

The Quebrada Women's Collective: community-driven care practices as strategies for resisting interconnected systems of oppression

Coletiva Mulheres da Quebrada: práticas de cuidados coletivos como estratégias de resistência a estruturas interligadas de opressão

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Abstract

This article is grounded in a doctoral dissertation that emerged from ethnographic fieldwork conducted with the Quebrada Women's Collective, a movement located in the Aglomerado da Serra, in Belo Horizonte, Minas Gerais state, Brazil. It reflects on how these women, living amid interconnected structures of power and oppression, mobilize forms of resistance through a self-defined and intersectional approach based on practices of collective care, rooted in ancestral knowledge. This movement challenges the unequal power dynamics that transfer the bulk of the exploitation and overburden of care work to Black and peripheral women, contrasting with the lack of care experienced by these women themselves. The collective care practices mobilized by this movement subvert dualistic and dichotomous logics, alleviating the (over)burden and calling attention to the potential for democratizing and politicizing care practices, starting from localized, embodied and racialized engagements.

Keywords: collective care; Black women; intersectionality; feminism; territory; peripheries.

Resumo

Este artigo é construído com base em uma tese de doutorado, fruto de etnografia realizada junto à Coletiva Mulheres da Quebrada, um movimento de mulheres localizado no Aglomerado da Serra, em Belo Horizonte/MG. Pretende trazer reflexões sobre como essas mulheres, diante de estruturas interligadas de poder e opressão, agenciam resistências ancoradas em uma perspectiva autodefinida e interseccional por meio de práticas de cuidados coletivos com raízes em saberes ancestrais. Esse movimento questiona as dinâmicas desiguais de poder que relegam às mulheres negras e periféricas a maior parte da exploração e sobrecarga pelo trabalho de cuidar, contrastando com a falta de cuidados vivenciada por essas mulheres. As práticas de cuidados coletivos mobilizadas por esse movimento subvertem lógicas dualistas e dicotômicas, aliviam a (sobre)carga por meio da coletivização dos cuidados e apontam para a potencialidade da democratização e politicização das práticas de cuidado, a partir de práticas localizadas, corporificadas, racializadas.

Keywords: cuidados coletivos; mulheres negras; interseccionalidade; feminismo; território; periferias.

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Introduction

In this article, I present an excerpt from an ethnographic study conducted between October 2020 and May 2024 with the Quebrada Women's Collective (*Coletiva Mulheres da Quebrada*),² a movement formed predominantly by Black and peripheral women³ living in one of the largest complexes of *vilas*⁴ and *favelas* in Latin America, the Aglomerado da Serra, located in the south-central region of Belo Horizonte, Minas Gerais. Bordering upper-middle and high-income neighbourhoods, this locality is a zone of intense social relations and the formation of cultural identities, singular family configurations and "configurations of care" (Fazzioni, 2021), all shaped by a dialectical interplay of forms of oppression and resistance, modalities of exclusion and a range of political, social and identity affirmations. Here people organize and connect with each other territorially in diverse ways through everyday relationships of neighbourliness and kinship, typically involving extended families, shared caregiving, the leadership of female heads of family and the presence of *mães de criação*, "othermothers" (Collins, 2019; Fonseca, 2002), among other configurations. The Quebrada Women's Collective was founded in this *quebrada*⁵ from the desires and encounter of Sandra Sawilza, Simone Sigale and Scheylla Bacellar – black women, artists and community leaders who were born and lived most of their lives there. These three leaders, who share similar life trajectories and deep *incômodos* (frustrations)⁶ with the interconnected structures of oppression and inequality involved in the social production of care, decided to combine forces with a simple yet ambitious goal: *to sit down, talk and try to do something together*.

The ethnography, the basis of my doctoral thesis, sought to understand this movement of peripheral women through their "strategies, methodologies and political and pedagogical practices of collective care" (Pereira, 2024, p. 59) and their effects on the life trajectories of the women involved. These collective care practices are built from a territorialized and self-defined perspective (Collins, 2016, 2019) and work towards the emancipation of Black and peripheral women, as well as the transformation of intersecting structures of power and oppression – particularly those shaped by race, class, gender, and territoriality. The movement questions and challenges the unequal power dynamics that establish and naturalize dualistic relational positionalities – racialized and gendered – between who *should* provide care and who *can* receive care, producing new political, conceptual and epistemological frameworks based on these women's situated perspectives. The Collective's approach is premised on questioning the structures that exploit black and peripheral women, overburdened by the expectation of *caring for everyone all the time* – their families, their communities and, beyond the home, in types of work rendered precarious and invisible, as well as the situation of Black and peripheral women without the social conditions either to care for

² Here I sometimes refer to the entity simply as the "Collective."

³ "Peripheral" refers to women living in urban peripheries – areas often marked by socio-economic exclusion and state neglect – and experiencing structural marginalization; the term thus highlights the intersection of race, gender, class and territory.

⁴ In this ethnographic context, "vila" denotes a small neighbourhood, often within or bordering an urban periphery or favela.

⁵ Literally meaning "broken" or "break," *quebrada* originally referred to a natural ravine or gully. In Brazilian urban vernacular, it has come to designate peripheral or marginalized neighbourhoods. The term has also been appropriated as a term of local identification, used by residents to affirm community resilience.

⁶ I have opted to use italics for excerpts from interviews and public statements, and for words, expressions and terms used by my research interlocutors.

themselves or to receive care. The Collective's leaders thus mobilize practices of collective care, adopting *care* and *affect* as central axes in their narratives. Activities focused on mental health care are especially notable, such as networks of free and ongoing psychological support; women-only circle gatherings; safe spaces for welcoming, speaking and listening; and practices that engage bodily awareness and movement as paths toward self-knowledge and self-care – through dance and theatre, for example. These practices seek to subvert some of the unequal power dynamics at play, taking inspiration from the ancestral knowledge of other women – aunts, mothers and grandmothers – who, even if not reached by the agendas of hegemonic feminism, have always organized collectively and mobilized care on behalf of others, as survival strategies amid processes of vulnerability and subjugation.

