



Pandemic and immigration: haitian families in facing COVID-19 in Brazil

Pandemia e imigração: famílias haitianas no enfrentamento da COVID-19 no Brasil
Pandemia e inmigración: familias haitianas en el enfrentamiento a la COVID-19 en Brasil

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ABSTRACT:

Objective: to understand the experience of coping and repercussions of COVID-19 from the perspective of Haitian immigrant families in Brazil. **Method:** qualitative, action-participant study, based on Paulo Freire's Research Itinerary, which has three phases: Thematic Research; Encoding and Decoding; Critical Unveiling. A Virtual Culture Circle was held in May 2020, with 10 families of Haitian immigrants residing in western Santa Catarina. **Results:** the participants discussed concerns generated in facing the pandemic: work and family subsistence in Brazil and Haiti; uncertainty of the future; risk of contamination and dying in Brazil; cancellation of children's classes; discouragement and loneliness. They revealed opportunities in experiencing the pandemic: help received; personal and family strength; rethinking life; trust in God and hope. **Conclusions and implications for practice:** Haitian immigrants are in a situation of social, economic and mental health vulnerability when facing COVID-19. The identification of this vulnerability considering social, economic and cultural factors is fundamental to the proposition of public policies and the adoption of effective strategies to face the situation. The Virtual Culture Circle expands possibilities for nursing, as it enables the interactions necessary for health promotion, even in the face of the pandemic.

Keywords: Emigration and Immigration; Social Determinants of Health; Pandemics; COVID-19; Public Health Nursing.

RESUMO

Objetivo: compreender a vivência do enfrentamento e repercussões da COVID-19 na perspectiva das famílias de imigrantes haitianos no Brasil. **Método:** estudo qualitativo, do tipo ação-participante, fundamentado no Itinerário de Pesquisa de Paulo Freire, que possui três fases: Investigação Temática; Codificação e Descodificação; Desvelamento Crítico. Foi realizado Círculo de Cultura Virtual em maio de 2020, com 10 famílias de imigrantes haitianos, residentes no oeste de Santa Catarina. **Resultados:** os participantes discutiram preocupações geradas no enfrentamento da pandemia: trabalho e subsistência da família no Brasil e no Haiti; incerteza do futuro; risco de contaminação e de morrer no Brasil; cancelamento das aulas dos filhos; desânimo e solidão. Desvelaram oportunidades na vivência da pandemia: ajuda recebida; força pessoal e familiar; repensar a vida; confiança em Deus e esperança. **Conclusões e implicações para a prática:** os imigrantes haitianos se encontram em situação de vulnerabilidade social, econômica e de saúde mental no enfrentamento da COVID-19. A identificação dessa vulnerabilidade, considerando fatores sociais, econômicos e culturais é fundamental à proposição de políticas públicas e adoção de estratégias efetivas de enfrentamento da situação. O Círculo de Cultura Virtual amplia possibilidades para a enfermagem, pois possibilita as interações necessárias à promoção da saúde, mesmo diante da pandemia.

Palavras-chave: Emigração e Imigração; Determinantes Sociais da Saúde; Pandemias; COVID-19; Enfermagem em Saúde Pública.

RESUMEN

Objetivo: comprender la experiencia de afrontamiento y las repercusiones de COVID-19 desde la perspectiva de las familias de inmigrantes haitianos en Brasil. **Método:** estudio cualitativo, de tipo acción-participante, basado en el Itinerario de Investigación de Paulo Freire, que tiene tres fases: Investigación temática; Codificación y decodificación; Revelación crítica. En mayo de 2020 se realizó un Círculo de Cultura Virtual, con 10 familias de inmigrantes haitianos que residen en el oeste de Santa Catarina. **Resultados:** los participantes discutieron las preocupaciones generadas al enfrentar la pandemia: el trabajo y la subsistencia familiar en Brasil y Haití; la incertidumbre del futuro; el riesgo de contaminación y muerte en Brasil; la cancelación de las clases infantiles; el desánimo y la soledad. Revelaron oportunidades en la experiencia de la pandemia: la ayuda recibida; fortaleza personal y familiar; el repensar la vida; la confianza en Dios y la esperanza. **Conclusiones e implicaciones para la práctica:** los inmigrantes haitianos se encuentran en una situación de vulnerabilidad social, económica y de salud mental en el enfrentamiento a la COVID-19. La identificación de esta vulnerabilidad, considerando los factores sociales, económicos y culturales es fundamental para la propuesta de políticas públicas y la adopción de estrategias efectivas para enfrentar la situación. El Círculo de Cultura Virtual amplía las posibilidades de la enfermería, ya que permite las interacciones necesarias para la promoción de la salud, incluso ante la pandemia.

Palabras Clave: Emigración e Inmigración; Los determinantes sociales de la salud; Pandemias; COVID-19; Enfermería en Salud Pública.

