The impact of COVID-19 on employment, care work, and domestic violence: a study of female residents in Brazilian favelas

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One sentence abstract: A qualitative study with interviews with *favela* residents concerning the impact of COVID-19 on employment, care work, and domestic violence

Full abstract:

The COVID-19 pandemic in early 2020 has yet to reveal its effects. From a purely economic point of view, it is already possible to see an increase in unemployment and a slowdown in economic growth in most countries. For the most impoverished populations, the consequences tend to be even more dramatic. In Brazil, one of the countries with the greatest inequality in the world, has approximately 8-10% of the population resides in *favelas*, places with high demographic density and low levels of infrastructure, including basic sanitation and access to health services.

Based on this reality, which is different from that generally disseminated by the press, we study the women of these *favelas* and their experiences with the labor market, care relationships, and domestic violence. With regard to the labor market, most of these

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women work as domestic workers. Because they rely on informal relationships with their employers, they can be fired quickly. Regarding care relationships inside and outside the family, many of these women are heads of their families, with young children who receive neither financial support nor care from the children's father. At the same time, these women reveal themselves as community leaders who quickly and efficiently make possible a level of care for their neighbors. Finally, the increase in domestic violence is a point of attention since confinement may induce an increase in alcohol consumption, and the rise in the level of tension between residents and patriarchal dominance can lead to domestic violence.

We had access to women living in the largest *favelas* in Rio de Janeiro (*Favela da Maré*, for instance, has more than 130,000 inhabitants) and São Paulo (*Paraisópolis* and *Heliópolis* are the largest ones in the city). Through interviews, we present the vision of these women and their realities of vulnerability and overcoming difficulties.

INTRODUCTION

One of the first fatalities of the new coronavirus in Brazil was a domestic worker in Rio de Janeiro. She died on March 17, 2020, after contracting COVID-19 from her employer, who lives in Leblon—the most expensive neighborhood by square meter in the country²—and who, on her return from a trip to Italy, did not report having symptoms. The 63-year-old maid was not retired and had worked for this family for over ten years.

The victim, whose name was not revealed, traveled 120 km a week using public transportation to reach the apartment where she worked and slept throughout the week. When she felt sick, she went to a unit of the Unified Health System (SUS). The next day, she was buried in a public funeral service in Miguel Pereira, a municipality on whose outskirts she lived in a house with seven more family members. Her employers tested positive, were seen in the private health system, and recovered³.

³ CARINO, Giselle; DINIZ, Débora. Patroas, empregadas e coronavírus. *El país*. Opinião. 20.mar.2020. Disponível em: https://brasil.elpais.com/opiniao/2020-03-21/patroas-empregadas-e-coronavirus.html Acesso em: 28.nov.2020. https://g1.globo.com/rj/rio-de-janeiro/noticia/2020/03/19/rj-confirma-a-primeira-morte-por-coronavirus.ghtml.

² https://noticias.uol.com.br/cotidiano/ultimas-noticias/2020/10/06/no-leblon-passado-abolicionista-e-escondido-sob-m-mais-caro-do-brasil.htm.

COVID-19 was declared a pandemic on March 11 by the WHO⁴, and its presence was officially confirmed in Brazil days before that episode on February 26⁵. It is said to have been brought by middle-class Brazilians returning from Italy. Since then, as of December 2020, another 6.2 million cases and 170,000 deaths⁶ have been recorded. The country now has the second-highest number of deaths in the world⁷. Epidemiological projections, such as those from Imperial College London, pointed to an even more catastrophic scenario if coping measures were not taken⁸. Based on this, studies and actions sought to take into account some of the specificities of Brazil, such as the population (211.8 million inhabitants, 51.8% of whom are women), economics (unemployment rate of 14.6%⁹), ethnic-racial composition (53.2% non-white¹⁰) and housing situation (11.4 million people live in *favelas*¹¹). The country has not adopted a general lockdown in its territory. Coping measures were taken based on decentralized management in each of the 27 federative units that Brazil comprises.

As the most populous cities in the country, São Paulo and Rio de Janeiro quickly became epicenters of the pandemic. Both are located in the southeast region, and they have the second- and fifth-highest population densities in Brazil, respectively (IBGE, 2010). São Paulo has an estimated population of 12.3 million inhabitants, and the capital¹² of Rio de Janeiro has 6.75 million¹³. Of that contingent, it is estimated that 1.4 million

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⁴ WHO. UN. *Virtual press conference on COVID-19* – 11 March 2020. Disponível em: < <a href="https://www.who.int/docs/default-source/coronaviruse/transcripts/who-audio-emergencies-coronaviruse/transcripts/who-au

⁵ https://coronavirus.saude.gov.br/linha-do-tempo/#fev2020.

⁶ BRASIL, Ministério da Saude. Painel Coronavirus. Disponível em: https://covid.saude.gov.br/ Acesso em 28.nov.2020.

⁷ https://covid19.who.int/.

⁸ https://www.imperial.ac.uk/media/imperial-college/medicine/sph/ide/gida-fellowships/Imperial-College-COVID19-NPI-modelling-16-03-2020.pdf.

⁹ https://agenciabrasil.ebc.com.br/economia/noticia/2020-11/taxa-de-desemprego-passa-de-13-para-14-no-terceiro-trimestre.

¹⁰ PNAD (2019) 20.mar.2020. Disponível em.

¹¹ Censo 2010 do IBGE.

¹² https://www.ibge.gov.br/cidades-e-estados/sp/sao-paulo.html.

¹³ https://www.ibge.gov.br/cidades-e-estados/rj/rio-de-janeiro.html.

(22% of the population) live in *favelas*¹⁴ in Rio¹⁵. In São Paulo, it is estimated that the number of residents living in *favelas* is 2 million¹⁶.

These cities developed out of power relations and spatial production marked by exclusion and inequality with distinct historical and urbanistic processes. The complex sociodemographic tensions produced, among other things, complex territories named *favelas*¹⁷. The Brazilian Institute of Geography and Statistics (IBGE) defined *favelas* as subnormal agglomerations:

a form of irregular occupation of land owned by others—public or private—for housing in urban areas and, in general, characterized by an irregular urban pattern, lack of essential public services, and location in areas with the restricted occupation¹⁸.

Historically, *favelas* are places with high population density and low infrastructure levels, including basic sanitation and access to health services. However, in recent years, the concept has undergone new meanings arising from reflections based on endogenous activism, research, and intellectuals, such as the one proposed by the Observatório das Favelas:

favelas are unique addresses in the city as a whole, making up the urban fabric, they are integrated with it; types of occupation that do not follow those hegemonic standards that the State and the market define as the occupation model of land use in cities. (SOUSA E SILVA, 2009, p. 21)

There are *favelas* in all five regions of the country. They are mainly located in the capitals and metropolitan regions of the states. More recent estimates than the 2010

¹⁸ https://www.ibge.gov.br/geociencias/organizacao-do-territorio/tipologias-do-territorio/15788-aglomerados-subnormais.html?=&t=o-que-e

¹⁴ We could have used the term "slum" or "shantytown" instead of "favela". However, we opted to use the Brazilian term to remain consistent with the description of what living in a favela means in the Brazilian context.

¹⁵ https://agenciadenoticias.ibge.gov.br/agencia-noticias/2012-agencia-de-noticias/noticias/15700-dados-do-censo-2010-mostram-11-4-milhoes-de-pessoas-vivendo-em-

 $favelas\#:\sim: text=Segundo\%20o\%20Censo \dot\%202010\%20do, cinco\%2C\%20eram\%20moradores\%20de\%20favelas.$

¹⁶https://www.cartacapital.com.br/blogs/32xsp/mais-de-2-milhoes-de-paulistanos-ainda-moram-emfavelas/.

