



# Gender, Displacement, and the Ethics of Protection

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## Abstract

Focusing on the flight of women and girls from Venezuela to Brazil, and on South American refugee regimes, this paper addresses the ethics of forced displacement and the requirements of gender-responsive systems of protection. The analysis centers the voices of displaced women brought in through fieldwork in Manaus and Boa Vista, Brazil, in 2020–2022, to identify gaps and negative effects of gender-blind provision of shelter, healthcare, and other services at crossing and reception. We argue that current approaches to protection privilege humanitarian responses to victims, whereas any efforts to break cycles of deprivation and exclusion affecting displaced women and girls should privilege determinants of relational autonomy and the social agency of displaced women and girls. By developing this analysis, we contribute directly to feminist critiques of refugee protection, and reconstruct (based on migrant women's perspectives and feminist work on relational autonomy) key elements of a gendered account of protection that centers on the recognition of autonomy.

## Keywords

forced migration, humanitarianism, protective reception, relational autonomy, Venezuela, women and adolescent girls

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## Introduction

The failure of protection regimes for refugees and forced migrants to be responsive to the gendered dimensions of displacement is both a critical concern of feminist migration studies (Macklin 1995; Freedman 2015; Anker 2020; Crawley 2021) and, as a product of feminist activism, an increasingly significant political issue for states and international organizations. Indeed, feminist scholars have drawn attention to failing efforts of, for example, the United Nations High Commissioner for Refugees (UNHCR) or international commitments such as those outlined by the 2018 Migration and Refugee Compacts to take gendered dimensions of forced migration seriously in current protection regimes and humanitarian programs (Hennebry and Petrozziello 2019; Ratzmann and Sahraoui 2021; Freedman, Sahraoui and Tyszler 2022). This article contributes to this scholarship in four ways. First, it broadens the scope of the literature, much of which is focused on the reception and protection of refugees and forced migrants in the global North, by expanding the geographical reach to a context of South–South movement and focusing, in particular, on the widely praised regime of protection in Brazil, the *Operação Acolhida* (Operation Welcome), as a major host of the second largest migration flow of our time, that is Venezuelans fleeing humanitarian crisis since 2014. Second, it offers a critical evaluation of this regime of protection from the standpoint of the displaced women subject to it. Third, it reconstructs the grounds and character of this critique. Finally, it uses this reconstruction to outline key requirements of a gender-responsive approach to protective reception. Our aim is to facilitate a gendered reading of displacement contexts, and prompt responses that are more attuned to differential reception needs among protection-seeking populations. We do not attempt to offer a comprehensive account of the ethics of protection, rather we focus on the ethics of protection in reception with regard to forcibly displaced women where this encompasses all who are governed by the reception regime (whether they intend to settle in the relevant state or transit through it).

Our argument develops in seven stages. It begins by introducing the context of Venezuelan displacement in South America and the Brazilian protective reception regime, before outlining the theoretical framework of the argument. It then provides a brief overview of fieldwork conducted with displaced women in Boa Vista and Manaus from 2020 to 2022, which informs the following three sections. Each section focuses on one of three distinct types of criticism directed at the regime by those affected by it. These concern *access to protection*, *problems of reception*, and *recognition of autonomy* respectively. In the final section, we draw out the implications of this critique for envisaging a gender-responsive regime of protective reception.

## *Mass Displacement and the Gender Dimension of Protection and Autonomy in the Latin American Context*

Since 2014, nearly 8 million people have fled Venezuela, mostly to neighboring countries, making this “the largest exile crisis in the history” of Latin America,

according to the Organization of American States (OAS 2021), and the second worldwide after Syrian refugee crisis (UNHCR 2023). Half of the displaced population are women and girls fleeing hunger, gender-based violence, and the collapse of health services (Do Carmo Leal et al. 2024). This is a matter of considerable importance for feminist views of forced migration given the failure of existing refugee conventions to recognize a range of gender-specific causes of displacement (for instance, Crawley 2021). Indeed, the case of Venezuela sharply illustrates the significant gender dimension of displacement given that the collapse of the maternal health system and sharp increase in rates of maternal mortality (Amnesty International 2018; Doocy et al. 2019) gave pregnant women reasons to flee precisely in virtue of being pregnant women. Losing *de jure* or *de facto* control over important domains of one's life that affect basic interests—e.g., being caught in a condition of generalized violence or famine or being pregnant in a context in which the maternal health system has collapsed—support the notion of “necessary fleers” (Aleinikoff and Zamore 2019) as a response to the question of who should be entitled to protection. Here, however, our focus is on how a gendered-responsive protection scheme should be conceived and organized. We build our argument from feminist scholars in migration and refugee studies who claim that many women struggle to secure protection under international refugee law because their gendered experiences are not acknowledged as constituting persecution under the UN Convention on the Status of Refugees and other frameworks (see Hennebry and Petrozziello 2019; Crawley 2022; Dustin and Querton 2022; Freedman, Sahraoui and Tyszler 2022). This scholarship highlights the limits of refugee protection systems that often fail to address the gendered dimensions of displacement, overlooking the unique challenges women face as a consequence of displacement and at reception. Omission can result in exclusion from formal protection mechanisms, complicating access to refugee status and essential support services (Crawley 2021). Furthermore, when gender is taken into account, they argue, forcibly displaced and refugee women are typically represented as “victims” in need for “special protection” (Johnson 2011). In sum, when women gain access to humanitarian aid, these systems frequently reinforce perceptions of them as passive victims, rather than recognizing their agency and autonomy (*ibid*; Cabot and Ramsay 2021; Balaguera 2022).

Latin American normative frameworks concerning migration and asylum are generally recognized as “progressive,” “open,” and “human rights-based,” and particularly praised for its sustained and generous asylum policies since the adoption of the 1951 Refugee Convention and its 1967 Protocol on the rights of refugees (Brumat and Freier 2020; Brumat and Finn 2021; Zapata and Wenderoth 2021; Hammoud-Gallego and Freier 2022). This appreciation is due to advanced, and indeed vernacular, takes on what it means to be a refugee in Latin America. In effect, the region has formally adopted an expanded the definition of refugee beyond the international refugee regime, through the regional framework underpinned by the 1984 Cartagena Declaration (Cantor, Freier, and Gauci 2015, 3). This expansion took inspiration from the mass displacement experienced in Central America as a

consequence of civil wars during the 1980s as the Cold War took hold in Latin America (ibid). This was written into the Declaration itself: “in view of the experience gained from the massive flows of refugees in the Central American area, it is necessary to consider enlarging the concept of a refugee”.<sup>1</sup> Indeed, signatory states agreed the existing international refugee system did not provide some groups of forcibly displaced persons in the Americas with the appropriate legal response, rendering it necessary to develop a conception appropriate to the region’s characteristics. As a result, the significantly broader definition of refugeehood offered by Cartagena includes not only those who have been individually persecuted, but also those whose lives and liberties were threatened by a range of different circumstances that did not require a “subjective” element but only an objective situation such as, for instance, an armed conflict.

