

No place to shelter: ethnography of the homeless population in the COVID-19 pandemic

Sem isolamento: etnografia de pessoas em situação de rua na pandemia de COVID-19

Sin aislamiento: etnografía de las personas sinhogar en la pandemia de COVID-19

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How to cite this article:

De Paula HC, Daher DV, Koopmans FF, Faria MGA, Lemos PFS, Moniz MA. No place to shelter: ethnography of the homeless population in the COVID-19 pandemic. Rev Bras Enferm. 2020;73(Suppl 2):e20200489. doi: <http://dx.doi.org/10.1590/0034-7167-2020-0489>

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EDITOR IN CHIEF: Dulce Barbosa
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Submission: 05-13-2020 **Approval:** 08-22-2020

ABSTRACT

Objective: to analyze how homeless people live, in times of COVID-19 pandemic, in the city of Rio de Janeiro. **Method:** an ethnographic research that used interviews and observations and articles published in newspapers and magazines of great circulation, using domain analysis. **Results:** the results tell how the COVID-19 pandemic emerged for the homeless population. Isolation led to emptying the streets and reducing passers-by, damaging their ways of living and their survival tactics. Hunger, thirst, absence of places for bathing and for fulfilling physiological needs became part of their daily lives. **Final considerations:** given the impossibility of having a place to shelter, acquiring food and water and the limitations in carrying out preventive measures, care actions offered by managers to limit the virus to spread, even in this population, are ineffective.

Descriptors: Homeless Persons; Pandemics; Cultural Anthropology; Public Health; Coronavirus Infections.

RESUMO

Objetivo: analisar o viver de pessoas em situação de rua, em tempos de pandemia da COVID-19, no município do Rio de Janeiro. **Método:** pesquisa etnográfica, com utilização de entrevistas e observações e matérias veiculadas em jornais e revistas de grande circulação, com uso de análise de domínio. **Resultados:** os resultados narram como a pandemia de COVID-19 surgiu para a população em situação de rua. O isolamento provocou o esvaziamento das ruas e a redução de transeuntes, prejudicando seus modos de viver e suas táticas de sobrevivência. A fome, a sede, a ausência de locais para o banho e para realização de necessidades fisiológicas passaram a fazer parte do seu cotidiano. **Considerações finais:** diante da impossibilidade de isolamento, da aquisição de alimentos e água e das limitações em realizar medidas preventivas, as ações de cuidado oferecidas pelos gestores para limitar a disseminação do vírus, ainda nessa população, são pouco eficazes.

Descritores: Pessoas em Situação de Rua; Pandemia; Antropologia Cultural; Saúde Pública; Infecções por Coronavírus.

RESUMEN

Objetivo: analizar la vida de las personas que viven en la calle, en tiempos de la pandemia COVID-19, en la ciudad de Río de Janeiro. **Método:** investigación etnográfica, utilizando entrevistas y observaciones y artículos publicados en periódicos y revistas de amplia circulación, utilizando análisis de dominio. **Resultados:** los resultados narran cómo surgió la pandemia de COVID-19 para personas sinhogar. El aislamiento provocó el vaciado de las calles y la reducción de transeúntes, dañando sus formas de vida y sus táticas de supervivencia. El hambre, la sed, la ausencia de lugares para bañarse y satisfacer necesidades fisiológicas se convirtieron en parte de su vida diaria. **Consideraciones finales:** dada la imposibilidad de aislamiento, la compra de alimentos y agua y las limitaciones para llevar a cabo las medidas preventivas, las acciones de atención que ofrecen los gestores para limitar la propagación del virus, incluso en esta población, no son muy efectivas.

Descriptor: Personas sin Hogar; Pandemia; Antropología Cultural; Salud Pública; Infecciones por Coronavírus.

INTRODUCTION

On March 11, 2020, the World Health Organization (WHO) characterized the worldwide outbreak of the disease caused by the new coronavirus (SARS-CoV-2), called COVID-19, as a pandemic⁽¹⁾. In this pandemic moment, this group that we call here “unsheltered” refers to the homeless population that experiences worsening of their living and health conditions.

