

## “To put an end to this damned thing”: rebutting denialism strategies performed by People in Situational Homelessness during the COVID-19 pandemics (Brazil)

“Vamos acabar com esse negócio já”: estratégias de enfrentamento aos negacionismos elaboradas pela População em Situação de Rua durante a pandemia da COVID-19 (Brasil)

DOI: <https://doi.org/10.4000/aa.11100>

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In this article we highlight some responses of collective resistance by members of the National Movement of People in Situational Homelessness (MNPR) in the state of Rio Grande do Norte (Brazil), during the COVID-19 pandemics. In this context, this collective had to face a deep state of crisis, aggravated during the pandemic and as a result of its effects. During the months of July 2020 to August 2022, through a project funded by the National Research Council (CNPQ), we conducted participatory research within vulnerable social groups in order to help them strengthen their social and community organization in the face of the pandemics by analyzing and producing knowledge. The chosen ethnographic approach took place through virtual meetings, telephone contacts and a chat flow during the period in *WhatsApp* groups. As a result, we contrasted the potent local struggles of this movement with the denialist, negligent and pseudo-scientific attitudes of the Federal Government, which strengthened a genocidal process based on dehumanizing policies of neoliberal nature. We note that, even when the population mentioned dealt with the effects of a pandemic potentiated by structural racism and social exclusion, they organized creative coping strategies, and exemplified, through pedagogies of struggle, growing paths for the practice of citizen science.

Neste artigo ressaltamos algumas respostas de resistência coletiva por parte de integrantes do Movimento Nacional da População em Situação de Rua (MNPR) no estado do Rio Grande do Norte (Brasil), durante a pandemia da COVID-19. Nesse contexto, tal coletivo enfrentou um profundo estado de crise, agravado durante a pandemia e em decorrência dos seus efeitos. Durante os meses de julho de 2020 a agosto de 2022, por meio de um projeto financiado pelo Conselho Nacional de Pesquisa (CNPQ), realizamos um trabalho de pesquisa participativa junto a grupos sociais vulnerabilizados com fins de fortalecermos a organização social e comunitária frente à pandemia através da análise e produção de conhecimentos vinculada a ela. A aproximação etnográfica realizou-se mediante reuniões virtuais, contatos telefônicos e fluxo de chat em grupos de *WhatsApp* durante todo o período. Como resultado, contrastamos as lutas locais deste movimento com as atitudes negacionistas, negligentes e pseudocientíficas do Governo Federal, que fortaleceu um processo de genocídio a partir de políticas desumanizantes de cunho neoliberal. Observamos que, ainda quando a população mencionada lidou com os efeitos de uma pandemia potencializados pelo racismo estrutural e a exclusão social, ela organizou estratégias criativas de enfrentamento aos desafios e exemplificou, por intermédio de pedagogias de luta, caminhos aprimorados em prol de uma ciência cidadã.

## Introduction

This text presents selected events exposing the state negligence during the COVID-19 pandemics in Northeastern Brazil, as well as discrimination and exclusion narratives that, towards the epidemics and the vaccine denialism, led to explicit necropolitical policies towards more vulnerable, minorized communities, with a focus on people in situation of homelessness. It also registers some narratives and experiences related to the resilience and creativity of the National Movement of People in Situational Homelessness – Movimento Nacional de Pessoas em Situação de Rua –, a collective that, despite facing discrimination and exclusion, was able to articulate the access of people in situation of homelessness to vaccines and health education. This article also emphasizes the importance of a situated concept of “best practices” during epidemics, where health education is based on cultural competence, adjusted to the realities of each collective, and aware of how the multi-dimensional aspects of collective health interact in each specific case.

In the article, we introduce the problematic of the genocidal effects of the COVID-19 pandemics in Northeastern Brazil framing a specific population - people that have been called “homeless” but are here defined as “people in a situation of homelessness”. The choice of this denomination has the imprint of a political-epistemological choice, and is in tune with the way that activists from the National Movement of People in Situational Homelessness – Movimento Nacional de Pessoas em Situação de Rua – call themselves, for a number of reasons that will be soon explained. In a second place, we state some methodological notes defining the collaborative path that has been followed towards building this participatory, citizen science research linking anthropology, social psychology, collective health and popular education. In a third place, we select some narrative strategies from the movement showing how creative strategies – such as the use of the traditional oral poetry called *cordel* in public health campaign strategies – boosted resilience and promoted alliances between the movement and other key social actors, such as the universities, democratic councils and some instances of the health field. On a fourth place, we contextualize the narrative landscape at the time by analyzing media narratives related to the ruling government, framing this issue back in the discussion of bolsonarismo, the denialism of the COVID-19 pandemics, and its unambiguous link with eugenics and necropolitics.

