

TOTAL INSTITUTIONS: IS THERE VALIDITY IN THE CONCEPT OF MORTIFICATION OF THE SELF PROPOSED BY GOFFMAN TODAY?

 <https://doi.org/10.56238/arev6n2-076>

Submitted on: 08/09/2024

Publication date: 08/10/2024

Jonathan Emanuel da Silva Santos¹, Livian Valentina Peters Nunes² and Luiz Fernando Granetto³

ABSTRACT

This article aimed to analyze the actuality of total institutions and the conservation of characteristics present in the process of mortification of the self, proposed by sociologist Erving Goffman in 1961. Based on this author's studies on total institutions and the idea that the individual loses his identity and personality in such environments, we sought to investigate whether this process still exists and occurs in the same way, considering the passage of years since the research was carried out, as well as the cultural changes and technological advances that have occurred until the present day. A qualitative, descriptive, basic and integrative review research was conducted, based on the analysis of documents, legislation, archives and bibliographies about the five groups of total institutions described by the author. As a methodology for understanding the processes of institutionalization and the impacts on the lives of the affected people. Then, a comparative analysis was carried out with studies already carried out on the subject. In contemporary times, there is a persistence of elements of the process of mortification of the self and institutionalization proposed by Goffman, especially in contexts such as therapeutic institutions, prison units and barracks. However, there is a growing awareness and efforts to balance disciplinary control in institutions such as long-term care facilities for the elderly with more humanized approaches, recognizing the importance of preserving individual identity. In today's convents, nuns have more autonomy and freedom. In the end, a deeper understanding of the conservation or not of the process of mortification of the self in total institutions today was obtained.

Keywords: Institutionalization. Rules. Institutional Psychology. Social Psychology.

¹ Undergraduate student in Psychology, Assis Gurgacz University Center, 10th period
E-mail: jessantos@minha.fag.edu

² Undergraduate student in Psychology, Assis Gurgacz University Center, 10th period
E-mail: lvpeters@minha.fag.edu

³ Advisor Professor of the Psychology course, Assis Gurgacz University Center, Specialist in Sport and Physical Exercise Psychology, Bachelor in Psychology from the Assis Gurgacz University Center
E-mail: lfgranetto@fag.edu.br

INTRODUCTION

According to Goffman (1961), total institutions can be defined as places with a large number of individuals in similar situations who end up being separated from society for a considerable period of time, imposing a closed regime on the institutionalized. With their properties of closure, total institutions coordinate the life of the individual through a series of rules, norms, and relationships that will initiate a process called "mortification of the self," which seeks to standardize the behaviors of the inmates. For the author, the beginning of the process is present in all total institutions, in which the possibilities of singularity are denied.

Considering this, thousands of people live in total institutions for various factors. The total institutions can be roughly enumerated in five groupings proposed by Goffman (1961): a) institutions that offer care to people considered incapable and harmless, such as the former asylums and orphanages; b) places that care for people who are unable to take care of themselves, and who present an unintentional risk to society, such as psychiatric hospitals; c) institutions that protect society from intentional threats, such as prisons; d) entities that have the objective of performing some task or work in a more appropriate way, such as barracks and ships; e) places whose purpose is to serve as a refuge from the world, places of instruction for religious, such as convents.

Even today, total institutions are strongly present in Brazil and in the world, whether in militarism, monasteries, long-term care institutions for the elderly or prisons. One of the categories of these institutions that had a significant decrease were the Psychiatric Hospitals/Asylums, based on transformations in the psychiatric model that began in Italy in the 1960s, and after success, the discussion reached Brazil, through the WHO. The Anti-Asylum Law, Law 10.216, of 2001, marked the gradual closure of asylums in the country (BRASIL, 2001).

Thus, the present research aimed to observe and understand the way in which total institutions are organized nowadays, in order to meet the admission of their inmates. It was intended to put into operation a conception of knowledge that implies understanding the institutional world, based on the conceptualization presented by Goffman (1961), but understanding how phenomena occur today, instead of only theorizing about a reality that would be investigated, it is necessary to be available to the experience of the new, of non-knowledge, dispensing with starting the research with a closed problem.

By measuring the functioning of institutions today, it was possible to identify the current characteristics of the mortification of the self. Despite socioeconomic and cultural changes over the years, many of these characteristics are still present. However, it is important to emphasize that the methods and strategies for imposing the mortification of the self have adapted to modern times.

Finally, it was possible to present a critical understanding of institutionalization through scientific study in total institutions. By analyzing the characteristics of this process, the functioning and negative impact of practices on the autonomy and well-being of individuals were evidenced. The scientific study provided a platform for analysis and reflection on the social and psychological effects of the mortification of the self, with the search for alternatives and transformations in these institutions.

TOTAL INSTITUTIONS

The first models of isolation institutions were intended for lepers, it is with this population that the confinement of people is initiated with the justification of treatment, therefore, they were excluded from the society they populated and sent to institutions in order to contain them, because from a religious conception, they were considered impure (FOUCAULT, 1972/2017).

However, the movements of exclusion are not limited to lepers, according to Foucault (1972/2017) prison is now used to deal with social problems, with the social floor of the poor or all those who deviate from the pre-established social order.

Thus, the main configuration of total institutions that Goffman (1974) speaks of can be described as the breaking down of the barriers that commonly separate the three main spheres of life from modern society: rest, leisure and work. In such institutions, all these aspects of life are carried out in the same place, under a single authority, in the immediate company of other co-participants, and with a general rational plan, supposedly designed to meet the official objectives of the institution.

In this way, people present themselves in total institutions with common behaviors and habits accepted in the external world. The stay in the institution causes what Goffman (1961) calls "deculturation", or "detraining", which makes it difficult and often impossible to return to living in society. From this perspective, cultural invasion, like other anti-dialogical actions, serves the conquest, according to Freire (2019, p. 205) "Disrespecting the

potentialities of the being to which it conditions, cultural invasion is the penetration that invaders make into the cultural context of the invaded, imposing on them their vision of the world, while curbing their creativity, by inhibiting their expansion". Simultaneously domination and domination strategy, cultural invasion becomes violence against the invaded culture, regardless of how it is carried out. Thus, the people of the invaded culture lose their originality.

PROCESS OF MORTIFICATION OF THE SELF

As Goffman (1961) points out, it is characteristic of the inmates arriving at the institution with an "apparent culture" derived from the "family world". A way of life and a set of activities accepted without discussion until the moment of admission to the institution. Whatever the stability of the novice's personal organization was, it was part of a larger scheme, embedded in his civilian environment, a set of experience that confirmed a tolerable conception of the self and allowed for a set of forms of defense, exercised according to his will, to face conflicts, doubts, and failures of the external world.

