"They go right after our children": illnesses and resistance of mothers of police brutality victims in Rio de Janeiro, Brazil

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Abstract *This paper addresses the experiences of Black women organized in social activism to fight for justice for the deaths of their children, victims of police brutality. These deaths are analyzed as part of the genocide of Black people and result from the action of a State operating in a necropolitical fashion, in which racism is an ideological tool for the production of disposability of Black bodies. In this work, the stories of four women living in territories dominated by gun violence in Rio de Janeiro reveal how they organize themselves politically to fight for justice, memory and reparation; and their illnesses and individual and collaborative care strategies. We observe the refusal of their demands by the health system and the social assistance policies, while the activism stands out as a producer of care and acceptance.*

Key words *Black motherhood, Black genocide, Mothers' activism, Racism, State violence*

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Introduction

Violence has an increasing impact on Brazilian public health. It is not only manifested through direct aggression (physical, psychological, sexual) but also imbricated in the social fabric, "reproducing itself in structures, relationships, and subjectivities, insidiously and persistently"[1](p.13). In 2001, Brazil recognized violence as a health problem and started to design public policies to reduce its impact on morbimortality in the country[1].

The latest Atlas of Violence, prepared by the Institute for Applied Economic Research (IPEA), showed that the primary victims of violent lethality in the country are young Black males. A total of 57,956 homicides were recorded in 2018. Of these, 75.7% of the victims were Blacks (sum of Blacks and browns), which makes a mortality rate of 37.8 per 100,000, while this rate is 13.92 for the rest of the population, including whites, indigenous, and yellows. The homicide rate has been sharply increasing among Blacks in recent years, and a decrease was recorded among whites. Besides Blacks, most homicide victims in the country, 53.3% of the total, are young (the 15-29 years group)[2]. Part of these murders stems from police intervention. The analysis of 5,896 cases between 2015 and 2016 by the Brazilian Yearbook of Public Security revealed that 76.2% were Black[3] among victims whose information on ethnicity/color was available.

Bahian researcher Vilma Reis coined the category young Black men to denounce the inseparability of these dimensions of identity. The author believes that they are "experienced in an intersectionalized way, and, in general, the Black community is at risk when one or two of these dimensions are activated by the State security forces"[4](p.14).

The mothers and other relatives of these young people are most subject to illnesses that settle around this violent loss. This paper investigates the impacts of racism and State violence on the health of politically organized women in search of justice after the murder of their children by State agents. These women are primarily Black and denounce the deaths of their children as part of the genocide of the Black population. We argue that the racism these women are subjected to is at the center of their disease processes.

This study aims to identify the experiences of mothers participating in social activism groups who lost their children through State agents' action, investigate their illnesses, individual and collective care strategies, and their struggle for justice, reparation, and the right to the memory of their loved ones.

Methods

We present here part of the results of the master's thesis defended by the first author in 2019 at the Sérgio Arouca National School of Public Health/Fiocruz. This is qualitative research in which four women living in territories marked by armed violence in Rio de Janeiro and Baixada Fluminense participated, all of them activists in groups, in general, identified as mothers from a specific geographic location. These groups perceive themselves as part of a more significant movement, including relatives of State violence victims, and call themselves the "Movement of Mothers and Relatives of Victims of State Terrorism". It is worth clarifying that the use of the term activism is chosen to the detriment of militancy because it recognizes its proximity to the organization of this movement: horizontal, in a network, and which prioritizes the construction of consensus[5].

My first contact with members of this movement occurred in 2017, from a self-care workshop for Black women that I facilitated at *Criola*, a civil society organization founded in 1992 in Rio de Janeiro, which works to advocate and promote the rights of Black women. As a result of this experience, I started to follow the movement's activities, such as meetings, speeches at academic events, and police trials. This approach motivated the invitation to some of the activists to participate in the research. It should be noted that, as the first author of this article, I am a Black woman, which may have facilitated and even made possible certain exchanges and dialogues.

