

Risk and protective factors for Venezuelan immigrants: role of public policies

Fatores de risco e proteção para imigrantes venezuelanos: Papel das políticas públicas

Factores de riesgo y protección para inmigrantes venezolanos: papel de las políticas públicas

Facteurs de risque et de protection des immigrants vénézuéliens : le rôle des politiques publiques

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Abstract

The present study aimed to investigate the risk and protection factors of the migration process of Venezuelan families living in southern Brazil from the perspective of public policies. An individual semi-structured interview was carried out with nine Venezuelan families. The categorical content analysis proposed by Bardin was used to interpret the data. Pre-migratory risk factors were found to be the lack of food, lack of medicines, and personal items. Protective factors in Venezuela were associated with support from family and friends and through leisure. The risk factors in Brazil were the lack of housing or precarious conditions, existing difficulties with the language, missing family members, problems associated with the child's school insertion, setbacks in the school year, and barriers experienced related to the culture. As post-migration protection factors, the role of independent organizations in welcoming immigrants is cited, along with the solidarity of the Brazilian population, leisure, and assistance from schools. Although there have been changes in the context of Brazilian public policies in recent years, families that immigrate still experience significant risk factors for the mental and physical health of their members. The State must reflect and debate how these policies are occurring to fill the gaps existing in this context. This research brings information that could serve as a means of guidance for future interventions focusing on promoting the health of immigrants.

Keywords: immigration, public policies, family, Venezuela, qualitative approach

Resumo

O presente estudo teve como objetivo investigar os fatores de risco e proteção do processo migratório de famílias venezuelanas residentes no sul do Brasil sob o olhar das políticas públicas. Realizou-se uma entrevista semiestruturada individual com nove famílias venezuelanas. Para a interpretação dos dados, foi utilizada a análise de conteúdo categorial proposta por Bardin. Constatou-se como fatores de risco pré-migratórios a carência de alimentos, a falta de medicamentos e de itens de uso pessoal. Os fatores de proteção na Venezuela estiveram associados ao amparo de familiares e amigos e por meio do lazer. Os fatores de risco no Brasil, relacionaram-se a falta de moradia ou a condições precárias existentes nessa, a dificuldades com o idioma, a saudade de familiares, problemáticas

associadas a inserção escolar da criança, ao retrocesso no ano escolar e a barreiras experienciadas relacionadas a cultura. Como fatores de proteção pós-migratórios cita-se o papel das organizações independentes no acolhimento ao imigrante, juntamente com a solidariedade da população brasileira, o lazer e o auxílio advindo da escola. Embora nos últimos anos tenha ocorrido modificações no contexto das políticas públicas brasileiras, as famílias que imigram ainda vivenciam fatores de risco significativos a saúde mental e física dos membros. Torna-se necessário a reflexão e debate do Estado em como está ocorrendo essas políticas a fim de preencher as lacunas existentes nesse contexto. Essa pesquisa traz consigo informações que poderão servir como um meio de orientação para futuras intervenções, com enfoque para a promoção da saúde dos imigrantes.

Palavras-chave: imigração, políticas públicas, família, Venezuela, abordagem qualitativa

Resúmen

El presente estudio tuvo como objetivo investigar los factores de riesgo y protección del proceso migratorio de familias venezolanas residentes en el sur de Brasil bajo la mirada de las políticas públicas. Se realizó una entrevista semiestructurada individual con nueve familias venezolanas. Para la interpretación de los datos, fue utilizado el análisis de contenido categorial propuesta por Bardin. Se constató como factores de riesgo pre-migratorios la carencia de alimentos, la falta de medicamentos y de elementos de uso personal. Los factores de protección en Venezuela estuvieron asociados al amparo de familiares y amigos y por medio del ocio. Los factores de riesgo en Brasil se relacionan con la falta de vivienda o condiciones precarias existentes en esta, con dificultades con el idioma, con echar de menos a los familiares, problemáticas asociadas a la inserción escolar de niños, al retroceso en el año escolar y a barreras experimentadas relacionadas con la cultura. Como factores de protección postmigratorio se cita el papel de las organizaciones independientes en la acogida al inmigrante, juntamente con la solidaridad de la población brasileña, el ocio y la ayuda proveniente de la escuela. Aunque en los últimos años haya ocurrido cambios en el contexto de las políticas públicas brasileñas, las familias que inmigran aún vivencian factores de riesgo significativos a la salud mental y física de los miembros. Se hace necesario la reflexión y debate del Estado en cómo está ocurriendo estas políticas con el objetivo de rellenar los huecos existentes en este contexto. Esta investigación trae informaciones que podrán servir como medio de orientación para futuras intervenciones, con enfoque para la promoción de la salud de los inmigrantes.

