“People are more than men”: gender and care in alcohol and other drugs

“Gente é mais que homem”: gênero e cuidados em álcool e outras drogas

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ABSTRACT

The text was developed from fragments of a research, in which the production of the field took place in the encounter with bodies organized as of men users of alcohol and other drugs and the health system, more precisely, from a Psychosocial Care Center for Alcohol and other Drugs (Centro de Atenção Psicossocial para Álcool e outras Drogas) - CAPS ad located in the capital of the smallest Brazilian state. Inspired by ethnography and cartography, the study focused on pedagogies of invention from men’s daily lives who are considered to have recurring needs for the use of alcohol and other drugs. It is a research that germinated in a process of composition of a territory of (re)existence to the biopolitical mandate of obedience of (our) bodies to their doing as doped cultural bodies participating in a democracy of subjection to the man-form, subjects of rights. From situations that involve complex negotiations between gender and sexuality pedagogies, men’s bodies and the use of alcohol and other drugs, we seek elements to think of a democracy that is an event based on the game of difference.

Keywords: Men. Alcohol and Drugs Everyday Life Pedagogies of gender and sexuality. Invention.
RESUMO

O texto foi desenvolvido a partir de fragmentos de uma pesquisa em que a produção do campo se deu no encontro com corpos organizados como de homens usuários de álcool e outras drogas, e do sistema de saúde, mais precisamente de um Centro de Atenção Psicossocial para Álcool e outras Drogas (CAPS ad), situado na capital do menor estado brasileiro. De inspiração etnográfica e cartográfica, o estudo mirou em pedagogias de invenção da vida cotidiana de homens tidos como tendo necessidades recorrentes do uso de álcool e outras drogas. Trata-se de uma pesquisa que se germinou num processo de composição de um território de (re)existência ao mandato biopolítico da obediência dos (nossos) corpos a seu fazimento como corpos dopados culturais, participantes de uma democracia da sujeição à forma-hOMEM, sujeitos de direitos. A partir de situações que envolvem complexas negociações entre pedagogias de gênero e sexualidade, corpos de homens e uso de álcool e outras drogas, buscamos elementos para pensar uma democracia que seja acontecimento a partir do jogo da diferença.

The idea was to research with men, among pedagogies of invention of daily life and drug use, to know how they experience a life, extracting elements from there to think about democracy from the difference. We scrutinized networks of care, solidarity and mutual help, inventions of themselves and of worlds, broadening the meanings of the words “man” and “health care”. We privilege the subjects’ narratives about their itinerant trajectories, the occupation of spaces and services of the public health network, in particular, a CAPS ad\(^3\), with emphasis on the paradox of, in the name of care, being produced among hygienist practices of perpetuation of survival, obedience. A government of conduct is put into action, producing obedience based on the ideal of social participation through work and regulatory gender norms that prescribe a way of “being” a man. In the friction between the organization of health services and the micropolitics of everyday life “psychological treatment, directly or indirectly, seems to be understood as a penalty” (GRANJA; MEDRADO, 2009, p. 26). But also in the name of care, other ways of thinking about life, relationships, urban spaces and health care have been produced with the itineraries of these men. “Deviations from the experience of oneself, therefore” (AQUINO, 2011, p. 205).

Within the general framework of the notion of government as an analytical operator of power relations, Foucault thought about the birth of the rationality of the modern State (2008a), as well as the emergence of (neo) liberalism (2008b), understanding them as the arts of governing. In order to manage human behavior, these arts were anchored - and still are anchored - in techniques inspired by the millenary experience of the Christian pastorate: “Western man has learned, for millennia, to consider himself a sheep among sheep”, under the leading pastors (FOUCAULT, 2008b, p. 174). “Pastoral power is undoubtedly something that we have not yet freed ourselves from” (FOUCAULT, 2008b, p. 197). The key element for conducting state and (neo) liberal conduct is to produce subjectivities that are obedient to the purposes of the power economy. Art of governing, art of making oneself obeyed. The conduct government will demand acts not only of obedience and submission, but also of manifesting the truth in the form of subjectivity. An exercise of power is created, which anchoring itself in pastoral procedures, updates the requirement that individuals not only obey, but are obliged to manifest what they are truly. That they say, that they confess, that show in their body obstinately: “this is what I am, I that obey” (FOUCAULT, 2011, p. 76). In the case of users of CAPS ad, that show in their body the dangers of disengaging the entrepreneurial morals from active life.