Homeless people (HP) are a population group of great social vulnerability, heterogeneous, with characteristics related to extreme poverty, interrupted or weakened family ties, without regular conventional housing, which uses public places and/or degraded areas, either temporarily or permanently⁽²⁾.

This article was written simultaneously with onset of the COVID-19 pandemic. As the numbers of cases and deaths due to COVID-19 grew in Brazil, specifically in Rio de Janeiro, it was noticed that HP’s survival and struggle for subsistence became more difficult and brought new challenges.

The problem of living on the street is crossed daily by proliferation of diseases, violence, stress and hostility. Getting sick on the streets has its own characteristics in the health-disease process, being determined by spacing between meals, exposure to climate change and other factors⁽³⁾; however, at the same time, living on the streets depends on “opportunities” that the street itself brings, such as food and money.

Considering a significant increase in the number of suspected cases, the Ministry of Health requested social isolation for the main cities in Brazil. Thus, regarding the public health emergency, previously declared by the WHO, the state government of Rio de Janeiro expands measures to prohibit people circulation to try to face coronavirus. All decrees affect commerce in general, with prohibition of any event that allows people gathering, also impacting tourism and leisure, services in the education field, gyms, clubs and intercity and interstate transport⁽⁴⁾. Moreover, public health impacts against this virus are diverse, such as abrupt change in health services routines, intensifying the number of hospital admissions due to respiratory complications⁽⁵⁾.

In a country with huge social inequalities like Brazil, the public health service network is facing a pandemic for which it was not prepared. HP, which has historically had difficult access to health services, is further curtailed and may be a virus carrier and transmitter. The social invisibility experienced, until then, increases, worsening with the inoperability of public policies and difficulties in accessing health services⁽⁶⁾.

OBJECTIVE

To analyze how HP live, in times of COVID-19 pandemic, in the city of Rio de Janeiro.

METHODS

Ethical aspects

The data presented are from an excerpt from a doctoral project underway at *Universidade Federal Fluminense*, city of Niterói, in the state of Rio de Janeiro, which problematizes aspects related

to HP, health and disease. The research was in its fieldwork phase, conducting interviews and observations in March 2020, with HP, when the first cases of COVID-19 in the city of Rio de Janeiro appear. Thus, with the pandemic emergence, there was a need to redirect and analyze how this social group live and survive at this time.

In compliance with all ethical precepts that govern research with human beings, this project was approved by the Research Ethics Committee of *Universidade Federal Fluminense (Hospital Universitário Antônio Pedro/Medical School)*. Participants signed the Informed Consent Form; the research was explained to them; and their data confidentiality and safety was ensured, in accordance with the Resolution 466/2012 ethical and legal principles⁽⁷⁾.

Type of study

This is a qualitative research that used ethnography. The ethnographic method made it possible to make this clipping. Ethnography makes it possible to describe the world as people see, live, hear, speak, think and act in their different forms. Ethnography allows describing a culture, which may be that of a small tribal group, in an exotic land, or that of a class in a school in the suburbs, and the ethnographic researcher’s task is to understand the way of life from natives’ perspectives of the culture under study⁽⁸⁾. Based on this assumption, HP is understood to be a “native” of street culture.

Study design

To guide this article, Equator’s instrument named Standards for Reporting Qualitative Research (SRQR)⁽⁹⁾, which delimits a standard for qualitative research reports, was used.

Methodological procedures

Field diary and news from newspapers and magazines about homelessness and pandemic, in addition to a semi-structured interview script with a central question “how have you lived and survived in these days of pandemic and requested for social isolation” have been used as data collection tools.

Study setting

This study was carried out at the center of the Santa Cruz neighborhood, based in western Rio de Janeiro. As there was a previous approach with these agents, due to data collection from a doctoral thesis, it became possible to further strengthen the relationship and interact with participants.

