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Imaginative and cooperative ways of doing research: dispositives and dispositions with care

Modos imaginativos e colaborativos de fazer pesquisa: dispositivos e disposições com cuidado[1]

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Abstract

This article is focused on methodological aspects impplied in a research on the responses of indigenous peoples to COVID-19 conducted by a network of indigenous and non-indigenous women researchers in different Brazilian states. We seek to share experiences and reflections on the limits and potentialities of a research carried out in the pandemic and with the pandemic, since the sickeness felt in the bodies and collective life of the researchers was an unavoidable agent in the methodological and analytical parcourses, in dialogue with feminist debates on the theme of care.

Keywords: Pandemic; Care; Collaborative Research; Indigenous Researchers; Anthropology.

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Resumo

Este artigo é direcionado para aspectos metodológicos implicados em uma pesquisa sobre respostas indígenas à covid-19 realizada por uma rede de pesquisadoras indígenas e não indígenas em diferentes estados brasileiros. Pretendemos compartilhar experiências e reflexões sobre limites e potencialidades de uma pesquisa realizada na pandemia e com a pandemia, já que o adoecimento experimentado nos corpos e na vida coletiva das pesquisadoras foi um agente incontornável em percursos metodológicos e analíticos, em diálogo com debates feministas sobre a tópica do cuidado.

Palavras-chave: Pandemia; Cuidado; Pesquisa Colaborativa; Pesquisadoras Indígenas; Antropologia.

Introduction

Over the course of 2021, amid the Covid-19 pandemic, we worked on a research project that set out to map, create and support indigenous initiatives for combatting the disease. The platform 'Indigenous Peoples Responding to Covid-19 in Brazil: social arrangements in a Global Health emergency' (PARI-c)[2] functioned as a visual tool for us to disseminate research notes, short films and case studies.[3] We produced publications monthly, held online meetings weekly and interacted daily using digital communication devices with people in different localities. PARI-c was conceived and implemented during the pandemic and envisaged access to digital technology for all participants. The hybrid working method was predominantly remote but included a face-to-face component provided by the indigenous researchers.[4] They reported on what was happening in their villages, talked to 'relatives' (*parentes*)[5] about their experiences and reflections, and shot and directed various short films.

PARI-c was a research project undertaken both during and with the pandemic in the sense that the illness experienced in the bodies and collective life of the researchers was an unavoidable agent in its methodological and analytic pathways. This is the topic we intend to explore in this article, focusing on the modes of care and caring that emerged during the research, inspired by the theme of care intensively mobilized in the field of feminist debates, following the example of works by Bellacasa (2011,2012,2017), Laet et al. (2021), Haraway (1991,2020), Mol (2008), Mol et al. (2020), Stengers (2015), Tsing et al.(2017), among others. Care can activate a range of meanings from an alert or warning (be careful) to an emotional or physical investment. Caring, taking care, caring for oneself, caring for others, thinking with and

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2 A project funded by the Medical Research Council (MRC), UK Research and Innovation (UKRI).

3 Retrieved from: www.pari-c.org.

4 We identify the researchers as indigenous in order to politically mark their forms of participation and modes of knowledge production, reflecting how the researchers themselves wish to be mentioned.

5 The term *parentes* – relatives, kin – is used by indigenous people in Brazil to refer to other indigenous people, whether or not they are from the same ethnic group and whether or not they have direct connections of affinity or consanguinity. The research interlocutions turned on, most of time, in the communities where the researchers lived, but conversations and surveys also took place that involved other villages and peoples. We set this first appearance of the term 'relative' in quote marks to emphasize its emic character.

through care are all actions that became an everyday part of our research practice over the 14-month period. To explore the devices and dispositions surrounding this topic, we propose two lines of approach. The first is ethnographic, sustained by emic narratives and agencies about care and caring; the second is conceptual-methodological, deriving from the contemporary literature on care.