The newcomer to the institution is confronted with a reality of submission, the result of social dispositions that have been consolidated in his domestic environment and that have shaped his conception of himself. When inserted, humiliations, degradations and desecrations of his self are constantly established throughout his stay in the institution.

Your self is systematically, though often unintentionally, mortified. Some radical changes begin to occur in his moral career, a career made up of progressive changes in the beliefs he has about himself and about others who are significant to him. The processes by which the person's self is mortified are relatively standardized in total institutions, and the analysis of this process can help to see the dispositions that common establishments must ensure in order for their members to preserve their civil selves (GOFFMAN, 1961). Participation disrupts the sequence of roles, as the separation between the internee and the wider world lasts all the time and can continue for several years. According to Goffman (1961), the barrier that total institutions place between the interned and the external world marks the first mutilation of the self.

The concept of mortification of the self proposed by Goffman is related to González Rey's Theory of Social Subjectivity (2012), which reports that the elements of subjective meaning that are produced in the different zones of social life are manifested in the processes of relationship present in any group or social agency at the time of its

functioning. The author highlights that each social space is subjectively configured and that social subjectivity is the network that interconnects these spaces, which are configured in the subjective dimension of people, groups or institutions.

Within this conception, it is important to highlight that subjectivity is not limited to the internal character of people, since social organization is also seen as a subjective production in a given context. The social is not something external to the people who constitute it and cannot be seen as a single and general reference for all those who act in a given context. According to González Rey (2011), the social only becomes alive in the relationships, events, actions and configurations that arise at each moment of social reality. In view of this, the study of subjectivity is fundamental to understand the unfolding of what is experienced socially, through the unique way in which people express themselves. This perspective allows us to record the multiplicity of the social in a sensitive way, contemplating the complexities of social reality in different contexts.

Goffman (1961) says that although some of the roles can be reestablished by the internee, if and when he returns to the world, other losses are irrecoverable and can be painfully felt as such, some examples are not being able to recover, at a later stage of the life cycle, the time not spent in educational or professional progress, in interpersonal relationships and in raising children.

Generally, the admission process also leads to other processes of loss and mortification. It is constantly verified that the management team employs what we call admission processes: obtaining a life history, taking photographs, weighing, taking fingerprints, assigning numbers, searching for and listing personal belongings for safekeeping, undressing, bathing, disinfecting, cutting hair, distributing clothes from the institution, giving instructions on rules, designating a place for the internees. In the admission processes, the novice admits to being conformed and codified in an object that can be placed at the disposal of the administrative machine, being smoothly modeled by routine operations (GOFFMAN, 1961).

The moment when the people in the management team first tell the internee what his obligations of respect are, can be structured in such a way that the internee collapses to be a permanent rebel, or to be passive always. For this reason, the initial moments of socialization may include a "passivity test" or even a challenge of will-breaking, an inmate who is insolent may receive immediate and visible punishment, which increases until he

explicitly asks for forgiveness or humiliates himself, trying to give the newcomer a clear notion of his situation (GOFFMAN, 1961).

Goffman (1961) further reports that the admission process can be described as a farewell and a beginning, and that the midpoint of the process can be marked by nudity. Once at headquarters, the individual is likely to be deprived of his or her usual appearance, as well as the

equipment and services to maintain it, which can lead to personal disconfiguration, the fact requires a loss of property, and this is important because people attribute feelings of identity to what they have, and losing the first name is a great mutilation of the self.

INSTITUTIONAL PSYCHOLOGY

Psychology has been gaining ground since its introduction as a profession in Brazil in 1962, later covering more areas of activity, such as clinical, educational, hospital, legal, organizational, sports, social psychology, among others, as pointed out by Andery et al (2020).

In this way, Institutional Psychology is introduced. One of the authors who vehemently contributed to this term was the Argentine psychiatrist José Bleger (1984, p.37):

Institutional psychology encompasses, then, the set of organisms of concrete physical existence, which have a certain degree of permanence in some specific field or sector of human activity or life, to study in them all the human phenomena that occur in relation to the structure, dynamics, functions and objectives of the institution.

Furthermore, Psychology within total institutions seeks to understand the impacts of institutionalization. According to Guirado (2009), institutional psychology is present at the interface of other areas of human knowledge, and it is necessary for the psychologist and the other multidisciplinary teams to dialogue with each other, so that they can create an adequate routine of working together. "Monitoring the distribution of times and spaces/activities in the daily (or weekly) routine; who does what, how, when. Also accompanying the relationships of conflicts and tensions, including those of which the psychologist himself is a part" (GUIRADO, 2009, p.332).

In general, each institution has its objectives, beliefs, values and organization, and it is important that the psychologist identifies them. In addition, when entering an institution, the psychologist faces several challenges, such as economic, technical, relational difficulties, among others, to be able to carry out his work. It is up to him to observe,

analyze and identify characteristics of the place, as well as levels of acceptance and rejection of this professional, creating strategies and goals. The psychologist's work in these fields goes beyond the traditional model of clinical psychology, seeking not only a cure, but also prevention and promotion of health and well-being (CASELLA, 2004).

METHODS

This study is of a basic nature, and its purposes are descriptively outlined. As for the methods used, it is configured as a survey research. With regard to the approach to the problem, it assumes a qualitative approach, characterized by the interpretation of phenomena and the attribution of meanings. This analysis is conducted through an integrative review, based on documents, legislation, archives and bibliographic sources (KAUARK; MORNINGS; MEDEIROS, 2010).

The proposal involves the fusion of information from both theoretical and empirical literature, covering a wide range of objectives, such as the definition of concepts, the review of theories and evidence, and the analysis of methodological problems related to a specific topic. In this way, it becomes possible to identify gaps in existing knowledge, compile the knowledge already available and point out guidelines for future studies. In other words, it is a methodology that aims to synthesize knowledge and incorporate the applicability of results from relevant studies in practice.

The search for the theoretical framework consisted of consulting the databases of journals: Google Scholar, Capes and SciELO, presenting as inclusion criteria materials that were evidenced through the descriptors: Total institutions, Erving Goffman, institutionalization, rules, Institutional Psychology and Social Psychology. As exclusion criteria, materials that did not present concepts related to the theme and that were not linked to the scope of the research were disregarded.

