



SOCIAL REPRESENTATIONS OF MOTODELIVERERS ON COVID-19

Antônio Isac da Silva*
Paulo Ferreira Pinto**
Cristina Arreguy-Sena***
Laércio Deleon de Melo****
Isabela Verônica da Costa Lacerda*****
Tayene de Oliveira Souza*****
Paula Krempser*****

ABSTRACT

Objective: to present the characterization of motodeliverers and apprehend their social representations about covid-19, prevention and transmission. **Method:** quantitative-qualitative research of the descriptive type outlined in the structural approach of Social Representations. Held in 2022, on a public road of a city of Minas Gerais, with motorized delivery. The inducing terms (covid-19, covid-19 prevention and covid-19 transmission) were mentioned verbally and five words were requested. The characterization data were treated by statistics (simple, percentage, centrality and dispersion) and the evocations, by prototypical analysis (EVOC) and validated by the similarity test by co-occurrence (Iramuteq). The results were presented in a table of four houses and community graph. The ethical requirements were met. **Results:** the social representations were objectified by "hospitalization", "mask" and "droplets", respectively confirmed by the co-occurrence test. There were common/approximate cognemas between the quadrants: "vaccine", "mask/(without)mask-use-incorrect", "alcohol-gel"/"alcohol"; and "hygiene"/"non-sanitized-hands". **Final thoughts:** social representations of the motodeliverers give visibility to vulnerable and susceptible to illness social group, essential workers and socially engaged in the pandemic, and adds new knowledge related to the spread of covid-19, protection against disease and strategies employed against a virus. It is a contemporary event that gives voice to the motodeliverers. The results support the development of public policy for the protection of this social group and harm reduction with the promotion of vaccination.

Keywords: Worker's health. Coronavirus infections. Social psychology.

INTRODUCTION

The covid-19 pandemic ran with high rates of infectivity (37,625,916 cases of covid-19) and mortality (703,291 deaths) until September 2023, in addition to high occupancy of hospital beds, shortage of medications, supplies and equipment, being instituted recommendations to contain the pandemic such as hand sanitization or use of alcohol gel, mandatory masks, vaccination recommendation, reduction of mobility with seclusion of people to home environments, avoiding agglomerations⁽¹⁻³⁾.

Minimum specifications were standardized

for the home production of cloth masks for shared environments, avoiding the scarcity of those industrialized and assigning them to professionals and health institutions. These events triggered changes in behaviors, customs and habits of the international community motivated by the urgency to reduce the transmission of coronavirus by air and droplets^(1,4).

Home confinement, combined with the closure of trade, has created a demand for home delivery services of materials, products, food, medicines, equipment, among others. This activity was essential to the pandemic moment,

*Nurse. Graduation in Nursing, Juiz de Fora, Minas Gerais, Brazil. E-mail: antonio.isac.enf@gmail.com ORCID ID: <https://orcid.org/0000-0002-7573-3263>

**Physical Education Teacher. PhD in Life Sciences. Retired Full Professor of the Faculty of Physical Education and Sports of the School of Nursing of the UFJF. E-mail: paulo.ferpinto@gmail.com ORCID ID: <https://orcid.org/0000-0001-7321-3160>

***Nurse. PhD in Nursing. Primary Health Care Nurse at the Municipality of Juiz de Fora, Juiz de Fora, Minas Gerais, Brazil. E-mail: laerciodl28@hotmail.com ORCID ID: <https://orcid.org/0000-0002-8470-7040>

****Nurse. PhD in Nursing. Retired Full Professor at the School of Nursing at UFJF. E-mail: cristina.arreguy@gmail.com ORCID ID: <https://orcid.org/0000-0002-5928-0495>

*****Nurse. PhD student in Nursing, School of Nursing, UFJF. Nurse at the Institute of Clinics and Surgery of Juiz de Fora. E-mail: enfuffj.isabela@gmail.com ORCID ID: <http://orcid.org/0000-0002-2262-2842>

*****Nurse. MSc in Nursing. School of Nursing, UFJF. Nurse at the City of Juiz de Fora, Juiz de Fora, Minas Gerais, Brazil. E-mail: tayenesouza2009@hotmail.com ORCID ID: <https://orcid.org/0000-0003-4799-6151>

*****Nurse. PhD in Nursing. Assistant Professor of the Graduate and Stricto-Sensu Postgraduate Programs at the School of Nursing at the UFJF. E-mail: paula@uff.br ORCID ID: <https://orcid.org/0000-0003-4838-6873>

with engagement of people without income or unemployed who dedicated to home delivery activities^(5,6), highlighting the motodeliverers.

The motodeliverers were designed as people who act in (in)formal labor activity, using motorcycles to transport food, medicines, equipment, goods and/or documents (originated in institutions, shops, offices, homes, restaurants/snack bars, pharmacies, laboratories, physical or virtual stores - online shopping, notaries offices, commercial establishments and on-line delivery intermediary companies), being responsible for the content moved until its delivery to their destination/consumers (shops, residences, offices, public or private commercial institutions and health institutions)⁽⁷⁾.

