

Representation of Social Actors in Medical Humanities: A Multimodal Study of Selected English and Arabic Infographics on COVID-19

*Lubna Adel Sherif**

Introduction

For long, mental health was regarded as the absence of illness or disorder. This idea was challenged by Keyes (2002), who clarifies that mental health is concerned with positive feelings and life functioning, which ensure the mental and psychological well-being of individuals. The COVID-19 pandemic posed a real threat to the mental and psychological well-being of many individuals who experienced anxiety for fear of contracting the virus. In addition, the restrictive measures taken by several countries, including total shut down or quarantine, imposed many changes on people's daily lives: People had to cope with a new reality where students were homeschooled, and employees worked from home. This state of isolation put the mental health of many people at risk, which mandated an action from health workers and organizations.

Medical humanities “mainly developed in the twentieth and twenty-first century as a tool to give voice back to patients, fragile people, and persons who had no right to speak and claim how they lived their disease” (Marini 2016, 13). The graphics used in medical humanities communicate ideas by blending textual and visual elements. The term “Infographics” is a blend of “information graphic,” and it can be defined as “a visualization of data or ideas that tries to convey complex information to an audience in a manner that can be quickly consumed and easily understood” (Smiciklas 2012, 3). They are substantially used in the health and medical sectors to enable healthcare professionals to deliver medical information on the population level and overcome language barriers (McCrorie, Donnelly, and McGlade 2016). The World Health Organization (WHO) and the Egyptian Ministry of Health (MoH) as official health establishments provided support and guidance not only to those inflicted with COVID-19 but to those whose psyche and well-being were affected as well. The current study examines the multimodal representation of social actors in the

* Assistant Professor of Linguistics and Translation, Faculty of Language Studies (FLS), Arab Open University, Egypt.
Cairo Studies in English – 2021(2): 124-144. <https://cse.journals.ekb.eg/>
DOI: 10.21608/cse.2021.217020

selected English and Arabic infographics to reveal their inclusion/exclusion in constructing a mental-health-relieving discourse.

The current study explores the verbal and visual realization of the social actors represented in the selected English and Arabic infographics. It attempts to identify the social actors included/excluded in the replacement of fear discourse with hope. It also aims at revealing the common linguistic representations of the social actors between English and Arabic infographics in an attempt to answer the following questions: To what extent are the represented social actors included/excluded in the construction of a discourse of hope for mental health? What are the common linguistic patterns used in the English and Arabic infographics to include/exclude the represented social actors? To answer these questions, the study applies van Leeuwen's (2008) Social Actors Framework to analyze selected infographics.

2. Critical Discourse Analysis

2.1. Critical Discourse Analysis (CDA)

Critical Discourse Analysis (CDA) is an interdisciplinary approach to discourse analysis, which views language as a form of social practice. It encompasses various methodologies and approaches to analyze how language is used. CDA also seeks to place a particular discourse in context as Richardson (2007) argues "that textual meaning is constructed through an interaction between producer, text, and consumer rather than simply being read off the page by all readers in exactly the same way" (15). This way, language becomes capable of representing the interrelation between events, images, and people participating in the discourse while offering an interpretation of the meaning derived from this discourse rather than focusing on its textual patterns.

2.2. CDA and Health Discourse

The emergence of health discourse is associated with the interest of discourse analysts in tackling doctor-patient conversations, health promotion texts, and health risk in media. Jones (2015) states that applications of discourse analysis to the field of health focuses on examining "the way people use discourse as a tool to take concrete social actions" (841). Besides, health promoters aim at making "sense of the actions that people take in relation to various health issues, and to determine what kinds of discursive interventions are most likely to result in changing or maintaining those actions" (841). The recent approaches to health discourse analysis entail an examination of the "voices of doctors and other medical professionals, the voices of family members, the voices of traditional cultural models of health and risk, and the voices of various media texts from

newspaper articles to Internet Web pages” (842). These voices were earlier analyzed using Conversation Analysis only, but the rise of CDA, digital technologies, and corpus-based approaches resulted in the application of multimodal approaches to medical communication.

2.3. COVID-19 Discourse

Since the outbreak of the COVID-19 pandemic, several linguists have attempted to employ various CDA approaches to reflect on the pandemic’s situation and context in several parts of the world. To begin with, Cmeciu (2020) used transitivity analysis to examine 75 multimodal texts by the Romanian Ministry of Health with online users’ comments on them to reveal how the Romanian authority and citizens construct meaning for COVID-19 discourse. The study concluded that behavioral processes were heavily used in giving instructions with a tendency to (de)legitimize the actions of abstract participants on the part of the Romanian authority.

In the Arab world, a few studies on COVID-19 discourse were conducted in Saudi Arabia. Firstly, Al-Ghamdi and Albawardi (2020) examined the non-verbal multivocalities in 24 written and visual texts published on WhatsApp and Twitter; they covered the period from February 2020 till April 2020. The study adopted a socio-semiotic approach which revealed that the COVID-19 pandemic mediated discourse is in line with the diglossic Saudi situation, cultural semiotics, social norms, and integrated national identity. Another study by Al-Ghamdi (2021) investigated the ideological representation of fear and hope in online newspaper reports on COVID-19. The study relied on a qualitative analysis of samples from Saudi Gazette and Arab News using van Dijk’s tripartite CDA framework to analyze news text structure and production at the microstructure level. The findings showed that foregrounding evidentiality was heavily used to represent fear and hope though this strategy overlaps with the categorization strategy and the authority strategy.