Initially, the materials that served as a basis for delimiting the scope of the research were read and carefully filed. Subsequently, a survey of the fundamental documents and legislation that regulate and organize the functioning of the total institutions was carried out for the analysis. After this initial stage, detailed research and verification of complementary files and sources were undertaken, thus complementing the database necessary to conduct the analysis of the study.

The evaluation of the collected materials was conducted in the light of the theory of Erving Goffman, as well as other authors pertinent to the field of Institutional Psychology.

The main objective was to answer the question about possible variations in the process of Mortification of the Self proposed by Goffman in 1961, when compared to the present day. This analysis was guided by specific categories, namely: the functioning of total institutions, the process of institutionalization, and the process of mortification of the self.

For analysis, the following institutions were chosen to represent each of the five groupings proposed by Goffman (1961):

- Type 1: Long-Term Care Institutions for the Elderly (LTCFs);
- Type 2: Therapeutic Clinics;
- Type 3: Prison Units;
- Type 4: Barracks;
- Type 5: Convents.

DISCUSSION OF THE RESULTS

The results of this research were presented separately for each of the 5 groups of total institutions, addressing respectively the long-term care institutions for the elderly, therapeutic clinics, prison units, barracks and convents. The aim was to elucidate the functioning of each institution, as well as the institutionalization and process of mortification of the self, using as a method the integrative review, which covers bibliographic studies and allows the incorporation of various types of data, such as documents, legislation and images, in order to highlight the proposed theme (SOUZA, SILVA and CARVALHO, 2010).

GROUP 1: LONG-TERM CARE INSTITUTIONS FOR THE ELDERLY - LTCFs

In their beginnings, long-term care institutions for the elderly were the so-called "asylums", conceived as a fundamental right, a response to the human instinct of self-preservation in the face of danger and threat to life. According to Sanches (2013, p. 01), "the institution of asylum is as old as humanity and is born from the instinct of conservation, typical of human beings, who flee from danger and death, with the purpose of finding a place that offers the necessary protection for their physical integrity". Exploring the historical root of long-term care institutions for the elderly, the author highlights several variations over time, including the religious asylum, which had its origins in Classical Greece, the criminal asylum, and later the political asylum.

It was only in the twentieth century that the economic-social asylum emerged, with an orientation more focused on the provision of assistance. However, Sanches (2013) points out that most scholars agree that nursing homes are often associated with places considered sacred, thus manifesting a strong religious influence and, therefore, representing a universal practice.

The origin of long-term care institutions for the elderly has striking similarities with the history of hospitals, especially with regard to the reception of elderly people in need. According to Affeldt (2013), even today, it is common to find long-term care institutions for the elderly managed by religious congregations, without this arousing any form of prejudice or surprise. In the contemporary scenario, residences and homes for the elderly are spread throughout the Brazilian territory, many of them demanding, totally or partially, financial contributions from the elderly or their families to pay for the care offered.

In Brazilian culture, these institutions are often seen as a delicate topic, representing a taboo and being considered places of exclusion, isolation and deposit of abandoned elderly. As highlighted by Khoury et al. (2011), they are perceived as feared places, where no one wants to be. This perspective is corroborated by other studies, such as that of Silva and Finnocchio (2011), which argue that these entities continue to be the most striking institution of segregation for the elderly. According to these authors, these spaces welcome the elderly, retired or not, who are unable to remain independent, despite whether or not they have diseases that affect their functionality, conditions inherent to the natural aging process that further accentuate segregation.

Approaching the topic from an institutional perspective, Rozendo and Justo (2012) classified long-term care institutions for the elderly as "total institutions", a term coined by Goffman (1961), for whom these institutions are residential and/or work spaces where a large number of individuals in similar situations, separated from the broader society for a certain period, They lead a closed and formally managed life.

According to Araújo et al. (2010), the asylum model adopted in Brazil still has many similarities with the so-called "total institutions", considered obsolete with regard to the management of health services and/or housing for the elderly. However, there is a transformation in the profile of these institutions. According to Camarano and Kanso (2010), the aging of the population and the increase in life expectancy of people with reduced physical, cognitive and mental capacity are demanding that long-term care institutions for the elderly evolve beyond simple units of the social assistance network, starting to interact

more actively with the health care network. In other words, these institutions need to offer more than just shelter or care services, a reality that is already consolidating.

In view of the new demands and seeking to standardize the terminology, the Brazilian Society of Geriatrics and Gerontology (SBGG) proposed the adoption of the designation: Long-Term Care Institutions for the Elderly (LTCFs). According to the definition of the association and Resolution - RDC No. 283/2005, LTCFs are characterized as:

Institutions, whether governmental or non-governmental, of a residential nature, intended for the collective reception of people aged 60 years or older, whether with or without family support, ensuring conditions of freedom, dignity and citizenship (BRASIL, 2005).

Born and Boechat (2002) highlight that, in addition to family planning, institutions should implement strategies to welcome the elderly. The participation of both professionals and residents in this reception process is essential. The elderly should have the autonomy to bring personal belongings with them, while the institution should be introduced to them, including their schedules and routines. These practices, as discussed by Goffman (1961) in his analysis of rites of passage in institutions, are rituals that facilitate the transition of the elderly to the institutional environment.

The authors Born and Boechat (2002) emphasize the importance of approaching the elderly in order to transmit security and welcome during their introduction to institutions. For those who have lost autonomy or independence, it is crucial to create opportunities that allow them to get out of bed, enjoy sunlight, access outdoor spaces, and, when possible and appropriate, participate in social activities.

Image 1 - Elderly Experience



Source: Website of the University of São Paulo - USP. 07/28/2011. Available at: <https://imagens.usp.br/editorias/saude-categorias/asilo/> Accessed: 12/06/2023.

Based on the image, it is possible to observe the perspective of Foucault (1996) who highlights the relationship between space and power, the granting of permission for the elderly to leave bed, have access to external areas and participate in social activities can be interpreted as a dynamic of power negotiation within the institutional environment. The control over space reflects the manifestation of the power exercised by institutions over the bodies of the elderly.

Thus, Goffman (1961), with regard to the hierarchical structure of nursing homes and the control exercised by mental health professionals, also play a role in the mortification of the self. Residents may have limited autonomy, being subjected to external decisions about their daily lives, medical treatment, and activities.

GROUP 2: THERAPEUTIC CLINICS

Foucault (1972) refers to leprosaria, revealing the history of enclosure based on treatment justifications. In the early years of the eighteenth century, institutional treatment establishments, known as reformatories, implemented a rigorous disciplinary process as an approach to dealing with those considered "misfits" by society.

