







Social determinants of health of Haitian immigrant women: repercussions in facing COVID-19

Determinantes sociais da saúde de mulheres imigrantes haitianas: repercussões no enfrentamento da COVID-19

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ABSTRACT

Objectives: To understand the repercussions of COVID-19 in the context of the social determinants of health of Haitian immigrant women. **Method:** Qualitative, participatory action study, based on Freire's assumptions, with a Virtual Culture Circle and the participation of eleven Haitian immigrant women. The stages of the Research Itinerary were covered: Thematic Research; Encoding and Decoding; Critical Unveiling. **Results:** In the dialogues, fear of the pandemic, scarce economic resources, prejudice, and racism emerged as aspects of the social determinants of health, which affect the mental health of immigrants but who mentioned feeling welcomed in Brazil. **Conclusion:** Based on the social determinants of health, presented by Haitian immigrant women in facing the pandemic, the collaboration between health promotion actions is relevant, with an emphasis on cultural capability, in order to stimulate the empowerment of individuals.

Descriptors: Emigration and Immigration; Social Determinants of Health; COVID-19; Women's Health; Public Health Nursing.

RESUMO

Objetivos: Compreender as repercussões da COVID-19 no contexto dos determinantes sociais da saúde de mulheres imigrantes haitianas. **Método:** Estudo qualitativo, tipo ação-participante, fundamentado nos pressupostos de Freire, realizando-se um Círculo de Cultura Virtual, com a participação de 11 mulheres imigrantes haitianas. Foram percorridas as etapas do Itinerário de Pesquisa: Investigação Temática; Codificação e Descodificação; Desvelamento Crítico. **Resultados:** Nos diálogos emergiram o medo em relação à pandemia, escassos recursos econômicos, preconceito e racismo como aspectos dos determinantes sociais de saúde, que implicam na sua saúde mental das imigrantes, mas que referiram sentir-se acolhidas no Brasil. **Conclusão:** A partir dos determinantes sociais da saúde, apresentados pelas mulheres imigrantes haitianas no enfrentamento da pandemia mostrou-se relevante a articulação entre ações de promoção da saúde, com ênfase na competência cultural, de forma a estimular o empoderamento das pessoas.

Descritores: Emigração e Imigração; Determinantes Sociais da Saúde; COVID-19; Saúde da mulher; Enfermagem em Saúde Pública.

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INTRODUCTION

The current migratory process, justified by political, economic conflicts, and environmental disasters, reflects a complex world reality when we consider the financial and social impacts that the migrant contingent produces in countries and continents that become refugee routes⁽¹⁾. In the Brazilian context, the discussion on immigration has expanded when considering the new migration policy. This policy expanded the transfer of rights of immigrants by overcoming the anachronism of the status of foreigners, based on authoritarianism and restrictions that were based on the national security theory⁽²⁾.

This new scenario in Brazil contributed to immigration, especially in the expressiveness of Haitian immigrants, who have been traveling to the country after an agreement was signed with Haiti and granted them a humanitarian visa from 2012⁽³⁾. This population, victimized by a major earthquake in 2010, marked by poverty, and with catastrophic repercussions on politics and economics, have taken refuge in Brazil in search of better living conditions and consequent access to health, education, housing, and work⁽⁴⁾.

Nevertheless, the demands needed by Haitian immigrants who systematically enter Brazil require an analysis from the perspective of Social Determinants of Health (SDH), which are related to the conditions in which a person lives and works. Thus, considering that the health and illness process is determined by social, cultural, ethnic/racial, biological, environmental, psychological, and behavioral factors, they can influence the occurrence of health problems and risk factors in the population^(5,6).

In the migratory scenario, immigrant women unveil the nuances of the gender condition imposed by the cultural, economic, political, and social barriers of each country. Gender invisibility, even if subtly, points out that women are rarely perceived as protagonists in the migratory process. Thus, it is urgent to perceive them from their singularities, experiences, perspectives, and conceptions.