Data source

This study included seven HP, who agreed to participate in all interviews, who lived on the street for at least one month and were over 18 years old. All interviews took place at the end of March and beginning of April 2020. Ethnographic observations’ annotations present in field diary and journalistic documents (reports) published in a newspaper (*O Globo*) and a large circulation magazine (*Veja*) and websites referring to HP and pandemic, in March and April 2020.

Data collection and organization

Fifteen hours of observation have been carried out, comprising one hour a day, for fifteen days, followed by notes and records in a field diary. Parallel to observations, interviews were conducted with HP. Interview saturation occurred as participants' answers were repeated.

All interviews were recorded, with an average time of one hour each, totaling seven hours. Then, all interviews were transcribed, and participants were identified with fictitious names such as Jonas, Francisco, Thomas, Felipe, Ronaldo, Evandro, and Joaldo, chosen at random to preserve their identities. Field diary notes served to complement the statements. With ethnography use, it was very opportune to use journalistic news to approach and debate the findings obtained in the field.

Data analysis

The results are presented in a narrative format, through analysis of domains for data reflection. This type of analysis aims to identify cultural domains, which are categories of cultural meanings⁽¹⁰⁾. This type of analysis enabled emergence of structural issues, which served to understand the cultural organization of HP's ways of living, which are presented with four structuring domains: *Characterization of time and street dwellers and survivors; Unveiling pandemic and reaching homelessness; Ways of living and street tactics to minimize hunger in times of pandemic; No water, no soap, no alcohol gel: what tactics do unsheltered people use?*

RESULTS

Characterization of time and street dwellers and survivors

The period was after Carnival in Rio de Janeiro; precisely, a few days had passed and return to classes at different levels of education was in process. The news in the main newspapers spoke of a flu epidemic, caused by a virus still unknown and originating in China, which was spreading to many countries, mainly Europeans.

O Globo, the news paper in circulation in Rio de Janeiro, reported on March 6 on its front page "Coronavírus: País chega a 8 casos, incluindo registros no RJ e ES" (freely translated as Coronavirus: The country reaches 8 cases, including in Rio de Janeiro and Espírito Santo)⁽¹¹⁾. At first, the configuration was a worldwide public health emergency that would quickly be classified as a pandemic by the WHO. Six days later, on March 12, the same newspaper highlighted as headline "OMS decreta pandemia mundial pelo Coronavírus e a limitação de recursos do SUS causa muita preocupação" (freely translated as The WHO declares coronavirus as a worldwide pandemic and limitations in SUS resources are a great concern)⁽¹²⁾.

In February and March 2020, the world began to monitor and be alarmed by scenes of refrigerated trucks with several bodies storing COVID-19 victims and many collective burials. Society was silenced by decrees, imposing social isolation. Thus, the COVID-19 pandemic arrived in Rio de Janeiro.

Walking towards work and during data collection of a thesis, a group of HP is observed, wandering in a void and a silence. Few passersby and almost deserted streets are characteristic of this moment. People around were looking scared and trying to

understand what was going on. Closed shops and newsstands and absence of street vendors became daily facts and aroused the feeling of fear and insecurity. Closed businesses show signs that unemployment would increase and, consequently, poverty.

A group of seven black HP participated in the research, with ages ranging from 25 to 44 years old. In one of the first dialogues, they said that the reasons related to living on the street were continuous family conflicts, unemployment, alcohol and other illegal drug use.

Unveiling pandemic and reaching homelessness

Such pandemic and horizontal social isolation decree arrive in Rio de Janeiro⁽⁴⁾. Home now represents security. Staying in home isolation or quarantine was the priority request of health managers to stop the virus to spread.

Thus, without choosing an education level, social and economic class, COVID-19 spreads and also reaches HP. But how to indicate isolation at home for street dwellers? Where would they stay if the street is their home? The street is part of the life and survival of this group. HP use the street to live on and live from. They started to represent the unsheltered.

HP seeks city centers to live because these spaces offer facilities, such as commercial areas or areas with a greater concentration of services, the large circulation of people and the few residences⁽¹³⁾.

