

# BRAZIL OPERATION

## COVID-19 RESPONSE

MARCH-APRIL 2020



UNHCR staff registers Venezuelan family reallocated from an informal settlement to a shelter in Boa Vista, Roraima. Photo: UNHCR/Allana Ferreira.

### OPERATIONAL CONTEXT

As of 30 April, Brazil had recorded 85,380 confirmed cases and 5,901 deaths from COVID-19, with the largest affects felt in Sao Paulo, Rio de Janeiro, Ceara, Pernambuco and Amazonas. State and municipal authorities have adopted varied approaches to containment measures; however, freedom of movement has generally been maintained throughout the country. The Federal government restricted the entry of foreigners across all land borders including Venezuela. Local health systems throughout the country are struggling to prepare and respond to the crisis, while the economic impacts of varying restrictive measures are resulting in increasing loss of livelihoods and lack of access to basic needs, both for Venezuelans and host communities.

The health systems in the Northern states of Manaus and Para are particularly critical, with local authorities in both states declaring a collapse of public health and funeral systems. For indigenous populations, poor WASH conditions and lack of access to health services has caused this population to suffer from increased negative outcomes, including a high incidence of preventable and treatable diseases including recurrent infections, tuberculosis, pneumonia and other respiratory diseases. Fifty-seven deaths have been registered among the Warao population in Brazil from 2017 to present, including 11 deaths in 2020 alone, many infants and young children and a large proportion in the state of Para.

However, Venezuelan refugees and migrants already in Brazil maintain access to public health services, among other public services and benefits, including an Emergency Basic Income programme that has been put in place for informal workers affected by the COVID-19 pandemic. In addition, the government of Brazil has maintained a strong response for Venezuelan refugees and migrants, under the framework of *Operação Acolhida*, the Brazilian Federal Government's response for Venezuelans that supports access to documentation, basic needs for the most vulnerable and integration through the voluntary internal relocation programme (*interiorização*).

The Operacao Acolhida response has adapted its installations and delivery of services, in coordination with UN Agencies and Civil Society, to continue responding for Venezuelans in the context of COVID-19. *Operacao Acolhida* has developed a contingency plan in partnership with R4V and in consultation with the State and Municipal authorities in Roraima and Amazonas. Among other actions, this plan includes the establishment of a field hospital in Boa Vista (Area of Protection and Care – APC) for the isolation and treatment of suspected and confirmed cases, with a capacity to host up to 2,200 Venezuelans and host community members in addition to the establishment of an isolation area in Manaus. While the response is well structured, critical gaps in the provision of hygiene, sanitation, health and basic needs remain.

## KEY RISKS AND GAPS

**Community transmission:** Hundreds of Venezuelan refugees and migrants are living in informal settlements in dire situations, exposed to increased transmission risks because of inadequate WASH conditions. Moreover, refugees and migrants lack reliable information on COVID-19, its transmission, symptoms and effective ways to reduce exposure.

**Collapse in health systems:** The health systems in the Northern states of Amazonas and Para are particularly critical, with local authorities in both states declaring a collapse of public health and funeral systems. The states of Rio de Janeiro and Sao Paulo are also facing challenges in the capacity of the health systems to respond.

**Socio-economic impact:** Due to social distancing and isolation measures, many Venezuelan refugees and migrants have had to stop their economic activities and lost their income source.

**Sex and gender-based violence (SGBV):** The prolonged and intense coexistence caused by social isolation, coupled with loss of livelihoods, can generate situations of restlessness, discomfort and increased stress, and consequently increases the incidences of gender-based violence for girls and women.

## UNHCR RESPONSE

### Reinforcing local health responses



**Area of Protection and Care (APC):** UNHCR supported the establishment of the APC in Roraima with technical support for site planning as well as the provision of 250 Refugee Housing Units, 2 drinking fountains and over 2,000 mattresses, mattress covers and bedframes. Once fully operational the space will have capacity to support 1,200 refugees, migrants and host community members to access medical care in the clinical area of the site, while an additional 1,000 vulnerable people will have access to protection and medical screening in the protection area. UNHCR will continue to provide life-saving protection support for our persons of concern hosted in the site, including psycho-social support, while also reinforcing the Armed Forces Medical team with a pharmacist.

**Isolation Spaces:** Additional facilities are being established in the city of Manaus, where 150 refugees and migrants can be isolated, adapting the existing Documentation and Interiorization Centre (PITrig) with 20 RHUs, 100 bed frames and 200 mattresses and mattress covers provided by UNHCR.