The research was approved in June 2018 by ENSP's Research Ethics Committee under Opinion N° 2.703.350. All participants were informed about the study's objectives, possible risks and ways to mitigate them, and their right to confidentiality and privacy. To this end, the names of the interlocutors and their children were changed and their neighborhoods omitted. They are here called Dandara, Lélia, Luíza, and Carolina. All this information is contained in the Informed Consent Form signed by the participants. The information about the participants in this study is listed in Chart 1.

The empirical material was collected through a focus group, in which the participants were invited to talk about their perception of their relationship with the State and the meanings of

struggle, memory, and reparation. Furthermore, four individual semi-structured interviews were carried out. This collection was approached through Content Analysis, proposed by Bardin[6], in the light of Black epistemologies.

This paper is divided into three parts. First, we present a theoretical discussion about racism, its impact on health, and the production of genocide in the Black population. In the second, we present the Mothers' Movement. The third part addresses the illnesses accumulated by these women, their personal and group care strategies, and support networks.

Racism and genocide in the Black population

The concept of race is socially constructed and serves a contingency, the game of decision-making power that separates the Self endowed with subjectivity from the Other constructed as "Non-Being"[7]. Sueli Carneiro believes that Brazilian Black experience is marked by the subjection of its individuality by raciality, produced as an inferiority marker so that the construction of Black people as a political subject goes through "resistance to this mode of subjectivation"[7](p.9). Blacks' reification in the place of the Other, their animalization through the production of racist discourses and practices, culminating in the very prohibition of their existence, engender various forms of illness among Black people inserted in structurally racist societies, as is the case of the Brazilian one[8-12].

Frantz Fanon states that "[an] average Black child grown up in a typical family will become abnormal at the slightest contact with the white world"[9](p.129). It denounces the experience of existing in continuous contact with racial hatred and its sickening potential:

It was rage; I was hated, detested, despised, not by my next-door neighbor or maternal cousin, but by a whole race. I was exposed to something irrational. Psychoanalysts say that there is nothing more traumatizing for the child than contact with the rational. Personally, I would say that, for a man who only has reason as his weapon, there is nothing more neurotizing than contact with the irrational[9](p.110).

In Brazil, the white supremacy ideology reinforced the myth of racial democracy that obscured the inferiorized social position of Blacks[13]. This same ideology produced discourses and practices that stimulated a Black population "whitening" that would result in their incorporation into Brazilian society by assimilation. Thus, Brazilian Blacks were not finding any positive conception of themselves and were encouraged to seek strategies to produce their disappearance as a form of social inclusion[13].

The construction of the myth of the "criminal Black man" by scientific racism theorists, such as Nina Rodrigues, from the second half of the 19th century onwards, played an essential role in the construction of criminology that placed Blacks as the main suspects of misdemeanors committed in the country[14]. Ideas like Rodrigues's served to justify police persecution of Black men in the immediate post-abolition period and were essential to naturalize the extermination of young Black people still in force in the country today.

Using the term "genocide" to refer to the different types of violence suffered by Brazilian African descent people has been a banner of the Brazilian Black Movement for decades[15]. This

Chart 1. Socioeconomic data of the research interlocutors.

Name	Age	Ethnicity	Living with	Schooling	Nº of children	Occupation/Income
Dandara	41	Black	Daughter, parents, and former partner	Complete higher education/Pedagogue	2	Unemployed/Bolsa Família (Family Aid)
Lélia	50	Black	Alone	High school	2	Was a salesperson/ pensioner
Luíza	59	Black	Alone	Incomplete Elementary School	3	Was a car keeper/ Pensioner
Carolina	44	Black	Children, grandchildren, and daughters-in-law	Incomplete high school	9	Unemployed/cook/Bolsa Família (Family Aid)

Source: Authors.

claim is based on the premise that racism structures violence in the country and has color, gender, and social class[15-18].