The previous studies of COVID-19 discourse are mainly multimodal as they integrate various CDA approaches to reveal the underlying ideology behind the meaning constructed in the discourse. They have a local orientation since they examined culture-specific discourses which neglect the transnational discourse on COVID-19, such as that of the World Health Organization (WHO). Besides, they ignore the role of medical humanities, especially infographics, in accounting for the transnational COVID-19 discourse and the participants involved in it. Therefore, the current study adopts a multimodal approach in accounting for COVID-19 discourse via employing van Leeuwen’s (2008) Social Actors multimodal framework to explore the social actors

included/excluded in constructing a discourse of relief and hope in the selected infographics.

3. Social Actors Framework

The disciplines of anthropology, sociology, and philosophy facilitated the adoption of social semiotic and socio-semantic approaches to CDA. These approaches account for the differences between social practices and their representation in discourse. A social practice, in terms of van Leeuwen (2008), is a structure of physical and/or semiotic activities which involves social actors, their activities, and reactions to these activities. Van Leeuwen (2008) believes that knowledge is transferred from the context it occurs into another in which it is reproduced and that social actors can be represented both verbally and visually in discourse. He, thus, devised the Social Actors framework to investigate the recontextualization of social practices on the verbal and visual planes of discourse.

The study incorporates van Leeuwen's (1996, 2008) Social Actors framework in order to identify the social actors represented in the selected data and whether they are included/excluded in the establishment of a COVID-19 discourse which rests on hope rather than fear in order to support and promote mental health. Van Leeuwen's framework (2008) identifies the social actors based on the different roles assigned to them; such representations "include or exclude social actors to suit their interest and purposes in relation to the readers for whom they are included" (28). Inclusion stresses the involvement of social actors in the social practice whereas exclusion means that social actors can be omitted or undermined using some linguistic devices.

Van Leeuwen (2008) created an inventory of techniques through which social actors are represented in discourse, as illustrated in figure (1) below. Exclusion is a process of deletion of the social actors and their activities. It is realized through suppression and backgrounding where the former represents a radical deletion of the social actors and their activities whereas the latter ignores a direct reference to them as they are mentioned somewhere in the text. Van Leeuwen (2008) states that suppression can be linguistically realized by the deletion of passive agent, non-finite clauses, and nominalization and process nouns. He adds that the linguistic realization of backgrounding can be realized through ellipses in nonfinite clauses with -ing and -ed participles, infinitival clauses with to, and paratactic clauses. On the other hand, inclusion represents the social actors and their activities. It is recognized by role allocation, personalization, and impersonalization – where each is further sub-divided into various categories. Van Leeuwen (2008) asserts that role allocation demonstrates how social actors

are included in the discourse; these roles can be linguistically realized through activation and passivation. Activation is used when the social actor is a dynamic participant in an activity, i.e., the active agent in the social practice. Passivation, nevertheless, occurs when the social actor is not the agent. Passivized social actors take various forms. The first form is subjection; it occurs when the social actor is represented as an object/patient, and it can be realized through its participation in processes, circumstantialization, and possessivation. Van Leeuwen (2008) notes that beneficialization occurs when the social actor is the recipient of a positive or negative action in material or verbal processes. Finally, passivation is realized through passive agent deletion or nominalization which removes the agency.

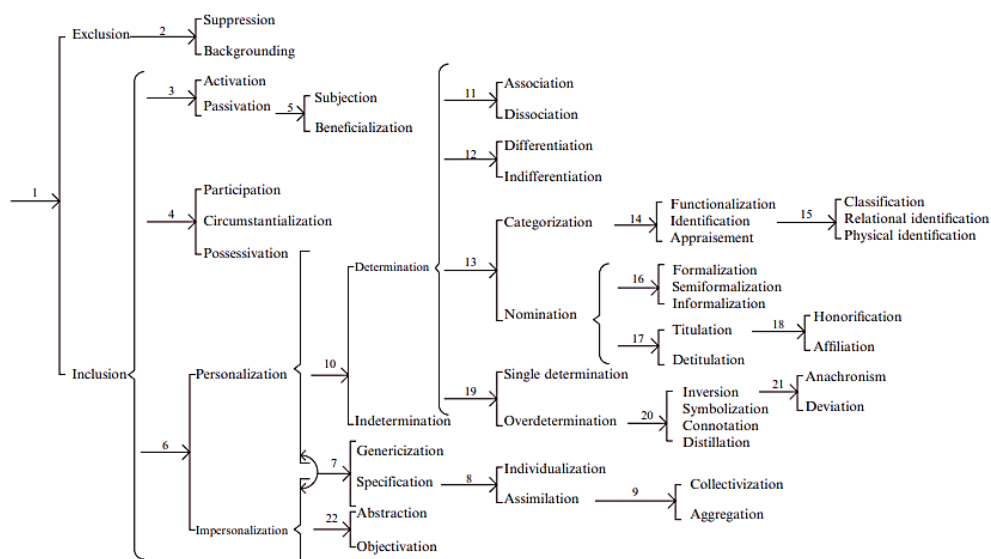


Figure 1. Verbal Representation of Social Actors. From van Leeuwen, *Discourse and Practice: New Tools for Critical Analysis*, New York: Oxford University Press, 2008, 52.