Studies that address gender issues in the migratory process are relevant in order to guarantee the rights of immigrant women, who are exposed daily to situations of vulnerability. These situations come both from the countries that they come from because of the stigmas that are rooted in their existence and the instabilities imposed by the countries that they have inserted themselves into⁽⁷⁾.

Currently, together with the problem of social adjustment overlapped with the migratory process of Haitians, especially women, in the Brazilian territory, we now have the situation of the COVID-19 pandemic. This situation, which involves the planet in a sphere of actions in order to overcome the global public health crisis, restricts humanity in its daily comings and goings^(7,8).

The measures to contain the increase in COVID-19 cases worsen the social and economic problems when verifying the unemployment behind it, in view of the financial shortage that takes place. In addition, Haitian immigrants experience the distance from their families and the absence of basic structures, such as access to health, housing, and work, which can contribute to aggravating the situation of vulnerability of this population.

In view of the above, the SDH are important points in the context of this public. When addressing SDH, this study aligns overlapping conditions by correlating Haitian immigration, pandemic, and women. Thus, it is interesting to know: what are the repercussions of COVID-19 in the context of the SDH of Haitian immigrant women? In this perspective, this study aimed to understand the repercussions of COVID-19 in the context of the SDH of Haitian immigrant women.

METHOD

This is a qualitative study, of the participatory action research type⁽⁹⁾, based on Paulo Freire's assumptions, through the Research Itinerary. It was developed in three, interconnected phases: thematic research; encoding and decoding; and critical unveiling⁽¹⁰⁾. The stages of the Research Itinerary are developed in the Culture Circle, which is permeated by dialogue and reflection, in a process of horizontal and participatory relations, mediated by a facilitator who problematizes the generating subjects. It is a space that provides opportunities for exchanges, lovingness, and the construction of knowledge, in which all participants become enriched and transformed^(11,12). Using the Snowball sampling method⁽¹³⁾, the research included eleven Haitian immigrant women, residing in different municipalities in the state of Santa Catarina, Brazil. First, three Haitian immigrants were contacted by phone, with the support of a religious institution that organizes social work. Subsequently, the three invited eight other immigrant friends to join the Culture Circle, who readily accepted and there were no refusals.

The inclusion criteria were Haitian immigrant women who had lived in Brazil for over a year, aged 18 years and over. The exclusion criteria were immigrant women who did not understand Portuguese and who did not have access to the Internet or electronic devices.

In the pandemic context, the Culture Circle had to be carried out virtually, emerging as an innovative practice. A tool was used with the support of electronic devices, which enabled the integration of all study participants in real time, even if geographically distant.

The Virtual Culture Circle (VCC) took place on June 7, 2020, lasting two hours, with a research nurse as mediator, who had experience in Freire's Research Itinerary. Other participants were not included in this meeting.

The VCC was recorded and a field diary was used to record the generating topics chosen for discussion.

In order to go through the Research Itinerary, in a single meeting, an analogy was made with the map of Brazil in order to enable a greater connection with Haitian immigrant women who currently reside in the Brazilian territory, based on something significant and concrete, as shown in Figure 1.

For the Thematic Investigation (Stage I), the VCC mediator presented the outline of the map of Brazil drawn on the floor of her residence, encouraging participants to reflect on their life in the country they chose to live. Thus, the women were invited to share their meanings in the experience of the pandemic situation, raising the question: how does the immigrant woman face the COVID-19

pandemic in Brazil? The women argued widely, in a space where they all listened and were listened. After reflections, the participants chose two generating subjects to discuss in the VCC.

In the Coding and Decoding (Stage II), the mediator divided the map of Brazil into two parts (North and South). In the northern region she wrote the first generating topic and in the southern region, she wrote the second topic elected for discussion. The women were encouraged to reflect on the generating subjects chosen for debate in the VCC, through two triggering questions: What are the challenges faced by immigrant, black, mother, and poor women against COVID-19 in Brazil? What are the repercussions of COVID-19 on the health of immigrant women in Brazil?



Source: elaboration from the Wikimedia Commons repository.

Figure 1. Paulo Freire's Research Itinerary: analogy with a map of Brazil. Chapecó, SC, Brazil, 2020.

