

# Intersectional experiences of violence in a vulnerable and peripheral territory<sup>1</sup>

## As vivências interseccionais da violência em um território vulnerável e periférico

**Milena Dias Corrêa<sup>a</sup>**

 <https://orcid.org/0000-0002-3393-4067>  
E-mail: milena.correa@unifesp.br

**Ludmila de Moura<sup>a</sup>**

 <https://orcid.org/0000-0003-3849-0490>  
E-mail: ludmilapsico@gmail.com

**Luciane Pinho de Almeida<sup>b</sup>**

 <https://orcid.org/0000-0002-7003-9264>  
E-mail: lpinhoa@hotmail.com

**Ilze Zirbel<sup>c</sup>**

 <https://orcid.org/0000-0001-6633-6525>  
E-mail: izirbel@yahoo.com.br

<sup>a</sup>Universidade Federal de São Paulo. Instituto de Saúde e Sociedade. Departamento de Políticas Públicas e Saúde Coletiva. Santos, SP, Brazil.

<sup>b</sup>Universidade Católica Dom Bosco. Campo Grande, MS, Brazil.

<sup>c</sup>Universidade Federal de Santa Catarina. Florianópolis, SC, Brazil.

### Abstract

Violence is a socio-cultural phenomenon that violates rights and accentuates social inequalities with noticeable implications in the health and daily life of the population. This article discusses forms of violence produced at the intersection of gender, race and class in a peripheral and highly vulnerable community located in the city of Cubatão, state of São Paulo. The research was guided by the theoretical framework of intersectionality and socio-historical psychology. Data were obtained using three surveys conducted from June, 2017 to November, 2020, partially during COVID-19 pandemic. Interviews and field diaries were conducted, analyzed according to Depth Hermeneutics. The material collected from four community leaders served as the basis for this article. The results point to a structural violence articulated to race, class and gender, expressed in the inaccessibility to decent conditions of housing, food and basic income. The violence against women emphasized as a result appears intermediated by the State or the organized drug trafficking. The data suggest that these forms of violence are aggravated by the inefficiency of the public policy operationalization in promoting care for the mostly black and poor population, indicating that intersectionality can be an essential tool for analysis and confrontation of social inequalities.

**Keywords:** Intersectionality; Violence; Violence Against Women; COVID-19; Socio-historical Psychology.

### Correspondence

Milena Dias Corrêa  
Rua Silva Jardim, 136. Santos, SP, Brazil. CEP 11015-020.

<sup>1</sup> This study is a development of the researches "Care ethics and rights construction: psychosocial reception in family health practices within social exclusion situations" (sponsored by the São Paulo Research Foundation (Fapesp), nº 2016 / 23973-2), "Social inequality and subjectivity: life trajectories and struggles for better living conditions and health in vulnerable territory of Baixada Santista" (supported by the National Council for Scientific and Technological Development (CNPq), nº 407836 / 2016-0), which were approved by the Research Ethics Committee of the Universidade Federal de São Paulo, opinions 2,198,202 and 2,047,444, and "Care ethics and psychosocial processes of social participation in family health practices within social exclusion situations" (Bolsa Produtividade CNPq nº 308730 / 2019-4).

## Resumo

A violência é um fenômeno sociocultural que viola direitos e acentua desigualdades sociais. Suas implicações são perceptíveis na vida cotidiana e na saúde da população. Sob o referencial teórico da interseccionalidade e da psicologia sócio-histórica, este artigo discute formas de violência produzidas na intersecção de gênero, raça e classe em uma comunidade periférica e em situação de alta vulnerabilidade localizada na cidade de Cubatão/SP, a partir do relato de quatro lideranças comunitárias. Os dados foram obtidos por meio de três pesquisas realizadas anteriormente e concomitantemente ao contexto da pandemia da covid-19, de junho de 2017 a novembro de 2020, extraídos mediante entrevistas e diários de campo para, depois, serem analisados segundo a Hermenêutica de Profundidade. Os resultados apontam para violências estruturais articuladas a raça, classe e gênero, expressas na inacessibilidade a condições dignas de moradia, alimentação e renda básica. A violência contra mulheres, destacada como resultado, aparece intermediada pelo Estado ou pelo tráfico organizado. Os dados sugerem que as violências são agravadas pela ineficiência da operacionalização das políticas públicas, no que tange à promoção do cuidado à população majoritariamente negra e pobre, indicando que a interseccionalidade é uma ferramenta essencial para a análise e o enfrentamento das desigualdades sociais.