It is possible to observe and verify, from statements, that all HP, now invisible due to their dispersion in the crowds, become more visible due to city emptying; thus, they stand out in the voids of the streets, squares and alleys. Despite the guidelines for avoiding agglomerations, individuals in this social group do not reach them and do not master strategies to implement these isolation guidelines. They continue to circulate in groups without understanding why the city is growing empty. When we met them on the street, we asked: do you know what is happening in the city and in the country? Did you hear about COVID-19? The, their answers were:

I saw all shops closing and reducing the number of people on the street, I found it strange. It was a bad feeling, I was afraid ... and I didn't know what was going on. (Jonas)

[...] I found it scary, things that I only saw on film, everything closing. I was scared by the situation [...] of radioactive disease, if a person dies, they have to burn the body. (Felipe)

Some said they discovered the "pandemic" through printed newspapers that were displayed on newsstands or through news media, when there were still open stores selling television sets:

I discovered this disease by reading newspapers at newsstands and watching TV in the store when stores were still open. (Francisco)

For the newspaper, with dissemination by the newspapers [...] but I think people took time to understand and to wear masks. (Ronaldo)

According to the press, the mayor of the city stated that the best strategy would be to compulsorily collect HP from streets. In an interview, the mayor said that as the epidemic worsened, the best would be removing HP from the city, directing them to

shelters, popular hotels and other institutions. He also said that the priority at the moment was purchase and distribution of hygiene kits; and, in one-to-one approaches, the risk that COVID-19 represents would be explained⁽¹⁴⁾. However, in our interviews and observations with HP, none of them said they knew about these strategies, they continued to wander the streets in search of food, begging for money and trying odd jobs.

At the same time that the municipal manager raises the issue of compulsory collection, a Bill 707/2020 is being processed in the Chamber of Deputies, which highlights that isolation for HP can only occur if they have symptoms and test positive for COVID-19. This project prohibits compulsory isolation of HP during epidemics and pandemics⁽¹⁵⁾. As days went by, proposals to try to shelter HP were arriving and one of them was a strategy of equipping the *Sambódromo*, one of the spaces destined to Rio de Janeiro's Carnival, as one of the possibilities of shelter⁽¹⁶⁾.

Ways of living and street tactics to minimize hunger in times of pandemic

How HP live and survive is directly connected with all tactics they acquire on the streets. Upon reaching the streets, people, unconsciously and subliminally, acquire habits peculiar to that group. This learning is present in all narratives.

HP use different tactics to acquire food. They are named with specific terms created on the street, such as *garimpos* (jobs they do on the street collecting recyclable materials, to sell and guarantee some money), *caravans* (donations through groups of ordinary people, religious institutions or local merchants), *mangueando* (the act of asking for money on the street) and *blessings* (donations with the meaning of salvation). Occasionally, they prepare their own food, burn cans, as they refer to cooking food on stoves and improvised pots in aluminum utensils that they collect:

We manage to eat, we dig for food; there are some brothers from the church who give us food, but when things get tough, we chip in and buy some things and cook them right here, we burn cans. (José)

Social isolation enactment and local commerce closure resulted in emptying streets and reducing passers-by; therefore, it resulting in cessation of donation and small jobs for street residents. They talk about days in a row without eating. Philanthropic institutions that work with donations also leave the streets and people's difficulties are exacerbated, as is present in Thomas's statement:

I'm hungry. It became very complicated to get anything to eat with this disease. Human beings to stay alive need many things, and it became difficult, very difficult. Food donation is gone... (Thomas)

Some reported that, at the beginning of the pandemic, obtaining food was so hard that their survival instinct led them search for food in dumps; even so, they found little food, since restaurants were also closed.

[...] I'll tell you something. At first, it was really bad, I was really, really hungry. There was no food for anyone here in the village.