In Brazil, approximately 950,000 deliverers acted during the pandemic, corresponding to an increase of 3.5% of these workers, and 28.7% of them used motorcycles for travel and, in the Southeastern region, there were 272.5 thousand 7% in the mode of motodeliverers⁽⁷⁾. It is a mode of fast transport and low fuel consumption, which justified the increase in this labor category during the pandemic, its profile requires sharing social environments of vulnerability for the prevention of covid-19 and its transmissibility⁽⁵⁾.

The object of investigation is the Social Representation (SR) of covid-19, its prevention and transmission by motodeliverers. It is justified by the contemporaneity of the pandemic context, the demand for services capable of generating/supplementing income, by the interface between access of people in social isolation and their demands and by the potential exposure of motorcyclists to coronavirus when collecting/delivering transported contents and/or handling cash or card machines⁽⁵⁻⁷⁾.

In view of the above, there is a research question: how do motodeliverers understand and describe covid-19, its prevention and transmission? The objective was to present the characterization of motodeliverers and apprehend their SR on covid-19, prevention and transmission.

METHOD

Quantitative-qualitative research of the

descriptive type, delineated with a structural approach to the Theory of Social Representations (TSR)⁽⁸⁻⁹⁾. Therefore, the recommendations of the initiative Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) and the Consolidated criteria for qualitative research reporting (COREQ) were used to improve the accuracy of the research report.

The TSR was chosen as a mode of knowledge of common sense that seeks to understand or explain concepts, statements and explanations shared by a given community⁽⁸⁻⁹⁾ because it allows adding self-perception and evaluation as an unprecedented social group and relevant to the context of prevention and transmissibility of covid-19; express and structure the relations of this group of social actors with people confined in households; understand how the pandemic favored construction of symbolic elements on its performance and how this group performed essential activities without being considered a priority in immunization actions.

The study was carried out in the urban perimeter of a city in the Zona da Mata of Minas Gerais, a reference center for education and health in the macro-region. Considering the measures to prevent the transmission of the virus, at the time of data collection, the city was classified by yellow color, that is, with the adoption of standard protocols of control and operation of specific sectors, with hours reduced to four hours, without opening feeding squares⁽¹⁰⁾.

The study participants were selected intentionally and individually, on public roads, at the door of commercial establishments that were authorized to operate at the time of data collection, a place where motodeliverers waited for orders to be delivered.

The recruitment used the non-probabilistic sampling technique called "snowball", which uses reference networks to reach groups of difficult access. According to this technique, the participant is asked to indicate and provide a contact of an acquaintance who meets the criteria for inclusion in the study and who believes will accept to participate.

The sample calculation met the recommended in the literature for research with

the structural approach of TSR that should be greater than ten participants^(8,11). It was not possible to survey the number of motorbike delivery agents working in the city because it is an occupation mostly without formal registration.

The inclusion criteria previously established were: be 18 years old or older and have acted as a motorbike delivery during the covid-19 pandemic. Were exclusion criteria: wish to stop participation and/or not respond to at least 50% of the data collection instrument. Of the 280 individuals approached, nine did not agree to participate in the study, 11 interrupted the interview due to the immediacy of the exit for delivery and eight failed to answer more than 50% of the questions of the data collection instrument, thus making a total of 252 participants.

The data were collected through an interview using a two-part script, the first with questions for sociodemographic characterization of the participant (gender, age, marital status, self-declared skin color, practice or religious belief, study time; personal income, number of children) and their performance in the pandemic (time with motorcycle and type of material transported). In the second part, the evocations were recorded for each of the concepts listed as SRT inducing terms: covid-19, prevention and transmission of covid-19. To do so, participants were asked to report the first five words that came to their mind after listening to each inducer term. The record was made according to the sequence in which they were verbalized.

The instrument used in data collection was tested in a pilot study with 25 participants. The pilot data was not used, since some instrument changes were necessary. During data collection, the researchers used a field diary to record observations about prevention behaviors and risk of contamination in interpersonal work interactions. Interview data were recorded in the Open Data Kit (ODK) software.

The interviews had an average duration of 18 minutes and were conducted by three previously trained researchers, one teacher, one undergraduate student and another graduate in nursing, who did not have any kind of relationship with the study participants. The

interviews were conducted from March to April 2022.

The collection, analysis and interpretation of results were carried out in an integrated and convergent way to capture the covid-19 phenomenon from the perspective of motodeliverers, allowing triangulating results of the three SR and answering the research question, being the discussion held in the light of scientific evidence.

The characterization data were treated by descriptive and inferential statistics (using percentages, centrality and dispersion data). The transcribed evocations were treated by the equivalent terms dictionary technique (using semantic and lexical criteria) for subsequent prototypical analysis of SRT in the software *Ensemble de Programmes Permettant l'Analyse des Evocations* (EVOC) 2003, allocating the cognemas on an axis of abscissas and ordered using frequency criteria and Mean Order of Evocation (MOE)⁽⁹⁾.

