

Mapping is intervening: Intervention research in institutional shelter services for families

Cartografar é intervir: Pesquisa-intervenção no acolhimento institucional de famílias

Cartografiar es intervenir: Investigación-intervención en el acogimiento institucional de familias

Cartographier c'est intervenir: Recherche-intervention dans la prise en charge institutionnelle des familles

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Abstract

This article presents the results of a cartographic intervention research study conducted as part of a doctoral program in Psychology, with funding from Coordenação de Aperfeiçoamento de Pessoal de Nível Superior, which aimed to analyze the subjectivation processes of families in institutional shelter care at a facility in the city studied. By analyzing the relationships among poverty, urbanization, and housing in Brazil and their implications for socially vulnerable groups, it was possible to understand how this service became embedded in the city and within the configuration of Brazilian social policies, particularly with regard to families with a history of living on the streets, the primary, though not exclusive, population served by the facility studied. This qualitative study employed cartography as its method. Research data were produced through visits to the facility, semi-structured interviews with the technical team and Family Reference Persons, and the keeping of a field diary. According to the findings, institutional shelter care for families constitutes a hybrid territory in which different logics are (re)actualized: at times, logics of isolation and exclusion, as reflected in weak intersectoral coordination with certain social policies; at others, logics that ensure access to fundamental rights, such as food, health care, and shelter. Many dualities are produced and reinforced in the everyday life of the shelter, often hindering the invention of creative and singular ways forward by staff and families, including public-private, autonomy-dependence, and temporary-permanent. It is concluded that a comprehensive response to homelessness can only be achieved through the integration of the various public policies within the territories where families live and produce their lives.

Keywords: public policies, institutional shelter care for families, intervention research, cartography.

Resumo

O presente artigo tem como proposta apresentar os resultados da pesquisa-intervenção cartográfica desenvolvida no doutorado em Psicologia, com financiamento da CAPES, que teve como objetivo analisar os processos de subjetivação de famílias em situação de acolhimento institucional, em uma unidade do município estudado. Por meio da análise das relações entre pobreza, urbanização e habitação no Brasil e de suas implicações para as camadas sociais em situação de vulnerabilidade, foi possível compreender a inserção do dispositivo no

município e na configuração das políticas sociais brasileiras, especialmente em famílias com trajetória de vida nas ruas, o principal, mas não o único, público do equipamento estudado. Trata-se de pesquisa qualitativa, cujo método foi a cartografia. A produção dos dados da pesquisa ocorreu mediante visitas à unidade, entrevistas semiestruturadas com a equipe técnica e com as Referências Familiares (RF) e produção do diário de bordo. Segundo os dados da pesquisa, o acolhimento institucional de famílias é um território híbrido no qual se (re)atualizam distintas lógicas, ora de isolamento e exclusão, como a baixa articulação intersetorial com algumas políticas sociais, ora como de garantia de acesso a direitos fundamentais, como alimentação, saúde e abrigo. Muitas dualidades são produzidas e reforçadas no cotidiano do acolhimento, muitas vezes impedindo a invenção de saídas criativas e singulares entre equipe e famílias, por exemplo: público-privado, autonomia-dependência e provisório-permanente. Conclui-se que somente na integração entre as diversas políticas públicas no território de produção e vida das famílias viabiliza-se um enfrentamento integral à situação da ausência de moradia.

Palavras-chave: políticas públicas, acolhimento institucional de famílias, pesquisa-intervenção, cartografia.

Resumen

El presente artículo tiene como propósito presentar los resultados de una investigación-intervención cartográfica desarrollada en el marco de un doctorado en Psicología, financiado por CAPES, cuyo objetivo fue analizar los procesos de subjetivación de familias en situación de acogimiento institucional en una unidad del municipio estudiado. Mediante el análisis de las relaciones entre pobreza, urbanización y vivienda en Brasil, así como de sus implicaciones para los grupos sociales en situación de vulnerabilidad, fue posible comprender la inserción de este dispositivo en el municipio y en la configuración de las políticas sociales brasileñas, especialmente en relación con familias con trayectorias de vida en situación de calle, principal — aunque no único — público atendido por el equipamiento estudiado. Se trata de una investigación cualitativa cuyo método fue la cartografía. La producción de los datos se realizó mediante visitas a la unidad, entrevistas semiestruturadas con el equipo técnico y con las Referencias Familiares (RF), así como a través de la elaboración de un diario de campo. Según los hallazgos de la investigación, el acogimiento institucional de familias constituye un territorio híbrido en el que se (re)actualizan distintas lógicas: por un lado, lógicas de aislamiento y exclusión, expresadas en la escasa articulación intersectorial con algunas políticas sociales; por otro, lógicas orientadas a garantizar el acceso a derechos fundamentales, como la alimentación, la salud y la vivienda temporal. En la vida cotidiana del acogimiento se producen y refuerzan numerosas dualidades que, con frecuencia, dificultan la invención de respuestas creativas y singulares entre el equipo y las familias, tales como público-privado, autonomía-dependencia y temporal-permanente. Se concluye que solo la integración entre las diversas políticas públicas en el territorio donde se producen la vida y las relaciones de las familias permite afrontar de manera integral la problemática de la falta de vivienda.

Palabras clave: políticas públicas, acogimiento institucional de familias, investigación-intervención, cartografía.