We have organized the text in two sections: the first examines the collective dynamics and arrangements of PARI-c, focusing on the Southern Brazil team,[6] while the second turns to the reflections of two researchers from the Guarani Mbya people, Vherá Mirim and Yva Mirim, both co-authors of this article, taking them as examples of the challenges, dilemmas and potentialities of a co-laborative mode of research. Traversing both sections, we examine sickness and care as both the theme and the methodological inclination of the research, while also exploring the participation of digital devices in PARI-c and in so many other indigenous articulations and mobilizations during the pandemic period.

Little squares and pandemic traversals

PARI-c included around one hundred researchers, indigenous and non-indigenous, working in different regions of Brazil, among them researchers with PhDs and MAs, master's students and undergraduates linked to academic or non-academic institutions. The anthropological approach predominated in the team, but the network was also composed of indigenous researchers working in the areas of healthcare, education and arts, including *rezadeiras* (prayer healers), *erveiras* (plant healers) and *xamãs* (shamans). This network was formed through pre-existing partnerships, the initial

link being Maria Paula Prates.[7] The communities encompassed by the project were those where the indigenous researchers live and where the non-indigenous researchers have attachments based on friendship and dialogue. Specifically, the Southern Brazil team had seventeen indigenous researchers (eight fixed and nine sporadic and remunerated), sixteen non-indigenous researchers and two coordinators,[8] interacting with communities in the states of Rio Grande do Sul, Paraná, Santa Catarina, Mato Grosso do Sul and São Paulo. In these live closely-related peoples like the Guarani Mbya, Ava-Guarani, Nhandewa and Kaiowa from the Tupi-Guarani language family, as well as the Kaingang, a people from the Jê language family.

The activities of this network of researchers largely involved long-distance dialogues and exchanges of texts, audio messages, images and videos by mobile phone. Longer conversations were also held using remote video conferencing platforms. The indigenous researchers, for their part, were able to exchange knowledge and experiences face-to-face with co-residents in their respective communities, as well as with relatives and allies in other villages, also using their mobile phones.

The digital devices were not only mediums or supports for communication: they also participated in the sociotechnical networks of research, directly interfering in the modes through which the production and circulation of knowledge was realized (Rifiotis 2016). In the exchanges of mobile audio messages, for example, the absence of the body or image of the other person, their gaze, reactions and interventions, typically resulted in more prompt, shorter and less in-depth conversations, though sometimes these exchanges also led to less steered, richer and more complex dialogues. On more than a few occasions we exchanged lengthy

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6 In operational terms, PARI-c was organized into 5 work teams: (1) Southern, (2) Central and Southern Amazonia, (3) Northern Amazonia, (4) Northeastern and (5) Co-Team.

7 Maria Paula Prates coordinated PARI-c and, along with Valéria Macedo, the Southern Brazil team. Professor Christine McCourt was the Principal Investigator.

8 The participants of the Southern team were: Maria Paula Prates and Valéria Macedo (coordinators); Ara Rete Sandra Benites; Gãh Té Iracema Nascimento; Kuaray Ariel Ortega; Kunha Takua Rokavy Ponhy Paulina Martines; Mbo'y Jegua Clara de Almeida; Vherá Mirim Ataíde Gonçalves; Yva Talcira Gomes; Yva Mirĩ Araci Silva; Ana Letícia Schweig; Bruno Huyer; Renan Nascimento; Tatiane Klein; Amanda Signori; Eduardo Lima; Tomás Oliveira; Camila Padilha; Cauê Oliveira; Karen Villanova; Karina Corrêa; Laura Brizola; Milena Farinha; and Teodora Moraes.

audio messages, whether between the team's researchers or with interlocutors in the villages.