Palabras clave: inmigración, políticas públicas, familia, Venezuela, enfoque cualitativo

Resumé

Cette étude visait à étudier les facteurs de risque et de protection du processus de migration des familles vénézuéliennes vivant dans le sud du Brésil sous l'angle des politiques publiques. Un entretien individuel semi-structuré a été réalisé avec neuf familles vénézuéliennes. Pour l'interprétation des données, l'analyse de contenu catégorielle proposée par Bardin a été utilisée. On a constaté les facteurs de risque pré-migratoires suivants : le manque de nourriture, le manque de médicaments et le manque d'articles à usage personnel. Les facteurs de protection au Venezuela étaient associés au soutien de la famille et des amis, ainsi qu'aux loisirs. Les facteurs de risque au Brésil étaient liés au manque de logement ou aux conditions précaires, aux difficultés linguistiques, à la nostalgie des membres de la famille, aux problèmes d'insertion scolaire des enfants, au retard scolaire et aux barrières culturelles. Parmi les facteurs de protection post-migratoires, on cite le rôle des organisations indépendantes dans l'accueil des immigrants, ainsi que la solidarité de la population brésilienne, les loisirs et l'aide de l'école. Bien que ces dernières années aient vu des changements dans le contexte des politiques publiques brésiliennes, les familles immigrées continuent de faire face à des facteurs de risque significatifs pour la santé mentale et physique de leurs membres. Il est nécessaire que l'État réfléchisse et débattenne sur la manière dont ces politiques se déroulent afin de combler les lacunes existantes dans ce contexte. Cette recherche fournit des informations qui peuvent servir de guide pour les interventions futures, en mettant l'accent sur la promotion de la santé des immigrants.

Mots-clés : immigration, politique publique, famille, Venezuela, approche qualitative

Forced displacement worldwide affects one in 78 people. By the end of 2021, nearly 90 million people (89.3 million) had left their homes involuntarily (United Nations High Commissioner for Refugees [ACNUR], 2021b). Furthermore, data from the United Nations (UN, 2019) revealed that in 2019, more than 6 out of every 10 immigrants in the world were women and children. In the same context, it is recorded that Venezuela is characterized as the second most representative country in the scenario of forced immigration, since more than 4 million (4.6 million) Venezuelans by the end of 2021 had left their country due to the political and economic situation in that territory (ACNUR, 2021b).

Along the same lines, Brazil is the fifth most sought-after country by Venezuelan immigrants (ACNUR, 2021b). Between 2011 and 2021, the nationality with the highest number of requests was Venezuela (ACNUR, 2021b). Of the more than 60,000 (61,660) people recognized as refugees in Brazil up to August 2021, almost 50,000 were Venezuelan immigrants (48,477) (ACNUR, 2021a). By the beginning of 2023, Brazil had made almost 54,000 decisions (53,485), recognizing more than 70% of the requests made as refugees (ACNUR, 2023).

In Boa Vista, in 2019, more than 30,000 Venezuelans were in the region, of which around 6,300 were housed in shelters set up by the Armed Forces and, as of March 2019, more than 1,500 (1,581) were living on the streets in the region (United Nations Children's Fund [UNICEF], 2019). In 2019, the state of Santa Catarina was the fourth region that relocated the most immigrants, behind only Rio Grande do Sul, São Paulo and Amazonas (Silva, 2019).

It is worth noting that the refugee status refers to people who were forced to leave their country of origin due to the risks it poses to their survival, which differs from voluntary immigration since the latter occurs at the will and choice of the individual (ACNUR, 2019a). Furthermore, about involuntary immigrants, (they) may bring with them trauma and a feeling of ambivalence – related to the desire to return to their origins and the forced need to leave. It is also mentioned that when addressing the refugee's family system, it should be considered that they belong to an individual ecological niche (composed of a range of sociocultural aspects - such as native language, education, nationality and ideological issues). Therefore, adaptation in a new country is related to these origins and meanings brought (Falicov, 2016).

Regarding the definition of risk and protective factors, it is worth noting that risk factors are defined as conditions or variables that can increase the likelihood of negative or undesirable results, such as health problems, lack of well-being or difficulties in social adaptation. These factors can be influenced by individual, social and cultural characteristics, as well as by behaviors that can negatively affect the individual. On the other hand, protective factors are mechanisms or processes that help the individual to deal with hostile or unfavorable environments, contributing to their healthy adaptation and social integration (Martins-Borges, 2013; Reppold et al., 2002).

