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COVID-19 PANDEMIC CASE STUDY: BRAZIL



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In 2018, she received an extraordinary doctoral award by the University of Salamanca, an award granted the best doctoral theses defended in the academic year 2016-2017. Nowadays, she works as a researcher and journalist. She has collaborated with the NGO Repórter Brasil, the National Confederation of Workers in Agriculture (Contag) and the National Confederation of Rural Salaried Employees (Contar). Nataly Foscaches is a specialist in social sciences, social and environment issues and traditional societies.

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Overview

Covid-19 in Brazil



211 million

Population

World Bank, 2019

<https://data.worldbank.org/indicator/SP.POPTOTL?locations=BR-XK-UA-MA-NG-PH>

GDP per Capita

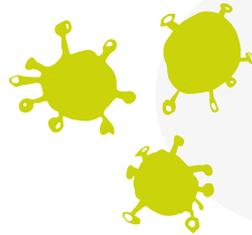
(in US Dollars)

8,717 \$



World Bank, 2019

<https://data.worldbank.org/indicator/NY.GDP.PCAP.CD?locations=MA-UA-XK-BR-NG-PH>



Covid-19 Cases

5103408

WHO, November 30th, 2020

<https://covid19.who.int/region/afro/country/ng>

Covid-19 Cases

per 100 000

2418.11



WHO, November 30th, 2020

<https://covid19.who.int/region/afro/country/ng>

Covid-19 Deaths

per 100 000



82.51



John Hopkins University, November 30th, 2020

<https://coronavirus.jhu.edu/data/mortality>

Fatality Rate



2.7%

John Hopkins University, November 30th, 2020

<https://coronavirus.jhu.edu/data/mortality>

ICU beds

per 100 000

25



Health Management

<https://healthmanagement.org/c/icu/IssueArticle/critical-care-in-brazil-1>

1. The Pandemic Opens Wide Problems

The Covid-19 pandemic in Brazil comes in the wake of the political polarisation that was accentuated in the 2014¹ presidential elections and the scientific denialism used by the current government of President Jair Bolsonaro. Experts estimate that the way the president handles the most serious health crisis in recent decades is a reflection of this scenario.

'The denial of science is a problem that already existed in this government with the denial of global warming, the denial of deforestation in the Amazon, which led to the resignation of the president of the National Institute for Space Research (INPE),² Ricardo Galvão. With the pandemic, it got worse. Now added to it is the denialism of social isolation, the use of masks and the spread of false news about miraculous medicines', warns a doctor in microbiology and president of the Brazilian Institute of Science, Natalia Pasternak.

The risk of the collapse of the health system and the strong economic recession caused by the pandemic aggravated political polarisation and, with it, the dispute for narratives. 'For some people, there is no epidemiological risk and for others there is an absurd epidemiological risk. This gives a bad feeling', explains a labor judge in São Roque (Sao Paulo) and director of the National Association of Labor Justice Magistrates (ANAMATRA), Marcus Barberino.

For Barberino, with the lack of national coordination during the pandemic, the feeling of lack of belonging of Brazilians to their social group grew. This factor also interfered in the adherence to health rules, which, consequently, contributed to the increased vulnerability of Brazilian society to the disease. 'It is very common for you to find people complaining about each other. Claiming that the others are not wearing a mask and are not doing anything. So, you look around and see people wearing masks. Even those who are concerned about others can't come around with belonging. It is not for nothing that Brazil has one of the highest mortality rates due to Covid-19', he argues.

According to information from [Johns Hopkins University](#) as of 12 November, Brazil is the country with the third-highest number of people infected with Covid-19, surpassing the mark of five million cases, behind only India and the United States. Regarding the total number of deaths, Brazil occupies second place, accounting for 163,368 deaths, with only the United States ahead.

1.1. Pandemic and Informality

The health crisis has also reinforced inequality in the labor market. According to the Continuous National Household Sample Survey (PNAD), carried out by the [Brazilian Institute of Geography and Statistics \(IBGE\)](#),³ released on 30 October, unemployment in Brazil reached 14.4 per cent in the quarter ended in August 2020, the highest rate recorded in the history of the survey, which started in 2012. The employed population, though, corresponds to 82 million people. Of this total, 30.7 million work in the informal sector. This number corresponds to the sum of workers without a formal contract, domestic workers without a formal contract, employers without a National Register of Legal Entities – CNPJ and auxiliary family workers.