1. My encounter with the Collective and the research methodology

My ethnographic research began in 2020, at the height of the Covid-19 pandemic, which would claim hundreds of thousands of lives in Brazil and intensify historical and structural forms of violence and social inequality. This was also a period of social distancing rules and a widespread reliance on digital media for sharing information and making contacts. I first encountered the Collective via a livestream⁷ in which Scheylla Bacellar, one of its founders, spoke about an initiative that she and other women were fronting in the Aglomerado da Serra. Scheylla mentioned the rising levels of physical and mental illness among women, food insecurity, unemployment and domestic violence. At that time, the Collective was still taking shape as a movement, implementing actions such as the distribution of food parcels and the establishment of a network of free psychological support for women in the territory. In the process of designing my doctoral research project, shortly afterwards I reached out to the Collective with a proposal for both research and active collaboration with the movement.

In our initial conversations, they introduced me to the team and the activities the group had been pursuing. I soon began to take part in meetings and in virtual groups on messaging apps – some restricted to the coordinating team, others broader, including hundreds of women from the territory. Gradually, I became more familiarized with the locality and learnt how to deal with something that ran through my entire research process: the place of difference. Racial difference, as I am read socially as a white woman; class difference, as, although I was born into a small low-income rural community in the interior of Minas Gerais, I now occupy a social position considered middle class, marked primarily by the academic education I was able to access through public higher education policies in Brazil; and territorial difference, since until then I had experienced little contact with favela territories like the Aglomerado da Serra, living in a middle-class neighbourhood since my arrival in Belo Horizonte ten years previously. Over the course of the ethnography, this place of difference generated certain tensions, making visible an inequality in privileges and forms of oppression, but also opened possibilities for encounter, the forging of alliances (Lorde, 2015) and the building of bridges (Anzaldúa, 2021).

⁷ Livestreams, which became commonplace during the Covid-19 pandemic, are a kind of virtual event that can be streamed via social media or other platforms, where one or more people speak on a particular topic or present artistic work, for example. They enable remote access to a range of content for people in different locations.

The Quebrada Women's Collective has a motto – one that is continually reaffirmed among all the women collaborating in building the movement: “*We don't need to be friends, but we do need to be partners.*” We also came to recognize, together, that we do not need to be exactly the same in order to be partners. I was welcomed by the Collective's leadership both as a researcher and as a partner, and this dual position accompanied me throughout my ethnography. In the thesis, I utilized the notion of a “research-partnership” as an attempt to give meaning to the establishment of a research relationship committed not only to the production of scientific knowledge, but also to a politically and affectively engaged involvement with the women's movement with which the research is constructed. The roles of researcher and collaborator, as part of the movement, are constantly intertwined and blurred. The ethnography with the women of the Collective unfolds through a process of everyday immersion, collaboration in a wide range of tasks and activities performed by the movement, and mutual affect, all of which shaped the research process as a whole.

The ethnography can be divided into two phases. Between 2020 and 2021, the research took place mostly in virtual form, with a few in-person trips to the field. The main activities during this phase involved accompanying and producing minutes for online meetings of the coordinating team, participating in virtual groups via messaging apps, supporting the writing of project proposals and other texts, and taking part in actions in the territory, such as putting up posters and distributing food parcels. From 2022 to 2024, the research switched to observation, participation, documentation and collaboration in predominantly face-to-face meetings, including conversation circles, dance workshops, political demonstrations in the streets of the city, parties and celebrations, a monthly bazaar, and activities involving the cleaning and organization of the movement's physical space. In the final phase of the research, between January and April 2024, eight⁸ individual, semi-structured interviews were recorded and transcribed with the express consent of the interlocutors, at their own request, for their identities and real names to be made public. The interviews were conducted with founding leaders, volunteer psychologists and women who had received support through the Collective's actions. These dialogues focused on the life trajectories of these women in relation to the collective care practices developed by the movement.

As we shall see below, the ethnography with the Quebrada Women's Collective, focused on collective care practices viewed from an intersectional perspective, contributes to the politicization, territorialization and racialization of the debate on care, expanding the very concept of care from the viewpoint of black and peripheral women, self-organized within a movement.

2. Care and intersectionality

Fisher and Tronto (1997, cited in Tronto, 2007, p. 287) define care, from a human perspective, as “a species activity that includes everything that we do to maintain, to continue, and to repair our ‘world’ so that we can live in it as well as possible.” This classic, broad and elastic definition is philosophically and socially grounded in a historical context marked by the expansion of feminist critical theories – predominantly white

⁸ This article focuses on interviews held with the three founding leaders of the Quebrada Women's Collective. For a more in-depth account of the life trajectories of the interlocutors featured in this ethnography, see Pereira (2024).

and centred in the Global North – surrounding the concept of “care” and its elevation as a scientific category. It serves as an analytical starting point for reflecting on the ethical and political dimensions of care, and on how its developments are expressed in theories of an “ethics of care” capable of breaking from dichotomies associated with gendered inequalities and oppressions, such as public/private and productive/reproductive labour. Tronto (2007) argues that the ethics of care should be brought into the political sphere, guiding institutional actions and contributing to the democratization and politicization of both the concept of care and its practice. This idea denotes an understanding of care as a social right – one that should be valued and guaranteed by public institutions and assumed as a shared responsibility by society as a whole.

The open and polysemic nature of the classical definition of care – which seems to encompass a myriad of aspects and possibilities for sustaining, maintaining and repairing life and our world – possesses, Puig de la Bellacasa et al. (2023) argue, a “speculative openness” that is particularly suited to coping with an unstable world, laden with ambiguities, contradictions, uncertainties and tensions. This speculative openness should allow for the necessary complexification, racialization and territorialisation of the discussion, committed to the inseparability of the notion of care and its practices, realized by historically situated subjects, socially localized and immersed in power relations.