“To put an end to this damned thing”: as it is stated in the creative production of oral poetry from the collective of People in Situational Homelessness registered in the ethnographical section of this article, we present here some itineraries of anxiety, despair, but also hope and action registered during the COVID-19 pandemics in Northeastern Brazil. Since March 2020, humanity has been experiencing one of its greatest challenges of the last centuries. Social scientists, physicians, and epidemiologists have been intensely discussing the possible solutions to such complex scenarios. The global community has joined the constant monitoring of cases and with a load of more or less chaotic new information produced through the Internet. The human experience is buried under the “new normality” of In-

ternet data, while bio-necro-techno-political devices replace our citizenship with algorithms (García Canclini 2020), stripping us of spirituality (Mbembe 2020), constantly surveilling us, and subjugating us to the most nefarious forms of numerical capitalism (Gil 2020). Along with data control, the globalized discourse of biomedical scientific authoritarianism is configured as a risk to the autonomy, dignity, and rights of people and communities in our democratic societies where such plural cultures coexist.

In the Brazilian case, the landscape becomes even more complex, as the pandemic triggered a new crisis in the highest spheres of political power: added to the imperious race to build vaccines and medicines are the bizarre particularities of necropolitics in post-truth contexts (Mbembe 2020), which have fed the foundations of long-standing structural racism in this society (Almeida 2019). In this scenario, the very existence of the disease was denied, minimized, and even derided by the spaces of national executive power. Taking advantage of the Gramscian differentiation between hegemony and subalternity (Gramsci 1973) to think about the production of spaces, disputes, and ideological consensus within contemporary societies, we will call the scenarios described above as hegemonic spaces of information production in front of the pandemic, as opposed to counterhegemonic spaces of information production in front of the pandemic. The last space can be characterized by sanitarianism and the teaching, research, and intervention work coming from technical and university institutions linked to the production of scientific knowledge.

Denialism, in the field of knowledge production, tends to relativize scientific consensus as “one more possible truth”, and subject to arbitrary choices (Cesarino 2021). After the emergence of modern democracies, it has been found predominantly in authoritarian historical contexts (Adorno, Frenkel-Brunswik, Levinson, and Sanford 1950). For denialists and authoritarians, the social product of science do not exist by themselves: they appear intrinsically linked to the “politics of forgetting” nurtured by historical revisionisms (Arns 1985), which have denied the capacity of history to denounce the consensus of truth about systematic violations of human rights. In this sense, through the eugenic proposals of Social Darwinism (Eriksen and Nielsen 2001), denialists often appear to be embraced by the political and economic doctrine of neoliberalism, which points to a violent “every man for himself” in the face of the laws of the market.

In this second decade of the 21st century, denialisms (a word which we prefer to treat in a plural way because of its multiple dimensions) have arrived once again to dispense with reflection on human mourning, struggle, pain, and suffering in a systematic training of socially programmed indifference and inattention (Herzfeld 1992), in contexts of marginalization and systematic social unprotection (Mbembe 2020).

As a result of these positions and policies, the growth rate of the transmission of COVID-19 in the country has been disproportionate to the rest of the world, demonstrating that Brazil has had some of the worst national management in the face of the pandemic in the global context, which has aggravated the situation

of the Unified Health System, as the worst crisis in its history (Da Silva and Pena 2021). In view of this, the reading of alternative media and linked to the scientific production of national and local educational institutions, which guided to simple and non-pharmacological measures, such as social distancing, were fundamental to stop this negative trend (Ackerman and Castiel 2021). But how did the Population in Situational Homelessness become a part of this initiative?

First, we would like to narrow down a fundamental concept we are using in this article. In its context of origin – Brazilian Portuguese – and for its use in Brazil, the referred concept is “população em situação de rua”. This is a relatively recent, and a very significant label, which shows a political positioning of this movement in the country, defined by years of discussion and maturation of concepts since its birth in 2000 (MNPR-GO, 2000) and through many meetings all over the country. The idea of something “situational” [“em situação”] present in this label helps to define the importance of taking the fact of living in the streets as: a) a contingent one; b) a temporal one, and c) a not desired one. This proposition questions any previous possible views related to the naturalization of people who live in the streets: contrary to the most common in Brazil use of the “resident at the streets” (“morador de rua”), they are in the streets because they have been excluded from housing, but they do not belong to the streets.

A wider conceptual review of this discussion can be found at Lucio *et al.* (2009), where the difficulty of internationally establishing an unambiguous definition for this collective is pointed out. Each country has developed its own, contextual meaning (Thelen *apud* Lucio *et al.*, 2009). In this account, authors mention that probably the most effective attempt would be “to etymologically deconstruct the expressions ‘sem-abrigo’ (in Portuguese) or ‘sans-abri’ (in French)”. In both cases, the morphological construction of the terms is the same: by combining two words, the preposition “sem” or “sans”, meaning “without” or “excluded from”, and the noun abrigo or abri, meaning “shelter” or “house”.