In addition to role allocation, personalization and impersonalization facilitate the inclusion of social actors in discourse. Personalization focuses on the human traits of social actors, while impersonalization demotes or removes the human traits of social actors to exclude them from the discourse (van Leeuwen 2008). Each of these strategies is further subdivided into various tools. First, personalization is realized through determination and indetermination. Determination assigns a specific identity to the social actor, unlike indetermination which leaves the social actor anonymous or unspecified. Determination alone is further subcategorized into the following pairs: association and dissociation, differentiation and indifferentiation, categorization

and nomination, single determination and overdetermination, and genericization and specification. The representation of social actors as groups is known as association; nevertheless, dissociation occurs when associations are unformed.

Differentiation forms social actors as individuals or groups; if they are unformed, then it is a case of indifferentiation. Van Leeuwen (2008) also mentions categorization and nomination. Social actors in categorization are represented in terms of their identities and functions. It is subdivided into functionalization, identification, and appraisalment. Functionalization represents social actors in terms of their activity such as an occupation or role. Identification, however, defines them in terms of what they are. Van Leeuwen (2008) further subdivides identification into three types: classification, relational identification, and physical identification. Classification occurs through major social categories such as age, gender, class, location, religion, or ethnicity. Van Leeuwen (2008) adds that relational identification is “almost always possessivated” (43) in terms of their personal, kinship, or work relation. Finally, physical identification represents social actors by their physical characteristics (e.g. the woman with the blue eyes). The last item under categorization, appraisalment, relies on evaluating social actors as good or bad. With regards to nomination, van Leeuwen (2008) remarks that it is the unique identity of social actors, and it is categorized into formalization (full name), semi-formalization (part of a name), and informalization (given names only). Nomination also involves titulation which is realized in honorifics and affiliations whereas detitulation means lack of titles, honorifics, and affiliation.

Furthermore, van Leeuwen (2008) notes that overdetermination depicts the involvement of social actors in several social practices at the same time. It is categorized into inversion which links social actors to two opposite practices, symbolization which focuses on fictional social actors or groups for nonfictional social actors, connotation which rests on the association of cultural knowledge to classification or functionalization, and distillation which employs generalization and abstraction to connect social actors to a social practice. In addition to personalization, impersonalization is realized by abstraction and objectivation. Social actors in abstraction are represented by positive or negative qualities. Social actors with objectivation are depicted with regards to locations or items which are associated with the individual or the action they are engaged in.

Exclusion/inclusion are not confined to verbal discourse alone as it involves the visual as well. Van Leeuwen’s (2008) account of visual analysis tends to demonstrate how people are depicted, how this depiction is related to the viewer, and how it promotes interaction between the represented participant(s) and the

viewer. The tenets of visual analysis focus on the representation of distance, relation, and interaction as summed in Figure 2 below:

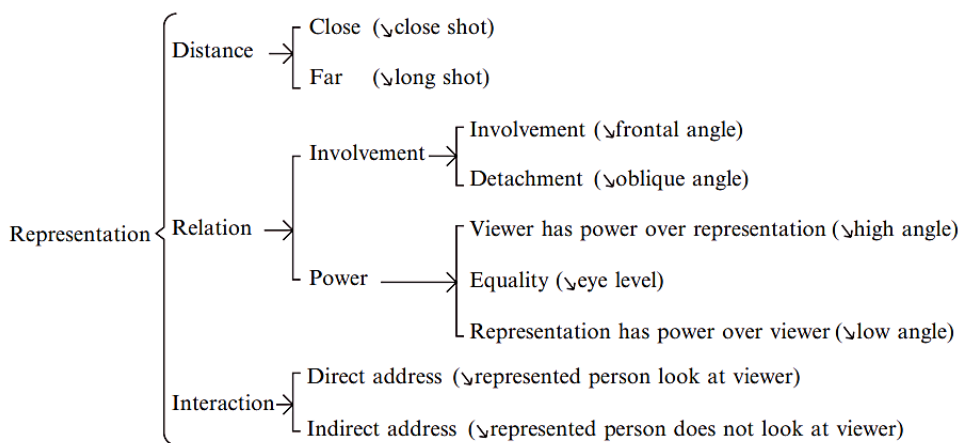


Figure 2. Visual Representation of Social Actors. From van Leeuwen, *Discourse and Practice: New Tools for Critical Analysis*, New York: Oxford University Press, 2008, 141.

The first dimension, social distance, emphasizes interpersonal relationships which can be close when a close shot is used or far when a long shot is employed. The second dimension is social relation which stresses the angle depicting the represented participants. Angles are used to denote the level of involvement and power. There is a relationship of involvement of the viewer if a frontal angle is used; nonetheless, an oblique angle results in detachment of the viewer. Van Leeuwen (2008) offers a tripartite description of the power dimension: The use of a high angle which portrays the representation from above establishes the viewer's power over the representation whereas the low angle which depicts the representation from below denotes the representation's power over the viewer. Besides, the eye-level representation means that both the viewer and the represented participants are on equal footing. The last element is social interaction which considers whether the represented participants look at the viewer(s) or not. If they look at the viewers, then they want something from them; they have a certain demand or expectation even if it is symbolic. However, not looking at the viewer urges the viewer to scrutinize them rather than interact with them. The present study applies van Leeuwen's (2008) Social Actor Framework to identify the social actors involved in the protection of people's mental health during the pandemic in addition to the role assigned to each in order to construct a COVID-19 discourse which rests on hope and relief rather than fear.