The collective care practices implemented by the Quebrada Women's Collective highlight the ambivalent nature of providing care: such work can exploit and overburden, yet, when collectivised, it can alleviate the load. By challenging the unequal dynamics that force Black and peripheral women to assume the bulk of care work for their families and communities and also to engage in precarious forms of remunerated work, while they themselves experience an absence of care and lack the conditions necessary for self-care – the Collective calls attention to an urgent need to politicize and democratize care from a critical perspective rooted in the experiences of Black peripheral women. In this sense, intersectionality (Akotirene, 2019; Collins, 2019; Crenshaw, 2002) emerges as a key theoretical-methodological tool, allowing an analysis of social structures in all their interrelated dimensions, understanding intersection as something that shapes particular experiences in specific contexts, not only producing identities but also situating epistemological perspectives (Collins, 2019). An intersectional approach does not rank forms of oppression: rather it seeks to provide theoretical and methodological instruments to address the structural – and therefore analytical – inseparability of racism, capitalism and cisheteropatriarchy. The politicization of the debate surrounding care from the viewpoint of Black women – as the economic and working base of society – adds complexity to the discussion in a field of knowledge historically led by middle-class white women, highlighting how the dynamics of care activities generate, on one hand, privilege and, on the other, oppression, exploitation and overburdening.

Authors like Lélia Gonzalez (2020) have made fundamental contributions to understanding the social production of care in Brazil through the markers of race, class and gender, calling special attention to the experiences of Black women. Excluded from broader processes that have expanded women's access to the labour market, including the feminization of certain sectors such as the service economy, Black women have instead been left facing the perpetuation of dynamics rooted in the country's slaveholding past, especially in domestic work, characterized by precarity and exhaustion. The

emancipation of white women, including their entry into the workforce, has been sustained by the work performed by Black women, who clean their homes and care for their children, often working long hours and facing the deprivation of time and conditions necessary for their own family life, self-care and care for their own relatives. Lélia Gonzalez foregrounds the fact that feminist movements in Brazil have mostly been composed of white, middle-class women and marked by a systematic “denial of racism.” The relegation of Black women to domestic work, she argues, exposes the issue of exhausting work routines, always directed toward the care of others – whether employers and their families, or their own children and community members. In this dynamic, there is neither time nor the conditions required for self-care, rest or leisure. Fatigue and the exhausting work of Black women as caregivers, domestic workers and *mulheres fortes* – “strong women” who care for everyone and stoically endure every form of labour, pain and suffering – are cruelly naturalized.

The experiences shared by my research interlocutors highlight the fact that the territory in which they live is itself a social marker—one that produces and intensifies vulnerabilities through the denial of access to basic human rights such as adequate housing, leisure, sanitation, transport, employment, education and healthcare. They report that the conditions of health clinics in the vilas of the Aglomerado da Serra are far more precarious than those in other neighbourhoods. Ambulances often refuse to *subir o morro* (enter the favela)⁹ to respond to emergencies, a fact that, not infrequently, may represent the fragile difference between life and death in the territory. There is a lack of specialized doctors; medical complaints are treated in a generic way, with frequent prescriptions of inappropriate medication. Aglomerado’s health clinics lack a sufficient number of psychologists and psychiatrists, who often refuse to stay for long. There are reports that public schools in the *quebrada* are more precarious than those in other neighbourhoods. It is common for residents of the Aglomerado to conceal their real addresses during job interviews so as to increase their chances of being hired. Delivery and transport services and apps routinely exclude streets and alleyways in the favela from their areas of coverage. Similarly, the main internet providers do not cover the territory, and people are thus excluded from the digital world too, making it impossible to perform remote work or study. In the Aglomerado da Serra, it is common to hear people talk about the *absence of the state*. In politically organizing themselves to demand responses and actions from the executive and legislative branches of government regarding the precariousness of public services, the leaders of the Collective say they are *tired of playing the role of the State, always absent in the favela*, present mostly in the violent figure of the military police.¹⁰

The suffering and processes of vulnerability in the lives of the women who make up the Quebrada Women’s Collective, the focus of analysis in this research, are continually produced by the structures and practices of a patriarchal, capitalist, racist and colonial society, marked by the feminization and racialization of poverty and care work. An important strategy adopted by Black women in the struggle against the oppressions faced by them, their families and their communities, as Patricia Hill Collins (2019) points out, involves diverse forms of “activism” based on networks of solidarity – often silent and operating outside formal social and political movements, yet embedded within their

⁹ The phrase literally means “climb the hill,” with *morro* (hill) functioning in this context as a metonym for *favela*, frequently located on higher and more inaccessible areas of Brazil’s urban conglomerates.

¹⁰ In Brazil, the military police are a state-level force responsible for ostensive policing and public order; despite the name, they are distinct from the armed forces but organized in a military structure

communities in the fight for better living conditions. These women, frequently anonymous, are, in the words of Gonzalez (2020, p. 40), the “moral foundation and subsistence of their communities” and families, playing a significant role in both social activism and sociopolitical struggles, and contributing to both women’s liberation and the Black movement.

Setting out from the premise that “Feminist analytical categories *should* be unstable” since “consistent and coherent theories in an unstable and incoherent world are obstacles to both our understanding and our social practices” (Harding, 2019, p. 99), I propose an approach to the categories and identities mobilized in this ethnographic context as *situated* rather than fixed or naturalized. When we speak of the “women” who animate the Quebrada Women’s Collective, who confront the oppressions experienced by “peripheral Black women” in their everyday social dynamics, and who seek to counter these structural logics through a space of care, affection, and solidarity made “by women” and “for women,” we recognize the complexity of social representations of gender and their articulation with other categories that are equally significant. Hence, it is important to note that use of the term “women” in this article stems, first and foremost, from the way my interlocutors themselves deploy this word as a political category — one that marks a socially situated position of gender, articulated with other categories like race, class and territory, and which thus produces a localized experience and perspective (Haraway, 2009). *Peripheral women*, or *women from the quebrada*, describes a social locus that may demarcate distances and differences in relation, for instance, to peripheral men or to middle-class white women. It is the place from which they live, speak, move and seek to induce structural transformations.

