

## "Everyone knows that the university is getting sick": "cartografia" on health and institutional illness

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### Abstract

In this article, the authors explore the issues of health and institutional illness in higher education through the form of letters. In eight letters, the authors (professors at three different universities) discuss scenes and experiences that arise from their daily work. As a methodological resource, "cartografia" (neologism mixing two Portuguese words, "carta" - which means letter - and "cartografia" - which means cartography) was chosen, combining cartography (which values the process) and letter writing to describe the sentiments underlying the presented scenario. Undergraduate students' statement, "Everyone knows the university is getting sick," is used as a starting point for making a reading from the disruptive exercise that the polyphony of letters suggests. As much as this expression of suffering impacts the subjects through feelings such as anxiety, exhaustion, racism, anguish, and non-belonging, its understanding must be viewed from a collective perspective. Focusing only on the individual level eliminates the political dimension and institutional implications. When determining factors are restricted to only one dimension, several crucial components for cartography disappear, namely, policies for active action by forces.

**Keywords:** letters; institutional illness; cartography;

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## "Todo el mundo sabe que la universidad enferma": cartografías sobre salud y enfermedad institucional

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### **Resumen**

Este artículo evoca, en forma de carta, cuestiones relacionadas a la salud y la enfermedad institucional en el contexto universitario. El texto es compuesto por ocho cartas en las que las autoras y el autor (que trabajan como docentes en tres universidades diferentes) comparten escenas y experiencias surgidas en su trabajo diario. El recurso metodológico elegido es la cartografía, una composición entre la cartografía (que valora el proceso) y la escrita de cartas, en un intento de dar lenguaje a los afectos que tonifican el escenario presentado. Se toma como detonante el enunciado “todo el mundo sabe que la universidad enferma”, pronunciada por estudiantes universitarios, intentando hacer una lectura de éste a partir del ejercicio disruptivo que produce la polifonía de las cartas. Sin embargo, si bien la expresión del sufrimiento tiene impacto en los sujetos (a través de sentimientos como ansiedad, agotamiento, racismo, angustia e falta de pertenecimiento), su percepción debe ser percibida en la dimensión colectiva. Al centrar la cuestión exclusivamente en el individuo, la dimensión política parece desaparecer, junto con las implicaciones de la institución y, una vez que los condicionantes se restringen a la dimensión personal, desaparecen de escena un grande número de componentes indispensables a la cartografía de las fuerzas, o sea, de las políticas de los afectos allí actuantes.

**Palabras clave:** cartas; enfermedad institucional; cartografía

## **“Todo mundo sabe que a universidade adoecer”: cartografias sobre saúde e adoecimento institucional**

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### **Resumo**

Este artigo evoca, sob a forma da escrita de cartas, questões relacionadas à saúde e adoecimento institucional no contexto universitário. O texto é composto por oito cartas, em que as autoras e o autor (que trabalham como docentes em três universidades diferentes) compartilham cenas e experiências decorrentes de seus cotidianos de trabalho. O recurso metodológico escolhido é o da cartografia, uma composição entre a cartografia (a qual valoriza o processo) e a escrita de cartas, na tentativa de dar língua aos afetos que tonalizam o cenário apresentado. Toma-se como disparador o enunciado “todo mundo sabe que a universidade adoecer”, proferido por estudantes de graduação, na tentativa de fazer uma leitura do mesmo a partir do exercício disruptor que a polifonia das cartas produz. No entanto, ainda que a expressão do sofrimento tenha impacto nos sujeitos (por meio de sentimentos como ansiedade, esgotamento, racismo, angústia e não pertencimento), sua compreensão deve ser percebida na dimensão do coletivo. Ao centrar a questão exclusivamente no indivíduo, a dimensão política parece desaparecer, as implicações da instituição também desaparecem, e, uma vez restringindo os fatores determinantes à dimensão pessoal, some de cena um grande número de componentes indispensáveis à cartografia das forças, ou seja, das políticas dos afetos ali atuantes.

**Palavras-chave:** cartas; adoecimento institucional; cartografia.

"Everyone knows that the university is getting sick": "cartagrafia" on health and institutional illness

## Introduction

*They arrive very early and leave home at dawn, some carrying mattresses. They wait for the building to open at eight o'clock, hoping to get enrolled. It happens every Monday around five in the morning at the door of the university's Applied Psychology Service. The limited vacancies have led many who live far away and wake up at dawn to return to try their luck again. The trainees commented, "A large number of students! They are all from our university! Besides, it goes up every month!" They are the only ones who have received openings. They know more about the routines or live closer. They crowd the service line. What happens? Or still, what has been happening and has only now overflowed our ears?*

### Letter 1

Rio de Janeiro, São Paulo, Porto Alegre,  
March 2022

Hello reader!