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3 Psychosocial Care Center for Alcohol and Other Drugs (Centro de Atenção Psicossocial para Álcool e outras Drogas).
With Foucault (2001), we remember that the body is a biopolitical reality and, with Pelbart (2013, p. 25), that the perversion of contemporary biopower is to keep it “in an intermediate zone between life and death, between the human and the inhuman: the survivor”. It is no longer a matter of making people live and letting them die; it is also not about making people die, but about “making them survive. He creates survivors. And he produces survival” (PELBART, 2013, p. 26). The research took place right there with bodies purged for hyperbolizing this direction of survival, of the “chemical domain of everyday adventures” (COUTO, 2009, p. 45), of numbness as “a way to adapt to life’s challenges in advanced capitalism” (COUTO, 2009, p. 45).

The “harmful” use of alcohol and other drugs is in recent times considered a public health problem. When economic art starts to act as a criterion for the reasonableness of conduct, under the herald of the quality of life and well-being of the population, its maintenance and increase continue to demand the destruction of the life of a portion of the population, understood as dangerous, making some lives superfluous and disposable. In the name of the population safety, some (many) individuals may die. In the contemporary biopolitical scenario, what part is this? In Duarte’s question (2009, p. 49), there is a clue: “After all, what is left to do with those individuals and peoples who refuse to assume themselves as entrepreneurs of themselves?”. The new figures of abnormality and criminality seem to be fixated on those individuals and groups who have failed or who do not assume themselves as self-entrepreneurs. In a context of hyperprevention, illness and even death are understood as personal failure, revealing deviations, the excesses committed by a body that has disregarded the rules, that has deviated from the straight path of active life towards perfect health. Based on this motto, we propose to think about the daily life of men who use alcohol and other drugs in their articulations with bodies that assume the task of ”taking care of them”, bodies organized as health workers.

To conduct demeanors: therapeutic projects are transformed into pedagogical projects

In another text (VASCONCELLOS; SEFFNER, 2015), based on the keys of understanding operated by Foucault, we point to governmentality as an economy of production of subjectivities, thinking the conduct of human demeanor as both a pedagogical and political problem; the government of conduct as developing from the start of pedagogical procedures. To form organized bodies
and governable subjects, which, today, translate themselves into entrepreneurs in tune with neoliberal rationality (according to DARDOT; LAVAL, 2016), or even to (re)form ungovernable astray, in an attempt to inscribing their demeanor in the economic model of existence, the government of conduct translates into a pedagogy of conduct.

As a government strategy, health policies and services convey institutional, therapeutic and corporal pedagogies. Policies and attention services for alcohol and other drugs are “a teaching territory” (PARAÍSO, 2011), teaching as a process that relates to the transmission of information, offer, explanation, presentation of content, knowledge, expertise and actions, concepts, skills, competences, cultures, values, ways of being and living, behaviors. But what do these services teach? What does the lack of planning and referrals teach?

Because then you start the service, implement the professionals and run for your life, arrange your emotional strategies to survive in that, understand? Be a user too and let’s live! [...] you come with the objective of developing serious work and you can’t do it, something is wrong, you know, and then you feel frustrated, right?

– And then you feel humiliated all the time. [...] The fact that we are here killing ourselves, killing ourselves, every day trying to herd cats and when he sees that it doesn’t work, someone comes from up there, from afar and says: “You are not doing your job properly”. This is all a situation of humiliation. You are suffering every day. [Focus Group4 with CAPS ad technical team, December 2008]

Blame and individualization are important instruments in taking power over subjectivities (GUATTARI; ROLNIK, 2000), and show conflict with the notions of common good, solidarity, human rights and human precariousness, in tune with democratic ideals that we stand for. The accumulation of tasks together with the requirement to make professional practices more flexible seems, therefore, to match the very functioning of (neo)liberal rationality and its policy of concentrated abandonment. On the one hand, this produces large

4 We decided to use the acronym in excerpts subsequently cited FG to endorse focus groups, maintaining the distinction of the group (GF technical team, GF users, GF professionals).

5 All excerpts from interviews and focus groups transcribed here were taken from the doctoral research from which this text is based (available at: https://lume.ufrgs.br/handle/10183/72783. Access in: June 20, 2020), and that in this article were analyzed based on different categories from those of the thesis. In all situations, we deal with ethical consent procedures.
populations of lives that do not matter; on the other, professional entrepreneurs who believe that they can solve their problems right there, when they turn the corner of the care provided, for, when they realize that they did not succeed, blaming themselves and becoming frustrated.