**Palavras-chave:** Interseccionalidade; Violência; Violência contra a Mulher; Covid-19; Psicologia Sócio-histórica.

## Introduction

Violence is a recurrent phenomenon in the history of humanity. It emerges within social arrangements and alters their realities. Saffioti (2004) defines violence as the rupture of any form of integrity of a person: physical, psychic, sexual, and/or moral. It may be explicit or veiled and even be in accordance to the social norms of a certain culture.

In Brazil, the violence presents structural traits. The bases for the colonization were the enslavement of Indigenous and African individuals and the sexual violence against women. As for the latter, the State granted its citizens the right to hurt, punish, or execute their female spouses<sup>2</sup>. It was not before collective fights of women against oppression during the 20<sup>th</sup> century that this violence started to be fought and reported as a violation of human rights (Brazil, 2006). Yet, such practice persists both in personal and institutional relationships, denoting a “structural violence”.

The structural violence is a form of violence “enclosed” within the political, economic, and symbolical structure of society, usually having domination and exploitation as its most visible faces, in addition to fostering inequality and marginalization, abandonment, and neglect practices (Galtung, 1969). It may have multiple effects, depending on the articulation of oppression systems as racism, sexism, and poverty. It often affects the availability of health care and educational services, the access to basic goods, and the freedom of individuals and groups. To Galtung, it is the base of other forms of violence; being the visible and direct violence (involving violent acts and behaviors) just a part of a system (cultural and structural) that legitimates it. The structural violence is, sometimes, hard to detect or to correctly associate to the forms of direct violence that we see in the communities and households.

In 1996, the World Health Organization recognized violence as a matter of public health (WHO, 2014). In Brazil, it only occurred

---

<sup>2</sup> According to the Philippine Act, a law compilation in-force in Portugal and its ultramarine territories from the late 16<sup>th</sup> century to the 19<sup>th</sup> century (Brazil, 1870). In Brazil, the Act remained in-force, under the civil law, until 1916, when it was revoked by the Brazilian Civil Law (Brazil, 1916).

in 2001, with the inclusion of violence in the National Policy for Reduction of Morbidity and Mortality by Accidents and Violence (Brazil, 2001).

Although it is a universal phenomenon, it is in the historically excluded and vulnerable sectors of the population, such as the Black, women, and LGBTQIA+ groups, that violence produces its worst effects (Agostini, 2015). As for the gender-based violence, the patriarchy<sup>3</sup> supports and maintains it, establishing power and domination relations of men (who hold a greater social value) over women (Aguilar, 2015), while the most severe affects hitting Black and poor women (Agostini, 2015).

Since 1960, Feminist and Black movements emphasize the importance of the articulation between social markers in the comprehension of reality, later conceptualized and popularized as intersectionality: a way of capturing the structural consequences and dynamics of interaction between two or more subordination axes” (Crenshaw, 2002, p. 177), such as racism, classism, and patriarchy. This concept is an important analysis tool for the social interactions and, for the past years, became a part of the theoretical-methodological field of health studies in Latin America, contributing for the mapping of social inequalities (Luiz et al., 2020).

This article aims to point and discuss some of the forms of violence experienced in the race, gender, and class intersectionality in a territory of social vulnerability during the COVID-19 pandemic and prior to it. First, we will present the methodological path and tools; then, we will approach the results and discussions.

## Methodological path and tools

This article is the result of a qualitative approach, outlined from a participatory research focused on intersectional matters and in the cultural-historical psychology<sup>4</sup> applied to the field of collective health. The participatory research was the basis for the development of a conduct towards the valorization

of dialogue and democratic distribution of power among participants, (Schmidt, 2008), while articulating the valorization of intersubjectivity as a tool to approach the social reality.

The data focus refers to the violence matter and the collected material relates to two large research projects: “*Care ethics and rights construction: psychosocial reception in family health practices within social exclusion situations*” and “*Social inequality and subjectivity: life trajectories and struggles for better living conditions and health in vulnerable territory of Baixada Santista*”. These two unfolded into a third project - “*Social participation of community leaders in the search for better living conditions: experiences for the promotion of citizenship*” - which provided updates on the COVID-19 experiences in the study territory. Combining the information collected in these research projects allowed us to conduct an in-depth analysis in the theme of this article, given the gradual insertion of researchers into the field during a three-year period, constructing a broader comprehension of the territory and of the life trajectory of participants.

