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DECENTRALIZATION AND POLICIES
FOR THE PROTECTION OF CHILDREN
AND ADOLESCENTS IN BRAZIL

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This paper forms part of the background documentation for a UNICEF-ICDC study on "The Decentralization of the National Programmes of Action", under the direction of Carlos Castillo.
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The views expressed in this paper are those of the authors and do not necessarily represent the views of the UNICEF International Child Development Centre.
This paper aims to present a brief analysis of the process of decentralization of social policies in Brazil, especially those related to children and adolescents.
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EXECUTIVE SUMMARY

The reestablishment of a democratic Government in Brazil, with the resulting promulgation of a new Constitution in October 1988, has produced two important changes for children and youth. First, children and adolescents have been recognized as citizens entitled to rights. Second, the legal groundwork has been laid for adjusting social policies within a dual context: from the Government to civil society and from the Federal level to the municipalities and states.

Though a preliminary version of the Brazilian National Programme of Action has been forwarded to the UN, the country has not yet formalized a final NPA. Therefore, the goals related to policies for the protection of children have been broken down into state plans of action. The short-term consequences of these "SPAs" are reflected in "The Commitments for the 500 Days of Action for Children", an additional effort undertaken by each state to attain 29 common goals during the final 500 days of the present mandate of the state governors.

This decentralized strategy was launched in 1991 through the Pact for Children, a nationwide initiative involving Government leaders, the public and UNICEF. The coordination and mobilization achieved through the Pact for Children have led to two national meetings of state governors and Government social-sector ministers and fostered a style in public policy that is more in line with the federative structure of the country.

This has been an unprecedented step in a nation with strong traditions of "centralization" and limited experience in participatory planning. As a result, priorities, goals and evaluation indicators which used to be defined at the Federal level for the country as a whole have started to be established by each state in a process of consensus with Government representatives, social-sector ministries, nongovernmental organizations, the National Council for the Rights of Children and Adolescents and the state councils for the rights of children and adolescents.

In order to monitor activities, particularly those related to "The Commitments for the 500 Days of Action for Children", regional meetings have been held every 100 days. This methodology has not only permitted the development of objective analyses, but also facilitated the distribution of the results of evaluations to the municipal, state and national councils for the rights of children and adolescents, to nongovernmental organizations and, through the media, to the population at large.

Obviously, not all problems have been solved, although important progress has taken place. Some examples of recent achievements are the eradication of polio, a significant reduction in the incidence of measles and neonatal tetanus, the improvement of joint management in public schools, the creation of state councils for the rights of children and adolescents in 26 of the 27 states of Brazil (including the Federal District of Brasília), and the establishment of municipal councils in nearly one-half of the nearly 5,000 municipalities in the country.
I. INTRODUCTION

This paper deals with the process of the decentralization of policies for the protection of Brazilian children and adolescents, within the context of the decentralization of public policies in general. It focuses on the social "agents" and conditions which promote or hold back public policies for children and highlights the process of the formulation of the National Programme of Action for the Protection of Children and Adolescents in the 1990s, which has not yet been concluded, and the implementation by the states of plans of action for the protection of children and adolescents.

What changes in this specific area have been the result of the recent process of "democratization" and, particularly, of the Constitution of 1988? How has the process of the decentralization of policies for children and adolescents progressed in a country which has a strong tradition of centralization and which has not yet presented a formal National Programme of Action? What mechanisms for "mobilization" are being used, and what are the main instruments for "social" participation that have arisen through the process? These are some of the essential questions which this paper seeks to address.

The process under analysis, both rich and fascinating, began with the restoration of democracy in Brazil. Few moments in Brazilian history have involved such intense social participation as the so-called "democratic transition". Having begun in the early 1980s, when the authoritarian regime established in 1964 started to show signs of weakening, the transition reached a peak with the conclusion of the work of the National Constituent Assembly in October 1988 and culminated in direct elections for the president of the Republic—for the first time in 30 years—in 1989.

The drafting of the new Constitution, the adoption of progressive public policies and, above all, the passage of laws for the protection of children and adolescents have to a great extent been the fruit of large-scale social mobilization. Changes in content have materialized as the process has evolved. These initiatives have also been influenced by the reversal of the trend toward centralization that had hitherto been one of the main characteristics of the State.

The political consensus at the forefront of this change in direction has been due to a recognition of the nature of the relationship between democracy and decentralization and a convergence around this issue among opposing ideological tendencies. The advocates of the minimal State (that is, those who favour less government and more civil society or more free play of market forces) and those in favour of State intervention have reached a consensus on two central issues. First, if social policies are to be more democratic, efficient and equitable,
the State cannot be ignored. Second, in Brazil, with its federative system, vast territorial
dimensions and great regional diversity, actions and programmes of a local or regional nature
should not be the concern or responsibility of the central Government. Among such activities,
education, social assistance and practically all health services could be more effectively
provided by the municipalities and states in partnerships established with the private sector
and nongovernmental organizations. The Federal Union should restrict itself to basic
functions such as regulation and the strengthening of the mechanisms of "social control" over
public policies—with a view to reducing inequalities among individuals and regions—and
should participate in the financing of specific policies in order to promote equity.

II. THE NATIONAL CONTEXT

Socioeconomic Overview

Brazil is the fifth largest country in the world. It is a federative republic made up of 26 states,
a Federal District and 4,975 municipalities. In 1991 the population was 146.9 million. Forty-
five percent of the population is under 19 years of age.

Brazil's gross domestic product (GDP) is the world's tenth largest. The annual per
capita income is around $2,800, making Brazil an advanced developing country. However,
the average income figures fail to reveal the vast social and economic contrasts and
inequalities existing within Brazilian society.

The nation's wealth is concentrated in the South and Southeast. In the country as a
whole in 1990 there were 5.9 million families (32 million people) whose income per capita
was insufficient to cover the cost of basic food needs (IPEA 1993). The high rates of chronic
inflation that have been a characteristic of the Brazilian economic model (at least until July
1991) have had the effect of exacerbating inequalities and concentrating wealth in the hands
of the few, while the poor find themselves excluded from the benefits of a modern society.