Regarding the legislative and public policy scenario, the 1951 Geneva Convention and the 1967 Protocol, which removes the geographical and temporal limitations of this first convention, are milestones in the international refugee protection system. In Brazil, in 1997, Law No. 9,474 (1994) was created, a national symbol of rights and regulation of refugee status in Brazil (Castro et al., 2019). Twenty years later, the new Migration Law was approved (Law No. 13,445, 2017). This, in line with the 1988 Constitution, establishes rights for immigrants such as access to health, education, justice, as well as social actions. However, in contrast to these advances, the Federal Government withdrew in 2019 from the UN Global Compact for Migration, which aims at joint and collective action by countries in the face of the existing migration crisis, signed by 164 nations (ACNUR, 2019a).

That said, the research carried out by Lodetti and Martins-Borges (2020) with Syrian refugees living in Florianópolis-SC, highlighted protective factors in their analyses of the maintenance of ties with family, friends, and cultural elements, as well as the receptiveness of Brazilians and possibilities in the job market. Along the same lines, Granada et al. (2017) highlight the need for equity in access to health and the expansion of public policies as aspects of promoting immigrant well-being. In contrast, risk factors were linked to violence, forced ruptures (both material and emotional), difficulties in accessing public services, as well as the presence of discrimination (Lodetti & Martins-Borges, 2020), and related to language difficulties (Bezerra, 2016).

Specifically addressing the situation of Venezuelan families in Brazil, Raffoul's study (2020) also addresses the existence of barriers related to public services and the difficulty of integration (such as the significant unemployment rate among this population). Regarding protective aspects, the article highlights the organization of shelters according to the profile of people, which allows for a broader observation of needs. However, the study emphasizes that, although there is an attempt at such organization and preservation of human rights, the overcrowding of shelters in Roraima lives under the violation of these rights.

Thus, in addition to the social relevance of the topic, the field of scientific production in the area also presents gaps. The survey carried out by Galina et al. (2017) highlights the need for more studies in the area, especially in Latin America, given the increase in migration processes in the countries and the lack of discussions on the topic.

Therefore, given these gaps in both the international and national contexts, as well as the lack of scientific productions that investigate the scope of public policies linked to involuntary family immigration, more studies in this area are necessary. Through research focused on this theme, a broad vision is provided for the implementation of intervention practices that aim to promote the health of immigrant families and their healthy development, as well as public policies directed at these families. That said, the present study aimed to investigate the risk and protection factors of the migration process of Venezuelan families living in southern Brazil from the perspective of public policies.

Method

Participants

This research has a qualitative approach, a cross-sectional design, and an exploratory design (Sampieri et al., 2013).

The research participants were nine Venezuelan families living in southern Brazil. The data saturation criterion was used to determine the number of interviewees, meaning that the inclusion of new participants was stopped when the data collected began to be repeated, indicating that additional data collection was no longer necessary (Fontanella et al., 2011).

This study had as inclusion criteria the need for the interviewed family to have immigrated to Brazil at least six months ago and to have children between the ages of seven and ten. This criterion of time since immigration was established based on the language and the need for familiarity with it. Regarding the age of the children, this was based on the concrete operational stage proposed by Piaget, which begins around the age of seven and extends until the age of twelve. In this stage, the child begins to have the ability to reason logically about concrete objects and facts of the reality in which he or she lives (Bee, 2011).

Data collection occurred with at least one family member, identified as mother, father, or guardians of the children, as siblings aged 18 or older. The participants were mostly female. Their ages ranged from 26 to 48 years. Their level of education ranged from incomplete elementary school to complete higher education. Table 1 presents the identification of the participants.

Table 1

Participants

Family	Responsible	Sex of the child	Age (years)
F1	P1 (mother)	Feminine	10
F2	P2 (mother) and P3 (father)	Feminine	8
F3	P4 (mother) and P5 (father)	Feminine	9
F4	P6 (mother)	Feminine	10
F5	P7 (mother)	Male and Female	9 and 10
F6	P8 (mother)	Feminine	8
F7	P9 (mother) and P10 (father)	Feminine	8
F8	P11 (sister)	Masculine	10
F9	P12 (mother)	Masculine	10

Instrument

Data collection was carried out at the participants' homes, with times previously scheduled in contact with the psychologist in charge. The locations for collection depended on the environment available in each home, varying between rooms such as the kitchen, living room and bedroom. It is worth noting that some of the homes visited were temporary environments, made available by the *Cáritas* network.

To access the research participants, an individual semi-structured interview was conducted with the family members, conducted by the researcher and assisted by the psychologist in charge, if necessary. The questions addressed pre- and post-migration risk factors, as well as protective factors against the entire involuntary migration process. The questions involved cultural, emotional, financial and social themes about immigration and their experiences in the country of origin and in Brazil. Through a previously prepared and flexible script, this type of interview allowed a broad view of the topics raised and their meanings, since it was conducted according to the narratives of each subject and their subjectivity, which enabled the understanding and integration of the data (Moré, 2015).