Unstable relational categories such as gender, class, race and territory (the *quebrada*), which structure situated experiences and worldviews, can produce political and social identities through which subjects lay claim to places, rights, recognition and transformations. When we contemplate a movement composed of Black and peripheral women, politically articulated in contraposition to a “system of interlocking oppressions” (Collins, 2016, p. 108), we can discern the ways in which categories and identities are mobilized in the desire for feminist and anti-racist social transformations.

The women who make up the Collective are diverse and immersed in mutually imbricated systems marked by sexism, racism, elitism and other interconnected forms of oppression. These are historically and socially constructed systems that shape the production of subjects and their positionalities, but also guide their forms of resistance – through networks of power, labour, affect and care, among others. Just as the category “woman” structures a determined way of existing in the world, when articulated in this context, the *mulheres da quebrada* are aware of the oppressions to which they are subjected and use these categories to advance their collective struggles for self-definition and empowerment (Collins, 2019). My interlocutor-partners taught me that being a Black woman from the favela (the periphery, the *quebrada*) affords them particular experiences – many of them painful and traumatic – but also affords them potentialities and their own distinct and richly-grounded epistemological perspectives (Collins, 2016; Kilomba, 2019). It is on this foundation that the Quebrada Women’s Collective is built.

Below I present a brief history of the process through which this movement became constituted, primarily whose main actors¹¹ are the three leaders mentioned earlier: Sandra Sawilza, Simone Sigale and Scheylla Bacellar, artists and activists from the Aglomerado

¹¹ I use the idea of “actors” in reference to the fact that the three leaders are theatre actors, dancers and performance artists, among other artistic roles.

da Serra, who came together, united by shared *incômodos* (frustrations, discomforts) and a desire to *do something*.

Scheylla Bacellar identifies as a Black cisgender woman and was 36 years old at the time of my research. She is a dancer, cultural agent and art educator, working freelance. She is unmarried but, at the time of the research, was in a relationship with a transgender man. Sandra Sawilza identifies as a Black cisgender woman, 43 years old, and is a theatre actress and public servant. She is married to a cisgender man and has three children and a grandson. Simone Sigale also identifies as a Black cisgender woman, 44 years old, and works as a cultural producer. She is Sandra's sister, married to a cisgender man, and has two children. All three were born, raised and continue to live in the Aglomerado da Serra. They have been artists, activists and community leaders since adolescence. They are daughters and granddaughters of Black women who, in diverse ways over decades, engaged in isolated acts of care and support for women in the territory. In 2018, the three began to work together and gradually brought other women into what is now known as the Quebrada Women's Collective (*Coletiva Mulheres da Quebrada*).

3. "There's a buzz happening there": the Quebrada Women's Collective

3.1. *First act: discomfort*

"It was uncomfortable..." Sandra begins, explaining what she felt from the start of the plays with a *favela theatre* group in which she participated, and which addressed sensitive themes such as domestic violence, mental sickness and the loneliness of Black women. This discomfort, as well as revealing the oppressions experienced by the women with whom they interacted in the community during the performances, was linked to the need to do something about it – beyond a theatre show where the wounds were touched on but not healed.

So, in these dynamic moments where we finish a show, we have a lot of women crying, wanting to talk, wanting to share their stories with us. So what do we do with that? Because you open up something, you trigger something in a lot of women during a show, then you leave, and we were the ones doing that every day. [...] But this bothers me as a person, as a human being... I thought, look at this awareness you're opening, you're triggering something in so many people. To put the plays on, we had several conversation circles, we got to know many different realities, we had the opportunity to build, to heal together. We talked about our pains and then about building something. But not these women, they didn't have that opportunity. We were just opening it in the shows... (Sandra Sawilza, interview on 29 February 2024, my emphasis)

This wish to *do something* emerged alongside an initiative that Scheylla Bacellar had already started in 2018, in the same territory, with a small group of women and the support of psychologist friends. They would hold weekly meetings in their homes with the aim of creating a space where they could speak freely about themselves, their

pain, desires and experiences – a space exclusively for women: neighbours, friends, acquaintances, a small movement they called *Gotas de Cuidado* (Drops of Care).¹²

The experiences of Simone, Sandra and Scheylla as community leaders, artists and cultural reference points in the territory, combined with the discomfort they felt and the demands they received, were significant in transforming the desire to do something into a concrete project and in securing the necessary funding through a public grant from the Belo Horizonte municipal government. This project involved organizing *encontros em roda* (circle gatherings) for women from the Aglomerado da Serra, using various artistic languages and integrating these encounters with discussions led by psychologists and community leaders, focused on the situated experiences of these women.

The 24 *Mulheres da Quebrada* (Quebrada Women) project meetings took place at the Marçola Social Assistance Reference Centre (CRAS Vila Marçola), with around 30 women, on Thursday evenings, each lasting a maximum of two hours. The encounters were structured around “*the mental health, empowerment and self-esteem of Black women, self-care and the acceptance of their own bodies and life trajectories*” (Quebrada Women’s Collective). According to Sandra Sawilza, the idea was to combine the art and the knowledge of these women in happenings mediated by psychologists or led by local women recognized for their artistic and cultural practices. Employing strategies developed by the Collective’s leaders, each session took a specific activity as its motif – such as braiding, dance, samba or percussion workshops, or conversation circles with psychologists – but always provided the women with the space to speak about their pain, suffering, experiences of violence and being overworked, as well as their dreams, possibilities and desires for social transformation. “*Artistic and cultural interventions revealed themselves to be powerful mediums for participants to share their anxieties, dreams, potentialities, suffering, the violence they had experienced, and their life trajectories*” (Quebrada Women’s Collective).

The moment we called the first meeting, the place filled up – women showed up. And many of them said, I’m going to see what’s going on over there. *There’s a buzz happening there. One woman would tell another and with each passing day, the encounters happened more frequently.* (Sandra Sawilza, interview on 29 February 2024, my emphasis)

The *buzz* that was happening there among these women appears to have had a much greater impact than the founders originally anticipated.