The notion that "madmen" were considered unwanted by society, as discussed by Ferrazza (2016), resonates with Foucault's (1972) ideas about social exclusion and enclosure as a way to make these individuals submissive. The madman is presented as an exception, a being who, due to his insanity, defies established norms.

The work of Amarante (2007) adds the perspective of isolation as an imperative for correct treatment, focusing on the debate on normality and abnormality within a science that produces immutable truths. This point is in line with Foucault's (1972) analysis of the disciplining of bodies in total institutions, where isolation is justified by the need to make individuals submissive and docile.

After World War II, movements emerged in Europe and the United States that opposed the traditional approach to the treatment of mental disorders. A notable example is the Institutional Movement in France and the Therapeutic Communities in England, both of which resulted in a more comprehensive movement known as antipsychiatry. These initiatives advocate for humanistic approaches in the context of mental health (GOULART, 2006).

The emergence of this transformation in Brazil began in the late 1970s, with the formation of the Mental Health Workers' Movement (MTSM). This movement was motivated

by reports of abuses in nursing homes and by precarious working conditions within asylums and psychiatric institutions (ZAMBENEDETTI; SILVA, 2008).

The Psychiatric Reform in Brazil was an intricate social process that introduced transformations in the care of people facing psychic suffering. This movement seeks a more subjective perspective when approaching madness, proposing discussions about it (BRASIL, 2005). The main objective is to provide a humanized environment, marked by respect and dignity, for those who experience psychic suffering.

However, in order to understand the context of the Psychiatric Reform in Brazil, it is essential to examine a crucial point in the history of health in the country: the Health Reform. This initiative aimed to address health issues and propose significant changes in the national panorama, especially during the process of redemocratization of health (BRASIL, 2005). The creation of the Unified Health System (SUS) and the defense of the right to health guaranteed by the State played fundamental roles as drivers of the Psychiatric Reform in Brazil.

In 1987, the II National Congress of Mental Health Workers (MTSM) took place in Bauru, SP, which adopted as its motto "For a society without asylums". However, it was only in 2001 that Law 10.216 was enacted, establishing guidelines for the protection and rights of people facing psychological distress. This legislation also promoted a reorientation in the model of mental health care (BRASIL, 2005).

Instead of psychiatric hospitals, the Ministry of Health established, in 2002, the implementation of Psychosocial Care Centers (CAPs) throughout the national territory. The CAPs were created as places of reception for people with mental disorders, offering treatment outside the hospital environment. Its purpose is to provide psychological and medical support, with the aim of facilitating the reintegration of patients into society.

According to Ferrazza (2016), substitute services are considered a way to overcome asylums. However, there is no guarantee that these services will completely eliminate the asylum logic, as evidenced in the case of therapeutic communities. Thus, Basaglia (1985/2001) proposes that the true conclusion is associated with the dismantling of the asylum structure, emphasizing that the closure of asylums does not represent the end, but rather the beginning of this process.

Strategically, government initiatives to reduce the consequences of substance use. First, there are interventions in the field of public security, aimed at combating trafficking and reducing the supply of narcotics. Secondly, actions are implemented in the area of

health and social assistance, aiming at the recovery of individuals with mental and behavioral disorders resulting from the use of these substances. Finally, the third area involves actions in education and information, with a focus on the prevention of drug consumption (BRASIL, 2011).

In his studies, Goffman (1961) discussed how entering institutions can generate reactions and adjustments on the part of individuals. In the context of clinical therapy, "culture shock" suggests a dissonance between the individual's previous cultural system and the new institutional environment. This shock can manifest itself internally, reflecting in the user's reactions and attitudes towards the new context.

Image 2 - News about aggressions in therapeutic clinics

O **Fantástico** desde domingo (26) mergulhou em **histórias de agressão e tortura em comunidades terapêuticas da Grande São Paulo**. Uma das internas ouvidas pela reportagem afirma ter recebido seis golpes conhecidos como "mata-leão" de uma monitora.

Source: Retrieved from the G1.com website, 2023. Available at: <https://g1.globo.com/fantastico/noticia/2023/11/27/jovem-diz-ter-sido-agredida-seis-vezes-seguidas-com-golpe-conhecido-como-mata-leao-em-comunidade-terapeutica-de-sp.ghtml27/11/2023> Accessed in: 12/07/2023.

In some situations, violence can be used as a means of maintaining order or social control within the clinic. For Goffman (1961) this creates an environment where patients fear reprisals, encouraging conformity to institutional norms, but also promoting submission and mortification of the self.

Image 3 - Religious Therapeutic Communities



Source: Taken from the Brasil de Fato RJ website Available at: <https://www.brasildefatorj.com.br/2021/07/13/justica-suspende-internacao-de-adolescentes-em-comunidades-terapeuticas> Accessed in: 12/07/2023.

One variant of the institution, religious therapeutic communities, adopt a treatment approach that can last from three months to a year, in a closed regime, with the first family visit usually allowed after one month of hospitalization (DE LEON, 2009).

According to Goffman's (1961) institutionalization process, these communities impose a series of rules to guide their therapeutic proposal, with disciplinary consequences for non-compliance. Prohibitions include violent acts, physical or verbal, the use of drugs, physical or imaginary sexual intercourse, and the requirement to maintain a "good appearance". Rules about hair and dress are subject to the authority of the coordinators and inmates, without question. Gifts can only be received with permission, and punctuality in activities is mandatory. Failure to comply with these rules can result in sanctions or even expulsion from the program (DE LEON, 2009; GOTI, 1990).

3.3 GROUP 3: PRISON UNITS

Brazilian penitentiaries are governed by the Penal Execution Law, No. 7,210, of July 11, 1984. This law provides for the conditions for compliance with the sentence, and it is the duty of the State to provide material assistance, including clothing, food, and hygienic facilities; health care, with medical, dental and pharmaceutical care; legal assistance; educational assistance; social assistance, with the objective of preparing the prisoner for rehabilitation; religious assistance and egress (BRASIL, 1984). In this way, it is intended that the execution of the sentence is harmonious and egalitarian, seeking the rehabilitation of the convict. However, despite this objective, it is possible to notice several other issues within the prison system, such as overcrowding, unhealthy conditions, insufficient medical care and poor food (FERNANDES and RIGHETTO, 2013)

According to Scott (1995), the origin of what is now called institutionalization dates back to concepts formulated at the end of the nineteenth century, as a result of the debates undertaken in Germany about the scientific method. Answers were sought on how social choices are shaped, mediated and directed by institutional arrangements. Therefore, institutionalization is the circumstance used to describe both the process and the damage caused to the institutionalized by the oppressive application of inflexible social, medical or legal control systems. In addition, Goffman (1961) portrays that people generally carry out their leisure, work and rest activities in different places, however, in total institutions, such as prison units, all areas of the individual's life are carried out in the same place, with established schedules and usually under surveillance.