In 2018, against this broader background, the governments of Argentina, Brazil, Chile, Colombia, Ecuador, Paraguay, Peru, Uruguay, Costa Rica, Mexico, and Panama, signed the *Quito Declaration on Human Mobility of Venezuelan Citizens in the Region*<sup>2</sup>—an agreement on managing the Venezuelan migration crisis in a coordinated manner. This declaration was followed by technical meetings in which governments specified concrete actions to provide humanitarian assistance; promote access to mechanisms for regular status and permanence; combat human trafficking; prevent sexual and gender violence; ensure child protection; reject discrimination and xenophobia; facilitate access to procedures for determining refugee status; and, in general, continue working on policies for the protection of the human rights of all migrants, in accordance with national laws and applicable international and regional instruments. Many of these initiatives have received technical assistance and support from the International Organization for Migration (IOM), the UNHCR and other United Nations agencies.

Notwithstanding the Cartagena and the Quito Declarations, mass displacement from Venezuela was to a large extent met by restrictive policies regarding legal status and social entitlement. The approach of Latin American countries has been disjointed and inconsistent. Amnesty International (2023) notes that many countries have opted not to carry out group-based or prima facie recognition of Venezuelan nationals as refugees; they rarely apply the extended definition of the Cartagena Declaration—despite its integration into many national legislative frameworks—to provide protection to Venezuelans. Furthermore, most countries opted for restrictive measures, imposing visas and deporting migrants, while fewer countries have decided to respect their traditions of regional solidarity and grant Venezuelans a right of residence (Castro 2021).

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<sup>1</sup> Cartagena Declaration on Refugees, available at: <https://www.refworld.org/docid/3ae6b36ec.html> [accessed 15 September 2022].

<sup>2</sup> See Quito Declaration, available at <https://www.iom.int/sites/g/files/tmzbd1486/files/iscm/thedeclarationofquitoonhumanmobilityofvenezuelancitizensintheregion.pdf>

Brazil, however, developed a distinctive approach to Venezuelan fleers, granting what has framed as “de facto refugee status” (Brumat 2022). Brazil’s Constitution and migration laws such as the National Policy on Migration, Refuge, and Statelessness (Decree No. 9.199/2017) also recognize universal entitlements such as the right to health, education, and shelter (Guerra and Ventura 2017), along with freedom of movement and the right to choose one’s place of residence (UNHCR 2023). This may explain, in part, why Brazil—the only country in Latin America whose primary language is Portuguese and not Spanish—rose from fifth to third in the ranking of host countries to Venezuelan displaced people in the last three years (R4V 2024). It has distinctive characteristics that makes it stand out in terms of governance of forced migration and that provide the context for the creation of Operation Welcome (Moulin and Magalhães 2020; Vasconcelos and Machado 2022).

Operation Welcome was set up in 2018 to balance humanitarian responses while managing migration flows by mobilizing the federal government, the Brazilian military and national health system alongside local NGOs and international organizations, such as the UNHCR and the IOM. It is based on three pillars: (i) “ordering at border”; (ii) the provision of shelter, food and health services; and (iii) “interiorisation,” a program to voluntarily relocate Venezuelans from the province of entry to other Brazilian provinces (Moulin and Magalhães 2020). In practice, the military provides admission and information about corresponding documents, while together with UNHCR, they organize and filter migrants for sheltering. New hospitals were established in the border city of Pacaraima for vaccination and emergency assistance of incomers. The IOM and the UNHCR provide, together with UNFPA, the local Red Cross, and religious organizations, a range of services such as direct legal advice on regularization, documentation, and healthcare.

This infrastructure of protection is novel compared to prior migration policies in Brazil, and even other experiences in Latin America and across the world. The mandates of its components, and their formal recognition of health and sheltering to all as part of national law and legislation, sets *Operação Acolhida* apart from the provisions offered in other countries. However, the protection regime under Operation Welcome, as will become apparent, reproduces long-standing gendered shortfalls identified by current feminist critique to international refugee protection frameworks regarding inadequate recognition of gender-specific forms of persecution and reasons women are forced to flee their countries. As a result, by failing to fully acknowledge these gendered drivers of displacement, refugee protection regimes frequently neglect women’s experiences, making it more difficult for them to obtain refugee status or access the support they need (Crawley 2021); and if they do, access to humanitarian protection tends to reinforce the passive victimhood of those it aims to help, rather than acknowledging their agency and autonomy (also, Johnson 2011; Cabot and Ramsay 2021; Balaguera 2022).

Our investigation aligns with this scholarship in recognizing that while humanitarian efforts can provide immediate relief, they often fail to address the structural and everyday conditions that, even unintentionally, uphold oppressive systems of power imbalances and dependencies; but we expand the framework to develop a feminist argument about relational autonomy and reconstruct, based on feminist work on autonomy and on migrant women's perspectives, a gendered account of protection that centers on the recognition of relational autonomy.

### *Mobility, Gender, and Autonomy in Protection*

A central feminist concern with the humanitarian mode of protection concerns its relation to autonomy. Three decades ago, Liisa Malkki's seminal work denounced the narrow legal focus in the study and practice of protection of displaced people that failed to address the emotional and psychological dimensions of displacement (1996). By focusing merely on practical aspects of border crossing and legal status, she argued, protection regimes reduce displaced individuals to logistical challenges, neglecting their personal experiences of loss, identity, and belonging. These considerations underpin the feminist critique of protection regimes, emphasizing how the "feeling of being displaced," as Cabot and Ramsay (2021, 288) argue, can lead to alienation, exclusion, and disempowerment—despite legal recognition and compassionate humanitarianism. This is what Kneebone's (2005) calls "exclusionary inclusion" where complex experiences of displacement and refugeehood are oversimplified and protection is motivated by compassion and immediate relief, such as food, shelter, and medical care 'outside the "social-political body"' (Cabot 2019, 765). As a result, humanitarian efforts can reinforce gendered power dynamics by failing to recognize women as agents capable of contributing to and influencing the systems they are part of.

Other feminist scholarship identified tensions between enacting rights (or caring through humanitarian programs) and the securitization of migration management which limit the autonomy of displaced people, particularly women, by subjecting them to surveillance, restriction of movement, and dependency on the state or international organizations (see Perkowski 2018; Sahraoui 2020; also Riggiozzi et al. 2023). As Freedman notes:

In the context of management of refugee camps, for example, UNHCR and other aid agencies have been criticized for promoting unequal power relations between aid workers and refugees and for encouraging types of dependent behaviour on the part of refugees (Harrell-Bond 2002; Hyndman 2000). It is argued that the nature of aid given out develops a patron-client relationship within which powerful and competent aid workers distribute aid to the "helpless" refugees. (2010, 600)

Cabot (2019) and Kneebone (2005) suggest that a significant issue with prevailing approaches to gender-based asylum claims is its construction of the "Refugee Woman" primarily through the lens of vulnerability, as victims or potential

victims of gender-based violence, within patriarchal social relations. These arguments cohere with Fassin who sees humanitarianism as a natural expression of politics of compassion towards the suffering bodies of others, as vulnerable natural creatures. However, as Fassin also notes, this politics of compassion is also “a politics of inequality” in which those who offer assistance stand in an unequal political relation to those to whom aid is offered and this “tension between inequality and solidarity, between a relation of domination and a relation of assistance, is constitutive of all humanitarian government.” (2011, 3). In contexts of forced displacement, the relationship of domination within the relationship of assistance between those who save and those who suffer finds expression in a particular picture of refugeehood as the “neediest of the needy” (Cherem 2016, 185). It has been widely noted that, from this perspective, humanitarianism reflects a form of moral reasoning and a way of picturing refugees that slips easily into a portrayal of refugees as victims, which is problematic not least because it erases the standing of forced migrants and refugees as autonomous agents. Moreover, precisely because of the relations of inequality that humanitarianism enacts:

Victims of violence and injustice are seen as deprived of the power of expressing themselves, [and] humanitarian organizations speak in their place: they have established themselves as spokespeople for the voiceless. (Fassin 2011, 254)

To give this problem more precise conceptual articulation, it is helpful to draw on recent feminist work on relational autonomy. As MacKenzie remarks:

... human persons are embodied, and socially, historically, and culturally embedded, and our identities are constituted in relation to these factors in complex ways. An adequate conception of autonomy must take account of this complex social and historical constitution of identity. ... autonomy is a socially constituted capacity, and its development and exercise need to be scaffolded by the right kinds of interpersonal and social environment. ... Gender oppression refers to an unjust system or pattern of hierarchically structured social relations, institutions, and practices of gender-based domination and subordination. (2021, 375)

The value of this approach to autonomy is that it provides us with the conceptual resources for a more precise analysis of the problem that they identify. Particularly valuable here is Mackenzie’s distinction of autonomy as self-determination, self-governance, and self-authorization (2021, 381–2), and how these dimensions are affected by the social and institutional environments in which forced migrant women interact.

*Self-determination* concerns the degree to which one has “the authority and power to exercise both de jure and de facto control over important domains of one’s life” (2021, 381). Central to self-determination is being able to pursue securely the satisfaction of our basic interests in, for example, food, shelter, education, employment, etc. This requires social relationships that entitle and enable the capacity to exercise

such control, for example, secure socio-legal statuses enabling accessible and enforceable claim rights.

*Self-governance* addresses the degree to which an individual is “able to make and enact decisions that express or cohere with one’s values, identity, and commitments” (2021, 382). This self-governance dimension of autonomy has two aspects. The first concerns the extent to which actions and choices express one’s identity, rather than being shaped by others. It is hard, for example, for actions and choices to express our own values if we are bound to social relationships in which we are subject to high levels of dependency on others for our basic needs to be met or to decisions being made by others (when avenues of voice and effective feedback are closed). The second concerns the extent to which circumstances enable or restrict the compossible expression of values. So, for example, a displaced woman’s capacity for self-governance is restricted if she has to choose between safety and livelihood—or between care for her children and adequate nutrition for herself.

*Self-authorization* concerns the degree to which an individual can reasonably see themselves as “having the normative authority to take ownership of, or responsibility for, one’s values, one’s decisions, and one’s life overall.” (2021, 382). So, for example, displaced women who made difficult decisions to risk dangerous journeys and affirm their entitlement to make such decisions for themselves and their children are asserting their autonomy in its self-authorizing dimension.

In the following sections, we explore two critical issues of protection raised by displaced women during interviews: Access to protection and protection-in-reception. These aspects are central to their experiences and autonomy, highlighting how women’s control over key areas of their lives, as well as their ability to make choices aligned with their values, are constrained by the way humanitarian aid is delivered by agencies. As the stories reveal, gender-responsive protection must go beyond simply addressing gaps in shelter, healthcare, and other services and move beyond humanitarianism’s focus on vulnerability which strips women of their agency. We also propose that a more effective approach requires creating conditions that allow women to exercise their voice and autonomy within protection systems.

### *Engendering Research About Protection Through Women Voice: A Note on Fieldwork*

To understand the experience of Venezuelan women and adolescent girls during displacement and in reception and settlement in Brazil, and to reconstruct a feminist critique of protection, we draw on qualitative research and fieldwork conducted in Boa Vista and Manaus over 2021 and 2022; initially online due to coronavirus disease 2019 (COVID-19)-related travel restrictions in 2021, and then on-site as travel to Brazil was again possible by May 2022, when we visited the border crossing Santa Elena (Venezuela)-Pacaraima (Brazil), shelters of first reception, including Operation Welcome, other shelters and healthcare units. We conducted



semistructured interviews with 58 women (aged 20–49) and 17 adolescent girls (aged 15–19), and focus groups with 25 migrant women. All interviews were conducted in Spanish, with the support of a migrant volunteer who helped build rapport and handled the project's mobile phone and headphones when interviews were online. Interviews were conducted in a safe and private space, previously assessed by the on-site team. No direct incentives were provided to interviewees, but costs of transportation and food were covered by the project. Interviewees were asked about their experiences, expectations and challenges faced during the journey, in border areas, at first place of reception and shelters; focusing on health needs, with a particular emphasis on sexual and reproductive health; experiences in seeking and receiving information about protection and health services; housing conditions; perceptions of vulnerability and risks faced; and barriers to access to shelters, healthcare and protection at crossing and at first place of reception and shelters. Our research observed fully the appropriate ethical guidelines set out for research in Brazil and by the UK lead researcher institution.<sup>3</sup> Participants were informed of their rights, including the voluntary nature of their involvement and the ability to withdraw at any time. All participants were informed about the research and signed consent forms. For those aged 15–18, consent was obtained from legal guardians, and minors provided assent, following Brazilian law. Safeguarding participants' well-being was prioritized, with protocols developed in collaboration with Medicines Sans Frontiers and IOM Advisory Board members. Interviews took place in private spaces, with a guardian present and a trained psychologist available for referrals. Data was analysed thematically by the authors who read through the verbatim transcriptions of all audio-recordings and used a coding process facilitated by NVivo software. Names of interviewees have been changed to preserve anonymity.

### *Access to Protective Reception*

In this section, we reconstruct two main criticisms articulated by displaced Venezuelan women regarding the challenges they face in accessing protection upon arrival in Brazil. The first concerns the gendered impacts of border controls, particularly how these restrictions shape their journeys to Brazil. The second addresses the effect of different modalities of entry on access to protective reception.

Between 2017 and 2020, Brazil hosted over 260,000 Venezuelans. By 2024, the number of Venezuelan refugees, migrants, and asylum seekers in Brazil had nearly doubled, reaching almost 570,000. The combined percentage of Venezuelan refugees and migrant women and girls is over 40 percentage (R4V 2024, 99). Studies show that pregnancy and motherhood are key gendered features among this population

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<sup>3</sup> All research protocols were approved following National Ethical Principles of Research in Human and Social Sciences in Brazil, and the Economic and Social Research Council in the United Kingdom. Ethical submission ID [removed for anonymisation purposes].

(Do Carmo Leal et al. 2024). While over half of Venezuelan men arrive in Brazil unaccompanied, most Venezuelan women arrive with children (Camargo 2021). This highlights the unique vulnerabilities and risks faced by Venezuelan migrant women during transit and at crossings.