These encounters were funded by a public grant. There was a start date and an end date, and the project wrapped up at the end of 2019. We had already been letting the women know that the meetings would be ending, that this could be the last one. And then we held the final encounter. The grant had officially ended at the CRAS, so we went to the Vila Fátima cultural centre and held the last one there. And it was so beautiful! I mean, whoever was up for it came along, and it turned out that lots of different women turned up. And it was just beautiful, everyone cried that day – it was another day of tears, yet another! And it was wonderful. *Except that, on that day, the women were already*

¹² The name *Gotas de Cuidado* (Drops of Care) came from Suely Virgínia, a psychologist, therapist and close friend of the Collective’s founders. It references the drops of floral remedies used in certain therapeutic practices and was intended to evoke the movement Scheylla was initiating with the psychologists through those small gatherings, focused on the mental health care of women.

saying to us, "this can't end, we won't accept it ending." (Sawilza, interview on 29 February 2024, my emphasis)

Sandra explains that when they announced that the project was ending, "these women didn't allow them to step back and urged them to keep the work going." This was the moment when the founders began to realize that the end of the *Mulheres da Quebrada* project was actually the start of something bigger: the consolidation of the Quebrada Women's Collective as a movement. The Covid-19 pandemic would play a crucial role in this turning point.

3.2. Second act: a responsibility

It's like a blindfold had been taken off. That's it. There's no way to put the blindfold back on and continue the same. No way. We had stirred something in ourselves and in other people, a way of existing through a movement. When a Black woman moves, the whole structure moves too, and that's what happened. So how do you undo that? How do you cover the eyes of people who have already seen that it's by uniting that we can achieve things? Through a movement. (Sandra Sawilza, interview on 29 February 2024, my emphasis)

With the conclusion of the cultural project came a sense of responsibility, felt by the leaders, for the effect they had produced in these women from the territory. The *blindfold* removed from these women's eyes was linked to the perception that they are part of an unequal system of power, a social structure that depends on the exploitation of Black and peripheral women's labour to sustain itself. They began to realize that their suffering was not merely individual, but shared and continuously produced by interconnected and unequal structures of power and oppression.

Simone, Sandra and Scheylla perceived that they needed to keep *doing something*. The movement began by these women as a way of dealing with their own feeling of discomfort had grown into something larger than anticipated, larger than one single project. But there would be little time for them to reflect on this, as just one month after the project ended, the Covid-19 pandemic began.

In March, Covid hit¹³ — and from then on, everything shut down, and everything began to happen. I think maybe that's when the Collective perhaps was really born. There was no more public funding, nothing requiring us to hold encounters or become organized. It was time to submit the final report to the city council for the project. *But then the demands started, many demands, all kinds of demands.* In addition to the mental health struggles that began to flare up among various women, there was also the issue of food, the requests for basic supplies that

¹³ Covid-19, caused by the novel coronavirus SARS-CoV-2, came to world attention in December 2019, when the first cases of a previously unknown form of pneumonia were identified in Wuhan, China. The disease quickly spread globally, prompting the World Health Organization (WHO) to declare a pandemic on 11 March 2020. Covid-19 caused millions of deaths and infections, forcing countries to implement drastic measures such as lockdowns and social distancing, quarantines, travel and mobility restrictions, the mandatory use of masks and alcohol-based sanitizers, and the cancellation of in-person events and activities. These and other actions were implemented to contain the spread of the virus, which is highly transmissible and presented a significant mortality risk, particularly for older people and those with comorbidities.

we began to receive. And all of a sudden, we started forming a chain: we asked our friends for help, and they passed the word on to others. And things started to happen, some donations started to arrive. We realized there needed to be someone working as a go-between. There were people in need and there were people willing to give. So we said, we're here, let's do this! We began this small movement, which grew quickly. From the 30 women who had attended the project encounters [in 2019], it grew to 200, almost a thousand people registered to receive food parcels [in 2020]. This was so important. *I think that's where the Collective, as a movement, really began. That's when this collective network started to happen.* (Sawilza, interview on 29 February 2024, my emphasis)

With the pandemic came its cascading social effects, including rising unemployment, the cessation of public services, nurseries, schools and welfare services, and the further precarization of healthcare provision. The three leaders began to receive numerous requests for various forms of *help*: food, clothing, household items, cooking gas, support in accessing emergency assistance (at municipal, state and federal levels), among other things. Many women from the territory lost their jobs and income, now dealing with children at home, out of school, and many in highly precarious conditions of food insecurity. At that moment, there was a strong and immediate mobilization of the Collective in an attempt to meet the most basic and urgent demands related to survival. And this was when the project began to transform into something much larger.

The Quebrada Women's Collective assumed the character of a *social movement* in a context of acute crisis. The leaders coordinated a donation network, with items received from diverse sources, organized by them, which functioned as an intermediary and distributor. The work mostly involved running fundraising campaigns, receiving and distributing hygiene kits, menstrual hygiene kits, gas vouchers, clothing, accessories, furniture, blankets, warm clothing and other essential items.

In parallel with the distribution of donations – which was still taking place at the time in improvised spaces, without a permanent base or the resources needed to keep the Collective's basic activities running – the leaders began organizing a network of free and ongoing psychological support with the help of volunteers. This network was mobilized in response to the growing demand for psychological care, as the mental distress experienced by women in the territory intensified with the effects of the pandemic. The earlier idea behind *Drops of Care* (*Gotas de Cuidado*) thus became a key area of the Collective's work, emerging from the mobilization and collective awareness developed in the initial phase of the pandemic. This became consolidated through the continuous, year-round provision of psychological support to dozens of women, provided by professionals from across Brazil.