The women wrote their perceptions on a sheet of paper, to the sound of the song “Maria, Maria”, composed by Milton Nascimento for approximately three minutes. Then, the study participants shared their perceptions, and while they shared their meanings, the mediator wrote in the North region of the map the reflections related to the first generating subject and in the South region of the map the sharing of the women related to the second subject.

To validate the records, the mediator read all the participants’ notes, seeking to encourage reflection again on the topics. This action-reflection-action process was intended to instigate the understanding of the immigrant women of their ability to face the challenges raised and share proposals that enable action after the awareness⁽¹²⁾.

For Stage III, the phase of Critical Unveiling, the immigrant women (re)gave meaning to the subjects of their experience in facing the pandemic in Brazil, in a process of raising awareness of their real situation, strengthening themselves, in search of strategies to transform their current reality and promote their health, based on the dialogues that emerged during the VCC. At the end, in which the two significant topics related to immigrant women and COVID-19 were unveiled, the mediator asked: what is the meaning of having participated in the VCC during the pandemic period? The women dialogued, providing a space to discuss the relevance of the virtual meeting.

The Critical Unveiling stage, traditionally called data analysis in Freire’s Research Itinerary, is an ongoing process and happens to all VCC participants. Based on careful reading, reflection, and interpretation of the two emerging subjects, arising from the dialogues produced in the VCC, we sought to articulate the data with the SDH of Haitian immigrant women in times of COVID-19 in Brazil. The subjects were transcribed and organized in digital folders with the information learned during the VCC experience.

The research followed the ethical precepts of Resolution 466 of 2012. The informed consent was sent via email to the participants, who signed and returned it to the researcher. To preserve anonymity, the study participants chose Brazilian states as their names. The study started only after approval by the Human Research Ethics Committee, with opinion number 3.324.430 and CAAE No. 11511419.1.0000.5564.

RESULTS

The eleven study participants were in Brazil between one and six years, aged between 20 and 29 years old, and ten of them were married, with children aged under six years. They lived in rented houses and all participants spoke Portuguese fluently. Before the pandemic, they worked in different sectors: two were university students, two hair stylist assistants, one hair stylist, four cleaning ladies, and two

worked in the refrigeration industry. However, with daycares closed because of COVID-19, seven of them had to leave their jobs in order to take care of their children at home, while two continued to work and left their children with a neighbor.

During the course of the VCC, two generating subjects were raised, as shown in Chart 1, which were encoded/decoded and unveiled by the group, being them:

- immigrant, black, and poor women: challenges in facing COVID-19;
- COVID-19 and the repercussions on the health of immigrant women in Brazil.

In the first topic, the participants debated that it is necessary to work to be able to provide for their home and also to send financial aid to the family members who stayed in Haiti. In view of the need for social distance in facing COVID-19, several economic challenges have arisen:

We need to work in order to survive here and help our family that stayed in Haiti. (Goiás).

I’m unemployed. I was fired because they didn’t let me take my two kids with me and they don’t have a day care. (Santa Catarina).

It was argued that men are more easily able to enter the labor market and have higher salaries compared to women:

Chart 1. Representation of the two generating subjects, which were codified and unveiled in the Virtual Culture Circle. Chapecó, SC, Brazil, 2020.

Immigrant, black, and poor women: challenges in facing COVID-19	COVID-19 and the repercussions on the health of immigrant women
Unemployment	Fear
Prejudice	Anxiety
Racism	Unpleasant news
Children without daycare and indoors	Worries
Men can get jobs more easily	Stress
Black women need to learn to fight	Crying
Few winter clothes	Lack of sleep
Lack of money	Support from Haitian friends
Modified plans	Support from Brazilians
Hard times	Health sector support
Work x Stay at home	Support from church

I had nowhere to leave my children, so my husband had to go to work because he earns more than me and men always find jobs easier than women. (Santa Catarina).