Procedure

The research was approved by the Research Ethics Committee of the University of Vale do Itajaí (UNIVALI). The research participants were contacted through the Brazilian Caritas Network through the PANA Project, which began in southern Brazil in December 2018, welcoming more than 200 Venezuelans in the region. Initially, contact was made with the Caritas Network office located in a municipality in the southern region of Brazil. After authorization for data collection, the researchers accompanied the psychologist responsible for the aforementioned project on home visits. The Informed Consent Form (ICF) was presented to the participants and, after confirmation of their voluntary willingness to participate, the recording of the interview began, which was later transcribed in full.

Data analysis was performed manually using the Categorical Content Analysis proposed by Bardin (2011) by one of the researchers. In the first phase, called pre-analysis, the collected material was organized and read. After that, the so-called exploration of the material was carried out. In this phase, the categories were coded and listed. Finally, the results were processed, that is, the interpretation and meaning of the results and the categories created were performed. The research and analysis of the data took place between 2019 and 2020.

Results and Discussion

Through the data collected, four categories and subcategories emerged and are listed in Table 2.

Table 2

Categories and subcategories

Category	Subcategories
Pre-migratory risk factors	No subcategories.
Pre-migratory protective factors	Family and friends; leisure activities.
Post-migratory risk factors	Housing issues; language; homesickness; adaptation.
Post-migratory protective factors	Institutions; leisure activities; receptiveness in Brazil; school support.

Pre-migratory risk factors

This category focuses on the difficulties experienced by participants in their country of origin. The families' statements reveal a predominance of verbalizations related to food shortages, followed by a lack of medicines and basic necessities (such as clothes, shoes and hygiene items). Terms such as "very bad", "difficult" and "horrible" appeared prominently in the reports about the crisis in Venezuela.

In this context, Granada et al. (2017) expose these problems as the result of a multifactorial process, which deprives individuals of their basic survival rights. Lodetti and Martins-Borges (2020) highlight that the forced immigration process is marked by multiple losses, both material and symbolic. In the immigrant country, Machado et al. (2019) note the lack of government initiatives that fully welcome immigrants.

Like the results of this research, Pauli and Almeida (2019) show that Venezuelan immigration occurs mainly trying to guarantee subsistence, since the income in the country of origin is insufficient to meet basic needs. It is noteworthy that in addition to the frequent material sacrifices made, the immigrant family needs to deal with emotional tensions arising from the forced migration process. In this context, there are also problems related to the preservation of the human rights of this population in the immigrant country, which clash with a discriminatory view of sovereignty and control that currently exists in nations (Bryceson, 2019).

In Brazil, more specifically, although there have been changes in legislation in recent years (such as the Migration Law, 2017), the State still has uncoordinated and even palliative migration policies (França et al., 2019; Santos, 2020). In this sense, given the gaps left by government agencies, civil society often acts and promotes humanitarian actions to meet these demands (Rikils, 2019; Santos, 2020). That said, the statements of P1 and P7 exemplify these points: "(...) *when we arrived at the shelter, we had lunch and it was rice with meat and salad, for a person in Venezuela to eat rice with meat and salad, you have to be a millionaire (...)*" (P7).

First, the situation that was happening in Venezuela... the salary wasn't enough... a month's work was only enough... you worked thirty days and ate one day with your salary... there wasn't enough to cover all your needs... the children's school, their shoes, their books... it wasn't enough... and we decided to leave (...). (P1).

The speeches in the interview exposed how the lack of financial resources, food and basic utensils were present in the experience of the immigrant family. This fact is configured as a risk factor, since it can impact the mental and physical health of the families in question. Therefore, public policies that act in this regard (both in the sense of assistance and encouraging autonomy) are necessary.

Pre-migratory protective factors

This category refers to the potentialities demarcated in the country of origin, which is subdivided into the subcategories: family and friends and leisure activities.

Family and friends

The focus of this subcategory is on the presentation of family and friends as a means of support in the country of origin. In the reports, support was found mainly in the mothers of the interviewees, who helped with the care of their grandchildren, as well as contributing to the family's subsistence. The existence of friends in the social circle was mentioned as a support network, especially for the children, through games and interactions with other children in the region where they lived, fostering interpersonal relationships and healthy child development.

From this perspective, Bezerra (2016) points out in his results that the child's network of friends is a protective factor and a factor in maintaining mental health. He also emphasizes the importance of social support for potentially alleviating the stressors experienced by immigrant families (Stewart et al., 2015). It is worth noting that, given the ties established in the country of origin, it is essential that the host nation brings with it public policies that empathetically welcome the immigrant, to encourage their acculturation process and foster a sense of belonging. Although the Brazilian scenario is marked by cultural plurality, the territory still lacks effective public policies in this regard (Dantas, 2017). Below are the statements of P1 and P8, which elucidate these points: "*She (daughter) spent the whole day there with her (great-grandmother)... she really liked being with her great-grandmother... she played, went to school, but when she wasn't playing, she wasn't at school, she was there with her great-grandmother (...)*" (P1); "*My husband's mother, she had a business and so we had vegetables... yes... only vegetables, to eat... pasta, very little like that (...)*" (P8).