¹⁷ Denominadas de aglomerados subnormais pelo IBGE.

ravelas/.

census data (the last census conducted) suggest a total of 13.6 million Brazilians living in these housing estates¹⁹.

These territories become the focus of attention in public health crises due to their complexities, such as difficulty achieving social isolation in homes due to the challenge of implementing sanitary measures for ample sanitation in territories that are rarely served by health services and water and sewage supply systems as well as the need for mobility that informal activities require. These factors result in a broad and proliferating possibility of contagion.

A survey of 70 Brazilian *favelas* showed that 87% of respondents knew someone who had COVID-19. Furthermore, 13% of respondents said they had been infected by the new coronavirus (COVID-19), and another 28% of the interviewed people did not know whether they had been infected²⁰.

According to another survey conducted in 2019 by the Data Favela and Locomotiva Institute in partnership with Central Única das Favelas (CUFA), "half of these *favelas* (49% of the total) are headed by women. In 62% of homes, the family is made up of couples with children, and in 21% of cases, it is made up of single mothers"²¹. Seventy percent of women living in *favelas* have children.

It is estimated that 6.3 million Brazilian women live in *favelas*, 69% of whom are self-declared black²². In addition to leading the household, many of these women perform formal and informal activities as domestic help, cooks, babysitters, and salespeople, among other activities, in addition to performing voluntary activities and protagonism through actions of political and social mobilization in the communities in which they live. These actions have strengthened the *favelas'* networks of support and solidarity in facing the vicissitudes brought about by the new coronavirus.

¹⁹ https://agenciabrasil.ebc.com.br/geral/noticia/2020-01/moradores-de-favelas-movimentam-r-1198-bilhoes-por-ano.

 $^{^{20}\,\}underline{\text{https://agenciabrasil.ebc.com.br/geral/noticia/2020-09/na-favela-quase-todo-mundo-conhece-alguem-que-teve-covid-19}.$

https://agenciabrasil.ebc.com.br/geral/noticia/2020-01/data-favela-moradores-de-favelas-do-brasil-estao-otimistas-com-2020# e https://brasil.elpais.com/sociedade/2019-12-31/favelas-brasileiras-sonham-com-casa-e-negocio-proprios-para-2020-mas-nao-esperam-mais-seguranca.html.

²²https://www.sebrae.com.br/Sebrae/Portal%20Sebrae/UFs/AM/Anexos/Apresenta%C3%A7%C3%A3o_2%C2%BA%20Forum%20Favela_Consolidado.pdf.

JUSTIFICATION

Every day, it becomes easier to identify the effects of the COVID-19 pandemic in 2020. From a purely economic perspective, it is already possible to see an increase in unemployment and a slowdown in several countries' economic growth. For the most impoverished populations in these countries, the consequences tend to be even more dramatic.

In this situation, Brazil is one of the countries with the most significant inequality in the world (HDI of 0.761, 79th in the world), with approximately 8% to 10% of its population living in *favelas* with alarming levels of extreme poverty (in 2018, 13.5 million Brazilians lived on monthly per capita income below US\$1.9 per day). The country has failed to create a social and economic protection system with broad and adequate coverage for its most impoverished population.

Although Brazil has a free, unified health care system and approval for emergency aid, the COVID-19 pandemic has affected the same populations affected by structural poverty, such as black women²³. According to the IBGE Synthesis of Social Indicators (SIS),

Poverty mainly affects the black or brown population, representing 72.7% of the poor, in absolute numbers of 38.1 million people. Moreover, black or brown women make up the largest contingent, [with] 27.2 million people below the poverty line²⁴.

Thus, although there is no evidence of a biological predisposition or precondition to developing SARS-CoV-2, contamination and the lethality of the disease are higher in the black population, most of whom are allocated to the most socially vulnerable layers and contexts of work regimes in which informality predominates²⁵. International organizations, such as UN Women, have warned of relevant impacts on women caused

https://www.dw.com/pt-br/mulheres-e-negros-s%C3%A3o-os-mais-afetados-pela-covid-19-no-brasil-aponta-ibge/a-54303900.

https://agenciadenoticias.ibge.gov.br/agencia-noticias/2012-agencia-de-noticias/noticias/25882-extrema-

^{24 &}lt;a href="https://agenciadenoticias.ibge.gov.br/agencia-noticias/2012-agencia-de-noticias/noticias/25882-extrema-pobreza-atinge-13-5-milhoes-de-pessoas-e-chega-ao-maior-nivel-em-7-anos#:~:text=de%20Indicadores%20Sociais-

Extrema%20pobreza%20atinge%2013%2C5%20milh%C3%B5es%20de%20pessoas%20e%20chega,maior%20n%C3%ADvel%20em%207%20anos&text=Em%202018%2C%20o%20pa%C3%ADs%20tinha,a%20condi%C3%A7%C3%A3o%20de%20extrema%20pobreza.

²⁵ https://www1.folha.uol.com.br/cotidiano/2020/04/coronavirus-e-mais-letal-entre-negros-no-brasil-apontam-dados-da-saude.shtml.

or intensified by measures of social isolation, quarantine, and unemployment (UNDP, 2020). ALON et al. (2020) contributed evidence that the pandemic's effects resulted in losses for women in the labor market and, consequently, in more significant gender inequalities.

Nationally, studies such as the one by Machado, Rabelo, and Varella²⁶ (2020) signal the "reopening of the economy and its implications for families with children". Notably, "despite being 54% of the female workforce, black and brown women are equivalent to 64%, or 1.1, million, of professionals who are single mothers". In other words, if daycare centers and schools do not reopen, these women would be the most affected population.

According to the Center for the Study of Violence at USP, the UN estimates an increase in femicide of approximately 20% in countries that have adopted social isolation²⁷. The Brazilian Public Security Forum (FBSP) corroborates this estimate, stating in its report that cases of femicide grew by 22.2% between March and April of 2020 in 12 states of the country compared to the previous year²⁸. Pasinato and Colares²⁹ (2020) also warn that the pandemic establishes favorable conditions to cause even more violence to women due to their confinement with possible aggressors as well as the loss of income for which they were responsible.

Faced with these imponderables, residents of Heliópolis, Paraisópolis and Maré find approaches through women's activism to direct efforts to meet challenges, address urgent needs, and demand concrete actions from public authorities to reduce the harmful effects and overcome this health and economic crisis.

This research during the pandemic focused on these territories that are headed significantly by women to examine some of the largest *favelas* in the cities of Rio de Janeiro and São Paulo.

²⁶ https://observatorio3setor.org.br/noticias/desigualdade-pode-aumentar-com-reabertura-sem-aula-presencial/.

²⁷ https://nev.prp.usp.br/noticias/violencia-amplificada/

²⁸ https://agenciabrasil.ebc.com.br/direitos-humanos/noticia/2020-06/casos-de-feminicidio-crescem-22-em-12-estados-durante-pandemia

²⁹ https://boletimluanova.org/2020/04/20/pandemia-violencia-contra-as-mulheres--e-a-ameaca-que-vem-dos-numeros/

Complexo da Maré—Rio de Janeiro

Rio has 1,018 *favelas* with 1,443,773 inhabitants (22.8% of the city's total³⁰). The set of *favelas* of Maré (named *Complexo da Maré*) is composed of 16 territories in the north zone of Rio and has more than 140,000 inhabitants (51% women, 62.1% black) in approximately 800,000 square meters with 900 streets³¹. Located on the edge of Guanabara Bay and delimited by three expressways, its occupation process started in approximately 1940. In 1994, Maré was recognized by the city hall as a neighborhood in the city.