4. Analysis: Infographics about Mental Health

4.1. Social Actors in Facebook infographics

The paper examines twelve infographics (six in English and six in Arabic) downloaded from the official Facebook pages of WHO and MoH. The infographics share the same theme which is the soundness of individual's mental health in the wake of the COVID-19 pandemic. They provide guidelines for individuals on the means of protecting and maintaining their own mental health and others amidst the fear associated with the pandemic. The socio-semantic approach of van Leeuwen (2008), Social Actor Framework, is used to analyze the data on the verbal and visual levels. The analysis starts with a brief explanation of the context of the infographic, followed by an identification of the verbal and visual realizations of social actors and the extent to which they are included/excluded in the construction of a discourse of hope on COVID-19.

4.2. WHO Infographics

The first infographic is about an old man who receives a video call from his daughter to combat his loneliness during the quarantine (figure 3). There are two social actors in this infographic characterized by inclusion. The first process is activation in "Quarantine", and the second is passivation in "loneliness". The statement "Quarantine can lead to loneliness" entails a material process where the actor is "Quarantine" and "loneliness" is the goal. This process establishes a cause-and-effect relationship between the represented social actors where "Quarantine" is the cause and "loneliness" is the effect. This relationship results in the inclusion of "older people or people who live alone" as two social actors who bear the negative consequences of the "Quarantine", namely loneliness. These social actors are elaborated via categorization through classification by age in "Older people". Classification as such triggers people's sympathy, which could urge them to help this man maintain his mental health. In contrast to the roles mentioned earlier, "Loneliness" becomes a reason for all the negative feelings associated with the quarantine through the use of activation.

The visual design correlates with the directions provided by the text to help older people survive the quarantine. The close-up makes the older man holding his mobile telephone the focal point even though it can be deduced that he has a

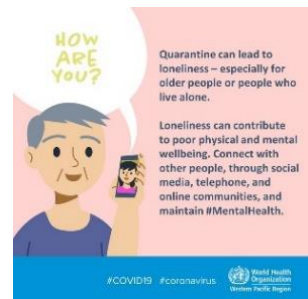


Figure 3.
COVID19
Quarantine. 2021.
<https://www.facebook.com/WHO/photos/4275545145824169>

passivation role since he is the one who wants the call and receives it. The frontal eye-level angle establishes a connection between the man and the viewers. This is further elaborated by the verbal process in which the young lady on the mobile is the sayer of the utterance: “How are you?” It is understood that the pronoun “you” refers to the man alone, especially that his gaze is that of demand; however, the interrelation between social distance, social relation, and social interaction entails some sort of emotional proximity between the man and the viewers to encourage the viewers to connect with old people and those who live alone.

The second infographic reveals that fear and anxiety are common feelings during the pandemic. WHO recommends that people should communicate such feelings in order to improve their well-being and maintain their mental health (Figure 4).

The usage of the cleft structure “It is normal to feel fearful and anxious during this time” demonstrates the exclusion of social actors via suppression in order to highlight the fact that these feelings are common even if they have a negative impact on mental health. Exclusion continues in “Talking about your feelings will lessen your distress”; the non-finite clause with –ing (talking) creates backgrounding. Despite the exclusion, it is clear from the design that the target social actor who is expected to express feelings is the woman who is also involved in a verbal process in which she is the sayer of the utterance: “I’M WORRIED”. Her utterance makes her involved in the activity of self-expression as reflected in the activation via the first-person pronoun “I” which encourages the viewers who share the same feelings to follow her; this pronoun creates inclusion via dissociation.

In contrast to the exclusion suggested by the verbal discourse, the depicted human figures, in the infographic, make this exclusion less radical as it clarifies whatever is verbally excluded. First, the close-up does not create social distance between the represented participants and the viewer especially that the woman is the focal point. The frontal angle highlights the woman’s facial expressions of worry, fear, and concern which brings the viewer closer to her via the eye-level angle. Her suffering is emphasized by her gaze, which makes a demand; the way she looks at the man she is talking to and the viewers appears as if she calls for help, especially when accompanied by her utterance. As the man she is talking



Figure 4.
I'm worried. 2021.
<https://www.facebook.com/WHO/photos/a.167668209945237/4092452324133453/?type=3>

to is not represented on equal footing with her and is detached from the viewer, it seems that the woman is expressing her feelings to the viewer who is expected to provide her with support.

The third infographic (Figure 5) depicts a man diagnosed with COVID-19. As he lies on bed wearing his face mask, he is virtually talking to his wife and child using his laptop. The infographic highlights the significance of establishing ties and communication between people diagnosed with COVID-19 and families in order to protect their mental health.

The leading social actor included in the infographic is entailed in “People diagnosed with COVID-19 deserve compassionate care”. Passivation via subjection is employed as the man is the acted-upon; he is the receiver of “compassionate care” which would assist him in overcoming the state of isolation imposed by the quarantine which threatens his mental health. This is further clarified by the use of the less radical exclusion, backgrounding, in “Helping them stay connected,” where “them” creates assimilation between the man’s situation and each person inflicted with COVID-19. Even though the actor “their loved ones” is represented by indeterminateness, yet the activity expected from him/her is announced “by phone, video or messaging can provide comfort during isolation” due to the considerable impact it has on the mental health of the diseased.

Moreover, the visual structure clarifies the social actors. The long shot brings both the represented participants on the laptop screen and the viewers closer to the sick man in the quarantine because it creates a contrast between the man’s situation in which he is helpless and weak to that of the family and the viewers in which they are capable of making decisions. The man is the patient who waits for “compassionate care” and “comfort” during isolation from his “loved ones” on the laptop screen. Therefore, “loved ones” are the activated agents in the situation, as evident by being the sayer in the verbal process entailed in the utterance: “GET WELL SOON!” In addition, the frontal angle creates a relationship between the man and the viewer, especially, with the use of the high angle which highlights the viewer’s power over the man whose demand gaze urges the viewer to provide his mental health with support by wishing him a speedy recovery.