It's a responsibility we assumed, but it wasn't something we had planned. It just happened. Suddenly, you become a reference point. We had constructed this idea that here you can change your life, improve it in some way. And that this happens from the inside out, not from the outside in. From the inside out. So, like, if it had happened to just one woman, that would have been beautiful in itself, but then suddenly it's happening to several women, including us. So no, there's no going back. (Sandra Sawilza, interview on 29 February 2024)

Other women collaborators began to join the movement in 2020, supporting the leaders in activities such as receiving and distributing food baskets, managing communications on social media, and coordinating with the volunteer psychologists in the Drops of Care initiative. The work of the Collective involved the complex articulation of a network that included food basket donors, registering women to receive donations, developing partnerships with other networks and collectives within the Aglomerado da Serra, as well as managing dozens of volunteer psychologists.¹⁴

As the range of actions and their reach expanded, a process of formal institutionalization began.¹⁵ The Collective became a crucial point of reference for care practices in the territory, offering both social assistance and psychological support to women in the Aglomerado da Serra. Its activities acquired considerable visibility in local media, on social networks and especially within the territory itself. Practically everyone in the *quebrada* knew who the Collective's leaders were and that if a woman needed help, she could turn to them for support. It was not uncommon for the health clinics and Social Assistance Reference Centres to informally refer people to the Quebrada Women's Collective, whether for food baskets or for psychological care. At that moment, the team perceived that the Collective had started operating as an *informal extension of the state*, providing care practices without funding and relying entirely on the voluntary work of women, receiving and trying to respond to all kinds of demands.

We know that the state, by making itself absent from the favela – through mechanisms characteristic of its mode of governance (Fernandes, 2021) – ultimately benefits from precarization, informality and the unpaid, voluntary services provided by women and local leaders committed to caring for their community. In this context, the leaders of the Collective realized that "*it was impossible to deal with everything*" with which they were presented, "*they couldn't take care of everything and everyone all the time.*"

3.3 *Third act: overwhelmed*

Between March 2020 and mid-2021, as the precarious conditions in the Aglomerado da Serra deepened, the Collective's leaders assumed what they called a *socio-assistential* role. They differentiate these actions from those focused on care and affect,¹⁶ which had begun during the project's encounters in 2019. Together, these socio-assistential actions and the mental health care network mobilized a wide range of volunteers and became the Collective's core activities during this period. Gradually, the leaders perceived the emergence of a broad social movement of peripheral women in the territory. Yet there was little time to organize or reflect on this movement, its aims and boundaries, because the *rush* to respond to the demands and urgent requests only intensified. They became aware of what they were doing through practice itself, in the thick of *rushing about*. A commonly repeated phrase was the "rushing about never

¹⁴ Volunteer professionals were only recruited after evaluation by the coordination team of the Drops of Care network and only if they met a series of criteria, such as having a valid professional registration with the Regional Psychology Council (CRP).

¹⁵ In 2021, the Collective became a legally recognized association with the aim of being able to apply for funding to maintain its activities.

¹⁶ Although they recognize that food distribution is a form of care practice, one often accompanied by listening and emotional support for the women concerned, the leaders of the Collective consistently distinguish between donation deliveries and the care encounters, in which the main objective is to create a space for women to speak and be heard. A distinction is made between an idealized form of care and the care that can be effectively provided, in this case by combating food insecurity and responding to mental health issues.

stops" (*o corre não para*). There was no turning back, but they also found it difficult to set limits on the work they were doing, even though they realized they were exceeding their own personal limits.

By this point, the founders of the Collective had already become major reference points in the territory and began receiving these requests, stories and outpourings directly via their mobile phones or by women coming up to them on the street. The local public structures and services, already precarious, proved even more inadequate during the pandemic. Local social welfare services were operating at a reduced capacity and those offering protection to women in violent situations – already perceived as ineffective and marked by institutional violence such as racism and sexism – became even more limited. A wide variety of one-off demands began to appear, such as transporting sick people to hospitals, offering support and legal referrals for women whose children had been injured or killed during police operations – far beyond the capacities of the leaders to respond to them.

In a context marked by the health and social crisis of the Covid-19 pandemic, the Collective's leaders continued to respond to demands in person, despite the risk of exposure to infection. The urgent need to prevent hunger and support families made even more vulnerable by the pandemic transcended the risk to themselves. More women sought out the Collective each day and alongside the demands for social assistance and psychological support, it became clear that the women were also presenting a tangled web of structural issues connected to the everyday oppressions they endured. Sometimes these issues manifested as direct requests, at other times simply as a need for emotional support or a safe place to *desabafar* (vent their feelings). Among these issues were cases of domestic violence (against women, children and adolescents); health problems exacerbated by a lack of adequate medical care, many related to heavy workloads and long working hours; deep psychological distress often treated with excessive medication; suffering caused by police violence in the territory; cases of alcoholism and the abuse of illicit drugs (mainly by men or adolescents) in the family; abandonment by partners and fathers of their children; attempted suicides, among many other situations.

The women of the territory sought a form of support in the Collective that they could not find in other services or structures in the territory, projecting on to the movement's leaders their hope of resolving complex structural problems that ultimately manifested in their own lived experiences. The leaders would listen and offer emotional support as they handed out the food donations to queues with dozens of people. They were committed to caring for the women of their community, but they were also exhausted and overwhelmed, trying to compensate for the many "absences" of the state – which deepened further during the pandemic – as the demands and vulnerabilities continued to increase.

The Collective gradually became consolidated through practical experimentation, based on the accumulated knowledge of its three founders, who had experience in diverse social projects and a vast network of contacts, a singular way of doing things. It became necessary to establish methods, procedures, registration systems and criteria for the logistics of the donations to function effectively.

In the initial phase of the pandemic, there was an upsurge in social awareness that led to a significant increase in donations. The Quebrada Women's Collective ended up assisting around a thousand women from the eight vilas making up the Aglomerado da Serra. For nearly two years, the average volume per month was equivalent to the

distribution of 200 food baskets. In 2021, the Collective was able to rent a property and set up a head office, a fixed space for meetings and for receiving and distributing donations. It is important to stress that *transforming into a socio-assistance hub for the community* was never among the initial objectives of the Collective's founders. However, the group became a social movement of women when it faced the demand to coordination their actions territorially in a context of crisis and deepening vulnerabilities. The leaders came to understand that, in that moment, their central aim – offering care to the women of the territory – translated as the need to alleviate food insecurity and psychological distress.