Résumé

L'objectif de cet article est de présenter les résultats d'une recherche-intervention cartographique développée au cours de mon doctorat en psychologie, avec un financement de la CAPES, qui visait à analyser les processus de subjectivation des familles placées en institution dans une unité de la municipalité étudiée. En analysant la relation entre la pauvreté, l'urbanisation et le logement au Brésil et ses implications pour les couches sociales les plus vulnérables, il a été possible de comprendre l'insertion de l'établissement dans la municipalité et dans la configuration des politiques sociales brésiliennes, en particulier pour les familles ayant un passé de vie dans la rue, qui sont le principal, mais pas le seul, public de l'établissement étudié. Il s'agit d'une étude qualitative dont la méthode est la cartographie. Les données de recherche ont été produites par des visites de l'unité, des entretiens semi-structurés avec l'équipe technique et les référents familiaux, et la production d'un journal de bord. Les données de la recherche indiquent que l'accueil familial institutionnel est un territoire hybride dans lequel différentes logiques sont (ré)actualisées, parfois d'isolement et d'exclusion, comme le faible niveau de coordination intersectorielle avec certaines politiques sociales, et parfois de garantie d'accès aux droits fondamentaux, tels que l'alimentation, la santé et le logement. De nombreuses dualités sont produites et renforcées dans le fonctionnement quotidien des centres d'hébergement, empêchant souvent l'invention de solutions créatives et uniques entre le personnel et les familles, telles que : public-privé, autonomie-dépendance, temporaire-permanent. La conclusion est que ce n'est qu'en intégrant les différentes politiques publiques dans le territoire de production et de vie des familles que la situation du sans-abrisme peut être abordée de manière globale.

Mots-clés : politiques publiques, soins institutionnels, familles, recherche-intervention, cartographie.

This article presents the results of a cartographic intervention research study conducted as part of a doctoral program in Psychology, which aimed to analyze the subjectivation processes of families in institutional shelter care at a facility in the city studied. By analyzing the relationships among poverty, urbanization, and housing in Brazil and their implications

for the poorest social groups, it was possible to understand the emergence of the service studied within the city and within the configuration of Brazilian social policies, particularly with regard to families with a history of living on the streets – the primary, though not exclusive, population served by the facility in question.

In this regard, the present study adopts a cartographic research-intervention perspective, seeking to intervene in the conceptions that shape the everyday practices of professionals working at the institutional shelter facility for families as well as in the construction of possible ways forward for the families. The article is structured by first presenting the emergence of the family within institutional shelter policy, followed by a description of the development of the research methodology and a discussion of the main findings. It concludes with final considerations.

An analysis of the historiography of institutional shelter care in Brazil shows that it is linked to services aimed at children and adolescents following their recognition as rights-bearing subjects through the Statute of the Child and Adolescent (ECA). Consequently, the term “institutional shelter care,” or “shelter,” is rarely associated with adults, much less with families in their diverse circumstances and configurations, despite the existence of services within the social assistance network for these populations, such as hostels, transitional residences, and shelters. The emergence of this service within the legislation governing Social Assistance Policy reflects the State’s understanding of the social phenomenon of families experiencing homelessness, whether due to eviction, geological hazards, or a history of living on the streets, as well as its conception of the guarantee of rights, including the rights to a life with dignity, family and community life, housing, among others.

Social policies are essential to ensuring these rights. It must be considered that families have increasingly come to occupy a paradoxical position, including in legal terms, as they are expected to serve as agents of social protection, while actions are undertaken to strengthen their protective, caregiving, and supportive functions, particularly toward family members in situations of vulnerability (children, adolescents, older adults, and persons with disabilities). Families are rights-bearing subjects insofar as they may be the beneficiaries of actions aimed at expanding the State’s role in ensuring services essential to their survival, such as income support, childcare, and benefits. This perspective is supported by Mioto and Prá (2015), who also highlight the presence of two social welfare regimes in Brazil: familialist regimes, which center on the family as the provider of social welfare; and social-democratic regimes, which undertake preventive actions by anticipating and intensifying State intervention through the provision of services. Within this tension, there is a risk that families, within the private sphere, will be held responsible for the country’s social and political problems (Scheinvar, 2006). Vulnerability is therefore a complex phenomenon produced by social inequality and should not be naturalized.

Within this context, the principle of sociofamilial centrality is among the various pillars underpinning all interventions carried out through the Unified Social Assistance System (SUAS). Here, the family is conceived in advance as a group that ensures social protection, affection, and the development of its members and that must be safeguarded and strengthened in its potential (Law No. 8,742, 1993; Resolution No. 145, 2004). The centrality of the family within social policies conveys multiple meanings: the individualization of social issues through ultimately holding families responsible for developing their potential and overcoming their vulnerabilities; the strengthening of a citizenship-based perspective within social policies in terms of guaranteeing rights and comprehensive protection; and an understanding of the family’s role in Brazilian society as a source of support and psychosocial, material, and financial constitution, providing security for both subsistence and the collective itself (Scheinvar, 2006).

Thus, institutional shelter policy for families seeks to restore the family as a protective institution. In practice, however, multiple vulnerabilities intersect in shaping an existence rendered precarious by the conditions under which the State provides support and by the psychosocial consequences of poverty for living conditions, affecting prospects for coexistence, emancipation, and autonomy. Among the various situations of vulnerability experienced by the poorest segments of Brazilian society are extreme poverty, housing deficits, food insecurity, low educational attainment, and unemployment. These vulnerabilities are exacerbated when intersected with gender (women) and race (Black people) (Centro Brasileiro de Análise e Planejamento [CEBRAP], 2024). Moreover, they intensify the psychosocial experience of ethical-political suffering, which “is suffering/passion generated in harmful encounters characterized by servitude, heteronomy, and injustice; suffering that crystallizes as a diminished capacity to act – i.e., as reaction rather than action – as long as social conditions remain unchanged, becoming a permanent state of existence produced by social inequalities” (Sawaia, 2009, p. 370).¹ Ethical-political suffering manifests through conformity, the naturalization of social injustices, and the weakening of interpersonal bonds from collective and political perspectives.