These figures contrast with the results of the same survey by the [IBGE](#), published on 31 January, which covered President Jair Bolsonaro's first year in office, 2019. That year, 94.6 million people were employed. However, of this total, 41.1 per cent were dedicated to informal work, or 38.4 million people. This information indicates that there was an increase of employed people due to the growth of informality. Even so, the federal government sold these figures as an 'achievement'. It is worth mentioning that in Brazil informal workers have no guarantees when it comes to labor rights (Guarantee Fund for Time of Service – FGTS, maternity leave, vacation, a 13th-month of salary, health plan, etc.).

Without protection for unemployment or a significant loss of workers' earnings, the Brazilian state created emergency aid during the coronavirus pandemic. Initially, the government of President Bolsonaro proposed the payment of five instalments of approximately US \$37.00⁴ (= R\$ 200, exchange rate of November 11, 2020) to informal workers, unemployed individuals, individual taxpayers of the National Institute of Social Security (INSS)⁵ and Individual Microentrepreneurs (MEI). However, under pressure from parliamentarians, the value increased to around US \$93.00.⁶ In order to not lose the lead in the matter for the National Congress, Bolsonaro finally suggested around US \$111.00.⁷ Solo mothers (women entirely responsible for raising children) were entitled to five instalments close to US \$222.00.⁸

With the increase in his popularity, which specialists credit mainly from the payment of emergency aid, and the economic crisis generated by social isolation, necessary for the containment of the coronavirus, the president decided in September to extend benefits until December, but the value of the instalments was reduced to half. In this case, the amounts were approximately US \$56.00⁹ and US \$111.00¹⁰ for single mothers.

According to Pablo Ortellado, professor of public policy management at the University of São Paulo (USP), the pandemic had a double effect: 'First, inequality has increased, since informal, less paid work has almost disappeared. With the advent of emergency aid, this inequality has decreased: all figures show that there has been a reduction in poverty.'

Studies released by the Institute for Applied Economic Research (IPEA)¹¹ indicate that the emergency program has temporarily reduced inequality: 5.5 million Brazilians had an increase in family income and 23.5 million did not fall into poverty ([newspaper Folha de S. Paulo](#)).¹²

With the success of this measure, the federal government considered the creation of Renda Brasil, a social programme that would distribute about US \$56.00¹³ per month to vulnerable people, replacing Bolsa Familia, an income distribution program that pays, on average, US \$36.00¹⁴ per month to very poor families. However, the president gave up on launching it on the grounds of trying to avoid cuts in other spending. Then, he encouraged his support base in the National Congress to create the programme under another name, Renda Cidadã, with an eye to maintaining the popularity brought by the emergency aid.

1.2. Work Overload and Violence Mark the Confinement of Brazilian Women

'Without stopping', that is how life in the pandemic of more than half of the Brazilian population is summarised. 51.8 per cent of the Brazilian population are women, according to information from PNAD conducted by IBGE in 2019. The confinement in homes, the result of social isolation measures, aggravated the sexual division of labor and ended up overloading them. 'With people at home, women had to work harder: cleaning work increased, and care work also intensified. I have many reports of women who spend a day shift accompanying remote classes with children and another with domestic work and care for the elderly', warns professor Maira Kubik Mano, from the Department of Gender and Feminism Studies at the Federal University of Bahia (UFBA).

The lack of an equal environment within Brazilian homes also affected the scientists. According to the [Brazilian movement Parent in Science](#), between April and May, 56.4 per cent of women without children submitted scientific articles as planned, against 76 per cent of men in the same condition; 47.4 per cent of women with children presented their research, compared to 65.3 per cent of men in the same situation. 'They turned to the domestic economy. Someone had to maintain outside activity. Apparently, it seems that the man was chosen or imposed himself', says judge Barberino.

In addition to overload, domestic violence has increased. According to the Sao Paulo Public Security Secretariat ([Folha de S. Paulo](#)), the military police registered a 19.8 per cent increase in calls for help for aggression at home in that state between March and April.