Vargas[18] states that the Brazilian anti-Black genocide has other phenomena besides lethal police violence, such as high infant mortality rates, premature death due to lack of access to health services, limited educational and economic opportunities, persistent high unemployment rates, increased incidence of infectious diseases, mass incarceration, and chronic depression. The disproportionate sterilization of Black women in the 1980s and 1990s[19] and the higher maternal mortality rate in this group – whose causes are preventable in about 92% of cases[20] – are also aspects of Black genocide.

This set of grievances underpin part of the *continuum* of Black genocide, a notion developed by anthropologist Nancy Sheper-Hughes. It is defined as a phenomenon that is "socially ratified and frequently perceived by authors, collaborators, and spectators – and even by the victims themselves – as expected, routine and even justified"[18](p.47). Therefore, part of the structure that allows Black genocide to continue operating is due to the naturalized practices underlying this *continuum*, which is also observed in the health system, when the uneven distribution of diseases by ethnicity/skin color is naturalized.

In 2009, the Ministry of Health established the National Policy for Comprehensive Health of the Black Population (PNAIPN) through Ordinance GM/MS nº 992. This policy is an albeit late recognition by the Brazilian State of the need to implement mechanisms for promoting the health of the Black population and confronting institutional racism in the Unified Health System (SUS).

However, this same State is one of the foremost perpetrators of lethal violence against young Black men[3]. Police violence against Black people reiterates the structural inequalities generated by racism, affecting this entire community based on institutionality. This violence is usually trivialized by the media and common sense so that the deaths of Black young men in the favelas and other areas dominated by armed violence cause little or no social upheaval, not even awkwardness[21].

From mourning to activism

In the early 1990s, as a reaction to the growing number of murders and disappearances of young people in large cities, the organization of mothers' activism around the fight for investigation and justice began. The precursors of this movement were the *Mães de Acari* (1990) and the *Mães da Cinelândia* (1993), in Rio de Janeiro[22]. Besides these groups, due to the continuing violent actions, also by State agents, producing new homicides and massacres, other groups organized themselves, such as the *Mães de Manguinhos*, *Mães da Maré*, *Mães da Baixada* and *Movimento Moleque*. They bring in their statements a discourse increasingly permeated by the anti-racist struggle, as observed in the words of Mônica Cunha, one of the most active activists of the Movement of Mothers of Rio de Janeiro: "because this is the objective; to put that to the world that Brazil is a racist country, and the first reason our children were killed is that they are Black, children of Black women"[23](p. sp).

Other similar groups are found in other states of the country besides these organized mothers in Rio de Janeiro, such as the *Mães de Maio* of São Paulo, *Mães do Xingu*, *Mães do Ceará*, among others that will not be covered in this paper, but that mark the nationalization of this social movement.

These groups arise due to the lack of responses from official bodies in the face of the deaths and disappearances of their children. Mothers seek in collective action a way to pressure public agents and denounce to other sectors of society the frequent rights' violations to which they are submitted. The main agendas of this movement are the denunciation of mass incarceration and the fight for justice, memory, and reparation for cases of forced disappearances and homicides committed by state agents.

Along this path, these women are often characterized as "mothers of thugs", a name repeated in police environments where they circulate in search of justice and national television programs[22,24]. This designation is intended to delegitimize them in front of public opinion and demobilize their struggles.

Three of the participants in this research had their young children killed by State public security agents. The fourth mother we spoke to was unable to inform whether those responsible for the death were militiamen or police officers due to the interposition of the two groups in the territory where she resides. All of them went to fight for justice after the violent loss of their children.

In Brazil, as in other countries of the African diaspora, the groups of mothers and relatives of victims of State terrorism consist almost entirely of women[16,17]. They are mothers, sisters, grandmothers, and daughters of most young Black

men, the primary victims of this type of violence. This activism is marked by a clear gender split – on the one hand, men are systematically murdered; on the other, women, especially mothers, fight for justice, memory, and reparation.

