



ORIGINAL ARTICLE

OFFICIAL CAMPAIGNS ON HIV/AIDS IN BRAZIL: DIVERGENCES BETWEEN CONTENTS AND EPIDEMIOLOGICAL PROFILE OF THE DISEASE

Daiane Siqueira de Luccas¹ Marlise Lima Brandão¹ Flaviane Marizete Limas¹ Maria Marta Nolasco Chaves¹ Guilherme Souza Cavalcanti de Albuquerque¹ 

ABSTRACT

Objective: to analyze the categories of gender, social class, race/ethnicity and generation in the discourses of official mediatic campaigns on HIV/AIDS publicized in the period 1988 through 2018. Method: exploratory and documental study, based on publications of publicized campaigns by the public site of the Chronicle Conditions and Sexually Transmissible Infections Department. We have found 55 campaigns whose central theme was that we are approaching, regarding the period 1998-2018. They were submitted to content analysis and processed by the software WebODA®.

Results: the category gender was prevalent in the campaigns (30,90%), followed by generation (25.46%), social class (12.72%), and race/ethnicity (1.81%).

Conclusion: It can be noticed that there is an HIV/AIDS dynamics that cannot be reverted by campaigns. It is necessary to continuously make such campaigns able to approach the phenomenon within the different communities that include homosexuals, males, females, black people, indigenous people, youngsters, elder ones, and also using communication content for those groups, taking into account their ways of living.

DESCRIPTORS: HIV; Acquired Immunodeficiency Syndrome; Gender; Health; Social Class; Nursing.

CAMPAÑAS OFICIALES SOBRE VIH/SIDA EN BRASIL: DIVERGENCIAS ENTRE CONTENIDOS Y PERFIL EPIDEMIOLÓGICO DE LA ENFERMEDAD

RESUMEN:

Objetivo: Verificar las categorías: género, clase social, raza/etnia y generación en discursos de campañas mediáticas oficiales sobre VIH/Sida en Brasil difundidas entre 1998 y 2018. Método: Estudio exploratorio, documental, basado en publicaciones de campañas difundidas en el sitio del Departamento de Condiciones Crónicas e Infecciones Sexualmente Transmisibles. Fueron halladas 55 campañas de la temática central entre 1998 y 2018. Las mismas fueron sometidas a análisis de contenido temático, y procesadas en software WebQDA®. Resultados: La categoría género obtuvo mayor presencia en las campañas (30,90%, seguida por generación (25,46%), clase social (12,72%) y raza/etnia (1,81%). Conclusión: Se percibe existencia de dinamismo del fenómeno VIH/Sida, que no pudo revertirse con la información difundida en las campañas. Es necesario orientarlas continuamente, con contenidos que aborden el fenómeno para las diferentes comunidades: homosexuales, masculina, femenina, negra, indígena, jóvenes, ancianos; así como privilegiar contenidos comunicacionales para grupos en función de sus modos de vida.

DESCRIPTORES: VIH; Síndrome de Inmunodeficiencia Adquirida; Género y Salud; Clase Social; Enfermería.

INTRODUCTION

The virus of the Human Deficiency/Acquired Immunodeficiency Syndrome (HIV/AIDS) is one of the most aggressive public health problem that have ever appeared to be confronted⁽¹⁾. According to epidemiological data of 2019, there are 36.7 million people living with HIV⁽²⁾, and 2,1 million people were recently contaminated.

In Brazil, since 1980 through 2017, the systems information have registered 911,271 cases of AIDS and 327,655 deaths due to AIDS⁽³⁾.

Reflecting about such a grievance, it is not allowable to make any kind of analysis that could be derived only from empirical models based on causes and effects as a positivist reference would do. The complexity of the phenomenon HIV/AIDS demands a look towards totality, to understand it like a process, so that could be put aside a naive vision of reality, trying to find actions that could actually transform reality from the structure that determines⁽⁴⁾ the illness.