The allocation of cognemas in the four quadrants allows the interpretation of representational contents of the TSR: in the upper left quadrant (ULQ) - possible central nucleus, the cognemas are allocated with greater frequency and more readily mentioned, portraying content agreed by the social group; in the lower left quadrant (LLQ) - contrast area, the cognemas are allocated with less frequency and more readily mentioned that translate into subgroup positioning; in the upper right quadrant (URQ) - first periphery, the most frequently but cited in last positions and; in the lower right quadrant (LRQ) - second periphery, there are the cognemas mentioned less often and in last positions, depicting individual positions arising from personal experiences. This treatment culminated in the framework of four houses (possible central core, contrast area and first and second peripheries) of the TSR in the structural approach⁽⁹⁾.

The parameters for the construction of the chart of minimum frequencies four houses were: 20, intermediate: 40 and Rank: 1.8. The number of participants for the terms inducers covid-19, prevention of covid-19 and transmission of covid-19 was 243, 241 and 234 with 655, 580 and 579 cognemas and 91.9%, 92.4% and 79.3% corpus respectively.

The similarity test was carried out by co-occurrence of cognemas issued by participants in the R pour les *Analyses Multidimensionales de Textes et de Questionnaires* (Iramuteq) program, which indicated the possible centrality of representations. Results were presented in focus community graphs with discussed contents based on their functions (knowledge, identity, orientation, justification)⁽⁹⁾ and representational dimensions (attitude, information and object)⁽⁸⁾.

The development of the study took into account all ethical and legal aspects of human research. The matrix project was approved by the Research Ethics Committee (Opinion n. 4570.756/2021). The participants agreed to participate in the study by signing the Informed Consent Form and, in order to guarantee their anonymity, they are identified with alphanumeric codes when presenting the results.

RESULTS

In relation to the characterization of the 252 participants, the majority were men (90.9%); under 31 years (50.4%) (Md= 30; DP= 9.047; A= 9-61 years); single (57.9%) and married (31%); self-declared with white and black skin, 44.4% and 31% respectively; Catholic (43.3%), protestant (29.8%) or atheists (10.7%); with ≤13 years of education (87.5%) (Md= 13; DP= 2.604; A= 5-18 years); received ≤2 minimum wages (56.3%) (Md= 2.235; DP= 1.156; A= 1-7 minimum wages); had children (52.8%), 42.9% of them with one or two children. All, at some point, transported food, and 43.2% have done so for more than four years (Md = 4.00; DP = 5.76; A = 1-33 years) and 56% also

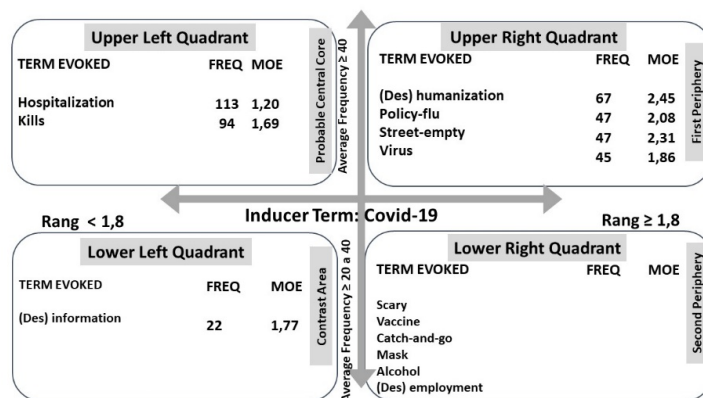
carried medicines, biological materials and/or hospital equipment.

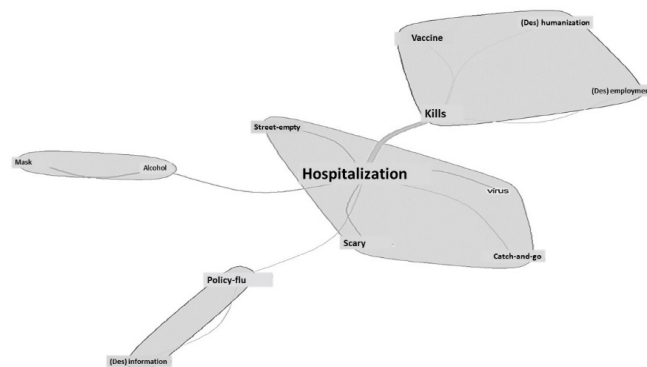
According to the researchers' field diary records, there was an intensification of service periods (double or triple shifts interspersed with professional activities), positively impacting personal income and there was informal insertion of new people in the activities of motodeliverers delivery due to unemployment/lockdown. All recognize themselves vulnerable to the psychosocial, financial and health harms related to covid-19.