Meanwhile, in the synchronic meetings using video cameras, other relational dispositions were often activated. The participants of these encounters were not meeting in a village with the sounds, smells, practices, materialities and affects that usually make the conversations more vibrant than interviews in institutional spaces or in front of a camera. But the restraint that the camera can cause and the spatio-temporal framing it imposes can also encourage increased levels of concentration, reflexivity and emotional connection, especially when the people involved already share lived experiences and, as in our case, were prevented from meeting again face-to-face due to the pandemic. In diverse conversations held via cameras, we felt that this spatial distance was filled by an attempt to achieve closer proximity through the sharing of reflections and experiences. There were, of course, some conversations that did not flow because the restraint caused by the camera inhibited the flow of affects and ideas that a person-to-person encounter might have made possible.

Even in face-to-face fieldwork, we know how recording with a camera or an audio recorder can inhibit the speaker's spontaneity and disrupt their flow of thought, sometimes leading to more predictable and superficial responses. As the documentary filmmaker Eduardo Coutinho (1998) observes, though, it can sometimes activate a process of self-fabulation in which the camera incites the person to place themselves in perspective, constructing themselves as a character and author of their own history. Something similar happened with the audio messages sent by mobile and the conversations on the video platform. Amid the diverse range of situations we experienced, the internet and digital platforms undoubtedly influenced our production of relations and knowledge, participating even in assemblages involving face-to-face relations in the villages. As Hine (2015) emphasizes, research is seldom entirely online or offline; indeed this dichotomization is ultimately unsustainable.

In the Southern Brazil team specifically, interviews or informal conversations were held with approximately 60 indigenous people via digital platform or, in the case of indigenous researchers, in person. Some of these conversations were conducted in native languages and then translated by indigenous researchers. In the research context, a large portion of the team met in virtual encounters. We conducted weekly meetings in the first half of 2021, which became fortnightly in the second half of the year, using a remote communication platform. These encounters provided the chance for us to join up our 'little squares' on the computer screen. Iracema Gah Té, a Kaingang researcher, was responsible for introducing the image of the 'little squares' when she recalled her description of our meetings to people from her community. The squares would often contain wildly different settings in their backgrounds and people with different body and speech mannerisms in the foreground. Sometimes the internet hindered some of the participations, but, compared to PARI-c's other regional teams, where the precariousness of the virtual network made the interlocutions extremely difficult, we generally managed to communicate. We would usually begin with a round of reports or salient experiences during the week.

Covid was frequently present, whether among members of the team who had become sick or among relatives and loved ones who had fallen ill or died, as well as in the accounts of how people were confronting the pandemic in the communities. Covid also imposed its presence in the absence of team members who were in mourning or sick, and by the passing away of Iamoni, one of our indigenous colleagues, after contracting the disease.[9] Covid also made itself felt in what made us fall silent or what we did not share. In a figure-ground reversal, the pandemic was always present in the meetings, whether through the imposition of social distancing that confined each person to their little square, or through what was left unsaid in the silences and pauses that expressed not so much underground

9 Iamoni was from the Mehinako people, but she and the non-indigenous researcher Aline Regitano were included in the team due to their interest in the topic of pregnancy and childbirth. Iamoni was also an important leader and midwife in her community in the Xingu Indigenous Land (MT). When she passed away, we decided to omit the Mehinako case from the group's studies.

memories (Pollak, 1989), given that these were recent and still vivid, but, we could say, underground testimonies. There was thus an attachment (in the sense used by Laet et al. 2021) in which both silences and speech contained a wealth of information and reflections on indigenous responses to Covid, as well as teaching us about the methodological and ethical implications of a predominantly virtual, multilocal, multi-ethnic and pandemic research project. The forming of a network of care was part of this joint work, which involved intellectual engagements but also affective relations, listening to one another and providing diverse kinds of support.

For these reasons, Covid established itself not just as a matter of fact or a topic of interest – in the sense in which Latour (2004) contrasts matters of fact and matters of concern – but also an issue of care – **a matter of care**, as Bellacasa (2011 and 2017) proposes in questioning Latour's formulation. In particular, the author proposes an approach to care as a dissensus internal to both the person and the collective production of knowledge, in which heterogenic and asymmetric interventions foster the construction of a specific, localized and non-normative ethics. In our case, the intellectual engagements that we constructed were also affective and traversed by the vulnerability imposed on bodies by the pandemic and on our research into the pandemic.