There is immense complexity in conducting census studies in *favelas*, even by the state. For this reason, the work in Maré was conducted by *Redes de Desenvolvimento da Maré* in partnership with the *Observatório de Favelas*. This feat was not a mere vertical action by specialists researching the lives of Maré residents but a joint work of people, mostly from that territory, who were engaged in the process of transforming the local reality (REDES DA MARÉ, 2019, p. 07)

For this reason, the census recorded the social, cultural, and business diversity present in each territory and the economic and housing dynamics. Moreover, it showed the continuous growth of Maré and its challenges. One of them, the right to security, has permanently mobilized communities through organizations in dialogue with the government.

Maré was the focus of attention due to the political crime that took the life of one of its most essential residents and activists, Marielle Franco. "Woman, black, mother and child of the *favela* da Maré", Marielle became a city councilor in Rio de Janeiro in 2016. The sociologist with a master's in public administration was a defender of human rights. She was brutally murdered in 2018 for political reasons in light of the allegations she made. Investigations into her death have yet to be fully clarified. Her performance and legacy guided political claims in her name and international guidelines³².

³⁰IBGE (2010) data were revised by the Rio de Janeiro City Hall following the Maré's Censo (2019).

³¹ https://www.redesdamare.org.br/media/downloads/arquivos/CensoMare WEB 04MAI.pdf.

³² In addition to many initiatives in her name, a dictionary was created: Favela's Dictionary Marielle Franco.

Heliópolis (São Paulo)

Municipal data indicate that there are 1,731 *favelas* in São Paulo registered by the Municipal Housing Secretariat. In these occupations, there are a total of 391,497 households.

Located in the southeastern region of São Paulo, Heliópolis has approximately 1 million square meters with approximately 200,000 inhabitants³³. There are approximately 18,000 households and 3000 commercial establishments.

The occupation of this region by families took place in the early 1970s when they were temporarily transferred from another *favela* due to the construction of road rings (SAMPAIO, 1991)

Jardim Colombo—Paraisópolis Complex (São Paulo)

Paraisópolis, in the South Zone, the second largest slum, began its occupation in 1950 and densified with migratory processes in the 1980s (WERNECK, 2016). Today, it has approximately 100,000 inhabitants and 21,000 households, with only ten square kilometers between the buildings and upper-class neighborhoods such as Morumbi. Although separated by only a few meters, differences in access and income are expressed differently, such as life expectancy. Paraisópolis residents have a life expectancy that is ten years less than their neighbors in Morumbi (63.55 years and 73.48 years, respectively³⁴).

In 2019, the construction of a public park in Paraisópolis was initiated. However, it was supposed to be built beginning in 2009 based on a law at that time. The construction of leisure equipment has encountered obstacles from the neighboring area, whose association has required access limits, strict rules of use, and the construction of a three-meter-high wall that separated the park, which will receive *favela* goers and those in luxury condominiums³⁵. The claim for leisure equipment is old but intensified after the murder of nine young residents after intervention by the military police at a party (baile funk) in the *favela* in 2019³⁶.

³³ https://www.unas.org.br/heliopolis.

³⁴ https://www.bbc.com/portuguese/brasil-50666702.

³⁵ https://g1.globo.com/sp/sao-paulo/noticia/2020/07/14/prefeitura-de-sp-nega-pedido-para-construcao-de-muro-em-divisa-do-parque-paraisopolis-com-condominios-no-morumbi.ghtml.

³⁶ https://g1.globo.com/sp/sao-paulo/noticia/2019/12/01/paraisopolis-e-a-2a-maior-comunidade-de-sao-paulo-e-moradores-pedem-acoes-sociais-ha-pelos-menos-10-anos.ghtml.

Like Maré, Heliópolis, and many other Brazilian favelas, Paraisópolis is not homogeneous. As a complex, it is composed of four large nuclei, Jardim Colombo, Paraisópolis, Pinheiral, and Porto Seguro, which are spread over an area of approximately 102 hectares in the west of the capital. Jardim Colombo alone—the nucleus where we initially concentrated data collection for this research—occupies 14.9 hectares with approximately 15,000 inhabitants³⁷.

Located immediately behind a luxurious and vast "garden cemetery" whose presentation reports having "more than 135 thousand square meters of area [...] containing more than 2700 trees of various species (including fruit trees) distributed over the land"³⁸, the Jardim Colombo faces latent issues that are in stark contrast to the quiet corner of the dead. The absence of ample green and public spaces intended for social living and the garbage distributed on the streets are the most critical of these issues.

The Colombo stream that crosses the community is polluted, frequently causing health problems and risks when floods occur. There is a lack of effective management of solid waste; until recently, it was heaped on a 1000 m2 slope whose use has been given new meaning by residents since 2017 with the help of social projects inspired by other social urbanization initiatives in the country³⁹.

In partnership with the Jardim Colombo Residents' Union and public and private institutions, projects such as Parque *Fazendinha* operate directly in the old dump—known as Fazendinha—to promote actions that seek to integrate the community and offer opportunities to rethink the destination of waste and the conscious, sustainable and collaborative use of this space (Carro and Leite, 2018). In this way, the community has transformed what was an open sanitary deposit in a public park for more than 15 years. Along with this mobilization, other efforts with a social and educational impetus are changing the scenery and residents' lives.

HYPOTHESIS

With the advent of the pandemic, the dynamics of the home, work, care, circulation, and personal protection of these women have been significantly altered since

³⁷ https://www.fazendinhando.org/.

³⁸ http://www.gethsemani.org.br/.

³⁹ https://arqfuturo.com.br/post/parque-fazendinha--uma-comunidade-transforma-lixao-em-parque.

jobs have been suspended, employment contracts have been terminated or changed, children's classes have been interrupted, and social networks have been disarticulated.

Many of these women work as domestic workers. Because they have an informal relationship with their employers, they are easily fired. Regarding care relationships inside or outside the family, many of these women, as already mentioned, head their families and have children who receive no financial support or even care from their fathers. At the same time, these women reveal themselves to be community leaders, facilitating quick and efficient care work for their neighbors. Finally, the increase in domestic violence is a point of attention. Social isolation has led to an increase in alcohol consumption, an increase in the level of tension among residents, and patriarchal domination, resulting in domestic violence.

COVID-19 infection has increased rapidly in urban peripheries, complaints of domestic violence have increased due to increased contact with possible aggressors⁴⁰, food insecurity has been raging in communities⁴¹, there is a lack of information about the disease⁴², and the limits of care have increased. Public health services are responsible for some of the concerns of women living in these territories.

The loss of domestic jobs, in which most of these women work, was measured by IBGE in a specific survey on COVID-19. It was found that 500,000 posts in domestic services were lost in May. The PNAD in July reported a figure of 1.7 million.

The pandemic scenario posed challenges to a context in which profound inequalities already existed and contributed to the continuation of cycles of violence. It was clear that the pandemic had an impact not only on the incidence of violence but also on the records. (IGARAPÉ, 2020, p. 34)

The previous citation is a conclusion from research on this theme by the Igarapé Institute. It reflects the significant obstacles for victims to denounce their aggressors given their proximity to them at home or because they are unable to leave home.

https://www.unas.org.br/single-post/os-impactos-da-pandemia-na-mesa-das-familias-de-heliopolis
 https://agenciabrasil.ebc.com.br/geral/noticia/2020-10/pesquisa-expoe-impacto-da-covid-19-entre-moradores-de-heliopolis-em-s

⁴⁰ https://www.camara.leg.br/noticias/661087-crescem-denuncias-de-violencia-domestica-durante-pandemia.

A study that investigated the incidence of femicide in 17 Brazilian states reported that "during the period of social isolation (March to May 2020), there was a 6% increase in cases of femicide compared to January and February this year"⁴³.

