

INTERSECTIONALITY AND COVID-19:  
GENDER, RACE AND CLASS IN QUILOMBOS  
AND URBAN AGGLOMERATES IN THE  
PANDEMIC IN MINAS GERAIS

*INTERSECCIONALIDADE E COVID-19: GÊNERO,  
RAÇA E CLASSE EM QUILOMBOS E AGLOMERADOS  
URBANOS NA PANDEMIA EM MINAS GERAIS*

*INTERSECCIONALIDAD Y COVID-19: GÉNERO,  
RAZA Y CLASE EN QUILOMBOS Y AGLOMERADOS  
URBANOS EN LA PANDEMIA EN MINAS GERAIS*

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**ABSTRACT:** We present a critical overview of the Covid-19 pandemic, focusing on the intersections between class, gender, and race, based on the quilombola communities Córrego do Narciso and Córrego do Rocha, in the Vale do Jequitinhonha, Minas Gerais, and Cabana do Pai Tomás, an urban cluster from Belo Horizonte-MG. We seek to strengthen the concepts of health democracy and the right to health based on the practices of the subjects. Based on projects that emanated from institutional

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networks, to confront and analyze the health context, the research operated at the confluence of popular health education and the dissemination and popularization of science, understood as promoting an in-between place of encounters. The methodology gave prominence to qualitative analysis, helping to understand the role of female leaders in actions to combat COVID-19 and its effects. Despite geographic distances, these women connect, making multiple territories linked in historical time and pandemic urgency.

**KEYWORDS:** Quilombos. Urban clusters. Health democracy. Gender. Intersectionality.

**RESUMO:** *Apresentamos um panorama crítico da pandemia da Covid-19, com foco nas intersecções entre classe, gênero e raça, a partir das comunidades quilombolas Córrego do Narciso e Córrego do Rocha, no Vale do Jequitinhonha, Minas Gerais, e da Cabana do Pai Tomás, aglomerado urbano de Belo Horizonte-MG. Buscamos tensionar os conceitos de democracia sanitária e direito à saúde, a partir das práticas dos sujeitos. Pesquisas baseadas em projetos que emanaram de redes institucionais, para o enfrentamento e análise do contexto sanitário, operaram na confluência da educação popular em saúde e da divulgação e popularização em ciência, entendidas como promotoras de um entre-lugar de encontros. A metodologia deu proeminência à análise qualitativa, contribuindo para perceber o papel das lideranças femininas nas ações de enfrentamento à Covid-19 e seus efeitos. Apesar das distâncias geográficas, tais mulheres se conectam, fazendo múltiplos territórios se vincularem no tempo histórico e na urgência pandêmica.*

**PALAVRAS-CHAVE:** *Quilombos. Aglomerados urbanos. Democracia sanitária. Gênero. Interseccionalidade.*

**RESUMEN:** *Presentamos un panorama crítico de la pandemia de Covid-19, centrándonos en las intersecciones entre clase, género y raza, a partir de las comunidades quilombolas Córrego do Narciso y Córrego do Rocha, en el Vale do Jequitinhonha, Minas Gerais, y Cabana do Pai Tomás, una cluster urbano de Belo Horizonte-MG. Buscamos tensionar los conceptos de democracia sanitaria y derecho a la salud, a partir de las prácticas de los sujetos. A partir de proyectos surgidos de redes institucionales, para confrontar y analizar el contexto de salud, la investigación operó en la confluencia de la educación popular en salud y la difusión y popularización de la ciencia, entendida como promoción de un lugar intermedio de encuentros. La metodología dio protagonismo al análisis cualitativo, ayudando a comprender el papel de las mujeres líderes en las acciones de combate al Covid-19*

*y sus efectos. A pesar de las distancias geográficas, estas mujeres se conectan, vinculando múltiples territorios en el tiempo histórico y la urgencia pandémica.*

**PALABRAS CLAVE:** *Quilombos. Aglomeraciones urbanas. Democracia sanitaria. Género. Interseccionalidad.*

## **Introduction: Multiple Territories and Their Encounters**

In early 2020, during February and March, the COVID-19 virus arrived in Brazil. At that time, amid uncertainties and discussions about isolation and virus containment, there was a narrative suggesting that COVID-19 would be a “democratic” disease, affecting the entire population equally. In contrast to this narrative, Elaine Nascimento from the Fiocruz Gender and Race Committee asserted in an interview with RADIS Comunicação e Saúde magazine, “The pandemic has color and gender” (Nascimento, 2020). Her statement was echoed in numerous academic, scientific, and journalistic publications, highlighting how the virus impacted the population differently, intersecting with gender, race, and social class, thus exacerbating inequalities in Brazilian society. The progression of the pandemic revealed that the most affected segment was poor Black women. Notably, the first recorded death from COVID-19 was a Black woman, Cleonice Gonçalves<sup>1</sup> a domestic worker. She lived in Padre Miguel, a neighborhood in the western zone of Rio de Janeiro, approximately 120 kilometers from her workplace in the southern zone. Her employers, who had recently returned from Italy, tested positive for the virus, which Cleonice contracted at her job.

We observed that some segments of the population experienced the pandemic’s effects more acutely, whether through the disease itself or other intersecting factors such as unemployment, food insecurity, mental health issues, transportation problems, and difficulties accessing basic health services. We understand that the pandemic reinforced structural exclusionary elements, directly affecting Black women.

Considering these intersections, this article integrates results from several projects developed by the authors, as listed below. Our team has been involved in and conducted various institutional studies and research financed by the Federal Center for Technological Education of Minas Gerais (CEFET-MG), Fundação

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<sup>1</sup> This information is available on the website of CAMTRA – Casa da Mulher Trabalhadora, in the article “*Relembrar para não esquecer: Primeira vítima da Covid-19 no Brasil foi uma empregada doméstica*”, published on February 26, 2021 and which can be accessed through the link: <https://camtra.org.br/index.php/2021/02/26/relembrar-para-nao-esquecer-primeira-vitima-da-covid-19-no-brasil-foi-uma-empregada-domestica/>. Accessed on: August 6, 2024.

Oswaldo Cruz - Fiocruz, the René Rachou Institute - IRR/Fiocruz Minas, and the Bill and Melinda Gates Foundation. Among these studies, we highlight the following projects: *Comunidades quilombolas e Covid-19: desenvolvimento de tecnologias sociais para promoção de saúde no Médio Jequitinhonha, Minas Gerais*; *Comunidades quilombolas e Covid-19: gênero e água como promoção de saúde no Médio Jequitinhonha, Minas Gerais*; *Covid-19, risco, impacto e resposta de gênero*, esse último no escopo do projeto internacional *Gender & Covid 19*, and finally, *Ciência, Tecnologia e Sociedade no combate à COVID-19: uma rede de comunicação popular, acesso à informação e solidariedade*, referred to as the *TamoJunto* Project.

