

# The impact of COVID-19 on vulnerable populations: people on a low income, immigrants and the elderly - Perception Study in Brazil

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Brazil	Total sample: 544 – Rio de Janeiro 385 - Paraná
<p>On 26 February, the Ministry of Health confirmed the first case of the new coronavirus in Brazil, which was also the first confirmed case in Latin America. On 20 March, Brazil declared a national state of emergency, enabling the authorization of increased spending to combat the new coronavirus and carry out other measures during the pandemic.</p> <p>In March 2021, Brazil was again declared to be at the epicenter of the pandemic. Coronavirus statistics in Brazil currently stand at 20 million cases and 566,000 deaths.</p>	The study sample was created using the probabilistic method, choosing respondents from amongst those on a low income, immigrants and the elderly, all aged 16 and over, from all sexes, living in Brazil.

## Context

This section discusses the groups interviewed in this perception study. We will look at their individual contexts and the impact of the pandemic on these.

We will start with people on a low income. We took as a base for the study families registered with the CadÚnico, a government initiative that identifies and defines low-income families, allowing the government to better understand the socio-economic reality of this group. A database contains details about residency, ID, level of schooling, work and income status and other information.

Up to the beginning of 2021, Brazil had around 27 million people in a situation of extreme poverty<sup>1</sup>. In Rio de Janeiro, where the target population were interviewed, over 2.5 million live in a situation of extreme poverty<sup>2</sup>. This population has been greatly affected, particularly by job loss and food insecurity.

We chose this target population group because the Rio de Janeiro branch works closely with these communities, which are characterized by extreme poverty. This study would help us understand this group's perception of the pandemic and plan intervention.

For the elderly population, according to the last IBGE (the Brazilian Institute of Geography and Statistics) census (2010), the state of Paraná has 1,316,554 inhabitants over the age of 60, which is 11.2% of the total population of Paraná.

The COVID-19 pandemic had many negative effects on the elderly population, one of the biggest risk groups, particularly with regard to their daily lives. People over the age of 60 were the group most affected by the pandemic, due to comorbidity issues and social isolation. Physical activity and treatment for chronic illnesses was compromised, leading to anxiety, a feeling of having been abandoned, loneliness and weight gain. Encouraging as much independence as possible is an important factor in specific care for the elderly, the fastest growing population in the country.

We wanted to study attitudes in this group with regards to COVID-19 vaccine safety and uptake, as well as to ask them about any problems they might have in accessing healthcare.

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<sup>1</sup> <https://exame.com/economia/brasil-tem-mais-pessoas-na-extrema-pobreza-em-janeiro-que-ha-uma-decada/>

<sup>2</sup> <https://diariodorio.com/mais-de-2-milhoes-de-pessoas-estao-em-situacao-de-pobreza-extrema-no-estado-do-rj/>

## Methodology / Restrictions

Methods Used	Yes/No	Comments
<b>Brazil</b>		
<i>Focus group discussions</i>	No	Besides the fact that they were restricted by coronavirus prevention measures, the branches also did not feel able to work in this way on a technical level either.
<i>Online study</i>	Yes	The KoBo platform was used. Once the form had been created, links were generated and sent via WhatsApp to beneficiaries of the branches who fitted the survey criteria.
<i>In-person study</i>	Yes	Most responses were obtained by means of in-person visits, which allowed us to reinforce links with the communities. The branch in Rio organized interviews at the premises of the community association, making sure that respondents were transported safely to the location. Paraná held interviews in peoples' homes.
<i>Reports and current secondary documents</i>	Yes	We carried out a secondary study using information already gathered in other studies related to COVID-19. We also used reports from state health secretariats and other institutions to help us understand the context.