Thus, it must be highlighted that the grievance HIV/AIDS is determined by processes that have historicity and own dynamics, a past and the instrumental idea of a future that get intertwined into dimensions of reality – general (accumulation system, the motor logic of the production system, politics and expressions of the State, general cultural expressions), private (structured life conditions of constitutive groups, their patterns of exposition and group vulnerability characteristics), and single (individual ways of living and social groups) - in order to materialize them into observed reality⁽⁴⁾.

Economic and social conditions, which are historical in the life of a community, conform the different dimensions of reality and eventually the social reproduction of who lives in such collectivity. The premises of Critical Epidemiology point out that health phenomena must be critically comprehended so that one should promote changes beyond measurable data collected from the sick individual⁽⁴⁻⁵⁾.

The particular dimension is prominent in this study since that is the source to pick up and to interpret the themes related to social macrogroups, to central categories in order to analyze phenomena like social class, social relationships of race/ethnicity and gender⁽⁶⁾, linking them to the category of generation⁽⁷⁾, that is very present in the historicity of HIV/AIDS, as demonstrated by epidemiological data, since the phenomenon is observed along the different generations in society. The study of such categories and derived processes allow unveiling the social determination of health problems such as HIV/AIDS⁽⁶⁾.

Considering people who live with HIV/AIDS in Brazil and the fact that it is determined by structural processes that impose social inequalities, as long as fundamental categories like gender, social class, race/ethnicity and generation relationships in society, then comes the questioning: how do Brazilian mediatic campaigns regarding HIV/AIDS have been dealing with those categories?

The objective of this study was to evaluate the categories of gender, social class, race/ethnicity and generation in the discourses of official media campaigns about HIV/AIDS in Brazil in the period 1998-2018.

METHOD

This is an exploratory research with regards to its goals and documental according to its ways⁽⁸⁾, based on the publications of campaigns accomplished by Department of

Chronicle Conditions and Sexually Transmissible Infections⁽⁹⁾. The search was made in the secondary data of database of official campaigns that exists in the public site of the Ministry of Health Department along June 2019.

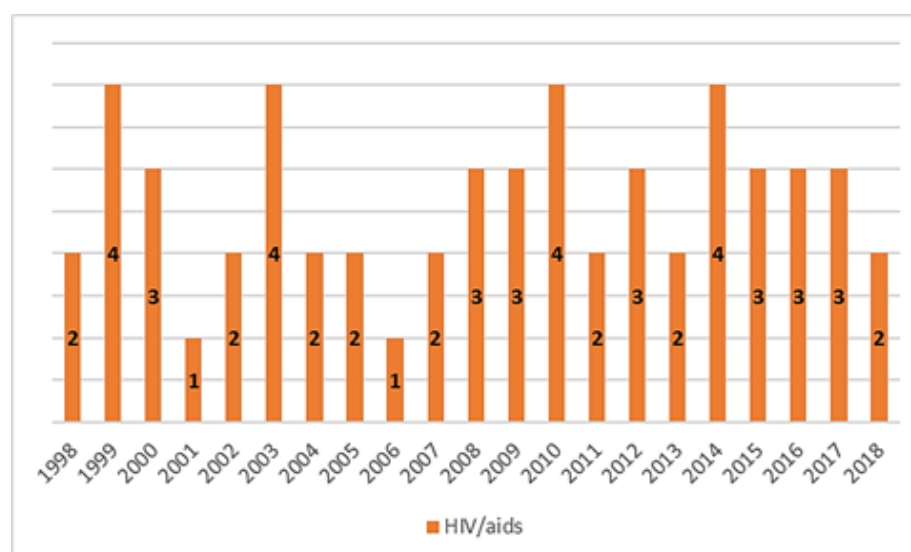
Among the criteria for inclusion of material to be analyzed, there were considered all official campaigns with contents available at the site. As exclusion criterion, the campaigns referred to Sexually Transmissible Infections (STIs), but not exclusively directed to HIV/AIDS. We have found 87 campaigns, published from 1998 through 2018, but only 55 ones had HIV/AIDS as their exclusive theme.

