a body segment endowed with
great significance for man. In this context, this study aims to identify and analyze through the conceptual aspect, the social representations of patients after radical penectomy due to penile cancer and its implications for health.

The approach of Social Representations Theory

Social representations can be found in elements that form the basis of language, are known to make possible transmission through their meanings thoughts, ideas and notions about a certain topic, assuming the role of a link between abstract thought and sensory experience, behaving essentially as symbols for construction purposes of elements expressing the world through their meanings what occurs in reality, ie reflect the ideas similar to members of a certain group. Are important tools for the construction of knowledge and data designed to clarify phenomena, clarifying scholarship linking the subject to the object, and the object world and the world context of meanings that intertwine subjects.

Reflecting on the social representations on their level of conceptualization, refers to a form of common sense knowledge, psychosocial created in every being, which enriches the knowledge and practices of groups that share through communication, symbols, languages and gestures, their fears, anxieties, their knowledge and their common characteristics, in order to consolidate the relations of the teaching/learning process to encourage the creation of new knowledge that will guide them in their day to day.5

Social representations are conceptualized dynamically each time and space, conceiving in each event and object, distinct figurative senses that let you perform validations and interpretations truly applicable to each individual participant in a studied phenomenon.6 They guide behavior, increment values, make the familiar unfamiliar, anchor thoughts and events aim to situate the individual in his world of belonging, mastered it and take it as theirs.7

The social representations has an explanatory power that can assist in identifying possible reasons that someone assigns actions and causes internal and external context in which is inserted, because it casts an order among individuals that enables them, through dialogues between their group membership, classify and categorize data objects and events that are not familiar, thus making explanatory, reified and family, possible to play in their everyday practices, such as caring for their health against a possible threat.8

METHOD

The nature and specificity of the object of study presented, based on the interpretationist paradigm, this study is a qualitative methodology which was employing the descriptive method in the form of case studies. Associated with this was last used the Theory of Social Representations for discussion as theoretical support.
The way to approach the problem in question considers that there is a dynamic relationship between the objective world (represented here by the penis) and the subjective world (social representations) that cannot be translated into numbers and or analyzed separately from the events that surround it.

Thus, the qualitative methodology in this study allowed the understanding of how the human perceives the phenomena which are familiar, or become familiar in his journey of life, and the meanings emerging relations, source analysis of this line of paradigm, interpretationism, unlike the positivist paradigm which measures only the frequency of an event.⁹

The description allows the researcher to understand the phenomena that are disturbing and from information gathered seeks to draw a picture of the event. When it comes to data being unveiled from oral reports or texts from a few participants, the ideal description is through the case study, where information identified represent associations, connections, and detailed differences of each subject in your universe representational, in this case of penile amputation in patients affected by penile cancer over time.¹⁰

In this context, the study consisted of 30 participants who underwent radical penectomy at different periods after surgery, performed in the reference hospital in Oncology in Belém-Pará, Ophir Loyola. The study was based on the following criteria: patients should be in the postoperative period and are of legal age in order to be aware as to the purpose of the research and consent their statements by signing the Consent to them submitted.

Regarding the ethical aspect, the project was submitted to the ethics committee and research of the Federal University of Pará (UFPA), located in Belém do Pará, having been approved by the said committee under protocol Nº 026/11. The same attended Resolution Nº 196/96 of the National Health Council. To preserve the anonymity of respondents, there was employed an alphanumeric system for identifying reports.

Data collection was conducted in the period May to October 2011, using triangulation of data collection techniques: free word association, the semi-structured interview and observation. The free word association allows verbal stimulation is provided, and respondents spontaneously express what comes to mind. The semi-structured interview is a technique that directs questions to the objective proposed by the interviewer and finally the free observation technique that captures the gestures and the emergence of feelings to each application of the previous techniques.