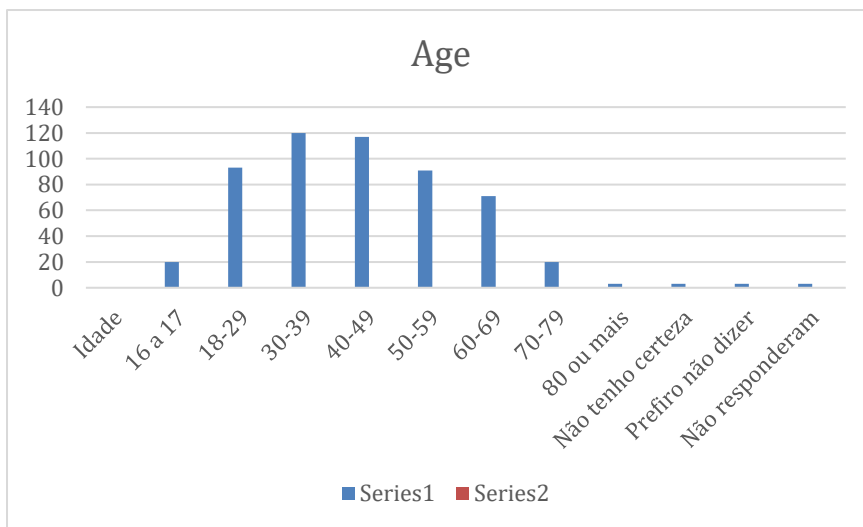
Most branches were able to carry out the study successfully, but reported that people found the study very long, which might explain the large number of questions not responded to. People also felt uncomfortable about some of the questions, such as the question about their level of confidence in the government. We did however also receive positive feedback from

people who felt that the study made them feel listened to and gave them the chance to talk about their problems and their fears.

**Data analysis: profile of the population interviewed, according to each target group**

*Rio de Janeiro*

A total of 544 people took part in the study. 22% were aged 30-39 years old, 21% 40-49 years old, 17% 50-59 years old and 17% 18-29 years old. Therefore, it can be said that most of those who responded were fairly young and economically active.

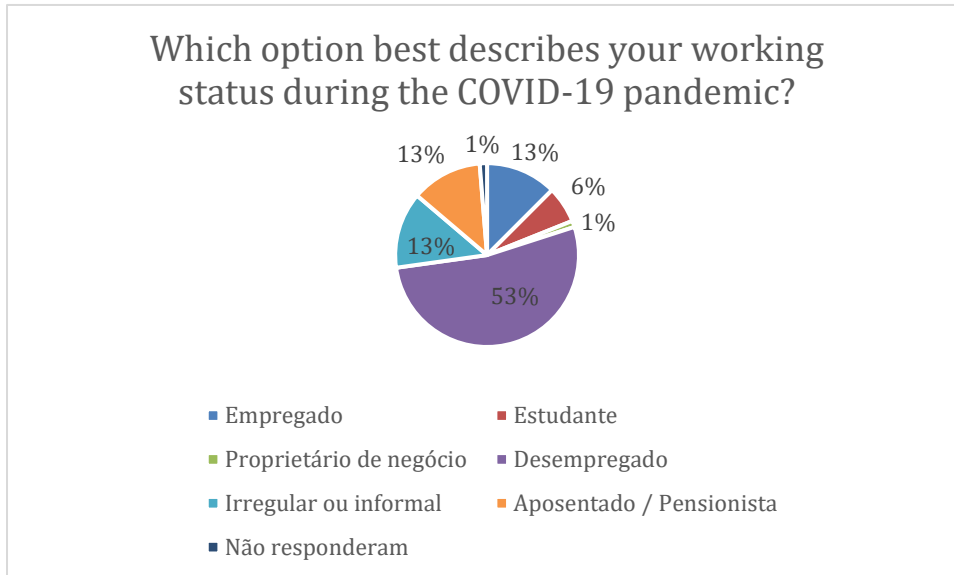


Most of the target public identified as women (83%), whilst 15% identified as men. 46% had completed a high school level education and 41% primary/basic level.