First of all, we would like to introduce ourselves. Among other things, we are professors working with higher education at three universities. We will bring through these letters reflections generated throughout our academic practices, whether in teaching, research, or extension. However, these are not ordinary reflections. In reality, we propose to discuss something difficult since we are immersed in the problem we want to face. For this reason, instead of starting these reflections with the state-of-the-art on the theme, we chose to experience accessing our questions through a more affectionate and implicit writing provoked by the "cartagrafia" (neologism mixing two Portuguese words, "carta" - which means letter - and "cartografia" - which means cartography<sup>4</sup>) methodology, which we will explain better later on. We will discuss clippings of experiences lived in our daily work, which will support reflections on the processes of health and illness in the academic institutional context. The scene that initiates this text is, in a way, emblematic, as is the statement "Everyone knows

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<sup>4</sup> From this point forward, we are going to use the word "cartagraphy" with the meaning of "cartagrafia", in order to give fluency for the reading in English.

that the university gets sick,” uttered by undergraduate students in one of our professional practices (we will talk more about this scene later in the letters). In the initial sentence and scene, we identified problematizing elements of the places we occupy and move in the university, leading us to face difficult but necessary questions: What happens to us? What draws us in? What overflows us, everyone—students, professors, technicians, and employees in general? Is the university sick? Is the university making us sick, or are we making it sick?

The truth is that we feel the business logic within the university's formative processes, which is increasingly dislodging us from a collective and critical curricular structure. We need to meet publication goals, immediate deadlines, and challenging conditions for work. In the same way, our students report exhaustion, curricular grids filled with activities, often with no time for rest or quality readings, much material and everything hasty, and no time for preparing the subjects. What kind of institutional functioning are we all experiencing?

In order to offer a “language of the affections” that reach us (ROLNIK, 2016, p. 23), we chose the epistolary resource, the writing of letters that could, in some way, create a problematizing body for situations that, because they are every day, sometimes escape us. We remember Blanchot (2007, p. 237) telling us that “the quotidian is something that we never see the first time, but which we can only revisit, always having already seen it through an illusion that is precisely constitutive of the quotidian.” It is worth considering that opting for the “language of the affections” is a choice, and, as such, it is already a certain politics of narrative that we follow in research work and the clinic. Somehow, “it is always a politics of narrativity that we deal with” (PASSOS; BENEVIDES, 2009, p.150). Based on scenes and speeches from our daily work and linked to our own words, we will follow a certain ethical-political orientation whose effects must be constantly examined. Therefore, the proposed care invites us to an uninterrupted critical attitude, problematizing the affections that came to us and still reverberate in us. The experiences of suffering may be reviewed through the clinical-critical exercise of the affections at stake, expressing new meanings, i.e., unprecedented ways of existence to deal with impasses (TEDESCO, SADI, and CALIMAN, 2013).

In an attempt to launch a provocative listening to our daily work as university teachers, we will employ what Battistelli (2017) called “cartography,” a composition between letter writing and the cartography method (PASSOS, KASTRUP, ESCÓSSIA, 2009; PASSOS, KASTRUP, TEDESCO, 2014). We agree with Battistelli and Oliveira (2021, p. 683) when they describe the letters as a possibility of exchanges with “the addressees, texts, affections, plans, dreams, and everything else that fits in a conversation that takes place in another time (the extended time between writing, delivery,

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness and a possible response). "A conversation with the potential to go on endlessly depends on the established relationship between the people involved." In this same text by Battistelli and Oliveira (2021, p. 684), there is an approximation between the cartography and practices of care made with and in writing, triggering conversations between researchers and female and male authors. Thus, we are tempted to think that, in a cartography, we are interested not only in the writing of the letters but also in the possibility of fluid and direct articulation between the subjects involved. It is the exchanges, reverberations, resonances, redundancies, and reconfigurations of meanings that matter most to us, their multiplying effects resulting from the interference between the different voices involved, as Bakhtin (2006) underlined. We will seek the collective dimension of language offered to us there, the disruptive exercise that the polyphony in the letters produces. Since there is mutual interference between enunciations in the friction between the differences in the sayings, language best assumes its functions of provocation, differentiation, and shared invention. The composition between letter writing and cartography offers us clues to reflect on the processuality of the very act of exchanging letters, for when we exchange letters, we do not know for sure which way this correspondence will take us, as well as the affections, insights, and reflections that are detached. Our two concerns, as expressed by Battistelli and Cruz (2021, p. 10), when referring to "cartography" are the following: "What can I tell another person in a letter?" (...). "How many stories can be told through letters?" It is proposed in this text that "cartography" allows us to apprehend the liveliness of the narrative, capturing the interference between different voices that enables us to follow the ethical-political orientation capable of breaking beliefs and habits to create and propose other ways of presenting, thinking, reading, and analyzing everyday work.