Since 2018, alongside its introduction of Operation Welcome, launched and run by the Brazilian Army, Brazil also increased its border controls before the militarized closure of its borders in 2020, partly as a response to the COVID pandemic. The unsurprising effect of these developments was to increase the use of irregular pathways (informally known as *trochas*) driven by the fear of deportation due to lack of documentation, particularly of migrant women's accompanying children as many were not able to get passports or other official documents in Venezuela. While understandably these documents are required to avoid cross-border parental child abduction and trafficking, these requirements overwhelmingly affected women, who were often subjected to de facto criminalization, with some reporting physical attacks on them and their children, including theft and violence. As an illustration of how profoundly embedded gendered practices are at the border, one interviewee recalls the Brazilian authorities' lack of respect for her, as a mother responsible for four children:

It was all very bad because I have my passport, my eldest daughter too, but for the other two I couldn't get them, it was difficult to get them in Venezuela. In Pacaraima, it was very hard, because the military told me to "take them back to their country," because they would not allow the children to cross "illegally," without documents, to Brazil ... The military wouldn't let us enter, and I had to spend all night trying to find a way in, because I couldn't turn back ... He [an Army officer] said, "if I let you in, your children would come in illegally and this would be not responsible on your part ... go back to your country ... you can't come to Brazil" ... I cried and then, thank God, a taxi came and we hide our children inside it to enter Brazil illegally (Mirza, Manaus, 30 June 2021)

In such cases, irregular entry became the only option available.

Although it is often observed more in the breach than in compliance, there is a duty on states not to introduce border policies that heighten obstructions to the arrival of asylum seekers or that impede their access to claiming asylum and other types of protection status. One reason for this responsibility is that it recognizes that the exercise of the human right to seek asylum should not be made more burdensome than necessary; it acknowledges that it is wrong to demand of individuals presumptively entitled to protection that they expose themselves to risks beyond those that are unavoidable features of flight from their home state by imposing additional costs on them. In drawing attention to this point, however, the women who fled from Venezuela point to both general and gender-specific effects of Brazil's border restrictions.

The general effects are the imposition of additional risks on all travelers. Olga traveled from Venezuela to Brazil, with her two adolescent daughters aged 14 and

15, walking for three days from 22 to 25 December 2020 when they arrived in Manaus. As she recalls:

... on the trails there were tigers, there were pumas. That was my great fear. There were thugs who robbed people, another fear. But I was ready, for my children I was ready to face that ... ready for whatever happened, entrusted to God ... at some point we had to climb a mountain, on that mountain there were many cliffs, many holes. And one of my daughters slipped and hung there. She grabbed a branch because she was going into the void. The *trochero* [smuggler] helped her to climb back on track and continue ... (Manaus, 8 June 2021)

There are also gender-specific risks. As Olga recalled:

There are people that come [to Brazil] using smugglers, and some smugglers demand payment in sex. And there are lots that charge a ticket and despite that, they steal from migrants anyways and leave migrants behind, with nothing; alone on the road. And women are at risk of being raped. ... they [smugglers] take advantage of the need of those women to leave their country and abuse them. (Manaus, 08 June 2021)

These risks are heightened, according to an UNFPA officer, by “displacing without a male partner ... [which leaves women] extremely exposed to sexual violence ... And the longer the border is closed, the more exposed these women are” (Boa Vista, 01 February 2021). However, while traveling with a male companion or partner may reduce such risks, it does not remove them:

We travelled by trocha, with my husband ... We had a bad experience at the end of the whole route of the trocha, because there some rogues that subjected us ... they wanted us to pay more, but we had, we had paid before ... but they wanted me to pay ... that I slept with them, and so, well, that was a bad experience ... I was first angry at my husband because he didn't do anything ... but in all conscience, how was he going to do something if they could kill him, he couldn't do anything ... (Flavia, Manaus, 7 May 2021).

This is not a distinctive feature of the Venezuelan-Brazil corridor; on the contrary, feminist theorists of migration and displaced women have drawn attention to the relationship of border restrictions that impose unnecessary additional burdens on seeking asylum and how it distinctively makes female fleers more vulnerable to sexual assault and other gendered risks across a wide range of refugee routes (Freedman 2016; Frouws 2016). However, the Venezuelan-Brazil case highlights that the production of gendered vulnerability in crossing the border is a direct consequence of the conjunction of gender-oppressive social norms with the border policies of the receiving state. The border policies enable forms of expression (and reproduction) of these gender oppressive norms by placing female fleers in a situation in which their choices are radically constrained and hence they are more liable to, for example, sexual exploitation of the kind that Olga and Mirza report.

However, the effects of these obstacle-imposing border policies extend beyond increasing the risks of travel (in both general and gender-specific ways) to shaping access to protection on arrival. Modalities of traveling that affect the way displaced women and girls arrive determined which institution receives them and what information and guidance they get (for example, the guidance on accessing the health system) as well as if and when they are provided shelter. A key problem highlighted in our interviews is that undocumented women and girls may become invisible to the protection infrastructure; they can fall into the cracks of a system that privileges those who enter through the official “*puerta grande*,” or “big gateway,” as it is commonly referred to by the migrants. Obstructive border control opens a gap in terms of information regarding documentation for accessing shelters and the universal healthcare system. If migrants do not enter via the official gateway, they are likely to miss out on the documentation, information, and support available at border checkpoints. As one interviewee claimed,

The first thing that happens when you reach Brazil, is that the military give you condoms and information ... in Pacaraima, at the border, they immediately give you information about how to get your health card [called *cartão SUS* in Portuguese] (Jessica, Manaus, 09 June 2021)

Lack of help and clarity in information and guidance generate failures of protection. Many interviewees faced situations where they did “not know where to get help ... after walking in the woods for over 4,000 km” and found themselves “not having access to food or healthcare after entering the country” (Silvia, 05 May 2021); or not “getting information about where to go for shelter” and thus having to “sleep in an abandoned parking lot or a bus stop” (Nicole, 22 July 2021). These protection gaps can, in turn, generate further vulnerabilities. For example, lack of timely information about rights to access and use shelter and health services, to sleeping in public spaces while waiting to be sheltered, and obtaining documentation, leave women open to sexual assault and to risks of being drawn into exploitative relationships (Roth 2021). These are all interrelated factors that create situations of risk, powerlessness and indignities for displaced women and girls. Furthermore, these conditions are heightened for those who enter the country through irregular pathways that are hot-spots for (forced) recruitment into sex and human trafficking networks.

A gender-responsive ethics of protective reception thus needs to begin from the recognition that issues of protection start prior to arrival with specific gendered features of safety in passage, and that the state’s production of irregularity in border-crossing for forcibly displaced systematically produces gendered vulnerabilities and reproduces gender-oppressive social norms.

## Problems of Reception

Operation Welcome aims to provide shelter, food and health services for those displaced from Venezuela but, as displaced women testify, it does so in a gender-blind way.