When asked about the absence of their parents or other companions in the fight, they do not have a specific answer, but they all reported the fathers' distancing after the child's death, especially after getting closer to activism. For Carolina, "men are cold-blooded; women are not. Women are more fragile and have more feelings. Or is it because they are mothers? I don't know. [...] Men say it's all over. Once buried, it's all over. Life goes on."

While following this social movement, both in acts and in national meetings, I observed only one father of a victim of State violence among the activists, a universe of dozens of women. However, this study did not aim to seek answers to this absence, a gap that deserves to be filled by other investigations.

The "struggle" category is often accessed as a synthesis of body language, affections, attending trials, demonstrations in public spaces, in short, the set of actions that are part of the activist experience[25]. Cameroonian philosopher Achille Mbembe defines struggle as the work necessary to escape death and denounce it, promoting the healing of the Self and the community. This definition is anchored in Mbembe's interpretation of the roles of violence and struggle in the Fanonian work:

Strictly speaking, life is what the struggle has produced. The struggle, as such, has a triple dimension. First, it aims to destroy what destroys, amputates, dismembers, blinds, and causes fear and anger. Then, it tries to treat and eventually heal those the power has hurt, raped, tortured, incarcerated, or simply driven mad. Therefore, it aims to participate in the general process of healing. Finally, it seeks to bury all the fallen "backstabbed". From this viewpoint, it performs a burial function[26](p.291-292).

On the opposite side of this clash is the State, which, as observed by Vianna and Farias[25], starts to assume an almost embodied and masculine position. It starts to be pointed out by mothers as responsible for bringing the "war" into their homes, murdered their children, and destroyed their families. A Mother vs. State contrasting relationship is established, structurally unequal, and highly violent against these mothers, their children, and their community, as Dandara denounced:

This network of mothers organizes itself, which goes against the State because they go right after our children. This state, this criminal system is well organized. The moment they take our children's lives, they disrupt the whole family. Then, we stand up. These mothers they wished they left with their children, "the thing is they should get sick, the family should get sick too, and all should die!". I think it's a way of putting an end to the poor, the slum dwellers, the marginals. This same State that does not help us at all is the same State that takes our children's lives, destroys our family, makes us sick. What positive relationship should I have with this State? (Dandara for the Focus Group).

This finding elaborated by Dandara correlates with the notion of necropolitics, coined by Mbembe[27], defined as the contemporary practices that subjugate life to the power of death and that profoundly reconfigure the relationships of resistance, sacrifice, and terror. The philosopher argues that the State exercises its sovereign power by defining which lives are disposable:

The ultimate expression of sovereignty resides, to a large extent, in power and the ability to dictate who can live and who should die. Therefore, killing or letting live are the limits of sovereignty and its fundamental attributes. Exercising sovereignty is exercising control over mortality and defining life as the implantation and manifestation of power[27](p.123).

In the necropolitical mode of exercising state power, "racism regulates the distribution of death and facilitates the State's murderous functions"[27]. The Mothers' Movements identify race as one of the main elements for the disposability of their children's lives and communities. The process of building these women's racial consciousness is often marked by the observation of racial similarity between those who are called "mothers of thugs", those who organize in lines to visit their imprisoned children, and those who mourn the death of their children, victims of state violence.

Its activism also represents an attempt to revive in public debate the humanity denied to their children. The search for moral reparation before public opinion gains, for these women, a place as important as the fight for the punishment of those involved in these crimes. The preservation of their children's memories is one of the reasons that keep them in activism. They often repeat that their children are alive through their voices[14,25,28]:

When my son died, he was called a thug by Wagner Montes. A person who woke up at four in the morning to be labeled a bandit? (Lélia, individual interview).