Having said this, we now launch into the continuation of this correspondence between us teachers and invite you, the readers, to go through some lines of concern with us.

Big hug!

Silvia Tedesco  
Dayse Bispo Silva  
Luciano Bedin da Costa

**Letter 2<sup>5</sup>**

São Paulo, March 2022

Dear Cartographers Dayse and Luciano,

I am writing to you, taking up again the scene that has been with us for years in our university and, with it, the problem announcement: "The University gets sick! I find in the will to conjugate resonances of our university practices in the belief of reciprocal interference between our letters, generating new ways of looking and saying, a possible gap between seeking other ways to address the startle that the scene produces in us. I wonder about the shared dimension of the astonishment and, little by little, followed by reflections about the alliance between the transdisciplinary dimension of the clinic and the thought of Institutional Analysis. I find myself taking up the impasse as an analytical not-knowing. The problematization is triggered. It is the politics of the practice. An increasingly higher number of college students fall into deep suffering. Research shows that young university students suffer more than young people of the same age group (Machado, 2020). Many students consider dropping out of the course as the only solution. There are strong complaints about loneliness and unbearable isolation. Hypermedicalization spreads, and suicide attempt rates increase. What happens?

Several articles and speeches fired by universities that discuss the topic, many from our university, bring up students' vulnerability. They point out the immaturity, the moment in the life of many transformations, and underline the responsibilities and difficulties with the university world, which demands a lot of effort and competence. They raise and list factors that hinder these students' adaptation to this new world that is so special and qualified, opting for the search for solutions through the strengthening of facilitating factors of practices to reduce anxiety, in the face of the challenging reality. They locate the problem exclusively in the subject, the inner life, the unpreparedness, the insufficiency to be overcome, and the inability to deal with the roughness of the challenges (FONAPRACE, 2019). Dozens follow the path of individualization of suffering. By focusing the issue exclusively on individuals, the political dimension seems to disappear, the implications of the institution also disappear, and, once the determining factors are restricted to the personal dimension, a large number of components that are indispensable to the cartography of forces, i.e., the politics of

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<sup>5</sup> I am very grateful to my team of interns and my colleagues Catarina Resense, Adriana Rosa, and Silvana Mendes, who worked on this clinical-institutional project at SPA/UFF, for the material and the many discussions that we developed and that I can now bring to this article.

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness affections acting there are added to the scene. These analyses indicate to us the need to broaden the scene.

What happens at the university? Remember our conversation, Dayse? When did we exchange ideas about our activities with the students? Our talks reverberated with the production of more clues pointing out that the clinic needs to take on its institutional dimension more firmly. "The psychology course makes you sick," comments a student at your university. This statement, once linked to the experience of the services we provide at the Applied Psychology Service (SPA), has led us to reconfigure our problematization. After all, in the SPA, we do not assist only psychology students, yet we hear the same complaint regarding other courses. At this point, the issue gains another clipping: "The University gets sick!" This is a polysemic phrase that produces astonishment. Its various meanings show us the multiplicity of the scene; it goes in different directions. Initially, two senses draw attention, particularly the semiotic hybridity exposed. "The university is sick" oscillates strongly between "the university is bad for us" and "the university is bad." Does it speak of a crisis in the university, of a confluence of forces in its unbroken institutionalization, a paralyzing tension that spreads through us all and compels us to respond to the sad realization of the growing inhospitality of our daily work and studies, manifested in the suffering of students? This is our starting point, which prevents us from moving forward without including these institutional forces in our clinical work. The forces of the established, present in the university trigger the questions we ask ourselves: What kind of university are we producing? What kind of university do we want?

Kisses,  
Silvia

### Letter 3

São Paulo, March 2022

Dear Silvia and Luciano,

It is great to be able to exchange my concerns here with you. I have only spent one year in this role as an undergraduate psychology teacher, but there are already a lot of intensities.

Starting to teach psychodrama in the middle of a pandemic seemed surreal. The living three-dimensionality of psychodrama had to be adapted to a two-dimensional rectangular canvas; I did not know what to expect. However, my real shock was finding sick second-year undergraduate students. After a year of pandemics and online teaching, many students spoke of demotivating fatigue and a

mix of anxiety with depression, fear, and helplessness. I was scared. Soon I began to participate in other discussion spaces in the faculty, and I began to understand the proportion of this university sickness.