The excerpts above reflect the family as a support network, both in terms of basic care and in the emotional and affective sense. Thus, this aspect is configured as a protective means for the immigrant, which needs to be looked at carefully also after arriving in the host country.

Leisure Activities

This subcategory addresses leisure activities carried out in the country of origin and exposed in the participants' statements. Thus, through verbalizations, the notable presence of activities carried out outdoors was noted, such as playing with a ball and moments at the beach or in rivers. It is noteworthy that such leisure moments were mainly associated with children, evidencing the family's concern with preserving children's mental health.

Given the protective aspects mentioned above, the presence of leisure in the immigrant country also becomes relevant. The promotion of such leisure activities presents itself as an alternative for strengthening ties between the refugee population and the host country (ACNUR, 2019b).

More specifically in the Brazilian context, actions such as those of the Institute of Migration and Human Rights (IMDH), which has promoted weekend meetings aimed at bringing together immigrant families and Brazilian families through activities such as painting, games and crafts, are an example to be followed in this scenario (IMDH, 2017). That said, the following statements by P7 and P10 demonstrate the aspects highlighted: "*In Venezuela, there is the freedom to... for example, close the street and play ball, soccer (...)*" (P7); "*They are not very playful there, you play, but there you go to the beach, the river a lot, there are many hot springs*" (P10).

The excerpts above show outdoor time and sports as a protective factor and a way of promoting leisure. Such actions are shown to be an aspect of maintaining both physical and mental health and encourage a healthy family relationship, especially between parents and children.

Post-migratory risk factors

This category is represented by the following subcategories: housing issues (referring to housing-related problems experienced by immigrants in the host country); language (difficulty understanding and speaking Portuguese); homesickness (linked to mentioning the absence of loved ones who remained in the country of origin or migrated to other locations); and, finally, adaptation (associated with the statements of immigrants who addressed the barriers encountered in the adaptation and acculturation process).

Housing issues

Participants mainly mentioned periods in which the family had to live on the streets, as well as in shelters. There was also mention of violence in these places (such as fights, robberies and even episodes in which immigrants had their tents burned). In addition, there was mention of intense exposure to the sun and contact with insects, as well as the lack of places to perform hygiene needs at times when immigrants did not have housing.

In this scenario, it is noted that the difficulties presented in the immigrant country related to housing, as well as sanitary conditions and even linked to other spheres (such as employment, education and emotional aspects), are points

also mentioned in the study by Granada et al. (2017). Pauli and Almeida (2019), in turn, associate precarious survival conditions, such as immigrants living on the streets, with the violation of human rights. Given this, the authors elucidate the role of the State in such facts, to modify this situation of social vulnerability.

Another experience of this population has to do with the fact that the migration process occurred gradually, that is, first a family member immigrates in search of housing and other basic conditions and after that, the other family members travel to the host country. It is noted that this mode of operation was evident both in some families in the study in question and in the article by Bezerra (2016). In the legislative sphere, it is worth mentioning Article 6 of the Federal Constitution of Brazil, which establishes housing as a social right for all individuals. Therefore, the statements of P1 and P7:

(...) we were on the street in Pacaraima, on the border between Brazil and Venezuela... we stayed there for twenty days... and there a Brazilian friend helped us to go to Boa Vista... in Boa Vista we lived for two, three months, on the street too... there it rained, it was sunny (...). That was horrible. (P1)

(...) they burned the tents of all the Venezuelans and we ran away and were scared... it was full of police... and... I spoke to all the Venezuelans who were there... some of the immigrants went back to Venezuela, others stayed there... and I made a sheet, you know: "hey guys, let's form a group of all of us Venezuelans who are here, and let's talk to the Brazilian Government, see if there is a shelter, something for us". (P7)

The excerpts above reflect the experiences and difficulties of immigrant families upon arriving in the country of their immigrants. There is evidence of precariousness in the provision of basic survival resources, as well as the mention of support associated with the solidarity of the Brazilian nation. Given this and given that housing is a fundamental right of the individual, the State needs to look at and intervene more effectively and comprehensively with a view to guaranteeing human rights, as well as the physical and mental health of this population.