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Submitted on 06/26/2020.
Accepted on 09/02/2020.

DOI:<https://doi.org/10.1590/2177-9465-EAN-2020-0242>

INTRODUCTION

Integration among countries is the result of social, cultural, and economic public policies strategically decided for the development of nations.¹ In a cooperative and humanitarian manner, Brazil has adopted immigration policies for people seeking residence and work in the country. In the last 10 years, the emigration and immigration movement has intensified, and there has been the departure from the country of origin and arrival of Haitians in Brazil, especially after the earthquake that hit the capital Port-au-Prince in 2010. The natural event, which provoked an intense social and economic crisis in Haiti, drove many families to look for countries that offered them the prospect of better living conditions.

The search for Haitian immigrants in Brazil was fundamentally through labor relations and the possibilities of access to free public education and health services. In the case of health, the principles of equity, integrality, and universality of the Single Health System (SUS) are frequently pointed out by immigrants moving to the country.¹

Most Haitian immigrants are black and poor people who are underemployed and face competitive disadvantages due to racism, difficulties in cultural and linguistic adaptation, access to information, and little knowledge of their rights and duties.² Add to this concerns and feelings related to the estrangement of family members, since many have left children, spouses, parents, grandparents and others in precarious social and financial situations in their country of origin. It is also necessary to consider the adversities faced, such as theft, extortion, rape, aggression and abandonment in their migration routes to the destination country.³

Since their arrival in Brazil, Haitians have therefore been exposed to situations of social and health vulnerabilities and inequities.³ Despite this, they have found workspaces and family homes. From the point of view of the social determination of the health and illness process, working and living conditions directly influence the health of immigrants, which increases the importance of knowing these realities in order to carry out humanized and integral health care.

However, since the beginning of 2020, after the World Health Organization (WHO) determined the pandemic situation caused by the *Coronavirus Disease 2019* (COVID-19),⁴ the challenges of Haitian immigrants in Brazil have expanded. Brazil has adopted preventive strategies of hygiene and the obligation of social distance between people, to reduce the epidemic curve of transmissibility and, consequently, increase health protection.

Social distance is fundamental to control the proliferation of the pandemic, however, the greater permanence and coexistence among people in the homes can be traumatizing or harmonious, depending on the new relationships that are established in this process. Changes in the family context have been observed, such as the increase in cases of domestic violence; anxiety, boredom and irritability; the daily routines of unhealthy eating and sleeping; financial concerns, with studies and work; physical inactivity

and lack of knowledge about prevention measures; besides the possible confrontation of cases of the disease and family losses.⁵

Furthermore, the social and economic repercussions of the restrictions imposed by the pandemic bring about conflicts of various kinds among immigrants, at a time when the need for social detachment for the preservation of individual and family health is confronted with the need to maintain work activities, since it is a primary and fundamental condition for their food and subsistence. Work and income are central needs for Haitian families, most of whom arrive in Brazil without financial reserves, and also make remittances to supply family members who have stayed in Haiti.⁶

The vulnerability of the Haitian population and the possible consequences of their preventive behavior in face of the pandemic situation refer to the social responsibility of the Brazilian health system to consider the social and economic aspects of this population, in addition to cultural issues, in ensuring the prevention and maintenance of health, since they directly impact the process of individual and collective falling ill. In this context, the following question emerged: what is the experience of the confrontation and repercussions of COVID-19, from the perspective of Haitian immigrant families in Brazil?

Thus, the object of this study was a population constituted from its social, economic and cultural characteristics, which organizes itself and influences the conditions of the health and illness process of its group and the society where it is inserted. Such implications for the field of collective health are fundamental for the development of strategies and public policies, which may sustain the decision-making of health professionals and managers in a manner consistent with the reality experienced by Haitian immigrant families.

Based on the assumption that health practices in facing the pandemic must be deeply articulated with the social structures of the population, since “the social nature of the disease does not occur in the clinical case, but in the characteristic manner of getting sick and dying in human groups”;^{7:3} In addition to the consideration of the intense relationship between social production and its implications for people’s health, in the context of pandemics and Haitian immigration and vulnerability, and in response to the concerns caused, this study was justified in order to understand the experience of the confrontation and repercussions of COVID-19, from the perspective of Haitian immigrant families in Brazil.