1.3. Covid-19 and the Vulnerability of Indigenous Peoples and Their Traditional Territories

According to the [2010 IBGE Census](#), the indigenous population in Brazil is 896,917 people (0.47 per cent of the total population) in 305 indigenous ethnic groups (and 274 languages). Of this total, 324,834 live in cities and 572,083 in rural areas. The indigenous lands, in which a large part of the communities live, have the most preserved biomes.

According to a doctor in anthropology and a specialist in the indigenous issue who chose not to be identified for fear of reprisals, the indigenous population in Brazil can be divided into two groups: the Amazonians and the non-Amazonians. 'These communities have several characteristics in common, but also several different points. We have 50 per cent of this population in the Amazon occupying 98.5 per cent of the available indigenous lands. On the other hand, we have non-Amazonian indigenous people, confined to small concentrations of land. Most of the time, fighting to retake their territories', he explains.

At the expense of the lives of traditional societies and the destruction of the ecosystem, the Bolsonaro government, represented by the Ministry of the Environment, Ricardo Salles, has been fulfilling the proposals of the 2018 election campaign: it eases environmental legislation, authorises the economic exploitation of indigenous lands and supports activities related to environmental crimes, such as mining. 'Since the campaign, the inspection has been attacked with the excuse of generating jobs. This series of invasions takes place without inspection and with government encouragement', says the expert.

With the arrival of Covid-19 and the focus of the press and society on the disease, the federal government has intensified its attacks on the environment and traditional societies.

The Ministry of the Environment and the Special Communication Secretariat (Secom) were contacted by the researcher but did not comment.

Non-Amazonian populations continue to experience the problems of confinement in small tracts of land: poverty, violence, alcoholism, suicide, are among other problems. With no space for activities related to subsistence, they struggle to regain their traditional territories. Another portion survives on salaried jobs, generally underpaid, and outside their communities. Even so, President Bolsonaro keeps his promise not to demarcate any indigenous land and takes measures that weaken the official indigenous body, associated with the Ministry of Justice and Public Security, the National Indigenous Foundation (FUNAI) and the Special Secretariat for Indigenous Health (SESAI), linked to the Ministry of Health.

It is important to highlight that it is FUNAI's responsibility to defend and promote the rights of Brazilian indigenous peoples, including demarcating and protecting the territories of traditional indigenous occupation. SESAI is responsible for coordinating the national healthcare policy for indigenous peoples.

This situation facilitated the contamination of 39,055 indigenous people by coronavirus and generating 872 deaths registered as of 12 November, according to the [Articulation of Indigenous Peoples of Brazil \(APIB\)](#).

FUNAI and SESAI said in a note that they consider as positive cases only those registered in the Covid-19 Epidemiological Bulletin, provided by the 34 health teams under the secretariat. The document does not include indigenous people from unregulated cities or territories.

'Regarding the Covid-19 pandemic, FUNAI considers the SESAI figures,' said the foundation. 'The APIB data shows the sum of the data from SESAI, from the APIB committee and also accounts for the self-declared indigenous population that live in the cities', adds SESAI. According to the latest [Epidemiological Bulletin of Covid-19 \(12 November\)](#), from SESAI, 33,274 cases of coronavirus among indigenous people were confirmed and 484 deaths registered. FUNAI says it has invested more than US \$6 million¹⁵ to combat Covid-19 in indigenous communities, in addition to US \$2 million¹⁶ to curb illegal activities. SESAI, on the other hand, claims to have been developing strategies to protect, diagnose and treat the new virus since January.

In August, for the production of a report for the [NGO Reporter Brasil](#)¹⁷ (4 August), the researcher spoke with indigenous representatives, legal professionals, social organisations and had access to a series of images distributed in WhatsApp groups that revealed that in reality the indigenous communities of Mato Grosso do Sul (the state with the second-largest indigenous population in the country, 80,459 indigenous people) were protecting themselves on their own, with the support of civil society, and that the assistance of these bodies exists but is insufficient.

Indigenous populations from other parts of the country also suffer with little attention from FUNAI and SESAI. So much so that on 8 July APIB obtained an injunction at the Supreme Federal Court (STF), for an Action of Non-Compliance with Fundamental Precept (ADPF) 709. The court upheld their claim that indigenous peoples are especially vulnerable to the pandemic and that there are signs of accelerated expansion of Covid-19 as well as insufficient action promoted by the federal government to contain the disease among these communities. As a result, the Supreme Court imposed the adoption of measures to protect indigenous peoples under the government of President Jair Bolsonaro. The measure was confirmed by the STF plenary on 5 August.