The moment of delivering food baskets is also one of *care, affect and listening* – that is, the socio-assistance actions are understood as practices of care. By distributing special baskets with chicken for Mother's Day, or with chocolates and sparkling wine at Christmas, for instance, they affirm the idea that the women of the territory do not want just *the bare minimum to survive*: they want to live well, to have pleasure, to feel and to receive something more. They set out from the premise that care practices and policies cannot be disconnected from structural, material and symbolic issues. They make clear that self-care cannot be practiced when these women have nothing to eat, nothing to wear and suffer violence, or when exhausting labour consumes all of their time, when there is no access to quality healthcare or the conditions to make use of it. It is essential to recognize that the everyday lives of these women – marked by diverse forms of structural violence – produce physical and mental sickness that undermines nearly all possibilities for self-care, or for seeing themselves as subjects who also need to receive care. "We don't want to do what everyone else is doing," says one of the leaders, referring to the dozens of initiatives and movements working in the Aglomerado da Serra that provide donations and ad hoc assistance, but are not guided by principles of *welcome, care, affect, listening and collective construction*. Their proposal has always been to *do something different* from traditional health, social assistance and psychosocial care projects and institutions.

As the founders of the Collective became increasingly overworked, there was a growing perception – voiced in expanded team meetings – that the Collective needed to *pull back a little*. Continuing to respond to every request was impossible, nor could they sustain their role as intermediaries for every institution or individual wishing to donate something to people in the territory. It was all extremely demanding and they simply *could not cope*. Even with the support of a larger management team, most of the Collective's work and decision-making still fell to the three founders, who were becoming physically and mentally drained: exhausted, overwhelmed with work, and often dealing with difficult financial, personal, family and health-related problems.

From mid-2022 onwards, faced with a drastic reduction in donations, the team's overworking and exhaustion, and the gradual easing of the social crisis generated by the pandemic, the leadership decided to announce the end of the monthly food basket distributions. The Collective would shift its focus back to in-person gatherings in the form of therapeutic conversation circles and individual psychological care offered through the Drops of Care (*Gotas de Cuidado*) network.

Over nearly six years of activity, the Quebrada Women's Collective has become consolidated as a movement organized around collective care practices developed from the perspectives of Black women. Circle gatherings have become its primary methodology, focused on creating a safe space for women to speak and listen – therapeutic interventions developed collectively, mediated by community leaders and psychologists. In these encounters, women find a form of care, welcome and affect that is markedly different

from what they experience in other spaces, such as their own homes, churches or public health and social services, where many reports systematic experiences of verbal abuse, neglect, silencing and exclusion. In the Collective, they encounter a place of belonging, a safe territory of care and even a place of rest, the promotion of health and well-being, and affective and intellectual sharing. A place where, through speech and listening, they encounter other perspectives and ways of dealing with everyday oppression and hardship; where silences can be broken; where mental health and care encounter other languages and possibilities, like dance, theatre, listening, demonstrations of affect and holding close, leisure, pleasure and sociability. A place of encounters where women can see themselves reflected in one another's stories and access new possibilities, narratives and practices about themselves and the world. The phrase-cum-motto, first pronounced by Scheylla Bacellar – *to be a woman, to be one's own territory* – expresses the Collective's proposal that Black and peripheral women can reclaim their bodies, desires, memories and subjectivities, defining themselves on their own terms and seeking collective emancipation, subverting the structures of oppression, domination and control imposed on their lives. Just as their oppressions are territorialized, so these women also seek to produce care territorially. Through their practices, the women discover paths towards autonomy, denaturalizing structures of oppression and silencing, questioning the social foundations that sustain these structures and seeking to transform them.

4. Who takes care of the carer?

Drawing on their lived experiences and family influences, personal choices and forms of agency, artistic trajectories and contingencies such as participation in religious social movements and other community projects during their youth in the territory, the Collective's three founders gained access to feminist debates, Black feminist thought, and organized student and Black activist movements in the city of Belo Horizonte. Even so, they came to recognize a lacuna, an absence of these movements in their own territory. For them, however much they could personally participate in events staged in cities across the country and be warmly welcomed in other spaces through their art, their neighbours, schoolmates, relatives, and friends from the territory were still living in extremely precarious conditions. Mobilizing the discourse of care and questioning a logic in which those who care for everyone else are the ones who receive the least care themselves, they decided to create a movement for promoting practices of care and emotional support, aiming to make up for an absence all the women had felt historically.

Once again, though, the burden of care work – this time articulated in collective and community form – weighs most heavily on the hands of these three Black women from the periphery, who have assumed the role of caregivers for their community. They carry heavy boxes, listen to women's stories and witness distressing scenes without being adequately prepared. They work in other jobs and provide care to their own families, while also caring for their territory on a voluntary basis through a social movement. The equation still fails to add up when we consider that these women devote countless hours of their time – days, weeks, all their waking life – to this collective care work. Beyond the *self time*, which they defend as a right of all peripheral women but which, ironically, they themselves experience as a lack, there are the challenges of sustaining a proposal that aims to be horizontal, yet requires certain actions and decisions to be centralized in this core group, so that the Collective's practical work can continue. The

urgency of certain decisions does not allow time for every situation to be shared with the wider management team and demands parallel alignments between the core leaders. The presence of researchers, interns and other partners is welcomed, but always negotiated. Their participation is recognised as important for the movement, as long as it is based on an ethics grounded in the logics of the territory. Seeing the exhausting labour of these women, who care for their families, other women and an entire territory, who challenge the structural logics of unequal relations of care, the question that guided the formation of the Collective itself still remains unanswered: who takes care of the carer?

This question points to a structural knot that, so deeply rooted in the practices, customs, subjectivities, power relations and constitutive meanings of Brazilian society, represents a challenge of immense complexity. As a movement, the Quebrada Women's Collective continues to invest in finding a way out through collective care – through the creation of political and pedagogical spaces for intersubjective and structural transformation.