Those expressions have similarities with the word “homeless” in English. In Spain and most Latin American countries, the most commonly used terms are sin techo (“without a roof”), and de la calle (“from the streets”). In Finland, the older word koditon was replaced by asunnoton, which is similar to the term “homeless”. The former word koditon assumes that this population would have “no established relationships – no one to take care of them” (Edgar *et al. apud* Lucio *et al.* 2009). The same conceptual change happened in Norway, where the discussion went from the term hjemløshet (“homelessness”) to bostedsløshet (“dwellinglessness”), and from this to UFB – an acronym for Uten Fast Bolig, meaning “no permanent residence”. We celebrate those discussions, as we understand they are expressive of significant changing views from the scientific community and public policies towards this population.

We can observe that an important amount of knowledge production and dissemination transmitted adequate information in a way that we could call – without a certain irony – “well intentioned” through official institutions, especially international organizations as the World Health Organization, the Pan American

Health Organization, and the United Nations through several reprises on the internet. However, from a local perspective, a lack of socio-cultural competence (Kleinman and Benson 2006) in these campaigns appeared as a powerful barrier to health communication. An example of these guidelines that earned the indignation of people who are an active part of the Population in Situational Homelessness was the “stay home!” as a universal care guideline emerging from global health campaigns (MPPR, 18/06/2020). What kind of public health is this that intends to universalize the very existence of homes for collectives that were forced to live in the marquees of the cities?

In this sense, barriers for this population were multiple: on one hand, the hegemonic discourse elaborated by the national executive power – especially in the figure of the President of the Republic – trivialized the multiple sufferings caused by the pandemic and normalized the deaths – especially of the elderly, one of the groups most affected by the disease – as “inevitable, inescapable, things of nature”. On the other hand, the counter-hegemonic discourses of sanitarians committed to evidence-based scientific dissemination did not consider the contexts of reception of scientific information, as important as the very contexts of its production (Monteiro *et al.* 2019).

We believe working with people from social movements, whether within or beyond the pandemic context, requires, first of all, the recognition of the specificity of their reality. We observed that during the pandemic, the lack of access to a basic right, such as housing, brought with it the lack of access to the right to health care itself. It was impossible to think about a “health dimension” as isolated from the other rights: shelter, food, education, and science education. Just as the prescription of “stay at home” launched by counter-hegemonic sanitarian campaigns in global and national scale was met with a visible collective indignation, the paths to promoting other forms of non-pharmacological prevention – as washing hands or using masks – also seemed a difficult challenge. A context necessary for disease prevention, such as hand and body hygiene, the use of masks and alcohol, good nutrition, among others, appear completely linked to the possibility of having a safe and comfortable place to live.

The management of the pandemics in Brazil was made in the context of a previous understanding of society and vulnerable populations: the discourse of bolsonarism. Bolsonarism is a type of politics that massively emerged in the 2018’s, after the election of actual far-right president Jair Bolsonaro. The survival of the fittest (Spencer 1885), a characteristic of the Decimonian proposal of Social Darwinism, is being revitalized and remodeled in the current context. Contemporary necropolitics (Mbembe 2020) are strengthened in Brazil by a *sui generis* social neo-Darwinism that puts the Black population – the most common race-ethnicity among People in Situational Homelessness – on the verge of all kinds of abuses and human rights violations. In this sense, not even the counter-hegemonic policies of sense-making during the pandemic, pushed by sanitarians, managed to cross the barriers of racial exclusion. On this agenda, statistical studies have shown that people socially read as white received almost twice as many vaccina-



tions as people socially read as Black. In late March 2021, the Brazilian Ministry of Health published that 3.9 doses were applied to the white population, while 2.2 doses were applied to the Black population (Folhapress, 03/26/2021).

The existence of such barriers were the basic devastating scenario that People in Situational Homelessness faced. In addition, they had to go through the exasperating humiliation of white supremacy, in public rituals of the executive power blatantly recognizable as racist. In a *live* performance via social media on 5/28/2021, president Jair Bolsonaro drank, smiling, a cup of milk. Milk, as a symbol of white supremacy (Freeman 2013) and other rituals are being placed on public stages, ignoring citizens who do not always understand what these symbols mean and, on the other hand, actively engaging those who subscribe to such ideals because they secretly understand what they are about. A social abyss between those who defend the death of the so-called “bums”, and those who stand for the promotion of rights of historically vulnerable collectives expands, leaving large masses of people who have not had access to a quality citizen education, at the edge of misinformation flows that seem to pull unprepared segments of public opinion with great force (Augoustinos and Every 2007).

## Notes on Methodology

“Escrever é dar movimento à canção de dança  
que o meu corpo não desempenha.

Poesia é a senha que eu invento para acessar o mundo”<sup>1</sup>.

Conceição Evaristo, *Cadernos Pretos* [Black Notebooks], 2002.