My early concerns, recorded in text messages with you, helped me be more attentive and careful about university life's effects, especially during the pandemic. But what life? A student once shared the following: "My computer is in my room, so I wake up at the university, I eat my meals at the university, I go to bed with the university on my lap, and I cannot get out of my pajamas sometimes. When the weekend comes, the university turns into a video call with my friends or a marathon of random Netflix series to kill time. I no longer know what life is like without my computer turned off." Strong, right?

Students from other years shared that it was not only "the Internet's fault" but that the illness was already present in the course before the pandemic started. These statements take on a corporeality that is important to discuss and elaborate on so that we can understand this event and find ways to create other ways to experience academic life.

We recognize that academic institutions have crossed all of us, especially now that face-to-face classes have returned. I still don't know what paths to propose, but I bet that it is through heterogeneous collectivity that we will be able to build something that has the power to live there. That is why it provokes me when you bring the reports from the SPA of suffering that speak of unbearable loneliness and isolation but that have as their first act of care the search for individual psychotherapy at the SPA as if the problem were on the same level as the "unbearable isolation." Of course, we consider the clinic from a different perspective; as Passos and Benevides (2001) argue, the clinic is more than a welcoming attitude; it is an act of deviation production (clinamen), of subjectivity productions that bets on life experimentation.

I also think of institutional analysis as a starting point for reflecting on our concerns, but I am still looking for spaces (and chronologies) that make these reflections possible. This comes before the analysts.

These questions amaze us, but simultaneously, they displace and provoke us to be here together, trying to connect, even in different universities.

This space is also part of my desire not to allow these crossings to stiffen this role that is so dear to me.

I count on you in this trajectory,

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness

Dayse

#### Letter 4

Porto Alegre, March 2022

Dear Silvia and Dayse, I spent a long time thinking about how to begin my letter since I wanted to avoid the cliché “I hope you are well” or something like that. One of the linguistic gains that we had with the pandemic (it is strange to think of “gains” when dealing with this pandemic) was the need we had to relativize the notorious “it is fine,” which we often used in our daily lives and which proved to be insufficient. From “everything is fine,” we came to “I hope you are well as far as possible,” an attitude of care given the limits of a time so full of insecurity, anxieties, and anguish. This entire preamble is to say that I hope you are well within the realm of possibility and that we can establish our correspondence within the context of this possibility. By the way, when I consider what our undergraduate and graduate students have said about health and illness practices in the university context, this question of possibility seems very relevant. In 2019, I mentored end-of-course research in which we sought to investigate the theme of mental health through the experiences and perceptions of pedagogy undergraduates (SILVA, 2019). In this research, 100 undergraduate students participated and answered a questionnaire with questions about the topic. Most of these students reported having experienced psychological suffering related to academic issues. This is evident in one of the questions: “If you have experienced or live some kind of suffering, summarize what you felt or feel. Is there an academic relationship in this suffering? In what way (SILVA, 2019, p. 37)?” 82% of the students reported some suffering, which was quite surprising (our hypothesis was for a high rate, but not close to what was found). Another thing that struck us in this research was the words that appeared the most regarding students' feelings: anxiety/anxiety crises, overload related to demands, excessive demand or pressure from academic responsibilities, tiredness, and stress (SILVA, 2019).

The answers to this question were institutionally very worrisome since they present the university not only as a space capable of accentuating previous sufferings but also as the cause of the illness itself. I share with you one of the answers that caught my attention, which a 20-year-old pedagogy student said:

“Inability, disappointment, demotivation, and sadness regarding the completion and performance of assignments and presentations. **I did not**

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**feel I belonged and deserved to hold a position at the federal university due to not meeting certain expectations.”**

I decided to underline the sentence above because the report from this student seemed quite serious. I remembered Paulo Freire in the book *Pedagogy of the Oppressed* (1987), when he says that the worst exclusion is not the one that operates from one subject towards another, but the one that occurs inside the oppressed subject, who does not feel worthy of a place or space. Well, I close this letter with the feeling that we urgently need to think about the place that universities occupy in the lives of students and workers. If the university is made by us, what are we making of ourselves?

Hugs, looking forward to the autumn that never comes!

Luciano

## Letter 5

Rio de Janeiro, March 2022

Dear friends,

After reading your letters, what we have experienced in our universities has activated vivid memories that have resonated for a long time but that suffered special conduction during the presentation and discussion of my clinical-institutional work at the meeting of our research group at ANPEPP in 2019. There, I brought into the conversation the work triggered by the observation of the recurrent suffering in the complaints of students seeking clinical care at the SPA. When you, Dayse, talk about the effects of my talk on your work, I realize that these letters we write now began to be conceived back there, and that the sharing between us always remains active.