I looked for food in the bins, but they were empty and I couldn't even get food in the trash, I suffered. (Tarso)

Hunger was also reported in newspaper and magazine headlines "*População de rua tem fome durante a pandemia*" (freely translated as Homeless people fear hunger during the COVID-19 pandemic)⁽¹⁷⁾. This report stamped the fear of street residents of not getting food due to closure of shops and restaurants, which they commonly provide lunchboxes. Reports also showed that some entities, such as NGOs and religious institutions that organize food distribution, suspended activities in order to rethink a safer strategy of making contact and delivery. In addition to the social isolation that made it difficult to obtain food, one of the interviewees reported that it was visible that many people were afraid of HP being the ones who transmitted the disease. Therefore, they started to be avoided them even more:

Once I approached a lady to ask for money to try to buy a lunchbox. She hurried away from me and ran from me. It seemed that she was afraid of getting a disease with my approach. I think they stopped bringing food to us for fear of transmitting coronavirus. (Joaldo)

At the same time that COVID-19 incidence grows in the city, the first deaths in Rio de Janeiro have emerged. The streets are even emptier and HP is even more stigmatized. An example of this movement was highlighted in *Folha UOL* newspaper, saying "*Epidemia da fome: falta grana para comida em meio a isolamento social no RJ*" (freely translated as The hunger epidemic: money for food is missing amidst social isolation in Rio de Janeiro)⁽¹⁸⁾. In addition to a possible lack of "money" as reported, fear of contagion clearly appears as another determining factor in reducing donations "*Panela do Bem substituiu a tradicional sopa servida aos moradores de rua por lanches, na tentativa de tornar mais fácil a distribuição e garantir a segurança de todos*" (freely translated as "*Panela do Bem*" replaces the traditional soup served for homeless people for sandwiches, in order to try making food distribution easier and assure everyone's safety)⁽¹⁸⁾.

Considering all news reported, HP, invisible at the beginning of pandemic, became visible. This population gained visibility, probably due to the fear of contagion they can bring. All statements were unanimous in pointing out that precarious conditions on the street increased due to the pandemic. In particular, getting food was complicated. When they report hunger, which affects the street population, donations start to return.

At the onset of the disease, getting food was very difficult, there was no one to donate food. When the newspapers started talking about the hunger that got worse for us, they started donating again. A friend said that a colleague of his saw on television that they were talking about it all the time on television. That's when people started looking at us. (Thiago)

Solidarity networks were resurfacing, when news about lack of food was being reported and, thus, slowly, voluntary distributions of food and snacks, donation of basic food baskets, water and hygiene products took over the scene. However, when there was no news, they disappeared.

No water, no soap, no alcohol gel: what tactics do unsheltered people use?

WHO and the Ministry of Health of Brazil reinforce the need for social isolation, with mask use, hand washing and gel alcohol use as general measures to prevent the virus to spread⁽¹⁹⁾.

In this context, what happens to HP? All statements reinforce our observations that hygiene devices do not exist or are limited on the streets. They all talk repeatedly about absence of a place to bathe and to fulfill their physiological needs. They emphasize an informal support network offered by merchants. They sometimes allow them using the bathroom. However, at this moment with all shops closed, this service, which can be understood as an instrument to rescue citizenship for HP, no longer exists. Bearing this in mind, hand and body hygiene as a health action is also impaired and was raised in the statements below:

[...]we already have difficulties to drink water, bathe and wash our hands. In those times it became much more difficult and few places are still open. We usually get water from the soda bottle to use, at least to drink. (Felipe)

Concerning equipment to protect themselves, such as masks and alcohol gel, all describe that they do not have these mechanisms for individual protection. They say that this is very far from them and point out the lack of water to clean their hands, generating a lot of fear:

People say they have to wear a mask to avoid getting this disease ... we don't have water and soap, nor clean clothes to change, imagine a mask, it's far from us. They also say that you have to use alcohol gel and wash hands a lot ... and do we have it on the street? No, it would be a dream. (Ronaldo)

The press also brings this issue with a headline saying "*Moradores de rua à margem da prevenção contra a COVID-19: Lavamos as mãos nas poças de água quando chove*" (freely translated as Homeless people in the margin of COVID-19 prevention: We wash our hands in puddles of water after it rains)⁽²⁰⁾. The report also points to absence of water, soap and alcohol gel for HP. At this time, there is an exacerbation of vulnerabilities to coronavirus. The statements above question:

[...] reports say to wash your hands, but where to wash? [...] wash how? Wash with what? We thank you that it rained and it's full of water, and we'll be able to wash our hands. (José)

The concern and fear of acquiring COVID-19 is very present and was narrated by several participants. Their fears are anchored in the fact that they do not have the means to protect themselves and, also, of the difficulties to access health services. They emphasize that Basic Health Units could help them by facilitating access to health care, but this is not the case. Everyone is afraid they might carry coronavirus:

We are concerned because homeless people are no longer in good health and we are no longer able to get health care. When we go to the Family Clinic, we are expelled from there and we leave sick,

as we arrived or worse. Imagine now with this disease... I heard a lady saying that everything is full and they can't get care. (Evandro)

DISCUSSION

In an exponential way, the COVID-19 pandemic is spreading worldwide as a frightening pathological and social event that is also terrifying to HP, weakening and stigmatizing them even more.

In his work, *Cidade Febril*, Sidney Chalhoub narrates the smallpox and yellow fever epidemics, which occurred in late 19th and early 20th centuries. Sidney Chalhoub takes as his starting point the city of Rio de Janeiro and demolition of tenements that existed in that period. When comparatively analyzing all actions taken by current managers before pandemic regarding HP management, he refers to the *Cabeça de Porco* episode, "the most famous tenement of Rio de Janeiro"⁽²¹⁾. For that time, the *Cabeça de Porco* destruction was a milestone in the eradication of Rio's tenements and, jointly, the fight against epidemics. This episode is impressive for its contemporaneity.

The *Cabeça de Porco* episode was marked by violent interventions of authorities in inhabitants' daily lives. This authoritarian attitude contributed a lot to the history of combat, surveillance and disease control, inhibiting the right to come and go by force⁽²¹⁾. The COVID epidemic episode of this 21st century is marked, at least in this beginning of a pandemic, by the way of compulsory isolation of HP, with the justification of trying to prevent this pandemic from advancing. This attitude is reminiscent of what happened in the past, as it is not possible to verify or analyze how to isolate, without contaminating, those who, by the very *modus operandi*, live without isolation.

The guidelines for social isolation in Rio de Janeiro brought up the many isolation difficulties for those who do not have a fixed place of residence, such as HP.

The ailments of this social group became more visible with the pandemic, forcing us to reflect on the need for a housing policy for vulnerable populations⁽²²⁾. Creating temporary shelters and shelters to accommodate the homeless will not solve the housing situation. This attitude only minimizes, but does not resolve. In a live held on April 20 by the Brazilian National Observatory on the Rights to Water and Sanitation (*Observatório Nacional dos Direitos a Água e ao Saneamento*), aiming at reflecting on the relationship between HP and COVID-19, a former homeless and now an activist for the rights of these people, Darcy Costa, declares "it is necessary to take advantage of the pandemic that is giving visibility to the issue surrounding HP to think about effective post-pandemic actions". The pandemic shed light on Brazil's serious housing issues. "What to do next?" asks Darcy Costa. But it also gives evidence of the urgent need for a public policy from the perspective of intersectorality, which can meet the demands and non-policies dispersed by each sector, such as health, social assistance and housing. He concludes, stressing that there is a need for unity around a post-pandemic policy for HP.

When they are announced specifically to HP, authoritarian attitudes of government officials determining isolation and new ways of acting, facing the habits of these people, for several moments, conceptualizing these guidelines as "new normal", underestimated the culture of this group, as well as problems are generated by social isolation. The current governmental actions that seek specific solutions refer to actions in past pandemics⁽²¹⁾,

in a disciplinary and punitive hygienist movement, such as those described by Michel Foucault in his work called *Discipline and Punish*⁽²³⁾. Managers' actions who are on the move are updated and reinforce stigma and social inequality. How to isolate those who have a culture of living together and in groups?

In past epidemics, the poor and most vulnerable classes did not come to be seen as "dangerous classes" just because they could offer problems for work organization and public order maintenance. These groups represented the figure of a possible transmitter, i.e., the concrete figure of contagion⁽²¹⁾, similar to what, in this pandemic, the street population seems to represent.