The collected informations were organized in Microsoft Excel 2013® tables, with descriptions of the campaign title, the characterization of theme/contents, subtheme, objective, target audience, publication year, and correspondence to previously delimited analytical categories of the theoretical reference – gender, social class, race/ethnicity and generation.

With reference to the direction of discourses towards the target audience in each campaign, according to the premises of Critical Epidemiology⁶, we have looked forward to verify domains of gender (homosexual, heterosexual, men, men who have sex with men-MSM, women, transsexuals, tranvestites), ethnicity (race, skin colour), class (income and laboral occupation), as well as age range (here considered as generation), since official discourses are directed to target audience's ages. After classifying the collected material, it was used the software WebODA® version 3.0, a supportive tool to organize and analyze the qualitative data. The technique to examine the empirical stuff was based on Contents Analysis⁽¹⁰⁾.

RESULTS

In the total number of 87 published campaigns, 55 out of them (63.2%) were specifically focused on HIV/AIDS; six campaigns were dealing with Sexually Transmissible Infections (STIs) and the remaining ones approached themes like syphilis, hepatitis, violence against transvestites, HPV, and the need to be aware about themes related to the prevention of HIV/AIDS (n=55), according to publication year.



Graphic 1 – Distribution of campaigns on HIV/AIDS (n=55) according to publication year. Curitiba, PR, Brazil, 2019

When analyzing the contents of the campaigns on prevention of HIV/AIDS (n=55), it can be noticed a change of the approached themes along the period (1998-2018), as well as the target audience of the mediatic messages. The first approached themes have dealt with prevention, emphasizing the orientation to share not needles and syringes, adopting the same slogan used in 1998 and 1999: "Was it a syringe, would you use it?". The information was directed to Injectable Drug Users (IDU) and aimed at preventing the sharing of needles and syringes and, consequently, to reduce HIV infection among those individuals.

In 1998, there was a campaign directed to youngsters under the central theme: "Young people, the power of change". That was a movement which intended to encourage youngsters to prevent themselves against AIDS as well as to a better life quality for those ones who already had HIV/AIDS in the country.

In 1999, the campaign slogan was "To live free of AIDS is up to you", and the campaign contents was oriented towards individual responsibility to preserve health and to prevent infection by HIV. Next year, 2000, under the slogan "Do not take AIDS home", the campaign pointed out man's responsibility for his own health, as well as for his sexual partners' health, and, mainly, responsibility for the prevention and control of the epidemic AIDS in Brazil

The campaign launched in 2004, although not explicitly putting responsibility on women, had a similar content when it says: "Having condoms in the purse, examining for AIDS (even married), and using female condoms are attitudes of a woman concerned about her own well-being [...]". Also it stated that a woman's history was responsibility and individual option as puts the slogan: "Woman: you make your own history".

The central theme of campaigns stimulating the use of condoms appeared for the first time in 2000, and it was repeated in 2001 through 2013, and in 2017. It is to be highlighted the contents of 2003 and 2004 campaigns, when there was a change of the standard discourse, that was oriented to the male audience, adding content to the grievance prevention also to the female audience, more specifically to female teens in 2003. In this campaign there is the affirmation that the group had "the responsibility for prevention against AIDS, demanding the partner to use condom...". Also in 2004 for the first time the term "female condom" was publicized by a campaign about HIV/AIDS.

Along the years 2002, 2009, 2010 and 2011, the campaigns worked on central themes like prevention and prejudice, focused on sex workers, men who have sex with men (MSM), transvestites and women.

In the years 2005 and 2010, the central theme of the campaigns refers to the prejudice against people contaminated by HIV. In the first year, the content is about people with HIV and the black population, using the title "AIDS and racism. Brazil needs to live free of prejudice" while in 2010 the discourse was directed to the population segment of transvestites employing material with the title "I am transvestite. I have the right to be who I am".