The observations made in this article are framed by project funded by the National Research Council of Brazil, where “best practices” of coping with COVID-19 were discussed with seven communities and movements from three states of Northeastern Brazil (Rio Grande do Norte, Paraíba and Ceará), which were in a previous situation of social vulnerability aggravated by the pandemics. Those were: Indigenous people from Potiguara, Tabajara, Tapeba and Tapuia ethnicities, Fishermen, Mariculturists, Roma people, Waste recyclers, and People in Situation of Homelessness<sup>2</sup>. The project was framed within the perspective of a decolonizing anthropology (Fanon 1967, Nascimento 1978, Alves 2020, Echazú Böschemeier e Santos, 2020), Human Rights (Almeida 2019) and Collective Health (Ackerman and Castiel 2021). Starting from the perspective that “best practices” for the construction of institutionalized scientific knowledge are intrinsically linked to a “good living” as a collective project desired and projected by communities and social movements, we were called to strengthen a dialogue side by side with them in participatory knowledge construction practices inspired by a popular education approach (Freire 1996).

We agree with other scholars that “local researchers must take the lead to produce vital knowledge” (Mwambari *et al.* 2021, 5). This knowledge goes neces-

1 “Writing is giving to the dance a song/that my body does not perform/Poetry is the password I invent to access the world”.

2 For more information about this project, its official web site can be visited (in Portuguese). Site do Projeto Boas Práticas. Available at: <https://sites.google.com/view/projeto-boaspraticas/sobre-o-projeto>. Access in: 27-10-2022

sarily beyond the mere utilitarianism of emergency health intervention within the pandemic setting. The results presented in this text come from an analysis of secondary sources via exploratory online discourse analysis, as well as virtual ethnographies conducted during meetings held on the Google Meet platform, phone calls and Whatsapp conversations with the mentioned groups during a cycle that encompassed the months of July 2020 to August 2022.

The initiative fostered the creation of spaces for discussion about science, memory and human rights during the COVID-19 pandemics, ensuring their access to a contextualized, truthful, participatory and appropriate scientific discussion. During the project cycle, scientific texts were translated and adjusted to the discussion in a framework of promoting the "right to science" (Echazú Böschemeier, 2022a). All the information produced had the acceptance of the people participating in the ongoing discussions for subsequent publication, also including, within our work routine, the encouragement of participatory co-authorship of written and audiovisual materials (Torres da Silva 2022, Echazú Böschemeier 2022a).

The meetings were enriched with music, poetry, and experiences of the participants and their communities, under the form of "poetic resistance" as was brought in by the participants. The different types of knowledge and experiences were interconnected in an open debate within the model of the "encounter of plural knowledge" (Carvalho 2018) with the communities participating in the project. As a result, data analysis and conclusions are produced collectively and in permanent feedback with the participants of the research process. Scientific articles and other forms of knowledge production were placed within this broader participatory process, and oriented towards the construction of collective materials for publication and scientific dissemination within the communities.

Complementary to the production of ethnographic records, we rely on an exploratory strategy of online discourse analysis (Crystal 2016) where key pieces of information disseminated on the web were selected and presented in a systematic, contextualized and digitally findable way. This information allowed us to contrast, in real time, a) the scientific advances about the pandemic, b) the health management policies in place, and c) the responses of organized social movements in the local scenario during the months of the project. Based on this dialogue between global, national and local dimensions of knowledge production, it was possible to confront local formative "best practices" of knowledge production against the systematic and programmed infodemic (PAHO 2020) proposed by the federal government management during the COVID-19 pandemics.

### **Challenges for the Population in Situational Homelessness**

In March 2020, the Institute for Applied Economic Research (IPEA) estimated 222,000 people living on the streets in Brazil (*Rede Brasil Atual*, 06/09/2020). The numbers on deaths caused by COVID-19 among this population are still underestimated to this date: it is a consensus that the lack of data accompanies the lack of public policies, especially because the National Policy for the Population in Situ-

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ational Homelessness, established in December 2009, through Decree 7053/2009, has not been satisfactorily implemented and presents little expressive results so far.

There are 1,313 homeless people registered in the official agencies of the state of Rio Grande do Norte and, replicating what happens at the national level, it is estimated that they are underreported (personal communication with movement leaders, April 18, 2021). Furthermore, this registered population does not have any global previous epidemiological study about them (S. D, virtual meeting, April 12, 2021). After a strong national and local campaign launched by the Population in Situational Homelessness Movement (MNPR), which involved the previous participation of this social movement in the National Health Council (CNS) and a long dialogue with the State Health Department, it was announced that the Population in Situational Homelessness located in Rio Grande do Norte would be fully vaccinated (*Prefeitura Municipal de Natal*, March 26, 2021), especially in cities where this contingent was larger, such as Natal, Mossoró and Parnamirim. The doses would come from a “Technical Reserve” of vaccines, following the guidelines of the Ministry of Health, which defined the Population in Situational Homelessness as eligible in the first stages of the National Vaccination Plan (*PNI*, December 2020, 15, 22, and 44).

Initially, 660 doses of the Oxford/Astrazeneca immunobiological vaccine were sent. On March 29th, the vaccination process was conducted by the State Secretary of Public Health, in partnership with other public agencies and with the support of Federal University research and community projects – such as the “Best Practices” – as well as local Non-Governmental Organizations, which started an educational work and an active search for this target population in the areas of the largest cities in the state: Natal, Parnamirim, and Mossoró. At the end of the month of March, and after a sensitization and dialogue work in a face-to-face protection situation, 500 People in Situational Homelessness received their immunizations.