We conducted the research projects in the Cubatão city, between July 2017 and November 2020, in a community of high social vulnerability. We complied with all procedures required by the Ethics Committee, in addition to receiving clearance by the Municipal Health Secretary.

According to the Brazilian Institute of Geography and Statistics, in 2014, 3,041 households in this community were subnormal agglomerates, which are irregular occupations located in restricted areas, lacking essential public services (IBGE, 2010a). The community has wooden houses, mostly stilt houses. Most of residents self-declared to be Black (66.1%) and women are prevalent in the region (IBGE, 2010b).

To the research, we used two fundamental tools: the participatory observation, recorded in field journals, and semi-structured interviews with

3 A form of social construction based and centralized in the power of man because of a masculine pact that ensures oppression and subjection of women (Delphy, 2009; Saffioti, 2004).

4 The cultural-historical psychology seeks to comprehend health as an indicator of social insertion, being the body the place of expression of the inclusion/exclusion relations (Sawaia; Maheirie, 2014).

community leaders. We recorded all interviews in audio, later full transcribing it, to which participants consented. Four leaders<sup>5</sup> participated in the research: three women and one man, their ages ranging from 37 to 65 years, herein under aliases. In the community, the leaders assume a fundamental role to the extent that they contribute to improvements expressed in the dialectic relation of social inclusion/exclusion of residents.

We used in-depth hermeneutics (Thompson, 2011) to analyze data and followed three stages: (1) cultural-historical contextualization; (2) formal analysis of discourses; and (3) interpretation/reinterpretation process based on the articulation among data and the intersectionality and cultural-historical psychology theoretical frameworks.

The use of the Atlas TI software enabled the identification of analytic transversal categories in the excerpts of interviews and field journals, the “violence” category among them, which we analyze in this work. It is something that crosses the lives senses and meanings of the individuals in this territory and relates to the community ordinary life.

## Results and discussion

### The structural violence and its intersections

In the study community, the structural violence is there ever since its foundation. It is visible in the State neglect expressed by scarce public policies and in the unfeasibility of some of them, which grew stronger during the pandemic. An example of it is the distribution of meals in the Poupatempo<sup>6</sup>: it is crucial for many families but, in reality, it fails because of bureaucracy or lack of complementary measures, for instance, public transportation.

*to go to Poupatempo to pick the meal up... see, you pay R\$ 3.40 to get there, R\$ 3.40 to head back so that you can pay R\$ 1.00 for a meal. No way, right? So we have to beg and say: “guys, I know it is one [meal] only per person but I gotta grab five because*

*we managed to chip in to pay for the transportation... ”And we have not really felt this support coming from the city administration. (Ángeles)*

In addition to this example, there is the insufficient or poor food parcels offered during the pandemic and the (non)access to the Emergency Aid. During this time, the municipal administration launched school meal kits for all students from public schools. However, as Ángeles says “*the food parcel that came from the education will not last two days. This [...] [and the fact] of the conditions of the food. So: poor beans, full of bugs, a milk that made people sick and a parcel that would not last two or three days*”. In the case of the Emergency Aid, it did not get to the municipalities fast enough, also failing to include those who were laid off. This shows how many of public policies come into force as palliative measures, without an analysis of viability and access towards those who needs them.

The “Stay at Home” campaign during the pandemic was a measure to reduce the virus spread through social distancing. Decrees came into force, for instance, the suspension of events and the encouragement of work from home practices (cf. Cubatão, 2020) to which, however, not everyone could adhere and to those who could, it often meant staying in unhealthy environments. In the Ángeles’ words “*it is terrible for you to stay at home when there is no room... no room to breathe. You barely have a window [...] a lot of mosquitoes... So it is hard.*”

The neglect, concretized by the issues experienced by the poor marginal areas because of their distance from the central areas has always been present in communities like this one:

*guys, this distancing thing, those living in the outskirts have always experienced that. We have always been far from policies. Period. This thing of going through hardships is not because of the pandemic, it already happened before. So inside the neighborhood we have no basic sanitation*

<sup>5</sup> These community leaders work in different fields: one of participants works in fishery and the others in community associations.

<sup>6</sup> Implemented by the São Paulo State Government in 1996, it offers several administrative services to the population in one place (issuance of IDs, license IDs, vehicle licensing etc.)

*and it was not because of the pandemic. Perhaps, the pandemic broke it open, took the blinders off a few people, but we have always experienced this. (Ángeles)*

The pandemic evidenced how much the human rights of the poorest populations are constantly violated. In these moments, we may acknowledge the illusory nature of inclusion and one's immersion into privation and social injustice (Sawaia, 2001). Living in poor outskirts areas is living the inaccessibility of rights.