Language

The lack of understanding of the Portuguese language was frequently mentioned by immigrants. It is also worth noting that expressions such as "difficulty" and "complicated" appeared together with statements associated with understanding the language. Language is of utmost importance for the process of adaptation, as well as for the integration of those who immigrate (ACNUR, 2019a; Bezerra, 2016). In this context, the study by Lodetti and Martins-Borges (2020) presents notable data, since the authors emphasize that all thirteen participants in their research stated that they did not know the Portuguese language before immigrating. In addition, the article also exposes the difficulty of offering courses to learn the language in the immigrant country. Machado et al. (2019), in turn, associate the lack of command of the language existing in the host country with a factor that can aggravate stressors and the condition of suffering. Rikils (2019) also presents the language issue as one of the first barriers faced by immigrants, along with cultural issues. Thus, the verbalizations of P1 and P2: "*I don't understand anything... I have to learn... a man asked me: 'pass me the bag?' and I was thinking: what is a bag?... I asked, what was a bag (...)*" (P2).

Well... for me it's a little complicated... I understand everything you say to me, but I... to speak, it's a little difficult for me because it's... I'm also a little shy... so I'm embarrassed to speak... wrong... I think that out of everything, it's been a little difficult for me (...). (P1)

The discourses show how the lack of proficiency in Portuguese can be a risk factor for the health of immigrant families, since it influences the acculturation process. It is also noted that such difficulty can lead to episodes of embarrassment and exclusion of the immigrant and his/her family. That said, it is of fundamental importance to consider public policies in this scenario, since language has an impact on the individual's experience as a whole (both in the sphere of professional contacts, for example, and in the context of interpersonal relationships).

Longing

There was a predominance of excerpts related to the participants' longing for their parents, especially for their children, due to the closeness between grandchildren and grandparents before leaving their country of origin. It was also noted that, because the immigration process occurred in parts in some families, that is, one or more members came first to get a job and money, some participants were separated from their children for some time, a factor that also generated a feeling of longing. The family and its composition after immigration, as well as the bonds and ruptures resulting from the migration process, are shown to be a factor that can affect the immigrant's mental health, as well as their adaptation in the host country (Falicov, 2016). In the same context, Galina et al. (2017) associate the separation of family members, as well as the immigrant's responsibility to send financial resources to the loved ones who remained, as some of the challenges seen in the post-migration context. The emotional tensions experienced by families because of these forced ruptures are

also noteworthy (Bryceson, 2019). Bezerra (2016) addresses communication with relatives who remained via the internet or telephone as an aspect used by immigrants. The same article also points out that such resources are beneficial for maintaining the healthy development of children living in families. Thus, the statements of P2 and P10 are presented to clarify such points: *"I saw her very sad and said: 'why are you like this?' and we said it was because of the children who were in Venezuela... she (a Brazilian woman who sheltered the family in Boa Vista) helped us look for them (...)"* (P10).

(...) it hurts me a lot to be away from my mother, my father, my sister... here there is food, opportunities... but it is not easy... for me it is not easy... I have a sister who is in the same condition as I was... and she says to me: "sister, how can I go there?" and I say: "it is too early, I can't yet, I am not stable". (P2)

The recorded verbalizations demonstrate the ruptures that exist because of the forced immigration process. This aspect is shown to be a risk factor for the immigrant's health, since he or she needs to deal not only with the ties left behind, but with the existence of a context of vulnerability in which relatives who are still in the country of origin find themselves.

Adaptation

Barriers associated with culture and bureaucratic procedures were identified. Regarding cultural aspects, there was mention of typical foods and the difficulty of finding these foods in the host country (such as the mention of arepa), as well as verbalizations linked to changes in the context of friendships, family life, change of job (or lack thereof) and routine as a whole. Regarding bureaucratic issues, the difficulty of finding available school places for their children and the need to move back in the school year due to the change in language were highlighted.

Regarding the barriers encountered in the context of school insertion, Raffoul (2020) addresses such issues in his study. In this regard, the author also records the influences of the immigrant's lack of documents. It is noteworthy that access to school, especially for immigrant children, allows their growth and expands the possibilities of a future with more opportunities when they are adults (Bryceson, 2019). As for food, it is noteworthy that the reproduction of native cuisine in the host country becomes significant for the creation of bonds and a sense of belonging (Lodetti & Martins-Borges, 2020). Another difficulty experienced by immigrant families is the lack of knowledge about their rights in the immigrant country, which, together with other traumatic experiences experienced both in the pre-migration and post-migration context, place this population in a situation of social vulnerability (Galina et al., 2017). In this context, the statements of P6 and P10 are presented: *"She is not (at school), there is no vacancy... I did not find a spot here for her"* (P6); *"No... no flour similar to it (arepa)... none... we tried to make it with flour from here, corn, no, no, very bad"* (P10).

The records presented here highlight the difficulties experienced by immigrant families related to bureaucratic procedures and also arising from the acculturation process and the host country's lack of support in this regard. Thus, public policies must look at these aspects, since the maintenance of the immigrant's comprehensive health needs to have an insertion based on the precepts of citizenship and inclusion.