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**POR QUE VOCÊ DEVE SE VACINAR?**

Veja abaixo 4 razões pelas quais se vacinar contra o coronavírus:

- 1. PORQUE A VACINA SALVA VIDAS.**  
A vacina hoje é o melhor caminho para encarmos o vírus, ao tomá-la, você estará se protegendo de se infectar pela covid-19 e contrair a doença. Após tomar a vacina, as chances de infecção são muito baixas, assim como o desenvolvimento de casos mais graves que possam vir a ocorrer.
- 2. PORQUE ELA REDUZ A CIRCULAÇÃO DO VÍRUS.**  
Quando um número suficiente de pessoas forem vacinadas contra a covid-19 a disseminação do vírus terá o seu alcance cortado, uma vez que existirá poucas pessoas para se infectar. Alcançar a imunidade coletiva é muito importante, pois mesmo aqueles/as que ainda não receberam a vacina estarão protegidos de uma eventual contaminação.
- 3. PARA PROTEGER E APOIAR OS SERVIÇOS DE SAÚDE.**  
Ao se vacinar você não está apenas se protegendo, você também está auxiliando o sistema de saúde pública da sua cidade. Quanto mais pessoas forem vacinadas, menor vai ser a demanda por recursos e equipamentos, assim como de leitos de UTI (Unidade de Tratamento Intensivo) e enfermagem dos hospitais.
- 4. PARA EVITAR A DISSEMINAÇÃO DE NOTÍCIAS FALSAS.**  
Notícias falsas e desinformação se espalham tão rápido quanto o vírus, e são tão perigosas quanto. Nos últimos tempos, boatos e informações falsas deterioraram a confiança que as pessoas tinham sobre as vacinas, e por causa disso, temos observado cada vez mais o reaparecimento de doenças já erradicadas em muitos países, inclusive no Brasil.

Seguir as recomendações médicas e científicas baseadas em evidências ajuda não só a combater a pandemia como também ajuda a combater a desinformação presente em nossa sociedade, por isso é importante que cada um faça a sua parte.




Image 01: Collectively elaborated pamphlet to be distributed in the Movement’s Campaign during March/2020.



In parallel, the movement, understanding the worsening of the situation of vulnerability experienced by people living on the streets in the pandemic context, articulated a campaign called “Solidarity cannot go into quarantine”. During this initiative, food, clothes, personal hygiene kits, mineral water, masks, alcohol gel and 70%, vitamin C, as well as sandals, blankets, and kits of snacks were mobilized from civil society for donation. In some places, there were hair cuts offered for people who might want them. Together with those contributions, information about COVID-19 was given, orally and as well through printed pamphlets that were elaborated with the assistance of Boas Práticas research project.

### Strategies for creative resistance

Citizen science is a proposal of knowledge production that includes the active participation of community participants of the research in direct and active dialogue within the academic researchers (Robinson *et al.* 2018). In this sense, it fosters communicational strategies that broaden, on the one hand, the conception of science towards a range of pluri-epistemic knowledges, and that make visible, on the other hand, concrete forms of production of these knowledges within the Academia. According to this perspective, popular arts, oral poetry and performative improvisation are privileged forms of production and dissemination of knowledge within science and beyond, democratizing, at the same time, access to it by the broader population.

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In Northeastern Brazil, *cordel* is a form of oral poetry established since the 17th century that narrates important events in daily life in a playful, light and critical way. In the “Best Practices” project, some leaders who participated as researchers had this talent, which was explored in several instances of the project: to propose actions, to celebrate advancements, to question decisions, and to suggest the forwarding of actions. Such poetic-creative interventions can be framed within “pedagogies of struggle” already explored in another text linked to this project, a text which brings up the context of indigenous leaders and waste pickers as researchers (Echazú Böschemeier *et al.* 2022). Such pedagogies of struggle are driven by popular perspectives of knowledge exchanges and mutual formation (Freire 1996) among people positioned at different *locus* within the social space. In the daily performance of community leaders, the pedagogies of struggle are an important element in the construction of strategies for dialogue and communication within different sectors of society. They report recent events and add depth to the challenges experienced through the voice of their experiences, which is located in racialized bodies, denied knowledge, and struggle trajectories of individual and community dimension, previously defined from historically less visible places.