GOALS

What has been the impact of the COVID-19 pandemic on the lives of women who live in some of the largest *favelas* in these two Brazilian capitals?

We examined how these women's experiences with the job market, care relationships, and domestic violence have changed. What adaptations have been made for the management of resources and care activities? We sought to determine whether there were any changes in their marital and/or family relationships and how the pandemic affected their participation in community mobilization.

Finally, we aimed to assess whether, in this context, there was a possible increase in cases of gender violence as a result of isolation and social distancing measures, especially during the period of quarantine in these cities.

METHODOLOGY

Part I: Research project

With the creation of the Center of Women and Territory of the Arq. Futuro Laboratory of Insper Cities in 2020, academic research merged with the knowledge produced by female community leaders in their actions in socially vulnerable territories to reveal the dilemmas of these realities in an effort to act in a responsible and committed manner. It was from this meeting that the present research emerged.

Part II: Delimitation and research profile

Based on these objectives, a research project was designed that focused on a qualitative approach that privileged the understanding of *favela* residents about the impacts of COVID-19 on their jobs, care, and domestic violence.

Some quantitative studies have previously been published or are in progress, as shown by BARBOSA et al. (2020, p. 61), who stated that "women must be affected differently in this crisis due to the absence of school activities and the increase in domestic

⁴³ https://igarape.org.br/violencia-contra-mulheres-como-a-pandemia-calou-um-fenomeno-ja-silencioso/.

and care activities". Furthermore, "the most affected in terms of loss of occupation were women, the youngest, blacks and those with less education"⁴⁴.

Therefore, the need to generate more data using a qualitative approach to the problem was considered important to consider how residents of these *favelas* perceive and experience these processes in their daily dynamics.

To this end, we prepared a research project that took into account the access that we already had to women in these *favelas* through partnerships and humanitarian action consolidated in these locations and the theoretical accumulation that has been the basis for reflections on social urbanism.

Part III: Sampling definition

As stated, we chose to investigate the *favelas* of Maré (Rio de Janeiro), Heliópolis, and Jardim Colombo (São Paulo) not only because we already had mediation for contacts but also because these are some of the largest *favelas* in these capitals with regard to population density.

Given the contingencies of time and health recommendations, we defined the sample as a collection of 150 interviews, with 50 interviews in each of the three *favelas*. This rationale also took into account the experience of other surveys with the same qualitative approach (semistructured interviews) that were previously conducted by research centers and NGOs with a strong presence in these communities, such as the population census of Maré by Redes de Desenvolvimento da Maré and research conducted in São Paulo by the Heliópolis Observatory and the "De Olho na Quebrada".

Part IV: Questionnaire formulation and characteristics

A questionnaire for semistructured interviews was prepared and constituted the primary methodological tool⁴⁵. It was composed of three parts, presentation, sections, and completion. Its production was based on studies and research in the areas of economics and gender (FOLBRE 2006), care (GUIMARAES and VIEIRA 2020), and gender violence (CAMPOS et al. 2020) in addition to the UNDP Technical Note (Economic Impacts of COVID-19 and Gender Inequalities) and the IPEA Technical Note (Public

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⁴⁴ http://repositorio.ipea.gov.br/bitstream/11058/10186/1/bmt 69 mercdetrabalho.pdf.

⁴⁵ Appendix 1 has the full interview script, including the first approach to invite women to participate on the project.

Policies and Gender-Based Violence During the COVID-19 Pandemic: Present, Absent and Recommended Actions).

In Section 1, Demographic Characteristics, the ten questions aimed to collect sociodemographic data such as age, race/color, marital status, address, residents at home, education, and religiousness.

In Section 2, Characteristics of Work, the 26 questions aimed to identify the interviewees' employability profile. It included questions about their employment ties before the pandemic, their workday and time spent commuting, and the value received for the work performed. Questions in this section sought to understand changes caused by the quarantine decree and the impact on their employment status and income generation. We also wanted to know these women's expectations about work in the next 12 months.

Section 03, Aspects of Care, included six open questions whose purpose was to verify the impact of these professional changes and their resonance in care dynamics. To this end, we asked who was responsible for domestic care, whether the pandemic had led to changes in these functions, and people who received care at home (e.g., sick, elderly, or people with disabilities). Completing the axis, in the case of interviewees who had children aged 15 and under, we wanted to know how they took care of them and whether they also took care of other children in the family or neighborhood.

Finally, Section 4, Gender Violence, addressed aspects of coexistence and tensions between genders. Twenty-five questions were developed that took into account four factors that could cause the worsening of violence in the context of isolation, according to the UNDP/IPEA (2020)⁴⁶: more prolonged coexistence between the aggressor and the victim, a more significant number of daily conflicts, a lack of routine times apart and a sense of impunity for the aggressor.

Section V: Pretesting

The questionnaire was tested in two phases. First, we conducted interviews with four volunteer women aged 22 to 53 who had completed primary education. All of them were salaried and worked in cleaning and care services. From this test, we realized the

⁴⁶ PNUD Technical Note: *los impactos económicos del covid-19 y las desigualdades de género* and IPEA Technical Note 78/ june 2020: *Políticas Públicas e Violência Baseada no Gênero Durante a Pandemia Da Covid-19: Ações Presentes, Ausentes e Recomendadas.*

need to make adjustments in the language from a formal style to a more informal style that would allow an "oral tradition" tone since we intended to conduct the interviews orally, via telephone or, in some cases, in person.

The second phase involved contributions form two volunteers, one 22-year-old school secretary and one 60-year-old retired teacher. Both of them were black women from the city of São Paulo. From these tests, the estimated response time was calibrated, and questions such as the use of emergency aid, religion, alcoholism, and violence by neighbors were considered, included and/or adjusted based on the recommendations.

Section VI: Field work

To conduct the interviews, nine residents of the *favelas* were hired who were already working on social and research projects in nongovernmental organizations and residents' collectives (Observatório de Heliópolis (called "De Olho na Quebrada") and Fazendinhando in São Paulo and Redes da Maré in Rio de Janeiro). Our concern was to include people known in the community who could provide reliability to the research. In some of these territories, the entry of nonresident researchers can cause difficulties with data collection. Our search for residents—women only—from each *favela* facilitated our access to the interviewees.

In a series of alignment meetings, the interviewers became familiar with the research proposal and the questionnaire and were able to ask questions about them and suggest adjustments. Additionally, an instant message group was created. All interviewers were in the group in addition to the authors of this paper, who answered questions and addressed operational problems that arose.

A precontract stage was established in which the interviewers made invitations and appointments for the interviews. On that occasion, they explained the origin and objectives of the research, its structure, the need for audio recording, and the estimated duration. In the precontract stage, data were collected for the informed consent form (IC), which was read before every interview, and informed consent was given orally by the participants. All interviews were conducted by telephone and recorded using the ACR application throughout October and November⁴⁷.

⁴⁷ At Jardim Colombo, we had to change the team of interviewers; therefore, the field work was completed in December 2020.

For the last question asked in the interviews, we asked whether the interviewee would like to receive help from the interviewer to report an aggressor. To do this, we asked the interviewee whether she felt safe and comfortable reporting the case and authorized the research team to make the appropriate referral to the authorities.

After the end of the interviews, the interviewer thanked the interviewees and informed them that as soon as there were published results from the research, they would be contacted again to receive a release of the study.

Section VII: Data storage and treatment

After each completed interview, the interviewers uploaded the files to a shared digital storage folder. These records were compiled and organized by territory. After completing the interviews, the files containing the recordings were sent for transcription, which was performed by a specialized company. The transcripts were subsequently encoded using the NVivo program.