METHOD

It is a qualitative study, of the research-action participant type, developed by means of the Culture Circle, based on the theoretical-methodological assumptions of Paulo Freire. The Freirean Research Itinerary comprises three dialectically interconnected phases: 1) Thematic Research: consists in surveying the generating themes extracted from the participants’ reality; 2) Codification and Decoding: there is contextualization and a critical and reflective look on the generating themes, taking knowledge of the lived world; 3) Critical Unveiling: becoming aware

of reality starting from the transformation of the lived situation in Circles of Culture.^{8,9}

The Circle of Culture, conceived by Paulo Freire as a moment of dialogue and reflection, is a space that provides opportunities for exchange, love and the construction of diverse knowledge, and through action-reflection-action, everyone is enriched and transformed, because the limit situations and analysis of the reality of life are revealed, to decode and unveil it.¹⁰ The Circle of Culture is developed by a group of people with the objective of discussing common themes, in a process of horizontal and participative relationships, mediated by a facilitator who problematizes the themes that emerge, with the intention of instigating collective knowledge.⁸

In this study, the Circle of Culture was a virtual, innovative and necessary practice due to the quarantine situation imposed by COVID-19. For this, the free Zoom® application was used by means of a cell phone or computer camera, which allowed the interactive and simultaneous participation of the participants, even though each one was in his residence.

Ten families of Haitian immigrants, living in the western region of Santa Catarina, Brazil, participated in the study. As inclusion criteria, Haitian immigrants who had family in Brazil and had been living in the country for over a year were considered. The exclusion criteria were the immigrant families who did not understand Portuguese and without access to the internet and electronic devices (computer or cell phone) at the time of the Virtual Culture Circle (CCV).

The families were contacted with the support of a social work developed in an evangelical church in Santa Catarina, which

helps immigrants through orientations about their rights in Brazil and the teaching of Portuguese classes. Initially, a message was sent, via *WhatsApp*, to representatives of the 10 participating families, in order to explain the details of the research, as well as to schedule a better day and time for the CCV. At the time, each family was asked to provide a blank sheet of paper and pen.

It should be noted that, prior to the pandemic situation, a matrix survey with Haitian immigrants was already under development, in which three Circles of Culture were held, when a dialogue was held on the knowledge and cultural doings of this public to promote health. From OVID-19, the researchers continued the study to dialogue in a CCV about the confrontation and repercussions of the pandemic, considering such cultural knowledge and doings.

The CCV took place on May 6th, 2020, and lasted two hours and was mediated by a nurse doctor with experience in conducting Culture Circles. To do so, it was decided to go through the stages of Paulo Freire's Research Itinerary, through an analogy with the map of Haiti, with the intention of establishing a greater connection with the participants of the study, based on symbolic and valuable content for them, as illustrated in Figure 1.

In the Thematic Research phase, the CCV mediator presented the globe in order to instigate dialogue, emphasizing that she needed to locate Haiti. With each other's support, seeking dialogue and interaction with families, the country was located on the world map. Those involved were then invited to analyze their perceptions of the current situation of public health in Brazil, through the following question: how are you facing the COVID-19 pandemic? After broad dialogue and reflection, the

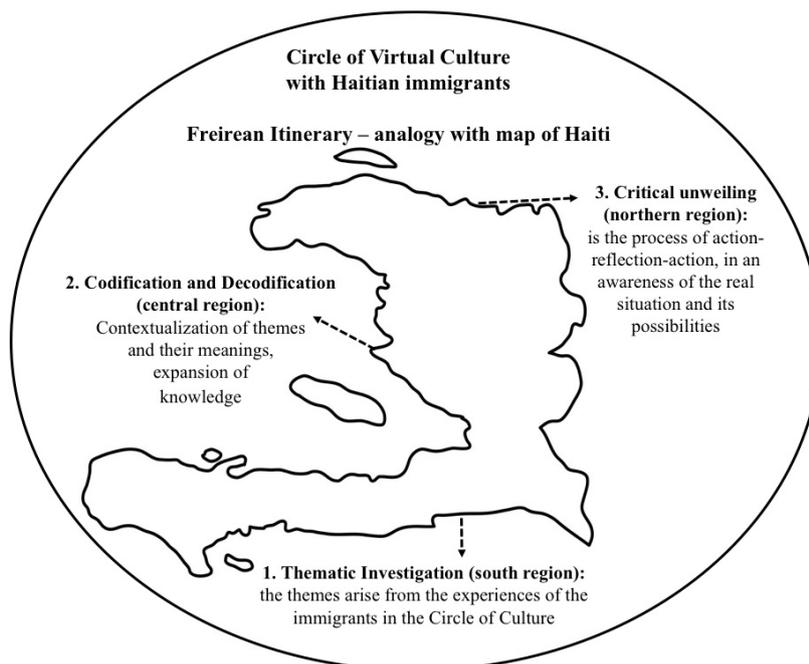


Figure 1. Paulo Freire's Research Itinerary: analogy with the Haiti map
Source: elaborated by the authors

participants elected two generating themes (TG): 1) Concerns in facing COVID-19. 2) Blossoming opportunities in the crisis.