For analysis and interpretation of data is set a roadmap prioritizing the capture of discursive elements of psychosocial subjects, taking as background the “association of ideas” and “discourse analysis”.¹⁰ The adopted routing follows these steps:

1. Transcript of the interview;
2. Read/listen floating material noting emerging themes and affective investment;
3. Definition of analysis dimensions;
4. Mapping relations between the cognitive elements, practices and affective investments within a coherent and meaningful.

The completion of each step enabled the consolidation of three acts of meaning to the phenomenon, called: Open up the curtains: the incorporation of a new character, a
RESULTS

The theoretical methodology of this research considers the relevance of the sociocultural context of the speech of the actors, because they have stand-alone options, so constantly are producing and communicating representations they share with their groups, which have a decisive influence on their relationships, and choices about their lives.

Anchored in this statement, the characterization of the actors in their everyday operations scenario provides grants to better understanding of their social representations, contributing to the symbolic construction of the inherent characteristics penectomia in their bodies. Thus, the study consisted of 30 subjects aged 20-79 years old, 20 married and 10 unmarried, 26 with incomplete primary education and 04 with complete primary education, 18 farmers and residents in countryside and 12 from the capital and metropolitan regions of Belém, 02 exercised the profession of drivers, 02 crew members and 08 mason worked autonomously. While participating in the study, 04 of the players were on the second day after surgery, 11 had done penectomia for more than 01 year and 15 were carried out over two years, 22 were parents and 08 had no children, and 12 had beliefs in the Catholic religion and the gospel, 18.

Open up the curtains: the incorporation of a new character

The postoperative penectomized is one of the most difficult in coping with cancer of the penis, especially after changing the bandage first. The discovery of the visual organ removed leads man to perform a reflection about following your future life, many feel vulnerable expressing denial, shame and tears; Creating a new way of being in the world, the social transformation lead to creation a new man in view of actors investigated. The itineraries of life described by interviewees show three feelings about Amputation: loss, pain relief and conformation.

Was removed, but with him I was going to die because it was cancer, it was and now I'm somebody else, that in every way [...] (E01)

When I look at my body I realize that something is missing, the boy wanted to cry to know that I can never make love. I miss him, but I will not stop living, I will have to be someone else, do other things and have a new life because I'm a new man [...] (E19)

[...] I am without him, but now I'm cancer free. I changed not only physically had to see things from another angle, and adopted a way of life different, as if I were someone else. I feel sad sometimes for not being able to be who I was, but I have to live [...] (E26)

At amputation was anchored feeling of relief, solution, life and death of distance. The pain caused by the disease was mutilated, presenting a performance between actors...
everyday full of limitations, mainly related to locomotion, however, this scene was objectified as the possibility of returning to live life, therefore, be free from pain produces a intense feeling of comfort and well-being.

For me the retreat was good because it eased the pain that brought the tumor. I now feel more prepared and myself [...]. (E10)

I'm relieved the pain, do not take more medication heavy that made me get weak, I know I had to be without him to feel better, is more horrifying was the only way to stay alive [...]. (E16)

After they took my boy, never felt pain as I felt my body works straight, just cannot do some things that you know. This is terrible, but to quiet, what matters to me now is my recovery [...]. (E23)

[...] I felt happy after learning that the doctor was going to take my penis because suffering would end. Be free of pain was what mattered most to me at the time, did not think about anything just to stay without it [...]. (E30)

After the loss and the pain relief, comes in the acceptance of the character, the conformation of the incorporation of the new me in the world. At this point touches on the need of seeking a reason for reading the script of life onwards, even after the loss of an organ with numerous emphases, as noted below.