Figure 5.
COVID Patient.
2021.
<https://www.facebook.com/WHO/photos/a.167668209945237/3>

The infographic in Figure 6 tackles the issue of stigma in which some people believe that COVID-19 patients are shameful; this attitude has a negative effect on mental health.

It appears that “evidence” is the main social actor included in this infographic via activation since it is considered the proof that the information included in the infographic is true. Nevertheless, “stigma” which is represented through passivation as the third party associated with COVID-19 is the main social actor; the disruption it causes to the mental health of COVID-19 patients is what links “Evidence” to “#coronavirus”. Specification through assimilation in “reduction in people seeking medical care or testing” and “reduction in people adhering to interventions (including self-isolation)” further reveals the destructive effect of stigma on mental health. This is also clarified in the use of passivation in “**cases not being reported**” and “**people being exposed**” where the agent is deleted to highlight the activity itself. The whole infographic is, thus, based on a chain of causes and effects which highlight the drawbacks of stigma on mental health as evident in the negative appraisal of the situation suggested by “**more difficult**”.

Self-isolation is visually represented by the cross-legged person whose head is put between his/her hands. The long shot and the hidden face create social distance between the represented participant and the viewer to define self-isolation and how destructive stigma can be to mental health. The frontal angle contributes to the depiction of the state of alienation by detaching the viewer from the situation, especially that the vertical angle stresses the power the viewer has (representing those who exercise stigma on others) on the man. Besides, the gaze in this visual structure does not establish any social interaction between the viewer and the represented participant. It conceals the person’s identity, gender, race, age, or class in order to highlight the impact of stigma on him/her and the negative ramifications of social isolation.

The fifth infographic (Figure 7) tackles a crucial aspect of life which could disrupt one’s mental health and well-being: religious and social celebrations during the pandemic. Thus, this infographic encourages individuals to celebrate and entertain themselves while adhering to COVID-19 preventive measures:

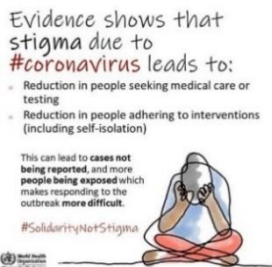


Figure 6.
Stigma. 2021.
<https://www.facebook.com/WHO/photos/a.167668209945237/4055728981139121/?type=3>

The use of backgrounding “taking part in religious and social celebrations virtually or just with people you live with” excludes the social actor through the use of the infinitive clause-ing. The social actor is deemphasized to give prominence to the guidelines provided by WHO, the social activities and festivities, and the means through which they can safely celebrate rather than who apply these guidelines. This is further ascertained by the use of activation in “they” which refers to the suggested means to celebrate to highlight their role in minimizing “chances of spreading the virus”.

The focal point in the image is the three people sharing the laptop; it seems from the decorations in the background that there is a religious celebration. The fact that the three of them are portrayed via the medium shot, and the oblique angle does not involve the viewer in the action, especially with the gaze of offer suggested by the eye-level angle. They are focused on the laptop rather than on the viewers to reveal how important the virtual celebration is to their mental wellbeing and to encourage the viewers to follow their steps. It appears from their attire and the decorations that they do not belong to the same religious sect which universalizes the guidelines and the experience of the represented participants.

The infographic (Figure 8) targets healthcare staff who work under the exceptional conditions of the pandemic. They treat patients, provide support, and witness so many deaths; besides, they do not frequently spend time with their families. All these conditions can negatively impact their mental health. Thus, WHO released this infographic to provide guidance on how to protect their mental wellbeing.

The social actors included in this infographic are revealed via categorization based on their work affiliation “healthcare facility staff”. This relational identification is correlated to their mental health through the use of appraisal in “stress”, “crisis”, “unwell”, and “overwhelmed” which highlight the negative impact of the pandemic. To generalize the situation of the medical staff, the cleft structure is used



Figure 7.
Celebrations 2021.
<https://www.facebook.com/WHO/photos/4151282921583726/>



Figure 8.
Healthcare Staff.
2021.
<https://www.facebook.com/WHO/photos/3444608552251170/>

in “It is normal to feel sad” to exclude the social actors to give significance for the feeling rather than who possesses it. In addition, the repetition of “you” creates an association by linking the relational identification of “staff” to the second-person singular pronoun and maintains a friendly tone. Such an association creates activation as “healthcare facility staff” are responsible for doing the activities listed in the infographic to have better mental health.

Most of the represented participants in this infographic are depicted using the long shot and an oblique angle to underscore their anxiety and the possibilities they have to survive mentally during this crisis rather than their identity. However, the image in the bottom right corner is taken in a medium shot and frontal angle to create a gaze of demand in which they ask the viewers to provide them with assistance to protect their mental health. It also creates some sort of affinity by showing that one’s suffering is everyone’s suffering and concern. The represented participants as well are not specified to a certain age, class, sex, ethnicity, or religious affiliation as evident from their outfits to universalize their professional experience and promote the protection of mental health.

4.3. MoH Infographics

The first infographic produced by the Egyptian MoH (Figure 9) provides information on the means through which the distressed who psychologically suffer can receive support to protect their mental health during the pandemic.