From this perspective, State efforts to address these precarious living conditions through public policies, particularly social policies, are insufficient because of the contradictions inherent in policies formulated and implemented under a neoliberal capitalist regime. When housing needs are considered specifically, excessive urban rent burden is greater among people living in extreme poverty and poverty, respectively (Instituto Brasileiro de Geografia e Estatística [IBGE], 2024). State action specifically aimed at addressing the housing deficit falls far short of what is needed, a reality also reflected in the city studied. One example is that institutional shelter care for families is not a priority policy, given that it is implemented

¹ For the purposes of this article, all direct quotations from the original sources have been translated into English.

indirectly through a partnership with a Civil Society Organization (CSO). This implementation arrangement, combined with other strategies that have proven insufficient to eradicate the problem, such as the “Housing Allowance Program,” weakens the public provision of the service.

Given the characteristics of the problem that motivated this cartography, it is necessary to describe the relationships observed among the family, the State, and institutional shelter policy.

Families in institutional shelter policy

In the transition from the Ancien Régime to the modern European period, regarding State intervention among the popular classes, Donzelot (1980, p. 27) identifies three institutions that emerged and disappeared between the 17th and 19th centuries: “[...] convents for the preservation and correction of young women,” “[...] houses of tolerance for prostitutes,” and “[...] hospices for abandoned minors,” whose purpose was “[...] to reconcile the interests of families with those of the State” (Donzelot, 1980, p. 28). These families were bourgeois and relied on the support of the police, schools, and medicine to moralize and sanitize the practices of their children, as well as those of poor families and individuals who fell outside their private order (e.g., unmarried women, prostitutes, and children born outside marriage).

The convergence between families’ objective of expelling those who disrupted their order and the State’s objective of not wasting lives that could be useful to it enabled the emergence of a common objective, pursued through institutions of exclusion/correction/abandonment: the “[...] principle of concentrating the family’s undesirables” (Donzelot, 1980, p. 29).

To some extent, this convergence of objectives and alliance between bourgeois families and the State persists. The governance of families is thus one of the conditions for binding individuals to disciplinary regimes. As Foucault (1974/2006, p. 101) states, the family “[...] is, in a sense, the zero point at which the different disciplinary systems become attached to one another.” In this sense, what Foucault (1974/2006) identifies from the 19th century onward as “refamilialization” constitutes a fundamental movement of the bourgeois State to ensure the “proper” functioning of its disciplinary and biopolitical apparatuses – the factory, the school, the military, and the hospital – upon individuals and populations.

The family therefore reemerges in modernity as a means of safeguarding State power within private life. The purpose is to secure its economic objectives as they undergo stabilization within an industrial liberal economy that requires broad adherence by the working class as well as the gradual autonomy of State-promoted actions for its subsistence.

In modernity, as the understanding of the family as a privileged space for the formation of individuals became naturalized, the social sphere gradually took shape between the private and public domains, with the family serving as the disciplinary nucleus of social cohesion. This group also became responsible for mediating between the individual and society, serving as the locus of private life and the foundation of society. Within this context, the State positions itself as an institution that monitors and regulates families but does not assume shared responsibility. The logic whereby the State relinquishes responsibility for the political and social issues it claims to address through family-centered social policies affects not only families, which are said to fail to “adhere” or “mobilize,” but also professionals working within institutions, who are blamed for State inefficiencies through allegations of “low commitment” or “unwillingness.”

According to Pereira (2010), social policies after the 1970s, already situated within societies governed by neoliberal economies, were conceived on the assumption that responsibility for providing social welfare would be shared among the State, the market, and society. While, on the one hand, the logic of shared responsibility manifests as a pluralistic strategy for welfare provision, on the other, it leads toward the gradual withdrawal of State responsibility for social issues. Thus: “The family has increasingly become an apparatus for the privatization of the social sphere insofar as it has become the primary target of the demands imposed through social control” (Scheinvar, 2006, p. 55).

Family arrangements are diverse and complex, and when addressing families experiencing homelessness, their specific circumstances must also be considered, particularly the weakening and rupture of bonds and socioeconomic vulnerability that characterize their experiences (Decree No. 7,053, 2009). “Homelessness” expresses the complexity of urbanized societies, particularly in major urban centers whose development rests on social inequalities, poverty, and exclusion. According to the National Policy for the Social Inclusion of the Homeless Population (Decree No. 7,053, 2009, p. 3), “The homeless population embodies the triad expressed by the term exclusion: expulsion, uprooting, and deprivation.” Although the State has a constitutional duty to aid this population, homelessness is embedded in the structural dynamics of Brazilian society, has already become naturalized in common sense, and has never been fully addressed by the State, further exacerbating this process of social exclusion. Macropolitics thus operates as a plane for organizing and territorializing vulnerabilities, poverty, and exclusion, perpetuating these processes while simultaneously seeking to control them.

