Critical Literacy in Health among sex professionals in Porto Murtinho: Self-care and Risk of STI

Letramento Crítico em Saúde entre profissionais do sexo em Porto Murtinho: Autocuidado e Risco de IST

Alfabetización Crítica en Salud entre trabajadoras sexuales en Porto Murtinho: Autocuidado y Riesgo de ITS

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Abstract: This study aims to analyze the perceptions of female sex workers in the city of Porto Murtinho (MS) on the concepts of self-care and prevention of sexually transmitted infections (STIs), and how their opinions on the subject can affect decision-making in health. The research is based on a qualitative approach developed through semi-structured interviews recorded in audio and analyzed according to the epistemology of emergence. Data collection took place in Porto Murtinho, a city that makes up the Bioceanic Route under construction to connect Brazil to Paraguay as part of a regional socioeconomic development project. In all, 8 women were interviewed who, despite revealing a sexual prevention routine and professional autonomy, reinforced the role of critical health literacy as a tool for permanent self-care and health promotion. In addition, the relationship between the implementation of the Bioceanic Route and its possible negative impact on safety and social determinants in health is highlighted, since the consequent increase in the flow of people and services in the region corroborates the growth of prostitution and sex tourism. With this, it is concluded that more effective public health policies must be taken to ensure greater health literacy for these women, as well as the need to encourage academic debate on the subject.

Keywords: health literacy; Bioceanic Route; sexually transmitted infections; sex workers.

Resumo: Este estudo tem como objetivo a análise das percepções de mulheres profissionais do sexo da cidade de Porto Murtinho (MS) sobre os conceitos de autocuidado e prevenção do contágio de infeções sexualmente transmissíveis (ISTs), e como suas opiniões sobre o tema podem afetar a tomada de decisões em saúde. A pesquisa se pauta por meio de entrevistas semiestruturadas gravadas em áudio e analisadas segundo a epistemologia da emergência. O levantamento de dados ocorreu em Porto Murtinho, cidade que compõem a Rota Bioceânica em construção para ligar o Brasil ao Paraguai como parte de um projeto de desenvolvimento socioeconômico regional. Ao todo, foram entrevistadas 8 mulheres que, apesar de revelarem uma rotina de prevenção sexual e autonomia profissional, reforçaram o papel do letramento crítico em saúde como uma ferramenta de autocuidado permanente e promoção da saúde. Além disso, destaca-se a relação entre a implementação da Rota Bioceânica e seu possível impacto negativo sobre a segurança e determinantes sociais em saúde, visto que o consequente aumento de fluxo de pessoas e serviços na região corroborou para o crescimento da prostituição e turismo sexual. Com isso, conclui-se que políticas públicas de saúde mais efetivas devem ser tomadas para garantir o maior letramento em saúde dessas mulheres, bem como observa-se a necessidade de se fomentar o debate acadêmico acerca do tema.

Palavras-chave: letramento em saúde; Rota Bioceânica; infeções sexualmente transmissíveis; profissionais do sexo.

Resumen: Este estudio tiene como objetivo analizar las percepciones de trabajadoras sexuales de la ciudad de Porto Murtinho (MS) sobre los conceptos de autocuidado y prevención de infecciones de transmisión sexual (ITS), y cómo sus opiniones sobre el tema pueden afectar la toma de decisiones en salud. La investigación se basa en un enfoque cualitativo desarrollado a través de entrevistas semiestructuradas grabadas en audio y analizadas según la epistemología de la emergencia. La recolección de datos ocurrió en Porto Murtinho, ciudad que forma parte de la Ruta Bioceánica en construcción para conectar Brasil con Paraguay como parte...
de un proyecto de desarrollo socioeconómico regional. En total, fueron entrevistadas 8 mujeres que, a pesar de revelar una rutina de prevención sexual y autonomía profesional, reforzaron el papel de la alfabetización crítica en salud como herramienta para el autocuidado permanente y la promoción de la salud. Además, se destaca la relación entre la implementación de la Ruta Bioceánica y su posible impacto negativo en la seguridad y los determinantes sociales en salud, ya que el consecuente aumento en el flujo de personas y servicios en la región corrobora el crecimiento de la prostitución y el turismo sexual. Con eso, se concluye que se deben tomar políticas públicas de salud más efectivas para garantizar una mayor alfabetización en salud de estas mujeres, así como la necesidad de incentivar el debate académico sobre el tema.