As an example of these pedagogies, we would like to cite an oral poetry produced within the framework of the project. In an online meeting through the

Google Meet platform during April 12<sup>th</sup>., José Vanilson Torres da Silva, leader of the movement and coauthor of this article, read the following oral poetry, in the format of a *cordel*:

### **Vaccination of People in the Streets<sup>3</sup>**

I

*The year is 2021  
The day, March 29th  
That vaccination starts, so  
Show your arm to me*

II

*Because the 29th is tomorrow, guys  
No fear or whining  
Let's protect ourselves  
Take one more with us at the Health Station over there*

III

*Everyone go get vaccinated  
To put an end to this damned thing  
Corona, go far away!  
Come on! Oh my braves*

IV

*Please bring your arm, get ready  
It won't hurt at all  
Just a little puncture  
We just need to win over this thing*

V

*This is the conquest  
of the Potiguar<sup>4</sup> Homeless People  
Made by many hands and affections  
Let's get vaccinated now*

IV

*No more fake news<sup>5</sup>  
And denialism  
The vaccine protects  
And with the vaccine  
There is no risk*

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3 The present poem is written within the genre of *cordel*, a type of popular oral poetry characteristic of Northeastern Brazil. It was read in a virtual meeting organized on April 12, 2021 by the Best Practices project. Its authors are Vanilson Torres, leader of the MNPR movement in the state of Rio Grande do Norte, and Rosângela Trajano, a Black philosopher and *cordel* writer from Rio Grande do Norte. The poem, originally written in Portuguese, was translated to English by the first author of this article.

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4 Potiguar: A person who was born and raised in the Rio Grande do Norte State.

5 The expression fake news appears in English in the original text.

*Go very quickly  
Rejoice yourself  
Get vaccinated against this "bug"  
Let's celebrate, my friends*

*VIII  
There's nothing better  
Than saying goodbye  
To the disgusting corona  
Be able to do a few things again*

*IX  
Vaccination begins  
by the shelters and popular centers  
Let's go my people that is great*

*X  
Soon after the Homeless People Services  
Will start again for those who are on the streets  
Where there still are many people  
Living naked realities.*

The conquest of the right to vaccination during the worst times of the COVID-19 pandemics, was an achievement described as "historic" by the leaders of the movement (collective conversation/virtual meeting on April 12, 2021). However, during the same month, the Natal Public Prosecutor's Office published a document "aiming at the fulfillment of the National Immunization Plan as well as the National Vaccine Operationalization Plan, whose criteria are objective and must be fulfilled by the entities of the Federation", refraining local public agents from including or modifying the order of the priority groups defined by the National Immunization Plan without prior authorization from the Ministry of Health, "considering the need for evaluation of technical-scientific criteria, epidemiological criteria and social vulnerability indexes" (TJRN, Public Process no. 0801414-44. 2021.8.20.5300, 4), then requesting emergency custody to the State of Rio Grande do Norte to ensure prior vaccination of the groups that were "directly involved in the response to the pandemic in the different levels of complexity of the health networks" (idem, 6).

Contradictorily, this conception of "health network" included psychologists who were attending their clients online, veterinarians and private health workers, among other professionals which would not necessarily need immunization with the same urgency as the Population in Situational Homelessness. In a personal communication with key actors of the movement (4/18/2021), it was possible to register the fact that in a meeting held on 4/10/2021, the immunization of the Pop-

ulation in Situational Homelessness was misunderstood “as a declared privilege on top of the needs of the rest of the population”.

Moreover, even though it was shown that the doses destined for the Population in Situational Homelessness came from a Technical Reserve of vaccines and did not affect their distribution among other priority groups (PNI, December 2020, 15, 22, and 44), but the State Health Secretariat retracted its decision, because it was at the target of a legal action. As a result, on April 9th, the remaining vaccines that were already set aside to immunize the rest of the Population in Situational Homelessness in Rio Grande do Norte were, alas, confiscated. This institutional change of the Public Ministry in Natal deserves special attention: why don't the bodies of the Population in Situational Homelessness, who are more exposed to infection due to the deficient quarantines, the lack of sanitization places, and the difficulties to guarantee social distancing, matter enough? Why, when they have access to a right conferred by the Constitution, such as the right to health care, are they seen as “privileged groups”, by actually privileged groups?

### **Eugenics, necropolitics, and the Brazilian genocide**

Eugenics is a term coined in 1883 by British anthropologist Francis Galton. It was given the name of a scientific and social theory that advocated “racial improvement” through selective human selection. Despite being criticized by modern anthropology, eugenics continued to fuel the social and political life of the highest spheres of power in Latin America (Leys Stepan 1991). It has been observed by Brazilian analysts that the management of pandemics has the hallmarks of an undisguised eugenic approach (*Jornal USP*, 30/07/2020): the idea of natural selection, the goal of herd immunity at the expense of people's guarantee to life, and the denial of the rights of already vulnerable communities in urban and rural contexts, such as Indigenous people, Roma people, Waste Recyclers, and Population in Situational Homelessness.

In a context of constant human rights violations, the fact that people are living on the streets shows that a basic right to integrity, health and personal and community safety is being banished. What then is the situation like for the Population in Situational Homelessness, marginalized in their right to the city to an extreme of becoming invisible or, more precisely, erased? They are exposed to conditions of social mutilation, which produces the extermination of their bodies and their lives which lead to their social erasure, both physically and symbolically (*The Intercept Brazil*, 07/13/2021). In this scenario, the COVID-19 pandemic has placed at the center of the debate the discussion about the margins and peripheries of the social space, which are understood here not from the geographical point of view, but from the perspective of social exclusion and the denial of rights by the State. This deprivation of rights attributes to them a civic non-existence and the denial of their human condition, producing “the internalization of this condition as an essential element of the phenomenon” (Fassin 1999, 184). However, it is from the margins, through the management of both suffering and the lack of meaning to

life, that society continues to be transformed, bringing the “rightless” populations out of the shadows to claim their space in the center of the debate (Fassin 1999, 183) towards a new visibility.