For the Codification and Decoding stage, the CCV mediator presented the map of Haiti, drawn on a cardboard and fixed on the floor of her residence, having it divided into two parts (south and north) and contextualizing that for all the participants Haiti was awakening diverse meanings. Then, the families reflected on the TG elected by the group, through the guiding questions: what are the concerns in the confrontation of COVID-19? What opportunities did COVID-19 generate? The families described on a sheet of paper, on one hand, the perceptions concerning the confrontation of COVID-19 and on the other, the opportunities generated by the crisis, while the mediator sang the song "Tocando em Frente" ("Carrying on"), composed by Almir Sater, which aroused feelings and emotions.

Then, a representative of each family shared their perceptions and, from the dialogue, meanings emerged that expressed the situation experienced at the time. While the families shared their experiences, the mediator wrote: in the northern region of the map of Haiti, the reflections on the first TG, in the southern region she recorded the second TG. Later, these notes were presented for validation with the participants, while the mediator sought to encourage reflection again on the TG to seal the action-reflection-action process, instilling in them an understanding of their capacity to face the challenges raised and to share proposals that provide an opportunity for action in the face of thinking.⁸

In the Critical Unveiling phase of the Freirean Itinerary, families (re)meant the themes about their experience of immigration and pandemic, becoming aware of their situation, strengthening each other, in search of strategies to transform their reality and promote their health. The analysis of the themes was concomitant to the development of the CCV, according to Paulo Freire's Itinerary. In addition, the mediator asked the families about the meaning of having participated in the CCV, in the middle of the pandemic, and launched the following question: what was it like to have participated in this virtual meeting during the pandemic? The families discussed about the relevance of the virtual meeting for their lives.

Regarding the ethical aspects, at the beginning of the CCV, the Term of Free and Informed Consent was read and explained, and the families verbally authorized its integration into the study. To ensure anonymity and confidentiality, the participants chose names of districts in Haiti to be identified in the study, being exactly ten families and ten districts: Artibonita, Centro (Center), Grande Enseada (Great Cove), Nippes, Norte (North), Northeast, West, Southeast and South. The research was approved by the Research Ethics Committee of a public university in southern Brazil, opinion no. 3,324,430, Certificate of Ethics Presentation: 11511419,1,0000,5564, on May 14, 2019.

RESULTS

The 10 Haitian families participating in the study are in Brazil between two and six years old, consisting of the couple

(10 men and 10 women) and children under six years old. Men have a better command of the Portuguese language, while women demonstrate an understanding of the language, but have difficulties in dialogue. The families live in rented houses and four of them share the same residence with other families, as a way to reduce monthly expenses.

The men are between 20 and 34 years old and work mainly in freezing companies, being three university students. The women work informally on the commercialization of homemade food, on beauty parlors, as well as on companies of the frigorific branch. As a result of the pandemic and the cancellation of their children's classes, the women remain at home without being able to work, which reduces family income.

Thematic Research was guided by dialogicity, with TG being discussed and the ideas of the participants shared in the CCV. Thus, the meeting became a dynamic learning space that allowed for critical reflection on situations of existence, enabling dialogue between families on the experiences of social restriction imposed by COVID-19 and concerns with economic aspects that influence daily life.

For the development of Codification and Decoding, in order to seek the meanings and expand knowledge about the two TG, each family discussed the concerns generated in confronting the pandemic (TG1), as shown in Figure 2, which symbolically depicts the map with Haiti's northern region and the meanings assigned by Haitian families. The concerns of the families were summarized as follows: work and subsistence of the family in Brazil and Haiti; uncertainty of the future; risk of contamination and of dying in Brazil; cancellation of children's classes; discouragement and loneliness.

The participants also reflected on the opportunities that the experience of the pandemic has given rise to (TG2) and, together, highlighted new paths that were opened during the crisis (Figure 3). During the dialogues, the meanings were critically revealed. Mutual support was evident in the sharing of experiences, in which families empowered each other, in a process of becoming aware of the real situation, as well as visualizing more hopeful paths in the horizon of life, transforming each other, reaching the Critical Unveiling, the last stage of the Freirean Itinerary. Thus, the opportunities manifested as a result of the pandemic were grouped in: help received from others (friends of the church, neighbors); perception of personal and family strength; opportunity to stop and rethink life; trust in God and hope.

Finally, the families reflected on the importance of participation in the CCV and highlighted as main contributions: the clarification of doubts about the pandemic and especially, the space to promote mental health. They emphasized that the CCV provided an exchange of experiences at an important moment in their lives, when they felt isolated and discouraged, also offering an opportunity to alleviate the lack of family members in Haiti. The participants reported that the CCV, with the approach of the map of Haiti, transmitted the feeling of welcome and appreciation of their origins (Figure 4).