1.4. The Pandemic and the Black Population

Most of the Brazilian population is black, 56.10 per cent, according to [IBGE](#) (a percentage that includes both black and brown categories). This is also the portion of society that has the highest mortality rate from the coronavirus in Brazil. According to information from the Ministry of Health, released by the [news portal G1](#)¹⁸ (11 April), one in three deaths by Covid-19 is a black person. 'This means that there is at least one person who does not have immediate healthcare to know the severity of the disease. The pandemic is exacerbating race and gender inequalities', explains Thiago Amparo, professor of law at the Getulio Vargas Foundation (FGV) in São Paulo.

According to the same report, 67 per cent of SUS users – the country's free public health system – are black. The majority of patients suffer from diabetes, tuberculosis, hypertension and chronic renal failure, diseases that increase the chance of contracting severe versions of Covid-19. Another aggravating factor is the economic vulnerability of these Brazilians. 'A lot of news has been published showing communities that lack drinking water or basic sanitation. This will influence the issue of Covid-19', adds Amparo.

As reported by [Agencia Lupa \(November 20\)](#),¹⁹ poverty affects the black population more. In 2018, 15.4 per cent of white people lived on less than US \$5.50 a day in Brazil. Among black and brown people, the percentage was 32.9 per cent. Black people are also the majority of the unemployed population and informal workers, [47.3% \(IBGE\)](#). 'Dressmakers, hairdressers, all these activities that employ or are managed by black people were devastated by the pandemic', the professor at FGV laments.

In other words, the black population, which has a significant portion of its members in activities of lower remuneration and informality, now faces greater difficulties with the pandemic, often having as its only alternative the public service, which already has problems and difficulties even in normal times.

2. Brazil's Lack of Preparation for Facing the Pandemic and the Role of SUS

According to a Brazilian diplomat who requested anonymity, at the beginning of the pandemic, Brazil went through two remarkable moments: first, the lack of supplies and problems to buy them from other countries; and second, the export ban on various items to combat the virus. 'There was a lot of difficulty in purchasing supplies such as Personal Protective Equipment (PPE) and lung ventilators. There were difficulties with manufacturers (the pharmaceutical industry) to comply with the standards. Sometimes, there was a purchase with a company. Suddenly, you received the news that she would no longer deliver because another country had made a better offer', says the diplomat.

Against the guidelines of 10 April of the Organization for Economic Cooperation and Development (OECD), Brazil, as well as the countries of the European Union and the United States, temporarily prohibited ([law number 13,993](#), which came in force on 24 April) the export of medical, hospital and hygiene products considered essential to the fight against Covid-19. 'It was very difficult for Brazil to import things from the US, from Europe. Brazil approved the same type of law as they did. At a certain point, a certain nationalism prevailed in the countries', the diplomat notes critically.

On 1 July, the Foreign Trade Secretariat ([Secex](#)) eased the ban and released a list of essential products to fight the coronavirus that can be sold to other countries, but with a special licence.

Sought during the investigation, the Ministry of Economy pointed out that Brazil and 79 other countries restricted the export of products that were essential to combat Covid-19. Regarding law 13,993, it stated: 'The impediment to exports has never been absolute, considering that exceptional cases can be concretely evaluated and authorised by the government within the legal limits established by the National Congress.'

2.1. The Role of the Unified Health System (SUS) in Relation to Covid-19

Despite the shortage of supplies in the hospital supply chain, all experts heard praised the strength of the Unified Health System (SUS) in combating the virus.

'SUS is one of the greatest prides of Brazil. If we didn't have SUS, we would be in an incredibly worse situation', praises a doctor in microbiology, Natalia Pasternak. 'It went

through a huge test. It went well, given the circumstances already known. Brazil has a huge needy population that would never have access to treatment if there was no SUS', adds the diplomat.

With more than 30 years of existence, SUS, implemented during the government of ex-president Jose Sarney,²⁰ is recognised by the World Health Organization (WHO) as the largest free and universal healthcare system in the world. It is overseen by the Ministry of Health, by state and municipal departments. Among the highlights of the public health system is the National Immunisation Programme, which guarantees free access to most vaccines recommended by WHO.