Brazil's social reality shows a direct correlation between education levels and income levels, and most of those on low incomes, which is a large part of the population, also have low levels of education. The higher the level of education completed, the higher the likelihood of a higher monthly income.

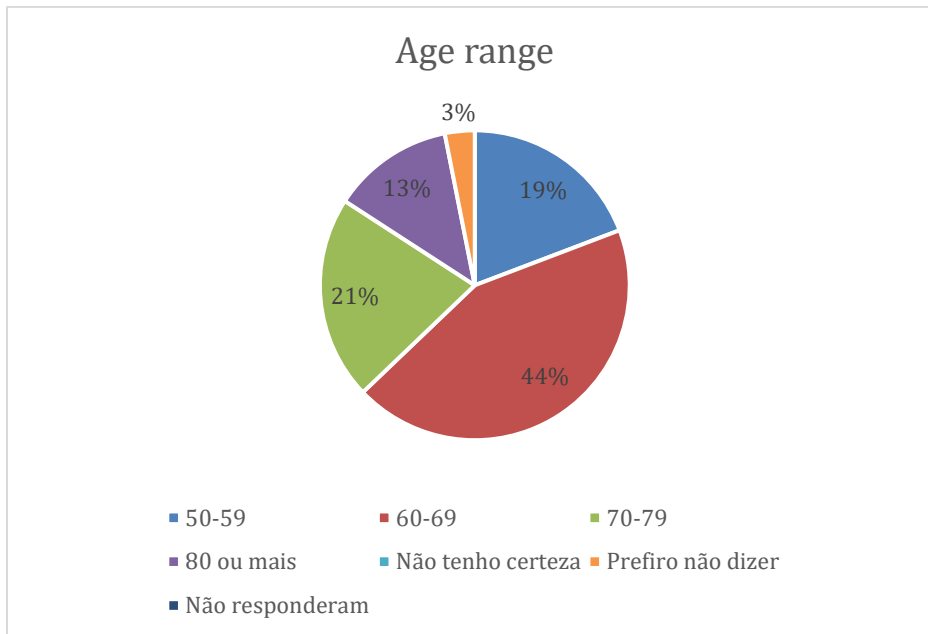
When it comes to chronic conditions, 64% of those interviewed said they did not have any, whilst 33% said they had. Only 5% of the people interviewed said they were breastfeeding.

Finally, 36% said they were unemployed before the pandemic, and 27% said they were employed. 15% were working in the informal sector, 11% were retired pensioners and 8% were students. The percentage of respondents unemployed after the pandemic rose by 17% to 53%. The number of people employed fell 14%, as did the number of people working in the informal sector, which fell by 2%.



### *Paraná*

A total of 385 people took part in the study. 19% were aged 50-59 years old, 44% 60-69 years old, 19% were 70-79 years old and 13% were 80 or over. 3% preferred not to answer this question. It is fair to say that most of those who responded were in the target group of elderly people, considered to be senior citizens.



Most of the target public identified as women (64%), whilst 33% identified as men. 50% had completed primary/basic level education, 13% high school level and 12% higher education.

When it comes to chronic conditions, 61% of those interviewed said they did not have any, whilst 39% said they had.

Finally, 48% said they were unemployed before the pandemic, and 18% said they were employed. 10% also owned their own business. During the pandemic, the level of unemployment rose by 5%. The number of people employed fell by 5%, increasing the number of retired people by 4%.

### **Vaccines: General overview of awareness, trust and attitudes**

On 15 March 2021, a COVID-19 national vaccine program was launched. These were the specific objectives, according to the program document: to inform the target population and priority groups for vaccination, to optimize existing resources using appropriate planning and programs in order to carry out the vaccine program in the three management spheres, and to equip states and municipalities to vaccinate against COVID-19. To date, 47.4 million people are vaccinated, 22.5% of the population.