The main social actor included in this infographic is “الخط الساخن” (The hotline for the General Secretariat of Mental Health). It is represented via activation as it is the agent in the infographic; this hotline is the official provider of psychological support for people during the quarantine. In addition to activation, social actors are represented through passivation in “لتقديم الدعم النفسي للمواطنين” (to offer psychological support to citizens). This clause entails a material process with two goals: The first is “الدعم النفسي” (psychological support) which is offered to “للمواطنين” (to citizens); thus, the benefits of psychological support will be reflected on these citizens. It is important to note that assimilation in “للمواطنين” (for citizens) makes them one homogenous group that is to receive support without discrimination.



Figure 9.
Mental Health. 2021.
<https://www.facebook.com/egypt.moh/photos/a.123442675873020/229403941943559/?type=3>

There are no human figures portrayed in full in this infographic due to the medium shot. The viewer only sees two people sitting where one of them holds the hand of the other. This closeness figuratively reveals the roles assigned to each of the participants, namely, the activation-passivation relationship. The agent in this visual structure is the one who provides support by offering the patient a pat to reveal care and support. The use of the vertical, oblique angle leads to detachment, especially, with the absence of gaze. The indetermination suggested by the anonymous identity of the represented participants does not trigger the viewer's sympathy, yet it sets the expectations of the viewers and the characters in the image which all go under providing support to the suffering people.

The second infographic (Figure 10) promotes the preventive measures people are instructed to take in order to reduce the possibility of contracting the virus. The infographic focuses on one means of protection which is washing hands; this guideline would help people cope with the pandemic rather than fearing it.

The represented social actor is the viewer as indicated by the second-person pronoun affixed to the nouns "نفسك وأسرتك" (yourself and your family) and the underlying second-person pronouns in the imperatives "احمي" (protect) and "حافظ" (keep). These pronouns make the viewer the agent as protection has become his/her role. Impersonalization through objectivation is employed in the nominal "غسل الأيدي لمدة لا تقل عن ٢٠" (handwashing for 20 minutes) which highlights the time spent in performing the act of handwashing; hence, the activity is given prominence over the agent. Besides, the visual design clarifies the objectivation. The close-up on the hands being washed, the absence of the gaze, and frontal angle focus on the water falling on the hands to emphasize the activity rather than the agent. The interrelation between the verbal and the visual structures makes the act of washing hands which is a means of protection against COVID-19 a collective action that should be practised by everyone.



Figure 10.
Handwashing. 2021.
<https://www.facebook.com/egypt.mohp/photos/a.122315979319023/395625168654768/?type=3>

The next infographic (Figure 11) sheds light on another preventive measure, namely social distancing, which people can simply follow to reduce infections with COVID-19. Social distancing should be maintained in any human interaction. The social actors depicted in this infographic reveal an activation-passivation relationship that involves the viewers. Activation is recurrent in the underlying pronouns in “حافظ” (keep) and “التزم” (stick to) which involves the viewer in the act of social distancing as the agent. Passivation is realized in “الأخرين” (the others). It means the people the viewer interacts with, so they are the acted-upon. In addition, impersonalization is realized through objectivation in “متر ونصف” (a meter and a half) and “التباعد الاجتماعي” (social distancing). It names what is expected from the agents in this infographic; this is further stressed by the repetition of “متر ونصف”.

There are two represented human figures in this infographic: a man on the right and a woman on the left wearing masks. The space between them refers to the notion of social distancing which is stressed by the oblique angle and long shot. The portrayed social distance and interaction demonstrate the entire bodies of the man and the woman to emphasize their commitment to social distancing by keeping 1 meter and a half between them. Regarding social interaction, there is an offer gaze because they are not looking at the viewer. The identity of the man and the woman is not highly essential since social distancing is the most crucial element. It is necessary to note that the information in the infographic is not gender-exclusive as both genders are included to make social distancing everyone’s responsibility. The whole situation accentuates the role of such measures in the prevention of COVID-19 and eliminating people’s fear by being more cautious.



Figure 11.
Social Distancing.
2021.

<https://www.facebook.com/egypt.mohp/photos/a.12231597931>

The next infographic (figure 12) is a result of the joint work of WHO and MoH in which they orient people with guidelines on how to provide psychological support to those in need.

The roles allocated to the social actors are exposed through the activation-passivation scheme which is revealed through the use of pronouns. With regards to pronouns, it is important to note that Arabic has different morphological composition than English as pronouns are attached to verbs and nouns. There are two agents in this infographic. The first is revealed via individualization in the second-person pronoun “you” in the verb “تعاطف” (sympathize); it demands a certain action from the viewer which is to show sympathy. The second agent is expressed by assimilation in “منا” (from us) which engages the whole community in providing support to those who need it. The shift from individualization to assimilation stresses the importance of a collective action. The patient in this infographic is “المصابين مهما كان عرقهم أو جنسهم” (the stricken disregarding their ethnicity or race/sex) as they are the recipients of support and solidarity. Moreover, the visual structure is characterized by the absence of human figures; however, the four hands located at the bottom of the infographic as portrayed by the medium shot reflect the infographic’s message of non-discrimination as indicated by: “المصابين مهما كان عرقهم أو جنسهم”. Visually, the represented hands have various skin colors to show that acceptance and support should be given to the human race alike.

As MoH is an Egyptian ministry which mainly addresses Egyptians in addition to Arabic speakers, some infographics address some culture-specific issues which would affect their mental health. One of these issues is concerned with specific spiritual and religious practices which are no longer possible since the outbreak of the pandemic. Hence, MoH released the following infographics to instruct people on how to safely celebrate the holy month of Ramadan and Ramadan Bairam while applying COVID-19 preventive measures since the inability to practice some social and religious can disrupt one’s mental health and wellbeing.