Pursuing a similar vein, Haraway (2000) highlights how diseases make visible the constitutive vulnerability of bodies and the relations that compose them, constituting 'more than a metaphor' by being at once material and semiotic. In our research encounters, the screens of the participants showed diverse and unequal materialities, just as our bodies constitute partial and situated semiotic devices (Haraway 1988). The challenge was to 'think with,' including with Covid, which imposed itself as a research topic and as a methodological imperative of detotalization in which some things and relations made themselves visible while others did not. It was necessary to compose oneself with others carefully. A care that informed both the way of speaking and referring to something and how to transform this knowledge into data to be publicized.

After the initial round of sharing recent experiences, we sought to centre the topic of discussion on our thematic studies concerning (1) childbirth during the pandemic and (2) the meanings and implications of social distancing. During both these moments, the indigenous researchers spoke more often and for longer. The contributions of the non-indigenous participants generally aimed to systematize the team's findings, while those of the indigenous researchers tended to contain broader reflections and lessons based on unique situations that they had lived or heard about from relatives, ranging from individual cases to collective actions, as well as dreams and guidance from spiritual leaders.

It was not, though, just the histories that interpellated us, but also what the indigenous researchers identified as necessary care in the production and circulation of knowledge. Concerning this point, Vherá Mirim remarked on the fact that many *xejaryi* and *xeramoĩ* [10] may not want to speak to *jurua* (non-indigenous people) about some topics or may not want their words to be captured by an audio recorder or camera. Likewise, Clara Mbo'y Jegua, a Kaiowá researcher, told us how conducting interviews did not function well during her MA research: a conversation circle worked much better since the direct questions posed in interviews can 'suffocate' the interviewee. On the other hand, she also said that many *nhandeꞩy* and *nhanderu* [11] like to teach and think it is important to disseminate knowledge that has tended to become 'archived' due to the hardships of indigenous life in the confined, small and densely populated lands of the reserves, or in the retaken lands, constantly under threat, in the state of Mato Grosso do Sul.

Amid these and other dialogues, we reflected together on how the participation in a research project can carry the danger of capturing and fixing knowledge that only exists in movement and in relation to specific ways of living and thinking. But we also considered how research can 'de-archive'

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10   'My grandmother' and 'my grandfather,' or, more generally, wise elders among the Guarani-Mbyá.
11   'Our mother' and 'our father,' or, more generally, wise elders among the Kaiowá.

knowledge, preventing it from being forgotten, neglected or silenced, relocating it in new circuits and connections. We discussed too how the participation of indigenous researchers was important for these new circuits to help reverberate the demands and challenges faced in the villages, including forms of mobilization, reflection and confrontation of the diverse issues posed by the pandemic.

The study of childbirth, for instance, prompted the indigenous researchers to point out that conversations on the topic can be more difficult when the researcher is a man. Ariel Kuaray, from the Guarani Mbya people, remarked, however, that the birth of a child involves many forces and persons long before and after birth, such as the approximation of the *nhe'e*[12] and stressed all the care that both men and women need to take. He himself was living through this experience because his partner was pregnant. Another two non-indigenous researchers also took part in the study of pregnant women, meaning that not only was Covid present or lurking around bodies or ideas, but also the vitality of pregnancies.

In the course of each meeting, our conversation would transform the little squares into a network of experiences, thoughts and affects. In one meeting, for example, Gah Té turned her mobile camera to show the bucket of pine nuts she had collected, making everyone's mouth water, just like the *reviró* (manioc flour dish) that Vherá Mirim was eating in another square. On the same occasion, in the little squares of Ana (a non-indigenous researcher in Porto Alegre) and Valéria (a non-indigenous researcher in São Paulo) there was a gourd of *ka'a* (yerba mate), while the little dog of Maria (a non-indigenous researcher in London) sometimes jumped on her lap and appeared on screen, while Mbo'y Jegua's rooster crowed in the background. Undoubtedly the squares can suffocate – to quote Mbo'y's expression in relation to interviews – but they also produce sensory, affective and intellectual connections. Mention of a shared experience activated the memory of other experiences among those who heard them, amplifying the possibilities for our thematic studies and the production of

research notes. In this way, the social distancing imposed by the pandemic brought the opportunity to constitute a network that was geographically dispersed but intensely connected by exchanges and attachments of diverse kinds.