The content regarding prevention by means of HIV testing was initiated in 2011, a period when HIV test confidentiality was highlighted. Next year (2012), a campaign was publicized showing as central theme the precocious diagnosis of HIV, a theme that was repeated in 2013, 2014, 2015 and 2017.

The first campaign with a theme related to treatment occurred in 1999, when a partnership between Health Ministry and Merck, Sharp & Dohme laboratory was established, aiming at actions that included, among others, the distribution of medicine cases.

In 2006, the theme of HIV/AIDS treatment returned to be explored under the title "Positive Prevention". In this campaign, the focus of communication was to promote awareness of people living with HIV/AIDS so that they could adhere to treatment, and,

consequently, acquire life quality and new perspectives.

Health Ministry came back with campaigns about treatment in 2014 and 2015 and, in both years, the focus of the contents was to accelerate the expansion of treatment with Antiretroviral Therapy (ARVT).

Starting from the contents analysis in the campaigns, it was verified that the category of gender appears 17 times (30.9%) of the campaigns in that delimited period. Eleven (20.0%) of those campaigns were specifically directed to the women, the first of them in 1999, three focused pregnant audience (5,4%) and one was directed to sex workers (1.8%). In 2000 and later in 2012 there were campaigns oriented to gays and transvestites. The content of 2012 campaign deserves attention since it was the first one to approach men who sex with men (MSM).

Content concerning HIV/AIDS phenomenon related to race/ethnicity has appeared in only one campaign (1.8%) along the whole delimited period, in 2005. The theme was justified by epidemiological data that demonstrated an increase in the number of cases of AIDS among the impoverished populational groups, where the black population is majority.

When observing the category social class, seven (12.7%) out of 55 campaigns had that approach. In the universe of those seven campaigns, five (9.1%) referred to classes C, D, and E; one (1,9%) was directed to classes C and D; and one (.9%) used the expression 'low income population' in its content. Those campaigns were published in the years 1999, 2000, 2005, 2008, 2011 (a year with two campaigns approaching the same theme) and 2012.

All the seven (12.8%) campaigns regarding the category social class were concerned with HIV/AIDS prevention; two (28.6%) out of the total seven campaigns also focused on the issue of the prejudice relating social class with black population and young gays from the classes C, D and E. One campaign (14.3%) touched the question of diagnosis and its target audience was women pertaining to classes C, D and E; thus this campaign had two categories in its content, gender and social class.

Fourteen (25.46%) campaigns approached the aspects of generation: in two of them the target was the population over five years old and the remaining 12 campaigns had contents directed to the young population. In all campaigns oriented to the young audience there was association of contents relating social class and/or gender.

DISCUSSION

When starting a discussion about media campaigns publicized by Health Ministry, it is necessary to insert into a context the beginning of HIV/AIDS epidemic in Brazil and around the world. The epidemic was first characterized in early 1980's and then it was interpreted and presented to the population in an erroneous way, since the phenomenon was exhibited as restricted to a subgroup of male homosexuals who had sex relationship with more than one partner⁽¹¹⁾.

Furtherly, as long as the first cases were being identified, epidemiologists characterized the risk groups, so called '4 Hs', constituted by the populations of male homosexuals (H1), Haitians (H2), hemophilic patients (H3) and heroin addicted (H4)⁽¹¹⁾. In such a scenario, along with the lack of proposals for official campaigns to elucidate AIDS to all the population, a number of communication media take over the role of information disseminators, but promoting the association of the disease with a "unruly way of living", "alternative lifestyles" and "male homosexuality"⁽¹²⁾.