Along these lines, families receiving institutional shelter care at the facility we studied are even more diverse and heterogeneous, considering that this is a high-complexity social assistance facility whose premise is to serve individuals and families whose interpersonal and social bonds have been ruptured. Within the family unit itself while living together at the shelter, there may be conflicts, ruptures, and violence, while support from extended family and networks of friends may be severely weakened and/or disrupted. The population served comes from different circumstances across the spectrum of

homelessness: some have a history of living on the streets; others previously lived in their own homes, which are undergoing repairs and/or have been condemned because of geological hazards; and still others come from urban occupations and are awaiting judicial proceedings. In other words, some families include adults and/or adolescents who use drugs, while others do not; some families have salaried workers who must leave their children in the care of others within the shelter; some work independently through sales or collecting recyclable materials; and others rely exclusively on income-transfer benefits as their primary source of support.

If there is a common denominator among these stories that intersect within the shelter, it is that none of these families currently have private property legally recognized by the State for residential purposes. Some may have lived in areas of irregular occupation and acquired rights to the property through adverse possession without receiving compensation upon leaving or without having those rights formally recognized. Regardless of these circumstances, therefore, the condition that “unites” them is the absence of a home of their own.

Accordingly, the shelter we studied falls under the Institutional Shelter Service for Individuals and Families. It is included within the scope of social assistance services provided by SUAS as a High-Complexity service within Special Social Protection (Law No. 8,742, 1993; Resolution No. 145, 2004; Resolution No. 109, 2009), serving people ranging from those with a history of living on the streets to those who have lost their homes because of eviction or geological hazards.

Institutional shelter services for families and adults were implemented in Belo Horizonte in the 1990s, initially for people living in areas at risk of geological hazards. In 2007, the service underwent restructuring through the municipal Social Assistance Policy, expanding the population served to include families coming from homelessness or other conditions of vulnerability that had left them without housing, such as eviction resulting from an inability to pay rent.

In 1998, during the same decade in which municipal family shelters emerged, Belo Horizonte’s housing policy established the resettlement of families displaced as a result of public works or removed by Civil Defense after being affected by public calamities. In 2003, families from clandestine or irregular settlements were included in the resettlement program. That same year, the “Housing Allowance Program” was established to transfer funds for the temporary rental of housing, in the amount of BRL 500.00 (five hundred Brazilian reais) (Decree No. 8,566, 2003; Decree No. 14,850, 2012).

Within this institutional framework, the shelter studied serves families with three distinct profiles: those with a history of living on the streets; those from urban occupations, with or without ongoing land-tenure regularization proceedings; and those removed from areas at risk of geological hazards. The area of the city in which the shelter studied is located is permeated by contradictions; that is, it presents a hybrid landscape encompassing both urban and rural areas. The area contains numerous social housing developments – many financed through the “My House, My Life Program” or by the city through the “Vila Viva Program” – while, as one moves away from the central area, preserved green spaces coexist with low-income settlements and favelas. It is an area situated on the outskirts of the city, bordering the metropolitan region. The words of Carolina Maria de Jesus underscore this setting: “We are poor; we came to the riverbanks. The riverbanks are where the garbage and the outcasts are” (Jesus, 1960, p. 48).

Vectors of confinement and isolation are components of the experiences of oppressed groups. There is no doubt that the Welfare State that inspires our social policies is present among the active forces organizing social life, providing shelter, food, and a certain degree of comfort. At the same time, we recognize other forces inherited from our colonial-capitalist system, which manages the city biopolitically, seeking, as far as possible, to remove situations of precarity from the sight of those who move through the city by assigning them a space of their own. Within this context, the development of this study, through the methodology presented below, enabled us to raise important points for reflection.

Method

From the perspective of cartographic intervention research, or simply cartography, analysis begins with the research itself rather than after the “data collection procedures,” which presupposes the inseparability of research and intervention. This means that analysis occurs simultaneously with inhabiting the research field, an inhabiting that is not necessarily physical but rather concerns the connections among the researcher, the research participants, and the forces circulating within these relationships (Barros & Barros, 2013). For this reason, cartographic research seeks to “sustain a specific analytical ethos, allowing research to turn back upon itself and question implication and participation, leading to the problematization and repositioning of the participants’ place” (Barros & Barros, 2013, p. 388).

Because analysis follows the processual nature of the research, it is also an analysis of implication, in the sense of understanding how institutions traverse and affect us. As Romagnoli (2014, p. 47) states: “Implication reveals that what the institution triggers in us is always the effect of a collective production, of values, interests, expectations, desires, and beliefs that are intertwined in this relationship.” We therefore move through the processuality of the field, in which the relationships between forces and forms are expressed. Here, the analysis of implication plays a fundamental role in addressing the institutional forces that traverse the relationships among the research participants and between them and the researcher.

The study drew on the set of interviews, informal conversations, the monitoring of news and actions related to the shelter published on newspaper websites and on the website of the implementing CSO as well as documentary analysis and participant observation. In total, 18 interviews were conducted in 2021 and 2022 with staff members and service users: eight Social Workers (SWs) with higher education degrees in the Human Sciences, primarily Psychology and Social Work; four Social Action Agents (SAAs) with secondary-level education; and six Family Reference Persons (FRPs). The service coordinator was also interviewed; however, to avoid specifically identifying this participant, we chose to include them in the SW category. The study was approved through Plataforma Brasil in 2020 under CAAE No. 33376820.2.0000.5137 and was funded by Coordenação de Aperfeiçoamento de Pessoal de Nível Superior.