Well there was nothing in his place, everything is straight, different, but to do what? It's me, so now, life goes on and I cannot die from it, accept myself as I am and will always seek a reason to continue living. (E03)

If I could go back again and asked for medical leave even one bit, but he said it was necessary to remove all not to come back. I was without it, but okay before without it sick or dead. I really want to live and be the best father to my children, so staying alive is what comforts me. (E24)

And too bad to live well, but has passed and I'm taking my life as God wants, I was not with that in mind. The fact that I have no more penis does not mean the end, on the contrary, I want my health, I want to look good, that's why I had the surgery. I want to live a new life without pain, is this reason that makes me quiet. (E29)

The chapter that depicts the reprinting of life for authors investigated, opened the curtains on a new reality where the absence of the body objectified representations of the deponents was anchored to the moments of grief, relief and compliance, which together provided the birth of a new subject, a new being within the former, a man without a penis, but above all a man without tumor penile cancer.

A guest enters the stage: religion as a coping strategy

The projection of life events, the configuration possibilities to be achieved when there are more solutions for unexplained reasons and empirical knowledge to the layman as possible from the impossible, conformation, reason and emotion, within many of the chapters life, these events are represented by projections to divine entities, faith and religion.
For actors penectomized religion occupied a central role in fighting the reframing of everyday life, for the acceptance of the disease and treatment adherence, however painful it is to portray the drama of life without the penis.

It was the will of God that all this happened. I know that I lack the penis, but he gave me life again, so I think he has a reason for me to have gone through what I went through with this disease, he has a reason for me to be so. (E08)

I just think about getting well, with faith in God will get, since I feel pretty good, but I have to stay home a while [...]. When I had nowhere else to go he enlightened me saying I should take this business to get good, it was then agreed to do what the doctor said, although not the most normal person. (E13)

From the beginning I had faith and confidence, I know that Jesus is waiting for me in my city, I know he gave me the cure with the removal of my illness, he was, I asked about that and he answered me, away from my pain life, gave me the right medicine [...]. (E21)

I do not know what happened to me, I closed my eyes and gave the hand of God. For me it was a dream, because it is an evil that has almost no cure, and only accepted to withdraw because he had a lot of faith that Jesus would bless me with life, because otherwise it would die. (E27)

A strong scene depicted in everyday actors penectomized converges on the explanation of the reason for amputation, a fact that was presented in the script produced by one of the interviewees as a divine punishment because they do not take the treatment of the disease at the beginning, when it was possible be detected early with routine examinations.

If it were not for this disease I would not be here as I am now accepting Christ. I leave the world as it was complicated for me, I was the world so God punished me with this! It was a bad experience that I have not spent due care. I had to go through that in order to improve my living condition. It is not easy to go through it here, now I believe that eventually the disease, there we get the sequel, but now I can say I am living with myself and with faith above all. God knows what he does for me and my wife, was an ordeal, but with this disease had several revelations. It was also the moment I accepted Jesus, my wife also [...] I trusted in God and if I had to as I was leaving everything as God wants. (E09)

The divine punishment, although present in only one of the scripts of discourse of the interviewees, it is representative of the universe of subjects amputees, since the representation of an individual actor, joined a group representational largest, gives evidence of the similarity generalization with speeches of other actors who have also experienced this feeling forward penectomy.

Lower the lights: the family emerges in the backstage scene

In the theater of life, each subject plays a character that matches your way of seeing and being in the world. The actor embodies values, makes his laboratory in a
scenario playback, private life. Ultimately imbricate beliefs and absorb others coming your way. In this study, the actors expressed their texts through the socialization of the news of his illness for the family, and such information, at first, may seem to confirm an infidelity, however, to confirm the diagnosis relates to the other situation, the need for support the family in treatment.