The Process of State Decentralization

Since the proclamation of the Brazilian Republic in 1889, there have been more than 30 years
of dictatorial rule (the first Vargas Government, 1934-45) or authoritarian rule (1964-85).
During this later period of authoritarian rule the centralization of the state was taken to extremes. The fiscal reform of 1967 placed great power into the hands of the central authorities, consequently weakening the municipalities and states and making them totally dependent on the Federal treasury.

On the other hand, during the period of military rule Brazil experienced unprecedented economic growth. The favourable economic climate made it possible for the regime to expand social policies of a compensatory nature (and thus win legitimacy in the eyes of the populace) that were financed and sometimes even directly executed by the Federal Government.

The disadvantages of such a strategy are now quite apparent: the discouragement of community initiative, the reduction of the importance and autonomy of municipal and state governments in light of their dependence on the transfer of Federal funds that placed all the bargaining power on the side of the State, "long-distance" decisionmaking, often resulting in measures quite inappropriate to the realities of the situation they were intended to change at the local level, and, lastly, a propensity on the part of the Federal Government to apply the same policies throughout the country, totally ignoring local and regional peculiarities.

In 1988 the National Constituent Assembly, in redefining the powers of the municipal, state and Federal governments, sought to decentralize the Brazilian State. The inclusion in the new Constitution of the municipality as a member of the federation is one example of the (rather symbolic) importance attributed to the local level of administration.

Only three other countries in Latin America have adopted the federative system of government: Argentina, Mexico and Venezuela. In all the others the departments or other decentralized agencies of the central government generally have little of the autonomy inherent to a federated state. Moreover, since the promulgation of the 1988 Constitution, Brazil is the only country in the world in which the federation is made up not only of states, but also of municipalities. In practice this means that the responsibilities of the State are shared by three levels of authority: the municipalities, the states and the Federal Union, all of which equally possess *jus imperii*, without any subordination, and enjoy political, financial and administrative autonomy (IPEA and IBAM 1994).

The strengthening of the local level was an objective of the new scheme for sharing tax revenues that was introduced by the Constitution and that weakened Federal authority to the benefit of the municipalities and states. In 1970 the Federal Government controlled 51 percent of national tax revenues; by 1993 this share had dropped to 36 percent.
In its conception of the "Nation State", the framework created by the new Constitution also established a fresh orientation toward social policy in the wider sense. With the exception of the area of social security (a justifiable exception in view of the equity issues involved), decentralization took hold in many fields not just because of the immense size of the country, but also because of considerations such as:

- Evidence that costs are almost always higher when local initiatives, which tend to benefit from a more immediate contact with the beneficiaries, are ignored in favour of solutions conceived and often even carried out by agencies of the central Government.
- Better opportunities for "social control".
- The intense process of social mobilization and the search for more areas for popular participation that have been characteristic of the restoration of democracy and the rule of law.

Decentralization and its logical consequence, community participation, are in evidence among the constitutional guidelines which apply to the organization of education, health care and social assistance. Thus, the responsibility for maintaining preschool and elementary education programmes and for providing health care services that had formerly been shared among the municipalities, states and the Federal Union is now, under the new Constitution, explicitly the task of the municipalities (FRB 1988). The states and the Federal Union are responsible in these two sectors for providing technical and financial assistance to the municipalities. The protection of families, mothers, children, adolescents and the aged and the provision of support to needy children and adolescents are now a shared responsibility of the municipalities and the states.

**The Forms and Limits of Decentralization**

The process of decentralization in Brazil can be examined from two distinct angles (IPEA and IBAM 1994).

1. **Decentralization within the State Apparatus**, that is, decentralization among agencies of the central Government ("intra-Governmental decentralization") and decentralization among levels of government, whether local or national ("intergovernmental decentralization").

   In the Federal public sector *intra-Governmental decentralization*—"deconcentration" from direct to indirect administration or from central to regional or local offices—goes back roughly 40 years. During this period, with the need to impart greater flexibility to the rigid
structures of direct administration, new organizational entities began to proliferate, especially in the 1960s and 70s, in the form of "foundations", independent agencies and state companies.

In intergovernmental decentralization—decentralization among different levels of government, typically through the transfer of responsibilities, either with or without the transfer of power, from the Federal Union to municipalities and the states, or from state governments to municipal administrations—there are two mutually exclusive dimensions.

- The socioeconomic dimension, which stresses decentralization as a source of public revenues. Although the 1988 Constitution altered the sharing of tax revenues to benefit the municipalities and states, the financing of the social sector, especially health care, social security and social assistance, is still firmly based upon Federal "social charges", that is, taxes on the payrolls, profits and earnings of companies. Revenue from these social charges are tied to the social security system (health care, pensions and social assistance). A specific charge is also levied on payrolls to finance elementary education (the so-called "education-wage").

- The political-institutional dimension, which stresses the redefinition of the distribution of responsibilities among the various levels of government, with a view to removing the state and Federal levels (but particularly the latter) from the provision of services of an essentially local nature. This second dimension predominates in the Brazilian decentralization process.

2. Decentralization from the State to Society in the sense of a sharing between the State and society at large of the responsibility for the formulation and monitoring of public policies and in the sense of alternative forms of "social" decentralization.

The sharing between the State and society at large of responsibility for the formulation and monitoring of public policies is beginning to occur, for example, in health care by means of the municipal, state and national councils of health, in education through the establishment of the "collegiate management" of public schools, and even more specifically in the area of policies for the protection of children, through the creation of municipal, state and national councils for the rights of children and adolescents.

Alternative forms of "social" decentralization include the following.

- The transfer of the realization of certain activities to the private sector, usually by means of some form of State financing ("outsourcing"). An innovation in this area in Brazil is represented by the management contracts by means of which the methods and legal principles of private enterprises are encouraged, while the regulatory control, property and financing remain in the public sector.
- The transfer of the administration of public services to individuals or more usually to private organizations through "concessions". In Brazilian administrative law, these concessions are defined as agreements by which public authorities delegate the responsibility for the provision of services to private individuals, who may exploit them at their own risk for fixed periods and under certain agreed conditions and who have the right to charge fees to users (Meirelles 1994).