The participants waited for the material to be transported exposed to time (public road, doors of institutions, sheltered in canopies subject to rain/sun or small rooms) and close to other people (without social distancing and in agglomeration of deliverers). They occasionally used mask, intensified by the approach of the interviewers. They carried alcohol gel, but the use was not observed during data collection.

The SR for covid-19, covid-19 prevention and covid-19 transmission were objectified, respectively, by the cognemas "hospitalization" (Figure 1); "mask" (Figure 2); and "droplets" (Figure 3), allocated in the ULQ.

The SR for covid-19, covid-19 prevention, and covid-19 transmission were respectively addressed by the cognates "hospitalization" (Figure 1); "mask" (Figure 2); and "droplets" (Figure 3), allocated in the ULQ. The SR for COVID-19 delivery drivers is understood by the impact of the severity of the disease expressed by hospitalization. In the contrasts area, the cognema "(dis)information" appears, contrasting with those allocated in the ULQ (Figure 1).



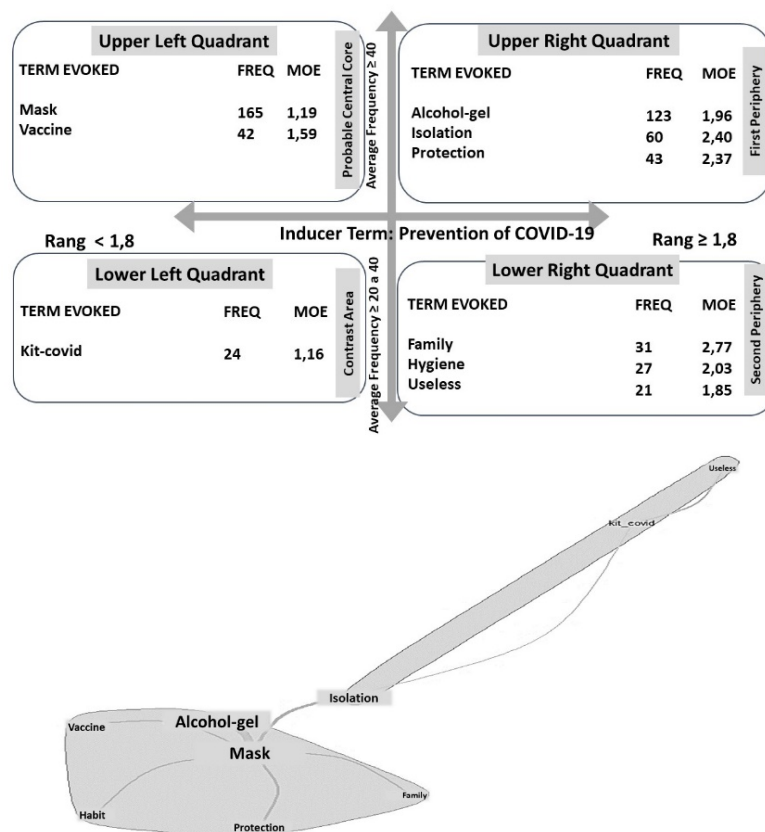


Note: * Freq: frequency; † MOE: Mean Order of Evocation. Contents extracted from EVOC and Iramutec.

Figure 1 - Four-house chart and co-occurrence graph of the inducing term covid-19. Juiz de Fora, MG, Brazil, 2022. (n=252)

The SR of covid-19 prevention is associated with the way in which the coronavirus is inhibited

by the use of masks, contrasted with the term “covid-kit” in the LLQ (Figure 2).

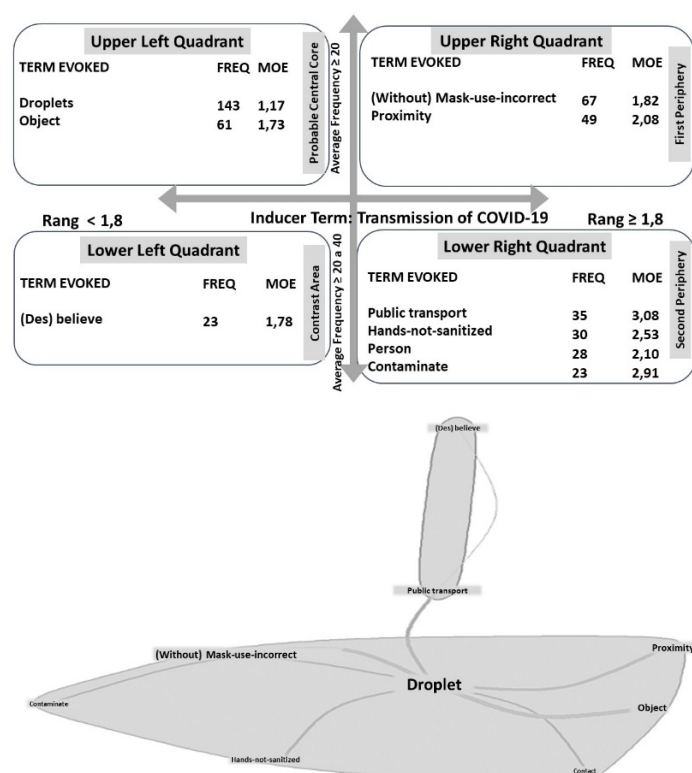


Note: * Freq: frequency; † MOE: Mean Order of Evocation. Contents extracted from EVOC and Iramutec.

