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The semiotics of the anti-COVID-19 mask*

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ABSTRACT

The pandemic spreading of the COVID-19 virus has led to the global need to introduce, often by law, the medical face mask, which can undoubtedly be considered as “the object of 2020.” In a few months, most human faces around the world in the public space, but also often in the private space, have been covered with various kinds of protective masks. Very soon, these objects have become the centre of several discursive productions, going from medical reports to media coverage, from artistic representations to ironic memes. The medical face mask was not totally new in the west, where it was already present in special circumstances, like dentists' studios or emergency rooms, and was quite familiar in the east, especially in Japan, China, and Korea. Yet such massive introduction changed the meaning of the medical face mask in every context. Old habits were reconfigured or clashed with the new ones, giving rise to a novel syntax, semantics, and pragmatics of the human face in conjunction with this device and in the context of the global pandemic. The present paper offers an introduction to a semiotic mapping of such radical cultural change and its likely consequences.

KEYWORDS

COVID-19 pandemic; medical mask; cultural semiotics; social attitudes

Introduction: the meaning of the medical face mask in the west before the pandemic

Protective masks were not absent in the western semiosphere before the outbreak of the pandemic. Commonly, individuals would distractedly make the experience of them in specific circumstances. Typically, protective medical masks were worn by dentists and dental nurses, as well as by surgeons and their staff. As a consequence, protective masks were associated with the idea of medical treatment, but mostly in situations of traumatic medical intervention on and in the body. A patient would not normally see any medical masks, on the contrary, during a routine appointment with the family physician. Neither the family doctor nor the nurses would wear a protective face mask unless, again, in case of traumatic interventions on the body. It would be incorrect, therefore, to say that medical masks at the outbreak of the 2020 pandemic were associated with a

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semantic connotation of the medicalization of the face; it would be more precise to say that the connotation was one of traumatic medicalization, of a situation in which contact between the doctor and the patient could entail a risk and a danger for both.

Protective masks were also worn in other non-medical contexts, by workers in polluted environments such as miners and construction workers, yet, again, they were associated to specific professions, in specific settings, and circumstantiated conditions.

When the pandemic broke out, common people in Italy as well as in most European and western countries were not used either to wear masks and to see masks worn by other people. In this initial situation, the fact of someone wearing a mask in public, for instance, in a plane or in public transport, would inevitably attract attention and, systematically, puzzlement mixed with preoccupation. "Why is this person wearing a mask?" was the implicit question that everybody would commonly wonder about. The implicit answer, in many cases, would be: "because this person is sick, contagious, and, therefore, potentially dangerous." As the pandemic burst out, therefore, the medical mask was commonly interpreted as an either intentional or unintentional, implicit or explicit sign of potential contagion, for the environment, by the person wearing it, and not, vice versa, as a sign of potential contagion by the environment for the person wearing the mask. Nervously and rapidly distancing oneself from the individual with the mask on was, as a consequence, the most typical reaction, almost a reflex.

When the pandemic flared up, and it became increasingly evident that the virus was transmitted through the human respiratory system, and China was already heavily hit, and people in most far east Asian countries were already making a massive use of medical masks, and images and videos of these masked Chinese and Asian population, including their political leaders, were already circulating in the global sphere of media, still, despite all these warning signs, the semantic connotation of masks in the western world would remain one of exceptional medicalization, even for people involved in global networks and intercontinental transport. The western "culture of the mask," the deep-seated aversion to this object and its range of semantic meanings and pragmatic implications, would soon cost thousands of lives: when it was already too late, western countries and their pharmacies realized that they did not have enough masks, that an insufficient number of them was nationally produced, that people had started to wear them too late and only out of their personal initiative, that most would not know how to distinguish between suitable and unsuitable types of masks, and that they would not know how to correctly use them. Even western governments and health organizations would instruct citizens that masks had to be worn only when displaying the likely symptoms of contagion, and not in order to protect oneself from it. This recommendation, however, as it was found out later and too late, was merely due to the fact that western countries did not have enough masks for everyone, not even for doctors in emergency rooms; on the one hand, these countries were trying to reserve the available masks for the most potentially risky environments, like hospitals and clinics; on the other hand, though, they were also contributing, thus, to the rapid spreading of the virus among unprotected people, including undersupplied doctors and nurses. A comparison with the campaign for the usage of condoms at the outbreak of AIDS is revealing: it was as though

western governments had said, in that circumstance: please wear condoms when having sex, but only if you are displaying the likely symptoms of AIDS.