Along with the omnipotence of the professional self-entrepreneur, glued to the “way of being an individual”, guilt is installed: “for believing that you are enlightened, you blame yourself, understanding that you have an obligation to solve the problem” (COIMBRA; NASCIMENTO, 2007, p. 33), to then fall into frustration, apathy, tiredness. Thus, “serialized collective life can become a desperate sadness for both patients and ‘technicians’” (GUATTARI, 2000, p. 189). “A point that will never be stressed enough is that doctors, nurses, technicians in general, psychiatrists and psychologists are equally taken over by the current state of affairs, where patients and employees literally die of boredom” (GUATTARI, 2000, p 199), numb survivors. At CAPS ad, professionals drenched in boredom meet users who are also bored...

The service is shaped in a way that it seems that by entering the door you are already in treatment. No matter what you did there, going to CAPS is already the treatment. [FG technical team, January 2012]

Here’s the thing: many brothers here live on the street and can’t get rid of drugs. That’s why they discriminate a lot. For us, it’s a piece of stump, I just watch from a distance. [...] How is it that a technician [...] said it’s awful to wake up at six o’clock in the morning to come and take care of people who spent the night drinking and using drugs? What is it, boy? [...] What workshop is this? It’s just small talk. They make the user play like a child. If the guy came here and had the happiness of doing something, some “computaria”, drama, as it had happened already. But no. They keep staring at each other’s faces. A bunch of zombies. I’m not a zombie. Got better, pretty? I’m getting worse, actually [GF users, January 2012].

“Going to CAPS is already the treatment”, a way of governing and educating bodies in order to guarantee minimum conditions to enter the market game, spending a minimum of resources and investments. Those who have failed to make their bodies and their lives business temples need to be content with that minimum, going to CAPS, having that place available seems to be sufficient. And so the service reiterates the logic of survival and numbness, it finds itself waning along with the boredom of professionals and users, “a bunch of zombies”. Without “computaria” (do things with the computer), at the mercy of neoliberal
rationality, tutored-user-bodies, like school-child-bodies, are losing their strength and resistance, as long as they no longer have a childish life (KOHAN, 2007).

We are talking about making tutelage-infantile bodies, which seem to be content with the ‘fate’ that going to CAPS alone is enough. “A day care center” [FG professionals, December 2012], a CAPS-day care center. Educating infantilizing, when infantilizing seems to function as an instrument of empowerment of subjectivities (GUATTARI; ROLNIK, 2000). Glued to infantilization, health care processes also teach silence and passivity. Users spend the day waiting to be called on to activities, which, for the most part, seem to be formatted, planned without taking into account the needs and desires pointed out by them. ”Drug users do not want anything other than to annihilate and annihilate themselves, they do not adhere to treatment”. And so, CAPS seems to oscillate between a restricted and poorly planned offer of workshops and the requirement of ”andatory occupation”, of users “participation in the service activities” grid, under penalty of alleging that they are not accepting the treatment, without taking into account the constant complaints, both from users and professionals, from automation, from meaninglessness, from boredom of activities. What does a therapeutic project based on the rescue of social ties for the family, for work, for the production of citizenship and autonomy teach to those who care and those who are cared for?

– CAPS ad strengthened me and revived me because I was a nobody. I was a nobody and it took me out of the deep end. [...] and even today I am here and I feel like a man. [...] I was rubbish and today I am a man because I was a downed person. Overthrown, totally.
– [...] everything I know, everything I learned, through being a man, I learned within CAPS. Being a citizen, running after my rights.
– [...] in the day-to-day of this conversation with each of us, they will help us to get up, to feel the same, the citizen who was an ancestor.
– [...] from the garbage to the man, what are you getting out of the garbage? What characteristics do I need to be what you call a man? Responsibility.
– Self-esteem, right?
– Will power.
– Get it together.
[GF users, December 2008]

The participating citizen, the critical individual, aware of their rights and duties, responsible for their body and self-vigilant of their conduct are “avatars
that populate the territories of contemporary pedagogies” (CORAZZA; SILVA, 2003, p. 11), concerned with training self-employed individuals, business units that self-conduct their conduct and that of others. It seems that, in CAPS ad, pedagogies that teach “citizenship of subjection” are triggered, from which “regulated autonomy” is produced (CARVALHO, 2009), in which the guarantee of rights is coupled with the control of conduct. In other words, the citizenship condition is conquered – making users of CAPS ad, through the pedagogies operated there, ‘go back to being men’, “from trash to man”.