Figure 2 - Four-house chart and co-occurrence graph of the inducing term "COVID-19 prevention." Juiz de Fora, MG, Brazil, 2022. (n=252)

The SR of covid-19 transmission by motodeliverers is described by airborne

transmission, but contrasted by the term “(dis)believe.” (Figure 3)



Note: * Freq: frequency; † MOE: Mean Order of Evocation. Contents extracted from EVOC and Iramutec.

Figure 3 - Four-house chart and co-occurrence graph of the inducing term "covid-19 transmission." Juiz de Fora, MG, Brazil, 2022. (n=252)

There were common and approximate cognemas in the evocations for the inducing terms that permeated the quadrants: 1) covid-19 and covid-19 prevention: "vaccine", "mask", "alcohol-gel"/"alcohol"; 2) covid-19 and covid-19 transmission: "mask"/"(without mask-use-incorrect"; 3) covid-19 prevention and transmission19: "mask"/"without-mask-use-incorrect" and "hygiene"/"non-sanitized-hands".

The co-occurrence test was indicative of possible centrality for the RS of the three inducing terms, being objectified by the respective cognemas: "hospitalization", "mask" and "droplets" and anchored in other current socio-political constructs (Figures 1, 2 and 3).

DISCUSSION

The comparison between the profile of participants in this study and that of Brazilians from the National Survey by Sample of Households- covid-19 (Pnad covid-19) was based on: gender, age group, income and years of study. The reduction in income during the

pandemic was accompanied by an increase in the working day (from 29 to 38 hours/activities/weekly) with a predominance of self-employed and informal workers, with only 32.7% of motodeliverers having signed work booklet⁽⁷⁾. There was a predominance of self-declared white people, justified by the German immigration in the study city⁽¹²⁾.

The covid-19 pandemic has substantially affected socially and economically unstructured families⁽¹³⁾, due to unemployment, decreased income or bereavement for unexpected deaths resulting from the disease, which intensified the search for additional income through informal work, such as by young men with low education - characterization of this professional category in the present investigation.

The motodeliverers, when evoking the inducing term covid-19, expressed the cognemas "hospitalization" (dimension of image and information, which depicts the environment in which people with severe symptoms were hospitalized) and "kills" (dimension of information⁽⁸⁾, which refers to the impact of

illness and its outcome) in the ULQ, and anchored a link between hospitalization and having the possibility of death due to covid-19⁽¹⁴⁾.

The functions depicted in the cognema "hospitalization" were: 1) know - that Sars-CoV-2 requires hospital admission; 2) justification - possibility of the presence of covid-19 evolve with worsening symptoms, impacting hemodynamic stability; and 3) identitarian - allowed the identification of people who had evolution of severity for the infection, and the cognema "kills" included: to know - information accessed from social media and news vehicles, to issue daily reports of the number of infected and dead persons with respective images of people hospitalized, overcrowded health institutions and bagged bodies, leaving hospitals, with burials in mass graves, without the presence of family members or with restriction on the number of people at the funeral; and justification - explaining that, in case of hospitalization, there was a possibility that the coronavirus would kill^(9, 15-16).

In Brazil, the initial hospitalization profile showed mild symptoms (80% - fever, fatigue, dry cough and anosmia), evolving to severe symptoms (15% - dyspnea, hypoxemia and lowering of the level of consciousness) and critical ones (5% - renal, pulmonary and coagulopathic injuries), accounting for 1/3 of the worldwide deaths, and the Brazilian population, estimated at 212 million inhabitants, corresponding to 3% of the world population⁽¹⁷⁻¹⁸⁾.

The Brazilian hospitalization pattern for covid-19, on this occasion, was of elderly people, with sociodemographic characteristics of yellow or black skin color, without schooling and with polycomorbidities (Diabetes mellitus, hypertension, cardiovascular diseases, cerebrovascular accidents, obesity and overweight)⁽¹⁹⁾.

This fact has been recognized as a tragic situation resulting from pandemic denial, absence of policies for coping with covid-19⁽¹⁷⁾ when the rate of transmissibility was higher than the patients' capacity for care and there was a lack of hospital supplies and specialized human resources. Despite initiatives such as the eventual transformation of clinical/surgical beds

into intensive and semi-intensive, there was an institutional overload due to the fact that the demand for beds is higher than the capacity of the Unified Health System (SUS)⁽¹⁸⁻¹⁹⁾.

The cognema "hospitalization" portrays the unfavorable evolution of the clinical picture with possibility of death, being the RS anchored in the cognemas "die", "(de)humanization", "virus" and "frightening" situation. Such representational constructs are dichotomous: information about the severity of the pandemic conveyed by the media (lack of hospitalization vacancies, shortage of materials for intubation/sedation, inability to veil/bury bodies) and solidarity actions (because social isolation has triggered a reduction in income and unemployment).