**Palabras clave:** alfabetización en salud; Ruta Bioceánica; infecciones de transmisión sexual; trabajadoras sexuales.

## 1 INTRODUCTION

Este estudio tuvo como objetivo analizar las implicaciones de un trabajo enfocado en la alfabetización en salud involucrando trabajadoras sexuales en la ciudad de Porto Murtinho, en el estado de Mato Grosso do Sul, ya que esta ciudad ha adquirido una gran importancia debido a que Porto Murtinho limita (borde húmedo) con Carmelo Peralta, en Paraguay, y se estima que en 2022 el cruce se llevará a cabo a través de un puente, optimizando el tiempo de viaje, aumentando tráfico y sectores relacionados con el turismo, lo que será crucial para que la Ruta Bioceánica sea efectiva. Esta Ruta es una de los proyectos más importantes para el desarrollo de Mato Grosso do Sul y se conectaría la ciudad de Porto Murtinho con la República de Paraguay, a través de un puente, pasando por Paraguay, Argentina hasta llegar a Chile y tendrá una longitud de 2,200 kilómetros entre Campo Grande y los puertos del norte de Chile. El Corredor busca facilitar el proceso ecológico entre estos países, fortalecer el turismo, unir a las naciones del sur del continente, aumentar la competitividad del comercio al exportar a Asia y estimular el crecimiento de nuevos flujos comerciales regionales. Este proyecto llevará a un supuesto aumento en la demanda de turistas extranjeros en busca del territorio nacional, principalmente en la región entre Campo Grande y Porto Murtinho, y las rutas turísticas (ciudad de Bonito y el Pantanal).

También fue nuestro objeto de estudio verificar si las trabajadoras sexuales protegen contra la transmisión de Infecciones Transmisibles Sexualmente (ITS), describir la percepción de trabajadoras sexuales sobre el mal trato sexual, evaluar las razones que llevaron a ellas a entrar en este mercado laboral y finalmente discutir cómo el lenguaje multimodal puede mediar la comprensión de los conceptos clave de trabajadoras sexuales sobre el cuidado de su salud sexual.

En vista de lo anterior, este estudio es justificado debido a la importancia que tienen las ITS en la sociedad, ya que la falta de conocimiento sobre los métodos de transmisión y factores de riesgo conllevan complicaciones para la salud de las personas y el costo para el sistema de salud que se podrían evitar con la prevención primaria. En este sentido, esta investigación aporta la visión de la alfabetización en salud, que contribuye a la eficiencia de las acciones de salud. Es importante mencionar que la Ruta Bioceánica generará cambios inevitables para la ciudad de Porto Murtinho y para los diversos sectores de la sociedad implicados. Así, es necesario realizar un estudio que se centre en esta realidad actual, permitiendo al Estado trabajar para aliviar este problema.

## 2 HEALTH LITERACY AND STIS

Según Chinn y Kramer (2011), la alfabetización crítica en salud es la habilidad de tomar decisiones de salud en el contexto de la vida diaria. Con esto, estas habilidades, individuos serán capaces de buscar y obtener información relacionada con la salud y adquirir una sensación de control sobre sus vidas. Es posible
to say that someone with this good health education will be able to check information on the internet and consult with a doctor regularly. Still according to this author, critical health literacy is composed of three domains that make up the concept: the critical evaluation of information, the understanding of the social determinants of health and collective action.

The author Nutbeam (2000) states that the results of health promotion represent the personal, social and structural factors that can be modified to change the determinants of health. In this context, health literacy represents the social, cognitive, and personal skills that influence individuals' ability to access, understand, and use information to promote good health. Furthermore, the results of health promotion are the immediate target of planned health promotion activities, as these measures are essential for maintaining collective health.