RESULTS

This work relies on 150 interviews. However, we had technical problems with nine interviews; therefore, we report the results for the 141 that we could transcribe and analyze.

Table 1 shows the main demography of the sample. Almost half of the sample is composed of married women. Many of the women in the latter group were not officially married but were cohabiting with their partners. However, Brazil has the concept of a "stable union", which gives the partners the same status as marriage (concerning heritage and the division of wealth in case of separation). This is common, especially for couples who are in a second marital union. We included married and cohabiting in the same category. Conversely, 44.85% of them were single.

Our sample has mostly nonwhite interviewees: 32.09% were black, 41.81% were *parda*⁴⁸. The oldest interviewed woman was 70, and the youngest was 17. Their formal educational levels varied from no education to a doctoral degree (only one person). Many of them had less than a high school degree (54.75%).

 $^{^{48}}$ In Brazil, parda means mixed race. It does not relate exclusively to the skin color but is also about how the person identifies herself.

Table 1: Demographics

Variable	Mean
Age	38.85
Race (%)	
White	23.88
Black	32.09
Parda	41.81
Others	2.23
Educational background (%)	
No education or fundamental degree incomplete	29.93
Fundamental degree	24.82
High school degree	31.39
College degree	8.03
Master, Doctoral or MBA degree	1.46
Undeclared/unknown	4.37
Number of residents at the household	3.66
Has at least one child under 10 at home (%)	51.61
Marital status (%)	
Married or cohabitating	47.80
Single	44.85
Separated/divorced	4.41
Widowed	2.94
Number of observations	141

Source: All the data were collected in the interviews. The tabulation was made by the researchers.

Concerning the number of residents in the same household, the average was 3.66 persons per house. However, we had some houses with 10 people living together. In addition, 51.61% of the residences had at least one child under 10 years old at home.

We proceed with the analysis in the following sections: labor market participation, care work, and domestic violence.

Labor market participation

The majority of the interviewed women worked in the cleaning business. In Brazil, it is common to have a maid to do the housework. Some of them work exclusively for one family (five to six days per week, eight hours a day), while others work for different families (called *diaristas*; they rarely have a formal job). Among those who work for only one family, IBGE PNAD-C data from 2018 show that only 29% perform formal work⁴⁹. The informality in this sector makes it easy to dismiss a worker without additional costs.

Moreover, we obtained information on what happened immediately before the beginning of the social distancing period. Estimates from CEPAL⁵⁰ point to very alarming data: 7 in 10 Latin American domestic workers lost their jobs during the COVID-19 pandemic period. The same phenomenon is verified in Brazil and, consequently, in our research.

I stopped working because the bosses did not want anyone else in their house due to the virus, and since it was not a fixed job, I stayed for a few days without income until this help came. It was complicated because in this case it is just me and my three children supporting the house and everything, so it was not easy.—Interview from Heliópolis

So, for me, my boss sent me away because of the risk of contamination. She left for the farm, stayed there. She said she wasn't going to come here yet. She chose to fire me. I was unemployed, and we, my husband and I, were all at home, you know?—Interview from Jardim Colombo

⁵⁰ https://g1.globo.com/economia/noticia/2020/06/29/empregadas-domesticas-vitimas-da-pandemia-na-america-latina.ghtml.

⁴⁹ https://economia.uol.com.br/noticias/redacao/2019/02/08/empregada-domestica-recorde-sem-carteira-assinada.htm.

(...) but when it started in March, I was fired, I was fired right after. I stayed at home for three months and then I was fired. Because it was an 82-year-old lady, and her children didn't want me to stay there; I came and went every day, and they decided to fire me and took her to live with them.—Interview from Maré.

Other interviewees were working as hairdressers, cooks, teachers, and sales clerks and also had their jobs challenged by the pandemic. The Brazilian government issued an emergency law that allowed employers to reduce their salary and hours of work from 20% to 70%. The counterpart of this benefit was that employers could not dismiss the workers during the period that the reduction took place (i.e., if the reduction was made for three months, the worker's job was guaranteed for three more months after the end of this labor contract change). Some women in our sample experienced a reduction in hours of work and salary; however, this was more frequently observed in their husband's employment.

Interestingly, while men lost their jobs or experienced reduced income and work, the women who became unemployed found other ways to increase their family income. They began work as seamstresses (sewing masks to sell or donate) or cooking pastries. In Maré, for instance, the program "*Maré diz não ao Coronavírus*" ("Maré says no to the coronavirus"), which was organized by the community and the Redes da Maré⁵¹, hired 52 seamstresses to sew masks. They distributed 280,000 masks to the more vulnerable populations of the *favela*. They also hired cooks to cook meals and distribute them to residents who were at greater risk of poverty and homeless people. As of December 2020, they had distributed 1.9 tons of food, more than 53,000 meals to homeless people, and 54,000 hygienic kits.

Well, first, it was, like, a little desperate because as I did street fairs, the fairs were canceled, and I didn't know—there was much material here at home—I didn't know how I was going to put this material to be able to make money, and I started looking to sell on the internet, but it was very, very, very little. I collected donations online, making masks as if it were an exchange of product for the money, and that's how I got some money. I started to make a mask, then I did a lot of sewing masks. It was day and

 $^{^{51}\} https://www1.folha.uol.com.br/empreendedorsocial/2020/12/campanha-em-varias-frentes-produzdados-e-legado-de-mobilizacao.shtml$

night sewing a bunch of masks, and that was what saved me, because I didn't get emergency aid. My government financial help only came out in August, and I worked a lot to produce masks because, in the pandemic, it was what saved me, it was the masks.—Interview from Maré

I invested in cupcakes so that I could make more money to be able to support the house, then I made cakes. I started making pies too, and...I managed to sell a lot during that time. I managed to earn some good money with the cakes.—Interviewed from Jardim Colombo.

These women's initiative is significant because their jobs are more vulnerable than men's jobs. When they lose their income, their families also lose it. Our interviewees told us that they had to cut expenses to the minimum, not spend any money on leisure or ordering food (even fast or cheap food), and, in several cases, delay the payment of some bills (cellular phone, internet, non-essential bills).

The Brazilian government also issued "emergency financial help" to some people. These were persons 18 or older, unemployed or small entrepreneurs (with some income restrictions), and not receiving other government help (such as unemployment insurance). The exception was the *Bolsa Família* recipients, who continued to receive the benefit added to the emergency help. Many of the women we interviewed received this financial help. They said it was essential to their families to continue buying food and medicine during this period. Some of them told us it was difficult to complete the online forms and be approved by the government system. However, almost all of those who tried more than once received the money.

Certainly, the financial auxilium helped a lot...in the pandemic. So at the beginning, I would go there and buy something. It helped me a lot; it was welcome money. It helped me a lot, and it is helping me.—Interview from Jardim Colombo

I signed up once. Then there was a problem with the SSN; I remember that I was already using the SSN of someone here at home, something like that, both me and my daughter. I did it, the first time, putting my SSN, my husband's and my daughter's, who

were the people who lived here with me. There was no authorization, then they said, "Put it as if you were living alone". I went, I made another request, and it was also denied. Then I went, did it again, putting everyone's SSN, then I got it—after a long time I got it. I got it only now in August, after a long time.—Interview from Maré

One important piece of information obtained from the interviews was the relationship between receiving the government's financial aid and the decision whether to participate in labor. Brazil had a significant increase in female labor participation before the pandemic. For instance, the female labor force participation was 53.3% in 2019. By the end of 2021, this figure was reduced to 45.8%—a decrease of $14\%^{52}$.