Still on the process of institutionalization, Goffman (1961) argues that it aims to extinguish the subjectivity of the inmate, making individual characteristics unimportant, with the establishment of norms, organizational structures and practices within the prison environment. This process, also called imprisonment, is cultural, implicitly and explicitly imposed, passed on by both agents and inmates. Also, Goffman (1961) portrays the concept of mortification of the self, which, like institutionalization, standardizes and generalizes the inserted individual. An example is the loss of the name, considered by the author to be a great mutilation of the self, very present in prison units, as the inmates are identified by their numbers or nicknames, and their names become unimportant. Goffman (1961) also brings about the standardized substitutions brought by total institutions, such as uniformity, considering when entering, the inmate dispossesses his assets.

Image 4 - Rebellion in the Penitentiary of Cascavel-PR



Source: Taken from the UOL Notícias website. November 11, 2017 Available at: <https://noticias.uol.com.br/cotidiano/ultimas-noticias/2017/11/11/cadeia-no-pr-onde-rebeliao-matou-1-tera-sistema-de-excecao-reforma-e-visitadas-proibidas.htm> Accessed in: 12/06/2023.

In addition, many penitentiary systems have already gone through rebellions, usually provoked by the inmates themselves, by internal conflicts or disputes between factions or criminal groups (SALLA, 2006). Thus, Useem and Kimball (1991 apud SALLA, 2006) understand that these movements usually occur for different reasons, one of them, the most recurrent, can be identified as a form of protest against oppression and aggression, unsatisfactory food, overcrowding and the imposition of adverse situations. Another reason, as occurred in several penitentiaries in the state of São Paulo in 2001, was aimed at members of the criminal faction PCC (First Command of the Capital) (SALLA, 2006).

Regarding subjectivity, or the lack of it within the prison system, Mameluque (2006 p. 628) states: "[...] subjectivity encompasses all the peculiarities immanent to the condition of being a subject, involving the sensory, affective, imaginative and rational capacities of such a person". In addition, as stated by Kolling et al. (2013, p. 283) "The circumstance or the "imprisoned" state does not cause him to lose the condition of human and citizen who necessarily needs to enjoy and enjoy health, although in the current conditions of the prison system".

Thus, among the resources used by the inmates to manifest subjectivity, tattoos are also seen as a form of search for subjectivity within the prison, in addition to having other meanings, such as indicating belonging to a gang or the crimes committed. To achieve what they want, inmates use creativity to make improvised tattoo machines, often using pens and wires (CHAVES and SILVA, 2012).

GROUP 4: BARRACKS

As highlighted by Ribeiro (2011), from the imperial era until the 1960s, militarism in Brazil lacked professionalization, and there was no formal training course. During this period, it was characterized as a fragile institution, devoid of articulation and discipline, although it managed to meet the demands of the time. With the consolidation of the empire, the police began to assume specific functions, playing crucial roles in the urban organization and in the judicial aspects essential for its functioning.

According to the author, the evolution of militarism in Brazil, from the imperial period onwards, demanded the creation of an organizational structure, which aimed to establish a disciplinary hierarchy for the individuals inserted, in addition to making the institution permanent in the police professions (RIBEIRO, 2011).

Faced with the demand for public security institutions, government leaders realized the need to promote the development of these forces, as highlighted by Bicudo (1994). According to the author, the model adopted for the Brazilian Military Police is inspired by the French model, resulting in the hierarchization, discipline and remuneration of the group with resources from the public coffers.

Image 5 - Food on the floor BOPE



Source: Photo taken from the website Org.com 23/05/2017. Available at: <https://ponte.org/fim-do-assedio-moral-nas-policias-militares-uma-questao-de-direitos-humanos-artigo/comida-no-chao-bope/> Accessed in: 12/06/2023.

As in the image above, the practice of making recruits eat on the ground in the military context can be associated with the idea of "mortification of the self" proposed by Goffman (1987), it is related to submission and obedience. By subjecting recruits to such practices, the army seeks to shape their individual identities in conformity with the military hierarchy. Eating on the floor can represent an act of humility and acceptance of authority, contributing to the formation of a collective "I", aligned with the values and norms of the military institution. The author points out that total institutions seek standardized behavioral elements. Another example within the barracks is the uniform, a visual symbol of military identity, serving as an element of homogenization and distinction within the institution. It often involves a process of stigmatization, where individuals are labeled and stigmatized in ways that affect their social identity.

Goffman (1987) argues that institutions shape the behavior of individuals through rituals, norms, and predefined roles. In the case of Brazilian militarism, the inspiration in the French model represents a search for an organizational structure that not only meets the demands of public security, but also exerts control over its members.

As in the institutional environments analyzed by Goffman (1987), the hierarchization, discipline and remuneration of the military reflect strategies of social control. The search for resources in the public coffers evidences the government's concern to sustain and invest in this control system, in parallel with the exclusive and permanent recognition of the members, reinforcing the importance of maintaining a stable institutional order.

The career scale outlined within military barracks, developed from the rank of soldier to colonel, reflects not only an administrative structure, but also a social and disciplinary order. This hierarchical organization resembles the power structures described by Foucault

(1979) in his analysis of disciplinary institutions. The ranks not only represent levels of authority, but also establish relations of power and control, evidencing the verticality of the system.

Goffman (1987) argues that institutions exercise a high degree of control over the daily activities of the individuals who reside in them. This control is often manifested by strict rules, regulations, and procedures. An example available in Decree No. 13,753 of September 10, 1919, addresses norms and salutes, signs of respect and military honors, describing that "the salute of one military officer to another is essentially impersonal, and therefore it is an absolute mutual obligation to be fulfilled in any situation" (BRASIL, 1919, s.p.).

In other words, the act of "saluting" highlights how one of the daily practices, apparently simple, but loaded with symbolic meaning, reinforces the hierarchical structure. This act of obligatory reverence reveals a form of ritual that sustains the established order, influencing interactions within the institution. Refusal to salute, as mentioned, is punishable, revealing a disciplinary element that echoes Foucault's (1979) ideas about the application of punitive measures to maintain social order. The imposition of discipline through punishments reinforces control and obedience to established norms.