Analysis

“We are a Frankenstein of the [National Classification of Social Assistance Services]. What does it say there about shelter care for family units? Service for up to 50 individuals, not up to 50 families, not up to 102 families” (SW). The family shelter is a monster: an assemblage of scattered fragments and information organized according to the model of a “conventional” body. The monstrous evokes polyphony, non-binarity, and borders understood not as limits but as meeting points. Monsters are never created *ex nihilo*; rather, they emerge through processes of fragmentation and recombination, in which elements are extracted “from various forms” (including, in fact, marginalized social groups) and assembled as “the monster” (Cohen, 2000, p. 39). It is therefore a hybridization of those excluded from prisons, psychiatric institutions, poverty, and homelessness, all converging within this policy.

Schizoanalysis, the perspective underpinning this study, understands reality as a heterogeneous plane composed of strata, segments, lines, and holes that operate in different ways and at different speeds and degrees of slowness, while functioning immanently, coexisting and mutually engendering one another. We are composed of segments and lines; we make and remake ourselves through encounters among these planes, vectors, points, and thresholds. These are molar lines that stratify life into clearly delimited, specific segments that supposedly do not enter one another but remain contiguous, operating through binarity and being enacted through relations of power and overcoding, while also traversing social formations and subjects through organization and subjectivation (Deleuze & Parnet, 1998). The State is a fundamental assemblage of the abstract machine of overcoding because it operates across the entire social plane, giving it material form (Deleuze & Guattari, 2012).

Segmentarity within the shelter’s political-institutional organization circulates not only through arrangements of mutuality among institutions with totalizing characteristics but also through the organizational logic governing the Brazilian social assistance network, despite ongoing efforts toward intersectorality. Therefore, the production of knowledge and practices within the colonial-capitalist logic of the State fosters a particular arrangement among precarity, working conditions, and affects in such a way as to sustain sad passions in the bodies under its control (Figueiredo & Sawaia, 2019).

Contiguous with its constitutive monstrosity, the shelter exhibits another characteristic: its asylum-like, psychiatric-institutional character. “What is the city’s view? What is its perspective on the work we carry out? Because the shelter takes on the connotation of a storage facility. I do not know what it felt like for professionals who worked at the Barbacena psychiatric colony, but sometimes that is how I feel” (SW). Psychiatric-institutional logic can be understood as a logic of confining people who do not fit within the city: those without homes, roots, or destinations. In *History of Madness in the Classical Age*, Foucault (1978) critically analyzes psychiatric institutions as repositories, using the interviewee’s own term. Thus, psychiatric institutions, in their modern hygienist form, convey only a partial understanding of their history. In this sense, Foucauldian genealogy demonstrated that, at the origins of this institution and of its practices and discourses, one can discern the contours of a space created as a repository for those deemed undesirable. Not just any undesirable people, since an entire criminalizing morality would not, for example, place thieves and people deemed mad in the same space. These are only certain categories of undesirable people because a presumed and naturalized hierarchy is at work: those whom morality has classified as unfit for the social coexistence of the “normal.” These are the same undesirable people produced by a morality that forcibly confines itself to a self-discursive, or self-recursive, field – one that feeds back into its own closed circuit – akin to a form of puritanism, revealing that its social practice is ultimately decadent. It is from this point that this category of undesirable people can be expelled from the social realm and placed within an antisocial field, thereby appeasing those disturbed by their conspicuous presence.

Confinement or institutionalization, as a power-knowledge mechanism demonstrated by Foucault (1978), has served since the 18th century as a hygienist form of controlling poverty and as a mechanism for protecting families themselves. With the expansion of the notion of social welfare as part of the scope of State action in democratic regimes, the family and its needs came to be discursively positioned at the center of social protection mechanisms. This perspective began to shape the core legislation governing Social Assistance Policy and other family-centered social policies (Moraes et al., 2020).

Working with family groups, in turn, requires coordination among the various services and facilities that make up the social assistance promotion and protection network, whether in health care, education, or social assistance. Studies examining

coordination among sectoral policies in serving people experiencing homelessness, one of the populations served by the shelter, highlight the challenge and urgency of making intersectoral work more effective and continuous. Contributing factors include the fragmentation and sectoralization of social policies and poor communication among them; difficulties establishing a shared agenda; the lack of feedback regarding referrals from one service to another; the reproduction of social inequalities through normative and repressive practices; the predominance of emergency responses; the shortage of places in institutional shelter services; and the absence of other sectoral policies from intersectoral initiatives, among other factors (Ferreira et al., 2016; Fiorati et al., 2014; Serafino & Luz, 2015).

Social Security, Health Policy, and Social Assistance Policy form the three pillars of the Social Security System. Monerrat and Souza (2011) emphasize that Social Security is the most insular of the three, which makes effective integration among these policies difficult. According to the historical development of each policy area, the difficulties involved in linking them as minimum social policies to be guaranteed under the concept of Social Security manifest differently: in Health, there is concern about losing its specificity; in Social Assistance, there is a legacy of clientelism and paternalistic assistance; and in Social Security, there is bureaucratization and centralization of processes. Nevertheless, this study identified a strong relationship between Health and Social Assistance, with extensive grounding in the local territory.

In their literature review on intersectorality between Health and Social Assistance Policies, Carmo and Guizardi (2017) emphasize that territoriality, as a common denominator of basic social protection and primary health care, may enhance their respective capacities to protect and care for the local population. Similarly, Peres et al. (2017) identify the territory as a setting in which coordinated care can be exercised intersectorally through public policies as well as civil society and private-sector actors. The particularly strong coordination among the Basic Health Unit (BHU), the Social Assistance Reference Center (CRAS), and the shelter, as emphasized by the staff members, demonstrates how locally based policies situated close to the shelter and engaged with the vitality and dynamics of the territory are fundamental to the families receiving shelter services.