According to [IBGE's 2019 National Health Survey \(PNS\)](#), a private health plan in Brazil is a luxury for 26 per cent of the population. In the north-east area, 90 per cent of people have the public health system as their only option.

It is worth mentioning that the Brazilian north-east is the country's historically most deprived area. This is due to historical, climatic and social factors such as income inequality. According to [news portal G1 \(6 May\)](#), the same survey conducted by IBGE in 2019 also indicated that the poorest north-easterners lost five per cent of their income, while the richest in the same area gained 14.9 per cent. In Brazil, the share of one per cent of the population with the highest income earned 33.7 times more than the 50 per cent with the lowest income.

The most vulnerable and dependent on SUS are also the most affected by Covid-19. According to [CNN Brasil](#), the City of São Paulo stated in July that the incidence of Covid-19 quadruples among the poorest black or brown people with less education and less monthly income.

Even after the approval of an emergency budget by the National Congress to tackle the pandemic and the efforts of health professionals on the front lines in hospitals, SUS still fails to serve many people infected by the new virus, and also by other diseases, due to ongoing problems: lack of beds in Intensive Care Units (ICUs), respirators, Personal Protective Equipment (PPE), tests, nurses, physical therapists and community agents, in addition to under remuneration of professionals.

According to the [balance sheet of the general budget of the union, carried out by the Institute for Socioeconomic Studies \(Inesc\)](#), the precariousness of SUS is mainly due to the lack of funding for this system, resulting from the freezing of public spending for 20 years, established by Constitutional Amendment 95/2016. The new tax regime does not take into account the existing deficiencies of the system, nor the growth of the population, and consequently, the increasing needs in the health field, let alone the arrival of Covid-19.

'Although it is going through a period of loss of resources, there has been a political strengthening of the importance of SUS. It is possible that this will change after the pandemic', says professor Ortellado. On its website, the [National Health Council](#) warns of the risk of having the budget of the public health system reduced by US \$6 billion²¹

in 2021 after receiving emergency resources during the pandemic, or having part of its services privatised.

2.2. Little Testing, Little Covid-19 Tracking

Despite the Ministry of Health's 'Diagnose to Take Care' programme, which seeks to assess the behavior of Covid-19 in Brazil by conducting tests and tracking contacts, the federal government's strategy is moving slowly. 'We tested very little and screened even less', summarises Natalia Pasternak.

In July, Brazil occupied the 50th position in the world ranking of testing, according to data from the University of Oxford ([UOL](#),²² 3 July). According to the epidemiological bulletin corresponding to the period from 27 September to 3 October, released by the Ministry of Health and the Health Surveillance Secretariat, in September Brazil carried out an average of 216,856 tests per week. Germany (considered by the WHO as an example of a country that managed to make more diagnoses of the disease) carried out 658,144 more tests a week, according to [DW Brasil \(25 August\)](#).

The sum of tests carried out in Brazil includes two types of tests, the RT-PCR (pointed out as the most accurate) and the serological test. 'The federal government invested a lot in these rapid tests in a populist act just to show the population', says Pasternak. By September, the Ministry of Health had distributed 8 million serological tests and sent 6.43 million RT-PCR tests to the public network of states and municipalities. However, according to the newspaper [O Estado de S. Paulo](#)²³, on 4 September the total of RT-PCR exams sent was equivalent to only one third of the 22.9 million tests acquired by the federal government. Apparently, they did not have enough tools to administer the tests.

According to the diplomat, another factor that causes underreporting of cases and hinders the tracking of contagions in Brazil is the difficulty of processing tests, due to the lack of infrastructure in public laboratories. Faced with this problem, the federal government in partnership with the country's leading diagnostic medicine company, Dasa, announced the creation of the Emergency Diagnostic Center for Covid-19. The company donated the processing of up to 3 million RT-PCR exams.

To inform the population and assist in the tracking of contacts with coronavirus, on 28 February the Ministry of Health made available the [Coronavirus SUS](#) mobile application. Ortellado, however, comments that the government 'is not taking the initiative very seriously', and it was not widely publicised.

When questioned, the Ministry of Health did not respond.