According to Rudd, Rosenfeld and Simonds (2012), in the last ten years there has been an increase in research correlating critical health literacy with the individual's health outcomes, indicating participation in health promotion, disease prevention, management of a chronic disease etc. This new field of research, also according to these authors, contributes to understanding the determinants of health and discussions and communications on the reform of health services. On the other hand, research indicates that a good amount of health information is inaccessible, thus, there will not be an effective exchange of information. In view of this, effective communication and health literacy are necessary so that sex workers can have autonomy in their lives and have the possibility of perpetuating adequate health.

Prostitution consists of paid sexual practice, which generally does not require the presence of an affective bond between the parties, that is, there is an exchange of sexual pleasures for material goods. This practice constitutes one of the oldest commercial activities in human history, being considered by some authors as the oldest (Penha, et al., 2012). However, it was only in 2002 that the inclusion of the category “sex workers” in the Brazilian Classification of Occupations, by the Ministry of Labor and Employment, was achieved. It is worth emphasizing that this achievement was an initial step in advancing towards the labor rights of the category, since this process will make it easier for the public authorities to regulate, combat sexual exploitation, and, above all, allow professional dignity and enjoyment of labor rights to these people (Brasil, 2012).

Historically, interventions related to the health of sex workers have focused on reducing the risk of acquiring STIs. Since the 1980s, the Ministry of Health has adopted strategies to face the HIV/AIDS epidemic, with emphasis on the National Policy for Integral Attention to Women’s Health, the Charter of Rights of Health Users and the National Policy for Integral Health for LGBT. In relation to prostitution, there are two approaches in the world. The first is the development of public policies for punishment and the second is the creation of Non-Governmental Organizations that train sex workers on measures to prevent contamination/transmission of STIs, with Brazil falling under the second action (Penha, et al 2015).

Thus, we observe that the population of sex workers is exposed daily to situations of risk of STI transmission. Among the Reproductive Tract Infections, we have Sexually Transmitted Infections (STIs), endogenous infections (eg, vulvovaginal candidiasis) and iatrogenic infections (eg, postpartum). Among these, STIs are caused by more than 30 etiological agents (viruses, fungi, bacteria and protozoa) and are transmitted by: blood, from mother to child during pregnancy, during childbirth or breastfeeding, and, mainly, through sexual contact (Brasil, 2015).

For the emergence, dissemination and maintenance of an STI epidemic to occur there must be an interaction of three factors: (1) transmission efficiency of the etiological agent,
(2) sexual partner variation rate, corroborating socioeconomic, cultural and behavioral aspects and (3) duration of infection. It is important to emphasize that these three factors do not affect the population evenly, as there are specific groups that need greater attention, called key populations: gays, men who have sex with men, transvestites/transsexuals, people who use drugs and sex workers (Brasil, 2015).

Thus, it is valuable that these professionals are received and instructed correctly about the complexity of their profession, that is, it is necessary that they acquire literacy about the risk factors of their profession. As exposed by

Authors Torres, Davim and Costa (1999) already addressed the relationship between the problem of insertion in prostitution and the growing development of cities, as regional and local tourism provide a significant increase in this practice, especially in adolescence. This problem is also shared with the various sectors of society, such as tourism companies, hotel and motel chains, nightclubs, among others, thus contributing to attracting these young women. In this sense, it is worth addressing the context of the Bioceánico Highway Corridor, as this will impact the city of Porto Murtinho, in Mato Grosso do Sul.

Asato, Gonçalves and Wilke (2019) already point out the concern that the construction of a bridge between these two cities can generate: sex tourism, in addition to general insecurity, such as cargo theft. This tourism can be intensified because, in addition to fishing, there are not many alternatives for income generation and development for the population. On the other side of the bridge, the city of Carmelo Peralta must also be seen as part of the confrontation of the problems, due to the fact that the city is a center of fishing tourism, in which child prostitution is exacerbated at the beginning of the fishing season.