Post-migratory protective factors

Represented by four subcategories, namely: institutions (which refer to mentions of services for welcoming and supporting immigrants); leisure activities (linked to the sections in which families mentioned means of entertainment and rest after immigration); receptiveness in Brazil (associated with the form of reception and assistance from Brazilians); and, finally, school support (which presents the role of the school in the families' experience).

Institutions

The Caritas Network was mentioned predominantly in terms of providing support with food, hygiene items, shelter, shelter, employment opportunities, help with documentation and even toys for children. In addition, the local Church and support from family were mentioned. It is worth noting that none of the participants mentioned government actions as a means of support and assistance.

In this sense, given the lack of effective public policies, the significant role of Brazilian civil society in welcoming the immigrant population stands out, as well as of independent organizations, such as programs promoted by the Church (Rikils, 2019; Santos, 2020; Silva et al., 2020). In this context, the emerging need for a collective debate is highlighted, both by the Brazilian government and by international organizations (Castro et al., 2019). Along the same lines, Lodetti and Martins-Borges (2020) associate the lack of reception policies as a risk factor for immigrants. They also highlight the importance of including immigrants in public policies and their influence on the acculturation process, since their exclusion from such policies influences their access to health, education, housing, and citizenship as a whole, which can generate high levels of stress for this population (Dantas, 2017). Lodetti and Martins-Borges (2020) also address a gap

in the provision of services related to food, language support, as well as support networks upon arrival in Brazil. Finally, another significant point refers to the difficulties in accessing health services (Bezerra et al., 2018; Galina et al., 2017), an aspect that also needs modifications. Therefore, the verbalizations of P2 and P4 are presented:

I met a lady from Caritas... she spoke to another Caritas agent... from Boa Vista... and then... they sheltered us... for three months... they gave us help, food, for three months... they got things for the children... for mine and for many others who were in that park (...). Today, thanks to God and Caritas... I'm doing very well here... my husband got a job (...). (P2)

The women, the ladies and gentlemen, helped me... I had no housing, with the girl... it was impossible... I cried for everything... so in December, we passed by that park and the lady from Caritas appeared to bring us food... and... they took a doll for my daughter... they took many things, clothes (...). (P4)

The statements above highlight the significant role of independent organizations in welcoming immigrants, as well as in providing assistance and basic survival resources (such as food, clothing, shoes and shelter). In this context, the lack of statements related to state initiatives to support immigrants stands out, an aspect that deserves attention and even discussion, both in the context of existing policies and the gaps that still need to be filled, aiming at more effective initiatives that promote the healthy development of this population.

Leisure Activities

Technological devices (such as cell phones and televisions) were mentioned, as well as outdoor activities (such as parks, beaches, and soccer). The Church and painting activities were also mentioned as ways to promote leisure. In the international literature, it is worth noting that the study by Mahmood et al. (2019) found that levels of physical activity during leisure time were lower among recent immigrants and ethnic minorities, when compared to already established immigrants. It is worth noting that the Brazilian Federal Constitution presents leisure as a fundamental social right (Rikils, 2019). In this context, as an attempt to promote leisure in Brazil, the so-called "Martes de Cine" (translated into Cinema Tuesdays) held by the International Organization for Migration (IOM) in Manaus are recorded, which prepared film sessions for immigrants and refugees sheltered at the region's bus station. In addition, popcorn and juice were offered to the population, and after the end of the feature film, informational activities (mainly related to basic hygiene and prevention of COVID-19) were made available (IOM, 2020). In this context, the statements of P4 and P10 are presented below: "Park, eating ice cream (...)" (P4); "More in the park and on the beach... yesterday, we went to the Forest, they saw cows, horses, the river, running here, running there, they got a lot of sun (...)" (P10).

The participants' statements clearly show that outdoor activities associated with leisure are often mentioned. In this context, the promotion of initiatives that allow such activities is shown to be a protective aspect in the country of origin, in addition to fostering interpersonal relationships and the subject's acculturation process.

Receptiveness in Brazil

Participants reported a warm and supportive reception in Brazil. It is worth noting that immigrants mentioned the support from Brazilians in terms of food, clothing, footwear, housing, financial assistance, as well as assistance in getting their children into school and finding a job. It is worth noting that social support from the community is essential for rebuilding ties and connections, and that the lack of it and isolation can have consequences for the immigrant's health (Falicov, 2016). Lodetti and Martins-Borges (2020) also present the welcome provided by Brazilians as an aspect that fosters interpersonal relationships and facilitates the creation of more support and assistance networks, as well as access to services. Along the same lines, the literature review by Galina et al. (2017) emphasizes the importance of support networks and the organization of health systems as protective aspects for immigrants in the host country. In the context of public policies in the immigrant country, it is worth noting that they must consider the specificities of the immigrant, promoting an increase in the quality of life and equity in access to services (Granada et al., 2017). Thus, the statements of P1 and P10, which expose the solidarity of the Brazilian population: "In her house for three months (a Brazilian who welcomed us)... she helped us a lot with food, helped us look for work (...)" (P1); "She helped us with food, we worked, as she was Brazilian, she talked to the boy... to get work (...)" (P10).