GROUP 5: CONVENTS

Before the emergence of prisons, shelters for the elderly, psychiatric hospitals and places for leprosaria, the institution of a recognized totalitarian regime was the convents and monasteries. In the words of Benelli (2009, p. 49) "The typical ideal convent exemplifies the affinity that exists between isolation, discipline and the transformation of personality". In this way, before entering the institution, the newcomer arrives with a conception of herself and the world, built over time (GOFFMAN, 1961). From the moment she enters the convent, the novice accepts the institution's purpose of transforming her personality, with renunciations in daily life, such as the vow of poverty, chastity and obedience (BENELLI, 2009). In addition, although there is a hierarchy within the convent, it would not be possible to divide the management team and interneers, as occurs in the other total institutions (GOFFMAN, 1961).

According to Benelli and Costa-Rosa (2002), monasteries and convents are institutions that to this day are still used as producers of subjectivity, which is molded according to the place. In addition, Goffman (1987 apud Benelli, 2009) points out that if the

inmate feels that he cannot trust his companions or that they present a threat, he tends to experience loneliness, despite living in a large group.

Francelino (2020) brings the point of view that portrays female inferiority, passed on over the years as truth, including by doctors, until the eighteenth century. In this way, although some women decided to follow the religious life, many were taken with no choice.

Image 6 - Cloistered nuns



Source: Photograph taken from the Aparecida National Shrine website, 12/13/2017. Available at: <https://www.a12.com/santuاريو/noticias/mesmo-em-clausura-carmelitas-integram-historia-do-sanctuary> Accessed in: 12/07/2023.

With regard to the cloister of nuns, in the nineteenth century, some exits were allowed, through authorizations made by superiors, however, most of these authorizations were granted for health reasons, visits to the family at the request of relatives or even transfer to another monastery (FERNANDES, 1992). However, in the nineteenth century, a congregation of nuns from France who landed in Brazil carried out activities outside the cloister, helping people in need and in the schooling of girls (FRANCELINO, 2020). Thus, the first mutilation of the self presented by Goffman (1961) is the barriers that total institutions impose between the intern and the outside world, and thus, many times, at first, no exits or visits from outside are allowed. When entry into the convent is voluntary (as in most cases), there is a less difficult adhesion, making it easier for the inmate to break with the external world.

FINAL CONSIDERATIONS

The process of Mortification of the self refers to the loss or exclusion of individual identity in total institutions. From there, it becomes possible to recognize the main aspects of this phenomenon, such as: depersonalization, in which the inmates are treated in a generalized way, and their individual characteristics become irrelevant; uniformity, which includes the imposition not only of clothing, but also physical appearance, such as haircuts; standardized routines, usually established by the management team, in addition to almost uninterrupted control and supervision, which also leads to loss of identity. It is important to highlight that each total institution has its impact on the life of each individual, and in this way, the degree of mortification of the self is varied.

Comparing the process of mortification of the self in total institutions today and in the 1960s, it is possible to observe some differences. With the advancement of technology and the dissemination of information, there has been an increase in surveillance and control over inmates. In addition, institutions can now place more emphasis on social conformity and submission to established norms.

It is considered that with regard to the analyzed type 1 institution, the historical evolution of long-term care institutions for the elderly, from the beginnings of "asylums" to the present day, it is possible to observe a significant transformation in this scenario. Initially conceived as places of protection and assistance, these institutions have gone through different variations over time, maintaining a strong religious influence.

In the context of institutionalization and mortification of the self in care institutions for the elderly, it was observed that the contemporary dynamics reflect intricate power negotiations. The maintenance of control over space is an expression of institutional power over the bodies of the elderly. The granting of permission to leave the bed, access external areas and participate in social activities represents a negotiation process, in which the elderly seek greater autonomy within the institution, while the institutions continue to exercise control over these aspects.

However, there is a transformation in the profile of these institutions today. The proposal of the Brazilian Society of Geriatrics and Gerontology (SBGG) to adopt the designation "Long-Term Care Institutions for the Elderly (LTCFs)" reflects an attempt to overcome the stigmatization associated with the old "nursing homes". This change seeks to ensure conditions of freedom, dignity and citizenship for the elderly, differentiating contemporary LTCFs from the total institutions described by Goffman.

In summary, while the institutionalization process still presents challenges related to stigmatization and the preservation of the identity of the elderly, the changes in contemporary LTCFs indicate a search for more humanized practices centered on respect for individuality, representing an evolution in relation to the concept of total institutions proposed by Goffman in 1961.

Regarding the institution of type 2, the analysis of therapeutic communities in the light of Goffman's theories reveals contemporary challenges related to social control, conformity and dignity of individuals. The persistence of violence as a means of control by some institutions creates an environment of fear that paradoxically promotes conformity, submission and mortification of the self, contrary to the ideal of humanized treatment.

The closed regime of these communities mirrors Goffman's process of institutionalization, imposing strict rules on behavior, appearance and social relations, evidencing the institutional power over the individuality of the participants even today. The linking of rules to disciplinary consequences, such as sanctions and expulsion, raises questions about the preservation of autonomy and dignity, highlighting the need for critical reflection and reformulation of therapeutic approaches.

In the contemporary context, where the valorization of autonomy is highlighted, the analysis suggests the importance of therapeutic methods that promote recovery while respecting dignity and human rights. In summary, the application of Goffman's theories highlights the continued relevance of his ideas, underlining the importance of therapeutic approaches that prioritize humanization and respect for individual rights for ethical and effective treatment.

In the total institution of type 3, it is perceived that the prison unit has a different role from the other institutions, as the inmates are segregated from the outside world and deprived of their freedom with the objective of rehabilitation. In this way, it is possible to observe that the institutionalization process is imposed on the convicts in an explicit way, mainly by the technical team. When entering the penitentiaries, inmates are stripped of their goods and clothes, and need to adapt to the standards of the place, they receive clothes, which are usually insufficient, a kit with a toothbrush and a gilette and they need to undergo a haircut (often performed by an inmate).

In addition, it is possible to see that in these institutions, inmates are often reduced to numbers, suffer from institutionalization and frequent aggressions. Thus, it is possible to attest that excluding individuals from society does not prepare them for living in it.