The functioning of the CAPS ad seems to be in line with the expansion of a police-company subjectivity, that is, the police function inscribed in the conduct of citizens. Caregiving practices seem to operate as conduct inspection practices, responsible for organizing the bodies of users, making them adhere to the manual of good conduct in favor of the market and the State. In the constant suspicion of the body, a surface where marks, suffering, and pain can be found because the prescriptions have not been strictly followed, professionals and users become experts, police controllers. “It’s only up to you to stop using or at least reduce it” and “You have to want to be treated”, are bioidentity self-help and self-inspection sentences usually delivered in the service, which are usually part of the approach.

When asked about the objectives of a CAPS, professionals and users tend to promptly answer, almost automatically: “to produce autonomy”. In ad care field, autonomy production seems to have been transformed into a slogan, a mental health cliché, a “just idea” articulated to the neoliberal ideology of self-entrepreneurship, an idea that dictates modes of perception, understanding and performance, barring thought (DELEUZE, 1992). In order to have autonomy, it is necessary to be responsible, that is, the responsibility of users – that is, those who failed to prevent health risks – is part of the therapeutic project, often translated into blame (CASTIEL, 2011), for their choices and risk behaviors. It is necessary to intervene, making them responsible.

In this same direction, some ‘slogans’, some ways of using harm reduction, adopted by the “Política Nacional de Atenção Integral aos Usuários de Álcool e outras Drogas” (BRASIL, 2003), also seem to agree with the logic of self-entrepreneurship: accountability through the use of drugs, reduce damage and have the right to use and dispose of your own body, as long as you use it in a way that does not endanger your life or that of those around you, discussion about healthier and more responsible ways of use, “drinking responsibly”, gaining access to information on less harmful ways of using alcohol, whereby “the subject is no longer passive, is responsible for the use that he makes, for his body”.

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“I see myself as a drugs use supporter” [professional in the Harm Reduction Project team, December 2012]. A drugs use supporter seems to be situated precisely in the game between individual freedoms and security strategies. Let us return here to some questions: Foucault (2008b, p. 61) points out that (neo)liberal governmentality is situated “in the complex game between individual and collective interests, between the balance of the market and the regime of public power, between fundamental rights and independence of the governed”. Foucault (2008b) complements the reasoning by asking whether a market economy can provide principles for thinking about the state and life in democracy. Governmental practices ensure that the mechanics of interests do not incur risks and dangers for individuals or the population. This is how the combination of security strategies seems to occur, along with the manufacture of freedoms. Body health and citizenship seem to function as an “effective and efficient way to promote easy driving based on obedience” (Passetti, 2003, p. 27). Likewise, summoned by the objective of governing the conduct, care practices often seem to be coupled with state-police ‘care’ and ‘resistance’ movements to be restricted to demands and demands made by the population for a more Welfare state, that is, through greater state intervention in their lives.

Each and every one of us, organized bodies, governed and governable bodies, responsible citizens, we owe to the State and the market. First, we must be individualized, identified, organized, unique, subjected, healthy. We must be delimited groups and communities, whose recognition also comes through the struggle for identity. Identities, even dissidents, must be recognized – and, thus, also come sovereign – also “resistant” bodies must build a homogeneous “face”. Rights and duties: identity, delimitation, debugging, control. We must be individual and social bodies that march with the State and the market.

“At CAPS, I became a man again”. The man, man of reason, possessed of an undivided and sovereign identity, male, white, adult, heterosexual, hardworking, virile, ‘full-bodied’, healthy, ‘head’ of a family that has a name to watch over and gives that name to his family, who has properties and assets to honor and who honors that name, who controls and dominates his “female”, who only he betrays or can betray her, who has self-control over his usage of drugs, who uses alcohol and other drugs responsibly, who has the power of consumption, indebtedness, credit card, who has a home, a fixed address, all of which gives him a place of power and authority as a universal subject: humanity. Deleuze (1992) states that this Man-form emerges in the 19th century and is reissued in contemporary contexts: “the form of man, the man-form, is a complex and changing historical mold” (Pebbart, 2003a, p. 32). We tend to stick to it, based on it, we subject ourselves. Fixation, identity, form, subjective form, formatting of bodies...
The CAPS territory: teaching as a body format and (un) learning as its opening

CAPS ad works as an educational locus that invests in the production of certain subjects and bodies. Based on the Man form, its institutional, therapeutic and corporal project aims to produce good citizens, caregivers of themselves, responsible and autonomous. The service seems to fulfill the role of minister-police in the government of conduct, intervening in the organization of bodies and calling them to participate in society. For the project to work, users and professionals must believe, collaborate, participate, consume their time, space, life and bodies in such a way, until they lead to tiredness, apathy, survival. At that moment, they seem to be ready to be policemen of themselves: survivals.