The scope of the first and second projects was to assist in improving the health and quality of life conditions of two quilombola communities located in the Vale do Jequitinhonha region during the COVID-19 pandemic by implementing low-cost social technologies and water resource reutilization to ensure the sustainability, leadership, and autonomy of these territories. In this context, quilombola women were the primary coordinators of the project and the dialogue between the community, the research group, and municipal authorities. As observed in these projects, the most significant impacts of COVID-19 were related to the scarcity of water resources to which the quilombola communities in Vale Jequitinhonha have been subjected for years.

**Figure 1** – View of Part of Quilombo do Córrego do Rocha



**Source:** Fiocruz Team (2022).

**Figure 2** – Entrance of Quilombo do Córrego do Narciso during Extreme Drought



Source: Fiocruz Team (2021).

The third project aimed to analyze the impacts of the pandemic from a gender perspective. This project was executed by IRR/Fiocruz MG, with funding from the Bill & Melinda Gates Foundation, involving various fields of human and social sciences, as well as numerous institutes, universities, and CEFET-MG. The project employed a mixed-methods approach, including semi-structured narrative interviews, focus groups, online surveys, media analysis, and public policy analysis. The territories covered included the communities of Sapopemba (São Paulo-SP); Cabana do Pai Tomás (Belo Horizonte-MG), Quilombos do Córrego do Rocha (Chapada do Norte-MG), and Córrego do Narciso (Araçuaí-MG), municipalities in the Metropolitan Region of Belo Horizonte and the Vale do Jequitinhonha, as well as other municipalities in Minas Gerais, Rio de Janeiro, and Bahia. This extensive network of researchers and local participants allowed for an examination of how the impacts of COVID-19 on the Brazilian population intersected with gender, race, and class. Furthermore, through technical notes, bibliographic production, meetings, and public hearings, it was possible to urge public authorities to take actions that considered the specificities of gender and race in the context of the pandemic.

The *Projeto TamoJunto*<sup>2</sup> aimed to build a network for popular communication, information access, and solidarity in combating COVID-19, operating in four peripheral communities in Belo Horizonte: *Aglomerado Cabana do Pai Tomás* and urban occupations, including *Ocupação Vila Esperança*, *Ocupação Paulo*

<sup>2</sup> The project was financed with resources from Notice 32/2020 of the Directorate of Extension and Community Development (DEDC) of the Federal Center for Technological Education of Minas Gerais (CEFET-MG) and from the Decentralized Execution Term (TED) 9269 – Process 23062.011982/2020-98.



*Freire*, and *Ocupação Eliana Silva*, all within Belo Horizonte. It is noteworthy that the project was developed in response to demands from community leaders in *Aglomerado Cabana do Pai Tomás*, who were partners in other extension projects conducted by CEFET-MG. In 2020, they expressed concerns about the spread of fake news within the community, its impact on personal and collective care, and the dissemination of government assistance policies and solidarity actions. From this starting point, the project, by integrating science, technology, and society, facilitated: the collection and systematization of informational content on combating COVID-19; the development of a BOT for disseminating COVID-19 information; the training and fieldwork of socio-educators in the territories; the creation and distribution of printed materials; the production of audio content; the production and dissemination of audiovisual material; and the distribution of hand sanitizers and face shield masks.

**Figure 3** – Panoramic View of Cabana



**Source:** SoFiA Program (2023).

**Figure 4** – Cabana do Pai Tomás



Source: SoFiA Program (2015).

We sought to establish connections regarding the impacts of COVID-19 on the lives of quilombola communities, specifically those in the *Quilombos do Córrego do Narciso* and *Córrego do Rocha*, both located in the Vale do Jequitinhonha-MG, as well as the *Aglomerado da Cabana do Pai Tomás* in Belo Horizonte-MG. The common threads connecting these territories are the role of women in disease prevention and control efforts within their communities, racial issues, and the economic and social challenges imposed by historical processes of occupation.

It is important to note that despite the geographic distances between the *Aglomerado da Cabana do Pai Tomás* and the Quilombola Communities of *Córrego do Rocha* and *Córrego do Narciso*, these contexts converge, particularly since the 1960s, through dilemmas established between urban and rural areas. Under the authoritarian regime of the military dictatorship, eucalyptus plantations, supported by tax incentives for the steel, paper, and cellulose industries, significantly impacted the lives of quilombo residents, in an attempt at annihilation that has not ceased and has included ongoing resistance, both associative and cultural, material and immaterial. Part of the territory now known as *Aglomerado da Cabana* also emerged on land previously used for eucalyptus plantations, leading to further struggles that are reflected in the active political history of the community, as seen in the active residents' association, various collectives, and enduring fights to have the territory recognized as part of the capital, Belo Horizonte, which has aspired to be selectively modern since its foundation in 1897.

In the case of quilombola territories, also affected by large eucalyptus plantations, we observe the intersection of two distinct historical moments: the quest for a free life that preserved their well-being, away from the slave and colonial logic between the 17th and 19th centuries, and more recently, with the 1988 Constitution (Brazil, 2016), which legally recognized and granted the right of the remaining quilombo population to stay on their lands, mobilizing an agenda of struggles and achievements. However, quilombos face depopulation due to a lack of job opportunities and difficulty accessing basic services. During the pandemic, there was a worsening of food insecurity, nutritional deficiency, and hunger due to rising food prices, reduced income and unemployment, and difficulty accessing basic resources for growing food, such as water. Government neglect of this issue includes a lack of data and information on the topic, the invisibility and denial of hunger, and the absence of specific policies that address these needs in a more contextualized manner.

In this sense, this article builds on the projects implemented in these three territories from 2020 to 2023, aiming to understand, through their convergences, how these communities confronted the coronavirus and its impacts. As a methodology, we chose to conduct extensive fieldwork in the territories discussed, in addition to applying structured and/or semi-structured interviews. We selected a qualitative approach, emphasizing qualified listening and using strategies that privilege research subjects in a dialogical and active manner, considering their origins, histories, and subjectivities. This approach ultimately involved understanding health and illness processes as cultural, social, political, and contextual constructs, valuing primary care policies, and updating and recognizing community/traditional medicine and its health practices.

Thus, we sought to explore how vulnerable populations in distinct experienced the COVID-19 pandemic—and also convergent—ways, given the absence of the State. Despite the State’s “necropolitics,” some women managed to devise ways to react, protect themselves, and engage in the struggle for territorial, sanitary, and socio-political rights. Specifically, this article focuses on the experiences of women, predominantly Black and poor, in leadership roles, considering their protagonism and actions in care models within their urban (Cabana do Pai Tomás) and rural (quilombola communities in Jequitinhonha) contexts.