*when I say "community" what ring does it bell? That image of poverty in your head" [...] That circumstance was created there, you see? [...] When one says favela, our first thought is: "whores, street dudes... illiterate, uneducated people, poor-built houses, right? A precarious place", right? (Barreto)*

Beyond State neglect, a set of social, political, and geographical factors interact with each other and reflect sexism, racism, and the economic exclusions produced within capitalism. Likewise, there is a racial demarcation of the community. The common skin tone of residents is enough for them to be considered equal or look-alikes, as Petra told us: *I have come here on my own; I do not even have relatives here. [However], everybody says 'wow, you look like this one or that one, are you sister to...?' To which I answer: 'guys, we are all Black, but we are not relatives'.*

In Brazil, territories in social vulnerability usually comprehend Black people who, following the abolition had to dispute their survival in a racist society, which uses social and political techniques to keep them in subordination stands. (Moura, 1994). The racial privilege has a great effect in the division of work and increasingly inserts the Black population into a growing mass of unemployment and occasional gigs. Likewise, it brings implications for other fields in the lives of these subjects, as health, education, and living. Thus, poverty becomes racialized, as the Black

population remains in competitive disadvantage in material and symbolic terms in face of the poor white population. It causes an intersection between racism and classism (Gonzalez, 2020).

The abandonment by the State prevents the Black population living in poor outskirts areas manage to organize themselves, to improve their living conditions. This is evident in the account by Ángeles on the hardships of protecting the environment where one lives:

*Because it is easy to talk about the environment, but when we are talking about stilt houses, this is different, right? [...] How to encourage recycling when [here] the recycling truck only comes once in a blue Moon? It is easy for someone who has a house and a backyard: one just stores it there, right? The recycling material. Now, for those living in a shaggy it is hard, they have no storage room or anything. Depending upon the place where one lives, there is a far distance from the recycling dumpster, right? So, we have been talking about how to do it.*

Even when the State implements a measure to support the population, as is the case with the Family Health Unit (USF); it usually must handle constant budget cuts. Recent years saw an expressive reduction in the budget allocated in health, corroborated by the weakening of the Health Family Strategy (ESF) and the commodification of Primary Health services through the hiring of social organizations to provide it, for instance (Medina et al., 2020). This was also the case in the study community.

The insufficiency of resources allocated in public health resulted in partnerships with community organizations sometimes headed by churches, as per Petra, who works for one of them.

*Here, in the Vila, there has been a large growth in the number of children and adolescents attempting suicide, who... are depressed, do not want to leave home [...] And the PAMOS,<sup>7</sup> when*

<sup>7</sup> Medical, Dental, and Social Services Unit, called "PAMOS" by locals. In this region, the first Unit dates of 1998 and, since 2006, the institution works as a Family Health Unit (USF).

*they get anything like it, they ask for our help, right? Because here in the community, we are the only place providing activities for the children. So, they ask for our help.*

When offered by these organizations,<sup>8</sup> the care offer may expand, although it may also lose the universality established by the Brazilian National Health System (SUS) and by the Brazilian Social Work System (SUAS), leaving a certain share of the population subjected to the choices of those coordinating these associations. It is the case with children and adolescents engaged in drug-trafficking activities, who may be ineligible for activities developed by the non-profit institutions, remaining in a “non-place”:

*There was this time the Social Work Services (CRAS) wanted to send us an adolescent caught in an armed robbery and we did not accept it. We said we do not have the means to accept an adolescent who got caught, not for the first time, for robbing with a gun. So, we look into the case, we analyze it and, if we are able to accept the case, we do take the child in the project. (Petra)*

Another important matter is that of the ties between private associations and political parties for the granting of financial resources, according to Petra: *“This is our problem, that of getting our money. Because for the NGOs who have a fixed party, the money comes in a blink! The money pours in even when paperwork is left behind [...] So, us, who do not have [a party], we go on suffering...”* The facilities may represent the subjection to party intentions and ideals and, consequently, may convert their activities into merely paternalist practices, with private interest only.

### **Gender-based violence**

Structural violence against women intensified during the pandemic period. Racial, income and gender inequalities deepened in the country, especially affecting the lives of Black and poor

women. Caregiving activities became even more central, not only in health systems, but in homes “given the need to interrupt the in-person functioning of key caregiving institutions such as daycare centers and schools” (SOF, 2020, p. 5).