As if conforming a flawed act, in a harm reduction wheel carried out in a cemetery, a space in which some users - undead, expendable and capturable naked lives - make their home, said “This is a lack of unemployment”, which shows the following clue: instead of being consistent with “complaints” about lack of employment and education, it is necessary to affirm that the government project aims, through education, work and health, to attach bodies to identities, forms and limits, to a homogeneous and ideal face: humanity. In this sense, CAPS was pointed out as a teaching territory whose objective is to format bodies, institutional and therapeutic practices function as pedagogies, corporal pedagogies.

The body appears as a political-cultural construct, and doing in health, as a pedagogical instance through which marks are imprinted on the bodies, organizing them. In this text, we work with the idea that bodies tend towards the singular, that is, they are built within specific cultures, submitted to certain corporal pedagogies. Therefore, the body is thought to be produced by the effects of generation (a certain age, or more than one age, that biological, that which others attribute to it, etc.); a certain combination of gender (male and female, but not exclusively, that is, not simply to classify the body as male or female, but to see in it the effects of the relational history of genders, which leaves male or female marks, if we think only about two genres); a certain willingness to exercise sexuality (usually called sexual orientation, the effects of that body’s history in relation to the theme of sexuality are sought); inscribed in a religion (adherence to religions or the construction of specific religious references, through the combination of different elements, marks the bodies); nation, region, disability or not etc., all of which gives it marks, from which it is valued.

However, bodies can always do more than they are worth! In addition to a political-cultural construct, bodies are political-ethical constructions. More
than just subject to submission to certain cultural pedagogies and to the identity addiction that they organize, they mark them, teach them ‘good’ behaviors, evaluate their value, bodies tend to be singularized. Situated in cracks in the power game, bodies abandon obedient adherence to the subjective forms prescribed by such pedagogies, refuse what they are and rehearse the invention of other ways of existing, opening themselves up to practices other than self-guided bio-identities by subjection to a ‘self’ that, today, is expressed in a ‘body’, conforming externalized subjectivities (FOUCAULT, 2010; GUATTARI; ROLNIK, 2000; ORTEGA, 2008).

Bodies blur prescriptions, they invent themselves, they go beyond identity markers, bodies always fall short and go beyond what political-cultural pedagogies prescribe. Some bodies, some “states”, some body movements are not subjected to naming, training, identification. Between the limits of the organic and language, the “other” of bodies is born, intensive bodies germinated by lives that insist on expanding, by inviting a life that can do more, at least more than this: life doomed to a body scanned, circumscribed, glued to the political maps of language, used to normalization, the incorporation of good conducts put into action and reiterated by political-cultural pedagogies. From the perspective proposed here, when analyzing a body, it is not looking for an origin there, but the formation of a body as an effect of the history of its time, in its place of inscription, marks, tracks, traces, which are precisely configuring this thing called the body. And what is called a body always leaks, always can do more, is an openness of not nameable, unthinkable, unpredictable possibilities. This possibility of the body-event is seen in the context of freedom practices, which, despite everything, we still insist on calling democratic:

It is enough to say about the event that it is possible, because it only occurs if it is confused with nothing and abolishes the real to which it intends. There is only possible existence. [...] the set of the possible is confused with Nothing, of which each thing is a modification. [...] you play with everything possible without doing it (DELEUZE, 2010, p. 69-70).

It is at the confluence of such positions that the inquiry about the processes that organize bodies and form subjects (professionals and users) can make sense. Organized bodies, subjected subjects, survival, is that it?

*But what are you going to rescue? Have you ever had that? Will you rescue what you have never had? What citizenship is this? Is it something that*
you had or that people talk about so much that you believe you lost it? For some users, being a man again means going back to work, having a relationship with the family, being with girls, having sex that they hadn’t been having... Or the community around him to look back at him as a citizen. To return, what do they rescue? What does each user understand by citizenship? The slogan work record booklet, minimum wage, the right to vote, birth certificate, I am a citizen. Is being a citizen just that? You exist, so you are a citizen, but what do you want? What is your life plan? I want to be alive, but how? Being alive is too minimum [Technical GF, December 2012].

But right there along with processes that make this service a territory for the organization of bodies of professionals and users, prescribing forms of action, learning escapes the government of conduct, creating possibilities of singularization, of refusal to conduct ways obstinate for the manufacture of faces and fixation of institutional functions and identities. Forking this search for the homogeneous that guides teaching, bodies experience learning processes that enable their opening, bodies learn to unlearn. In this sense, Paraíso (2011, p. 147) points out that “[...] learning is opening and remaking bodies, managing creative acts, remaking life, finding the difference of each one and following a path that still has not been covered. To learn is to open up to the experience with “another one”, with “others”, with something that arouses desire”, in an environment of personal freedoms and social rights. The CAPS ad territory is both for teaching and organizing bodies, as well as a territory where one can learn to unlearn, to denature a long history of canned learning about care processes.