Shelters operate mainly under Operation Welcome and mitigate some immediate needs experienced by Venezuelans as they provide food, temporary accommodation, and information on the documentation needed to access health services. However, there are two main problems confronted by those displaced under this regime. The first is a lack of sheltering capacity. According to the R4V (2021), by the end of 2021 around 3,000 Venezuelans were living in “spontaneous occupations,” buildings and spaces previously abandoned that now serve as housing for otherwise homeless migrants; while 2,300 Venezuelans were homeless in Pacaraima, waiting for access to shelter and documentation. In such circumstances, water, hygienic conditions, sanitation, and privacy are sometimes inaccessible, which can expose displaced person to diseases and ill-health. Furthermore, the hardships faced by unsheltered migrants have a direct impact on their health as they can resort to coping mechanisms that can lead to risky behaviors or situations of informality and exploitation, including sex work. The availability of shelters is therefore central to ensuring protection.

However, there are also a range of gendered structural vulnerabilities linked to perilous, under-resourced and overcrowded shelter facilities that create and reproduce situations of indignity, risk and vulnerability as well as sexual and reproductive health harms for displaced women and girls. Some reported cases of “urinary infections because of the conditions of bathrooms,” lack of privacy, fear and insecurity, and general discomfort due to sleeping in “thin matts on the floor,” particularly in shelters built in the Manaus’ bus station, that operate only overnight “from 4pm until 6am ... when one has to get up and go back to the street” (Olga, Manaus, 08 June 2021). Lack of privacy is particularly problematic for adolescent girls who may feel awkward changing pads during menstruation in communal bathrooms, particularly as they are encouraged to use and clean menstrual cups—often provided by international organizations—in those bathrooms, as explained by UNHCR officers (Boa Vista, 05 March 2021). Others reported situations of violence inside shelters that were difficult to manage (also Makuch et al. 2021). For example, Gloria, an adolescent migrant in Manaus, recalled:

It is horrible. You couldn’t be calm, there are many children running around, you couldn’t rest, the military came in every so often and turned on the flashlight and shined it in your face, when there was a problem. ... It’s scary because there’s a lot of *malandro* here. I was scared and helpless because I couldn’t sleep, and every day there is a fight. It looks like one of those movies where they draw guns. They take out guns, knives, they hit here, they hit there.

Many of our interviewees stated that shelters and temporary accommodation in hotels do not provide an environment where they can live a life free from violence. A general feeling of insecurity is particularly experienced in those shelters that are set

up just for overnight sleeping in bus stations. For example, Ingrid, a trans women interviewed in Manaus, recalled:

It was not easy here in Brazil since I arrived. First I was rough sleeping then I went to a night shelter. I suffered a bit, was abused, they [alluding to men in the shelter] cut my hair by the bus station in Manaus against my will, and abused me sexually. It has not been easy indeed ... (5 July 2021)

This experience led her to choose to sleep in the streets over the available shelter facility. Other women mentioned they preferred to stay in the streets or overnight sleeping facilities because shelters did not accommodate their lifestyle or everyday needs, making some, such as Marcela (Manaus, 8 June 2021) feeling “locked up” “like a prisoner”.

Both the lack of sheltering capacity and the lack of shelter that is adequate for protection needs left displaced women extremely susceptible to vulnerabilities (re)produced through gender-oppressive social norms.

Conditions in Venezuela, conditions of travel, and inadequate shelter are all potential sources of negative effects on displaced women’s health and wellbeing, and hence access to effective health services is essential to protection at the site of reception. This is especially the case for pregnant women and women who have recently given birth as well as those who have been subject to gender-based and sexual violence in passage or after reception. However, displaced women subject to Operation Welcome drew our attention to a range of obstacles to effective access to health care and exercise of their health rights. A significant issue was documentation. In Brazil, access to health services requires that you have a health card:

They also said I needed to bring a document [that I didn’t have] so that the gynaecologist could see me or to have a scan or something like that. They would tell me to come back at a certain time, I would, and in the end I’d never get the appointment (Maria, Manaus, 23 May 2021)

The biggest challenge is documentation. There is a rule that if you don’t have your documents, you have nothing, and nobody will see you. Only with the health card can you be seen to. So, this is one of the first challenges for migrants in Brazil. (Jessica, Manaus, 9 June 2021)

For those who enter regularly, this obstacle need not be serious as relevant documentation is generally issued as part of Operation Welcome. Nevertheless, delays and confusion about access and procedures still are factors undermining protection, particularly for those who do not cross via the *Puerta Grande* and miss the information about entitlements to healthcare services and how to reach it provided by Operation Welcome and supporting international organizations:

the first time I went to the health services I didn’t have my health card so they dismissed me ... they told me “no, we can’t help you without the health card”. So they requested

the card for me. The card arrived about a month later, because everything there was slow, but at least it arrived. (Mirza, Manaus, 30 June 2021)

I walked a lot to find out where the nearest health service was, I walked almost two hours with my son in my arms, to get to the health post. There, I arrived and presented my identity card and birth certificate, and they gave me my health card and my son's. I didn't have money to pay for transport to go. (Eliane, Manaus, 24 June 2021)

The issue here is two-fold. First, as we have noted, Brazil's imposition of border controls creates irregularity. Second, although all migrants irrespective of their status have a right to access health services, the exercise of this right requires appropriate documentation, a health card, and those who are in positions of forced irregularity often lack not only information about how to get this documentation but also the practical social confidence in the public authorities needed to attempt to do so, or the knowledge that they can do it. This problem is exacerbated by a recurrent issue highlighted by the displaced women, namely, that of language barriers.

Many interviewees stated that language (Portuguese) affected their ability to seek, reach, and engage appropriately with health services:

... language is an impediment to everything because you want to express your pain, what you feel, and many times people don't understand, then you get frustrated ... language and not having the financial resources are the greatest barriers. (Patricia, Manaus, 4 June 2021)

... health service providers do not support us respectfully. One tries to ask, I feel embarrassed (...), they get uncomfortable when you try to ask again, they don't take any interest. And they don't feel the need to understand someone in their language. I feel I need to be submissive; I have to ask the same questions a thousand times ... So it is a barrier for me that is uncomfortable, and that is why many Venezuelans do not go to the doctor. (Eliane, Manaus, 24 June 2021)

Some health service providers are not patient ... being a Venezuelan they treat one in a derogatory manner, they do not have the patience to explain to us, they are not interested in learning the Spanish language, we are forced to learn Portuguese. (Luisa, Manaus, 29 June 2021)

Language is especially problematic for migrant women and girls if access to information, guidance, services, and assistance depends on translation from someone else, especially someone known to them within the displaced community. The gendered dimension of this problem emerges most clearly in the case of victims of sexual violence for whom the act of having to disclose their condition and its causes to medical professionals is already emotionally difficult, but it is worsened when in the presence of a (typically male) translator from their communities. One interviewee, for instance, wanted to seek medical help after having been sexually assaulted, but could not

communicate properly in Portuguese and for this reason she was accompanied by her father who spoke the language, but this meant not disclosing or reporting the nature of the visit to the health service. Similar cases are far too common and point to the need for appropriate support, including translation, for effective gender-responsive health services. This is especially urgent for migrant women from indigenous communities, like the Venezuelan Warao, whose needs extend beyond language to cultural translation and adaptation. A culturally sensitive approach to women's health is essential, recognizing their unique perspectives on health and treatment.

All in all, the language problem points to the need for the issue of translation to be treated not simply as a general problem concerning access to information and means of communication, but as one that, in a generalized context of gender-oppressive social norms, has specific gendered characteristics that significantly shape women's conduct in relation to health services, with direct consequences for their (health) rights and dignity.