*Rio de Janeiro*

Study results showed that 52% of the population interviewed who were on a low income believed that if a COVID-19 vaccination was available and recommended to them, and they would take it. 1% said they weren't sure about taking the vaccine. 36% said they had already been vaccinated and 8% of those interviewed said they would not have the vaccine.

Similarly, when respondents were asked if they believed that most adults they knew would have the vaccine if it was available and recommended to them, 87% said yes and 8% said no.

Next, they were asked if they had received any vaccinations as adults. 86% of interviewees said yes and 10% said no. Only 2% said they weren't sure if they had received any vaccinations during their adult life. We also asked about the awareness of this group of places where they could go to get vaccinated. 98% responded that they knew where vaccinations were being given.

Then we studied ease of access to vaccination. 92% felt it was easy to access vaccination, 4% replied that it was fairly easy to access vaccination, 1% replied that it wasn't very easy and 1% of respondents said it was not easy to access vaccination services.

The high numbers of those responding that vaccination was easy to access and the number of people vaccinated as adults are a consequence of the fact that Brazil is a pioneer in incorporating various vaccines into the National Health Service (SUS for its acronym in Portuguese) calendar. Brazil is one of the few countries in the world that offers everyone an extensive and broad range of immunobiologicals.

Finally, we explored why some people replied that it was only fairly easy, or wasn't very easy, to access vaccination services. 40% said that there was a long waiting time and 25% said that the vaccination centers were a long way away.

### *Paraná*

Study results showed that 10% of the elderly population interviewed said that if a COVID-19 vaccination was available and recommended to them, they would take it. 88% said they had already been vaccinated and 2% of those interviewed said they would not take the vaccine.

Similarly, when respondents were asked if they believed that most adults they knew would have the vaccine if it was available and recommended to them, 86% said yes and 13% said they weren't sure.

Next, they were asked if they had received any vaccinations as adults. 87% of interviewees said yes and 3% said no. Another 10% said they weren't sure if they had received any vaccinations during their adult life. We also asked about the awareness of this group of places where they could go to get vaccinated. 97% responded that they knew where vaccinations were being given.

Then we studied ease of access to vaccination. 58% felt it was easy to access vaccination, 22% replied that it was fairly easy to access vaccination, 7% replied that it wasn't very easy and 4% of respondents said it was not easy to access vaccination services.

Finally, we explored why some people replied that it was only fairly easy, or wasn't very easy to access vaccination services, 43% said that there was a long waiting time and 15% said they didn't believe the vaccines were effective, 12% said the opening hours were not very convenient and 9% didn't know when they would be able to get vaccinated. Another 6% cannot go alone and for 6% the vaccination center is a long way away, which makes it difficult for them to access vaccination.

## **Confidence in COVID-19 vaccines**

### *Rio de Janeiro*

In this section, based on the first data available on the study, we explore the level of confidence that the low-income population has in the COVID-19 vaccines. 65% trust the vaccines a great deal, 22% trust them moderately, 7% don't trust them much and finally, 4% do not trust the vaccines.

We also studied the level of confidence of this group in the health professionals who will be giving them the COVID-19 vaccine. We observed that 73% trust the health professionals a great deal, 18% trust them moderately, 6% don't trust them much and finally, 2% don't trust them.

In a recent note, the government alerted the population of "fake news" about the COVID-19 vaccine, which has affected Brazil a great deal.

### *Paraná*

In this section, based on the first data available on the study, we explore the level of confidence that the low-income population has in the COVID-19 vaccines. 49% trust the vaccines a great deal, 34% trust them moderately, 12% don't trust them much and finally, 5% do not trust the vaccines.