3. The New Normal and Its Challenges

3.1. Economic and Social Impacts

Despite the success of the emergency aid, no social programme has yet been planned to replace it in 2021. The lack of this benefit for many Brazilian families, it seems, will be devastating. 'The emergency income programme was very important, the poorest were more protected. When we withdraw the aid, we will see the size of the gap', warns labor judge Marcus Barberino.

According to the newspaper [Folha de S. Paulo](#) on 8 October, based on projections from Fundação Getulio Vargas (FGV), at the end of the social benefits, 16 million will fall into poverty, especially in the north and north-east. '[The Ministry of Economy] opened lines of credit for large companies, but small and medium-sized companies are not going to reopen. They left those people unattended', warns the labor judge about the breakdown of small businesses (up to 49 employees) in the pandemic.

According to IBGE's '[Pulso Empresa](#)' survey, in the first half of June, with the exception of large companies (with more than 500 employees) that remained open, 39.4 per cent of national companies (522.7 thousand) ended their activities due to the impacts of the pandemic. Almost all, 99.2 per cent (518 thousand) were small businesses and only 0.8 per cent (4.1 thousand) were medium-sized companies (from 50 to 499 workers).

Despite the creation of initiatives to access credit by the federal government, such as the National Program to Support Microenterprises (Pronampe), these loan options proved to be inaccessible to many entrepreneurs. This is because large banks avoid the risk of lending money to smaller companies, maintaining the criteria prior to the pandemic.

In a note, the Ministry of Economy said that the lack of billing proof was solved by sending a letter from the Federal Revenue and the guarantees were provided by the Operations Guarantee Fund (FGO), launched in June.

According to a survey carried out by the [Brazilian Support Service for Micro and Small Enterprises \(Sebrae\)](#), between 27 and 31 August only 22 per cent of small business owners were able to access these credits. When questioned, the Ministry of Economy stated that 2020 'was a good year for credit'. And it added: 'The evaluation

is that Pronampe is a success in its purpose of helping companies in preserving their activities and the jobs that each one of them generate’.

According to [Sebrae](#), 8.9 million micro and small businesses are registered in the country, generating 27 per cent of the Gross Domestic Product (GDP) and 52 per cent of the registered jobs. In Brazil, small businesses are the majority.

3.2. The Effects of the Pandemic in Education

Another inheritance of the pandemic is the delay in student learning. The unpreparedness of education networks, especially public ones, for distance learning was also noted. As in other countries, Brazilian schools suspended in-person classes to contain the contamination by Covid-19. According to the [National Institute of Educational Studies and Research Anísio Teixeira \(Inep\)](#),²⁴ the interruption impacted 47.9 million students in Basic Education alone (early childhood education, elementary school and high school).

Since March, teachers and students have been using digital platforms, messaging applications, publications on social media and institutional websites to maintain classes. Despite the effort, many school-age children and adolescents, mainly from public schools, are at risk of missing the school year. The main reasons for the school delay are the lack of access to the internet, technological equipment (computers and/or cell phones) and the unpreparedness of teachers for remote teaching.

According to the [ICT-Information and Communication Technology-Households 2019 survey](#) from the Regional Center for Studies for the Development of the Information Society (Cetic), 28 per cent (20 million) of Brazilian homes do not have the internet. The Education Cannot Stop study, produced by the Interdisciplinarity and Evidences in Educational Debate (IEDE) group, indicated that only 39 per cent of municipal education departments train teachers for distance activities. In this context, a [survey by the Datafolha Institute](#), released on 19 August, shows that 38 per cent of parents interviewed fear that their children will drop out of school.

3.3. The Race for the Vaccine

The number of deaths from Covid-19 fell in Brazil – a moving average of 432 daily deaths on 28 October. While the first wave of contamination is still reducing, looking to Europe and the United States, which is experiencing its second wave, the country has signed agreements for the advance purchase of vaccines against the coronavirus.

Today, in Brazil, four vaccine tests are underway: that of the pharmaceutical company AstraZeneca, developed in partnership with the University of Oxford (UK), that of the

Chinese Sinovac, that of the North American Pfizer and that of Janssen-Cilag – the pharmaceutical division of the American company Johnson & Johnson. So far, none have proven their ability to immunise against Covid-19. This did not prevent the race for the vaccine from becoming the center of the political dispute in Brazil.