To achieve this, the first part of the text discusses the pandemic and its intersections. The second part provides a conceptual discussion on the role of popular health education as an intermediary space that facilitates the connection between individuals and these territories. In the third part, we share the two experiences—*Cabana* and the two *Quilombola* Communities in the Vale do Jequitinhonha—understanding that they are crucial to the debate, not only as examples of women’s actions during the pandemic but also as evidence of how intersections of class,



gender, and race reveal that female leadership during the health emergency was subjected to various systems of oppression. These include the fear of death and losing loved ones to the virus, unemployment, water scarcity, food insecurity risks, the government's "let die" rhetoric, domestic violence, and loneliness. It is these combined and contested dimensions that drive these women to act for themselves and their communities in ways that few others have undertaken. Fighting to keep themselves and their community members alive, what Hill Collins (2022) refers to as flexible solidarity, forges the political engagement of poor and Black female leaders.

## **Gender, Race, and Class: Intersections in the Pandemic**

In the context of health emergencies, there is an intense mobilization of academic and scientific studies seeking answers to diseases and their impacts. In the case of COVID-19, its progression as an agent in the accelerated timeline of the health emergency, and the mobilization of subjects and social movements, have called upon the social and human sciences to reflect on the social, economic, political, racial, and gender impacts of the pandemic—an intersection that has been neglected at various times.

Historically, intersectionality has been grounded in the claims of various social movements, particularly those of Black and poor populations, especially during the 1970s, amidst anti-colonial struggles, the emergence of Black women's movements, and other movements for civil rights and democracy. In this sense, we propose using intersectionality to understand experiences during COVID-19, not only through the lens of intersections of race, gender, and class but also as a perspective on social problems, particularly in health emergencies as potential catalysts for social change, as Collins (2022) suggests.

This means that to comprehend health and illness processes, we must not lose sight of the specific determinants of health to which these populations are subject, particularly in the pandemic and also in post-pandemic contexts. Understanding that intersectional relationships are dynamic, non-linear, contextual, simultaneous, multiple, and interactive, and are related to political and geographical contexts, power disputes, and struggles for social justice, democracy, and human rights. From an analytical perspective, the tensions that arise when discussing health democracy and the right to health authorize us to consider, based on various structuring problems, how inequalities in access, persistence, and continuity in health policies are perceived, operationalized, and legitimized through very specific intersections of class, race, and gender.

Starting from an intersectional discussion in health allows us to recognize that health is socially determined. Health (and illness) conditions are not distributed randomly

within a given population; they depend on determining conditions that encompass the working and income conditions of that population, as well as other significant circumstances such as environment, education, unemployment, gender, race, access to sanitation and clean water, food production, housing, etc. The focus on gender, race, and class was the methodological, social, and political choice of this study. By considering the health of Black and poor women in these territories, we are collectively thinking about ways to build binding public policies for this population, so that they may not only be subjects of these studies but also protagonists advocating for the legal and social visibility of their issues and demands.

The vulnerability experienced by women in these territories can only be understood in light of their experiences and their historical and social contexts. During the COVID-19 pandemic, these vulnerabilities were exacerbated, shifting the understanding of the virus from a strictly biological perspective to a localized analysis, where difficulties in accessing basic rights were accelerated by the restrictive and protective measures imposed by COVID-19. Although such measures were crucial for preventing the spread of the virus, they ultimately undermined these territories with respect to food and nutritional security, maternal overload, domestic violence, mental health issues, income generation, and more.

Feelings of insecurity and uncertainty about the future and territorial integrity also marked the COVID-19 period. In the quilombos, many families migrated to ensure greater access to water and employment, as these communities are notably recognized for their lack of access to water resources. The situation was no different in the Cabana do Pai Tomás Community, where protective measures, restrictions, and the spread of the virus were not implemented democratically. The women of Cabana experienced varying levels of food insecurity, had to rely on financial aid from the government and community peers, and created support networks and multiple alternatives to cope with the changes imposed by the pandemic on their daily lives.

## **Popular Health Education as a Space of Resistance, Tensions, and Strengthening Bonds**

In the case of the territories analyzed here, the relationship established transcended mere data collection to support projects during the pandemic. Contact with people from *Cabana do Pai Tomás* and the *Quilombos of Córrego do Narciso and Córrego do Rocha* was made through various approaches that preceded this and found strength in popular health education and the dissemination and popularization of science. This approach facilitated the creation of emotional bonds, trust, institutional interrelations, and interactions with different social groups. In

health emergencies, certain meanings were repositioned, bringing new demands and variables, some preexisting and others updated by the social crisis.

COVID-19 prompted diverse studies: from quantitative analyses focused on epidemiological data to qualitative perspectives aimed at understanding how the pandemic experience produced social practices and experiences in the face of suffering and death. It was necessary to reconfigure methods of scientific communication and health education, challenging these fields to converge in a participatory and horizontal manner amid the waves of denialism pervading society, including those articulated in the governmental sphere, such as the political project of the Jair Bolsonaro government (2019-2022), for example.

Communication methods during the pandemic highlighted acute language, transmission, and dialogue barriers, primarily due to their reliance on a directive and vertical approach. Measures such as mask-wearing and hand hygiene, which were consensually recognized as effective prevention mechanisms, required a communicative and discursive repertoire involving multiple strategies. Thus, “popular” or “popularization” signifies more than a focus on specific social strata, particularly those marked by vulnerability; it points to effective and concrete interference, democratization, and participation.

The very notion of health democracy also faced intensified challenges in the pandemic context. Based on a legal framework intended to institutionalize citizen or social group participation in advocating principles such as universality, comprehensiveness, and equality of the right to health (Aith, 2015; 2019), it, too, found itself at a crossroads. Despite constitutional guarantees since 1988 and the historically significant roles played by conferences, councils, forums, hearings, and consultations, access to decision-making spaces in health still has a long way to go in terms of development and improvement. The dilemma between popular health movements and guidelines based on institutionalized public health agendas carries inherent contradictions to the notion of health democracy.

In the case of COVID-19, participation and efficiency in accessing certain rights were even more dependent on how the scientific discourse was able to mobilize broad territories. Beyond a space where informational guidelines would be merely disseminated, a dimension of multiterritoriality involving material, symbolic, linguistic, and belonging elements became indispensable (Haesbaert, 2019). It became increasingly clear that addressing the pandemic would require operating with the knowledge that needed to be appropriated and reappropriated by individuals. Moreover, the pandemic highlighted that institutional frameworks would be insufficient if social groups were not willing and persuaded to engage in campaigns and activate their health services, given the various forces working against this.