The temporalities also became adjusted to the remote research modality: one example was the exchange of audio messages between Maria and Talcira Yva, which usually took place in the middle of the morning in the United Kingdom and at dawn in a Mbya community in the far south of Brazil. Waking and sitting down to drink mate and smoke a *petyngua* (pipe with tobacco), Yva felt inspired to talk about subjects that interested her or were worrying her at that moment. Maria perceived that it was not productive to send preprepared questions to Yva at any time of day, but much better to establish open conversations early in the morning.

Among the participants of our team, those who had already undertaken research in collaboration before the pandemic gave rise to the forming of smaller groups, including researchers studying at undergraduate and MA level. These groups had a more intense interaction over the week and singular dynamics of joint work. Two groups focused on communities in Rio Grande do Sul, a third covered Rio Grande do Sul and Paraná, a fourth included Mato Grosso do Sul and Paraná, a fifth just Mato Grosso do Sul, and a sixth group covered São Paulo. Among these groups, one in Rio Grande do Sul concentrated its work in a single community, including the production of a film on an experience of pregnancy during the pandemic.[13] In the other groups, the indigenous researchers undertook surveys and conversations in various villages in partnership with the non-indigenous researchers. Some of these conversations were recorded on video or audio after consent was obtained. Sometimes the indigenous researchers also took photos or used their mobile cameras to share aspects of their life or the situations confronted at that moment. Amid all the multiplicity and singularity of these configurations, in the next section we examine the experiences of two Guarani

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12 A celestial being that will inhabit the body being gestated in the capacity of its soul.
13 "*Nhe'e kuery joguery teri*" (Our spirits continue to arrive). Retrieved from: http://www.pari-c.org/artigo/52.

Mbya researchers in our team, one living in the state of São Paulo and the other in Rio Grande do Sul.

Connections that flourish or wither

During the pandemic, Ataíde Vherá Mirim's participation[14] in PARI-c was concurrent with the formation or expansion of other networks of information, elaborations and actions in which he took part. He is president of the Southern Coast CONDISI (Indigenous Health District Council) of the DSEI (Special Indigenous Health District) and participated in diverse meetings in which he accompanied the situation of many communities. On one hand, this circulation led to him contracting Covid, spending eight days in hospital. On the other, he relates the importance of the opportunity not only to contribute to improving the health services during the pandemic, but also to hear and share feelings, fears, dreams, knowledge and experiences with people in different villages. These exchanges happened both in online encounters and in person, maximized in the latter case by the force of *petyngua* (pipes with tobacco) and the *tarova* (prayer chants), which connected those present with the divinities in the celestial realms and with other relatives in distant villages.

As well as Covid, a growing concern for Vherá Mirim and other leaders in these encounters is another modality of sickness that became more frequent during the pandemic, *inhakanhy*, similar to what non-indigenous people call mental illness.[15] One of the many relatives affected was his niece, who ended up committing suicide in July 2021 when she was just 12 years old. An important leader in the state was also afflicted by *inhakanhy* and a network

of care and healing prayers was formed for him, provided by spiritual leaders working at a distance from their respective villages. Vherá Mirim was one of these healers who worked for him to recover consciousness and the strength to exist. In this and other cases, the curative power of the songs, thoughts and *petyngua* smoke continued to operate in a care network involving those close by and far away, in parallel with the exchanges and support promoted by the virtual communication networks.