But what is (un)learned in the CAPS ad territory? What do the clinic, the bodies, the practices, professionals and users unlearn when they are exposed to the encounter with moving forces, when they expose their bodies to arrows in the world? Body events that preserved, at least for an instant, the ability to be affected, “if not through permeability, passivity, even weakness” (PELBART, 2013, p. 31). Here is an attempt to endure strengths that were up to this weakness...

1) “Are you a worker or a patient?”. Does it matter? In times of celebrations, such as Carnival and São João, the inhabitants of CAPS ad go out to the street to meet people from the neighborhood, make themselves present, the invisibles show themselves on the blocks and in the squares, experiencing the mestizo joy of, at least for a few moments, undoing institutional identities and restricting drug addiction subjectivity. “To move towards a desegregation of the attendant-attended relations as well as the internal relations to the staff”
(GUATTARI, 2000, p. 187). Walking also towards a desegregation of normal-abnormal relations in the city space seems to be a remedy for the production of other modes of subjectivation and of relation to discrepancy and variance.

2) “When I got here, I used to drink countless liters of cachaca per day, now I only drink one. What else would you want?”. A researcher, when entering the service in one of the first times, still with fear in her legs, is received by the hand by disabled user of the legs, with edema apparently arising from the abusive and continuous use of alcohol, considered as ‘problematic’: one who does not adhere to the workshops, which have no documentation and, therefore, do not generate Authorization for High Cost Procedure, the one who appears constantly drunk, the one who ‘gives trouble’. With him, she meets, she bonds, they affect one another. Between them there is a policy of friendship in institutional interstices inhabited precisely by the encounter between bodies. Potency of affectation, a friendship that was not qualified, “but qualifying, generating qualities” (PASSOS; BENEVIDES, 2006, p. 14), a friendship understood as interstitial space, “space between two, [...]”. He is the one who offers to accompany her on walks in the city, meeting other users on the street, in their homes.

3) Users suggest that harm reduction workshops be held in places in the city where friends who do not come to work are found. The first one is held in a cemetery near the CAPS ad, where many users usually live. Through the workshop, the clinic then occupies the space on the street, where the approach does not need to require not using drugs. It is also worth asking what one (un) learns from gender norms, when it is observed that a user maintains affective and sexual relationships with several other users and that this, for them and for her, is a possible way of living together, it is the experienced form of relationship and care between people?

4) “They killed two of my kids”. In another circle - alcoholics in a square where they have been meeting since the 1980s -, a user who had jumped over the service wall a few years ago with cachaca, on which at the time intervention was requested, since it was not ‘linked’ to the CAPS ad and only came to “disturb”, says, about to cry, about how he missed me6 and some professionals who are no longer in the CAPS ad. He also talks about his suffering for having his children murdered and for not being able to teach martial arts classes because of his illiteracy. What made him go back to “cachaca”? This same user also speaks of the fear of death, as they had just lost a friend who frequented the square, and about surviving by drinking... “Eu bebo sim, estou vivendo. Tem gente que não bebe, está morrendo”7 (CARDOSO, 1972).

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6 One of the authors of the text who was already a service worker.
7 “I do drink and keep living. Some people don’t drink and are dying.”
Stop drinking is a death certificate. There are people here who can’t stop drinking. He stopped for good, his brother cut his drink supply at once and then he had a heart attack. It wouldn’t be different. [...] As the doctors say, you have to grow, right? [...] He’s already used to alcohol as if it were a medicine [GF users, December 2008].

What is (un)learned by observing men who frequent a square and have been drinking together since the 1980s, maintaining bonds of friendship and care between them?

You will go to heaven, stay here talking to booze drinkers. There are some pretty girls like you who, I think because of fear, surround the square, don’t even say good morning, think that we are animals [GF in the square, with users and former users of CAPS ad, December 2012].

5) What is (un)learned when “booze drinkers” and “pretties” meet to ‘undo what has already been done’, the pretty babes talking that they have learned to be afraid of ”biriteiros” (people who drink a lot of booze) and the “biriteiros” saying that maybe the fact of urinating and defecating right there in the square is unpleasant for residents and amplifies the distance even more? “There are people in front of there, there are respectful mothers, then I deny to urinate, then I deny to do anything, and take things away, but people pass by in front of there, after all that is a square”.