3 METHODOLOGY

This study identifies itself as a qualitative research of an interpretative and exploratory nature, with characteristics of the epistemology of emergence and the rhizomatic perspective (Maciel, 2016). From this, this research was based on two post-structuralist perspectives as methodological possibilities. The first is the re-signification of the rhizomatic perspective (Deleuze; Guattari, 1995) and the second is the epistemology of postmodern emergence (Somerville, 2008; Maciel, 2016). There is an advantage in this method, as there are more open possibilities for redesigning the research, in terms of redefining the objectives and research questions, and also for organizing the data to be analyzed. The choice for the rhizomatic perspective is justified, in this proposal, since it can enable more pluralized discussions, as opposed to the binary interpretation logic.

The epistemology of emergence aims to shift the gaze of the participating researchers to investigate aspects that were not previously considered, as well as, it intends to contemplate non-canonical ways for the data collection process. As an expected risk, it was the chance for professionals to feel embarrassed and suffer psychologically about the questions asked. Thus, it was up to us researchers to properly approach these women so that they could feel free to talk about their profession.

3.1 Context

The research proposal encompassed the following inclusion criteria: women aged 18 years or over who act as sex workers and who work in the city of Porto Murtinho and sign the Informed
Critical Literacy in Health among sex professionals in Porto Murtinho: Self-care and Risk of STI

Consent Form or put their thumb on the Informed Consent Form if they are not literate. These women were approached in hotels and inns where they were allocated. This city was chosen due to the fact that it is an important link in the Bioceanic Route, connecting the state of Mato Grosso do Sul to the other constituent countries and also because the construction of the bridge that will connect Carmelo Peralta will intensify trade, the movement of vehicles and people, tourism, etc. Therefore, this municipality is the ideal place for data collection.

3.2 Data collection instruments

The research was carried out using audio-recorded interviews, addressing in the sessions the forms of transmission of STIs and self-care practices with the professionals, since, from this, the researcher will seek to identify aspects regarding the perception of these women about the inherent risks of their profession. A semi-structured interview script was prepared with questions about the participants' perception of their current state of health. The interviews were transcribed according to the norms of conversation analysis. The researcher’s field diary was used at the end of each interview and the study was carried out in four stages: Selection of sex workers in Porto Murtinho; Interview with the participants using Emergence Epistemology through open questionnaires with the aid of audio recording. Thus, the dialogue will be fluid and it will be possible to focus on issues related to individual perception, critical self-analysis and finally; Survey of data from the interview/transcription. The interviews will be analyzed in the light of the central theme: critical health literacy - sex workers' perception of the risk of STI transmission. Thus, excerpts identified that dialogue with the research objectives and with the theoretical support. According to the epistemology of emergence, themes were also listed that were not previously planned by the researcher and that emerged from the research locus and finally, elaboration of the analysis and production of the scientific article for publication.

4 RESULTS AND DISCUSSIONS

Interviews were conducted with a total of 8 participants, who met the listed inclusion criteria, ranging from 27 to 55 years old. During the interviews with the professionals, following the perspective of epistemology, the plurality of experiences can be observed, mainly with regard to the origin of each one of them, which bring with them their previous baggage. The fear of the judgment of the other towards their profession was a point of great importance and prevalence during the interviews. On several occasions, they brought up this point, because in view of the city being small, people knew each other a lot. Below, we present the results of this research.

For the discussion, the five main emerging aspects will be listed in line with the design of the qualitative research in question. For this reason, we will discuss how sex workers see their profession, listing their habits, risks of contagion and methods of protection against STIs, in addition to discussing their personal and family life regarding their objectives for entering the profession and also their relationship with the Bioceanic Route.

4.1 Emergence 1: Access to health and prejudice regarding the profession

The women of Porto Murtinho know that they have the right to care through the SUS in basic health units and in emergency medical care, however, they all have a private gynecologist,
where they have a self-care routine, they see themselves regularly, at least twice a year. They pay for this consultation with the money they receive from the programs and also from other complementary sources, such as beauty salons and restaurants. Women report that they do not have access to a gynecologist through the SUS, so it is necessary to carry out consultations privately.

Interviewee 1: Wow, I live in a small town, the only thing they don’t have, like, is a public gynecologist, but I saw a private one today. I went to a private clinic for a complete blood count, a routine exam, you know? I loved it, I liked it a lot, but it is not available at the city center.