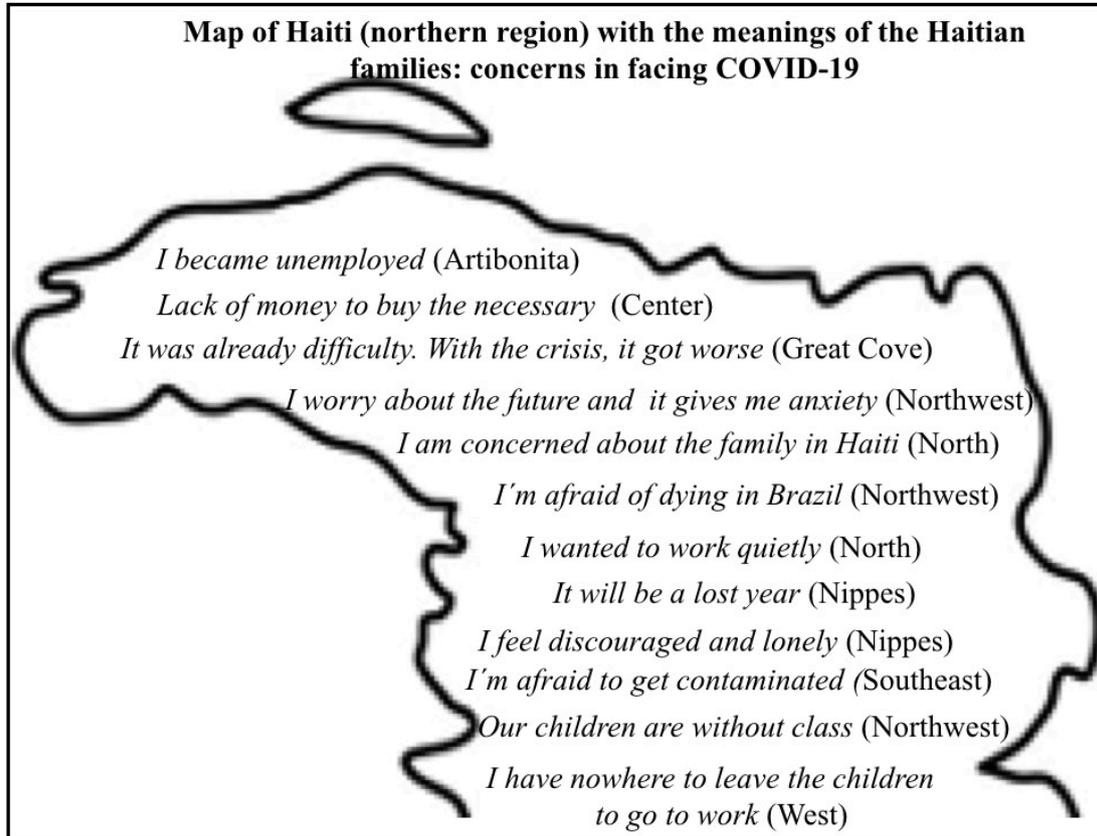


Figure 2. Meanings of Haitian families: concerns in facing COVID-19

Source: own elaboration, from the Haitian families' statements

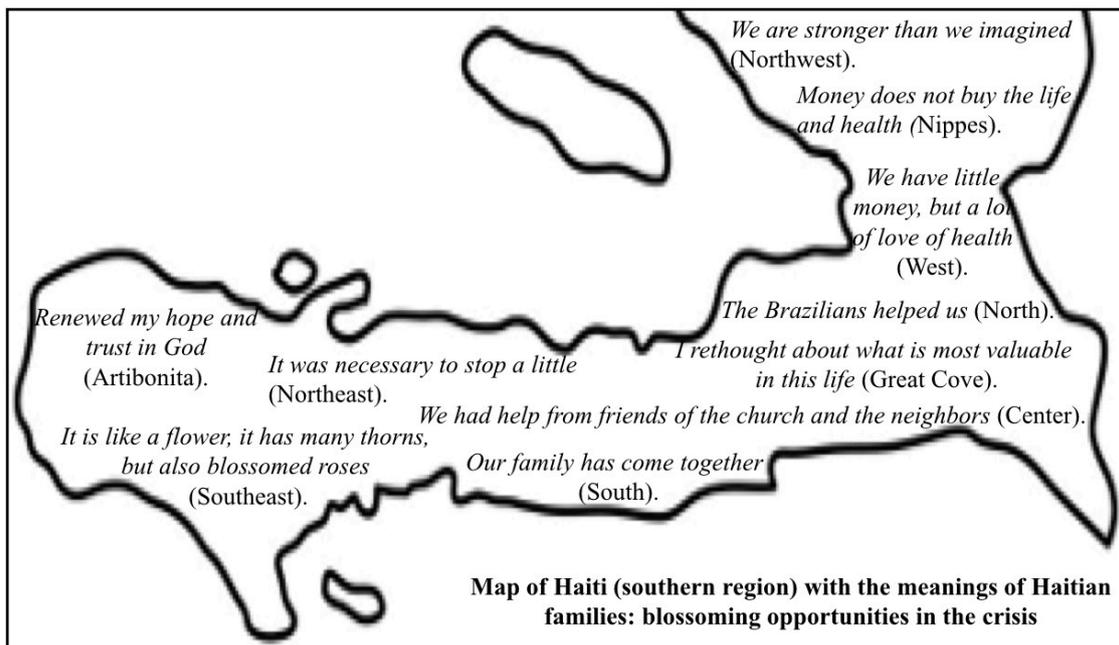


Figure 3. Meanings of Haitian families: blossoming opportunities in the crisis

Source: own elaboration, based on Haitian families' statements

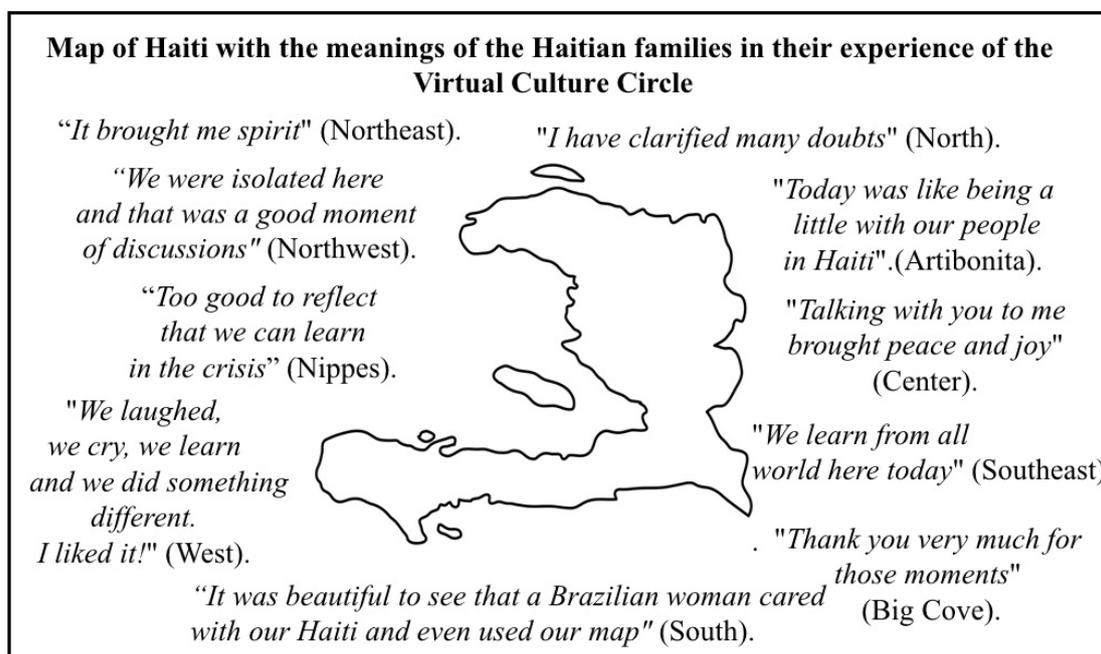


Figure 4. Meanings of Haitian families in the experience of the CCV

Source: own elaboration, based on Haitian families' statements

DISCUSSION

Immigrants are particularly vulnerable to a diversity of Social Determinants of Health (SDH), which can be defined as factors that influence, affect and/or determine people's health.¹¹ Vulnerability involves two aspects: individual, which refers to the degree and quality of information of individuals about the health-disease process; collective, which involves access to resources such as media, schooling and materials; and programmatic, related to the understanding of policies and institutions.¹² It can be affirmed that Haitian immigrants, in the experience of a pandemic, are inserted in the three planes, being, therefore, an extremely vulnerable public and, as such, should be considered in health care.

The term vulnerability has evolved over time, transcending the biological aspect and individual behavior. Thus, economic, social and cultural factors were considered in health studies as determinants of susceptibility, risk of contagion and development of diseases, since it is urgent to assist individuals in an integral manner.¹³

CCV participants shared the meanings attributed to the concerns in the confrontation of COVID-19, which are intertwined with conditioning factors and determinants of the health and disease process, reaffirming its social determination and the need for intervention and intersectoral confrontation measures. Following the example of the Brazilian residents, the experience of the Haitian immigrant involves subsistence and work issues as a right to citizenship.