5. Final remarks: the collectivisation of care as a strategy for confronting interconnected structures of oppression

The Quebrada Women's Collective implements practices that challenge and seek to transform interconnected systems of oppression, enabling epistemological perspectives situated at the crossing point of Black women's intellectual production and the political framework of intersectionality. These practices point to a collectivisation of care grounded in localized, embodied, territorialized and racialized logics. They assert care as a social right, inseparable from other basic rights such as health, food, education, transport, housing, sanitation and safety.

We can understand the formation of the Quebrada Women's Collective as a strategy of resistance – of survival and the pursuit of a life worth living – against the systematic oppressions experienced by the women of this territory. Recognizing that these oppressions are territorialized, racialized and gendered, the forms of resistance and opposition must be just as complex. These forms of resistance are centred on notions of care and their ambivalences. Care that has, on one hand, been historically deployed as an instrument of oppression, exploitation and subjugation of peripheral Black women, but that, when collectivised, can also repair life (Das, 2020). When articulated through political and pedagogical practices and narratives by those who perform the "hard work" (Brage, 2022) that sustains life and the economic bases of society (Fraser & Sousa Filho, 2020), collective care challenges the structural and historical logics that underpin the unequal production of care.

Given the urgent need to address the singular experiences of Black and peripheral women – especially "anonymous Black women," single mothers, heads of family, domestic workers, caregivers and those working in precarious jobs – the Quebrada Women's Collective constitutes a space of "self-definition" and "self-affirmation" (Collins, 2019). A space where these women can take ownership of their own speech and position themselves as subjects in the world, with their experiences of pain and suffering, but also with their desires, dreams, joys and both individual and collective potentialities. Care and emotional support act as guiding threads for emancipatory discourses and practices.

This movement is a locus of intense intellectual production and offers epistemological perspectives (Collins, 2016) grounded in concrete experiences, methodologies, strategies and everyday practices. Constructions around collective care,

like those developed in the Quebrada Women's Collective, form part of a broader panorama of multiple political insurgencies involving Black, Indigenous, favela-based, quilombola, racialized, working women – insurgencies led from the margins.

The Collective grounds its methodologies, strategies and collective care practices in ancestral knowledge and technologies of care, cultivating social and political awareness, especially through the markers of gender, race and class. The movement fosters critical consciousness among women from the periphery and promotes emancipation and both personal and collective empowerment, grounded in self-definition and self-affirmation. We can say, therefore, that these insurgencies are not entirely new. Rather, they are embedded within vast historical processes, echoing past resistances to colonization, enslavement and the ongoing subjugation of bodies, minds, subjectivities, cosmologies and spiritualities. In every historical era, these vulnerable subjects have actively resisted and built their strategies in response to their specific possibilities and contingencies. Hence, these are ancestral methodologies and practices, reworked and re-signified by historical subjects, imbued with inventiveness and aspirations for present and future social transformation. The practices of the Collective contribute to the racialization and territorialization of the feminist concept of care, grounding it in embodied and localized perspectives. In this way, they produce new political, conceptual and epistemological frameworks from the situated perspective of Black and peripheral women.

The Quebrada Women's Collective mobilizes the social markers of gender, class, racial and territorial difference as political categories that guide practical actions and counter-discourses that seek to subvert dominant logics and structures of oppression through the notions of care and affect. Created by and for Black and peripheral women, it counterposes hegemonic, naturalizing logics – historically produced and reiterated across generations – in which care is taken as a unilateral action, a social function delegated to women, disproportionately burdening Black and poor women (Carneiro, 2011; Gonzalez, 2020) within a social structure marked by deep inequalities. Through its organized discourses and practices, the Collective produces a kind of "territory of care," where Black peripheral women encounter the conditions to care for one another, turn toward self-care and challenge structural dynamics and relations. This territory of care, beyond the physicality of encounters, is also situated within the field of (inter)subjectivity. The Quebrada Women's Collective places Black and peripheral women in the middle – at the epicentre of politics, feminist critique and the debate on care – as lead actors in the struggle for social transformation.

Through political and pedagogical practices of collective care (Pereira, 2024), based on activities such as therapeutic circles, spaces of welcome, safe spaces for speaking and listening, diverse strategies of self-definition (Collins, 2019), empowerment (Berth, 2019) and collective emancipation, grounded in the principles of Black feminism and intersectionality (Collins, 2019; Crenshaw, 2002; Akotirene, 2019), as well as on the accumulated knowledge relating to forms of care as strategies for survival and living well in marginalized territories, transmitted among women across many generations, these three leaders – together with dozens of other women – have transformed what began as a small and somewhat experimental initiative into a large-scale, organized movement. This movement produces concrete effects on the territory and on the subjectivities and life trajectories of all the women involved.

While, on one hand, the promotion of a collective care network can successfully alleviate the overload and strain felt by many women – whose socially assigned function of daily and exhausting care work drains their time, energy and ability to care for themselves or receive care – on the other, we can observe the feeling of being overwhelmed experienced by those leading this movement, who assume the role of caring for the women in their community. One possible way forward, encountered by this collective, resides in the sharing of roles and responsibilities and in the recognition that *dealing with everything is an impossible task*: in order to care for others, one must first care for oneself. This care may take place both individually and collectively, in a reciprocal manner – what we might call “caring together.” Such a modality of care challenges unidirectional dichotomies, in which certain social subjects are expected to provide care while others are entitled to receive it. A modality that also confronts relationships shaped by power differentials and constructs of gender, race, class, ethnicity, generation and more.

From this ethnography, we can understand that collective care is not a unilateral process. The “Collective” movement – especially through the work of its three main leaders – does not seek to centralize the function of caring for others, but rather to collectively generate the conditions in which all women who pass through the space can both provide and receive care, emotional support, critical awareness and political organization. The experience of the Quebrada Women’s Collective demonstrates that when care is practiced collectively, when we care together, the overload can to some extent be alleviated, even if only momentarily and within existing social and political structures of power and their limiting of the possibilities for action.

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