The reason why they prefer not to consult each other at the UBSF in Porto Murtinho would be due to the prejudice inherent in society about their profession. They say that “the population of Porto Murtinho is very talkative”. That is, they are afraid of having their privacy exposed by health professionals.

Interviewee 2: It’s complicated here at the post, they don’t have professional ethics. Women are very talkative, so people leave here and go to other cities. But if one of the girls gets sick, or if anyone else, they take care of it right away.

In the Unified Health System (SUS), people have access to scheduled consultations and also on demand with general practitioners, through the Basic Health Units (UBSF). In some of these units there are some specialists, such as pediatricians and gynecologists, but not all of them. For a consultation with a gynecologist through the SUS, the person needs to go to a UBSF and, based on the evaluation of the general practitioner, that woman may be referred to a tertiary care hospital, through an outpatient consultation, if necessary. However, sometimes it is necessary to wait for this specialized consultation, which can take months. Thus, sex workers, as they cannot wait these months, choose to have consultations in the private system. In the Emergency Care Units (UPA), which are open 24 hours a day, their operation is different, as priority assistance is provided on an urgent and emergency basis. That is, if a woman is experiencing severe vaginal bleeding, she will be referred to a hospital if necessary. However, if that same woman has vaginal bleeding that is not severe, she will be advised to look for a UBSF to be able to investigate this bleeding on an outpatient basis.

4.2 Emergence 2: Self-care, stis and use of condoms / contraception

Combined prevention is the combination of different actions to prevent STIs, HIV, viral hepatitis and their associated factors (Brasil, 2015). This action is not just based on a single action, such as using condoms, for example, but on several actions such as using condoms, vaccination, diagnostic tests and treating people with STIs. Thus, ideally, sex workers should maintain a longitudinal follow-up to better approach this situation and increase their safety at work.

At all times, sex workers demonstrate knowledge about STIs, transmission methods and the risks that their profession poses to their health. They refer to the use of male condoms in the vast majority of sexual relations with clients, even oral sex.

Interviewee 3: I don’t understand the prejudice, because we have sex with a condom, have oral sex with a condom, take care of ourselves, take care of our appearance, then these girls stay there, from the family, go out with a married man, have sex, get pregnant and stay there.

The only condition they mention not using condoms would be if they have a long-term client and they are in an exclusive relationship with each other. This fact is a problem, as unprotected
sex can lead to infection with STIs. Thus, we can say that the professionals are aware of the risks of acquiring STIs, but the frequency of protection is flawed.

Only one reported a history of gonorrhea. The others deny STIs and continuous use of medication. They mention carrying out rapid tests regularly, but are unaware of pre-exposure and post-exposure prophylaxis, a discussion that arose during the discussion, as I thought it was very important that they knew what to do if they ever had risk exposure, such as coming into contact with third-party fluids.

Post-exposure prophylaxis (PEP) of risk for HIV infection is based on the use of antiretrovirals to prevent a person from developing HIV after risky contact with STIs. It can be used in cases of unprotected sex, even in sexual violence, as it greatly reduces the incidence of infection by this virus. This measure is important so that these women can have more security and quality of life, due to the problems that HIV infection brings to the human body. Despite this importance, the fact that they are not familiar with the PEP is worrying. That is, if by chance they accidentally expose themselves, they would not know that PEP exists and can be very useful.

With an adequate approach to this population, we will be able to mitigate the impacts and risks that these women face in their daily lives. For this, Critical Health Literacy is essential, as professionals will be able to choose the best method of protection for them, judge the information they receive and consult regularly with their respective doctors. Below, interviewee 6 exemplifies the role and responsibility that health professionals have on this topic.

**Interviewee 6:** I had no idea that this medication existed, no one had told me about it before, not even at the doctor’s appointment. But this is important for our health and I will tell my friends.

Interviewee 6 helps us to understand the intrinsic relationship between the health of these women and the importance of putting into practice the concept of Critical Health Literacy. As an example, we can mention HIV, the human immunodeficiency virus, which is transmitted mainly through unprotected sexual contact. In addition to the implications that this infection causes for individual health, this disease strongly implies collective health and the Unified Health System, as a result of the actions that the State needs to take to reduce this negative impact, which could be minimized with the use of condoms and PEP, which we have mentioned.