In view of the restrictions imposed by the OVID-19 pandemic related to the living and working conditions of individuals, there

is a warning that the economic situation of Haitian families is worsening, which is fundamental to their subsistence, since, in addition to the need to provide for themselves, it contributes to the maintenance of family members in the country of origin.^{6,14,15}

To minimize the economic damage caused by the pandemic to the family budget, the Brazilian Ministry of Economy has established measures aimed at addressing situations listed as emergencies. For this discussion, which covers the situation of immigrants, the economic protection of the most vulnerable population and the survival of businesses and maintenance of employment are highlighted. Likewise, social protection measures are directed especially to the informal market, which represents 40% of the employed, unemployed, and self-employed labor force, providing financial assistance to this population, as well as expanding the number of families benefited by the "Bolsa Família" program.¹⁶

In addition, as a measure to safeguard employment and to reduce maintenance costs during the period of falling corporate revenues, the payroll financing program was created, in which the possibilities of teleworking, remote and distance working were regulated, in addition to permission to anticipate collective vacations, holidays and compensation for working hours through a bank of hours.¹⁶ In this sense, considering that immigrants, in some proportion, experience informality and unemployment, these measures may eventually serve a large part of this population in Brazil.

In the middle of the scenario of numerous government calls to equalize this dense situation, it is possible that immigrant families will be served according to their position of greatest vulnerability,

benefiting from the proposed measures. However, regarding this population, there is the expectation of differentiated attention, not only to respond to an economic need, but also to promote educational activities, since they lack information regarding the announced prevention measures.

It is important to emphasize that, in the face of the financial restriction in which the participants live, now aggravated by the pandemic, the division of residential rent among several immigrant families is a reality. Moreover, the culture of commitment to helping others through empathy is predominant, presenting a spirit of strong community conception.⁶ However, there is an important factor to be analyzed between *de facto* solidarity and submission or subordination, given the absence of minimum living conditions and survival. Still, in the face of social distancing as a measure to prevent the advancement of the pandemic, the accumulation of people living in the same place may have an effect contrary to that intended by the measure.

In view of the above, the need for attention from health professionals, especially primary care, in order to promote educational activities aimed at the reality of immigrants, encouraging them to take precautionary measures for the individual and collective welfare, is evident. The characteristics of transmission of the virus causing COVID-19 (SARS-CoV-2) among humans, including asymptomatic, as well as its high speed of propagation,¹⁷ aggravate the risk to which families participating in the study are exposed.

It is estimated that children develop milder clinical pictures of the disease, making it a problem from an epidemiological point of view, as they can be important reservoirs and sources of infection,¹⁸ as in the case of families participating in the study who live with their children and, in some cases, with more than one family in the same home. This situation poses challenges for epidemiological surveillance and public policy programs, order to reduce inequalities of access to health and conditions for the development of self-care²⁰

In addition, the participants reported sensations of an abstract nature, such as loneliness and discouragement, permeated by the fear of becoming contaminated with the virus, getting sick and dying. Added to this is the peculiarity of living family relationships that transcend borders in transnational families.^{15,19,20} Transnational families are families whose members live partly or most of the time apart, but remain together because they create a sense of collective well-being and unity, even when they cross the borders of their countries.²¹ In them, relationships are established in a distinct spatiality, with the mark of the migratory experience.²²

As for the fear of contamination, illness and death by COVID-19 reported by Haitian immigrants, studies on the mental health implications of the pandemic are still recent. A study conducted in China²³ on the mental health implications of facing COVID-19 revealed that 75.2% of the participants reported fear of contracting the disease or of their relatives to contract it, corroborating the discussions of families during the dialogue at the CCV. Furthermore, anxiety and depression (16 to 28%) and self-reported stress (8%) were psychological reactions identified in a literature review study as common to the COVID-19 pandemic.²⁴

It is a fact that the scenario of uncertainties facing the rapid spread of the SARS-CoV-2 virus across all continents, plus the lack of information on how to control the disease, and the difficulty in determining the duration of the pandemic and its repercussions can trigger problems for the mental health of the population,²⁵ which can be more aggravating for immigrants because it is a population, as said, vulnerable to various DSS.

Moreover, the isolation caused by the experiences of emigration and immigration and the consequent lack of friendships in the different areas frequented²⁶ can be exacerbated in the confrontation of pandemics due to the need for social distancing, which has affected the mental health of the entire world society. However, social detachment is fundamental and must be constantly assessed, because if it is suspended before the appropriate time, it may lead to an increase in cases of infection.¹⁷

The approach and consideration of the psychosocial dimension of the migration process are of relevance for advances, in order to ensure better living conditions and health for immigrants. In this sense, in face of the growing migration phenomenon, efforts are emerging to reformulate legal strategies and public policies to improve the quality of life, health, access to services and respect for rights, with an integral focus on the process of cultural adaptation and the psychological, family and social experiences of migrants,²⁷ especially in the current crisis situation and confronting the implications of COVID-19.