UNHCR is supporting measures to isolate suspected cases amongst indigenous populations in Manaus and Belem. Following UNHCR advocacy and with our support, the Municipality of Belem committed to provide for appropriate isolation of cases of COVID-19 among the indigenous population in the city. Following this commitment, the Municipality relocated 130 indigenous Venezuelan Warao from overcrowded and inadequate private housing, where they were facing eviction, to a temporary municipal shelter in a school, with guaranteed access to food and hygiene. In Manaus, UNHCR provide four Refugee Housing Units (RHUs) to two provisional municipal indigenous shelters to allow for the isolation of suspected cases, better protecting the 250 persons hosted in the space.



## Strengthening and adapting shelter support

UNHCR continues to deliver our shelter response, ensuring access to basic needs, including WASH facilities, hygiene items and food for 7,000 Venezuelans in 13 shelters. In addition, UNHCR is working to address basic needs for populations in informal settlements, whose precarious WASH conditions have become even more critical in the context of the COVID-19 pandemic. In Pacaraima, UNHCR is supporting 11 informal settlements in Pacaraima with a population of more than 700 refugees and migrants with the installation of hand-washing stations and the distribution of cleaning items, hygiene kits, buckets and jerry cans to improve WASH conditions. In Roraima, UNHCR has been working with the Armed Forces and local authorities to deactivate 13 informal settlements and other spontaneous occupations in Roraima that host approximately 3,500 Venezuelans. As part of this effort, UNHCR provided technical and shelter management support to the Embratel site, which was used as a temporary isolation area for up to 100 refugees and migrants until the protection area of the APC was opened in mid-April. The site was then equipped to serve as an emergency transitional site that will host 500 refugees and migrants from early May through UNHCR's new shelter management partner, Fraternidade sem Fronteiras.

In Manaus, UNHCR led the development of shelter protocol for COVID-19 Response in cooperation with Amazonas State Secretary of Health (SUSAM) and other UN Agencies: The "Protocol on the COVID-19 Pandemic for Shelters of Refugees and Migrants in Manaus" was published on 1 April and lays out standard guidelines for prevention and response to cases of COVID-19 to be applied in the 11 shelters in Manaus run by State (2), Municipal (2), Civil Society (6) and the Armed Forces (1) supporting 1,100 Venezuelan refugees and migrants.



In Manaus, UNHCR is supporting the deactivation of the overcrowded Alfredo Nascimento municipal indigenous shelter which was hosting 534 indigenous Warao in extremely poor WASH conditions aggravating the vulnerable health condition of the population. Following UNHCR advocacy with municipal and state authorities, a plan was put in place to relocate the population to five temporary public spaces (closed schools and sport facilities) managed by the municipality where the population has access to improved WASH conditions and where appropriate distancing and isolation measures could be applied during the COVID-19 situation. The relocations began on 2 April, with 4 of the 5 new sites activated to date, 437 indigenous have been moved to more adequate sites. UNHCR is supporting the sites with the provision of 550 beds, mattresses and mattress covers, cleaning items and 10 RHUs for the establishment of isolation areas in each space. UNHCR and partner Instituto Mana are supporting the municipality with technical advice on shelter management and providing support for community-based protection mechanisms and CWC in the shelters as well as response for cases of SGBV and protection case management.

In Belem, plans to relocate a population of approximately 450 indigenous from a municipal shelter, under discussion following UNHCR advocacy since last year, have been accelerated and are to be completed in early May. UNHCR provided technical support for the site selection, planning and construction, promoting culturally appropriate shelter solutions throughout the planning process in addition to providing raw materials for the hammock structure and other NFI support (RHUs, tarpaulins, kitchen sets, hygiene kits, solar lamps).



## Ensuring the most vulnerable have access to basic items

**NFIs distribution:** In response to the COVID-19 pandemic, UNHCR and other R4V partners have scaled up and coordinated the distribution of critical hygiene and cleaning items to aid in the prevention and spread of the virus. In March and April, UNHCR delivered a total of 331 RHUs, 1,296 mattresses and mattresses covers, 460 bed frames, 155 hammocks, 1,147 cleaning kits, 2,235 packages of diapers, 2,331 jerry cans, 422 buckets, 1,132 mosquito nets, 50 kitchen sets and 584 solar lamps. Many of these materials were delivered to support of the APC in

Roraima and isolation area in Manaus, with additional items already procured and awaiting delivery as the spaces are finalized. In Para, UNHCR contributed with 200 hammocks, 50 tables, 200 chairs and 2 drinking fountains to improve conditions in two Municipal Indigenous shelters in Belem. In Pacaraima, UNHCR distributed cleaning kits, hygiene kits, buckets and jerry cans to 720 refugees and migrants living in spontaneous settlements. In Sao Paulo, UNHCR distributed 1,000 cloth masks produced by refugees for distribution to the populations and management of nine public shelters in the city.