Piccoli and Stecanela (2023), in a systematic review of the literature on “popularization of science,” identify the various perspectives through which it is studied. The data facilitated a conceptual systematization that frames scientific dissemination as a communicational event, a deliberate action of transposition and decoding. On the other hand, popularization is not necessarily subject to a pragmatic endeavor; it seeks a notion of horizontality between science and society, reflexivity, and communicational dialogism, positioning itself in the process of societal development and alignment with the democratic model. Thus, scientific dissemination, including in the literature, is guided by interventions where dialogue is not necessarily a prerequisite, constituting a form of feedback to society. The pandemic, viewed through an intersectional lens, embodied an “in-between place” of subjects, actions, and demands, as the health emergency made the application of clear, immediate, and pragmatic communication necessary for the broader public, given that certain situations assumed a risk to society, such as restrictions on social distancing and even lockdowns. On the other hand, the progression of the coronavirus highlighted our deeper structural flaws, provoking awareness of class, race, gender, and other intersections that distinguish Brazilian society. Therefore, communication strategies had to address difficulties at the material level, such as access to the internet and treated water, low literacy, the absence of public health services, as well as symbolic aspects and how identities are constructed in territories.

In the quilombos of *Córrego do Narciso* and *Córrego do Rocha*, community associations served as catalytic entities for information and mutual assistance. Leading these efforts were Nenga and Catilene in Narciso, and Maria Aparecida in Rocha. The actions of these quilombola leaders in these entities can be summarized as follows:

They collected and distributed basic food baskets, hygiene kits, and masks. Hand sanitizer was particularly important for sanitation when the lack of water became more critical. Given this situation, the public authorities were called upon for a quick solution; however, many families were without water for over 15 days, and those who managed to access water brought in by truck often had to pay for the truck or for clearing roads to allow it to pass. As a result, many families, in order to survive, had to rely on scarce and dirty rainwater collected in cisterns (Valente *et. al.*, 2021, p. 174, our translation).

In the various territories, they also documented in interviews and other consultation mechanisms that they used WhatsApp groups to resolve doubts and communicate the arrival and distribution of donations, as well as information about the vaccine and the priority given to remaining quilombos or specific groups within the *Aglomerado Cabana do Pai Tomás*. Radio and television also emerged

as important channels for disseminating scientific knowledge about COVID-19. Additionally, Fiocruz and CEFET-MG combined actions such as producing newsletters with adapting graphic materials for different audiences and engaging in local popular health communication. The presence of institutional teams in the communities strengthened bonds, affections, and trust between individuals, researchers, and institutions, creating a space where populations could clarify doubts, recognize their rights, question absences, and resist.

The caregiving role of these women was highlighted. Many of them, directly or indirectly, were linked to movements that, prior to the pandemic experience, in addition to their daily work in the territory, advocated for health equipment or specific improvements through participation in local health commissions or associations of residents, rural workers, or quilombola associations. In the face of the state's fragility during COVID-19, it was through this protagonism and leadership that many activated their networks, rekindling connections with educational, research, and extension institutions like Fiocruz Minas and CEFET-MG. It was no coincidence that Tamo Junto originated from a voice message requesting help from Lúcia Apolinário, known as Lucinha, who was concerned about the breach of sanitary measures in *Cabana do Pai Tomás*. These women acted as bridges for the popular health communication and popular education in health that needed to be established in these intersecting territories, viewed through the social contingencies that brought them closer together.

## **Quilombos Córrego do Rocha and Córrego do Narciso, Minas Gerais**

For the first time in Brazil's history, the 2022 Census by the Brazilian Institute of Geography and Statistics (IBGE) recorded data on traditional peoples and communities. According to the census, the Brazilian *quilombola* population totals 1.3 million people, and out of the 5,568 Brazilian municipalities, 1,696 have quilombola populations. Minas Gerais ranks as the third state with the largest population, totaling 135,310 *quilombolas* (Brasil, 2023)<sup>3</sup>. An interesting fact is that 8 of the 10 municipalities with the most quilombos in Minas Gerais are in the North and the Vale do Jequitinhonha regions.

According to the Palmares Foundation, the Vale do Jequitinhonha is home to at least 80 quilombola communities, a notably significant number. Located in the northeastern region of Minas, this area was involved in diamond exploration in Minas Gerais and agricultural activities in Bahia between the 18th and 19th

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<sup>3</sup> BRASIL. Quilombola population is 1.3 million, indicates unprecedented census cut. Published on July 27, 2023. Available at: <https://www.gov.br/pt-br/noticias/assistencia-social/2023/07/populacao-quilombola-de-1-3-milhao-indica-recorte-inedito-do-censo>. Accessed on: Aug 5, 2024.



centuries, with an intense flow of enslaved populations who, in turn, organized into quilombos, particularly in the plateaus.

Misleadingly known as the “Valley of Poverty,” the region is rich in culture and art and has historically been the target of development policies that, paradoxically, promote social inequality and water scarcity, among other issues. An important turning point was the so-called Green Revolution in the 1960s and 70s. Within the framework of the supposed “economic miracle,” a development plan was created for the region, and to manage this plan, the *Companhia de Desenvolvimento do Vale do Jequitinhonha* (CODEVALE) was established, along with the opening of rural credit lines. However, the credit granted did not benefit rural families but rather large landowners. Lands were taken over by logging companies, charcoal producers, and pulp mills through land grabbing, state leasing, or purchase at low prices. Over the years, this led to profound social and economic inequalities, as well as environmental damage, such as the siltation of springs, destruction of recharge areas, drying up of lakes, and concentration of grazing, exacerbating land and gully desiccation.

The quilombola communities were violently affected by this process and had to resort to seasonal work. Especially men, but also entire families, began to migrate to other regions in search of work, commonly in coffee harvesting in southern Minas. Additionally, the difficulties faced by quilombola families in accessing education and healthcare should be highlighted. With the men leaving, it is the women who assume the responsibilities and organization of the *quilombos*.

In the 1980s, with the country’s process of redemocratization, the strengthening of Black movements, and the action of base communities of the Catholic Church, quilombola communities began to gain attention in the struggle for rights. A significant milestone is the 1988 Constitution (Brazil, 2016), which, in Article 68, grants quilombola remnants the title and ownership of their lands. It is also in the Constitution that quilombolas are assured the right to maintain and safeguard their “culture” (Articles 215 and 216), guaranteeing the protection of both material and immaterial assets of this population, which are considered, for the first time, as part of Brazil’s cultural heritage.

Despite this significant achievement and recognition, it seems that quilombola identity is still a work in progress both within and outside the communities. As with the concepts of traditional communities (Cunha; Almeida, 2009), defining these populations using terms created in colonial encounters is, at the very least, contradictory. However, although such categories were created in artificial and even arbitrary ways, they have been inhabited and appropriated by the people who needed a universal framework to occupy spaces of struggle and political agendas to secure their rights.