Given the centrality of issues of shelter and health to the ethics of protection in reception, the challenges raised by the displaced Venezuelan women highlight significant limitations and gender-blind dimensions of Operation Welcome that affect freedoms, agency, and voice. They also point to a further failure of the existing humanitarian protection framework to engage with displaced women as autonomous subjects of rights.

### *Protection and Recognition of Agency and Autonomy*

Autonomy, as Catriona Mackenzie (2021, 374) remarks, is about both the *capacity* "to make decisions and to act on the basis of one's reflective preferences, value, or commitments," and the *status* "to exercise self-determining authority over one's decisions and one's life, an entitlement that others are obliged to respect." From this perspective, protection systems that impair individuals' capacities to lead self-determining, self-governing, and self-authorizing lives can be socially oppressive. Forms of gender oppression can manifest in patterns of hierarchically structured social relations, institutions, and practices of gender-based domination and subordination not only in social conditions that produce displacement but also in the forms of protection intended to address the harms of displacement. Moreover:

Because the status of autonomy depends on social relationships as well as social and institutional environment, some persons with the capacity for autonomy may fail to be recognised and treated by others as having the status of autonomous agents (Mackenzie 2021, 375).

In the case of the provision of protection as illustrated by the case of Brazil, the humanitarian approach to aiding Venezuelan displaced women within contexts with militarized borders and reception restricts autonomy across all of its three dimensions. The provision and providers of humanitarian protection, in effect, create and compound situations of risk, domination in relation of assistance, and



gendered gaps in protection. In these circumstances, the agency of migrants and refugees is being exercised under highly constraining conditions.

The two preceding problems of protection identified by women to which we have drawn attention—access to protection and problems of protection—have been centrally concerned with the self-determination and self-governance dimensions of autonomy. Thus we have drawn attention to the fact that displaced women in reception find that they may have very little control over important domains of their lives such as safety, shelter and health, that the scope of their ability to express their practical identity in actions and choices is limited by relationships of dependency on agencies of (humanitarian) protection and services, and that their circumstances restrict the compossible expression of values. The problem raised by the humanitarian mode of protection, however, also fundamentally concerns the third dimension of autonomy, self-authorization, because it constructs a social environment that acts to undermine the ability of women to see themselves as having normative authority over their lives.

Consider again the voices of displaced women that we have introduced in this article as agents who are not only a potential epistemic resource for a regime of protection-in-reception, capable of identifying problems and proposing ways of redressing them, but are ethical and political agents who engage in claims-making and self-organizing to address their condition and the constraints of the regime to which they are subject. One of the striking features of the displaced women to whom we spoke was their frustration that the protection regime seemed to address them solely as victims who are a problem to be managed rather than as agents who had already made difficult decisions, embarked on often dangerous journeys, and overcome significant obstacles—often as an expression of their maternal commitment of care towards their children (born or unborn), but in many cases, relying solely on themselves. They identify a victim-based approach to the delivery of protection as undermining their autonomy and capacity of self-organization precisely because it does not recognize them as self-authorizing agents.

This has led some women to fight back against this approach. One interviewee claimed:

I've been enduring beatings for six years. (...) Life has hit me hard too because in Boa Vista [Brazil] I had no one. I spent about three days living in the streets with my children. Here in the shelter, I was also abused several times. The last time, I couldn't take it anymore. I spoke up and other women here from the shelter called the security guard and they threw him out. The other women were the ones who helped me... I will never forget what one of them told me, "Ni una más [Not any woman more]<sup>4</sup>." (Creo en Dios (pseudonym), 02 October 2021, Manaus, Brazil)

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<sup>4</sup>The phrases "ni una menos" (not one woman less) and "ni una más" (not one woman more) are both used in the contemporary feminist movements in Latin America demanding action against gender-based violence.

While another seconded,

As soon as you break down the barrier and lose your fear when facing your reality, what you experienced, this helps other women. We don't need to be afraid; we need to speak. (Yuritza, Manaus, 02 October, 2021).

To think about gender-responsive protection is to redress the gaps and negative effects of gender-blind provision of shelter, healthcare, and other services at crossing and reception as much as to move beyond dominant approaches to humanitarianism that attend and respond to displaced women as victims. This, as we propose, demands creating conditions in protection-in-reception for the exercise of voice and autonomy.

To repair this, a gender-responsive protection needs to adopt a different approach to its responsibilities in relationship to the specific context of displaced women and girls, and this has implications for how responsibilities should be shared across states and the role of other actors within the domain of protection.

The presence of displaced women and girls on the territory of a state triggers a specific set of responsibilities of protection, at places of first reception (as well as in settlement and transit) not only to make available and accessible the support that people in displacement need as a matter of immediate necessity, but also to be able to rebuild their lives as effective social, autonomous agents. From our analysis of protection gaps at reception, gender-responsive protection in the first instance involves:

1. *Not obstructing—and, as a far as practicable, enabling—conditions of safe access to protective reception.* This involves both avoidance of obstacle-imposing border policies as well as observance of the strict duty of nonrefoulement and protection in place, a fair and impartial process of status determination, and access to individualized identity documents. This is to institute social relations of protection that enable self-determination within the constraints of the condition of the home state confronted by displaced women and enable self-governance by allowing, as far as possible under these conditions, actions to express women's practical identities (e.g., their commitments of care) and the compossible expression of values (e.g., care for children and safety in the journey, safety and shelter in reception conditions).
2. *Redressing problems at reception* by providing genuinely safe temporary shelter. This means, above all, ensuring that women and girls have access to safe, 24-h shelter, where they are not exposed to risks of sexual assault or exploitation due to having nowhere secure to stay during the day. In Brazil, for instance, the open structure of shelters in major arrival cities often forces women to make decisions between risky situations, compromising their self-governance.

3. Likewise, gender-responsive protection at reception requires ensuring effective and secure access to sexual and reproductive health services. This means not only having the capacity to provide healthcare to all displaced women and girls and ensuring they know they have the right to access these services, but also delivering care in a manner that respects their identities as displaced Venezuelan women and girls. It requires sensitivity to gender, age, culture, and the disorientation and trauma that often accompany displacement, in order to address the barriers to protection and healthcare that migrant women identified.
4. *Including voice and mechanisms of consultation and contestation.* Support for displaced women and girls to organize themselves and exercise voice in relation to the practices of protection to which they are subject by being consulted about the operation of protection and being able to challenge features of this operation. In doing so, it recognizes migrant women's epistemic dignity as agents who offer credible, and privileged, testimony concerning the operative practice of protection. It also acknowledges their values and their moral dignity as agents with a right to justification concerning how they are governed by the practice of protection. This approach places displaced people in the center of policy-making and implementation, not as passive receivers of institutionalized compassion. Recognizing and highlighting the social and gender inequalities that circumscribe reception, such an approach aims not only to enable practices of protection that are responsive to gender inequalities but institute social relations of protection that support and sustain the ability of women to see themselves as self-authorizing with respect to their lives within the constraints of their situation and enact social norms that contest the social reproduction of gender oppression.