“Taraweeh Prayer”, practised by Muslim men and women after the evening prayers in mosques, is a common religious ritual in Ramadan. In the wake of the COVID-19 pandemic, the Ministry of Religious Endowments imposed strict measures in order to permit taraweeh prayers at mosques while protecting people



Figure 12.
Psychological Support.
2021.
<https://www.facebook.com/egypt.mohp/photos/362583698625582/>

from carrying or spreading the virus. The infographic (Figure 13) demonstrates the measures people should follow in order to pray in mosques safely.

The social actors are excluded from this infographic due to the use of backgrounding; the latter is realized by nominalization in “ارتداء” (wearing), “استخدام” (using), and “مراعاة وجود” (maintaining). Nominalization stresses the social practice and activity rather than the agent performing it. Though the agent is not mentioned, it is understood from the context that it refers to any person who would pray taraweeh in the mosque. The use of circumstantialization in “الكمامة” (face mask), “سجادة الصلاة الشخصية” (personal prayer rug), and “١ متر بين المصلين” (1 meter between those who pray) highlights the conditions by which people can safely pray; they are, thus, the means of accompaniment which would realize the agentless material processes of “ارتداء” (wearing), “استخدام” (using), and “مراعاة وجود” (maintaining).

The visual composition reveals the agent in the previous material processes and the identity of the nominalizations: the six male Muslims who are praying in the mosque. The long shot and oblique angle highlight the expected scheme of taraweeh prayer. The viewers are detached from the men praying, and the high angle makes the implementation of the precautions clearer to the viewer: Each of the six men is wearing a face mask, using his prayer rug, and maintaining social distancing. In addition, there is no social interaction between the represented participants and the viewer as evident in the offer gaze. The image, thus, interprets the instructions written in the infographic to provide orientation on how to safely perform this religious ritual visually as well.

Following the holy month of Ramadan, Muslims celebrate Ramadan Bairam in the first three days of the month of Shawwal. Gatherings of family and friends prevalent means of celebrating this feast. Hence, MoH released an infographic (figure 14) to encourage people to celebrate virtually to avoid spreading the virus.



Figure 13.
Taraweeh. 2021.
<https://www.facebook.com/egypt.mohp/photos/a.123442675873020/357326319151320/?tvp=3>

The social actor included in this infographic via activation is recurrent in the pronouns “your” and “you” in “احمى نفسك ومن حولك” (protect yourself and those around you) and “عائلتك” (your family). Activation includes the addressee in “استخدم” (use) where the agent is the pronoun “you”. The use of activation in the previous examples involves the viewers. As for the patient, it is realized in the acted-upon which is recurrent in “الرسائل الإلكترونية ومكالمات الفيديو” (electronic messages and video calls) as an alternative to physical gatherings to avoid the disruption of people’s lifestyle during the pandemic. Finally, it sends a message of tranquility and hope instead of fear as evident in the hashtag “#عيد_بأمان” (celebrate the feast in safety); appraisal is employed in “بأمان” to reduce people’s concerns and eliminate any danger.

The focal point of this infographic’s visual structure is the mobile telephone which depicts a virtual gathering to celebrate Ramadan Bairam. The long shot gives significance to the concept of virtual social gathering rather than who is involved in it, especially since it is a foreign concept to the Egyptian culture. Even though the long shot denotes distance, it symbolically reveals the closeness suggested by the mother-son virtual meeting. Besides, the oblique angle and the offer gaze make the viewer an outsider not a participant in this world to urge the viewer to follow the steps of this family. The infographic, thus, reveals that a virtual meeting would enable Muslims to celebrate the feast and enjoy each other’s company which would promote mental health and wellbeing.

Discussion and Conclusion: Discourses of Fear and Hope

Realizing the importance of sound mental health at times of pandemics, WHO and its affiliate health establishments all over the globe, specifically, the Egyptian Ministry of Health have utilized the genre of medical humanities to substitute the induced discourse of fear with that of hope and serenity. The present study attempted to reveal the role of medical humanities in promoting the population’s mental health during the COVID-19 pandemic. It applied van Leeuwen’s (1996, 2008) Social Actors Framework to examine a collection of 12 infographics; six of which were produced by WHO in English, whereas the rest were produced by MoH in Arabic to expose the social actors included/excluded in the protection of mental health and the construction of hope discourse on COVID-19. The studied infographics tackled various issues related to the



Figure 14.
Feast Celebration.
2021.
<https://www.facebook.com/egypt.mohp/photos/362583698625582/>

promotion of mental health: seeking support for oneself, providing support for others, assisting healthcare professionals, performing religious and spiritual practices, and protecting oneself and others from contracting the virus.

Applying van Leeuwen's (2008) taxonomy of social actors, it is noted that the selected infographics employ inclusion of social actors rather than exclusion. The represented social actors across the studied texts are included by the roles allocated to them, which fall between activation and/or passivation. When the social actor is the one undertaking the activity (agent) in the social practice of promoting mental health and constructing hope discourse, the role assigned is activation. On the other hand, passivation centers around the one undergoing activity (acted-upon) or the means through which mental health is promoted.