**Food distribution:** UNHCR and partners delivered almost five tons of food and one ton of hygiene products to 90 families: The local community organization, Canarinhos da Amazonia, usually serves 90 families with UNHCR's support, but has had to suspend its music classes and community activities. However, on April, UNHCR led information sessions for the 90 families, where they learned about prevention measures, handwashing and access to the health system before receiving the food and hygiene items provided by UNHCR, the Armed Forces and local civil society.

### Expanding the provision of life-saving cash assistance

**Cash-based assistance (CBI):** As loss of livelihoods increases throughout Brazil as a result of restrictive measures for the prevention of COVID-19, already vulnerable populations, including refugees and migrants, are in critical situations, unable to afford basic items like food, rent and hygiene items. These situations are particularly dire in the states hardest hit by the outbreak where there are also large refugee populations, such as Amazonas, Para, Sao Paulo and Rio de Janeiro. With the number of cases of COVID-19 still growing steadily in Brazil and the end of restrictive measures in many states unclear, cash assistance provides an efficient way to continue reaching refugees and deliver life-saving support, while complying with local guidelines and reducing the risk of transmission of the virus. UNHCR is working with partners throughout Brazil to implement cash-based assistance to the most vulnerable persons of concern to UNHCR. The distribution of cash-based assistance has been adjusted for the COVID-19 context, with new remote beneficiary assessment procedures put in place to reduce the risk of infection during the delivery of this assistance. In March and April, UNCHR Brazil has delivered 716 cash grants to 1,636 persons of concern, totalling BRL 612,522 (approximately USD 105,000), however UNHCR Brazil is operating with a CBI budget that covers only 24 per cent of initially assessed needs, while needs increase exponentially in the context of COVID-19.



### Scaling up and adapting strategies for Communication with Communities (CWC)



UNHCR reached more than 15,000 refugees and migrants in the North of Brazil with crucial information about COVID-19 in shelters and informal settlements and through community organizations. Refugees and migrants are receiving information on hygiene and the prevention of COVID-19 orientation as well as how and when to access health services in case of suspected infection. The strategy includes information sessions, screening of videos, posting and distribution of flyers and audio messages through whatsapp and social media. The message is delivered in Spanish, Portuguese and the indigenous languages of Warao and Parane.

**UNHCR HELP Platform:** In Brazil, the HELP platform delivers important information to refugees and asylum-seekers in Brazil about their rights, access to services and how to apply for asylum in Brazil in Portuguese, Spanish, French, Arabic and English. As in person assistance has declined in the context of COVID-19 and its becomes harder to reach persons of concern, UNHCR is using the platform to deliver up to date information about the availability of public and our partners' services, while also providing important information on the prevention of COVID-19. In April, 4,792 people accessed the site and its information, with COVID-19 as the most searched topic currently.

### Incorporating differentiated approaches for indigenous across response sectors

UNHCR jointly with partner Fraternidade – Federação Humanitária Internacional, published a [short guide](#) to facilitate communication between health professional and the indigenous Warao and Eñepa populations in Brazil, given the poor health outcomes and incidence of death from preventable and treatable illnesses in these groups. The publication was produced through a participative process with the communities and with the use of drawings representing their understanding of illnesses and their environment. It will be used by health professionals to be able to provide accurate information and culturally appropriate care to indigenous people.



In Pacaraima and Manaus, UNHCR supported 132 Warao Families to apply for the emergency basic income being provided for the Federal Government. At a national level, UNHCR is working to promote the access of our persons of concern to the Emergency Basic Income being provided through the Federal Government. Mass information has been distributed to refugees and our persons of concern in Spanish, Portuguese, English and French about the enrolment procedures. UNHCR and partners are also providing targeted direct support for particularly vulnerable populations to enrol, namely the indigenous. In this sense, several similar activities have also been carried out by UNHCR and partners in Boa Vista, Belem, Sao Paulo, Rio de Janeiro, and other cities in Brazil.

In Manaus, a community-based participative communications strategy has been put in place to mobilize the indigenous community populations in the five temporary shelters to adapt and translate prevention and response measures for COVID-19 to community practices with the guidance of two health technicians.

**LINKS**



**Global Humanitarian Response Plan COVID-19**  
(launched 25 March 2020)



**Global Focus COVID-19 Situation page**  
(including UNHCR's Coronavirus emergency appeal and sitreps)



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