- The transfer of ownership from the State to the private sector (privatization in the strict sense).

"Partnerships" between public authorities and private non-business entities (community associations, cooperatives, unions, nongovernmental organizations and so on) are not new in Brazil. Although they are less common in the area of education, where the majority of establishments are subject to market forces and are independent of official financing, this type of arrangement shows great potential in health care and social assistance.

Partnerships may be formalized through a variety of instruments. The most common is the "convênio" ("agreement"), or contract, for the provision of services. Roughly 80 percent of medical and hospital care is financed by the public sector and provided by private organizations on a for-profit basis by means of such instruments.

It is a relatively common conceptual error in the Brazilian context to suppose that "municipalization" is the extreme limit of decentralization. In health care, for example, such a misconception appears to result from the fact that Law N° 8080/90 (FRB 1990), which regulates the unified health care system created by the 1988 Constitution, does not specifically mention independent management on the part of operational units such as hospitals and health care centres. With regard to this omission, a few national referral-centre hospitals, such as the Instituto do Coração (the Heart Institute) in São Paulo and the Hospital das Doenças do Aparelho Locomotor (the Orthopedic Hospital) in Brasília (the first example of a management contract in the social area), have achieved a great degree of administrative autonomy. Had it been otherwise, it is unlikely that these institutions would have acquired such a good reputation among the public.

In education, the administrative, financial and pedagogical independence of primary schools has advanced rapidly. Norms and criteria for the transfer of funds have been established in 12 of the 16 states which provided information for a recent evaluation (Pacto pela Infância 1994a). Only four among the 14 states for which information was available do not yet directly transfer resources to support schools.
All of these advances have been achieved through concerted efforts and with the understanding that the realization of the decentralization foreseen in the Constitution must involve a constant struggle. After all, decentralization necessarily implies a transfer of power from the centre to the "periphery", and one of the main difficulties faced in such a process is resistance on the part of the central bureaucracy.

As a former minister of finance (Dornelles 1991) has stated, "the [Federal] Union, accustomed to the old reality, is incapable of rapidly absorbing the profound change which has taken place [through the new Constitution] and has refused to recognize its reduced field of action."

The Situation of Children

By the end of the 1980s the infant mortality rate in Brazil averaged 45 per 1,000 live births. Mortality rates presented significant differences from one region to another, varying from 33 per 1,000 in the Southeast to 75 per 1,000 in the Northeast. In the country as a whole, almost 60 percent of under-5-year-olds were living in homes with inadequate sanitation, which largely explains the high rate of deaths resulting from diarrhoea among under-1-year-olds (14.4 per 1,000); in the Brazilian Northeast this figure rose to 29.2 per 1,000 (UNICEF 1993).

Although problems in access to schools persist in some places, the main obstacle is the poor quality of the public educational system. For every 100 children starting school in urban areas, less than 50 complete the eighth grade. In rural schools a mere 15 percent manage to complete the eighth grade. On average, children attending public primary schools absorb no more than 46.8 percent of the minimum curricular content taught throughout the year. In all subjects, pupils in the South perform better than those in the Northeast. The evidence points to poor quality in primary-school teaching. According to data collected in 1988, 22.3 percent of primary school teachers (38 percent in the Northeast and 10 percent in the Southeast) are underqualified.

Theoretically, Brazilian children and adolescents enjoy ample protection. The rights to survival (life, health and food), personal and social development (education, professional training and leisure) and integrity (dignity, respect, liberty, and family and community life) are assured by the 1988 Constitution and the provisions of the Child and Adolescent Statute of 1990. However, a vast gulf exists between the provisions of the Constitution and the law, on the one hand, and the daily reality faced by a large share of Brazil's children, on the other.
The segment which is most exposed to situations of high risk and which in practice has the least access to these rights includes the roughly one million children and adolescents in the 10-to-17-year age group who are not living with their families. Also at great risk is a significant number of poor children engaged in different types of work (7.5 million between the ages of 10 and 17) or not enrolled in school (four million between the ages of 7 and 14).

The violence to which children and adolescents are subject is not restricted to the dangerous drivers on the highways and streets of the large cities, although traffic accidents are one of the major causes of death among the young. Data collected at the end of the 1980s indicate that approximately 70 percent of the physical assaults involving children between the ages of 10 and 17 were perpetrated by family members or by persons known to the victims. Quite distinct from these "common" homicides resulting from interpersonal conflict is the shameful issue of the "extermination" of children, that is, the murders systematically committed by organized groups with the intent to maintain order by extra-legal means.

The National Committee to Combat Violence against Children and Adolescents, in a meeting on 13 December 1991, defined the extermination of children and adolescents as, "the presumption of culpable homicide committed against minors of less than 18 years for nonfamily reasons, with the objective or subjective pretention of imposing extra-legal order, by known or unknown assailants" (Ministry of Justice 1992, page 3).

Death squads notwithstanding, considerable progress had been made in terms of the legal-institutional apparatus of the State in relation to children and adolescents even before the World Summit for Children.

The principles of the Convention on the Rights of the Child were enshrined in the Federal Constitution in October 1988, one year before they were adopted by the UN General Assembly. Law N° 8069 of 13 July 1990 (FRB 1994a), the Child and Adolescent Statute, brought Federal legislation into line with the provisions of the new Constitution with regard to children and adolescents. According to the statute, children are citizens with a series of clearly defined rights. These include all the rights enjoyed by adults. Moreover, they are guaranteed "absolute priority", protection and assistance in all circumstances. They are to take precedence in the initiatives of public institutions, the delivery of public services and the planning and execution of public social policies. Programmes aimed at the protection of children and adolescents are assured a privileged position in public funding.

The statute places particular emphasis on the participation of society at large in the formulation and regulation of public policy, through the creation of councils for the rights
of children and adolescents at the municipal, state and Federal levels. These councils are made up of equal numbers of representatives of the relevant government entities and nongovernmental organizations, and they are endowed with special funds to be raised in addition to regular financing.