When he was murdered, Wagner Montes said on TV that my son was a criminal. I despaired seeing his little face on TV: my son died a second time there. [...] They always try to put it as if people who live in the favela could be killed. One of the things I stand up the most in this fight is being able to put on a shirt with my son's photo, stamp his face on my chest and take him to let people know. He has a family; he has a mother; friends; people who still suffer because of his absence. We don't have to hide: those murderers have to do it (Dandara, individual interview).

These mothers face exposure on television programs that follow police news, expanding and naturalizing violence. We see the production of a media-derived penal populism that profits from the exploitation of crimes and encourages revenge against "Other" constructed as a "thug", almost always poor, Black, and anonymous[21].

For Carolina, whose son had already been arrested on a previous occasion, entering the struggle was even harder, as she had been discouraged several times. She says she even heard from neighbors, "what are you going to fight for, bitch, if he was involved?", but she reports that her activism is also to encourage other women:

If he was approached and then killed, then that mother must engage in the struggle. It's not because she was dealing that she has to let it go. [...] We see many such cases: the guy already surrendered, and he was killed on the spot; but he was stealing, so the mother doesn't join the struggle (Carolina, individual interview).

The reality facing the Mothers' Movement is one of impunity. An Amnesty International report estimated that only 5% to 8% of homicides in the country are solved[29]. In cases registered as "homicide resulting from police intervention", impunity is more pronounced, mainly due to severe flaws in the investigation process[29]. Legal accountability of public agents and financial compensation play a role in enforcing justice and combating the culture of impunity, which encourages the violent action of security agents in the favelas.

Carolina believes impunity is a factor directly linked to the repetition of cases similar to hers. She goes on to argue that her fight for justice is also against impunity, but that the observation of repeated cases discourages her:

I wanted them to pay for their mistake because I would know that they weren't supposed to be doing this to other people. However, it seems that the more they arrest them, the more they do it. It's no use wanting to ask for justice because they're going

to arrest them, then they let them go, and they start killing again. If you expel them, they will become a militiaman. Then they will kill with all their might! Sometimes we feel useless because we are fighting all the time, and we see these things happening (Carolina, individual interview).

Given this adverse reality, Smith[17] argues that if the anti-Black necropolitics, employed as a transnational policy, seek to exterminate Black bodies, then Black motherhood is its antithesis, given its inherent function of reproduction and preservation of Black lives. As pointed out by Audre Lorde, "[we] weren't supposed to survive", but Black mothers have always created survival strategies[14] (p.192).

Death plays with bullets in the trigger fingers of boys. Dorvi remembered the arrangement, the oath made in unison, shouted under heavy gunfire: - We agreed not to die![30](p.99).

Violence and illness

One of the only publications dedicated to the health of Brazilian Black women, *The Black Women's Health Book*, has a chapter dedicated exclusively to losses from violence and its consequences for health. In this chapter, Davis describes non-assistance experiences shared by her community:

I believe Black women are intensely used to tragedy. We expect tragedy. Death is no stranger in our lives and worlds. We lost our parents to hypertension and heart attacks. We lost our husbands and lovers to police violence and our children to prisons or drug trafficking[31](p.108-109).

Scientific literature refers to relatives and friends of homicide victims as co-victims or homicide survivors[32]. Understanding and reinterpreting death is a challenge for relatives as it is a crime perpetrated with hatred and intent to kill. The statements of our interlocutors show that this suffering lasts indefinitely, with the recurrent statement that this is a pain that will never go away:

Saying you will forget is all a lie. Because each day we remember more about our children. The pain gets worse. [...] Sometimes, we get up and feel suffocated: it is as if we will die (Luíza, individual interview).

In a systematic review of homicide survivors[33], the authors observed that psychological effects are the most common, especially post-traumatic stress disorder (PTSD), depression, and anxiety. They also noted that grieving tends to protract, having been restricted or obstructed by events

related to the murder, such as criminal justice proceedings, threats, and stigma.