1 year ago appeared the wound, my wife mused to me, because it started to get blood stains in underwear, and she came to me to know what was happening, so I explained what happened and asked to see her, when she saw, told me why I was doing it, the wound was ugly, until today she thinks disease was another woman [...] my wife was upset, my kids understood. I thank God for my oldest son coming, it really helped me understand this disease and to make others understand too. (E15)

My wife thought I had betrayed and was a venereal disease, she wanted me to leave. I talked with her I explained what the doctor told me she went to understanding, I said we were not going to have more respect and I would urinate sitting, she always left free to choose what she wanted to do. I needed her to be able to overcome this, but it was decided that she was going to support me or not. We are together today and we love it anyway. We have suffered a lot, and now what I want is to get along with her and the rest of my family. (E25)

**DISCUSSION**

When you open the curtains on social representations of amputation of the phallus for men suffering from penile cancer, the actors entered a new character in their daily lives. The old man powerful, virile and strong gave way to a new resignified to be adapted to find a new way of being in the world, where feelings of loss, relief and conformation were present in relation to the monitoring of life without the penis.

At this time, the social representations dispersed actors were anchored feelings and experiences that showed their overruns relative to the disease, social transformations that led man to rethink his life and his quest to maintain the same fickle, their cohabitation with their mutilated bodies soon became a form of pain relief and tumor psychological, and solution to your problems arising from the illness of the body.

Losing physically part of a body is a painful act, psychologically lose function and representation that carries this part is an act strictly stigmatizing reactionally that requires a new way of living, of being in the world, to relate and to allocate itself. The relationship with the body in an amputee changes the way of looking at the world, people, and things. Losing part of the body alters a lifetime, brings out several comparisons and generalizations as it was and as it will be in your life every day. Losing is conceptually have to adapt, readapt, learn to live again assuming a new perspective of the world for themselves, for others and for the attributes that bind to this universe that connects the body to the world.11
Amputation as an act in itself, favors the emergence of mixed feelings as fear and relief that interact with each other and remain united, permeating the existence of values that are allocated in the minds of the actors at all times prior to the act as pre-operative, and throughout hospitalization and possibly also after discharge. While it is painful and difficult to interpret a character in real life amputee actors surrender to situations limits/bounds that are, in coping with chronic illness, and end up opting for surgery, hoping to end up with physical pain or remain in the world, putting aside the idea near death. The actors show that respondents living an amputation become sad, difficult and painful, but despite all the hardships and suffering the desire to want to continue living is higher. Surgery is incorporated to exist and, as part of it, is accepted.¹²

The process of construction and the incorporation of a new character opposite change every day, pain relief and monitoring of life, deriving from the amputation of the penis, were contextualized by social representations as a creation of shared knowledge among the group of male actors and reaffirmed the tradition of these groups, where the thought run through the game of emotions, affections and feelings, desires, imagination and identity factors of masculinities designed by the ratio of the character with his public.⁶,¹³

Social representations are presented to players through this public, through language, the dialogue they exert on their environment of belonging, of doubts and certainties, experiences, fears and anxieties that the filthy imagination of the actor, and they are answered, incorporated and taken as their dialog through between them.⁵ The audience in this case is not canceled outside the show, participates actively constructing and reconstructing the creation of life of ideas and knowledge, forming a line that ties their behavior legitimate and pure in their daily lives, such as caring for penile cancer by men, the acceptance of treatments and paradigmatic change of life, thus establishing an order in real play acting and facing in search of healing.¹³

The religion came to the stage of everyday actors as a coping strategy when reporting on the continuity of life ahead penectomy. This act, landed as paramount to the acceptance of the disease and treatment adherence, divine entities were responsible for exalted as guide them in their everyday decisions such as surgery. Divergent attained salvation by faith, the deity was also uttered in speeches as responsible for the acquisition of malignant disease, which for the actors, it was a vote of divine punishment because they do not take the treatment of the disease at the beginning, when could be detected early with routine examinations.

Religion is commonly used as an escape for confronting the disease process in the body, is based on beliefs that are peculiar to each religion, the actors try to reduce their burden of guilt, his pain or even give directions to some of their events lives. It’s in the imagination, or even in the projection of your thoughts that actors find the faith to continue living and facing the difficulties encountered.