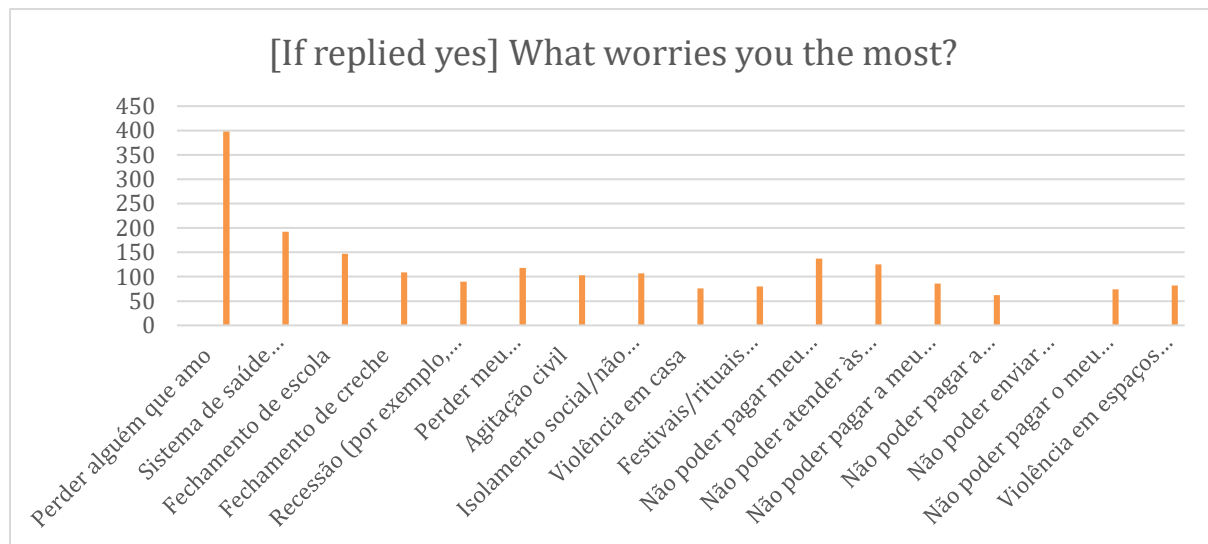


We also studied the level of confidence of this group in the health professionals who will be giving them the COVID-19 vaccine. We observed that 49% trust the health professionals a great deal, 39% trust them moderately, 10% don't trust them much and finally, 2% don't trust them.

### COVID-19 - Mental health and socio-economic impact

#### Rio de Janeiro

Based on the study results, 84% of the low-income group interviewed said they were worried about coronavirus. We asked those who were worried what their main concerns were about coronavirus. They replied firstly that they were worried about losing a loved one (n=398), secondly that they were worried about the health system becoming overwhelmed (n=192), thirdly that they were worried about schools being closed (n=147) and fourthly and fifthly that they were worried about not being able to pay the rent (n=137) and not being able to buy food (n=125).



Next, we asked what they felt about their financial situation before the pandemic. 37% said their financial situation had been good, 3% said it had been excellent, 50% reasonable and 6% bad.

70% said that their financial situation had changed after the pandemic started. We asked these 378 people how their finances had been affected. 300 replied that their income had gone down, 187 felt the cost of living had increased slightly, 168 said there had been loss of employment/family income and 62 said they had been unable to obtain basic healthcare.