According to the research data, 50% of Brazilian women started to care for a person during the pandemic and, among those who care, 72% had their monitoring responsibilities and demand for companionship increased (SOF, 2020). Unemployment was higher for women, especially Black women, who faced difficulties to meet basic expenses, such as rent and food.

The burden on women was immense, for both those who could stay at home and those who could not. In this research, some remained as domestic workers, having no sympathy from their employers.

*I do not know exactly how many people domestic workers are, but, you know, you see the women going out to work in the morning. Before and even now. They are getting phone calls: “hey, you gotta come”. They had never stopped working. Their employers did not support them like “hey, stay at home”. (Ángeles)*

Historically, poor women worked to support their families, either complementarily or integrally. As if this were not enough, they are also responsible for the education of their children and for domestic work: a double burden that overloads them with responsibilities and attributions. In the pandemic, due to the closing of schools and daycare centers, combined with the issue of lack of school meals, women were even more overburdened. Moreover, the permanence of everyone inside the small houses only contributed to the increase of cases of stress, depression, and anxiety, which increased the tension because of unemployment and strongly contributed to the increase of intra-family violence.

Many women, especially Black women, have no real choices in their lives. Many have no access

<sup>8</sup> Residents founded the majority of associations in the community, and the often establish partnerships with the USF. Currently, a Social Organization manages the Unit, what is producing, in addition to commodification, a fragility in the ties and the weakening of care.

to quality education, which would allow them to enter the labor market with guaranteed labor rights. Even those manage to get a good education are, sometimes, barred by racism. As said by Lélia Gonzalez (2020), in the intersection between racism and sexism, the Black woman is the one who is at the bottom of low-paid services in society. The association between them and domestic work is very strong due to a historical past of enslavement, as is the Brazilian case. The fact that a woman, possibly Black, can stay at home denied to her in a pandemic situation, points to the serious disregard for her life and health.

In middle- and upper-class Brazilian families, the image of Black women as domestic workers persists, feeding the irresponsibility of these socially privileged groups toward housework and caregiving. Black women, in turn, internalize the idea of inferiority, even though they enable the economic production of their “female bosses” (Gonzalez, 2020). Thus, issues of gender, race, and class cross the structural violence towards Black women in Brazil.

In addition to the violence experienced in work and care activities, women in highly vulnerable social territories also face gender issues that can lead to femicide. This reality is present in all classes of patriarchal societies. Jealousy crises express the feeling of possession that men have over women. In this sense, Petra says: “[the man] found her and pulled her this way [an alley surrounding the NGO], pulling her by the hair, pulling her hair out. And he kept saying to her: ‘stop screaming’. And she would reply: ‘do not kill me, let me raise my daughter, do not kill me, let me raise my daughter.’”

Brazil ranks fifth, out of 83 countries, in femicide cases. In 2018, the country had a woman murdered every two hours; 68% of whom were Black (IPEA, 2020). This data demonstrates the need to consider the intersectional issue when analyzing the daily violence experienced by Brazilian women.

Another face of violence is the one that occurs within the households, involving affective bonds and people who are violated inside their own homes. Unfortunately, for many women, this

is an ordinary form of violence, as this report shows: “*She is suffering with this guy ever since she moved in with him. He had beaten her up with a Coke bottle so bad that an ambulance had to come for her, he hurt her badly ... Then, she was alone for a while and then back on again. In this on-again, off-again [...] she is with him for ten years now*” (Petra).

Some women, because of the violence perpetrated by their intimate partners, find in suicide their only way out: “*They get tired of being beaten up, some take pills, and we hear ‘why did she take pills?’ ‘she took them to kill herself because of her husband’*” (Petra).

The suffering exceeds the limits of body bruises of violence, constituting a psychic suffering capable of demarcating the limits of the soul, leading to a substantial weakening, as per Espinosa (1989), of the conatus, the ability of dealing with the life issues and, moreover, fighting for its permanency.

To cope with the domestic and family violence against women, the Maria da Penha Act (Brazil, 2006) was elaborated and sanctioned. According to the Act, this form of violence is “any gender-based act or omission that causes death, injury, physical, sexual, or psychological suffering, and pain and suffering or patrimonial damage”, whether in the “context of the household, [...], family [...] or any intimate relation of affection”. Among the gender-based violence, the physical form is the most visible, although other forms, such as psychological, sexual, moral, and patrimonial, usually accompany it.