In this sense, the quilombola people, like other groups, have been forced to occupy, not only discursively but also physically, such “identity” categories and terms, to the extent that they have now become tools seeking emancipation, territorial rights, and self-designation. Our team worked in the *Córrego do Rocha* community, located in *Chapada do Norte, Minas Gerais*, with approximately 50 families, and in *Córrego do Narciso*, in *Araçuaí*, within the same state, with approximately 70 families residing in their territory. It is assumed that these quilombola territories encompass a range of cultural and social practices, memories, sacred relations, and ancestry among themselves and others around them. These are territories led by female leaders in the care and formation of the quilombo and are historically marked by a lack of access to water.

It is noteworthy that the communities are named after streams that were once significant for the entire area but have been dry for at least five years. Due to the lack of access to water resources in general, these communities use cisterns (which capture rainwater), *terreirões* (cisterns with pavements), and *barraginhas* (structures for capturing rainwater that dry out during the dry season) as their means of water collection.

In this scenario, quilombola women are the protagonists in the fight for territorial rights and community health. As leaders, guardians of memory, knowledge, healing practices, and care, quilombola women are directly impacted by the lack of water. Although water exists, access is hindered by a number of factors, such as public authorities’ disinterest in quilombola issues and their invisibility as rights holders. The lack of access to water is the local language: a type of intersection that is present in all dialogues and meetings. In the context of COVID-19, the communities continued to be outside the investment and expansion of public health policies (Arruti *et al.*, 2021), with underreporting and insufficient preventive actions being common denominators observed both in the quilombos and *Cabana do Pai Tomás*.

There is a significant gap in the data produced about quilombola populations in the pandemic context, indicating difficulties in registration and monitoring by the responsible authorities. However, this gap was partially (and arduously) addressed by initiatives from the quilombola organizations themselves, which organized to develop specific inclusion and monitoring policies for the quilombola population.

In the legislative sphere, at the end of April 2020, Bill 2160/2020 was presented to the Chamber of Deputies by a mixed commission in defense of quilombola communities. This bill, which was later transformed into Ordinary Law 14021/2020 (Brasil, 2020). outlined urgent support measures due to COVID-19. In July of the same year, it was sanctioned with vetoes by then-President Jair Bolsonaro, who vetoed the provision that extended the law to quilombola populations.

In an effort to address the points vetoed by the former president and to combat the violation of basic rights of quilombola peoples, the quilombola civil movement and

the CONAQ (National Coordination of Quilombos) advocated for a pandemic response plan for quilombola communities, through the *Arguição de Descumprimento de Preceito Fundamental* No. 742 (ADPF-742). To ensure quilombola life and health, ADPF-742 recognized the right to the implementation of specific measures to combat COVID-19 for quilombola communities, as well as the allocation of emergency funds for health, water supply, hygiene materials, etc.

The ADPF-742 proposal was a significant advancement for the quilombola agenda, aiming to mitigate the absence of actions and information expressed in historical racism (Arruti *et al.*, 2021) and to strategically provide visibility to the issues and demands. One of these issues, often underrepresented in public health policies, refers to the mental health of quilombola populations during and after COVID-19.

Regarding the historical invisibility of women within quilombos, Gomes (2015) notes that there is little information and sources about the presence of women in quilombos but speculates that they were likely protected in the camps, within the forests, caring for the fields and the family, as well as engaging in artisanal production, crafting utensils, and performing religious functions to protect the quilombos. From Gonzalez's perspective (2020), every Black woman carries within her the memory of the quilombo, never ceasing to educate her children in the anti-slavery, anti-colonial, and anti-racist spirit.

In contemporary times, the “permanence” of these social roles performed by quilombola women in the territories described in the text is observed. Due to the difficulties in finding employment in the region, men live seasonally, relocating to other cities in search of work. It is the women who remain in the quilombo and manage care and planting activities in the community.

Women stand out as key figures in proposing resistance and strategies to overcome the limitations imposed by the pandemic and beyond. The most pressing issue has been the scarcity of water<sup>4</sup> as observed in the following narratives:

“The lack of water here for us, the total lack of water, has been since 2018, so for three years, the city hall came, and we were fighting for the pump to be turned on to supply the families, as was routine. But the water did not arrive; the pump was turned on and ended up breaking down.” (*Quilombo Córrego do Rocha*, 2021).

“Yes, the pandemic, of course, came surprisingly to revolutionize everyone's life, right, in relation to... our lives, in relation to... at the community and institutional levels. So, we had to reinvent ourselves, right?” (*Quilombo Córrego do Rocha*, 2021).

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<sup>4</sup> Due to the Ethics Committee's protocols, we chose not to identify the authorship of the narratives of the quilombola women and Cabana do Pai Tomás, although, for the most part, they claim their names as part of their leading roles.

“It’s a lot of lack of water. My cistern is practically dry, right? We don’t have a pump; we take the water with a bucket, and then pour it into the tank, which only gets a little water. Even today, as I’m making lunch, I had to fill several containers since yesterday, right? So I wouldn’t have to keep fetching water all the time. We have asked for water deliveries; if they don’t arrive this week, right?” (*Quilombo Córrego do Rocha*, 2022).

“So, for us here it is becoming difficult, because everything is increasing, and we don’t have enough water to work. If we had water, at least we could plant a pumpkin, a cucumber, a watermelon, a okra, and so on. But we don’t have enough water for that.” (*Quilombo Córrego do Rocha*, 2022).

The team witnessed and heard various narratives like these, about the dream of seeing water flow from the taps in their homes, the difficulties in washing clothes and dishes, and maintaining personal hygiene, a struggle that has lasted for at least thirty years. The overload of work, limitations on political and community engagement, the cessation of women’s gatherings and traditional and religious festivals, domestic violence, and loneliness exacerbated by the pandemic have had severe consequences. We can note in the following statements the differences related to work considered masculine versus feminine. Quilombola women are responsible for the creation of the quilombo, its issues, and the establishment of connections between its residents:

“I think that men don’t have as much responsibility. If they take on a position, they don’t care how it is done or whether it’s done well. And I think we, women, care more about the positions we take, whether we do them well or not.” (*Quilombo Córrego do Rocha*, 2022).

“Because women seem to be focusing more on the disease (COVID-19) and men think they are tough and, apparently, they believe they won’t catch the disease.” (*Quilombo Córrego do Rocha*, 2022).

Mental health issues have been one of the reported outcomes by leaders, who point to a lack of material and emotional support in their post-pandemic realities, which are marked by the persistent lack of access to water and the absence of effective public policies that ensure quilombola well-being. Although underreported, the impacts of long COVID still need to be properly mapped.

Despite the numerous vulnerabilities presented here, quilombola women are also responsible for creating strategies for persistence, occupation, and well-being during the pandemic. In a context where masks were lacking, they sewed their own. In the context of water scarcity, they mobilized public management to intervene

with municipal authorities. They also created support networks among residents, communicating from afar across backyards and fields and exchanging leaves, seeds, and fruits. The strategies devised by quilombola women were crucial for safeguarding their communities and (re)updating their recipes for teas, medicinal concoctions, and ways to maintain good health throughout COVID-19. As one of the quilombola women recounts:

“But I’ve already told the people! I always say: that bitter mint is good for colds! Lemon balm is good, too. Cooking with roots is beneficial. I give it to the kids to drink, and I drink it myself. So, there’s no need for medicine.”