A child's loss in violent situations, especially in a context that generates little solidarity from public opinion, imposes interrupted, suppressed, and muffled mourning on these women. Piaza-Bonin et al.[34] call it *disenfranchised grief*, here translated as grief without rights, experienced when the loss cannot be openly recognized, publicly lamented, or lacking societal support. It occurs when the community delegitimizes the mourning of mothers whose children were involved in criminal activities or when public opinion accepts the victim's criminalization as a fact and blames the mother for her child's death.

Butler[35] argues that grief is both an individual and a social process. The loss inaugurates the emergence of a new "I" that starts to exist without a "you", so that, besides personal loneliness, mourning is experienced in the exercise of interpersonal and community relationships. In the case of families of homicide victims who are awaiting a judicial resolution of the case, mourning can be experienced as an ongoing process, which modifies family ties and profoundly affects their relationships.

Our interlocutors reported that the need to repeat the stories of their children's deaths, as part of the activist experience, distances them from socializing with some friends and family, as Lélia said about the loss of contact with her sisters and mother. Carolina said her relationship with her partner was untenable after her son's death. All the respondents reported the abandonment of their child's father after joining activism. These reports show the loneliness that marks the experience of this type of mourning.

Another experience shared by mothers was the fear that something bad could happen to their children. Lélia reported that she left the favela where she lived with her little children for fear that they would be victims of violence, which began to escalate in the early 2000s. Carolina also feared for her child's safety, but she mentions a fear "of asphalt and the city", in contrast to the security she felt in the favela until the arrival of the Pacifying Police Unit:

I was calm. I knew it was a place where he could walk peacefully. I never imagined that he would be killed inside the favela. It could be when he was doing his art on the street. This came to my mind: "he's going to end up being killed in the city. How am I going to find this kid?" (Carolina, individual interview).

Rocha[14] defined this fear as "anxious imminence"(p.155), which comprises the period when mothers desperately try to get their children out of crime or other dangerous activities that can lead to their death. This fear seems to hover constantly over Black mothers in racist societies, generating a state of alert that produces care indented by the fear of tragedy and imminent death. This is a reality-based fear, part of looking at yourself and your surroundings.

These women often keep seeing cases similar to theirs repeating themselves and are forced to "relive" the plot of violence they were subjected to. Thus, the diagnosis of anxiety, or even panic syndrome, like the one felt by Carolina, does not show the roots of this anxiety and fear, which result from racially determined and naturalized injustices and violence in Brazilian society.

All interlocutors in the survey reported having received a diagnosis of depression after they lost their children. They often use the term "fall" as a synonym for depression or deep sadness that can hinder the mother's ongoing struggle. On the other hand, the category "getting up" refers to returning, going back to the struggle after a period of depression:

When we get up, we realize that we have strength [...]. My concern today is with health because we have seen many mothers dying, many mothers getting sick. It is necessary to be healthy to continue on this path (Dandara, focus group).

Movement is good because it is one lifting the other (Carolina, focus group).

Like depression, PTSD is a common diagnosis among homicide co-victims[33], characterized by insomnia, panic attacks, flashbacks, social isolation, and constant alertness. The classification of this disorder emerged to address the pictures presented by people who have experienced violent events, such as soldiers at war, rape, or natural disaster victims[36]. Currently, this diagnosis also applies to traumatic situations in everyday life, such as assaults and kidnappings. In general, individuals affected by PTSD are separated from the violence that generated the trauma.

The mothers interviewed in this research reported several of these symptoms. They live in territories dominated by armed violence, a reality for most women who lose their children to state violence. In this context, their sadness, anxiety, intrusive thoughts, and fear are responses to a sick social context. The traumatic situation does not end in the past; it is part of what weaves their present. Therefore, elaborating psychiatric diagnoses that do not consider the processes that structure the social reality of these women does not seem to account for their life experiences.