The women raised the situation that quarantine is challenging, given the need to work, thus demonstrating the social inequality:

Those who have a good and guaranteed job don't understand and they tell us to stay at home. But how can we stay inside our houses, if we need to work? (Paraná)

Prejudice and racism also emerged in the pandemic period, requiring the immigrant black women to fight for their rights:

At the beginning of the pandemic, masks were not mandatory. I was very sad because I went to the market and saw a family of white people entering without masks. I also went in and I was stopped. I felt humiliated because prejudice and racism was there. Why could white people go inside without masks and I couldn't? Because I am an immigrant, black, and poor woman. (Amazonas).

It is not easy being a black immigrant woman. There is prejudice everywhere. To make matters worse, we are also poor, we don't have beautiful winter clothes, so some people are sometimes cruel and forget that we are people and that we have feelings. The immigrant black woman has to fight for her rights. (Bahia).

The experience of the pandemic moment became a challenge because several plans had to be modified:

With this COVID, the whole world was in a panic and we had to modify our plans. My husband and I wanted to do so many things this year here and from the way things are, we will not be able to. (Mato Grosso).

The second subject, "COVID-19 and the repercussions on the health of immigrant women", revealed that the pandemic impacted the lives of the participants in the face of unpleasant news and scarce financial resources, which mainly affected their mental health, with fear, concerns, sadness, and insomnia. The need to stay at home had an impact on the health of immigrant women, generating anxiety, stress, and crying:

I am worried about the lack of money. (Amazonas).

A lot of people are dying, a lot of sad news, this scares us and makes me lose sleep. (Espírito Santo).

It's complicated having to stay at home, time doesn't flow, so we get anxious, stressed, and the tears come. (São Paulo).

The participants pointed out that they recognize Brazil as a good place to live and are grateful for the opportunities found in the country, which is revealed by the support from Brazilians, immigrant friends, the health sector, and the church in facing COVID-19:

I am happy and grateful for the help I have received from immigrant friends and also from Brazilian neighbors and the church, who saw our difficulties and came to help us. (Santa Catarina).

Despite everything, I still think it is better to live here in Brazil to face this disease, than there in Haiti. Here we have more health. (Piauí).

The women reflected on the relevance of their participation in the VCC and highlighted as contributions the opportunity for learning, hope, transformation, acceptance, reflection, and gratitude:

Together with you I learned a lot today and my hope's increased. (Rio Grande do Sul).

I feel different, transformed to continue life. (Santa Catarina).

I felt supported here with you. Our reflections were good. Thank you! (Minas Gerais).

DISCUSSION

Based on the perceptions of the Haitian women, challenges of the female and black immigration were identified, which highlight the SDH and the conditions involved in experiencing the pandemic. Although some women see how immigration can impact men and women differently, they are not always perceived in situations of inequality⁽¹⁴⁾. In view of the socio-cultural characteristics and the response of public policies in the country, it made sense that the participants valued leaving their jobs to dedicate themselves to the care of their children and family, without at any time highlighting the male participation in domestic activities. However, it is relevant to understand that the social and economic characteristics in which individuals live determine unequal living and working conditions, influencing lifestyle habits⁽¹⁵⁾ and culture, in which immigrant women sacrificed their individual projects in order to meet the needs of the family.

Wage inequality stands out as another challenge. Understanding this phenomenon includes the issue of gender power inequality and the reduction of the potential for women's autonomy, as well as factors related to financial issues⁽¹⁶⁾. The subordination of women is present in all social strata, notably among those in situations of social vulnerability.

Vulnerability to poverty is not limited to only income deprivation but also the dynamics of family life, access to public services, quality work, and adequate remuneration⁽¹⁷⁾.

In addition to being women and immigrants, they are also black, which raises ethnic/racial determinants of health, still rooted in society as racial prejudice and discrimination. Discrimination against black women brings disadvantages because of the myth of racial democracy, who do not have the same reception, respect, and acceptance as white women⁽¹⁸⁾. Prejudice involves issues related to attachment, by the preference for one group over another, while discrimination unfolds in behavior, triggering social inequalities⁽¹⁹⁾.