The councils of guardians are another innovation introduced by the statute. These are responsible for assuring the rights of children and adolescents. The councils of guardians are an instrument whereby concerned citizens can participate in efforts to provide guidance and take action in situations where children are exposed to personal or collective risk, that is, in cases of abandonment, negligence, exploitation, violence, cruelty and discrimination involving children and adolescents within municipalities. Members of the councils of guardians are elected for three-year terms by local citizens.

III. THE ROLE OF THE PACT FOR CHILDREN

Civil society, represented by various types of organizations, has achieved a series of successes in the definition of rights and the formulation of proposals for public policies for children, thus becoming a force able to exercise influence on the legal framework and the agenda of Government. Continued effectiveness, however, requires a permanent state of mobilization and the promotion of an alliance between public authorities and society. It is in this regard that the Pact for Children, which is an outstanding example of the power of mobilization, has proved to be an appropriate forum whereby concrete results can be achieved.

The Pact for Children is a movement which is national in scope. It brings together government and nongovernmental organizations, the private sector and the media, members of Congress and show-business personalities, among others, all with a single objective: to mobilize all sectors of society and the population to improve the conditions for the survival, protection and development of the millions of Brazilian children and adolescents.

The movement arose through the initiative of well-known personalities from various walks of life who met in Brasília on 3 October 1991. On that occasion they expressed the view that children are the responsibility of all of society, and, in a "Manifesto of Indignation", they denounced the deplorable condition of Brazil’s children, calling upon the general population to participate in assuring that the constitutional rights of children are observed. Two basic commitments were adopted in the Manifesto: to improve the quality of elementary schooling
and to put an end to the violence against children and adolescents. At a second meeting of the "Pact", on 13 November 1991, a third issue was incorporated into the Manifesto: a commitment to children's health.

At this second meeting an executive group was chosen to put into effect the decisions taken by the general assembly of the Pact, and UNICEF was chosen to fulfil the functions of an executive secretariat. On this same occasion it was agreed that the governors of the 26 states and of the Federal District should be invited to join the Pact for Children at a national meeting where they would be called upon to sign commitments to the children of Brazil. Thus was born the Governors Summit for Children, which took place six months later, on 20 May 1992. At the summit, it was agreed that state plans of action should be drawn up.

The Pact constantly promotes events designed to mobilize its various partners and coordinates their efforts in order to achieve maximum impact. Oral rehydration therapy, breastfeeding and immunization campaigns, for example, involve the efforts of religious groups, private businesses and government and nongovernmental organizations. The National Advertising Council, a coalition of private volunteer agencies and media and video production companies, runs a media campaign in support of the work being carried out, while the media participates in publicizing relevant messages (see the box).

Private businesses are donating funds and providing technical expertise in defence of children's rights. The Brazilian Small-Business Service, in cooperation with the Brazilian Association of Print Industries, has sponsored the distribution of one million copies of the publication "Medidas Vitais" ("Facts for Life"), and major supermarkets are displaying appropriate messages on the shopping bags they use.

The involvement of the Catholic Church has also been significant. Roughly 53,000 volunteers affiliated with the Minors Pastorate of the National Council of Brazilian Bishops
are working in communities throughout the country in the cause of the basic rights of children. The Pastorate publishes and distributes information on the municipal councils for the rights of children and adolescents and produces training materials to assist communities in setting up new councils.

In October 1993 one of Brazil’s largest and most influential union confederations, Força Sindical, representing 700 unions and six million workers, signed an agreement authorizing UNICEF to provide technical assistance in the preparation of training materials for union activists who work with children. The union is developing workshops on issues such as child labour and is educating its members about laws which affect working children.

Law enforcement agencies are also becoming increasingly involved. State and Federal police units are providing support to councils for the rights of children and adolescents and to councils of guardians. This increased police commitment is of great significance in view of the atmosphere of threats and violence that has so often characterized the relationship between young people and law enforcement officials in the past.

Thirty Federal senators and deputies have joined forces to form the Parliamentary Front for Children, with the intent to assure compliance with existing legislation and promote fresh laws designed to safeguard the lives and rights of children and adolescents.

IV. PLANS OF ACTION FOR THE 1990s

The Formulation of the National Programme of Action

In recent years a series of events has been responsible for determining the profile of a new approach to children’s issues in Brazil and for placing these issues onto the national political agenda (see the box on the following page).

Among these events the World Summit for Children, which was held at the UN in New York in September 1990 and which brought together heads of state from various countries, including then-President Fernando Collor, deserves special mention. At the Summit it was decided that each country should produce a National Programme of Action for Children in the 1990s.

Soon after the Summit a series of major developments occurred in Brazil, including the launching of the National Plan to Combat Violence against Children and Adolescents, the
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<td>Promulgation of the new Constitution</td>
<td>5 October 1988</td>
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<td>Child and Adolescent Statute (Law No 8069)</td>
<td>13 July 1990</td>
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<td>Convention on the Rights of the Child (approved by the president)</td>
<td>September 1990</td>
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<td>World Summit for Children</td>
<td>29-30 September 1990</td>
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<td>National Plan to Combat Violence against Children and Adolescents</td>
<td>April 1991</td>
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<td>Foundation of the Pact for Children</td>
<td>3 October 1991</td>
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<tr>
<td>National Council for the Rights of Children and Adolescents (Law No 8242)</td>
<td>12 October 1991</td>
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<td>National Programme of Action (preliminary draft of the NPA)</td>
<td>30 December 1991</td>
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<td>First Governors Summit</td>
<td>20 May 1992</td>
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<td>Second Governors Summit (Commitments for the 500 days of Action for Children)</td>
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<td>First Regional Meeting for the Evaluation of the Commitments (100 days)</td>
<td>October 1993</td>
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<td>Programme of Action for the Protection of Children and Adolescents in the 1990s (final NPA)</td>
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<td>Second Regional Meeting for the Evaluation of the Commitments (200 days)</td>
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<td>Third Regional Meeting for the Evaluation of the Commitments (300 days)</td>
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<td>Fourth Regional Meeting for the Evaluation of the Commitments (400 days)</td>
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<td>Final Evaluation of the 500 Days of Action for Children (fifth meeting)</td>
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creation of the Pact for Children and the founding of the National Council for the Rights of Children and Adolescents. With regard to the preparation of the NPA, however, no substantive steps were taken until November 1991.