In addition to these bilateral agreements, the country has as plan B its participation in the international consortium COVAX Facility. Led by the WHO, it aims to enable research, development and production of vaccines. 78 countries considered to be economically more developed are participating in the initiative which is financing the search and production of a vaccine, and 92 low-or middle-income nations. The initiative will allow the immunisation of 20 per cent of the most vulnerable population in each country.

According to [Nature magazine](#), the US has already secured 800 million doses of at least six vaccines whose tests are more advanced, and the UK has already purchased around 340 million doses, about five for each citizen of the country. Brazil, on the other hand, signed the contract for the purchase of 140 million doses of vaccines against the coronavirus – 100 million doses of AstraZeneca with the University of Oxford and 40 million for COVAX ([Folha de S. Paulo](#)).

4. Political Effects of the Pandemic

Despite over 160,000 deaths by Covid-19, President Bolsonaro had the best approval rating since the beginning of his term in August. According to the [Datafolha Institute](#), 37 per cent of Brazilians considered the government to be excellent or good. 'It is very worrying that during the biggest health crisis that the country has ever faced, with more than 140,000 deaths, people still support a government that goes against science', says Pasternak.

After the impact of the coronavirus was minimised by the federal government, who wanted to avoid quarantines, the Federal Supreme Court (STF) decided on 8 April that state and municipal governments would also participate in the decisions of the sectors that would open and close at each location. Despite the scientific evidence of the effectiveness of social distancing, President Bolsonaro came to hold governors and mayors responsible for the consequences of the virus ([O Estado de S. Paulo](#)) – using the STF decision in a clearly distorted way, since it didn't stop him from acting, it just shared responsibilities.

According to the [Datafolha survey](#), the government's strategy has worked: 47 per cent of the 2,065 interviewed by the institute did not attribute any blame to the president. 'Bolsonaro has recovered. Everyone thought he would be buried politically, but apparently it is not like that', notes professor Ortellado.

For the experts interviewed, the increase in popularity of the president is also due to the reduction of extreme temporary poverty with emergency aid. As noted by journalist Lucas de Abreu Maia, in [Piauí magazine](#):²⁵ 'People live in reality, not in hypothetical scenarios. The voter only knows here and now.'

In addition to the growing popularity of the president, Ortellado highlights cases of corruption involving government funds to face the first phase of the Covid-19 pandemic. Some more controversial cases resulted in the removal of governors in Santa Catarina and Rio de Janeiro.

5. Multilateral Cooperation and International Partner Organisations

Within the context of the pandemic, interviewees highlighted the actions of the following international organisations (IOs) with Brazil: the OECD, the European Union, the United Nations International Children's Emergency Fund (UNICEF), UN Women, UN-Habitat and in particular the WHO and its regional office for the Americas, the Pan American Health Organization (PAHO).

However, some of these partnerships are threatened. According to the news portal [G1](#), after the president of the United States, Donald Trump, announced the end of his country's relationship with the WHO, on 29 May, President Bolsonaro also threatened to withdraw Brazil from the organisation, due to an alleged 'ideological bias' of the agency.

Although criticisms of the WHO gained more prominence during the pandemic, it is not new that the credibility of these multilateral organisations has been questioned by right- and extreme right-wing governments that criticise 'globalism'. Based on this reflection, the interviewed diplomat foresees changes in the strategic role of that organisation. 'The pandemic has had a very big effect on organisations, especially the WHO. There is a discussion about its role and there are already several proposals for reform', he says. 'There is a consensus that the WHO could do more. Some [European countries] will say that it has no money and others [the US and Brazil] that it is politicised', explains the diplomat.

For him, this 'anti-globalist' wave, which disregards the work of the WHO, is related to the organisation's sources of financing. Almost 80 per cent of the agency's budget comes from donations from private companies and philanthropic organisations (such as the Melinda & Bill Gates Foundation), only 20 per cent correspond to state contributions. Donors, in most cases, direct the donation towards some action without taking into account the priority problems raised by the agency's specialists. 'The WHO was hijacked by these voluntary contributions', says the diplomat.

6. Expectations for Co-operation with the United States and Europe

Like the WHO, the interviewed experts argue that 'no country will be saved until everyone is safe' and that it is crucial to co-operate. 'We need to increase the level of international co-operation without excluding Asian countries and Eastern Europe. We need co-operation that involves health security, the production of medical supplies and local research', believes judge Barberino.