Regarding the institution of type 4, it can be observed that the control and discipline over daily activities, highlighted by Goffman, are still characteristics present in contemporary barracks. Rigid rules, disciplinary procedures, and an emphasis on military hierarchy continue to shape the behavior of individuals.

The hierarchical and disciplinary model in military institutions may reflect a resistance to social change. The search for order and control can, in some cases, conflict with contemporary expectations of autonomy and respect for individual rights.

In summary, contemporary analysis of Goffman's barracks theories suggests a mixture of continuity and evolution. While certain elements of institutional dynamics persist, there is a growing awareness of the need to balance disciplinary control with approaches that respect individuality and promote more ethical and humanized practices.

Finally, in the total institution of type 5, unlike the inmates of the prison system, most nuns enter the institution through what is known as "vocation". In addition, convents are considered the matrix of totalitarian institutions. However, they have undergone significant changes regarding the concept of institutionalization. Although there are still congregations of nuns who live in cloister, most not only allow but also encourage a greater experience with the outside world. However, unlike other institutions, the nuns do not have economic concerns, such as work and housing, so their perceptions of reality diverge from the reality of people who are not inserted in these places.

In addition, in antiquity the use of religious habits and garments were imposed, in order to be part of the identity and in order to expose the commitment to religious life. Today, some congregations allow the wearing of other clothing, with specific restrictions. One hypothesis that may explain this "opening" in convents is the gradual decrease in the search for a religious vocation.

However, the archives and documents found on the functioning and internal legislation of the convents are precarious. With this in mind, it is suggested that more research be carried out on the subject, providing better understandings of subjects related to religious experience.

REFERENCES

1. Affeldt, M. A. (2013). *O asilo enquanto espaço e lugar: a institucionalização da velhice em Santa Maria-RS* (Dissertação de Mestrado). Programa de Pós-Graduação em Geografia e Geociências - UFSM, RS.
2. Amarante, P. D. C. (2003). *Loucos pela vida: a trajetória da Reforma Psiquiátrica no Brasil* (2ª ed.). Editora Fiocruz.
3. Agência Nacional de Vigilância Sanitária (ANVISA). (2005). *Resolução da Diretoria Colegiada – RDC 283*. Disponível em: <https://www.gov.br/anvisa>
4. Andery, M. C., Bittencourt, S. C. A., Comaru, C. M., Liberato, R. M. P., Maldonado, T. C. P., Moreira, W., & Franco, M. H. P. (2020). A vivência do luto de psicólogos dentro das instituições. *Revista SBPH*, 23(1), 25-34.
5. Araujo, C. L. de O., Souza, L. A. de, & Faro, A. C. M. (2010). Trajetória das instituições de longa permanência para idosos no Brasil. *História da Enfermagem Revista Eletrônica*, 1(2), 250-262.
6. Barboza, L. L. (2022). *Educação como prática da liberdade: reflexões sobre a possibilidade da educação humanizadora nas prisões*.
7. Basaglia, F. (2001). *A instituição negada: relato de um hospital psiquiátrico* (3ª ed., H. Jahn, Trad.). Rio de Janeiro: Edições Graal. (Obra original publicada em 1985).
8. Benelli, S. J. (2014). *A lógica da internação: instituições totais e disciplinares (des)educativas*. São Paulo: Editora UNESP.
9. Benelli, S. J., & Costa-Rosa, A. (2002). A produção da subjetividade no contexto institucional de um seminário católico. *Estudos de Psicologia*, 19(2), 37-58.
10. Benelli, S. J. (2009). O convento: matriz original das instituições totalitárias e o surgimento da sociedade disciplinar. *Revista de Psicologia da UNESP*, 8(1), 48-64.
11. Bicudo, H. P. (1994). *Violência: O Brasil cruel e sem maquiagem*. Editora Moderna.
12. Bleger, J. (2004). *Psico-higiene e psicologia institucional* (1ª ed.). São Paulo: Artmed.
13. Brasil. Decreto nº 13.753, de 10 de setembro de 1919. *Regulamento de continências, sinais de respeito e honras militares*. Diário Oficial da União.
14. Brasil. Lei nº 7.210/84, de 11 de julho de 1984. Disponível em: https://www.planalto.gov.br/ccivil_03/leis/l7210.htm
15. Brasil. Lei nº 10.216, de 6 de abril de 2001. Brasília: Diário Oficial da União.

16. Brasil. Ministério da Saúde. (2005). *Reforma psiquiátrica e política de saúde mental no Brasil*. Documento apresentado à Conferência Regional de Reforma dos Serviços de Saúde Mental: 15 anos depois de Caracas.
17. Brasil. Ministério da Saúde. Agência Nacional de Vigilância Sanitária. (2011). Resolução – RDC n. 29, de 30 de junho de 2011. Diário Oficial da União.
18. Born, T., & Boechat, N. S. (2002). A qualidade dos cuidados ao idoso institucionalizado. In Freitas, E. V. et al. (Orgs.), *Tratado de geriatria e gerontologia* (pp. 768-777). Rio de Janeiro: Guanabara Koogan.
19. Camarano, A., & Kanso, S. (2010). As instituições de longa permanência para idosos no Brasil. *Revista Brasileira de Estudos de População*, 27(1), 232-235.
20. Casella, M. (2004). *Estratégias em psicologia institucional* (2ª ed.). São Paulo: Edições Loyola.
21. Chaves, K. B., & Silva, R. C. M. (2012). A tatuagem na prisão: considerações acerca da identidade e do estigma. *Pleiade*, 11(111), 7-32.
22. De Leon, G. *A comunidade terapêutica: teoria, modelo e método* (A. Sobral, C. Bartalotti & M. S. Gonçalves, Trad.). São Paulo: Loyola.
23. Fernandes, M. E. M. (2009). *O Mosteiro de Santa Clara do Porto em meados do Séc. XVIII (1730-80)*. Porto: Câmara Municipal do Porto.
24. Fernandes, B. R., & Righetto, L. E. C. (2013). O sistema carcerário brasileiro. *Revista Eletrônica de Iniciação Científica*, 4(3), 115-135.
25. Ferrazza, D., & Rocha, L. C. (2020). Psicologia e políticas públicas: apontamentos sobre os desafios da atenção e do cuidado aos usuários de álcool e outras drogas. In E. Zaniani & R. Borges (Orgs.), *Psicologia e políticas públicas: perspectivas e desafios para a formação e atuação* (pp. 231-265). Eduem.
26. Ferrazza, D. A., Sanches, R. R., Rocha, L. C., & Justo, J. S. (2016). Comunidades terapêuticas em novas configurações do manicomialismo. *ECOS Estudos Contemporâneos da Subjetividade*, 2, 363-375.
27. Francelino, L. C. C. (2020). Vida de freira, entre a vocação e a profissão: análise da formação religiosa no interior da congregação das Irmãs de Jesus na Santíssima Eucaristia (1927-1950). *Temporalidades - Revista de História*, 12*(1), 868-881. Acesso em: 15/08/2023.
28. Goti, M. (1990). *La comunidad terapéutica: un desafío a la droga*. Buenos Aires: Nueva Visión. Acesso em: 9/12/2023.
29. Foucault, M. (1972). *História da loucura na idade clássica*. São Paulo: Perspectiva. Acesso em: 05/12/2023.