Many scholars related the decrease in labor participation to the financial aid. However, we had no evidence of such a correlation in the interviews. Women (and men) continued look for jobs while receiving the financial aid. Even those who received the financial help at the cap reported that they wanted to have a job or to increase labor participation to fulfill the family's financial needs.

Care work before and during the pandemic

It is a well-known fact that women in Brazil, as in many other countries, have the primary responsibility for housework and taking care of children, elderly people, and sick people. IBGE data show that even for couples who work for pay full time (40 to 44 hours per week), women perform twice the amount of housework compared with men. One of the explanations is that the social environment imposes a higher weight on male jobs. Therefore, men spend more time out of the house (supposedly, working for pay), and women spend more time performing household tasks.

The pandemic and the consequent social confinement challenged this order. From March 2020, almost everyone had to stay at home. We examined how the housework was distributed in these *favelas* with men, women, adolescents, and children at home. In our sample, the average number of residents in each house was approximately four. A few interviewees lived alone; many lived in families with three or four people, and some of them lived with eight or more persons in the same house (the maximum number of

⁵² For comparison, in the same period, the male force participation decreased by 8% (IBGE, 2021).

residents per house was ten). Therefore, there was much housework to be done at each residence.

Women told us that before the pandemic, they were responsible for housework chores, such as cleaning the house, washing and ironing clothes, cooking, and taking care of the children. During the pandemic, the housework was better divided between them, their spouses, and their adult children. However, many of them still complained that this division was not fair:

I said, I would like it if she messed up less because she is 11 years old. So she took it, took it from one place, put it in the same place. Because if we don't want these responsibilities at home, she always leaves it for the mother. We teach, but it always ends up being left for us, for the women.—Interview from Heliópolis

I would like to clean the house, wash the dishes and have people collaborate; wash the dishes, clean the house and make everything cute, and the person appreciates it. But it looks like it's a job in vain. It looks like you're a maid.—Interview from Jardim Colombo

Children are very relaxed. They see that we are at home, so they want to make a mess and do not want to clean anything. Here in my house, there is always a fight and confusion due to cleaning the house, because I go to wash the dishes, they come to eat and leave a dish in the sink. I will wash the bathroom, dry the bathroom, they will take a shower and leave the bathroom full of water. So there is always a fight in my house, confusion due to this because they get dirty and do not want to clean because they think because I am at home, I have to clean up the mess they make, and I don't accept that.—Interview from Jardim Colombo

I say, "The dish was dirty, the glass was dirty, wash it" to keep the sink clean, because I am not paid to do housework here. Everyone should collaborate in keeping things clean. If you got something dirty, wash it. Towel, left wet in the bathroom. Footwear: it does not go to the balcony by itself. Because you can't come home with your shoes on, but you don't collect shoes on the balcony, because it's not cool—those little things. Get the stove dirty after you clean it, fry it; nobody will clean it. It will stay that way. They are little things that stress.—Interview from Maré

The lack of collaboration from other residents was a common complaint, but it was also common to hear that mothers were available to do housework tasks for their sons, but not for their daughters:

(...) because they are men, I put their [her sons'] clothes in the wardrobe. They take what they want.—Interview from Maré

These comments point to the need for a more in-depth discussion of housework sharing in the family. It begins by questioning not only the gender division of work but also power within the family. If women have more responsibility for the unpaid care of residents, it decreases their available time for paid work and increases their stress, both during the pandemic and at other times.

In addition to housework, families had to accommodate children's needs. The whole educational system in Brazil was closed in March. For private schools, it took a week to begin online classes; for public schools, it took much longer. When public schools returned, they first sent books to students. Students needed their parents' help to learn and solve exercises. After a while, some public schools begin holding classes online. However, a new problem arose: how could students access classes if they did not have good access to the internet?

From school, he has a book to follow up. The CCA sends activities three times a week by the WhatsApp group.—Interview from Heliópolis

Not all families have a top cell phone, internet plan, nor can they afford a plan; there are many issues that we cannot reach all families.—Interview from Heliópolis

She had an online class. She's still taking it, but since I'm looking for a new job, she's kind of thrown in the corner. I say to do it online and she never wants to do it. She doesn't do the lessons; she's a little rebellious.—Interview from Jardim Colombo

I don't even have any strategy, because I don't have much knowledge either. They were saying, "Mom, the school gave a handout, but how can I understand the handout without the teacher's explanation, what am I going to do?" I don't know how to explain, I don't know how to do it, teach how to do it. When they were younger, I could still do it, it was easier, but now....—
Interview from Maré

Despite the challenges, the interviewed women agreed that teachers—especially from the public school—were dedicated and sent messages to the families to check on students and tried to reach them.

Yes, they did. On the cell phone, work arrives every day for them to do at home.—Interview from Maré

They have distance learning. The school sends handouts, material, these things.—Interview from Maré

The teacher passed the material in the group. He studied and then sent it to her.—Interview from Maré

I think it was a partnership that the school and the child and the parents had at that time. So much so that I have help from my mother when we have a craft activity. She brings pasta, she brings a pet bottle, so we create a great activity, and that connected the family and the child.—Interview from Jardim Colombo

We go to school, get some activities. They go through WhatsApp in their classroom, the materials, the pages of the book.—
Interview from Heliópolis

Domestic violence

The final section of the questionnaire was about domestic violence. Reports from all over the world indicate that the levels of domestic violence have increased dramatically during the pandemic. Brazil was no exception. Several NGOs and research institutes have used publicly available data to estimate the increase in violence against women and children.

Living in a *favela* poses additional challenges to women who suffer domestic violence. Usually, they have lower incomes than their husbands. Therefore, providing the minimum income to sustain their children and themselves is more complicated than it is for women who earn better salaries. Houses have fewer rooms in *favelas* than in other neighborhoods. Several interviewees told us that they lived in a house with one bedroom, a living room, and a bathroom. Therefore, there are fewer places to move inside the home and to be left alone or safer.

We included one item that asked about "alone time". For women who used to work every day, being confined in a small home with other people—even people who belong to the same family as well as parents, parents-in-law, children-in-law, and other relatives—could be very stressful. Their answers indicated the challenges:

For me, it's been very difficult. So, there is the moment when you are working, when you have friends, you talk, you laugh; now, with this pandemic, you are more isolated at home. You have no contact with other people you would like to have, to go out for a while, to reflect; you can't do it. But what remains...only television and home.—Interview from Heliópolis

I have no time because I am locked in the room and they knock on the door; I am outside and they are calling me.—Interview from Jardim Colombo

I know how it is. I would prefer to be working, to give a little distance and also go out a little, to get some air. Once in a while I feel like being alone, go there, go somewhere and leave me alone here a little.—Interview from Maré

With the lack of time alone, the women reported an increase in sadness (some referred to depression) or irritation with their husbands or children. We asked them about increased alcohol or drug consumption, but most of them reported not using any of the alternatives. In Brazil, it is common to use herbal teas to relax. Many interviewers told us about increasing their consumption of herbal teas during the pandemic. Some of them told us that they felt the absence of contact with other women, but the majority said that they could have contact by phone and yet did not.

One thing that appears to generate conflict within families is the prevention of contact with coronavirus. A significant number of the interviewees told us that their husbands called them "crazy" because they were concerned with contamination. Men continued to play soccer or drink with friends in bars, while women opted to stay at home with children and elderly persons. This discordance was the main subject of attrition among couples.

An increase in discordance about a hot topic and being confined in small places with no options to protect themselves and no financial means to go to other places could increase domestic violence. Therefore, we asked the women about this topic, beginning with their husbands' insistence to have sexual relations and, finally, with direct questions about discussions, offenses, and physical violence.