'We don't produce needles to vaccinate people. This requires a change in strategy', warns Barberino. According to the newspaper [O Globo](#),²⁶ the Ministry of Health intends to buy 120 million syringes and needles for the vaccine of Covid-19, 80 million from Brazilian manufacturers and 40 million from the international market. However, the article notes that this amount is insufficient considering the population of Brazil is 211.8 million inhabitants (IBGE).

For the diplomat, obtaining input from Brazil involves reducing prices. 'It is necessary to facilitate access to medicine by countries that have more difficulties by reducing the cost. Brazil buys according to the price', he warns.

But, according to the survey by the Fundação Instituto de Pesquisa Económica (FIPE) and Bionexo ([Folha de S. Paulo](#)), the arrival of the virus in Brazil caused an increase of up to 92.6 per cent in the prices of medicine purchased by hospitals between March and June this year. Amongst the values of the 1,500 types of drugs analysed, the drugs that had the highest cost were used to treat patients with coronavirus.

For Pasternak, in addition to these contributions, European countries and the United States need to engage. 'These countries need to set an example of how to follow science. The United States, as a world power, has set a terrible example, followed by Brazil. Europe, despite the initial behavior of Boris Johnson [prime minister of the UK], has followed science', he points out. 'The countries of the global north could intercede in these negative debates about climate change or the anti-vaccine movement', adds Mano, professor at UFBA.

On the other hand, Ortellado stresses the need for Brazil to establish partnerships to overcome the crisis and reduce inequality. 'We need to recover economically and deal with this worsening social situation. We have to create relationships and partnerships that impact the Brazilian economy', he says.

7. References

- 1 Presidential dispute between Dilma Rousseff (PT) and Aécio Neves (PSDB).
- 2 Brazilian federal institute dedicated to space research and exploration, created in 1961.
- 3 Public institute of Brazilian federal administration created in 1934.
- 4 Equivalent to R\$ 200.00.
- 5 Brazilian government agency, linked to the Ministry of Economy, which receives contributions for maintaining the General Social Security System. It is responsible for the payment of pensions, maternity pay, death pension, sickness benefits, accident benefits, seclusion aid and other benefits.
- 6 Equivalent to R\$ 500.
- 7 Equivalent to R\$ 600.00.
- 8 Equivalent to R\$ 1,200.00
- 9 Equivalent to R\$ 300.00.
- 10 Idem note 4.
- 11 It is a federal public foundation linked to the Ministry of Economy.
- 12 Largest circulation newspaper in Brazil, published in São Paulo.
- 13 Idem note 6.
- 14 Equivalent to R\$ 190.00.
- 15 Equivalent to R\$ 32 million.
- 16 Equivalent to R\$ 11.8 million.
- 17 An NGO whose main purpose is to identify and make public situations that hurt labour rights and cause socio-environmental damage in Brazil, aiming at the mobilisation of social, political and economic leaders to build a society that respects human rights, which is more just, equal and democratic. Reporter Brasil has two main areas of activity that bring together all its projects: Journalism and Research and Educational Methodology.
- 18 Founded in 2006, the Brazilian news portal is maintained by Grupo Globo and is under the command of Central Globo de Jornalismo. The portal provides journalism content from Grupo Globo (Globo TV Network, GloboNews, Radios Globo, CBN, newspapers, O Globo, Extra, Expresso and Valor Econômico, magazines Epoca and Globo Rural).
- 19 Company specialised in fact-checking in Brazil.
- 20 Presidential term: 21 April 1985 to 15 March 1990.
- 21 Equivalent to R\$ 35 billion.
- 22 Brazilian content, products and internet services company of UOL PagSeguro Group. It was considered the fifth most visited website on the iInternet in Brazil in 2017, through the SimilarWeb platform.
- 23 Daily news newspaper, published in the city of São Paulo, and distributed throughout the country. It is part of the main reference newspapers in Brazil.
- 24 Federal autarchy linked to the Ministry of Education.
- 25 Monthly magazine, distributed in the country by the Abril group, which deals with politics, literature, economics, music, architecture, history and football. Its main characteristic is the production of great reports.
- 26 Daily Newspaper. It is part of the Globo group, which includes Globo radio and Globo television network. Distributed throughout Brazil through subscription.

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