The SWs interviewed unanimously stated that relationships within the service network require substantial improvement, particularly with the justice system (Child and Youth Courts), the Guardianship Council (GC), housing policy, and income- and employment-generation policies.

The association between the GC and the judicial system has been addressed by several authors (Scheinvar, 2018; Nascimento et al., 2018) as a process of judicialization; that is, the GC adopts a logic of “order and compliance,” running counter to joint action with other social policies. In their study of an intersectoral unit in Belo Horizonte, Romagnoli and Silva (2019a) identified the GC’s persistent refusal to understand itself as part of the social policy network, acting arbitrarily through formal notices without prior work with families and thereby reinforcing their blame.

Thus, the posture adopted by the GC in the study by Romagnoli and Silva (2019a) included the idealization of a particular family model, the notorious “well-structured family.” In many cases, council members assumed that a situation of vulnerability – for example, involvement with alcohol and other drugs or extreme poverty – already constituted a violation of rights.

In examining technical documents that guide psychologists’ network-based practice within Social Assistance, Silva and Osawa (2020) found that network-based work requires intersectorality and interdisciplinarity to be understood as fundamental premises. Relationships among sectors and bodies of knowledge within public policies therefore need to be conceptualized differently.

This account indicates, beyond the lack of feedback on referrals, as recognized in numerous studies (Romagnoli, 2017; Romagnoli & Silva, 2019a, 2019b; Souza & Bronzo, 2020), the procedural issue identified by Couto et al. (2018), which is often mistaken for intersectorality. This means that, as a matter of routine, a family meeting the criteria for shelter care is referred to the service responsible for implementing that policy. Thus, stating, for example, that CRAS or the Social Outreach Service has a strong relationship with the shelter because they regularly refer people to it does not mean that they engage in synergistic actions extending beyond this initial stage. For Canato and Bichir (2021), however, thinking critically about intersectorality requires moving away from an idealized view of complete integration among sectoral policies. Instead, it entails recognizing the partial and informal actions that occur in the everyday implementation of public policies and that may produce important effects on the relationships among the actors involved.

The weakening not only of the service network but also of broader social support networks for low-income families is an important factor to consider when examining care, territoriality, and social protection in the context of the pandemic. This is because other institutions that provide support to the population also restricted their activities, as well as the types of demands and priority populations they served (Marques et al., 2020).

Another pandemic-related issue concerns the possibility of interventions aimed at addressing inactivity and lack of meaningful occupation. The suspension of cultural activities and/or their migration online prevented many families from participating in recreational and artistic activities, with consequences for social relationships and everyday coexistence. In this regard, the pandemic context particularly affected children and adolescents by limiting learning opportunities because of digital exclusion (precarious or no internet access); undermining the prevention of domestic and sexual violence, especially violence affecting girls, who were also more heavily burdened with household chores and caring for younger siblings because of confinement; and increasing food insecurity, since schools provided regular and nutritionally adequate

meals that could not necessarily be replicated at home because of financial constraints. Mothers, already overburdened by the double burden of paid and unpaid work, were also confronted with a greater need to support their children's schooling (Comissão Econômica para a América Latina e o Caribe [CEPAL], 2021).

Institutionalized life, even when intended to provide shelter and psychosocial protection, is not a mode of existence to be reproduced indefinitely; it has a defined duration, or at least it should. Neither families nor staff members regard shelter care as a solution; the actual solution would be a home of one's own. Although the design of this public policy explicitly intends the shelter to be a temporary space, the State's protective function becomes contradictory when it is not effectively exercised through the social policies necessary for producing autonomy. Housing is a fundamental example: without productive and sustained dialogue between institutional shelter policy and housing policy, without intersectoral work, and without the planning of joint and sequential actions, families tend to remain in shelters much longer than they would like. This is therefore not exclusively an individual matter or simply a matter of willingness, but rather part of a broad and deeply entangled socioinstitutional web.

Within this context, "Institutionalizing a person should be the last possibility. However, there have been cases in which the shelter was the first possibility" (SW). Here, this "first possibility" means the opportunity to experience a spatial organization that can be called a home; to be effectively integrated into a social assistance care and protection network by attending CRAS, accessing the health center, and participating in cultural activities inside or outside the shelter; to experience neighborhood relationships; and to have, at the very least, the assurance of one basic food basket per month, a toilet, and a shower for personal hygiene. Shelter care therefore provides multiple possibilities for people with extensive histories of rights violations.

On the other hand, like any other space of shared public life, the shelter requires compliance with certain rules, as well as the relinquishment of some degree of family privacy. Family members or friends cannot visit without going through a bureaucratic authorization process, and alterations cannot be made to the room because it must be preserved for future occupants. Consequently, there is an entire network of social relationships that families maintained in their previous place of residence and that will likely be weakened while they remain in another territory. Some relationships will never be restored.

Although the atmosphere of temporariness is an irreducible presence, permanence is equally irreducible: it, too, passes through the contradictory fissures in the boundaries separating them. This is what is at stake in the notion of asignifying rupture, one of the characteristics of the rhizome: "Every rhizome contains lines of segmentarity according to which it is stratified, territorialized, organized, signified, attributed, etc.; but it also contains lines of deterritorialization along which it continuously escapes" (Deleuze & Guattari, 2011, p. 25). If the temporary-permanent dualism – like the public-private dualism – serves any purpose, it is that of the capitalist-State apparatus of capture that overcodes reality. If reality is not binary, it becomes unintelligible in the eyes of bureaucrats and, consequently, in the eyes of State agents – in our case, the service's staff and professionals. Two distinct positions emerged in the professionals' accounts, particularly those of the SAAs. The first consists of treating the space as temporary under its current conditions: "We have to make these people understand that this is temporary and encourage them to think ahead about owning their own home rather than trying to accumulate more things so they can stay here" (SAA). The second recognizes the limitations of the current provision and even its potential risks, including the possibility of recurrence: "This family has been there for eight years without paying for water, electricity, rent, or food. Is that person going to be able to live outside on a BRL 500 housing allowance? They won't. *They are creating potential new homeless residents there*" (SAA).