The solidarity shown by Brazilians is a relevant aspect in helping and providing basic survival resources to immigrants. Given the above-mentioned statements, one can see the influence that the reception in the host country has on this population and how the relationships established promote inclusion even in the job market. In this context, it is worth noting that, although there is solidarity from the native population, the responsibility for offering such resources to immigrants does not lie with them, but with the State. Thus, the government must be clear about its role concerning the immigrant population, not directing it towards civil society, but working together with it.

School Support

For parents, the school appeared as a support network for the family nucleus and especially for their children. Through the school, participants declared the encouragement of interpersonal relationships for their children, the promotion of games and assistance in learning the language of the host country. In addition, parents mentioned the role of teachers and their influence on the development and adaptation of children living in their families. With results similar to those found in the present study, the research by Bezerra (2016) also shows the school as a space for fostering interpersonal relationships for immigrant children, as well as for learning and acquiring the language. Rikils (2019) emphasizes education as a basic right of the individual and records the importance of inclusive public policies that foster the development of individuals. Finally, Machado et al. (2019) also emphasize the importance of a non-centralized perspective regarding the provision of services to immigrants, but that such actions are made available in an articulated manner, that is, that health, education, social assistance and public safety actions function as a network, connected and guided by the precepts of comprehensiveness. That said, the statements of P2 and P7 are presented: "(...) *the only thing she said, when she changed schools, was: 'Mom, I'm going to another school, with other friends, no!'... but now, she has a little friend, who does her hair, puts bows on it, eats caramel, brings her apples (...)*" (P2).

They were very well received, an excellent school, really, we are very grateful for this school... it supported them (the children), they felt at home, you know... and... the children are very happy... the school gave them a lot of happiness, they are going to school, they have a life. (P7)

Schools are welcoming environments for families, especially immigrant children. Through school inclusion, it is possible to foster relationships with members of the immigrant country, as well as to learn the language, promoting the acculturation process in a healthy and welcoming way. Because of this, public policies must pay attention to making places available for all children who arrive, as well as providing services that are prepared to provide guidance and complete the necessary documentation, to avoid slow bureaucratic processes and optimize the inclusion of these children in the educational environment.

Final Considerations

This study aimed to investigate the risk and protection factors of the migration process of Venezuelan families living in southern Brazil from the perspective of public policies. In this sense, pre-migration risk factors for families were the lack of food, as well as the lack of medicines, hygiene items and personal items, such as clothes and shoes. In contrast, the protective factors found in the country of origin could be seen through the support of family and friends, as well as through the promotion of leisure, with emphasis on outdoor activities. The risk factors experienced in Brazil, on the other hand, were related to the lack of housing or precarious conditions existing there, in addition to mentioning violence in the places. Participants also expressed difficulties with the language of the immigrant country, missing loved ones who were unable to immigrate with them and the difficulty of the child's school integration, due to the lack of vacancies, in addition to the setback in the school year. The barriers experienced related to culture are also noteworthy, since families mentioned difficulties in preparing typical foods after immigration. Finally, as post-migration protective factors, the role of independent organizations, such as the Caritas Organization, in welcoming and providing basic resources to immigrants, together with the solidarity of the Brazilian population, is cited. In addition, leisure, also seen through outdoor activities, combined with the use of technological resources and the support provided by schools, the latter, especially for children, is presented as a protective aspect.

Thus, although changes have occurred in the context of Brazilian public policies in recent years, families that immigrate still experience significant risk factors for the mental and physical health of their members. It is also worth noting that independent organizations play a leading role in welcoming this population, while government actions play a supporting role, since all participants in the survey mentioned only institutions not linked to the government. In this context, it is necessary for the State to reflect and debate how the existing actions are being implemented and also to fill the gaps present in this context. Since involuntary immigrants already experience significant stressors in their country of origin, the implementation of effective policies that guarantee human rights becomes essential to promote health and quality of life in the immigrant country.

The limitations of this research include the restriction of the data collection region, the unavailability of a completely silent environment at times, and the difficulties with the immigrants' native language. Therefore, further studies are recommended in other regions, both cross-sectional and longitudinal, in addition to the inclusion of quantitative studies. As benefits of this research, it can be highlighted that the present analysis provides information that may serve as a means of guiding future interventions, with a focus on promoting family health.

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