Towards a new semiotics of the medical face mask

Various elements must be taken into consideration while developing a cultural semiotics of the medical mask. First of all, there is the object itself, a protective device that comes in several shapes, colours, and topological arrangements with the face, some of which being already programmed in the affordances of the object itself. The mask, in its variety of medical mask, is not normally worn for purposes of signification and communication. From this point of view, it is different, for instance, from a hat, or from a pair of sunglasses. Both can, indeed, be put on with the primary purpose of protecting the person wearing them from external and, possibly, harmful agents, like cold wind or strong sunlight. Yet, in both these latter cases, an established cultural tradition has already turned such functional objects into semiotic and communicative devices, which can be even dissociated from their practical protective function and displayed and/or received as purely aesthetic devices. As a consequence, they can give rise to a process of diversification and customization that is typical of ornamental items, a process through which they can contribute to compose the personal style of those who wear them. They can also, as a result, become items in the circuit of fashion, and acquire different values depending on their shape, colour, and artistic genealogy.

The same process can take place also for medical masks, although more as a represented item than as a properly worn one. That is the case because the denotation of the medical mask as a functional, protective, and exceptional object is much stronger than that of hats or sunglasses. In the case of the protective mask, it is difficult not to see it as a medical device, especially in a cultural area, like the western one, where its connotation is inseparable from an idea of emergency, risk, and danger. The medical mask is better comparable to other medical objects like crutches, for instance: no matter to what extent they are re-appropriated in aesthetic and personal terms, the signification that stems from their medical function remains predominant.

As semioticians have underlined from Barthes and Eco on, however, the function itself of an object is also a content of its signification. As I go out of my house with a medical mask on, this mask primarily signifies its function, yet this function is not so clear as that of an umbrella, for two reasons. First, it is evident who will be protected by an umbrella from what. The potentially negative agent here is the rain or, alternatively, the sun in far east Asian societies, and the potential victim to protect here is clearly the one who is carrying the umbrella. But who, or what, are masks protecting those wearing them from? The negative agent here is twice invisible, first, because it is not possible to know who is already infected in the public space, and often even those who are already infected ignore it, and, second, because it is not clear where the virus is, whether only in droplets coming from other people's breathing, sneezing, coughing, and talking, or also on surfaces, objects, and even in the air. Scientific information about where the virus might be in the public sphere is not always consistent, research on the topic is still ongoing, tons of disinformation and fake news circulate, and it is not always easy, for common citizens, to make up their minds. Most of them, therefore, go out wearing a mask thinking

that the virus could potentially be everywhere, and that everyone come across in the street might actually be infected and a source of possible contagion.

There is also a second reason for the unclear functional message that a medical mask conveys in the public space. As I wear it out of the house, its meaning will be threefold, like the meaning of every communicative device: (1) what I mean by wearing a mask; (2) what is meant to people when I wear a mask; (3) what is meant by the mask itself. The first type of meaning, or *intentio actoris*, might most often coincide with the functional content of the mask itself, although always with the peculiarities described in the first point: I wear a mask because I want to protect myself from a potentially dangerous environment, and I do not want to communicate anything special to anyone. That might not be the case, however, when I am actually in the situation of having to communicate something through the mask. If I am a cook working at a restaurant, for instance, I might wear a medical mask in a purely functional way, but I shall also be likely aware of the fact that, through wearing it, I likely signify something else too. This something else depends on how an interpretive community has already been taking shape around the cook; if the mask is still an exotic object, then wearing it might even send out a counterproductive message: the cook is maybe sick, he or she does not want to contaminate food; on the contrary, if the presence of medical masks in the social space has reached critical mass, then the likely message sent out by the cook wearing the mask will be exactly opposite: I am a responsible worker, I am likely healthy but, in any circumstance, I know that I might be not and, in such case, it is safer for everyone that I wear a mask, also in order to protect myself from potential contagion from co-workers, customers, manipulated objects, and the environment.