When a person enters the shelter and begins living there with their family, there is a series of expectations to which they may become attached because they are, in fact, told that these possibilities exist: rental assistance, a house of their own, or an apartment in the "little apartment block," as they call it. Their "stay" acquires temporary status because something is supposedly waiting for them outside, particularly because the shelter itself is not intended to provide indefinite residence. Even if they do not succeed, even if it seems impossible, they are expected to make plans, map out routes, and imagine futures from that point onward, beyond the shelter. Here, we already encounter a distinction between principles that are treated as equivalent: what is temporary may become permanent and still remain temporary. This paradox is more difficult for SWs to understand than for families, since their professional role is to foster autonomy so that families can build a life project outside the shelter. Reality, however, does not depend solely on subjective factors to make such projects feasible. As discussed above, families must have the financial means to bear the cost of living outside institutional shelter care, and therein lies a major shared problem for which the city and the State have not yet developed sufficiently sustainable solutions.

"I'm not doing this only for myself. I'm also doing it for those who will come here after us. A family will be taken in; it's temporary, but it should be a temporary situation in which the family feels welcomed, not welcomed and repressed" (FRP). This participant's account reveals an opening for shifting the conception of "complacency" toward one of social struggle. The act of demanding better living conditions within the shelter can therefore never be reduced to a complacent attitude toward the social reality of shelter care. Likewise, refusals, acts of "stubbornness," and persistence that do not conform to the way regulations are currently imposed cannot be reduced to an inability to cooperate or coexist. It is necessary to stay closer, walk alongside people, and listen to what they have to say about what they do, using this knowledge to transform what is held in common into a politics of everyday life.

The other dichotomy intrinsically related to temporary versus permanent is autonomy versus dependence. Depending on the perspective adopted, very different understandings also emerge. Among professionals, the accounts indicated that conceptions of “dependence” and “complacency” are linked to perceptions of how the service is structured by the State to provide certain necessities, which, in turn, leads families to become settled in that environment. “It really is complacency, because for some families who resist leaving the shelter, the shelter environment is comfortable because it is a protected environment” (SW). “Six years. She believes that the shelter really is her home, that this is where she is going to stay, so she organizes her life around that space” (SW). “The structure of the facility makes them become very complacent [...] They stop pursuing a goal” (SAA).

None of the professionals referred to these provisions as rights; they identified only their dimension of security, which, taken together, was perceived as contributing to continued residence in the shelter. There was also a shared understanding that autonomy was linked to a process of personally organizing family life so as to pursue alternatives and possibilities or construct a life project.

FRPs generally endorse the argument that the cost of living for a family outside the shelter is difficult to sustain over the long term, even with the “Housing Allowance” benefit. At the same time, within a public policy such as institutional shelter care, families are able to advocate for their right to housing, whether through ongoing legal proceedings, such as repossession actions involving families from urban occupations, or because they are considered a priority group for municipal housing provision. In any event, these accounts highlight the role of housing in enabling a more autonomous existence.

In a study of social rental housing in the city of Belo Horizonte, Paolinelli and Gimenez (2023) found that the “Social Rental Program” produces different dynamics depending on the population served. For families coming from areas at risk of geological hazards, efforts are made to resettle them within their territory of origin; at the same time, however, an ongoing process of peripheralization occurs because the amount provided by the city is insufficient to cover housing within that area. For families with a history of living on the streets, efforts are made to find housing in areas close to the social services they use, corroborating findings regarding the effectiveness of Housing First-type programs (Ministério da Mulher, da Família e dos Direitos Humanos [MMFDH], 2019). In this sense, the importance of owning a home as an emancipatory prospect becomes evident. A study conducted by Cavalheiro et al. (2023) in Porto Alegre with residents of a social housing development found significant improvements in the quality of interpersonal relationships and in self-esteem after participants moved into this new form of housing, particularly when the move was associated with a sense of having achieved homeownership.

Although staff members do not regard the financial dimension as the determining factor in families’ departure from institutional shelter care, the effects of this condition must be examined. In assessing saving practices among low-income families living in rural settlements in Tocantins, Fonseca (2022) aligns with the literature on the subject in finding that research participants perpetuated conditions of undersaving, or saving through nonmonetary assets, based on a present-oriented outlook. The most immediate issues requiring family organization – bills, debts, and food – prevented them from envisioning a different future situation, including not only financial saving but also health care, education, and other goals, which were ultimately set aside. Fonseca (2022) also observed that these families were able to accumulate nonmonetary assets, such as through the sale of small livestock. This brings us to the underutilization of the shelter’s physical space, which, for many families, could serve as an area for growing and harvesting vegetables, legumes, and fruit, contributing to their daily diet, reducing expenses, and promoting sustainability, income generation, and solidarity.