It is essential to consider that these women continue to be the main responsible for reproducing life in their families and communities, which are also affected by the early and violent death of these young people. Thus, besides dealing with their pain, these mothers also have to take care of other family members, who are also in deep suffering. The suffering of this loss is not experienced in isolation but as part of the set of violations that constitute the *continuum* of the genocide of the Black population.

Dandara reports that her youngest daughter needed psychotherapeutic follow-up to treat the trauma caused by the loss of her brother. Lélia also reported that her 10-year-old grandson showed a sudden change in behavior after the loss of his uncle:

He says that his uncle would come back to fly a kite with him, and he didn't come back. He doesn't fly a kite anymore. [...] The teacher called my daughter at school because he cries every time he talks about family in the classroom (Lélia, individual interview).

The mothers report mental illness and the emergence or deterioration of other diseases, such as systemic arterial hypertension, diabetes, gastritis, dermatitis, and rheumatoid arthritis. Insomnia and memory loss are particularly noteworthy, as all mothers reported them.

All of them reported having received little or no institutional support following the loss of their child. On the other hand, they also found support in community organizations to combat violence, which were also primarily responsible for their access to health services. One of the only public institutions that embraced them was the Human Rights Commission of the Legislative Assembly of the State of Rio de Janeiro. They named Marielle Franco, a Rio councilor murdered in March 2018, as one of the people who brokered access to health care, the Justice system, and activist mothers' groups.

In these groups, they find space to share a pain they claim can only be experienced by other mothers in the same situation. The possibility of helping other women seems to give new meaning to their lives, building resistance against the dehumanization to which they are continually submitted.

Besides a possible (individual and collective) therapeutic effect, the praxis forged in this struggle is described by activists as an awakening to the issues underlying the murder of their children:

Sometimes we see a news story here; another there. We don't realize it, but when we go to the groups and look at each other, and the mothers are Black, the women who have their children murdered are Black, poor women. Sometimes there is a minority of white mothers, but they end up in this same context because they are poor; they live in favelas and the outskirts (Dandara, focus group).

Do you think they killed my son because his skin was darker than mine? (A question that was asked to me by a mother from Ceará, at the III International Meeting of Mothers and Relatives of Victims of State Terrorism, in 2018).

This seems to be a struggle only conjugated in the plural, which refers to structuring Brazilian societal issues. Thus, these mothers symbolically assume a place of resistance from the entire Black community.

Conclusion

The sophisticated way racism operates in Brazilian society, sustaining new and old genocide strategies, imposes on us the need to produce health analyses based on historically silenced Black epistemologies. For this reason, discussing these strategies of extermination, erasure, and assimilation of Black people using the notions of the genocide of the Black population and necropolitics allows us to produce racialized analyses of reality that engender experiences like those of mothers that we follow throughout this paper.

The disease processes to which these women are subjected differ from the natural processes they would experience had they not been victims of the State's violent action. They are mothers who suffer from the perpetuation of violence far beyond the physical loss of their children: they are denied the right to protect the history of their loved ones, face the silencing and emptying of their complaints, under the accusation that they would be "mothers of thugs", therefore, discredited. They face a reality of impunity and lack of institutional care for their social and health demands.

The way the Mothers' Movement works is close to the notion that, in African philosophy, is called Ubuntu – "I am because we are". This guiding principle of community life is based on recognizing the humanity of oneself and the other. It is carried out through the exercise of a political solidarity as a guarantee of survival in the face of the lack of state support.

We defend that a care proposal for these mothers and family members should be based on recognizing their humanity and the social deter-

mination of the conditions of gender, class, ethnicity, and territory on their illnesses. This proposal can shift from the biomedical framework to practices that prioritize affection, inspired by the pedagogies of care produced within this activism and the identification and denunciation of the true causes of their suffering: the Brazilian racist social structure.

Collaborations

VS Araújo worked on original writing, data curation, formal analysis, investigation. VS Araújo, VLM Silva and ER Souza worked on writing - revision and editing, methodology. VLM Silva and ER Souza worked on supervision.

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