With the advent of the COVID-19 pandemics, cities intensified their necropolitical attack on People in Situational Homelessness in Brazil (Alves 2020). It has been scientifically shown that illness, pandemics and other social disasters were seen as weapons by the Latin-American elites against some groups of society (Leys Stepan 1991). In this sense, it has been publicly said that pandemics became the newest “biological weapon” of the Federal Government (*Folha Opinion*, 3/14/2021). With little support from public policies, without scientifically based directions, and considering that the mechanisms of the virus proliferation were, at the beginning of the pandemics, so little known to most people, the Brazilian population has seen its mortality rates increase – more than 686,000 deaths, counting from March 2020, at the beginning of the pandemic, until October 2022, the moment this article is reviewed. There was disinformation, disorganization, and lack of a strategic management to face testing and hospitalization, which contributed to the worsening of a situation of social unprotection, making even more vulnerable the condition of these populations already unassisted by the State (*Rede Brasil Atual*, 03/03/2021).

Necropolitics, an idea explored by the Cameroonian philosopher Achille Mbembe, preserves for itself the “right to make people die and let people live” (2016, 124), in a similar way to the sovereign power previously analyzed by Foucault (1985) towards forms of government that precede modern ones. However, Mbembe does not propose a historical and evolutionary continuity between concepts: he shows that some territories, where the state of exception is no longer understood as a temporal suspension of the rule of law, have been governed by necropolitics for centuries – and still do to this date. Indeed, the parallel reality of necropolitics is not defined by a period, but by a persistent spatial arrangement that is continuously maintained outside of Western states.

Necropolitical government follows the logic of colonies, attempting the massive destruction of life: “contemporary experiences of human destruction suggest that it is possible to develop a reading of politics, sovereignty, and the subject, different from the one we inherited from the philosophical discourse of modernity” (Mbembe 2016, 125). In the Brazilian case, we must affirm that necropolitics as a form of government has existed for centuries, since the imposition of the colonial regime, and has been resigned to systematic forms of genocide and epistemicide manifested in institutional racism, academic racism, the imprisonment and systematic genocide of the black population, the invisibilization of indigenous peoples, the invasion of their territories, and other forms of violence and death (Nascimento 1978, Carneiro 2005, Alves 2020).

In late March 2021, former president Luiz Inácio Lula da Silva pointed out: “The deaths in COVID-19 represent the largest genocide in our history” (*O Tempo Magazine*, 03/26/2021). Some weeks before, activists were arrested for displaying a poster saying “genocida” – a term referring to the Brazilian president. After



these events, the search for this term on *Google* grew significantly, especially in March 2021, as they were registered in *Google's* trending database. News portals, such as *Carta Capital*, expressed that the situation in Brazil could be actually read as a genocide (03/25/2021). Genocide, a term that has been increasingly being used by the media and progressive sectors of society to define the consequence of the actions of Brazilian President Jair Bolsonaro, appears to be a relevant term to understand the situation of abandonment by the state of People in Situated Homelessness among other vulnerable sectors of society in Brazil.

In the pandemic scenario, Brazilian citizens have been clearly forced to deal with the virus in an unprepared, uninformed and unprecedented way, which was expressed by the federal government as “God’s will” – and by being so, configuring a dimension that is far away from any possible political, technical, or scientific action. A purist approach to social and political life has gradually emerged, supported by the tremendous financial and political power of Christian Protestant churches – such as Assembly of God, Universal Church, and International Church of the Grace of God, among others – supporting Bolsonarism (*Deutsche Welle*, 02/21/2021).

Bolsonarism’s public statements regarding the pandemic have been deliberately derogatory: Brazilians should not be “gay” about the coronavirus, because “we are all going to die one day” (*Washington Post*, 11/11/2020). In several statements, Bolsonaro has used the Portuguese word for faggot [*marica*] defined as an offensive term for gays in this context (*idem*). He has also publicly stated that Brazilians could jump into raw sewage and “never catch anything”. In April, responding to reporters about the pandemics, he said, “So what, I’m sorry, but what do you want me to do? I’m not a mortician”. Those words were received with different attitudes within society: a part of it rejected his position, while another part, trained by bolsonarismo to gain a progressive insensitivity towards facing social problems, adhered and incorporated this discourse.