Few women reported an increase in sexual relations. Those who did said it was a consensual decision. More women reported having difficult discussions with their husbands. When asked about domestic violence, 21% of the women interviewed (30 of 141) told us they suffered some type of violence⁵³. Mostly, they reported physical aggression; however, some of them recognized psychological and verbal violence too.

In addition to these reports, a significant number of women said they knew someone who suffered domestic violence. They usually knew about these cases from talking with friends or watching TV. The usual justification was that men could be more aggressive because they were at home more frequently and could not relate too closely to their wives and children.

Some of them told us about cases in the community. The point they have in common was that in their experience and knowledge, men who practice violence against their wives or girlfriends are not punished by the law.

In fact, she even denounced him about six times. She already said that she filed a complaint, that there was already not only beatings but hurtful objects, knives and everything, so she already said that she complained. He even disappeared for a while, then came back. But, as I said, they always come back and stay together.—
Interview from Heliópolis

⁵³ They told us about violence before and during the social isolation period.

I would not go to the police station because the police station would just put his hand on his head and let him go. And then he would come with a gun and owe me a shot in the face, and he would stay for that very reason.—Interview from Heliópolis

"Because the laws of Brazil suck. Nowadays, the woman makes a complaint, and another day the woman ends up dead on the street.—Interview from Heliópolis

(...) because we live in a periphery, a community, this relationship with the aggressor is a little difficult because if we involve the police, the police can hardly be entering a community for both reasons. So yes, he will go unpunished.—Interview from Jardim Colombo

I don't know if there would be punishment. The number of people who complain about their companions is measured; how do you speak? Protective distance. And the woman ends up being murdered and her husband released, and she ends up losing her life and that measure didn't help. So I don't think so.—Interview from Maré

Almost all of the interviewees told us they knew the law and the available resources. They knew about *Lei Maria da Penha* (a law that protects women from domestic violence), the possibility of denouncing their aggressors in a specific police station for women, and the number to call directly for help (180). However, the only help that they saw working was from the parallel power in the *favelas*.

At the police station itself, they thought she would seek parallel power to resolve it.—Interview from Maré

This kind of confidence that does not belong to the state's power is fragile. When the police indicate that parallel power is part of the solution, it is easy to understand why the population does not believe in the law.

At the same time that these persons "protect" the residents, they also impose restrictions on their lives. The belief that police do not fulfill their obligations to follow the law leaves the *favela's* residents without protection. It legitimizes the distortion in

which the law is enforced only for a few people and the feeling that the *favela's* community is neglected and forgotten by the public power.

Finally, when they look for support from the police, many of them report that they are not listened to. One woman told us that, when she reported the violence (she was beaten with a broomstick), the policeman asked her, "Only this scratch?" and did not fulfill the official report. Others told us that at the police station, they were asked why they were making the complaint or if they were certain about doing so because the "father of your children may be arrested".

All these stories reinforce the feeling of impunity. They send the message that violence against women is not only common but is also naturalized in Brazilian society. Although many awareness campaigns have been conducted, domestic and gender violence remains a very large problem in Brazil. Women know about laws and their rights; however, without full support from the police, the government, and society, this problem will not end soon enough.

FINAL CONSIDERATIONS

This paper uses in-depth interviews conducted with 150 women who were residents of large *favelas* in São Paulo or Rio de Janeiro to understand how the COVID-19 pandemic affected their lives. The interviews were conducted at the end of 2020 (October to December). We found interesting results in three areas: paid work, unpaid work and care, and domestic violence.

First, women were first and more directly affected by the unemployment that originated from the pandemic restrictions on circulation in the city. Almost all of the interviewed subjects used to work directly with the public. They were domestic workers, hairdressers, teachers, and salespersons. Without the possibility of direct contact with other people, most of these jobs could not be performed. This effect is distinct from that observed in other socioeconomic groups, who had the opportunity to work remotely.

Second, women living in the *favelas* are as much or more overwhelmed with care work than women living outside them. The school recess or online classes put a heavy weight on women with young children. These mothers not only had to deal with their issues (fear of being contaminated by the coronavirus, stress about losing their jobs, uncertainties about relatives' health) but also had to deal with entertaining their children,

being with them to do school tasks, and going to school to get materials to allow the children to continue studying. Undoubtedly, the division of housework was rethought in each residency. However, much more must be discussed and done. Socially, it is accepted that house tasks are a female responsibility, and it is difficult to convince other residents to do more than "help" when asked.

Third and finally, domestic violence is a hot topic not only in the *favelas* but also in the country. The population represented by these interviewed women is aware of their rights and their alternatives when they experience this kind of violence. However, the more significant issue is the lack of confidence in the state's power. They do not believe that the police will help them in the way they need—i.e., keeping the aggressor far from them or fully fulfilling their needs by arresting the aggressor. They are also not entirely convinced that the state cares about these issues. When they go to the police station and the police question whether the violence happened or what they did to provoke their partners, it is difficult to believe that they would receive the attention they deserve. Blaming the victim and not protecting victims from aggressors are issues that continue to occur in Brazil.

A profound change must happen in several layers of society. The labor market forces, combined with the household distribution of power, could transform domestic violence in Brazil. None of these issues has direct and straightforward answers. However, the lack of answers now should motivate the debate to continue and to go deeper.

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APPENDIX 1: Interview script

PRECONTACT

- 1. Invite the interviewee to participate in the survey via phone or WhatsApp.
- 2. Interviewee accepts. I inform the interviewee about the objective of the research, which will be recorded and which consists of three blocks of questions about work, aspects of care and gender violence. Some questions are direct and others will be answered in the intervieweee's own words. The process usually takes 50 minutes to 1h and 10 minutes.
- 3. I collect the interviewee's full name and RG before the interview and record both in an Excel spreadsheet (Drive).

Presentation

• Inform the interviewee that they will read the consent form and that they must accept or not and state their full name.

Good morning, are you so-and-so?

My name is (say your name) and I am a researcher at (say the ONG you represent—Redes da Maré, Fazendinhando or De Olho na Quebrada). Is that correct?

You so-and-so, we're getting in touch with all the women who received our food basket during the Eye on Corona campaign. As you received our basket, we are contacting you to research how the lives of the women of Maré/Heliópolis/Jardim Colombo were during this COVID-19 pandemic. This research is carried out in partnership with a college from São Paulo. Can I do this interview with you? (If so, could you do it now? If so, but you don't have time at the moment, would you have another time or another day so I can return and have this conversation?)

My name is (interviewer name). This is research from the college where I work, called Insper, which is in São Paulo. Together with another 3 researchers, we want to understand how women's lives were during the COVID-19 pandemic. Do you agree to participate in this interview?

It is important that you know that your personal data will be kept confidential and that at any time—if you feel uncomfortable with any questions—you may choose not to answer and that if you want to end the interview before finalizing it, just let me know.

I also want to reiterate that assistance is guaranteed throughout the research and you will have free access to all information and clarifications about the study and its consequences.

Given these guidelines and the objective of the study, can I count on your free consent to participate, being fully aware that there is no economic value to be received or payable for your participation?

(IMPORTANT TO RECORD THE CONSENT SIM. ASK THEM TO STATE THEIR FULL NAME)

AXIS 01: DEMOGRAPHIC CHARACTERISTICS OF THE INTERVIEWEE

- 1) Could you tell me your full name?
- 2) Which favela do you live in?
- 3) What's your date of birth?
- 4) How do you define your color or race?
- 5) How do you define your marital status? VIUVA; single/divorced/lives with partner
- 6) How many people live with you? What is your relationship to each of them? How old are each of them?
- 7) Did you go to school? Until what year? Did you finish this last year?
- 8) After school, did you take any other course(s)? What was their purpose? Did you complete them?
- 9) Do you have any religious beliefs?