Only during the last two months of 1991, not so much as a result of Government initiatives, but rather as a consequence of the political action of the Pact for Children, with support from UNICEF and other UN agencies, had it become feasible to combine the inputs of all the relevant ministries and produce a draft NPA document.

Three factors contributed to this delay. The first of these was related to the incipient process of the modernization of the Brazilian State, which has involved economic adjustment policies and changes in institutional relationships. The second was the desire to keep the NPA and the definition of the relevant financial aspects (which had deliberately been omitted from the text) in line with the Pluriannual Plan, the review of which was due to be concluded during the first quarter of 1992. Third was the need for preparatory and wide-ranging discussion among the public before the final version of the NPA could be adopted. This explains the provisional nature of the document submitted to the UN early in 1992.

Disappointing all expectations, the “preliminary draft” of the NPA remained unchanged for quite some time. For this reason it did not serve as a useful instrument for stimulating discussion among the public, the prime reason for its having been considered preliminary, nor did it serve as a basis for the development of state plans of action (see later).
In part this setback stemmed from a lack of coordination among the various agencies of the Federal administration caused by a disastrous "reform" of the State initiated by the Government of President Collor. Another no less important cause was the emerging political crisis which eventually led to the traumatic impeachment of the president in 1992.

Paradoxically, the political and administrative turbulence at the Federal level produced unexpectedly positive results, in that it opened up room for manoeuvre for informal contacts between civil society and the more active segments of the Government. In this context the Pact for Children became a major forum for clarification, explanation and action.

The process of elaborating the NPA was only resumed in September 1993 during the administration of former-Vice President Itamar Franco, this time as a result of a formal request from the Ministry of Foreign Relations to the Office of the President. A new version was drawn up by a Government working group, with UNICEF support. This work was completed in January 1994, and the document was submitted to the Presidency of the Republic for eventual submission to the UN (FRB 1994b).

On this occasion the Government did not request contributions from interested nongovernment groups, even though this had been one of the main reasons for the preliminary nature of the initial proposal. The main concern was to fulfil the country's obligation to the UN. Thus, the potential of the NPA to foster social mobilization was restricted to a few individual contributions from members of the National Council for the Rights of Children and Adolescents.

The new NPA document is broad in scope, yet sufficiently detailed with regard to the goals to be pursued throughout the decade in health care, education and 'special' protection policies. However, as in the case of the first document, financing is not examined.

The main difference between the goals identified at the World Summit for Children and the targets set out in the current NPA is that the latter incorporates a large number of objectives not listed in the Summit recommendations. This results from two factors: first, the determination to include in the Brazilian NPA approaches which are not reflected in the Summit goals and, second, the more detailed treatment in the national NPA of the generic international target of improved protection for children in especially difficult circumstances.

Aside from a diversity of general objectives and guidelines, the NPA document describes goals which, in view of their social relevance and potential for generating effective action, have been designated as priorities: to reduce infant mortality, combat all forms of violence against children and adolescents, seek universal preschool education and greater
access to day care centres, improve the quality of primary education, eradicate child labour and enhance the protection for working adolescents.

The new version of the NPA has still not been submitted to the UN to replace the preliminary version. This task has been left to the Government of President Fernando Henrique Cardoso, who will take office on 1 January 1995.

Under the circumstances, this delay has been fortunate. It assures the commitment of the new Government to the NPA, while offering another opportunity to redefine priorities, resolve important questions—such as the extent of the participation of the Federal Government in the financing of the NPA—and encourage further debate and discussion about the NPA among the public. These advantages clearly outweigh the drawbacks of the delayed submission of the NPA to the UN.

The Formulation of State Plans of Action

1. **Origins: The First Governors Summit.** The absence of a national programme has not been an obstacle to the design of decentralized public policies for children. Indeed, the regulatory vacuum has been filled by the independent initiative of the states, which have not ceased to rely on the support of the sectoral ministries most closely involved with the protection of children and adolescents.

   On 20 May 1992, at the behest of the Pact for Children, 24 of the 27 state governors (including the governor of the Federal District of Brasília), as well as ministers of State and representatives of various segments of civil society—the signatories of the Pact—met in Brasília in the presence of the president of the Republic. The purpose of the meeting was to examine the plight of the nation’s children and propose policies to improve their situation.

   At the meeting the governors committed themselves to prepare state plans of action by 12 October of that year. They also agreed to meet again in mid-1993 with a view to exchanging experiences, presenting new projects and assessing the progress achieved.

2. **General Analysis.** In the meantime, economic difficulties were compounded by political problems, the extraordinary upshot of which was the ousting by democratic means of the president who had been elected just two years earlier. These developments brought the country to a virtual standstill.

   Despite all these obstacles to the meeting of the deadlines which had been set by the governors at the Brasília summit, almost all the states honoured their commitment. The
absence of a National Programme of Action, or an overall framework or model, did not prevent these states from producing draft plans of action. Despite their diversity and lack of a common format, the documents which emerged faithfully depicted each state’s peculiar circumstances and priorities. Indeed, the teams chosen in each state to draw up the SPAs found themselves unrestricted by any predetermined format or design. In a few instances the teams received support from the Brazilian Centre for Children and Adolescents and the regional offices of UNICEF.

Evaluations have shown that the proposals reflected, in a relatively uniform manner, the problems of children and adolescents within the particular context of each state. The lack of standardization, which is the most striking characteristic of this group of documents, is most evident in terms of the temporal horizon of the proposals (few of the SPAs established goals for the year 2000) and in the various levels of social participation involved in the formulation of the plans.