The pandemic is spreading, and with that, hunger has also started to follow even more the population living on the street. This fact is linked to scarcity of donations, which has now come into effect, added to closed commerce. HP said that food "disappeared" and hunger "prevails". The looks of yesteryear of disgust and indifference are gradually unveiled for a more supportive and compassionate look at these people. But why only now? Does the ghost of the fear of contagion return as it once did? Structural efforts by some local managers, some citizens and philanthropic organizations, each in its own way, seek to systematize actions of donations of food, hygiene material, water and alcohol, to try to reach them, in a more supportive way. However, they remain without isolation.

The press, mainly on news, highlights the culture of invisibility and the constituent elements in HP's daily lives. Hunger brings one of the most perverse faces of social exclusion, linking the street population and the pandemic.

Discredited in their identities, HP's morals and social values now have traits that once distanced them from society⁽²⁴⁾. Faced with the dilemmas they face with the COVID-19 pandemic, the formatting of their personalities imprinted on stigma and prejudice brings new reflections.

Universal rights such as water use and obtaining food are constant challenges for those who live and survive in public places; it should be a fundamental right guaranteed to everyone. However, these rights are sublimated and are now further exacerbated. Failure to recognize their rights puts this population in an increasingly vulnerable situation. As rights are interdependent and indivisible, the violation of one affects the other, generating inequities and harming health, which are important constitutional rights for human survival⁽²⁵⁾.

Good examples of care for HP can be seen in the UK. The dynamic there was to unite managers, health professionals and volunteers to work together, creating a system of places, to protect HP from the effects caused by COVID-19. HP are thus separated between symptomatic and non-symptomatic, with specific groups to monitor them, guaranteeing housing and health care. The attempt with this strategy is to reduce the risk of exposure, detect infection and separate those who need health care to preventively reduce fatalities⁽²⁶⁾. Reality is quite different in Brazil, where HP, without opportunities for work and income, with deficits in their health

status, with food habits and precarious housing facilities have been presenting serious problems⁽²⁷⁾. In yet another pandemic, HP in the city of Rio de Janeiro is experiencing a worsening of their situation, leaving a wound of social inequality and poverty on display.

Study limitations

A possible limitation is due to the fact that it was carried out in a single setting. Considering the pandemic's rapid occurrence and having an action project specifically in a location in Rio de Janeiro, it was not possible to expand the research to other neighborhoods in the city. However, it is understood that these are notes that reflect many other places that have HP, and can be generalized.

Contributions to nursing, health, and public policies

This study can contribute to nursing and health, especially in the face of HP care practices, according to their real health needs. It is believed to bring relevant contributions and collaborate in the delimitations of resolute proposals for public policies related to specificities of HP care and for COVID-19 control and prevention.

FINAL CONSIDERATIONS

The COVID-19 pandemic reveals even more the social ills experienced in HP's daily lives in Rio de Janeiro, until then naturalized and crystallized and, in general, covered by the cloak of invisibility. Their needs become urgent, as they have many factors predictive of COVID-19, as a result of their character of easy transmission, difficult control and high lethality.

If nothing is done immediately, this setting could generate a devastating event, perhaps without precedent, in the context of HP, since most are elderly people and with comorbidities.

Social isolation posed new challenges for the entire world population, but even greater for those without the possibility of isolation. Society through individual movements and philanthropy has tried to organize itself to tackle basic needs such as water and food supply. However, the immediate importance of implementing an intersectoral public policy that reaches them is underlined, with concrete and effective measures in these even more difficult days.

Based on the above, it is possible to understand that the ways of living and the local culture of a person who lives on the street in times of COVID-19 further enliven their instincts for survival and preservation of life, they scream for hunger and lack of water. There is a need to think of other modes of social isolation for people living on and from the street. Thus, they represent a major challenge to public health, invoking the ability to articulate between various sectors, such as health and social assistance and housing, which, jointly and significantly, can propose measures that cooperate to minimize the disease's impact on this population group.

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