Q: “Are the remedies here plants?”

“Yes, they are plants. I myself am not very fond of those doctors’ medicines.”

Q: “Do you take any?”

“I don’t. Just the teas, and only occasionally because I don’t like tea very much.”  
(*Quilombo Córrego do Rocha*, 2021).

Thus, we observed that, even in an environment lacking culturally appropriate public policies for the quilombola population, the leaders, in collaboration with the community, devised ways to ensure their territories were protected, as much as possible, from the consequences of the pandemic. And not only that. Just as in Cabana, partnerships were formed at various levels, from institutional collaboration (with the State Public Prosecutor’s Office, Public Defender’s Office, and religious institutions such as Caritas) to small-scale negotiations involving land, seeds, and medicinal herbs.

## **Aglomerado Cabana do Pai Tomás: A Context of Intersectionalities During the Pandemic**

*Aglomerado Cabana do Pai Tomás* is located in the western region of *Belo Horizonte* and is one of the largest in the city, with approximately 17,000 inhabitants (IBGE, 2010). However, depending on collective perception and how it can adjust the geographical scope of what constitutes the *Cabana* complex, the number of residents may reach 70,000, expanding boundaries and neighborhoods within this definition. Its official occupation dates back to the 1960s as a result of migration within the state of Minas Gerais, accelerated industrialization, and ongoing housing deficits (Cunha, 2003). The intense migratory urbanization within the capital of Minas Gerais led displaced populations to seek shelter near existing settlements,



such as the Barroca Community (*Favela*) and the *Pedreira Prado Lopes* Community. This was the case for *Cabana do Pai Tomás*. In the late 1960s, similar to the development projects affecting quilombos, Cabana faced threats of land expropriation for eucalyptus planting, as its occupation occurred in an area surrounded by eucalyptus cultivation.

Two women were involved in the teams and formed partnerships with these projects; they are residents of Cabana and exemplify the feminine leadership and activism highlighted in this text. Carmelita Aparecida dos Santos is one of them: Queen-Conga of the *Guarda de Congo São Benedito* and *Nossa Senhora do Rosário*, and president of the Local Committee of the Cabana Health Center, a position she held for two terms, from June 2016 to June 2022. Another is Lúcia Apolinário, known as Lucinha: an educator and social worker, with a history of moving in and out of Cabana and a mark of activism, having been a member of the Brazilian Communist Party, participated in health committees in Cabana, involved in associative movements, and political and institutional coordination. Both women embody a territory where women have repeatedly organized to resist various forms of social inequality in Brazil, exacerbated during the pandemic. Their trajectories, despite different paths, demonstrate how engagement in community and grassroots social movements can generate intersectional analyses and practices (Collins; Bilge, 2020).

Although the interviews encompass a diverse group of women, we will explore some narratives, seeking a semblance, albeit arbitrary, to represent other voices that we could not address due to the constraints of the text. The accounts from the women in the community demonstrate how, in the context of the Covid-19 pandemic, vulnerabilities were exacerbated in Cabana, particularly food insecurity (Schall *et al.*, 2021). This situation indicates a scenario of social aggravation intensified in specific territories and with variations within them:

“Having lived in the community for many years, I witnessed food shortages in people’s homes during the dictatorship, in the 80s and 90s, when there was still this demand during that crazy inflation period, and people begged for alms. Then, from 2000 onwards, people had easier access to food. But today, during this pandemic, from 2020 to 2021, with a worsening in 2021, we have many more people going hungry. And that means, literally, sometimes having nothing at home to eat or give to the family or children. We are dealing with this with great concern, trying in some way to alleviate and seek resources to meet this food need for families currently experiencing this.” (Indigenous woman, divorced, 58 years old).

The results of the project “Covid-19, Risk, Impact, and Gender Response” highlighted how food insecurity has sensitive variables, especially in families headed by women (Schall *et al.*, 2021). 61% of the interviewed women, across all territories

covered by the project, reported that access to food was hindered. Consequently, access to health institutions, social policies, and emergency actions such as the distribution of basic food baskets, masks, and hand sanitizer faces significant obstacles that challenge the concept of effective public health democracy.

“We partnered with CUT (*Central Única dos Trabalhadores*) and have been distributing meals three times a week, producing the food ourselves. We distribute every week, though it is limited, only 150 meals three times a week. I also secured a partnership, and every month, my association and our team manage to distribute an average of 70 food baskets. Additionally, we provide a kit of vegetables on weekends, either on Thursday or Friday.” (Indigenous woman, divorced, 58 years old).

The mobilization with other organizations, research institutions, and public health entities, as well as the pursuit of partnerships, whether institutional or not, underscores the argument of this article: how women have assumed a leadership role during Covid-19, how they understood their role in popular education and health communication, and made it a driving force for actions addressing the intersection of class, race, and gender. Morel (2022, p. 10), referencing Paulo Freire (1922-1997), when discussing the role of popular education in health for confronting the pandemic and denialism within it, emphasizes that “from the perspective of popular education, health and biology themselves are vital phenomena that cannot be understood outside of the historical, social, cultural, and political context.” In the case of *Agglomerado Cabana do Pai Tomás*, such a context highlighted actions for the dissemination and popularization of science, full of these intersectionalities.

The name *Tamo Junto*, chosen by the residents of Cabana, reflects a commitment to the community by addressing the communicational and material challenges experienced. A process involving researchers from various fields, student scholarship holders, community leaders, and residents was undertaken to promote popular health communication. Through this network between the community and institutions, formative spaces for socio-educators working in the communities were created, along with the production of informational material and other communication strategies (Silva Júnior et al., 2022).

The bridge previously mentioned, largely constructed by women, is described as follows:

“We did not receive any masks, so we decided to make masks to donate. Because my community continued with normal life, so to speak—people on the streets without masks, not understanding what the pandemic was, a lot of misinformation. So, we started making masks to donate. Initially, it was at the Cabana association,

using TNT fabric. Later, we managed to partner with *Linhas do Horizonte*, a group of women embroiderers with various groups in Brazil, including one in Belo Horizonte. We obtained fabric, borrowed sewing machines, and began producing a large number of masks to distribute. Initially, it was like that. Then a project came along, with CEFET, and they produced informational material for us, which we distributed and posted in bars, health centers, and churches. We distributed alcohol kits made by CEFET; we received 500 liters of alcohol. We carried out all this distribution and awareness of what the disease was. And that is how we got informed and passed on information.” (Indigenous woman, divorced, 58 years old).