From this perspective, different conceptions of autonomy coexist among the State, staff, and families, leading us to understand this concept as a more complex analytical operator within SUAS. These conceptions oscillate between autonomy understood as independence – particularly material and financial independence – as the ability to make decisions, or as the construction of pathways through life. Regardless of which conception prevails, the State takes advantage of this entanglement between individual spheres, or individual choices, and collective conditions to increasingly exempt itself from producing the circumstances under which autonomy could become genuinely feasible. Achieving this would require advancing the guarantee of other social policies, particularly housing and income- and employment-generation policies for families receiving institutional shelter care.

Among the guarantees provided by SUAS, the development of autonomy stands out. It is related to the capacity for personal and collective organization in exercising choice, thereby enabling individuals and families to overcome certain situations (Ministério do Desenvolvimento Social e Combate à Fome [MDS], 2016). From this perspective, at least three other dimensions must be linked to the concept of autonomy in public services: the guarantee of rights, the use of State-provided resources and services, and the collective dimension.

The guarantee of rights intersects with the longstanding debate surrounding paternalistic assistance: it is necessary to determine what constitutes a right of individuals and families, such as, in the case of the shelter studied, the right to temporary housing with minimum operating conditions guaranteed and the right to food through the provision of a basic food basket. In many of the accounts presented above, these aspects were interpreted as factors contributing to “complacency.” The use of State-provided resources and services concerns how individuals and families organize themselves to make use

of specific provisions in accordance with their needs and planning. Similarly, this dimension is erased in some accounts that fail to recognize such use as legitimate and autonomous, instead reaffirming it as an expression of the complacency of families who do not “want” to leave the shelter and begin paying rent. For this transition to occur, however, a series of other actions that are not tied to individual responsibility must be put in place, including access to a fixed income and/or a certain degree of income stability, as well as sufficient duration of access to the “Housing Allowance” benefit. The collective dimension, in turn, is the principle connecting these conditions through the shared understanding that they must be guaranteed and maintained by public authorities. In this sense, “the more families actually have their social rights guaranteed, the greater their autonomy will be” (MDS, 2016, p. 25).

In discussing autonomy within the context of collective public health, Campos and Campos (2006, p. 670) understand autonomy as co-constitution and define it as “the subject’s capacity to deal with their network of dependencies.” Autonomy is therefore a critical process of reflection on oneself and one’s context, articulated with individual and collective capacities and resources. This understanding brings us closer to the Freirean educational proposal discussed in *Pedagogy of Autonomy* (Freire, 1996), as well as to Butler’s (2015) understanding of the recognition of vulnerability as intrinsic to life and as an element of convergence for addressing precarious conditions among different groups. In Freire (1996), autonomy is constructed through each subject’s singular and processual experiences and through the critical relationship established by acting as an agent of one’s actions in the world. Moreover, when this perspective is complemented by Butler’s (2015) notion of vulnerability as intrinsic to the human condition, the ethical demand imposed by recognizing and confronting dehumanizing precarious conditions may become a source for strengthening autonomy from an interrelational perspective. A livable life is possible only when the vulnerability intrinsic to existence is collectively cared for through shared responsibility among individuals and through active efforts to confront the precarious conditions to which some groups are more exposed than others.

Along these lines, Campos and Campos (2006) argue that self-criticism should be a component of the practice of public health professionals and by extension of professionals working in institutional shelter care for families. Families must therefore be held accountable without restricting their capacity for self-management; coping strategies must be tailored to the capacities and skills of individuals and groups without separating them from their social struggles for better living conditions through access to rights. This is the everyday challenge faced by the technical team as it connects with each family, each history, and the fabric of social policies at the national, state, and regional levels while jointly constructing possibilities with each family.

Final considerations

This study sought to reconstruct a substantial part of the path taken during the cartography of relationships within the institutional shelter facility for families studied, highlighting the production of precarious living conditions for families without housing as a result of the limitations of the country’s social public policies. The arrangement developed by the city, which culminated in the emergence of the service in question, was not planned around integration among policies in a way that would foster families’ autonomy and their transition out of the facility. Instead, it led to the chronic continuation of cases within a space originally intended to be temporary.

The indirect implementation of the service in the city studied limits opportunities for public transparency regarding its organizational, managerial, and operational conditions, as well as social oversight by the population, particularly by Social Assistance service users. The serialized socio-spatial configuration favored impersonal, conflictual, and individualized relationships, contrary to the guarantees provided by SUAS itself, including community and social coexistence and the development of autonomy. We reaffirm that this study is intervention-oriented because of its educational character. In this sense, it seeks to transform everyday understandings surrounding institutional shelter policy, particularly with regard to the concept of autonomy. The mistaken notion of autonomy as complete independence is a weakness in the implementation of the service. Here, we propose understanding autonomy as the creation of integrated and effective support networks, which should include social policies themselves as well as shared forms of sociability within community life, even when such living arrangements are temporary.

Finally, we emphasize the need for greater integration between institutional shelter policy for families and housing policy, even within a rent-driven and segregating urban context that reproduces a class-based logic of private property. Although the “My House, My Life” Program has reached lower-income groups, housing is still not viewed as a social right for families living in extreme poverty and remains relegated to the sphere of individual effort. From this perspective, academic and civil society debates should foster collective State-led approaches aimed at effectively addressing the housing deficit and enabling more dignified ways of living for working-class and low-income populations. Accordingly, diverse housing solutions can be considered as a means of recognizing the plurality of ways of dwelling and making them more equitable and diverse. Such approaches may also address the different populations receiving institutional shelter care, including through Housing First initiatives and the use of vacant properties, particularly in urban centers, thereby promoting integration among services located within the same territory and strengthening families’ autonomy.

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