The data collected by this article indicates that some of the women who are victims of domestic violence have difficulties leaving abusive relationships. Faced with a patriarchal culture that typifies men as “naturally” violent and oppressive and women a person who needs one man to protect her from other man (Zirbel, 2020), a historical normalization of violence is imposed on them, causing women to remain in relationships even when subjected to abuse from partners.

One of the faces of patriarchy is precisely a kind of pact among men to ensure the subjection and

exploitation of women. The pact implies that they all put themselves in the place of dominators, subjecting all women. The punishment for exceptions has varying degrees of violence. Political power is also established to maintain this pact (Pateman, 1993; Zirbel, 2020), favoring men in various ways such as exempting them from caregiving activities and reserving the best positions and salaries for them.

Unfortunately, the lack of appropriation of the intersectionality concept by the public policies affects the health care rendered to women, given they understand there is a homogeneity in the catered population, making community leaders and even health agents, often, to be judgmental on the behavior of those who stay in abusive relationships (Moura; Castro-Silva, 2017). Even when awareness exists about the fact that a woman requires help, through empowerment, this occurs through an individualist point of view though. As stated in this account:

*That was the case with Anielle, who came in here bruised: "I am going through a hard time". And I told her: "Dear, this is only happening because you want to. You have your mother's support, and you keep on living with him because you want it [...] We have gave you all the guidance you need to move forward, but you two break it up, you stay two months at your mother's, and they you back together with him again!"*

*These are our families, but these are women who still need... yeah, be educated, to be empowered, because... because as their husband are workers, they bring the bread home, so they endure it. They feel desperate at the time [of the violence], ask for help, so we start helping them [but later] they stop it all: "I will not do anything, because he is my husband, never mind." (Petra)*

In the search of strategies for coping with violence, women seem to first resort to welcoming spaces, finding them in churches, projects, and community activities. Then, they seek for interventions offered through two distinct organizations: The Women's Police Station and the local drug trafficking.

Despite the undeniable importance and political achievement of the Women's Police Stations, resorting to them involves many obstacles. The restricted hours and distance from the poor outskirts evidence the lack of an intersectional approach, which contributes to the permanence of violence in vulnerable territories (Akotirene, 2019). Class and skin tones present extra difficulties for a woman victim of domestic violence to be able to leave her environment of violence, alone or accompanied by her children and other family members, implying, numerous times, a new problem for her.

#### *Who to turn to?*

One of the most visible faces of structural violence in territories like this is the police action. A form of naturalized violence as a systematic practice of police repression that aims to intimidate and because submission exists (Gonzalez, 1984). The police use a violent image, emphasizing that they possess a power capable of not only repressing; but also, of killing. Their practice commonly grounds on racism, sexism, and classism, with young people and Black men being affected the most. The impotence of the population in the face of police action is common in the testimonies: *"We suffered with that boy. The police shove their feet in the neck, in the boy's throat for him to stop screaming... And the mother was outside! [...] The police stood as a wall, would not let anyone in [...] That people in there were not to be the judge"* (Martina).

The perception that the police and the State do not act righteously or with the aim of protecting the residents, makes of drug trafficking an option for social organization and, in some cases, improving local living conditions. Furthermore, the command of these men imposes social rules on the population that restrict the deployment of the police in the area. However, this is not a democratic or violence-free option, as seen from the case of women. Because of the patriarchal culture, they can be raped by drug trafficking agents and even murdered for not submitting to them or deciding to have some affective relationship with another man, as mentioned earlier (Moura; Castro-Silva, 2017).

In the midst of so many adversities, the population seems to develop survival strategies, through the seizure of local power by drug trafficking, or through community organizations. These organizations seek to expand the access to care for the residents, creating alternatives to compensate the obstacles for having rights that are offered, although not guaranteed, by the State.

## Final considerations

This article proposes reflections on the multifaceted and intersectional character of violence in a peripheral community in Cubatão, São Paulo. We concluded that, if the articulation between social markers such as racism, patriarchy, and classism is not considered, we will not move towards coping with inequalities. The social order seems to naturalize the oppressions experienced by the poor population living in the outskirts of large urban centers, especially Black women. This naturalization occurs even through the offer of public policies, since they commonly come with access barriers, whether on the issue of mobility or the distribution of funds. They become, therefore, insufficient and serve as one of the many tools for maintaining the excluding order, transferring to the subjects the responsibility for exclusion and the blame for their socioeconomic stagnation.