As regards point (2), that is, the *intentio lectoris* of the mask, i.e. what the mask signifies to people who see it worn by someone else, including themselves in the mirror, much depends on the "context," but the context ultimately consists in the "common sense" that is generated by the constitution of a "community of interpreters." In this case too, at the beginning of a pandemic, when most people are still unaware of the extreme contagiousness of a virus, the mask will give rise to emotional reactions of puzzlement, pre-occupation, fear or, conversely, to irony and mocking. On the contrary, as the pandemic spreads, and an increasingly number of masks populate the social and visual public space, then the interpretive community and its common sense change too, altering the context in which the mask produces its communicative effect. The reaction will not be anymore: "this person is maybe sick"; or "this person is hypochondriac"; but, rather, "this person is cautious, he or she wears a mask exactly like me." With the proceeding of the pandemic and the establishment of new common semiotic habits, the interpretive community might actually be completely reversed; a person not wearing a mask might eventually end up being frowned upon by a community that considers her or him as a potential danger.

That is why, looking forward, exactly as it has been difficult to get western communities accustomed to the generalized wearing of medical masks, it might also turn out as or even more difficult, in the future, that people get used not to wear their masks in public. Semiotic habits begotten by the pandemic might actually linger in the public space well after the pandemic is gone. People might, for instance, at least in the near future, not taking planes without protective medical masks any longer, giving rise to a masked public

sphere similar to that which would characterize those of far east Asian countries even before the outbreak of the pandemic.

The situation is complicated by the fact that the uncertainty of the pragmatics of contagiousness characterizes both poles of the communicative axis: on the one hand, one is uncertain about the healthiness and non-contagiousness of other individuals, including close relatives and friends; on the other hand, one is also intrinsically uncertain about one's healthiness and non-contagiousness, the only way to be totally sure about it being to have oneself medically tested or undergoing a long quarantine. The presence of the virus in a society, and the inexistence of vaccinations, brings about a game theory situation in which the best choice will always be, for everyone, that of wearing a mask.

But that leads to the discussion of the third type of meaning associated with this object, that is, its *intentio operis*. No matter how difficult it might be to determine the intrinsic meaning of an artefact within a community of users and interpreters, in terms of both functional signification and intertwined re-semanticizations, the range of such core semantic contents cannot be conceived as infinitely stretchable; in other words, it would be unreasonable to think that, in a community of meaning, the medical mask means everything and nothing. Such range, indeed, is inherently limited by, first, the form of the mask itself, which is in close connection with its function. Curious ethnographers might realize, for instance, when queuing outside an Italian supermarket during the epidemics, that protective masks worn by prospective customers come in various forms and shapes, even including objects that, while clearly not being masks, are worn as such, so as to approximately replace their functions; when the Northern Italian region of Lombardy introduced the legal obligation for everyone to wear a mask when in public, but it was clear that not everybody would have been able to obtain a medical mask of whatsoever kind, the Region's Government itself prescribed that masks could have been replaced, in exceptional cases, by scarves worn so as to cover one's mouth and nose. Ironic representations of this dramatic injunction multiplied, of course.

Ethnographers in line in front of a supermarket during the epidemic would also realize, however, that masks do not vary only in type, shape, and colour, including, as it was said earlier, non-masks worn as masks, but that they vary also as regards the different ways in which they are worn: some people nervously check every second that their mouths and noses are perfectly covered; some others tuck their masks underneath the rim of their eye-glasses so as to better cover the face and avoid that the lenses get foggy; some others yet take the mask temporarily off the face, letting it hang from one ear or from both ears, because they are too hot, and they judge that they are sufficiently distant from other customers, or because they need to be face-recognized by their own phones, or for other reasons; some people even push their masks up on their foreheads, and there are also those geniuses, heavily mocked in social networks, who partially remove their masks so as to put the temples of their glasses in their mouths.