While erroneous informations were being disseminated by media, the silence of public authorities provoked the appearance of pressures from civil society groups and health professionals claiming for a national campaign, via official organisms, in order to bring out scientific information to prevent AIDS in the population. During a period, there was a strong resistance to publicize campaigns because authorities thought AIDS as an issue to be dealt cautiously. However, in 1986, the leadership of the alleged risk groups and representatives of official government organisms made a reunion intending to implement the first wide campaign about AIDS. Employing the slogan "AIDS: you must know how to avoid it", the campaign presented information on HIV transmissibility, the use of condoms and disposable syringes and needles. This campaign was made public only one year after its conception because the government then had fears of approaching the theme and provoke some kind of popular reaction, which essentially would come from religious intolerant groups and conservative segments of society⁽¹³⁾.

The site of the Chronicle Conditions and STIs Department at the Health Ministry⁽⁹⁾ does not show references on this first national campaign; it shows only campaigns from 1998 on. However, when analyzing the campaigns through the prism of the categories gender, generation, social class and race/ethnicity, it becomes evident that stigma and prejudice generated in the beginning of the epidemic, associated with historical processes of homophobia, social rejection against illicit drugs and female prostitution, produce reflections until current days.

The category gender was approached by a very incipient way in the contents of the campaigns herein analyzed. Questions concerning female sex workers became evident since the first epidemiological data on AIDS, when publications regarding that risk group demonstrated stigma and prejudice against Haitian female population. The incongruous aspects between epidemiological data and publications of campaigns in Brazil is perceivable when it can be verified that the first campaign specifically approaching female sex workers occurred only in 2002⁽¹⁴⁾.

It is also to be highlighted that the campaigns launched by public organisms directed to the feminine population appear in the media scenario in 1999, but that happens only after the increase of AIDS cases among women who were not sex workers, what is called the feminization of the epidemic⁽¹⁴⁻¹⁵⁾.

Historically there was only one campaign that cited as target audience the transgender woman, by the year of 2016. In a meta-analysis study, it was demonstrated that prevalence among transgender women, in 15 countries, is 48.8 times higher when compared to prevalence among people in reproductive age⁽¹⁶⁻¹⁷⁾. The population of transgender women is marked by stigmatization, which leads to discrimination, social exclusion and violence. Taking this into account, it must be considered the existence of a ripple effect of social inequality oppressing the life of such a population that shows low school education, unemployment, insertion into the sexual market and drug addiction. It is to be considered that the way transgender women's HIV/AIDS is handled by mediatic campaigns, with shy contents, is one important factor to spread HIV/AIDS in such a group of the population⁽¹⁷⁾.

There is an understanding that the start of HIV infection, in the beginning of the 80's, has occurred concomitantly with the flourishing of political and social conquests by the gay/lesbian community; along with this phenomenon also appeared a moralist discourse inducing deep social discrimination, blaming male homosexuals for the grievance dissemination⁽¹⁸⁾. From 1980 to 2001, in Brazil, the number of notified AIDS cases that had homosexual relations as their cause was 40,199 (26.4%); only in 2018 this indicator was 1,615 (38%)⁽³⁾. These very data were demonstrating that campaign contents about HIV/AIDS should be directed towards the gay community. However, in the first years of the campaigns, it was very clear that their focus was the heterosexual population. In 2001, when the number of HIV/AIDS infected individuals was significant, then the campaign showed as its theme the male sexual diversity, avoiding terms like homosexual or even gay; only five years later the campaign started to use the expression MSM.

The term MSM, men who have sex with men, appeared in the 1990's, as an initiative of the Atlanta CDC (Center for Disease Control), expressing the need to direct campaign contents towards the grievance vulnerable population, and so reducing stigma and prejudice generated against male homosexuals by the beginning of the epidemic. The scientific literature started to use the abbreviation MSM (Men who have Sex with Men) in 1997, contributing to throw light on a segment of the population that, for a long time, was in a secondary place in the context of the public policies against HIV/AIDS⁽¹⁹⁾. In the results of that study, analysis on the Brazilian official campaigns, one can notice that the employment of the abbreviation MSM started four years after its appearance in scientific publications.