30. Foucault, M. (1996). **Vigiar e Punir: Nascimento da Prisão** (13a ed.). Petrópolis: Vozes. Acesso em: 05/08/2023.
31. Foucault, M. (1999). **Vigiar e Punir: História da Violência nas Prisões** (27a ed.). Petrópolis: Vozes. Acesso em: 05/08/2023.
32. Freire, P. (2019). **Pedagogia do oprimido**. Rio de Janeiro: Paz e Terra. Acesso em: 09/05/2023.
33. Goffman, E. (1974). **Manicômios, prisões e conventos [Asylums]**. São Paulo: Perspectiva. (Original de 1961). Acesso em: 05/08/2023.
34. Goffman, E. (1987). **Manicômios, prisões e conventos** (2a ed.). São Paulo: Perspectiva. Acesso em: 11/10/2023.
35. Goffman, E. (2005). **Manicômios, prisões e conventos** (7a ed.). São Paulo: Perspectiva. Acesso em: 05/08/2023.
36. González Rey, F. L. (2011). **Subjetividade e saúde: superando a clínica da patologia**. São Paulo: Cortez. Acesso em: 22/08/2023.
37. González Rey, F. L. (2012a). **O Social na Psicologia e a Psicologia Social: a emergência do sujeito**. Petrópolis: Vozes. Acesso em: 05/08/2023.
38. Goulart, A. M. (2006). Oralidade, escrita e letramento. In H. R. Carvalho (Ed.), **Práticas de leitura e escrita**. Brasília: Ministério da Educação. Acesso em: 05/11/2023.
39. Guirado, M. (2009). Psicologia Institucional: O Exercício da Psicologia como Instituição. **Interação em Psicologia, 13**, 323-333. Acesso em: 11/05/2023.
40. Khoury, H. T. T., Rêgo, R. C. C. S., Silva, J. C., Silva, A. D. L., Novaes, V. R., Sanches, T. R., & Pereira, M. A. D. (2009). Bem-estar subjetivo de idosos residentes em instituições de longa permanência. In D. V. S. Falcão & L. F. Araújo (Eds.), **Psicologia do Envelhecimento: relações sociais, bem-estar subjetivo e atuação profissional em contextos diferenciados**. Campina: Alínea. Acesso em: 05/05/2023.
41. Kolling, G. J., Silva, M. B. B., & Sá, M. C. D. N. P. (2013). O Direito à Saúde no Sistema Prisional. **Tempus - Actas de Saúde Coletiva**. Acesso em: 25/06/2023.
42. Krein, C. E. (2022). **Manicômios com nova roupagem: O deslocamento do aparato manicomial para comunidades terapêuticas**. Acesso em: 05/05/2023.
43. Mameluque, M. G. C. (2006). A Subjetividade do Encarcerado, um Desafio para a Psicologia. **Psicologia, Ciência e Profissão, 26**(4), 620-631. Acesso em: 02/09/2023.
44. Meyer, J., & Rowan, B. (1983). Institutionalized organizations: formal structure as myth and ceremony. In J. Meyer & W. R. Scott (Eds.), **Organizational environments: ritual and rationality**. London: Sage. Acesso em: 05/08/2023.

45. Pires, J. F., & Resende, L. L. (2016). Um Outro Olhar sobre a Loucura: A Luta Antimanicomial no Brasil e a Lei N. 10.216/2001. *Cadernos da Escola de Direito, 2*(25), 34-47. Acesso em: 20/04/2023.
46. Ribeiro, L. C. (2011). História das polícias militares no Brasil e da Brigada Militar no Rio Grande do Sul. *Anais do XXVI Simpósio Nacional de História – ANPUH*, (1), 1-21. Acesso em: 05/12/2023.
47. Rocha, T. H. R., Pena, B. V., Manffré, M. C., & Jesus, L. M. (2019). A desinstitucionalização no contexto da reforma psiquiátrica e seus desdobramentos: um relato sobre práticas em um CAPS. *Vínculo-Revista do NESME*. Acesso em: 15/04/2023.
48. Rozendo, A., & Justo, J. (2012). Institucionalização da velhice e regressão: um olhar psicanalítico sobre os asilos de velhos. *Revista Kairós Gerontologia, 15*(8), 25-51. Acesso em: 12/07/2023.
49. Salla, F. (2006). As rebeliões nas prisões: novos significados a partir da experiência brasileira. *Sociologias, 8*(16), 274-307.
50. Sanches, L. T. (2013). As origens históricas do direito de asilo. *Jus Brasil*. Acesso em: 05/12/2023.
51. Silva, B., & Finocchio, A. L. (2011). A velhice como marca da atualidade: uma visão psicanalítica. *Vínculo, 8*(2), 23-30. Acesso em: 10/08/2023.
52. Scott, W. R. (1995). *Institutions and organizations*. London: Sage. Acesso em: 22/08/2023.
53. Souza, M. T., Silva, M. D., & Carvalho, R. (2010). Revisão integrativa: o que é e como fazer. *Einstein, 8*(1), 102-106. Acesso em: 05/07/2023.
54. Tolbert, P. S., & Zucker, L. G. (1999). A Institucionalização da Teoria Institucional. In S. Clegg, C. Hardy, & W. Nord (Eds.), M. Caldas, R. Fachin, & T. Fischer (Orgs. brasileiros), *Handbook de Estudos Organizacionais, modelos de análise e novas questões em estudos organizacionais* (Vol. 1). São Paulo: Atlas. Acesso em: 02/04/2023.
55. Zambenedetti, G., & Silva, R. A. N. (2008). A noção de rede nas reformas sanitária e psiquiátrica no Brasil. *Psicologia em Revista, 14*(1), 131-150. Acesso em: 05/12/2023.