In the pandemic period, structural and intersectional violence intensified through the difficulty in obtaining food parcels, the slow payment of the Emergency Aid, and the need to stay for long periods in unhealthy households and collective spaces. Linked to this, is the violence materialized in the police force that, in the face of the intersection of gender, race, and social class, reproduces actions based on racism, sexism, and classism, violently framing men, young people, and Blacks in vulnerable territories in a disproportionate manner to the allegedly committed offense.

The emptying of public health in the country appears through cuts in the budgets allocated to the Brazilian National Health System (SUS) and, especially, to Primary Care, which directly interferes in the limitation of care practices performed by

the Family Health Unit (USF). This culminates in articulations with philanthropic institutions that sometimes provide selective care. This political disengagement, along with social injustices, favors the strengthening of patriarchy through the organization of trafficking and violence against women.

Community leaders present forms of resistance and coping with against violence and adverse conditions experienced by the population. This happens, in general, through collective articulations that aim to expand the offer of care, which the State fails to provide. This question requires further exploration in the future.

We need to question: for how long will public policies favor the maintenance of gender, race, and class privileges, rather than acting as a tool for social transformation? In this sense, with special emphasis on the issue of structural violence, it becomes interesting to adopt intersectionality in the legislative agenda to produce public policies that cater to the concrete needs of this population, in addition to effectively combating social inequalities.

## References

- AGOSTINI, M. Agravos à saúde decorrentes da violência. In: FLEURY-TEIXEIRA, E.; MENEGHEL, S. N. (Org). *Dicionário feminino da infâmia: acolhimento e diagnóstico de mulheres em situação de violência*. Rio de Janeiro: Editora Fiocruz, 2015. p. 28-30.
- AGUIAR, N. F. Patriarcado. In: FLEURY-TEIXEIRA, E.; MENEGHEL, S. N. (Org). *Dicionário feminino da infâmia: acolhimento e diagnóstico de mulheres em situação de violência*. Rio de Janeiro: Editora Fiocruz, 2015. p. 270-272.
- AKOTIRENE, C. *Interseccionalidade*. São Paulo: Sueli Carneiro, 2019.
- BRAZIL. *Ordenações e leis do Reino de Portugal: recopiladas por mandado d'el-Rei D. Filipe I*. Brasília, DF: Senado Federal, 1870.
- BRAZIL. Lei nº 3.071, de 1º de janeiro de 1916. Código Civil dos Estados Unidos do Brasil. *Diário Oficial da União*, Brasília, DF, 5 jan. 1916.

Disponível em: <<https://bit.ly/3cXa09X>>.

Acesso em: 8 abr. 2021.

BRAZIL. Ministério da Saúde. Portaria nº 737, de 16 de maio de 2001. Aprova a Política Nacional de Redução da Morbimortalidade por Acidentes e Violências. *Diário Oficial da União*, Brasília, DF, 18 maio 2001. Disponível em: <<https://bit.ly/31Tm45P>>. Acesso em: 7 abr. 2021.

BRAZIL. Lei nº 11.340, de 7 de agosto de 2006. Cria mecanismos para coibir a violência doméstica e familiar contra a mulher, e dá outras providências. *Diário Oficial da União*, Brasília, DF, 8 ago. 2006. Disponível em: <<https://bit.ly/3dISzch>>. Acesso em: 7 abr. 2021.

CRENSHAW, K. Documento para o encontro de especialistas em aspectos da discriminação racial relativos ao gênero. *Estudos Feministas*, Florianópolis, v. 10, n. 1, p. 171-188, 2002.

CUBATÃO. Prefeitura Municipal. Decreto nº 11.190, de 16 de março de 2020. Dispõe sobre a adoção, no âmbito da administração pública direta e indireta, de medidas temporárias e emergenciais em saúde pública no enfrentamento e prevenção de contágio pelo covid-19, bem como sobre recomendações. *Diário Oficial da Prefeitura Municipal de Cubatão*, Cubatão, 16 mar. 2020.

DELPHY, C. Patriarcado (teorias do). In: HIRATA, H. et al. (Org.). *Dicionário crítico do feminismo*. São Paulo: Editora Unesp, 2009. p. 173-178.

ESPINOSA, B. *Ética*. São Paulo: Nova Cultural, 1989.

GALTUNG, J. Violence, peace, and peace research. *Journal of Peace Research*, Oslo, v. 6, n. 3, p. 167-191, 1969.

GONZALEZ, L. Racismo e sexismo na cultura Brasileira. *Revista Ciências Sociais Hoje*, São Paulo, n. 2, p. 223-244, 1984.