I started my talk (remember?) with the experience of stunningness that clinical work brought us at UFF, of having to deal with the university and with us being involved in the students' suffering, in practices that provoked devaluation, of disqualifying disarray. My presentation raised many questions and comments, and I was particularly struck by the uncomfortable accounts of similar experiences and the desire to think about the issue together. That which each one brought, still without much clarity, began to take shape at that moment. Each person who spoke up brought more aspects and unfoldings to the question, which expanded and became more detailed. Ultimately, it gained a better contour, that is, other contours. The conversation produced an experience of contagion! It eventually gained better contours, i.e., other contours. The conversation produced an experience of contagion! The exchange had assisted in identifying and reporting issues that were still subliminal,

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness critical tensions that were unspoken or invisible but were already active in the functioning of our universities. The astonishment that still appeared as a private issue at that moment gained clearer delineation as a research problem for our whole group. In that conversation, the problematization occurred simultaneously for the others and for me. We were together, and there were many of us supporting the impasse and the search for resolutions. That day looked after me!

It is correct when we gain access to the collective dimension within ourselves! And here is the question: Is it not this same effect that we want to produce in the students? We then saw that, in the same movement, our question at SPA-UFF resonated with the tensions experienced in other universities. The questioning that we were undergoing about "what university we were building" was reformulated into the following question: "What university do we want to build?" It then led the research along other paths. Commenting on our practices at the university led us not only to question the university's project of shared production of knowledge but also to seek ways of intervening and producing changes. I seek the polysemy offered by the multiple accounts. There are several planes of experience in saying or doing something that intersects and influences each other. Just as it happened at USP, in these letters, we aim to take advantage of the power that the process of collectivization brings out: experiences are transversalized, as are the ways of feeling, saying, knowing, and doing them, exposing the transdisciplinary perspective of clinical practice and research. This same proposal also guides our cartography. We intend to separate the thought and let it unfold through the reciprocal intervention of our letters. The sharing with the research group at USP still generates good resonance in the clinical experiments that we carry out in the SPA at UFF. Let me proceed to the report:

The clinical practice that I bring here begins with a group of three supervisors who, following clues enunciated by F. Guattari, especially in the book *Psychoanalysis and Transversality* (2006), decide to use the clinical-group device aiming to potentiate the political dimension of the clinic by collectivizing experiences, until then perceived as private and circumscribed to the subject and his so-called personal reality. I now speak of the concept of collective agency in enunciation. I return to two modes of clinical-group management already commented on above: the circulation of lines and the mutual interferences. The two aspects of management provoked two interconnected effects that interest us: the reconfiguration of the narratives and their meanings, and with this, the collective reconstruction of the affections experienced at the university. I return to the management modes. First of all, it is about activating something that goes through everyone, something that belongs to everyone and therefore does not belong to anyone, and that, in particular, reveals a set of determinants broader than those of the intimate lives of each one. In the place of individualized

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experience, we propose the collectivization of the affections that remained silent because they were subjected to the control of the daily practice of individualization, the privatization of suffering that, once confined to individuals, provokes in them feelings of guilt and insufficiency to carry out their projects. "I'm not ready," "I cannot handle it." In the initial conversations of the group treatment, the reverberations between the group-constituting speeches, the access to the collective dimension in us, can already be observed. As they listen to each other, they slowly realize that they describe very similar situations that generate suffering. "I can make mine; there are many lines said here!" Very similar stories are repeated, and it is gradually made clear by the group itself that the suffering is not so particular and intimate for each one. The scenes bring up the daily life of the university, generated by something common related to it. Clinical management was based on the word "circularity" as a way of working in isolation, stimulating the sharing of impasses. By collectivizing the narrative of suffering, the institutional dimension of the problem gained a place in the scene. After all, everyone brought the same context that generated the impasses. Thus, the political dimension of the clinic appeared, put into question the determinants of this suffering, and invited participants to rethink the experiences together (TEDESCO, SADE, and CALIMAN, 2014).

This grouping movement unfolds in a second management mode. It is worth emphasizing that, unlike understanding the sharing of difficulties and suffering as a search for support through consensus and by unifying the meanings that suffering carries for the group, the homogenizing synthesis effect of clinical work focuses on the differences exposed in the perspectives.