Such an ethics of protection requires a range of resources to deliver goods and services in ways needed to secure gendered responsive protection. Our reflections draw attention to the fact that these goods and services require place-based provision by local, national, and regional actors, supplemented (where possible given the nature of the good or service in question) by international organizations. It is important to stress here that while, in general, responsibilities of place for addressing issues of protection in sites of reception are shared between the states of first refuge as the representative territorial agents of the international community and international organizations, most obviously UNHCR and often IOM, as in Brazil's Operation Welcome, responsibilities of resourcing encompass the wider international community through duties that are discharged by supplying funding and resources to UNHCR and related bodies (e.g., IOM and UNFPA) including regional organizations that support regional frameworks for migration in South America.

## Conclusion

The gendered character of forced migration is brought into sharp relief by the mass displacement of Venezuelan women. Not only are they compelled to flee for reasons that are typically either gender-specific (the collapse of maternal health care) or gender-inflected (as primary agents of familial care-work), but they also confront gender-specific challenges in transit to, and reception in, countries of protection. A gendered lens on protection, as we proposed in this article, means considering women and girls' experiences, providing a deeper look at institutional, intersocietal, and intersectional practices that not only reproduce gendered risks and inequalities but fundamentally affect the exercise of rights of displaced populations.

We have aimed in this article not only to broaden the scope of the feminist literature, much of which is focused on the reception and protection of refugees and forced migrants in the global North, by expanding the geographical reach to a context of South-South movement, but also to offer a critical evaluation of the widely (and in many respects rightly) praised regime of protection in Brazil, *Operação Acolhida* (Operation Welcome) by centering the voices of displaced women to demonstrate how their critical perspective is consonant with feminist critiques of refugee protection regimes. As such, we identified gender-blind aspects and protection gaps within the current system of protection in reception. Based on this feminist critique and our reconstruction of the critical perspective of displaced women, we concluded by proposing some elements that should be seen as central to constructing a gender-responsive regime of protection in reception, an alternative approach to protection that recognises that any efforts to break cycles of deprivation and exclusion affecting displaced women and girls should privilege determinants of relational autonomy and the social agency of displaced women and girls.

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## References

Aleinikoff, A., and L. Zamosc. 2019. *The Arc of Protection*. Stanford: Stanford University Press.

- Amnesty International. 2018. "Fleeing the Country to Give Birth: The Exodus of Pregnant Venezuelan Women." Accessed February 22, 2024. <https://www.amnesty.org/en/latest/news/2018/05/huir-para-ver-la-luz-el-exodo-de-las-embarazadas-venezolanas/>.
- . 2023. "Americas: Regularization and Protection: International Obligations for the Protection of Venezuelan Nationals." Accessed February 22, 2024. <https://www.amnesty.org/en/documents/amr01/7130/2023/en/>.
- Anker, D. 2020. "The History and Future of Gender Asylum Law and Recognition of Domestic Violence as a Basis for Protection in the United States." *Human Rights Magazine* 45 (2): 14–6. <https://www.jstor.org/stable/27007445>.
- Balaguera, M. 2022. "Trans-asylum: Sanctioning Vulnerability and Gender Identity Across the Frontier." *Ethnic and Racial Studies* 46 (9): 1791–811. <https://doi.org/10.1080/01419870.2022.2097014>.
- Brumat, L. 2022. 'Migrants or Refugees? Let's Do Both'. Brazil's Response to Venezuelan Displacement Challenges Legal Definitions." Accessed February 22, 2024. <https://blogs.eui.eu/migrationpolicycentre/migrants-or-refugees-lets-do-both-brazils-response-to-venezuelan-displacement-challenges-legal-definitions/>.
- , and V. Finn. 2021. "Mobility and Citizenship During Pandemics: The Multilevel Political Responses in South America." *Partecipazione e Conflitto* 14 (1): 322–40. <http://dx.doi.org/10.1285/i20356609v14i1p321>.
- , and F. Freier. 2020. "South American De Jure and De Facto Refugee Protection: Lessons from the South." ASILE Project. Accessed February 22, 2024. <https://www.asileproject.eu/south-american-de-jure-and-de-facto-refugee-protection/>.
- Cabot, H. 2019. "The European Refugee Crisis and Humanitarian Citizenship in Greece." *Ethnos* 84 (5): 747–71. <https://doi.org/10.1080/00141844.2018.1529693>.
- , and G. Ramsay. 2021. "Deexceptionalizing Displacement: An Introduction." *Humanity: An International Journal of Human Rights, Humanitarianism, and Development* 12 (3): 286–99.
- Camargo, J. 2021. "Gender and Forced Migration from Venezuela: Brazil's Advancements and Challenges." <https://stanleycenter.org/wp-content/uploads/2021/04/DPMVA-V-GenderMigration-Venezuela-Brazil-Camargo-v7.pdf>.
- Cantor, D., L. Freier, and J. P. Gauci. 2015. "Introduction: A Paradigm Shift in Latin American Immigration and Asylum Law and Policy?" In *A Liberal Tide? Immigration and Asylum Law and Policy in Latin America*, edited by J. C. Cantor, J. P. Gauci, and L. F. Freier, 1–10. London: University of London.
- Castro, A. 2021. 'Displaced Venezuelans in Latin America: A Test of Regional Solidarity?' <https://www.ifri.org/en/publications/notes-de-lifri/displaced-venezuelans-latin-america-test-regional-solidarity>.
- Cherem, M. 2016. "Refugee Rights: Against Expanding the Definition of a "Refugee" and Unilateral Protection Elsewhere." *Journal of Political Philosophy* 24: 183–205. <https://doi.org/10.1111/jopp.12071>.
- Crawley, H. 2021. "Gender, 'Refugee Women' and the Politics of Protection." In *The Palgrave Handbook of Gender and Migration*, edited by C. Mora and N. Piper, 359–72. London: Palgrave Macmillan.