The leaders who were in the health meetings in which Vherá Mirim participated expressed serious concern about the sickening of young people due to the excessive 'closure' caused by mobile phones, contrasting this factor with the connection achieved in the prayer houses. Desires become captured by the mobile and young people shut themselves off from ceremonial life in the prayer house, from the knowledge of elders and from everyday practices with their relatives. Concomitant with this 'closure,' the mobile phone can also encourage an excessive opening to the world accessible via the internet, such as social networks and online championships, especially Free Fire mobile.[16] On this subject, Vherá Mirim makes the following observation:

Here in Takuari village, right at the start of the pandemic, we closed the gate, but we needed to find a xondaro (guardian) to keep watch at the entrance. I joked: "who wants to be the boy on the gate?"[17] and the youths complained: "but what am I going to do on the gate all day?" Then one of them said: "my house is close to the gate, so I can stay all day, I'll take chilled water and stay there, but I want credit put on my mobile so

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14   One of the co-authors of this text, since 2020 Vherá Mirim has been studying for a degree in Public Administration Technology, as well as being a leader in his community, Takuari, and in the cluster of villages in the Vale do Ribeira region (São Paulo state). He is also a communicator belonging to the Mídia Mbya collective and, along with his wife, is a member of the Network of Indigenous Researchers of Ancestral Languages of UNESCO.

15   What the Guarani call *inhakanhy*, translating the term as mental illness, is not to be confused with what they call *nhe'ẽ mba'eaxy*, which they translate as 'spiritual illness.' Or more precisely, spiritual illness comprises a more encompassing category, making mental illness one modality of spiritual illness. The latter refers to an alteration in the affects of the person under the influence of spirits, generally resulting in the separation of the person's *nhe'ẽ* from their body. Longing, sadness, desire, anger and other affects that erupt uncontrollably are associated with *nhe'ẽ mba'eaxy*. In the case of *inhakanhy*, the different in the person's behaviour is even more incisive: they may harm themselves or their own kin and many end up taking their own life or that of others. For this reason, some also translate *inhakanhy* as madness.

16   Village Cup. Retrieved from: https://www.espn.com.br/esports/artigo/_/id/7886877/free-fire-copa-das-aldeias-o-primeiro-campeonato-exclusivo-para-comunidade-indigena.

17   A reference to a song from Brazil's sertanejo musical repertoire, "O menino da porteira" (The boy on the gate), made famous in a version by Sergio Reis.

I can use it there." Each month we had a whip-round and put credit on his mobile but then others wanted the same: "Hey, it's my turn!" So the xondaro was swapped and he asked for credit. They spend all day playing on their mobile, that's why they want credit. And from that came a problem along with the pandemic, which is young people becoming closed off on the mobiles. Technology can be a form of connection, but it can also be a bad form of distancing that increased with Covid-19. The person can become distant from the community and from themselves, they can acquire a mental illness, inhakanhy, and there were even some cases of suicide among young people during the pandemic period.

Vherá Mirim's wife, Luisa Pará Xapy'a, also discussed this topic and associated what non-indigenous people call depression with technology. "The young person becomes stuck in one place, they have little social life, and they end up closing themselves off, staying alone with their mobile, living in a world that does not exist and bringing this sickness to themselves." But she also said how the mobile can be good for exchanging knowledge and articulating struggles in the world that does exist and needs transforming. The resources available for audio-visual recording on mobile phones have been widely used in villages to coordinate campaigns, demands, protests, denunciations, arts and knowledge of various kinds.

As well as the growing and incisive presence of indigenous leaders on social networks, the use of communication devices on the mobile has also grown hugely over recent years and, during the pandemic, many groups formed, connecting people from different ethnic groups or from diverse peoples and localities. In the region where Vherá Mirim lives, in the Vale do Ribeira, leaders have coordinated with each other to mobilize partners to obtain basic food baskets and materials for planting crops, fish tanks and poultry breeding during the pandemic. As a result, the trade in craftwork, suspended throughout the pandemic, gave way to these activities. To combat the excessive closure and openness caused by the use of mobile phones, these leaders also sought to include young people in collective activities such as fishing, woodcutting,

weeding and working in plantations. Vherá Mirim also recounts that leaders from the villages in the São Paulo capital have sent some young people to communities located further away from urban centres so they can involve themselves in these traditional activities with the land and collective life.