Last ten years data reporting AIDS cases in Brazil, considering race/selfdeclared skin color, it turned into evidence a 20.9% drop among white people, but, on the other side, a 33.5% raise among brown-skinned people, and a 23.5% increase among black people (considering the sum of black and brown people, according to the Health Ministry). Likewise, looking at the notified data about deaths due to AIDS, in Brazil, 2017, according to race/selfdeclared skin color, it can be seen that 60.3% of the cases involve black population, 39.2% involve white people, 0.2% involve Asian people, and 0.2% involve indigenous population⁽³⁾.

Thus, it was expected the official campaigns to show contents related to race issues, but, contradictorily, it became perceptible the existence of unequalities in the direction of the contents employed by public policies to confront HIV/AIDS, since the campaigns have privileged approaches directed towards the white population⁽²⁰⁾.

As corroboration of such analysis, a research has examined pictures of official campaigns according to the the categories of gender and race and it noticed that, until 2011, there were two campaigns which used the image of a black woman, in 2000 and furtherly, due to the mobilization of black activists, in 2005⁽²⁰⁾.

Consulting epidemiological bulletinS, it is perceivable that the grievance HIV mostly affects the population of young adults, since 73.1% of HIV cases, in the period 2000-June 2018 are constituted by people in the age range from 20 to 34-year-old⁽³⁾. So, the presented epidemiological datum justifies the number of campaigns intended to influence the young population in the struggle against HIV.

With reference to social class, there are difficulties to analyze such category using officila data about the grievance, since the notification/investigition form about HIV/AIDS does not present specific data on social class, such as income neither data regarding social position of the subject⁽²¹⁾. However, according to UNAIDS (United Nations ProgramME on HIV/AIDS), there is relationship between HIV prevalence and the poorest classes, because poverty is associated with vulnerability, and, likewise, as stated by the international institution, people infected by HIV/AIDS are vulnerable to poverty⁽²²⁾.

A research⁽²³⁾ demonstrates that individuals older than 45 years and with low school education have little knowledge about the grievance HIV/AIDS, being induced to erroneous ways of prevention. This aspect reinforces the need of effective campaigns to reach the poorest social classes and also the population that is not part of the youngest age range group.

The limits of this study are related to the fact that it is restricted to the public data banks for its analysis, since unregistered campaigns in the search site were left aside. Anyway, it can be considered that the utilization of sites that publish collective interest contents is potential to understand the discourses used to confront health phenomena.

CONCLUSION

Considering the contents of official campaigns along the delimited period, it is possible to affirm that they have not publicized informations to the main groups in the categories of gender, social class, race/ethnicity and generation identified by epidemiological data of the phenomenon. Many times, official organs promote the inclusion of necessary contents to inform the population after claims from social movements and activists, but these occurrences usually happen in a delayed way and when the grievance are already moving to attack other vulnerable groups. Thus, it is perceivable that the phenomenon has its own dynamics which cannot be reverted by campaigns informations and such reality was already portrayed in epidemiological data that demonstrate that dynamics in the population.

Therefore, it is necessary to adopt contents in the campaigns in order to continuously focus the phenomenon HIV/AIDS in the communities of homosexuals, men, women, black people, indigenous people, young and old individuals and the rest of population, according to their ways of living. Those approaches should not be a secondary level of the campaigns by means of publicizing pictures, instead there must be used a strategic scientific content, discussing the informations with each group about prevention measures against HIV, as well as living and living together, free of stigma and prejudice, in the face of the phenomenon HIV/AIDS.

This article contributes to a critical reflection for professionals and managers of the Health area, who have the responsibility to deal with the phenomenon by means of proposals and the materialization of public policies for the protection of PLWHA (People Living With HIV/AIDS).

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Associate editor: Susanne Elero Betioli

Corresponding author:

Daiane Siqueira de Luccas

Universidade Federal do Paraná – Curitiba, PR, Brasil

E-mail: enfdailuccas@gmail.com

Role of Authors:

Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work - FML, GSCA

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