The most commonly found outcome in the literature of covid-19 complications was mortality, which varied from 2.9% to 67% in the studies, hospitalization time ranging from six days to 25 days and length of stay in an Intensive Care Unit (ICU) between 2.9% and 24%⁽²⁰⁾, which portrays the severity of the disease and is in line with the understanding of the motorbike delivery participants in this study. This was evidenced in the reports in the field diary about hospitalizations and deaths of co-workers, friends and family and justifies the SR of covid-19 by the social group.

The fear of infection, increased by occupational risk, uncertainty about disease, restriction to home and work environment, inadequate information, family financial loss, family grief, physical and social isolation, frequent alarming news and fake news, can result in stress, anxiety and emotional insecurity, which can generate psycho-emotional symptoms during and after the pandemic. In this way, the importance of the link between the motodeliverers and mental health services is highlighted, as well as the need for reception and therapeutic listening of this group to identify and mitigate psycho-emotional complications⁽²¹⁾.

The cognema "political-flu", in the URQ, refers to the dimension of information⁽⁸⁾ and the functions: knowledge, identity, orientation and justification⁽⁷⁾. The term flu, mentioned in the diminutive, explains the attempt to minimize the relevance of the disease in the pandemic context and restrict it to mild symptoms, which did not

require "hospitalization". The "(dis)information" (in the LLQ) is explained by public interest groups in an attempt to describe/trivialize the pandemic and add discredit to the real impact of the coronavirus^(16,22) and shows itself as opposed to the SR of the social group. In this context, negative social behaviors and the dissemination of fake news on social networks emerged, disregarding scientific evidence as a basis for behaviors, with postponement of availability of vaccines, refusal to use masks and hand hygiene^(13,16,22).

The cognema "empty street" (in the URQ) refers to the information dimension⁽⁸⁾, whose function is justificatory⁽⁷⁾ and connects to the cognemas "hospitalization" and "kills," which portray how the pandemic was experienced. The presence of the cognemas "(de)humanization" and "virus" (in the URQ) refers to the shortage of hospital supplies caused by the impact of the disease and the humanitarian suffering caused by the catastrophic mortality experienced by Brazilians^(6-7,16).

The prevention of covid-19 is portrayed by the use of masks (in the ULQ), an imagetic cognema, intended to block the transmission of coronavirus by air, which was inserted into the daily life of the population being resignified⁽¹⁸⁾. Its cultural appropriation was linked to discomfort, feeling of suffocation and limitation of non-verbal communication. The increase in demand for surgical models intensified the worldwide shortage and justified the manufacture of handmade models, generating an alternative source of income⁽²³⁾.

The motodeliverers associate the mask as a habit used to protect their family, often isolated, since they experienced an increased risk of becoming infected due to their work performance and the fact that they were not vaccinated. The co-occurrence test demonstrated the possible centrality for the SR of covid-19 prevention to be objectified by cognema "mask".

Regarding the cognema "vaccine" (in ULQ) (dimension of object and information)⁽⁸⁾, in turn, was evidenced its relevance to the motorbike delivery motivated by the wide dissemination of the importance of immunization for the control of the pandemic and the suspicion of the production in record time of four vaccine modalities in Brazil, despite the evidence of its

effectiveness and safety from already known and mastered technologies^(12,19,24), although these workers have not been considered a priority group to receive the immunizants. It is worth noting that the motorbike delivery people, despite being considered essential workers in the pandemic period, were not included in the priority groups for vaccination, which reinforces the importance of the vaccine as a form of prevention for the social group.

The cognemas "mask", "vaccine" (in the ULQ) and "alcohol gel" (in URQ) refer to the functions: to know - to enable access, assimilation and cognitive incorporation of information⁽⁷⁾ and knowledge valued as useful for blocking the transmission of coronavirus by personal contact and objects, that passes through hand hygiene or use of alcohol gel⁽²⁶⁾; identitarian⁽⁷⁾ - when recognizing the group of motodeliverers as adherent to sanitary measures (mask, alcohol gel, vaccination and social distancing)⁽²⁴⁾; orientation⁽⁷⁾ acting as a filter to define how contact with the coronavirus should be prevented and motivating standardization, acceptance and normalization of (inter)nationally^(12,23) recommended scientific behaviors; and justification - by explaining how social actors behave⁽⁷⁾ when using "mask", sanitize hands after contact with potentially contaminated objects, people and surfaces and how they act in the face of mass population vaccination availability^(12,23).

The "covid-kit" (in the LLQ), to refer to the use of drugs, off label, indicated by medical professionals, even empirically, was an attempt to give a therapeutic response to the chaos unleashed by the pandemic and used as a strategy in an attempt to add credibility from political positions and public people, generating doubt among lay people who did not have discernment about the harm of its use⁽²⁵⁻²⁶⁾. This fact was aggravated in Brazil when private institutions began to meet the repressed demand of SUS, including protocols with indiscriminate use of these products, based on evidence of low scientific level, and making inappropriate generalizations⁽²⁷⁾.