Belief as a cognitive aspect, looking to expand, explain Nature and the Origin of things which are not appropriate explanations, or even where the actors do not want to find/accept explanations for this fact. The belief is based on habitual attitudes, faith, and notions derived, even when they coincide with science, not based on the observations and the type of evidence itself of the latter. The ritual is the active side of religion. Has the following forms: manipulation of sacred objects tangible, instrumental action-laden
symbolic content; such conduct, for example, the use of special clothing, recitation of specific formulas, songs, dances, mourning, reverence among others. It is particularly effective when the actors use in the collective, because it increases the emotion, inspiration for change, acceptance and conformation events with data, thus making it more intense the subjective impression of each individual representation of themselves in the world.

Representational functions of a social representation, are found at conventionalization of objects, behaviors, events, beliefs, and values that surround the social experiences of each author, and enables them to give a definite shape or even an explanation of classification which fully pays the phenomenon unknown in one model of meaning. The religious representations for actors investigated assumed this function, became a reality familiar unfamiliar, thus reducing the anxiogenic factor that it caused, such as fear, anxiety and lock in facing life without his penis representing actions and culturally masculine behaviors inherent in the body.

When lowering the stage lights of life and family life to bring the news of the cancer of the penis and the possible expansion of the field of treatment for limb amputation, the actors sought the support of his, for membership and sequencing of treatments, however, in a foreground staging, the news, the non-family phenomenon was the promoter reason distrust the fidelity of the authors, for hours being mistaken as a proof of infidelity or of acquiring a sexually transmitted disease. A fact overthrown by that scientific knowledge of the health professional and family anchored in ignorance about the disease through the socialization of knowledge, ie of social representations.

On these, it is believed that when a player plays a movement, a drama for a given public, on different occasions, there is a possibility arises a social relationship, a web connecting the individual social to its environment. The balance of social representations resulting from this social web, is conceptually related to this movement in daily life, with activities that actors perform in front of a particular group of observers and exerting some influence on these, especially his family.

Especially the act of “acceptance/assimilation” of the disease by the family, for the actors, depended strictly causal factors of their environment, of their daily life, the knowledge they held about the same until the time of the news. Thus language, communication between the actors and their family members, the commodification of psychosocial relation between them in the genesis of social representations, as they enter the ordinary world and everyday life in which the actors and their audience live and produce as their.

Representations supported by the influences of social communication are the realities of the daily lives and serve as the primary means to establish associations with which the actors connect the unfamiliar events such as amputation of the penis and tracking of life against cancer. Thus, to represent the world, life and family without simbolism of speak to the family, becomes an effect not projectively duplicative concepts or player, as (re) define change something is rebuilding it or even retouching according to the environment where being inserted, in this case the male cultural simbolism identity at home retouched by knowledge of the disease, allowing the conversion of well-known and
unknown to the public allowed to assimilate and exchange information that led them to support care practices of the actors in facing amputation.7

**CONCLUSION**

The study showed through the dialogues of actors that penile cancer is a dreaded disease strictly among men, holds a power social, biological and symbolic that controls the individual and their environment where is widespread, causing physical mutilation, social and mental that dictate how man must see and be seen by various social strata, stratified by level of information and culture that the public has through the knowledge they have about the same.

At amputation as treatment was objectified as an instrument of salvation, relief and disturbance, and above all a promoter of change among individuals, these changes extended beyond the individual field, confronting the theater of life family relationships to meet the new, sick, reframing of man following the everyday act.

Social representations allowed by exchange Shaft actor/audience/setting the unveiling of the understanding of the practices, knowledge and feelings of the subjects penectomized about coping with cancer and its treatments in their lives, these knowledge highlighted by the presence of amputation, faith and religiosity in his speeches. It is understood that, consider the approach of cancer among men in the dimension of social representations, is of fundamental importance to the health care team know the various vulnerabilities that actors are exposed in fighting the disease in their day to day. Thus, there is a need for further deepening of discussions about the environment of men's health, especially of oncological diseases, since this line to become the third largest cause of mortality in the genre.
REFERENCES