We pass, then, to the second effect resulting from the proper diversity of multiplicity. We are on the lookout for the emergence of deviant viewpoints to activate in these discordant encounters, oscillations of meaning, and the surprises that generate friction between different points of view. Perceiving other ways of feeling and acting as effective and accepted possibilities serves to call into question the unique sense worn out of those experiences, as well as dominant affections that always returned and repeated themselves identically in an intolerable vicious circle (TEDESCO, 2010). "I can't attend the classes, and I can't concentrate on studying. I feel like I don't belong there." To this end, the clinical management needs to take care so that the group does not fall into the risk of binarizing confrontations between the group's sayings in an oppositional dispute between the different positions that will keep the different sayings apart from each other. It is the contagion that we seek. Clinical listening is on the lookout for moments when different viewpoints no longer try to nullify each other mutually and instead seek other modes of contact among the diverse ones, one that, rather than producing relations of dominance or easy consensus, works by strangeness and contagion, in a

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness relation or function conceptualized and called interference by M. Bakhtin (BAKHTIN, 1992). The enunciations intervene one upon the other without any concern for the priority of any particular point of view. They allow themselves to be affected by other enunciations and the other meanings they carry. The clinical-group management is concerned with the detection and marking of statements that contain the encounter away from dichotomization, so that, unaware of the opposing forces, they act on each other, carrying the meaning to other landscapes and other worlds. Clinical care is done in the waiting, in the observation of divergent meanings, and in the moments in which diversity generates neither consensus nor litigation but a heterogeneous composition. This is the direction we are taking, but we still have a long way to go!

Kisses

Silvia

## Letter 6

São Paulo, April 2022.

Dear friends,

I have been reflecting a lot on our exchanges. I became more aware and more flexible with the teaching program. The good thing about psychodrama is that we can practice the theory by working on life themes, and with each practice I realized how therapeutic that pedagogical space was, also because it was unique at college.

I return to psychodrama to examine the power of the group as a space for collectivization in the subjective constitution of the subject; the importance of thinking that university education occurs not only in classrooms and their academic contents, but also in hallways, bars at the end of the day, and meetings with other years, courses, and universities. Producing groupings from the seminar for evaluation and submission to the student academic center. The research brought by Luciano shows the following: the high rate of illness, but that, at the same time, indicates the collectivization of the university as clues for this care. I bring a quote from Guattari to help us search for references for reflection:

The fact that the university institution is organized to meet the need for hierarchical promotion as defined by private and state enterprises suffocates the cultural and formative aspect that should be the essence of

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the "years of learning." The students, who have to take on the difficulties of their own development in the context of a "frequentation" of the most elaborate scientific, literary, and philosophical problems of humanity, are treated in fact as leftovers, as poor relatives of society (GUATTARI, 2004, p. 94–95).

It was also becoming clear that, as much as the experience provided a respite for the students, it was not enough because the logic of the problem still required individualization. The university is heavily involved in this illness. I remember from Institutional Psychotherapy when Guattari says, "Let us insist on the fact that this analysis process of the environment cannot be performed from the outside: he must be linked body and soul to the institution itself" (2004, p. 90), and I feel like making cracks in the university. But I soon realize that I am crossed by many institutions inside, many of them very rigid and with few spaces for ruptures, especially for a teacher who has just entered this space.

I find resonance with the work of Ana Maria Fernandez from the University of Buenos Aires, who conducts a Journey of Group Productions at the conclusion of the psychology course. Several workshops work on university education themes through plenaries, psychodramatic group devices, and the creation of material in the form of posters at the end to share what was experienced in a post-plenary journey (FERNANDEZ, 2008).

This journey's design is based on providing students with group experiences during the learning process. It would not only be about teaching groups "groupally," but creating the pedagogical conditions that make it possible to produce a thought about the group, subjectivity, and institutions, where the "institutional analyzers" are the bridges between the activities.

Therefore, it intends to create conditions for students to experience group-institutional instances; it differs from a clinical use device in that it avoids dwelling on or inquiring in terms of the intimate-private and invites reflection on what happens in this experience to articulate it with theoretical tools (FERNANDEZ, 2008, p. 141).

Another relevant aspect of this experience is that the presence of the entire university faculty at this journey impacts students. She says, "In a university—and in a society—where the membership is usually fragmented, disaggregated, the presence of the entire faculty working many hours with the students in an unusual academic way makes them particularly value this experience" (ibid., p. 142).

Here at our university, we started a working group on the subject of the students' mental health. We even investigated through questionnaires how the students were doing; however, the demands

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness produced by the return to the classroom paralyzed us. It is of utmost relevance to discuss and look for creative elements to propose other ways to broaden this discussion.