The approaches to engaging with the community reflect the sociability of Cabana, even though these were constrained by social distancing protocols. Examples include using a loudspeaker vehicle as an effective communication strategy, adapting informational materials to enlarge the font size, or making health protocols clearer for people with visual impairments or the elderly.

However, the role of these women is even more pronounced when considering that popular communication does not emerge from a vacuum but is embedded in practices developed over time and social relations. Their intertwined experiences with structural changes, the creation and elimination of alleys, street paving, and government expropriation projects indicate transformations that make the environment a substrate of their lives, making them privileged knowledge bearers of strategies that could mitigate non-compliance with health protocols. Their presence in the community, through various avenues, whether cultural, religious, or festive, enables such effective communication, as their experiences and practices illustrate:

I am always involved in something, in some meeting. Right now, we are fighting for the CRAS (Social Assistance Reference Center). So, we fought hard; we built the health center in (Cabana), and thank God it is there, built with much struggle and difficulty, but thank God we are there serving people. As for anything that might be at my limit, I... I like to participate. I learned a lot from my father about investing in social aspects. I learned a lot from my father. So, I really enjoy participating. At the moment, I am somewhat inactive because it is necessary, but I really like being involved in social movements. (Black woman, divorced, 51 years old).

The theme of intersectionality has gained prominence in the academic field, despite obstacles, controversies, and ongoing debates. However, considering it more broadly, we outline here how the pandemic prompted women to engage with their practices and political activism, highlighting certain interactions and how powers

exert influence over them. COVID-19 underscores a perspective on their realities, marked by various social elements.

In the interviews conducted, one woman succinctly captured how this decoding is produced:

I think women lost more jobs. I think women lost more jobs. Because we already lose more jobs due to having children. Imagine. They need more men, men... the labor of men is much more valuable than that of women. If we have a child who is often ill, sooner or later our boss will fire us because we have concerns for our child that men do not have. Now imagine during the pandemic, right? We have to take care of the kids at home because there's no one else to care for them. Men don't need to take care because they are men. It's the woman who takes care, it's the woman for society. So I think in this regard, women... it has fallen much more quickly for women than for men. Not that men didn't lose too, but I think it was much stronger for women (...). I also think racial issues are very strong, right? I think white people have always been much more privileged than black people. And black women are even worse off because they are women and black. (White woman, single, 27 years old).

Another statement also points to an intersectionality present in social practices:

It [the pandemic] does not choose color, race, or class. But it hit much harder in communities, neighborhoods, favelas, where the houses are more crowded, the houses are smaller, there are many more people. And in these places are the black people of this country, right? So I think it is much more pernicious in this social aspect, okay? The pandemic killed many more black people, many more than white people. And women suffer much more violence in these aspects. Black women suffer even more. Right? So I think the pandemic has laid bare this social, racial, and gender disparity, right? (Indigenous woman, divorced, 58 years old).

These statements indicate what Collins and Bilge (2020) refer to as the use of intersectionality as an analytical tool. In this case, their social practices point to an existence within the territory marked by various intersecting factors. These women manage their racial, religious, and gender conditions, among others, within their caregiving roles at home and in public spaces. Their trajectories and experiences illustrate how they produce a social interpretation of Brazil and, more specifically, of the context of a post-2018 political project that more blatantly promotes a selection process to kill or let die. In these statements and those of other women, the pandemic exposes different forms of social inequality, with interactions between various

categories and different intersecting power relations. Their bodies and practices yield an interpretation of the pandemic reality in which race, class, and gender necessarily intersect.

Within the scope of these projects, their results and qualitative analyses indicate how the experiences of the women from Cabana were reconfigured by the health emergency. With reduced sociability, especially in the context of work due to health restrictions, they developed other forms of interaction and found new political meanings in their actions within the territory through mutual support and engagement with families impacted by the pandemic. They made popular communication and education a source of strength in seeking allies in a situation that highlighted a short-circuit in any pretended notion of democratic virus circulation and a real sanitary democracy within the Brazilian context.

In this context, it was through the execution of solidarity actions such as the distribution of food, clothing, and other items, the proposition and/or participation in projects, and acting as mediators with institutions like Fiocruz and CEFET-MG, as well as through involvement in institutional structures advocating for the right to health or defending their territories, that the women of Cabana, such as Carmelita, Lucinha, and others, symbolically and at the crossroads of history, even without knowing each other, became connected to others, like *Nenga, Catilene, and Cida*, in the *quilombos*.

## **Final considerations**

We observed that during the COVID-19 pandemic, despite the actions of vulnerability caused by the State or due to its absence, the communities studied here organized themselves and, in different contexts, mobilized various actors and institutions to confront the health emergency and its ramifications.

It is important to highlight that the pandemic brought to light latent structural problems that were exacerbated, namely: the lack of access to water resources, increased food insecurity, territorial insecurity and uncertainty regarding income generation, the burden on women, and mental health issues. In this sense, the actions of women leaders in mobilizing resources and improving health conditions pointed to what we understand as a new path toward health democracy and the right to health, demonstrating the need to challenge these concepts in the historical contingency, in the perception of territorialities, and from the perspective of intersectionality. The actions and mobilizations they promoted introduced, both politically and physically, other variables that affect Black and poor populations, and above all, women, making institutions pivot in different directions: toward social movements, feminine resistances, daily struggles, from the macro to the micro in a reciprocal interplay.



Scientific communication, in its strictest sense, was confined to the noise and dissonance concerning the virus containment and prevention measures. Thus, it became necessary to reaffirm intracommunity ties and relationships with institutions, researchers, and other societal actors, focusing on communication and popular health education. Other forms and communicational strategies had to be activated to address health and illness in communities impacted by denialism, fake news, as well as the inequalities and material obstacles that (dis)organize these territories.

Through an intersectional study, we sought to connect the trajectories of women, poor, some of them Indigenous and Black, who, despite being geographically distant, share paths marked by segregatory projects across different Brazils. The significant geographical distance did not prevent Cabana and the quilombos from coming together in the struggle for their territories, marked by resistance to authoritarian projects, where the land as a public good was increasingly transformed into a private one by corporate forces: eucalyptus trees serve as a strong agency for both communities, as they materialize this dispute.

Intersectionality is a collaborative intellectual and political project involving various social agents (Collins, 2022), as observed in the case of quilombola and Cabana women. In these communities, their actions exemplify how the interconnection of different “vulnerabilities,” particularly during the COVID-19 pandemic, propelled them to produce responses. These responses also resonated in dialogues with public authorities, negotiations, and collaborations with institutions, leading to the creation of political struggles and achievements that extended beyond the immediate health challenges, continuing even after the pandemic subsided.