In the migration process, many are the difficulties encountered, such as the new language, absence and family breakdown, prejudice, discrimination, exhaustion caused by work, difficulty in establishing meaningful social ties with Brazilians, living conditions, among other factors.¹⁴ Hence the greater need for support to immigrants, since they are geographically distant from their families of origin and generally with few friends in Brazil. Thus, the understanding of psychosocial and political elements that highlight and discuss these problems from an interprofessional health perspective is defended. Welcoming the multiple expressions of suffering, in symbolic spaces that make it possible for immigrants to place themselves more actively in search of their healthy lives, is a fundamental condition for their mental health, especially in times of pandemic.

The passage from a poem, written by the immigrant Moises Antônio, who lives in Brazil, says the following:

I am an immigrant from there. On the other side of the ocean. Forced to leave the country. Yes, the country of origin.... I have no land. Everything is land. I wish there were no borders! Geographical divisions.... I'm resistant, with strength to live, longing to live. I am resilient like an African Lion. I just want to live life... because the land is ours, all of us. It doesn't matter whether here or there!

Like the immigrant poet, the participants demonstrated their resistance and strength to live, even after notes on the difficulties / concerns brought or sharpened by the pandemic, by unveiling opportunities arising from expanding relations with society. In

turn, friends, neighbors and the churches, as highlighted by the participants, play a key role, compensating for the physical distance of the family with solidarity relationships and important support networks in adverse living conditions, as is the case of the confrontation of COVID-19.^{2,15,19}

The crisis resulting from the pandemic created the opportunity to stop and rethink life. This being with oneself and one's family, even in a situation imposed by quarantine, seems to have caused personal/family evaluation and awakened the perception of the strength of each and every one, not only in facing COVID-19, but in other sectors of daily life lived as an immigrant. At the same time, the concerns they have, together with their encounter with themselves, their family and others who are in solidarity with them, contribute to renewing trust in God and hope. It is essential that vulnerable populations, such as Haitian immigrants, have the opportunity to verbalize their life experiences, manifest their needs, and instigate strategies to confront and overcome their living conditions.²⁸

The crisis established in the areas of public health, social and economic, resulting from the pandemic has motivated reflection in the CCV. In dialogue mediated by a nurse, the families expressed themselves about their atypical life, clarified doubts, supported each other and realized in themselves and in the development of their faith and religiosity, elements that allow them to face difficulties.

The immigration process is capable of compromising the well-being of the individual; however, all people are capable of seeking resources in themselves and in the environment that surrounds them, in order to overcome challenges, especially relying on protective elements such as the support network and religiosity, which relieve anguish and nourish hope.²⁹

When unveiling the meanings of Haitian families in terms of the unfolding of opportunities in the crisis, hope is symbolized as an emblem of overcoming. In addition, they comforted themselves with the solidarity intrinsic to the context of crisis, as well as with the help of Brazilians. Thus, the participants perceived their inner strengths and the expression of love and respect for life, in a moment of such singularity.

CONCLUSIONS AND IMPLICATIONS FOR PRACTICE

This study revealed that Haitian immigrants are in a situation of extreme social, economic and mental health vulnerability in the confrontation of COVID-19, demanding special attention from nursing and other health professionals in order to preserve the intrinsic rights of the citizen in Brazilian territory.

Facing the challenge of promoting and maintaining the health of individuals and collectives, in times of COVID-19 pandemic, the identification of vulnerability situation from the consideration of social, economic and cultural factors is fundamental for the proposition of public policies and adoption of effective strategies to face the problem, this being an important field of nursing in public health.

As a limitation of the study, the need to carry out the Circle of Culture is cited, in a virtual way, because there are no conditions to add other families without access to the Internet. But, at the same time that this limitation is recognized, which is inherent to the pandemic moment, it is understood that this innovative virtual methodological option can be used in the area of nursing in public health for the accomplishment of other studies in Brazil and in the rest of the world, for fluidity of qualitative research, even before the social restriction.

The study, through the CCV, made possible a space for exchanges and experiences, even in a remote way, which allowed the sharing of feelings and anxieties in this pandemic moment. Therefore, in face of the need for social restriction, as a preventive measure of COVID-19, it is recommended the realization of CCV for vulnerable populations, who lack spaces to dialogue about how to face this crisis, in search of quality of life, evidencing the relevance in using the research-action participant in nursing, which allowed the articulation between interests of researchers and intervention in the study population. It is recommended, still, the continuity of research that pay attention to the impact of the pandemic in the migratory experience and of other publics in situation of vulnerability.

FUNDING

Coordination for the Improvement of Higher-Level People (CAPES). National Post-Doctoral Program fellowship granted to Jeane Barros de Souza, Process no. 88887.357993/2019-00.

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Study design. Jeane Barros de Souza. Ivonete Terezinha Schülter Buss Heidemann

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ASSOCIATE EDITOR

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