As a research note submitted to PARI-c, Vherá Mirim (2021) provided a richly detailed account of his experience of being hospitalized after contracting Covid. He highlights the ambiguous care provided by health professionals, some of whom saw him as more vulnerable because he is indigenous:

I was on the stretcher, no strength left, my body was limp, and I heard a young nurse speaking to his colleagues: "hey, I've got an Indian here and I think he's going to be one more, you know... he's here to die." I think he spoke like that because he thought "oh, he's an Indian, he doesn't understand anything..." and at the same time they weakened me because of the amount of blood they were taking and the medications they were pumping into me through hospital tubes plugged into my veins. On the fifth day I was scared because my [oxygen] saturation level was low and I was hallucinating because all the time the staff were taking blood samples, injecting me with medications.

In return, Vherá Mirim refers to the gaze of these carers, which is exoticizing – for example, they playfully sang to him the composition of Cascatinha and Inhana: "Indian, your hair falling over your shoulders..." – but also marked by curiosity and admiration for his stories. For example, when he recounted the time he met Obama, he heard them exclaim: "Wow, so cool! You've travelled a lot; you've even met the president of the United States!" In any event, he states that it was not the biomedical care that cured him but a visit in a dream from the spirit of a leader from the Vale do Ribeira who had died of Covid a short time earlier. After this visit, he recovered his strength to live and began to eat again.

As well as sharing his experiences and those of his relatives, Vherá Mirim transcribed and translated various accounts from Guarani to Portuguese. But he felt uncomfortable that some of them exposed knowledge which Vherá Mirim thought should not circulate among the non-indigenous population,

particularly experiences of transformation as a result of attacks by shamans and spirits. The *jurua* are incapable of learning about these practices in all their complexity and he raised the issue with the non-indigenous researchers from his group. Moreover, this knowledge belonged not to individuals but to his people as a whole, meaning it was not up to one person to decide to disseminate it. For the researchers co-authoring this text, this interpretation highlighted the difficulty of adapting to ethical protocols premised on the existence of individual or collective entities who are able to authorize or prohibit research. On one hand, there is the presumption of the individual as an autonomous entity; on the other, the community as an encompassing entity that operates as a supra-individual. Beyond the ethics committees, as Strathern (1996) notes, individual and society have functioned as poles of a pendulum between which the social sciences have swung over the course of the twentieth century to the present-day, yet such entities are alien to indigenous socialities and other peoples.

As well as the translation, the interviews also required careful handling. Vherá Mirim mediated the scheduling of conversations with relatives but preferred the non-indigenous colleagues to conduct them since the question-and-answer model does not correspond to the usual mode of sharing and transmitting knowledge among the Guarani. Along much the same lines, we can recall the comment by Mbo'y Jegua that interviews suffocate, as well as diverse Guarani people in other research contexts who have highlighted the limitations of the question-and-answer format (Karai Mirim 2022, Oliveira & Santos 2014). In any event, Vherá Mirim encountered some favourable occasions to record testimonies given by relatives from his community and shared them with trusted non-indigenous researchers.

Araci Yva Mirim, for her part, expressed her discomfort with the presence of researchers in her community. When she became a researcher for PARI-c, she was able to perceive this relationship from another angle. She agreed to take part in the research as she had a long-standing relation of trust with one of the coordinators, a friend of her mother. Unlike people who arrive to "extract" information and afterwards never come back, Yva Mirim considered that is possible to carry out a research and be engaged with people's lives and causes of her people, which makes all the difference in terms of producing and developing knowledge. Yva Mirim also highlighted how the position of researcher stimulated greater self-reflection vis-à-vis her own practices and knowledge – in relation to hospital births, for example, which she began to view more critically after learning from her relatives and collecting data.