The vulnerabilities experienced by black immigrant women accumulate, as they are generally poor and assume underemployment with competitive disadvantages because of racism, cultural and linguistic adaptation, and access to information, with little knowledge of their rights in the Brazilian territory⁽²⁰⁾.

Faced with the need for social restraint because of COVID-19, the vulnerabilities of this public emerge as these individuals need to work to provide food and livelihood for their family and send financial aid to help relatives in Haiti⁽²¹⁾. Thus, many immigrants continue their work in order to survive in Brazil not being able to maintain social distancing. In this scenario, there is an urgent need to consider the social and economic aspects of this population, in addition to cultural issues, in order to guarantee their health, since these aspects directly affect the process of individual and collective illness in the pandemic.

The pandemic has imposed a drastic and sudden change in the habits and routines of the population. In view of the need for social restriction, as a measure used in public health to preserve physical well-being, we need to be concerned about the mental health of the persons subjected to this quarantine period⁽²²⁾. The pandemic context further exacerbated the vulnerabilities of immigrant women by interfering in psychological issues, which generates stress, frustration, anxiety, sadness, and crying⁽²³⁾. Furthermore, it includes the media with the accumulation of unpleasant news and “Fake News” that promote fear and insomnia, which affects health in its broader context⁽²²⁾.

Given the cultural and social distance, the barriers to seek help are more expressive: there is an interruption of the social and emotional bond, a lack of knowledge of the rights of women and immigrants, communication difficulties, and economic vulnerability and submission⁽¹³⁾, factors that can be reinforced by the pandemic. However, the participating women, despite the challenges, feel welcomed in Brazil. This social support and health services play a fundamental role, compensating the physical distance of the family with solidarity relations and reception networks⁽²⁴⁾.

In this study, it was evident that the Haitian women enjoyed participating in the VCC, feeling welcomed, with hope, transformed through mutual learning to experience

the challenges imposed by immigration in the context of COVID-19. Therefore, it is necessary to promote communication spaces in order to answer questions, welcome, and support individuals, especially the most vulnerable ones. In this sense, it is essential for the Haitian immigrant women to verbalize their life experiences, express their needs, and incite spheres of society in order to expand coping strategies and overcome their conditions of vulnerability⁽²⁵⁾.

Vulnerability is inserted in the lives of Haitian immigrants, making it necessary that nurses and other health professionals turn their eyes to the assistance to this public, considering the SDH in the health-disease process, because before being foreigners, they are women with rights, and the Brazilian Unified Health System (SUS) guarantees the principle of equity to all who reside in the country, regardless of whether they are Brazilian or foreign⁽²⁶⁾.

As a limitation of the study, we can highlight the need to carry out the Culture Circle virtually, which did not allow physical contact with the immigrant women, as it is assumed that greater contact between participants and mediator could deepen the debates in the VCC. However, at the same time as this limitation is evident, it is also understood that the VCC emerges as an innovative methodological option for nursing and health, which can be used to carry out studies and assist individuals and communities that are geographically distant.

CONCLUSION

The results of the study allowed us to understand the repercussions of COVID-19 in the context of the SDH of Haitian immigrant women. The lack of work was accentuated with COVID-19, but prejudice, hunger, lack of daycares, and scarce economic resources emerge as the main challenges, which are the SDH of the participants in this study. On the other hand, the feeling of being welcomed in the country prevails among the Haitian women.

The testimonies of the Haitian women expressed that situations of vulnerability are sometimes the result of the reaction of social groups in which individuals who are outside culturally acceptable standards pass through. Building and rebuilding are necessary movements in the process of living. However, economic inequalities, the feeling of disrespect, and the fear of the unknown can cause feelings that affect their construction as an individual and citizen, in addition to social inequities, especially in a pandemic moment.

In this sense, this debate is timely, based on this and other research on the subject, involving black immigrant women, adhering to health promotion actions, with an emphasis on cultural capability, in favor of the expansion of public policies in the sector to improve assistance to this population. This assessment must be analyzed from a multiple factor perspective, taking into account the SDH for the pursuit of health equity.

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