Few references were made to the participation of municipalities or to partnerships with nongovernmental organizations, and there was little concern for monitoring and evaluation. The same limitations apply in the area of finance. Few of the SPAs outlined the financing sources needed for the execution of the initiatives prescribed. Only two states provided estimates of the resources which would be required over a period of several years. In some of the SPAs, the Federal Union is identified as the main (potential) source of funding, revealing the degree to which the states still rely upon the Federal treasury.

Almost all the SPAs revealed that the states were experiencing problems with truancy, school failures and inadequately trained teachers. The strategies proposed for overcoming these difficulties, in the majority of cases, focused on expansion of the physical infrastructure, without addressing the need to develop methods to reduce failures and truancy, which in themselves would tend to raise school completion rates and thus contribute to the elimination of illiteracy without requiring large investments in new installations.

3. **The Second Governors Summit: The 500 Days of Action for Children.** The disparities among the SPAs were attenuated at the Second Governors Summit, held in Brasília on 7 July 1993. At this meeting the states presented their assessment reports, as had been agreed at the first summit.

Guidelines were jointly defined by the Pact for Children and the officials (the "focal points") responsible for coordinating the plans of action in each state, with a view to standardizing the content and presentation of the reports. Minimum targets identified as
common to all the states were formally recognized as national objectives, while the individual SPAs maintained those aspects which best addressed special circumstances in each state.

Moreover, the governors present at the summit and the ministers of State involved with the Pact made commitments to achieve 29 goals for children in health care, education and special protection policies. They also agreed that progress toward these goals—to be accomplished during the last 500 days of the terms of office of the governors—would be monitored every 100 days (see the box).

<table>
<thead>
<tr>
<th>THE COMMITMENTS OF THE 500 DAYS</th>
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<tbody>
<tr>
<td>Promote breastfeeding</td>
</tr>
<tr>
<td>Facilitate oral rehydration therapy</td>
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<tr>
<td>Raise vaccination coverage</td>
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<tr>
<td>Increase services for 0-to-6-year-olds</td>
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<tr>
<td>Foster high-quality schooling</td>
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<tr>
<td>Promote the status of teachers</td>
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<tr>
<td>Assure access to elementary education</td>
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<tr>
<td>Implement the councils of rights and guardians</td>
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<tr>
<td>Break the cycle of indifference and violence</td>
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<td>Develop programmes for children at high risk</td>
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V. MONITORING

The construction of a monitoring system began at the preparatory meetings for the Second Governors Summit. At these meetings, coordinated by the technical secretariat of the Pact for Children, representatives of the governors performed three tasks.

- They presented "complementary data" on the SPAs with a view to compensating for the lack of a standard format, a problem which had been detected at meetings of the Pact.
- They devised a method of evaluation to be used at the Second Governors Summit.
- They drew up a list of goals to be proposed for the approval of each governor.

The system for the monitoring and evaluation of the progress toward the achievement of the "29 commitments", as well as the relevant indicators, was conceived at a meeting which took place after the Second Governors Summit.

This series of steps formed part of a process of participation without precedent in Brazil’s experience in government planning. It was unique for two features: the consideration given to the needs and characteristics of each region and the fact that the process generated a set of decisions which were generally reached on the basis of a consensus among the representatives of the states and the sectoral ministries involved. This meant, for example, that the commitments and the indicators were only included on the agenda after they had been accepted by all parties. Each state could, naturally, employ additional indicators for its own use, though such indicators were not among those to be used nationwide.
The monitoring system was designed to make it possible to:

- Introduce uniformity among the SPAs in terms of standard basic (medium-term) goals for the mid-1990s and (longer term) goals for the year 2000.

- Evaluate the efforts to be undertaken by the various SPAs and the results expected in relation to the situation at the beginning of the decade.

- Review the NPA and the SPAs during 1995—the first year of the new administrations (of the president of the Republic and of the state governors)—and the compatibility of the NPA and SPAs with the overall policies of the new governments.

Roughly 140 indicators were defined (see the box). Long-term indicators, such as the "coefficient" of infant mortality, are "results oriented". Some short- and medium-term indicators, such as the percentage of schools that adopt "collegiate management", or the percentage of municipalities that institute municipal councils for rights, are "process oriented".

This system has favoured not only a new and successful experience in participatory planning, but also an unusual sort of field evaluation of public policies (see the box on the following page). As a result of this innovation, objective indicators have taken the place of traditional and noncritical bureaucratic reports which are not accessible to the public and which are of little use in the exercise of "social control".

Obviously, the process has encountered obstacles which are not always easily circumvented. The meetings would be even more productive if, for example, there were not such a high turnover among the representatives of the various institutions. The participation of the state councils for rights and even of the National Council for the Rights of Children and Adolescents has not been as intense as it might have been, though it has progressively improved. At the meeting for the evaluation of the first 100 days, representatives of only 12 of the 26 state councils which had been implemented were present. This number rose to 17 at the meetings for the 200- and 300-day evaluations.

<table>
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<tr>
<th>SELECTED MONITORING INDICATORS</th>
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<tr>
<td><strong>Health</strong></td>
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<tr>
<td>Coefficient of infant mortality</td>
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<tr>
<td>Number of hospitals designated &quot;baby friendly&quot;</td>
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<tr>
<td>% of under-1-year-olds given basic vaccinations</td>
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<tr>
<td>% of municipalities with health councils</td>
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<tr>
<td><strong>Education</strong></td>
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<tr>
<td>Rate of schooling</td>
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<tr>
<td>Rate of completion of eighth grade</td>
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<tr>
<td>% of 4-to-6-year-olds in preschools</td>
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<tr>
<td>% of schools with &quot;collegiate management&quot;</td>
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<tr>
<td><strong>&quot;Special&quot; Protection</strong></td>
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<tr>
<td>% of crimes against children and adolescents submitted to the courts in less than one year</td>
</tr>
<tr>
<td>Number of state councils for rights</td>
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<tr>
<td>% of municipalities with councils for rights</td>
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<tr>
<td>% of municipalities with councils of guardians</td>
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MONITORING THE 500 DAYS OF ACTION FOR CHILDREN

Every 100 days, state and Federal officials, members of councils for the rights of children and adolescents, and the press, among others, are invited to attend regional meetings to evaluate the progress of the 500-day plans of action. The meetings are highly publicized and rotate from state to state to maximize public participation.