6) In a scenario in which it is still customary to demand abstinence for users to attend the service, a technician makes an intervention – “eccentric” in the eyes of many professionals who are commenting on it – with a user who used to arrive at CAPS ad many times sometimes intoxicated, hindering the development of activities and bothering professionals and users. This technician calls this user to a room and invites him to do a body relaxation, the user accepts and, led to pay attention to parts of his body, sleeps for a few hours. Some technicians complain / find the approach strange...

7) The bond produced on a daily basis between people who, at least for a few moments, forget – that active forgetting, in the Nietzschean sense (1998) – of their institutional identities, of their clearly demarcated places and mix; they forget that the “other” is dangerous, it is to be hated or rescued and they stop, in that period of time, fighting for a social insertion forever postponed by a reformed “other” in a society that expels and despises them and pass, in
a moment of “loss of world”, opening up other networks, composing other worlds, other lives, other possibilities for living together. We are talking about experimenting with a unique way of linking, which produces alliances without the measure of homogenization and unification:

[...] it’s a friendship, for me to feel a certain freedom, right? Even with my technique, if I didn’t reach the point of having a certain freedom with her, I would never speak certain words to her, but when you have a certain freedom, a certain friendship, a bond of friendship, the person speaks.

[FG RD team, December 2012]

8) In the CAPS ad, what is (un)learned from the entry of many crack users, most of them young and who do not stay for long, in a service in which the majority were men, adults and the elderly, alcohol users who used to (and still do) attend the service for years?

Sometimes, with crack users, it is exchanging three words and giving the idea. It has to be a quick thing, an approach that accompanies the instant of that body there. Space-time is different. A month on the farm feels like forever. [...] An immediate approach makes all the difference. It is not something that can be expected and the logic of health services, protocol, takes a long time, to evaluate, to go through an entire team [GF with RD team, December 2012].

“Exchange three words”. “In these verbal experiments, it is also necessary to exercise ‘discard’ (another verb!) of what has already been given about the clinic, putting it in analysis” (PASSOS; BENEVIDES, 2006, p. 14).

When the body, including care, happens

The highlighted situations make up this text because they seem to mark this opening of the body of care itself in ad. They speak of smaller, circumstantial, singular, everyday montages and experiments. They talk about care practices that are woven in the passages, that are made without a fixed location, flying
settings. A clinic dedicated to meetings, which is woven “always in relation to a landscape of the city, of the subject, of subjectivity, of the environment, of the clinic itself” (ARAÚJO, 2006, p. 31-32). They seem to say of airing, winds brought by new relationships woven into a space that tends to be warm and tedious. Many of these microsociological notes were invented and made available within the Anti-Asylum Fight movement as a way of facing the asylum model and, thus, producing “care in freedom”. The point is that, when the movement becomes institutionalized, such notes tend to be transmuted into institutional forms.

There, in the CAPS ad, variations emerge, marks of uniqueness to the smallest gestures, to the minimum encounters that come from such an institutional context. In coexistence, in the affectation between bodies, in “not knowing what to do”, other modes of care emerge, destabilizing the “black and white” of protocol therapeutic-institutional landscapes, coloring them, allowing the emergence of other forms of life for the bodies and the care they produce:

[...] Reciprocal care. An interference zone. Even if I am a provider of care, what comes from there also produces, even changes the way of care. On the edge of a zone of existence, of the existence of certain forms of care, I see self-created, differentiated care that interferes with our standardized care and then we start to reflect on our practices and sometimes on our lives [GF with RD team, December 2012].

“On the margins of an area of existence, self-care is created”, other practices of self are organized than those that give rise to subjection to certain forms of power. As Foucault (2006, p. 306) indicates, there seems to be “no other point of resistance to power than in the relationship between you and yourself”. Right there, “in the folds of power, one finds care and concern for oneself. In the folds of a governed and governmentalized society, an ethics of self-care can be the path of resistance” (GALLO, 2011, p. 389). “The ethics of self-care is the taking of governmentality in another aspect: the focus of the government of others changes to the government of the self” (GALLO, 2011, p. 373). In this same direction, Senellart (2008) states that Foucault, weaving an articulation between politics and ethics, gives a third meaning to the word subject. In addition to the two meanings already mentioned at the beginning of this chapter – one subject subjected to the other through dependence and control and subject to his own identity through certain practices of self – from the study of the classical Greeks, Foucault (2006, p. 618) thinks “a true subject, no longer
in the sense of subjection, but of subjectification”. The author understands the subject as a drift, as an effect, a product of a subjectivation, not only as an effect of the truth of power, but with the power of truth: “the subject is the effect of subjectivation processes. The subject is the effect of an address. The subject is the effect of a positioning. The subject is the effect of the story. The subject is the effect of difference. The subject is a derivation. The subject is a fiction. The subject is an effect.” (CORAZZA; SILVA, 2003, p. 11).