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## REFERENCES

ARRUTI, José Maurício; CRUZ, Cassius; PEREIRA Alexander; SARTORI, Juliana; SOUSA, Caio Jardim; GUSMÃO, Hugo Nicolau Barbosa de; BERTOLOZZI, Thayla Bicalho. O impacto da Covid-19 sobre as comunidades quilombolas. **Informativos Desigualdades Raciais e Covid-19**, AFRO-CEBRAP, n. 6, 2021.

AITH, Fernando Mussa Abujamra. **Manual de direito sanitário com enfoque em vigilância em saúde**. Aith. Brasília, DF: CONASEMS, 2019.

AITH, Fernando Mussa Abujamra. Direito à saúde e democracia sanitária: experiências brasileiras. **Revista de Direito Sanitário**, [S. l.], v. 15, n. 3, p. 85-90, 2015. DOI: 10.11606/issn.2316-9044.v15i3p85-90. Available at: <https://www.revistas.usp.br/rdisan/article/view/97328>. Accessed in: 14 sep. 2023.

BRASIL. População quilombola é de 1,3 milhão, indica recorte inédito do censo. Publicado em 27 de julho de 2023. Available at: <https://www.gov.br/pt-br/noticias/assistencia-social/2023/07/populacao-quilombola-e-de-1-3-milhao-indica-recorte-inedito-do-censo>. Accessed in: 05 aug. 2024.

BRASIL. Câmara dos Deputados. Lei Ordinária 14021/2020. Available at: <https://www.camara.leg.br/proposicoesWeb/fichadetramitacao?idProposicao=2242218&fichaAmigavel=nao>. Accessed in: 05 aug. 2024.

BRASIL. Constituição da República Federativa do Brasil: texto constitucional promulgado 5 de outubro de 1988, com as alterações determinadas pelas Emendas Constitucionais de Revisão nos 1 a 6/94, pelas Emendas Constitucionais nºs 1/92 a 91/2016 e pelo Decreto Legislativo 186-2008. Brasília: Senado Federal Coordenação de Edições Técnicas, 2016.

CAMTRA – Casa da Mulher Trabalhadora. Relembrar para não esquecer: Primeira vítima da Covid-19 no Brasil foi uma empregada doméstica. Publicado em 26 de fevereiro de 2021. Available at: <https://camtra.org.br/index.php/2021/02/26/relembrar-para-nao-esquecer-primeira-vitima-da-covid-19-no-brasil-foi-uma-empregada-domestica/>. Accessed in: 06 aug. 2024.

CUNHA, Álisson Veloso. **A favela da Cabana do Pai Tomás: a ocupação consentida – memória e história**. 2003. 151 f. Dissertação (Programa de Pós-graduação em História) - Universidade Federal de Uberlândia, Uberlândia, 2003.

CUNHA, Manuela Carneiro da. ALMEIDA, Mauro W. Barbosa de. Populações Tradicionais e Conservação Ambiental. In: CUNHA, MC **Cultura com aspas**. São Paulo: Cosac Naify, p. 277-300, 2009.

COLLINS, Patricia Hill. **Bem mais que ideias: a interseccionalidade como teoria social crítica**. Tradução Bruna Barros, Jess Oliveira. 1 ed. São Paulo: Boitempo, 2022.

COLLINS, Patricia Hill; BILGE, Sirma. **Interseccionalidade**. São Paulo: Boitempo, 2020.

GONZALEZ, Lélia. **Por um feminismo afro-latino-americano**: ensaios, intervenções e diálogos. Org. Flávia Rios, Márcia Lima, 1ª Ed. Rio de Janeiro: Zahar, 2020.

GOMES, Flávio dos Santos. **Mocambos e quilombos**: uma história do campesinato negro no Brasil. 1ª Ed. São Paulo: Claro Enigma, 2015.

HAESBAERT, Rogério. Território e multiterritorialidade: um debate. **GEOgraphia**, v. 9, n. 17, 8 fev. 2010.

IBGE – INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA. Censo 2010. Rio de Janeiro: IBGE, 2010. Available at: <https://censo2010.ibge.gov.br/apps/agsn2/>. Accessed in: 20 set. 2023.

MOREL, Ana Paula Massadar. Negacionismo da Covid-19 e educação popular em saúde: para além da necropolítica. **Trabalho, Educação e Saúde**, [S. l.], v. 19, p. 14, 2022. DOI: 10.1590/1981-7746-sol00315. Available at: <https://www.tes.epsjv.fiocruz.br/index.php/tes/article/view/525>. Accessed in: 31 jul. 2023.

NASCIMENTO, Elaine. A pandemia tem cor e gênero, diz Elaine Nascimento sobre as desigualdades no Brasil da Covid-19. [Entrevista concedida a] Ana Claudia Peres. Escola Nacional de Saúde Pública Sérgio Arouca, junho de 2020. Available at: <http://www.ensp.fiocruz.br/portal-ensp/informe/site/materia/detalhe/49154>. Accessed in: 28 aug. 2023

PICCOLI, Marcia Speguen de Quadros.; STECANELA, Nilda. Popularização da ciência: uma revisão sistemática de literatura. **Educação e Pesquisa**, [S. l.], v. 49, n. contínuo, p. e253818, 2023. DOI: 10.1590/S1678-4634202349253818. Available at: <https://www.revistas.usp.br/ep/article/view/210734>. Accessed in: 14 sep. 2023.

SCHALL, Brunah; ROCHA, Mariela; SILVA, Bráulio; FERREIRA, Sidnei; VALENTE, Polyana; GONÇALVES, Flora; MOREIRA, Águeda; MENDES, Corina; PIMENTA, Denise. **Insegurança alimentar de mulheres e suas famílias no contexto da pandemia no Brasil**. Rio de Janeiro: **Fundação Oswaldo Cruz**, 2021. (Nota Técnica) Available at: [https://portal.fiocruz.br/sites/portal.fiocruz.br/files/documentos\\_2/genero\\_e\\_covid19\\_inseguranca\\_alimentar.pdf](https://portal.fiocruz.br/sites/portal.fiocruz.br/files/documentos_2/genero_e_covid19_inseguranca_alimentar.pdf). Accessed in: 06 aug. 2024.

SILVA JUNIOR, Paulo Roberto da; GALDINO, Giovanna Gimenez Zolini; GALDINO, Luisa Gimenez Zolini; MARINS, Maria Fernanda Santos; CHAVES, Bráulio Silva. O Projeto TamoJunto no contexto da COVID-19: tecendo laços sociais na extensão e comunicação popular em saúde. **Interagir: pensando a extensão**, [S.l.], n. 32, p. 125-132, out. 2022. ISSN 2236-4447. doi: <https://doi.org/10.12957/interag.2021.61407>. Available at: <https://www.e-publicacoes.uerj.br/index.php/interagir/article/view/61407>. Accessed in: 06 aug. 2024.

*Intersectionality and Covid-19: gender, race and class in quilombos  
and urban agglomerates in the pandemic in Minas Gerais*

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