Social actors can be also included in the social practice through personalization. The studied twelve infographics employed various subcategories of personalization to illustrate the social actors included and the role they perform. First, some social actors are represented via individualization when they act or are expected to act as individuals rather than groups to instill the concept that coping with the pandemic and maintaining wellbeing are the responsibility of each single person rather than a certain institution. Second, assimilation is a common practice between English and Arabic infographics. It is used to highlight the undesirable impact of COVID-19 on mental health and the need to protect it. It also reveals the fact that a communal action is needed rather than an individual one; hence, the whole population should share the same goal. Besides, personalization techniques such as identification and appraisal are employed to specify certain social actors and urge the viewer to take action by triggering his/her feelings. It is worth mentioning that Arabic has its special morphological and syntactic rules; as a result, specific techniques are common in MoH's infographics alone. For instance, individualization is used when the pronoun is either attached to the verb/noun or is understood from the underlying context (especially with verbs). In addition, the impersonalization technique of objectivation is only utilized in the Arabic infographics to provide more information to the target social actors on how the social practice is performed.

Despite the fact that the social actors are mainly included, there are a few instances where exclusion is employed. Exclusion in the studied data is realized through backgrounding which demotes some social actors by making them unnoticed to direct the viewers towards other social actors. Thus, backgrounding does not suggest that the concerned social actors are absent, unimportant, or marginal because there are clues to identify them in the infographics. They are

either named somewhere in the infographic or can be clearly deduced from the context, especially, the visual design.

The social practices associated with mental health protection during the COVID-19 pandemic and the social actors performing them are elaborated by the visual composition. The design of each studied infographic correlates with its theme. The social actors are always represented visually even if they are verbally excluded. The visual analysis focused on the three parameters set by van Leeuwen (1996, 2008), namely, social distance, social relation, and social interaction. The relation between the depicted participants and the viewer stresses proximity whether literally or figuratively in order to involve the viewer in the social practice. The viewer's engagement is reflected in the activities done or expected to be done in order to maintain mental health.

Besides, the emotional proximity and the desired empathy are further promoted by the use of frontal angles and the gaze of demand since they highly involve the viewer in the social practice. In those instances where the oblique angle and the offer gaze are used, they do not necessarily indicate complete detachment from the social practice. They sometimes drive attention to the passivated social actor and the circumstantialization which would facilitate the implementation of the social practice. Accordingly, none of the infographics triggers fear or stress as they either seek the viewer's empathy or provide them with true, essential information on how to protect themselves and others from contracting the virus or how to cope with the new imposed reality.

The multimodal analysis using van Leeuwen's (2008) Social Actors Framework of twelve infographics, six in English produced by WHO and six in Arabic released by MoH, sought to identify the social actors involved in the protection of mental health, following the COVID-19 pandemic. The employed verbal and visual devices revealed how these social actors are included/excluded in this social action. The socio-semantic analysis showed that almost every single individual is involved in the act of promoting and protecting mental health disregarding his/her occupation, i.e., one can protect his/her own mental health and others even if he/she does not belong to the medical field. The present study was limited to the analysis of English and Arabic infographics; nevertheless, the spread of the pandemic and its mutation mandate the examination of infographics written in languages shared by many populations such as Spanish, Russian, and Chinese. In addition, future research should also be devoted to the role of medical humanities in spreading awareness on the prevention of diseases, especially, fatal and chronic ones such as strokes, AIDS, and diabetes.

Works Cited

- Al-Ghamdi, Naimah Ahmad. 2021. "Ideological Representation of Fear and Hope in Online Newspapers on COVID-19 in Saudi Arabia." *Helion* 7, no. 4. <http://doi.10.1016/j.helion.2021.e06864>.
- Al-Ghamdi, Naimah Ahmad, and Areej Hammad Albawardi. 2020. "Multivocality of Saudi COVID-19 Discourse in Social Media Posts: A Socio-Semiotic Multimodal Perspective." *Journal of Language Studies* 20, no. 4: 228-50. <http://doi.org/10.17576/gema-2020-2004-13>
- Cmeci, Camelia. 2020. "(De)legitimation of Power of Agency: A Multimodal Critical Analysis of Social Practices during Covid-19 Pandemic in Romania". *Thesis* 9, no. 2: 133–163. <https://thesis-journal.net/wp-content/uploads/2021/01/6.-Camelia-C.-2020.pdf>
- Jones, Rodney H. 2015. "Discourse and Health Communication". In *The Handbook of Discourse Analysis*, edited by Deborah Tannen, Heidi E. Hamilton and Deborah Schiffrin, 841-57. Oxford: Wiley Blackwell.
- Keyes, Corey. L. M. 2002. "The Mental Health Continuum: From Languishing to Flourishing in Life." *Journal of Health and Social Behavior* 43, no. 1: 207–222. <http://doi.org/10.2307/3090197>
- Marini, Maria Giulia. 2016. *Narrative Medicine Bridging the Gap between Evidence Based Care and Medical Humanities*. Basel, Switzerland: Springer International Publishing.
- McCrorie, Alan David, Conan Donnelly, and Kieran J. McGlade. 2016. "Infographics: Healthcare Communication for the Digital Age." *The Ulster Medical Journal* 85, no. 2: 71-75.
- Richardson, John. E. 2007. *Analysing Newspapers: An Approach from Critical Discourse Analysis*. Basingstoke, New York: Palgrave Macmillan.
- Smiciklas, Mark. 2012. *The Power of Infographics: Using Pictures to Communicate and Connect with Your Audience*. Indianapolis: Que Publishing.
- Van Leeuwen, T. 2008. *Discourse and Practice: New Tools for Critical Discourse Analysis*. New York: Oxford University Press.
- World Health Organization. 2004. *Promoting Mental Health: Concepts, Emerging Evidence, Practice (Summary Report)*. Geneva: World Health Organization. https://www.who.int/mental_health/evidence/en/promoting_mhh.pdf