She carefully undertook the fieldwork, information gathering and data systemization that, as well as contributing through research notes and thematic studies for PARI-c, will later form part of her end of course work for her nursing degree at the Federal University of Rio Grande do Sul (UFRGS). Yva Mirim talked to cousins about childbirth during the pandemic, always in light of the advice given by her mother Talcira Yva. One of Yva Mirim's contributions was to raise the issue of non-consensual episiotomies and sterilizations among Guarani Mbya women. Access to the topic is difficult and the researcher dedicated herself to investigating the issue after it surfaced in her conversations with Guarani female relatives.

Faced with these accounts about the 'cut' – the term used by her interlocutors to refer to the incision made to the perineum during childbirth, which biomedicine calls an episiotomy – she began to reflect on her own experience and question the decision to give birth in hospital. Episiotomies proved to be a practice commonly used on the bodies of these women and, at the same time, something seldom discussed among themselves. Yva Mirim thus played a cathartic role by stimulating collective reflection based on shared experiences until then perceived as individual. This generated important considerations and enabled access to data otherwise difficult to obtain through medical reports. It is worth emphasizing that we were not looking for this data; rather it emerged through the way in which Yva Mirim conducted her research. All her interlocutions were in Guarani and were not recorded. The information was transferred in audio only to the non-indigenous researcher who Yva Mirim and her mother have known for a long time. The lengthy audio recordings enabled the elaboration of a table containing the data on episiotomies and sterilizations, which will be published in a later article.

Based on the creative tensions of Yva Mirim and Vherá Mirim, briefly cited here, combined

with those of the other indigenous researchers in PARI-c, we were able to carefully practice modes of enunciating, keeping, articulating and multiplying knowledge.

Final considerations

Resonating with the proposals of Bellacasa (2011, 2012), indigenous researchers have called attention to how we intervene in the knowledge that we translate and in the worlds that they bring with them, demanding a pragmatic and localized ethics of care. Bellacasa (2012) takes from Haraway (1997:137) the notion that "nothing comes without its world," meaning that anthropology, taken as an exercise in translation that intervenes in the formation and transformation of possible worlds, is always a matter of care. In different ways, Yva Mirim and Vherá Mirim expressed forms of care necessary in the dissemination of experiences and knowledge that frequently tend to be conceived as 'beliefs' and 'representations' by non-indigenous people, or that may even be exploited in more perverse ways in the current political context, so adverse to indigenous rights.

However, PARI-c also substantialized alliances based on difference, or care as dissensus, both in the production of knowledge and in struggles for land and its vital connection to health. During the meetings of the Southern Brazil team we also shared challenges, threats and struggles faced by the communities included in the project and by indigenous peoples in general, which worsened still further with the adverse context of the pandemic. This was the case of Law Bill 490, presented to the national congress, threatening the originary rights to land assured by the 1988 Constitution. In the sphere of the Judiciary, the process began of evaluating the 'time frame' contestation in the Federal Supreme Court, which argues that indigenous peoples not inhabiting a territory claimed by them in 1988, the date of the Federal Constitution, would have no right to these lands, even if they had been expelled from them under duress or by force. In response to these and other threats, thousands of indigenous people from across Brazil took to the road, taking their cameras and making encampments in Brasília – like Levante pela Terra and Acampamento Terra Livre – as

well as marching in the Brazilian capital and other cities to fight for their rights during the pandemic. Some of our researchers colleagues participated in the Brasilia demonstrations and others in their own regions, sharing their experiences in PARI-c (Signori et al. 2021, Schweig 2021, Silva et al. 2021). Hence, despite the health risks, indigenous researchers made themselves present with their songs and bodies to protest against an anti-indigenous agenda that assaulted them just as much or more than the dangers of the pandemic, as they told us. As well as what has been published in PARI-c, there are still plenty of articles, films and communications to come. This text is one of them and we hope that it has brought with it different worlds, in careful arrangements, but always dangerous in their asymmetries and equivocations.

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