### 4.3 Emergence 3: Reasons they are sex workers and work routine

Reis *et al* (2014) state that Health Education enables the dissemination of information in order to prevent injuries and promote health so that the health educator transmits content and also teaches how to think critically.

The women interviewed refer to having a work routine that they create themselves. In this way, they are not subjugated by pimps, but work at the hours they want and in what best suits their routine. Only one woman interviewed is from Porto Murtinho, the others are from São Paulo, Curitiba and Campo Grande. They travel to Porto Murtinho only during the fishing season, which occurs between March and November, as it is during this same period that fishermen go to Porto Murtinho, as these are the main men who hire the women in the city. In the fishing season, they rent houses to shelter in, usually with discounts, as they are already known. They work as sex workers in order to increase their income and be able to live well, buy goods and take care of their beauty and health, in addition to helping their families. They don’t have fixed working hours, but they work when it’s better and when there’s more movement. For this, the
women count on the help of people who work in hotels and inns, who inform when there is a good movement for work, according to the arrival and departure of fishermen.

Interviwee 5: *It’s not easy money, but it’s fast, because it comes out now. Then I go to the store, buy a bag, go to the salon, get my hair done.*

In this dialogue, we can perceive the situation of vulnerability in which they live, at the same time that we notice a certain autonomy at work, since they are the ones who make their own work schedules.

### 4.4 Emergence 4: Relationship between the Bioceanic Route and the profession

The Bioceanic Route will be able to increase the number of people that the sex workers will serve, as the number of trucks and truck drivers that will pass through there will increase substantially. A problem to be highlighted is the increase in violence and robberies, related for example to the theft of cargo, in addition to the increase in sex tourism, resulting from fishing, as this is an important source of income and leisure for people who live and do tourism in this locality.

The women interviewed say that the Bioceanic Route will increase the flow of people in the city, but this will negatively affect the profession, as the city is small, at the moment they would not be able to support the flow. What would happen, according to them, is that the violence rate would increase and the city would be less safe, as it would attract bad people to the city. They report that the city does not have adequate parking for truck drivers, which would lead them to park on the side of the highway, making women have to move there. Thus, as it would be a place farther from the city, they would have to travel there, which would be dangerous.

Interviwee 4: *It doesn’t matter to us, because it’s going to be a bit far, it’s going to increase the number of people, but here, for example, there’s no parking. Then it will fill up with mobsters, it will become dangerous. How are they going to leave the car far away and come on foot? It will be dangerous for us to walk on the street.*

In this context, Health Literacy is once again essential to encourage healthy behaviors, increase the learning experience and improve the behavioral determinants of this population in order to improve self-care for the health of this group.

### 4.5 Emergence 5: Reasons why they entered the profession and how the family relationship works

They report that this profession is not easy, as they have to dedicate themselves if they want to earn money. However, the return is fast, which allows them to sustain themselves. When the season ends, they return to their city of origin and to their families, who are generally unaware of what they do in Porto Murtinho, some mothers suspect, but do not know. They do not count, as the existing prejudice would affect the relationship, at least momentarily. But despite that, if the family knew, after a while they would accept it, they speculate. In conversation, they claim that there was no trigger or specific reason for entering the profession. The initiation began in adolescence, when they realized that it was quick money and they could buy what they needed.
5 FINAL CONSIDERATIONS

The Bioceanic Route is an important development project in Mato Grosso do Sul that will connect the city of Porto Murtinho with the Republic of Paraguay through a bridge. This action will increase people traffic, income and will directly affect the life and routine of sex workers who live in Porto Murtinho, which will lead to impacts on income, safety and increase the risks inherent to the profession. Thus, Critical Health Literacy is of great value and discussion so that we can understand the factors and aggravating factors present, since this topic is emerging and still little discussed in the literature.

In view of this, it is concluded that an approach based on the study of Critical Health Literacy expands the means for better assistance to sex workers, in addition to improving the relationship between the educator and the population addressed, which is essential to mitigate the negative impacts that this profession can have on the lives of professionals.

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