## Letter 7

Porto Alegre, May 2022

Hi girls! Since the last letter I wrote, almost two months have gone by. In the meantime, many things have happened—a truckload of things have been done or are to be done. I kept thinking about the question that closes this last letter: “What have you experienced in your universities?” I thought that the verb used in the question was "to experience" and not "to do." The most common thing is to hear questions like "What have you been doing?" In response to these questions, we usually list the things we do, which are often routine activities or things we do half-heartedly or unwillingly. Now, in the face of my experiences, we are summoned to stop for a moment and think about what, among the many things we do, we are most involved in. This goes for things in the home, in the family, and also at work. In the midst of all of this, I'd like to share with you the joy we felt when we launched a book of poetry with graduate students, a launch that took place in the Faculty of Education at UFRGS and mobilized us greatly. This happened at the end of April, but it is still very present as I write to you. The book was the result of a course taught in graduate school in late 2021, where we talked about writing and care devices. The book is called *Acronic, 2020* (BANDEIRA and COSTA, 2021), with 41 authors who were willing to write together to face (with poetry) a pandemic time that was not very friendly. The interesting thing is that it was only at the beginning of the book release that we realized that it was the first face-to-face event held in the Faculty of Education after two endless years of remote teaching. Even though not many of us were present, it was very exciting to return to the university and meet colleagues and students again. Still not sure how to deal with our bodies in each other's presence, we ventured into the long awaited hugs, some long and deep, in response to the longing and desire to stay together. This event is brought up because it appears to me to bring the dimension of health as a care practice, of a health produced in (and despite) institutions, in lines of care and affection that intertwine around common goals. In the case of the event in question, there were two goals: the first, more obvious, concerned the book of poetry itself to be launched; the second, which seemed to me to come along, was the desire to return to the university and see loved ones again. I immediately remembered the research with pedagogy students that I talked about in my previous

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letter, more specifically the final question of our questionnaire: “What kinds of services or spaces would you find interesting for the university to promote in the mental health field?” To our surprise, the predominant answer (which corresponded to 43% of the answers) was not the demand for individual spaces or services (present in 31% of the answers), but the will to create collective spaces for conversation and listening (SILVA, 2019, p. 42–43). I was wondering why we do not invest more in these conversation spaces, in formal and informal spaces of collectivity, which are very light and institutionally inexpensive care technologies. Are we listening to what the students are asking of us? Are we listening to ourselves? In this regard, I share your concerns about the individualization of suffering and psychological experience, as well as the possibility of a solution through a collective approach. I think again about the phrase “Everyone knows that the university gets sick” and about whom this “everyone” is. I think about the micropolitical practices of care that are engendered in the daily lives of our institutions, experiences that are plotted in the midst of our classes, research, and university extensions, and that often do not gain the visibility that they might need.

I consider myself a fan of collective practices, and maybe that is why I am very enthusiastic about this micropolitical space called class. In this sense, it is sad when I see students getting sick because of the classes, the excessive demands of the subjects, and the professors’ little sensitivity. I keep thinking that this sick university that makes us sick is also the university where these caregiving experiences are still present. When I say “still present,” it is because I see such spaces as increasingly threatened since it is not merely a matter of institutionalization. For there to be listening and welcoming, we must have working conditions that favor investment in such spaces and that the understanding of the need for such spaces is not individual and restricted to personal research and extension initiatives. I keep thinking about our reception and care services (both scarce and vital), as well as the micropolitical spaces, a network that could be built institutionally in a more articulated way, with students and professors having access from multiple entrances and exits. I also think that these students who say that the “university gets sick” are the same ones who point to possible answers to the problem in the collective technologies of listening, conversation, and welcoming. These are the questions I bring with me, not to ask for easy answers but to spark some possible solutions to a problem that affects us all.

A big hug (it’s very cold!)

## Letter 8

"Everyone knows that the university is getting sick": "cartografia" on health and institutional illness

Brasil, May 2022.

We found ourselves restless in our discussions, with many questions and looking for hints on how we could think about getting sick in and because of the university. Some of them we already had: a bet on collectivization, on the power that is exchanged and shared in the group or with it and openness to the possibility of creating lines of care beyond the individualizing one. However, we soon realized that gathering the collective was not enough. We understand that we start from the collective, and we are surrounded by a decolonial movement in our academic and clinical practices. Perhaps this is our main clue, and it appears here because we are immersed in this issue and crossed by the illness caused by our existence in this capitalist machine.