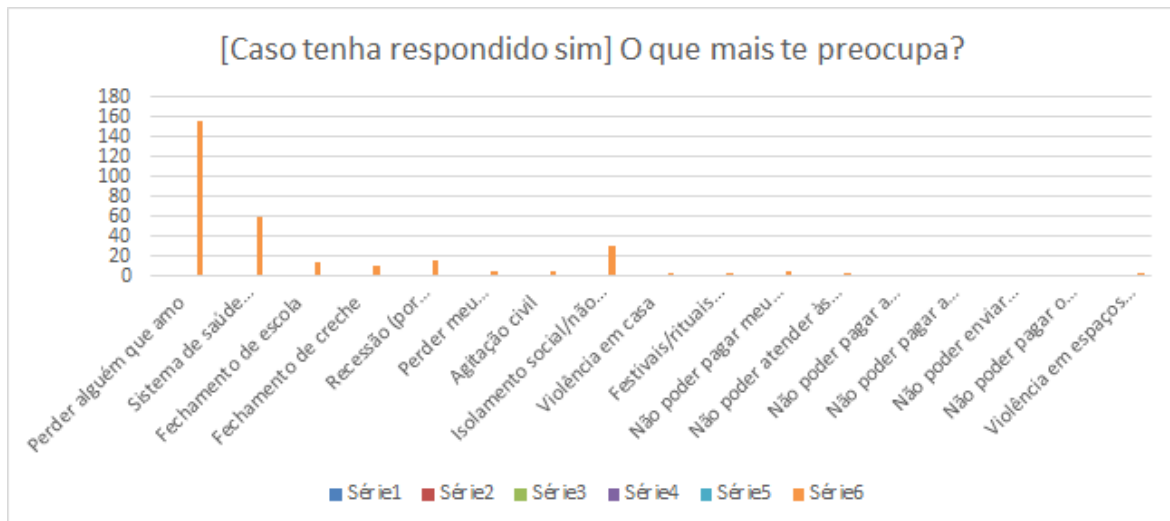
We also assessed confidence levels in different actors. The highest level of confidence, 86%, was in humanitarian workers. Scientists were next, with 37%, and in third place were members of the local community, with 26%. (Question based on a scale of 1-5 on the Likert scale)

Finally, we discussed confidence levels in decision makers before the pandemic. 26% said they had no confidence at all, 32% moderate confidence and 29% a low level of confidence. We also asked if their confidence levels had changed after the pandemic started. 47% said their confidence levels had not changed, 36% said they had decreased and 7% felt their confidence levels had increased. The other 10% of respondents chose the option, “no comment”.

There was relatively low confidence in government leaders in general, at 48% or zero 48% (1-5 on Likert Scale), 30% very high confidence levels and 9% had moderate levels of confidence in government leaders.

*Paraná*

Based on the study results, 87% of the low-income group interviewed said they were worried about coronavirus. We asked those who were worried what their main concerns were about coronavirus. They replied firstly that they were worried about losing a loved one (n=156), secondly that they were worried about the health system becoming overwhelmed (n=60), thirdly that they were worried about social isolation (n=30) and fourthly and fifthly that they were worried about the recession (n=15) and about the schools being closed (n=13).



Next, we asked what they felt about their financial situation before the pandemic. 47% said their financial situation had been good, 3% said it had been excellent, 41% reasonable and 9% bad.

53% said that their financial situation had not changed after the pandemic started and 37% said it had. We asked these 77 people how their finances had been affected. 39 replied felt the cost of living had increased, 20 said their income had gone down, 13 said there had been loss of employment/family income.

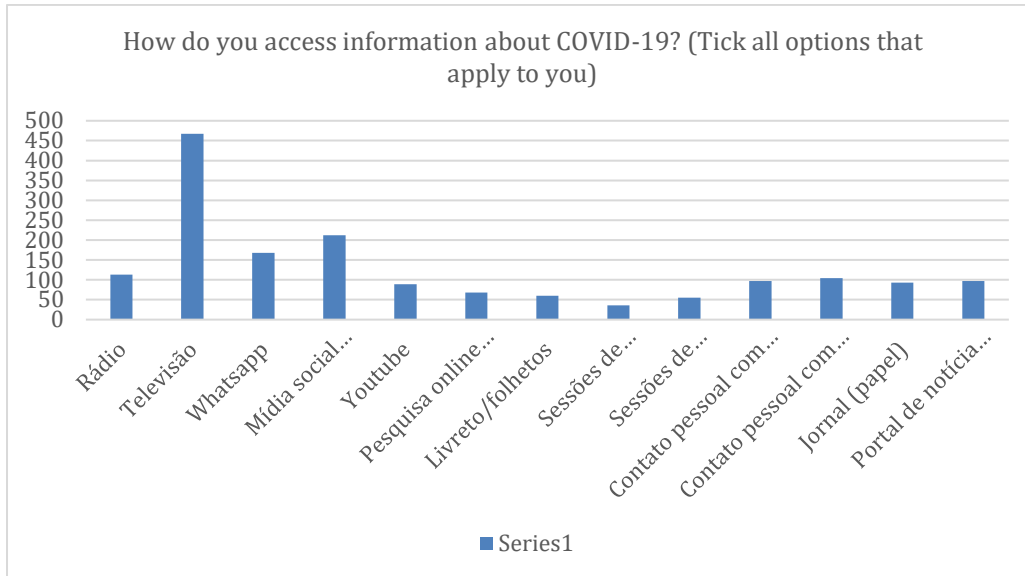
We also assessed confidence levels in different actors. From that time on, analysis of the data was carried out based only on questions answered, because a lot of people stopped answering after this section. The highest level of confidence was in humanitarian workers, at 46%. Scientists were next, with 37%, and in third place were members of the local community, with 19%. (Question based on a scale of 1-5 on the Likert Scale)