The object dimension cognema "covid-kit"⁽⁸⁾ refers to the following functions: 1) to know (information and knowledge based on fake news about medicines transmitted in social networks

as capable of reducing the transmissibility of covid-19, even being scientifically recognized as inefficient and/ or generators of poisoning processes), 2) identity (adherence to its use characterizes a representational subgroup that shares the conception contrary to scientific positioning; 3) orientation (explains why a social group uses drugs considered innocuous from the scientific point of view); 4) justification (social actors explain their behaviors regarding the use of medicines as a preventive strategy at all levels of health care)⁽⁷⁾. It should be mentioned that the cognema "useless" (in the LRQ) - dimension of information and guidance function - contrasts with the SR for covid-19 prevention, characterizing a non-consensus positioning among participants for covid-19 prevention.

The cognema "isolation" (in the URQ) refers to the behavioral/attitudinal dimension and portrays the normative, orientation and justification functions⁽⁷⁾ as the home confinement appears as a recommendation of the health authorities. It is evident that the delay in the adoption of social distancing in Brazil justified the magnitude of the transmissibility of the coronavirus and the increase in mortality^(12,24-25).

Isolation is seen by the social group of this study as less important in preventing covid-19, which goes against the findings of the literature. The members of this social group agreed with the relaxation measures because they were already exposed to the increased risk of contracting covid-19 and transmitting the disease to their acquaintances and relatives⁽²⁸⁾.

In the transmission of covid-19, the droplet is characterized by being the form of transmission of the virus that can be transmitted by object (ULQ), by contact and proximity with people (URQ) and in public transport (LRQ), depicting the dimensions of object and information⁽⁸⁾ and the functions of knowledge and guidance⁽⁷⁾. Exposure as a result of poor protection practice⁽¹⁴⁾ is exemplified by the cognemas "without-mask-use-incorrect" and "proximity" (in the URQ) between people and "non-sanitized-hands" (in the LRQ), portraying the dimension of attitude and information⁽⁸⁾ with functions of knowing, identity, orientation and justification⁽⁷⁾ and comes from the information and norms shared socially⁽¹⁶⁾.

In the contrast area, the cognema "(dis)believe" connects with cognemas from the same quadrant for the respective terms: covid-19 inducers - "(dis)information" and covid-19 prevention ("covid-kit"). (Dis)believe refers to the dimension of attitude⁽⁸⁾ and the functions of knowledge, identity, orientation, and justification⁽⁷⁾ and demonstrates the attitudes not recommended and that increased the risk of covid-19 transmission.

The use of "public-transport" for travel has object dimension⁽⁸⁾, linking its existence to people with lower income, who need this type of transportation and do not use motorcycles as personal transportation. "Contaminate" (LRQ) is a consequence of the transmissibility of coronavirus, representing the dimension of information⁽⁸⁾ and the functions of knowledge and guidance⁽⁷⁾. The cognema "non-sanitized-hands" (LRQ) depicts the dimensions of attitude and information⁽⁸⁾ and refers to the functions: knowledge, guidance and justification⁽⁷⁾.

When comparing the central nuclei of the SR of the inducing terms covid-19, prevention and transmission of covid-19, there is an association between transmission, prevention and disease. The motodeliverers identify as the droplets as the main form of transmission of covid-19, which generated the use of masks as the main way to prevent injuries caused by the disease described with the undesirable outcome of hospital admission.

Subgroups identify other forms of prevention, such as the use of alcohol gel, isolation, vaccination and "covid-kit", as well as other forms of transmission, such as through contaminated objects and proximity to others, these knowledge that were not consensual by the social group and that were not routine activities carried out by motodeliverers in the pandemic.

The covid-19 pandemic, in addition to being a serious health problem, provoked a negationist political-ideological crisis, reinforced by the dissemination of fake news⁽¹³⁾, which became evident in the study of this social group by the presence of terms such as "discredit, misinformation, covid-kit and politics-flu", which made it difficult for these workers to accept the severity of the disease and implement strategies to control the disease. It is evident, thus, the importance mainly of the use of masks

as a form of prevention because it was mandatory for labor activities.

The study limits are the impossibility of transposing the results to other social groups and the scarce previous evidence in the social group studied or in similar groups, groups of essential transport workers during the pandemic.

FINAL THOUGHTS

Although it is a contemporary event, understanding the social group's SR allowed showing that motodeliverers are part of a group of workers that was essential in the daily social life of the pandemic. It gives visibility to these workers as a vulnerable and susceptible group because they have not been included in the priority immunization program. Thus, the social status of the terms covid-19, covid-19 prevention, and covid-19 transmission was objectified by the cognates "hospitalization," "mask," and "droplets," respectively, demonstrating that these social statuses for motorcycle delivery workers are described by

the impact of covid-19 severity expressed by hospitalization; the prevention of covid-19 associated with inhibiting the form of coronavirus transmission through the use of masks; and the so-called airborne transmission.