- . 2022. “Saving Brown Women from Brown Men? ‘Refugee Women’, Gender and the Racialised Politics of Protection.” *Refugee Survey Quarterly* 41 (3): 355–80. <https://doi.org/10.1093/rsq/hdac021>.
- Do Carmo Leal, Maria, Thaiza Dutra Gomes de Carvalho, Yammê Ramos Portella Santos, Rita Suely Bacuri de Queiroz, Paula Morelli Fonseca, Celia Landmann Szwarcwald, and Pía Riggirozzi. 2024. “Migration Process of Venezuelan Women to Brazil: Living Conditions and use of Health Services in Manaus and Boa Vista, 2018–2021.” *BMC Public Health* 24: 1051. <https://doi.org/10.1186/s12889-024-18109-5>.
- Doocy, S., K. Page, F. de la Hoz, P. Spiegel, and C. Beyrer. 2019. “Venezuelan Migration and the Border Health Crisis in Colombia and Brazil.” *Journal on Migration and Human Security* 7 (3): 79–91. <https://doi.org/10.1177/2331502419860138>.
- Dustin, M., and C. Querton. 2022. “Women in Refugee Law, Policy and Practice: An Introduction to The Refugee Survey Quarterly Special Issue.” *Refugee Survey Quarterly* 41 (3): 347–54. <https://doi.org/10.1093/rsq/hdac023>.
- Fassin, D. 2011. *Humanitarian Reason: A Moral History of the Present*. Los Angeles: University of California Press.
- Freedman, J. 2010. “Mainstreaming Gender in Refugee Protection.” *Cambridge Review of International Affairs* 23 (4): 589–607. <https://doi.org/10.1080/09557571.2010.523820>.
- Freedman, J. 2015. *Gendering the International Asylum and Refugee Debate*. 2nd ed. Basingstoke: Palgrave Macmillan.
- . 2016. “Sexual and Gender-Based Violence Sexual and Gender-Based Violence Against Refugee Women: A Hidden Aspect of the Refugee ‘Crisis.’” *Reproductive Health Matters* 24 (7): 18–26. <https://doi.org/10.1016/j.rhm.2016.05.003>.
- Freedman, J., N. Sahraoui, and E. Tyszler. 2022. “Asylum, Racism, and the Structural Production of Sexual Violence Against Racialised Women in Exile in Paris.” *Social Sciences* 11 (10): 426. <https://doi.org/10.3390/socsci11100426>.
- Frouws, B. 2016. “The Least Condemned Crime: Sexual and Gender Based Violence Against Migrants and Asylum Seekers on the Move in the Horn of Africa.” Mixed Migration Centre, Switzerland, online August.
- Guerra, K., and M. Ventura. 2017. “Bioética, imigração e assistência à saúde: Tensões e convergências sobre o direito humano à saúde no Brasil na integração regional dos países.” *Cadernos Saúde Coletiva* 25 (1): 123–29. <https://doi.org/10.1590/1414-462X201700010185>.
- Hammoud-Gallego, O., and L. Freier. 2022. “Symbolic Refugee Protection: Explaining Latin America’s Liberal Refugee Laws.” *American Political Science Review* 117 (2): 454–73. <https://doi.org/10.1017/S000305542200082X1-20>.
- Harrell-Bond, B. 1999. “Interview.” In *Engendering Forced Migration: Theory and Practice*, edited by D. Indra, 40–63. Oxford: Berghahn.
- Hennebry, J., and A. Petrozziello. 2019. “Closing the Gap? Gender and the Global Compacts for Migration and Refugees.” *International Migration* 57 (6): 115–38. <https://doi.org/10.1111/imig.12640>.
- Hyndman, J. 1998. “Managing Difference: Gender and Culture in Humanitarian Emergencies.” *Gender, Place and Culture* 5 (3): 241–60.

- Johnson, H. L. 2011. "Click to Donate: Visual Images, Constructing Victims and Imagining the Female Refugee." *Third World Quarterly* 32 (6): 1015–37. <https://doi.org/10.1080/01436597.2011.586235>.
- Kneebone, S. 2005. "Women Within the Refugee Construct: 'Exclusionary Inclusion' in Policy and Practice: The Australian Experience." *International Journal of Refugee Law* 17 (1): 7–42. <https://doi.org/10.1093/ijrl/eei002>.
- Mackenzie, C. 2021. "Relational Autonomy." In *The Oxford Handbook of Feminist Philosophy*, edited by H. Kim and Ásta, 374–84. Oxford: OUP.
- Macklin, A. 1995. "Refugee Women and the Imperative of Categories." *Human Rights Quarterly* 17 (2): 213–77.
- Makuch, M., M. Osis, A. Becerra, C. Brasil, H. S. F. de Amorim, and L. Bahamondes. 2021. "Narratives of Experiences of Violence of Venezuelan Migrant Women Sheltered at the Northwestern Brazilian Border." *PLoS One* 16 (11): e0260300. <https://doi.org/10.1371/journal.pone.0260300>.
- Malkki, L. 1996. "Speechless Emissaries: Refugees, Humanitarianism, and Dehistoricization." *Cultural Anthropology* 11: 377–404. <https://doi.org/10.1525/can.1996.11.3.02a00050>.
- Moulin, C., and B. Magalhães. 2020. "Operation Shelter as Humanitarian Infrastructure: Material and Normative Renderings of Venezuelan Migration in Brazil." *Citizenship Studies* 24 (5): 642–62. <http://dx.doi.org/10.1080/13621025.2020.1784643>.
- Organization for American States-OAS. 2021. "Venezuelan Migration and Refugee Crisis." Accessed February 22, 2024. <https://www.oas.org/fpdb/press/Crisis-Overview-ENG.pdf>.
- Perkowski, N. 2018. "Frontex and the Convergence of Humanitarianism, Human Rights and Security." *Security Dialogue* 49 (6): 457–75. <https://doi.org/10.1177/0967010618796670>.
- R4V- Response for Venezuelans. 2021. "Refugee and Migrant Response Plan." Accessed February 22, 2024. <https://brazil.iom.int/sites/brazil/files/Publications/RMRP%202021%20-%20Cap%C3%ADtulo%20Brasil.pdf>.
- . 2024. "Refugees and Migrants from Venezuela." Accessed February 22, 2024. [https://www.r4v.info/sites/g/files/tmzbd12426/files/2024-09/RMNA%202024\\_V7\\_3\\_4\\_0.pdf](https://www.r4v.info/sites/g/files/tmzbd12426/files/2024-09/RMNA%202024_V7_3_4_0.pdf).
- Ratzmann, N., and N. Sahraoui. 2021. "Conceptualising the Role of Deservingness in Migrants' Access to Social Services." *Social Policy and Society* 20 (3): 440–51. <https://doi.org/10.1017/S1474746421000117>.
- Riggirozzi, P., N. Cintra, J. Grugel, G. Garcia Garcia, and Z. Lamy. 2023. "Securitisation, Humanitarian Responses and the Erosion of Everyday Rights of Displaced Venezuelan Women in Brazil." *Journal of Ethnic and Migration Studies* 49 (15): 3755–73. <https://doi.org/10.1080/1369183X.2023.2191160>.
- Roth, B. 2021. "Temporary Shelter: Venezuelan Migrants and the Uncertainty of Waiting in Colombia." *Journal of Immigrant & Refugee Studies*, 21(3): 263–75. <https://doi.org/10.1080/15562948.2021.1974147>.
- Sahraoui, N. 2020. "Gendering the Care/Control Nexus of the Humanitarian Border: Women's Bodies and Gendered Control of Mobility in a European Borderland." *Society and Space* 38 (5): 905–22. <https://doi.org/10.1177/0263775820925487>.

- UNHCR. 2023. "Refugee Data Finder." Accessed February 22, 2024. <https://www.unhcr.org/refugee-statistics/download/?url=Mv6Hh0>.
- Vasconcelos, I., and I. Machado. 2022. "Uma missão eminentemente humanitária? Operação Acolhida e a gestão militarizada nos abrigos para migrantes venezuelanos/as em Boa Vista." *REMHU: Revista Interdisciplinar da Mobilidade Humana* 29 (63): 107–22. <https://doi.org/10.1590/1980-85852503880006307>.
- Zapata, G. P., and V. Tapia Wenderoth. 2021. "Progressive Legislation but Lukewarm Policies: The Brazilian Response to Venezuelan Displacement." *International Migration* 50 (1): 132–151. <https://doi.org/10.1111/imig.12902>.