AXIS 02: WORK CHARACTERISTICS

1) **Did you** work before the onset of the pandemic?

If YES, proceed to case 1 or case 2:

Case 1: works for someone (maid):

- 2) What was your job?
- 3) Did you have a signed license?
- 4) **How many hours a day** did you work?
- 5) How did you commute?
- 6) How long was your commute?
- 7) How much did you earn?
- 8) Did you receive transportation vouchers or other benefits?
- 9) How was your work with the arrival of the pandemic and the request for social isolation in Brazil? Could you tell me a little bit more about this?

Case 2: works independently:

- 1) How is your independent job? How was your trajectory to it?
- 2) **How many hours a** day did you work before the pandemic?
- 3) **How did you commute**? How long was your commute?
- 4) **How much did you bill** on average per month?
- 5) How was your work with the arrival of the pandemic and the request for social isolation in Brazil? Can you tell me a little more about this?

If you still have a job:

- 6) Since then, do **you detect any change in your job/business?** If so, what?
- 7) Have your working hours and/or salary decreased? By how much?
- 8) Do **you feel comfortable commuting to work?** What route do you take (public transport, individual transport paid by bosses, relative takes by car or motorcycle, etc.)?
- 9) What do you expect with **respect to your job/business** for the next 12 months?

If NO, proceed to case 1 or case 2:

Note: two cases may occur—case 1: was dismissed/case 2: had no job before the pandemic

Case 1: You were fired or resigned:

- 10) How did the firing or resignation occur? What reasons were given?
- 11) Would you like to be working now?
- 12) Have you been looking for another job? How?
- 13) What would an ideal job look like for you in terms of type of work, hours, distance from home and other important factors at this time?

Case 2: Had no job before the pandemic:

- 14) Were you not working for some specific reason or was it your own desire of yours not to work at that time?
- 15) Would you like to be working now?
- 16) Have you been looking for a job? How?
- 17) What would it an ideal job for you in terms of type of work, hours, distance from home and other important factors at this time?

For all:

- 18) In your family (people who live in your home), how was the question of money during the pandemic period?
- 19) Did you or someone else in your home need to change anything about the life they led before (ex: another job, stop paying any bill, etc.) due to the pandemic?
- 20) Have you **signed up to receive emergency aid during this period?** If so, did you receive the aid?

AXIS 03: CAUTIONARY ASPECTS

- 01) Who was **responsible for taking care of** the house (and the children, if applicable) before the onset of the pandemic? Was there any division of chores at home?
- 02) With the pandemic, has anything changed in the way you divide services? If **the people who live with you had to help more, will you** tell me how that has changed? Have you had compliance or complaint from people?
- 03) What do you think has changed? Have you been sleeping more? Did you feel more anxious? Were you closer to your parents or family members? How was that for you?
 - During quarantine, do you feel that you slept the same number of hours you slept before?
 - Do you feel like you're doing more or less work?
 - *Did you have anyone's help?*
- 04) Would you prefer a different arrangement in terms of taking care of the house (and the children, if applicable)?
- 05) **Do you care for anyone who is sick, elderly or disabled** at home? If so, have you experienced any changes in this care during the pandemic? What?

If you are under 15 years old:

- 06) How do you see the behavior of children during this period?
 - **a.** Do they have any kind of online class?
 - **b.** Is there **any support from the school** during the period?
 - **c.** What has the family done to help the children in these months? Did you study with your children, for example?
- 07) Did you ever **take care of any other children in the family** or children of neighbors so parents could work or take care of other people? If so, how many times?

AXIS 04: GENDER VIOLENCE.

 Now let's get into the last block of questions with issues related to gender violence. I know it's a sensitive subject, but it's important to talk about, mainly because we have learned that during this period of isolation many women have been victims of domestic violence. But remember that you only answer the questions you want to.

Time spent with men in general

1) During the pandemic, did **you spend more time with the men in your family or where you live?** (companion, father, father-in-law, brothers, sons, brothers-in-law, son-in-law, neighbors, or others) If so, with which? *List*.

If YOU DO NOT live with men, proceed to Question 17

- 2) (explore more) Did you feel any change in the way they treated you?
- a. If so, can you give me some examples?
- 3) **Have you noticed any kind of** swearing, intimidation or even threats that they had never made before? Can you give me an example?
- 4) **Did you try to stay alone longer**—whether taking a little longer in the shower, going to bed earlier or waking up later, or something—just to avoid having to spend more time with them? If so, how did it go?
- 5) **Did you have to take some** kind of medicine, tea, alcohol or use some drug to be calmer and patient with them? How was that?

If you have a COMPANION with whom you live, proceed to question 06. If NOT, GO to question 17.

- B) Daily relationship with partner (if applicable)
 - 6) **Did your partner keep his job or** was he unemployed during the pandemic?
 - 7) During that time, did he behave differently? If so, how?
 - 8) **Do you think something caused his behavior to change?** If so, what could it have been?
 - (Enter how the person handles protection)
 - 9) What does **he think of your concerns** and the way you protect **yourself from COVID-19?** How has this affected the routine?
 - 10) Do you think he is also taking care of himself?
 - 11) How does he see the fact **that you're helping the community** cope with the pandemic? (adapt)
 - 12) During the quarantine, did you have **any kind of argument you've** never had before? If so, could you talk about it?
 - 13) If there was an argument, did it ever **end with a threat of separation or** abandonment or even with verbal or physical violence?
 - 14) Do you think **his insistence on wanting to have a (sexual) relationship with** you during this period increased or diminished? How did you feel about that?
 - 15) Did you ever argue **or fight over any extra expenses** you had during this period?
 - 16) **Do you think he felt more or less control of the household** finances? How did you handle that?

C) Lack of routine private time

- 17) How was it for you those moments or did you feel like you could ever **be** alone, whether you were at home, on your way to work or going somewhere else?
- 18) When could you normally meet other women in your family, your friends, your coworkers, or even your boss, did you feel that it was a time when you could complain, vent, or even ask for help in reporting some aggressive behavior?

- 19) Did you ever think about going to someone's house known to have a little more privacy or security? If so, how was that?
- 20) Did you **need to change the use of some room,** move some furniture or improvise **to** have more privacy or security in **your home?**

D) Feeling of impunity

- 21) Do you suspect or know any women who have experienced or are experiencing domestic violence during this period? Do you have any contact with her?
- 22) In this pandemic period, do you think that men feel freer to act violently against women and children indoors?
- 22) In your opinion, can friendship between men serve only to cover up the violent acts they do?
- 24) If you felt threatened or intimidated or if you were assaulted, did you feel that you were prevented from reporting or even commenting on what happened because you were afraid of suffering even more aggression?
- 25) **Do you distrust** or know people from the family or community who are aggressors against women or children but who, even when they are denounced, continue to practice **violence**?
- 26) Do you suspect that if an aggressor is reported today he would go unpunished (free)? Why? Where do you think the law will be the most respected?
- 26) Do you think that you have all the information you need if you had to report an aggressor today?
- **25) Would you like to receive help from** this interviewer to report an aggressor today?
- IF YES, I ask you to check whether you are in a safe condition and feel free to report the case to me and authorize me to make a referral to the authorities.

Submission and Thanks

IF NOT, do you want to reconsider any of the answers given? Do you have any questions or observations?

If you don't have an interview, your participation is now over. Do you agree to allow us to use your answers to the survey without identifying your name and address?

We are also interviewing other women, analyzing the data and publishing the study. Would you be interested in having access to the final research results? If yes, when she's ready, can we get in touch and send you a summary?

I thank you very much for your time and for agreeing to participate in the interview, thus collaborating for a greater understanding of how women's lives were during the COVID-19 pandemic in Brazil.