A subject with the power to invent himself through self-practice, not as domination techniques, but as exercises that he does on himself, putting himself to the test, understanding life as proof, as a space for experimentation, a place of possible self-transformation. Foucault points, therefore, to a subject that emerges from resistance to power and the fascination of truth in relations of knowledge. In other words, a notion of subject is being constructed not only “as the subjected subject, but the singularity that is affirmed in the resistance to power – […] the counter-conduct” (SENELLART, 2008, p. 511). Self-government through the production of other self-practices that give rise to other subjectivities, which derail ways of being already given, formatted - this seems to be a fruitful path of resistance to biopower. Tests of existence, (re)existences of bodies, care and institutional life, insurgencies of a care for the self that is woven in the relationship with the other, care as proof, as an experience that makes the world “an occasion for self-transformation, the place of emergence of a subjectivity” (GROS, 2006, p. 635). Other forms of life, plants in arid hinterland soils, spring up inside the CAPS...

“At CAPS, I returned to being a man, a good citizen, taking care of myself, a worker inserted in society, I recovered my health and citizenship”. “At CAPS, I promote ‘the agency of myself as a policeman for life on the job, acting in public policies’” (PASSETTI, 2011, p. 134). “At CAPS, I survive”. The survivors’ survival, right there the resistance seems to jump: and “if we understand the resistance movements as an affirmation of something and not as the negation or reaction to something - a re-existence?” (COIMBRA; LEITÃO, 2009, p. 75). The option to listen to the reports of men made us dialogue here with some concepts of gender studies. But it also puts us in a possibility of dialogue with the literature about the productions of masculinities, the one that is centrally concerned with the connections between ways of being a man, masculinities and virility. In the scope of this article, it was not possible to walk this path, which implies analyzing the social, cultural and political construction of these relationships between men and masculinities, both among health professionals and among service users. This topic occupies our future research interest.

In tiredness, in apathy, in apparent paralysis, in wear, reserves of life and death appear transfiguring tired bodies into exhausted bodies that dare to aim
at the unnamable and the impossible. A body that makes use of a notebook, a body that makes research by making itself known to an infamous wanderer, a body made with the wind (VASCONCELOS; SEFFNER, 2015), agency between bodies of professionals and users that blur such forms of identity and institutional life forms... To manage means precisely “to be in the middle, on the line of encounter between two worlds. Agreeing [...] is creating something that is neither in you nor in the other, but between the two, in this common, impersonal and shareable space-time that all collective agency reveals” (ESCÓSSIA, 2009, p. 692). The only unit of agency “is that of co-operation, linking state of affairs, state of bodies and enunciated in neighborhood relations with mobile and always displaced limits” (NEVES; HECKERT, 2010, p. 167). Making the body is also, in this sense, producing a common understanding it as “a reservoir of singularities in continuous variation” (PELBART, 2003b, p. 30), a “sharing of a separation given by the singularity” (PELBART, 2003b, p. 141). “A common is always doing, expanding, excess” (COCCO, 2009, p. 199).

As if, trying to occupy time lapses in small spaces of destitution of identities and institutional functions, bodies give rise to other adventures, other gestures, movements of refusal to subject the government to individualization, new ways of existence are formed, new ways of relations between these bodies, new forms of life and housing in that space, new modes of care, an “other” from the body of professionals and users, an “other” from the protocol care body, an “other” from the CAPS ad body. Breathes of life. Even where everything seemed to be gone, bodies desire more than the apathy of a codified survival, bodies desire a life as an adventure without compasses, wandering, deviation, invention, because people are meant to live and not just being alive... “Being a man, if it isn’t based on social correspondence. To be a man, to be a person. And people are more than men” [GF with RD team, December 2012]. Passionate people who crowd the streets with the joy of making themselves in lands of sleepy melodies, right there where our body, as a living being, meets the moving forces of a living world in fabulation (COUTO, 2016). Right there where the world and the whole body fable, we rehearse for a walk.

There is something in the world that forces you to think. This something is the object of a fundamental encounter and not of a recognition (DELEUZE, 2006, p. 203, emphasis added).

8 To paraphrase Caetano Veloso, in the song Gente on the album Bicho from 1977.
REFERENCES


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