The experiences, perceptions and self-assessment of social actors about covid-19, its transmission and prevention as the SR of the group add new knowledge in relation to the dissemination of an unknown virus and about how these workers protected themselves and the strategies they knew and employed. These results show the need to develop a public policy of protection and harm reduction to motodeliverers, since this segment of workers, exposed to increased risk of transmission, does not have actions focused on preventing contamination.

It is recommended to study deeply the adherence of this social group to actions to prevent the transmission of covid-19 and the inclusion of these essential service workers in the risk groups to be immunized together with the other service actors.

REPRESENTAÇÕES SOCIAIS DE MOTOENTREGADORES SOBRE A COVID-19

RESUMO

Objetivo: apresentar a caracterização dos motoentregadores e apreender suas representações sociais sobre a covid-19, prevenção e transmissão. **Método:** pesquisa quanti-qualitativa do tipo descritivo delineada na abordagem estrutural das Representações Sociais. Realizada em 2022, em via pública de uma cidade de Minas Gerais, com motoentregadores. Mencionaram-se os termos indutores (covid-19, prevenção da covid-19 e transmissão da covid-19) verbalmente e foi solicitado evocação de cinco palavras. Os dados de caracterização foram tratados por estatística (simples, percentual, centralidade e dispersão) e as evocações, por análise prototípica (EVOC) e validadas pelo teste de similitude por coocorrência (Iramuteq). Apresentaram-se os resultados em quadro de quatro casas e grafo de comunidade. Atenderam-se os requisitos éticos. **Resultados:** as representações sociais foram objetivadas por "hospitalização", "máscara" e "gotículas", respectivamente confirmadas pelo teste de coocorrência. Foram cognemas comuns/aproximados entre os quadrantes: "vacina", "máscara/(sem)máscara-uso-incorreto", "álcool-gel"/"álcool"; e "higiene"/"mãos-não-higienizadas". **Considerações finais:** representações sociais dos motoentregadores dão visibilidade a grupo social vulnerável e susceptível a adoecer, trabalhadores essenciais e socialmente engajados na pandemia, e agrega novos conhecimentos relacionados a disseminação da covid, proteção contra a doença e estratégias empregadas contra um vírus. Trata-se de evento contemporâneo que dá voz aos motoentregadores. Os resultados subsidiam a elaboração de política pública de proteção desse grupo social e redução de danos com promoção da vacinação.

Palavras-chave: Saúde do trabalhador. Infecções por coronavírus. Psicologia social.

REPRESENTACIONES SOCIALES DE REPARTIDORES EN MOTO SOBRE COVID-19

RESUMEN

Objetivo: presentar la caracterización de los repartidores en moto y comprender sus representaciones sociales sobre el covid-19, prevención y transmisión. **Método:** investigación mixta del tipo descriptivo delineado en el enfoque estructural de las Representaciones Sociales. Realizada en 2022, en vía pública de una ciudad de Minas Gerais/Brasil, con repartidores en moto. Se mencionaron los términos inductores (covid-19, prevención de la covid-19 y transmisión de la covid-19) verbalmente y se solicitó evocación de cinco palabras. Los datos de caracterización fueron tratados por estadística (simple, porcentaje, centralidad y dispersión) y las evocaciones,

por análise prototípico (EVOC) y validadas por la prueba de similitud por coocurrencia (Iramuteq). Se presentaron los resultados en cuadro de cuatro casas y grafo de comunidad. Se atendieron los requisitos éticos. **Resultados:** las representaciones sociales fueron objetivadas por "hospitalización", "mascarilla" y "gotitas", respectivamente confirmadas por la prueba de coocurrencia. Fueron conceptos clave comunes/aproximados entre los cuadrantes: "vacuna", "mascarilla/(sin)mascarilla-uso-incorrecto", "alcohol-gel"/"alcohol"; e "higiene"/"manos-no-higienizadas". **Consideraciones finales:** representaciones sociales de los repartidores en moto dan visibilidad al grupo social vulnerable y susceptible a enfermar, trabajadores esenciales y socialmente comprometidos en la pandemia, y agrega nuevos conocimientos relacionados con la diseminación del covid, protección contra la enfermedad y estrategias empleadas contra un virus. Se trata de un evento contemporáneo que da voz a los repartidores en moto. Los resultados contribuyen a la elaboración de políticas públicas de protección de este grupo social y reducción de daños con promoción de la vacunación.

Palabras clave Salud laboral. Infecciones por coronavirus. Psicología social.

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Corresponding author: Paula Krempser. Campus Universitário- Faculdade de Enfermagem. Rua José Lourenço Kelmer, s/n Bairro São Pedro, Juiz de Fora, CEP 36036-900 Minas Gerais, Brasil. Celular: (32)98841-. E-mail: paula@ufff.br

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