It is possible to observe, to this day, that the ideologies nurturing an image of the “traditional family” and its “moral values”, which is linked to military and fascist regimes, is somehow still desired by a part of Brazilian society. Bolsonaro was chosen recently as the *Person of the Year in the Organized Crime and Corruption* category, by The Organized Crime and Corruption Reporting Project initiative launched by international journalists (2020). Bolsonaro surrounded himself with corrupt actors, used propaganda to promote his denialist agenda, undermined the justice system, and supported a destructive war against the Amazon region that affected indigenous populations and enriched some of the country’s wealthiest landowners. Ecocide, the destruction of the environment, “is advancing faster than the virus”, as it was stated in the Declaration of the First World Amazon Assembly (March 2020). Epistemicidal processes (Carneiro 2005, Carvalho 2018) are becoming massive, denying the experiences, cultures, and ways of seeing life of local communities.

In addition to his corruption record, Bolsonaro was recently singled out by the European Parliament for crimes against humanity (*Istoé*, 04/16/2021). At the

same time, the country of Brazil was critically placed by Brazilian scientist Miguel Nicolelis as a global health threat (*The Guardian*, 03/03/2021). This threat is not only pointed out by the absence of interest in implementing protection and care policies directed at the population, but also in actively spreading “magic remedies” that have been proven to be ineffective and even harmful to the population, widely distributed by Bolsonaroist doctors in many hospitals and in other health services throughout the country.

This can be framed as an infodemic situation, which defines infodemics as “an overabundance of information—some accurate and some not—that makes it difficult for people to find reliable sources and trustworthy guidance when they need it” (PAHO 2020). This reality has affected the impact of evidence-based research, dissolving it into a dangerous wave of misinformation. At the same time, it is possible to find infodemics intertwined with public policies, creating a snowball effect that can get to be extremely negative for the population needing not only direct care assistance, but also guidance on prevention and treatment.

Political persecution against dissidence has been shown in the fact that researchers from the Amazonian city of Manaus, who found no evidence regarding chloroquine or hydroxychloroquine as an effective drug for COVID-19 treatment, received death threats (Nóbrega 2020). Despite the scientific evidence, in early April 2021, 21 Brazilian states received more units of “COVID-19 kits” (pharmacological packages composed of chloroquine or hydroxychloroquine, among other unproven drugs for COVID-19 treatment), than orders with the elements needed for intubation of severely ill patients affected by the virus (*Poder 360*, 04/16/2021). The radicalization of the discourse against public science, the public university, and a democratic conception in the production of knowledge has fed anti-science not only in the sphere of the federal government, but also among an important portion of the citizens.

At the same time, when we talk about “failures in frontline healthcare”, we’re talking about a big drop in the number of hospital beds, especially in emergency medicine, which is mostly managed by private companies. Unfortunately, there isn’t a perspective of universal coverage (Harvey 2020), as it has been normatively ensured in the Brazilian Constitution.

### **Answers from the People in Situational Homelessness movement**

As an underlying philosophy linked to neo-fascism, neo-Nazism and other denialist ideologies, eugenics became, for an executive power infused in Bolsonaroism, the hegemonic response in the face of the pandemic crisis in Brazil. This country, which previously showed the world a potential to embrace a global paradigm on diversity, inclusion and nature preservation, is unfortunately becoming a world symbol of neglect, authoritarianism, and dictation of rule of the “strongest”, degrading regular democratic institutions, and their processes. At the same time, neoliberalism in health (Basile 2020) deepened the crisis, which was configured as a crisis inside of other, older and structural, crises.

In this sense, the COVID-19 pandemics potentiated the stigma of marginalized populations, adding a layer of race and class segregation to the structural exclusion already suffered by these communities (Singer 2009) and intensifying realities of racism, invisibilization, exclusion, and death. The movement of Population in Situational Homelessness had to deal with the emergence of a reality compounded by the historical debts of structural racism, ecocide, and epistemicide. Sometimes it seems that we have no words to describe the intensity of this experience, but a term has emerged in recent times under the public discussion, and has been increasingly used since: the term “genocide”, reaffirming the link between denialism, authoritarianism, and instances of extreme violence against minorized people in the framework of modern societies.

A broader historical analysis that will frame the specific genocide commanded by bolsonarist negligence, which were intensified by the COVID-19 pandemics in the country’s history, is very needed to the date. But it is possible to note today that social groups like the People in Situational Homelessness are dealing with the infodemics, and at the same time, with the consequences of the illness in their bodies, while facing unemployment, hunger, lack of housing and hygiene conditions, as well as mourning their dead in precarious contexts. And all this is happening in a context of extreme violence, invisibilization, and denial of their basic rights. Despite this, social movements like the National Movement of People in Situation of Homelessness, are denouncing the underreporting and still organizing spaces of creative resistance to discuss and promote vaccination, access to science, as well as the impulse of other structural public policies, such as housing, social assistance, and income generation.

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Web Art "Negacionismos na estética do Cordel" elaborado especialmente para o presente dossiê. Vinicius Chaves, Iniv, 2022.

Recebido em 07/11/2022.

Aprovado em 13/06/2023 pela editora Kelly Silva (<https://orcid.org/0000-0003-3388-2655>)

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