Finally, we discussed levels of confidence in decision makers before the pandemic. 26% said they had no confidence at all, 32% moderate confidence and 7% a low level of confidence. We also asked if their confidence levels had changed after the pandemic started. 47% said their level of confidence had not changed, 36% said it had decreased and 7% felt their level of confidence had increased. The other 10% of respondents chose the option, “no comment”.

### **Access to health alerts and the impact of health alerts**

This analysis was also based only on questions answered, because a lot of people didn't reply to the questions. Based on the first study data available, 15% (n=389) of the low-income population said they had received information about COVID-19 transmission pathways, whilst 12% said they had received more news about isolation measures and 11% about prevention measures (hand sanitization, use of masks, social distancing etc.). News about new variants, symptoms and risks were also mentioned a lot.

We asked about how people tended to access information about COVID-19. The most voted for options were TV (28%), social media (13%) and WhatsApp (10%).



In order to understand which resources people on a low income tend to trust most, we gave a long list of options. The most voted for options were: healthcare professionals and doctors (19%), Ministry of Health (16%) and Red Cross volunteers were in third place with 14%.

We then asked how useful the information they had received about COVID-19 had been. 88% of those interviewed replied that they had found it “very useful”, 8% felt it was “quite useful” and 1% said it was not useful. The remaining percentage was shared between the answers, “I don’t know” and “no comment”.

The four people who had received information but found it “not useful” were asked why they had answered in this way, and the options voted for were: the information is not based on facts, it is not applicable because of my financial situation, it is not applicable because of my social situation and it doesn't help me understand how I can be protected against COVID-19 and protect those around me.

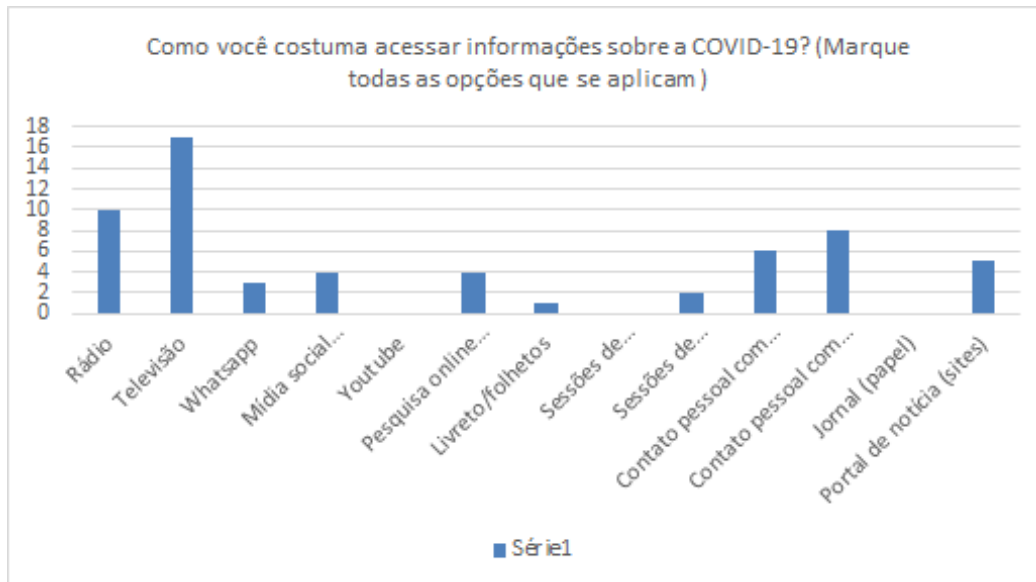
On the other hand, we assessed whether the information they had received was applicable to their situation. 90% said they felt the information was applicable. Of the 30 people who felt that the information given was not applicable to their situation, we asked them why they had answered in that way, and the most voted for were: there is resistance at community level in carrying out these measures and COVID-19 is not the main concern of this person's community.