This improved style of evaluation, using clearly defined indicators, provides a more accurate analysis of the situation of the children in each state and enables the group to outline a focused strategy for improvement. The 100-day evaluations make it possible to identify problems and difficulties early in the process and carry out the necessary adjustments. A report produced with UNICEF technical support at the end of each meeting and distributed to all Pact members and the participants at the meetings, as well as to the media at the state and national levels, describes the tangible progress being achieved in each state.

This monitoring process has become a critical instrument for pressuring politicians to abide by their commitments, while it has also succeeded in increasing public participation in the campaign to secure children’s rights.

Seizing the opportunity to allow participants to learn more about the issues in their regions, specialists in health care, education and “special” protection polices conduct seminars during the meetings, while state representatives exchange experiences and discuss solutions.

The monitoring system also possesses weaknesses which defy any simple solution.

- The scope of the information produced is somewhat limited, since, in general terms, it refers only to activities carried out by agencies subordinate to the state governments and does not cover the work of municipalities or nongovernmental organizations.

- The manner in which data are gathered and the reliability of data often leave much to be desired.

- The collection of data on some of the indicators, especially those requiring special research, is sometimes quite difficult. (The percentage of children being breastfed and the percentage of under-1-year-olds for whom children’s health cards have been issued are but two examples in the health care sector.)

However, the widespread distribution of information on the results achieved thus far has made it possible to introduce some changes into the evaluation system. Meanwhile, a focus on the main objectives has been maintained, and the system has permitted adjustments to be made in the SPAs and “social control” to be exercised over any fresh policies they involve (see the box on the following page). Agencies directly benefiting from the distribution of the information produced through the monitoring and evaluation process include the National Council for the Rights of Children and Adolescents, municipal and state councils for rights and councils of guardians, social sector agencies at the three levels of government, and nongovernmental organizations, all of which are striving to reach the same goals.
DECENTRALIZED ACTION FOR CHILDREN: A POSITIVE BALANCE

The collective efforts carried out during the 500 Days of Action for Children have produced positive results. By the time of the first evaluation meeting (100 days) only 14 state councils of health had been instituted. At the end of the 500 days all 27 states had established such councils, which are an essential instrument for "social participation" in the management of the public health care system.

The number of states with at least one referral centre for the treatment of children and adolescents addicted to drugs is still small, but it rose from five to eight during the period.

After successive vaccination campaigns in recent years, Brazil has eradicated poliomyelitis. The incidence of neonatal tetanus has dropped from 408 cases in 1989 to a mere 141 cases in 1994 (up to the end of October). The number of cases of measles is also diminishing year by year: 42,532 in 1991, 7,934 in 1992, 6,254 in 1993 and 1,639 in 1994 (up to the end of November).

"Collegiate management" in public schools has achieved progress in the South, Southeast and Central-West regions. Between the 100-day and 500-day evaluation meetings the number of states in which 70 percent of the schools had implemented this type of management system rose from four to eight. The rate of change has been slower in the poorer regions (the North and Northeast). In the North, only in Rondônia has there been any progress in this area (40 percent of the schools). Among the nine states of the Northeast, only in two (Maranhão and Paraíba) does the share of schools with collegiate management approach 80 percent.

The creation of state councils for the rights of children and adolescents is nearly complete. Only one state has not yet instituted such a council. Between the promulgation of the Child and Adolescent Statute in July 1990 and the first 100-day evaluation meeting in October 1993, 1,300 municipal councils for the rights of children and adolescents were established. This number had risen to 1,500 at the time of the 200-day evaluation meeting (March 1994) and 2,222 at the time of the final evaluation meeting (December 1994). Even though they represent less than one-half of all Brazilian municipalities, these municipalities account for more than two-thirds of the Brazilian population. Progress has been less significant with regard to the number of councils of guardians created: only 15 percent of all municipalities have established even one such council.


VII. CONCLUSIONS AND PROSPECTS

The restoration of democracy in Brazil and the promulgation of the new Federal Constitution on 5 October 1988, as well as subsequent legislation, have had a major impact in two ways on the treatment of the problems which most directly affect children and adolescents. First, for the first time a Brazilian constitutional text has recognized that children and adolescents possess specific rights. Second, the decentralization promoted by the Constitution has laid the foundations for a shift in social policymaking from the State to civil society and from the central Government to government units at the subnational level.

On the other hand, although they have not removed the issues affecting children from the national political agenda, the long tradition of centralized power in the country, the current fiscal crisis and the implementation of economic adjustment policies have impeded
the smooth development of social policies in general, as well as of those focused specifically on children and adolescents.

The long tradition of centralized power is still deeply entrenched in many areas of the Government bureaucracy. This leads to resistance, usually of a subtle nature, to measures designed to shift the focus of authority from the centre to the "periphery".

The fiscal crisis, the subsequent recession and the economic adjustment policies so characteristic of anti-inflation "therapy" have not spared social policies. As a result, inequalities in income distribution have been aggravated, and conditions favouring improvements in the survival, development and well-being of the children of the poor have become more difficult to establish. The capacity of the public sector to implement countermeasures has been weakened by successive cuts in social spending.

The delicate political situation which the country underwent between 1991 and 1992 and which led to the impeachment of the president of the Republic also had a negative impact on development in the social sector not so much because of the episode in itself, but rather because of the consequences in terms of the change in government and the inevitable period of inertia and adjustment under a new administration.

The lack of a definitive National Programme of Action, on the other hand, has had little effect on Government policies for children and the process of the decentralization of policymaking in this area. The outcome of the efforts at mobilization carried out by the Pact for Children, together with state governors and the ministers of State responsible for sectors closely linked with the welfare of children, has been substantial enough to compensate for the lack of an NPA. These efforts led to two summit meetings among governors that produced state plans of action and the 29 "commitments" for the 500 Days of Action for Children to be implemented before the end of the terms of office of the governors.