But that is nothing new: people do all sorts of strange things with their glasses for instance, or, to take an example that is even closer to the present case-study, one should think of the multiple ways in which the legal obligation for women to wear a scarf on their head, currently enforced in Iran, is variously re-semanticized by them, depending on as many factors as age, social and economic class, religious and politic believes, the specific social occasion with its spatial and temporal coordinates, as well

as individual temperament, turning the obligatory scarf into one more fashion item with which women compose, intentionally or distractedly, their peculiar dressing style. The range of possible re-semantizations of the medical mask is maybe not as large as that of the possible re-arrangements of the obligatory Islamic veil, and it will never be: protecting one's lungs from the virus and protecting one's female hair from the male gaze are quite different semiotic operations; yet, it is certainly only a matter of time before the medical mask ceases to be, in the west too, a monolithic object and starts differentiating even further into a myriads of personal usages.

Nevertheless, it would be bad semiotics to think that, given this turning of the medical mask into an everyday object with multiple uses, the range of its meanings disintegrates into a deconstructive realm with no internal grammar, into a kaleidoscope of personal usages with no common features. Affirming this ideological nonsense would be tantamount to saying that, since there are many metaphorical usages of the word "leg," then the common meaning of such word cannot be grasped. As Umberto Eco would tirelessly repeat, on the opposite, metaphorical usages of a word can exist exactly insofar as such metaphorical force can be measured as deviation from the semantic bottom line that defines the common meaning of the word itself in a language and its community of speakers, a bottom line that is the reference in relation to which the semantic deviation of the metaphor is appraised and appreciated, a literary meaning that is, moreover, transmogrified into lexical definitions in dictionaries.

In the same way, although many usages of the medical mask exist, some of which being frankly quite bizarre, a semantic core of this artefact can still be grasped, no matter the large extent to which it is re-semantized in the public sphere. Such core is defined, first of all, by the affordances of the mask; a common surgical mask must be worn around one's ears and over one's mouth and nose, and every alternative hanging and wearing can have only limited diffusion for it would affect the efficacy of the mask itself. Second, the common semantic core is defined by the mask's basic function: although in Japan young (predominantly) female individuals might use the mask to protect their shyness from alien gazes in the public space, that is doomed to remain an aesthetic, scopic connotation on top of the basic denotation of the mask, which remains in the medical sphere. No matter what, indeed, the diffusion of protective masks in the public space will always mean that something is wrong with the quality of the air, and that breathing with no protection is potentially harmful, either because of the pollution or because of the presence of a virus in the air amidst people.

In other words, the object "medical mask" is so deeply connected with the dysphoric situation of the epidemic that it is highly unlikely that it will turn into a habit or a fashion with no negative meaning attached to it. In a certain sense, a similar phenomenon has affected the diffusion of condoms: likely, more and more male individuals in the world wear them before having sex in order to avoid causing undesired pregnancies or the transmission of STDs; in any case, despite the efforts of global brands to turn condoms into ludic objects with different colours and shapes, wearing them will always signify, for the majority of people, a procedure of immunity, and the possibility that something undesirable, from an unplanned pregnancy to a lethal disease, results from having sex with a partner.

That does not imply that the meaning of masks is not subject to semantic fluctuations. The comparison between the current Japanese and the present-day communicative reception of medical masks in the West demonstrates that this is not the case. On the

contrary, it can be hypothesized that the intrinsic meaning of masks, albeit constituted by a semantic core of affordances and a basic medical denotation, fluctuates in a community of interpreters depending on the number of people who adopt this medical device. That is already evolving in several European countries.

Conclusions: the impossibility of a habit

The face is a fundamental interface of human interaction. Interpersonal communication has always been based on seeing the other's face and on showing one's face to the other. Fluctuations about this rule might have taken place in space and time, with the re-semantization of medical masks in far east Asia, with the introduction of the Islamic veil, also very problematic in the west, with the fashion of large sunglasses and even full masks in trap music. All these fluctuations, however, could not make sense without reference to the fact that, in normal circumstances, people interact face to face, seeing each other's visages. These fluctuations do not rule out, either, that covering one's mouth with a mask, as well as seeing other people's mouths covered by masks, dramatically modify the gestalt of visages in face-to-face interaction. We cannot see anymore the labial of conversations; the facial origin of verbal language and smile is occulted to us. May we humans recover our faces soon.

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