We recognize in the reports the same affection generated in the daily lives of the students that come to us for clinical listening. The accounts show fear, paralysis, and isolation, as well as excesses and insufficiencies allied to evaluations and endless demands. "Ninety percent of you will fail!" and "On your side, you don't have a peer, but a competitor." The narratives express a strong sense of meritocracy, competition, and individualization, and subsequently, many other accounts bring more intimidation and more judgmental slogans. "Every day I am told in different ways that this is not my place."

Although we already recognize the strong conservatism of many areas of the university, we do not consider the extent of the student body's exclusion process. The extent and strength of the politics of affection in the production of depotentialization are frightening. We hear a recurring sense of "disempowerment," of not being recognized for the right to be a student at the university.

Following the search to broaden our partnership, we present an article published by UERJ professors. UERJ is the first university to start a public policy of quotas, talks about the stunning reality of student suicides, and links students' suffering strongly to racism and classist attitudes expressed in the implicit assumption, in the dominant sense, in the subtle but clear messages directed to students. Also triggered by the article, we recognize that the sense repeatedly stressed to the students is that it is a very special space (for a few!) whose excellence of discussion and research needs to be protected from the risk of decay by the expansion of the academic community.

Hence, the issue of decoloniality is strongly exposed. We can see affirmative actions taken very late by Brazilian universities, demanding a broad reconfiguration of the academic community since the reparatory revision of centuries of exclusion begins to change the criteria of who has the right to

a place in the university, that is, who has a seat in the classrooms and, consequently, who has a reserved place in the production of knowledge. Our attention is drawn to a crucial point of the problem: changing the profile of the university's occupants involves, when including larger contingents of the Brazilian population in the debates, facing new themes and formulating questions that are still absent from the focus of research.

These are indispensable concerns that touch everyone! They provoke! These concerns have been silenced so far outside university discussions since, as Neusa Santos (2021) tells us, the history of the social ascension of the Brazilian black reproduces the history of its assimilation to white standards, just as happens with the native peoples. In our empirical research, we have long followed and developed critical thinking-guided discussions, which required the rejection of truths that generate general standards for all experimentally validated in and by theoretical references belonging to specific social groups and “distributed” as neutral knowledge free of historical and political determinations (FOUCAULT, 2004). Are these hierarchies and generalizations also present in the difficulties of dealing with the reconfiguration the university needs to carry out?

With Silvio Almeida (2020) and Mbembe (2018), we can revisit the question of truth production and the compositions of political forces active in knowledge production and reproduction, this time prompted by references to decoloniality.

These authors' critical thinking breaks the unbroken cycle that has re-edited the university and its prejudices and discriminations. Silvio Almeida (2020) brings us the concept of structural racism, advancing the traditional notion of structure to include historicity, leading us to consider the harmful effects that individualization causes in the processes of subjectivation as the basis of the much-vaunted false nexus that seeks to justify inequality through meritocracy.

Mbembe (2018) proposes a geopolitical complexification of the Foucauldian notion of force games, with its numerous vectors, appropriate to processes of reality construction, including student-subjectivations, by emphasizing the importance of critical thinking. In the unfolding of his conversation with Michel Foucault, the author raises questions that reverberate this micromolecular dimension and emphasizes more strongly the clinical-political aspects resulting from the moving plane of forces, from which we can understand the university, also exposing itself as a manager of vectors loaded with prejudice and rigid hierarchies: meritocracy, patriarchy, classism, racism, and homophobia, that is, he lets us see there its implications in this game of production of suffering. These are tendencies and pressures that cross through them and, by resonance, also make them responsible for the depowered subjectivations that we have received in our care.

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These ways of saying, in their reciprocal determination with the ways of doing, seeing, feeling, and acting in this discursive network, invites us to deal with such existential territories as maps in motion, in continuous gestation. Then, the speeches and actions of the university institution appear, pointing to the same orientation and meaning.

The sayings and other practices act on these students in the production of ways to make them believe, to make them see themselves as defined by insufficiency, incompetence, and lack of personal conditions to attend the university, i.e., they insistently repeat decisions about who has and who does not have the right to a place at the university. The networks of discourses and other daily practices act in modeling the bodies that, once weakened, would not be able to activate ways of acting in dealing with their daily gestures at the university. The strategy of exclusion is to create failure experiences and to instill repeated situations in which doubt about the competence of those who occupy the university is the dominant sense.

We conclude our letters here. In this configuration, which is more problematizing than answering but announcing an ethical-political orientation, the de-individualization of the problem, accomplished through the construction of possible collectives. This is the proposal we are aiming for, triggering other vectors and tensions, particularly those that can create conditions for escape from the traps of knowledge-power relations.

These letters are still under construction.

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