### *Paraná*

Based on the first study data available, 18% (n=145) of the elderly income [sic] population said they had received information about COVID-19 prevention measures, whilst 13% said they

had received more information on virus transmission pathways, 12% news about isolation measures, 12% pathways and 12% information about vaccines. News about new variants, symptoms and risks were also mentioned a lot.

We asked about how people tended to access information about COVID-19. The most voted for options were TV (28%), radio (17%) and personal contact with family, friends and neighbors (13%).



In order to understand which resources elderly people tend to trust most, we gave a long list of options. The most voted for were: healthcare professionals and doctors (32%), Ministry of Health (22%) and Red Cross volunteers were in third place with 11%.

We then asked how useful the information they had received about COVID-19 had been. 71% of those interviewed replied that they had found it “very useful”, 21% felt it was “quite useful” and 4% said it was not useful. The remaining percentage was shared between the answers, “I don’t know” and “no comment”.

On the other hand, we assessed whether the information they had received was applicable to their situation. 93% said they felt the information was applicable. Of the two people who felt that the information given was not applicable to their situation, we asked them why they had answered in that way, and the most voted for were: the information does not meet the main needs of where I live and COVID-19 is not the main concern of this person's community.

## Conclusions

### Rio de Janeiro

It can be seen that the low-income population in Rio de Janeiro suffered unemployment during the pandemic. This percentage rose 17% compared to the pre-pandemic period. They also talked about how this period had a negative impact on their income. During the interviews, the branch ascertained that unemployed people were finding it difficult to access government benefits and wanted the relevant institutions to be their advocates.

As for the vaccine, as mentioned, the SUS is carrying out a huge awareness-raising campaign to inform the public of the importance of taking vaccines (in general). Because of that, large percentages of people had taken the COVID-19 vaccine and trusted in vaccines in general.

Finally, when asked, a high number answered that the pandemic had caused them fear and worry. They are worried about losing a loved one, about facing an overwhelmed health system and about finding schools closed. These are problems that most Brazilians have actually had to face. This population also has a lot of confidence in humanitarian actors and very low levels of confidence in the government.

### Paraná

It can be seen that the elderly population found it difficult to access healthcare services during the pandemic. This percentage rose by 19% compared to the pre-pandemic period. They also talked about how this period had affected their daily lives, making it difficult to socialize with family and friends.

As for the vaccine, as mentioned, the SUS is carrying out a huge awareness-raising campaign to inform the public of the importance of taking vaccines (in general). Because of that, the largest number of people who had taken the COVID-19 vaccine who and trusted in vaccines in general was amongst the elderly population.

Finally, when asked, a high number answered that the pandemic had caused them fear and worry. They are worried about losing a loved one and about facing an overwhelmed health system. These are problems that most Brazilians have actually had to face. This population also has a lot of confidence in humanitarian actors and very low levels of confidence in the government.