GONZALEZ, L. A mulher negra na sociedade Brasileira: uma abordagem político-econômica. In: RIOS, F.; LIMA, M. *Por um feminismo afro-latino-americano*. Rio de Janeiro: Zahar, 2020. p. 49-64.

GONZÁLEZ-REY, F. L. *Pesquisa qualitativa em psicologia: caminhos e desafios*. São Paulo: Cengage Learning, 2005.

IBGE - INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA. *Censo demográfico 2010: aglomerados subnormais: primeiros resultados*. Rio de Janeiro, 2010a. Disponível em: <<https://bit.ly/3s3Wlgo>>. Acesso em: 7 abr. 2021.

IBGE - INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA. Setor 351350405000136: síntese dos dados. *Censo 2010*, Rio de Janeiro, 2010b. Disponível em: <<https://bit.ly/2RhuSjV>>. Acesso em: 7 abr. 2021.

IPEA - INSTITUTO DE PESQUISA ECONÔMICA APLICADA. *Atlas da violência 2020*. Brasília, DF, 2020. Disponível em: <<https://bit.ly/39Lvepp>>. Acesso em: 20 nov. 2020.

LUIZ, O. et al. Inequality in health, social determinants, and intersectionality: a systematic review. *Brazilian Journal of Health Review*, São José dos Pinhais, v. 3, n. 5, p. 11827-11841, 2020.

MEDINA, M. G. et al. Atenção primária à saúde em tempos de covid-19: o que fazer? *Cadernos de Saúde Pública*, Rio de Janeiro, v. 36, n. 8, e00149720, 2020. Disponível em: <<https://bit.ly/31UtKEY>>. Acesso em: 7 abr. 2021.

MOURA, C. *Dialética radical do Brasil negro*. São Paulo: Anita, 1994.

MOURA, L.; CASTRO-SILVA, C. R. A violência de gênero na percepção de agentes comunitários de saúde. *Revista Sociais & Humanas*, Santa Maria, v. 30, n. 3, p. 31-54, 2017. Disponível em: <<https://bit.ly/3wD33CE>>. Acesso em: 7 abr. 2021.

PATEMAN, C. *O contrato sexual*. São Paulo: Paz e Terra, 1993.

SAFFIOTI, H. *Gênero, patriarcado, violência*. São Paulo: Fundação Perseu Abramo, 2004.

SAWAIA, B. (Org.). *As artimanhas da exclusão: análise psicossocial e ética da desigualdade social*. Petrópolis: Vozes, 2001.

SAWAIA, B.; MAHEIRIE, K. A psicologia sócio-histórica: um referencial de análise e superação da desigualdade social. *Psicologia & Sociedade*, Belo Horizonte, v. 26, p. 1-3, 2014. Número especial 2.

Disponível em: <<https://bit.ly/3wD3jBC>>.

Acesso em: 7 abr. 2021.

SCHMIDT, M. L. S. Pesquisa participante e formação ética do pesquisador na área da saúde. *Ciência & Saúde Coletiva*, Rio de Janeiro, v. 13, n. 2, p. 391-398, 2008. Disponível em: <<https://bit.ly/3wAVhJO>>. Acesso em: 7 abr. 2021.

SOF - SEMPREVIVA ORGANIZAÇÃO FEMINISTA. *Sem parar: o trabalho e a vida das mulheres na pandemia*. São Paulo, 2020. Disponível em: <<https://bit.ly/3mq2Eig>>. Acesso em: 7 abr. 2021.

THOMPSON, J. B. *Ideologia e cultura moderna: teoria social crítica na era dos meios de comunicação de massa*. Petrópolis: Vozes, 2011.

WHO - WORLD HEALTH ORGANIZATION. *Global status report on violence prevention 2014*. Geneva, 2014. Disponível em: <<https://bit.ly/2RfqS3r>>. Acesso em: 10 nov. 2020.

ZIRBEL, I. Cuidado, masculinidades e responsabilidade social. *Revista Mais que Amélia*, União da Vitória, n. 7, p. 1-24, 2020. Disponível em: <<https://bit.ly/3t39cWI>>. Acesso em: 7 abr. 2021.

---

### Authors' contribution

Corrêa partially collected and analyzed data. Moura, Almeida, and Zirbel effectively participated in the critical review of the manuscript. All authors intellectually collaborated in the organization, data analysis, writing of the manuscript, and approved the final version of this work.

Received: 02/11/2021

Approved: 03/08/2021