Thus, the intense social mobilization in favour of the rights of children and adolescents (the Pact for Children being but one element in this process) has imparted a unique profile to the process of the decentralization of policymaking in the area of the development and protection of children and adolescents. Among the main aspects of the formulation and evaluation of policies for children and youth that distinguish them from generally accepted practices in Brazil the following stand out.

- The decentralization of policymaking for children has been the result of a growing movement among leading individuals in civil society who have subsequently been joined by state and Federal officials. Usually, the formulation of public policy has not involved the
participation of civil society, but has flowed out from the Federal Government to lower levels of government and, more rarely, directly from the states to the municipalities.

- The development of state plans of action for children and adolescents has gone forward on a "voluntary" basis, that is, independent of any guarantees by the Federal Government for additional funding to assist in achieving the proposed goals.

- This movement for the benefit of children has been singular because of its emphasis on the creation of a monitoring system and because the relevant indicators have been chosen by consensus in a process which has included the participation of the states through meetings during the periods of evaluation. In most other cases, evaluation, when it has been carried out, has been neither consistent, nor particularly objective, owing to the complete absence of preselected indicators.

- Moreover, this decentralization of public policymaking has been "democratic", in that the formulation and evaluation process has involved increasingly larger segments of civil society through the active participation of the councils for rights, councils of health, nongovernmental organizations, and, through the assistance of the media, the general public.

In this way Brazil has been accumulating a more positive record in the development and protection of children and adolescents. The eradication of poliomyelitis, the significant reduction in the incidence of measles and neonatal tetanus, the progress achieved in the establishment of collegiate management in public schools, and the institution of councils for rights in 26 States and more than 2,200 municipalities are examples of the advances accomplished despite adversity. Doubtless, much remains to be done, but the results so far are very promising.

In Brazil, with its federative form of government, its vast physical dimensions and its enormous regional disparities, the functions of the Federal Union in the protection of children and adolescents should include:

- The formulation of national policies and basic legislation.
- Technical assistance for the states and, exceptionally, for municipalities in cases in which a state lacks the relevant capacity.
- When appropriate, financial support at the subnational level through the application of "reverse discrimination" in favour of poor municipalities and states.

In any national plans, efforts to address issues relating to children and adolescents should be carried out on the basis of a consensus between the Federal Union and the states, as has been the case with the 500 Days of Action for Children. This should involve:
- The identification of problems which are common to all sections of the country, as well as those problems which, though local in nature, exhibit the potential to spread.
- The establishment of precise objectives, clear priorities and efficient methods of evaluation and intervention.
- The determination of the actions appropriate to the Federal Government.
- The explicit definition of the resources to be applied by the Federal Union either directly to finance initiatives for which it is responsible, or indirectly by means of the transfer of counterpart funds to finance municipal and state initiatives. Such transfers must be implemented according to equitable criteria.

Policies for children will not be carried out more effectively simply because they are based on specific formal programmes (whether an NPA, or an SPA). Though such programmes can play an important role in the mobilization of society and as guidelines for action, they will only bear fruit, if the policies they embody are truly accepted as priorities. It is thus necessary, though not in itself sufficient, that these policies be included in the formal planning of the Government.

In Brazil a Pluriannual Plan is drawn up during the first year of each new Government administration. It has an horizon of five years and therefore extends into the first year of the subsequent administration. Thus, the period during which the next Pluriannual Plan is being drafted represents an ideal opportunity not only to adjust the NPA according to the above principles, but also to incorporate the NPA into the Pluriannual Plan.

Continuity, enhancement and expansion in the process of the decentralization of policymaking for the protection of children and adolescents will depend on four factors.
1. The strengthening of the process of mobilization by means of the adhesion of:
   - New segments of society, including business groups, professional associations, municipal and state secretaries of health, education and social assistance, the state offices of attorney general, state agencies responsible for justice and public security, and entities linked to the public sector at the municipal level (associations of mayors, council members and so on) individually and by means of their respective state and national forums.
   - Leaders of political parties and candidates for elected office, with a view to inserting issues relating to children onto the agendas of political parties in the most appropriate manner possible.
2. The gradual extension of the process of decentralization to the municipal level. The decentralization process must not be limited to the SPAs. It must be expanded to include
municipalities. This will require firm political commitment at both the state and the national levels, but it will also depend on greater awareness among the municipalities of the magnitude of their new responsibilities. It is virtually impossible for the Federal Government to maintain a direct relationship with all of the nearly 5,000 municipalities in Brazil. The states must therefore become more involved in the definition of strategies which are consistent with the policy of "municipalization" and which demonstrate a sensitivity to specific local realities.

3. The definition of strategies directly with municipalities, especially larger municipalities, metropolitan areas and regional centres; a mere 198 Brazilian municipalities account for one-half of the population of the country. These strategies should concentrate on:
   - Stimulating the formation of associations of regional centres.
   - The training of municipal managers and members of the local "collegiates".

4. The strengthening and expansion of the monitoring system by means of greater public awareness of the function and nature of the indicators. "Social control" over public policies will only be effective if citizens, individually and jointly, can follow critically the policy evaluation process.

The participation of the Pact would assist in guaranteeing the continuity of the NPA and the SPAs. The support of this movement is of particular importance in assuring that the new president of the Republic and the 27 governors who will take office on 1 January 1995 remain committed to the identification and implementation of adequate policies for children. The preparations for the Third Governors Summit can play a fundamental role in the mobilization of active new "agents" and in securing the same sort of cooperation which characterized the 500 Days of Action for Children.

The prospects seem favourable. As was stated by the executive group of the Pact for Children at the presentation of the Final Report on the 500 Days of Action for Children:

"Brazil finds itself, with the preconditions for economic stability created by the Government of President Itamar Franco, on the road to sustained development. In this new context, it is not too much to expect that public policies in general and those for the promotion and protection of children in particular achieve greater scope and magnitude" (Pacto pela Infância 1994a).
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